University of California, San Francisco,
Department of Radiation Oncology
Residency Training Program
Resident Rotation Objectives for PGY-4 Residents
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Professionalism

- Actively participate in all matters of patient care under guidance from the attending physician
- Uphold the mission of UCSF Medical Center as noted by the PRIDE values statement
- Demonstrate sensitivity and responsiveness to patients’ culture, age, gender, sexual orientation and disabilities
- Demonstrate commitment to ethical principles regarding provisions or withholding of medical care, patient confidentiality and informed consent
- Function well as a member of a team and be respectful of staff and referring physicians
- Maintain comprehensive, accurate and timely medical documentation

Practice-Based Learning and Improvement

- Demonstrate ability to use information technology and feedback to improve their fund of knowledge and skills and contribute to patient care
- Demonstrate commitment to life-long learning and practice improvement
- Participate in resident quality improvement curricula and on-going projects

Interpersonal Skills and Communication

- Communicate with patients and their families/caregivers in an easily understood and culturally sensitive manner including the use of professional interpreters when needed
- Take a lead role in patient education, employing appropriate teaching materials
- Maintain patient confidentiality
- Communicate with health care team members including nurses, therapists, dosimetry staff, and other physicians
- Maintain accurate and timely medical records

Patient Care

- Perform initial history and physical examinations noting all pertinent findings and take a major role in formulating strategies for care and management
- Actively participate in radiotherapy planning and carrying out simulations
- Demonstrate understanding of accurate delineation of tumor volumes and knowledge of normal tissue constraints
- Take a major role in monitoring patients under treatment with the attending
- Alert the care team to any new problems of a patient undergoing treatment or workup in the department
- Take a major role in longitudinal care for patients following radiotherapy

**System-Based Learning**

- Understand how patient care affects other health professionals and the health care organization.
- Coordinate medical care with other health care providers involved in the patient’s treatment.
- Incorporate considerations of cost awareness and risk benefit analysis in patient care.

**Medical Knowledge**

- Apply evidence-based medicine to all management decisions.
- Develop more complete and experienced understanding of natural history and management strategies for soft-tissue sarcomas including use of IORT and external beam radiotherapy in both primary and recurrent disease.
- Develop more complete and experienced natural history and management strategies for adult CNS benign and malignant conditions including intrinsic brain and spine tumors and well as metastatic disease, and awareness of ongoing trials and clinical controversies.
- Develop more complete and experienced natural history and management strategies for pediatric extra-cranial malignancies, in particular the most common pediatric cancers that include Wilms’ tumor, Ewing’s sarcoma, non-Hodgkin’s lymphoma, Hodgkin’s lymphoma, and neuroblastoma, but also more rare cancers include aggressive fibromatosis, eosinophilic granuloma, retinoblastoma, and rhabdomyosarcoma.
- Develop more complete and experienced natural history and management strategies for pediatric central nervous system (CNS) malignancies, in particular the most common pediatric CNS cancers that include medulloblastoma, ependymoma, and gliomas of all grades, but also less common brain tumors such as supratentorial PNET, germinoma, and craniopharyngioma.
- Actively participate in weekly sarcoma tumor pediatric tumor board and weekly adult and pediatric neuro-oncology tumor board.
- Demonstrate knowledge of appropriate treatment management decisions.
- Demonstrate an understanding of normal tissue tolerance to radiation.
- Demonstrate appropriate application of photons, electrons, 3D, IMRT, IORT and SRS/SBRT in treatment planning.
- Demonstrate an understanding of the nature and timing of side effects of radiation therapy.
- Actively participate in radiotherapy simulation process.
Resident Time Allocation for Multi-Attending Services

The resident assigned to the Anwar/Braunstein rotation will generally work full-time with Dr. Anwar on Wednesday and Friday, and Dr. Braunstein on Tuesday and Thursday. Monday will function as a preparation and planning day, reviewing contours and plans with Dr. Anwar, or working in clinic with Dr. Braunstein. In case of competing clinical duties, the choice of which duty the resident will perform will be based on which duty has more educational value for the resident. Resident participation in pediatric cases will be prioritized on Dr. Braunstein’s service. Residents will not be required to prepare H&P or follow-up notes for patients they won’t be seeing along with an attending physician.

How the Service Will Ensure One-On-One Teaching

Each attending physician is responsible for spending one hour of one-on-one teaching time with the resident every other week, on average. Dr. Anwar and the resident will discuss on a week-by-week basis when to schedule the teaching session and what topic(s) to cover. Dr. Braunstein will conduct weekly teaching sessions on Tuesdays before or after clinic.

How the Service Will Ensure Contour and Plan Review

Most contouring of target volumes and critical structures will be performed by the resident; resident contours will be reviewed by the resident and attending physician before they are turned in for planning, and plans will generally be reviewed by the resident and attending physician together. In general, on the Anwar service, contours are reviewed on Mondays, and plans are reviewed on Wednesdays and Fridays, ideally ensuring full participation with the resident. On Dr. Braunstein’s service, contours and plans will be reviewed with the resident on Mondays and Tuesdays prior to presentation at weekly chart rounds on Wednesday. The resident is encouraged to submit constraints when completing the contours. If the resident is unavailable to contour and/or review plans with the attending physician because of competing clinical duties, absence, and/or time constraints, the resident will notify the attending physician when he or she is available, and the resident and attending physician will sit down together to review the contours and/or plans in retrospect for teaching purposes, with a goal of 100% of contours and plans to be reviewed together.