



**The British Journal of
Surgery Society**



**The Association of Surgeons
of Great Britain and Ireland**

**User Manual
for use with the
Computerised logbook for
Higher Surgical Trainees
in General Surgery**

NATIONAL PILOT VERSION (December 1998)

published in conjunction with the

SAC in General Surgery

October 1998

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Chapter 1 – Introduction and Definitions

Introduction

1.1 Many trainees will already use a computerised log to record and retrieve details of the operations that they have carried out. However, the main purpose of this program is to enable you to submit a standard data set of your operative and training experience to the Specialist Advisory Committee in General Surgery (SAC).

This will be required by the SAC in a computerised form and although it is not essential that you use this program, it has been designed to meet the needs of all Higher Surgical trainees in General Surgery, some of whom may not be fully conversant with computers and may not have access to the latest equipment.

1.2 The importance of a standard data set

A limited number of index operations have been selected by each subspecialty and the level of operative supervision has been decided by the Joint Committee on Higher Surgical Training (The parent body of the SAC). These may change with experience but it is essential that all trainees record their training experience in the same format and use the same definitions. Only in this way can comparative analysis of trainees, trainers and training programs be valid.

1.3 The data set

The dataset outlined in Appendix 2 and used within this software has been based on the Curriculum for Higher Surgical Training published by the SAC in General Surgery in January 1998. Procedures have been broken down into subspecialty interests, and for each Subspecialty a number of Index Procedures will be found in Appendix 2. Additional procedures may be added to this list and these will be analysed and potentially included in subsequent updates (they may not, however, be deleted).

Those trainees wishing to use the dataset within their own software may find a copy in file Dataset.xls on the Psion installation disk. The approved format for submission of the standard data set to the SAC via your Higher Surgical Training Committee (HSTC) or Board is outlined in section 4.2.

In addition to a complete record of operative procedures, the SAC also wishes to collect information on the number of minor procedures performed such as sigmoidoscopy, diagnostic endoscopy etc. where only the date, the number performed and the level of supervision is required. The procedure list is outlined in Appendix 2.

The educational and academic aspects of your training post will also be recorded and the format is also outlined in Appendix 2.

1.4 The importance of uniform data entry.

To allow central collection and analysis of data, it is particularly important to ensure that any name entered into the program conforms to that agreed with your HSTC. An approved list of names for your Region is outlined in Appendix 3.

The maximum number of characters allowed for both Hospital name and Consultant name is 23 including spaces. For capitalisation to work on Consultants' names, please write in the following format: Jones J A (a space after the surname and between the initials).

Consultant names should be entered in the following format:

No title - Surname - Initial(s) e.g. Carter R or Imrie C W

Hospital names e.g. Dumfries & Galloway R I

TRAINEES SHOULD PAY PARTICULAR ATTENTION TO THIS WHEN INITIALISING THE PROGRAM TO AVOID LOSS OF ANALYSABLE DATA.

1.5 Definitions and categories

Date format.

All dates used, either for procedure date or date of birth, should be in the format: (dates should be separated by a forward slash)

01/01/1998

I.D. Number

May be in any format

Start time

The time a procedure started should include the anaesthetic time using the 24 hour clock. (hours and minutes should be separated by a colon)

e.g. 21:00

Duration

The duration of a procedure including anaesthetic time up to a maximum of 12:00 hours. (hours and minutes should be separated by a colon)

e.g. 01:15

CEPOD grading

Simplified to identify cases which may need to be performed outside the working day

scheduled	-	Planned procedure
urgent	-	must be done within 24 hours
emergency	-	immediately life/limb threatening - must be done as soon as possible

ASA grading:

The American Society of Anesthesiology system for grade of risk

1. Fit and well
2. Mild systemic disease
3. Severe systemic disturbance
4. Life threatening disease
5. Not expected to survive 24 hours

Subspecialty:

Subdivisions of general surgery to allow assessment of subspecialty interest.

Breast
Coloproctology
Emergency (General) surgery
Endocrine
Endoscopic (Laparoscopic) surgery
Paediatric
Transplant
UpperGI / HpB
Vascular

Level of procedure:

The level of the procedure will be generated automatically and relates to the level of sub-specialisation rather than the difficulty or complexity of the procedure.

Nearly all emergency surgery, no matter how major, is therefore level 1 since these are procedures which a general surgeon on emergency take would be expected to be able to deal with.

- Level 1: General Surgical Procedure
Level 2: General Surgeon with a subspecialty interest procedure
Level 3: Tertiary referral procedure

Level of Supervision

- (1) Performed
The trainee *performs the procedure as the senior surgeon* present in the operating theatre.
- (2) Supervised (trainer scrubbed)
The trainee performs a significant part of the procedure under the direct supervision of a trainer *who has been scrubbed at the table*. The trainer may be either a consultant or a more senior trainee who is adequately trained to perform and teach the procedure unsupervised.

(3) Supervised (trainer unscrubbed)

The trainee performs a significant part of the procedure under the direct supervision of a trainer *who has been present in the operation theatre for a substantial part of the operation*. The trainer may be either a consultant or a more senior trainee who is adequately trained to perform and teach the procedure unsupervised.

(4) Assisting

For the majority of the procedure the trainee *assists either a consultant or a more senior trainee*.

(5) Training other trainee

The trainee *assists a more junior trainee* through a significant part of the procedure. The trainee completing the record is the most senior surgeon within the operating room.

Notes:

Free text for personal use - details of complications, interesting findings etc.

1.7 Copyright

This manual and all accompanying software and documentation are copyrighted and all rights reserved.

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Manual version 1.0

1.8 Acknowledgements

The development of the computerised logbook has been as a result of collaboration between the Specialist Advisory Committee in General Surgery, the Association of Surgeons in Training (ASIT), and the Logbook Development Team under the guidance of Mr. Ross Carter. The development of the program has been principally funded by the British Journal of Surgery Society. The Association of Surgeons of Great Britain and Ireland & The Royal College of Surgeons in Ireland have also supported the current version of the software.

1.9 Liability

No warranty, either expressed or implied is made with respect to this documentation, its quality or its performance. By using the software and associated documentation, you are assuming the entire risk as to its quality or performance. The Development team reserves the right to revise the software and user manual and to make changes in the content without obligation to notify any person or organisation of the revision.

In no event will the Development team be liable for direct, indirect, incidental or consequential damage arising from the use of the software, particularly relating to damage to any hardware, software or data stored, or costs relating to repair, replacing or recovering such hardware, software or data.

Chapter 2 PC based data collection

2.1 System requirements

You need a Windows® based PC running Windows 3.1, 95, 98 or NT 4. At least 8Mb of RAM are recommended. The program will function on a 640 by 480 pixel screen setting. The program requires less than 1Mb of disk space.

2.2.1.1 2.2 Deciding whether to use a floppy or hard disk system

Before using the program you must decide if you are going to use a single PC to enter your data and store the program on the PC's hard disk or use multiple PCs and run the program from the floppy disk. You cannot aggregate data from different sources.

2.2.1 Running the Program from Floppy Disk

If you work in different buildings and have easy access to different PCs consider using the program from floppy disk. This will make your data easy to access and transport. The main disadvantage is the speed of loading and the requirement to swap floppy disks for some procedures. Floppy disks are fragile; you will need to make regular backups. Floppy disks are easy to misplace.

You can run the program from the floppy disk you have received.

To run the program from the Floppy disk – Windows 3:

Load Windows. Load Program Manager, click on the File menu and select Run. Type in a:\log.exe and click on OK.

To run the program from the Floppy disk – Windows 95, 98 and NT4:

Click the Start button and select Run. Type in a:\log.exe and click on OK.

2.2.2 Running the Program from Hard Disk

If you only use a single PC, install the program on this computer's hard disk. If the program is installed on a computer's hard disk, then more than one user can use that computer to store their data.

To copy the program to the hard disk, follow the instructions below:

Windows 3

Start Windows.

When Program Manager is loaded click on the File menu and select Run. Type in a:\copy2c.exe and click the OK button.

Windows 95, 98 and NT 4

Click the Start button and select Run. Type in a:\copy2c.exe and click the OK button.

You can now run the program from the hard disk. You can use the Run command as in the previous paragraph but you must specify the program name as `c:\delfilog\log.exe` or you can create Icons to click on.

2.2.3 Running the Program over a Network

If you are connected to a local area network you can install the program on your network storage area. Copy all the files on the floppy disk into your network storage area. This will make the program access from any PC on the network that you have access to. Consult your local network support staff if you are unsure.

2.2.4 Creating Icons to Run the Program

Windows 3

From Program Manager, click on File, then New and in the dialog box select Program Group. Give the group an appropriate title eg Surgeon's Log and click OK. Click on File, and New again and in the dialog box select Program Item. In the next dialog box, in the description box, type an appropriate name, eg Surgeon's Log. In the Command Line box appears type in `a:\log.exe` (if running the program from floppy disk) or `c:\delfilog\log.exe` (if running the program from hard disk). Click on OK and the icon will appear in the group window.

Windows 95, 98 and NT 4

(Note NT users may not be able to install icons on their PC. If NT objects to the these procedures contact your local technical support)

To make an icon on your Desktop move the mouse pointer on to a area of your desktop with no icons. Click the right mouse button. Select New, then Shortcut. When the Create Shortcut dialog box appears, type in `a:\log.exe` (if running the program from floppy disk) or `c:\delfilog\log.exe` (if running the program from hard disk). Click the next box and type in an appropriate name, eg Surgeon's Log. Click Finish and the icon will appear on the desktop.

To add the program to your program, first complete the procedures in the paragraph above. Click the Start button, then Settings. (If Settings does not appear on your Start menu, contact your local technical support.) Select Taskbar. Click on the Start Menu Programs tab. Click the Advanced button. Click on the Programs folder. Click on File, New and Folder. Type in an

appropriate name for the folder eg Surgeon's Log. Double click on the Surgeon's Log folder to open it. Lastly hold down the Ctrl key and drag the Icon Shortcut from the Desktop into the blank Contents box. Close Explorer and the Taskbar Properties dialog box.

2.3 Using the Program for the First Time (Creating a New User)

2.3.1 To run the program, follow the relevant instructions below.

Windows 3

Click on the Icon if you have created one or from Program Manager click on the File menu and select Run. Type in a:\log.exe if running from a floppy or c:\delfilog\log.exe if running from hard disk and click the OK button.

Windows 95, 98 and NT 4

Click on the Icon if you have created one or click on the Start button and select Run. Type in a:\log.exe if running from a floppy or c:\delfilog\log.exe if running from hard disk and click the OK button.

Once the program has loaded for the first time you must click the New User button.

2.3.2 Creating a New User

The procedure to create a new user is essential; it makes an area on the disk for your data, copies various files into this area and secures your data with a Username and Password. The username and password are then used to access your data each time you use the program. When you create a new user you will be asked for your GMC Number.

- i Start the Surgeon's Log program
- ii Click the New User button at the bottom of the first screen
- iii Enter your details as shown below and click Go

Creating a new User

You must complete the following to create your data files

First Name: Faith

Surname: Jadusingh

GMC Number: GMC123456

Buttons: Cancel, Go

- iv You will see a warning message on screen about entering your Username and Password. Think carefully about these. Your username can not be changed once you have entered it. Consider your password; it should be easy to remember but secret. Click OK to acknowledge the message.
- v Enter your username and password as shown below and click Continue.

Enter User Name and Password

Enter your Password

Forgetting your Password will make your data inaccessible

User's Name: GRACE

User's Password: HOPPER

Buttons: CANCEL, CONTINUE

2.4 The Main Features of the Program

Available as buttons on the main screen:

- Record all the Operations and Procedures you take part in. Also you can record details of any courses you have attended.
- View your data in form view and see a single item completely or view all your records in a table.
- You can enter, delete and modify individual records.
- Search your data for characters, words or phrases.
- Sort your data.

A Utilities button gives access to the following routines:

- Produce the exports of data on floppy disk, required by your regional training co-ordinator.
- Backup copies of data in case you lose your main set.
- Produce printed summaries of your data for your trainer to sign.
- Produce customised printouts.

- For those who wish to analyse their data, a customisable text export is provided so that data can be easily load into a spreadsheet or database (trainees may request a copy of the Microsoft Access Database supplied to Regional Co-ordinators).
- You may change your password at any time.
- You can delete operations and procedures data up to a specific date (data purge), to keep your data manageable. Courses records have to be deleted individually.

2.5 Entering Data

If you are using the program for the first time you must follow the Creating a New User instruction in section 2.3.2.

One you have entered your username and password, the program will load your data and the operations form will become visible. If you have entered any operations the form will show the last one, otherwise it will be blank.

The main screen showing a single complete operation

You can switch between form and table view by clicking on one of the six named tabs just below the buttons.

You can only enter data in form view. The first time you use the program you will be presented with a blank form to fill in. To add further records click the Add button




Once you have clicked on Add (a record), you must complete it or delete it. You can enter the data in any order and move between fields by clicking on them or using the tab key (the one to the left of Q). If you enter something that is

unacceptable you will see an error message and the program will not let you move on until you have corrected the error.

2.5.1 Required Data

Data is required in all boxes except Date of Birth, Complications and Notes, in an Operations record, and Location, in a Courses record.

2.5.2 Making Choices

Some fields have down arrows  on the right side of the box. This indicates that there is a limited range of options that may be entered into this field. Click on the down arrow and select the option you require (or use the down and up arrows on the keyboard to make the selection).

You will not be able to select or enter the Type of Operation until you have selected the Sub-specialty.

2.5.3 Adding Choices

Four fields allow you to add choices to the list. In the Operations form you can add Hospitals, Consultants and Operations to the list. In the Procedures form you can add the name of a Procedure. Warning: You can not delete an item you have added to a list.

Items must be typed in the format specified by the Regional Co-ordinator.
(If Trainees are not consistent, the Regional data will be impossible to analyse.)
The maximum number of characters in each name is listed in Appendix 2.

To add an item to a modifiable list, type the item into the box and move to another box. You will be asked if you want to add this item to the list of choices. Check that you have typed the item in the correct format and, if so, click the yes button.

2.5.4 Adding an Operation

Please check that the operation is not listed under another Sub-specialty. Adding an operation works like the other modifiable lists except you are required to specify the Level and Sub-specialty of the Operation.

Please enter :

Level of operation
3

Subspecialty of operation
Transplant

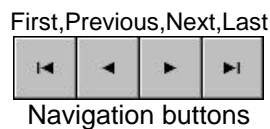
You should refer to the definition of Level on page 6. Once you have entered details of a new operation, you cannot change it.

2.5.5 Entering Dates

This program is Year 2000 compliant. Please enter the year as a four-digit number e.g. 1999. If after 1st January 2000, you get Future Date errors on dates that are not in the future, check that the system date on your computer is correct in the "About" option in Utilities. Also check that your computer is Year 2000 compliant. (dates should be separated by a forward slash)


2.6 Looking at Records


You can use the Navigation Buttons to move up and down the list of records.



You can look at records in Form View to see one complete record at a time or in Table View to see the records laid out in rows. Scroll across the screen to see different parts of the records. If a column is too wide or too narrow you can drag the line that separates the column headings to the required width.

2.7 Adding and Deleting Records

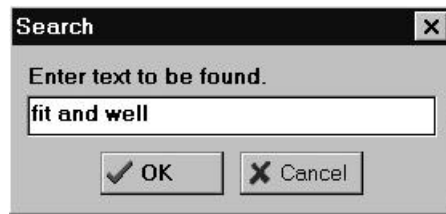
Records are added to the current data set. Therefore to add details of a procedure, you must be in the Procedures form. Click the Add button  to add a record. If necessary the program will switch to Form View as records cannot be added in Table View. Complete the record before continuing.

To delete a record first find the record either by making it the current record in Form View or by clicking on it in Table View. Click the Delete button  to delete the record. You will be asked to confirm the deletion. To delete more than one record, see Purging Records.

This program is designed to hold data on 500 operations, plus 100 procedures records and 100 courses records. (It may hold more but you do so at your own risk.)

2.8 Searching Your Data

You can search for a word or phrase. Make sure you are in the correct data set. Click on the Search button and a box will appear for you to type in the search text.

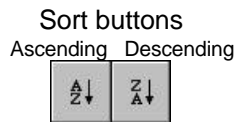


Search for the phrase "fit and well"

Search is not case sensitive and always starts from the first record in the data set. Once you have entered the search text, the Find Next button is enabled.

To find the next occurrence of the search text, use the Find Next button. This starts searching from the current record towards the last record.

2.9 Sorting Data



You can sort a data set by any field (except Date of Birth in Operations) but you must be in Table View.

	Date	Procedure	Number	Supervision
1	01/01/1991	Arterial line	1	Assisted
2	02/02/1992	Central venous catheterisation	2	Supervised, trainer scrubbed
3	04/04/1994	Cricothyroidotomy	4	Performed
4	06/06/1996	Diagnostic ERCP	6	Performed
5	08/04/1998	Diagnostic Upper GI endoscopy	8	Supervised, trainer unscrubbed but in theatre
6	08/03/1998	Flexible sigmoidoscopy	8	Supervised, trainer scrubbed
7	07/02/1998	Insertion of chest drain	7	Supervised, trainer unscrubbed but in theatre
8	07/07/1997	Peritoneal aspiration	7	Assisted
9	06/06/1997	Proctoscopy/rigid sigmoidoscopy	12	Supervised, trainer unscrubbed but in theatre
10	23/02/1998	Cricothyroidotomy	10	Supervised, trainer unscrubbed but in theatre
11	24/02/1998	Pericardiocentesis	11	Assisted
12	24/02/1998	Proctoscopy/rigid sigmoidoscopy	12	Supervised, trainer unscrubbed but in theatre
13	25/02/1998	Outpatient haemorrhoid treatment	13	Training more junior trainees

Procedures shown in Table View, notice Sort button enabled

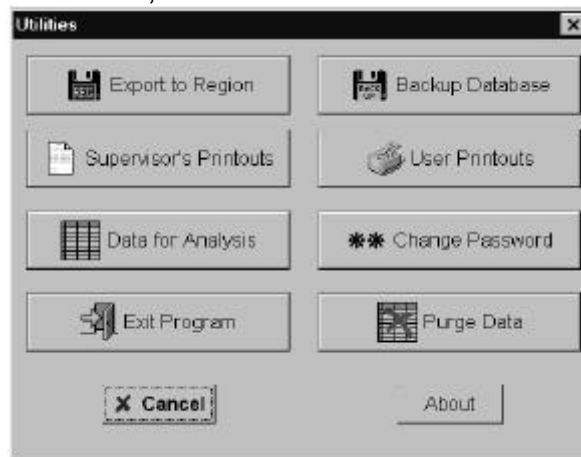
You can sort in Ascending or Descending order. Click in the column you want to sort (Procedure has been selected in the illustration above), and click either the Ascending or Descending button.
To restore the table to Record Number order, click on the Add or Save buttons.

2.10 The Utilities



Utilities button

A set of extra functions is made available by clicking on the Utilities button. This presents a choice of 10 buttons, described below. Click on the appropriate button.



The Utilities form

2.10.1 Export to Region

You are required to submit your data to the Regional Co-ordinator twice a year. Your Regional Co-ordinator will supply the exact dates. This procedure automates the process.

Your data is copied to floppy disk as plain text. Four data files are created –details are in Appendix 2. These are loaded into a regional database for analysis.

A blank, formatted floppy disk is required for this procedure. When you click on the Export to Region button, you will see the following form. You must fill in all the boxes. Please ensure the dates are correct as these define the operations, procedures and courses records sent to region.

Export for Region to Floppy Disk

Please have a blank Floppy Disk ready before producing this export
Tap the Tab key to move to next box

First Name: Janet

Surname: Novitsky

GMC Number: GMC123456

Current Hospital: Thanet General

Current Year of Training: First

Sub-specialty of Main Interest: Breast

Start Date (inclusive): 01/04/1998

Stop Date (inclusive): 30/09/1998

Buttons: Cancel, Go

A completed form ready to produce the Export to Region when the Go button is clicked

You can move from box to box with the tab key or by clicking. Once you have filled all the boxes, click the Go button. When the process is complete, send the disk to the Regional Co-ordinator as per their instructions.

2.10.2 Backing up Your Data

Making copies of your data is ESSENTIAL. It can not be stressed too strongly how important backups are. At some unpredictable time, your computer system is likely to fail. If you have not made backups, you will have to re-enter details of up to six months operations.

It is strongly recommended that you make a backup each time you change your data. To encourage you to do this the program automates this process. You will require a blank floppy disk.

Click the Utilities button, then Backup Database and Go. Insert a blank floppy disk into the drive when requested and click OK. You should label the disk with the date so that you know which is the most up-to-date backup, in case you have to restore it.

Backup Database

Please have a blank Floppy Disk ready before Backing Up
(An additional Backup will be made to c:\delfilog\js123456\eb\)

Buttons: Cancel, Go

Backup showing the additional security backup in c:\delfilog\js123456\eb\

Notice from the illustration above that an additional backup is made on to the computer's hard disk.

It is always a good idea to keep at least the last three backups.

2.10.2.1 Restoring a Backup

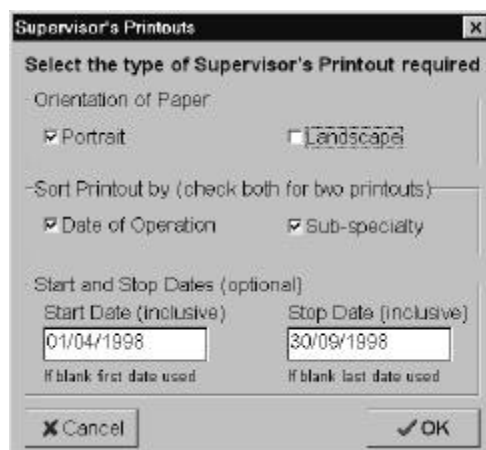
To use one of your backups, use Windows Copy facility to copy all the files on the backup disk into your data directory. The name of your data directory combines the first letter of your first name and of your surname with the last six characters of your GMC number. In the illustration above John Smith has a GMC number of ABC123456. His data is stored in the directory js123456. If you are using the program from a floppy disk, this directory can be found at a:\js123456. If you are using the program from a hard disk, the directory is located at c:\delfilog\js123456.

Do not use the DOS COPY command as it will not copy certain files.

2.10.3 Supervisor's Printouts

Two standardised printouts are available: a list of all operations in date order, and separate lists for each sub-specialty in operation order. If you have no operation records within a sub-specialty, a blank sheet is produced.

You are advised to printout your data at intervals, so that you have a written record.

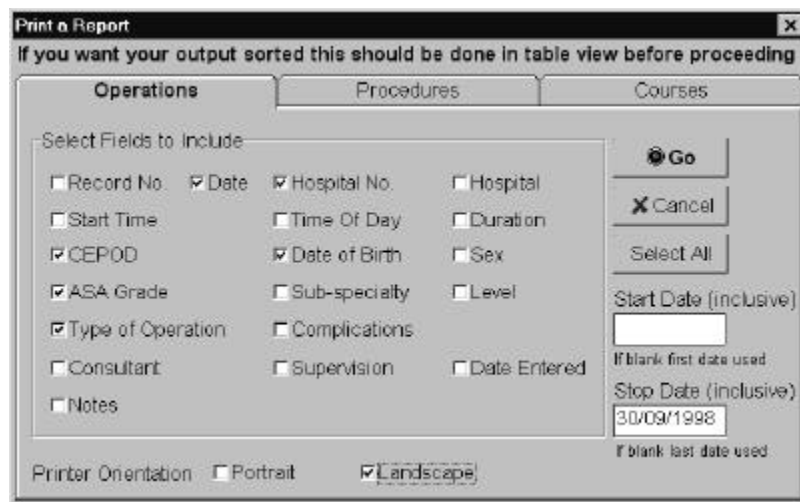


Ready to print both Supervisor's Printouts in portrait, between the dates specified

The supervisor's printout prints the operation date, hospital number, sub-specialty, level, type of operation and supervision. If a column is too narrow on the printout, you can widen (or contract) it by changing the width of the appropriate column in the Operations Table before going to the Utilities menu. However, widening one column will make all the other columns narrower. Change the orientation of the paper to Landscape if you have difficulty fitting all the fields across the page.

2.10.4 User Printouts

User printouts give you more control over what is printed out. You can select individual fields, set a date range and specify landscape or portrait. This function can be used to print out procedures and courses data, as well as operations.



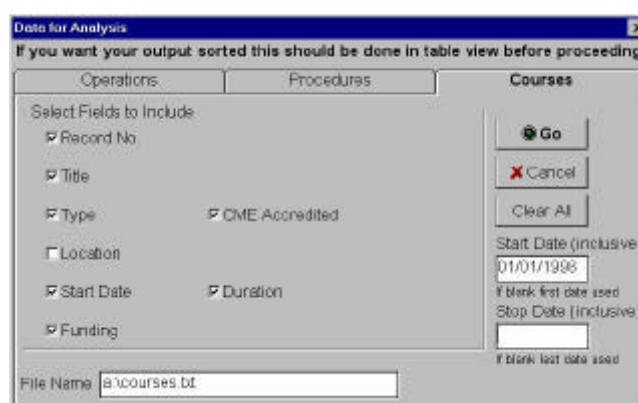
User printout of all operations up to and including the Stop Date; only the ticked fields will be printed

If you want the data sorted, this should be done in table view before going to User Printouts. If a column is too narrow on the printout, you can widen (or contract) it by changing the width of the appropriate column in table view. However, widening one column will make all the other columns narrower. Change the orientation of the paper to Landscape if you have difficulty fitting all the fields across the page.

2.10.5 Data for Analysis

This feature is designed for those familiar with spreadsheets or databases and who want to analyse their own data.

Data for Analysis works in a similar manner to User Printouts except the output is to a disk file as tab separated ASCII. This can be easily loaded into most spreadsheet and database programs.



This output will copy all the courses data from 01/01/1998, to a file called courses.txt on floppy disk. All fields will be copied except Location.

Click on the Data for Analysis button. Click on the appropriate tab to select the data set. Click on all the fields you require for output. Type a file name into the File name box (the file name should follow the old Windows 3 convention of a maximum of 8 characters plus an optional three-character extension). If the file name does

not end with a three-character extension, then TXT is added as an extension. Specify delimiting dates if required and click the Go button.

It is recommended that you do not specify a file name that puts the data in the same directory/folder as your data or system files.

Consult your spreadsheet or database manual for instructions on importing data.

2.10.6 Change Password

Select Change Password from Utilities. Type your CURRENT password into the User's Password box and your new password into both the New Password and Confirm Password box and click Continue.

Notice that both the old and new passwords are hidden behind asterixes.

Your new password must contain at least five characters.

WARNING: If you forget your password your data will become inaccessible. (If you do forget either your User Name or Password, the program suppliers are able to recover your data and reset your User Name and Password; this will be charged at cost.)

2.10.7 Purge Data

The program is designed to hold six months data and can hold up to 500 operation records and 100 procedure records. Courses data is unaffected by Purge. If you exceed these numbers the program will continue to function but the security of the data can not be guaranteed. You should consider purging your data once you have sent your six monthly Data Export on floppy disk to Region.

It is strongly recommended that you make a Backup of your data BEFORE proceeding with a purge. A single digit error could wipe out all your data.

Deleting ALL operations and procedures up to but not including 1st October 1998

Enter the date up to which all operations and procedures will be purged. Operations and procedures prior to this date will be deleted. Click the OK button. You will be required to confirm the purging more than once.

Deleting can be a slow process. The number of deleted records appears on the screen so that you know the process is continuing.

A fall back option is provided. If you exit the program without saving the changes, the purge can be cancelled. Once you have saved your data, the records are irrecoverable except from a backup.

2.10.8 About

Clicking on the About button will show you what version of the program you are using and the system date. If you experience problems with the Surgeon's Log program stating that dates are Future Dates when they are not, you can check this window to see if your computer is correctly set.

CHAPTER 3 SURGEON'S LOG PSION PROGRAM

3.1 Introduction

The Surgeon's Log program is designed to collect data on operations and procedures performed, and courses attended. The program is intended to collect data for individual six monthly training periods, after which the data should be purged. It produces printed reports for the Trainee's Supervisor and creates Exports on floppy disk to be sent to the Regional Co-ordinator.

Trainees can search their data before producing printed reports and can use a backup copy of the data for the analysis of their own data in a spreadsheet or database program.

3.2 System requirements

Psion 3a or 3c with 2Mb memory or the Psion 5.

In most respects the program will run satisfactorily on the 3 series with 1Mb, except for the Print routine which uses a large amount of memory. Users with 1Mb machines should enter a small amount of data and test the Printed Reports function in the Menu, File options. An alternative is to export the data in text format to floppy disk (use Menu, File, Disk Export or Data for Export), import the data into Excel and print from that.

3.3 Installation

3.3.1 PSION 3 Series

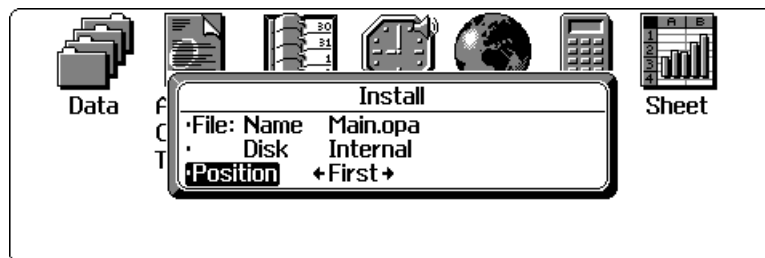
THE SYSTEM DATE MUST BE SET ON THE PSION BEFORE THE PROGRAM IS INSTALLED

- 1 Connect the Psion to a computer with PsiWin installed. Set Psion Remote Link to "On" and keep the Psion switched on. Put the floppy disk in the PC and load Windows.
- 2 Move to File Manager in Windows 3.11 or Start, Run in Windows 95 and type `a:\psisetup.exe`. Once in PsiSetup you will be prompted for the installation control file. Choose Surgeon.ctl. On the next screen select the Psion Internal disk.

3 When the installation is finished, move to File Manager in Windows 3.11 or Start, Run in Windows 95 and type `a:\psprcini.bat`.

4 When this is finished, load Psion Print Setup. Click on "Install Fonts" and in the list of Available Fonts, click on "MS LineDraw" and then on "Install". When a message appears to say the files are installed, exit from Psion Print Setup. Should you not have MS LineDraw on your PC it can be found in file linedraw.ttf on the Psion installation disks. To install it onto your PC open "Control Panel, Fonts". In File Menu - Install New Font or Add - Select drive A: - Select all - MS LineDraw.

5 To complete the installation of the Surgeon's Log program, on the Psion, press U I and in File Name, cursor through the list to find "Main.opa". Move down to Position and cursor through the list to find "First". Press the Enter key and the Surgeon's Log icon will appear. Press the Enter key for the first loading which creates the indexes and takes a little time. Then exit: press the Menu key, File, Exit, Yes.



3.3.2 PSION 5 Series

THE SYSTEM DATE MUST BE SET ON THE PSION BEFORE THE PROGRAM IS INSTALLED.

SET THE PSION TO METRIC. Click on Control Panel, select International, Units, Metric, and press Enter.

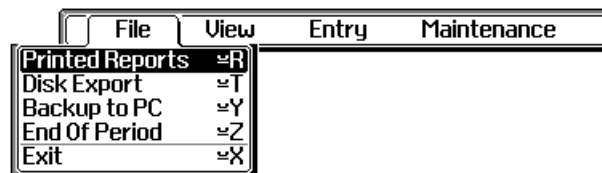
1 Move to Start, Run in Windows 95 or 98 and type `a:\log.sis` and click on OK.

2 When the installation is finished, click on Finish.

3 On the Psion, press the Extras button and the Surgeon's Log icon will appear. The first loading, which creates the indexes, takes a little time.

3.4 Backing Up Data

There are three types of backup, all of which are available at any time. It is imperative that you keep several backups on both floppy disk and on a PC. If the Psion is lost or stolen, or if you have deleted your data, you will be totally dependent on your backup copies, which will need to be up-to-date. As there can be problems with floppy disks which get corrupted, do not rely on one backup on a floppy disk. If the hard disk on a PC goes down, you will probably have lost your data. To create backups, connect the Psion to a computer with PsiWin installed and set Psion Remote Link to "On" or "Cable".



1 PSIWIN BACKUP TO HARD DISK

Load PsiWin Psion Backup. This backup makes a full copy of all programs and data on your Psion onto the hard disk. Select backup of Internal disk. Note the name of the sub-directory where your data is stored. The Psion 5 can also be set to run PsiWin backup automatically when the Psion is connected to the PC.

2 BACKUP DATA TO FLOPPY DISK

Load PsiWin Psion Manager. Disk Export (Psion 3) or Data for Export (Psion 5) are available from the Menu, File option in the Surgeon's Log program. They create two backups of your data, one of which can be sent to the Regional Co-ordinator. You will need two EMPTY, formatted disks ready before running this utility. This data is in text format (ASCII). These files can be imported into other programs (eg MS Excel), if you wish to analyse the data or print it out in a different format from that offered by the Surgeon's Log program.

Backup to floppy disk is slow with large data sets.

On the Psion 5, after the data files have been created, they have to be moved from the Psion to floppy disks using Windows Explorer. The data is in two sub-directories/folders of the directory c:\Surgeon; "First" and "Second", and can be moved using Cut and Paste. You cannot leave them on the Psion. Each directory/folder should be placed on a separate floppy disk.

3 BACKUP DATA TO HARD DISK - PSION 3

Load PsiWin Psion Manager. Backup to PC is available from the Menu, File option in the Surgeon's Log program. It creates a backup of your data in a directory/folder on the hard disk. The data is in Psion format.

BACKUP DATA TO HARD DISK - PSION 5

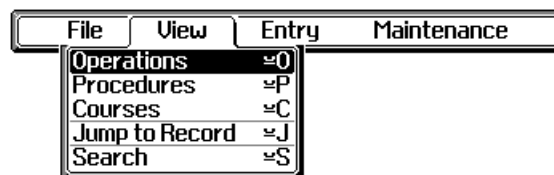
Load "My Psion". Backup Files is available from the Menu, File option in the Surgeon's Log program. It creates a backup of your data in a directory on the Psion, This should be moved to a folder on the hard disk using Cut/Copy and Paste in Windows Explorer. The data is in Psion format.

4 EXPORTING DATA TO REGION

Run BACKUP DATA TO FLOPPY DISK described above.

3.5 Loading Data Tables

At the Main Menu, move to "View" and move down to the desired Table. Press the Enter key. Once in a Data Table, to view a different table press U (Ctrl) + P, C or O (for Procedures, Courses or Operations). You can also press the Menu key, return to View, and choose another Table.



3.6 Adding, Editing or Modifying Records

First load a data table. You can add, edit or delete from the Menu or from Table View. In Table View, press U (Ctrl) + A, E or D (for Adding, Editing or Deleting). You can also press the Menu key, move to Entry and select Add, Edit or Delete.

If you try to edit a record which contains a deleted Hospital or Consultant, you will have to add the name to the list again before you can save the amended record.

3.7 Viewing A Single Record

In Table View, move the highlight to a record, and press the Enter key to display a complete record on the screen (Zoom View). To return to Table View, press any key.

OPERATION ZOOM

REC.NO 2 DATE OF OP. 09/09/1998 HOSP. NO. B12345
 HOSPITAL Harrow General START TIME 02:00 TIME OF DAY Night
 DURATION 02:00 CEPOD Urgent DOB SEX Male
 ASA GRADE Mild Systemic Disease SUB-SPECIALTY Coloproctology
 LEVEL 2 TYPE OF OPERATION Colostomy complications
 COMPLICATIONS Yes CONSULTANT Jones H L
 SUPERVISION Supervised-trainer scrubbed ENTERED 19/10/1998
 NOTES

Press Any Key...

3.8 Adding To Lists

Additions can be made from the Menu or in Data Entry. Press the Menu key, move to Maintenance and select a list. Press A to Add. To add an Operation you need to know the Sub-specialty and Level. When adding to any of the lists you must ensure that you type the items in the format specified by the Regional Co-ordinator. If Trainees are not consistent, the Regional data will be impossible to analyse.

To add to the list of Hospitals or Consultants when in data entry, press ^ (ie shift + 6) in the Psion 3, Ctrl + L in the Psion 5, to move to the Maintenance screen and press A to Add.

To add to the list of Operations when in data entry, enter the Sub-specialty and Level, press the Enter key to display the list of operations, and press Shift O (Shift Ctrl O). To add to Procedures when in data entry, when the list is displayed, press Shift P (Shift Ctrl P).

3.9 Deleting From Lists

Items can be deleted from the lists of Hospitals and Consultants only. Due to memory limitations on the Psion, a maximum of ten Hospitals and Consultants can be current at any time. If you need to enter data for Hospitals or Consultants which have been deleted from the current list, add them to the list again. Deletion is available from the Menu or in Data Entry. Press the Menu key, move to Maintenance and select Hospitals or Consultants. View the list by using the right and left cursor keys. Press D to Delete.

To delete from the list of Hospitals or Consultants when in data entry, press ^ (ie shift + 6) in the Psion 3, Ctrl + L in the Psion 5, to move to the Maintenance screen. Press D to delete.

3.10 Viewing Choices In List Fields

For fields which have pick lists, the choices can be viewed by using the right and left cursor keys, except for Procedures and Operations which have their own screens.

3.11 Searching

In the Operations table you can search for a Type of Operation or a Hospital Number. In the Procedures table you can search for a Procedure.

This function is available from the Menu or from Table View. In Table View, press S (Ctrl S). You can also press the Menu key, move to View and select Search. You must load a table before using Search. After the first record is found, press F (Ctrl F) to find the next matching record.

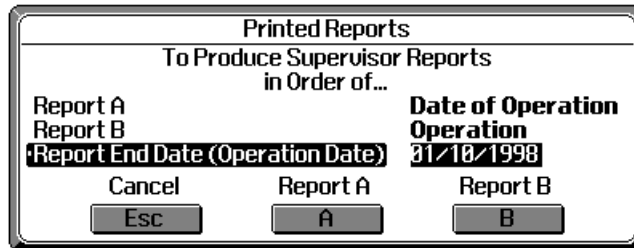
3.12 Jump To Record

This function is useful when you have a large number of records. It is available from the Menu or from Table View. In Table View, press J (Ctrl+J). You can also press the Menu key, move to View and select Jump to Record. Enter the number of the record you wish to view and press the Enter key. You must load a table before using this function.

3.13 Printing Reports For Supervisor

Make sure you have followed the installation instructions, which included initialising the printer, and logged off. This function prints out the data from the Operations Table in two formats, one in date order, the other in order of sub-specialty and operation.

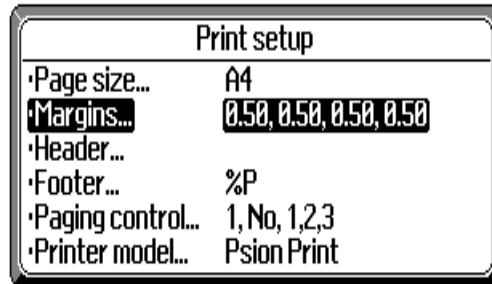
IT IS ADVISABLE TO RUN THIS UTILITY AT INTERVALS SO THAT YOU HAVE A WRITTEN RECORD OF YOUR DATA.



Detailed instructions for printing out your data are on the following pages.

3.13.1 PSION 3

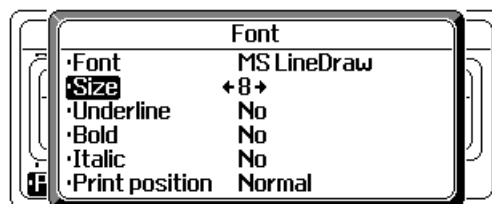
Connect the Psion to a computer with PsiWin installed and set Psion Remote Link to "On". Load PsiWin Psion Print on the PC. On the Psion, load the program and select "Printed Reports" from the File Menu. There are two Reports, Report A which is in order of Date of Operation and Report B which is in order of Operation Title, grouped by Sub-specialty. After a Report is selected and an "End Date" is entered, the Print Setup screen is displayed.



The following Print attributes must be changed to the following settings for the Report to be properly formatted:

Page Size	Orientation	Landscape
Margins	Top	0.5
	Left	0.5
	Right	0.5
	Bottom	0.5
Footer	On first page	Yes
	Vertical offset	0.25
Printer Model	Select Printer	Psion Print
	Default Font	MS LineDraw
	Font Size	8

Press the Tab key to change the attributes. Press the Enter key when you have changed these items. A Print Preview screen will then be shown for each month or Sub-specialty that the Report covers. Press U P when Print Preview is displayed and the first month or sub-specialty will be printed. If the printout is satisfactory, print the next month/sub-specialty. If not, either print again or return to Print Setup to check that the settings are correct. Returning to Print Setup will start your print from the beginning again.



3.13.2 PSION 5

The Psion must be set to metric before running this routine.

Connect the Psion to a computer with PsiWin installed and set Psion Remote Link to "Cable". Load Windows Explorer "My Psion". On the Psion, load the program and select "Printed Reports" from the File Menu. There are two Reports, Report A which is in order of Date of Operation and Report B which is in order of Operation Title, grouped by Sub-specialty. After a Report is selected and an "End Date" is entered, the Page Setup screen is displayed.

The following Page attributes must be changed to the following settings for the Report to be properly formatted:

Page Size	Orientation	Landscape
Margins	Top	1.5 cm
	Left	1.5 cm
	Right	1.5 cm
	Bottom	1.5 cm
Header	Distance From Top Of Page	0
Footer	Insert	Page Number
	Format \Alignment	Centred
	Distance From Bottom Margin	0.5 cm

When finished press Ctrl + D to save the settings.

On the next screen press Enter to continue and a Print Preview screen will then be shown for each month or Sub-specialty that the Report includes. Click on Setup to bring up a list box; click on "Printer" to bring up the Print Setup dialogue box. It should display "Print to Printer via PC". If so, click on "OK" and follow the printing instructions on screen. If not, click on "Printer" (Ctrl + P) to bring up Printer Setup screen. Scroll through the list next to "Go" and select "Print via PC". Click on "OK"; click on "OK" on Print Setup dialogue box and follow the printing instructions on screen.

Clicking on the Print button in Print Preview will print the first month or sub-specialty. If the printout is satisfactory, print the next month/sub-specialty. If not, either print again or return to Page Setup to check that the settings are correct. Returning to Page Setup will start your print from the beginning again.

If you wish to print out the Operations Table data in other formats, or the Courses or Procedures data, run Data for Export, move the data to floppy disk, import the data into an Excel spreadsheet and print from that.

3.14 Purging Data - End Of Period Routine

YOU ARE STRONGLY ADVISED TO RUN PSIWIN BACKUP ON YOUR PC BEFORE RUNNING THIS ROUTINE.

Make sure you have followed the installation instructions above, which included initialising the printer and logged off.

THIS ROUTINE WILL DELETE YOUR OPERATIONS AND PROCEDURES RECORDS AFTER PRINTING OUT YOUR DATA AND MAKING BACKUPS ONTO DISK. YOU CANNOT ESCAPE ONCE YOU HAVE STARTED THIS PROCESS.

The process might take a long time with a large data set.

PSION 3

Connect the Psion to a computer with PsiWin installed and set Psion Remote Link to "On". Load PsiWin Psion Print on the PC. On the Psion, load the Surgeon's Log program and select "End of Period" from the File Menu.

At the end of each six monthly training period, or if the program is displaying messages that the system is reaching its maximum number of records, the End of Period routine should be run.

You will be asked to enter an "End Date". The End of Period routine will then prompt you to print out the two Reports for your Training Supervisor (one in date order, the other in operation order), prompt you to create two Exports to floppy disk (one for Region and one for yourself), make a backup onto the hard disk and then delete all Operations and Procedures records prior to the date you have entered.

PSION 5

Connect the Psion to a computer with PsiWin installed and set Psion Remote Link to "Cable". Load Windows Explorer 'My Psion' on the PC. On the Psion, load the Surgeon's Log program and select "End of Period" from the File Menu.

At the end of each six monthly training period, or if the program is displaying messages that the system is reaching its maximum number of records, the End of Period routine should be run.

You must make a PsiWin backup before running this routine on the Psion 5.

You will be asked to enter an "End Date". The End of Period routine will then print out the two Reports for your Training Supervisor, prompt you to create two Exports to floppy disk (one for Region and one for yourself), make a backup onto the hard disk and then delete all Operations and Procedures records prior to the date you have entered.

APPENDICES

APPENDIX 1 Regions, chairmen and regional co-ordinators

Region	Co-ordinator	e-mail	Hospital	Chairman of Training Board	Address
Armed Forces	To be confirmed			Air Cdr. B Morgans	Royal Naval Hospital, Haslar Gosport , Hampshire PO12 2AA
Dundee	To be confirmed			Mr M Lavelle-Jones	Chairman of Regional Training Committee Directorate of General Surgery Ninewells Hospital and Medical School Dundee DD1 9SY
East Anglia	Mr. Gavin Pettigrew	Gavin3651@aol.com	Norfolk & Norwich Hospital	Mr D N L Ralphs	Dept. Of Surgery Norfolk & Norwich Hospital Brunswick Road Norwich NR1 3SR
East of Scotland	Mr. Andrew De Beaux	I.deBeaux@ed.ac.uk	Edinburgh Royal Infirmary	Mr J L R Forsythe	Consultant Surgeon Royal Infirmary Edinburgh Lauriston Place Edinburgh EH3 9YW
Grampian	Mr. Peter King	p.m.king@abd.na.c.uk	Aberdeen Royal Infirmary	Mr G G Youngson	Chairman Of Regional Training Committee Royal Aberdeen Children's Hospital Cornhill Road Aberdeen AB9 2ZG
Ireland	Mr. Maurice Stokes	maurice.a.stokes@lineone.net	Dept. of Surgery Daisy Hill Hospital	Mr R Stephens	Chairman General Surgery Sub-Committee Hospital 7 Room 2 St. James Hospital Dublin
Mersey	Miss. Linda Da Cossart	linda@rapid.co.uk		Mr James Kane	Consultant General Surgeon Countess Of Chester Hospital Liverpool Road, Chester CH1 3ST
North East Thames	Mr. Abrie Botha	AbrieBotha@compuserve.com	Whipps Cross Hospital Leytonstone	Mr Bernie Ribiero	Robert Brown Post Graduate Centre, Basildon Hospital, Nethermayne, Basildon, Essex SS16 5NL
North Trent	To be confirmed			Mr C J Stoddard	Consultant Surgeon The Royal Hallamshire Hospital Glossop Road Sheffield S10 2JF
North West Thames	Mr David Sellu	dsellu@ealpglib.demon.co.uk	Ealing Hospital, Ealing	Mr M Burke	Northwick Park Hospital Watford Road Harrow Middlesex HA1 3UJ
North Western	Mr. Muntzer Mughal	muntzer@delhi.demon.co.uk	Chorley and Ribble District General Hospital Preston Road, Newcastle	Mr J Bancewicz	Department Of Surgery Hope Hospital Eccles Old Road Salford M6 8HD
Northern	Prof. David Leaper	113137.151@compuserve.com		Mr J Chamberlain	Consultant Surgeon Freeman Hospital High Heaton Newcastle upon Tyne NE7 7DN
Northern Ireland	Mr. Barry Clements	barryclements@dn.net.co.uk	Royal Victoria Falls Road Belfast	Mr B Cranley	Consultant Surgeon Daisy Hill Hospital 5 Newry Road Newry, Co Down BT35 8DR
Oxford	Mr. Neil Borley	nborley@radius.jr2.ox.ac.uk	Nuffield Dept of Surgery, John Radcliffe Hospital	Mr Tom Dehn	Programme director, Royal Berkshire Hospital, London Road, Reading, RG1 5AN
South East Thames	Mr. Jonathan Roberts	johnathan.roberts@kcl.ac.uk	Kings College Hospital	Ms M South	The Maidstone Hospital, General Wing Hermitage Lane Maidstone Kent ME16 9QQ
South Trent	Mr. Simon Weight	scweight@email.msn.com	Dept of Surgery, Glenfield Hospital,	Mr R Windle	Consultant Surgeon Glenfield General Hospital Groby Road Leicester LE3 9QP

Region	Co-ordinator	e-mail	Hospital	Chairman of Training Board	Address
South West Thames	Mr. Dick Bowyer	r.bowyer@dial.pipex.com	St Richards Hospital Royal West Sussex Trust	Mr N P M Sacks	Consultant Surgeon 3rd Floor, St James's Wing St George's Hospital Blackshaw Road London SW17 0QT
South Western	Mr. Nick Markham	Nicholas.Markham@NDDH.ccmaitr.swest.nhs.uk	North Devon District Hospital Raleigh Park	Mr D C Wilkins	Level 4, Derriford Hospital Derriford Road PLYMOUTH PL6 8DH
Trent	To be confirmed			Mr J Doran	Consultant Surgeon Queen's Medical Centre University Hospital Nottingham NG7 2UH
Wales	Mr. Rod Jones	rjones@owneu.demon.co.uk	Neville Hall Hospital	Prof R E Mansel	University Of Wales College Of Medicine University Department of Surgery Heath Park, Cardiff CF4 4XN
Wessex	Mr. Charles Ranaboldo	CRanaboldo@compuserve.com		Mr P C Weaver	Department Of Surgery St. Mary's Hospital Milton Road Portsmouth PO3 6AD
West Midlands	Mr. Martin Wadley	wadleyms@novel15.bham.ac.uk	University Department of Surgery Queen Elizabeth Hospital	Mr A Allan	Department of Surgery Goodhope Hospital Rectory Road Sutton Coldfield CV10 7DJ
West of Scotland	Mr. Ross Carter	rcarter@clinmed.gla.ac.uk	Glasgow Royal Infirmary	Mr R Dalling	West of Scotland Committee for Postgraduate Medical Education The University of Glasgow Glasgow G12 8QQ
Yorkshire	To be confirmed			Prof P J Guillou	St James's University Hospital Beckett Street Leeds LS9 7TF

APPENDIX 2

FIELD LISTS

OPERATIONS TABLE

FILENAME: EXPOP.TXT

FIELDS	ATTRIBUTES
Record Number:	Derived by System
Date of Operation:	Format: 00/00/0000
Hospital Number:	Text. Maximum length: 12 characters
Hospital:	Choice field - entered by user. Maximum length: 23 characters including spaces
Start Time:	Format 00:00
Time of Day:	Choice field - derived by System
Duration:	In hours:mins. Format 00:00. Maximum 15 hours
CEPOD:	CEPOD Rating. Choice field - fixed
Date of Birth:	Format: 00/00/0000. Optional
Sex:	Choice field - fixed
ASA:	ASA Grade. Choice field - fixed
Sub-specialty; Level;	Choice field - fixed
Operation;	Choice field - user can add to list. Maximum length: 55 characters including spaces
Complications:	Yes/No field. Optional
Consultant:	Choice field - entered by user. Maximum length: 23 characters including spaces
Supervision:	Choice field - fixed
Date Entered:	Derived by System
Notes:	Text. Maximum length: 70 characters. Optional

PROCEDURES TABLE

FILENAME: EXPROC.TXT

FIELDS	ATTRIBUTES
Record Number:	Derived by System
Date of Procedures:	Format: 00/00/0000
Procedure:	Choice field - user can add to list. Maximum length: 38 characters including spaces
Number:	Total of that procedure done that day with that supervision level
Supervision:	Choice field - fixed

COURSES TABLE

FILENAME: EXPCRSE.TXT

FIELDS	ATTRIBUTES
Record Number:	Derived by System
Title:	Text. Maximum length: 70 characters.
Type:	Choice field - fixed
CME Accredited:	Yes/No field
Location:	Text. Maximum length: 70 characters. Optional
Start:	Start Date. Format: 00/00/0000
Duration:	In days, to nearest half day. Format: 00.0
Funding:	Choice field - fixed

PERSONAL DATA FOR EXPORT TO REGION

FILENAME: PERSONAL.TXT

FIELDS	ATTRIBUTES
First Name:	Text. Maximum length: 5 characters
Surname:	Text. Maximum length: 25 characters
GMC Number:	Text. Maximum length: 10 characters
Hospital:	Choice field - entered by user Maximum length: 23 characters including spaces
Year of Training:	Choice field - fixed
Sub-specialty of Main Interest:	Choice field - fixed

APPENDIX 3 CHOICE FIELDS

FIXED CHOICE FIELDS

ASA GRADE:	Fit and Well Mild Systemic Disease Significant Systemic Disease Life Threatening Disease Not Expected to Survive 24hrs
CEPOD RATING:	Scheduled Urgent Emergency
FUNDING:	Paid in Full by Trainee Part Paid by Trainee No Cost to Trainee
LEVEL:	1, 2, 3
SEX:	Female, Male
SUB-SPECIALTY:	Breast Coloproctology Emergency Surgery Endocrine Endoscopic Surgery Paediatrics Transplant Upper GI /HpB Vascular
SUPERVISION:	Assisting Supervised-trainer scrubbed Supervised-trainer unscrubbed but in theatre Performed Training more junior trainee
TIME OF DAY:	Day, Evening, Night
TYPE:	Local Meeting National Meeting International Meeting Practical Training Course Theoretical Training Course Animal Model Course ATLS
YEAR OF TRAINING:	First – Sixth

CHOICE FIELDS WHICH CAN BE ADDED TO

PROCEDURES: Arterial line
 Central venous catheterisation
 Core biopsy
 Cricothyroidotomy
 Diagnostic colonoscopy
 Diagnostic ERCP
 Diagnostic Upper GI endoscopy
 Flexible sigmoidoscopy
 FNA
 Insertion of chest drain
 Outpatient haemorrhoid treatment
 Pericardiocentesis
 Peritoneal aspiration
 Pleural aspiration
 Proctoscopy/rigid sigmoidoscopy

OPERATIONS:

Operation Title	level	Sub-specialty
Mastectomy	1	Breast
Microdochotomy	2	Breast
Total duct excision	2	Breast
Wide excision of breast tumour	2	Breast
Excision of breast lump	1	Breast
Treatment of breast abscess	1	Breast
Axillary dissection	2	Breast
Needle localisation	2	Breast
Breast augmentation	3	Breast
Breast augmentation - complications and reoperation	3	Breast
Breast reduction	3	Breast
Myocutaneous flaps	3	Breast
Tissue expanders	3	Breast
Anterior resection of rectum	2	Coloproctology
Fistula in ano	2	Coloproctology
Prolapse surgery	2	Coloproctology
Therapeutic colonoscopy	2	Coloproctology
Adult circumcision	1	Coloproctology
Colostomy	1	Coloproctology
Epididymal cyst	1	Coloproctology
Femoral herniorraphy	1	Coloproctology
Fissure in ano	1	Coloproctology
Haemorrhoidectomy	1	Coloproctology
Hartmanns procedure	1	Coloproctology
Hydrocoele repair	1	Coloproctology
Ileostomy	1	Coloproctology
Incisional and para-stomal hernia repair	1	Coloproctology
Inguinal herniorraphy	1	Coloproctology
Left hemicolectomy	1	Coloproctology
Pilonidal sinus	1	Coloproctology
Repair of recurrent groin hernia	1	Coloproctology
Right hemicolectomy	1	Coloproctology
Small bowel resection	1	Coloproctology

Sub-total colectomy	1	Coloproctology
Umbilical and paraumbilical hernia repair	1	Coloproctology
AP resection of rectum	2	Coloproctology
Closure of Hartmanns	2	Coloproctology
Colostomy complications	2	Coloproctology
Diverticular disease/fistula	2	Coloproctology
Ileorectal anastomosis	2	Coloproctology
Ileostomy complications	2	Coloproctology
Panproctocolectomy	2	Coloproctology
Block dissection of the groin	3	Coloproctology
Colo-anal anastomosis	3	Coloproctology
Complex fistula in ano	3	Coloproctology
Ileo-anal and colonic pouch	3	Coloproctology
Incontinence surgery	3	Coloproctology
Operation for intestinal fistula	3	Coloproctology
Posterior approach to the rectum	3	Coloproctology
Posterior pelvic clearance	3	Coloproctology
Re-operation for inflammatory bowel disease	3	Coloproctology
Re-operation for pelvic malignancy	3	Coloproctology
Recto-vaginal fistula	3	Coloproctology
Sphincter repair	3	Coloproctology
Transanal microsurgery	3	Coloproctology
Appendicectomy	1	Emergency Surgery
Emergency hernia repair	1	Emergency Surgery
Emergency cholecystectomy(laparoscopic)	1	Emergency Surgery
Emergency cholecystectomy(open)	1	Emergency Surgery
Gastrectomy for bleeding	1	Emergency Surgery
Hartmanns operation	1	Emergency Surgery
Laparotomy for abdominal injury	1	Emergency Surgery
Laparotomy for bleeding peptic ulcer	1	Emergency Surgery
Laparotomy for large bowel obstruction	1	Emergency Surgery
Laparotomy for perforated colon	1	Emergency Surgery
Laparotomy for perforated peptic ulcer	1	Emergency Surgery
Laparotomy for post operative complications	1	Emergency Surgery
Laparotomy for small bowel obstruction	1	Emergency Surgery
Operation for ruptured liver	1	Emergency Surgery
Pancreatic debridement/drainage of pancreatic abscess	1	Emergency Surgery
Splenectomy for trauma	1	Emergency Surgery
Splenic repair	1	Emergency Surgery
Acute anorectal sepsis	1	Emergency Surgery
Colostomy	1	Emergency Surgery
Diagnostic peritoneal lavage	1	Emergency Surgery
Drainage of ano-rectal sepsis	1	Emergency Surgery
Drainage of Superficial abscess	1	Emergency Surgery
Embolectomy	1	Emergency Surgery
Exploration of scrotum for torsion	1	Emergency Surgery
Fasciotomy	1	Emergency Surgery
Ileostomy	1	Emergency Surgery
Lateral thoracotomy	1	Emergency Surgery
Median thoracotomy	1	Emergency Surgery
Rectal injuries	1	Emergency Surgery
Reduction of paraphimosis	1	Emergency Surgery
Suprapubic cystostomy	1	Emergency Surgery
Tracheostomy	1	Emergency Surgery
Laparoscopy in acute emergencies	2	Emergency Surgery
Parathyroidectomy	3	Endocrine
Thyroid lobectomy	2	Endocrine
Retrosternal goitre	2	Endocrine
Thyroglossal cystectomy	2	Endocrine
Thyroidectomy - toxic goitre	2	Endocrine
Total thyroidectomy	2	Endocrine
Adrenalectomy (include laparoscopic)	3	Endocrine
Block dissection of neck	3	Endocrine
Endocrine pancreatic tumours	3	Endocrine
Parotidectomy	3	Endocrine
Pituitary surgery	3	Endocrine

Re-operative parathyroidectomy	3	Endocrine
Re-operative thyroid surgery - incl nodal dissection	3	Endocrine
Submandibular gland excision	3	Endocrine
Laparoscopic anti-reflux surgery	2	Endoscopic Surgery
Laparoscopic anti-reflux surgery - conv to open	2	Endoscopic Surgery
Laparoscopic anti-reflux surgery - plus cholecystectomy	2	Endoscopic Surgery
Laparoscopic cholecystectomy	2	Endoscopic Surgery
Laparoscopic cholecystectomy - conv to open	2	Endoscopic Surgery
Laparoscopic cholecystectomy - exploration of CBD	2	Endoscopic Surgery
Laparoscopic cholecystectomy - operative cholangiogram	2	Endoscopic Surgery
Laparoscopic hernia repair	2	Endoscopic Surgery
Diagnostic laparoscopy	1	Endoscopic Surgery
Laparoscopic biopsy	1	Endoscopic Surgery
Laparoscopic adhesiolysis	2	Endoscopic Surgery
Laparoscopic appendicectomy	2	Endoscopic Surgery
Thoracoscopy	2	Endoscopic Surgery
Laparoscopic closure of perforated duodenal ulcer	3	Endoscopic Surgery
Laparoscopic Hellers myotomy	3	Endoscopic Surgery
Laparoscopic Hellers myotomy - conv	3	Endoscopic Surgery
Laparoscopic large bowel resection	3	Endoscopic Surgery
Laparoscopic rectopexy	3	Endoscopic Surgery
Laparoscopic splenectomy	3	Endoscopic Surgery
Laparoscopy-advanced	3	Endoscopic Surgery
Orchidopexy	2	Paediatrics
Paediatric herniotomy	1	Paediatrics
Pyloromyotomy	2	Paediatrics
Exploration of scrotum for torsion	1	Paediatrics
Paediatric appendicectomy	1	Paediatrics
Paediatric circumcision	1	Paediatrics
Reduction of paraphimosis	1	Paediatrics
Reduction of intussusception	2	Paediatrics
Repair of incarcerated inguinal hernia	2	Paediatrics
Thyroglossal cystectomy	2	Paediatrics
Donor nephrectomy	2	Transplant
Drainage of intra- and extra-peritoneal collections	2	Transplant
Renal biopsy	2	Transplant
Transplant nephrectomy	2	Transplant
Uretero-neocystostomy	2	Transplant
Uretero-ureterostomy	2	Transplant
Peritoneal access	2	Transplant
Renal transplantation	2	Transplant
Vascular access	2	Transplant
Arterial and venous anastomosis	1	Transplant
Harvesting saphrenous vein	1	Transplant
Arterial thrombectomy	2	Transplant
Donor hepatectomy	2	Transplant
Liver donor transplant	2	Transplant
Bilateral nephrectomy	3	Transplant
Bladder(Psoas) hitch	3	Transplant
Boari flap	3	Transplant
Donor pancreatectomy	3	Transplant
Ileal and colonic conduits	3	Transplant
Liver transplantation	3	Transplant
Pancreatic transplantation	3	Transplant
Partial nephrectomy	3	Transplant
Recipient hepatectomy	3	Transplant
Renal artery reconstruction	3	Transplant
Roux loop construction	3	Transplant
Secondary vascular access	3	Transplant
Ureteropyelostomy	3	Transplant
Workbench preparation of kidney	3	Transplant
Biliary bypass	2	Upper GI /HpB
Radical sub-total gastrectomy	2	Upper GI /HpB
Sub-total gastrectomy	2	Upper GI /HpB
Total gastrectomy	2	Upper GI /HpB
Radical total gastrectomy	3	Upper GI /HpB

Oesophagogastrectomy - Ivor Lewis	2	Upper GI /HpB
Oesophagogastrectomy - transhiatal	2	Upper GI /HpB
Radical Oesophagogastrectomy	3	Upper GI /HpB
Redo gastric surgery	3	Upper GI /HpB
Endoscopic control of upper GI bleeding	2	Upper GI /HpB
Endoscopic laser recanalisation	2	Upper GI /HpB
Endoscopic oesophageal stenting	2	Upper GI /HpB
Endoscopic variceal banding/sclerosis	2	Upper GI /HpB
ERCP - Biliary stenting	2	Upper GI /HpB
ERCP - endoscopic sphincterotomy	2	Upper GI /HpB
ERCP - pancreatic stenting	2	Upper GI /HpB
Oesophageal dilatation	2	Upper GI /HpB
Endoscopic mucosal resection	3	Upper GI /HpB
Epididymal cyst	1	Upper GI /HpB
Femoral herniorrhaphy	1	Upper GI /HpB
Hydrocoele repair	1	Upper GI /HpB
Incisional and para-stomal hernia repair	1	Upper GI /HpB
Inguinal herniorrhaphy	1	Upper GI /HpB
Repair of recurrent groin hernia	1	Upper GI /HpB
Small bowel resection	1	Upper GI /HpB
Umbilical and paraumbilical hernia repair	1	Upper GI /HpB
Open antireflux repair	2	Upper GI /HpB
Open cholecystectomy - exploration of CBD	2	Upper GI /HpB
Pharyngeal pouch excision	2	Upper GI /HpB
Redo antireflux surgery	2	Upper GI /HpB
Splenectomy	2	Upper GI /HpB
Distal Pancreatectomy	3	Upper GI /HpB
Drainage of infected pancreatitis	3	Upper GI /HpB
Drainage of pancreatic pseudocyst	3	Upper GI /HpB
Hellers myotomy	3	Upper GI /HpB
Hydatid disease	3	Upper GI /HpB
Left hepatectomy	3	Upper GI /HpB
Long Oesophageal myotomy	3	Upper GI /HpB
Operations for morbid obesity	3	Upper GI /HpB
Pancreatico-duodenectomy	3	Upper GI /HpB
Pancreatico-jejunostomy	3	Upper GI /HpB
Porto-systemic shunt	3	Upper GI /HpB
Repair of biliary stricture	3	Upper GI /HpB
Right hepatectomy	3	Upper GI /HpB
Segmental liver resection	3	Upper GI /HpB
Thoroscopic splanchnicectomy	3	Upper GI /HpB
Total pancreatectomy	3	Upper GI /HpB
Abdominal aortic aneurysm - elective	2	Vascular
Abdominal aortic aneurysm - emergency	2	Vascular
Carotid endarterectomy	2	Vascular
Femoro-popliteal above knee bypass	2	Vascular
Femoro-politeal below knee bypass	2	Vascular
Above knee amputation	1	Vascular
Balloon thrombo-embolctomy	1	Vascular
Long saphrenous varices	1	Vascular
Arterial injuries	2	Vascular
Axillo-femoral bypass	2	Vascular
Below knee amputation	2	Vascular
Femoro-femoral bypass	2	Vascular
Ileofemoral bypass	2	Vascular
Infected femoro-popliteal graft	2	Vascular
Infra-popliteal bypass	2	Vascular
Per-operative angiography	2	Vascular
Per-operative thrombolysis	2	Vascular
Recurrent varicose veins	2	Vascular
Short saphrenous varices	2	Vascular
Thrombo-embolctomy	2	Vascular
Aortic dissection	3	Vascular
Arterio venous malformation	3	Vascular
Carotid body tumour	3	Vascular
Infected aortic graft	3	Vascular

Lumbar sympathectomy	3	Vascular
Per-operative angioplasty	3	Vascular
Renal visceral arterial reconstruction	3	Vascular
Supra-renal aortic aneurysm	3	Vascular
Thoracic outlet syndrome	3	Vascular
Thoracoscopic sympathectomy	3	Vascular
Through Knee amputation	3	Vascular
Upper limb arterial reconstruction	3	Vascular
Vascular access for dialysis	3	Vascular
Vena caval filter placement	3	Vascular
Venous reconstruction	3	Vascular

INDEX OPERATIONS:

Breast	Mastectomy
Breast	Microdochotomy
Breast	Total duct excision
Breast	Wide excision of breast tumour
Coloproctology	Anterior resection of rectum
Coloproctology	Fistula in ano
Coloproctology	Prolapse surgery
Coloproctology	Therapeutic colonoscopy
Emergency Surgery	Appendicectomy
Emergency Surgery	Emergency hernia repair
Emergency Surgery	Emergency laparotomy
Endocrine	Parathyroidectomy
Endocrine	Thyroid lobectomy
Endoscopic Surgery	Laparoscopic anti-reflux surgery
Endoscopic Surgery	Laparoscopic cholecystectomy
Endoscopic Surgery	Laparoscopic hernia repair
Paediatrics	Orchidopexy
Paediatrics	Paediatric herniotomy
Paediatrics	Pyloromyotomy
Transplant	Donor nephrectomy
Transplant	Exploration of renal transplant
Transplant	Peritoneal access
Transplant	Renal transplantation
Transplant	Vascular access
Upper GI /HpB	Biliary bypass
Upper GI /HpB	Gastrectomy
Upper GI /HpB	Oesophagectomy
Upper GI /HpB	Redo gastric surgery
Upper GI /HpB	Therapeutic Upper GI endoscopy
Vascular	Abdominal aortic aneurysm - elective
Vascular	Abdominal aortic aneurysm - emergency
Vascular	Carotid endarterectomy
Vascular	Femoro-politeal above knee bypass
Vascular	Femoro-politeal below knee bypass

Appendix 4 – Approved names for Consultants and Hospitals (For example - West of Scotland)

N.B If a trainer does not appear on the list below, please consult your regional co-ordinator for the approved name format:

Surname	Hospital
Forster A	Ayr Hospital
McMillan I	Ayr Hospital
Simpson C	Ayr Hospital
Stewart G	Ayr Hospital
Wilson C	Ayr Hospital
Diament R	Crosshouse Hospital
McGregor J	Crosshouse Hospital
Morran C	Crosshouse Hospital
Sugden B	Crosshouse Hospital
Whitford P	Crosshouse Hospital
Auld C	Dumfries Royal Inf
McCormick J	Dumfries Royal Inf
Muir I	Dumfries Royal Inf
Walls A	Dumfries Royal Inf
Al-Asadi A	Falkirk Royal Inf
Harper D	Falkirk Royal Inf
Harris R	Falkirk Royal Inf
McDonald J	Falkirk Royal Inf
Smith R	Falkirk Royal Inf
Byrne D	Gartnavel General
Fullarton G	Gartnavel General
Galloway D	Gartnavel General
McKay A	Gartnavel General
Molloy R	Gartnavel General
Quin R	Gartnavel General
Rogers P	Gartnavel General
Anderson J H	Glasgow Royal Inf
Carter R	Glasgow Royal Inf
Cooke T	Glasgow Royal Inf
Finlay I	Glasgow Royal Inf
Horgan P	Glasgow Royal Inf
Imrie C W	Glasgow Royal Inf
McKee R	Glasgow Royal Inf
Murray W R	Glasgow Royal Inf
Stuart R	Glasgow Royal Inf
Goldberg J	Hairmyres
Goldring J	Hairmyres
Knight D	Hairmyres
Miller D	Hairmyres
Richards J	Hairmyres
Thomson W	Hairmyres
Bell G	Inverclyde Royal Inf
Morrice I	Inverclyde Royal Inf
Orr G	Inverclyde Royal Inf
Reidy J	Inverclyde Royal Inf
Watt I	Inverclyde Royal Inf
Campbell H	Law
Cannon J	Law

Surname	Hospital
Pickard R	Law
Reid D	Law
Wallace J	Law
Brooks R	Monklands
MacKenzie I	Monklands
McDonald A	Monklands
McKenzie I	Monklands
McKenzie R	Monklands
Scott R	Monklands
McEwan A	RAH
McKirdy M	RAH
Mitchell K	RAH
Porteous C	RAH
Williamson B	RAH
Anderson J R	Southern General
Ferguson J	Southern General
McBain G	Southern General
Sunderland G	Southern General
Welsh G	Southern General
Booth D	Stirling Royal Inf
Hendry W	Stirling Royal Inf
Holdsworth R	Stirling Royal Inf
Smith A	Stirling Royal Inf
Calvert M	Stobhill
Dalling R	Stobhill
Hansell D	Stobhill
McMahon A	Stobhill
Smith J S	Stobhill
Teenan P	Stobhill
Finn P	Vale of Leven
McCallum R	Vale of Leven
Nasser A	Vale of Leven
Taylor E	Vale of Leven
Drury J	Victoria Inf
Gillespie G	Victoria Inf
Gray G	Victoria Inf
Pickford I	Victoria Inf
Reid I	Victoria Inf
Smith I	Victoria Inf
Smith D	Victoria Inf
Doughty J	Western Inf
George D	Western Inf
McPherson S	Western Inf
O'Dwyer P	Western Inf