

Engineering Organ Support Technologies



Making My Full Scientific Career FAIR Sharing Clinical, Technical, and Educational Data

Dr. Frank R. Halfwerk







DISCLOSURE

Disclosure of speaker's interests				
(Potential) conflicts of interest	Potential			
Potentially relevent company relationships in connection with event	No			
Research Funding	Yes, FAIR Data Fund			
Fee or other payment	No			
Shareholder	No			
Other relationship	No			





OPEN ACCESS

- Open Access publishing
 - Public/developing countries can access findings
 - More exposure to your work
 - (Higher citation rates)
 - Article processing charge by researchers









Data often not shared

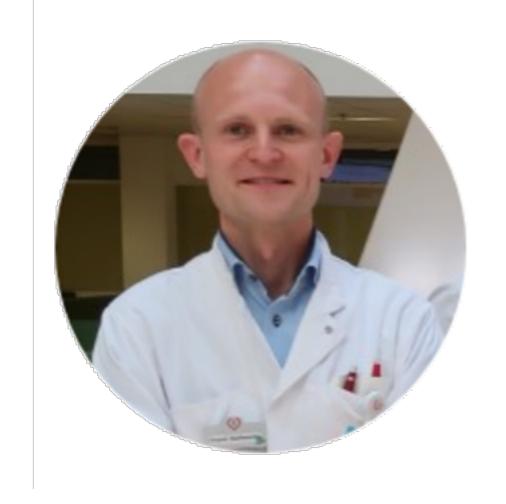


OPEN ACCESS VS OPEN DATA

- Publishing data improves
 - Reproducibility
 - Reliability
 - Visibility
 - Accelerates innovation



FAIR DATA Fund Spring Call 2021



FRANK HALFWERK

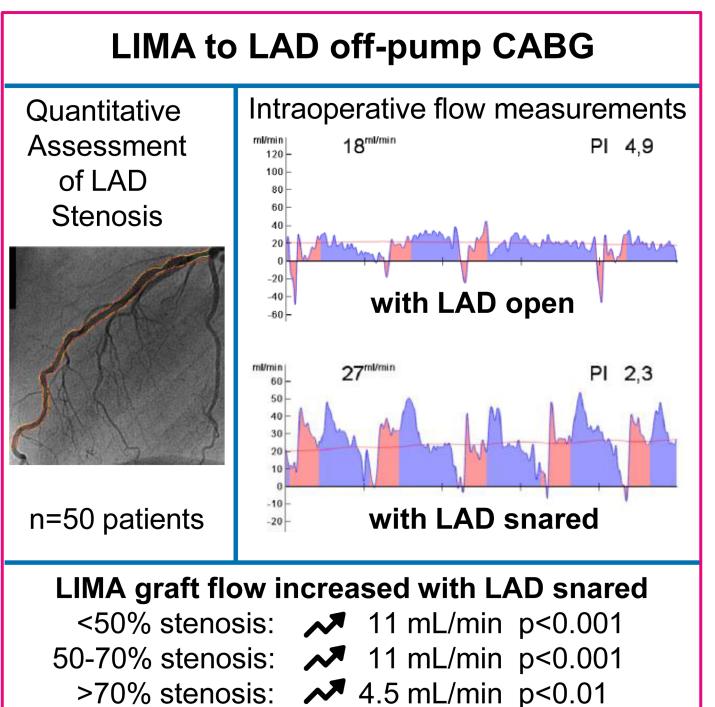
Assistant Professor in Biomechanical Engineering at the University of Twente

Frank is a Technical Physician in cardio-thoracic surgery and the Director of the Cardiac Surgery Innovations Lab. He applied for the FAIR Data Fund with the aim of making this his full scientific career FAIR. Using the fund, he will make all of his data underlying peer-reviewed publications available according to the FAIR principles.

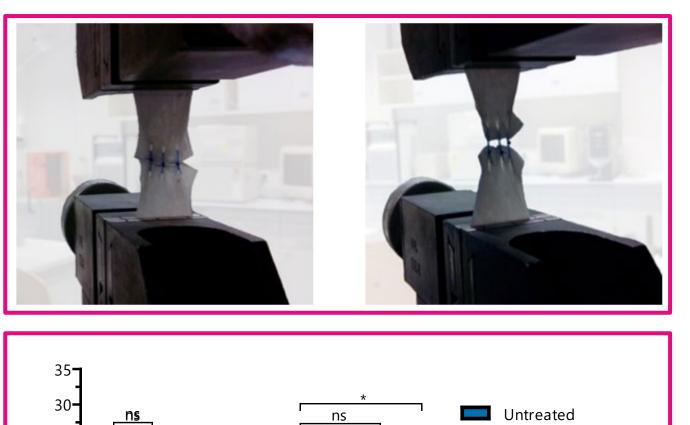


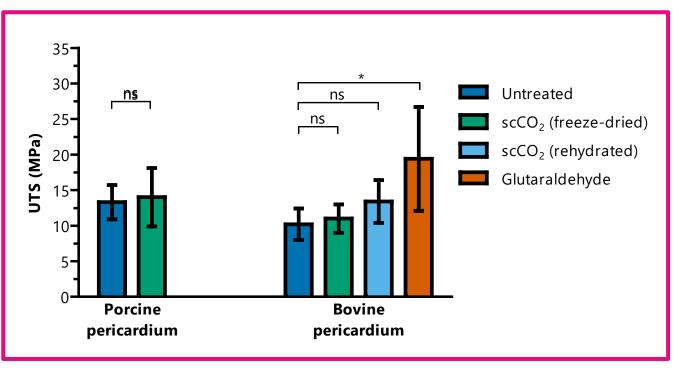
FAIR DATA Fund Spring Call 2021

MEDICAL

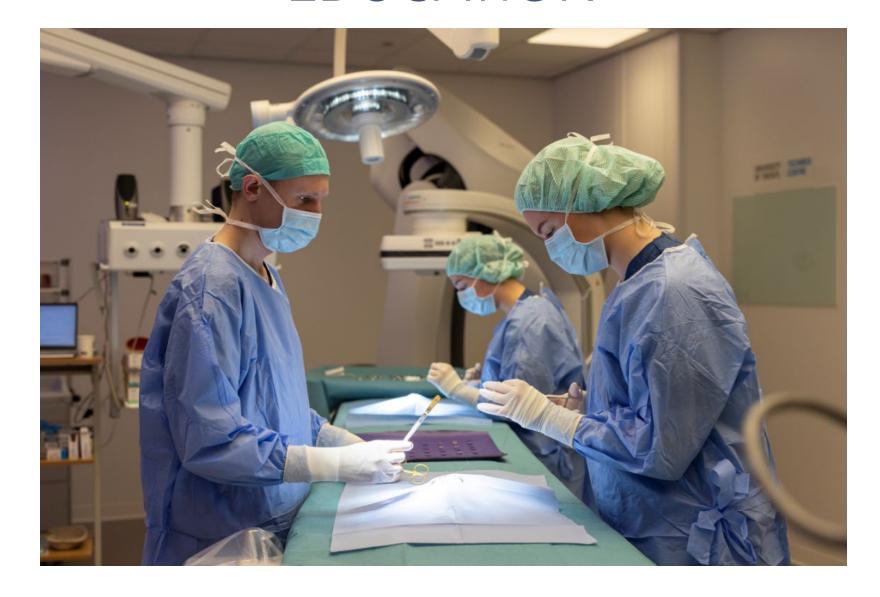


TECHNICAL





EDUCATION



Received: 2 September 2021 | Accepted: 15 October 2021 DOI: 10.1111/jocs.16103

ORIGINAL ARTICLE

CARDIAC SURGERY WILEY

Intraoperative transit time flow measurements during off-pump coronary artery bypass surgery: The impact of coronary stenosis on competitive flow

Frank R. Halfwerk MD, PhD^{1,2} | Pien Spoor MSc¹ | Silvia Mariani MD^{1,3} |

Journal of the Mechanical Behavior of Biomedical Materials 77 (2018) 400-407

Contents lists available at ScienceDirect



Journal of the Mechanical Behavior of **Biomedical Materials**

journal homepage: www.elsevier.com/locate/jmbbm

Supercritical carbon dioxide decellularised pericardium: Mechanical and structural characterisation for applications in cardio-thoracic surgery

Frank R. Halfwerk^{a,b,*}, Jeroen Rouwkema^b, Jan A. Gossen^c, Jan G. Grandjean^{a,b}



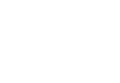
Halfwerk F, Groot Jebbink E, Groenier M MedEdPublishhttps://doi.org/10.15694/mep.2020.000284.1



Research article

Open Access

Development and Evaluation of a Proficiency-based and Simulation-based Surgical Skills Training for **Technical Medicine Students**

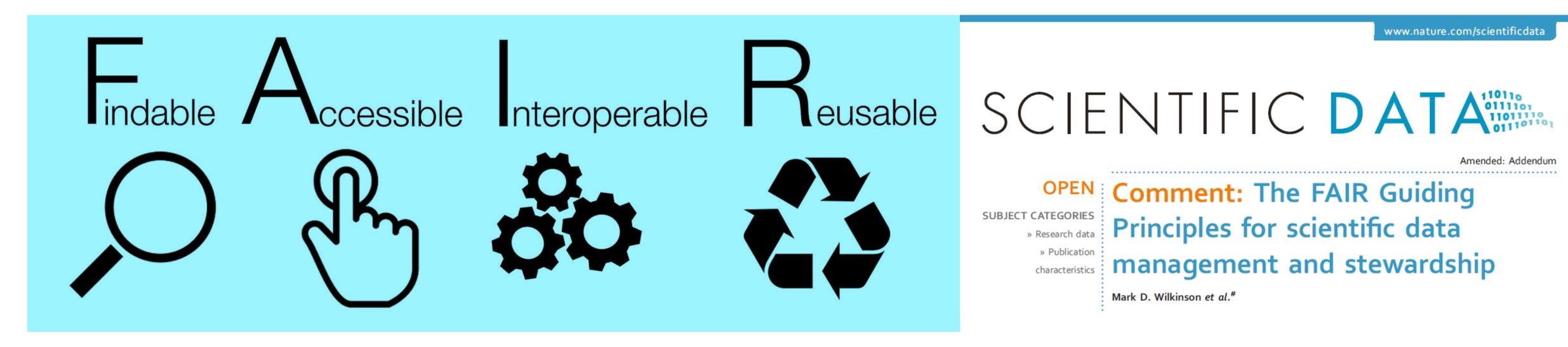


UNIVERSITY OF TWENTE.



HOW TO PUBLISH YOUR (FILL IN...) DATA

FAIR principles



- Aim:
 - To present a best practice for publishing simulation-based training data
 - Graduate Surgical Skills course as use case

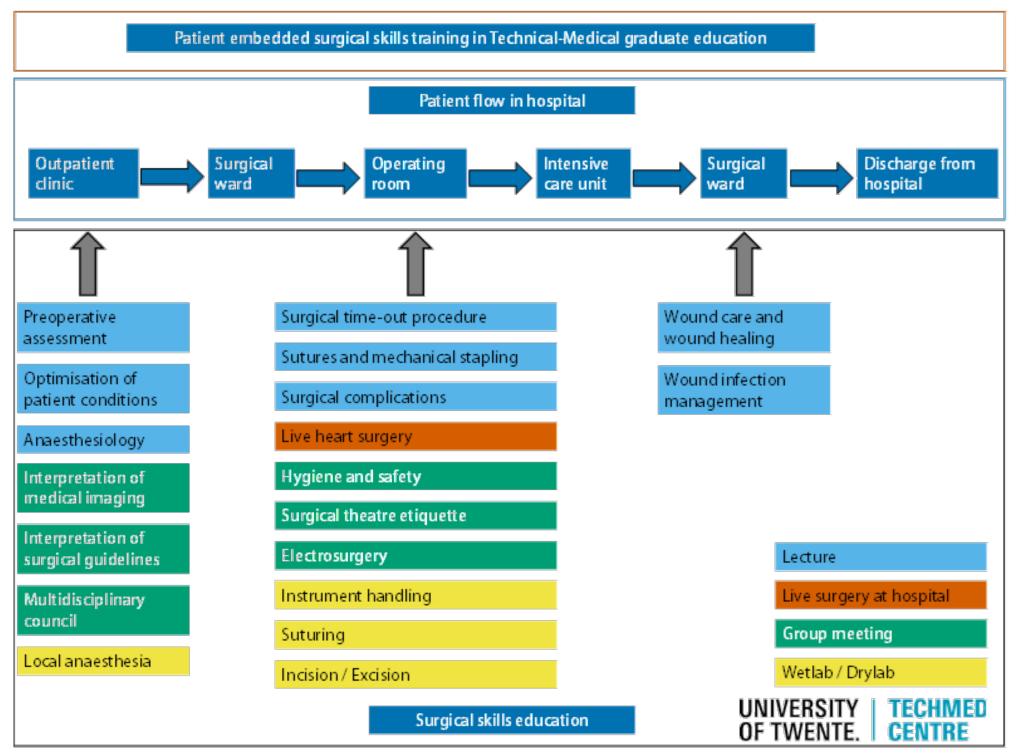
Wilkinson et al., Nature Sci Data, 2016.



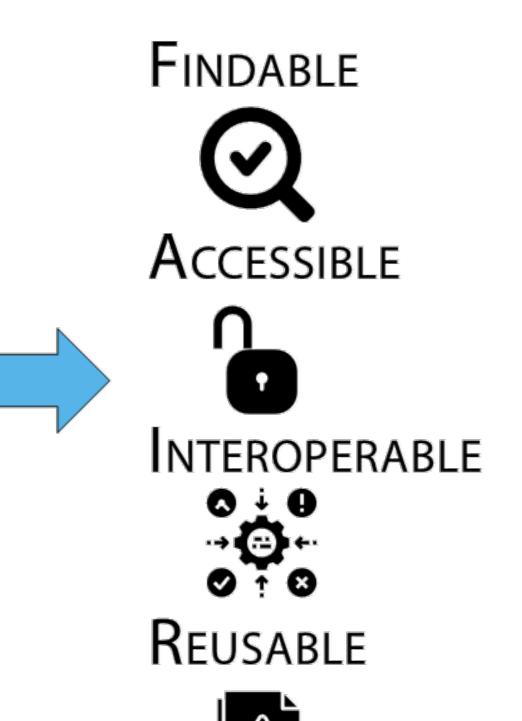
ORIGINAL WORK: GRADUATE SURGICAL SKILLS CURRICULUM DEVELOPMENT

10-week 3 ECTS master course

Making data from a graduate surgical skills curriculum



√ Rating Scales √ Assessment Scores √ Evaluation Survey





Halfwerk F, Groot Jebbink E, Groenier M

MedEdPublish
https://doi.org/10.15694/mep.2020.000284.1

MedEdPublish
An official AMEE Journal
www.mededpublish.org

Research article

Open Access

Development and Evaluation of a Proficiency-based and Simulation-based Surgical Skills Training for Technical Medicine Students



FINDABLE

- Assign DOI
- Metadata
 - i.e. content
 - contact information



- location
- Use DOI from F1 in your metadata
- Repository should be indexed
 - i.e. Google Scholar



https://doi.org/10.4121/14837907.v1

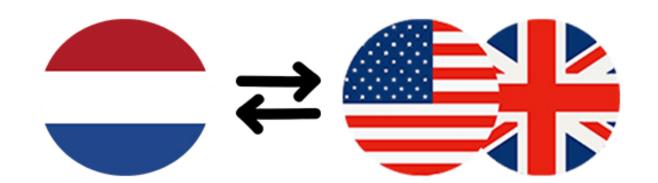


ACCESSIBLE

- Ccessible
 - A P

- Assign data to DOI
 - Open access (not restricted) / Restrict to specific users (restricted)
- Preserve data and metadata
- Anonymize student data
 - i.e. age to age intervals

Dutch - English Translation



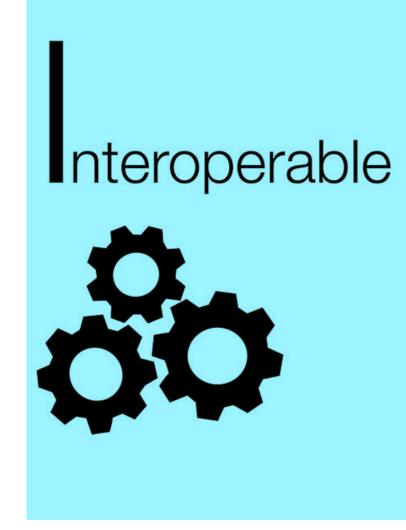
Suturing skills

Name student:	Name assessor:	Date:
Name student:	Name assessor:	Date

ing iique tion ement iment	Student is unable to discriminate between techniques / materials Frequently makes unnecessary	Can discriminate between suturing techniques but unable of providing a rationale for them	Selects appropriate technique but is unable to provide a rationale for instrument	Selects appropriate technique, superficial knowledge of materials	Selects appropriate technique immediately and able to provide
tion	techniques / materials Frequently makes unnecessary	unable of providing a	rationale for instrument	1 1	
ement	Frequently makes unnecessary			knowledge of materials	
		rationale for them	1 1	0	a rationale for selected
			selection		technique
ıment			Acceptable efficiency, some		Economic movements,
ıment	movements		unnecessary movements		maximum efficiency
	Student is unable to		Selects appropriate		Selects appropriate instruments
tion	discriminate between		instruments, unable to		immediately and provides a
	instruments		provide an adequate rationale		rationale for selected
			for selection		instruments
ıment use	Repeatedly makes insecure		Skillful use, at times a bit stiff		Fluent movements, skillful use
	and/or clumsy movements		or clumsy		
of	Ignores feedback		Uses feedback to improve		Requires no feedback for
oack			performance		performance improvement
tying	Knot is loose, slipping, not		Unilateral well tied knot		Right knot, right amount and
	enough knots				right amount of alternations
e	Frequently uses unnecessary		Careful tissue handling, some		Consistent, careful handling of
tivity	force or damages tissue due to		tissue damage		tissue without damage
	inappropriate instrument use				
result	Final result not achieved	Secondary wound healing	Suture is cosmetically	Suture is functionally	Suture is functionally and
			adequate	adequate	cosmetically adequate
у	Disregards safety		Adequate attention to		Adequate attention to personal
			personal safety, neglects		safety and safety of others
			colleague / patient		
:					
r	esult	Frequently uses unnecessary force or damages tissue due to inappropriate instrument use esult Final result not achieved	Frequently uses unnecessary force or damages tissue due to inappropriate instrument use esult Final result not achieved Secondary wound healing	Frequently uses unnecessary force or damages tissue due to inappropriate instrument use Esult Final result not achieved Secondary wound healing Suture is cosmetically adequate Disregards safety Adequate attention to personal safety, neglects	Frequently uses unnecessary force or damages tissue due to inappropriate instrument use Final result not achieved Disregards safety Frequently uses unnecessary force or damages tissue due to inappropriate instrument use Secondary wound healing Suture is cosmetically adequate Adequate attention to personal safety, neglects

Procedure-specific rating scale for suturing. Red colored boxes represent critical errors where students fail the assessment immediately. Scale from 1 (lowest) to 5 (highest).





NOT EXCEL ONLY: interpretation and combination!



INTEROPERABLE

- nteroperable

- NOT EXCEL ONLY: interpretation and combination!
- Use standards
 - i.e. STROBE



STROBE

Strengthening the reporting of observational studies in epidemiology

Include external links for context

Netherlands	USA	UK	Definition	
10	A+	A+	Excellent	
9.5	A+	A+	Excellent	
9	A+	A+	Excellent	
8.5	A+	Α	Excellent	
8	Α	A/A-	Very good	
7.5	A/A-	B+	Very good	
7	B+	В	Good	
6.5	В	C+	Good	
6	B-/C	C/D	Satisfactory	
5.5	D	D	Sufficient	
5	F	F	Almost sufficient	
4	F	F	Insufficient	
3	F	F	Low	
2	F	F	Bad	
1	F	F	Bad	

Halfwerk F, Groot Jebbink E, Groenier M MedEdPublish https://doi.org/10.15694/mep.2020.000284.1



Research article

Open Access

Development and Evaluation of a Proficiency-based and Simulation-based Surgical Skills Training for Technical Medicine Students



INTEROPERABLE

• Measurements, definitions, study protocol

Interoperable

Cohort	Skills_ScrubbingDonning	Skills_Sutu	Sex/Gender	Age
2015-2016	0	0	Male	22 to 26 years
2015-2016	0	0	Female	22 to 26 years
2015-2016	5	0	Male	22 to 26 years
2015-2016	2	0	Female	22 to 26 years
2015-2016	5	0	Female	22 to 26 years
2015-2016	5	0	Male	22 to 26 years
2015-2016	0	0	Male	22 to 26 years

A cohort study was conducted of Technical Medicine graduate students who received mandatory surgical skills training in academic years 2015-2016 and 2016-2017 and was evaluated after at least one clinical rotation, depending on the start of their clinical rotations program.

Students were approached by e-mail 8 months after the course.

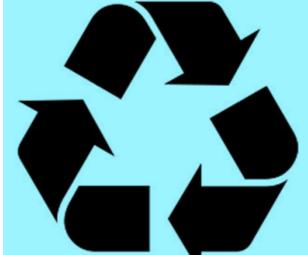
The online survey (SurveyMonkey, San Mateo, California, USA) consisted of statements related to confidence in own capabilities, patient safety and application of knowledge and self-reported technical skills in practice.

Halfwerk et al., 4TU.ResearchData, 2021.



REUSABLE

eusable



Make data readable

0 Male

0 Male

0 Female

0 Female

0 Female

0 Male

0 Male

22 to 26 years

Skills_ScrubbingDonning | Skills_Sutu | Sex/Gender | Age

0

5

2

5

5

0

Cohort

2015-2016

2015-2016

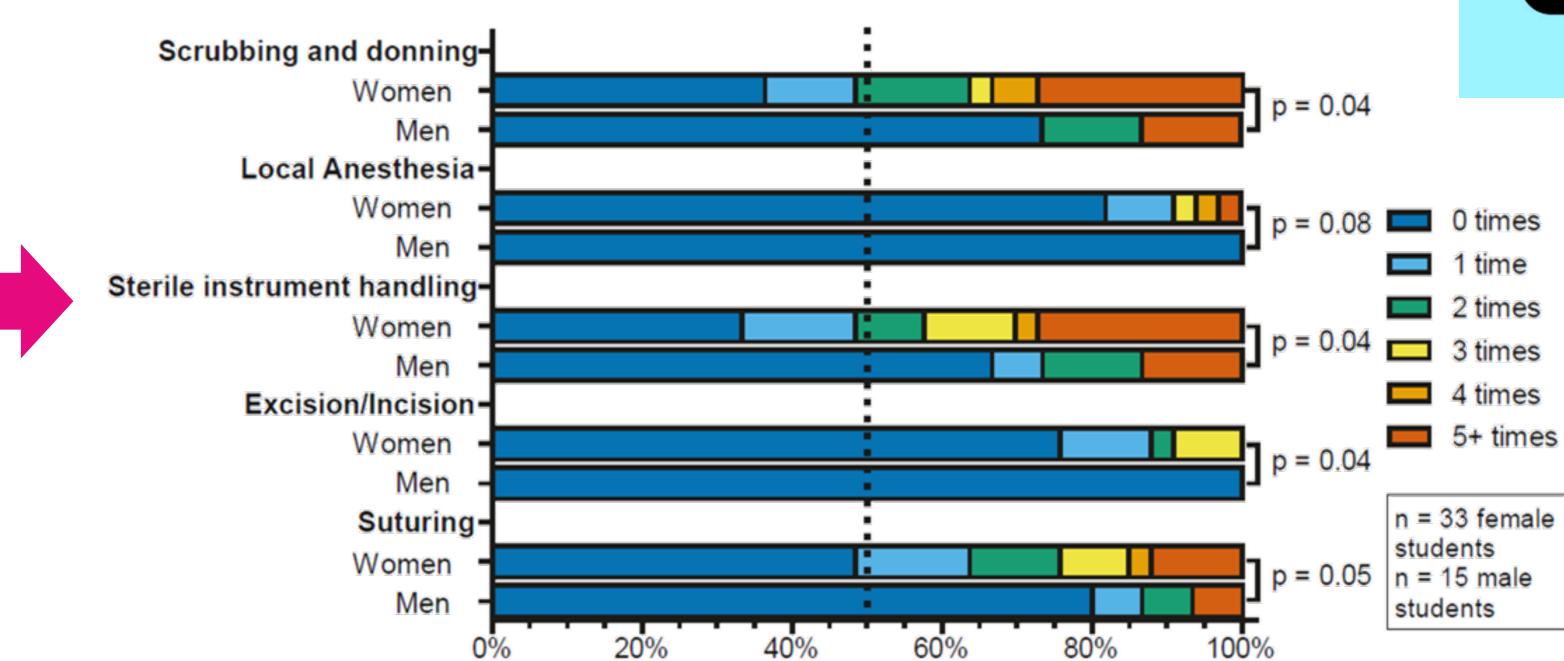
2015-2016

2015-2016

2015-2016

2015-2016

2015-2016

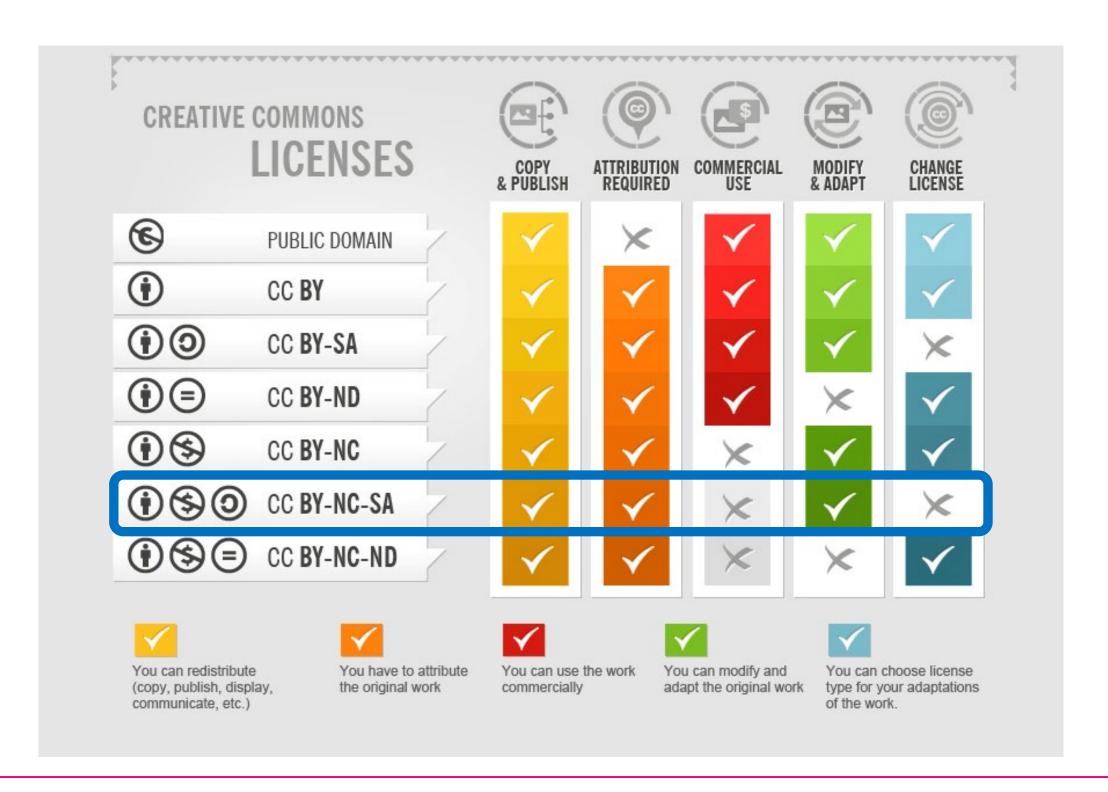


Halfwerk et al., 4TU.ResearchData, 2021.



REUSABLE

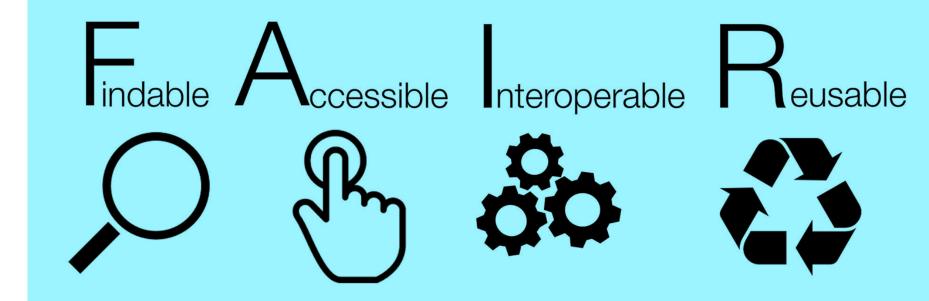
- Make data readable
 - State license (reuse? Commercial use?)
 - How to cite?





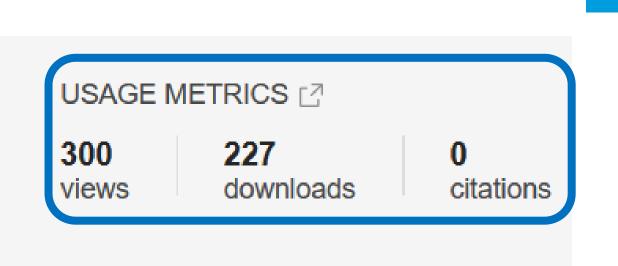


IMPLICATIONS AND OUTLOOK



GENERAL DATA PROTECTION REGULATION

- It is feasible to publish simulation-based data
 - Anonymize
 - Think about <u>unique data</u>
 - Considered as output



Dataset posted on 17.12.2021, 09:58 by Frank Halfwerk, Erik Groot Jebbink, Marleen Groenier

Objective

Surgical graduate training to achieve practice-ready students is needed, yet is often lacking. This study developed

- Future work:
 - Think about FAIR while <u>designing</u> and <u>conducting</u> your studies!

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