

DESIGN AND VALIDATION OF A TRAINING PROGRAM ON PAEDIATRIC THORACOSCOPIC SURGERY IN SPAIN

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Background: We present our experience in the design and development phases of a training program on paediatric thoracoscopic surgery, and its face validity (FV) by the course attendants.

Methods: Data presented in this study was extracted from 6 consecutive editions, from 2006 to 2011, of our centre's Paediatric Thoracic Endosurgery Course. All these activities were previously approved by our ethics and animal welfare committee. The training model, which consists of a 21 hour program, begins with the teaching of basic concepts on surgical ergonomics and working instruments. Afterwards the attendants proceed with the acquisition of basic dexterity through the performance of exercises on organic and inorganic tissues, hands-on physical simulator. During the second and third days of the course, different surgical techniques of increasing difficulty are undertaken on the ovine animal model, under constant tutoring by the expert faculty. These techniques included sympathectomy, pulmonary bulla resection, dissection of intercostal vessels, oesophageal dissection and lung lobectomy. At the end of the program, a subjective evaluation questionnaire was handed out to the attendant, in which different didactic and organizational aspects were considered.

Results: A total of 58 paediatric surgeons attended our centre during the six mentioned editions of the training activity, all of those answered the subjective questionnaire (100%). The attendants' assessment on the different topics and practiced techniques revealed a highly positive score, obtaining a score of more than nine points over ten in all questions. Furthermore, 89,2% was in accordance with the course total duration, whilst 10,8% considered that it should be of longer duration. Nevertheless 100% considered correct the distribution between theory and hands-on activity. Regarding their abilities self assessment, 73,4% considered themselves capacitated to perform trained procedures on live patients.

Conclusions: The proposed training model on paediatric thoracoscopic surgery has obtained a very high score (FV), increasing attendants' "self-confidence" to perform the presented techniques on their daily clinical practice.

