Research
The Department of Urology at the University of Texas Health Science Center in San Antonio has a tradition of excellence in research. Our focus is in understanding disease processes to optimize prevention and treatment opportunities. It is our goal to have a vision of dramatic improvements in understanding, preventing, and treating disease to substantially improve the quality of health in Urologic Disease.

Our primary foci include Urologic Cancers, Minimally-invasive Surgery, Urinary Incontinence, Female Urology, Sexual Function, Stone Disease, and Pediatric Urology.

Our laboratory efforts include researchers in Genetics, Pathology, Cell Signaling and Molecular Biology, Epidemiology, Prevention, Biostatistics, and Nutrition, just to name a few.

The Department of Urology has several assigned and a number of collaborating laboratories. Laboratories are located above the Department in the Medical School on the 5th floor and in the newly completed South Texas Research Facility (Rm 233-237) on campus. The Department of Urology has partnered with Cellular and Structural Biology to purchase a variety of pieces of equipment to establish a state-of-the-art genetics and cell biology laboratory. Members primarily use these laboratories due to the senior mentorship of Dr. Robin Leach as well as the support technicians who are present.

Resident Research and Quality Improvement - Expectations
All residents are required to maintain up-to-date CITI training and WOC Research appointment for the VA and at UT in order to participate in ongoing research activities. This training is mandatory. **Each resident will be responsible for successful completion of at least one major research and one quality improvement project (basic science and/or clinical) during the residency.**

To accomplish this, each resident will pick a research mentor from the clinical or basic science research faculty no later than the end of the PGY-1 year. During the U-1 year the resident will develop the research thesis, design the protocol and begin to work out the details of getting the study underway: funding, lab space if needed, IRB/Research Committee approval, etc.

By the beginning of the U-2 year, the resident should be starting the project and with the assistance of the research mentor, provide quarterly progress reports to the Program Director indicating progress on the projects. By the end of the U-3 year, the project should be at or near completion with the expectation that one or more publications based upon the results will be submitted to peer-reviewed journals. **Submission of at least one manuscript will be required to progress to the U-4 year.** Abstract submission and presentation at a major regional or national meeting is encouraged but not in and of itself sufficient to replace manuscript submission. **At least one publication is required to graduate from the program.**
DEPARTMENT OF UROLOGY
RESIDENT RESEARCH PROGRESS FORM

Resident Name:
Date:___________
PGY-1 Start Date: ___________  U-4 completion date:______________________

Basic Science Research Mentor:________________________________________
Clinical Research Mentor:________________________________________
Research Title and Brief Description:

U-1 Year: Research Idea Completed (IRB, Funding, Lab, etc.)
Mentor Signature: _________________________________________
Date:___________
Resident Signature: _________________________________________
Date:___________

U-2 Year: Research Initiated
Mentor Signature: _________________________________________
Date:___________
Resident Signature: _________________________________________
Date:___________

U-3 Year: Research Project Update: In Progress  Completed  Meeting  Abstract  Publication
Mentor Signature: _________________________________________
Date:___________ Resident Signature: ____________________________
Date:___________

U-4 Year: Research Project Update: Completed Meeting Abstract Publication
Mentor Signature: _________________________________________
Date:___________ Resident Signature: ____________________________
Date:___________
DEPARTMENT OF UROLOGY
RESIDENT QUALITY IMPROVEMENT PROGRESS FORM

Resident Name: Date: __________
PGY-1 Start Date: __________ U-4 completion date: ______________________
Quality Improvement Mentor: __________________________________________
QI Project Title and Brief Description:

U-1 Year: QI Idea Completed
Mentor Signature: ___________________________________________________
Date: ______________
Resident Signature: ________________________________________________
Date: ______________

U-2 Year: Project Initiated
Mentor Signature: __________________________________________________
Date: ______________
Resident Signature: ________________________________________________
Date: ______________

U-3 Year: Project Update: In Progress, Completed, Meeting, Abstract, Publication.
Mentor Signature: ___________________________________________________
Date: ______________ Resident Signature: ______________________________
________________________________________ Date: ______________

U-4 Year: Project Update: Completed, Meeting, Abstract, Publication,
Mentor Signature: __________________________________________________
Date: ______________ Resident Signature: ______________________________
________________________________________ Date: ______________