

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

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| Name: <<Resident | PGY <<3>> |
| Report Covers Training Period: <<Date>> | |
| Preceptor(s): <<Surgeon Name>> | Rotation: <<Stones/Female Urology>> |

| EXPECTATIONS: (for rotation/level of training) This rotation covers specific objectives of Stones/Endourology and Female Urology PGY 3 | Does not apply | Could not evaluate | Rarely meets | Inconsistently meets | Generally meets | Sometimes exceeds | Consistently exceeds |
|---|----------------|--------------------|--------------|----------------------|-----------------|-------------------|----------------------|
| MEDICAL EXPERT | | | 0 | 1 | 2 | 3 | 4 |
| Basic Science Knowledge | | | | | | | |
| a) Understands/describes the epidemiology and pathophysiology of stone formation | | | | | | | |
| b) Understands the effects of ureteral obstruction on renal function (acute and chronic changes) and able to describe the pathogenesis of ureteral pelvic junction obstruction (UPJO) | | | | | | | |
| c) Able to describe and categorize the pathophysiology of voiding dysfunction (abnormalities of filling/storage) and incontinence | | | | | | | |
| Clinical Knowledge | | | | | | | |
| a) Describes/recognizes symptoms/signs of a patient with acute renal colic; orders appropriate diagnostic tests; able to interpret common radiologic tests used to diagnose urinary tract obstruction (KUB, IVP, CT scan, U/S, RPG) | | | | | | | |
| b) Can describe the surgical/endourological treatment options for urinary tract stones depending on their location | | | | | | | |
| c) Can describe/order the appropriate tests used for the diagnosis of UPJO and describe the indications and options for intervention in the patient with UPJO | | | | | | | |
| d) Describe/outline the appropriate laboratory, radiologic, endoscopic and urodynamic evaluation of the patient with voiding dysfunction | | | | | | | |
| e) Describe treatment for the patient with neuropathic voiding dysfunction (facilitate bladder filling/storage; bladder emptying) | | | | | | | |
| Recognition & Management of Emergencies | | | | | | | |
| a) Able to recognize/diagnose the common emergency scenarios in the patient with urinary tract stones (bilateral ureteral obstruction, solitary kidney, infected hydronephrosis); able to order appropriate management for these patients | | | | | | | |
| b) Able to recognize/diagnose, manage the acutely ill patient in the ward-setting | | | | | | | |
| B. COMMUNICATOR | | | | | | | |
| 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 | | | | | | | |
| C. COLLABORATOR | | | | | | | |
| a) Participates and works effectively in the healthcare team; able to negotiate/resolve interprofessional conflicts | | | | | | | |
| b) Consults and delegates appropriately for level of training | | | | | | | |
| D. MANAGER | | | | | | | |
| 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 | | | | | | | |
| E. HEALTH ADVOCATE | | | | | | | |
| a) Responds to individual patient health needs and issues as part of patient care | | | | | | | |
| b) Assists patients by advocating for their investigation/treatment, and mobilizes hospital/community resources when necessary | | | | | | | |
| F. SCHOLAR | | | | | | | |
| 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 | | | | | | | |

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| G. PROFESSIONAL | | | | | | | |
| 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) | | | | | | | |
| | | | | | | | |
| H. TECHNICAL & SURGICAL SKILLS | | | | | | | |
| General Endoscopic Skills | | | | | | | |
| 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 | | | | | | | |
| Rotation Specific Endoscopic Skills | | | | | | | |
| a) Rigid ureteroscopy with laser fragmentation of a ureteral stone, stone basket extraction | | | | | | | |
| b) Able to insert flexible ureteroscope into upper urinary tract and systematically inspect renal calyces | | | | | | | |
| c) Perform rigid nephroscopy, intracorporeal lithotripsy, and stone extraction during PCNL | | | | | | | |
| General Open Surgical Skills | | | | | | | |
| a) Holds and uses instruments in a proper and efficient manner | | | | | | | |
| b) Ties square surgical knots (one and two-handed ties) | | | | | | | |
| c) For prostatectomy, open and establish appropriate exposure for insertion of Bookwalter retractor (by early PGY3) | | | | | | | |
| d) Completion of pelvic lymph node dissection (end of PGY3) | | | | | | | |
| e) For radical nephrectomy or partial nephrectomy, open and establish appropriate exposure for insertion of Bookwalter retractor (end of PGY3) | | | | | | | |
| f) Knows the appropriate steps in surgical procedure (s) | | | | | | | |
| General Laparoscopic Skills | | | | | | | |
| a) Insertion of camera port using Hasson technique | | | | | | | |
| b) Insertion of additional ports during above procedure | | | | | | | |
| c) Able to properly assist primary operator as the camera person | | | | | | | |
| d) Opening and closing of kidney extraction site during radical nephrectomy/nephroureterectomy | | | | | | | |
| e) Closure of camera and laparoscopic ports | | | | | | | |
| f) Able to mobilize large bowel exposing retroperitoneum during LRN (end of PGY3) | | | | | | | |
| g) 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).

| | | | |
|--|------------------------------|-----------------------------|------|
| 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

Dr Tim Wollin

PRINT

Signature

Date

PLEASE RETURN TO:

UROLOGY RESIDENCY TRAINING PROGRAM

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