

Rotation Description for Medical Urology Rotation

I. General Information

- A. Rotation Length: 2 weeks
- B. Faculty: Urology staff physicians at VAMC
- C. Course Director: Leland Coffman, MD

II. First Day Orientation

- A. Prior to the start of the rotation, the resident should contact Dr. Coffman at VAMC (699-5907) to arrange a schedule of planned clinical activities.
- B. The resident will report to the VA Urology Clinic on 2 West on the first day of the rotation to meet with Dr. Coffman.

III. Objectives and Description of Rotation

- A. The primary purpose of this rotation is to help residents become familiar with those aspects of care in urology that are appropriately diagnosed and managed by general internists and those that should be referred to, or managed jointly with, urology specialist physicians.
- B. Principal teaching method: The resident will learn by evaluating patients in an outpatient clinic setting and staffing each patient with the assigned attending physician.
- C. Specific skills to be learned during the rotation include:
 - 1. Improvement in the examination of normal male and female genitalia This will include improved recognition of cystocele and rectocele pathology, pelvic masses, scrotal masses, and abnormalities on prostate examination.
 - 2. Understanding the approach to fertility concerns in the male patient.
 - 3. Learning the approach to male and female patients with recurrent urinary tract infections.
 - 4. Improved performance on urinalysis evaluation, including the approach to common abnormalities like proteinuria, hematuria and pyuria.

5. Learning the causes of urinary tract obstruction in male and female patients and the proper approach to evaluation and treatment based on pathology.
6. Gaining a better understanding of common genitourinary cancers including proper staging and treatment for cancers of the kidney, ureter, bladder, urethra, prostate, testicle and penis.
7. Learning the indications and proper method for performing cystoscopy.

IV. Educational Content

- A. Patient Mix: This will be typical of a VAMC urology group practice with over 90% male patients, covering a broad range of age and medical status.
- B. Residents will see patients in an office setting and have an opportunity to first perform a limited history and examination on assigned patients. Each patient will then be staffed with the assigned attending physician.

V. Ancillary Education

- A. Review of Chapter 9 in the Goroll Primary Care Medicine text should be completed during the rotation.
- C. Additional reference textbooks are available in the medical library at IMMC or can be borrowed from urology faculty at VAMC.

VI. Mechanics of Rotation

- A. Residents will work in the VAMC Urology Clinics Monday through Fridays. At the start of the rotation the residents will be given a schedule of the assigned attending physician they will work with on a daily basis.
- B. The resident will see assigned patients and staff each patient with the assigned attending physician. The resident will complete documentation on each patient seen as requested by the attending physician. The resident will be directly and indirectly supervised by the faculty physician.
- C. The resident will participate in all Wednesday morning and all noon teaching conferences of the residency program during the rotation.
- D. The resident will attend their weekly continuity clinics during this rotation.

VII. Evaluation

At the end of the rotation, the resident will be evaluated by the supervising faculty. Personal feedback will be provided and an evaluation form will be completed and returned to the residency office. The evaluation form will be reviewed and signed by the resident.

The resident will be evaluated by faculty in each of the required six general competency areas as follows:

1. **Patient Care:** Demonstrate ability to effectively interview and examine patients with a variety of different urology concerns.
2. **Medical Knowledge:** Demonstrate understanding of common urology problems encountered in patients and understand indications for referral.
3. **Practice-Based Learning:** Demonstrate ability to identify gaps in knowledge and skills in the care of patients with common urology concerns and demonstrate real-time strategies to address these gaps.
4. **Interpersonal and Communication Skills:** Demonstrate adequate communication abilities in dealings with patients seen during the rotation. Demonstrate timely and complete medical records.
5. **Professionalism:** Demonstrate respectful behavior towards patients and families, colleagues, nurses and other allied health personnel. Always protect patient confidentiality and provide informed consent.
6. **Systems-Based Practice:** Collaborate with nursing and other allied health care providers to assure timely, comprehensive care provided and assure proper follow-up is arranged.

William J. Yost, MD

4/9/12

