Surgical VOP Assessment Report

Video: 2509_simple_interrupted.mp4

Pattern: Simple Interrupted

Rubric Assessment

1. Perpendicular needle passes

Needle entries were predominantly perpendicular-to-oblique with short, symmetric bites producing minimal shear across the edges. Technique consistently approximated right-angle passes.

Score: 3/5 - Competent

2. Gentle tissue handling

Tissue was handled with a single toothed forceps presenting the edge for each pass without repeated, unnecessary grasps or evident crushing. Handling was controlled and precise.

Score: 3/5 - Competent

3. Square, secure knots

Knots were formed by instrument ties, appeared seated and secure with short tails; throws looked consistent and flat when visible. Knot security is satisfactory on visual assessment.

Score: 3/5 - Competent

4. Appropriate approximation/tension

Edge approximation and tension were appropriate: epidermal margins met with slight eversion and no obvious gapping or tissue blanching. Tensioning produced uniform coaptation.

Score: 3/5 - Competent

5. Even spacing (0.5-1.0 cm)

Spacing was uniform and within the 0.5–1.0 cm range (estimated ~5–8 mm), yielding an even distribution along the wound.

Score: 4/5 - Proficient

6. Proper dermal and epidermal apposition

Dermal and epidermal apposition was well achieved with mild eversion where needed and proper alignment of layers across the repair.

Score: 4/5 - Proficient

7. Economy of time and motion

Hands and instruments remained in a tight working envelope close to the wound with minimal extraneous movement after initial setup, though the video began with some idle time. Overall motion economy was good.

Score: 3/5 - Competent

Average Score: 3.3/5

Summative Assessment:

The trainee executed a methodical, reproducible simple interrupted closure with coordinated two handed technique. Needle control, forceps presentation, and instrument ties produced a straight column of evenly spaced, well approximated superficial sutures; knot security and tail management were consistently addressed. Hand positions were

compact and movements deliberate, demonstrating good economy after the brief initial idle period. Overall competence is solid: the operator displayed reliable motion economy, precise tissue handling, and appropriate tensioning to produce a tidy superficial closure. Attention to maintaining visibility during the early idle/obscured moments would be the only notable area for improvement, but the finished repair meets expected standards for simple interrupted skin closure.