OVERVIEW OF RESIDENCY

The UTHSCSA Urology program completed the transition from two residents at each level to three residents at each level in 2008. A further increase in resident complement was granted in June 2008, which allowed 4 residents at each training level. In response to resident education needs for more flexibility in training, the transition from a 2 + 4 program to 1 + 4 in the overall program length was approved and the transition completed in 2011. The description below reflects the completed transition to the 1 + 4 schedule with 4 residents at each level.

General - The PGY-1 year is designed to give the resident a broad experience in General surgery and learn the basics of surgical patient care and good surgical technique. The core medical competencies (Medical Knowledge, Patient Care, Practice-based Learning & Improvement, Interpersonal & Communication Skills, Professionalism and Systems-based Practice) are emphasized as they are in all later years as the resident becomes familiar with surgical principles. In the U-1 year these skills are further built upon and a transition to the Urology service provides introductory experience with the pathophysiology of urologic illnesses, the urologic evaluation of patients, management of urologic conditions and familiarization with the basic urologic procedures. At the beginning of the U-1 year, residents attend an intensive 2-day course of instruction that includes training in basic urologic patient evaluation, consultation skills, minor procedures, laser and radiation safety training and other topics that will allow the resident to function from day one on the clinical services. Later in the U-1 year, the evaluation and management of more complex urologic problems are emphasized as are development of skills in endoscopy and minor surgeries. The U-2 year introduces the resident to more complex open and laparoscopic surgeries as confidence is built in the basic endoscopic skills. During the U-3 year, the resident has had exposure to all aspects of urologic surgery and is becoming confident and skilled at their application. Finally, more administrative and supervisory skills are developed during the U-4 year. The goal of our training program is that by the conclusion of the chief residency, the residents will be capable of doing any urologic procedure and running their own practice.

By year:

PGY1 – This year is a General Surgery year under the oversight of the General Surgery Program Director. A variety of surgical rotations is used to expose the trainee to the evaluation and management of patients with surgical diseases. Specific goals and objectives of these rotations are available for review in the General Surgery program but overall objectives are to learn the outpatient evaluation of patients with surgical diseases, inpatient management principles, fluid & electrolyte management, antibiotic use, as well as basic procedural techniques such as line placement, hernia repair, laparoscopic port placement, etc. Acceptable rotations include general surgery, vascular, pediatric surgery, trauma surgery, oncology, SICU and Urology.

U-1 (PGY-2) – This year, the U-1 residents rotate on 3 main services: University Hospital (UH), Pediatric (UH, Methodist, CHOSA), and Veterans Administration (VA)
Hospital. During the 2 UH rotations, residents get experience on the GU Consult service and beginning experience with development of endoscopic skills under the mentorship of Dr. Timothy Tseng, MD. A focused Neurourology & Voiding Dysfunction experience under the direction of Dr. Steven Kraus gives the resident a comprehensive knowledge base in these areas and prepares them for the remaining years. The U-1 training includes urodynamics (UDS) procedures performed at the clinic and exposure to video urodynamics (VUDS) procedures through the South Texas Pelvic Floor Center at MARC. Continuity clinics at University Urology Specialists office – located at the University’s Medical Arts & Research Center (MARC) and the Robert Brady-Green UHS Outpatient Clinic (RBG) - provide the resident the opportunity to evaluate outpatients for a wide variety of urologic conditions, plan their care, discuss these plans with faculty, follow patients during their hospitalization or outpatient care, and then track them in clinics thereafter to observe the outcomes and modify their care. This rotation also provides exposure to trauma and other emergency conditions presenting to University Hospital, the largest Level I trauma center in South Texas. The 6 months at UH allows the resident the opportunity to perform a high volume of outpatient endoscopic procedures as well as the opportunity to perform and assist with open procedures of varying complexity at University Hospital.

The second U-1 rotation is a Pediatric Urology rotation. During this rotation, which includes two residents (U-1 and U-3), the U-1 resident has the opportunity to operate with the full-time clinical faculty in performing a wide range of surgical procedures. Continuity clinics are based at both the MARC and RBG as well as the Pediatrix Urology clinics. Outpatient pediatric urodynamics instruction is available at the MARC location. Finally, 3 months are spent on a four resident general urology team at the Audie L. Murphy Veterans Administration Hospital where the resident participates in major cases but focuses on becoming more proficient at endoscopic skills and minor procedures. Specific procedure and outpatient clinics under the direction of UT Faculty have been developed for the resident allowing close supervision and oversight of the resident performance. Residents receive their initial exposure to the urologic manifestations of spinal cord injury during this rotation. Complex voiding dysfunction and interpretation of urodynamics studies are emphasized as well. The electronic medical record at this facility also gives the resident full exposure and initial training in coding and provides a tremendous opportunity in systems-based practice learning.

U2 – The U-2 experience is a multi-part experience and the current schedule is based upon input received from previous residents in training during the semiannual reviews and annual program retreats. The rotations include Elective/Super-Sub (Funded Research, Infertility-Andrology, Radiology, Doctor’s Hospital Renaissance, etc.), Santa Rosa Medical Center, VA, and Methodist. The Elective/Super-Sub (E/SS) rotation, the resident has options to participate in several focused areas of instruction. During an Infertility-Andrology rotation with Dr. John Case, MD, the resident participates in evaluations of patients with infertility, performing vasectomies, as well as more complex surgical infertility procedures including vaso-vasostomies and vaso-epididymostomies. Also during this 3-month period, if funded, the resident may spend time doing a research (clinical or basic science) project in conjunction with limited clinical responsibilities (usually at the UH or VA Hospitals). Elective rotations may also be used for a variety of
experiences in other departments (e.g. Radiology) including off-site rotations as requested by the resident. The Program Director has used this opportunity in the past to provide residents who are interested in fellowship training to spend several weeks away from San Antonio on rotations related to their subsequent training interest. This has included an additional Pediatric Urology rotation for another recent resident and outside infertility and oncology rotations for others. Oversight during the entire U-2 year is provided by the PD and designees for the development of research programs that will assist the resident in developing an understanding of the conduct, design and execution of research trials. The Super-Sub part of the rotation includes covering the resident absences from other services (Vacations, etc) so that the operative experiences on those services are not missed. Another rotation during the U-2 year includes an opportunity to serve as a resident at the VA hospital. It is during this rotation that this resident has the opportunity to perform more complex cases including advanced endoscopic procedures as well as a high volume of oncologic procedures. Grooming of residents during this rotation also occurs to hone their outpatient endoscopic techniques and further emphasis on voiding dysfunction and spinal cord injury patients. A final rotation is spent at the Methodist Hospital where the resident gains open & laparoscopic skills through interaction with the Urology San Antonio Group. A wide variety of adult, and occasional pediatric, conditions are seen by the resident on this rotation. Part of a two resident team, the U-2 resident is supervised by Dr. LeRoy Jones, MD who along with the entire teaching faculty of the USA group, provide an outpatient continuity of care clinic as well.

U3 – The U-3 year is a unique experience and the product of a vibrant relationship between the clinical faculty in San Antonio and the resident training program. During this year, 3 months are spent at Methodist Hospital (M) under the overall supervision of Dr. LeRoy Jones, MD, a leader in Urology with a long history of experience with resident training. The outpatient continuity clinic for this rotation occurs weekly in the offices of Urology San Antonio where the resident experiences first-hand, the organization of an independent private urology practice. Additionally, 3 months are spent as the chief resident in Pediatric Urology where the resident functions as the administrative chief and focuses on more complex procedures, evaluation and management issues. The continuity clinic for this rotation occurs weekly at the offices of the pediatric faculty and at the RBG & MARC university outpatient facility. An additional rotation at the University Hospital provides exposure to management of a complex service and participation in oncology cases of increasing complexity. These three rotations give residents an opportunity to develop a wide portfolio of clinical expertise as well as new and different methods to manage complex patients. The 4th rotation, Elective/Research, allows the residents to again take advantage of on- and off-site elective rotations and research activities with clinical responsibilities integrated into the time.

U4 – During the U-4 year, the residents assume their Chief Resident status at the VA, University Hospital, and Santa Rosa Medical Center hospitals. A fourth, Administrative rotation based at UH focusses on developing skills in management and systems-based practice. They are provided with extensive administrative support for their activities and work side-by-side with the institutional Chiefs – Dr. Tim Tseng at UH, Dr. Joseph Basler at the VA, Dr. Ron Rodriguez at UH and Dr. Robert Svatik at SRMC. As Administrative
chief, the U-4's cover excess upper level cases at the core institutions but will also cover leave time of the upper level residents. However, a big part of their experience is management of call schedules and the educational curriculum including medical student education. The administrative chiefs each have responsibility for certain administrative and educational activities including: 1. Resident call and leave schedule throughout the year, 2. Membership on the Program Evaluation Committee (PEC), 3. Developing the curriculum for the U-1 orientation at the beginning of the academic year, and 4. Participation in the development of the Geriatric Urology Symposium.

In addition to their responsibilities of coordinating care at these institutions, the U-4’s have a number of additional educational opportunities including (1) overseeing education of junior residents and medical students, (2) overseeing inpatient care (alongside responsible faculty), (3) providing leadership to the clinical activities at both institutions, (4) performing the most complex surgical cases at all institutions, (5) conducting morbidity and mortality reviews at both institutions, (6) presenting each weeks’ schedule of operative cases at Pre-op Conference, (7) serving as senior mentors for junior residents, and (8) serving as the senior members of the residency team to all faculty-resident strategic conferences and retreats. The latter involvement provides guidance and input to faculty with regards to further developments and enhancements in the training program.

The SRMC service provides extensive Urologic Oncology experience. This rotation allows exposure to a high volume oncology patient population and newer surgical techniques including robotics procedures under the direction of the local site director, Dr. Rob Svatek. The outpatient continuity clinic for this rotation occurs at the MARC faculty clinics along side the clinical oncology faculty. The VA service is designed to give the chief resident a balanced experience with clinic, operative and administrative experiences in an environment that requires development of superior organizational skills. This rotation provides an additional operative experience in open, laparoscopic and robotic experience with responsibility for the educational development of the junior residents and medical students. The expected outcome is a mature, well-rounded and organized surgeon capable of managing a complicated OR and clinic schedule.
### Resident Rotation Assignments 2015 – 2016 (General Outline)

<table>
<thead>
<tr>
<th></th>
<th>July</th>
<th>Aug</th>
<th>Sep</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
<th>May</th>
<th>Jun</th>
</tr>
</thead>
<tbody>
<tr>
<td>U-4</td>
<td>VA</td>
<td>VA</td>
<td>VA</td>
<td>AC</td>
<td>AC</td>
<td>AC</td>
<td>SRMC</td>
<td>SRMC</td>
<td>SRMC</td>
<td>UH</td>
<td>UH</td>
<td>UH</td>
</tr>
<tr>
<td>U-4</td>
<td>UH</td>
<td>UH</td>
<td>VA</td>
<td>VA</td>
<td>VA</td>
<td>AC</td>
<td>AC</td>
<td>SRMC</td>
<td>SRMC</td>
<td>UH</td>
<td>UH</td>
<td>UH</td>
</tr>
<tr>
<td>U-4</td>
<td>SRMC</td>
<td>SRMC</td>
<td>SRMC</td>
<td>UH</td>
<td>UH</td>
<td>UH</td>
<td>VA</td>
<td>VA</td>
<td>VA</td>
<td>AC</td>
<td>AC</td>
<td>AC</td>
</tr>
<tr>
<td>U-4</td>
<td>AC</td>
<td>AC</td>
<td>SRMC</td>
<td>SRMC</td>
<td>SRMC</td>
<td>UH</td>
<td>UH</td>
<td>VA</td>
<td>VA</td>
<td>VA</td>
<td>VA</td>
<td>VA</td>
</tr>
</tbody>
</table>


| U-2 | M     | M     | M     | SRMC | SRMC | SRMC | SS   | SS   | VA   | VA   | VA   | VA   |
| U-2 | VA    | VA    | VA    | M    | M    | M    | SRMC | SRMC | SS   | SS   | SS   | SS   |
| U-2 | SS    | SS    | SS    | VA   | VA   | VA   | M    | M    | M    | SRMC | SRMC | SRMC |
| U-2 | SRMC  | SRMC  | SRMC  | SS   | SS   | SS   | VA   | VA   | VA   | M    | M    | M    |

| U-1 | UH-V  | UH-V  | UH-V  | Ped  | Ped  | Ped  | UH-En | UH-En | UH-En | VA   | VA   | VA   |
| U-1 | VA    | VA    | VA    | UH-V | UH-V | UH-V | Ped  | Ped  | Ped  | UH-En | UH-En | UH-En |
| U-1 | UH-En | UH-En | UH-En | VA   | VA   | VA   | UH-V | UH-V | UH-V | Ped  | Ped  | Ped  |
| U-1 | Ped   | Ped   | Ped   | UH-En | UH-En | UH-En | VA   | VA   | VA   | UH-V | UH-V | UH-V |

**KEY:**
- VA-Audie Murphy Veterans Hospital
- UH - University Hospital
- UH-En – Endourology
- UH-V – Voiding Dysfunction/Neurourology
- SRMC - Santa Rosa Hospital - Adult
- SLB – St. Lukes Baptist (Phased out 08-16-20015)
- Ped- Pediatrics
- M - Methodist Hospital
- DHR – Doctor’s Hospital, Renaissance
- E – Elective
- SS - Supersub; AC - Administrative Chief

Note: U-1 Rotations = 3 months  
U-2 Rotations = 3 months  
U-3 Rotations = 3 months  
U-4 Rotations = 3 months