Surgical VOP Assessment Report

Video: 2509_subcuticular.mp4
Pattern: Subcuticular

Rubric Assessment

1. Consistent dermal bites (running path)
Bites are small, evenly spaced and the line advances smoothly with only minor variation in step length and depth. Overall progression is controlled and continuous.
Score: 3/5 - Competent

2. Opposing entry/exit symmetry
Left and right bites are generally well■matched with only occasional slight asymmetry in depth or distance from the edge. Symmetry is preserved across the majority of the closure.
Score: 3/5 - Competent

3. No unintended surface breaches
Closure remains confined to the intended plane with no deliberate externalized loops or mid■run external finishing noted on the active incision. Externalization beyond anchors is absent.
Score: 4/5 - Proficient

4. Gentle tissue handling
Tissue handling is atraumatic overall with controlled needle driving, appropriate use of forceps for tenting/everting, and measured suture tension; only infrequent moments of manual manipulation alter the otherwise gentle technique.
Score: 3/5 - Competent

5. Square, secure knots
Knots are secure and appropriately tensioned with largely square orientation; a few appear slightly prominent or with longer tails but hold the closure reliably.
Score: 3/5 - Competent

6. Flat, well-approximated skin
Final approximation is neat with slight intended eversion and no significant ridging, gapping, or step■off; contour is cosmetically acceptable and consistent along the incision.
Score: 3/5 - Competent

7. Economy of time and motion
Workflow is deliberate and efficient with coordinated bimanual technique; occasional role swaps and fingertip tying introduce minor pauses but do not disrupt overall progress.
Score: 3/5 - Competent

Average Score: 3.1/5

Summative Assessment:
The operator demonstrates a reliable, reproducible subcuticular closure with disciplined bimanual instrument use, tight triangulation, and consistent cadence. Needle control, tissue handling, and edge apposition are managed with good precision, producing a tidy column of evenly spaced sutures and secure knots. Minor improvements could focus on

standardizing bite depth/step length to eliminate the small residual asymmetries and on slightly more consistent knot profile/tail management to optimize final appearance. Overall competence is strong and appropriate for safe clinical application.