



ESSENTIAL SURGICAL SKILLS AND PRINCIPLES FOR ASPIRING SURGEONS (ESSPAS)

Frequently Asked Questions (FAQs)

1. Who is the ESSPAS Course designed for?

The ESSPAS Course is designed primarily for clinical-year medical students, students undertaking surgical placements or electives, and doctors about to begin their Foundation Year posts. It is also relevant for clinicians working in A&E, surgical specialties, or general practice who would benefit from structured training in essential procedural skills.

The course focuses on practical techniques that are commonly encountered early in clinical practice, particularly wound management, suturing, hand trauma assessment, and minor surgical procedures.

For many medical students and new doctors in the UK there are limited opportunities to learn these skills in a structured, supervised environment before beginning clinical duties. The ESSPAS Course therefore provides a practical foundation that prepares delegates for the types of procedures they may encounter during placements, electives, and early postgraduate training.

2. What are the main objectives of the ESSPAS Course?

The main objectives of the ESSPAS Course are to develop both practical technical skills and clinical procedural reasoning. Delegates are taught not only how to perform surgical techniques but also why those techniques are used, when they are indicated, and when alternative approaches may be more appropriate.

The course emphasises:

- understanding tissue handling and wound healing.
- selecting appropriate suture materials and techniques.
- recognising anatomical structures relevant to procedures.
- maintaining haemostasis and safe operative technique.
- recognising complications and avoiding common technical errors

By combining technical training with clinical reasoning, the course helps delegates understand the principles behind surgical decision-making rather than simply rehearsing isolated skills.

3. What types of skills and procedures are taught in the ESSPAS Course?

The ESSPAS Course provides hands-on training in a wide range of essential surgical skills that are commonly encountered in early clinical practice, particularly in A&E departments, minor procedure settings, and surgical placements.

Delegates are trained in the following core skills and procedures:

Foundations of Operative Practice

- Aseptic precautions in surgery.
- Surgical scrubbing, gowning, and the closed method of gloving.
- Safe handling of common surgical instruments and safe disposal of sharps.
- Understanding surgical sutures and needle types.
- Pharmacology and safe infiltration of local anaesthesia.

Core Technical Surgical Skills

- Secure knot tying (reef knot, surgeon's knot, tying at depth and instrument tie).
- Basic suturing techniques (simple interrupted, continuous, vertical mattress, horizontal mattress and subcuticular sutures).
- Deep dermal wound closure.
- Haemostatic suturing including figure-of-eight stitches.
- Purse-string suturing.

Minor Surgical Procedures

- Excision of a cutaneous lesion.
- Excision of a subcutaneous cyst (e.g., epidermoid cyst).
- Incision and drainage of abscesses.
- Debridement of contaminated wounds.
- Planning and closure of wounds following minor surgical procedures.

Trauma and Reconstructive Principles

- Structured examination of the injured hand.
- Principles of extensor tendon repair (mattress suturing techniques).
- Principles of flexor tendon repair using the modified Kessler technique with running simple or interlocking epitendinous repair.
- Principles of wound healing and reconstructive surgery.
- Design of local flaps including rhomboid and advancement flaps.

Clinical Reasoning and Discussion

- Use of antibiotics in trauma and surgical practice.
- Decision-making in wound management and minor surgical procedures.

Together, these sessions provide delegates with practical familiarity with the techniques and clinical reasoning required when managing wounds, soft-tissue injuries, and minor surgical conditions in early clinical practice.

4. Specifically, what suturing techniques are taught?

Delegates practise a wide range of suturing methods including:

- simple interrupted sutures
- continuous sutures
- vertical mattress sutures
- horizontal mattress sutures
- subcuticular suturing
- deep dermal closure
- figure-of-eight haemostatic sutures
- purse-string sutures

Teaching focuses on appropriate technique selection, tension control, tissue respect, and cosmetic outcomes.

5. What additional skills does the course include beyond core suturing?

In addition to basic and intermediate suturing techniques, the course includes several practical skills that are particularly relevant to emergency and minor surgical settings. These include structured examination of the hand in trauma, tendon repair principles, haemostatic suturing methods, and introductory reconstructive techniques such as rhomboid and advancement flaps.

These skills help delegates understand not only how to close wounds but also how to assess injuries and plan appropriate management.

6. Is hand trauma assessment taught?

Yes. Delegates are taught a structured and clinically relevant approach to examining the injured hand, which is a common presentation in emergency departments and surgical units.

The session covers:

- systematic inspection of the hand and fingers.
- assessment of flexor and extensor tendon integrity.
- evaluation of motor function and range of motion.
- testing of sensory function in the digital nerve distributions.
- assessment of vascular status including capillary refill and perfusion.

In addition, the location and technique for performing a digital nerve block injection are demonstrated and explained. Delegates learn the anatomical landmarks used to safely infiltrate local anaesthetic around the digital nerves, which is an essential skill when managing finger lacerations or nail-bed injuries.

This structured approach improves both diagnostic accuracy and procedural planning when managing hand trauma.

7. Does the course include tendon repair?

Yes. The course introduces the principles of both flexor and extensor tendon repair.

Flexor tendon repair is demonstrated using the modified Kessler core suture technique combined with a running simple or interlocking epitendinous repair.

Extensor tendon repair principles are also demonstrated using mattress suturing techniques. The purpose is to provide conceptual understanding and appreciation of the anatomical considerations involved in tendon repair.

8. Does the ESSPAS Course include laparotomy or bowel anastomosis?

No. Procedures such as laparotomy, mesenteric preparation, bowel resection, and bowel anastomosis are covered in the two-day Intercollegiate Basic Surgical Skills (BSS) Course.

The ESSPAS Course has a different focus. It concentrates on essential surgical skills that are most relevant to early clinical practice, particularly those encountered in emergency departments, minor procedure rooms and surgical wards. The emphasis is therefore on wound management, suturing techniques, tendon repair principles, minor surgical procedures and basic reconstructive concepts rather than intra-abdominal surgery. This approach allows delegates to gain confidence in skills that they are more likely to encounter during placements, electives, and early postgraduate training.

9. Does the ESSPAS Course include vascular repair techniques?

Major vascular procedures such as arteriotomy or vein patch repair are not part of the ESSPAS Course as these are specialised operative techniques taught in the Intercollegiate BSS Course. Instead, ESSPAS introduces haemostatic techniques that are highly relevant in everyday clinical practice. Delegates are taught methods such as figure-of-eight haemostatic sutures and principles of bleeding control in wound management. These techniques are frequently required when managing traumatic wounds or performing minor surgical procedures and are therefore particularly relevant for clinicians working in emergency or ward-based environments.

10. Does the ESSPAS Course focus only on practical technique?

No. While the course is highly practical, equal emphasis is placed on understanding the principles that guide safe surgical practice. Delegates are taught the rationale behind each step of a procedure, including indications, contraindications, anatomical considerations, and wound healing principles. This helps ensure that techniques are performed safely and appropriately in real clinical settings.

11. Is the ESSPAS Course suitable before starting FY1?

Yes. ESSPAS is particularly beneficial for those preparing to start FY1. It provides practical preparation for common scenarios such as suturing lacerations, assessing hand injuries, draining abscesses and managing minor wounds. These are situations frequently encountered in A&E departments and surgical wards.

12. What is the teaching format?

Each technique is first demonstrated live by the surgeon. The demonstration is projected using a visualiser onto a large screen so that all delegates can clearly observe the details of the procedure. After the demonstration, delegates perform the technique themselves.

Surgical tutors then move around the room supervising each delegate individually, correcting technique, and helping them refine and perfect the procedure through direct feedback.

13. What training models are used during the course?

Practical skills are taught using biological tissue models, which provide realistic tactile feedback and allow delegates to appreciate the behaviour of living tissue. Compared with synthetic models, biological tissues allow trainees to better understand:

- tissue handling.
- depth perception during suturing.
- tension distribution across wound edges.
- haemostatic control.
- needle passage through different tissue layers.

This helps replicate the technical challenges encountered during real procedures and enhances the educational value of the training.

14. How much supervision do delegates receive?

A high tutor-to-delegate ratio is maintained throughout the course to ensure close supervision and effective feedback. Following the live demonstrations, delegates practise each technique individually while surgical tutors move around the room observing their technique. Tutors provide direct guidance on aspects such as instrument handling, needle angles, knot security and tissue tension. This personalised feedback allows delegates to refine their technique and correct errors early, helping them develop good operative habits and safe technical practice.

15. Who delivers the course?

The course is delivered by academic surgeons, surgical tutors, and experienced surgical educators who are familiar with surgical practice. Faculty members bring practical experience from a range of surgical specialties and are accustomed to teaching both medical students and junior doctors. Teaching therefore reflects contemporary surgical standards and emphasises techniques that are used in real clinical settings. This ensures that delegates receive practical instruction grounded in current surgical practice rather than purely theoretical teaching.

16. Is the course governed and regulated?

Yes. The ESSPAS Course is delivered by Doctors Academy Group of Educational Establishments and is governed in conjunction with the College of Physicians and Surgeons of Cardiff.

The course follows structured educational governance standards to ensure quality, safety, and consistency of teaching. Course content, faculty selection, and assessment of educational outcomes are monitored through established academic and professional frameworks. This governance structure helps ensure that the course maintains high educational standards and remains aligned with contemporary clinical practice.

17. Is CPD certification provided?

Yes. Delegates who successfully complete the course receive Continuing Professional Development (CPD) certification with eight CPD points. The CPD certificate is issued by Doctors Academy Group of Educational Establishments in conjunction with the College of Physicians and Surgeons of Cardiff. This certification recognises participation in structured postgraduate medical education and may contribute to professional development portfolios for clinicians and trainees.

For medical students and foundation doctors, CPD documentation may also be useful for demonstrating engagement with practical clinical training.

18. What are the key advantages of the ESSPAS Course?

The ESSPAS Course offers a concentrated and practical introduction to surgical skills that are directly relevant to early clinical exposure. Key advantages include:

- coverage of a broad range of high-yield procedural skills within a single day.
- focus on techniques commonly encountered in A&E and minor surgical settings.
- integration of technical skill training with clinical reasoning and decision-making.
- high tutor-to-delegate ratio allowing detailed supervision and feedback.
- realistic biological tissue models that improve understanding of tissue handling.
- training delivered by experienced consultant surgeons and surgical educators.

Because the course covers a wide range of practical skills in a structured hands-on format, it provides excellent value for delegates seeking confidence in basic surgical procedures before entering clinical practice.

19. How does the ESSPAS Course differ from the Intercollegiate Basic Surgical Skills (BSS) Course?

The Intercollegiate BSS Course is an excellent two-day programme that provides exposure to operative techniques across multiple surgical specialties. It is typically most relevant for surgical trainees who already have some clinical experience in surgery, often at least six months.

The ESSPAS Course serves a different stage of training. It is a one-day programme designed for medical students and new doctors who are preparing for clinical practice. It focuses on essential procedural skills commonly required in A&E, surgical rotations, and clinical placements, together with the underlying principles of wound closure, tissue handling, and safe surgical practice. It is suitable for those considering (aspiring for) a career in surgery.

The BSS Course includes additional skills such as laparotomy, preparation of mesentery with pedicle ligation, ligation in continuity, transfixing sutures, bowel resection, bowel anastomosis, arteriotomy, vein patch repair, diathermy use, and simulated laparoscopic exercises. The course also includes an OSAT assessment.

20. Which course is more appropriate for me?

The choice depends largely on your stage of training and career interests:

The Intercollegiate BSS Course is particularly suitable for those who are committed to pursuing a surgical career or who are already undertaking surgical training. It provides valuable exposure to operative techniques such as bowel handling, vascular repair and laparoscopic exercises.

The ESSPAS Course is more appropriate for clinical-year medical students, those undertaking surgical placements or electives, and doctors preparing to begin FY posts. It focuses on practical skills that are commonly required in A&E departments, minor surgical procedures, theatre environments and ward-based clinical work. It is therefore useful even for those who may not necessarily intend to pursue surgery but who want confidence in managing wounds and minor procedures during clinical practice.