Te Linde’s Chapter 13: Wound Healing, Suture Material, and Surgical Instrumentation and Chapter 14: Incisions for Gynecologic Surgery

**CREOG Learning Objectives**

1) Describe key considerations and elements with the following aspects of intraoperative care:

 - team communication and patient safety measures

 - suture selection and use

 - instrumentation selection and use

 - patient positioning

 - incision planning

 - surgical field exposure and use of assistants

 - safe use of technology (eg power sources, fluid management, blood product usage)

2) Describe key considerations for and your approach to optimization of postoperative wound care

**Practice Questions:**

1) A 42-year-old patient, gravida 3, para 3 presents to the ED for acute-onset left lower quadrant pain for the past 2 hours. Medical history is noncontributory aside from a known 5-cm left ovarian cyst suspicious for a mature cystic teratoma. Surgical history includes three cesarean deliveries, one at 27 weeks requiring a vertical midline incision, and subsequent incisional hernia repair requiring mesh 1 cm inferior to the umbilicus. Physical examination and transvaginal ultrasound findings support left adnexal torsion. You ultimately obtain consent from your patient for a diagnostic laparoscopic, ovarian cystectomy, and possible oophorectomy. During your preoperative consent, you inform the patient that secondary to her history, the safest location for peritoneal access using a closed technique is

A. base of the umbilicus

B. 3 cm below the middle of the left costal margin

C. 3 cm below the middle of the right costal margin

D. 3 cm superior to the umbilicus

Source: GYN prolog 8th edition #45

2) A G2P2 woman presents to your office 6 weeks after a cesarean section for routine postpartum care. Coated polyglactin 910 (Vicryl) was used to close the Pfannenstiel incision. How long does it take for a Vicryl suture to undergo complete absorption?

A. ~30 days

B. ~60 days

C. ~180 days

D ~220 days

E. Vicryl is nonabsorbable

Source: TrueLearn

3) What type of incision involves transection of the rectus muscle bellies, as well as maintaining the rectus sheath on the rectus abdominis muscle?

A. Cherney incision

B. Maylard incision

C. Midline vertical incision

D. Mini-laparotomy incision

E. Pfannenstiel incision

Source: TrueLearn

4. A 65-year-old is undergoing an exploratory laparotomy with total abdominal hysterectomy, bilateral salpingo-oophorectomy, and staging for advanced endometrial carcinoma following neoadjuvant therapy. Her medical history is complicated by morbid obesity and poorly controlled type 2 diabetes mellitus. Her body mass index is 50, and her most recent hemoglobin A1c value is 9.5%. Her surgical history is notable for 2 previous cesarean deliveries through the same vertical midline scar. Which of the following suture materials is most appropriate to use for closing the fascia?

A. chromic gut

B. Poliglecaprone 25

C. Polydioxanone

D. Polyglactin 910

E. Polyglycolic acid

Source: TrueLearn

5. A 33-year-old woman presents for a diagnostic laparoscopy for chronic pelvic pain. You close the skin with poliglecaprone 25 (Monocryl). When should she expect this suture to lose all of its tensile strength?

A. 7 days

B. 14 days

C. 21 days

D. 28 days

E. 42 days

1)B 2)B 3)B 4)C 5)C

High-Yield Resources:

1) CREOGS Over Coffee: Episode # 65: Wound Healing, Sutures, and Needles

https://creogsovercoffee.com/notes/tag/suture

2) Uptodate: Closure of minor skin wounds with sutures <https://www.uptodate.com/contents/closure-of-minor-skin-wounds-with-sutures>



