

GENERAL SURGERY
PGY2 OBJECTIVES

MEDICAL EXPERT

*Basic Science
Knowledge*

The resident should have a good understanding of the embryology of the genitourinary tract.

The resident should understand the normal anatomy of the genitourinary system, emphasizing the

- Retroperitoneum
- Adrenal glands
- Bladder
- Prostate and seminal vesicles
- Penis and urethra
- Spermatic cord, epididymis and testes

It is expected that the resident will have a complete understanding of renal physiology as it related to the specialty of urology.

*Clinical
Knowledge*

The resident should have knowledge of the surface anatomy as it relates to urologic surgery.

The resident will be able to perform a comprehensive examination of the patient presenting with urologic complaints.

The resident will be able to order the appropriate investigations specific to the presenting problem.

The resident will be able to perform a variety of procedures with topical anaesthesia and intravenous sedation.

The resident will have a thorough understanding of the developmental anomalies of the genitourinary tract, including:

- Renal agenesis
 - Ectopic kidney
 - Horseshoe kidney
 - Polycystic kidneys
 - Medullary sponge kidney
 - Simple renal cysts
 - Renal vascular abnormalities
 - Renal pelvis anomalies
 - Ureteral anomalies
 - Congenital obstruction of the ureter
 - Duplication of the ureters
 - Ureterocele
 - Bladder anomalies
 - Exstrophy of the bladderprune Belly syndrome
 - Penile and urethral anomalies
 - Hypospadias
 - Epispadias
 - Urethral strictures
 - Urethral diverticulum
 - Posterior urethral valves
 - Scrotal and testicular anomalies
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- Testicular torsion
- Scrotal lesions

The resident will understand obstructive uropathy due to

- Inflammatory stricture
- Traumatic stricture
- Bladder outlet obstruction
 - Benign prostatic hyperplasia
 - Prostate cancer
- Vesical tumors
- Neuropathic bladder
- Extrinsic ureteral compression
 - tumor
 - retroperitoneal fibrosis
 - lymphadenopathy
- ureteral or pelvic stones
- ureteral strictures
- ureteral or pelvic tumors

The resident will understand the aetiology of ureteropelvic junction obstruction.

The resident will have a good understanding of retroperitoneal fibrosis

The resident will know the essentials of diagnosis for benign prostatic hyperplasia, with knowledge of indications for conservative and surgical management.

The resident will be able to differentiate between acute pyelonephritis and other acute intraabdominal conditions

The resident will understand acute epididymitis.

It is expected that the resident will have a thorough understanding of renal and ureteric calculi, and the work-up of such patients

The resident will have a complete understanding of genitourinary tract trauma, with knowledge of surgical approaches

- Injuries to the kidney
- Injuries to the ureter
- Injuries to the bladder
- Injuries to the urethra
- Injuries to the penis
- Injuries to the scrotum and testis

The resident will have an understanding of tumours of the genitourinary tract

- Renal cell carcinoma
- Tumors of the bladder and ureter
- Carcinoma of the prostate
- Tumours of the testis

The resident will have a thorough understanding of hydrocele and varicocele

The resident must have a complete understanding of testicular torsion

Recognition and Management of Emergencies

Able to assess the patient with an acute abdomen and order appropriate investigations and treatment

Coordinate pre- and post- operative care for the patient with the acute abdomen.

Able to assess and provide initial resuscitation and management of the patient with general trauma (according to the guidelines provided in ATLS)

Technical and Procedural Skills

The resident will take part in a variety of open and laparoscopic urologic surgery, and become knowledgeable of the various surgical approaches to the genitourinary organs

	<p>The resident will be aware of the technical issues around repair of ureters following traumatic injury.</p> <p>The resident will be take part in urologic endoscopy, and understand the technical issues around cystoscopy and ureteroscopy.</p>
<i>Communicator</i>	<p>The resident will document clinical findings in a timely manner</p> <p>The resident will be able to present patients accurately via phone or in person to senior colleagues.</p> <p>The resident will communicate in an efficient manner with referring doctors, nurses, and allied health care professionals to ensure the best patient care.</p>
<i>Collaborator</i>	<p>The resident will help in the coordination of multiple specialties that may be involved in the management of complex patients.</p> <p>The resident will serve as an effective surgical leader.</p>
<i>Manager</i>	<p>The resident will understand the wise and efficient management of health care resources.</p> <p>The resident will use resources effectively to balance patient care, learning needs, and outside activities</p> <p>The resident will use information technology to optimize patient care, life-long learning and other activities</p>
<i>Health Advocate</i>	<p>The resident will advise patients and their families regarding prevention of disease and health maintenance.</p> <p>The resident will identify the important determinants of health affecting patients.</p> <p>The resident will recognize and respond to those issues where advocacy is appropriate.</p>
<i>Scholar</i>	<p>The resident will demonstrate and develop skills for evidence based surgical practice as it relates to the urology patient.</p> <p>The resident will develop, implement and monitor a personal continuing education strategy.</p> <p>The resident will contribute to the development of new knowledge.</p>
<i>Professional</i>	<p>Interact with patients, families, nurses and other health care personnel in a professional manner with appropriate attitudes in dealing with patients with abdominal or alimentary tract problems.</p> <p>Respect all opinions of health care workers as well as the patients and families.</p> <p>Constantly evaluate his/her working knowledge, skills and abilities, and recognize the limits of his/her professional competence.</p> <p>Deliver the highest quality of care with integrity, honesty and compassion.</p>

<i>Specific Clinical Expectations</i>	<p>Hernias- Understand the anatomy and treatment of ventral abdominal hernias: inguinal (direct, indirect) and femoral, umbilical, spigelian, Obturator, Lumbar (Petit), parastomal, and diaphragmatic hernias.</p> <p>Understand the causes of paralytic ileus and be able to manage the patient with this problem</p> <p>Be able to anticipate and initially manage wound complications such as infection, fasciitis, dehiscence and evisceration.</p> <p>Know the etiology and management of intra and retroperitoneal abdominal abscesses of all locations</p> <p>Causes and Management of GI obstruction, hemorrhage and perforation, inflammatory bowel diseases, acute abdomen</p> <p>Management of intestinal ostomies</p> <p>Able to manage patients with multi-organ trauma</p>
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