

Appendix 4: Index procedures

The curriculum 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 and specialty-specific CiPs. These assess not only the necessary technical skills, but the totality of capabilities required to carry them out.

Plastic Surgery also has a list of index procedures, which are felt to be of significant importance for patient safety and to demonstrate a safe breadth of practice. These index procedures will be assessed individually by means of the Procedure Based Assessment (PBA). By the end of phase 3, there should be evidence that an indicative number of three or more operations in each procedure group has been assessed and recorded at the level of a day-one consultant (level 4 PBA). The PBA will both provide formative feedback to the trainee and feed into the summative assessment of the AES (the AES report for the ARCP).

Elective procedures:

- a. Dupuytren's contracture surgery
- b. Lymph node basin dissection
- c. Cleft surgery
- d. Free tissue transfer
- e. Aesthetic surgery
- f. Breast reconstruction
- g. Excision skin lesion and flap/graft reconstruction

Emergency procedures:

- Zone 1-2 flexor tendon repair
- Hand fracture fixation
- Nerve repair (except brachial plexus)
- Burns resuscitation
- Burns - excisional or emergency operations
- Microvascular anastomoses
- Lower limb trauma procedures

PBA Level 4:

a: Procedure performed fluently without guidance or intervention

b: As 4a and was able to anticipate, avoid and/or deal with common problems/complications