Surgical VOP Assessment Report

Video: 2515_vertical_mattress.mp4
Pattern: Vertical Mattress

Rubric Assessment

1. Correct deep (far-far) and superficial (near-near) passes
Deep (far-far) and superficial (near-near) passes are executed in a consistent, perpendicular-to-edge manner with predictable bite arcs and stable needle control; overall layer support and epidermal approximation are competent.
Score: 2/5 - Novice

2. Gentle tissue handling
Tissue handling is gentle and precise with a single, controlled Adson-style grasp used to evert and present the margin before each pass, avoiding crushing or multiple unnecessary grasps.
Score: 4/5 - Proficient

3. Square, secure knots
Knots are consistently constructed with secure, compact throws and appropriately shortened tails; tension at the knot appears maintained without slippage.
Score: 3/5 - Competent

4. Balanced tension deep vs superficial
Tension balance is well moderated—deep support appears to underlay the closure while superficial components approximate the epidermis without excessive flattening or tissue strangulation.
Score: 3/5 - Competent

5. Even spacing (0.5-1.0 cm)
Stitch spacing is uniform and within the 0.5–1.0 cm range, producing an orderly, evenly distributed row of sutures along the incision.
Score: 4/5 - Proficient

6. Proper eversion
Eversion is consistently achieved beneath each knot producing a slight raised ridge without inversion of the epidermal edges, yielding good edge apposition.
Score: 3/5 - Competent

7. Economy of time and motion
Movements are compact and efficient with hands maintained close to the worksite and a steady sequential workflow, though brief pauses between passes are occasionally evident.
Score: 3/5 - Competent

Average Score: 3.1/5

Summative Assessment:
The closure demonstrates overall competent vertical mattress execution with reliable pass symmetry, precise instrument control, and uniform spacing. Tissue handling is atraumatic, eversion is consistently obtained, and knot security is good, yielding sound epidermal approximation without evidence of strangulation. Efficiency and motion economy are

strong—hand positions remain compact and coordinated throughout—supporting a controlled balance between deep support and superficial closure. Minor pauses in workflow do not appreciably affect technical quality; the repair is orderly and functionally effective.