Reply

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CITATION

Maguire, Seán; Traynor, Oscar; Strawbridge, Judith; O'Callaghan, Adrian; Kavanagh, Dara (2021): Reply. Royal College of Surgeons in Ireland. Journal contribution. https://hdl.handle.net/10779/rcsi.14406068.v1

HANDLE

10779/rcsi.14406068.v1

Title

Response to letter to the editor regarding: A systematic review of simulation in open abdominal aortic aneurysm repair

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Word counts

Main text: 239

References: 59

We welcome the commentary presented in the letter from Nayahangan et al, and agree with their views. Assessment tools, which accurately measure competency, are the "holy grails" of surgical education, and vascular tools in particular are in short supply [1].

Competency in itself is difficult to measure objectively, and thus the apprentice model of education largely remains. The opinion of senior surgeons on their trainees' technique is traditionally a reliable measure of surgical ability albeit very subjective.

The OSATS tool was developed for basic surgical skills whilst some of the steps in simulating an open AAA repair are much more complex. The flexibility in its application to virtually any surgical procedure makes it a cornerstone of our surgical education programmes as a robust assessment tool.

The strive to develop more accurate, procedure-specific scoring systems leads to a narrowing of the applicability of such a tool. Additional training may be required for prospective graders in using such a tool but broadening the available range of robust, valid assessment tools is favorable,

Previous procedure specific tools, such as the ICEPS (Imperial College Evaluation of Procedure-Specific Skill) have shown great promise and are well validated, but often fail to capture the imagination of surgical educators beyond the institution within which the tool originated [2].

We eagerly await further published data regarding the "OPERATE" tool, and we hope that should it be successfully validated we can assess and apply within our training program.

References

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2. Pandey V, Wolfe JH, Moorthy K, Munz Y, Jackson MJ, Darzi AW (2006) Technical skills continue to improve beyond surgical training. Journal of vascular surgery 43 (3):539-545. doi:10.1016/j.jvs.2005.09.047