

Schwill et al: Stopping the haemorrhage of surgical competencies in General Practice

Figure 1

Blueprint: A compact intervention for General Practice Trainees aiming at the improvement of competencies in minor surgery				
Schedule	Step	Aim	Methods	Tools and material
Pre-interventional survey				
90 min.	Minor surgery in General Practice – part 1 “I have fallen down the stairs / I have cut myself”	Introduction, reflection on personal level of competence Knowledge and how to do it: common algorithms on how to proceed with different consultations in general practice (e.g. fall, contusion, fracture, acute wounds, bites, foreign bodies), red flags as well as watchful waiting	Group discussion on previous knowledge and experience, lecture, case-based plenal discussions, group-work on cases	Survey on previous skills, presentation, chart request, print-out of cases /work sheets
30 min.	Coffee break			
90 min.	Minor surgery in General Practice – part 2	Procedural skills in bodycheck after fall, suturing and bandaging Awareness, knowledge and procedural understanding for domestic violence	Assessment of previous skills, practical exercise with exemplary body check, bandaging and suturing (suturing, bandaging extremities on each other) Plenary lecture, Group discussion	Pig-feet, sewing-materials, bandage, presentation, print-out of cases Presentation, work sheets
60 min.	Lunch break			
90 min.	Minor surgery in General Practice – part 3	Synthesis of comprehensive treatment (including vaccination, referral to surgeon / hospital, further consultations) Self-reflection on how to proceed on increasing competencies in minor surgery	Plenary lecture, Group discussion Case-based discussions Discussion on how to implement minor surgery into daily practice	Presentation, work sheets, flipchart

Note. GP = General Practice