Key Steps — Suturing technique — principles from a masterclass

A physician-led suturing masterclass. This checklist collects the technique principles it teaches, in the order a repair is performed.

- ☐ 1. Protect yourself first: gloves, and facial protection such as a face shield where splashing is possible; consider double-gloving where infection risk is a concern.
- ☐ 2. Set up the suture tray the same way every time, with needles parked in one consistent place away from hand traffic — most sharps injuries come from disorganised trays.
- ☐ 3. Never recap a needle with a two-handed technique.
- ☐ 4. Assess the wound and prepare it before picking up the needle: cleaning, irrigation and anaesthesia come before closure.
- ☐ 5. Load the needle correctly: grasp it at the junction of its proximal and middle thirds, at the tip of the needle holder.
- ☐ 6. Enter the skin at 90 degrees and drive the needle in a curvilinear path through the tissues by supinating the wrist.
- ☐ 7. Take bites of equal width and depth on both sides of the wound, with depth greater than width, so the edges evert as the knot is tied.
- ☐ 8. Handle tissue gently with forceps — evert the edge rather than crushing it.
- ☐ 9. Tie with an instrument tie: a double first throw (surgeon's knot) to hold tension, followed by single throws in alternating directions.
- ☐ 10. Aim for edges approximated, not strangled — and remember the goal the video stresses: a repair that heals with the best possible cosmetic result.

Watch the demonstration: medicalvideos.com/watch/all-suture-techniques-part-1_IoAjEEvzY4lNANhgedHE.html •
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Steps summarise this demonstration for education and do not replace your institution's protocol, which always governs. Content reviewed by Dr. Mohamed Ibrahim, MD, PhD — physician-scientist. October 2026.