Kaiser Permanente is one of the nation’s largest and most highly regarded managed care delivery organizations. One in four Californians is a Kaiser Foundation Health Plan member. As a member of our residency program, you will learn to practice cost-effective yet caring medicine, an approach indispensable to providing quality health care in all future medical settings.

Kaiser Permanente Los Angeles Medical Center (LAMC) serves as a referral center for more than three million Kaiser Permanente members throughout Southern California. It is a major tertiary care facility for services including cardiac catheterization, cardiac surgery, hemodialysis and peritoneal dialysis, bone marrow transplantation, radiation oncology, neurosurgery, and specialized urologic surgery. The medical center also maintains an active teaching program in most surgical subspecialty services.

The Program
The residents will spend one year on general surgery, one year on research, and four years on clinical urology. The Los Angeles Medical Center is a major referral center for nine other Kaiser Permanente medical centers in Southern California, resulting in a large volume and variety of complex urologic cases.

The proximity of resident and staff offices fosters a close working relationship between residents and staff members, and the residents feel that staff members are always available to answer questions. Staff members take a personal interest in the residents, and departmental social gatherings are common. There is minimal hierarchy as the residents are treated as junior staff, and given autonomy early on in terms of surgery and run their own clinics.
Kaiser Permanente urology residents have traditionally scored extremely well on in-service exams as well as board certification. The volume of surgical cases is invariably high as measured by the USOL.

**Goals & Objectives**
The mission of the KP urology residency program is to train the best urologist for a career in academic or community practice.

The residency program is designed to provide a maximal educational experience in operative, procedural, and office urology. In addition, residents receive training in clinical and epidemiological research.

There are educational conferences in the form of clinical presentations, lectures, reviews of recent literature, discussions of research projects, and pathology reviews. Patient rounds are made daily, and grand rounds are held weekly during which resident and attending physicians are free from all clinical duties. Visiting professors are scheduled on an annual basis, and residents are strongly encouraged to attend outside meetings and conferences. The Department of Urology hosts the annual Kaiser Permanente Urology Symposium which attracts experts from around the world.

**Clinical Experiences & Rotations**
The first year of the residency is spent with the Department of General Surgery. From their first day as interns, residents have a great exposure to the operating room and act as primary surgeons on a large number of cases. Interns are not relegated to the wards, instead they are expected to assist with all of the surgical team’s operative cases. This hands-on approach well prepares the pre-urology resident for urology. Overnight call frequency is about one in seven nights and short call about one in seven evenings. Residents give the general surgery experience uniformly high praise as an educational and valuable experience.

Starting in the PGY-2 year, the residents are fulltime in the Department of Urology. Half of the year the residents will be introduced to clinical urology, where they will begin to learn basic urologic procedures. They will also take call with the chief residents. The other half of the year the residents will be on research. They will work early on with our urology faculty and the Research and Evaluation department. The research PGY-2 will also be exposed to operative urology as well as learning to manage emergent urologic consults. They will also rotate for one month on the USC LA County Hospital trauma service. In PGY-3 year the residents are given more autonomy as they are increasingly given the role of the primary surgeon in the operating room, and they spend time on each of the Urology sub-specialty services. Call frequency is about one in four, and all call is taken from home.

In PGY-4 year, residents have six months of protected research time, free from clinical duties and call. The research resident works closely with the urology faculty and with the Director of Research for Southern California Kaiser, Dr. Steve Jacobsen, focusing on large-scale epidemiologic research. Much of this research will be continuation of what was started in their PGY-2 year. The remaining six months of the PGY-4 year is spent on the pediatric urology service at LAMC.

In the PGY-5 year, urology residents will rotate at UCLA for transplant surgery, and Downey and West Los Angeles Kaiser Hospitals. During the entire third year of urology, the residents are acting chiefs. These rotations are remarkable for their high operative volume and extensive exposure to minimally invasive surgery.

The fourth and final year of residency is spent entirely at the Los Angeles Medical Center as Chief resident. The chief residents split their time among the sub-specialty services and directly supervise the junior urology residents.

**Organization**
The Urology Department consists of nine full-time staff members in six clinical services:

**Neurourology and Reconstructive Surgery**
Polina Reyblat, MD
Chris Tenggardjaja, MD

**Pediatric Urology**
Richard Hurwitz, MD, FAAP
Monica Metzdorf, MD

**Endourology/Stone Disease & General Urology**
Mark Lassoff, MD, MBA, MPH
James Murphy, MD
Gary Chien, MD

**Urologic Oncology**
Jon Kaswick, MD
David Finley, MD

**Robotic Urologic Oncology/Minimally Invasive Surgery**
David Finley, MD
Gary Chien, MD

**Male Infertility and Infectious Diseases**
Charles E. Shapiro, MD, FACS

**Research and Evaluation**
Steven J. Jacobsen, MD, PhD
Neurourology and Reconstructive Surgery
Junior and chief residents work with Drs. Reyblat and Tenggardjaja on the Neurourology and Female Urology Service at the LAMC. Residents learn the most advanced techniques for the diagnosis of urinary incontinence, voiding dysfunction, chronic pelvic pain, and male sexual dysfunction. In addition, the service has special expertise in managing patients with chronic neurologic disorders such as multiple sclerosis, spinal cord injuries, and myelomeningocele. At the end of training, residents are expected to be familiar with urodynamic equipment and can perform and interpret various studies in evaluation of incontinence.

A wide variety of surgical procedures for the treatment of urinary incontinence and voiding dysfunction are performed in this service, including abdominal and vaginal suspensions, sling procedures, collagen injection, reconstructive surgery with bowel segments, and prosthetic surgery. Additionally, residents have a generous exposure to the diagnosis, workup, and treatment of male sexual dysfunction. The service is also the regional referral center for all cases of penile curvature and Peyronie’s disease as well as various types of urethral stricture disease. The resident is expected to be able to perform all these tests, interpret them, and use them to reach a diagnosis.

Medical management, including pharmacological agents (oral and intracavernous injection) is offered here. Microvascular surgery for selected cases of vasoulogenic impotence and various types of penile implants are also performed. The service is also the regional referral center for all cases of penile curvature and Peyronie’s disease as well as various types of urethral stricture disease, so the resident will be exposed to a large volume and wide variety of cases.

The educational goals of the Neurourology and Reconstructive Surgery Service include:
• Understanding the fundamentals of urodynamics.
• Diagnosing and managing the various types of urinary incontinence, voiding dysfunction and male sexual dysfunction.

Pediatric Urology
As the regional pediatric urology referral center, the service receives many complex referrals from the other 12 Kaiser Permanente Medical Centers in Southern California. Dr. Hurwitz and Dr. Metzdorf have a broad interest in all aspects of Pediatric Urology.

The Pediatric Urology Service includes a busy clinic practice and an active OR schedule. In the office, the residents will see a large volume of both routine and complex cases, including antenatal hydronephrosis, vesicoureteral reflux, hypospadias, cryptorchidism, and voiding dysfunction. Once or twice per month the multidisciplinary myelomeningocele clinic meets in the pediatric urology offices, allowing the service to coordinate the orthopedic, urologic, physical medicine, pediatric, nutritional, and social service needs of these children with multiple problems. In the operating room, Dr. Hurwitz and Metzdorf have a broad experience repairing all of the congenital anomalies. Optimal exposure, delicate handling of tissues and meticulous technique are emphasized.

The educational goals of the Pediatric Urology Service include:
• Understanding the normal embryology of the genitourinary system.
• Understanding the theories of pathoembryology that are believed to account for the various congenital malformations of the genitourinary system.
• Learning pattern recognition of urinary tract malformations on imaging studies.
• Understanding the evaluation and treatment options of the more frequently encountered conditions.
• Learning how to perform and record a thorough examination of the external genitalia for hypospadias, undescended testes, acute scrotal conditions, hernia/hydroceles, and varicoceles.
Understanding the surgical approaches and techniques available to correct the various genitourinary congenital abnormalities as well as becoming expert in assisting and performing these operations.

**Endourology/Stone Disease & General Urology**

The Endourology/Stone Disease & General Urology Service is a high-volume rotation with many tertiary referrals. The resident physician will work intimately with Dr. Murphy, Dr. Lassoff and Dr. Chien, the regional stone specialists. The resident will have exposure to many cases requiring ESWL, PCN, and rigid and flexible uroscopy. The resident physician will become proficient in using the various stone baskets as well as laser lithotripsy. The resident will also learn the indications for surgical intervention for stone disease, the various endoscopic techniques, and the metabolic studies needed to determine the etiology of urolithiasis.

The educational goals of the Stone/Endourology Service include:

- Understanding the pathophysiology and diagnosis of urolithiasis and urinary obstruction.
- Learning the indications and appropriate surgical procedures for all aspects of stone disease.
- Being exposed to all the current endourological techniques and becoming facile with each procedure.
- Learning to manage patients medically to prevent recurrent stone formation.

As part of the general urology aspect of this service, the resident will learn to diagnose and treat common urologic conditions such as BPH, carcinoma of the bladder and prostate and scrotal conditions. The resident will also learn the techniques of transrectal ultrasound with biopsy of the prostate as well as renal ultrasound. In the cystoscopy suite, the resident will be exposed to TUIP, TURP, and electrovaporization of the prostate. The resident physician will also learn to perform various general urologic surgeries, including outpatient scrotal surgeries and circumcisions.

**Urologic Oncology**

The Urology Oncologic Service at LAMC is a multispecialty service including Urology, Radiation Oncology, and General Surgery, and it is the regional referral center for all the Kaiser Permanente Medical Centers in Southern California. Drs. Kaswick, Finley, and Chien manage a large volume and wide variety of routine and complex Urologic Oncology cases. Their main interest is nerve-sparing cancer surgery for testicular tumors and prostate cancer. Drs. Kaswick and Finley perform all types of urinary diversion after radical cystectomy, and have vast experience with complex reconstruction of the urinary tract. A wide variety of renal tumors are managed at the Urologic Oncology Center, including nephron-sparing surgery and radical nephrectomy with extraction of IVC thrombus.

The educational goals of the Urologic Oncology Service include:

- Learning the various surgical techniques, including the role of laparoscopic surgery in the treatment of urologic cancers.
- Becoming familiar with the multi-disciplinary approach to the treatment of GU malignancies.
- Learning indications and prognostic factors, and utilizing preoperative and postoperative nomograms as predictors for cancer recurrence in patients with prostate cancer.
- Urologic Oncology is a very rich field for clinical research. Residents will be involved in updating the database.
• on various oncologic diseases and collecting data for clinical publications.
• Emphasis will be placed on thorough clinical and pathological evaluation of all urologic cancers. Residents will be involved in performing literature reviews and statistical analysis, and initiating clinical projects pertaining to Urologic Oncology.

**Robotic Urologic Oncology Minimally Invasive Surgery**

Drs. David Finley and Gary Chien perform robotic urologic oncology surgeries. Kaiser Permanente Southern California has one of the largest volume robotic surgery programs in the world, and Kaiser residents are exposed to a breadth of robotic surgeries on this service. As residents become facile with these surgeries, they are encouraged to be the lead surgeon on the robot console.

In addition, on this service there is a high volume of minimally invasive urologic cases, including laparoscopic adrenalectomies, laparoscopic and robotic partial and radical nephrectomies, pyeloplasties and excision of renal cysts.

On the robotic/minimally invasive urologic service, the resident physician will learn about:

- The fundamentals of robotic and laparoscopic urologic surgery
- Indications for surgery for renal and adrenal pathology
- Manage robotic and laparoscopic patients perioperatively
- Be exposed to the latest in cutting-edge technology/technique in minimally invasive urologic surgery

**Male Infertility and Infectious Diseases**

The Male Infertility and Infectious Disease Service, directed by Dr. Shapiro, perform microsurgery for male infertility, including vasectomy reversal, vasoepididymostomy, and varicocele repair. In association with Dr. Shapiro, the resident will spend time in the Urology Clinic seeing patients with a wide spectrum of urologic diseases in addition to patients referred specifically for evaluation of possible male factor infertility. The resident will learn diagnosis and treatment techniques for these patients and gain operative experience in general open and endoscopic urologic procedures, as well as microscopic surgical techniques for correction of male factor infertility.

The educational goals of the Male Infertility and Infectious Disease Service include:

- Evaluating and diagnosing male factor infertility.
- Learning to communicate to the couple their realistic options for treatment.
- Diagnosing, evaluating, and treating urinary tract infections.

**Research and Evaluation**

The resident physician will work closely with Dr. Steven Jacobsen during their PGY-2 and PGY-4 years, learning the basics of epidemiological research, including principles of designing, executing, and finally preparing a manuscript for a research project. In this process, the resident physician gain experience in critically evaluating journal articles/scientific studies.