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Welcome to the Department of Urology

Whether you are visiting from afar or you are a current student at Stanford University, we would like to give you a warm welcome. We hope your time spent in our department is fulfilling.

*Getting Started*

Students primarily rotate at Stanford Hospital (SUMC).

There are 4 Urology Services at Stanford:
- Andrology/General Urology
- Female Urology and Center for Neurourology
- Pediatric Urology
- Uro-Oncology

A two-week rotation looks like this:
1 day in surgery, 1 day in clinic with each of 2 assigned attending faculty (4 days each week); remaining 1 day elective with residents or operating room of your choice.
Core faculty:

Pediatric Urology
   Yang Wu
   William Kennedy
   Ed Diaz

Neurourology
   Craig Comiter
   Ekene Enemchukwu
   Amy Dobberfuhl

Andrology
   Michael Eisenberg

Stone Disease
   Simon Conti

Uro-Oncology
   Eila Skinner (Chair)
   Geoff Sonn
   James Brooks
   Harcharan Gill (Program Director)
   Benjamin Chung
   Jay Shah
   Alan Thong
   Philip Hanno

Required Reading List: National Medical Student Core Curriculum

http://Tinyurl.com/AUAreading
Acute scrotum, Pediatric UTI, Adult UTI, Urinary Stones, Incontinence, Benign prostatic hyperplasia, Erectile dysfunction, Hematuria, Prostate Cancer

Required Reading List: Pediatric Urology Readings

http://Tinyurl.com/pedsurology
Final examination

Final examinations will be held last Friday afternoon of the rotation. You will be tested on the learning objectives from 2 of the following national medical student core curriculum modules.

- Pediatric UTI
- Prostate Cancer
- Incontinence

Evaluation is based upon:

- Clinical skills: clinic H&P, ward notes
- Surgical skills suturing skin at end of case
- Professionalism
- Examination
- Faculty and Resident Evaluations

What to expect during next 2 weeks:

- Main Contact: The Chief Resident on that service.

- 1 day in surgery, 1 day in clinic with each of 2 assigned attending faculty (4 days each week); remaining 1 day elective with residents or operating room of your choice.

- Meet with faculty prior to clinic day - review types of patients seen, expectations.

- Lectures: lecture with faculty noon-1PM, before, or after or during 1 clinic/OR day.

- On call 1st Saturday of rotation (7 am Saturday to 7 am Sunday) – to see ER and hospital consults with resident, attend surgeries with resident.

- Each service will have a number of faculty that you will be rotating with during the week.

- If other med students are also assigned to the same service collaborate with them and the chief resident regarding your selections so that multiple students do not end up with a single faculty member on any particular session.

- Please be aware that while what is specified on the provided rotation schedule is the typical weekly schedule, occasionally some clinics will be cancelled due to faculty being away or other conflicting responsibilities. There can also be add-on OR cases that are not indicated on this schedule.
**Urology Rounds:**

1. Usually anytime between 6-7AM. Finish rounding by 7AM
2. Pick 1-2 patients to round on in the morning.
3. Go to clinic or OR with attending
4. Check with junior resident about when evening rounds are and if you can help out with anything
5. Do summary lines on patients.

**When to arrive for rounds and what to do.**
- Discuss with a Urology Resident as to when they plan to arrive and what tasks you can help them with.
- Generally students will arrive 30 minutes ahead of when rounds start to pre-round and assist residents.
- OR starts at 7:30 every morning (except Mondays, which are 8:30am start).

**Presentation Format:**

**ID:**  ## M/F  POD#_____  s/p _____
**E:** major events only
**S:**
1. Pain control
2. GI status (flatus, n/v, bm)
3. Ambulating?
**O:**
1. Tmax (Tcurrent only if Tmax > 38.4)
2. HR range
3. BP range
4. Sats _____ on _____% of O2 at _____L (or on RA)

**INs/Outs:**  XX over YY (last 24 hours)
**PO:** total
**UOP:** xx / xx / xx (for last 3 shifts)
**Drain:** xx / xx/ xx

Pertinent Exam only
- example: +B, NTND
describe incision site, dressing, foley color (drink color), drain color (serosanguinous vs. sanguinous)

**A/P:** What is the plan for #1-3?
**Other pt specific issues**
Clinic Expectations

Remember you are a very important part of your patient’s care! Medical students can be the source of vital information regarding their patients because they have the time to speak with their patients in depth and conduct thorough chart reviews. Patients are also very appreciative of the care you can provide.

Attire

- If you are assigned to attend clinic for the morning, come dressed in appropriate professional attire (e.g. collared shirt and slacks for men; blouse and slacks or skirt/dress for women) with your white coat and name badge.
- If you will be in the OR in the morning and clinic in the afternoon, bring a change of clothes.
- Clinical procedure will vary depending on the attending.
- You may be asked to accompany a resident or fellow to see patients initially, but eventually, you should be seeing patients on your own before presenting to the attending.
- Most clinics will provide you with an intake form for you to jot down notes on the history and examination. These do not get scanned into the patient record, but the actual clinic progress note is typed in the computer, so do not worry about having to fill these out in great detail.

Patients

- Generally, there will be a list of patients posted or in EPIC under “schedule.”
- A medical assistant will indicate on the list which patients are available to be seen.
- You can sign up for the next available patient on the list, or ask the resident/fellow/attending which patient they would like you to see.
- The patient’s chart is usually by the door. This includes a print out of the last clinic visit, or any faxed referral documentation if it is a new patient.
- Review these materials as well as any other notes or imaging available in the electronic record.
- Take a thorough history and do a complete examination unless instructed otherwise.

Clinical Progress Notes

- A resident can share templates with you for clinic progress notes.
- Send these to the attending for co-signature.
- In some cases (such as the LPCH or for the Indications Conference), you may be asked to dictate or write progress notes. A dictation template is available in these cases; ask a resident to provide you with a copy.
- Make sure to specify the attending physician’s name at the beginning of the dictation or assign them as a cosigner on a progress note.

OR cases

- One of the residents can provide you with a list of all the OR cases for the week.
- If you are assigned to a case, make sure to read about the surgery and the patient’s history ahead of time.
- Look up H & P in EPIC as well as labs and imaging.
For Your Reference

Clinical Sites
Cancer Center
875 Blake Wilbur Dr.
Stanford, CA 94305

Do you plan on applying to the Stanford Urology residency? Contact Taranjit Bains, our Education Program Manager (bainstj@stanford.edu), who can answer questions you may have.

Helpful Tips While on Rotation

Clinical Locations

Department Headquarters
Grant Building, S-287
• With faculty, fellow and resident, administrative offices.
• Location of lectures is the second-floor conference room (S-291).

Cancer Center
875 Blake Wilbur Dr., Stanford, CA 94305
• Uro-Oncology faculty offices, clinics are located here.

Main hospital
• The adult inpatient wards are located here.
• Adult main OR is located on the 2nd floor of the Stanford Hospital.
• Residents can show you where the locker rooms are and where to get scrubs.

Lucile Packard Children’s Hospital
725 Welch Rd., Palo Alto, CA 94304
• Pediatric Service is based here.
• Pediatric services are performed either in the Pediatric Main OR, on the ground floor of the LPCH, or in the Ambulatory Procedure Unit (APU), located on the 1st floor of LPCH.

Generally, you will be assigned to an even mix of clinic and OR. Feel free to let your chief know if there are any types of cases you are particularly interested in seeing during your rotation.