

**UNIVERSITY OF ALBERTA  
POSTGRADUATE MEDICAL EDUCATION  
UROLOGY – IN-TRAINING EVALUATION REPORT**

<b>Name:</b> <<Resident	<b>PGY</b> <<2 & 3>>
<b>Report Covers Training Period:</b> <<Date>>	
<b>Preceptor(s):</b> <<Surgeon Name>>	<b>Rotation:</b> <<General Urology 2 >>

EXPECTATIONS: (for rotation/level of training) This rotation covers the specific objectives of male contraception, male infertility, and circumcision.	Does not apply	Could not evaluate	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations	Superior
			1	2	3	4	5
<b>MEDICAL EXPERT</b>							
<b>Basic Science Knowledge</b>							
a) Knows the pertinent anatomy/physiology of the scrotum, testes, spermatic cord, paratesticular structures, penis and foreskin (including male reproductive physiology)							
b) Able to classify the causative conditions involved in male infertility (primary or secondary; pretesticular, testicular and post-testicular) and the predisposing, epidemiological and patho-physiological factors involved in infertility; knows definitions and causes of abnormal seminal fluid results							
c) Understands medical indications for child and adult circumcision; able to recognize and classify degrees of hypospadias and how the presence of it might alter the decision to perform circumcision							
<b>Clinical Knowledge</b>							
a) Able to present a management plan for the infertile male; aware of recommendations of alternate family planning in non-correctable cases							
b) Able to describe symptoms and signs of hydrocele, spermatocele, and testicular torsion							
c) Conversant with the various methods of male contraception; able to define the indications for vasectomy; and any arguments against it, including patient concerns about secondary effects							
d) Able to describe surgical steps in performing vasectomy							
<b>Recognition &amp; Management of Emergencies</b>							
a) Describes and understands clinical situations that may require emergent dorsal slit or circumcision							
b) Aware and able to manage early and late complications of vasectomy							
c) Able to diagnose and devise management plan for a patient with suspected torsion of the testicle or acute inflammation of the scrotum							
d) Able to recognize/diagnose, manage the acutely ill patient in the ward-setting							
<b>B. COMMUNICATOR</b>							
a) Able to develop rapport and trust with patients and families							
b) Accurately elicits and synthesizes relevant information from patients/families, colleagues and other professionals							
c) Accurately conveys relevant information and explanations to patients/families, colleagues and other professionals							
d) Able to develop a common understanding/shared plan on issues, problems and goals with patients/families, colleagues and other professionals							
e) Written documentation of medical encounters is accurate and timely							
<b>C. COLLABORATOR</b>							
a) Participates and works effectively in the healthcare team; able to negotiate/resolve interprofessional conflicts							
b) Consults and delegates appropriately for level of training							
<b>D. MANAGER</b>							
a) Manages individual time and career training effectively							
b) Allocates healthcare resources appropriately							
c) Serves in administration and leadership roles as per level of training							
d) Meets deadlines, is punctual for rounds, clinics, OR, academic activity; meets commitments made							
e) Attends clinics and ambulatory clinical activity as outlined in objectives							
<b>E. HEALTH ADVOCATE</b>							
a) Responds to individual patient health needs and issues as part of patient care							
b) Aware of the medical studies, socially-based arguments, and religious and cultural desires; for and against routine circumcision in newborns or older children							
c) Assists patients by advocating for their investigation/treatment, and mobilizes hospital/community resources when necessary							
<b>F. SCHOLAR</b>							

a) Demonstrates evidence of active reading/studying/research around cases, weekly seminars, and monthly journal clubs.								
b) Critically evaluates information and its sources, and applies this appropriately to career training and future practice decisions								
c) Facilitate the learning of patients, families, students, residents other health professional, the public, and others as appropriate								
<b>G. PROFESSIONAL</b>								
a) Demonstrates a commitment to patients, profession and society through ethical behavior, integrity, honesty, compassion and respect								
b) Demonstrates evidence of being able to practice effectively within bounds of a self-regulating profession (ie- seeks/accepts advice, demonstrates awareness of personal limitations)								
c) Demonstrates a commitment to physician health and sustainable career training and practice (ie- personal health/well-being/resiliency, personal & career development)								
<b>H. TECHNICAL &amp; SURGICAL SKILLS</b>								
<b>General Endoscopic Skills</b>								
a) Rigid cystoscopy, retrograde pyelography								
b) Flexible cystoscopy, insertion of guidewire and insertion of stent								
c) TUR-BT of small to medium-sized tumors								
d) Resection of posterior lobe of prostate in TURP								
<b>General Open Surgical Skills</b>								
a) Holds and uses instruments in a proper and efficient manner & ties square surgical knots (one and two-handed ties)								
b) For prostatectomy, open and establish appropriate exposure for insertion of Bookwalter retractor (by early PGY3)								
c) Completion of pelvic lymph node dissection (end of PGY3)								
d) For radical nephrectomy or partial nephrectomy, open and establish appropriate exposure for insertion of Bookwalter retractor (end of PGY3)								
e) Able to close a flank, anterior abdominal and thoraco-abdominal incisions								
f) Knows the appropriate steps in surgical procedure (s)								
<b>Rotation Specific Open &amp; Endoscopic Skills</b>								
a) Able to consistently identify the vas deferens on physical exam of the scrotum and perform local spermatic cord block or block of vas deferens								
b) Able to perform: vasography, testis biopsy, urethrography, and cystoscopy. Aware of the varied surgical approaches for ligating varicoceles.								
c) Begin to acquire the skills of TUR of ejaculatory ducts, vasovasostomy, vasoepididymostomy, simple orchidectomy, inguinal orchidectomy, detorsion and fixation of testicles								
d) Aware of surgical procedures for performing circumcision of the newborn or infant and the adult; and able to perform circumcision and dorsal slit								
<b>General Laparoscopic Skills</b>								
a) Insertion of camera port using Hasson technique and additional ports during above procedure								
b) Able to properly assist primary operator as the camera person								
c) Opening and closing of kidney extraction site during radical nephrectomy/nephroureterectomy								
d) Closure of camera and laparoscopic ports								
e) Able to mobilize large bowel exposing retroperitoneum during LRN (end of PGY3)								
f) Able to mobilize lateral and inferior attachments to kidney and place specimen in lap sac (end of PGY3)								

**OVER ⇨**

Has this resident met the core objectives of this rotation? YES  NO

Comments: (your comments especially relating to ratings 0, 1 and 4 are specifically requested).

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Was this evaluation made by a committee	YES <input type="checkbox"/>	NO <input type="checkbox"/>
or		
by a single or principal evaluator	YES <input type="checkbox"/>	NO <input type="checkbox"/>

Principal Evaluator _____	PRINT	Signature	Date
Resident			
This evaluation has been reviewed with me.      YES <input type="checkbox"/> NO <input type="checkbox"/>			
If no, why not?			
Comments:			
Resident      <<Resident Name>> _____			
	PRINT	Signature	Date
Program Director <u>Dr Tim Wollin</u> _____			
	PRINT	Signature	Date

**PLEASE RETURN TO:**  
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