

Extended Surgical Team in Robotic Theatres

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Background

Physician Associates (PA) have been employed within the Urology unit at St George's Hospital for over 10 years, largely undertaking roles within the ward and outpatient settings as well as oncall work. PAs assisting in the operating theatre had not been explored by the department. It is well documented in other areas of the UK the use of Physician Associates in the operating theatre. In 2019, The Faculty of Physician Associate Census reported that 28.7% of PAs working in surgical specialties were first assisting (RCP, 2019). The Urology Department is an established robotic centre since 2008, undertaking complex Urological surgery. The Robotic team comprises 6 Consultant Urological surgeons and 3 trainees. Historically, a senior trainee or consultant performed the robotic first assistant role. In 2016 the Royal College of surgeons reported the extended surgical team (including PAs) improved patient care.

Methods

The department decided to widen the robotic team to include a new role for assisting. A PA in the wider urology team was identified and the following training was provided

Informal training:

- A consultant surgeon trainer identified
- Initially cases were selected based on complexity
- Appropriate time given in the early learning phase consolidated through case videos and modular training to undertake progressively complex tasks within assistance
- Surgical log kept up to date

Formal training:

- Basic Surgical Skills – Royal College of Surgeons
- First Assist Robotic Training Course – Bristol Urological Institute
- Online assessment for robotic first assists – Intuitive
- Hands on in service robotic training – Intuitive

An anonymous survey was developed with likert scale answers to examine the effects of the new role in robotic theatres. The questions included:

- Training Opportunities for doctors
- Impact on theatre time
- Impact on patient outcomes

Inclusion criteria of respondents was limited to working with a PA in robotic theatres.

Results

There were 10 respondents from varying roles within the robotic theatre

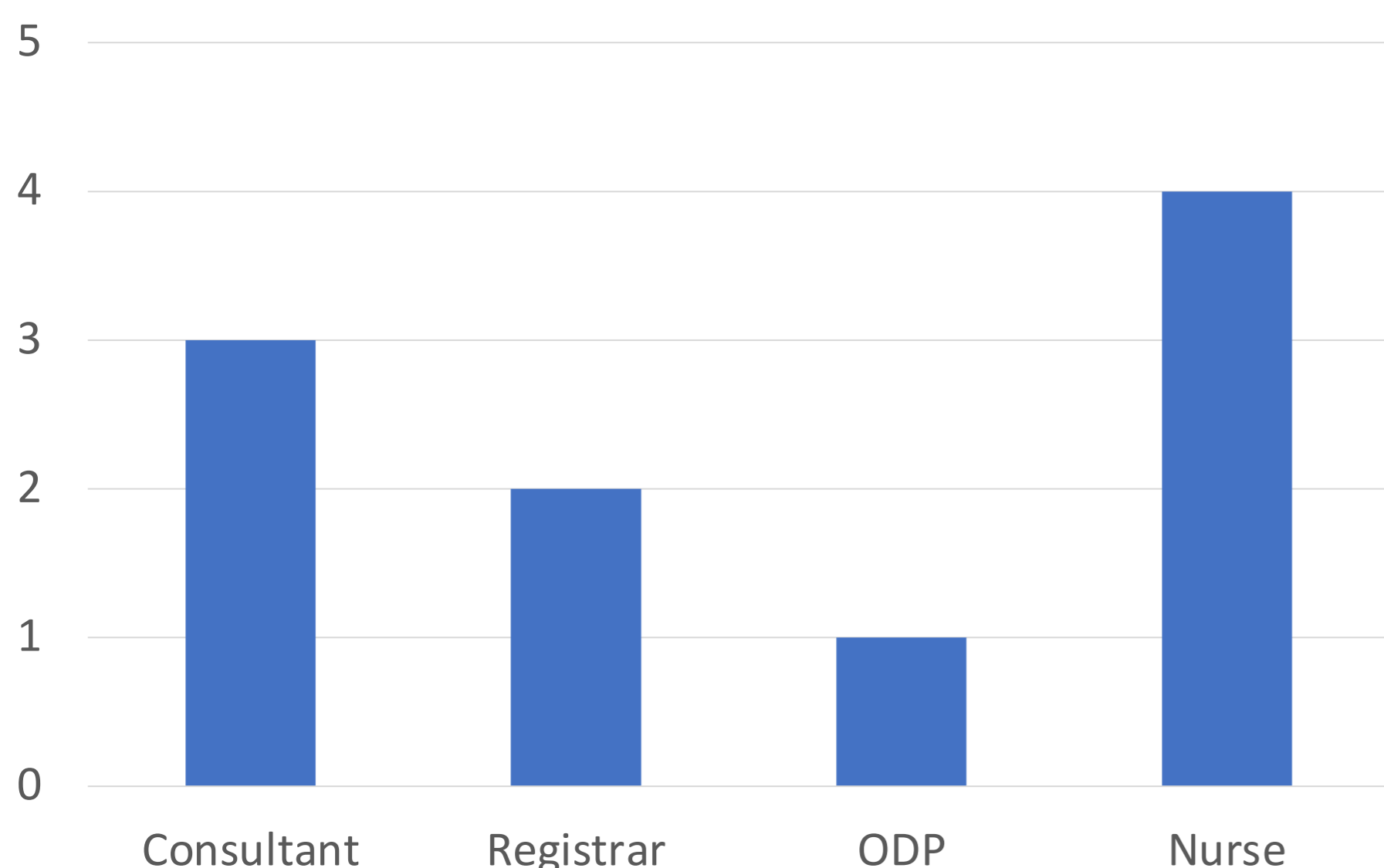


Fig 1. Respondents roles

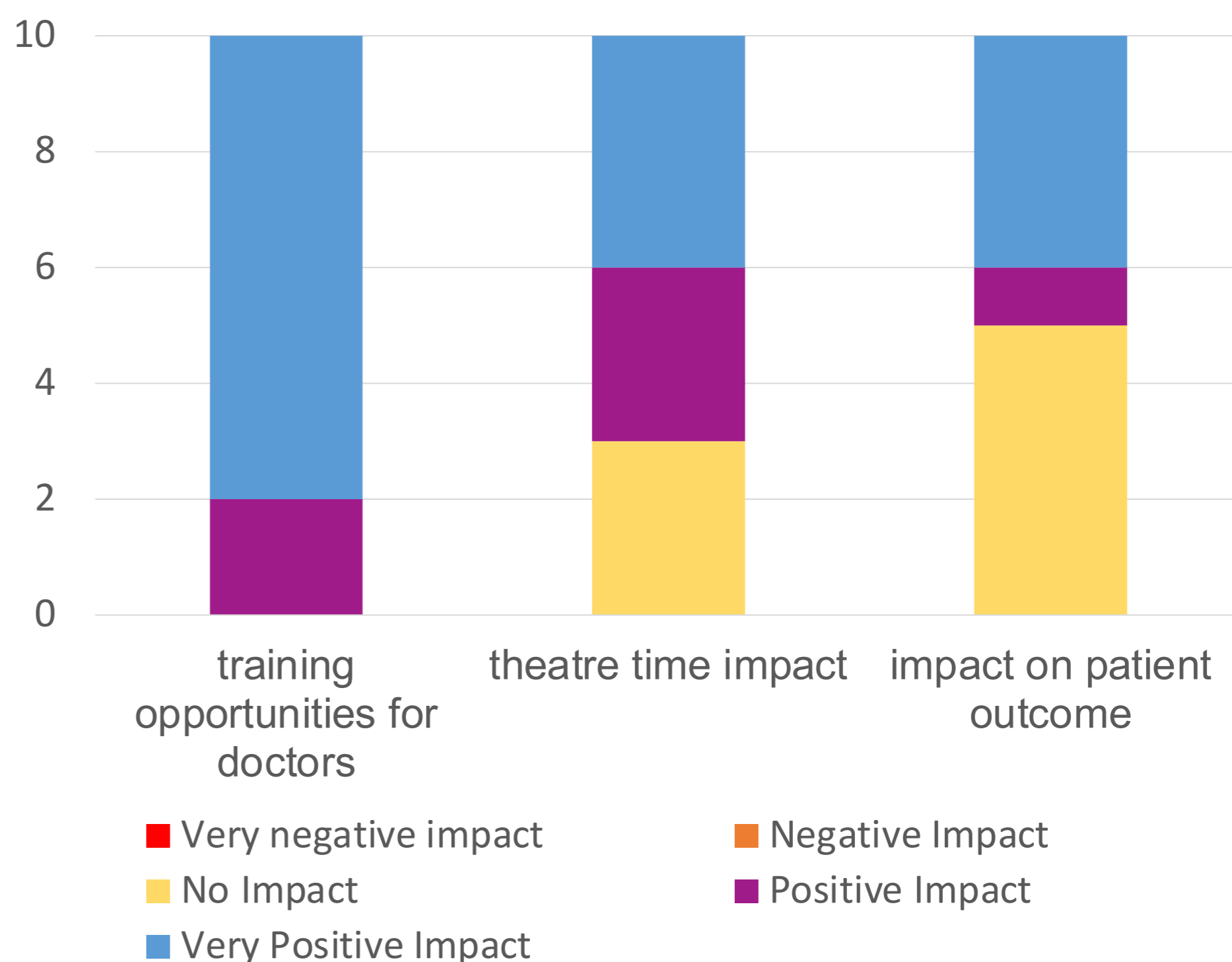


Fig. 2 Impact of Physician Associates in Robotic Theatres

Discussion

The results of the survey demonstrate responses from more than 50% of the robotic team and 5 responses from the wider operating theatre staff.

Fig 2 illustrates that all respondents report a positive or very positive impact on training opportunities for doctors when a PA assists in robotic theatres. The PA assisting allows the doctor to watch the procedure on the second surgeon console, perform the surgery with direct supervision from the consultant surgeon or undertake other tasks associated with training.

Furthermore, all respondents answered that a PA assisting in robotic theatre has either no impact, positive impact or very positive impact on both theatre times and patient outcomes.

Recommendations

- Support the development of future positions for Physician Associates in Robotic theatres across other specialties
- Repeat the survey to increase response rate with views from the wider surgical team (anaesthetic staff and management). Ensuring the questions explore detailed aspects of the impacts on patient outcomes
- Complete a guidance document for PAs in robotic theatre to ensure high quality consistent training

References

Royal College of Physicians (2020) *Focus on physician associates: Census 2019* - [fparcp.co.uk](https://www.fparcp.co.uk), FPARCP. Available at: https://www.fparcp.co.uk/file/image/media/5f7d906065d89_FPA_census_2019.pdf (Accessed: 02 June 2023).

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