URO1- 3010/F: Urology Junior Internship

Course Description: The student will become familiar with basic urology exam, diagnosis and treatment of common urologic problems; voiding dysfunction, erectile dysfunction, incontinence, prostate cancer, bladder cancer, kidney cancer, testicular and penile cancer, stone disease. This elective allows students to have a broad exposure to urology, both clinic and operative. They will be trained in minor GU procedures such as Foley catheter placement, cystoscopy and suprapubic tube placement. They will also serve as 1st or 2nd assistant in GU surgical procedures. The student will be supervised at all times by residents and/or faculty. Students are expected to attend weekly conferences (see schedule below). Students will round with the team on inpatients and participate in the outpatient evaluation and preoperative, intraoperative, and postoperative management of patients with urologic disorders.

Students are evaluated/graded based on:

- Performance in the clinic by direct observation of history and physical examination skills
- Discussions in the clinic, operating room and on rounds
- A topic presentation given during grand rounds

Conference schedule:

(You will be emailed a copy of the monthly conference schedule)

Chairman's Interdisciplinary Conference: Each Friday except last Friday of month 8:00 a.m. - 9:00

Combined M&M: 1st Friday of each month 7:00 a.m. - 8:00 a.m. at academic office

Uro-Radiology: 2nd Friday of each month 7:00 a.m. - 8:00 a.m. at academic office

Pediatric Conference: 2nd and 4th Thursday of every month 7:00 a.m. - 9:00 a.m. at LeBonheur Children's Hospital

Journal Club: 3rd Thursday of each month 6:00 p.m. - 9:00 p.m. at academic office vs off campus (site to be announced)

Research Conference: 4th Friday of each month 7:00 a.m.-8:00 a.m. at academic office

Urology Grand Rounds: Last Friday of each month 8:00 a.m. - 9:00 a.m. at academic office.

Pediatric Journal Club: This required conference occurs at least every other month

Goals:

- learn to perform a history, physical examination and office evaluation of patients with common urologic diseases under the direction of resident and attending staff: urologic oncology (kidney cancer bladder cancer, prostate cancer, testicular cancer and penile cancer); stone disease; incontinence and bladder dysfunction; urinary tract infections; bladder outlet obstruction and lower urinary tract symptoms and erectile dysfunction.
- learn and observe common diagnostic techniques used in the urology clinic: Foley catheter placement, cystoscopy, suprapubic tube placement.
- learn the indications for and reading of common uroradiographic evaluation: plain films, nuclear medicine, ultrasonography and CT
- learn the fundamentals of pharmacologic treatment of common urologic conditions
- observe common urologic surgical procedures: robotic assisted procedures, radical nephrectomy, radical cystectomy with urinary diversion, radical prostatectomy, ureteroscopy, and TURBT

Learning Objectives:

- 1. Acute Scrotum The student will provide a differential diagnosis of conditions that produce acute scrotal pain and/or swelling, select appropriate imaging studies for confirming the diagnosis of acute scrotum, and determine which acute scrotal conditions require emergent surgery versus elective surgery or medical treatment.
- 2. Urinary Stone Disease Given a patient with urinary stone disease in the clinic setting, the student will identify the appropriate imaging study for diagnosis, explain the indications for urgent intervention, and discuss medical therapies and surgical techniques for managing urinary stones that fail to pass with observation.
 - a. When presented with a patient with acute flank pain in the emergency setting, the student will provide a differential diagnosis and explain the appropriate laboratory and imaging studies necessary to make the diagnosis.
 - b. The student will describe the five most common chemical compositions of urinary stones.
- 3. Urinary Incontinence Given a patient with urinary incontinence, the student will take a history, identify the symptoms and signs of various types of incontinence (stress, urge, overflow, mixed, total), and describe medical and surgical treatment options for management of stress and urge incontinence.
- 4. Hematuria When presented with a patient with hematuria, the student will take a relevant history, describe common glomerular and non-glomerular causes of hematuria, and identify imaging studies used in the workup of hematuria.
- 5. Prostate Disease The student will identify the predominant locations in the prostate where BPH and prostate cancer develop and relate this fact with the associated signs and symptoms of the two conditions. The student will also be able to describe medical and surgical treatment options for both BPH and prostate cancer.
- 6. Renal Mass The student will be able to provide a differential diagnosis for a renal mass found incidentally on CT, and describe treatment options for a mass suspicious for malignancy.
- **Presentation**: Each student will be expected to give a 20-30 minute presentation at the end of the rotation, at our Friday morning conference. This will be scheduled for the 3rd of 4th week of your rotation. The topic is up to you, but we recommend running ideas by the residents and Dr. Wake before you settle on a discussion topic.
- **Meeting with Dr. Wake**: Dr. Wake will meet with each student during your rotation as an informal interview. Email Trish Phelan at <u>pphelan@uthsc.edu</u> to arrange this.