

**University of California, San Francisco**  
**Department of Radiation Oncology**  
**Residency Training Program**  
**Resident Rotation Objective for PGY-4 Residents**  
**I-Chow Hsu, M.D.**

**Patient Care**

In addition to the guidelines listed by the ACGME, PGY-4 residents must be able to provide compassionate, appropriate and effective treatment for patients' physical problems arising out of their disease. They must promote health maintenance both during and after treatment. For each patient who comes under their care, PGY-4 residents will be expected to:

- (i) Communicate effectively and demonstrate respectful behavior when interacting with the patient and their families/caregivers.
- (ii) Gather essential and accurate information about the patient from the review of all pertinent medical records and diagnostic tests
- (iii) Gather pertinent information from the patient through interview history and physical
- (iv) Counsel and educate patients and their families
- (v) Begin to develop and carry out management plans
- (vi) Select the appropriate technique for and competently perform the procedures that are considered essential for the radiotherapeutic management and follow-up of patients encountered on the service, including: GYN/GU malignancies:
  - 3D conformal radiation therapy (3DCRT)
  - Intensity Modulated Radiation Therapy (IMRT)
  - High Dose Rate (HDR) Brachytherapy
  - Hyperthermia
  - Intraoperative Radiotherapy (IORT)

*In addition the PGY-4 resident is expected to understand the rationale for dose, and fractionation for all radiotherapeutic modalities and hyperthermia. The PGY-4 should demonstrate proficiency with imaging using transrectal ultrasound for brachytherapy procedures.*

This process will include mastery of all aspects of the simulation and treatment planning process including delineation and design of treatment portals, selection of photon/electron energy, beam modifiers, radiotherapy dose and fractionation, identification and outline of tumor and critical organs on CT/MRI scans for the purpose of treatment planning, evaluation of treatment plans, evaluation of port films.

**Medical Knowledge**

PGY-4 residents will demonstrate a sound understanding of the basic science background of oncology and apply this knowledge to the clinical care of patients encountered on this service, including:

- understand the epidemiology, natural history and pathophysiology of tumor types encountered on this service
- understand the management of tumor types encountered on this service
- understand the expected physical findings on follow-up after radiotherapy of tumor types encountered on this service
- understand the management of acute and late toxicity related to radiotherapy of tumor types encountered on this service
- be knowledgeable of hallmark randomized trials of tumor types encountered on this service
- be able to manage local recurrence of tumor types encountered on this service

### **Practice-Based Learning and Improvement**

PGY-4 residents will demonstrate the ability to use information technology and feedback to improve their fund of knowledge and skills

### **Interpersonal Skills and Communication**

PGY-4 residents will:

- communicate with patients and their families/caregivers in an easily understood, culturally-sensitive manner
- communicate with other physicians and health-care professionals
- work effectively as a team member, progressively accepting more responsibility and participate in a leadership role as they progress through their residency
- maintain comprehensive, accurate and timely medical records

### **Professionalism**

PGY-4 residents will:

- demonstrate compassion, respect and integrity and responsiveness to patients' needs
- be accountable to their patients and the profession
- always demonstrate a commitment to excellence and on-going professional development
- function well as a member of a team
- practice in an ethical manner with regard to provision or withholding of care, confidentiality of PHI, informed consent
- maintain comprehensive, accurate and timely medical records

### **Systems-Based Practice**

PGY-4 residents will:

- demonstrate awareness of and responsiveness to the health care system and ability to call on resources to provide care.
- understand how their professional patient care practices affect other health care professionals, the health care organization and the community

- practice cost-effective health care that does not compromise quality of care
- advocate for quality patient care practices and help patients navigate through complexities in the health care system
- be able to partner with health care managers and providers to assess coordinate and improve health care; be aware of how these activities affect system performance

### **Resident Time Allocation for Attending Services**

The resident assigned to Dr. Hsu's rotation will work full-time with Dr. Hsu whenever he is in clinic (5 days per week). In case of conflict with other resident activity, the activity with the most educational value for the resident will have priority. 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**

The resident assigned to the Dr. Hsu will work one-on-one with Dr. Hsu in the clinic and in the operating room daily. One-on-one teaching will be done though out the working day. Additional teaching session (generally > 1hr/wk) will be conducted on Fridays on general oncology topics.

### **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. 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.