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ROTATION: UROLOGY

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CHIEF OF UROLOGY: Jean DeKernion, M.D.

SITE: UCLA Medical Center; Greater Los Angeles VA Medical Center

GOALS:

Demonstrate the ability to manage routine and emergency genitourinary problems in a variety of settings.

LEVEL OF TRAINEE: R1

ASSESSMENT:

Monitoring of the accomplishment of the stated objectives will be performed using the following methods:

1. Global Rating: end of rotation evaluation of resident performance to assess the resident’s demonstration of Core Competencies with respect to the stated objectives by faculty, other team members, students, and nursing staff.
2. Case Logs: auditing of operative cases pertinent to the specialty in the Surgical Operative Log.
3. Written Examination: performance on the annual ABSITE examination
4. Patient Survey: performance will be assessed by patient surveys administered through the rotation.

DESCRIPTION OF THE ROTATION:

The Urology rotation will consist of 4 weeks at the PGY1 level. The rotations will take place at the CHS UCLA Medical Center or The Greater Los Angeles VA Hospital

1. The rotating residents will be part of the Urology team and provide perioperative and intraoperative care to inpatients and outpatients undergoing urological procedures
2. They will also evaluate and treat patients with urological problems in clinic and assist the consult resident in the management of inpatient and emergency room consultations
3. The rotating residents will participate in all Department of Surgery educational conferences and didactic presentations.
4. They are also expected to actively participate and present at the weekly Urology Conference.

COMPETENCY- BASED KNOWLEDGE OBJECTIVES:

Patient Care:

1. Complete and record a focused urological history and physical examination.
2. Participate in the perioperative care of patients undergoing urologic surgery.
3. Under appropriate supervision, plan and initiate appropriate therapy for the following:
   a. hematuria
   b. cystitis
   c. pyelonephritis
   d. calculus disease
   e. urinary retention and bladder outlet obstruction
   f. scrotal mass/scrotal pain
4. Perform a bladder catheterization (including passage of Coudet tip foley catheters).
5. Review and interpret the following studies:
   a. CT Urogram (CTU)
   b. Renal and Bladder Ultrasound

Medical Knowledge:

1. Describe the components of a focused genitourinary history and physical examination in evaluating the following urologic problems:
   a. pain
   b. hematuria
   c. dysuria
   d. urinary incontinence
   e. flank masses
   f. penile lesions
   g. testicular masses
   h. prostate nodule or enlargement
2. Discuss the evaluation and management of the following urologic infections:
   a. cystitis
   b. pyelonephritis
   c. prostatitis
3. Discuss the management of urologic trauma involving the following:
   a. penis/urethra
   b. scrotum
   c. bladder
   d. ureter
   e. kidney
4. Summarize the indications for diagnostic procedures/imaging in urology including:
   a. renal/bladder ultrasonography (U/S)
   b. CT urogram (CTU)
   c. retrograde urethrography (RUG)
   d. cystography (VCUG)
   e. transrectal ultrasound (TRUS)
   f. nuclear renal scan (MAG-3, DMSA)
   g. arteriography
   h. MRI
5. Discuss the nature and indication for the following therapeutic procedures:
   a. bladder catheterization
   b. use of Coudet-tip foley catheters and filiform/follower catheters
   c. urethral meatotomy
   d. suprapubic cystostomy (SP tube)
   e. percutaneous nephrostomy (Perc tube)
6. Discuss the following conditions including the embryology and management of the following:
   a. hypospadias
   b. ureteropelvic junction obstruction (UPJ obstruction)
   c. vesico-ureteral reflux (VUR)
   d. posterior urethral valves
   e. myelomeningocele and its urologic sequelae
   f. cryptorchidism (undescended testicle)
   g. infant hernia/hydrocele
7. Describe the types of incisions and exposure required for the following operations:
   a. nephrectomy
   b. radical cystectomy
   c. radical retropubic prostatectomy
   d. renal transplantation
   e. simple vs radical orchietomy
8. Discuss the management of renal, ureteral and bladder calculi.
9. Discuss common peri-operative complications and their management of the following operations:
   a. radical retropubic prostatectomy (RRP)
   b. renal transplantation
   c. radical cystectomy
   d. bladder augmentation
   e. transurethral resection of the prostate (TURP)
   f. laparoscopic vs open nephrectomy

**Professionalism:**

1. Practice compassionate patient care maintaining the highest moral and ethical values with a professional attitude.
UCLA General Surgery Residency Program
Rotation Educational Policy
Goals and Objectives

2. Demonstrate understanding of the needs and feelings of others, including the patient’s family members, allied health care personnel (nurses, clerical staff, etc.), fellow residents, and medical students.

3. Communicate and collaborate effectively in a team of health care providers

4. Demonstrate respect, compassion and integrity in the care of patients on a daily basis

5. Demonstrate mature and educated approach to Ethical issues commonly encountered

6. Show sensitivity to patients culture, age, gender and disabilities

7. Be self-aware and have knowledge of professional limits by practicing on-going medical education and self-improvement.

8. Be accountable to profession in their actions and decisions

Interpersonal Relationships And Communication:

1. Create and sustain a therapeutic and ethically sound relationship with patients and patient families

2. Work effectively with other members of the medical team including allied health care personnel (nurses, clerical staff, etc.), fellow residents, and medical students.

3. Maintain professional interactions with other health care providers and hospital staff

Systems Based Practice:

1. Understand how the health care organization affects surgical practice

2. Demonstrate cost effective health care

3. Be able to coordinate multi-specialty and multidisciplinary care including discharge planning, social service, rehabilitation, and long term care

4. Follow established practices, procedures, and policies of the Department of Surgery and integrated and affiliated hospitals.

5. Maintain complete of medical records operative notes staff sheets and notes, patient database cards and other patient care related documentation in a timely, accurate and succinct manner.

REFERENCES:

1. Urology – House Officer Series; by Macfarlane; ed: Williams/Wilkins

TYPICAL WEEK:

UROLOGY