Background: Frequent accessibility to & participation in cadaveric operative courses enables surgical skills acquisition and perfection. Our decommissioned original surgical theatres have been transformed into a designated surgical skills lab with specific & secure space allocation for high fidelity operative simulation.

Methods: With medical council and The Royal College of Surgeons in Ireland (RCSI) Continuing Professional Development (CPD) approval, a surgery: anatomy collaboration, dedicated support personnel and university: hospital cooperation, an on-site cadaveric operative session programme was initiated. Sessions include a minimum of two surgeon trainers to allow two theatres run concurrently each with a human donor cadaver. Operations have included open perforated duodenal ulcer repair, appendicectomy, cholecystectomy, splenectomy, Hartman’s procedure and right hemicolectomy with complete mesocolic excision. Feedback was measured via survey.

Results: Five planned three hour long sessions have taken place over the past 15 months (3 between August and December 2019, 2 between October and November 2020) with up to 14 participants per course (including interns, senior house officers, registrars and physician assistants from four differing specialities). Average sessions rating was excellent with all advocated continuance on a regular basis (50% requesting once a month sessions, 36% weekly, 16 % six weekly) to aid their operative skill development. Eighty percent expressed interest in practicing minimally invasive surgical techniques.

Conclusions: Establishment of this nationally unique in-hospital setting has been feasible and well embraced with scope for further development by speciality interests. Additional courses enabling deepening specialism at consultant level and surgical procedural, process and device development provide synergy with the training course facility and faculty allowing economy and efficiency of scale.

Keywords: Anatomy; cadaveric; onsite; operative; simulation

Acknowledgments

Funding: None.

Footnote

Conflicts of Interest: All authors have completed the ICMJE uniform disclosure form (available at http://dx.doi.org/10.21037/map-21-ab180). The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: https://creativecommons.org/licenses/by-nc-nd/4.0/.

Cite this abstract as: Khan MF, McInerney N, Jones J, Killeen D, Myles C, Cahill R. Establishment of “Onsite Cadaveric Operative Sessions” (O.C.O.S) at a major teaching university hospital in Ireland. Mesentery Peritoneum 2021;5:AB180.