

Competency Goals and Objectives

These goals and objectives for the residency training program in urology at UNC Hospitals have been designed to reflect the outcomes-based approach mandated by the ACGME. These goals and objectives define the educational activities within each rotation that promote the learning of each of the core competencies respectively.

General Urology – PGY2/U1

COMPETENCY: Patient care

Definition: Provide care that is compassionate and effective for the treatment of health problems and promotion of health in patients with urologic diseases.

At the end of the PGY2 urology rotation the resident will be able to:

Objectives	Educational method	Assessment method
Provide caring/respectful care for urology patients and their families	Supervised inpatient and outpatient care experiences	Staff evaluation of core competencies: patient care
Interview skills: Residents develop techniques in taking a medical history related to the common urology problems including: <ul style="list-style-type: none"> • Urologic malignancies • Urologic trauma • Calculus disease • Voiding dysfunction • Reproduction and sexual dysfunction • Obstruction • Hematuria • Infection 	Supervised inpatient, outpatient, and emergency room care experiences Role modeling Mentoring Case conferences	Staff evaluation of core competencies: patient care 360 evaluation
Perform diagnostic physical exam related to the common urologic problems as outlined above: In particular, examination of the genitalia, flank, and abdomen	Supervised inpatient, outpatient, and emergency room care experiences Formal conferences, particularly the general urology focused didactic conferences and general urology specific case conferences	Staff evaluation of core competencies: patient care Evaluation of performance at case conferences
Develop the ability to interpret laboratory and radiographic testing and to know the indications and limitations related to these tasks Examples of radiology studies: <ul style="list-style-type: none"> • Ultrasound: Renal, bladder, testis, prostate • Radionucleotide studies • Computed Tomography studies • Magnetic resonance studies • Positron emission tomography • Interventional radiology studies Examples of laboratory tests <ul style="list-style-type: none"> • Serum electrolytes, liver function tests • Tumor markers (PSA, β-HCG, α-FP) • Urinalysis and urine culture • Arterial blood gas 	Supervised inpatient, outpatient, and emergency room care experiences Formal conferences Independent study	Staff evaluation of core competencies: patient care Evaluation of performance at case conferences Inservice examination
Develop informed decision-making skills with respect to urologic problems Synthesize clinical, laboratory, and radiographic data	Supervised inpatient, outpatient, and emergency room care experiences	Staff evaluation of core competencies: patient care Evaluation of performance

Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common urologic issues	Formal conferences Mentoring Role modeling	at case conferences Written examination: Inservice examination
Develop and implement patient management plans Outline an individualized patient management plan including medical, surgical, and other treatment options for common urologic diseases Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance with guidelines	Formal conferences Mentoring Role modeling Independent study	Staff evaluation of core competencies: patient care Evaluation of performance at case presentation conferences Written inservice examination
Understand the need for effective counseling and education for patients and families, including multidisciplinary-based recommendations The risks and benefits and potential impact on quality of life and family interactions of each treatment pathway should be recognized, discussed, and transmitted	Supervised inpatient, outpatient, and emergency room care experiences Role modeling Mentoring	Staff evaluation of core competencies: patient care 360 evaluation
Learn to perform common urologic surgical procedures, while also being familiar with the indications and techniques of less common procedures. In each case the resident will begin to acquire expertise and an adequate number of procedures, appropriate for the level on training: Examples: Endoscopic procedures: <ul style="list-style-type: none"> • Cystoscopy <ul style="list-style-type: none"> ▪ TURBT/Biopsy ▪ Retrograde urography ▪ Ureteral stent placement/removal ▪ Cystolitholapaxy • Ureteroscopy <ul style="list-style-type: none"> ▪ Stone treatment ▪ Diagnostic • Transurethral prostate surgery <ul style="list-style-type: none"> ▪ TURP ▪ PVP Other PGY2 level procedures <ul style="list-style-type: none"> ○ Shock wave lithotripsy ○ Transrectal ultrasound ○ Prostate biopsy/Fiducial placement ○ Suprapubic tube placement • Pediatric procedures <ul style="list-style-type: none"> ○ Orchiopexy ○ Hernia repair ○ Hydrocele repair ○ Simple hypospadias ○ Circumcision ○ Penile adhesion takedown • Adult circumcision • Adult hydrocelectomy • Penile injection (diagnostic and therapeutic) 	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: patient care Review of operative and case log books
Assist in providing appropriate and compassionate post operative care in a variety of settings Appropriate assessment and discharge of patients in the outpatient setting	Supervised inpatient, outpatient, and emergency room care experiences Role modeling	Staff evaluation of core competencies: patient care Peer evaluation Self evaluation

Careful and appropriate inpatient management after major urologic surgery	Mentoring	
Work within a team Interact well with allied health personnel Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as interventional radiologists and anesthesiologists	Supervised surgical experiences Supervised inpatient, outpatient, and emergency room care experiences Role modeling	Staff evaluation of core competencies: patient care Peer evaluation Self evaluation
Use information technology Utilize electronic medical records to optimize patient care Use electronic resources to locate relevant information about patient's urologic problems and related conditions; incorporate this information into patient care	Supervised inpatient, outpatient, and emergency room care experiences Role modeling	Staff evaluation of core competencies: patient care Evaluation of performance at case conferences

COMPETENCY: MEDICAL KNOWLEDGE

Definition: Demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of the PGY2 rotation the resident will be able to:

Objectives	Educational method	Assessment method
Demonstrate a developing/growing knowledge base in the areas of clinical science related to common urologic problems: <ul style="list-style-type: none"> • Calculus disease • Urinary Tract Obstruction • Voiding Dysfunction • Urologic Oncology • Reproductive and Sexual Dysfunction • Urologic reconstruction • Pediatric urology • Trauma • Infections • Hematuria 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination Evaluation of performance at case conferences
Exhibit a developing fund of information about the pathophysiology and relevant anatomy and molecular basis of urology problems	Formal conferences, lectures, and discussions Supervised surgical experiences Direct mentoring Independent study	Staff evaluation of core competencies: knowledge base Written examination: In-service examination Evaluation of performance at case conferences
Approach clinical situations in general urology with analytical and investigatory thinking expectations – the clinician/scientist approach	Formal conferences, lectures, and discussions Mentoring Independent study	Staff evaluation of core competencies: knowledge base
Develop awareness of the current general urology literature and integrate important clinical and basic science advances patient care	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: knowledge base

when appropriate	Independent study	Evaluation of performance at case conferences
	Journal club	

COMPETENCY: Practice-based learning

Definition: Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

At the end of the PGY2 rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Develop the knowledge, attitude and skills necessary to initiate self-directed and independent learning, to keep abreast of current urology developments; identify and begin to correct any areas of information and skill gap, and to endeavor to improve patient care practices	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Independent study	Staff evaluation of core competencies: practice-based learning Written examination: in-service exam scores Evaluation of performance at case presentation conferences
Understand that behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to general urology are lifelong endeavors, and that a variety of educational forms are available including scientific literature, electronic media and databases, and educational conferences	Formal conferences, lectures, and discussions Supervised surgical experiences Attendance and participation in urology meetings	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences Performance at urology meetings
Exhibit a consistent interest and awareness of one's clinical skills, and a motivation to improve one's fund of knowledge and abilities	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Identify, read, and interpret scientific publications who results have a direct impact on their practice of urology	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised laboratory experiences Independent study	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Demonstrate a growing ability to critically analyze the published literature in urology	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised laboratory experiences Role modeling	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences

Learn about designing clinical, outcomes, and/or basic science investigations in urology; synthesize this information, and present for publication and/or at local or national meetings	Supervised clinical research and laboratory experiences Research mentoring	Staff evaluation of core competencies: practice-based learning
Use web-based, computerized and/or archival data systems to locate medical information, access such information and compile it for the purpose of enhancing their knowledge or resolving specific clinical decision-making situations	Formal conferences, lectures, and discussions, particularly journal club Supervised clinical and surgical experiences Supervised research experience Independent study	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Have the skills to impart knowledge to students and other health-care personnel using didactic lectures or other skill transfer methods	Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case conferences

COMPETENCY: Interpersonal and communication skills

Definition: Demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families and professional associates.

At the end of their PGY2 rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Exhibit developing skills in therapeutic and ethically-sound patient relationships, with particular emphasis on the role of families and patients in making medical decisions for themselves and their family members, and the ethical issues in considering the patient's best interests	Supervised patient care experiences Role modeling Mentoring	Staff evaluation of core competencies: interpersonal and communication skills
Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills <ul style="list-style-type: none"> • Elicit HPI – including patient's explanation or perspective • Listen without interrupting, using nonverbal encouragement and reflective strategies • Handle patient's emotions (fear, anger, etc.) that often occur in patient care settings • Inform patients and families respectfully to encourage compliance • Convey diagnoses and prognosis, including adverse ones • Discuss and negotiate (when appropriate) treatment plans 	Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences Peer evaluation
Work effectively with other team members including nurses, social workers, and other oncology subspecialists	Supervised clinical interactions Role modeling Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Peer evaluation 360 evaluation
Collaborate effectively with other consulting services and participate actively and productively in the multidisciplinary administration of care	Supervised clinical care interactions Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Peer evaluation

	Role modeling	360 evaluation
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Supervised patient care interactions	Staff evaluation of core competencies: interpersonal and communication skills Performance at conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Conferences, lectures, and discussions Resident as teacher conference	Staff evaluation of core competencies: interpersonal and communication skills Performance at conferences Peer evaluation
Complete accurate, clear notes in the medical record including computerized records	Clinical care interactions	Staff evaluation of core competencies: interpersonal and communication skills Compliance notifications from medical records

COMPETENCY: Professionalism

Definition: A commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their PGY2 rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the importance of working to demonstrate the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive general urology	Formal conferences, lectures, and discussions Urology online ethics curriculum Supervised patient care experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences Peer evaluation
Exhibit respectful compassionate care that places the patient's best interest ahead of everything else, and works sensitively and compassionately with the family to achieve this end	Formal conferences, lectures, and discussions Urology online ethics curriculum Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences Peer evaluation Patient evaluation
Demonstrate accountability for their medical and surgical decisions to their patients and to the urologic profession	Supervised clinical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism
Practice urology in a way that shows commitment to excellence in patient care	Supervised clinical experiences	Staff evaluation of core competencies: professionalism Peer evaluation Nurse evaluation
Practice urology to the highest ethical and professional standards <ul style="list-style-type: none"> Follow institutional and professional codes of ethics 	Formal conferences, lectures, and discussions Urology online ethics curriculum	Staff evaluation of core competencies: professionalism

<ul style="list-style-type: none"> • Respect patient confidentiality and disclosure of information • Report diseases as mandated • Obtain informed consent for therapies • Respect rights of patients and their families, and respond sensitively to patient's culture, age, gender and disabilities • Consider individual and societal/community needs • Obtain consent/assent in research • Maintain appropriate professional relationships with pharmaceutical and other commercial organizations • Take into account competence, cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many general urologic problems 	<p>Supervised patient care experiences</p> <p>Role modeling</p>	<p>Performance at formal conferences</p> <p>Peer evaluation</p> <p>Nurse evaluation</p>
<p>Exhibit prepared and timely attendance for conferences, clinics and surgical procedures</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised patient care experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>Performance at conferences</p>
<p>Maintain surgical logs in an up-to-date fashion</p>	<p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>Review of surgical logs</p>
<p>Demonstrate courteous and responsive communication with support personnel related to the residency training requirements</p>	<p>Supervised patient care experiences</p> <p>Mentoring</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>
<p>Demonstrate courteous behavior to all support and ancillary staff</p>	<p>Role modeling</p> <p>Mentoring</p> <p>Supervised patient care experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>

COMPETENCY: Systems-based practice

Definition: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide health care that is of optimal value.

At the end of their CMC rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
<p>Develop an understanding of the interaction of urology practice within the larger health care system; have an awareness of and response to the larger context and system of healthcare with the ability to effectively utilize system resources to provide optimal urology care</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised patient care experiences</p>	<p>Staff evaluation of core competencies: systems-based practice</p> <p>Performance at formal conferences</p>

Begin to have adequate knowledge of practice and delivery systems; begin to have a theoretical and practical understanding of systems theories and their applicability to health and urology care, and their potential impact on patient safety	Formal conferences, lectures and discussions	Staff evaluation of core competencies: systems-based practice
Demonstrate developing knowledge about local and national agencies and organizations involved in advocating and caring for patients with urologic problems	Role modeling Mentoring	Staff evaluation of core competencies: systems-based practice
Understand why there is a need to practice cost effective care and appropriate resource allocation while providing quality general urologic care	Role modeling Mentoring Supervised patient care experiences	Staff evaluation of core competencies: systems-based practice
Collaborate with other health professionals such as nurses, social workers, and other specialists to provide and manage quality urologic care	Formal conferences, lectures, and discussions Supervised clinical experiences Role modeling	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Advocate for patients with urological problems	Formal conferences, lectures, and discussions Supervised clinical experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences

Competency Goals and Objectives

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General Urology – PGY3/U2

COMPETENCY: Patient care

Definition: provide care that is compassionate and effective for the treatment of health problems and promotion of health in patients with general urologic diseases.

At the end of their PGY3 general urology rotation the resident will be able to:

Objectives	Educational method	Assessment method
<p>Provide caring/respectful patient care for general urology patients with urologic problems and their families</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Interview skills:</p> <p>Residents learn techniques in taking a medical history related to the common general urology problems including (but not limited to):</p> <ul style="list-style-type: none"> • Urologic Oncology <ul style="list-style-type: none"> ▪ Bladder ▪ Prostate ▪ Kidney ▪ Adrenal ▪ Testicular • Hematuria • Renal Cysts • Trauma <ul style="list-style-type: none"> ▪ Renal ▪ Pelvic <ul style="list-style-type: none"> ○ Bladder ○ Urethra ▪ Scrotal ▪ Penile • Infections <ul style="list-style-type: none"> ▪ Kidney ▪ Bladder ▪ Scrotum • Calculus disease <ul style="list-style-type: none"> ▪ Kidney ▪ Ureter ▪ Bladder • Voiding dysfunction <ul style="list-style-type: none"> ▪ Male ▪ Female • Reproduction and sexual dysfunction 	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Perform diagnostic physical exam related to the common urologic problems as outlined above:</p> <p>In particular, examination of the genitalia,</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the general urology focused didactic</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly</p>

flank, and abdomen	conferences and general urology specific case conferences	general urology didactic sessions and general urology specific case conferences morbidity and mortality conferences when pertaining to general urology
<p>Develop the ability to interpret laboratory and radiographic testing and to know the indications and limitations related to these tasks, as they pertain to general urologic problems</p> <p>Renal/bladder/testicular/prostate ultrasound, renal radio nucleotide scans, IVP, CT scanning, MRU, PET scanning, bone scans, selective angiography/venography, transrectal ultrasound, interventional radiology studies</p> <p>Serum electrolytes, creatinine, urinalysis, liver function studies, tumor markers (PSA, beta HCG, alpha fetoprotein) and other studies related to general urologic disease states</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the general urology focused didactic conferences and general urology specific case conferences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly general urology didactic sessions and general urology specific case conferences, morbidity and mortality conferences when pertaining to general urology</p>
<p>Develop informed decision-making with respect to general urologic problems</p> <p>Synthesize clinical, laboratory, and radiographic data</p> <p>Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common and complex general urologic issues</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the general urology didactic conferences and radiology conferences with general urologic emphasis</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the general urology specific conferences, radiology conferences, and morbidity and mortality conference where it pertains to general urology</p>
<p>Develop and implement patient management plans</p> <p>Outline an individualized patient management plan including, all reasonable surgical, medical, and other therapeutic options for common and complex general urologic diseases</p> <p>Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance with important recommendations</p>	<p>Formal conferences, particularly the general urology specific didactic conferences and radiology conferences with general urology emphasis</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the general urology conferences, radiology conferences, and morbidity and mortality conference where it pertains to general urology</p>
<p>Understand the need for effective counseling and education for patients and families, including multidisciplinary-based recommendations</p> <p>The risks and benefits and potential impact on quality of life and family interactions of each treatment pathway should be effectively recognized, discussed, and transmitted</p>	Supervised inpatient, outpatient, and emergency room care experiences	Staff evaluation of core competencies: patient care
Learn to perform common general	Supervised surgical experiences	Staff evaluation of core competencies:

<p>urologic surgical procedures, while also being familiar with the indications and techniques of less common procedures. In each case the resident will acquire the necessary expertise and adequate number of procedures over the course of their residency:</p> <p>Common urologic procedures:</p> <ul style="list-style-type: none"> • Cystoscopy <ul style="list-style-type: none"> ▪ TURBT/Biopsy ▪ Retrogrades ▪ Stent placement/removal • Ureteroscopy <ul style="list-style-type: none"> ▪ Stone treatment ▪ Diagnostic • Transurethral prostate surgery <ul style="list-style-type: none"> ▪ TURP ▪ PVP ▪ TUIP ▪ HoLAP • Shock wave lithotripsy • Prostate biopsy • Transrectal ultrasound • Nephrectomy • Cystectomy • Prostatectomy • Suprapubic tube placement • Anti-incontinence pelvic surgery <ul style="list-style-type: none"> ▪ Sling <p>Less common procedures:</p> <ul style="list-style-type: none"> • Pyeloplasty • Urethral reconstruction • Urinary diversion/upper tract reconstruction 		<p>patient care</p> <p>Review of operative and case log books</p>
<p>Assist in providing appropriate and compassionate post operative care in a variety of settings</p> <p>Appropriate assessment and discharge of patients in the outpatient setting</p> <p>Careful and appropriate inpatient management after major urologic surgery</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Work within a team</p> <p>Interact well with allied health personnel</p> <p>Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as interventional radiologists and anesthesiologists</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Use information technology</p> <p>Use published journals and books and electronic resources to locate relevant information about patient's urologic</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly</p>

problems and related conditions Incorporate this information into patient care	Independent study	the general urology conferences, and morbidity and mortality conference and journal club when it pertains specifically to general urology
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COMPETENCY: Medical knowledge

Definition: demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of their PGY3 general urology rotation the resident will be able to:

Objectives	Educational method	Assessment method
Demonstrate a developing/growing knowledge base in the areas of clinical science related to common urologic problems: <ul style="list-style-type: none"> • Hematuria • Renal/Ureteral Calculi • Urinary Tract Obstruction • Voiding Dysfunction • Urologic Oncology • Reproductive and Sexual Dysfunction • Urologic reconstruction • Trauma • Infections 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to general urology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examinations with focus on performance related to general urology Evaluation of performance at case presentation conferences when related to management of general urologic problems
Exhibit a developing fund of information about the pathophysiology and relevant anatomy and molecular basis of the aforementioned general urology	Formal conferences, lectures, and discussions Supervised surgical experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to general urology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to general urology Evaluation of performance at case presentation conferences when related to the management of general urologic problems
Approach clinical situations in general urology with analytical and investigatory thinking expectations – the clinician/scientist approach	Formal conferences, lectures, and discussions Mentoring Independent study	Staff evaluation of core competencies: knowledge base
Develop awareness of the current general urology literature and integrate important clinical and basic science of dances into patient care when appropriate	Formal conferences, lectures, and discussions Independent study	Staff evaluation of core competencies: knowledge base Evaluation of performance at case presentation conferences when related to the management of general urologic problems

COMPETENCY: Practice-based learning

Definition: investigate and evaluate their patient care practices, appraised and assimilate scientific evidence, and improve patient care practices.

At the end of their PGY3 general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Develop the knowledge, attitude and skills necessary to initiate self-directed and independent learning, to keep abreast of current information and practices relevant to general urology, to correct any areas of information and skill gap, and to endeavor to improve patient care practices related to general urology	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Independent study	Staff evaluation of core competencies: practice-based learning Written examination: in-service exam scores Evaluation of performance at case presentation conferences
Understand that behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to general urology are lifelong endeavors, and that a variety of educational forms are available including scientific literature, electronic media and databases, and educational conferences	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Show consistent interest and self examination of all of one's clinical practices come skills, and knowledge active attempt to improve one's fund of knowledge and abilities related to general urology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Identify, read, and interpret scientific publications who results have a direct impact on their practice of general urology	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised laboratory experiences Textbook reading conference and core curriculum of suggested readings when they pertain to general urology problems Independent study	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Demonstrate critical analysis of current and proposed treatment pathways and of the recently published literature related to general urologic conditions. This should include a basic understanding of the statistical analysis involved in those studies and the ability to assess for inherent biases and other factors that may influence the result of those studies	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised laboratory experiences Role modeling	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Learn about designing relevant clinical and basic science investigations in general urology, synthesize this information, and	Supervised clinical research and laboratory experiences	Staff evaluation of core competencies: practice-based learning

present for publication and/or at local or national meetings		
Use internet, computerized and archival data systems, to locate medical information, access such information and compile it for the purpose of enhancing their knowledge or resolving specific clinical decision-making situations related to general urology	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised clinical and surgical experiences</p> <p>Supervised clinical research and laboratory experience</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
Have the skills to impart knowledge about general urologic conditions to students and other health-care personnel using didactic lectures or other skill transfer methods	<p>Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences</p> <p>Textbook conference and core curriculum of suggested readings when they pertain to general urology</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>

COMPETENCY: Interpersonal and communication skills

Definition: demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families and professional associates.

At the end of their PGY3 general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Develop the skills to have therapeutic and ethically sound patient relationships with particular emphasis on the role of families and patients in making medical decisions for themselves and their family members and the ethical issues in considering the patient's best interests	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p>	Staff evaluation of core competencies: interpersonal and communication skills
<p>Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills</p> <ul style="list-style-type: none"> • Elicit HPI – including patient's explanation or perspective • Listen without interrupting, using nonverbal encouragement and reflective strategies • Handle patient's emotions (fear, anger, etc.) that often occur in cancer patients and their families • Inform patients and families respectfully to encourage compliance • Convey diagnoses and prognosis, including adverse ones • Discuss and negotiate (when appropriate) treatment plans 	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: interpersonal and communication skills</p> <p>Performance at formal conferences</p>
Work effectively with other team members including nurses, social	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: interpersonal and communication skills

workers, and other oncology subspecialists	Supervised surgical experiences Role modeling	Performance at formal conferences
Collaborate effectively with other consulting services and participate actively and productively in the multidisciplinary administration of care	Formal conferences, lectures, and discussions Supervised surgical experiences Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Complete accurate, clear notes in the medical record including computerized records	Supervised surgical experiences	Staff evaluation of core competencies: interpersonal and communication skills

COMPETENCY: Professionalism

Definition: commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their PGY3 general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the importance of working to demonstrate the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive general urology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Exhibit respectful compassionate care that places the patient's best interest ahead of everything else, but works sensitively and compassionately with the family to achieve this end	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Demonstrate accountability for their medical and surgical decisions to their patients and to the urologic profession	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism
Practice general urology in a way that	Supervised surgical experiences	Staff evaluation of core competencies:

shows commitment to excellence in patient care		professionalism
Practice general urology to the highest ethical and professional standards <ul style="list-style-type: none"> • Follow institutional and professional codes of ethics • Respect patient confidentiality and disclosure of information • Report diseases as mandated • Obtain informed consent for therapies • Respect rights of patients and their families, and respond sensitively to patient's culture, age, gender and disabilities • Consider individual and societal/community needs • Obtain consent/assent in research • Maintain appropriate professional relationships with pharmaceutical and other commercial organizations • Take into account competence, cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many general urologic problems 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Supervised clinical research and laboratory experiences	Staff evaluation of core competencies: professionalism Performance at formal conferences
Exhibit prepared and timely attendants for conferences, clinics and surgical procedures	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Supervised clinical research and laboratory experiences	Staff evaluation of core competencies: professionalism Performance at formal conferences
Maintain surgical logs in an up to date fashion	Supervised surgical experiences	Staff evaluation of core competencies: professionalism
Demonstrate courteous and responsive communication with support personnel related to the residency training requirements	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: professionalism 360° evaluations
Demonstrate courteous behavior to all support and ancillary staff	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: professionalism 360° evaluations

COMPETENCY: Systems-based practice

Definition: demonstrate an awareness of, and responsiveness to larger context and system, and be able to use system resources for optimal care.

At the end of their PGY3 general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Develop an understanding of the interaction of their general urology practices within the larger health care system. They must have an awareness of and response to the larger context and system of healthcare with the ability to effectively utilize system resources to provide optimal general urology care	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Begin to have adequate knowledge of practice and delivery systems. They must have a theoretical and practical understanding of systems theories and their applicability to health and general urology care, and their potential impact on patient safety	Formal conferences, lectures and discussions	Staff evaluation of core competencies: systems-based practice
Demonstrate developing knowledge about local and national agencies and organizations involved in advocating and caring for patients with general urologic problems	Role modeling Mentoring	Staff evaluation of core competencies: systems-based practice
Understand why there is a need to practice cost effective care and appropriate resource allocation while providing quality general urologic care	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice
Collaborate with other health professionals such as nurses, social workers, and other specialists to provide and manage quality urologic care	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Advocate for patients with urological problems	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences

Competency Goals and Objectives

These goals and objectives for the residency training program in urology at UNC Hospitals have been designed to reflect the outcomes-based approach mandated by the ACGME. These goals and objectives define the educational activities within each rotation that promote the learning of each of the core competencies respectively.

Oncology – PGY3/U2

COMPETENCY: Patient care

Definition: Provide care that is compassionate and effective for the treatment of health problems and promotion of health in patients with urologic diseases.

At the end of their PGY3 urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
<p>Provide caring/respectful patient care for oncology patients with urologic problems and their families</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Interview skills:</p> <p>Residents will exhibit proficiency in taking a medical history related to the common urologic oncology problems including:</p> <ul style="list-style-type: none"> • Hematuria • Non-invasive bladder cancer • Invasive bladder cancer • Locally advanced bladder cancer • Prostate cancer screening • Localized prostate cancer • Recurrent prostate cancer • Metastatic prostate cancer • Incidentally detected small renal masses • Complex renal cysts • Locally advanced renal cell carcinoma • Solid enhancing renal masses • Testis tumors • Adrenal masses • Penile cancer • Transitional cell carcinoma of the upper urinary tract • Urethral cancer 	<p>Supervised inpatient and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Perform diagnostic physical exams related to the common urologic oncologic problems as outlined above:</p> <p>In particular, examination of the genitalia, abdomen, flank, and rectum</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Demonstrate a developing ability to interpret laboratory and radiographic testing and to know the indications and limitations related to these tasks, as they pertain to urologic oncology problems</p> <p>Examples of radiology studies:</p> <ul style="list-style-type: none"> • Ultrasound: Renal, bladder, testis, prostate • Radionucleotide studies • Computed Tomography studies • Magnetic resonance studies • Positron emission tomography 	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the oncology focused didactic conferences and oncology specific case conferences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly oncology didactic sessions and oncology specific case conferences, morbidity and mortality conferences when pertaining to urologic</p>

<ul style="list-style-type: none"> Interventional radiology studies <p>Examples of laboratory tests</p> <ul style="list-style-type: none"> Serum electrolytes, liver function tests Tumor markers (PSA, β-HCG, α-FP) Urinalysis and urine culture Arterial blood gas 		oncology
<p>Demonstrate informed decision-making with respect to urology oncology problems</p> <p>Synthesize clinical, laboratory, and radiographic data</p> <p>Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common and complex urologic oncology cases</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the oncology didactic conferences and radiology conferences with oncology emphasis</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the oncology specific conferences, radiology conferences, and morbidity and mortality conference when it pertains to urologic oncology</p>
<p>Develop and implement patient management plans</p> <p>Outlined in individualized patient management plan including all reasonable surgical, medical, and other therapeutic options for common urologic oncologic diseases</p> <p>Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance with national guidelines and local preferences</p>	<p>Formal conferences, particularly the oncology specific didactic conferences and radiology conferences with oncology emphasis</p> <p>Mentoring</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the oncology specific conferences, radiology conferences, and morbidity and mortality conferences</p>
<p>Demonstrate a developing ability to effectively counsel and educate patients and families, including multidisciplinary-based recommendations</p> <p>The risks and benefits and potential impact on quality of life and family interactions of each treatment pathway should be effectively recognized, discussed, and transmitted</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Safely and efficaciously assist or perform common urologic oncologic surgical procedures, while also being familiar with the indications and techniques of less common procedures. In each case the resident will increase upon the foundation of procedures appropriate for the level of training or assist in higher-level procedures:</p> <p>Common urologic oncology procedures:</p> <ul style="list-style-type: none"> Radical nephrectomy Partial nephrectomy Nephroureterectomy Radical Prostatectomy TURBT Ureteroscopy and biopsy Radical cystectomy Urinary diversion Lymph node dissection, all types Orchiectomy Transrectal Ultrasound and prostate biopsy Prostate Brachytherapy <p>Surgical Techniques:</p> <ul style="list-style-type: none"> Laparoscopy (access, port placement, assistance, some dissection) Wound closure 	<p>Supervised surgical experiences</p> <p>Mentoring</p> <p>Role modeling</p> <p>Simulation labs (future)</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Review of operative and case log books</p> <p>Direct feedback from faculty and senior residents as teachers</p>
<p>Provide appropriate and compassionate post operative care</p>	<p>Supervised inpatient,</p>	<p>Staff evaluation of core</p>

<p>in a variety of settings</p> <p>Appropriate assessment and discharge of patients in the outpatient setting</p> <p>Careful and appropriate inpatient management after major urologic oncologic surgery</p>	<p>outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>competencies: patient care</p>
<p>Work within a team</p> <p>Interact with allied health personnel in a positive, effective, constructive way to benefit the patient</p> <p>Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as interventional radiologists and anesthesiologists</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Use information technology</p> <p>Utilize electronic medical record efficiently and effectively to optimize patient care</p> <p>Use electronic resources to locate relevant information about patient's urologic problems and related conditions, and incorporate this information into patient care</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the oncology case conferences, radiology conferences, and morbidity and mortality conference and journal club when it pertains specifically to urologic oncology</p>

COMPETENCY: Medical knowledge

Definition: Demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of their PGY3 urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
<p>Demonstrate an adequate knowledge base in the areas of clinical science related to the common urologic oncology problems:</p> <ul style="list-style-type: none"> • Urothelial cancer • Prostate cancer • Urinary diversion • Testis cancer • Adrenal carcinoma • Renal cancer • Penile cancer • Other rare urologic cancers 	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Direct mentoring</p> <p>Radiology conferences and the core curriculum of suggested readings</p>	<p>Staff evaluation of core competencies: knowledge base</p> <p>Written examination: in-service examination with focus on performance related to urologic oncology</p> <p>Evaluation of performance at case presentation conferences when related to the management of urologic oncology problems</p>

	pertaining to urologic oncology Independent study	
Exhibit and adequate fund of information about the pathophysiology and relevant anatomy and molecular basis of the aforementioned urologic oncology problems	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to urologic oncology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to urologic oncology Evaluation of performance at case presentation conferences when related to the management of urologic oncology problems
Approach clinical situations in urologic oncology with analytical and investigatory thinking expectations – the clinician/scientist approach	Formal conferences, lectures, and discussions Mentoring Independent study	Staff evaluation of core competencies: knowledge base
Develop awareness of the current urologic oncology literature and integrate important clinical and basic science of dances into patient care when appropriate	Formal conferences, lectures and discussions Independent study	Staff evaluation of core competencies: knowledge base Evaluation of performances at case presentation conferences when related to the management of urologic oncology problems

COMPETENCY: Practice-based learning

Definition: Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

At the end of their PGY3 urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude and skills necessary to initiate self-directed and independent learning, to keep abreast of current information and practices relevant to urologic oncology, to correct any areas of information and skill gap, and to endeavor to improve patient care practices related to urologic oncology	Formal conferences, lectures, and discussions, particularly journal club	Staff evaluation of core competencies: practice-based learning Written examination: in-service exam scores

	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Independent study</p>	<p>Evaluation of performance at case presentation conferences</p>
<p>Demonstrate behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to urologic oncology are lifelong endeavors, and that a variety of educational forums are available including scientific literature, electronic media and databases, and educational conferences</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Show consistent interest in and self examination of one's clinical practices skills, and knowledge active attempt to improve one's fund of knowledge and abilities related to urologic oncology</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Identify, read, and interpret scientific publications who results have a direct impact on their practice of urologic oncology</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised laboratory experiences (pertains primarily to residents interested in this subspecialty)</p> <p>Textbook reading conference and core curriculum of suggested readings</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Demonstrate critical analysis of current and proposed treatment pathways and of the recently published literature related to urologic oncology. This should include a basic understanding of the statistical analysis involved in those studies and a developing ability to critically assess urologic literature</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised laboratory experiences (pertains</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>

	<p>primarily to residents interested in this subspecialty)</p> <p>Role modeling</p>	
<p>Have the ability to discuss and potentially design research investigations in urologic oncology, synthesize this information, and present for publication and/or at local or national meetings</p>	<p>Supervised clinical research with faculty mentor</p> <p>Presentation at UNC conferences and at local and national urology meetings</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Direct feedback</p>
<p>Use internet, computerized and archival data systems to locate medical information, access such information and compile it for the purpose of enhancing their knowledge or resolving specific clinical decision-making situations related to urologic oncology</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised clinical and surgical experiences</p> <p>Supervised clinical research and laboratory experience (pertains primarily to residents interested in this subspecialty)</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Further develop the skills to impart knowledge about urologic oncology to students and other healthcare personnel using didactic lectures or other skill transfer methods</p>	<p>Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences</p> <p>Rounds</p> <p>Resident as Teacher conference</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p> <p>Peer evaluations</p>

COMPETENCY: Interpersonal and communication skills

Definition: demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families and professional associates.

At the end of their PGY3 urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessments methods
<p>Demonstrate therapeutic and ethically sound patient relationships with particular emphasis on the role of families and patients in making medical decisions for themselves and their family members, and development of an understanding of ethical issues in considering the patient's best interests</p>	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: interpersonal and communication skills</p>

	Role modeling	
Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills <ul style="list-style-type: none"> Elicit HPI – including patient’s explanation or perspective Listen without interrupting, using nonverbal encouragement and reflective strategies Handle patient’s emotions (fear, anger, etc) that often occur in cancer patients and their families Inform patients and families respectfully to encourage compliance Convey diagnoses and prognosis, including adverse ones Discuss and negotiate (when appropriate) treatment plans 	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluations of core competencies: interpersonal and communication skills Performance at formal conferences Peer evaluation 360 evaluation Self evaluation
Work effectively with other team members including nurses, social workers, and caregivers in other subspecialties	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills Peer evaluation 360 evaluation
Collaborate effectively with other consulting services and participate actively and productively in the multidisciplinary administration of care	Formal conferences, lectures, and discussions Supervised surgical experiences Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Peer evaluation 360 evaluation
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Formal conferences, lectures, and discussions Supervised patient care experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Formal conferences, lectures, and discussions Supervised clinical encounters	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Complete accurate, clear notes in the medical record including computerized records	Documentation of clinical encounters Mentoring, role modeling	Staff evaluation of core competencies: interpersonal and communication skills

COMPETENCY: Professionalism

Definition: A commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their PGY3 urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate progression in the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive urologic oncology	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: professionalism

	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Performance at formal conferences Peer evaluation Self evaluation
Exhibit respectful compassionate care that places the patient's best interest ahead of everything else, and works sensitively and compassionately with the family to archive this end	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Peer evaluation Patient evaluation Self evaluation
Demonstrate accountability for medical and surgical decisions to patients and to the urologic profession	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Peer evaluation Patient evaluation
Practice urologic oncology in a way that shows commitment to excellence in patient care	Supervised clinical and surgical experiences	Staff evaluation of core competencies: professionalism
Practice urologic oncology to the highest ethical and professional standards <ul style="list-style-type: none"> • Follow institutional and professional code of ethics • Respect patient confidentiality and disclosure of information • Report diseases as mandated • Obtained informed consent for therapies • Respect rights of patients and their families, and personal sensitively to patient's culture, age, gender and disabilities • Consider individual and societal/community needs • Obtain consent/assent in research • Maintain appropriate professional relationships with pharmaceutical and other commercial organizations • Take into account competence, cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many urologic oncology problems 	Formal conferences, lectures, and discussions Supervised patient care experiences Role modeling	Staff evaluation of core competencies: professionalism Performance at formal conferences Peer evaluation Self evaluation Patient evaluation
Prepared and timely attendance for conferences, clinics and surgical procedures	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care	Staff evaluation of core competencies: professionalism Performance at formal conferences

	experiences	
Maintain surgical logs in an up to date fashion	Supervised surgical experiences	Staff evaluation of core competencies: professionalism
Demonstrate courteous and responsive communication with support personnel related to the residency training requirements	Supervised clinical experience	Staff evaluation of core competencies: professionalism 360° evaluations
Demonstrate courteous behavior to all support and ancillary staff	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: professionalism 360° evaluations

COMPETENCY: Systems-based practice

Definition: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide health care that is of optimal value.

At the end of their PGY3 urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the interaction of their urologic oncology practices within the larger healthcare system. They must have an awareness of and response to the larger context and system of healthcare with the ability to effectively utilize system resources to provide optimal oncologic urology care	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Have adequate knowledge of practice and delivery systems. They must have a theoretical and practical understanding of systems theories and their applicability to health and urologic oncology care, and their potential impact on patient safety	Formal conferences, lectures, and discussions Mentoring	Staff evaluation of core competencies: systems-based practice
Demonstrate knowledge about local and national agencies and organizations involved in advocating and caring for patients with urologic oncology problems	Role modeling Mentoring	Staff evaluation of core competencies: systems-based practice
Practice cost effective care and appropriate resource allocation while providing quality urologic oncology care	Supervised surgical experiences Supervised patient care experiences	Staff evaluation of core competencies: systems-based practice
Collaborate with other health professionals such as nurses, social workers, and other specialists to provide and manage quality urologic oncology urological care	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: systems-based practice Performance at formal conferences 360 evaluations
Advocate for oncology patients with urological problems	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences

Competency Goals and Objectives

These goals and objectives for the residency training program in urology at UNC Hospitals have been designed to reflect the outcomes-based approach mandated by the ACGME. These goals and objectives define the educational activities within each rotation that promote the learning of each of the core competencies respectively.

Pediatric Urology – PGY4/U3, Chief

COMPETENCY: Patient care

Definition: provide care that is compassionate and effective for the treatment of health problems and promotion of health in infants, children and adolescents, and those individuals with congenital disorders throughout their life.

At the end of their pediatric urology rotation the resident will be able to:

Objectives	Educational method	Assessment method
Provide caring/respectful patient care for pediatric patients with urologic problems and their families	Supervised surgical experiences Supervised inpatient, outpatient, and emergency room care experiences	Staff evaluation of core competencies: patient care
Interview skills: Residents will exhibit proficiency in taking a medical history related to the common pediatric urological problems including: <ul style="list-style-type: none"> • Hydronephrosis • Vesicoureteral reflux • Urinary tract infections • Urinary incontinence & neurogenic bladder • Hypospadias • Undescended testicles • Hydrocele/hernia • Acute scrotum • Hematuria • Other congenital and acquired pediatric genitourinary abnormalities 	Supervised inpatient, outpatient, and emergency room care experiences	Staff evaluation of core competencies: patient care
Perform diagnostic physical exams related to the common pediatric urologic problems as outlined above: In particular, examination of the genitalia at various stages of development	Supervised inpatient, outpatient, and emergency room care experiences	Staff evaluation of core competencies: patient care
Demonstrate the ability to interpret laboratory and radiographic testing and to know the indications and limitations related to these tasks, as they pertain to the common pediatric urologic problems VCUG, renal/bladder ultrasound, renal radio nucleotide scans, CT scanning, MRU, and urodynamics Serum electrolytes, your analysis, specific urine studies, related to pediatric urologic disease states	Supervised inpatient, outpatient, and emergency room care experiences Formal conferences, particularly the pediatric didactic conferences and pediatric specific case conferences	Staff evaluation of core competencies: patient care Evaluation of performance at case presentation conferences, particularly pediatric didactic sessions and pediatric specific case conferences, morbidity and mortality conferences when pertaining to pediatric urology
Demonstrate informed decision-making with respect to pediatric urologic problems	Supervised inpatient, outpatient, and emergency room care experiences	Staff evaluation of core competencies: patient care

<p>Synthesize clinical, laboratory, and radiographic data</p> <p>Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common and complex pediatric urologic issues</p>	<p>Formal conferences, particularly the pediatric didactic conferences and radiology conferences with pediatric emphasis</p>	<p>Evaluation of performance at case presentation conferences, particularly the pediatric chief conferences, radiology conferences, and morbidity and mortality conference where it pertains to pediatric urology</p>
<p>Develop and implement patient management plans</p> <p>Outline an individualized patient management plan including all reasonable surgical, medical, and behavioral options for common and complex pediatric urologic diseases</p> <p>Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance with important recommendations</p>	<p>Formal conferences, particularly the pediatric didactic conferences and radiology conferences with pediatric emphasis</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the pediatric chief conferences, radiology conferences, and morbidity and mortality conference where it pertains to pediatric urology</p>
<p>Effectively counsel and educate patients and families, including multidisciplinary-based recommendations</p> <p>The risks and benefits and potential impact on quality of life and family interactions of each treatment pathway should be effectively recognized, discussed, and transmitted</p>	<p>Supervised inpatient, outpatient, and emergency room experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Safely and efficaciously perform common pediatric urologic surgical procedures, while also being familiar with the indications and techniques of less common procedures. In each case the resident will acquire the necessary expertise and adequate number of procedures:</p> <p>Common pediatric urologic procedures:</p> <ul style="list-style-type: none"> • Pyeloplasty • Nephrectomy • Ureteral reimplantation • Bladder augmentation • Circumcision • Distal hypospadias/chordee repair • Orchiopexy/orchiectomy • Diagnostic laparoscopy for impalpable testicle • Hydrocele/hernia repair • Surgery for testicular torsion <p>Less common procedures:</p> <ul style="list-style-type: none"> • Heminephrectomy • Vesicostomy • Catheterizable abdominal wall stoma • Bladder neck sling • Artificial urinary sphincter • Bladder neck reconstruction • Complex hypospadias repair • Laparoscopic orchidopexy • Intersex surgery • Bladder exstrophy closure 	<p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Review of operative and case log books</p>
<p>Provide appropriate and compassionate post operative care in a variety of settings</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>

Appropriate assessment and discharge of patients in the outpatient setting Careful and appropriate inpatient management after major pediatric urologic surgery	Role modeling Mentoring	
Work within a team Interact well with allied health personnel Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as pediatric radiologists and anesthesiologists	Supervised surgical experiences Supervised inpatient, outpatient, and emergency room care experiences Role modeling	Staff evaluation of core competencies: patient care
Use information technology Use published journals and books and electronic resources to locate relevant information about patient's urologic problems and related conditions Incorporate this information into patient care	Supervised inpatient, outpatient, and emergency room care experiences Role modeling Independent study	Staff evaluation of core competencies: patient care Evaluation of performance at case presentation conferences, particularly the pediatric case conferences, radiology conferences, and morbidity and mortality conference and journal club when it pertains specifically to pediatric urology

COMPETENCY: Medical knowledge

Definition: demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of their pediatric urology rotation the resident will be able to:

Objectives	Educational method	Assessment method
Demonstrate an adequate knowledge base in the areas of clinical science related to the common pediatric urologic problems: <ul style="list-style-type: none"> • Hydronephrosis • Vesicoureteral reflux • Hypospadias • Urinary tract infections • Posterior urethral valves • Urinary incontinence & neurogenic bladder • Undescended testicles • Hydrocele/hernia • Acute scrotum • Hematuria • Wilms tumors • Pediatric testicular tumors 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to pediatric urology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to pediatric urology Evaluation of performance at case presentation conferences when related to the management of pediatric urologic problems
Exhibit an adequate fund of information about the pathophysiology and relevant anatomy and molecular basis of the aforementioned pediatric urologic problems	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency	Staff evaluations of core competencies: knowledge base Written examinations: in-service examination with focus on performance related to pediatric urology

	<p>room experiences</p> <p>Direct mentoring</p> <p>Radiology conferences and the core curriculum of suggested readings pertaining to pediatric urology</p> <p>Independent study</p>	Evaluation of performance at case presentation conferences when related to the management of pediatric urologic problems
Approach clinical situations in pediatric urology with analytical and investigatory thinking expectations – the clinician/scientist approach	<p>Formal conferences, lectures, and discussions</p> <p>Mentor</p> <p>Independent study</p>	Staff evaluation of core competencies: knowledge base
Develop awareness of the current pediatric urology literature and integrate important clinical and basic science of dances into patient care when appropriate	<p>Formal conferences, lectures, and discussions</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: knowledge base</p> <p>Evaluation of performance at case presentation conferences when related to the management of pediatric urological problems</p>

COMPETENCY: Practice-based learning

Definition: investigate and evaluate their patient care practices, appraised and assimilate scientific evidence, and improve patient care practices.

At the end of their pediatric urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude and skills necessary to initiate self-directed and independent learning, to keep abreast of current information and practices relevant to pediatric urology, to correct any areas of information and skill gap, and to endeavor to improve patient care practices related to pediatric urology	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Written examination: in-service exam scores</p> <p>Evaluation of performance at case presentation conferences</p>
Demonstrate behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to pediatric urology are lifelong endeavors, and that a variety of educational forums are available including scientific literature, electronic media and databases, and educational conferences	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p>	<p>Staff evaluations of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
Show consistent interest in and self examination all of one's clinical practices come skills, and knowledge active attempt to improve one's fund of knowledge and abilities related to pediatric urology	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>

	<p>Role modeling</p> <p>Mentoring</p>	
<p>Identify, read, and interpret scientific publications whose results have a direct impact on their practice of pediatric urology</p>	<p>Formal conferences, lectures, and discussions, primarily journal club</p> <p>Supervised surgical experiences</p> <p>Supervised laboratory experiences (pertains primarily to residents interested in this subspecialty)</p> <p>Textbook reading conference and core curriculum of suggested readings when they pertain to pediatric urologic problems</p> <p>Independent study</p>	<p>Staff evaluations of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Demonstrate critical analysis of current and proposed treatment pathways and of the recently published literature related to pediatric urology. This should include a basic understanding of the statistical analysis involved in those studies and the ability to assess for inherent biases and other factors that may influence the result of those studies</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised laboratory experiences (pertains primarily to residents interested in this subspecialty)</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Have the ability to design relevant clinical and basic science investigations in pediatric urology, synthesize this information, and present for publication and/or at local or national meetings</p>	<p>Supervised clinical research and laboratory experiences (pertains primarily to residents interested in this subspecialty)</p>	<p>Staff evaluation of core competencies: practice-based learning</p>
<p>Use internet, computerized and archival data systems, to locate medical information, access such information and compile it for the purpose of enhancing their knowledge or resolving specific clinical decision-making situations related to pediatric urology</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised clinical and surgical experiences</p> <p>Supervised clinical research and laboratory experience (pertains primarily to residents interested in the subspecialty)</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Have the skills to impart knowledge about pediatric urology to students and other health-care personnel using didactic lectures or other skill transfer methods</p>	<p>Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences</p> <p>Textbook conference and core curriculum of suggested readings when they pertain to pediatric urology</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>

COMPETENCY: Interpersonal and communication skills

Definition: demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families, and professional associates.

At the end of their pediatric urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate therapeutic and ethically sound patient relationships with particular emphasis on the role of families and patients in making medical decisions for children and adolescents and the ethical issues in considering both parental decisions and the patient's best interests	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills
Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills <ul style="list-style-type: none"> • Elicit HPI – including patient and patient's and family's explanation or perspective • Listen without interrupting, using nonverbal encouragement and reflective strategies • Handle patient's emotions (fear, anger, etc.) that often occur in children and their families • Inform patients and families respectfully to encourage compliance • Convey diagnoses and prognosis, including adverse ones • Discuss and negotiate (when appropriate) treatment plans 	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Work effectively with the other team members including nurses, social workers, and other pediatric subspecialists	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Collaborate effectively with other consulting services and participate actively and productively in the multidisciplinary administration of care	Formal conferences, lectures, and discussions Supervised surgical experiences Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: interpersonal and communication skills
Complete accurate, clear notes in the medical record including computerized records	Supervised surgical experiences	Staff evaluation of core competencies: interpersonal and communication skills

COMPETENCY: Professionalism

Definition: commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their pediatric urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive pediatric urology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Exhibit respectful compassionate care that places the child’s best interest ahead of everything else, but works sensitively and compassionately with the family to achieve this end	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Demonstrate accountability for their medical and surgical decisions to their patients and to the urologic profession	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism
Practice pediatric urology in a way that shows commitment to excellence in patient care	Supervised surgical experiences	Staff evaluation of core competencies: professionalism
Practice pediatric urology in the highest ethical and professional standards <ul style="list-style-type: none"> • Follow institutional and professional code of ethics • Respect patient confidentiality and disclosure of information • Report diseases as mandated • Obtain informed consent for therapies • Respect rights of children and their families, and respond sensitively to patient’s culture, age, gender and disabilities • Consider individual and societal/community needs • Obtain consent/assent in research • Maintain appropriate professional relationships with pharmaceutical and other commercial organizations • Take into account competence, 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Supervised clinical research and laboratory experience – pertains primarily two residents interested in this subspecialty	Staff evaluation of core competencies: professionalism Performance at formal conferences

cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many pediatric urological problems		
Exhibit prepared and timely attendants for conferences, clinics and surgical procedures	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experience Supervised clinical research and laboratory experience – pertains primarily to residents interested in this subspecialty	Staff evaluation of core competencies: professionalism Performance at formal conferences
Maintains a surgical log in an up to date fashion	Supervised surgical experiences	Staff evaluations of core competencies: professionalism
Demonstrate courteous and responsive communication with support personnel related to the residency training requirements	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: professionalism 360° evaluations
Demonstrate courteous behavior to all support and ancillary staff	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluations of core competencies: professionalism 360° evaluations

COMPETENCY: Systems-based practice

Definition: demonstrate an awareness of, and responsiveness to larger context and system, and be able to use system resources for optimal care.

At the end of their pediatric urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the interactions of their pediatric urology practices within the larger health care system. They must have an awareness of and response to the larger context and system of healthcare with the ability to effectively utilize system resources to provide optimal pediatric urology care	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Have adequate knowledge of practice and delivery systems. They must have a theoretical and practical understanding of systems theories and their applicability to health and pediatric urological care, and their potential impact on patient safety	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: systems-based practice
Demonstrate knowledge about local and national agencies and organizations involved in advocating and caring for patients with pediatric urological problems	Role modeling Mentoring	Staff evaluation of core competencies: systems-based practice

Practice cost effective care and appropriate resource allocation while providing quality pediatric urological care	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice
Collaborate with other health professionals such as nurses, social workers and other pediatric specialists to provide and manage quality pediatric urological care	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Advocate for children with urological problems	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences

Competency Goals and Objectives

These goals and objectives for the residency training program in urology at UNC Hospitals have been designed to reflect the outcomes-based approach mandated by the ACGME. These goals and objectives define the educational activities within each rotation that promote the learning of each of the core competencies respectively.

Carolinas Medical Center – PGY4/U3

COMPETENCY: Patient care

Definition: Provide care that is compassionate and effective for the treatment of health problems and promotion of health in patients with urologic diseases.

At the end of their CMC urologic rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
<p>Provide caring and respectful patient care for patients with urologic problems</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Refine Interview Skills Exhibit proficiency in taking a medical history related to the common urologic problems including:</p> <ul style="list-style-type: none"> • Urologic Trauma, all types • Infections in urology • Voiding dysfunction • Hematuria • Urothelial malignancy, all stages • Prostate cancer, all stages • Small renal mass • Renal cystic diseases • Renal cell carcinoma, all stages • Testis cancer, all stages • Renal calculus disease 	<p>Supervised inpatient, outpatient clinic and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Perform diagnostic physical exams related to the common urologic problems outlined above:</p> <p>In particular, examination of the genitalia, abdomen, flank, and rectum</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Effectively interpret radiographic and laboratory testing, and to know the indications and limitations related to these tasks</p> <p>Examples of radiology studies:</p> <ul style="list-style-type: none"> • Ultrasound: Renal, bladder, testis, prostate • Radionucleotide studies • Computed Tomography studies • Magnetic resonance studies • Positron emission tomography • Interventional radiology studies <p>Examples of laboratory tests</p> <ul style="list-style-type: none"> • Serum electrolytes, liver function tests • Tumor markers (PSA, β-HCG, α-FP) • Urinalysis and urine culture • Arterial blood gas 	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences</p>

<p>Demonstrate informed decision-making with respect to urology problems</p> <p>Synthesize clinical, laboratory, and radiographic data</p> <p>Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common and complex urologic cases</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Develop and implement patient management plans</p> <p>Outline individual patient management plans including all medical, surgical and other therapeutic options for common and complex urologic diseases</p> <p>Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance</p>	<p>Formal conferences</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Effectively counsel and educate patients and families, including multidisciplinary-based recommendations</p> <p>The risks, benefits and potential impact on quality of life and family interactions of each treatment option should be recognized, discussed, and transmitted</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Safely and efficaciously perform urologic surgical procedures. The resident will acquire competence and accrue adequate numbers of the following procedures, including an appreciation of various techniques and approaches:</p> <ul style="list-style-type: none"> • Surgery for trauma <ul style="list-style-type: none"> ○ Renal ○ Ureteral ○ Bladder ○ Urethra ○ External genitalia • Surgery for Voiding Dysfunction <ul style="list-style-type: none"> ○ Sling, AUS ○ Botox, bladder augment • Surgery for malignancy <ul style="list-style-type: none"> • Radical nephrectomy • Partial nephrectomy • Nephroureterectomy • Radical Prostatectomy • Radical cystectomy • Extended pelvic lymph node dissection • Orchiectomy • Retroperitoneal lymph node dissection • Urologic endoscopy 	<p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Review of operative and case log books</p>
<p>Provide appropriate and compassionate post operative care in a variety of settings</p> <p>Appropriate assessment and discharge of patients in the outpatient setting</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p>

Careful and appropriate inpatient management after major urologic surgery		
Work within a team Interact well with allied health personnel Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as interventional radiologists and anesthesiologists	Supervised surgical experiences Supervised inpatient, outpatient, and emergency room care experiences Role modeling	Staff evaluation of core competencies: patient care
Use information technology Use published journals and books and electronic resources to locate relevant information about patient's urologic problems and related conditions; incorporate this information into patient care Effectively use electronic medical records, digital radiology resources	Supervised inpatient, outpatient, and emergency room care experiences Role modeling Independent study	Staff evaluation of core competencies: patient care Evaluation of performance at case presentation conferences

COMPETENCY: Medical knowledge

Definition: Demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of their CMC rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate an adequate knowledge base in the areas of clinical science related to the common urologic problems: <ul style="list-style-type: none"> • Trauma • Malignancy • Infections • Voiding dysfunction • Calculus disease 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination Evaluation of performance at case presentation conferences
Exhibit an adequate fund of information about the pathophysiology and relevant anatomy and molecular basis of the urologic problems	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination Evaluation of performance at case presentation conferences
Approach clinical situations in urology with analytical and investigatory thinking expectations – the clinician/scientist approach	Formal conferences, lectures, and discussions Mentoring	Staff evaluation of core competencies: knowledge base

	Independent study	
Develop awareness of the current urologic literature and integrate important clinical and basic science advances into patient care when appropriate	Formal conferences, lectures and discussions, including journal club Independent study	Staff evaluation of core competencies: knowledge base Evaluation of performances at case presentation conferences

COMPETENCY: Practice-based learning

Definition: Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

At the end of their CMC rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude and skills necessary to initiate self-directed and independent learning, to keep abreast of current information and practices relevant to urology, to correct any areas of information and skill gap, and to endeavor to improve patient care practices	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Independent study	Staff evaluation of core competencies: practice-based learning Written examination: in-service exam scores Evaluation of performance at case presentation conferences
Demonstrate behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to urology are lifelong endeavors, and that a variety of educational forums are available including scientific literature, electronic media and databases, and educational conferences	Formal conferences, lectures, and discussions Supervised surgical experiences AUA meeting	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Show consistent interest in and self examination of clinical practice skills, and actively attempt to improve fund of knowledge and abilities	Formal conferences, lectures, and discussions Supervised surgical experiences Independent study Role modeling Mentoring	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Identify, read, and interpret scientific publications that have a direct impact on their practice of urology	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Independent study	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Demonstrate critical analysis of current and proposed treatment pathways and of the recently published literature related to their patient care experience. This should include a basic understanding of the statistical analysis and a growing ability to critically assess publications	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Role modeling	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences and journal club
Use internet, computerized and archival data	Formal conferences, lectures, and	Staff evaluation of core

systems to locate medical information, access such information and compile it for the of enhancing their knowledge or resolving specific clinical decision-making situations	discussions, particularly journal club Supervised clinical and surgical experiences Independent study	competencies: practice-based learning Evaluation of performance at case presentation conferences
Have the skills to impart knowledge about urology to students and other healthcare personnel using didactic lectures or other skill transfer methods	Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences Working with other learners	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences

COMPETENCY: Interpersonal and communication skills

Definition: demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families and professional associates.

At the end of their CMC rotation the resident will be able to:

Objectives	Educational methods	Assessments methods
Demonstrate therapeutic and ethically sound patient relationships with particular emphasis on the role of families and patients in making medical decisions for themselves and their family members and the ethical issues in considering the patient’s best interests	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills
Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills <ul style="list-style-type: none"> • Elicit HPI – including patient’s explanation or perspective • Listen without interrupting, using nonverbal encouragement and reflective strategies • Handle patient’s emotions (fear, anger, etc) that stressful situations can elicit • Inform patients and families respectfully to encourage compliance • Convey diagnoses and prognosis, including adverse ones • Discuss and negotiate (when appropriate) treatment plans 	Supervised clinical interactions Role modeling Mentoring	Staff evaluations of core competencies: interpersonal and communication skills Performance at formal conferences
Work effectively with other members of the care team, including nurses, social workers, and other subspecialists	Formal conferences, lectures, and discussions Supervised clinical interactions Role modeling	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Collaborate effectively with other consulting services and participate actively and productively in the multidisciplinary administration of care	Formal conferences, lectures, and discussions Supervised clinical experiences Mentoring	Staff evaluation of core competencies: interpersonal and communication skills

		Performance at formal conferences
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Formal conferences, lectures, and discussions Supervised clinical interactions Supervised patient care and emergency room experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Complete accurate, clear and timely notes in the medical record including electronic records	Supervised experiences	Staff evaluation of core competencies: interpersonal and communication skills

COMPETENCY: Professionalism

Definition: A commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their CMC rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive urology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Exhibit respectful, compassionate care that places the patient's best interest ahead of everything else, and works sensitively and compassionately with the family to archive this end	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Demonstrate accountability for their medical and surgical decisions to their patients and to the urologic profession	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism
Practice urology in a way that shows commitment to excellence in patient care	Supervised clinical experiences	Staff evaluation of core competencies: professionalism
Practice urology at the highest ethical and professional standards	Formal conferences, lectures, and discussions	Staff evaluation of core competencies:

<ul style="list-style-type: none"> Follow institutional and professional code of ethics Respect patient confidentiality and disclosure of information Report diseases as mandated Obtained informed consent for therapies Respect rights of patients and their families, and personal sensitively to patient's culture, age, gender and disabilities Consider individual and societal/community needs Obtain consent/assent in research Maintain appropriate professional relationships with pharmaceutical and other commercial organizations Take into account competence, cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many urologic problems 	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p>	<p>professionalism</p> <p>Performance at formal conferences</p>
Exhibit prepared and timely attendance for conferences, clinics and surgical procedures	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>Performance at formal conferences</p>
Maintain up-to-date surgical logs	Supervised surgical experiences	Staff evaluation of core competencies: professionalism
Demonstrate courteous and responsive communication with support personnel related to the residency training requirements	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>
Demonstrate courteous behavior to all support and ancillary staff	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>

COMPETENCY: Systems-based practice

Definition: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide health care that is of optimal value.

At the end of their CMC rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the interaction of their urologic care practices within the larger healthcare system.	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: systems-based practice</p> <p>Performance at formal conferences</p>
Have adequate knowledge of practice and	Formal conferences, lectures, and	Staff evaluation of core competencies:

delivery systems. They must have a theoretical and practical understanding of systems theories and their applicability to health and urologic care, and their potential impact on patient safety	discussions	systems-based practice
Demonstrate knowledge about local and national agencies and organizations involved in advocating and caring for patients with urologic problems	Role modeling Mentoring	Staff evaluation of core competencies: systems-based practice
Practice cost effective care and appropriate resource allocation while providing quality urologic care	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice
Collaborate with other health professionals such as nurses, social workers, and other specialists to provide and manage quality urologic care	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Advocate for patients with urological problems	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences

Competency Goals and Objectives

These goals and objectives for the residency training program in urology at UNC Hospitals have been designed to reflect the outcomes-based approach mandated by the ACGME. These goals and objectives define the educational activities within each rotation that promote the learning of each of the core competencies respectively.

General Urology Chief – PGY5/U4

COMPETENCY: Patient care

Definition: provide care that is compassionate and effective for the treatment of health problems and promotion of health in patients with general urologic diseases.

At the end of their chief general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
<p>Provide caring/respectful patient care for general urology patients with urologic problems and their families</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Interview skills:</p> <p>Residents will exhibit proficiency in taking a medical history related to the common general urologic including (but not limited to):</p> <ul style="list-style-type: none"> • Urologic Oncology <ul style="list-style-type: none"> ▪ Bladder ▪ Prostate ▪ Kidney ▪ Adrenal ▪ Testicular • Hematuria • Renal cysts • Trauma <ul style="list-style-type: none"> ▪ Renal ▪ Pelvic <ul style="list-style-type: none"> ○ Bladder ○ Urethra ▪ Scrotal ▪ Penile • Infections <ul style="list-style-type: none"> ▪ Kidney ▪ Bladder ▪ Scrotum • Calculus disease <ul style="list-style-type: none"> ▪ Kidney ▪ Ureter ▪ Bladder • Voiding dysfunction <ul style="list-style-type: none"> ▪ Male ▪ Female • Reproduction and sexual dysfunction 	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Perform diagnostic physical exams related to the common urologic problems as outlined above:</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>

In particular, examination of the genitalia, flank, and abdomen		
<p>Demonstrate the ability to interpret laboratory and radiographic testing and to know the indications and limitations related to these tasks, as they pertain to general urologic problems</p> <p>Renal/bladder ultrasound, renal radio nucleotide scans, CT scanning, MRU, PET scanning, bone scans, selective angiography/venography, transrectal ultrasound, interventional radiology studies</p> <p>Serum electrolytes, creatinine, urinalysis, liver function studies, tumor markers (PSA, beta HCG, alpha fetoprotein) and other studies related to general urologic disease states</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the general urology focused didactic conferences and general urology specific case conferences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly general urology didactic sessions and general urology specific case conferences, morbidity and mortality conferences when pertaining to general urology</p>
<p>Demonstrate informed decision-making with respect to general urologic problems</p> <p>Synthesize clinical, laboratory, and radiographic data</p> <p>Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common and complex general urologic issues</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the general urologic didactic conferences and radiology conferences with general urologic emphasis</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the general urology specific conferences, radiology conferences, and morbidity and mortality conference where it pertains to general urology</p>
<p>Develop and implement patient management plans</p> <p>Outlined in individualized patient management plan including, all reasonable surgical, medical and other therapeutic options for common and complex general urologic diseases</p> <p>Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance with important recommendations</p>	<p>Formal conferences, particularly the general urology specific didactic conferences and radiology conferences with general urology emphasis</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the general urology conferences, radiology conferences, and morbidity and mortality conference where it pertains to general urology</p>
<p>Effectively counsel and educate patients and families, including multidisciplinary based recommendations</p> <p>The risks and benefits and potential impact on quality of life and family interactions of each treatment pathway should be effectively recognized, discussed, and transmitted</p>	<p>Supervised inpatient, outpatient, and emergency room experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Safely and efficaciously perform common general urologic surgical procedures, while also being familiar with the indications and techniques of less common procedures. In each case the resident will acquire the necessary</p>	<p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Review of operative and case log books</p>

<p>expertise and adequate number of procedures:</p> <p>Common urologic procedures:</p> <ul style="list-style-type: none"> • Cystoscopy <ul style="list-style-type: none"> ▪ TURBT/biopsy ▪ Retrogrades ▪ Stent placement/removal • Ureteroscopy <ul style="list-style-type: none"> ▪ Stone treatment ▪ Diagnostic • Transurethral prostate surgery <ul style="list-style-type: none"> ▪ TURP ▪ PVP ▪ TUIP ▪ HoLAP • Shock wave lithotripsy • Prostate biopsy • Transrectal ultrasound • Nephrectomy • Cystectomy • Suprapubic tube placement • Anti-incontinence pelvic surgery <ul style="list-style-type: none"> ▪ Sling <p>Less common procedures:</p> <ul style="list-style-type: none"> • Pyeloplasty • Urinary diversion/upper tract reconstruction 		
<p>Provide appropriate and compassionate post operative care in a variety of settings</p> <p>Appropriate assessment and discharge of patients in the outpatient setting</p> <p>Careful and appropriate inpatient management after major urologic surgery</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Work within a team</p> <p>Interact well with allied health personnel</p> <p>Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as interventional radiologist and anesthesiologists</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Use information technology</p> <p>Use published journals and books and electronic resources to locate relevant information about patient's urologic problems and related conditions</p> <p>Incorporate this information into patient care</p>	<p>Supervised inpatient and emergency room care experiences</p> <p>Role modeling</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the general urology case conferences, radiology conferences, and morbidity and mortality conference and journal club when it pertains specifically to general urology</p>

COMPETENCY: Medical knowledge

Definition: demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of their chief general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate an adequate knowledge base in the areas of clinical science related to common urologic problems: <ul style="list-style-type: none"> • Hematuria • Renal/ureteral calculi • Urinary tract obstruction • Voiding dysfunction • Urologic oncology • Reproductive and sexual dysfunction • Urologic reconstruction • Trauma • Infections 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to general urology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to general urology Evaluation of performance at case presentation conferences when related to the management of general urologic problems
Exhibit and adequate fund of information about the pathophysiology and relevant anatomy and molecular basis of the aforementioned general urology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to general urology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to general urology Evaluation of performance at case presentation conferences when related to the management of general urologic problems
Approach clinical situations in urologic oncology with analytical and investigatory thinking expectations – the clinician/scientist approach	Formal conferences, lectures, and discussions Mentoring Independent study	Staff evaluation of core competencies: knowledge base
Develop awareness of the current general urology literature and integrate important clinical and basic science of dances into patient care when appropriate	Formal conferences, lectures, and discussions Independent study	Staff evaluation of core competencies: knowledge base Evaluation of performance at case presentation conferences when related to the management of general urologic problems

COMPETENCY: Practice-based learning

Definition: investigate and evaluate their patient care practices, appraised and assimilate scientific evidence, and improve patient care practices.

At the end of their chief general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude	Formal conferences, lectures, and	Staff evaluation of core competencies:

<p>and skills necessary to initiate self-directed and independent learning, to keep abreast of current information and practices relevant to general urology, to correct any areas of information and skill gap, and to endeavor to improve patient care practices related to general urology</p>	<p>discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Independent study</p>	<p>practice-based learning</p> <p>Written examination – in-service exam scores</p> <p>Evaluation of performance at care presentation conferences</p>
<p>Demonstrate behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to general urology are lifelong endeavors, and that a variety of educational forums are available including scientific literature, electronic media and databases, and educational conferences</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Show consistent interest in and self examination all of one's clinical practices come skills, and knowledge active attempt to improve one's fund of knowledge and abilities related to general urology</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Identify, read, and interpret scientific publications whose results have a direct impact on their practice of general urology</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised laboratory experiences</p> <p>Textbook reading conference and core curriculum of suggested readings when they pertain to general urology problems</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Demonstrate critical analysis of current and proposed treatment pathways and of the recently published literature related to general urologic conditions. This should include a basic understanding of the statistical analysis involved in those studies and the ability to assess for inherent biases and other factors that my influence the result of those studies</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p> <p>Supervised surgical experiences</p> <p>Supervised laboratory experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: practice-based learning</p> <p>Evaluation of performance at case presentation conferences</p>
<p>Have the ability to design relevant clinical and basic science investigations to general urology, synthesize this information, and present for publication and/or at local or national meetings</p>	<p>Supervised clinical research and laboratory experiences</p>	<p>Staff evaluation of core competencies: practice-based learning</p>
<p>Use internet, computerized and archival data systems, to local medical information, access such information</p>	<p>Formal conferences, lectures, and discussions, particularly journal club</p>	<p>Staff evaluation of core competencies: practice-based learning</p>

and compile it for the purpose of enhancing their knowledge or resolving specific clinical decision-making situations related to general urology	Supervised clinical and surgical experiences Supervised clinical research and laboratory experience Independent study	Evaluation of performance at case presentation conferences
Have the skills to impart knowledge about general urologic conditions to students and other healthcare personnel using didactic lectures or other skill transfer methods	Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences Textbook conference and core curriculum of suggested readings when they pertain to general urology	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences

COMPETENCY: Interpersonal and communication skills

Definition: demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families and professional associates.

At the end of their chief general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate therapeutic and ethically sound patient relationships with particular emphasis on the role of families and patients in making medical decisions for themselves and their family members and the ethical issues in considering the patient's best interests	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills
Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills <ul style="list-style-type: none"> • Elicit HPI – including patient's explanation or perspective • Listen without interrupting, using nonverbal encouragement and reflective strategies • Handle patient's emotions (fear, anger, etc) that often occur in cancer patients and their families • Inform patients and families respectfully to encourage compliance • Convey diagnoses and prognosis, including adverse ones • Discuss and negotiate (when appropriate) treatment plans 	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Work effectively with other team members including nurses, social workers, and other oncology subspecialties	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Collaborate effectively with other consulting services and participate	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: interpersonal and communication skills

actively and productively in the multidisciplinary administration of care	Supervised surgical experiences Mentoring	Performance at formal conferences
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Complete accurate, clear notes in the medical record including computerized records	Supervised surgical experiences	Staff evaluation of core competencies: interpersonal and communication skills

COMPETENCY: Professionalism

Definition: commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their chief general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive general urology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Exhibit respectful compassionate care that places the patient's best interest ahead of everything else, but works sensitively and compassionately with the family to achieve this end	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Demonstrate accountability for their medical and surgical decisions to their patients and to the urologic profession	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism
Practice general urology in a way that shows commitment to excellence in patient care	Supervised surgical experiences	Staff evaluation of core competencies: professionalism
Practice general urology to the highest ethical and professional standards <ul style="list-style-type: none"> • Follow institutional and professional codes of ethics 	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: professionalism Performance of formal conferences

<ul style="list-style-type: none"> • Respect patient confidentiality and disclosure of information • Report diseases as mandated • Obtain informed consent for therapies • Respect rights of patients and their families, and respond sensitively to patient's culture, age, gender and disabilities • Consider individual and societal/community needs • Obtain consent/assent in research • Maintain appropriate professional relationships with pharmaceutical and other commercial organizations • Take into account competence, cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many general urologic problems 	<p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Supervised clinical research and laboratory experience</p>	
Exhibit prepared and timely attendants for conferences, clinics, and surgical procedures	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Supervised clinical research and laboratory experience</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>Performance at formal conferences</p>
Maintain surgical logs in an up to date fashion	Supervised surgical experiences	Staff evaluation of core competencies: professionalism
Demonstrate courteous and responsive communication with support personnel related to the residency training requirements	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>
Demonstrate courteous behavior to all support and ancillary staff	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>

COMPETENCY: Systems-based practice

Definition: demonstrate an awareness of, and responsiveness to larger context and system, and be able to use system resources for optimal care.

At the end of their chief general urology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the interaction of their general urology practices within the larger healthcare system. They must	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: system-based practice

have an awareness of and response to the larger context and system of healthcare with the ability to effectively utilize system resources to provide optimal general urology care	Supervised surgical experiences Supervised patient care and emergency room experiences	Performance at formal conferences
Have adequate knowledge of practice and delivery systems. They must have a theoretical and practical understanding of systems theories and their applicability to health and general urology care, and their potential impact on patient safety	Formal conferences, lectures, and discussions	Staff evaluations of core competencies: system-based practice
Demonstrate knowledge about local and national agencies and organizations involved in advocating and caring for patients with general urologic problems	Role modeling Mentoring	Staff evaluation of core competencies: system-based practice
Practice cost effective care and appropriate resource allocation while providing quality general urologic care	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: system-based practice
Collaborate with other health professionals such as nurses, social workers, and other specialists to provide and manage quality urologic care	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: system-based practice Performance at formal conferences
Advocate for patients with urological problems	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: system-based practice Performance at formal conferences

Competency Goals and Objectives

These goals and objectives for the residency training program in urology at UNC Hospitals have been designed to reflect the outcomes-based approach mandated by the ACGME. These goals and objectives define the educational activities within each rotation that promote the learning of each of the core competencies respectively.

Oncology Chief – PGY5/U4

COMPETENCY: Patient care

Definition: provide care that is compassionate and effective for the treatment of health problems and promotion of health in patients with urologic oncology diseases.

At the end of their chief urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
<p>Provide caring/respectful patient care for oncology patients with urologic problems and their families</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Interview skills: Residents will exhibit proficiency in taking a medical history related to the common urologic oncology problems including:</p> <ul style="list-style-type: none"> • Hematuria • Non-invasive bladder cancer • Invasive bladder cancer • Locally advanced bladder cancer • Prostate cancer screening • Localized prostate cancer • Recurrent prostate cancer • Metastatic prostate cancer • Incidentally detected small renal masses • Complex renal cysts • Locally advanced renal cell carcinoma • Solid enhancing renal masses • Testis tumors • Adrenal masses • Penile cancer • Transitional cell carcinoma of the upper urinary tract • Urethral cancer 	<p>Supervised inpatient and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Perform diagnostic physical exams related to the common urologic oncologic problems as outlined above:</p> <p>In particular, examination of the genitalia, abdomen, flank, and rectum</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Demonstrate the ability to interpret laboratory and radiographic testing and to know the indications and limitations related to these tasks, as they pertain to urologic oncology problems</p> <p>Renal/bladder/testicular/prostate ultrasound, renal radio nucleotide scans, CT scanning, MRU, PET scanning, bone scans, selective angiography/venography</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the oncology focused didactic conferences and oncology specific case conferences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly oncology didactic sessions and oncology specific case conferences, morbidity and mortality conferences when pertaining to urologic oncology</p>

<p>Serum electrolytes, urinalysis, liver function studies, tumor markers (PSA, beta, HCG, alpha fetoprotein) and other studies related to urologic oncology disease states</p>		
<p>Demonstrate informed decision-making with respect to urology oncology problems</p> <p>Synthesize clinical, laboratory, and radiographic data</p> <p>Integrate the individual patient medical and social conditions to recommend a customized treatment plan appropriate to common and complex urologic oncology cases</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Formal conferences, particularly the oncology didactic conferences and radiology conferences with oncology emphasis</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the oncology specific conferences, radiology conferences, and morbidity and mortality conference when it pertains to urologic oncology</p>
<p>Develop and implement patient management plans</p> <p>Outlined in individualized patient management plan including, all reasonable surgical, medical, and other therapeutic options for common and complex urologic oncologic disease</p> <p>Recommend appropriate follow-up ensuring the most appropriate schedule for monitoring patient progress and compliance with important recommendations</p>	<p>Formal conferences, particularly the oncology specific didactic conferences and radiology conferences with oncology emphasis</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the oncology specific conferences, radiology conferences, and morbidity and mortality conferences where it pertains to urologic oncology</p>
<p>Effectively counsel and educate patients and families, including multidisciplinary-based recommendations</p> <p>The risks and benefits and potential impact on quality of life and family interactions of each treatment pathway should be effectively recognized, discussed, and transmitted</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Safely and efficaciously perform common urologic oncologic surgical procedures, while also being familiar with the indications and techniques of less common procedures. In each case the resident will acquire the necessary expertise and adequate number of procedures:</p> <p>Common urologic oncology procedures:</p> <ul style="list-style-type: none"> • Radical nephrectomy <ul style="list-style-type: none"> ▪ Laparoscopic ▪ Open • Partial nephrectomy <ul style="list-style-type: none"> ▪ Laparoscopic ▪ Open ▪ Robotic Assisted • Nephroureterectomy <ul style="list-style-type: none"> ▪ Laparoscopic ▪ Open • Radical Prostatectomy <ul style="list-style-type: none"> ▪ Robotic Assisted Laparoscopic ▪ Open retropubic • TURBT • Ureteroscopy and biopsy • Radical cystectomy <ul style="list-style-type: none"> ▪ Open ▪ Laparoscopic ▪ Robotic Assisted 	<p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Review of operative and case log books</p>

<ul style="list-style-type: none"> • Extended pelvic lymph node dissection • Orchiectomy • Adrenalectomy <ul style="list-style-type: none"> ▪ Open ▪ Laparoscopic • Prostate Biopsy • Transrectal Ultrasound • Prostate Brachytherapy <p>Less common procedures:</p> <ul style="list-style-type: none"> • RPLND • Racial nephrectomy with IVC thrombectomy • Partial cystectomy • Distal ureterectomy • Urethrectomy • Penectomy <ul style="list-style-type: none"> ▪ Total ▪ Partial • Excision of Sarcoma <ul style="list-style-type: none"> ▪ Pelvic ▪ Retroperitoneal 		
<p>Provide appropriate and compassionate post operative care in a variety of settings</p> <p>Appropriate assessment and discharge of patients in the outpatient setting</p> <p>Careful and appropriate inpatient management after major urologic oncologic surgery</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Mentoring</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Work within a team</p> <p>Interact well with allied health personnel</p> <p>Communicate effectively with urologic colleagues and other medical and surgical colleagues to optimize patient care, including nursing staff, social workers, referring physicians, and allied physician specialists such as interventional radiologists and anesthesiologists</p>	<p>Supervised surgical experiences</p> <p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p>	<p>Staff evaluation of core competencies: patient care</p>
<p>Use information technology</p> <p>Use published journals and books and electronic resources to locate relevant information about patient's urologic problems and related conditions</p> <p>Incorporate this information into patient care</p>	<p>Supervised inpatient, outpatient, and emergency room care experiences</p> <p>Role modeling</p> <p>Independent study</p>	<p>Staff evaluation of core competencies: patient care</p> <p>Evaluation of performance at case presentation conferences, particularly the oncology case conferences, radiology conferences, and morbidity and mortality conference and journal club when it pertains specifically to urologic oncology</p>

COMPETENCY: Medical knowledge

Definition: demonstrate knowledge about established and evolving biomedical, clinical, and cognate sciences and their application to patient care.

At the end of their chief urology oncologic rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate an adequate knowledge base in the areas of clinical science related to the common urologic oncology problems: <ul style="list-style-type: none"> • Bladder cancer • Prostate cancer • Urinary diversion • Testis cancer • Adrenal cortical carcinoma • Renal cancer • Urothelial cancer of the upper urinary tract • Penile cancer • Scrotal cancer 	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to urologic oncology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to urologic oncology Evaluation of performance at case presentation conferences when related to the management of urologic oncology problems
Exhibit and adequate fund of information about the pathophysiology and relevant anatomy and molecular basis of the aforementioned urologic oncology problems	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Direct mentoring Radiology conferences and the core curriculum of suggested readings pertaining to urologic oncology Independent study	Staff evaluation of core competencies: knowledge base Written examination: in-service examination with focus on performance related to urologic oncology Evaluation of performance at case presentation conferences when related to the management of urologic oncology problems
Approach clinical situations in urologic oncology with analytical and investigatory thinking expectations – the clinician/scientist approach	Formal conferences, lectures, and discussions Mentoring Independent study	Staff evaluation of core competencies: knowledge base
Develop awareness of the current urologic oncology literature and integrate important clinical and basic science of dances into patient care when appropriate	Formal conferences, lectures and discussions Independent study	Staff evaluation of core competencies: knowledge base Evaluation of performances at case presentation conferences when related to the management of urologic oncology problems

COMPETENCY: Practice-based learning

Definition: investigate and evaluate their patient care practices, appraised and assimilate scientific evidence, and improve patient care practices.

At the end of their chief urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude and skills necessary to initiate self-directed and independent learning, to keep abreast of current information and practices relevant to urologic oncology, to correct any areas of	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised patient care and emergency	Staff evaluation of core competencies: practice-based learning Written examination: in-service exam scores

information and skill gap, and to endeavor to improve patient care practices related to urologic oncology	room experiences Role modeling Independent study	Evaluation of performance at case presentation conferences
Demonstrate behaviors and demeanor consistent with the recognition that learning and monitoring their practices with respect to urologic oncology are lifelong endeavors, and that a variety of educational forums are available including scientific literature, electronic media and databases, and educational conferences	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Show consistent interest in and self examination of one's clinical practices skills, and knowledge active attempt to improve one's fund of knowledge and abilities related to urologic oncology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Identify, read, and interpret scientific publications who results have a direct impact on their practice of urologic oncology	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised laboratory experiences (pertains primarily to residents interested in this subspecialty) Textbook reading conference and core curriculum of suggested readings when they pertain to urologic oncology problems Independent study	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Demonstrate critical analysis of current and proposed treatment pathways and of the recently published literature related to urologic oncology. This should include a basic understanding of the statistical analysis involved in those studies and the ability to assess for inherent biases and other factors that may influence the result of those studies	Formal conferences, lectures, and discussions, particularly journal club Supervised surgical experiences Supervised laboratory experiences (pertains primarily to residents interested in this subspecialty) Role modeling	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences
Have the ability to design relevant clinical and basic science investigations in urologic oncology, synthesize this information, and present for publication and/or at local or national meetings	Supervised clinical research and laboratory experiences (pertains primarily to residents interested in this subspecialty)	Staff evaluation of core competencies: practice-based learning
Use internet, computerized and archival data systems, to locate medical information, access such information and compile it for the	Formal conferences, lectures, and discussions, particularly journal club Supervised clinical and surgical	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case

purpose of enhancing their knowledge or resolving specific clinical decision-making situations related to urologic oncology	experiences Supervised clinical research and laboratory experience (pertains primarily to residents interested in this subspecialty) Independent study	presentation conferences
Have the skills to impart knowledge about urologic oncology to students and other healthcare personnel using didactic lectures or other skill transfer methods	Formal conferences, lectures, and discussions, particularly journal club and resident lectures at teaching conferences Textbook conference and core curriculum of suggested readings when they pertain to urologic oncology	Staff evaluation of core competencies: practice-based learning Evaluation of performance at case presentation conferences

COMPETENCY: Interpersonal and communication skills

Definition: demonstrate interpersonal and communication skills for effective information exchange and teaming with patients, families and professional associates.

At the end of their chief urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessments methods
Demonstrate therapeutic and ethically sound patient relationships with particular emphasis on the role of families and patients in making medical decisions for themselves and their family members and the ethical issues in considering the patient's best interests	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling	Staff evaluation of core competencies: interpersonal and communication skills
Demonstrate listening skills and elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills <ul style="list-style-type: none"> • Elicit HPI – including patient's explanation or perspective • Listen without interrupting, using nonverbal encouragement and reflective strategies • Handle patient's emotions (fear, anger, etc) that often occur in cancer patients and their families • Inform patients and families respectfully to encourage compliance • Convey diagnoses and prognosis, including adverse ones • Discuss and negotiate (when appropriate) treatment plans 	Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluations of core competencies: interpersonal and communication skills Performance at formal conferences
Work effectively with other team members including nurses, social workers, and other oncology subspecialties	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences

	Role modeling	
Collaborate effectively with other consulting services and participate actively and productively in the multidisciplinary administration of care	Formal conferences, lectures, and discussions Supervised surgical experiences Mentoring	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Present cases to attending physicians and colleagues clearly, efficiently, and accurately	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Teach effectively medical students, other residents, colleagues, and staff in conferences, informal settings, and the operating room	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: interpersonal and communication skills Performance at formal conferences
Complete accurate, clear notes in the medical record including computerized records	Supervised surgical experiences	Staff evaluation of core competencies: interpersonal and communication skills

COMPETENCY: Professionalism

Definition: commitment to professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

At the end of their urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Demonstrate the knowledge, attitude, and skills necessary to practice professionally responsible, ethical, and culturally sensitive urologic oncology	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Exhibit respectful compassionate care that places the patient's best interest ahead of everything else, but works sensitively and compassionately with the family to archive this end	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism Performance at formal conferences
Demonstrate accountability for their medical and surgical decisions to their patients and to the urologic profession	Supervised surgical experiences Role modeling Mentoring	Staff evaluation of core competencies: professionalism
Practice urologic oncology in a way that shows commitment to excellence in patient care	Supervised surgical experiences	Staff evaluation of core competencies: professionalism

<p>Practice urologic oncology to the highest ethical and professional standards</p> <ul style="list-style-type: none"> • Follow institutional and professional code of ethics • Respect patient confidentiality and disclosure of information • Report diseases as mandated • Obtained informed consent for therapies • Respect rights of patients and their families, and personal sensitively to patient's culture, age, gender and disabilities • Consider individual and societal/community needs • Obtain consent/assent in research • Maintain appropriate professional relationships with pharmaceutical and other commercial organizations • Take into account competence, cultural and ethical influences on the acceptance of therapy for specific urologic diseases and the impact of such diseases and their treatments on quality of life: this is particularly important given the socially/culturally charged nature of many urologic oncology problems 	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Role modeling</p> <p>Supervised clinical research and laboratory experience – pertains primarily two residents interested in this subspecialty</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>Performance at formal conferences</p>
<p>Exhibit prepared and timely attendants for conferences, clinics and surgical procedures</p>	<p>Formal conferences, lectures, and discussions</p> <p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p> <p>Supervised clinical research and laboratory experience – pertains primarily two residents interested in this subspecialty</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>Performance at formal conferences</p>
<p>Maintain surgical logs in an up to date fashion</p>	<p>Supervised surgical experiences</p>	<p>Staff evaluation of core competencies: professionalism</p>
<p>Demonstrate courteous and responsive communication with support personnel related to the residency training requirements</p>	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>
<p>Demonstrate courteous behavior to all support and ancillary staff</p>	<p>Supervised surgical experiences</p> <p>Supervised patient care and emergency room experiences</p>	<p>Staff evaluation of core competencies: professionalism</p> <p>360° evaluations</p>

COMPETENCY: Systems-based practice

Definition: demonstrate an awareness of, and responsiveness to larger context and system, and be able to use system resources for optimal care.

At the end of their urologic oncology rotation the resident will be able to:

Objectives	Educational methods	Assessment methods
Understand the interaction of their urologic oncology practices within the larger healthcare system. They must have an awareness of and response to the larger context and system of healthcare with the ability to effectively utilize system resources to provide optimal oncologic urology care	Formal conferences, lectures, and discussions Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Have adequate knowledge of practice and delivery systems. They must have a theoretical and practical understanding of systems theories and their applicability to health and urologic oncology care, and their potential impact on patient safety	Formal conferences, lectures, and discussions	Staff evaluation of core competencies: systems-based practice
Demonstrate knowledge about local and national agencies and organizations involved in advocating and caring for patients with urologic oncology problems	Role modeling Mentoring	Staff evaluation of core competencies: systems-based practice
Practice cost effective care and appropriate resource allocation while providing quality urologic oncology care	Supervised surgical experiences Supervised patient care and emergency room experiences	Staff evaluation of core competencies: systems-based practice
Collaborate with other health professionals such as nurses, social workers, and other specialists to provide and manage quality urologic oncology urological care	Formal conferences, lectures, and discussions Supervised surgical experiences Role modeling	Staff evaluation of core competencies: systems-based practice Performance at formal conferences
Advocate for oncology patients with urological problems	Formal conferences, lectures, and discussions Supervised surgical experiences	Staff evaluation of core competencies: systems-based practice Performance at formal conferences