

Urologic Surgery

Institution: VUMC

Duration: 1 month

Supervising Physician: Kristen Scarpato

Contact Information:
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Year of Training: PGY 1

Educational Objectives:

The goal is to gain knowledge and experience in the evaluation and management of surgical problems in patients with urologic conditions.

Practice-Based Learning and Improvement

Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Residents are expected to develop skills and habits to be able to meet the following goals:

- ✓ Identify strengths, deficiencies, and limits in one's knowledge and expertise
- ✓ Set learning and improvement goals
- ✓ Identify and perform appropriate learning activities related to urologic surgical conditions
- ✓ Systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement
- ✓ Incorporate formative evaluation feedback into daily practice
- ✓ Locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems
- ✓ Use information technology to optimize learning
- ✓ Participate in the education of patients, families, students, residents and other health professionals

Interpersonal and Communication Skills

- ✓ Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds;
- ✓ Communicate effectively with physicians, other health professionals, and health related agencies;
- ✓ Work effectively as a member or leader of a health care team or other professional group;
- ✓ Act in a consultative role to other physicians and health professionals; and,
- ✓ Maintain comprehensive, timely medical records

Professionalism

Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents must:

- ✓ Demonstrate compassion, integrity, and respect for others
- ✓ Be responsive to patient needs that supersedes self-interest
- ✓ Show respect for patient privacy and autonomy
- ✓ Be accountable to patients, society and the profession
- ✓ Show sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.
- ✓ Residents, under the direct supervision of senior residents, advanced practice providers, and attending physicians, must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

Systems-based practice.

- ✓ Work effectively in various health care delivery settings and systems relevant to their clinical specialty;
- ✓ Coordinate patient care within the health care system relevant to their clinical specialty;
- ✓ Incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate;

- ✓ Advocate for quality patient care and optimal patient care systems;
- ✓ Work in inter-professional teams to enhance patient safety and improve patient care quality; and,
- ✓ Participate in identifying system errors and implementing potential systems solutions.

Medical Knowledge and Technical Skills

- ✓ Perform urethral catheterization and assist with suprapubic cystostomy
- ✓ Assist with basic endoscopic surgeries including retrograde pyelogram, ureteral stent placement, bladder biopsy, botox injection, and stone treatment.
- ✓ Assist in minor open procedures including scrotal surgery and adult circumcision
- ✓ Observe more advanced procedures including percutaneous endoscopic procedure, laparoscopy, robotic surgery, and major open procedures.
- ✓ Basic assessment of the urologic patient
- ✓ Introductory level knowledge base regarding pathophysiology of common urologic conditions including obstructive uropathy, urologic malignancy, urologic trauma, voiding dysfunction, stone disease and reproductive medicine
- ✓ Have a working knowledge of urologic cancers, their evaluation and clinical staging and the options for treatment and follow-up
- ✓ Read a CT scan and renal ultrasound

Description of Clinical Experiences:

Residents will be exposed to a wide breadth of medical, diagnostic and surgical procedures on the urology service at a busy academic center.

1. During the rotation, the resident should gain familiarity with our clinical pathways and learn optimal inpatient management as well as obtain a basic understanding of cost-effective medicine
2. Gain a working knowledge of the necessary preoperative work-up and postoperative management of the urologic patient with a variety of urologic conditions

Description of Didactic Experiences:

Evaluation Process:

Methods of assessment:

- Rotation evaluations
- Direct observation
- Evaluation by other providers and staff
- Self-assessment
- 360 degree evaluation
- Review of medical records

Other Important Rotation Information:

Supervision

There are four (4) levels of supervision:

Level 1

Direct Supervision – the supervising physician is physically present with the resident and patient.

Level 2

Indirect Supervision with direct supervision immediately available – the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide Direct Supervision.

Level 3

With direct supervision available – the supervising physician is not physically present within the hospital or other site of patient care but is immediately available by means of telephonic and/or electronic modalities and is available to provide Direct Supervision.

Level 4

Oversight – the supervising physician is available to provide review of procedure/encounters with feedback provided after care is delivered.

The residents perform the operative procedures under Level 1-2 Direct or Indirect Supervision with Direct Supervision immediately available from either the Attending or Senior Resident commiserate with the case's complexity and the residents' experience. Attendings are involved with all aspects of postoperative care. All patients at Vanderbilt Hospital are private patients with a designated attending physician. The residents make all the initial decisions regarding patient management, but these are discussed with the attending physician before implementation.

Inpatient or Emergency Room consults will be performed under Level 1-3 from either the Attending or Senior Resident dependent on the complexity, acuity and resident experience.

Any patient encounter in which an operative decision may be needed will be performed under Level 1-2 with a Senior Resident or Attending.

All admissions to the hospital will be done at Level 1-3 with a Senior Resident or Attending.

All significant deterioration in a patient's status, including transfer to ICU, will be performed at Level 1-3 with a Senior Resident or Attending.