

Surgical VOP Assessment Report

Video: 2506_simple_interrupted.mp4

Pattern: Simple Interrupted

Rubric Assessment

1. Perpendicular needle passes

Needle passes were consistently delivered at near-right angles with symmetric, shallow bites on both sides producing minimal shear. Technique shows reliable perpendicular entry/exit throughout the line.

Score: 3/5 - Competent

2. Gentle tissue handling

Tissue handling was deliberate and atraumatic overall, with the forceps used for single precise grasps to evert and stabilize edges; occasional re-grasps of the needle but no obvious crushing.

Score: 3/5 - Competent

3. Square, secure knots

Knots were instrument-tied and appear secure with external loops managed and tails trimmed; knot morphology looks flat and adequately tightened for skin closure.

Score: 3/5 - Competent

4. Appropriate approximation/tension

Approximation achieved consistent edge apposition with slight eversion and no visible gapping or focal blanching; tensioning was controlled without excessive puckering.

Score: 3/5 - Competent

5. Even spacing (0.5-1.0 cm)

Sutures are evenly and closely spaced along the entire incision, with intervals appearing within the 0.5–1.0 cm range and uniform distribution.

Score: 3/5 - Competent

6. Proper dermal and epidermal apposition

Dermal and epidermal layers are well aligned with appropriate mild eversion and consistent contact of epidermal edges across the closure.

Score: 4/5 - Proficient

7. Economy of time and motion

Hands and instruments remained tightly confined to the working zone with coordinated two-handed choreography and minimal extraneous movement, demonstrating efficient time and motion.

Score: 4/5 - Proficient

Average Score: 3.3/5

Summative Assessment:

The operator demonstrated a methodical, competent execution of simple interrupted skin closure with excellent two-handed coordination. Needle control and instrument choreography were consistent—driver delivering precise arcs while forceps provided

accurate edge control and eversion—resulting in uniform, slightly everted approximation and secure instrument-tied knots across the entire incision. Overall performance shows reliable technique and efficient flow with minimal wasted motion. For refinement aim for uniformly fewer needle re-grasps and maintain vigilance to avoid any tendency toward superficial bunching as tail management and spacing are tightened further; otherwise this is a competent interrupted closure suitable for skin approximation.