

CAMC Osteopathic Urology Residency

The core curriculum in the urological surgery residency builds upon the education and training obtained in the PGL1 and PGL2 residency years. The PGL 3, 4 & 5 training years concentrate on the areas pertaining to the specialty of urological surgery.

ROTATION CHART

PGL 1	Specialty Track Rotating Internship
PGL 2	General Surgery Year
PGL 3	Junior Resident in Urology
PGL 4	Senior Resident in Urology
PGL 5	Chief Resident in Urology

PGL 1

This year will consist of a urological surgery specialty track. The internship will contain the following components:

- One-half day per week of family practice in a clinic setting
- Two months of general internal medicine
- One month of ICU experience
- One month of ER experience
- One month of OB/GYN
- One month of pediatrics
- Four months of general surgery
- One month of urology
- One month surgery elective

PGL2

This year will consist of one year of general surgery residency training. CAMC in partnership with West Virginia University has an ACGME approved General Surgery residency program.

- Ten months of general surgery
- One month of critical care
- One month of general surgery night float

PGL3

For Urology residents in the first year of service, the goal is to master the basics of diagnosis and treatment of urology. Residents will spend this critical formative year under the direct supervision of the Urology faculty. Urology residents are directly responsible for inpatient care of urology patients and thereby learn through the faculty, performing basic open operations in urology such as orchiectomy, vasectomy, circumcision, hydrocele repair, and assist and perform more complex operations such as limited pelvic lymphadenectomy and nephrectomy. Another important goal of the first year is the mastery of the cystoscopic examination.

PGL4

During this year, residents will receive an emphasis in Pediatric Urology. The main goals will be to master the management of neurogenic bladder, ureteropelvic junction obstruction, vesicoureteral reflux, posterior urethral valves, hypospadias, intersex, cryptorchism, calculus disease, and urinary tract infections.

Additionally, four months of this year will provide additional exposure to neurology, female urology, and genitourinary oncology. The resident will participate in more advanced surgeries than in the prior year. Exposure to endoscopic urology and genitourinary oncology will be provided. The research component of the residency will be started by the beginning of this year.

The resident will spend four months of this year with exposure to office based urology and surgery. Residents will be taught basics of ambulatory urology including new and return patient evaluation, and basic office procedures. Residents will assist with surgeries as well as make daily rounds on inpatients, outpatients, and consults.

PGL5

The goal of the chief year is demonstration of administrative leadership, academics, and patient care ability and mastery of the diagnostic and surgical skills required for board certification and essential success in the specialty. Chief residents are responsible for the efficient running of the urology clinical services. By this year, urology residents are expected to have mastered all but the most difficult of surgical procedures, and therefore are expected to take a major role in teaching junior residents.

Chief residents will have exposure to renal transplantation. The primary goal of this experience is to become adept at vascular anastomosis of the renal artery and vein; improve vascular surgery techniques and confidence; become facile with the care of patients with end stage renal disease; and to become familiar with immunosuppression and the management of complex surgical and medical problems encountered in renal transplant patients. Completion of research projects is a requirement for graduation.

In addition, residents will be taught how to succeed in establishing a private urology practice, including office business management, referral development, private office urology and patient management.