Procedure Skills

Certification for independent practice requires a certain level of experiential competence: this includes the technical skills to perform a certain number of procedures. Sixty-five core procedures are listed below, and these are the procedures upon which the assessment of competence will be based⁸. It should be remembered that it is not only the technical aspects of the individual procedures that are important. The higher levels of competence must also be assessed, as always, in the context of family medicine—the key features describe this aspect.

The General Key Features of Procedure Skills*

- 1. In order to decide whether or not you are going to do a procedure, consider the following:
 - a) The indications and contraindications to the procedure
 - b) Your own skills and readiness to do the procedure (e.g., your level of fatigue and any personal distractions)
 - c) The context of the procedure, including the patient involved, the complexity of the task, the time needed, the need for assistance, and location
- 2. Before deciding to go ahead with the procedure:
 - a) Discuss the procedure with the patient, including a description of the procedure and possible outcomes, both positive and negative, as part of obtaining their consent.
 - b) Prepare for the procedure by ensuring the appropriate equipment is ready.
 - c) Mentally rehearse the following:
 - The anatomic landmarks necessary for procedure performance.
 - The technical steps necessary in sequential fashion, including any preliminary examination.
 - The potential complications and their management.
- 3. During performance of the procedure:
 - Keep the patient informed to reduce anxiety.
 - Ensure patient comfort and safety always.
- 4. When the procedure is not going as expected, re-evaluate the situation, and stop and/or seek assistance as required.
- 5. Develop a plan with your patient for after care and follow-up after completion of a procedure.

* Apply to all procedures. These can be used to guide the development of specific evaluation tools for specific procedures.

^{8 8} Wetmore SW, Rivet C, Tepper J, Tatemichi S, Donoff M, Rainsberry P. Defining core procedure skills for Canadian family medicine training. Can Fam Physician. 2005; 51(10): 1364-5.

Core Procedures

Integumentary Procedures

Abscess incision and drainage Wound debridement Insertion of sutures; simple, mattress, and subcuticular Laceration repair; suture and gluing Skin biopsy; shave, punch, and excisional Excision of dermal lesions, e.g., papilloma, nevus, or cyst Cryotherapy of skin lesions Electrocautery of skin lesions Skin scraping for fungus determination Use of Wood's lamp Release subungual hematoma Drainage acute paronychia Partial toenail removal Wedge excision for ingrown toenail Removal of foreign body, e.g., fish hook, splinter, or glass Pare skin callus

Local Anesthetic Procedures

Infiltration of local anesthetic Digital block in finger or toe

Eye Procedures

Instillation of fluorescein Slit lamp examination Removal of corneal or conjunctival foreign body Application of eye patch

Ear Procedures

Removal of cerumen Removal of foreign body

Nose Procedures

Removal of foreign body Cautery for anterior epistaxis Anterior nasal packing

Gastrointestinal Procedures

Nasogastric tube insertion Fecal occult blood testing Anoscopy/proctoscopy Incise and drain thrombosed external hemorrhoid

Genitourinary and Women's Health Procedures

Placement of transurethral catheter Cryotherapy or chemical therapy genital warts Aspirate breast cyst Pap smear Diaphragm fitting and insertion Insertion of intrauterine device Endometrial aspiration biopsy

Obstetrical Procedures

Normal vaginal delivery Episiotomy and repair Artificial rupture of membranes

Musculoskeletal Procedures

Splinting of injured extremities Application of sling—upper extremity Reduction of dislocated finger Reduce dislocated radial head (pulled elbow) Reduce dislocated shoulder Application of forearm cast Application of ulnar gutter splint Application of scaphoid cast Application of below-knee cast Aspiration and injection, knee joint Aspiration and injection, shoulder joint Injection of lateral epicondyle (tennis elbow) Aspiration and injection of bursae, e.g., patellar, subacromial

Resuscitation Procedures

Oral airway insertion Bag-and-mask ventilation Endotracheal intubation Cardiac defibrillation

Injections and Cannulations

Intramuscular injection Subcutaneous injection Intradermal injection Venipuncture Peripheral intravenous line; adult and child Peripheral venous access—infant Adult lumbar puncture