OSS 645
UROLOGICAL SPECIALTY
Selective/Elective Clerkship Rotation Syllabus

OSTEOPATHIC SURGICAL SPECIALTIES
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MSUCOM constantly strives to improve and advance its curriculum through innovation while assuring compliance with current AOA accreditation standards. While major changes are generally instituted at the beginning of each academic year, minor changes may be implemented semester to semester.

Please be mindful of the need to read your syllabi before beginning your rotations.
CLERKSHIP DESCRIPTION

This clerkship provides an overview of the practice of urology including the diagnosis and treatment of common urologic diseases in both outpatient clinics and hospital settings. Although students shall participate in surgery, the learning experience focuses on the differential diagnosis and the non-surgical and surgical treatment of patients with urologic disease. The Urology clerkship shall be a four week elective surgical rotation offered to third and fourth year osteopathic medical students.

Under faculty supervision, the student shall assist in the care of patients with urologic diseases. By participating in patient care, the student shall learn and practice professionalism when interacting with patients, families, colleagues and staff in the clinic and hospital. Although the student will not make entries into the electronic medical record (EMR), the student shall be exposed to medical record keeping with emphasis on functional and legal requirements.

Not only shall the clerkship familiarize the students with the practice of urology, but attending residency trainers shall have the opportunity to interact with potential residency candidates on a daily long term basis. The urology clerkship shall integrate basic science knowledge into the clinical practice of urology with emphasis on osteopathic principles and practices.

UROLOGY CLERKSHIP CLINICAL LEARNING OBJECTIVES

Under clinical faculty supervision, the student shall be exposed to a variety of urologic diseases to gain an understanding of the natural history, pathophysiology, presentation, investigation and treatment management of patients. Didactic materials shall be presented to the medical student during the urology clerkship to ensure adequate preparation for board examinations and later clinical interactions. Although an attempt shall be made to expose the medical student to all of the important urologic diseases, some urologic pathology presents only sporadically and may not be seen clinically during a rotation.

Under faculty supervision, the student shall learn the performance of a comprehensive/targeted Osteopathic history and physical examination of the:

- Abdomen
- Retroperitoneum
- Neuourological axis
- Penis
- Scrotum, including testes and epidydmis
- Prostate and seminal vesicles
  - Digital rectal examination (DRE)
- Female genitalia

Under faculty supervision, the student shall learn the indications, interpretation, complications and limitations of radiologic studies including:

- Intravenous pyelogram (IVP)
- Voiding cystourethrogram (VCUG)
- Ultrasound (US)
- Computerized axial tomography (CAT/CT)
• Magnetic resonance imaging (MRI)
• Lasix renogram
• Flat plate x-ray of the abdomen (KUB)

Under faculty supervision, the student shall learn the indications, imprecation, complications and limitations of laboratory studies including:
  • Prostate specific antigen (PSA)
  • Renal function studies
    o Serum and urine creatinine
  • Semen analysis
  • Urinalysis with microscopic examination

After reviewing the relevant history, physical examination, laboratory and radiologic studies of a patient, the student shall be able to formulate a differential diagnosis and suggest a therapeutic plan for presumed urologic disease.

**SCOPE AND VARIETY OF SURGICAL CASES**

During the four week urology clerkship, the student shall be exposed to a wide variety of urologic surgeries and procedures. Although no student can be involved in every case a list of commonly performed cases has been provided to give the student some sense of the scope and variety of the Michigan State Urology Practice. Michigan State University urology residents frequently work with private practice urologists in the Lansing Community. Under some circumstances, students may have the opportunity to follow senior MSU/GMEI Urology Residents to gain experience in less common procedures.

Common urologic procedures and surgeries performed by MSU surgeons are listed:

  • Cystoscopy (Cysto)
  • Robotic assisted laparoscopy prostatectomy (RALP)
  • Ureteral reimplantation for reflux
  • Transurethral resection of bladder tumor (TURBT)
  • Ureteroscopy with calculi management
  • Extracorporeal shock wave lithotripsy (ESWL)
  • Simple and Radical Nephrectomy
  • Hypospadias repair
  • Cryptorchidism correction and inguinal hernia repair
  • Orchiopexy
  • Circumcision
  • Vasectomy
  • Difficult Foley catheter placement and management
  • Hydrocelectomy
  • Multiple urinary stress incontinence correction procedures
  • Transurethral resection of prostate (TURP)
  • Hydronephrosis correction / UPJ Repair
  • Penile Implant for Impotence (IPP)
GOALS

By the end of the four week clerkship the student shall be able to describe the presentation, pathophysiology, risk factors, signs and symptoms, differential diagnosis, treatment plan, and appropriate explanation to the patient and family members of the common urologic diseases.

COMMON UROLOGIC DISEASES

- Urinary incontinence
  - Urge, stress, overflow, and mixed
- BPH (benign prostatic hyperplasia)
- Prostatitis
- Urinary tract infection (UTI)
- Male infertility
- Sexual and erectile dysfunction
- Urolithiasis / Calculi
- Hematuria
- Varicocele, hydrocele, spermatocele and inguinal hernia
- Urologic malignancy
  - Renal cell carcinoma (RCC)
  - Transitional cell carcinoma (TCC)
  - Prostate (CaP)
  - Testis
  - Penile
- Congenital anomalies
  - Cryptorchidism
  - Hypospadias
  - Ureteral reflux
  - Hydronephrosis
- Urologic Emergencies
  - Acute urinary retention
  - Testicular torsion
  - Priapism
  - Trauma
  - Paraphimosis
Rotation Clinical Requirements

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Submission Method</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attending Evaluation of Rotation</td>
<td>To be appropriately submitted per the instructions at the end of each evaluation form</td>
<td>Final Day of Rotation</td>
</tr>
<tr>
<td><em>the determination of a satisfactory attending evaluation is governed by the University’s Policy for Retention, Promotion, and Graduation</em></td>
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<tr>
<td>Student Evaluation of Rotation</td>
<td>“Evaluate” Link in Kobiljak Schedule (this link will activate on the final Monday of the rotation)</td>
<td>Final Day of Rotation</td>
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</tbody>
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Unsatisfactory Clinical Performance

A student’s clinical performance will be assessed through the Attending Evaluation. A satisfactory Attending Evaluation is required for completion of the clinical requirements for the course.

Unsatisfactory Attending Evaluations are governed by the Policy for Retention, Promotion and Graduation. Evaluations with below average scores in two or more categories defined as rankings of Needs Improvement/Unsatisfactory (on a scale of Needs Improvement/Unsatisfactory-Exceptional) or 3 and below (on a numerical scale of 1-7) will be referred to the Department Chairperson/Instructor of Record for review and grade determination.

Any student with two or more marginal evaluations will be referred to the COSE Clerkship Performance Subcommittee for review.

**IMPORTANT NOTE:** The student will maintain an “Extended” (ET) grade until they have successfully completed all academic and clinical requirements for the course.

“N” Grade and Remediation

http://com.msu.edu/Students/Policies_and_Programs/Remediation_Policy.htm

A student who receives an “N” grade will be required to appear before the Committee on Student Evaluation (COSE) Clerkship Performance Subcommittee for review of the student's overall performance. The Subcommittee may recommend that the student who has received an "N" grade be permitted to remediate the “N” grade (see below) or academically dismissed. If a student is recommended for dismissal, the student will appear before COSE to have their status in MSUCOM determined. COSE will review the student’s academic/clinical performance; determine whether dismissal is appropriate or if the student’s circumstances warrant an opportunity for continuation in the curriculum. The student’s eligibility to remediate will be determined following this COSE decision.

Remediation is the method by which course objectives will be met after receiving an "N" grade. Remediation will be offered only after the student’s eligibility for remediation has been determined.
To successfully remediate an “N” grade, a student must demonstrate mastery of the course objectives. To do this the student may be required to retake the course or enroll and participate in a College directed study course demonstrating successful mastery of the course objectives.

Upon remediation of the “N” grade, the original “N” grade remains on the permanent transcript along with the grade, “P” or “N,” for the remediation experience.

**MSU College of Osteopathic Medicine Standard Policies**

The following are standard MSUCOM policies across all Clerkship rotations.

**ATTENDANCE POLICY**

**Attendance at all scheduled Clerkship activities is mandatory.**

If a student is unable to be present for a scheduled clerkship activity because of extenuating circumstances, the student is required to complete a Clerkship Excused Absence Request form. In all cases except for emergencies or sudden illness, requests for scheduled absences are to be submitted at least 30 days prior to the date(s) of absence. Absences are not approved until the form is completed with all required signatures. Once approved, the student is required to notify their preceptor of their absence within 24 hours. Failure to complete this form or obtain required signatures will result in an unexcused absence from the rotation. Unexcused absences are considered unprofessional behavior and could be noted as a mark of unprofessionalism on the student’s performance evaluation, and may lead to failure of the rotation.

**An absence request for the first or last day of the rotation will be denied.** All absences (excused or unexcused) must be made up as specified on the Excused Absence Form as outlined under the conditions of approval. Makeup experience will be determined by the Director of Medical Education and may include additional clinical day(s) or written assignment(s).

If a student has an emergency or sudden illness they should immediately notify the Director of Medical Education and rotation preceptor. The excused absence request form must be submitted to the Medical Education Office within 24 hours of the original emergency or sudden illness notification.

**STATEMENT OF PROFESSIONALISM**

Principles of professionalism are not rules that specify behaviors, but guidelines that provide direction in identifying appropriate conduct. These principles include the safety and welfare of patients, competence in knowledge and skills, responsibility for consequences of actions, professional communication, confidentiality, and lifelong learning for maintenance of professional skills and judgments. Professionalism and professional ethics are terms that signify certain scholastic, interpersonal and behavioral expectations. Among the characteristics included in this context are the knowledge, competence, demeanor, attitude, appearance, mannerisms, integrity and morals displayed by the student to faculty, peers, patients and colleagues in other health care professions. Students are expected to conduct themselves at all times in a professional manner and to exhibit characteristics of a professional student.

**STUDENTS RIGHTS AND RESPONSIBILITIES**

Each individual student is responsible for their behavior and is expected to maintain standards of academic honesty. Students share the responsibility with faculty for creating an environment that supports academic honesty and principles of professionalism. Proper relationship between faculty and
student are fundamental to the college's function and this should be built on mutual respect and understanding together with shared dedication to the education process. It is a fundamental belief that each student is worthy of trust and that each student has the right to live in an academic environment that is free of injustice caused by dishonesty. While students have an obligation to assist their fellow students in meeting the common goals of their education, students have an equal obligation to maintain the highest standards of personal integrity.

FACULTY RESPONSIBILITIES

It is the responsibility of the college faculty to specify the limits of authorized aid (including but not limited to exams, study aids, internet resources and materials from senior students) in their syllabi, and it is the responsibility of students to honor and adhere to those limits. Course instructors shall inform students at the beginning of the semester of any special criteria of academic honesty pertinent to the class or course.

It is the responsibility of the clinical faculty to provide students with ongoing feedback during rotation upon request. Clinical faculty are generally recommended (though not required) to limit student assigned duty hours from 40 to 60 hours weekly (and not exceeding 60 hours). Both faculty and students are to be treated fairly and professionally in order to maintain a proper working relationship between trainer and trainee.

COURSE GRADES

- **P-Pass** – means that credit is granted and that the student achieved a level of performance judged to be satisfactory according to didactic and clinical performance by the department.
- **N-No Grade** – means that no credit is granted and that the student did not achieve a level of performance judged to be satisfactory according to didactic and clinical performance by the department.
- **ET-Extended Grade** – means that a final grade ("Pass" or "No Grade") cannot be determined due to one or more missing course requirements. Once all course requirements have been completed, received, and processed, the ET grade will be changed to a final grade. An "ET" will NOT remain on a student’s transcript.

ROTATION EVALUATIONS

**Attending/Faculty/Resident Evaluation of Student**

Students are responsible for assuring that his/her clinical supervisor receives the appropriate evaluation form. Forms can be accessed via the “Attending Evaluation” link in the student’s Kobiljak online Clerkship schedule.

Students should assertively seek feedback on his/her performance throughout the course of the clinical rotation. Students should also sit down and discuss the formal evaluation with the clinical supervisor.

Students should keep a copy of the evaluation and leave the original with the Medical Education Office at the clinical training site where that office will review, sign, and forward the completed form to the COM Office of the Registrar. It is important to know that evaluations will not be accepted by the COM Office of the Registrar if submitted by the student. Any evidence of tampering or modification while in the possession of the student will be considered "unprofessional behavior" resulting in an "N" grade and review by the Committee on Student Evaluation (COSE) and/or the College Hearing Committee.

Grades are held until all rotation requirements, including evaluation forms, are received. Be sure you are using the correct form.
**Student Evaluation of Rotation**  
Students will submit their rotation evaluations electronically at the conclusion of every rotation by accessing their online schedule through Kobiljak.

**EXPOSURE INCIDENTS PROTOCOL**

A form has been developed by the University to report exposure incidents. These forms will be on file in your DME's office. You can also access the form at [www.com.msu.edu/AP/clerkship_program/clerkship_documents/exposure.pdf](http://www.com.msu.edu/AP/clerkship_program/clerkship_documents/exposure.pdf). Please make yourself familiar with the procedure and the form.