

PROGRAM

Curriculum M.Ch Urology

(Revised with effect from 2016-2017 onwards)

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Goals

- 1. To train doctors in the scientific and clinical aspects of the specialty of Urology.
- 2. To empower them to practice the specialty of Urology with competence, care, and compassion thereby delivering the highest standard of Urologic care to the community.
- 3. To empower the trainee in academic and research aspects of Urology; to empower the trainee to become an effective teacher and communicator in Urology.
- 4. To establish the required training methods evaluation methodology, and qualifying norms for the successful completion of the M.Ch. course in Urology.

Note:

Urology shall at the present time include the areas of General Urology, Endourology, Paediatric Urology, Urologic Oncology, Reconstructive Urology, Genitourinary Trauma, Female Urology, Neuro –urology and Incontinence, Andrology & Reproductive Urology, Renal Transplantation, Laparoscope Urology and such other fields as may form part of the specialty of Urology in its future evolution.

Statement of Objectives

- 1. To provide the candidates with the current, latest, scientific and evidence based *Knowledge* pertaining to the above mentioned areas in Urology.
- 2. To impart the *Skills* to undertake independent clinical practice in the above areas of Urology and to provide opportunities to the practice of these skills in a graded manner and under suitable supervision to a point where the candidates is capable of practicing these skills independently.
- 3. To include in the candidate an *Attitude* of responsibility, accountability and caring; to empower the candidate with a good and sound foundation of *Ethical Values* in the practice of urology; and to develop in the candidate the ability to effective Communicative with patients, peers, superiors, and the community in the discharge of his/her clinical role.

Program Ourcomes

PO1: Expertise in the scientific and clinical aspects of the specialty of Urology essential in the practice of the subject in the community.

PO2: Competency to practice the specialty of Urology with care and compassion thereby delivering the highest standard of Urologic care to the community.

PO3: Skill in academic and research aspects of Urology

PO4: Skill to be an effective teacher and communicator in Urology.

Program Specific Outcomes

PSO1: Acquisition of current, latest, scientific and evidence based knowledge necessary for attaining programme outcomes.

PSO2: Skill to undertake independent clinical practice.

PSO3: Correct attitude of responsibility, accountability and caring.

PSO4: Foundation of ethical values in the practice of Urology.

PSO5: Competency to communicate effectively with patients, peers, colleagues, and the community in the discharge of his/her clinical role.

Course Content

- 1. The predominant course related activity would involved working in the hospital OPD's, Wards, Operation Theaters, and affiliated Laboratories, Diagnostic facilities etc.
- 2. Didactic teaching activities will include Lectures, Seminars, Clinical Presentations, Journal Clubs, etc.
- 3. Practical teaching and learning activities will involve Case Presentations, Demonstrations, Imaging and Diagnostic Procedures and such other related activities.
- 4. Additional teaching and learning activities will include:
 - a) Visits to other Institutions of excellence.
 - b) Visits to Laboratories, Diagnostic Facilities, Rehabilitation units, Community based units and such other areas as may be deemed cecessary from time to time.
 - c) Attending Continuing Education Programmes, Seminars, Conferences, Workshop etc., in furtherance of the course objectives.
 - d) Presenting Papers, Topics, Lectures, Posters, and similar activities to peer groups in furtherance of the learning and objectives of the course.

The following is a general list of topics to be covered during the course. This list is only representative, and any topic relevant to the science of Urology may be included. Teaching, learning evaluation will, therefore, not be confined to, shall include the topics listed below.

Basic Sciences as Applied to urology

- 1. Surgical Anatomy of Genito-urinary Tract and Retroperitoneum
- 2. Normal Renal Physiology
- 3. Renal Biochemistry Acid base and fluid regulation
- 4. Renal Endocrinology
- 5. Physiology & Pharmacology of Renal Pelvis & Ureter
- 6. Physiology of Urinary Bladder
- 7. Genetic determinants of Urologic Diseases
- 8. Pathophysiology of Urinary Tract Obstruction

- a) Upper Urinary Tract
- b) Lower Urinary Tract
- 9. Embryology & Normal Development of the Genito urinary tract.
- 10. Embryology of Congenital Anomalies of the G.U. Tract
 - a. Vesico Ureter Reflux, Mega Ureter & Ureteral Re-implantation
 - b. Ectopic Ureter & Ureterocoele
 - c. Exstrophy of the Bladder, Epispadias & other Bladder Anomalies
 - d. Cloacal Malformations.
 - e. Prune Belly Syndrome
 - f. Posterior Urethral Values & other Urethral Anomalies
 - g. Hypospadias
 - h. Congenital Anomalies of Testes
- 11. Renal Function in Foetus & Neonates
- 12. Renal Dysplasia & Cystic disease of Kidney
- 13. Disorders of Sexual Differentiation
- 14. Normal and abnormal spermatogenesis
- 15. Urologic Examination & Diagnostic Techniques Imaging of the G.U. Tract
 - a. Conventional Radiography of Urogenital system and Retro peritoneal area
 - b. Urologic Ultrasonography
 - c. Excretory & Retrograde Pyelography
 - d. Conventional Lower Urinary Tract Radiography
 - e. Ct, MRI, Angiography and other Imaging modalities
- 16. Radionuclide studies in Urology
- 17. Pathologic Techniques in Urology
 - a) Urine Analysis
 - b) Urinary Cytology
 - c) Flow Cytometry
 - d) Fine Needle Aspiration Cytology (FNAC)
 - e) Needle Biopsy
 - f) Immunohistochemistry and other relevant Special Techniques
- 18. Urinary tract changes in Pregnancy and Puerperium
- 19. Overview of Genital and Urinary Tract Pathogens

Infections & Inflammations of G.U. Tract

- 1. Host Defence Mechanisms against Urinary Tract Infections
- 2. Bacterial infections of the Urinary tract Diagnosis & Management
- 3. Urinary Tract Infections in Pregnancy Screening, Evaluation & Management
- 4. Management of Acute & Chronic Pyelonephritis, Emphysematous Pyelonephritis
- 5. Approach to Management of Urinary Tract Infection in Infants & Children
- 6. Diagnosis & Management of Prostatitis & Related disorders
- 7. Diagnosis & Management of Sexually transmitted diseases
- 8. Diagnosis & Management of Cutaneous diseases of External Genitalia
- 9. Diagnosis & Management of Parasitic diseases of G.U. Tarct
- 10. Diagnosis & Management of Fungal infections of Urinary Tract

- 11. Diagnosis & Management of Genito Urinary Tuberculosis
- 12. Management of Fournier's Gangrene and Other Soft Tissue Infections
- 13. Diagnosis & Management of Interstitial Cystitis & Related Syndromes
- 14. Antimicrobial agents used in treatment of G.U. Tract Infections
- 15. Urologic manifestations of HIV infections, AIDS and related syndromes

Genito - Urinary Trauma

- 1. Diagnosis & Management in Blunt Renal Trauma
- 2. Diagnosis & Management in Penetrating Renal Trauma
- 3. Diagnosis & Management of Renovascular injuries
- 4. Diagnosis & Management of Iatrogenic and Intraoperative Ureteral injuries
- 5. Diagnosis & Management of Bladder injuries
- 6. Diagnosis & Management of Urethral injuries
- 7. Diagnosis & Management of Penile injuries
- 8. Diagnosis & Management of Scrotal and Testicualr trauma
- 9. Diagnosis & Management of Retroperitoneal Haematoma

Adrenal Disorders

- 1. Evaluation and Management of Adrenal Cortical Disorders
- 2. Evaluation and Management of Adrenal Medullary Disorders
- 3. Evaluation and Management of Adrenal Carcinoma

Renal Failure & Renal Replacement Therapy

- 1. Aetiology of Acute and Chronic Renal Failure
- 2. Management of Acute Renal Failure
- 3. Management of Chronic Renal Failure
- 4. Complications of Renal Failure and their Management
- 5. Principles of Dialysis therapy Haemodialysis, Peritoneal Dialysis
- 6. Immunological considerations in Renal Transplantation
- 7. Live Donor evaluation for Renal Transplantation
- 8. cadaver Donor evaluation for Renal Transplantation

Urinary Calculus Disease

- 1. Etiopathogenesis of Urinary Tract Calculi
 - a. Theories of Urolithiasis
 - b. Endocrine factors in the development of Urolithiasis
 - c. Role of Modulators
 - d. Types of composition of Urinary Calculi
 - e. Role of Stone Analysis and types of stone analysis
- 2. Dietary and Medical Management of Calculus Disease

- 3. Principles and practice of Extracorporeal Shock Wave Lithotripsy (ESWL)
 - a. Evolution of ESWL
 - b. Types of Lithotriptors
 - c. Indications of ESWL
 - d. Post ESWL management
 - e. Complications of ESWL and followup

Benign Prostatic Hyperplasia

- 1. Pathophysiology of Benign Prostatic Hyperplasia
- 2. Clinical evaluation of Benign Prostatic Hyperplasia
- 3. Medical management of Benign Prostatic Hyperplasia
- 4. Minimally Invasive Therapy in Benign Prostatic Hyperplasia

Urologic Oncology

- 1. Overview of Cancer Biology and Principles of Urologic Oncology
- 2. Paediatric Urogenital tumours
- 3. Benign & Malignant tumours of the GU tract in adults
 - a. Renal tumous
 - b. Upper tract transitional cell tumours
 - c. Bladder tumours
 - d. Tumours of the prostate
 - e. Tumours of the Seminal Vesicles
 - f. Tumours of the Urethra
 - g. Tumours of the penis
 - h. Tumours of the Penile & Scrotal Skin
 - i. Testicular tumours
 - j. Extragonadal germ cell tumours
 - k. Restroperitoneal tumours
 - 1. Metastatic tumours of the G.U. Tract
- 4. Radiotherapy in Genitourinary tumours
- 5. Chemotherapy of Genitourinary tumours
- 6. Genitourinary tumours
- 7. Immunotherapy of Genitourinary tumours
- 8. Gene therapy in Genitourinary tumours
- 9. Other advanced therapeutic modalities in Genitourinary tumours

Foetal & Perinatal Urology

1.Prenatal & Postnatal Urologic diagnosis and management

2. Neonatal & Perinatal Emergencies - Diagnosis & Management

Paediatric Urology

- 1. Cryptorchidism and Ectopic Testes
 - a. Etiopathogenesis
 - b. Diagnosis and Imaging
 - c. Hormone therapy
 - d. Surgical Management
- 2. Vesico ureteric reflux
 - a. Primary and Secondary Vesico ureteric reflux
 - b. Evaluation and Principles of Management of Primary Vesico ureteric reflux
 - c. Urinary Tract Infections Role of chemoprophylaxis
 - d. Renal and Bladder complications in Vesico ureteric reflux
- 3. Megaureter
 - a. Primary obstructive Megaureter Diagnosis & Management
 - b. Principles of Ureteric Reimplantation
- 4. Ectopic Ureter and ureterocoele Diagnosis & Management
- 5. Exstrophy Epispadias complex Principles of Management
- 6. Cloacal Malformations Principles of Management
- 7. Diagnosis & Management of Prune Belly Syndrome
- 8. Posterior Urethral Valves & other Urethral Anomalies
 - a. Diagnosis
 - b. Complications
 - c. Principles of Management

Andrology

- 1. Normal Physiology of Male Reproduction
- 2. Diagnosis Approach in Male Infertility
- 3. Varicocoeles Diagnosis & Management
- 4. Endocrine & Medical Management of Male Infertility
- 5. Surgical Management of Male Infertility
- 6. Overview of Assisted Reproduction Techniques
- 7. Physiology & Pharmacology of Penile Erection and Pathophysiology of Erectile Dysfunction
- 8. Diagnistic tests in Erectile Dysfunction
- 9. Medical and other therapies in Erectile Dysfunction
- 10. Peyronies Disesse
- 11. Penile Prosthesis implantation Types, indications and complications
- 12. Phallic reconstruction following trauma

Neuro - Urology

1. Neurophysiology and Pharmacology of Micturition and Continence

- 2. Pathophysiology of Neurovesical dysfunction
 - a. CNS Disorders
 - b. Spinal trauma
 - c. Spinal dysraphism
 - d. Pelvic surgery
 - e. Diabetes
- 3. Urodynamics & its applications in Incontinence and Voiding dysfunction
 - a. Uroflowmetry
 - b. Cystometrogram
 - c. Urethral Pressure Profile & EMG
 - d. Videourodynamics
 - e. Ambulatory Urodynamics
- 4. Medical Management of Urinary Incontinence.
- 5. Female Urinary Incontinence Eavluation & Management
 - a. Urge Incontinence
 - b. Stress Incotinence
 - c. Mixed Incontinence
- 6. Implantation of Artificial Sphincter in men and women
- 7. Reconstruction of Dysfunction Urinary Tract

Female Urology

- 1. Management of Urologic conditions in Pregnancy
- 2. Management of Urogenital Fistulae in women
- 3. Gynaecological tumours & the Female Urinary Tract
- 4. Female Lower Urinary Tract Reconstruction
- 5. Urinary incontinence in females
- 6. Treatment of Stress Incontinence
- 7. Surgery for Incontinence
- 8. Stress Incontinence and Cystocoele
- 9. Posterior Vaginal Wall Prolapse
- 10. Enterocoele
- 11. Uterine Prolapse
- 12. Urethral Diverticulum
- 13. Vesico Vaginal Fistula
- 14. Injuries (latrogenic) during Gynaecologic procedures and management
- 15. Pathology affecting primarily Genital organs in females causing secondary effects on urinary organs and management

Renal Transplantation

- 1. Immunological considerations in renal Transplantation
- 2. Live Donor evaluation for Renal Transplantation
- 3. Recipient evaluation for Renal Transplatation
- 4. Complications of Renal Transplantation and their management

- a. Medical
- b. Surgical
- 5. Transplantation in Special Groups
 - a. Patients with Neuropathic Bladder / Urinary Diversions
 - b. Paediatric patients
 - c. Previously transplanted patients
 - d. Multiple Organ Recipients
- 6. Cadaver Donor evaluation for Renal Transplantation
 - a. Evaluation of Cadaver Donor
 - b. Cadaver Donor Management
 - c. Certification of Brain Death
 - d. Organ retrieval, storage and transport
- 7. Legal and Ethical aspects of Organ Transplantation The transplantation of Human organs Act 1994 & Rules 1995

Reconstructive Urology

- 1. Principles of Ureteral Reconstruction
- 2. Principles of Bladder Reconstruction
- 3. Principles of Urethral Reconstruction
- 4. Principles of Bladder Substitution procedures
- 5. Principles governing use of Intestinal Segments in Urological Reconstruction
- 6. Autologus tissue transfer options in Urology
- 7. Principles of Urinary Diversion & Undiversion
- 8. Complications of Urinary Diversion

Endo Urology

- 1. Endoscopic anatomy of the Upper and Lower Urinary Tract
- 2. Physics governing endourologic equipment
- 3. Basic technical aspects of Endourologic equipment
 - a. Cystoscope
 - b. Resectoscope
 - c. Ureterorenoscope
 - d. Nephroscope
 - e. Laproscope
 - f. Associated accessories
- 4. Anaesthetic consideration in Endourologic surgery

Endourologic procedures – Indications, Performance, and Complications

- a. Lower Urinary Tract Endoscope
- b. Transsurethral Resection of Prostate
- c. Transurethral Resection of Bladder Tumours
- d. Ureterorenoscopy

- e. Percutaneous Nephroscopy
- f. Intracorporeal Lithotripsy devices
- g. Endoscopic Reconstructive Procedures
- h. Endoscopic Laser Applications
- 5. Implants, Biomaterials and others
 - a. Urethral Catheters
 - b. Urethral Stents
 - c. Ureteric Catheters
 - d. Ureteric Catheters
 - e. Baskets & Graspers
 - f. Endoscopic Laser Devices
 - g. Ureteric Dilators
 - h. Guide wires
 - i. Autologus Biomaterials
 - j. Synthetic Biomaterials
 - k. Prosthesis & Sphincter Implants
 - 1. Tissue Culture Products

Operative Urology

- 1. Surgical approaches to the Kidneys
- 2. Surgical approaches to the Adrenals
- 3. Surgery of the Kidneys
 - a. Surgery in Renal Trauma
 - b. Surgical procedures in Renovascular disease
 - c. Auto transplantation of the Kidney
 - d. Surgical procedures for Pelvi ureteric junction obstruction
 - e. Surgical procedures on Adrenals
 - f. Nephrectomy for benign disease
 - g. Nephrectomy for malignant disease
 - h. Nephron sparing Surgical procedures
- 4. Surgical procedures for Renal Calculi
 - a. Pyelolithotomy & Extended Pyelolithotomy
 - b. Anatrophic Nephrolithotomy
 - c. Coagulum Pyelithotomy
 - d. Nephrolithotomy
 - e. Percutaneous Nephrostolithothomy (PCNL)
- 5. Surgery of the Adrenal Glands
 - a. Adrenal Tumours
 - b. Adrenal Cysts
 - c. Phaeochromocytoma

6. Surgery of the Ureter

- a. Ureterolithotomy
- b. Uretero- ureterostmy
- c. Trans Uretero ureterostomy
- d. Ureteral replacement
- e. Ureteral Tailoring and Reimplantation
- f. Boari's Flap Reimplantation
- g. Ureterolysis & Ureteral Transposition

7. Surgery of the Urinary Bladder

- a. Suprapublic Cystostomy
- b. Surgery for Vesical Calculi
- c. Bladder diverticulectomy
- d. Augmentation Cystoplasty
- e. Partial Cystectomy
- f. Radical Cystectomy
- g. Transurethral Resection of Bladder tumour
- h. Repair of Vesico vaginal Fistulae.
 - i. Vaginal repair
 - ii. Abdominal repair
 - iii. Repair of complex fistulae
- i. Repair of Rectovesical Fistulae
- i. Bladder neck reconstruction

8. Surgery of the Prostate

- a. Transurethral Resection of the Prostate
- b. Retropubic Prostatectomy
- c. Transvesical Prostatectomy
- d. Radical Retropubic Prostatectomy
- e. Radical Perineal Prostatectomy
- f. Nerve sparing prostatectomy
- g. Minimally Invasive surgery of Prostate.

9. Surgery of the Urethra

- a. Reconstruction of Posterior Urethral Strictures
- b. Reconstruction of Bulbar Urethral Strictures
- c. Reconstruction of Anterior Urethral Strictures
- d. Endoscopic Urethrostomy
- e. Perineal Urethrostomy
- f. Meatoplasty & Glanuloplasty
- g. Single stage repair of Hypospadias
- h. Staged repair of Hypospadias
- i. Surgery of Urethral Carcinoma

10. Surgery in Male Infertility

- a. Varicocoele ligation
- b. Ejaculatory duct incision
- c. Vaso- vasectomy
- d. Vaso epididymostomy

e. Vaso – epididymostomy

11. Surgery of the Scrotum

- a. Surgery for Hydrocoele & Chylocoele
- b. Surgery for Haematocoele
- c. Reconstructive procedures in trauma

12. Surgery for Testes

- a. Orchidopexy in Cryptorchidism
- b. Orchidopexy in Torsion
- c. Orchidopexy for benign conditions
- d. Orchidopexy for malignant conditions
- e. Testicular biopsy
- f. Tesicular reimplantation

13. Surgery of the Penis

- a. Surgery for Penile Curvature
- b. Biopsy of Penile lesion
- c. Circumcision
- d. Partial Penectomy
- e. Total Penectomy
- f. Organ conserving procedures in Penile Carcinoma
- g. Post traumatic Penile reconstruction
- h. Penile Prosthesis Implantation

14. Urinary Diversions

- a. Vesicostomy
- b. Cutaneous Ureterostomy
- c. Illeal conduit
- d. Continent diversion using ileum
- e. Continent diversion using illeo caecal valve
- f. Orthotopic Neobladder
- g. Mitrofanoff and Benchecroun Procedures
- h. Ureterosigmoidostomy

15. Surgery for Associated Conditions

- a. Retroperitoneal Lymphadenectomy
- b. Nerve sparing Retroperitoneal Lymphadenectomy
- c. Illio inguinal Lymphadenectomy

16. Renal Transplantation

- a. Techniques of Renal Transplantation
- b. Cadaver & Live Donor harvesting technique
- c. Complications of Donor Nephrectomy
 - i. Medical (ii) Surgical
- d. Vascular access in Renal failure

17. Surgery for Incontinence

- a. Endoscopic Bladder Neck Suspension
- b. Transabdominal Bladder Neck Suspension
- c. Abdominal & Vaginal Sling Procedures

- d. Endoscopic Injection Procedures
- e. Artificial Sphincter implantation

18. Basic Principles of Laparoscopic procedures in Urology

Recent Advances in Urology (including other emerging topics related to Urology)

The broad objectives set out above are to be achieved through assumption of graded responsibility in patient care and operative work. A broad outline of such graded responsibility is given below:

I Year

Months 0 – 3 Orientation to the Institution & Department

Introduction to OPD, Ward and Patient Care routine

Introduction to Case Record Maintenance Introduction to Diagnostic procedures

Introduction to Preoperative and Postoperative Care Introductio to Consultations, inter – departmental activities

Months 3-6 Allocation of patient beds

Comprehensive record maintenance

Planning and execution of Diagnostic cascade

Planning and execution of Pre and Postoperative Care

Attending emergency Consultation

Attending cases in the Emergency and Casualty

services

Assisting at emergency and Elective Operative

Procedures

Introduction to basic Diagnostic Urology Endoscopy

Long - term monitoring of patients

Months 6 - 12 Further refinement of above

Performing Diagnostic Urologic procedures

Attending operation theatres

Independently attending emergency and casuality

calls

Performing emergency operation under supervision Performing elective operations under supervision Introduction to Therapeutic Lower Tract Endoscopy

II Year

Months 12- 18 Assisting juniors in their patient care

responsibilities

Performing advanced diagnostic procedures

Performing assigned operations

Assisting seniors at Complicated Urologic procedures

Performing diagnostic Lower Tract Endoscopy Performing assigned Therapeutic Endoscopy Documentation of Clinical Case Material and

archiving

Supervising clinical and operative work of juniors

Months 18 – 24 Assisting juniors operative procedures

Performing Therapeutic Lower tract Endoscopy Performing assigned reconstructive operations Performing complicated diagnostic procedures Performing advanced operations under supervision Supervising clinical and operative work of juniors

III Year

Months 24 – 36 Providing peer support to juniors in all above

activities Rotations through allied specialties like Nephrology and to other Units / Institutions for exposure to advanced aspects of Urology

Undertaking camps, surveys, clinical studies etc. as part of Departmental activity from time to time.

In addition to patient – care, the candidates will have responsibilities in the following areas:

1. Clinical Responsibilities

I Year Diagnosis of all Urology disorders and allied patient

care

II Year Management of complex Urologic disorders, as

well as complications of surgery and interdisciplinary

problems.

III Year Practice of protocol – based management and

Development of such management protocol

2. List of operative procedures to be performed

The following list is a compilation of operative procedures that will be performed by Trainees as part the M.ch. (Urology) Programme in the University. The time frame under which these procedures will be performed has been evolved based on the degree of competence and knowledge required. As that trainee progresses through the course, he/ she

will assist seniors in performing procedures under the higher category as a build up to performance of the higher category procedure.

This list consists of the most common procedures as currently practiced. Additional procedures will be added to each category as and when they evolve. The classification will again be based on the degree of training and expertise required to perform those new procedures.

This schedule is meant to serve as a guideline for trainees, as well as for trainers. It is incumbent on both to make all efforts to fulfill the requirement. The exact number of such procedures performed is likely to vary. It is suggested that at least a majority of the procedures in each Category up to Category IV be performed mandatorily. The training institutions may keep this in mind when they draw up the training schedule for their candidates.

Category I

0 - 6 months

- 1. Biopsy
- 2. Bladder Distension
- 3. Circumcision
- 4. Clot Evacuation
- 5. Dorsal Slit
- 6. Stent Removal
- 7. Testicular Biopsy
- 8. Urethral Dilatation
- 9. Cystoscopy (Diagnostic)
- 10. Filiform Dilatation
- 11. Retrograde Catheterisation
- 12. Retrograde Pyelography
- 13. Endoscopy Biopsy
- 14. Hydrocele & Spermatocoele Repair

Category II

6 —

12 months

- 1. Cystolithotomy
- 2. Meatoplasty
- 3. Orchidectomy
- 4. Shunt for Priaprism
- 5. Suprapubic Cystostomy
- 6. Ureteric Stenting
- 7. Visual Internal Urethrotomy
- 8. Vesicostomy
- 9. High Orchidectomy
- 10. Rovesing's Operation

11. Varicocoele ligation12. Amputation of penis – partial13. Orchidopexy14. Bladder repair after trauma

Category III

12 - 18

months

- 1. Bladder Diverticulectomy
- 2. Bladder Neck Resection / Incision
- 3. Endoscopic Removal of F.B
- 4. Epididymectomy
- 5. Nephrostomy
- 6. Uretero Sigmoidostomy Ist
- 7. Ureterolithotomy
- 8. Perinephric Abscess Drainage
- 9. Perinephric Abscess Drainage
- 10. Ureteric Meatotomy
- 11. Cutaneous Ureterostomy
- 12. Amputation of Penis Total
- 13. Epididymo Vasostomy
- 14. Hypospadias Staged repair
- 15. Diagnostic Ureterorenoscopy
- 16. Prostatectomy Frayers / Millin's
- 17. Dialysis access surgery
- 18. Fulguration of PUV

Category IV

18 - 24

months

- 1. Exploration of Renal Trauma
- 2. Hypospadias Single Stage
- 3. Nephrectomy
- 4. Partial Cystectomy
- 5. Ureteric re implantation
- 6. Urethroplasty (Staged)
- 7. Boar's flap Ureteric implantation
- 8. Illeocystoplasty
- 9. Pyelolithotomy

- 10. Nephrolithotomy
- 11. Pyeloplasty
- 12. Anatrophic Nephrolithotomy
- 13. Coagulum Pyelolithotomy
- 14. Percutaneous Nephrolithotomy
- 15. Transurethral Resection of Prostate (Small)
- 16. Transurethral Resection of Bladder Tumour
- 17. Ilio inguinal block dissection

Category V

24 - 30

- 1. Bladder neck suspension
- 2. Transurethral Resection of Prostate
- 3. Urethroplasty Single stage
- 4. Uretero ureterostomy
- 5. Vesical / Ureteral Fistula repair
- 6. Donor Nephrectomy
- 7. Renal Transplantation
- 8. Illeal loop conduit
- 9. Nephro ureterectomy
- 10. Partial nephrectomy
- 11. Radical Nephroureterectomy
- 12. Penile Proshesis
- 13. Adrenalectomy
- 14. Therapeutic Ureteroscopy
- 15. Introduction to Basic steps in Laparaoscopic Urology

Category VI

30 - 36

- 1. Auto Transplantation of Kidney
- 2. Complex VVF Repair
- 3. Total Cystectomy
- 4. Continent Diversion
- 5. Ureteric replacement
- 6. Radical Prostatectomy
- 7. Diagnostic Laparoscopy
- 8. Retroperitoneal Lymphadenectomy
- 9. Renovascular surgery
- 10. PCNL Laproscopic Procedures

3. Teaching Learning Responsibilities

I Year

Presenting Journal Clubs
Undergraduate Medical Teaching *

Postgraduate teaching of surgical trainees and trainees in other specialties * Teaching Paramedical staff

II Year Presenting Seminars

Critical appraisal of presentations and papers Presenting papers at State, Regional, and

National Conferences

III Year Developing and leading specific projects

related Urology Guiding juniors and peers in

academic activities and presentations

4. Schedule of Departmental Activities

Postgraduate departments of Urology offering M.Ch. training have evolved a variety of departmental training activities. The following schedule shall serve as a guideline with further refinements being made whenever necessary

Activity	Frequency
1. Clinical rounds	Thrice weekly
2. Journal Clubs	Once weekly
3. Seminars	Once weekly
4. Audit / Statistical meeting	Once weekly

5. Inter – departmental meetings

•	Nephrology	Fortnightly
•	Radiology	Fortnightly
•	Pathology	Monthly
•	Radiation Oncology	Monthly

• Inter – institutional Monthly / Bi- monthly

Please see Chapter IV: Monitoring Learning Progress for check – lists and other details

5. Orientation

a. Library

The postgraduate student will become familiar with the books, periodicals, and other publications pertaining to Urology that are available in the Institution. A list of such books etc. will be on record in the department. In addition to this, departments will develop and maintain Departmental Liabraries, which will contain highly specialized books and publications from which the postgraduate can benefit.

^{*} Continuous in II & III year

b. Laboratory Procedures

The candidate will familiarize himself / herself with the different diagnostic procedures in Urology through a process of interaction with the departments like Clinical Biochemistry, Pathology, Radiology etc., wherever feasible. The candidate may be rotated through these departments in order to familiarize him/her with the nuances of these procedures.

The following diagnostic procedures are specialized and specific to Urologic practice:

- 1. Urodynamic procedures
- 2. Nocturnal penile tumescence (NPT)

Certain other diagnostic evaluations like CT Scan, MRI, Colour Doppler scans are in increasing use in Urology. Familiarity with these is vital for the practice of Urology today. Therefore, if facilities for these are not available within the Institution, postgraduates may be posted to other Institutions where they are available. A similar practice may be employed for any other upcoming diagnostic modalities.

c. Resesrch

The component of research shall be promoted by encouraging candidates to undertake projects during the first two years' of their course. In this period, they will be introduced formally to the following aspects of Research:

- 1. Ethics of Clinical Research
- 2. Fundamentals of clinical studies
- 3. Types of clinical studies
- 4. Data recording
- 5. Data processing and results
- 6. Statistical analysis
- 7. Critical evaluation of published data and reports
- 8. Publication and peer review

This objective may be achieved either through an intramural programme or by enrolling postgraduates in an extramural programme providing th necessary training.

d. National Programmes

Postgraduate will be familiarized with National Programmes applicable to Urology as well as those of social importance. The department shall encourage inter – departmental activities that will increase the awareness of these programmes. All programmes directly applicable to Urology and meant for implementation shall be duly implemented.

6. Regulations

The postgraduate will be sensitized to regulations under different Legislative Acts, such as the *Medical Council of India Act. The Code of Medical Ethics, Transplantation of Human Organs Act*, etc. They will also be familiarized with other legislations that affect the practice of Clinical Medicine (*like The Consumer Protection Act, The Drugs and Cosmetics Act. The Medical Termination of*

Pregnancy Act, the Narcotics and Psychotropic Substances Control Act, etc.) This will be done through a process of informal contact and engagement with experts in the field.

7. Monitoring of Teaching / Learning Activities

Activity	Periodicity of Assessment	Method
1. Journals Clubs	Monthly	Faculty and review as
2. Seminars	Monthly	per check list (see chapter IV)
3. Theory knowledge	Six monthly	Written test
4. Clinical performance	Six monthly	Clinical exam
5. Operative work	Six monthly	Log book
6. Research & Presentation	Six monthly	Logbook & Faculty peer review using check – list
7. Dissertation		Prerequisite for appearing for the examination

The performance of candidates under these heads will be conveyed to them every six months and a record will be maintained in the department. The Department Head or Director will fulfill all University requirements pertaining to such assessment and keep the University posted 6 monthly.

SCHEME OF EXAMINATION

The examination shall consist of the following parts:

1. Theory

2. Clinical Examination & Viva voce

1. Theory

The theory examination shall consists of four papers of 100 marks each. Each paper in turn shall consist of two long questions of 20 marks each and six short questions of 10 marks each. All questions shall be compulsory. Each theory paper shall be for 3 hours.

Detailed list of topics in each paper enclosed – Appendix I

Paper I (Course Code: M5UR1) Basic Sciences as applied to Urology

CO1: Knowledge of anatomy , physiology and biochemistry as applied to Urology

CO2: Knowledge of Pharmacology , Microbiology and immunology as applied to Urology

CO3:Knowledge of Pathology and genetics as applied to Urology

Basic Sciences as Applied to urology

Surgical Anatomy of Genito-urinary Tract and Retroperitoneum

Normal Renal Physiology

Renal Biochemistry -Acid base and fluid regulation

Renal Endocrinology

Physiology & Pharmacology of Renal Pelvis & Ureter

Physiology of Urinary Bladder

Genetic determinants of Urologic Diseases

Pathophysiology of Urinary Tract Obstruction

Upper Urinary Tract

Lower Urinary Tract

Embryology & Normal Development of the Genito – urinary tract.

Embryology of Congenital Anomalies of the G.U. Tract

Vesico – Ureter Reflux, Mega Ureter & Ureteral Re-implantation

Ectopic Ureter & Ureterocoele

Exstrophy of the Bladder, Epispadias & other Bladder Anomalies

Cloacal Malformations.

Prune Belly Syndrome

Posterior Urethral Values & other Urethral Anomalies

Hypospadias

Congenital Anomalies of Testes

Renal Function in Foetus & Neonates

Renal Dysplasia & Cystic disease of Kidney

Disorders of Sexual Differentiation

Normal and abnormal spermatogenesis

Urologic Examination & Diagnostic Techniques – Imaging of the G.U. Tract

Conventional Radiography of Urogenital system and Retro – peritoneal area

Urologic Ultrasonography

Excretory & Retrograde Pyelography

Conventional Lower Urinary Tract Radiography

Ct, MRI, Angiography and other Imaging modalities

Radionuclide studies in Urology Pathologic Techniques in Urology

Urine Analysis Urinary Cytology

Flow Cytometry

Fine Needle Aspiration Cytology (FNAC)

Needle Biopsy

Immunohistochemistry and other relevant Special Techniques

Urinary tract changes in Pregnancy and Puerperium Overview of Genital and Urinary Tract Pathogens

Paper II (Course Code: M5UR2) Principles and Practice of Urology

CO: Skill and competency in diagnosing and treating patients with Urologic Symptoms and signs

CO2: Knowledge of appropriate Diagnostic modalities and tests used to arrive at diagnosis

CO3: Competency in monitoring patients response to treatment and appropriate steps to be taken

- 1. Host Defence Mechanisms against Urinary Tract Infections
- 2. Bacterial infections of the Urinary tract Diagnosis & Management
- 3. Urinary Tract Infections in Pregnancy Screening, Evaluation & Management
- 4. Asymptomatic bacteriuria in pregnancy
- 5. Management of Acute & Chronic Pyelonephritis, Emphysematous Pyelonephritis
- 6. Approach to Management of Urinary Tract Infection in Infants & Children
- 7. Diagnosis & Management of Prostatitis & Related disorders
- 8. Diagnosis & Management of Sexually transmitted diseases
- 9. Diagnosis & Management of Cutaneous diseases of External Genitalia
- 10. Diagnosis and management of Hematuria
- 11. Diagnosis & Management of Parasitic diseases of G.U. Tarct
- 12. Diagnosis & Management of Fungal infections of Urinary Tract
- 13. Diagnosis & Management of Genito Urinary Tuberculosis
- 14. Management of carcinoma of the genitourinary tract
- 15. Management of Fournier's Gangrene and Other Soft Tissue Infections
- 16. Diagnosis & Management of Interstitial Cystitis & Related Syndromes
- 17. Antimicrobial agents used in treatment of G.U. Tract Infections
- 18. Urologic manifestations of HIV infections, AIDS and related syndromes

Paper III (Course Code: M5UR3) Specialty Urology

CO1: Knowledge of specialty urology topics such as Foetal & Perinatal Urology, Paediatric Urology

CO2: Knowledge of specialty urology topics such as Andrology, Neuro – urology , Female Urology

CO3: Knowledge of specialty urology topics such as Dialysis & Renal Transplantation, Reconstructive urology and Endourology.

Foetal & Perinatal Urology Prenatal & Postnatal Urologic diagnosis and management

Neonatal & Perinatal Emergencies – Diagnosis & Management

Paediatric Urology

Cryptorchidism and Ectopic Testes

Etiopathogenesis

Diagnosis and Imaging

Hormone therapy

Surgical Management

Vesico – ureteric reflux

Primary and Secondary Vesico – ureteric reflux

Evaluation and Principles of Management of Primary Vesico – ureteric reflux

Urinary Tract Infections – Role of chemoprophylaxis

Renal and Bladder complications in Vesico – ureteric reflux

Megaureter

Primary obstructive Megaureter – Diagnosis & Management

Principles of Ureteric Reimplantation

Ectopic Ureter and ureterocoele – Diagnosis & Management

Exstrophy – Epispadias complex – Principles of Management

Hypospadiasis – diagnosis and management

Cloacal Malformations – Principles of Management

Mesonephric and paramesonephric duct malformations- diagnosis and management

Diagnosis & Management of Prune Belly Syndrome

ureterocoele

Posterior Urethral Valves & other Urethral Anomalies

Diagnosis

Complications

Principles of Management

Andrology

Normal Physiology of Male Reproduction

Diagnosis Approach in Male Infertility

Varicocoeles – Diagnosis & Management

Endocrine & Medical Management of Male Infertility

Surgical Management of Male Infertility

Overview of Assisted Reproduction Techniques

Physiology & Pharmacology of Penile Erection and Pathophysiology of Erectile

Dysfunction

Diagnistic tests in Erectile Dysfunction

Medical and other therapies in Erectile Dysfunction

Peyronies Disesse

Penile Prosthesis implantation – Types, indications and complications

Phallic reconstruction following trauma

Neuro - Urology

Neurophysiology and Pharmacology of Micturition and Continence Pathophysiology of Neurovesical dysfunction

CNS Disorders

Spinal trauma

Spinal dysraphism

Pelvic surgery

Diabetes

Urodynamics & its applications in Incontinence and Voiding dysfunction

Uroflowmetry

Cystometrogram

Urethral Pressure Profile & EMG

Videourodynamics

Ambulatory Urodynamics

Medical Management of Urinary Incontinence.

Female Urinary Incontinence – Eavluation & Management

Urge Incontinence

Stress Incotinence

Mixed Incontinence

Implantation of Artificial Sphincter in men and women

Reconstruction of Dysfunction Urinary Tract

Female Urology

Management of Urologic conditions in Pregnancy

Management of Urogenital Fistulae in women

Gynaecological tumours & the Female Urinary Tract

Female Lower Urinary Tract Reconstruction

Urinary incontinence in females

Treatment of Stress Incontinence

Surgery for Incontinence

Stress Incontinence and Cystocoele
Posterior Vaginal Wall Prolapse
Enterocoele
Uterine Prolapse
Urethral Diverticulum
Vesico Vaginal Fistula
Injuries (latrogenic) during Gynaecologic procedures and management
Pathology affecting primarily Genital organs in females – causing secondary effects
on urinary organs and management

Renal Transplantation

Immunological considerations in renal Transplantation Live Donor evaluation for Renal Transplantation Recipient evaluation for Renal Transplatation

Complications of Renal Transplantation and their management

Medical Surgical

Transplantation in Special Groups

Patients with Neuropathic Bladder / Urinary Diversions Paediatric patients Previously transplanted patients Multiple Organ Recipients

Cadaver Donor evaluation for Renal Transplantation

Evaluation of Cadaver Donor Cadaver Donor Management Certification of Brain Death

Organ retrieval, storage and transport

Legal and Ethical aspects of Organ Transplantation – The $\,$ transplantation of Human organs Act – 1994 & Rules – 1995

Reconstructive Urology

Principles of Ureteral Reconstruction
Principles of Bladder Reconstruction
Principles of Urethral Reconstruction
Principles of Bladder Substitution procedures
Principles governing use of Intestinal Segments in Urological Reconstruction
Autologus tissue transfer options in Urology
Principles of Urinary Diversion & Undiversion

Complications of Urinary Diversion

Endo Urology

Endoscopic anatomy of the Upper and Lower Urinary Tract

Physics governing endourologic equipment

Basic technical aspects of Endourologic equipment

Cystoscope

Resectoscope

Ureterorenoscope

Nephroscope

Laproscope

Associated accessories

Anaesthetic consideration in Endourologic surgery

Endourologic procedures – Indications, Performance, and Complications

Lower Urinary Tract Endoscope

Transsurethral Resection of Prostate

Transurethral Resection of Bladder Tumours

Ureterorenoscopy

Percutaneous Nephroscopy

Intracorporeal Lithotripsy devices

Endoscopic Reconstructive Procedures

Endoscopic Laser Applications

Implants, Biomaterials and others

Urethral Catheters

Urethral Stents

Ureteric Catheters

Ureteric Catheters

Baskets & Graspers

Endoscopic Laser Devices

- m. Ureteric Dilators
- n. Guide wires
- o. Autologus Biomaterials
- p. Synthetic Biomaterials
- q. Prosthesis & Sphincter Implants
- r. Tissue Culture Products

Paper IV (Course Code: M5UR4) Operative Urology + Recent advances in Urology

CO1: Knowledge of recent advances in the field of Urology

CO2: Skill in operative Urology including choice of procedure and steps to avoid complication

CO3: Familiarity with recent publications in Urology

Operative Urology shall cover all aspects of theory as applicable to Urologic surgical procedures. Specifically, this shall cover points like surgical anatomy, surgical approach, indications and contraindications, choice of procedure, complications and measures to avoid them, salvage procedures etc. in the case of open surgery. In the case of endoscopic surgery, it may also include endoscopic anatomy, endoscopic hardware, and the limitations of endoscopic approach wherever applicable. This paper may also cover certain directly relevant technologic issues like Structure of Endoscopies, Energy sources in endoscopic surgery etc.

Knowledge of Recent Advances covering recent biologic, diagnostic, or technological advances that impact on the current and future practice of Urology. This will also include biomaterials and implants used in Urology (for e.g. Stents, prosthesis, suture materials, clips etc.) and technological advances like Computers, Robotics, etc. The guiding principle for this will be the current relevance to of these to Urologic practice.

Soft Skills (Course Code: M5UR5) Elective Course

CO1: Competency to conduct a clinical research.

CO2: Competency to work as a team leader.

CO3: Knowledge of medical ethics and etiquette.

CO4: Ability to interact with the patients and their relatives in an effective manner.

CO5: Attitude to be a lifelong learner.

CO6: Ability to be an effective teacher/communicator.

There will be no written examination for this course. The following are the expected outcomes. The candidate will be evaluated throughout the programme for these.

2. Clinical Examination

(Amended by notification vide No. UA/ORD – 06/1999 – 2000 dated 31.03.2005)

The clinical examination will aim at examining the clinical skills and competence of candidates in the field of Urology. The total marks shall be 200 and shall be distributed as follows:

- □ Clinical cases: 150 marks
 - One long case 75 marks
 - Three short cases x 25 marks for each case = 75 marks
- \Box Ward rounds = 50 marks

Part I Clinical Cases

This segment shall carry a total of 150 marks (75 marks for the Long case and 25 marks for each of the 3 Short cases). The purpose of this segment of examination will be to assess the candidate's skill and competence in diagnosing the patient's disease and formulating a sound plan for management. In addition, the candidate's ability to elicit history, carry out the relevant physical examination, and present all these in a cohesive and logical order will also be assessed.

For this purpose, one long case and three short cases will be chosen. These will be representative of the variety of pathologies with which Urologic patients commonly present to the hospital. All examiners through a process of consultation shall select the cases. If more than one candidate is appearing for the exam, all efforts shall be made to avoid more than one candidate is getting the same set of cases.

The examiners shall do the marking for this segment independently, in order to give the candidate the fairest chance of success.

Part II Ward Rounds

The marks for this segment shall be 50. The segment of the examination is intended to assess the candidate's ability to pick up every day problems in the management of Urologic patients. To be assessed will be the candidate's ability to correlate the clinical symptoms of the patient with the different investigations, operative findings, postoperative course etc., and the ability to suggest management measures. The stress here will be on the candidate's ability to logically device the best option as well as to formulate alternatives.

Part III Viva Voce

This segment shall carry a total of 100 marks. This segment is meant to assess the candidate's overall understanding of Urology. In a sense, this segment will evaluate the candidate and assess whether the candidate fulfills the requirements of training, skill and competence as set out in the objective of the course. This segment may also feature surgical pathology specimens, histopathology slides, radiographs, reports of diagnostic tests, etc.

Criteria for declaring as pass in University Examination

A candidate shall secure not less than 50% marks in each head of passing which shall include (1) theory (2) practical including clinical and viva voce examination.

A candidate securing less than 50% of marks as described above shall be declared to have failed in the examination. Failed candidate may appear in any subsequent examination upon payment of fresh fee to the registrar (Evaluation)

Note: Knowledge of the recent advances may be examined in any or all the papers. The distribution of topics for different papers given is only broad and suggestive and not strict or exhaustive. Some overlapping of topics is inevitable. Candidates should be prepared to answer overlapping topics.

PAPER I

BASIC SCIENCES AS APPLIED TO UROLOGY

- 1. Surgical Anatomy Of Genito Urinary Tract
- 2. Normal Renal Physiology
- 3. Renal Biochemistry Acid base and fluid regulation
- 4. Renal endocrinology
- 5. Physiology & Pharmacology of Renal Pelvis and Ureter
- 6. Physiology of Urinary Bladder
- 7. Genetic determinants of urologic diseases
- 8. Radionuclide studies of Urology
- 9. Pathophysiology of urinary tract obstruction
 - a. Upper Urinary Tract
 - b. Lower Urinary tract
- 10. Embryology & Normal development of the Genito Urinary tract
- 11. Embryology of congenital anomalies of the G U Tract
 - a. Vesico-Ureteric Reflux, Mega Ureter & Ureteral Re-implantation
 - b. Ectopic Ureter & Ureterocoele
 - c. Exstrophy of the Bladder, Epispadias & other Bladder Anomalies
 - d. Cloacal Malformation
 - e. Prune Belly Syndrome
 - f. Posterior Uretheral Valves & other Urethral Anomalies
 - g. Hypospadias
 - h. Congenital anomalies of Testes
- 12. Renal function in Foetus & Neonates
- 13. Renal Dysplasia & Cystic disease of Kidney
- 14. Disorders of sexual differentiation
- 15. Normal and abnormal spermatogenesis
- 16. Urologic examination & diagnostic Techniques Imaging of the G U Tract
 - a. Urologic Ultrasonography
 - b. Excretory & Retrograde Pyelography
 - c. Lower Urinary Tract Radiography
 - d. CT and other Imaging modalities
- 17. Urinary tract changes in Pregnancy and Puerperium
- 18. Pathologic techniques in Urology

- a. Urinary Cytology
- b. Flow Cytometry
- c. Fine Needle Aspiration Cytology
- d. Needle Biopsy
- e. Immunohistochemistry and other relevant Special Techniques
- 19. Overview of Genital and urinary Tract Pathogens

PAPER II

PRINCIPLES AND PRACTICE OF UROLOGY

Infections & Inflammations of G.U. Tract

- 1. Host Defence Mechanisms against Urinary Tract Infections
- 2. Bacterial infections of the Urinary tract Diagnosis & Management
- 3. Urinary Tract Infections in Pregnancy Screening, Evaluation & Management
- 4. Management of Acute & Chronic Pyelonephritis, Emphysematous Pyelonephritis
- 5. Approach to Management of Urinary Tract Infection in Infants & Children
- 6. Diagnosis & Management of Prostatitis & Related disorders
- 7. Diagnosis & Management of Sexually transmitted disease
- 8. Diagnosis & Management of Cutaneous diseases of External Genitalia
- 9. Diagnosis & Management of Parasitic diseases of G.U. Tract
- 10. Diagnosis & Management of Fungal infections of Urinary Tract
- 11. Diagnosis & Management of Genito Urinary Tuberculosis
- 12. Management if Fournier's Gangrne and Other Soft Tissue Infections
- 13. Diagnosis & Management of Interstitial Cystitis & Related Syndromes
- 14. Antimicrobial agents used in treatment of G.U. Tract infections
- 15. Urologic manifestations of HIV infections, AIDS and related syndromes

Genito - Urinary Trauma

- 1. Diagnosis & Management in Blunt Renal Trauma
- 2. Diagnosis & Management in Penetrating Renal Trauma
- 3. V Renovascular injuries
- 4. Diagnosis & Management of latrogenic and Intraoperative Ureteral injuries
- 5. Diagnosis & Management of Bladder injuries
- 6. Diagnosis & Management of Ureteral injuries
- 7. Diagnosis & Management of Penile injuries
- 8. Diagnosis & Management of Scrotal and Testicular trauma
- 9. Diagnosis & Management of Retroperitoneal Haematoma

Adrenal Disorders

- 1. Evaluation and Management of Adrenal Cortical Disorders
- 2. Evaluation and Management of Adrenal medullary Disorders
- 3. Evaluation and Management of Adrenal Carcinoma

Renal Failure & Renal Replacement Therapy

- 1. Aetiology of Acute and Chronic Renal Failure
- 2. Management of Acute Renal Failure
- 3. Management of Chronic Renal Failure
- 4. Complications of Renal Failure and their Management
- 5. Principle's of Dialysis therapy Haemodialysis, Peritoneal Dialysis
- 6. Immunological considerations in Renal Transplantation
- 7. Live Donor evaluation for Renal Transplantation
- 8. Cadaver Donor evaluation for Renal Transplantation

Urinary Calculus Disease

- 1. Etiopathogenesis of Urinary Tract Calculi
 - a. Theories of Urolithiasis
 - b. Endocrine factors in development of Urolithiasis
 - c. Role of Modulators
 - d. Types of composition of Urinary Calculi
 - e. Role of Stone Analysis and types of stone analysis
- 2. Dietary and Medical Management of Calculus Disease
- 3. Principles and practice of Extracorporeal Shock Wave Lithotripsy (ESWL)
 - a. Evolution of ESWL
 - b. Types of Lithotriptors
 - c. Indications of ESWL
 - d. Post ESWL management
 - e. Complications of ESWL and follow up

Begin Prostatic Hyperplasia

- 1. Pathophysiology of Begin Prostatic Hyperplasia
- 2. Clinical evaluation of Begin Prostatic Hyperplasia
- 3. Medical Management of Begin Prostatic Hyperplasia
- 4. Minimally Invasive Therapy in Begin Prostatic Hyperplasia

Urologic Oncology

- 1. Overview of Cancer Biology & Principles of Urologic Oncology
- 2. Paediatric Urogenital tumours
- 3. Malignant tumours of the G.U. Tract in Adults
 - a. Renal tumours
 - b. Upper tract Transitional Cell Tumours

- c. Bladder tumours
- d. Tumours of the prostate
- e. Tumours of the Seminal Vesicles
- f. Tumours of the Urethra
- g. Tumours of the penis
- h. Tumours of the Penile & Scrotal Skin
- i. Testicular tumours
- j. Extragonadal germ cell tumours
- k. Retroperitoneal tumours
- 1. Metastatic tumours of the G.U. Tract
- 4. Radiotherapy in Genitourinary tumours
- 5. Chemotherapy of Genitourinary tumours
- 6. Gene therapy in Genitourinary tumours
- 7. Other advanced therapeutic modalities in Genitourinary tumours

PAPER-III Specialty Urology

Foetal & Perinatal Urology

- 1. Prenatal & Postnatal diagnosis and management
- 2. Neonatal & Perinatal Emergencies- Diagnosis & Management

Paediatric Urology

- 1. Cryptochidism and Ectopic Testes
 - a. Etiopathogenesis
 - b. Diagnosis and Imaging
 - c. Hormone therapy
 - d. Surgical Management
- 2. Vesico-ureteric reflux
 - a. Primary and Secondary Vesico-ureteric reflux
 - b. Evaluation and principles of management of Primary Vesico-ureteric reflux.
 - c. Urinary Tract Infections- Role of chemoprophylaxis.
 - d. Renal and Bladder complications in Vesico-ureteric reflux.
- 3. Megaureter
 - a. Primary obstructive Megaureter- Diagnosis & Management
 - b. Principles of Ureteric Reimplantion

- 4. Ectopic Ureter and Ureterocoele- Diagnosis & Management
- 5. Exstrophy- Epispadias complex- Principles of Management
- 6. Cloacal Malformations- Principles of Management
- 7. Diagnosis & Management of Prune Belly Syndrome
- 8. Posterior Urethral Valves & other Urethral Anomalies
 - a. Diagnosis
 - b. Complications
 - c. Principles of Management

Andrology

- 1. Normal Physiology of Male Reproduction
- 2. Diagnosis Approach in Male Infertility
- 3. Varicocoeles Diagnosis & Management
- 4. Endocrine & Medical Management of Male Infertility
- 5. Surgical Management of Male Infertility
- 6. Overview of Assisted Reproduction Techniques
- 7. Physiology & Pharmacology of Penile Erection and Pathophysiology of Erectile Dysfunction
- 8. Diagnostic tests in Erectile Dysfunction
- 9. Medical and other therapies in Erectile Dysfunction
- 10. Peyronie's Disease
- 11. Penile Prosthesis implantation Types, indications and complications
- 12. Phallic reconstruction following trauma.

Neuro-Urology

- 1. Neurophysiology and Pharmacology of Micturition and Continence
- 2. Pathophysiology of neurovesical dysfunction
 - a. CNS Disorders
 - b. Spinal trauma
 - c. Spinal dysraphism
 - d. Pelvic surgery
 - e. Diabetes
- 3. Urodynamics & its applications in Incontinence and Voiding dysfunction.
 - a. Uroflowmetry
 - b. Cytometrogram
 - c. Urethral Pressure Profile & EMG
 - d. Videourodynamics
 - e. Ambulatory Urodynamics
- 4. Medical Management of Urinary Incontinence
- 5. Female Urinary Incontinence Evaluation & Management
 - a. Urge Incontinence
 - b. Stress Incontinence

- c. Mixed Incontinence
- 6. Implantation of Artificial Sphincter in men and women
- 7. Reconstruction of Dysfunctional Urinary Tract

Female Urology

- 1. Management of Urologic conditions in Pregnancy
- 2. Management of Urogenital Fistulae in women
- 3. Gynaecological tumours & the Female Urinary Tract
- 4. Female lower Urinary Tract Reconstruction
- 5. Urinary incontinence in females
- 6. Treatment of Stress Incontinence
- 7. Surgery for Incontinence
- 8. Stress Incontinence and Cystocoele
- 9. Posterior Vaginal Wall Prolapse
- 10. Enterocoele
- 11. Uterine Prolapse
- 12. Urethral Diverticulum
- 13. Vesico Vaginal Fistula
- 14. Injuries during Gynaecologic procedures and management
- 15. Pathology affecting primarily Genital organs in females- causing secondary effects on urinary organs and mangement.

Renal Transplantation

- 1. Immunological considerations in Renal Transplantation
- 2. Live Donor evaluation for Renal Transplantation
- 3. Recipient evaluation for Renal Transplantation
- 4. Complications of Renal Transplantation and their management
 - a. Medical
 - b. Surgical
- 5. Transplantation in Special Groups
 - a. Patients with Neuropathic Bladder/Urinary Diversions
 - b. Pediatric patients
 - c. Previously transplanted patients
 - d. Multiple Organ Recipients
- 6. Cadaver Donor evaluation for Renal Transplantation
 - a. Evaluation of Cadaver Donor
 - b. Cadaver Donor Management
 - c. Certification of Birth Death
 - d. Organ retrieval, storage, and transport
- 7. Legal and Ethical aspects of Organ Transplantation

Renal Transplantation

- 1. Principles of Ureteral Reconstruction
- 2. Principles of Bladder Reconstruction
- 3. Principles of Urethral Reconstruction
- 4. Principles of Bladder Substitution procedures
- 5. Principles governing use of Intestinal Segments in Urological Reconstruction
- 6. Autologus tissue transfer options in Urology
- 7. Principles of Urinary Diversion & Undiversion
- 8. Complications of Urinary Diversion

Endo Urology

- 1. Endoscopic anatomy of the Upper and Lower Urinary Tract
- 2. Physics governing Endourologic equipment
- 3. Basic technical aspects of Endourologic equipment
 - a. Cystoscope
 - b. Resectoscope
 - c. Ureterorenoscope
 - d. Nephroscope
 - e. Laparoscope
 - f. Associated accessories
- 4. Anaesthetic consideration in Endourologic surgery
- 5. Endourologic procedures Indications, Performance, and Complications
 - a. Lower Urinary Tract Endoscopy
 - b. Transurethral Resection of Prostate
 - c. Transurethral Resection of Bladder Tumours
 - d. Ureterorenoscopy
 - e. Percutaneous Nephroscopy
 - f. Intracorporeal Lthotripsy devices
 - g. Endoscopic Reconstructive Procedures
 - h. Endoscopic Laser Applications
- 6. Implants, Biomaterials and others
 - a. Urethral Catheters
 - b. Urethral Stents
 - c. Ureteric Catheters
 - d. Ureteric Stents
 - e. Baskets & Graspers
 - f. Endoscopic Laser Devices
 - g. Ureteric Dilators
 - h. Guide wires
 - i. Autologus Biomaterials
 - j. Synthetic Biomatrials

- k. Prosthesis & Sphincter Implants
- 1. Tissue Culture Products

PAPER-IV Operative Urology & Recent Advances

Operative Surgery

- 1. Surgical approaches to the Kidneys
- 2. Surgical approaches to the Adrenals
- 3. Surgeries of the Kidneys
 - a. Surgery in Renal Trauma
 - b. Surgical procedures in Renovasular disease
 - c. Auto transplantation of the Kidney
 - d. Surgical procedures for Pelvi-ureteric junction obstruction
 - e. Surgical procedures on Adrenals
 - f. Nephrectomy for benign disease
 - g. Nephrectomy for malignant disease
 - h. Nephron sparing Surgical procedures
- 4. Surgical procedures for Renal Calculi
 - a. Pyelolithotomy & Extended Pyelolithotomy
 - b. Anatrophic Nephrolithotomy
 - c. Coagulum Pyelolithotomy
 - d. Nephrolithotomy
 - e. Percutaneous Nephrostolithotomy (PCNL)
- 5. Surgery of the Adrenal Glands
 - a. Adrenal Tumours
 - b. Adrenal Cysts
 - c. Phaeochromocytoma
- 6. Surgery of the Ureter
 - a. Ureterolithotomy
 - b. Uretero-ureterostomy
 - c. Trans Uretero-ureterostomy
 - d. Ureteral replacement
 - e. Ureteral Tailoring and Reimplantation

- f. Boaris Flap Reimplantation
- g. Ureterolysis & Ureteral Transposition

7. Surgery of the Urinary Bladder

- a. Suprapubic Cystostomy
- b. Surgery for Vesical Calculi
- c. Bladder diverticulectomy
- d. Augmentation Cystoplasty
- e. Partial Cystectomy
- f. Radical Cystectomy
- g. Transurethral Resection of Bladder tumour
- h. Repair of Vesico vaginal Fistulae
 - i. Vaginal repair
 - ii. Abdominal repair
 - iii. Repair of complex fistulae
- i. Repair of Rectovesical Fistulae
- j. Bladder neck reconstruction

8. Surgery of the Prostate

- a. Transurethral Resection of the Prostate
- b. Retropubic Prostatectomy
- c. Transvesical Prostatectomy
- d. Radical Retropubic Prostatectomy
- e. Radical Perineal Prostatectomy
- f. Nerve sparing prostatectomy

9. Surgery of the Urethra

- a. Reconstruction of posterior Urethral Strictures
- b. Reconstruction of Bulbar Urethral Strictures
- c. Reconstruction of Anterior Urethral Strictures
- d. Endoscopic Urethrotomy
- e. Perineal Urethrostomy
- f. Meatoplasty & Glanuloplasty
- g. Single stage repair of Hypospadias
- h. Staged repair of Hypospadias
- i. Surgery of Urethral Carcinoma

10. Surgery in Male Infertility

- a. Varicocoele ligation
- b. Ejaculatory duct incision
- c. Vaso-vasostomy
- d. Vaso-epididymostomy
- e. Vaso- epididymal Fistulae

11. Surgery of the Scrotum

- a. Surgery for Hydrocoele & Chylocoele
- b. Surgery for Haematocoele

- c. Reconstructive procedures in trauma
- 12. Surgery for Tests
 - a. Orchidopexy in Cryptorchidism
 - b. Orchidopexy in Torsion
 - c. Orchidectomy for benign conditions
 - d. Orchidectomy for malignant conditions
 - e. Testicular biopsy
 - f. Testicular reimplantation

13. Surgery of the Penis

- a. Surgery for Penile Curvature
- b. Biopsy of Penile lesion
- c. Circumcision
- d. Partial Penectomy
- e. Total Penectomy
- f. Organ conserving procedures in Penile Carcinoma
- g. Post traumatic Penile reconstruction
- h. Penile Prosthesis Implantation

14. Urinary Diversions

- a. Vesicostomy
- b. Cutaneous Ureterostomy
- c. Illeal conduit
- d. Continent diversion using ileum
- e. Continent diversions using illeo-caecal valve
- f. Orthotopic Neobladder
- g. Mitrofanoff and Benchecroun Procedures
- h. Ureterosigmoidostomy

15. Surgery for Associated Conditions

- a. Retroperitoneal Lymphadenectomy
- b. Nerve sparing Retroperitoneal Lymphadenectomy
- c. Ilio-inguinal Lymphadenectomy

16. Surgery for Incontinence

- a. Endoscopic Bladder Neck Suspension
- b. Transabdominal Bladder Neck Suspension
- c. Abdominal & Vaginal Sling Procedures
- d. Endoscopic Injection Procedures
- e. Artificial Sphincter implantation

17. Basic Principles of Laparoscopic procedures in Urology

JOURNALS

Essential

Current Journals under subscription

- 1. British Journal of Urology (M)
- 2. Journal of Urology (M)
- 3. Urologic Clinics of North America (Q)
- 4. Transplantation Proceedings (BM)
- 5. World Journal of Urology (Q)
- 6. Indian Journal of Urology
- 7. Urologic Survey
- 8. Urology
- 9. Journal of endourology

Optional

- 1. Genitourinary Medicine
- 2. Investigative Urology
- 3. Scandinavian Journal of Urology and Nephrology
- 4. Journal of Endo-Urology
- 5. Neuro-Urology and Urodynamics
- 6. Atlas of Urological Clinics of North America
- 7. Fertility and Reproduction

Monitoring Learning Progress: See Chapter IV

Log B	Book For M.Ch Urology
NAME:	
INSTITUTION:	
CERTIFICATE F	ROM HEAD OF THE DEPARTMENT
Name	:
Nature of Post	:
Name of the Hospital / Institution	n :
Recognised by: UNIVERSITY / MCI	:
Number of Urological beds	:
Number undergoing training	:
Names of Approved trainers	:
Signature of the Head of Departr	nent

Table I: Academic activities attended

Name:	Admission Year:				
College:					
Date	Type of Activity Specify Seminar, Journal Club, Presenta teaching	ation, UG	Particulars		
	Table II: Academic presentation	ns made by	y the student		
Name:		Admission	Year:		
College:					
Date	Торіс	Specify	pe of Presentation Seminar, Journal Club, ation, UG teaching etc.		

Table III: Diagnostic Procedures done from (Date To Date)

DATE	HOSPITAL NUMBER	PROCEDURE	P	S	AT	AJ	TOTAL

P – Performed Independently

AT – Assisting Trainer

S – Done under Supervision

AJ – Assisting Junior Colleagues

Table IV: List of Operative Procedures to be performed by M.Ch (Urology) Trainees

PROCEDURE	P	S	AT	AJ	TOTAL
Cystoscopy					
Stent Removal					
Retrograde Catheterisation					
Retrograde Pyelography					
Endoscopic Biopsy					
Clot Evacuation					
Ureteric Stenting					
Visual Internal Urethrotomy					
Endoscopic Removal of Foreign body					
Ureteric Meatotomy / Incision of Ureterocoele					
Diagnostic Ureterorenoscopy					
Fulguration of Posterior Urethral Valves					

Percutaneous Nephrolithotomy (PCNL)			
Transurethral Resection of Prostate (TURP)			
Transurethral Resection of Bladder Tumour			
Endoscopic Bladder Neck Suspension			
Therapeutic Ureterorenoscopy			
Diagnostic Laparoscopy			

P – Performed Independently

AT – Assisting Trainer

S – Done under Supervision

AJ – Assisting Junior Colleagues

Model Overall Assessment Sheet

Name of the College:

Academic Year:

Check	Particulars	Name of Student and Mean Score					
List No.		A	В	C			
I	Journal Review Presentations						
II	Seminars						
III	Clinical work in wards						
IV	Clinical presentation						
V	Teaching skill practice						
	Total Score						

Note: 1. Use separate sheet for each year

2. Insert name of candidate

List of Operative Procedures to be performed by M.Ch (Urology) Trainees

BLADDER SURGERY

PROCEDURE	P	S	AT	AJ	TOTAL
Cystolithotomy					
Suprapublic Cystostomy					
Vesicostomy					
Bladder Trauma Repair					
Partial Cystoplasty					
Augmentation Cystoplasty					
Open Bladder Neck Suspension					
Vesical Fistula Repair					
Total Cystectomy					

Ureterovesical Junction & Ureter

PROCEDURE	P	S	AT	AJ	TOTAL
Ureterolithotomy					
Ureteric Reimplantation					
Boari Flap Reimplantation					
Ureteral Fistula Repair					
Ureterorenoscopy					
Uretero-ureterostomy					
Ureteric Replacement					

Renal Surgery

PROCEDURE	P	S	AT	AJ	TOTAL
Open Kidney Biopsy					
Nephrostomy					
Perinephric Abscess Drainage					
Exploration of Renal Trauma					
Nephrectomy					
Pyelolithotomy					
Nephrolithotomy					
Pyeloplasty					
Anatrophic Nephrolithotomy					
Coagulum Pyelolithotomy					
Nephroureterectomy					
Radical Nephrectomy					
Partial Nephrectomy					
Renal Auto Transplantation					
Renovascular Reconstruction					

P – Performed Independently

AT – Assisting Trainer

S – Done under Supervision

AJ – Assisting Junior Colleagues

List of Operative Procedures to be performed by M.Ch (Urology) Trainees

TRANSPLANTATION SURGERY

PROCEDURE	P	S	AT	AJ	TOTAL
Arteriovenous Fistula					
CAPD Catheter insertion					
Donor Nephrectomy					
Renal Transplatation					
Cadaver Organ Retrieval					
Graft Nephrectomy					

Adrenal Surgery

PROCEDURE	P	S	AT	AJ	TOTAL
Adrenalectomy					

Urinary Diversions

PROCEDURE	P	S	AT	AJ	TOTAL
Illeal Conduit					
Continent Diversions					
Orthotopic Neobladder					
Ureterosigmoidostomy					
Cutaneous Ureterostomy					
Mitrafanoff Procedure					
Benchekroun Procedure					_

Miscellaneus Procedures

PROCEDURE	P	S	AT	AJ	TOTAL
Penile Reconstruction					
Retroperitoneal Lymphadenectomy					
Retroperitoneal Tumour Excision					
Ureterolysis & Transposition					
Diagnostic Laparoscopy					
Laparoscopic Nephrectomy					

P – Performed Independently

S – Done under Supervision

AT – Assisting Trainer

AJ – Assisting Junior Colleagues

Table V: List of Operative Procedures to be performed by M.Ch (Urology) Trainees

OPEN SURGICAL PROCEDURES

GENITAL SURGERY

PROCEDURE	P	S	AT	AJ	TOTAL
Dorsal Slit					
Circumcision					
Testicular Biopsy					
Hydrocoele & Spermatocoele repair					
Meatoplasty					
Orchidectomy					
Shunt for Priaprism					
Varicocoele ligation					
Partial Penectomy					
Penile Trauma Exploration					
Total Penectomy					
Epididymovasostomy					
Single Staged Hypospadias repair					
Illeoinguinal Lymphadenectomy					
Penile Prosthesis Implantation					
Urethral Surgery					
Urethral dilatation					
Filiform dilatation					
Perineal Urethrostomy					
Urethrectomy					
Staged Urethroplasty					
Single Staged Urethroplasty					

PROSTATE SURGERY

PROCEDURE	P	S	AT	AJ	TOTAL
Transrectal Biopsy					
Open Prostatectomy					
Radical Prostatectomy					
Nerve Sparing Prostatectomy					

P – Performed Independently AT – Assisting Trainer

S – Done under Supervision AJ – Assisting Junior Colleagues

Model Question Papers

MCH EXAMINATION – UROLOGY

PAPER NO: 1 Basic Sciences as Applied to Urology

Time: 3 Hrs Maximum Marks: 100

1. Discuss the evaluation and management of Germ cell Testicular tumour (Marks 25)

2. Discuss the surgical complications and its management in Renal Transplantation (Marks 25)

3. Write short notes on

a. Chemotherapy in advanced bladder carcinoma	(Marks 10)
b. Role of urodynamic in management of BPH	(Marks 10)
c. A.N.N.in Urology	(Marks 10)
d. Virtual Cystoscopy	(Marks 10)
e. Hormone Refractory Adeno – Carcinoma of prostate	(Marks 10)

MCH EXAMINATION – UROLOGY

PAPER NO: II Clinical Urology

Time: 3 Hrs Maximum Marks: 100

Discuss the evaluation and management of renai injuries (Marks 25)
 Discuss the management of Peyronie's disease (Marks 20)

3. Write short notes on

a. Urinary markers in bladder cancer (Marks 10)

b. Gene therapy for prostate cancer	(Marks 10)
c. Interstitial Cystitis	(Marks 10)
d. Management of T1G3 transitional cell carcinoma of bladder	(Marks 10)
e. Laparoscopic donor Nephrectomy	(Marks 10)

MCH EXAMINATION – UROLOGY

PAPER NO: III Sub - Specialities as Related to Urology

Time: 3 Hrs Maximum Marks: 100

1. Discuss the advances in therapeutic energies in urology	(Marks 25)
2. Discuss the advances in laparoscopic surgery in urology	(Marks 25)

3. Write short notes on

a.	Trus guided biopsy of prostate	(Marks 10)
b.	Buccal mucosa in urethroplasty	(Marks 10)
c.	Post exposure chemoprophylaxix for HIV	(Marks 10)
d.	Radiation hazards in endo-urology	(Marks 10)
e.	Green light (KTP) laser	(Marks 10)

MCH EXAMINATION – UROLOGY

PAPER NO: IV Recent advances in Urology

Time: 3 Hrs Maximum Marks: 100

- 1. Renal parenchymal sparing surgery in renal cell carcinoma its present status and long term results (Marks 25)
- 2. Discuss present status of non operative management of Benign Hyperplasia prostate (Marks 25)

3. Write short notes on

a. Botulinum Toxin and its applications	(Marks 10)
b. Prostatosomes	(Marks 10)
c. MUC4	(Marks 10)

d. Buccal Mucossa for substitution urothroplasty (Marks 10)
e. Anatomy of fascia Denonvillier in reference to Radical Postatectomy (Marks 10)