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

**Name:** <<Resident>>
**PGY:** <<4 & 5>>

**Report Covers Training Period:** <<Date>>

**Preceptor(s):** <<Surgeon_Name>>
**Rotation:** <<Stones/Female Urology>>

<table>
<thead>
<tr>
<th>EXPECTATIONS: (for rotation/level of training)</th>
<th>Does not apply</th>
<th>Could not evaluate</th>
<th>Inconsistently meets</th>
<th>Generally meets</th>
<th>Sometimes exceeds</th>
<th>Consistently exceeds</th>
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<tbody>
<tr>
<td>This rotation covers specific objectives of Stones/Endourology and Female Urology PGY 4&amp;5</td>
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**MEDICAL EXPERT**

**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) Able to describe, order and interpret the appropriate tests of 24 hr urine collections and bloodwork to investigate the stone former; able to prescribe dietary prevention and medications for the management of patients with stones
- b) Able to outline the management of urinary tract stones occurring in pregnancy
- c) Able to outline the technical aspects, peri-operative care and complications of SWL ureteroscopy and percutaneous nephrolithotripsy (PCNL)
- d) Able to outline and interpret results of the diagnostic evaluation for the patient with urinary incontinence and make treatment decisions based on these results
- e) Able to outline and prescribe nonsurgical treatment for the patient with urinary incontinence (medical, pelvic floor exercises, biofeedback, behavior modification)
- f) Able to outline the indications for the surgical treatment of urinary incontinence and describe the technical aspects and complications of the different surgical approaches

**Recognition & Management of Emergencies**
- a) Able to outline the steps in treating acute intra-op and post-op bleeding in the patient undergoing PCNL
- 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

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) Flexible cystoscopy, insertion of guidewire and insertion of stent

b) TUR-BT of all tumors

c) TURP for a medium to large prostate gland (20 to 80 grams)

Rotation Specific Endoscopic Skills

a) Able to perform SWL and flexible ureteroscopy and intracorporeal lithotripsy for the treatment of proximal ureteral and renal calculi for renal and ureteral stones

b) Able to obtain percutaneous access to the kidney for PCNL, dilate the percutaneous tract and insert working sheath and perform flexible nephroscopy and intracorporeal lithotripsy during PCNL

General Open Surgical Skills

a) For radical cystectomy, open/establish appropriate exposure for insertion of Bookwalter retractor; perform extended PLND, radical cystectomy, urinary diversion (end of PGY 5)

b) For prostatectomy, open/establish appropriate exposure for insertion of Bookwalter retractor; perform open radical prostatectomy (beginning of PGY 5)

c) For open renal surgery, open/establish appropriate exposure for insertion of Bookwalter retractor; perform open radical nephrectomy and open radical nephro-ureterectomy (end of PGY5)

d) Knows the appropriate steps in surgical procedure(s)

Rotation Specific Endoscopic Skills

a) Able to perform pubovaginal slings for the treatment of female stress urinary incontinence, retropubic suspension surgery for the female patient with sphincteric deficiency, and surgical repair of vesicovaginal and urethrovaginal fistulae and urethral diverticulum

General Laparoscopic Skills

a) Insertion of camera port using Hasson technique and additional ports during procedure

b) Able to mobilize bowel, enter correct anatomical planes and begin to acquire the skills for hilar dissection during laparoscopic radical nephrectomy

c) Open/close kidney extraction site during radical nephrectomy/nephroureterectomy

d) Able to mobilize lateral and inferior attachments to kidney and place specimen in lap sac

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 ☐ NO ☐

or by a single or principal evaluator YES ☐ NO ☐
Resident
This evaluation has been reviewed with me. YES ☐ NO ☐
If no, why not?
_________________________________________________________________________________________________
_________________________________________________________________________________________________
Comments:
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_________________________________________________________________________________________________
Resident <Resident Name>

Program Director Dr Tim Wollin

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