## Curriculum Vitae

### Mr Ashish Gupta

Consultant General & Colorectal Surgeon

| Dob   | 27/03/1972               |
|-------|--------------------------|
| Email | docashishgupta@gmail.com |
| GMC   | 6039438                  |

## **Professional Qualifications**

| FRCS Ed        | May 2012 | Intercollegiate Specialty Board, UK   |
|----------------|----------|---------------------------------------|
| MD (Research)  | Mar 2011 | University College London             |
| MRCS           | Jun 2004 | Royal College of Surgeons, Edinburgh  |
| DNB (Gen Surg) | Jun 2001 | National Board of Examinations, New   |
|                |          | Delhi, India                          |
| MS (Gen Surg)  | Apr 2001 | MS University, Baroda, Gujarat, India |
| MBBS           | Dec1998  | Gorakhpur University, India           |

## **Medicolegal Work**

I am in full time employment in the NHS with a busy clinical practice. Hence, I only take limited and selective medicolegal work, where I feel I can help the Court with my unbiased and independent opinion. I have done the following courses.

Cardiff University Bond Solon Expert Witness Certificate - 2021 Bond Solon: Excellence in Evidence Writing: London, June 2016 Bond Solon: Court Room Skills – May 2019 Bond Solon: Cross Examination Day – June 2020 Bond Solon: Civil Law and Procedure Rules – July 2020 Meeting Your Opponent – A guide for Expert Witnesses, MBL, May 2019 Legal Update for Expert Witnesses – online course – April 2019 Bond Solon Annual Conference – Nov 2019

Medicolegal reports: 55 in last 4 years; 45% Claimant; 55% Defendant Court attendance: None Have led and been a panel member for root cause analyses in the NHS for Serious Incidents

#### **Present Position**

| 2014 onwards   | <b>Consultant General &amp; Colorectal Surgeon</b><br>Epsom & St Helier Hospital, Surrey, UK<br>Departmental lead for Colorectal Cancer<br>Educational & Clinical Supervisor |  |
|----------------|--|--|
|                | Private work: Ashtead Hospital & Spire St Anthony Hospital   |  |
| Career History |  |  |

| Oct 2013 – Oct 2014 | Fellow: Colorectal Surgery and Peritoneal Malignancy            |
|---------------------|---|
|                     | Basingstoke Hospital  |
| Nov 2007 – Oct 2013 | Senior Registrar: South West Thames, London Deanery             |
|                     | General & Colorectal Surgery, Upper GI Surgery, Breast Surgery, |
|                     | Vascular Surgery  |

Sep 2002 – Oct 2007SHO :Royal Bournemouth Hospital, Bournemouth, Royal Free<br/>Hospital, Good Hope Hospital, Sutton Coldfield<br/>Resident General Surgery – Baroda, Gujarat, India

## **Clinical Skills and Experience**

## **Open Colorectal**

I have performed a spectrum of operations with excellent outcomes ranging from segmental colonic resections to complex cyto-reductive surgery and intra-operative chemotherapy. Peritoneal malignancy work has given me an exposure to deal with the unexpected in an emergency situation.

### Laparoscopic Colorectal

My default approach in colorectal resections is laparoscopic unless there are patient or disease related factors to necessitate an open resection. Approximately 60-65% resections I perform are completed laparoscopically. I have also adopted laparoscopy as a valuable tool in emergency setting when possible.

### Proctology

I have a preference to perform minimally invasive procedures in haemorrhoid treatment wherever possible. I am adept at using HALO (and RAR) and RAFAELO techniques for haemorrhoids. I have also been using cleft closure technique for complex and recurrent pilonidal disease with reasonable success.

#### Emergency Surgery

I remain consultant on call in a 1:10 rota. Usual emergencies dealt with are laparotomies for bowel obstruction, viscus perforation, and rarely trauma when splenectomy can be required.

#### <u>Colonoscopy</u>

I am fully JAG accredited for colonoscopy. I perform 1.5 lists every week and usually have a trainee to teach colonoscopy skills. My completion rate is > 90%.

## Award

ASIT 2013 clinical and academic travelling bursary for trip to Malawi as a clinical teacher for LAST (Links with African Surgical Training)

## **Recent Clinical Developmental Courses**

| Nov 2021 | ESD (Endoscopic Submucosal Dissection) workshop – Kings College Hospital, London |
|----------|--|
| Nov 2021 | Training the Trainer online course   |
| May 2019 | Court Room Skills – Bond Solon, London   |
| Mar 2017 | Fistula in Ano Conference, ICENI, Colchester                                     |
| Jun 2016 | Bond Solon: Excellence in evidence writing                                       |
| Nov 2015 | TAMIS and TaTME course, Amersfoort, Netherlands                                  |
| Sep 2014 | TEO (Transanal Endoscopic Operation) Course. WIMAT, Cardiff                      |
| Nov 2013 | Early Rectal Cancer Course, The Pelican Centre, Basingstoke                      |
| Nov 2013 | Clinical Management Course, Keele University, Keele                              |

- Oct 2013 Peritoneal Malignancy Workshop, Basingstoke Hospital
- Jun 2013 DECT (Developing Excellence in Clinical Teaching), Croydon
- Mar 2013 ATLS, Royal College of Surgeons, Ashford Hospital
- Feb 2013 LIGHT course (Laparoscopic Incisional and Groin Hernia Training)
- Feb 2013JAG accreditation for colonoscopy

## **Research**

## Aug 2005 – Sep 2007 – MD (res) awarded from University College London

**Thesis Topic:** 'Preparation and Characterisation of Nanocomposite Polysesquioxane Scaffolds for Tissue Engineering of Small Intestine'

**Research Centre:** Academic Division of Surgical and Interventional Sciences, Royal Free Hospital, Hampstead, London

**Role:** My role as a research fellow was to design the study, conduct experiments, publish data in peer reviewed journals, and present them at national and international conferences.

**Description/Outcome:** After successful applications in Vascular Tissue Engineering using the biopolymer made by our lab, this project involved incorporating similar nanocomposite biopolymer to make porous scaffolds suitable for small intestinal tissue engineering. The main techniques employed in this project to make porous scaffolds were particulate leaching and electrohydrodynamic atomisation. I was successfully able to employ electrohydrodynamic atomisation as a novel technique in printing scaffolds. The work was successfully published and presented in European Society of Biomaterials. I was successful in publishing three original articles and a national and international presentation from my research work. In the years to come, our laboratory aims to incorporate the scaffolds, made during this project, for cell culture using stem cells.

## **Publications**

Thiyagarajan U, <u>Gupta A</u>, 'An unusual case of resistant hypokalaemia in a patient with large bowel obstruction secondary to neuroendocrine carcinoma of prostate' – Case reports in surgery, Vol2017,Article ID 2394365. https://doi.org/10.1155/2017/2394365

Farkas N, Black J, <u>Gupta A</u>, 'Urinary retention secondary to acute vasculitic penile swelling in a paediatric patient' – *Clin Case Rep*, 2016 Jan 22;4(3):258-60

Alfa-Wali M, Toomey P, <u>Gupta A</u>, 'Treatment of Uncomplicated Acute Appendicitis' – Comment, JAMA 2015 Oct 6;314(13):1402-3

Farkas N, Solanki K, Frampton AE, Black J, <u>Gupta A</u>, West NJ, 'Are we following an algorithm for managing chronic anal fissure? A completed audit cycle'. Ann Med Surg (Lond). 2015 Nov 25;5:38-44

<u>A. Gupta</u>, S.Dayal, B.Moran. 'Anatomy, embryology, technique and outcomes of TME' – invited chapter in Book 2015: Comprehensive Rectal Cancer Care by Pertinax Publishing, edited by Mary Kwaan

M.Chand, <u>A. Gupta</u>, P. Tekkis, A Mirnezami, T. Quereshi, 'Systematic review of emergent laparoscopic colorectal surgery for benign and malignant disease' – *World J Gastroenterology*. 2014 Dec 7;20(45):16956-63

<u>A. Gupta</u>, D. Vara, G. Punshon, K. Sales, M. Winslet, A. Seifalian, 'In vitro small intestinal epithelial cell growth on a nanocomposite polycaprolactone scaffold' *Biotechnology and Applied Biochemistry*(2009) 54, 221-229.

<u>A. Gupta</u>, A. Dixit, K. Sales, M. Winslet, A. Seifalian, Review: 'Tissue Engineering of Small Intestine - Current Status' *Biomacromolecules*, Vol.7, No.10, 2006: 2701-2709.

<u>A. Gupta</u>, Z. Ahmad, A. Seifalian, M. Edirisinghe, M. Winslet, 'Novel Electrohydrodynamic Printing of Nanocomposite Biopolymer Scaffolds', *Journal of Bioactive and Compatible Polymers*, Vol.22, May 2007;265-280

<u>A. Gupta</u>, M. Winslet, 'Tortuous Common Carotid Artery as a cause of Dysphagia', case report in *Journal of the Royal Society of Medicine* 2005 98: 275-276.

<u>A. Gupta</u>, R. Dionello, M. Winslet, P. Tadrous, 'Benign Papillary Mesothelioma of Peritoneum in association with Gastric Adenocarcinoma', case report: *New Zealand Medical Journal*, January 2007, Vol 20, No.1248.

N. Kulkarni, G. Dadyal, S. Yeluri, A. Kapoor, <u>A. Gupta</u>, 'Chilaiditi's Syndrome', *New Zealand Medical Journal*, September 2004, 24;117(1202): U1092.

## **Presentations**

| Aug 2021 | Diverticular disease – management and prognosis                              |
|----------|--|
| Aug 2016 | Poster presentation on "Appendicular mass management"                        |
| C        | Surgical Symposium, UK   |
| Jun 2015 | Oral presentation on "Update on Bowel Cancer"                                |
|          | St Helier Hospital - GP Lecture  |
| Jun 2014 | <b>Oral</b> presentation at Association of Coloproctology of Great Britain & |
|          | Ireland (ACPGBI) Tripartite colorectal meeting, Birmingham, UK               |
|          | 'Tumour grade and complete tumour removal affects survival after             |
|          | cytoreductive surgery and HIPEC for pseudomyxoma peritonei of                |
|          | appendiceal origin':   |
|          | A.Gupta, K.Chandrakumaran, F.Mohamed, T.Cecil, B.Moran                       |
| Jun 2014 | Poster presentation at ACPGBI, Birmingham, UK                                |
|          | Magnetic resonance defaecatory proctogram for investigation of obstructive   |
|          | defaecatory syndrome (ODS) – our experience at a district general hospital   |
|          | A.Gupta, A.Gordon-Dixon, C.Phillips, A.Venkatasubramaniam                    |
| May 2014 | Poster presentation at American Society of Colorectal Surgeons (ASCRS),      |
|          | Florida, USA   |
|          | Short term outcome of laparoscopic ventral mesh rectopexy and                |
|          | sacrocolpopexy using two meshes.   |
|          | A.Gupta, C.Phillips, A.Venkatasubramaniam                                    |
| Mar 2014 | Oral and poster presentation at UKCS (UK Continence Society), London         |
|          | 'Do we need a multidisciplinary approach to pelvic floor prolapse?'          |
|          | A.Gupta, J.Horton, C.Phillips, A.Venkatasubramaniam                          |
| Feb 2014 | Oral case presenation (MR defaecatory procotgram):                           |
|          | Uro-Gynaecology Masterclass, Pelican Centre, Basingstoke                     |
|          | A.Gupta, C.Phillips, A. Venkatasubramaniam                                   |
| Mar 2013 | 'How to pass FRCS'   |
|          | Oral presentation as an invited speaker at M25 Course                        |
|          | Pelican Centre, Basingstoke  |
|          |  |

# **Clinical Audit/ Quality Improvement**

| Jan 2017   | Set up service - 'Virtual Clinics'  |
|------------|---|
| Feb 2016   | Unnecessary post operative blood tests                                      |
|            | A quality improvement project, Epsom & St Helier Hospital                   |
| Mar 2015   | Algorithm of managing Fissure in Ano – A completed Audit                    |
|            | Epsom & St Helier Hospital  |
| Mar 2014   | 'Do we need a multidisciplinary approach to pelvic floor prolapse?'         |
|            | Basingstoke Hospital  |
| Feb 2014   | Developed an algorithm for diagnosis and treatment for ODS                  |
|            | A Gupta, A Venkatasubramaniam, Basingstoke Hospital, Hampshire              |
| May 2013   | 'Extended DVT prophylaxis in colorectal cancer resections'.                 |
|            | Completed Audit cycle, Croydon University Hospital                          |
| April 2009 | 'Number of normal OGD's are on the rise: Are we following NICE              |
|            | guidelines to investigate dyspepsia – an audit', St Helier Hospital, Surrey |
| Oct 2008   | 'Inappropriate use of plain Abdominal X-Ray in acute appendicitis'          |
|            | East Surrey Hospital, Redhill, Surrey                                       |

# Leadership and Management

## Present roles:

Lead for lower GI Cancer

Lead for sepsis in surgical department

Surgical representative for MAIP project (Management of Acutely III patients)

Departmental Lead for clinical audit - 2015-2017

Faculty for CRISIS course in Trust

## Courses attended:

- **'Promoting Clinical Governance through Effective Management'** at the Royal Free Hospital, UCL, London
- 'Clinical management Course for surgical specialities' at Keele University, Keele, Nov 2013

Management courses included lectures and workshops in Time Management and Managing Meetings, Marketing Principles, Finance and Budget Management, Leadership and Teams, and Negotiating Skills. This training has helped me to identify my weaknesses and deal with my colleagues within the surgical department more tactfully. I have learned to be more diplomatic, persistent and assertive. I have used time management and leadership techniques to manage my surgical firm more effectively.

# Teaching

Teaching Courses

Teaching TIPS for Teachers 1, 2, & 3

- Teaching TIPS for Communication Skills
- DECT (equivalent to **Training the Trainers** course) Developing excellence in clinical teaching

**Educational And Clinical Supervisor** to Surgical Core trainees and registrars **Question Writer** for PLAB part 1 in the GMC.

Member of LAST (Links with African Surgical Training)

Trip to Malawi in 2013 to teach basic surgical skills to their clinical officers.

Other teaching experience:

- Discourse Teaching to medical students
- Teaching during operative theatres and on-call shifts using Kolb's learning cycle (comprising of planning, experimentation, action and reflection)
- Teaching clinical skills to medical students, House Officers and SHOs (such as suturing and surgical knot-tying, using the ATLS model for skills training)
- Teaching clinical reasoning by improving students' pattern recognition techniques
- Teaching large groups of overseas medical graduates preparing for PLAB examinations (OSCEs) in the form of lectures and clinical skills training
- Faculty in Basic Surgical Skills Course at Kingston Hospital and Royal Surrey County Hospital