

TULANE UROLOGY CRITERIA FOR INDEPENDENT PERFORMANCE OF SIMPLE UROLOGIC PROCEDURES

The Tulane Urology methodology to credential residents to safely perform the following procedures in the outpatient/inpatient setting:

The residents are given stickers that are affixed to their ID badges. Only those residents who have these stickers are allowed to perform these procedures independently.

Even with the appropriate stickers, the residents are fully aware that in many cases where the procedures are difficult or cannot be accomplished, they are to promptly call the on-call faculty member for assistance. Additionally, the executive chief resident is available for advice as well.

A log of case numbers performed by the resident involved is maintained in the Residency Coordinator's office.

Credentialing criteria

1) Foley catheter placement

This is a basic procedure, fundamental to the practice of Urology. All URO-1 level residents are taught this basic procedure. Most of our surgical procedures require the placement of a Foley catheter. Therefore, during the first month or two of their Urology resident training, they are taught and supervised on their placement technique of the Foley catheter. This includes on the challenging cases of patients who have urethral strictures who require dilation of the urethra prior to Foley placement. These basic and advanced Foley catheter placements are under the supervision of faculty and chief residents, and are used as the baseline for getting the Foley catheter placement sticker.

Urology residents from PGY-1 to PGY-5 levels are given stickers for this.

2) Incision and drainage

All Tulane Urology residents are taught the indications, technique, and art of basic incision and drainage by bedside. These indications are for drainage for superficial abscesses in the external genitalia. Only small lesions, requiring no anesthesia, necessitate this procedure. Any further or more extensive I&D is done in the OR surgical suite under anesthesia. The methodology to teach and train take place during the residents' rotations in the first few months of their URO-1 training, where they are supervised on this task and their ability to follow through.

Thus, before the I&D sticker can be given, the residents are personally supervised by the faculty on surgical techniques of I&D on minor abscesses and hematomas.

PGY-2 to PGY-5 levels are given stickers for this procedure.

3) Cystoscopy

This is, once again, the basis of urologic practice, and within the first three months of the URO-1 training, the resident performs cystoscopy on patients under anesthesia. Since the patient is under anesthesia, we find that this is an ideal platform for instructions on the safe use of the flexible and rigid cystoscopes.

Thus, prior to getting a cystoscopy sticker, the faculty has supervised and cleared the credentialing of these residents for basic cystoscopy skill and procedures such as the removal of ureteral stents, etc.

PGY-1 to PGY-5 levels are given stickers for cystoscopy.

4) Suprapubic catheter placement (SP tube)

This procedure is also performed in the OR under faculty supervision. This is where we instruct and train residents to perform suprapubic cystostomy urine drainage under controlled anesthesia. Once the resident has mastered this skill, the resident can obtain stickers based on the cases they have performed or assisted with.

URO-1 level residents are not given the suprapubic catheter placement privilege. Only the senior residents at the PGY-2 to PGY-5 levels are given stickers for suprapubic placement.

In summary, stickers are only given to residents who have performed hands-on procedures under faculty supervision, and these are part of the assigned procedures done as per urologic curriculum. This list is housed in the residency program coordinator's office.

Signature

Print

Date

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Date