

C-SAS.3 Small Animal Soft Tissue Surgery (B)

Credits: 10 (100 hours)

Provider: Veterinary Postgraduate Unit – Institute of Veterinary Science

RCVS Content Covered

The following outlines the modular content as set out by the RCVS.

The syllabus is divided into sections based on anatomical location. A series of surgical procedures is listed in each section. Candidates will be expected to become familiar with the following categories of information for each surgical procedure:

Signalment, clinical signs, differential diagnosis
Appropriate investigative techniques
Options for surgical management of the disease
Anatomy, procedures and techniques
Special issues regarding theatre practice or aseptic technique
Prognosis and outcomes
Complications

SURGICAL PROCEDURES

All surgical procedures listed in the syllabus are categorised in terms of difficulty as A, B or C. The rationale for this is that there are clearly some surgical procedures that candidates studying for the Certificate in Small Animal Practice would be expected to fully competent (category A). Other more challenging procedures are grouped in category B which, by the time the full set of surgical modules has been completed, the candidate may be expected to perform competently. Category C procedures are those advanced techniques which are usually performed by surgeons with significant post graduate training and experience, and candidates for the CertSAP will not be expected to demonstrate experience or competence in these techniques. However, candidates will be expected to understand an understanding of the full range of techniques in terms of indications, diagnosis, complications and prognosis, sufficient to be able to advise referral where appropriate.

SURGICAL SYLLABUS

- Alimentary:
 - Oesophagus
 - Cricopharyngeal myotomy for achalasia C
 - Per-endoscopic retrieval of oesophageal foreign body B
 - Intra-thoracic surgical retrieval of oesophageal foreign body C
 - Oesophagotomy B/C
 - Oesophageal anastamosis C
 - Oesophageal hiatal herniorraphy C
 - Gastrointestinal
 - Gastrotomy A

- Gastropexy: tube, belt, incisional, circumcostal, midline B
- Tube gastrostomy A/B
- Fredect-Ramstedt pyloromyotomy B
- Heineke-Mikulicz pyloroplasty B
- Y-U antral pyloroplasty B
- Bilroth I and II C
- Enterotomy A
- Enterectomy A
- Sub-total colectomy B
- o Liver, Pancreas and Spleen
 - Cholecystectomy C
 - Cholecystoduodenostomy C
 - Liver lobectomy B/C
 - Hepatic biopsy B
 - Portocaval shunts C
 - Pancreatic biopsy B/C
 - Pancreatectomy C
 - Splenectomy B
 - Partial splenectomy C
- Anorectal surgery
 - Pelvic split C
 - Rectal pull out B
 - Dorsal approach to rectum C
 - Perineal herniorraphy B
 - Anal furunculosis B
 - Anal sacculectomy B
 - Resection of anal sac adenocarcinoma C
- Genitourinary
 - Nephrectomy B
 - Nephrotomy C
 - Surgery for ectopic ureters C
 - Cystotomy A
 - Tube cystotomy A/B
 - Surgery for incontinence C
 - Vulvovaginectomy C
 - Urethrotomy and urethrostomy B
 - Perineal urethrostomy (cats) B
 - Castration A
 - Prostatic abscess (omentalisation) B
 - Prostatic cysts (omentalisation) B
 - Ovariohysterectomy A
 - Caesarian section A
 - Episiotomy A
 - Episioplasty B
- Diaphragm and body wall
 - Body wall hernias including inguinal and umbilical A/B
 - Body wall trauma including rupture of pre-pubic tendon B/C
 - Body wall resection for oncologic resection B/C
 - Diaphragmatic rupture B
 - Diaphragmatic congenital hernia B/C

- Endocrine
 - Adrenalectomy C
 - Thyroidectomy
 - Cat B
 - Dog C
 - Parathyroidectomy B/C
 - Insulinoma C

Aim of the Module

The aim of this module is to develop in-depth understanding of soft tissue surgery; extending and consolidating candidates' current knowledge and practice experience and developing a comprehensive understanding of the application of that knowledge in a professional practice environment.

Learning Outcomes

At the end of the module, successful candidates should be able to:

- demonstrate a systematic understanding of the anatomical, physiological, immunological and pathological processes involved in specific surgical diseases, including the relationships between the condition, surgical technique and the overall health status of the patient;
- demonstrate a comprehensive knowledge of the clinical presentation of the common surgical conditions affecting dogs, cats and small mammals involving the oesophagus, gastrointestinal, liver, pancreas, spleen, anorectal, genitourinary, diaphragm, body wall and endocrine regions;
- 3. demonstrate a comprehensive understanding of appropriate diagnostic processes applicable to surgery involving the oesophagus, gastrointestinal, liver, pancreas, spleen, anorectal, genitourinary, diaphragm, body wall and endocrine regions;
- 4. demonstrate the ability to utilise a sound clinical reasoning process and a critical awareness of current evidence based medicine, incorporating evidence from the diagnostic database and scientific literature as well as the ability to appropriately adapt to client, animal and practice factors;
- 5. demonstrate the ability to recognise the appropriate case for onward referral.

Module Structure

The syllabus will be divided into 7 study units. Each study unit will be based on an anatomical location. A series of surgical procedures is listed in each study unit.

Candidates will be expected to become familiar, for each surgical procedure, with signalment, clinical signs, differential diagnosis, appropriate investigative techniques, options for surgical management of the disease, anatomy, procedures and techniques, special issues regarding theatre practice or aseptic technique, prognosis and outcomes, complications.

These surgical procedures are categorised, in terms of difficulty, as A,B or C. For category A procedures candidates would be expected to be fully competent, and by the end of the module may be expected to perform competently all category B procedures. However, candidates will not be expected to demonstrate experience or competence in category C

techniques but will be expected to understand an understanding of the full range of techniques sufficient to be able to advise referral where appropriate.

Study Unit 1 Oesophagus

Category B procedures: Per-endoscopic retrieval of oesophageal foreign body. Category C procedures: Cricopharyngeal myotomy for achalasia, Intra-thoracic surgical retrieval of oesophageal foreign body, Oesophagotomy, Oesophageal anastamosis, Oesophageal hiatal herniorraphy.

Study Unit 2 Gastrointestinal

Category A procedures: Gastrotomy, Enterectomy, Enterectomy.

Category B procedures: Gastropexy (tube, belt, incisional, circumcostal, midline), Tube gastrostomy, Fredect-Ramstedt pyloromyotomy, Heineke-Mikulicz pyloroplasty, Y-U antral pyloroplasty.

Category C procedures: Bilroth I and II

Study Unit 3 Liver, Pancreas and Spleen

Category B procedures: Hepatic biopsy, Splenectomy.

Category C procedures: Cholecystectomy, Cholecystoduodenostomy, Liver lobectomy,

Portocaval shunts, Pancreatic biopsy, Pancreatectomy, Partial splenectomy.

Study Unit 4 Anorectal surgery

Category B procedures: Rectal pull out, Perineal herniorraphy, Anal furunculosis, Anal sacculectomy.

Category C procedures: Pelvic split, Dorsal approach to rectum, Resection of anal sac adenocarcinoma.

Study Unit 5 Genitourinary

Category A procedures: Cystotomy, Castration, Ovariohysterectomy, Caesarian section, Episiotomy.

Category B procedures: Nephrectomy, Tube cystotomy, Urethrotomy and urethrostomy, Perineal urethrostomy (cats), Prostatic abscess (omentalisation), Prostatic cysts (omentalisation), Episioplasty.

Category C procedures: Nephrotomy, Surgery for ectopic ureters, Surgery for incontinence, Vulvovaginectomy.

Study Unit 6 Diaphragm and Body Wall

Category A procedures: Body wall hernias including inguinal and umbilical

Category B procedures: Diagphrammatic rupture

Category C procedures: Body wall hernias including rupture of pre-pubic tendon, Body wall

resection for oncologic resection, Diagphrammatic congenital hernia.

Study Unit 7 Endocrine

Category B procedures: Thyroidectomy (cat)

Category C procedures: Adrenalectomy, Thyroidectomy (dog), Parathyroidectomy,

Insulinoma.

Assessment Strategy

Portfolio of cases (20 case logbook presenting a broad spread of cases covered by the study units outlined above), 3 x reflective case reports (1500 words each) where you will need to be prepared to present cases of abdominal, anorectal, body wall or diaphragmatic surgery, 1 x short answer question and/or MCQ test and 1 x journal critique/journal club presentation (pass/fail)

PLEASE NOTE: It is your responsibility to ensure that you have access to sufficient appropriate cases where you were the primary decision maker to produce adequate material for the module. This may not be possible with some internship positions. You must also be aware of any limitations of your facilities that may make the accumulation of appropriate cases difficult or impossible.