

Visiting 4th year Medical Students Rotating on GW Urology – Guide for the rotation

Welcome to GW urology! We are excited to have you on the team and we have created this document to help you get the most out of your rotation. By no means is it complete or gospel, but we hope it is a helpful guide.

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Daily expectations

- See any and all patients that you were involved with their surgery before morning rounds and, if you are available, before afternoon rounds.
- In the morning check in with the previous night's on-call intern and/or the urology intern for any overnight updates on patients you are following.
- Examine your patients – skip any exam that will be painful and repeated by the team on rounds (i.e scrotal wounds)
- Be sure items needed on rounds are with you or in the room for rounds (dressing supplies, Catheter Plugs, 10cc syringe for cath removals, suture removal kit)
- Be prepared to present your patient in a concise way during morning rounds (see example below)

Rounds Presentations:

This is not your IM rotation, please be concise, but mention anything you think is relevant. If you can explain why you are bringing up an exam or history point, no one will fault you. ALWAYS give a plan. The only way we can tell how well you grasp what is going on is by what you propose we do with the patient. Don't be afraid to be wrong- this is how you'll learn patient management.

***4th year AIs: In addition to following patients you took to the OR, you need to split up and see any other patients on service that do not have a student following them. This may include new admissions from overnight - don't worry about being ready to fully present such new admissions, but it is helpful if you have seen them and can update the team on subjective points.

Operating room

The chief or senior resident will assign cases.

The best advice for the OR is be actively involved and try to make life easier for the resident and attending you are with. The more you do this, the more time they will have to teach you.

For example: At GW, the anesthesia team expects someone from the surgery team to help them roll the patient to and from the OR. As the med student in a case, you should do this – it gives your resident time to get busy work done instead of guarding the patient in pre-op.

1. Help move the patient to and from the OR table.
 - a. Note that a few anesthesia attendings at GW are picky about the stretcher being in the OR prior to the patient being fully extubated.
 - b. Just ask if it is OK to bring the stretcher in at the end of the case.
2. Put the SCD's on the patient. Some nurses will redo it, but that is their OCD, don't take it personally.
3. If it is a lithotomy case, put the yellowfin stirrups on the bed. Have the resident show you how to do it if you don't know how.
4. Write your name on the whiteboard for the OR nurse
5. If you are in a case and not scrubbed and the resident's pager goes off, look at the page, ask them if you can call it back.
 - a. When you call simply say: " This is ___ returning a page for Dr. ___ of urology. He is scrubbed right now, can I take a message?" Write down info, esp. a call back number. Let us know if it is urgent, otherwise, give the message at the end of the case.
6. For most cases, you will scrub unless told otherwise by the resident. Grab your gloves and an extra gown.
7. For lap/robotic or open cases, ask if you should scrub at the beginning. It will depend on the resident, the attending, the case, etc.
 - a. For prostatectomies, you should give your gloves and gown to the scrub tech and scrub in around the time that the robot is un-docked.
 - b. You can always help close skin in these cases and it is a great time to learn how to suture/ improve your suture skills while actually helping the resident finish the case.

Clinic:

The Chief resident will assign you to clinics throughout the week. It is a good time to meet and work with the attendings that you may not have met in the OR. The residents will help direct you to appropriate clinics and give you more information. Be prompt (i.e. arrive BEFORE clinic starts) and introduce yourselves to the attending and staff if you haven't met them. AI's should try to vary which attending clinics they go to throughout the rotation.

Outpatient Clinic Locations

2150 Pennsylvania Ave(22nd & I streets) ; 2nd Floor (building next to Foggy Bottom Whole Foods). Exit hospital, walk down
2300 M St; Suite 210; Exit hospital, turn left and walk through Washington Circle; continue down 23rd st 2 blocks to M Street; Make a left on M Street and building is on your left
5215 Loughboro Road, Suite 150; Sibley Clinic Location; Not walking distance from GW

Visiting 4th year interviews:

Given the extensive time constraints and costs of travelling multiple times to visit, we do not have visiting students return to interview during our Fall/Winter interview dates. This is not a penalty, on the contrary, we do this for your convenience and to reduce your cost burden. You will be spending 4 weeks with us and rather than bring you back for a single day interview, we will plan to incorporate your formal interview into the visiting rotation.

To that end, below is a list of the full-time faculty and their administrative assistants, you should reach out (to the faculty or assistants) and set up a formal interview time with each during your 4 week rotation. These are usually 10-20 minutes and can be formally scheduled, or can be arranged as a sit down between cases. Either way, be sure that you provide the faculty with a copy of your CV before or at the time of your interview. Additionally, formal clothing is NOT necessary for these interviews, especially between cases or throughout a clinical day.

If you have any questions, or have had trouble reaching a particular attending, please reach out to the chief resident (preferably BEFORE the end of the rotation).

Core faculty:

- Dr Jarrett – Jamella Smith (jmsmith@mfa.gwu.edu)
- Dr. Stein – Jamella Smith (jmsmith@mfa.gwu.edu)
- Dr. Frazier – Erica Lide (elide@mfa.gwu.edu)
- Dr. Mufarrij – Nyesha Newby (nnewby@mfa.gwu.edu)
- Dr. Chiles – Doretta Coppedge (dcoppedge@mfa.gwu.edu)
- Dr. Whalen – Sheloundus Hale (shhale@mfa.gwu.edu)
- Dr. Andrawis – Sheloundus Hale (shhale@mfa.gwu.edu)
- Dr. Phillips – Carleen McCarley (cmccarley@mfa.gwu.edu)

Weekends:

Plan to round with the team one day of the weekend. Discuss with the chief resident regarding the weekend plan. Al's should be divided up such that students are present each day of the weekend. Arrive before rounds and help the intern/resident get prepared for rounds.

Education:

Good references for the rotation: Many are likely available through your institutional library.

While the **Campbell- Walsh** text is the “classic” urologic reference, and something that anyone going into the field should read through at least once- it comes as a 4 textbook series and is usually too much to tackle during your short rotation .

Smith & Tanagho’s General Urology- Easy concise text that reviews the etiology, pathogenesis, clinical findings, differential diagnoses, and medical and surgical treatment of all major urologic conditions

Pocket Guide to Urology- Physician made pocket guide- fits in white coat pocket; good reference/review- not as extensive as other texts

5 Minute Urology Consult- As described in the title, provides quick 2 page snippets with the most clinically relevant information for all urologic conditions

There will be many education opportunities on your rotation, both assigned/moderated and self-directed. Whether or not you see yourself pursuing urology as a career, take this time to learn and experience as much as you can- this may be your only chance to participate in in the surgeries and procedures urologists spend their careers providing to patients.

While on service, you will attend Wednesday morning conference. This starts with an indications conference to review upcoming cases; followed by a grand rounds presentation (combination of visiting speakers, resident talks, M&M, GU Oncology Case conference). After grand rounds concludes, there are resident didactics that you will participate in.

Separately, we will plan on having you complete the readings and activities from the American Urologic Association Medical Student Curriculum. This curriculum was developed to provide the essential knowledge and skills every medical student should know about the field and its diseases before graduating. You will be provided the reading schedule. The plan is for weekly sessions to review the assigned topic with a faculty member or upper level resident. The sessions times will be announced the week of to allow you time to read and prepare.

AUA Medical Student Curriculum link:

<http://www.auanet.org/education/educational-programs/medical-student-education>

This site also includes additional resources, such as videos of common urologic bedside and operative procedures.

Other things:

4th year AI's: you will give a presentation at Wednesday am grand rounds toward the end of your rotation. The amount of time will depend on the number of students that month (i.e. 60 mins/# of students). Talk with the residents about topics – we can help!

-Code to supply room on 5 north: 4911

-Code to med room on 5 north (syringes) : 1225