

SURGICAL VERIFICATION OF PROFICIENCY

Suturing Technique Assessment Report

Suture Pattern: Simple Interrupted

Assessment Date: August 27, 2025

Assessment Result

PASS - Average Score: 3.7/5.0

Assessment Results

1. Perpendicular needle passes

Score: 3/5 (Developing Pass / Generally Reliable)

Passes were generally close to 90 degrees with symmetric bites across most stitches; a few passes showed minor ambiguity in angle and symmetry without evident shear or compromise of closure.

2. Gentle tissue handling

Score: 4/5 (Proficient)

Consistently single, precise forceps grasps per edge with no crushing or repetitive manipulation; tissue handling remained controlled throughout.

3. Square, secure knots

Score: 3/5 (Developing Pass / Generally Reliable)

When visible, knots lay flat and square with appropriate tension; however, several knots were not fully visualized end-to-end, limiting comprehensive confirmation of uniform security.

4. Appropriate approximation/tension

Score: 4/5 (Proficient)

Edges repeatedly met without blanching, gapping, or puckering; tension control was consistent across the line with reliable edge apposition.

5. Even spacing (0.5-1.0 cm)

Score: 4/5 (Proficient)

Inter-stitch intervals were uniformly maintained within the ideal range across the entire closure, reflecting deliberate planning and execution.

6. Edge eversion (flat/slight acceptable)

Score: 4/5 (Proficient)

Wound edges were predominantly flat to slightly everted with no inversion observed; eversion was consistent enough to support favorable healing.

7. Economy of time and motion

Score: 4/5 (Proficient)

Hands and instruments remained near the field with minimal departures; needle reloads and knot sequences were efficient and repeatable without unnecessary movements.

Final Assessment

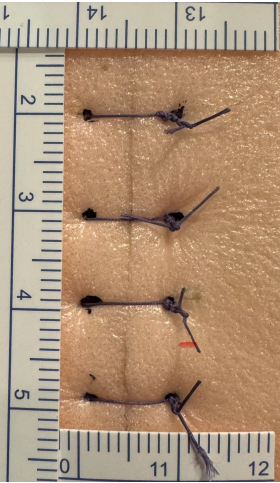

Final Score: 4 - Proficient

Summative Comment:

Passes were generally close to 90 degrees with symmetric bites across most stitches; a few passes showed minor ambiguity in angle and symmetry without evident shear or compromise of closure. Consistently single, precise forceps grasps per edge with no crushing or repetitive manipulation; tissue handling remained controlled throughout. When visible, knots lay flat and square with appropriate tension; however, several knots were not fully visualized end-to-end, limiting comprehensive confirmation of uniform security. Edges repeatedly met without blanching, gapping, or puckering; tension control was consistent across the line with reliable edge apposition. Inter-stitch intervals were uniformly maintained within the ideal range across the entire closure, reflecting deliberate planning and execution. Wound edges were predominantly flat to slightly everted with no inversion observed; eversion was consistent enough to support favorable healing. Hands and instruments remained near the field with minimal departures; needle reloads and knot sequences were efficient and repeatable without unnecessary movements. Across a complete series of simple interrupted sutures, the operator demonstrated a stable, efficient pattern: deliberate bites, consistent spacing, and controlled tension yielded a tidy, reliable closure. Instrument handling was mature, with minimal wasted motion and smooth transitions between passes, reloads, and knot sequences. The closure quality benefited from steady approximation and acceptable eversion, though needle angle and bite symmetry were not uniformly exemplary and knot security could not be fully verified on every throw. Overall, this reflects a generally proficient technique that reliably achieves functional closure, with next-step refinement focused on impeccable right-angle entry/exit on every pass and consistently demonstrable knot security across all stitches.

Visual Comparison

Side-by-Side Comparison: Gold Standard vs. Learner Performance

Gold Standard	Learner Performance
	

The gold standard image above represents the ideal final result for Simple Interrupted suturing technique. Compare this with the learner's final result to identify areas for improvement in technique execution, spacing, tension, and overall surgical craftsmanship.