



Family Medicine Department

Title: Family Medicine Urology Fellowship – Addressing the Needs of a Community

Background:

In 2014, the chairs of the departments of family medicine and urology for Northwell Health decided to create an innovative educational model to help fill the gap of needed urologic services. This model would emulate what had been done for orthopedics with the creation of a sports medicine fellowship.

Objectives:

The objective was to create a fellowship training for family medicine graduates in advanced urology to allow them fill a clinical gap that had been observed within the system. The secondary objective was to allow a process for family medicine residents to partake in urology tracks.

Methods:

We reviewed what the gap was for our health system and nationwide with the number of urologists available to provide this care to the population served. It was determined that there would be an advantage to having family medicine physicians participate in this training as they had been. Curricula were reviewed from various sources:

- Accreditation Council for Graduate Medical Education (ACGME) Program requirements for graduate medical education in Urology
- American Academy of Family Medicine (AAFP) curriculum guidelines for Men's Health
- ZSOM Urology Residency curriculum
- ZSOM Family Medicine Department Urology rotation curriculum
- The University of North Carolina Andrology Fellowship curriculum
- Sexual Medicine Society of North America (SMSNA) Fellowship curriculum

Curricula were reviewed from various sources and the final curriculum created for a 12 month period. Health system and academic resources were delineated and a formal application to the graduate medical education council (GMEC) was submitted and approved in 2016.

Family Medicine Urology Fellowship

About us

Northwell Health is a leader in health care with a strong commitment to innovation and shaping the future of medicine. The aging U.S. population is characterized by tremendous demand for urologic care which, in combination with the relative shortage of urologists, translates to a shortage of access. We are committed to the development of genitourinary (GU) medicine, focusing on the nonsurgical aspects of urologic care in order to expand access and quality of care. Our family medicine and urology programs are nationally known for excellence, innovation, and a commitment to our trainees and their success.

Where we are

The urology fellowship is centered at our Suffolk and Nassau County medical facilities. Primary facilities include the Smith Institute for Urology, North Shore University Hospital, Long Island Jewish Medical Center, Southside Hospital and Huntington Hospital.

For more information, visit Northwell.edu/urology or contact **Lloyd Minsky, MD**, program director, at **(631) 273-1258** or lminsky@northwell.edu.



Curriculum and rotations

1. General Urology – 3-month rotation

Module directors: Lloyd Minsky, MD; Edward Rosenthal, MD
(Southside Hospital)

- Urologic history-taking and physical examination
- Urinary tract infection – urethritis, cystitis, prostatitis, pyelonephritis, epididymo-orchitis
- Acute scrotum
- Benign penile disease: phimosis, paraphimosis, balanitis
- Hematuria management
- Hydrocele evaluation and treatment
- Incontinence evaluation and treatment

Procedural/technical skills:

Urine microscopy, cystoscopy, catheter placement, suprapubic tube placement, bladder scan performance and interpretation, urodynamics performance and interpretation, ultrasound of the kidneys and bladder

2. Andrology and Sexual Health – 2-month rotation

Module director: Bruce Gilbert, MD

- Male infertility – complete evaluation and treatment
- Semen analysis and other andrology-based testing
- Vasectomy
- Erectile dysfunction
- Peyronie's disease
- Varicocele

Procedural/technical skills:

Ultrasound of the pelvis, penis and scrotum; microscopic semen evaluation and interpretation; vasectomy; penile injection

3. General Urology – 3-month rotation

Module directors: Jaspreet Joneja, MD; Ari Bergman, MD; Kip Bodi, MD
(Huntington Hospital)

- Benign prostatic hyperplasia
- Prostate-specific antigen (PSA) screening
- Prostate cancer
- Prostatitis
- Adult stone disease

Procedural/technical skills:

Urine microscopy, cystoscopy, catheter placement, suprapubic tube placement, bladder scan performance and interpretation, urodynamics performance and interpretation, ultrasound of the kidneys and bladder

4. Nephrolithiasis, Upper Tract Obstruction and Renal Masses – 1-month rotation

Module director: Zeph Okeke, MD

- Normal renal physiology
- Obstructive nephropathy
- Stone disease
- Renal cysts and solid mass evaluation

Procedural/technical skills:

Renal ultrasound, cystoscopy and stent placement, ureteroscopy

5. Uro-oncology – 2-month rotation

Module director: Reza Ghavamian, MD

Co-directors: Manish Vira, MD, and Simon Hall, MD

- Genito-urinary cancer
- Minimally invasive/Robotic surgery

Procedural/technical skills:

Bladder installations, intravascular chemotherapy, MRI fusion biopsy

6. Voiding Dysfunction and Pelvic Medicine – 2-month rotation

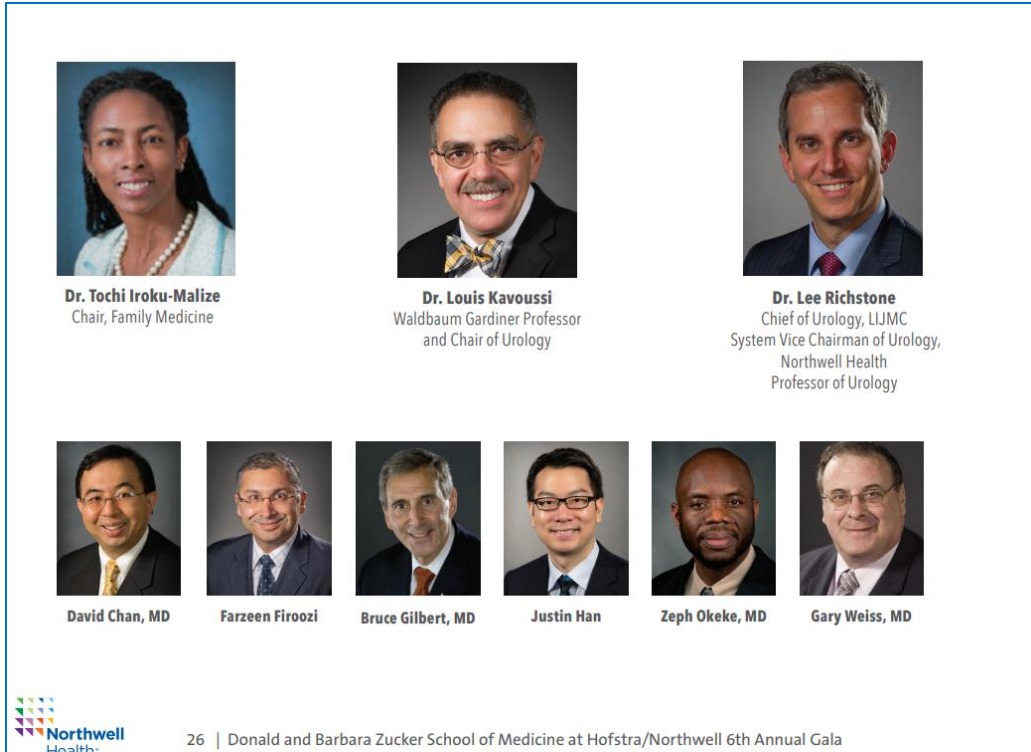
Module directors: Farzeen Firoozi, MD; Justin Han, MD

- Bladder and urethral physiology
- Pelvic pain/pelvic floor/interstitial cystitis
- Incontinence, prolapse
- Ureteral stricture
- Acute urinary retention – catheter placement and management

Procedural/technical skills:

Urodynamic performance and interpretation, catheter placement, suprapubic tube placement, bladder scan performance and interpretation

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Results/Outcomes/Improvements:

The 2017-18 fellow completed his training and went on to practice in the at need region. The 2018-19 fellow secured a position out of state at a system that is looking to replicate this training program. The 2019-2020 fellow has a job in one of our region. For the 2020-2021 academic year we have taken in two fellows and a formal 12 week urology track for family medicine residents began in the 2018-2019 academic year resulting in applicants for the fellowship program.

Significance/Implications/Relevance:

The 5 year journey to create a urology fellowship for family medicine residents has shown that we could address the need for someone with this special added training to help fill a gap within a certain region of our health system. It has also allowed for the family medicine residents currently in training to have a venue for added exposure to advanced urology with the hopes they can utilize these skills in their primary care practice or, should they desire, to obtain a fellowship in this new specialty. This is a viable option for other sites to emulate in order to address their own workforce shortages and an option for family physicians to have an expanded scope of practice that helps care for communities in need.