

**University of California, San Francisco,  
Department of Radiation Oncology Residency Training Program  
Resident Rotation Objectives for PGY-3 Residents  
David R. Raleigh, MD, PhD; Encouse Golden, MD, PhD**

**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
- Participate in patient education and employ appropriate teaching materials
- Maintain patient confidentiality
- Communicate with health care team members including administrative assistants, nurses, therapists, dosimetry staff, and other physicians
- Maintain accurate and timely medical records
- Communicate with in-coming resident (via a "sign out" list) the needs and goals of patients that are actively under the care of the attending physician

**Patient Care**

- Perform initial history and physical examinations noting all pertinent findings and begin to formulate strategies for care and management
- Participate in radiotherapy planning and carrying out simulations
- Participate in drawing accurate tumor volumes and organs at risk
- Monitor patients under treatment with the attending, including planned and unplanned on-treatment visits
- Alert the care team to any new problems of a patient undergoing treatment or workup in the department

- See follow-up patients with the attending

### **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
- Learn the natural history and management strategies for adult CNS benign and malignant conditions including intrinsic brain tumors and metastatic disease
- Learn the 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
- Actively participate in weekly adult and pediatric neuro-oncology tumor boards and weekly gamma knife tumor board
- Demonstrate the ability to logically formulate treatment management decisions
- Demonstrate an understanding of normal tissue tolerance to radiation
- Demonstrate an understanding of the use of photons, electrons, 3D, IMRT, and SRS/SBRT in treatment planning
- Demonstrate an understanding of the nature and timing of side effects of radiation therapy and how to manage them
- Participate and demonstrate an understanding of the core components of the simulation process

### **How the service will ensure one-on-one teaching**

Meet with Dr. Raleigh to review seminal literature pertaining to new patient consults each Thursday morning from 9:30am – 10:00am.

Meet with Dr. Golden to review topics pertaining to primary and secondary CNS malignancies each Friday morning from 9:00am – 10:00am.

### **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. Plans will generally be reviewed by the resident and attending physician together. 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. In general, most simulations with Dr. Raleigh will occur on Thursday morning, and contours should be completed the same day after face-to-face

review with Dr. Raleigh. Plans will be reviewed face-to-face in dosimetry on Thursdays and occasional Fridays, or remotely on Fridays as necessary. With Dr. Golden, contours should be completed the same day as patients are simulated.