SURGICAL VERIFICATION OF PROFICIENCY

Suturing Technique Assessment Report

Suture Pattern: Subcuticular

Assessment Date: September 02, 2025

Assessment Result

PASS - Average Score: 3.1/5.0

Assessment Results

1. Consistent dermal bites (running path)

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

Bites were uniformly sized and evenly spaced along a continuous subdermal track, with only minor adjustments that did not disrupt progression.

2. Opposing entry/exit symmetry

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

Each entry reliably mirrored the prior exit across the length of the closure, maintaining a straight, symmetric path without noticeable drift.

3. No unintended surface breaches

Score: 4/5 (Proficient)

All passes remained within the dermis; there were no visible epidermal punctures or stray exits throughout the run.

4. Gentle tissue handling

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

Tissue was handled with a single light grasp per bite and minimal manipulation, avoiding crush or repeated gripping while maintaining control.

5. Square, secure knots

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

Knot tying was largely not visualized; a brief view suggested a secure lay, but there was insufficient visualization to confirm finish quality across the case.

6. Flat, well-approximated skin

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

Closure consistently lay flat with good edge apposition and no ridging or gapping, indicating appropriate tension control along the line.

7. Economy of time and motion

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

Hands and instruments stayed close to the field with a smooth, efficient cadence; a small number of brief departures and minor adjustments were noted but did not disrupt flow.

Final Assessment

Final Score: 3 - Developing Pass / Generally Reliable

Summative Comment:

Bites were uniformly sized and evenly spaced along a continuous subdermal track, with only minor adjustments that did not disrupt progression. Each entry reliably mirrored the prior exit across the length of the closure, maintaining a straight, symmetric path without noticeable drift. All passes remained within the dermis; there were no visible epidermal punctures or stray exits throughout the run.

Tissue was handled with a single light grasp per bite and minimal manipulation, avoiding crush or repeated gripping while maintaining control. Knot tying was largely not visualized; a brief view suggested a secure lay, but there was insufficient visualization to confirm finish quality across the case. Closure consistently lay flat with good edge apposition and no ridging or gapping, indicating appropriate tension control along the line.

Hands and instruments stayed close to the field with a smooth, efficient cadence; a small number of brief departures and minor adjustments were noted but did not disrupt flow. This was a competent, controlled subcuticular closure characterized by consistent bite spacing, mirrored entries and exits, and a reliably intradermal path. The skin edges remained well-approximated and flat, reflecting sound tension management and thoughtful sequencing of bites.

Tissue handling was gentle and economical overall, with only minor inefficiencies and brief hand departures that did not materially affect the closure. Knot quality could not be fully assessed due to limited visualization, leaving some uncertainty about start and finish security despite a momentary glimpse of a stable lay.

Overall, the performance reflects a deliberate and reliable technique suitable for independent execution, with strengths in consistency and dermal plane fidelity. Further refinement in visible knot execution and continued reduction of minor adjustments would elevate the work toward a genuinely exemplary, teachable standard.

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 Subcuticular suturing technique. Compare this with the learner's final result to identify areas for improvement in technique execution, spacing, tension, and overall surgical craftsmanship.

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