# JETS
## JAG Endoscopy Training System

# JETS courses overview

Version 9.1
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# Contents

# Background to document

## Aim of the document

This document aims to summarise the courses advertised on JETS.

## Recommendation for training centres

It is strongly recommended that all training centres regularly cross check their courses against those on JETS, paying particular reference to the learning objectives assigned to those courses run by a training centre. It is based on these learning objectives that much of the quality assurance (QA) process will be based on.

## Information to provide

*Please note that some of the courses do not contain all information required to be uploaded onto JETS. This information needs to be available for all courses. Without the information the courses will not be uploaded. If you are running a course please check all the information for those courses is provided or sent in an amended document.*

- Previous code and title if this exists
- Overview and aims (limit any overview to 5 lines max)
- Type (hands on with patient, animal model, simulator, etc)
- Target audience
- Duration
- List of learning objectives

## Feedback for courses and teaching faculty

In addition to functioning as a booking system for the courses, JETS also provides QA feedback from each of the courses.

Completion of feedback forms will be mandatory to receive a course certificate. Delegates will need to provide feedback on the course and the teaching faculty.

There is a generic framework to the feedback form, which is shown below in Table 1. In addition each course has clear and relevant learning objectives. For any submission to have new courses uploaded onto JETS, these learning objectives will be reviewed and if necessary amended by the JAG training group. The group will also determine if a new code is needed for the course submitted, or if an existing code already covers the course.

GIN courses have been omitted from this document.

# Trainer feedback template

Table 1 below shows the trainer feedback form which is to be completed by all delegates.

## Table 1. Trainer feedback form

| Assessment statement | Strongly disagree | Disagree | Neutral | Agree | Strongly Agree |
|---|---|---|---|---|---|
| Was this a worthwhile experience | | | | | |
| Enabled a learning environment/experience | | | | | |
| Taught me at an appropriate level for my needs | | | | | |
| Gave me individual and specific skills teaching | | | | | |
| Gives me useful and constructive feedback | | | | | |
| Evaluates me fairly | | | | | |
| Promotes reflective learning and increases personal insight into my practice | | | | | |
| Works well as part of a team | | | | | |
| Is a good role model for training | | | | | |
| Is a skilled teacher | | | | | |

| Overall quality of training episode/course | Above expectation | Met expectation | Below expectation |
|---|---|---|---|
| | | | |

Comments
These comments are anonymous. Please make these comments as specific as possible, detailing what was good or bad and how the trainer could improve their training skills.

# Endoscopy course codes

Table 3 below explains how the courses are coded. These can be using simulators, animals, patient or a combination. Courses which are predominantly classroom based but with the option of hands-on offered are classified as C type, hands-on training is available but not necessarily utilized by all the delegates (eg best practice days).

## Table 2. Abbreviations used in coding

*see above, must have hands on component

| Area | Upper GI | G | Gastroscopy |
|---|---|---|---|
| | Lower GI | C | Colonoscopy |
| | Lower GI | F | Flexible sigmoidoscopy |
| | Both lower and upper GI | B | |
| | ERCP | R | |
| | EUS | U | |
| | Enteroscopy | E | e.g. double balloon |
| | | | |
| Mode | Diagnostic | D | |
| | Therapeutic | T | |
| | Trainers | R | TTT courses |
| | BCSP | B | BCSP related |
| | | | |
| Type | Patients | P | |
| | Animal model | A | |
| | Model/simulator | M | |
| | Classroom* | C | |
| | | | |
| Duration | Days | x | |
| | | | |
| Mandatory | JAG requirement | (M) | |
| | | | |
| Paediatric | Paediatric focus | (P) | |

## Table 3. Examples of new codes

| Area | Mode | Type | Duration (days) | Code | Current course |
|---|---|---|---|---|---|
| C | T | A | 1 | LTA1 | Polypectomy course (animal) |
| G | D | P | 3 | GDP3(M) | Basic skills in Upper GI endoscopy (Mandatory) |
| C | T | P | 1 | CTP1 | Colonoscopy and Polypectomy improvement course (patient) |
| C | T | C | 1 | CTC1 | Sharing Best Colonoscopy Practice |
| C | D | P | 3 | CDP3(M) | Basic skills in Lower GI (Mandatory) |
| C | R | P | 2 | CRP2 | Training the colonoscopy Trainers (TCT) |
| G | R | P | 2 | GRP2 | Training the gastroscopy Trainers (TGT) |
| C | D | P | 3 | CDP3(P) | Basic skills in Lower GI (Paediatric) |

# Generic example of feedback form

This evaluation form is based on the learning outcomes of this course which are shown below. Once completed the information can be used as part of the quality assurance process for the course.

| Evaluation of Course<br>☑ *Please tick relevant box to show your evaluation of course components* | | |
| --- | --- | --- |
| **Learning outcomes**<br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| Learning objective #1 | | |
| Learning objective #2 | | |
| Etc. etc. etc. for all selected learning objectives | | |

| | |
| --- | --- |
| **Number of patient cases in which you had hands-on involvement?**<br>Include all cases in which you participated | |

| | Time spent on this | | | Method & quality of teaching | | | Not applicable |
| --- | --- | --- | --- | --- | --- | --- | --- |
| | Too little | About right | Too much | Below expectation | Met expectation | Above expectation | |
| **1:1 Training on patients**<br>(hands-on with patient) | | | | | | | |
| **Observing others practicing hands-on endoscopy**<br>(live demonstration) | | | | | | | |
| **Animal tissue model** | | | | | | | |
| **Simulators** | | | | | | | |
| **Theoretical component**<br>(lecture based) | | | | | | | |

**Overall, throughout the course, how much of your course time was spent learning effectively**

☐ 10%  ☐ 20%  ☐ 30%  ☐ 40%  ☐ 50%  ☐ 60%  ☐ 70%  ☐ 80%  ☐ 90%  ☐ 100%

**Please indicate on the scale of 0-10 where you rate the following for this course:**

| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Administration and communication | | | | | | | | | | | |
| Environment/setting conducive to learning | | | | | | | | | | | |
| Teaching materials and aids | | | | | | | | | | | |
| Catering and refreshments | | | | | | | | | | | |
| Would you recommend this course to a colleague? | | | | | Yes | | | | | No | |
| Please provide comments about the course or expand on your feedback above. For example please indicate what you particularly liked about the course and how you think it could be improved: | | | | | | | | | | | |

# Training courses advertised on JETS

## Basic skills in upper gastrointestinal (UGI) endoscopy

**Code: JAG_GDP3(M)**

**Type**
Patient hands-on

**Duration**
3 days

**Target audience**
The course is open to anyone whose future job role will involve regular upper gastrointestinal endoscopy. Trainees beginning to learn diagnostic gastroscopy and those wishing to consolidate their training for JAG certification. Applicants must have an existing affiliation with a professional body (eg GMC). The course would also be of benefit to those wishing to update endoscopy practice and undergo assessment.

Trainees must have written support from their educational supervisor or endoscopy trainer to guarantee 6 months supervised training on completion of the course. It is essential that trainees have at least one training list per week available to them at their base-hospital following this course.

This course is mandatory for those wishing to apply for JAG certification in upper GI endoscopy.

**Overview**
This is a 3-Day Joint Advisory Group (JAG) approved course for endoscopy trainees wishing to gain/ improve their skills in GI Endoscopy.

This is in intensive, interactive, practical course covering the theoretical basis of performing a safe gastroscopy and safe and effective peri-endoscopy management. The course includes a series of small group and one-to-one teaching sessions, videos, hands-on model work and supervised endoscopy. Each trainee will undertake a number of gastroscopies (minimum of 4 per delegate) under the supervision of expert trainers. The one-to-one teaching focuses on the development of individualised learning outcomes and plans to progress skills.

**Aims**

- Understanding of the basic principles and practice of upper gastrointestinal endoscopy and the equipment used
- Acquisition of the basic skill to perform safe diagnostic gastroscopy
- Understanding of the non-technical skills necessary to perform a safe and competent procedure
- Highlight the associated background knowledge necessary for practice

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| List and describe the indications and contraindications for upper GI endoscopy | | |
| Understand the principles of upper GI endoscopy both as a diagnostic techniques and for therapeutic intervention | | |
| Understand the importance and principles of obtaining informed consent | | |
| Be able to obtain consent using a structured approach | | |
| Understand the principles of patient preparation and the advantages and disadvantages of throat sprays and sedation | | |
| List the indications and understand the principles for use of prophylactic antibiotics in upper GI endoscopy | | |
| Recognise patients who are recognised to be at risk of complications (procedural and/or sedation) and describe how these are minimised when undertaking upper GI endoscopy | | |
| Recognise patients recognised to be at high risk of bleeding during endoscopy; list the relative risks of anti-platelet and anti-coagulant drugs; and describe bespoke plans for stopping and restarting therapy around endoscopy | | |
| Be able to safely administer, monitor and manage the effects, of sedation | | |
| Understand the design, function and decontamination requirements of an endoscope | | |
| Understand the requirements for cleaning, disinfection and reuse of endoscopy disposables | | |
| Demonstrate how to stand, hold and control the gastroscope using both hands independently. | | |
| Understand the function of the angulation control wheels and demonstrate their function. | | |
| Understand the function of the air/water and suction buttons and demonstrate their function. | | |
| Demonstrate intubation and extubation | | |
| Demonstrate scope manipulation and handling during safe upper GI endoscopy | | |
| Demonstrate the techniques of pyloric intubation, negotiation into D2 and the j-manoeuvre. | | |
| Demonstrate ability to observe and describe/interpret normal and abnormal mucosa during gastroscopy | | |

# Basic skills in colonoscopy

**Code: JAG_CDP2(M), JAG_CDP3(M), JAG_CDP_mod**

**Type**
Patients

**Duration**
2 days or 3 days

**Target audience**

The course is open to anyone whose future job role will involve regular lower gastrointestinal endoscopy. Applicants must have an existing affiliation with a professional body (eg GMC).

This course is mandatory for those applying for JAG certification in colonoscopy.

**Overview**

This is a 2-day or 3-day course for higher trainees wishing to gain/improve their skills in colonoscopy.

This is in intensive, interactive, practical course covering the theoretical basis of performing a safe colonoscopy and safe and effective peri-endoscopy management. The course includes a series of small group and one-to-one teaching sessions, videos, hands-on model work and supervised endoscopy. Each trainee will undertake a number of colonoscopies under the supervision of expert trainers, which will be transmitted to other delegates using the latest A/V resources, including a magnetic 3D imager to facilitate training. The one-to-one teaching focuses on the development of individualized learning outcomes and plans to progress skills.

Trainees must have written support from their educational supervisor or endoscopy trainer to guarantee 6 months supervised training on completion of the course. It is essential that trainees have at least one training list per week available to them at their base-hospital following this course.

**Aims**

- Understanding of the basic principles and practice of colonoscopy and the equipment used
- Acquisition of the basic skill to perform safe colonoscopy
- Understanding of the non-technical skills necessary to perform a safe and competent procedure
- Highlight the associated background knowledge necessary for practice

| Evaluation of Course - ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes**<br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| List and describe the indications for colonoscopy | | |
| Understand the principles of colonoscopy both as a diagnostic technique and for therapeutic intervention | | |
| Understand the importance and principles of obtaining informed consent | | |
| Be able to obtain consent using a structured approach | | |
| Understand the principles of patient preparation and list the advantages and disadvantages of different types of bowel preparation in different patient groups | | |
| Understand current prophylactic antibiotics guidelines in endoscopy related to colonoscopy practice | | |
| Recognise patients who are at high risk of bleeding during endoscopy; the relative risks of anti-platelet and anti-coagulant drugs; and devise bespoke plans for stopping and restarting therapy around endoscopy | | |
| Recognise patients who are at risk of complications (procedural and/or sedation) and describe how these are minimised when undertaking colonoscopy | | |
| Be able to safely administer, monitor and manage the effects, of sedation | | |
| Understand the design, function and decontamination requirements of an endoscope | | |
| Understand the requirements for cleaning, disinfection and reuse of endoscopy disposables | | |
| Understand the use of accessories and principles of diathermy, differences between cutting and coagulation; list and apply safety precautions to be used during diathermy use. | | |
| Demonstrate how to stand, hold and control the colonoscope using both hands independently. | | |
| Understand the function of the angulation control wheels and demonstrate their function. | | |
| Understand the function of the air/water and suction buttons and demonstrate their function. | | |
| Demonstrate principles for safe lower GI endoscopy during intubation and extubation | | |
| Demonstrate facilitated torque steering and scope handling during safe lower GI endoscopy | | |
| Demonstrate understanding of loop recognition and loop resolution principles. | | |
| Demonstrate ability to observe and describe/interpret normal and abnormal mucosa during colonoscopy | | |

# Basic skills in flexible sigmoidoscopy

**Code: JAG_FDP2**

**Type**
Patient hands-on

**Duration**
2 days

**Target audience**

The course is open to anyone whose future job role will involve regular lower gastrointestinal endoscopy flexible endoscopy. The course has been specifically designed to provide training for those individuals who are considering performing flexible sigmoidoscopy as part of the National Bowel Cancer Screening Programme.

This course is mandatory for those applying for JAG certification in flexible sigmoidoscopy (unless basic skills in colonoscopy course undertaken).

**Aims**

- Understanding of the basic principles and practice of flexible sigmoidoscopy and the equipment used
- Acquisition of the basic skill to perform safe flexible sigmoidoscopy
- Understanding of the non-technical skills necessary to perform a safe and competent procedure
- Highlight the associated background knowledge necessary for practice

| Evaluation of Course<br>☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes**<br><br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| List and describe the indications and contraindications for flexible sigmoidoscopy | | |
| Describe components and principles of obtaining informed consent | | |
| Demonstrate the ability to obtain informed consent using a structured approach | | |
| Describe the principles of patient preparation and explain the advantages and disadvantages of different types of bowel preparation in different patient groups | | |
| Describe current prophylactic antibiotics guidelines in endoscopy related to flexible sigmoidoscopy practice | | |
| Identify patients who are at high risk of bleeding during flexible sigmoidoscopy; assess the relative risks of anti-platelet and anti-coagulant drugs; and describe management of these drugs in relation to flexible sigmoidoscopy | | |
| Identify patients who are at risk of complications (procedural and/or sedation) and describe how these can be minimized when undertaking colonoscopy | | |
| Demonstrate ability to safely administer, monitor and manage the effects, of sedation | | |
| Describe the design, function and set up of an endoscope | | |
| Describe the requirements for cleaning, disinfection of endoscopes | | |
| Describe the principles of diathermy and the differences between cutting and coagulation); list safety precautions to be used during diathermy use | | |
| Explain the function of the angulation control wheels and demonstrate their function. | | |
| Explain the function of the air/water and suction buttons and demonstrate their function | | |
| Demonstrate how to stand, hold and control the sigmoidoscope or colonoscope using both hands independently | | |
| Demonstrate principles for safe lower GI endoscopy during intubation and extubation | | |
| Identify, describe and interpret normal and abnormal mucosa during flexible sigmoidoscopy | | |
| Describe and recognize common pathology and their treatments | | |
| Demonstrate the use of biopsy forceps | | |

# Basic skills in upper GI endoscopy

**Code: JAG_GDP2(M), JAG_GDP3(M), JAG_GDP_mod**

**Type**
Hands-on basic skills

**Target audience**
The course is open to anyone whose future job will involve regular upper gastrointestinal endoscopy. Trainees beginning to learn diagnostic gastroscopy and those wishing to consolidate their training for JAG certification. Applicants must have an existing affiliation with a professional body (e.g. GMC). The course would also be to benefit to those wishing to update endoscopy practice and undergo assessment.

Trainees must have support from their educational supervisor or endoscopy trainer to guarantee 6 months supervised training on completion of the course (this is provided either via the JETS website or through written approval from your training lead). It is essential that trainees have at least one training list per week available to them at their base hospital following this course. This course is mandatory for those wishing to apply to JAG certification in upper GI endoscopy.

Unless advised by local training lead, trainees should not wait until basic skills course has been completed before doing any scope handling or intubation.

Trainees attending this 2 day course must evidence completion of the 9 e-learning endoscopy modules which are accessed via e-learning for health. For details of how to access these, please contact askjag@rcp.ac.uk and see the downloadable 'e-lfh table'.

**Duration**
2 days or 3 days

**Overview**
This is a 2-day or 3-day Joint Advisory Group (JAG) approved course for endoscopy trainees wishing to gain/improve their skills in GI Endoscopy. This is an intensive, interactive, practical course covering the theoretical basis of performing a safe gastroscopy and safe effective peri-endoscopy management. The course includes a series of small group and one-to-one teaching sessions, videos, hands-on model work and supervised endoscopy. Each trainee will undertake a number of gastroscopies (minimum of 4 per delegate) under the supervision of expert trainers. The one-to-one teaching focuses on the development of individualised learning outcomes and plans to progress skills.

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| List and describe the indications and contradictions for upper GI endoscopy | | |
| Understand the principles of upper GI endoscopy both as diagnostic techniques and for therapeutic intervention | | |
| Understand the importance and principles of obtaining informed consent | | |
| Be able to obtain consent using a structured approach | | |
| Understand the principles of patient preparation and the advantages and disadvantages of throat sprays and sedation | | |
| List the indications and understand the principles for use of prophylactic antibiotics in upper GI endoscopy | | |
| Recognise patients who are recognised to be at risk of complications (procedural and/or sedation) and describe how these are minimised when undertaking upper GI endoscopy | | |
| Recognise patients recognised to be at high risk of bleeding during endoscopy; list the relative risks of anti-platelet and anti-coagulant drugs; and describe bespoke plans for stopping and restarting therapy around endoscopy | | |
| Be able to safely administer, monitor and manage the effects, of sedation | | |
| Understand the design, function and decontamination requirements of an endoscope | | |
| Understand the requirements for cleaning, disinfection and reuse of endoscopy disposables | | |
| Demonstrate how to stand, hold and control the gastroscope using both hands independently. | | |
| Understand the function of the angulation control wheels and demonstrate their function. | | |
| Understand the function of the air/water and suction buttons and demonstrate their function. | | |
| Demonstrate intubation and extubation | | |
| Demonstrate scope manipulation and handling during safe upper GI endoscopy | | |
| Demonstrate the techniques of pyloric intubation, negotiation into D2 and the j-manoeuvre. | | |
| Demonstrate ability to observe and describe/interpret normal and abnormal mucosa during gastroscopy | | |

# Basic skills in upper GI therapeutic endoscopy

**Code: JAG_GTA2**

**Type**
Animal model/simulators

**Target audience**
ST2 and ST3 in Gastroenterology, ST4 and in Surgery, GPs, nurse endoscopists. Candidates may be supported by an endoscopy nurse from the base hospital who is experienced in accessory use in basic endoscopy (please confirm with individual training centre). Places may be available to staff grades, research fellows and clinical fellows.

**Duration**
2 days

**Overview**
Hands-on experience with an animal tissue model which provides an opportunity for training in upper GI bleeding, injection therapy, dipolar probe therapy, clip application, variceal banding, oesophageal balloon dilatation and PEG insertion.

**Aims**
- Understanding and experience with range of therapeutic modalities used in current clinical practice
- Development of team working for therapeutic practice in endoscopy
- Describe the risks and benefits of therapeutic procedures
- Understand diathermy and its role in therapeutic endoscopy

| Evaluation of Course<br>☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes**<br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| Describe management and demonstrate endoscopic therapy of non-variceal upper gastrointestinal bleeding | | |
| Describe management and demonstrate endoscopic therapy of variceal bleeding | | |
| Explain and demonstrate dilation of benign strictures | | |
| Explain risks associated with dilatation of malignant strictures | | |
| Describe selection, management and demonstrate insertion of PEG | | |

# Basic skills in lower GI (paediatric)

**Code: JAG_CDP3(P)**

**Type**
Patients

**Target audience**

The course is open to anyone whose future job role will involve regular lower gastrointestinal endoscopy in children (0-18 years). This course is mandatory for those applying for JAG certification in colonoscopy in children.

**Duration**
3 days

**Overview**
This is a 3-day course for higher trainees wishing to gain/improve their skills in colonoscopy.

This is in intensive, interactive, practical course covering the theoretical basis of performing a safe colonoscopy and safe and effective peri-endoscopy management in children. The course includes a series of small group and one-to-one teaching sessions, videos, hands-on model work and supervised endoscopy. Each trainee will undertake a number of colonoscopies under the supervision of expert trainers, which will be transmitted to other delegates using the latest A/V resources, including a magnetic 3D imager to facilitate training. The one-to-one teaching focuses on the development of individualized learning outcomes and plans to progress skills.

Trainees must have written support from their educational or endoscopy trainer to guarantee 6 months supervised training on completion of the course. It is essential that trainees have at least one training list per week available to them at their base-hospital following this course.

**Aims**

- Understanding of the basic principles and practice of colonoscopy and the equipment used
- Acquisition of the basic skill to perform safe endoscopies
- Understanding of the non-technical skills necessary to perform a safe and competent procedure
- Highlight the associated background knowledge necessary for practice

| Evaluation of  Course ☑ Please tick relevant box to show your evaluation of course components | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| List and describe the indications for colonoscopy | | |
| Describe the principles of colonoscopy both as a diagnostic technique and for therapeutic intervention | | |
| Describe components and principles of obtaining informed consent | | |
| Demonstrate the ability to obtain informed consent using a structured approach | | |
| Describe the principles of patient preparation and explain the advantages and disadvantages of different types of bowel preparation in different patient groups | | |
| Identify patients who are at risk of complications (procedural and/or sedation) and describe how these can be minimized when undertaking colonoscopy | | |
| Describe the design, function and set up of an endoscope | | |
| Describe the requirements for cleaning, disinfection of endoscopes | | |
| Describe the principles of diathermy and the differences between cutting and coagulation); list safety precautions to be used during diathermy use | | |
| Demonstrate how to stand, hold and control the colonoscope using both hands independently. | | |
| Explain the function of the angulation control wheels and demonstrate their function | | |
| Explain the function of the air/water and suction buttons and demonstrate their function | | |
| Demonstrate principles for safe lower GI endoscopy during intubation and extubation | | |
| Demonstrate facilitated torque steering and scope handling during safe lower GI endoscopy | | |
| Demonstrate understanding of loop recognition and loop resolution principles. | | |
| Identify, describe and interpret normal and abnormal mucosa during colonoscopy | | |
| Describe and recognise common pathology and their treatments | | |
| Demonstrate the use of biopsy forceps | | |

# Basic skills in GI endoscopic ultrasound (EUS)

**Code: JAG_UDP3**

**Type**
Hands on with patient

**Target audience**
Trainees or practitioners whose future job plan will include regular EUS sessions.

**Duration**
3 days

**Overview**
A practical course covering the theoretical basis of performing a safe EUS and safe and effective peri-endoscopy management. The course includes a series of small group and one-to-one teaching sessions, videos, hands-on model work and supervised endoscopy. Each trainee will undertake EUS examinations under the supervision of expert trainers, which will be transmitted to other delegates using the latest A/V resources. The one-to-one teaching focuses on the development of individualised learning outcomes and plans to progress skills.

The course will be delivered using a combination of hands on with patients, simulators, live demonstrations and small group teaching

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Radiology interpretation essential for EUS practice | | |
| Case selection for EUS | | |
| Consent process in EUS | | |
| Intubation skills | | |
| Scope positioning, acquisition and maintenance of diagnostic sonographic images | | |
| Introduction to FNA techniques | | |

# Basic training in trans-nasal gastroscopy

**Code: JAG_GDP1**

**Type**
Hands-on practical

**Target audience**
Consultant gastroenterologists, GP endoscopists, clinical endoscopists, nurse endoscopists, or trainees; who are competent in OGD procedures, but wish to gain/ improve skills in performing trans-nasal gastroscopy.

**Duration**
1 day

**Overview**
This one day course is designed for endoscopists who are fully certified in OGD and wish to gain/ improve skills in performing trans-nasal gastroscopy. This is an intensive, interactive, practical course covering the evidence for trans-nasal gastroscopy, the performance of a TNE and safe effective peri-endoscopic management.

The course includes two lectures, small group teaching sessions, instructional videos, and supervised endoscopy. Each trainee will undertake a number of gastroscopies (aim of three per delegate) under the supervision of expert trainers. The one-to-one teaching focuses on the development of individualised learning outcomes and plans to progress skills.

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** <br> By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand the potential complications associated with trans nasal endoscopy use and their management, including anticoagulation | | |
| Understand the anatomy of the nasal passage pertinent to trans-nasal intubation together with possible pathology encountered | | |
| Have demonstrated the technical skill required to pass the trans nasal scope both orally and trans-nasally | | |
| Be able to reflect on the benefits for patient safety | | |
| Be able to list the indications/contraindications for trans-nasal endoscopy | | |
| Be able to cite the evidence behind, and the advantages of trans-nasal gastroscopy | | |

# Training the endoscopic trainer courses

It is recognised that there are a number of training the endoscopic trainers courses currently available.

The learning objectives are generic for these courses although the specific focus and examples/demonstrations used during these courses will obviously relate to the specific related skill (Gastroscopy, Colonoscopy or ERCP). Similarly the target audience and overall course description will be adjusted to reflect the endoscopic skill focus of the course.

**Code and title:  JAG_CRP2(M)**         **Training the Colonoscopy Trainers (TCT)**

**Code and title:  JAG_GRP2**         **Training the Gastroscopy Trainers (TGT)**

**Code and title:  JAG_BRM2(M)**         **Training the Endoscopic Trainers (TET) (model)**

**Type**
Patients hands on

**Duration**
2 days

**Code and title:  JAG_RRP2(M)**         **Training the ERCP Trainer (TERCPT)**

**Type**
Model

**Duration**
2 days

# Training the colonoscopy trainers (patient) / Training the gastroscopy trainers (patient)

**Type**
Patients hands on

**Duration**
1 day

**Target audience (TCT/TGT)**
All independent endoscopists who are involved in teaching and training in endoscopy. The course may also be suitable for senior accredited trainees that wish to further develop their teaching skills. This course is essential for those wishing to become faculty at endoscopy training centres or train on JAG courses. Individuals must be independent and competent in the skill they are intending to train in before applying for the relevant training the trainers course.

**Overview**
This course is interactive and relies on delegate participation. There is a day of classroom/seminar and model based teaching aimed at developing a training framework to apply to endoscopic training. Seminars, model work and group teaching are used. Day 2 is used to apply the knowledge from Day 1 teaching in a clinical environment.

**Aims**
- To apply the principles of adult learning to the teaching of practical endoscopy skills.
- To establish a framework for effective, efficient endoscopy skills training
- Understand consistent common language and methods used in endoscopy training
- Received feedback to help develop individual teaching style and skills

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| Learning outcomes. By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand and apply a framework for effective skills teaching | | |
| Explain the need for conscious competence in both performing and in teaching endoscopy | | |
| Explain the need to align the trainee's and trainer's agendas | | |
| Understand the benefit of identifying specific personal learning objectives. | | |
| List the common terms and language used in endoscopy training | | |
| Understand the concept of cognitive overload (dual task interference) and the need for an adaptive approach to communication techniques in skills training | | |
| Provide performance enhancing feedback and performance enhancing instruction | | |
| Explain the concept of critical reflection in delivering effective feedback | | |
| Explain and demonstrate currently available assessment methods appropriate for trainees and independent endoscopists | | |
| Describe the uses and benefits of the training GRS and use of the e-portfolio/JETS | | |

# Training the ERCP trainers (patient)

**Type**
Patients hands on

**Duration**
2 days

**Target audience**
Independent practising ERCPists who deliver an ERCP service.

**Overview**
Intensive 3-day course which will allow practising ERCP endoscopists to pool their experience and to learn from each other. In addition the Course will incorporate Training the ERCP Trainers based on the JAG approved model for train the trainers courses.

**Aims**
- To apply the principles of adult learning to the teaching of practical endoscopy skills.
- To establish a framework for effective, efficient endoscopy skills training
- Understand consistent common language and methods used in endoscopy training
- Received feedback to help develop individual teaching style and skills
- Appreciate difficulties in skills training in ERCP

| Evaluation of  Course<br>☑ *Please tick relevant box to show your evaluation of course components* | | |
| --- | --- | --- |
| **Learning outcomes.**<br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand and apply a framework for effective skills teaching | | |
| Explain the need for conscious competence in both performing and in teaching endoscopy | | |
| Explain the need to align the trainee's and trainer's agendas | | |
| Understand the benefit of identifying specific personal learning objectives. | | |
| List the common terms and language used in endoscopy training | | |
| Understand the concept of cognitive overload (dual task interference) and the need for an adpative approach to communication techniques in skills training | | |
| Provide performance enhancing feedback and performance enhancing instruction | | |
| Explain the concept of critical reflection in delivering effective feedback | | |
| Explain and demonstrate currently available assessment methods appropriate for trainees and independent endoscopists | | |
| Describe the uses and benefits of the training GRS and use of the e-portfolio/JETS | | |

# Training the endoscopic trainer (model)

**Code: JAG_BRM2(M)**

**Type**
Model, video and classroom-based course

**Duration**
2 days

**Target audience**
Final year SpR / Consultants / Nurse Endoscopists

**Overview**
Provides educational theory, techniques and resources for trainers involved in teaching and assessment of gastroscopy, lower GI endoscopy and therapeutic endoscopy procedures.

**Aims**
To provide an evidence-based approach to the endoscopic trainer role, review of available training techniques, practical hands-on training exercises and review of current portfolio and assessment methodologies

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| Learning outcomes. By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand and apply a framework for effective skills teaching | | |
| Explain the need for conscious competence in both performing and in teaching endoscopy | | |
| Explain the need to align the trainee's and trainer's agendas | | |
| Understand the benefit of identifying specific personal learning objectives. | | |
| List the common terms and language used in endoscopy training | | |
| Understand the concept of cognitive overload (dual task interference) and the need for an adaptive approach to communication techniques in skills training | | |
| Provide performance enhancing feedback and performance enhancing instruction | | |
| Explain the concept of critical reflection in delivering effective feedback | | |
| Explain and demonstrate currently available assessment methods appropriate for trainees and independent endoscopists | | |
| Describe the uses and benefits of the training GRS and use of the e-portfolio/JETS | | |

# Training the colonoscopy trainer (paediatric)

**Code: JAG_CRP2(P)**

**Type**
Trainers

**Target audience**
Paediatric gastroenterologists who are competent in colonoscopies and are trainers or due to become trainers (likely consultant level).

**Duration**
2 days

**Overview**
This is the first Paediatric training the colonoscopy trainer course delivered by experienced paediatric trainers and external adult trainer experienced in delivery of training the trainer courses. RCPCH CPD approval applied for.

**Aims**
- To apply the principles of learning to the teaching of practical endoscopy skills.
- To establish a framework for effective, efficient endoscopy skills training
- Understand consistent common language and methods used in endoscopy training
- Received feedback to help develop individual teaching style and skills

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand need to deconstruct endoscopy skills before delivering methods for acquisition and learning | | |
| Understand the concept and need for conscious competence in both endoscopy skill and the teaching of it | | |
| Practice practical teaching skills and consider how you may use these approaches in your own teaching | | |
| Understand the need for set, dialogue and closure within teaching episode | | |
| Importance of setting SMART objectives | | |
| Be able to establish an educational contract and framework for teaching defining roles and behaviour | | |
| Understand the importance of well defined clear instruction in training | | |
| Understand the importance of performance enhancing feedback | | |

# Training the EUS trainers

**Code: JAG_UTC3**

**Type**
Trainers

**Target audience**
EUS trainers

**Duration**
3 days

**Overview**
This is a comprehensive and intensive 2.5 day course incorporating the JAG approved model for train the trainers courses. Unique to any train the trainers course there will be opportunity to demonstrate and consolidate the teaching skills acquired with hands on supervision of trainee EUS endoscopists performing EUS on patients.

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes**<br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand and apply a framework for effective skills teaching | | |
| Explain the need for conscious competence in both performing and in teaching endoscopy | | |
| Explain the need to align the trainee's and trainer's agendas | | |
| Understand the benefit of identifying specific personal learning objectives. | | |
| List the common terms and language used in endoscopy training | | |
| Understand the concept of cognitive overload (dual task interference) and the need for an adaptive approach to communication techniques in skills training | | |
| Provide performance enhancing feedback and performance enhancing instruction | | |
| Explain the concept of critical reflection in delivering effective feedback | | |
| Explain and demonstrate currently available assessment methods appropriate for trainees and independent endoscopists | | |
| Describe the uses and benefits of the training GRS and use of the e-portfolio/JETS | | |
| Teaching principles of ultrasound image acquisition and optimisation | | |
| Teaching echoendoscope selection and preparation | | |
| Principles of case selection suitable for trainees | | |
| Principles of breakdown of an EUS examination into training components | | |
| Principles of breakdown of the process of FNA into training components | | |

# Colonoscopy and polypectomy improvement

**Code: JAG_CTP1**

**Duration**
**1 day**

**Type**
Patients, hands-on

**Target audience**
This course is aimed at independent practicing colonoscopists who are already achieving 90% completion (intention to treat) and wishing to improve or develop their therapeutic technical skills.

**Course overview**
Combination of lectures and discussion related to modern colonoscopic practice and therapeutic technique, combined with hands on 1:1 training on patients.

**Aims**
- To improve individual diagnostic and therapeutic technique
- Appreciate the full range of therapy available and their roles
- Understanding of importance of lesion assessment in therapeutic decision making

| Evaluation of Course ☑ Please tick relevant box to show your evaluation of course components | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Demonstrate technique and methods to improve and optimise your individual basic colonoscopy technique | | |
| Describe and interpret the imager and role in problem solving and skills development | | |
| Describe an overview of range of therapeutic modalities involved in polypectomy | | |
| Explain the equipment necessary for therapeutic lower gastrointestinal endoscopy including diathermy settings | | |
| To demonstrate an approach to polypectomy that includes optimal visualisation, classification and risk assessment | | |
| To perform safe polypectomy of pedunculated/sessile lesions | | |
| Have an opportunity to utilise equipment and have hand-on training in polypectomy | | |

# Lower GI polypectomy skills

**Code: JAG_CTA1**

**Duration**
**1 day**

**Type**
Animal model

**Target Audience**
Trainees from medical, surgical or other relevant backgrounds learning to perform endoscopic polypectomy. Consultants wishing to up date their skills are also welcome. Potential delegates should have the scope handling skills and experience of at least 50 colonoscopies or flexible sigmoidoscopies. More experienced endoscopists are also welcome.

**Course overview**
This is one-day intensive practical course using the WIMAT porcine model of endoscopic polypectomy. The course provides an overview and practical experience of how to perform safe and effective polypectomy. Hands on training will include practical polypectomy, tattooing, endoclip placement and endoscopic mucosal resection.

**Aims**
- To improve individual diagnostic and therapeutic technique
- Appreciate the full range of therapy available and their roles
- Understanding of importance of lesion assessment in therapeutic decision making

| Evaluation of  Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Describe an overview of range of therapeutic modalities involved in polypectomy | | |
| Explain the equipment necessary for therapeutic lower gastrointestinal endoscopy including diathermy settings | | |
| To demonstrate an approach to polypectomy that includes optimal visualisation, classification and risk assessment | | |
| To perform safe polypectomy of pedunculated and sessile lesions | | |
| To describe methods of preventing and treating polypectomy complications | | |
| Have an opportunity to utilise equipment and have hands-on training in polypectomy | | |

# Preparation for Bowel Cancer Screening

**Code: JAG_CBP1**

**Type**
Patient hands-on

**Duration**
1 day

**Target audience**
This course is aimed at independent colonoscopists interested in delivering the BCSP. Your unit should have already have had a pre-JAG assessment or have a date for this. Colonoscopists must have performed a prospective audit of their personal clinical practice with data available on the day of the course. It is expected that only people with an "intention to scope" intubation rate of >90% will apply for this course.

**Overview**
Course is designed to assess potential candidates for the BCSP assessment and provide an overview of the process. The course covers the information needed for the accreditation process as well as providing an opportunity to be assessed by both MCQ and technically performing colonoscopy.

**Aims of the course:**
- to familiarize candidates with methodology used for BCSP assessment
- hands-on experience under examination conditions with feedback
- overall assessment of readiness to take BCSP assessment

| Evaluation of  Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Describe the rationale for JAG accreditation for BCSP colonoscopists | | |
| To describe the criteria needed for successful accreditation to BCSP programme | | |
| Recognise the components and format of the assessment | | |
| Describe the components the MCQ syllabus | | |
| Identify available web based resources to help prepare for accreditation process | | |
| Experience a Mock MCQ exam | | |
| Understand the DOPS, DOPyS forms and the associated descriptors and their role in the accreditation process | | |

# Upskilling in colonoscopy

**Code: JAG_CDP1**

**Type**
Patient hands-on

**Duration**
1 or 2 day

**Target audience**
Independent practising colonoscopists

**Overview**
Many established and independent colonoscopists now recognise the need to update their skills periodically. More robust departmental audits of performance data and the imminent move towards endoscopic revalidation have been the catalyst for the development of a colonoscopy upskilling course.

**Aims**
- Individualized hands-on formative assessment of technique
- Tips and tricks to improve practice
- Shared learning through discussion, seminars and remote video learning

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Describe methods to improve and optimise your individual basic colonoscopy technique | | |
| Describe and/or principles of safe polypectomy | | |
| Describe the role of the DOPyS tool in assessment of polypectomy technique | | |
| Describe methods and techniques of mucosal enhancement and their role in current colonoscopy practice | | |
| Explain interpretation of imager and role in problem solving and skills development | | |

# Sharing best colonoscopy practice

**Code: JAG_CTC1**

**Target audience**
Independent practising colonoscopists

**Duration**
1 day

**Overview and aims**
The main purpose of the day is to review current practice and share any new developments or techniques in colonoscopy practice. It is anticipated that the course will lead to continued skills improvement and consistency of optimal practice of the attending delegates.

**Aims**
- Provide a friendly learning environment for groups or departments to share and acquire current knowledge related to modern colonoscopic practice
- Offer opportunity for hands on 1:1 training

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Describe methods to improve and optimise your individual basic colonoscopy technique | | |
| Explain interpretation of imager and role in problem solving and skills development | | |
| Describe currently perceived 'best practice' in a uniform approach to patient centred colonoscopy and polypectomy | | |
| Receive an update on recent developments in colonoscopy and messages/data/tips from the National BCSP | | |
| Describe methods and techniques of mucosal enhancement and their role in current colonoscopy practice | | |

# Endoscopic simulator course

**Code: JAG_BDM1**

**Type**
Simulator

**Target audience**
F2, CT1 and CT2 Trainees who are interested in Gastroenterology / Surgery but have no scoping experience before they apply for ST3 level. Trainee Nurse Endoscopists.

**Duration**
1 day

**Overview**
This course acts as an introduction to endoscopy training. Aimed at trainees before they apply for a ST3 post this course gives the individual an understanding of scope manipulation and basic correct technique.

**List of learning objectives**

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Be able to hold correctly and manipulate (steer) the endoscope around basic upper and lower GI moder | | |
| Understand the principle of Torque Steering | | |
| Understand the Endoscopy training process in the UK and how to use the JETS website | | |
| Recognise basic pathology | | |

# ERCP skills training

**Code: JAG_RDA1**

**Type**
**TBC**

**Duration**
**TBC**

**Target audience**
Aimed at Medical/Surgical SpR's who are fully trained in diagnostic GI endoscopy, have performed therapeutic procedures and observed ERCP. No practical experience of ERCP is necessary but if undertaken delegates should have performed < 50 procedures under supervision.

**Overview**
The course covers pre-assessment, basic ERCP technique, model training and radiological considerations.

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| Demonstrate knowledge of "on the spot" clinical management decisions of jaundiced patients | | |
| Demonstrate acquired technical skills associated with ERCP practice | | |
| Describe radiology imaging interpretation relevant to ERCP practice | | |
| Describe non-technical skills and appropriate management of jaundiced patient | | |

# Introduction to GI Endoscopic Ultrasound Skills

**Code: JAG_UDM2**

**Type**
Live demonstration and simulators

**Target audience**
Registrars already in training in and Consultants who want to train in EUS.

**Duration**
2 days

**Overview**
This course will provide a combination of live demonstrations of a range of EUS cases, instruction and personal tuition on simulators, including an FNA simulator, instruction on image optimisation, and interactive seminars on pre-recorded EUS clips that will form the basis of discussion of image interpretation.

**List of learning objectives**
TBC

# PEG insertion course

**Code: JAG_GTA1**

**Type**
Skills

**Target audience**
Nurses who are currently assisting with PEG insertion or who wish to train for this role.

**Duration**
1 day

**Overview**
This course will provide the essential background knowledge necessary to aid nurses with patient selection and preparation for PEG insertion. They will have the opportunity to insert a PEG on a pig-stomach model. Trouble-shooting and management of comment complications is also covered.

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** By the end of the course you should be able to: | Fully achieved | Not achieved |
| List indications and contraindications for PEG insertion (including ethical considerations) | | |
| Identify different feeding devices and state two main features of each device | | |
| Insert a PEG tube on a pig model using sterile technique | | |
| Recognise possible causes for common PEG-related problems | | |
| Describe strategies for the prevention and management of minor PEG complications | | |

# Basic skills in UGI course (paediatric)

**Code: JAG_GDP2(P), JAG_GDP3(P)**

**Type**
Basic skills

**Target audience**

The course is open to anyone whose future job role will involve regular upper gastrointestinal endoscopy in children (0-18 years). This course is mandatory for those applying for JAG certification in colonoscopy in children.

**Duration**
2 day or 3 day

**Overview**

2-day or 3-day course focusing on Endoscopic procedures, using 'life like' models before performing learnt procedures on consented paediatric patients.

| Evaluation of Course<br>☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes**<br>By the end of the course you should be able to: | Fully achieved | Not achieved |
| Describe the indications and contradictions for upper GI endoscopy | | |
| Understand the principles of diagnostic upper GI endoscopy | | |
| Understand the importance and principles of obtaining informed consent | | |
| To be able to demonstrate obtaining of consent from children and/or parents using a structured approach | | |
| Understand the principles of patient preparation | | |
| Understand the design, function and decontamination requirements of an endoscope | | |
| Understand the requirements for cleaning, disinfection and reuse of endoscopy disposables | | |
| Demonstrate how to stand, hold and control the gastroscope using both hands independently | | |
| Understand the function of the angulation control wheels and demonstrate their function | | |
| Understand the function of the air/water and suction buttons and demonstrate their function | | |
| Demonstrate intubation and extubation | | |
| Demonstrate scope manipulation and handling during safe upper GI endoscopy | | |
| Demonstrate the techniques of pyloric intubation, negotiation into D2 and the j-manoeuvre | | |
| Demonstrate ability to observe and describe/interpret normal and abnormal mucosa during gastroscopy | | |

# ENTS Simulation Course

**Code: JAG_BTM1**

**Type**
Endoscopic Non-Technical Skills Simulation

**Target audience**
Consultant gastroenterologists, GP endoscopists, clinical endoscopists, nurse endoscopists, or trainees; who are competent in OGD procedures, but wish to gain/ improve skills in performing trans-nasal gastroscopy.

**Duration**
1 day

**Overview**
This one day course is designed for endoscopists who are fully certified in OGD and wish to gain/ improve skills in performing trans-nasal gastroscopy. This is an intensive, interactive, practical course covering the evidence for trans-nasal gastroscopy, the performance of a TNE and safe effective peri-endoscopic management.

The course includes two lectures, small group teaching sessions, instructional videos, and supervised endoscopy. Each trainee will undertake a number of gastroscopies (aim of three per delegate) under the supervision of expert trainers. The one-to-one teaching focuses on the development of individualised learning outcomes and plans to progress skills.

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** <br> By the end of the course you should be able to: | Fully achieved | Not achieved |
| Understand the potential complications associated with trans nasal endoscopy use and their management, including anticoagulation | | |
| Understand the anatomy of the nasal passage pertinent to trans-nasal intubation together with possible pathology encountered | | |
| Have demonstrated the technical skill required to pass the trans nasal scope both orally and trans-nasally | | |
| Be able to reflect on the benefits for patient safety | | |
| Be able to list the indications/contraindications for trans-nasal endoscopy | | |
| Be able to cite the evidence behind, and the advantages of trans-nasal gastroscopy | | |

# ERCP sharing good practice course

**Code: JAG_RTP2**

**Type**
Patient hands-on and MDT style discussion between cases

**Target audience**
This course is aimed at those who are practing in ERCP working at consultant level who want to up-skill.

**Overview**
This is a 2 day hands-on course for consultants with the aim of sharing good practice and facilitate advancement of the techniques. This involves MDT style case discussions and video case discussions. This is designed to be a course between ERCP skills and train the ERCP trainer.

# JAG Upper Gastrointestinal Haemostasis course – pilot

**Code: GTM1**

**Type**
Hands-on simulator

**Target audience**
This course is aimed to develop hands-on skills and knowledge for endoscopists who are expected to independently manage acute upper GI bleeding.  The course primarily targets gastroenterology and upper GI surgical specialist trainees, but is also suitable as a refresher course for consultants on existing GI bleed rotas. Applicants should be independent and ideally JAG certified in upper GI endoscopy.

**Duration**
1 day

**Overview**
This is a one-day course which covers theory and practical based elements to upper GI haemostasis.

Lecture based and hands-on involvement involving simulator models (ex-vivo and mechanical).

| Evaluation of Course ☑ *Please tick relevant box to show your evaluation of course components* | | |
|---|---|---|
| **Learning outcomes** <br> By the end of the course you should be able to: | Fully achieved | Not achieved |
| Familiarisation with GI bleed DOPS forms | | |
| Pre-endoscopic management | | |
| Pathologies responsible for UGIB | | |
| Recognition and classification relevant to non-variceal and variceal bleeding | | |
| Risk assessment in UGIB, | | |
| Atypical causes of UGIB and management | | |
| Surgical and radiological options when endotherapy fail | | |
| Report writing and endoscopic non-technical skills in UGIB | | |
| Understand indications and gain hands-on experience in the following haemostatic methods: adrenaline injection, heater probe coagulation, clip placement, Hemospray, variceal band ligation and Sengstaken tube placement. | | |

Further information regarding this report may be obtained from the JAG office at the Royal College of Physicians.

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