General principles Anesthesia for robotic surgery Physiology of pneumoperitoneum Complications Air embolism Arrest... etc Preoperative assessment and patient selection Patient positioning and prevention of injury Bedside – including port placement and docking Draping robot (basic understanding in order to be able to deal with trouble shooting) Need all 4 arms to be draped even if not using Port placement Establishing pneumoperitoneum Hasson Veress Optical Insufflation pressure Complications and trouble shooting Eg. Adhesions, Obesity, Narrow pelvis, Prior surgery or radiotherapy, Existing stoma Docking the robot Modelled on Device teaching Targeting Ensuring adequate space between arms

Burping

Safety

e.g. height limitation

Locking instruments to avoid drift Emergency undocking Trouble shooting errors and faults Instruments Familiarity with commonly used laparoscopic instruments for the bedside assistant Inserting and exchanging instruments Diathermy settings Console How does it all work? Basic rundown of buttons etc Controlling the camera Use of different lenses and changing view Understanding when/why to use different lens Swapping between instruments Fourth arm control Clutching Customising your setup **Ergonomics** Scaling ratio movement Adjusts movement speed to surgeon preference Default 3:1, 2:1, 1.5:1 Available instruments Diathermy settings **OPERATING** Basic surgical skills on the console **Haptics** Definition

Wrist movements
Understanding how the system works and how optimise use
Grasping objects
Passing items between hands
Cauterising
Settings
Knot tying
Suturing
Dissection and developing tissue planes
Emergency management
Vascular emergency
??other essential crisis management
Trouble shooting
Instrument out of view
Use instrument out of view visual cues
Only works if foot is on camera pedal
Poor vision
Switch dominant eye if smudge only on one side
Can adjust zoom if tissue close and there is spatter/diathermy smoke issue
Surgical skills for the bedside assistant
Fundamental laparoscopic skills
Safe instrument handling
Suctioning
Clipping
Stapling
Cutting
Specimen extraction

Trouble shooting
Loss of pneumoperitoneum
Port loss (inadvertent removal)
Port site closure
Undocking robot
Emergency and routine
Advanced aspects of operating
Haemostatic agents
Stapling
Fluorescence imaging
Tilepro
E.g. USS
Simulation Training for Robotic Surgery
Communication and human factors
Team based training
Operating room communication
Virtual Reality Simulator Training
Procedural Training
3D printed synthetic human organ hydrogel models (this model may soon replace animal and cadaver training in robotics)
updates could be included with scannable QR codes and searchable web links. These links will provide access to the latest instructional content for the major robotic surgery systems
SPECIALTY SPECIFIC OUTLINE
For each specialty
Other fundamental skills not covered in basic course?
Core procedures
For each core procedure:

Equipment required
Patient positioning & operating room setup
Port placement
Docking
Step by step procedure guide – operative steps/technique
Particular specialised skills required for this procedure
Urology
Nephrectomy partial nephrectomy pyeloplasty, intrarenal stone surgery, in surgery, nephroureterectomy, cystectomy, cystoprostatectomy, radical prostatectomy, retroperitoneal node to section.
General surgery
Hernia surgery including incisional hernia and mesh hernia repair. Colorectal cancer surgery. Upper gastrointestinal surgery including obesity surgery antireflux surgery and gastric surgery. Pancreatic surgery. Appendicectomy and gallbladder surgery.
General gynaecology and gynaecology Oncology
Hysterectomy oophorectomy endometriosis surgery
Radical hysterectomy radical ovarian surgery and retroperitoneal node to section
Sacrocolpopexy /incontinence surgery
Cardiac surgery
Mitral valve repair/replacement
ENT surgery

Approach(es)

Floor of mouth tonsillar vocal cord surgery

Thoracic surgery

Lobectomy, lung cancer surgery, thyroid surgery, diaphragmatic surgery, flexible endobronchial surgery

Endoscopic flex robotics for oesophageal and gastric surgery performed by gastroenterologists (a new market)