

HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA

MEDICAL AND DENTAL PROFESSIONS BOARD

GUIDELINES FOR PROFESSIONALS PERFORMING ACTS IN EMERGENCY SITUATIONS

GUIDELINES FOR SURGICAL ASSISTANCE

Definition:

- An assistant surgeon is someone who is able to participate in and actively assists a surgeon (from any clinical discipline including general practitioners and medical officers who are skilled at performing operations) in completing an operation safely and expeditiously by helping provide exposure, maintain haemostasis, and perform any other technical function required under the guidance of the surgeon.

Types of surgical assistants:

- Assistant surgeon: A practitioner who actively assists the operating surgeon. An assistant may be necessary because of the complexity of the procedure or because of the patient's condition. An assistant surgeon is usually trained (or is being trained) in the same clinical discipline.
- Co-surgeons: Two or more surgeons, usually of the same clinical discipline, where the skill of these surgeons are necessary to perform distinct parts of a specific procedure.
- Team of surgeons: Two or more surgeons, usually of different specialities, where the skill of these surgeons are necessary to perform distinct parts of a specific procedure.

Principles:

1. The decision to use an assistant surgeon (or more than one assistant) is made by the surgeon performing that procedure, as it is that surgeon's responsibility to ensure that the operation is performed effectively, safely and expeditiously. Generally this means that a surgeon will seek assistance (looking at both the level of expertise and number of assistants required) in accordance with the complexity of the proposed procedure, and the urgency and setting under which it needs to be undertaken.
2. It is the general practice in South Africa that the first assistant at the operating table in highly complex procedures should be a qualified surgeon or a senior registrar in an approved training program in the same clinical discipline as the surgeon. Experienced, non-surgical medical/dental practitioners can also take on this role in operations of modest complexity or as a second assistant in highly complex operations.

3. If such an assistant/s as defined above is/are unavailable, other medical/dental practitioners who are experienced in assisting may participate. A medical/dental practitioner who assists with an operation should be sufficiently
4. trained to participate in and actively assist the surgeon in safely completing the operation. When a medical/dental practitioner is unavailable to serve as an assistant in a life or limb saving emergency (or at times in remote or resource constrained settings), any other suitably qualified (licenced) health care professional can be called upon to assist. Ideally, such a practitioner should have sufficient training to conduct a delegated portion of a procedure without the need for direct supervision.
5. Deviation from standard practice, as described above, is justifiable in extreme life-saving circumstances but must be clearly recorded and is open to peer review.
6. The practice of inviting medical/dental practitioners in training or medical/dental students to be second assistants in an operation for training purposes is well established.
7. What is in the best interest of the patient must guide decisions made regarding assistants at surgery. It is therefore also good practice, to inform patients about who will be assisting/participating in their operations.

---o0o---