UROLOGY RESIDENCY 2024



Dear Resident Candidates,

Thank you for your interest in the Department of Urology at the University of Washington. We have prepared this brochure especially for you so that you can get to know us a bit better.

The University of Washington offers two tracks of urology residency training. This year, 2 positions are available in our Research track (6-years), which offers a dedicated research year. In addition, 2 positions are available in our Clinical track (5-years), which includes 4 months of protected research time. All of these tracks have equivalent clinical training, including exposure to the most innovative practices, incorporation of quality improvement projects, and participation in research projects during residency. You will find the mentorship and environment at University of Washington is very special and the research infrastructure and experience is exceptional with the depth of research exposure varying based on the training track

Our hope is to educate urology leaders who have a firm foundation in the basic tenets of urology. At the same time, we encourage our trainees to be curious and develop the tools they need to be life-long learners who have the capacity to incorporate new technologies. We are positioned to do so, given the enormous resources at our University, such as the WWAMI Institute for Simulation in Healthcare (WISH), the Applied Physics Laboratory and the world-class Fred Hutch Cancer Center. We are also extremely fortunate to have unique educational opportunities in our program, including a two to three-week Global Health rotation through International Volunteers in Urology (IVU), an incredible didactic curriculum that includes electronic spaced learning, and an unparalleled technical-skills simulation curriculum.

Our goal is to create the most innovative urology program in the United States by providing high-quality patient care for the entire five-state WWAMI (Washington, Wyoming, Alaska, Montana and Idaho) region, conducting exceptional translational research, and educating the next generation of urological surgeons and scientists.

Respectfully,



Daniel Lin, MD

Interim Chair, Department of Urology

Judith Hagedorn, MD, MHS, FACS Director, Urology Residency Program



UW Urology Mission Statement

The University of Washington Department of Urology prioritizes a safe, inclusive, and transparent clinical and educational environment. We foster learning and collaborative engagement to advance patient care and medical knowledge. We value inclusion of all lived experiences, amplify the voices of underrepresented communities, and promote social justice in our words and actions.

Our commitments:

- We maintain a climate of respect for patients and their families, our students, trainees, faculty and staff.
- We pursue the recruitment, retention and advancement of faculty and trainees from underrepresented groups in medicine.
- We provide personalized medicine where our patient-centered approach delivers equitable care.
- We support inclusive clinical and academic activities to promote equity among our faculty, staff and patients.
- We have developed curricula that fosters inclusive values among medical students, residents, and fellows.
- In our interaction with our patients, we have implemented practices that are guided by EDI
 (Equity, Diversity and Inclusion) principles such as the use of gender-neutral language. These
 practices are person-centric and avoid the use of stereotypes.

Diversity and Inclusion

The Department of Urology at the University of Washington School of Medicine is <u>committed</u> to diversity in recruiting physicians to our residency program. In this context, we are mindful of all aspects of human differences such as socioeconomic status, race, ethnicity, sexual orientation, gender, spiritual practice, geography, disability and age and approach recruitment purposefully in regards to equity, diversity and inclusion.



Drumheller Fountain with Mount Rainier in the background

Roles, Responsibilities, and Patient Care Activities

Residents are physicians-in-training. As such, they learn by attending didactic sessions, reading urologic materials and experiencing meaningful encounters with patients. Each resident is given progressively greater responsibility according to their level of education, abilities and experiences.

Responsibilities and Patient Care Activities

Residents are part of a team of providers caring for patients. The team includes an attending and other licensed, independent practitioners, trainees and medical students. Residents may provide care in both the inpatient and outpatient settings. They serve on a team providing direct patient care or may be part of a team providing consultative or diagnostic services. Each member of the team is dedicated to providing excellent patient care and is encouraged to clearly understand his/her role.

All residents participate in the educating and supervising any junior residents and medical students.

Urology Intern (U1)

Our Urology Interns spend 8 months on a variety of high-quality general surgery rotations and 4 months on Urology rotations at the VA and UW hospitals. Urology interns will begin to develop and refine basic open, endoscopic, laparoscopic & robotic surgical technical skills. Further, they will develop an understanding of the principles of and proficiency with correct basic surgical technique, such as incision, suturing, knot tying, and dissection.

Junior Residents (U2 and U3)

Junior residents provide care for patients on our various Urology services. They may work with –or in some cases, lead the Urologic Surgical team in providing care for patients in the in-patient or ambulatory settings and the emergency department. They may provide consultative services, as well. All services are supervised by an attending physician.

Research Residents (PGY4)

Residents begin to design their research year during their PGY-3 year by planning their project(s) with a clinical and research mentor. The research team mentorship is typically made up of a clinical urologist and a research mentor that may be a urologist or Ph.D. researcher. Research track (6-year) residents have the opportunity to apply for an optional global medicine experience through International Volunteers of Urology (IVU). This process is facilitated by the Research Liaison in our department, ensuring a good match between the resident's interests and goals and the research experience. In their dedicated research year, residents participate in ½ day per week of clinic as well as technical skills sessions to maintain clinical skills but are protected to allow effective research.

Senior and Chief Residents (U4-Senior and U5-Chief)

Senior and Chief residents are the leaders of the urology teams. Chief residents in their final year of clinical training and have inpatient and/or ambulatory responsibilities, intensive surgical experiences and administrative duties. These senior residents supervise and coordinate the teaching of junior residents and medical students. They work under the direction of the urology attendings and in close association with the program director and hospital program delegates to achieve common educational goals and improve resident training.

Surgical Experience

At our core, UW Urology surgical training provides individualized and graduated autonomy based in trust, communication, feedback, and judgment. During the clinical years of training, our residents are expected to learn about all aspects of urology, including oncology, pediatrics, female urology, stone minimally and invasive surgeries, erectile dysfunction and vascular physiology, and



"Urology boot camp was really wonderfulgreat use of WISH and real-world, practical skills training. Best part of training was the 1:1 instruction from faculty. Really wonderful session overall and a great introduction." – Urology Resident, boot camp participant genitourinary pathology and infectious diseases. They are competent across this spectrum and ready for independent practice at, or before, graduation.

The large volume of surgical cases in our program guarantees that our residents gain a vast experience in all sub-specialties of urology. Our department holds quarterly boot camps for the R1 Interns to provide one-on-one faculty training in common consults, difficult catheter placements, imaging interpretation, the basics of knot-tying, endoscopy, laparoscopy, proper coding and professionalism. During urology years, residents are quickly advanced to higher degrees of difficulty based on their experiences and their abilities. Residents are involved in every aspect of urologic surgery, including minimally invasive and endoscopic procedures, open surgery, robotics, laparoscopy and urodynamic studies. All procedures are supervised by a urology attending.

Clinical Facilities

The Urology program at the University of Washington consists of several different hospitals in its consortium. Each hospital has its own unique flavor, as characterized by its patient population, physician staff members, surgical procedures and associated ancillary services.

Educating residents at each of the institutions is accomplished most effectively by having a designated faculty member (program delegate) oversee the residency education at each of the hospitals. Program delegates act as extensions of the program director. As such, each program delegate has many roles, including auditing resident hours, assuring sound resident educational conferences, coordinating schedules, problem-solving, and documenting such tasks.

UWMC - Montlake



The University of Washington Medical Center – Montlake (UWMC) is the academic, tertiary care center for UW Medicine. This hospital has several subspecialty clinics, including the Prostate Oncology, Urogynecology and Men's Health Clinics. Each clinic combines cutting edge research with state of the art technology to achieve superior patient care. The surgical volume is high and diverse, providing residents with exceptional exposure and skill development.

UWMC - Northwest



The Kidney Stone Center at UWMC – Northwest (NWH) is the first comprehensive center for the treatment and prevention of kidney stones in the Puget Sound region. The multidisciplinary team includes experts in urology, nephrology and nutrition and cares for patients suffering from acute or recurrent kidney stones. The team treats kidney stones using the latest minimally invasive surgical and nonsurgical procedures. This site also now includes one of our largest clinics with dedicated space for general urology, female pelvic and reconstructive medicine, and transgender care.

Harborview Medical Center



Harborview Medical Center (HMC) is the Level I adult and pediatric trauma center & regional burn center for Pacific Northwest. Residents on their Trauma and Reconstruction rotation focus on provide tertiary care for acute injuries and genitourinary reconstructive surgery across the region, as well as primary care to local populations including the indigent, uninsured and underserved.

Veterans Affairs Puget Sound Healthcare System



The Veterans Affairs Puget Sound Health Care System (VA PSHCS) is a tertiary care center for the VA system. In addition to state-of-the-art medical facilities, the VA PSHCS is the regional referral center for all robotic surgery. The Urology service has a very busy surgical service, and has cases which range from "bread and butter" to complex oncology and kidney stone management.

Seattle Children's Hospital



Seattle Children's Hospital is perpetually ranked among the nation's best children's hospitals – for over 26 years in a row. The hospital received national rankings in all 10 specialty areas evaluated. Seattle Children's Hospital is a teaching hospital and a regional referral center for differences of sex development, spina bifida, pediatric kidney stones, robotic surgery, and pediatric reconstructive surgery.

Alaska Urology



Alaska Urology is based in Anchorage, AK and serve the urological needs of all Alaskans at two hospitals, two surgery centers and two clinics providing exceptional exposure to private practice and the WWAMI region. Residents participate in all aspects of patient care with exposure to community care in a less urban environment.

Resident Review and Promotion Process

The Urology Department at the University of Washington is committed to continuously improving the quality of graduate medical education and clinical experiences for all of our urology residents. In order to achieve these goals, our program is aligned with ACGME recommendations. Residents receive graduated responsibility in all aspects of clinical care ultimately preparing our graduates for independent practice. Milestones, which are developmentally-based achievements that residents should meet in order to progress through their training, have been incorporated into our program.

Research

The UW Department of Urology has an outstanding research program which is at the core of its mission. The model that has been successful in the department is a close alliance of basic and clinical researchers in Research Centers of Excellence jointly led by physician-scientist and PhD faculty members.

Today, there are eight PhD research faculty. The department has been very successful in securing federal research funding and has consistently ranked highly in the nation for NIH funding of Urology Departments. All Centers of Excellence are supported by combinations of federal, foundation and private funds. The department is very proud to be numbered among a prestigious few Urology departments which has both a SPORE and a Program Projects grant

in support of the Prostate Cancer Center. In addition, the department is proud of several other major NIH-funded research programs in erectile dysfunction, pelvic pain, androgen deficiency, kidney stones, and lower urinary tract disorders. The department also has a very strong interest in Health Services research with over a dozen faculty members participating in our Urology Research Outcomes Collaborative (UROC).

Paul H. Lange, MD, who was the former chair of our department, has spent considerable effort to establish the Institute of Prostate Cancer Research (IPCR) which supports research activities of approximately 15 programs at the UW and the Fred Hutchinson Cancer Research Center. Dr. Lange serves as the Director of the IPCR.



Curriculum

We believe the best teaching environments are in daily clinical practice and at clinically oriented conferences. More formal didactic teaching in Nephrolithiasis, Pediatric Urology, Female Pelvic Medicine and Reconstruction, Robotic Surgery, Practice Management, and Resident Wellness help residents prepare for independent practice and their In-Service/American Board of Urology certifying examinations. Conferences are designed to be interactive with input from faculty and residents.

Residents are encouraged to submit abstracts to regional or national meetings such as the national and sectional AUA, Northwest Urological as well as specialty society meetings such as Society of Women in Urology (SWIU), Society of Urologic Oncology (SUO), World Congress of Endourology (WCE), Sexual Medicine Society of North America (SMSNA) and Society of Urodynamics Female pelvic medicine and Urogenital reconstruction (SUFU).