

MINIMALLY INVASIVE VASECTOMY

Association of Surgeons in Primary Care.

TRAINING HANDBOOK

Trainer:

Trainee:



TABLE OF CONTENTS

INTRODUCTION	4
TRAINING OBJECTIVES	5
TRAINING PROGRAMME COMPONENTS	5
CURRICULUM	10
DOCUMENTATION	12
INDEPENDENT STUDY LOG	13
INITIAL ASSESSMENT	14
LOG OF REVIEW & THEORY TUTORIALS	15
PRACTICAL TRAINING LOG 1	16
PRACTICAL TRAINING LOG 2	18
PRACTICAL TRAINING LOG 3	20
PRACTICAL TRAINING LOG 4	22
FINAL PRACTICAL ASSESSMENT LOG	24
RECOMMENDATION FOR CERTIFICATION	25
EVALUATION OF TRAINING BY TRAINEE	26

INTRODUCTION

Doctors who undertake vasectomy come from a variety of backgrounds, so a standardised training programme with a clearly defined curriculum and competencies is essential.

Certification of completion of training indicates to prospective employers and patients that the necessary skill and competencies have been acquired. For vasectomy this could apply equally to practitioners in Primary Care, whether in General Practice or Community Sexual Health settings, or to specialists, such as Obstetricians / Gynaecologists, Urologists, General Surgeons and their Trainees and independent sector providers.

This peer-reviewed module is curriculum based with both theory (pre-course reading) and practical components aimed at clinicians who will work regularly in the field of vasectomy care.

Completion of this module demonstrates basic competency in the management of vasectomy. It does not imply any responsibility for subsequent problems which may arise during an individual's vasectomy service.

Complicated procedures are beyond the scope of this training.

This qualification is not re-certifiable. Evidence of updating should be covered in appraisal / re-validation.

It is recommended that this logbook is downloaded and completed electronically. A completed logbook will be emailed to the ASPC to confirm competence in Vasectomy.

TRAINING OBJECTIVES

The module will provide a basic overview of the provision of a vasectomy service The Trainee will be able to:

- manage uncomplicated vasectomies and be aware of their limitations and when to refer more difficult cases
- perform pre-operative assessment, including history taking and explanation of the procedure, addressing the patient's concerns, as well as obtaining informed consent
- identify physical and psychological risk factors, including risks for later regret
- perform a clinical examination of the male genitalia – having acquired the skills to identify the vas and any potential operative difficulties, be aware of their own limitations and be aware of pathways of referral for complex cases
- be aware of the various methods of vasectomy and have the knowledge and skills to operate safely
- provide early post-operative care and manage simple late complications
- identify contraceptive and sexual health issues, including psychosexual, and understand the patient's perspective
- demonstrate attitudes which reflect respect, tact, empathy and concern
- demonstrate good teamwork skills
- have an awareness of the medico-legal issues

TRAINING PROGRAMME COMPONENTS

Training is undertaken not for any set period of time but until the skills, knowledge and competency levels have been reached, as it is accepted that Trainees vary in the speed at which they acquire competency.

Entry Criteria

- Following receipt of the applicant's CV, an assessment is made with regard to how much training is expected to be necessary.
- Basic reading preparation is required. Please see the Initial Assessment Form in this handbook for details.
- Those undertaking practical training must be fully registered with the GMC and paid-up members of the ASPC.
- Holding a relevant post-registration qualification in contraception/sexual healthcare is encouraged to ensure 'building block' knowledge.

Overall Structure

The following are essential components of the training programme and all have to be achieved.

- Registration
- Pre-Course Study / Reading
- Typically, 4-5 Clinic Sessions will be required

Practical Training Sessions

Practical Training sessions will follow a structured format to ensure that all Trainees are competent to perform each part of the procedure.

Procedures should be logged in the Practical Session Log Assessment for Certification should include as a minimum:

- First Session
 - o 1 observed operation (minimum)
 - o 1 assisted operation (minimum)
 - o 2 Supervised Operations (minimum)
- Following Sessions
 - o Observed and assisted operations (as necessary)
 - o 4 Supervised operations (minimum)
- Following the observed and assisted operations, operations will be supervised by the trainer, with a minimum of 15 unaided operations needed for competence. Please note that the number of unaided operations required for competency will vary between clinicians and the type of cases presented during the training session.

The Trainee must be able to operate independently by the end of their training.

Assessment for Certification

Training will be deemed complete when all components have been covered to the satisfaction of the Principal Trainer.

Once the trainer believes the trainee has reached competency, an assessment of Practical Skills and Knowledge is carried out.

If the Assessed Practical Session and Knowledge Review is satisfactory (in that the Trainee has attained all the required competencies), the Trainer will complete the Recommend Certification Form, and recommend that a Certificate be awarded.

The Principal Trainer may ask for further evidence of competence if necessary before signing the Recommend Certification form.

The ASPC Vasectomy Trainer will then provide the Trainee with a Certificate of Competency.

Whilst it is rare for a trainee not to receive Certification of Competency, participation in the training course does not automatically guarantee certification. Where competency is not reached, this will be discussed in detail with the Trainer.

Ongoing Competence

This module gives the basic knowledge and skills necessary for independent practice.

It is advised that those actively practicing in this clinical field should maintain a minimum of the following:

- One operating list per month and 40 operations per year
- Audits, including own complication and failure rates and patient satisfaction surveys
- Keeping updated through Continuing Professional Development.
- Membership of the Association of Surgeons in Primary Care.

Members have the opportunity to attend an annual conference, keep abreast of current changes and liaise with other practitioners (www.aspc-uk.net). It also runs the annual Vasectomy Study Day.

Evaluation of Training

To monitor this training programme, the ASPC asks for the Evaluation Form to be filled in and returned once training has been completed. The reports will be anonymous and presented as an audit on this Training Module.

LOGBOOK

The Logbook records the training activity and any self-directed learning, Maintenance and regular review of the Logbook during Practical Training Sessions, reviews and knowledge based assessments will allow the Trainer and Trainee to monitor progress and identify deficiencies over the course of training.

The Trainer must sign the appropriate sections of the Logbook, documenting attendance, skill and competence.

Data Protection

Trainees should ensure that any patient information held on mobile devices, personal computers and in paperwork is secure in order to comply with the General Data Protection Regulation from 25 May 2018 or any other relevant information governance requirement at the time.

To comply, the information should be retained in line with the relevant information governance policies.

Trainees undertaking training should ensure they are familiar with the existing regulations and the requirements of their employing authority to ensure that they are complying with the National and local requirements for data protection.

CURRICULUM

Training for Minimally Invasive Vasectomy will cover the following points.

Pre-registration reading (copies can be sent on request)

Consent



bmj.h1481.full.pdf



Consent GMC.pdf



Consent DOH.pdf

Contraception



long-acting-reversi
ble-contraception-y



your-guide-to-cont
raception.pdf



male-and-female-st
erilisation-your-guic

Guidance



MaleFemaleSterilisa
tion.pdf



Vasectomy_AUA
2012 unabridged.pc

Technique



NSV Illustrated
Guide.pdf

Knowledge

- Legal and ethical aspects of sterilisation.
- Organisation of services including local referral pathways.
- Anatomy, physiology and implications of variations from normal for local anaesthetic vasectomy.
- Vasectomy procedures including operative options, risks, pre-assessment and aftercare.
- Standards for audit.
- Complications: bleeding, haematoma, infection, pain.
- Contraceptive alternatives.

Pre-Procedure Assessment

- Taking a history
- Performing a risk assessment: 1: Physical, 2: Psycho-social, 3: Sexual
- Performing appropriate clinical examination/ surgical pre-assessment, including assessment of genitalia
- Identifying patients unsuitable for local anaesthetic procedure.
- Counselling non-directively about options available and associated health issues to men and their partners.
- Discussing procedure including risks and post procedure care.
- Answering any questions from patient accompanying person whilst respecting right to confidentiality.
- Discussing semenology, procedure for semen analysis and the importance of the all clear result
- Arranging procedure and associated medication
- Completing documentation
- Obtaining valid consent
- Providing contraceptive and sexual health advice in the interim until all clear confirmed.

Clinical Procedure

- Choosing appropriate instruments and checking equipment.
- Examining the genitalia.
- Ensuring no conditions likely to cause difficulty with LA procedure (varicocele, testicular abnormality)
- Positioning patient
- Identifying the vas
- Administering adequate local anaesthetic and achieve anaesthesia
- Fixing and exteriorising vas bilaterally
- Occluding vas bilaterally
- Ensuring haemostasis

- Revision of post-operative condition of patient
- Giving post-operative advice, including wound management.
- Explaining what is normal and abnormal (signs and symptoms) in next few weeks.
- Reiterating whom/how to contact for help/advice/support
- Complete documentation and arrange appropriately timed post-operative semen analysis

Post-Procedure

- Interpret semenology results and relay information to patient
- Management of persistent spermatozoa and the indications for special clearance.
- Complete documentation
- Complete audit and review regularly.

DOCUMENTATION

Trainee Self Directed Study

- Independent Study Log
- Initial Assessment Form

Reviews and Theory

- Theory and Knowledge Log

Practical Training Sessions

- Practical Training Logs (x 4)

Final Assessment Session

- Final Practical Session Log

Recommendation for Certification Training Evaluation Form.

Training Evaluation Form

INDEPENDENT STUDY LOG

Please use this form to record and additional independent study carried out in addition to the ASPC Training Schedule.

Trainee Name: _____

Date	Topics Covered
Date: Signature of Trainee:	
Date: Signature of Trainee:	
Date: Signature of Trainee:	
Date: Signature of Trainee:	
Date: Signature of Trainee:	

Trainer:_____ Signature:_____ Date:_____

ESSENTIAL READING

- FSRH guidelines on Male and Female Sterilisation. Clinical Effectiveness Unit September 2014 <https://www.fsrh.org/documents/cec-ceu-guidance-sterilisation-summary-sep-2014/cec-ceu-guidance-sterilisation-summary-sep-2014.pdf>
- NICE Guidance: Long-acting Reversible Contraception <https://www.nice.org.uk/guidance/cg30>
- No Scalpel Vasectomy – An Illustrated Guide for Surgeons <https://www.engenderhealth.org/pubs/family-planning/nsv-illustrated-guide.php>

PREVIOUS LEVEL OF KNOWLEDGE

- Effectiveness of vasectomy compared with alternative methods of contraception
- Advantages & disadvantages of alternative contraceptive methods
- Early & late complications (including failure rate) Contraindications to community based vasectomy procedures Rationale for post-op semenology
- Methodology for audit of own complication rates

Previous Experience:

LEARNING OBJECTIVES OF THE TRAINING PROGRAMME ARE TO ACHIEVE COMPETENCE IN ALL AREAS OF OUR CURRICULUM.

I confirm a full assessment has been carried out regarding the trainee's knowledge and experience and that the trainee has sufficient competency to start the trainee programme.

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

LOG OF REVIEW & THEORY TUTORIALS

Trainee Name: _____

Date	Topics Covered
Date: Signature of Trainer:	
Date: Signature of Trainer:	
Date: Signature of Trainer:	
Date: Signature of Trainer:	
Date: Signature of Trainer:	
FINAL KNOWLEDGE ASSESSMENT Date: Signature of Trainer:	Topics Covered and Comments by Trainer

I confirm satisfactory competence in knowledge has been achieved.

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

PRACTICAL TRAINING LOG: SESSION NUMBER 1

Trainee Name:

Date of Session:

Time of Session

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

SESSION NUMBER 1 (CONTINUED)

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

REVIEW OF SESSION:

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

Time of Session

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

Trainee: _____ Signature: _____ Date: _____

SESSION NUMBER 2 (CONTINUED)

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

REVIEW OF SESSION:

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

Time of Session

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

SESSION NUMBER 3(CONTINUED)

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

REVIEW OF SESSION:

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

Time of Session

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

Trainee: _____ Signature: _____ Date: _____

SESSION NUMBER 4 (CONTINUED)

Case Number & Time	Observations	Special Learning Points	Reflective Learning & Aims

REVIEW OF SESSION:

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

FINAL PRACTICAL ASSESSMENT LOG

Trainee Name: _____

Log of Procedure (date)	Trainer's Comments

Summary of any further training required:

History Taking Skills - Facilitates patient's history, effectively uses appropriate questions to obtain accurate, adequate information, responds appropriately to verbal and non-verbal cues.

Physical Examination Skills - Follows appropriate examination of scrotum, explains to patient; sensitive to patient's comfort, modesty.

Clinical Diagnostic Skills/Judgement/Synthesis - Considers risks

Communication/Counselling Skills - Explores patients' perspective, jargon free, open and honest, empathic

Organisation/Efficiency - Timely, succinct. Summaries

Humanistic Qualities/Professionalism - Shows respect, compassion, empathy, establishes trust; Attends to patient's needs of comfort, respect, and confidentiality. Behaves in an ethical manner. Aware of limitations.

Overall Clinical Competence - Demonstrates satisfactory clinical judgement, caring effectiveness. Efficiency, appropriate use of resources, balances risks and benefits, awareness of own limitations.

I confirm satisfactory competence in knowledge has been achieved.

Trainer: _____ Signature: _____ Date: _____

Trainee: _____ Signature: _____ Date: _____

RECOMMENDATION FOR CERTIFICATION

Trainee Name: _____

The trainee has completed:

	Number
Review/Theory Sessions	
Vasectomies; observed	
Vasectomies; assisted with	
Vasectomies; completed independently	

I certify that all the training objectives and training competencies identified in the Curriculum have been achieved, including knowledge, skills and pre-course reading.

I recommend that this Trainee is provided with Certification for performing Minimally Invasive Vasectomy

Trainer Name:	
Trainer Signature:	
Date:	

EVALUATION OF TRAINING BY TRAINEE

To be completed by the Trainee on completion of the training programme.

1. Has the training programme given you the skills and confidence to counsel men requesting vasectomy independently?

2. How confident are you at managing patients requesting local anaesthetic vasectomy?

Confident

Fairly Confident

Not Confident

Comments:

3. How confident are you at identifying men who need specialist vasectomy care?

Confident

Fairly Confident

Not Confident

Comments:

4. Overall comments about the adequacy of training (including Trainer(s) and centre)

	Excellent	Good	Average	Poor
Organisation of teaching				
Content of teaching				
Quality of teaching				
Support from Trainer(s)				
Organisation of teaching				

Comments: