



Urology Residency Program – Rotation Plan

Urology Rotation - Foundations

CBD STAGE:	Foundations
LENGTH OF ROTATION:	Total of 6 4-week blocks
ROTATION OFFERED AT:	Thunder Bay

FOCUS OF THIS ROTATION

This rotation focuses on developing the foundational knowledge and skills required for managing urological diseases. In this rotation(s), residents will receive consistent exposure to the management of patients with urgent and non-urgent urological clinical conditions, including patients that present in the emergency department. The resident will be under the supervision of the on-call urologist for all emergency department cases. Residents will practice and demonstrate their competence in rigid and flexible cystoscopy, as well as opening and closing an abdominal incision in low-complexity patients.

EPAS FOR THIS ROTATION

The EPAS that should be prioritized in this rotation are those highlighted in **green**.

EPA Number	EPA Description
Surgical Foundations	
TTD 1	Performing the preoperative preparation of patients for basic surgical procedures
TTD 2	Recognizing and initiating early management for critically ill surgical patients
TTD 3	Documenting clinical encounters
TTD 4	Demonstrating handover technique
F 1	Providing initial management for critically ill patients
F 2	Inserting central venous lines
F 3	Providing initial management for trauma patients
F 4	Providing risk assessment and management for preoperative patients in preparation for surgery
F 6	Participating in surgical procedures

F 8	Managing post-operative patients with complications
Urology	
TTD 1	Assessing patients with a urological presentation
TTD 2	Admitting patients to the urology service
TTD 3	Discharging patients from the urology service
TTD 4	Collaborating with other services
F 1	Assessing and managing patients with a difficult catheterization in an urgent setting
F 2	Recognizing and managing urosepsis in patients with urinary obstruction
F 3	Assessing and managing patients with acute scrotal/perineal pain
F 4	Assessing and establishing a management plan for patients with common non-emergent urological presentations
F 5	Performing rigid cystoscopy with examination in an elective setting
F 6	Performing flexible cystoscopy with examination in an elective setting
F 7	Opening and closing an abdominal incision in low-complexity patients
F 8	Managing urology specific tubes and drains on the ward

EPA Objectives

The following are the objectives resident will be assessed on through the EPAs. These outline the expectations regarding the level of competence residents are required to demonstrate to achieve their EPAs, at this stage of training.

Note that the objectives in green font should be prioritized in this rotation.

CanMEDS ROLES LEGEND	
ME	Medical expert
COM	Communicator
COL	Collaborator
HA	Health Advocate
P	Professional
S	Scholar
L	Leader

Surgical Foundations

TTD1

ME 2.2 Elicit an accurate relevant history

COM 2.1 Conduct the interview in a patient-centred manner

ME 2.2 Perform a physical examination relevant to the presentation

ME 2.4 Develop an initial management plan for common patient presentations in surgical practice

COM 5.1 Document accurate and up-to-date problem lists and medication lists

P 1.1 Complete assigned responsibilities in a timely fashion

TTD2

ME 2.2 Synthesize and interpret information from the clinical assessment

COM 5.1 Organize information in appropriate sections within the medical record

COM 5.1 Provide a clear plan for ongoing management

P 1.1 Complete assigned responsibilities in a timely fashion

TTD3

ME 2.2 Synthesize and interpret information from the clinical assessment

COM 5.1 Organize information in appropriate sections within the medical record

COM 5.1 Provide a clear plan for ongoing management

P 1.1 Complete assigned responsibilities in a timely fashion

TTD4

ME 5.2 Use structured handover tools and strategies to enhance patient safety

ME 2.1 Identify patients at risk for sudden deterioration in clinical status

COL 3.2 Summarize and prioritize patient issues providing rationale for key decisions

COL 3.2 Communicate plans for ongoing management of patients, such as outstanding investigations and anticipated events or outcomes

COL 3.2 Answer questions from the receiving physician(s) during transitions in care, clarifying issues as needed

FOUNDATIONS 1

ME 1.4 Perform the clinical assessment in a time-effective manner

ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance

ME 2.2 Develop a specific differential diagnosis relevant to the patient's presentation

ME 2.2 Interpret common and simple investigational modalities

ME 2.4 Develop and implement initial management plans for common problems in surgical practice

ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy

COM 5.1 Document the clinical encounter to adequately convey clinical reasoning and the rationale for decisions

ME 4.1 Identify the need for and timing of consultation with another physician or health care professional

FOUNDATIONS 2

ME 3.1 Determine the appropriate site for line insertion

ME 3.4 Set up, position and drape the patient for the procedure

ME 3.4 Prepare and cleanse the procedural site

ME 3.4 Maintain universal precautions

ME 3.4 Perform the insertion of a central venous line, using ultrasound guidance as appropriate

FOUNDATIONS 3

ME 1.4 Perform the clinical assessment in a timely manner

ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance

ME 2.1 Iteratively establish priorities as the patient's situation evolves
ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
ME 4.1 Establish plans for ongoing care, taking into account the patient's clinical state as well as available resources
ME 4.1 Implement management to stabilize the patient prior to additional testing or transfer
COL 1.1 Receive and appropriately respond to input from other health care professionals

FOUNDATIONS 4

ME 1.4 Perform a focused clinical assessment that addresses all relevant issues
ME 2.2 Select and/or interpret appropriate investigations and/or imaging with sufficient attention to clinical details
ME 2.4 Develop and implement plans for preoperative optimization of patients
ME 5.2 Use preoperative care pathways, as appropriate
ME 2.4 Use appropriate prophylaxis
ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
COL 1.2 Collaborate with other health care providers and all involved parties in booking the case including ICU, step down unit, or OR
HA 1.3 Identify modifiable risk factors and promote health and wellness
HA 1.3 Anticipate and advocate for the perioperative needs of patients belonging to vulnerable and marginalized populations

FOUNDATIONS 6

ME 3.4 Set up, position and drape the patient for the procedure
ME 1.3 Apply knowledge of anatomy, key landmarks, and the surgical procedure
ME 3.4 Use surgical instruments and equipment correctly and in a fluid manner
ME 3.4 Perform safe dissection of relevant structures and tissue layers with gentle tissue handling
COL 1.2 Provide and/or use operative assistance effectively
P 1.1 Work within personal limits, asking for help as needed
COL 1.2 Work effectively with the OR team

FOUNDATIONS 8

ME 1.4 Perform a focused clinical assessment that addresses all relevant issues
ME 1.4 Recognize urgent problems that may need the involvement of more experienced colleagues and seek their assistance
ME 2.2 Develop a specific differential diagnosis relevant to the patient's presentation
ME 2.2 Select and/or interpret appropriate investigations and/or imaging with sufficient attention to clinical details
ME 3.3 Consider urgency and potential for deterioration, in advocating for the timely execution of a procedure or therapy
ME 4.1 Implement a post-operative care plan for patients with a complicated post-operative course
COM 5.1 Document the clinical encounter to adequately convey clinical reasoning and the rationale for decisions
P 2.2 Demonstrate a commitment to patient safety and quality improvement through adherence to institutional policies and procedures, and clinical practice guidelines

Urology

TTD 1

COM 2.1 Conduct the interview in a patient-centered manner

ME 2.2 Elicit an accurate, relevant history

ME 2.2 Perform a physical exam that informs the diagnosis

ME 2.2 Synthesize patient information from the clinical assessment for the purpose of written or verbal summary to a supervisor

COM 2.3 Identify other sources of information (e.g., family, medical record) that may assist in a given patient's care

ME 1.4 Recognize urgent problems and seek assistance from more experienced physicians

TTD 2

COM 2.1 Conduct the interview in a patient-centered manner

ME 2.2 Elicit an accurate, relevant history

ME 2.2 Perform a physical exam that informs the diagnosis

ME 2.2 Synthesize patient information from the clinical assessment for the purpose of written or verbal summary to a supervisor

COM 2.3 Identify other sources of information (e.g., family, medical record) that may assist in a given patient's care

ME 1.4 Recognize urgent problems and seek assistance from more experienced physicians

TTD 3

ME 4.1 Organize follow-up plans

ME 5.2 Reconcile current and prior medication lists

COM 5.1 Prepare an accurate, comprehensive, and succinct summary of hospitalization

COL 3.2 Summarize the patient's issues for the receiving physician, including plans to deal with the ongoing issues

P 1.1 Complete assigned responsibilities in a timely fashion

TTD 4

ME 4.1 Formulate clear and appropriate requests for consultation

COL 2.1 Respond to requests in a timely manner

COL 2.1 Communicate with other health professionals clearly and respectfully

P 1.1 Complete assigned responsibilities in a timely fashion

P 1.1 Identify limits in own expertise and seek assistance, as needed

FOUNDATIONS 1

ME 2.1 Determine the acuity of the issue and establish priorities for patient care

ME 3.1 Determine the appropriate procedure

ME 3.4 Prepare, position, and drape the patient

ME 3.4 Perform common procedures in a skilful, fluid and safe manner - Catheter insertion

- Use of guidewires, dilators, and/or sounds to assist catheter insertion
- Cystoscopy for catheter insertion
- Percutaneous suprapubic catheter insertion

ME 3.4 Recognize and manage common outcomes/complications of difficult catheterization

ME 4.1 Determine the necessity of further investigation or intervention

COM 5.1 Document the encounter to convey the procedure, clinical findings and/or outcome

FOUNDATIONS 2

- ME 2.1 Determine the acuity of the issue and establish priorities for patient care
- ME 1.4 Perform a focused clinical assessment
- ME 2.2 Interpret diagnostic imaging
- ME 2.4 Develop and implement a management plan
- ME 3.3 Consider urgency, and potential for deterioration, in advocating for the timely execution of a procedure or therapy
- COL 3.1 Identify patients requiring handover to other physicians or health care professionals
- COM 4.3 Answer questions from the patient and/or family
- COM 5.1 Document the clinical encounter to adequately convey clinical reasoning and the rationale for decisions

FOUNDATIONS 3

- ME 2.1 Determine the acuity of the issue and establish priorities for patient care
- ME 2.2 Interpret the findings of the physical exam to recognize clinical significance
- ME 2.2 Interpret diagnostic imaging
- ME 2.4 Provide adequate and appropriate symptom management
- ME 3.1 Select surgical and/or medical interventions as appropriate
- ME 3.3 Consider urgency, and potential for deterioration, in advocating for the timely execution of a procedure or therapy
- COM 3.1 Provide information to the patient and/or family clearly and compassionately
- COM 4.3 Answer questions from the patient and/or family

FOUNDATIONS 4

- ME 2.2 Perform the history and physical exam in a timely manner, without excluding key elements
- ME 2.2 Select and/or interpret appropriate investigations
- ME 2.2 Develop a differential diagnosis relevant to the patient's presentation
- ME 2.4 Develop and implement a management plan
- COM 3.1 Provide information to the patient and/or family clearly and compassionately
- COM 4.3 Answer questions from the patient and/or family
- HA 1.1 Assess a patient's need for additional health services or resources
- ME 4.1 Determine the need and timing of follow-up

(Part B): Written Communication

- ME 2.2 Synthesize and interpret information from the clinical assessment
- COM 5.1 Organize information in appropriate sections
- COM 5.1 Document all relevant findings and investigations
- COM 5.1 Convey clinical reasoning and the rationale for decisions
- COM 5.1 Provide a clear plan for ongoing management
- COM 5.1 Complete clinical documentation in a timely manner

FOUNDATIONS 5

- ME 3.4 Prepare, position and drape the patient
- ME 3.4 Maintain sterile technique
- ME 3.4 Assemble and optimize endoscope function
- ME 1.3 Apply knowledge of anatomy, key landmarks and the surgical procedure
- ME 3.4 Manipulate endoscope appropriately, achieving stabilization, orientation and direction

ME 3.4 Respect tissue vitality when handling tissue and instruments
ME 3.4 Demonstrate intraoperative judgment, fluidity of movement, forward progression
COM 3.1 Communicate effectively with the patient during the procedure

FOUNDATIONS 6

ME 3.4 Prepare, position and drape the patient
ME 3.4 Maintain sterile technique
ME 3.4 Assemble and optimize endoscope function
ME 1.3 Apply knowledge of anatomy, key landmarks and the surgical procedure
ME 3.4 Manipulate endoscope appropriately, achieving stabilization, orientation and direction
ME 3.4 Respect tissue vitality when handling tissue and instruments
ME 3.4 Demonstrate intraoperative judgment, fluidity of movement, forward progression
COM 3.1 Communicate effectively with the patient during the procedure

FOUNDATIONS 7

ME 3.4 Prepare the operative field
ME 3.4 Establish adequate exposure
ME 3.4 Position retractors safely
ME 3.4 Insert abdominal drains
ME 3.4 Close the layered abdominal incision
ME 3.4 Respect tissue vitality when handling tissue and instruments
P 1.1 Work within personal technical limitations, asking for assistance as needed

FOUNDATIONS 8

ME 2.2 Identify common issues and/or complications related to tubes and drains
ME 3.1 Determine the appropriate timing and procedure for tube or drain irrigation or removal
ME 3.4 Perform common procedures in a skilful, fluid, and safe manner
P 1.1 Identify limits in own expertise and seek assistance, as needed
ME 4.1 Develop plans for ongoing care
COM 5.1 Document the clinical encounter to convey the procedure, clinical findings and/or outcome