Appendix 4: Index Procedures

Otolaryngology requires technical skills to be achieved across a wide range of operative procedures as described in the syllabus. Assessment of a trainee's ability to carry out this full range of procedures is covered by the supervision level decisions made when assessing the shared CiPs. These assess not only the necessary technical skills but the totality of capabilities required to carry them out.

The index procedures are of significant importance for patient safety and to demonstrate a safe breadth of practice. They will be assessed individually by means of the Procedure Based Assessment (PBA) which will both provide formative feedback to the trainee and feed into the summative assessments of the AES report and ARCP. There should be evidence that an indicative one or more operation in each group has been assessed and at level 4a/b of the PBA (simulated operations are not accepted for this level 4 evidence requirement):

- Level 4a: Procedure performed fluently without guidance or intervention
- Level 4b: As 4a and was able to anticipate, avoid and/or deal with common problems/complications.
 (see the PBA form for the full list of levels)

Trainees should have undertaken an indicative 2000 operations during training (as principal or main assisting surgeon) to include:

1) Mastoid Operations	10 as main surgeon
2) Major neck operations	10 as main surgeon
3) Tracheostomies	10 as main surgeon
4) Paediatric Endoscopies (inc. flexible)	10 as main surgeon
5) Septorhinoplasties	10 as main surgeon
6) Functional Endoscopic Sinus Surgery	10 as only scrubbed surgeon

7) Removal of foreign bodies from airway

(including nasal foreign bodies and fish bones) 10 as main surgeon