

SAUDI BOARD
OF
UROLOGY

*Booklet
of
Information*



1421/2000

Saudi Council For Health Specialties

Saudi Board Of Surgery
Urology Committee

Chairman

Dr. Salah Al Fagih

Members:

Dr. Nassir Al Jawiny

Dr. Hisham Mosely

Dr. Adel Al Dayel

Er. Mohammed Abu Melha

SAUDI BOARD OF **UROLOGY**

Training program

This is a structured program for training in Urology. It encompasses education in basic sciences, training in cognitive and technical skills, development of clinical knowledge and maturity and acquisition of surgical judgment.

To learn in depth the fundamentals for residents to learn in depth the fundamentals of basic sciences as applied to clinical Urology. These include elements of wound healing homeostasis, haematologic disorders, oncology, shock, circulatory physiology, surgical microbiology, basis of genitourinary surgery, surgical endocrinology, surgical nutrition, fluid and electrolyte balance, metabolic response to injury, applied surgical anatomy and genitourinary pathology.

Objectives:

a) General Objectives:

1. To train and graduate competent, knowledge Urologists capable of functioning independently.
2. To provide an educational environment that will promote the standard of delivery of urology.

b) Specific Objectives:

1. At the end of training, the candidate should have the following capabilities and skills.
2. A sound knowledge in the principles of urology.
3. Perform thorough and suitably oriented history and physical examination.
4. Formulate a reasonable and comprehensive differential diagnosis and recognize common disorders in urology as well as many rare ones, especially those that are amenable to treatment.
5. Recognize emergency situations and manage them effectively.
6. Select relevant investigations logically and conservatively, and interpret their results accurately.
7. Manage common problems in urology and possess a

- knowledge of management alternatives.
8. Perform many surgical, diagnostic and therapeutic procedures and operations especially those used in the management of emergencies and common urological problems.
 9. Communicate well with patients, their relatives and colleagues.
 10. Keep orderly and informative medical records.
 11. Educate and update himself and others in the field of urology.
 12. Advise colleagues from other specialties with regard to the problems related to urology.
 13. Possess high ethical and moral standards.

Admission Requirements:

To be accepted in the training program, the resident has to fulfill the following requirements:

1. A Medical degree (M.B.B.S) or equivalent from a recognized university.
2. Successful completion of rotating internship for 12 months.
3. Passing an admission examination and an interviews.
4. Provision of recommendation letters from two consultants recommending the candidate as suitable for training in urology.
5. Provision of a letter of sponsorship approving that the candidate can join full time training for the whole period of the program (5 years), with financial commitment from approved authorities.
6. Signature of an obligation to abide by the rules and regulations of the training program and the Saudi Board Urology.
7. Registration as a trainee at the Saudi Council for Health Specialties.

Training Requirements:

1. Training is a full-time commitment. Residents shall be enrolled in continuous full time training for the whole period of the program.
2. Training is to be conducted in institutions accredited for training by the Saudi Board of Urology.
3. Training shall be comprehensive and includes inpatient, ambulatory and emergency room care.
4. Residents shall be actively involved in patient care with gradual progression of responsibility.

5. Resident shall abide by the training regulations and obligations as set by the Saudi Board of Urology.

Structure of Training Program:

This is a post-graduate five years program of structured training in Urology which includes a minimum of 24 months in general surgery, introduction to urology and other urology related specialties. The remaining 36 months shall be allocated for rotations in urology including various urological subspecialties:

1) Junior Urologic Residency (36 Months, R1- R3).

This includes 36 months training in the following.

- 12 months in General Surgery.
- 3 months in Surgical intensive Care Unit.
- 3 months in radiology.
- 18 months in Urology.

2) Senior Urologic Residency (24 months, R4 & R5)

The Final two years are spent in various urological subspecialties where the residents will be responsible for managing emergency and elective admissions, organizing educational activities, and supervising Junior colleagues. Senior residents shall acquire gradual independency during the final two years.

Responsibilities:

1. Residents shall be responsible for inpatient care that includes clerking and following admitted patients, with completion of medical history and physical examination, investigation requests and results, plan of management, preoperative assessment, preparation consent, operative records, postoperative orders and progress notes, discharge summaries and other relevant.
2. Residents shall attend the urologic outpatient clinics at least once weekly and participate in management plans of patients under supervision of senior staff members.
3. Residents shall attend and participate in the operative sessions and other urological procedure conducted in the operating rooms, outpatient or day surgery units.
4. Trainees shall maintain healthy relation with patients, relatives, colleagues and hospital staff.
5. Trainees shall maintain confidentiality and ethics of the profession.

Content of Training:

Upon completion of the training program, the resident should have gained sound and solid knowledge in the principles of urology and the pathophysiology of urogenital illnesses. The resident should have gained enough clinical and technical experience to practice as a safe and competent urologist especially in the management of emergency and urgent urologic diseases. The training should include:

a) Clinical Activities:

The residents are required to attend and participate in various clinical activities of the department. The scope of clinical training include various diagnostic procedures in urology, management of urogenital trauma, emergency urology, adult and pediatric urology, the stone management, neurourology and urodynamics, urooncology, andrology male infertility and uroendocrinology.

b) Academic Activates:

Residents are required to attend and participate in the academic and clinical activities of the department, such as ward rounds, grand rounds, journal clubs, surgical pathology, radiology, morbidity and mortality studies and other activities. Attendance and participation should not be less than 75% of activities within any training rotation/period.

c) Operative Procedures and skills:

Upon Completion of the training program the resident should have performed by himself (under appropriate supervision) or assisted senior staff in at least 654 urologic operative procedures.

The detail of required operative procedures and skills are listed in the Training Program Manual.

Log Book

The resident is required to keep a log book wherein all activities and skills performed and learned during the training program are recorded. The activities should be dated and categorized to the period/rotation of training and to whether it has been performed by the resident himself or as an assistant or participant. Each activity registered in the log book should be countersigned by the supervisor of training, and an evaluation of rotation to be countersigned by the program Director when deemed complete.

Contents of Log Book include:

1. Operative procedures and technical skills acquired during the training period.
2. Major invasive and non-invasive diagnostic monitoring procedures performed or learned, such as insertion of CVP line, interventional urological procedures, ESWL...etc.
3. Participation and attendance of symposia, conferences, workshops and training courses.
4. Twenty urological case summary.

d) Research activity:

Residents should participate and conduct a clinical research project during the training program under the guidance and supervision of training supervisors.

Vacations, holidays and on-call:

1. Residents are entitled for four weeks vacation annually and a maximum of 10 days for both Eid holidays and emergency training.
2. Sick and maternity leaves shall be compensated for during or at the end of training.
3. On call duty shall be at least one every three to four nights (minimum of 7 calls per month, 24 hours per call except when working in emergency room).
4. residents are expected to perform regular duty the day after call and ensure continuity of care for their patients.

Evaluation:

A) End of rotation evaluation:

At the end of each training rotation, the supervising consultant/team shall provide the training committee with a written evaluation of the residents performance during that period/rotation. Unsatisfactory or poor evaluation necessitates repeating that rotation.

b) In-training examinations:

Programs shall incorporate annual written examination as part of the evaluation process of residents, and clinical/oral examinations at least for senior residents.

c) Annual overall evaluation:

This includes:

- 1) Summation of end of rotation evaluation for the year (50% of total mark).
- 2) Result of annual in-training examination (50% of total mark).

Promotion:

- 1) Annual promotion (e.g. from R1 to R2) depends on annual overall evaluation.
- 2) Promotion to senior urologic residency depends on annual overall evaluation and passing the first board examination.

Board Examinations

a) First board examination:

1. This examination is held at least once per year in one or more of the training centers.
2. Examination will focus on applied anatomy, physiology, biochemistry, surgical pathology, immunology, pharmacology and principles of surgery.
3. Candidates are allowed to sit for this examination after successful completion of the first year of training.
4. Passing the first board examination is a pre-requisite for promotion to the senior urologic residency.
5. Candidates are allowed a total of three attempts to pass the first board examination. Those failing the third attempt will be dismissed from the program.

b) Final board examination:

This examination is given to candidates after successful completion of training, as evidenced by an acceptable final in-training evaluation with submission of a completed log book including twenty urology case summaries.

Examination is held at least once per year in one or more of the training centers. Candidates are allowed a total of five attempts to pass this examination within a period of five years after completion of training.

The final examination consists of two parts:

- 1) written part: Designed to evaluate knowledge and clinical judgment. Only successful candidates in this part are allowed to sit the clinical/oral part.
- 2) Clinical/oral part: designed to test clinical skills/abilities and judgment in the field of urology.

Certification:

Candidates passing the final board examination are awarded the Specialty Certificate; “the Saudi Board of Urology”.