



ENT IMPERIAL

Delivering Excellence in Surgical Care

## Paediatric Bronchoscopy Simulation

In this station you will perform paediatric bronchoscopy and removal of foreign body. You will perform the following steps:

1. Bronchoscope assembly
2. Bronchoscope insertion
3. Identify glottis
4. Rotate & Insert into trachea
5. Proceed to bronchi
6. Find FB
7. Remove FB
8. Complete full Bronchoscopy
9. Re-insert FB

Please assist each other in these tasks

You will be assessed throughout, please ensure that all forms are filled in

Thank you





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## PAEDIATRIC BRONCHOSCOPY SKILLS LAB

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Presentation prepared by:  
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### Objectives



- In this session you will have the perform bronchoscopy on a validated pig model, carrying out the following tasks:
  - Bronchoscope assembly
  - Bronchoscope insertion
  - Identify glottis
  - Rotate & Insert into trachea
  - Proceed to bronchi
  - Find FB
  - Remove FB
  - Complete full Bronchoscopy
  - Re-insert FB

## FB removal



- Aim:
  - Find
  - Remove
  - Check for more
  - Re-insert
- Negative:
  - Advancement
  - Trauma
  - Drops



## Debrief and feedback



- At the end of the session you will receive personalised feedback regarding your performance.
- You will also be asked to complete a feedback form assessing face and content validity of the simulation.

## Task Specific assessment – Paediatric Bronchoscopy

Trainee:		Assessor:				
T12	Demonstrates knowledge of rigid endoscopy and protects structures while negotiating the scope	N	D	S		
T13	Achieves an adequate passage through oropharynx and larynx through purposeful movements in order to intubate the scope successfully	N	D	S		
T14	Makes effective use of suction and keeps tracheal and bronchial lumen in centre	N	D	S		
		Unable to perform		Able to perform majority		Able to perform majority
3	Assembly of appropriate laryngoscopic and bronchoscopic equipment	1	2	3	4	5
5a	Visual inspection of supraglottis/glottis					
5b	Visual inspection of subglottis					
5c	Visual inspection of trachea/carina/bronchii					
6a	Atraumatic removal of foreign body					

Comments

## Global assessment: Paediatric bronchoscopy

Please circle most appropriate for N (Not assessed), D (Development required), S (Satisfactory), as well as the most appropriate score on the Likert scale 1-5

Trainee:					Assessor:					
G1 Follows an agreed, logical sequence or protocol for the procedure					N	D	S			
1	2	3	4	5						
G2 Consistently handles tissue well with minimal damage					N	D	S			
1	2	3	4	5						
G4 Demonstrates a sound technique of knots and sutures					N	D	S			
1	2	3	4	5						
G5 Uses instruments appropriately and safely					N	D	S			
1	2	3	4	5						
G6 Proceeds at appropriate pace with economy of movements					N	D	S			
1	2	3	4	5						
G9 Uses assistant(s) to the best advantage at all times					N	D	S			
1	2	3	4	5						
G10 Communicates clearly and consistently with the scrub team or nurses					N	D	S			
1	2	3	4	5						
G11 Communicates clearly and consistently with the anaesthetist					N	D	S			
1	2	3	4	5						
Overall Performance and Outcome					0	1	2	3	4	

## Face and content validity – Paediatric Bronchoscopy

Name:	Grade:					
State the level of agreement with the following statements:	strongly disagree	disagree	undecided	agree	strongly agree	Manikin
Face						
Appearance of anatomical structures is realistic	1	2	3	4	5	
Tissue feel is realistic	1	2	3	4	5	
Image projection and graphics are realistic	1	2	3	4	5	
Depth perception is realistic	1	2	3	4	5	
Instrument application is realistic	1	2	3	4	5	
Content						
This model is useful for teaching anatomy	1	2	3	4	5	
This model is useful for teaching surgical planning	1	2	3	4	5	
This model is useful for improving operative technique	1	2	3	4	5	
This model is useful for improving hand-eye coordination	1	2	3	4	5	
This model is useful as an over all training tool	1	2	3	4	5	
Task						
This model is useful for teaching Bronchoscope assembly	1	2	3	4	5	
This model is useful for teaching Tracheo-Bronchoscopy	1	2	3	4	5	
This model is useful for teaching FB removal	1	2	3	4	5	
Curriculum						
Skills I learned are transferable to the operating theatre	1	2	3	4	5	
This model should be incorporated into training curriculum	1	2	3	4	5	
I would recommend this model to trainees	1	2	3	4	5	