

RRVAMC UofL Surgical Resident Robotic Training Orientation

Resident Name: _____

Must complete the following orientation or produce equivalent training support prior to assisting surgical cases on the Da Vinci Xi training console.

Da Vinci Robot Xi Orientation:

1. Register on DaVinci Surgery Community **Initial:_____**
 <https://www.davincisurgerycommunity.com>
2. Complete resident/fellow overview Intuitive Web site (learning.intuitive.com): **Initial:_____**
 Xi Multi-Port for Residents and Fellows
 Attach Certificate of completion
3. Simulator Exercises
 Document 1 hour simulator time or equivalent outside Robotic OR time. **Initial:_____**
4. Video Observation
 Review full length online video specific to surgical specialty **Initial:_____**

Resident Signature

Date

Completion of approved orientation. YES No Date:_____

OR

Documentation of >10 first assist or surgeon cases from academic affiliate

Robotic Attending Surgeon

Date