

**CLINICAL COMPETENCY ASSESSMENT: DORSAL SLIT: CLINICAL MENTOR ASSESSMENT OF MENTEE**

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| Appendix 2Tool CM 2aTo be completed by Clinical MentorSubmitted to the Facility ManagerFrequency: Baseline and weekly |
| Instructions for the Clinical Mentor: Assess the specific clinical competencies of the mentee. Complete this assessment at **baseline** and thereafter **weekly.** Rate using the number that you feel best shows the mentee’s level of competency as follows: |
| **1** | The mentee is not confident at all. The mentee does not know how to do this task |
| **2** | The mentee is somewhat confident: The mentee can perform the task with support |
| **3** | The mentee is extremely confident: The mentee is capable of doing this task and considers themself competent /proficient |
| **4** | The mentee considers themself to have the expertise and can teach this task to others |
| **Task / Competency** | **Rate 1-4** |
| **Getting Ready** | 1 | Gather all needed equipment. |  |
| 2 | Greet client and/or parent(s) respectfully and with kindness. |  |
| 3 | Describe your role in the male circumcision procedure. |  |
| 4 | Ask the client or patent(s) if they have any questions about the procedure. |  |
| 5 | Review the client’s records (history, examination findings, laboratory reports if any. |  |
| 6 | Verify client’s identity and check that informed consent was obtained. |  |
| 7  | Check that client has recently washed and rinsed genital area. |  |
| **Pre-Operative Tasks** | 8 | Prepare instrument tray and open sterile instrument pack without touching the items. |  |
| 9 | Ask the client to lie on his back in a comfortable position. |  |
| 10 | Wash hands thoroughly and dry them with a clean, dry towel. |  |
| 11 | Put on a sterile gown and a pair of sterile or high-level disinfected surgical gloves. |  |
| 12 | Apply antiseptic solution (eg Betadine solution) two times to the genital area |  |
| 13 | Retract the foreskin and apply antiseptic solution, making sure that the inner surface and the glands are clean and the skin is dry. |  |
| 14 | Remove the pair of gloves and put on a sterile pair of gloves |  |
| 15 | Apply a centre “O” drape to the genital area and pull the penis through the “O” drape. If there is no “O” drape, apply four smaller drapes to form a small square around the penis. |  |
| 16 | Perform a gentle examination of the external genitalia to exclude any undetected contraindications to the procedure. |  |
| **Anesthesia Tasks** | 17 | Perform a Subcutaneous Ring Block (SQRB) or Dorsal Penile Nerve Block (DPNB) using an appropriate predetermined quantity of 1% plain lidocaine and paying special attention to the ventral nerve.  |  |
| 18 | Check the anesthetic effect of the nerve block and top us as needed. |  |
| 19 | Throughout procedure, talk to and reassure the client (verbal anesthesia) |  |
| **Surgical Procedure: Dorsal Slit Technique** | 20 | Make a curved mark (0.5-1cm proximal and parallel to the coronal sulcus) to outline the planned surgical cut. |  |
| 21 | Hold the prepuce with two mosquito forceps, one at 6 and the other at 12 o’clock |  |
| 22 | Clamp the prepuce along the mark with a Kocher clamp while retracting the glans, ensuring that the glans itself is not clamped. |  |
| 23 | Excise the prepuce distal to the clamp using a surgical blade along the mark. |  |
| 24 | Identify bleeders, coagulate or clamp and tie them, Suture and, if necessary, ligate them with 3/0 plain catgut. |  |
| 25 | After ligating all the bleeders, check again. If identified, tie them. |  |
| 26 | Using 3/0 chromic catgut on a taper 4/8-circle needle, make an inverted U-shaped horizontal mattress stitch on the ventral side of the penis(frenulum) to join the skin at the “V” shaped cut. Tie and tag with a mosquito forceps. |  |
| 27 | Insert vertical mattress stitches at 12, 3, and 9 o’clock positions and tag the four quarters. |  |
| 28 | Insert simple stitches between the vertical mattress stitches to close the gaps (approximately a total of about 16 stitches) |  |
| 29 | Add other simple stitches as required. |  |
| 30 | Dress the wound with Sofratulle, followed by a regular dressing bandage and strapping. |  |
| 31 | Advise the client to rest for 30 minutes. |  |
| **Post Procedure Tasks** | 32 | Dispose of contaminated needles and syringes in puncture-proof container. |  |
| 33 | Place soiled instruments in 0.5% chlorine solution for 10 minutes for decontamination. |  |
| 34 | Dispose of waste materials in covered leak-proof container or plastic bag. |  |
| 35 | Immerse both gloved hands in 0.5% chlorine solution and remove gloves by turning inside out.* If disposing of gloves, place in leak-proof container or plastic bag.
* If reusing gloves, (not recommended), submerge in chlorine solution for decontamination.
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| 36 | Wash hands thoroughly and dry them with clean, dry towel. |  |
| 37 | Observe the client’s vital signs and record findings. |  |
| 38 | Answer client’s questions and concerns. |  |
| 39 | Observe the client’s vital signs and record findings. |  |
| 40 | Advise the client on post-operative care of the penis. |  |
| 41 | Inform the client to come back for follow-up after 48 hours or anytime earlier should there be complications. |  |
| 42 | Complete operation note and other client record forms. |  |