

# Application for Institutional Fellowship Program in Urodynamics and Female Urology

Complete only one form to describe the program regardless of the number of rotations (phases) of the training and the number of institutions participating.

All new programs must include the application fee (\$2000.00) upon submission of the application. Make check payable to SUFU Fellowship Program.

**Please submit 5 complete sets of this application. Deadline December 1 for the following academic year.**

Completed applications with application fee may be submitted to:

David R. Staskin MD  
Assoc. Prof. Urology  
Tufts University School of Medicine  
Caritas-St. Elizabeth's Medical Center DOB-501  
736 Cambridge Street  
Boston, MA 02135  
E-mail: [staskin@att.net](mailto:staskin@att.net)

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Name of Program: \_\_\_\_\_

Name of Medical School: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip Code

Office Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

New Program: Yes No

Length of Program: 2 years

Number of Positions:

Year 1 \_\_\_\_\_ Year 2 \_\_\_\_\_

**Program Director**

Name: \_\_\_\_\_

Faculty Title & Rank: \_\_\_\_\_

Year Appointed: \_\_\_\_\_ Full-time Faculty: \_\_\_\_\_ % of Time: \_\_\_\_\_

Fellowship: \_\_\_\_\_ Year completed: \_\_\_\_\_

**Subspecialty Division Director (if other than Program Director)**

Name: \_\_\_\_\_

**Department Chair**

Name: \_\_\_\_\_

I. **Program Sites:**

Primary institution providing the in-patient and out-patient fellowship education program

Name: \_\_\_\_\_

Location: \_\_\_\_\_

Academic Affiliation: \_\_\_\_\_

Other participating institutions to which the fellow is assigned for inpatient/outpatient experience

A. Name: \_\_\_\_\_

Location: \_\_\_\_\_

Academic Affiliation: \_\_\_\_\_

Supervising Faculty: \_\_\_\_\_

B. Name: \_\_\_\_\_

Location: \_\_\_\_\_

Academic Affiliation: \_\_\_\_\_

Supervising Faculty: \_\_\_\_\_

C. Name: \_\_\_\_\_

Location: \_\_\_\_\_

Academic Affiliation: \_\_\_\_\_

Supervising Faculty: \_\_\_\_\_

**II. Program in Urodynamics, Female Urology, Voiding Dysfunction and Reconstruction**

Faculty	Site*	Full Time	Part Time % of Time	Years Certified/Recertified		
				ABU	ABOG	Other

Director

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Other Faculty


Non-Faculty


\*Use letters from Section I to indicate site

**III. Provide Narrative Description of Proposed Program, To Include:**

- A. Summary description of fellowship program
  - 1. Education objectives of the program
  - 2. Goals, strengths and weaknesses
  - 3. Education program
    - a. Organization of in' and out-patient teaching (by institution)
    - b. Supervision in ambulatory unit and operating room
    - c. Conferences
    - d. Seminars and lectures, including topics and presenters
    - e. Scientific meetings
    - f. Research activities
  - 4. Responsibilities and activities of fellows in
    - a. Teaching of residents and students
    - b. Benign gynecology
    - c. Lectures and presentations
- B. Block diagram of proposed rotation for each month of program
- C. Describe the available research space and opportunity for the fellows

- D. Describe the integration of the fellowship and residency programs
- E. Describe the relationship with the departments of Surgery, Urology or Gynecology, Gastroenterology, Neurology, Physical Therapy, and Geriatrics
- F. Describe any anticipated changes in the program, faculty, or patient referral patterns
- G. Describe your program's methods of evaluating a fellow's progress
- H. Describe you program's method for fellows' evaluation of faculty

#### IV. Urodynamics Testing

List by institution or site, the number of patients or procedures **available for fellows** for 12 consecutive months within the last 18 months.

	Institution A	Institution B	Institution C
<b>A. Diagnostic Procedures</b>			
Single Channel Urodynamics			
Multi-channel urodynamics			
Cystoscopy			
Neurodiagnostic Studies (NCV, Needle EMG, Interstim Testing)			
Imaging Studies (Fluoroscopy, VCUG)			
Other:			

#### V. Female LUTS and Incontinence

	Institution A	Institution B	Institution C
<b>A. Non surgical Management:</b>			
Stress Incontinence			
Overactive Bladder			
Urinary Retention			
Chronic Pain			
Interstitial Cystitis			
Other:			

#### **B. Surgery for Urinary Incontinence:**

Periurethral Injection			
Retropubic Procedures			
Combined abdominal/vaginal procedures (excluding slings)			

<b>Surgery for Urinary Incontinence (continued)</b>	<b>Institution A</b>	<b>Institution B</b>	<b>Institution C</b>
Sling Procedures (fascia/heterologous)			
Tape Procedures			
Laparoscopic Procedures			
Interstim			
Other:			

**C. Other Complex Procedures:**

Vesico-vaginal Fistula			
Urethro-vaginal Fistula			
Urethral Diverticulum			
Ureteral Reimplant			
Urethrolisis			
Recto-vaginal Fistula			
Martius or other Flaps			
Anal Sphincteroplasty			
Large Bowel Procedures			
Small Bowel Procedures			
Other:			

**VI. Male LUTS and Incontinence**

<b>A. Surgery for Male LUTS:</b>	<b>Institution A</b>	<b>Institution B</b>	<b>Institution C</b>
TURP			
TUIP			
Interstim			
Other:			

**B. Surgery for Male Incontinence:**

Periurethral Injections			
Male Sling			
Artificial Urinary Sphincter			
Other:			

## VII. Pelvic Organ Prolapse

<b>A. Pelvic Organ Prolapse</b>	Institution A	Institution B	Institution C
Abdominal and/or Retropubic Procedures			
Vaginal Procedures			
Combined Abdominal/Vaginal Procedures			
Laparoscopic Procedures			
Other:			

## VIII. Neurogenic Voiding Dysfunction

<b>A. Neurogenic Voiding Dysfunction</b>	Institution A	Institution B	Institution C
Transurethral Sphincterotomy			
Sphincter Stent			
Augmentation Enterocystoplasty			
Mitrofanoff Procedures			
Artificial Urinary Sphincter			
Other:			

## IX. Genitourinary Reconstruction

<b>A. Genitourinary Reconstruction</b>	Institution A	Institution B	Institution C
Internal Urethrotomy			
End – to – End Urethroplasty			
Onlay Urethroplasty			
Pedicled Flap Urethroplasty			
Continent Cutaneous Diversion			
Neobladder Diversion			
Penile Prosthesis			
Other			

## **X. Facilities**

### A. In-patient facilities:

In one typewritten page or less, describe the in-patient facilities at each training site. Include the number of operating room days and number of hospital beds dedicated for use by the SUFU Fellowship Program. Include a description of available consultative services and critical care unit availability.

### B. In one typewritten page or less, describe the out-patient facilities at each training site. Include the total number of exam rooms, procedure rooms, consultation rooms, offices and equipment (e.g., urodynamic system, ultrasound, endoscopic, neurophysiologic, anal manometry, etc.). Note if facilities and equipment are dedicated exclusively to the SUFU Fellowship Program, or are they shared with other services or departments.

## **XI. Special Areas**

Provide a narrative describing how fellows are taught in the following categories (limit to one-half typewritten page or less, per category). This may include a brief description of didactic lectures, clinical experience, facilities, equipment and/or special faculty that are relevant.

- A. Anatomy
- B. Physiology of the pelvic floor including normal lower urinary tract, colo-rectal-anal, and vaginal function
- C. Pathophysiology of urinary incontinence in men and women and pelvic organ prolapse
  - 1. urinary incontinence
  - 2. anal incontinence
  - 3. pelvic organ prolapse
- D. Pathophysiology of male voiding dysfunction and obstruction
- E. Diagnostic evaluation
  - 1. urinary incontinence (UI)
  - 2. fecal incontinence (FI)
  - 3. pelvic organ prolapse and pelvic floor dysfunction
  - 4. urethral obstruction
- F. Treatment of urinary incontinence (excluding fistula and diverticulum)
  - 1. surgical treatment
  - 2. pharmacological treatment
  - 3. behavioral treatment
  - 4. functional treatment
- G. Treatment of anal incontinence
- H. Pelvic floor dysfunction and prolapse – non-surgical and surgical management
- I. Rectovaginal fistula
- J. Vesicovaginal, urethrovaginal fistula and diverticulum of the urethra
- K. Intraoperative injury-prevention and immediate management

- L. Congenital anomalies of the female genitourinary tract
- M. Irritative conditions of the genitourinary tract
  - 1. urinary tract infections
  - 2. sensory disorders of the bladder and urethra
  - 3. urethral syndrome
  - 4. non-urologic irritative conditions of the pelvis
- N. Pathophysiology of Neurogenic Bladder Dysfunction
  - 1. Spinal Cord Injury
  - 2. Multiple Sclerosis
  - 3. Cerebrovascular Disease
  - 4. Diabetic Cystopathy
  - 5. Parkinson's Disease
  - 6. Spinal Dysraphism
  - 7. Identify and treat associated
- O. Restoration of function in the neurogenic bladder
- P. Describe the principles of lower urinary tract reconstruction
- Q. Perform penile and urethral reconstruction
- R. Perform vaginal reconstruction
- S. Utilize flap procedures for reconstruction
- T. Perform functional reconstruction of the lower urinary tract utilizing bowel segments

## **XII. Research**

Describe the research environment for the fellowship program in a two page narrative:

Describe the facilities within the division or department for clinical research and/or laboratory (sq. ft.), location, and equipment available for fellow research training.

Describe the percentage of fellowship time reserved for research, how this is distributed, and any other non-research activities that the fellows may have during that time, including night call.

Describe the library facilities, any literature search programs, any clinical data bases, and access to medical records that are available to fellows for clinical research.

Describe how provisions are made for identifying a research mentor and research projects for the fellow.

Attach the following list:

Didactic research conferences or seminars, courses, etc. regularly attended by fellows, and topics covered (do not include representative conference schedules).

Current research topics (up to 10) giving preference to those in which fellows participate. Include for each: title, investigators, source of funding (federal, non federal, industrial,

departmental, none). Identify those in which fellows participate and underline the name(s) of fellows.

Research (clinical or laboratory) presentations at regional or national meetings given by fellows during the five years immediately preceding the date of application. List date, meeting, title and authors, underlining the names(s) of fellows.

Peer reviewed articles by program faculty and fellows which have been published during the two years immediately preceding the date of application. Underline those authors who were fellows.

**XIII. Graduate Level Courses**

A. List graduate level courses available and appropriate for fellows.

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**XIV. Fellows**

A. List all current fellows and expected year of completion of program.

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B. List all previous fellows trained within the ten years immediately preceding the application, date of graduation, and current location and professional activity (i.e. private practice, clinical faculty or full-time faculty).

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The undersigned have reviewed and approved of the proposed Education Program and have committed their resources to the support of the program as described.

\_\_\_\_\_  
Type Name of Program Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Program Director

\_\_\_\_\_  
Type Name of Chair, Department of Urology

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Chair, Department of Urology

For Office Use Only:

Date Mailed \_\_\_\_\_

Application received \_\_\_\_\_

Site survey date \_\_\_\_\_

Ruling By Division

Approved \_\_\_\_\_

Number of positions approved \_\_\_\_\_

Not approved \_\_\_\_\_