

**UROLOGY FELLOWSHIP
PROGRAMME IN NTFGH**

Components	Information
1 Division/ Department	Department of Urology, Ng Teng Fong General Hospital (NTFGH), NUHS
2 Title of Programme	NUHS Cluster Clinical Fellowship For Urology
3 Relevant Registrations / Target Audience / Pre-requisite / eligibility requirement(s)	<ul style="list-style-type: none"> • Graduate already working in urology services in his/her country with Basic Medical Degree preferably registrable with the Singapore Medical Council; • Postgraduate (either in final year training or not more than 1-year post specialist training in his/her country)
4 Learning Objectives	<p>To participate in all aspects of urology patient care covering outpatient, inpatient, office-based, day surgery and major operating room activities;</p> <ul style="list-style-type: none"> • To attain fundamental skill and knowledge in diagnostic evaluation (TRUS biopsy, urodynamics), basic and advanced endourological procedures and ESWL, and assist in major open urological surgeries including renal transplantation; • To partake of the academic activities and training programme of the department, including topic & journal presentations, attending Continuing Medical Education (CME) and Continuing Professional Development (CPD) programmes of the specialty society; • To undertake a research project of trainee's choice during the posting; • To increase exposure, proficiency and skill in a sub-specialty of the clinical fellow in the last 3 months of his posting.
5 Course/Training Syllabus	<p>Sites of Training:</p> <ul style="list-style-type: none"> • National University Hospital (NUH) • Ng Teng Fong General Hospital (NTFGH) <p>Duration of Frequency/ Rotation of Training:</p> <ul style="list-style-type: none"> • 6 or 12 months of equal rotation postings equally divided between NUH and NTFGH campus. • 50% time at National University Hospital (NUH) • 50 % time at Ng Teng Fong General Hospital (NTFGH) <p>An option of more time and exposure to a particular skill set in last 3 months (based on performance and at the assessment from supervisors). In essence they will be only working in the NUHS Urology cluster under direct supervision of the NUH SMC approved supervisor at all times.</p>

<p>6 Training Method</p>	<ul style="list-style-type: none"> • Outpatient <p>3 clinic sessions per week giving broad exposure to general urological conditions.</p> <ul style="list-style-type: none"> • Clinic procedure <p>3 sessions per week performing flexible cystoscopy and transrectal ultrasound biopsy of the prostate, as well as urodynamics and shockwave lithotripsy</p> <ul style="list-style-type: none"> • Operative surgery <p>Clinical Fellows are expected to participate in surgery in both the Day surgery and Major operating theatres, which are conducted daily. They are recommended to participate in specific operations as listed in Appendix 1.</p> <p>Academic curriculum</p> <p>Clinical Fellows are expected to participate fully in the academic activities of the department, including:</p> <ul style="list-style-type: none"> • Postoperative, morbidity and mortality rounds (weekly) <p>The list of all operative procedures performed in the preceding week will be discussed. Clinical Fellows are expected to prepare short presentations incorporating literature reviews for interesting cases that are selected.</p> <ul style="list-style-type: none"> • Radiology rounds (weekly) <p>Interesting radiological investigations collected over the previous week will be discussed with the input of our radiology colleagues. Clinical Fellows are expected to present and discuss their own cases.</p> <ul style="list-style-type: none"> • Uro pathology rounds (monthly) <p>Interesting pathological conditions will be discussed with the input from our pathology colleagues.</p> <ul style="list-style-type: none"> • Journal club and scientific research meeting <p>Clinical Fellows will be expected to present and critique papers from relevant journals as selected by the department. They will also present updates on their research activities.</p> <p>There will be night duty and weekend calls assigned to clinical fellow. Each clinical fellow shall follow the duty roster of the assigned SMC-approved supervisor when he/she is rotated to respective institutions, NUH and NTFGH. When the SMC-approved on-site supervisor of the institution is placed under night duty roster, the clinical fellow shall follow his schedule as part of the supervision. The on-site supervisors at NUH and NTFGH will provide feedbacks to the primary SMC-approved supervisor from Department of Urology, NUH, and likewise the primary SMC-approved supervisor from NTFGH.</p>
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<p>7 Assessment and Evaluation / Assessment approaches</p>	<p>The faculty is divided into 3 consultant led teams for daily operation of the department. The clinical fellow will be assigned SMC-approved supervisor from NUH who is of Principal Resident Physician and above, and he/she is responsible for the overall supervision and learning and clinical activities of the clinical fellow in each campus.</p> <p>The clinical fellow will meet his/her SMC-approved supervisor at the start of the programme for orientation and discussion of goals and objectives. Periodic review, at a time interval to be set by the SMC-approved supervisor, will be conducted, including a logbook review or research project update, etc. Formal assessment and feedback documentation will be done by SMC-approved supervisor at the primary site, with solicited feedbacks from 1 SMC-approved supervisor from secondary site at the 3rd, 6th, 9th and end of the clinical fellowship period.</p> <p>The SMC-approved supervisors at the Department of Urology, NUH will be responsible for the supervision and training of the clinical fellows during the programme duration. Where clinical rotations at NUH and NTFGH respectively, the clinical fellow will be supervised by SMC approved supervisor on site and the feedbacks on performance will be solicited by the primary NUH SMC-approved supervisor, Department of Urology, with NTFGH.</p> <p>The trainee should demonstrate competency in the following groups of surgical procedures:</p> <ol style="list-style-type: none"> 1) Common penile surgery, including circumcision, laser vaporization of warts and meatotomy 2) Common testicular and scrotal surgery, including excision of hydrocoele and epididymal cyst, orchidectomy and orchidopexy 3) Common open bladder surgery, including cystolithotomy and excision of bladder diverticulum, and bladder repair 4) Common open ureteric surgery, including ureteric repair, ureteroneocystostomy and ureterolithotomy 5) Common renal surgery, including excision of renal cysts, open nephrectomy and nephroureterectomy and pyeloplasty 6) Transurethral surgery of the prostate and bladder. 7) Rigid ureteroscopy and cystoscopy, with associated procedures, including cystoscopic biopsy, ureteric cannulation, and direct visualized internal urethrotomy (DVIU) 8) Rigid ureteroscopy, with associated procedures, including ureterolithotripsy and stenting 9) Percutaneous nephrolithotomy and associated procedures including ultrasound and pneumatic lithotripsy, endopyelotomy, and endopyeloplasty <p>In addition, the trainee should be able to understand and explain the principles and concepts in some advanced urological operations including:</p> <ol style="list-style-type: none"> 1) Advanced penile surgery, including correction of penile curvatures, penile amputations and penile prosthesis insertion 2) Advanced urethral surgery, including repair of urethral injuries, urethroplasty and artificial urinary sphincter insertion 3) Advanced open urological surgery, including radical prostatectomy and radical cystoprostatectomy, with reconstruction such as an ileal conduit and orthotopic bladder substitution. 4) Renal transplant surgery 5) Robotic surgery
<p>8 Criteria for Early Termination</p>	<p>In an unlikely event that the clinical fellow does not complete fellowship programme or his fellowship is terminated by NUHS due to medical negligence he or she will not be entitled to receive the certificate of clinical fellowship.</p>
<p>9 Number of Clinical Fellow to be accepted at any one time</p>	<p>Maximum intake up to 2 per year.</p>