

Urology Levels of Care

PROCEDURE/SKILL	LEVEL OF CARE	SUPERVISION	MILESTONE/COMPETENCY
Residents at this level should be Proficient in the Tasks & Activities Commensurate with the PGY-1 Level. Additionally, Residents at this Level Should:			
Learn Complex Techniques of Dissection and Handling of Tissues [2]	PGY 2	Direct	PC
Repair Complex Lacerations [2]	PGY 2	Direct	PC
Serve as Operative Assistant in Major Percutaneous, Pediatric, Oncological, & Reconstructive Urological Operations* [2]	PGY 2	Direct	PC
Perform Transurethral Resection of Superficial Bladder Lesions / Tumors [2]	PGY 2	Direct	PC
Perform Flexible & Semi-Rigid Ureterscopy w/ Basket Extraction & Laser/EHL Lithotripsy [2]	PGY 2	Direct	PC
Place Percutaneous Nephrostomy Tube Placement Under Fluoroscopic Guidance* [2]	PGY 2	Direct	PC
Perform Simple Scrotal Surgery (Hydrocelectomy, Scrotal Orchiectomy) [2]	PGY 2	Direct	PC
Perform Open Suprapubic Cystostomy* [2]	PGY 2	Direct	PC
Perform Percutaneous Needle Biopsy of Kidney or Renal Mass Under U/S Guidance*[2]	PGY 2	Direct	PC
Perform Simple Scrotal Surgery (Hydrocelectomy, Scrotal Orchiectomy) [2]	PGY 2	Direct	PC
Perform Open Suprapubic Cystostomy* [2]	PGY 2	Direct	PC
Perform Percutaneous Needle Biopsy of Kidney or Renal Mass Under U/S Guidance*[2]	PGY 2	Direct	PC
Vasectomy* [2]	PGY 2	Direct	PC
Should be Proficient in the Tasks & Activities Commensurate with the PGY-1 Level and should have developed the knowledge, skills, and competence be able to perform the following additional procedures under indirect supervision:	PGY 2		
Clamp & Surgical Circumcision [2]	PGY 2	Indirect	PC
Rigid & Flexible Cystoscopy [2]	PGY 2	Indirect	PC
Endoscopic Cold Cup Bladder Biopsy [2]	PGY 2	Indirect	PC
Retrograde Pyelography & Placement of Ureteral Stents [2]	PGY 2	Indirect	PC
Percutaneous Suprapubic Cystostomy Placement [2]	PGY 2	Indirect	PC

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Transrectal Ultrasound-Guided Prostate Needle Biopsy [2]	PGY 2	Indirect	PC
Sclerotherapy - Hydrocele [2]	PGY 2	Indirect	PC
Extracorporeal Shock Wave Lithotripsy (ESWL) [2]	PGY 2	Indirect	PC
Pharmacologic Erection Therapy [2]	PGY 2	Indirect	PC
Dilation of Urethral Strictures with Sounds or Balloons [2]	PGY 2	Indirect	PC
Perform and Interpret Urodynamics (Uroflow, Cystometry, Pressure-Flow Studies, etc.) [1,2]	PGY 2	Indirect	MK, PC
Residents should be Knowledgeable of the Six Core Clinical Competencies and the Evaluation Process Used to Monitor Their Progress Toward Achieving Success in the following Domains:			
Patient Care: Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. [1]	PGY 2	Oversight	PC
Medical Knowledge: Residents must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care. Residents are expected to perform at, or above the National Average of Peers on the Annual AUA-sponsored In-Service Examination. [2]	PGY 2	Oversight	MK
Practice-based Learning and Improvement: Residents must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Residents are expected to develop skills and habits to be able to meet the following goals: [3]	PGY 2	Oversight	PBL
identify strengths, deficiencies, and limits in one's knowledge and expertise; [3]	PGY 2	Oversight	PBL
set learning and improvement goals; [3]	PGY 2	Oversight	PBL
identify and perform appropriate learning activities; [3]	PGY 2	Oversight	PBL
systematically analyze practice using quality improvement methods, and implement changes with the goal of practice improvement; [3]	PGY 2	Oversight	PBL
incorporate formative evaluation feedback into daily practice (including SECURE's Observed Patient Encounters and Operative Performance Rating Forms); [3]	PGY 2	Oversight	PBL

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locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems; [3,5]	PGY 2	Oversight	PBL
use information technology to optimize learning; and, [3,5]	PGY 2	Oversight	PBL, SBP
participate in the education of patients, families, students, residents and other health professionals. [3,4]	PGY 2	Oversight	PBL, ICS
Interpersonal and Communication Skills: Residents must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, & health professionals. [4] Residents are expected to:	PGY 2	Oversight	ICS
communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds; [4]	PGY 2	Oversight	ICS
communicate effectively with physicians, other health professionals, and health related agencies; [4]	PGY 2	Oversight	ICS
work effectively as a member or leader of a health care team or other professional group; [4]	PGY 2	Oversight	ICS
act in a consultative role to other physicians and health professionals;[4] and,	PGY 2	Oversight	ICS
maintain comprehensive, timely, and legible medical records, if applicable.[4]	PGY 2	Oversight	ICS
Systems-based Practice: Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care. Residents are expected to:	PGY 2	Oversight	
work effectively in various health care delivery settings and systems relevant to their clinical specialty; [5]	PGY 2	Oversight	SBP
coordinate patient care within the health care system relevant to their clinical specialty; [5]	PGY 2	Oversight	SBP
incorporate considerations of cost awareness and risk-benefit analysis in patient and/or population-based care as appropriate; [5]	PGY 2	Oversight	SBP
advocate for quality patient care and optimal patient care systems; [5]	PGY 2	Oversight	SBP
work in inter-professional teams to enhance patient safety and improve patient care quality;[5] and	PGY 2	Oversight	SBP
participate in identifying system errors and implementing potential systems solutions. [5]	PGY 2	Oversight	SBP

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Professionalism: Residents must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Residents are expected to demonstrate:	PGY 2	Oversight	
compassion, integrity, and respect for others; [6]	PGY 2	Oversight	P
responsiveness to patient needs that supersede self-interest; [6]	PGY 2	Oversight	P
respect for patient privacy and autonomy; [6]	PGY 2	Oversight	P
accountability to patients, society and the profession;[6] and,	PGY 2	Oversight	P
sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.[6]	PGY 2	Oversight	P

KEY
Supervision:
Direct- the supervising physician is physically present with the resident and patient.
A faculty physician, other than another resident, is physically present during the key portions of the procedure or is immediately available.
Indirect- the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision.
Oversight- the supervising physician is available to provide review of procedures/encounters with feedback after care is provided.
Core Competencies:
1. Patient Care (PC)
2. Medical Knowledge (MK)
3. Practice-Based Learning & Improvement (PBL)
4. Systems-Based Practice (SBP)
5. Interpersonal & Communication Skills (IC)
6. Professionalism (P)