Week 1 and 2

Surgeries seen:

- Robotic assisted prostatectomy with bladder neck reconstruction
- non-laparoscopic gynae procedures by Mr Abdul and Mr Jayprakassan
- diagnostic laparoscopy with removal of a calcified fibroid
- total laparoscopic hysterectomies (TLHs)
- laparoscopic pan-colectomy
- laparoscopic cholecystectomies
- laparoscopic cystectomies
- sleeve gastrectomies and hernia repairs

Experiences:

- Participated in a total laparoscopic hysterectomy (TLH) course for consultants and specialist registrars
- Participated in a course meal with delegates from the TLH course (It was delicious!)
- Assisted in a total laparoscopic hysterectomy with delegates from around UK
- Given training in laparoscopic suturing and opportunity to practice
- Given training in suturing and tying proper surgical knots
- Given opportunity to use various surgical instruments such as harmonic scalpel, morcellators, trocars and entry ports on simulators
- Practised simple exercises on laparoscopic simulators including building sugar cube towers, cutting shapes from gloves and tying knots
- 2 oncology MDT meetings
- Shadowed Mr Abdul in clinic, many patients being discussed in the MDT meeting the previous day
- Assisted in a laparoscopic cystectomy
- Given basic training in the OR-1 system advanced system of surgical theatres
- Encountered Da Vinci robot for the first time and observed the surgery through the console
- Observed docking and undocking of the Da Vinci robot
- Practised Scrubbing

Discussions:

- Advantages of Da Vinci robot in prostatectomies compared to open radical prostatectomy
- Features of Da Vinci robot
- Entry techniques and features of some entry equipment
- The OR-1 system
- Organising courses for healthcare professionals
- Various discussions with anaesthetics about equipment, physiology and their role in theatre
- Challenges and implications of GI surgery

WEEK 3 and 4

Surgeries seen:

- Total laparoscopic hysterectomies with bilateral salphingo-oophorectomy (TLH BSO)
- TLH BSO in 3D
- Laparoscopic inguinal hernia repair and laparoscopic insertion of peritoneal dialysis catheter
- Laparoscopic adrenalectomy
- Laparoscopic nephrectomy
- Robotic assisted radical prostatectomy
- Total abdominal hysterectomy
- Non-laparoscopic gynae procedures by Mr Abdul
- Laparoscopic retroperitoneal para-aortic nodes dissection
- Trans-urethral removal of bladder tumour
- Cystoscopy
- Surgery for necrotising fasciitis of the scrotum
- Robotic assisted resection of oropharyngeal tumour
- Robotic assisted resection of oropharyngeal tumour with tonsillectomy
- Laparoscopic single port reversal of Hartmann's procedure
- Robotic assisted anterior ultra-low resection of rectal cancer

Experiences:

- Assisted in total abdominal hysterectomy
- Assisted in a challenging bariatric TLH BSO
- 3D camera use in laparoscopic surgery
- Use of Da Vinci robot in a non-laparoscopic procedure
- Produced a PowerPoint on advanced energy devices
- Saw patients post-operatively
- Practised Scrubbing

Discussions:

- Caesarean scar ectopic pregnancies
- In Vitro fertilisation
- Challenges of interfering with hormonal system through surgery e.g. in adrenalectomy and its implications for anaesthetics and success of surgery
- A career of an Obs&Gynae doctor
- Advantages of being able to do 2 surgeries in one go

Reflection:

I feel that my 4-week SSM attachment in Derby was very productive. I was given a chance to see great variety of laparoscopic and robotic surgeries, giving me a flavour of what they are like in different specialities. This also meant that I got to speak to many members of staff both in gynaecological and general theatres ranging from junior doctors to consultants and discuss many interesting topics.

This SSM gave me an opportunity to participate in courses that are usually available only to qualified doctors. Such early exposure will be beneficial for my development and is a great addition to my CV!

Not to mention that the course meal was delicious and on its own it would be a good reason to choose this SSM.

Yet another set of skills I acquired during the last 4 weeks were some basic surgical skills such as suturing and tying proper surgical knots. As well as that, I received full teaching on how to suture laparoscopically and had unlimited time to practice using laparoscopic surgery simulators.

Overall, my experience of the module was extremely positive, and I wholeheartedly recommend it to other students.