

ONCOLOGY 1 TESTICULAR CANCER

PGY 3 OBJECTIVES

MEDICAL EXPERT

Basic Science Knowledge

Be able to describe the epidemiology and etiology of testicular cancer, including incidence, age, bilateral disease and relationship to cryptorchidism.
Has an understanding of the pathophysiology and parthenogenesis of the various embryonic elements and their malignant potential, mechanism of spreading and growth rate and extragonadal disease.
Understands which element produces the tumor markers, the significance of the subunits and the half-life of the markers.
Understands the endocrinologic effects of testicular tumors.
Understands the differentiation between seminoma and non-seminomas
Has some knowledge about chemoTx (cell cycle specific vs. nonspecific) and mechanism of action of cisplatin, vinblastine, etoposide (VP16) and bleomycin.
Has an understanding of the mechanism of action of radioTx and the radiation sensitivity of the various germ cell elements.

Clinical Knowledge

Be able to describe and recognize the symptoms and signs of a patient presenting with testicular cancer.
Be able to describe and order the appropriate diagnostic tests to make the diagnosis and stage testicular cancer.
Formulates a differential diagnosis and management plan.
Be able to read and interpret the radiological and laboratory tests to diagnose and stage testicular cancer
Can identify and differentiate the histological elements (syncytiotrophoblast embryonal bodies, etc.)
Has an understanding of the prognosis and what constitutes good and poor risk disease.
Has an understanding of the risk of retroperitoneal relapse and landing areas based on histology and the indications for surveillance.
Understands the indications (primary, residual, salvage, and desperation) for retroperitoneal lymph node dissection (RPLND).
Able to describe the effect of testicular Ca and Tx on fertility

Recognition and Management of Emergencies

Be able to describe the clinical scenarios that constitute an emergency in the patient with testicular cancer (ureteral obstruction, infection, brain metastasis, respiratory failure, acute renal failure etc.)
Be able to order the appropriate management for patients in these situations (management of bleomycin lung, etc.).

Technical and Procedural Skills

Be able to perform a radical orchidectomy (as technically described in the text book, including marking suture) understanding how to avoid pitfalls.
Be able to assist in the performing a RPLND.

Specific Clinical Expectations

General clinical expectations apply

ONCOLOGY 1 TESTICULAR CANCER**PGY 3 OBJECTIVES**

CONTINUED . . .

COMMUNICATOR

<i>Communicates Effectively with Patients, Families</i>	Sympathetic and reassuring to the patient and understands the potential for embarrassment and fear when communicating Dx and Tx and risks . Communicates the emergent nature of the management and its effect on reproduction. Communicates the risk of cryptorchidism and the importance of self-exam.
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<i>Communicates Effectively with other Health Professionals</i>	Practices in a multidisciplinary fashion with needed preoperative and post-operative consultation (radiation oncologist, medical oncologist, reproductive medicine, pathologist, etc.) Understands the importance of pathology, tumor markers and stage in communicating with collaborators.
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<i>Documentation Timely, Accurate</i>	Understands the importance of pathology, tumor markers and stage in communicating with collaborators and documents this in the chart (progress note, OR note, referral note and discharge summary).
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COLLABORATOR

<i>Recognizes Roles of, and Interacts with Other Health Professionals</i>	Other ancillary services including Social services and Psychiatry.
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SCHOLAR

<i>Personal Continuing Education Strategy</i>	Has read around the case at the time of presentation Develops MOCOMP type skills for documentation (personal notes).
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<i>Helps Others Learn</i>	Teaches students, allied health workers, and other residents through participation in seminars.
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ONCOLOGY 1 TESTICULAR CANCER

PGY 4 AND PGY 5 OBJECTIVES

MEDICAL EXPERT

Basic Science Knowledge Be able to describe same concepts as in PGY 1-3 years
Detailed knowledge of the retroperitoneal anatomy

Clinical Knowledge Same as for PGY 1-3 years but with greater in-depth.
Understands toxicities of chemotherapy and there limitations on surgical management.
Understands significance of Teratoma in primary specimen
Dx and management of chylous ascites (Elemental diet vs TPN) drainage
Dx and management of residual mass (radioTx vs chemo vs surgery).
Management of vascular injury (venous and arterial)
Management of infertility
Indications for chemotherapy post RPLND
Indication for Autologous bone marrow transplant
Late complications of chemoTx and radioTX
The testis and brain as a sanctuary site and management.

Recognition and Management of Emergencies Same as PGY 1-3
Management of delayed vascular events
Management of tense chylous ascites with respiratory compromise

Technical and Procedural Skills Positioning of patient for RPLND and choice of incision (gaining exposure)
Mobilization of peritoneal contents
Respect /appreciation for tissues/plans post chemoTx
Vascular control and suturing

Specific Clinical Expectations General clinical expectations apply

COMMUNICATOR

Communicates Effectively with Patients, Families Sympathetic and reassuring to the patient and understands the potential for embarrassment and fear when communicating Dx ,Tx and risks .
Communicates the emergent nature of the management and its effect on reproduction.
Communicates the risk of cryptorchidism and the importance of self-exam.

Communicates Effectively with other Health Professionals Practices in a multidisciplinary fashion with needed preoperative and post-operative consultation (radiation oncologist, medical oncologist, reproductive medicine, pathologist, etc.)
Understands the importance of pathology, tumor markers and stage in communicating with collaborators.

Documentation Timely, Accurate Understands the importance of pathology, tumor markers and stage in communicating with collaborators and documents this in the chart (progress note, OR note, referral note and discharge summary).

ONCOLOGY 1 TESTICULAR CANCER

PGY 4 AND PGY 5 OBJECTIVES

CONTINUED . . .

SCHOLAR

<i>Personal</i>	Has read around the case at the time of presentation
<i>Continuing</i>	Develops MOCOMP type skills for documentation (personal notes).
<i>Education Strategy</i>	
<i>Helps Others</i>	Teaches students, allied health workers, and other residents through participation in
<i>Learn</i>	seminars.
