



First do no harm: Teaching the Dalton modified entry technique



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A safe technique to laparoscopic entry is vital; ensuring training tools are readily available, especially in the midst of the COVID-19 pandemic, is essential.

Minimally invasive gynaecology surgery proffers multiple advantages for the operative management of many quality-of-life impacting women's health issues, such as endometriosis and heavy menstrual bleeding. Minimisation of risks is the first step in any surgical approach, and for laparoscopy 50% of complications occur at the time of entry¹. The Dalton modified Hasson entry has been proven to be a safe and efficient technique². Teaching opportunities have been limited by the COVID-19 pandemic, making simulation and technology fundamental tools in training of the next generation of proceduralist.

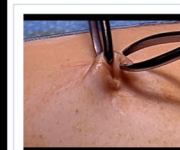
A video and step-by-step guide is provided as a teaching aid to learn the technique. Equipment and patient positioning are described, followed by the eversion of the umbilicus and entry in layers beginning with the midline division of the umbilical ligament, and blunt entry into the peritoneum.

VIDEO LINK



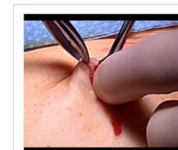
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Entry Technique



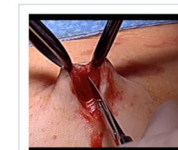
Evert the umbilicus

Using 2 Morrises



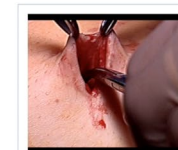
Palpate the umbilical stump

Tense band



Incise the umbilical stump sagittally

Down the middle



Puncture the peritoneum

Palpate with artery