DOPyS polypectomy for colonoscopy and sigmoidoscopy

Date of Procedure							
Trainee Name				IMC Reg	gistration No.		
Trainer Name				IMC Reg	gistration No.		
Polyp type Please tick (🗸)	Stalked Sm	nall sessile lesion/E	MR				
Polyp Site				Polyp si	ze (mm)		
Difficulty of case Please tick (🗸)	Easy Moderate Complicated						
Level of supervision Complete DOPyS form by ticking box to indicate the appropriate level of supervision required for each item below. Constructive feedback is key to this tool assisting in skill development.	Maximal supervision Supervisor undertakes the majority of the tasks/decisions & delivers constant verbal prompts	Significant supervision Trainee undertakes tasks requiring frequent supervisor input and verbal prompts	Minima supervi Trainee ur tasks requ occasiona superviso and verba	ision ndertakes uiring al	Competent independent practice No supervision required		Not applicable
	OPTIMISI	NG VIEW OF / AC	CCESS 1	O THE F	POLYP		
Achieves optimal polyp views and position							
Determines full extent of lesion							
Adjusts/stabilises scope position							
Chooses appropriate polypectomy technique							
Checks equipment and snare closure prior to insertion							
Checks appropriate diathermy settings							
Uses appropriate polypectomy technique							
Photo-documents pre and post polypectomy							

Level of supervision	Maximal supervision	Significant supervision	Minimal supervision	Competent for independent practice	Not applicable
Comments					
		STALKED F	POLYPS		
Selects appropriate snare size					
Directs snare accurately over polyp head					
Correctly selects en-bloc or piecemeal removal					
Advances snare sheath towards stalk as snare closed					
Places snare at appropriate position on the stalk					
Mobilises polyp and applies appropriate degree of diathermy					
Comments					
SM	IALL SESSILE LE	ESIONS / ENDOS	SCOPIC MUCOS	AL RESECTION	
Adequate sub mucosal injection					
Checks lesion lifts adequately					
Selects appropriate snare size					
Directs snare accurately over the lesion					

Level of supervision	Maximal supervision	Significant supervision	Minimal supervision	Competent for independent practice	Not applicable
Correctly selects en-bloc or piecemeal removal depending on size					
Appropriate positioning of snare over lesion as snare closed					
Tents lesion gently away from the mucosa					
Uses cold snare technique or applies appropriate diathermy					
Ensures adequate haemostasis prior to further resection					
Comments					
		POST POLYP	ECTOMY		
Examines remnant stalk/polyp base					
Identifies and appropriately treats residual polyp					
Identifies and appropriately treats					
Identifies and appropriately treats residual polyp Identifies bleeding and performs adequate endoscopic hemostasis if					
Identifies and appropriately treats residual polyp Identifies bleeding and performs adequate endoscopic hemostasis if appropriate Retrieves, or attempts retrieval					

Level of supervision Please tick ()	Maximal supervision	Significant supervision	Minimal supervision	Competent for independent practice	Not applicable
ENTS (ENDOSCOPIC NON-TECHNICAL SKILLS)					
Communication and teamwork					
Situation awareness					
Leadership					
Judgement and decision making					
Comments					
The objectives sh			FOR THE NEXT (CASE (PDP) once DOPS	is completed
1.					
2.					
3.					
Overall Degree of Supervision required Complete DOPS form by ticking box to indicate the appropriate level of supervision required for each item below. Constructive feedback is key to this tool assisting in skill development.	Maximal supervision Supervisor undertakes the majority of the tasks/decisions & delivers constant verbal prompts	Significant supervision Trainee undertakes tasks requiring frequent supervisor input and verbal prompts	Minimal supervision Trainee undertakes tasks requiring occasional supervisor input and verbal prompts	Competent for independent practice No supervision required	Not applicable
Please tick (appropriate box					

DOPS form descriptors

	OPTIMISING VIEW OF / ACCESS TO THE POLYP
Achieves optimal polyp views and position	Ensures clear views by aspiration/insufflation/wash and maintains optimal polyp position (5-6'0'clock). Takes appropriate action for position correction and clear views throughout the procedure.
Determines full extent of lesion	Demonstrates assessing and determining full extent of the lesion using adjunctive measures (e.g. bubble breaker, NBI, dye spray etc.) as appropriate
Adjusts/stabilises scope position	Ensures the scope is maintained in a stable position if needed involving an assistant to hold the scope for stable platform before polypectomy
Chooses appropriate polypectomy technique	Chooses appropriate polypectomy technique safely without errors taking into account size, morphology, site and access (SMSA concept)
Checks equipment and snare closure prior to insertion	Ensures the appropriate equipment (e.g. injection, forceps, snare, clips, rothnet etc.) are available and functioning. Ensures the snare is marked appropriately in the handle before attempting insertion.
Checks appropriate diathermy settings	Ensures the diathermy settings are appropriate for the techniques used and no contraindication for diathermy. Ensures the diathermy is available and functioning. Ensures pads are attached and foot pedal accessible.
Photo-documents pre and post polypectomy	Ensures accurate photo-documentation pre and post polypectomy
	STALKED POLYPS
Selects appropriate snare size	Demonstrates ability to always choose correct snare size appropriate to the polyp.
Directs snare accurately over polyp head	Demonstrates ability to use angulation controls, torque to steer snare over polyp head accurately and appropriately.
Correctly selects en-bloc or piecemeal removal depending on size	Demonstrates ability to judge and correctly select en-bloc or piecemeal removal of the polyp depending on its size
Advances snare sheath towards stalk as snare closed	Ensures that snare sheath is advances slowly and in a controlled fashion towards the stalk as the snare is closed
Places snare at appropriate position on the stalk	Ensures that snare is appropriately placed midway between polyp head and stalk base
Mobilises polyp and applies appropriate degree of diathermy	 Ensures that appropriate amount of tissue is snared and the polyp stalk is mobile. Ensures that the polyp stalk tents away from mucosa towards the contralateral wall. Demonstrates application of appropriate degree of diathermy with no evidence of contra-lateral burns or cutting through too quickly causing bleeding.

DOPS form descriptors

SMALL SES	SILE LESIONS / ENDOSCOPIC MUCOSAL RESECTION
Adequate sub mucosal injection	Demonstrates accurate injection(injection at 45 degree and gradual withdrawal as lesion lifts) of the submucosa maintaining excellent views of the lesion
Checks lesion lifts adequately	Ensures and checks that lesion is lifting adequately and only proceeds if lesion lifts adequately.
Selects appropriate snare size	Demonstrates ability to always choose correct snare size appropriate to the polyp.
Directs snare accurately over the lesion	Demonstrates ability to use angulation controls, torque to steer snare over lesion accurately and appropriately.
Correctly selects en-bloc or piecemeal removal depending on size	Demonstrates ability to judge and correctly select en-bloc or piecemeal removal of the polyp depending on its size.
Appropriate positioning of snare over lesion as snare closed	Demonstrates ability to position snare appropriately over lesion as snare is closed.
Tents lesion gently away from the mucosa	Ensures no additional tissue is trapped within snare by checking snare marking and tenting lesion away from mucosa mobilising the snare
Uses cold snare technique or applies appropriate diathermy	Demonstrates ability to judge and use cold snare technique or Demonstrates application of appropriate degree of diathermy with no evidence of contra-lateral burns or cutting through too quickly causing bleeding.
Ensures adequate haemostasis prior to further resection	Demonstrates checking for bleeding and always ensures adequate haemostasis is achieved before further resection
	POST POLYPECTOMY
Examines remnant stalk/ polyp base	Demonstrates examining remnant stalk/polyp base thoroughly to check for bleeding and any residual polyp tissue
Identifies and appropriately treats residual polyp	• Ensures that any residual polyp is identified and appropriately resected or treated (e.g. APC)
Identifies bleeding and performs adequate endoscopic hemostasis if appropriate	Demonstrates identification of bleeding and ensures appropriate treatment method (e.g. clips, APC etc.) are applied adequately to ensure endoscopic haemostasis.
Retrieves, or attempts retrieval of polyp	Ensures polyp retrieval using appropriate method (e.g. forceps, snare, rothnet etc.) according to size of polyp. Demonstrates checking for complete removal of polyp tissue and confirms retrieval with endoscopy staff
Places tattoo competently, where appropriate	Demonstrates ability to use tattoo in appropriate setting. Ensures raised bleb before switching to appropriate ink and places appropriate number of tattoos

DOPS form descriptors

ENTS (ENDOSCOPIC NON-TECHNICAL SKILLS)			
Communication and teamwork	 Gives and receives knowledge and information in a clear and timely fashion. Ensures that both the team and the endoscopist are working together from the same information and understand the 'big picture' of the case. Ensures that the patient is at the centre of the procedure, emphasising safety, comfort and giving information in a clear and understandable fashion 		
Situation awareness	 Maintains continuous evaluation of the patient's condition. Ensures lack of distractions and maintains concentration, particularly during difficult situations. 		
Leadership	 Provides emotional and cognitive support to team members by tailoring leadership and teaching style appropriately. Supports safety and quality by adhering to current protocols and codes of clinical practice. Adopts a calm and controlled demeanour when under pressure. Utilising all resources to maintain control of the situation and taking responsibility for patient outcome 		
Judgement and decision making	 Considers options and possible courses of action to solve an issue or problem, including assessment of risk and benefit. Chooses a solution to a problem, communicates this to team members and implements it Reviews outcomes of procedure or options for dealing with problems. Reflects on issues and institutes changes to improve practice 		