

# Laparoscopic Colectomy Video Review Program

Michigan Surgical Quality Collaborative

# Improving Surgical Technical Quality

- ▶ Improving technical outcomes through peer to peer feedback and coaching while maintaining surgeon anonymity
- ▶ Adapt a rating scale for technical quality for colorectal surgery using video submission
- ▶ Assess its relationship to short term surgical outcomes
- ▶ Participate in video review sessions in which surgeons can discuss particular cases of interest for peer input and feedback

# Background

- ▶ Rooted in the landmark work of the bariatric surgeons from the Michigan Bariatric Surgery Collaborative
  - ▶ Determined that surgical skill is a strong predictor of clinical outcomes
  - ▶ NJEM 2013; 369: 1434-1442
- ▶ Colorectal surgery is uniquely positioned as an extension of this work due to:
  - ▶ High complication rates
  - ▶ High penetrance of laparoscopy in Michigan

# Consent

- ▶ The University of Michigan IRB has waived the need for informed patient consent as the study group is not patients but surgeons.
  - ▶ By sending videos and agreeing to rate the videos of others, consent is implied.
  - ▶ We will house the surgeon identifiers here at MSQC and they will only be used to correlate peer ratings with MSQC colectomy outcomes.
- ▶ Please make sure that your consent for surgery allows for the use of photos or video for educational purposes and, as mentioned, remove patient identifiers.
  - ▶ Permission on the part of the patient to have their surgery video recorded is an important detail for the home institution, as determined by our IRB, and an important step as these projects move forward into further aspects such as being part of a national surgeon coaching project.

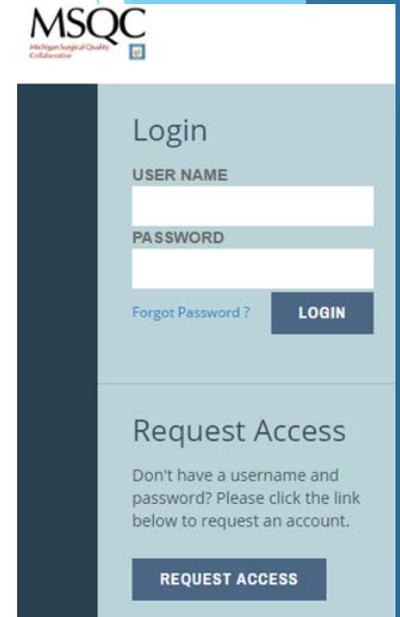
# Video Review Process

- ▶ Submit your contact form to participate: <http://msqc.org/video-coaching-project>
- ▶ Record a recent laparoscopic colectomy surgery of your choice. Remove any patient identifiers
- ▶ Upload your video to Box and provide a few details about the video submitted
  - ▶ Note: Once the contact form has been submitted, MSQC will send instructions on how to upload your video and details of next steps
- ▶ Our team edits the video to include only the most important parts and uploaded to our review application (each video is approx. 20 minutes after editing)

# Performing Reviews

After the surgeon's edited video is uploaded to the MSQC Video Review Application:

- ▶ Self and peer video review is done through the MSQC Video Review Application using your MSQC username and password
  - ▶ Note: Same that is used to view your hospitals reports, surgeon specific reports
- ▶ The MSQC Colectomy Video Review Project uses a tool validated for laparoscopic right colectomy in conjunction with the American Society of Colon and Rectal Surgeons (ASCRS).



The screenshot shows the MSQC Video Review Application interface. At the top left is the MSQC logo with the text "Michigan Surgical Quality Collaborative". Below the logo is a "Login" section with two input fields for "USER NAME" and "PASSWORD", a "Forgot Password?" link, and a "LOGIN" button. Below the login section is a "Request Access" section with the text "Don't have a username and password? Please click the link below to request an account." and a "REQUEST ACCESS" button.

# Performing Reviews

- ▶ Each video review consists of 10 questions with 1-5 ratings
- ▶ Review Requirements:
  - ▶ Self Review: Surgeon should complete a self-review their own edited video
    - ▶ Self-reviews are private-not able to be viewed by peers and also not included in the overall review results
  - ▶ Peer Reviews: Each surgeon should also complete 10 anonymous peer video reviews for which 5 CME's can be awarded
    - ▶ Approx. 30 minutes per a video

# Review Questions

Pedicle- Evaluate handling of the major vascular pedicle for the colectomy performed	Exposure- Evaluate ability to create tension and view for the procedure
Respect for Tissue- Evaluate handling of tissue during dissection	Tissue Planes- Evaluate ability to stay in the appropriate dissection planes
Time and Motion- Evaluate the efficiency of movement during the procedure	Completeness of Dissection- Evaluate the overall level of colon mobilization achieved
Instrument Handling - Evaluate ability to use the instruments of laparoscopy	Overall Technical Skill- Evaluate the overall technical skill
Flow of Operation- Evaluate overall flow through the steps of the procedure	How technically difficult did this case appear to be?

# Screenshot of a Video Review



**Pedicle- Evaluate handling of the major vascular pedicle for the colectomy performed**

*Choose only one*

**Respect for Tissue- Evaluate handling of tissue during dissection**

*Choose only one*

**Time and Motion- Evaluate the efficiency of movement during the procedure**

*Choose only one*

**Instrument Handling - Evaluate ability to use the instruments of laparoscopy**

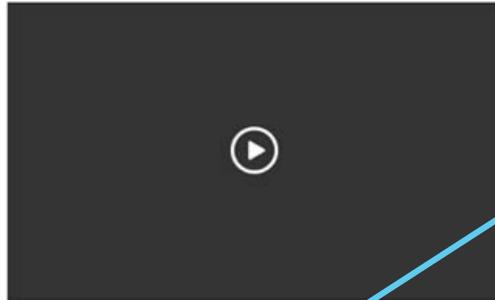
*Choose only one*

# Viewing Your Results

Video Review List // Video Review Details

Review ID:8, Upload Date: 04/19/2017 12:46 PM.

Video Review - By Question



- Videos are closed to reviews after 10 peer reviews
- Results can be viewed in real time
- Self-review marked in a different color only reviewable to the surgeon who the video belong to

CATEGORY	REVIEWER	OVERALL
Pedicle- Evaluate handling of the major vascular pedicle for the colectomy performed	4 3	3.5
Respect for Tissue- Evaluate handling of tissue during dissection	4 3	3.5
Time and Motion- Evaluate the	3 4	3.5



# Get Involved Today!

- ▶ Complete our [contact form](#) to sign up!
- ▶ Contact [MSQCustomerSupport@med.umich.edu](mailto:MSQCustomerSupport@med.umich.edu) with further questions
- ▶ The University of Michigan Medical School is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. The University of Michigan Medical School designates this enduring material for a maximum of 5.0 *AMA PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.