

Minutes form board meeting in the Nordic Residents in Urology

Time: January 23rd, 2012, 12.00-18.00

Place: Copenhagen Admiral Hotel, Toldbodgade 24-28 - DK-1253 Copenhagen K - Denmark
<http://www.admiralhotel.dk/>

Percipients: Sven Løffeler (Norway), Henriette Veiby Holm (Norway), Ylva Høge (Sweden), Teemu Murtola (Finland), Mikkel Fode (Denmark), Dag Gullan (Norway) and Martin Skøtt (Denmark).

Chairman: Mikkel Fode

Minutes: Martin Skott

1. Welcome and lunch

2. Introduction

A brief background of the meeting

Mikkel gave a short introduction to the background for the meeting. Last year at the NUF meeting in Tampere (Finland), Claus Dahl (Denmark) and Sven Løffeler (Norway) suggested that younger urologists from the Nordic countries should make a small group in which corporation and educational strategies could be made.

3. Representatives and countries

Representatives from each country introduces themselves and gives a brief presentation of their country's residency program and group of young urologists

Finland: See attached presentation.

Norway: There are about 100 active urologists. There are about 15-20 residencies in Norway. It is a sub-specialty within general surgery. As such there is a requirement for completion of general surgery, which takes 3 years and 3 years of recognized training from nationally accredited urology units. The latter is divided into two groups. Group 1 unit are restricted to university hospitals and each trainee must complete 18 months of training in such units. The remaining accredited units have group 2 status.

In total it takes 6 years to become an urologist in Norway. During those 6 years you have to pass board regulated theoretical and "hands on" courses. There are 6 mandatory courses for urology and 10 for general surgery. Furthermore there is a curriculum for minimum required operational and clinical skills. Research activity is not required.

TUR club is an official institution within the Norwegian Association of Urology, which is arranging meetings for younger urologist twice a year.

Sweden: In 2006 major changes were performed in Sweden because urology became a subspecialty within general surgery. In total it takes a minimum of 7 years. Under current system compulsory rotations are surgery and anaesthetics.

Because of this new structure every residency has to go to a huge amount of courses, both within general surgery and urology. At the moment there is a problem with the supply of courses. Furthermore there is a curriculum for minimum required operational and clinical skills. Moreover a scientific project, either in general surgery or urology and an audit. BUS is the association for younger urologists. There is an ongoing discussion of whether urology will get its position as a separate speciality back.

Denmark: See attached presentation.

4. Goals for the group

Brainstorming session about what we want to achieve in the group. Possible topics could be joint courses and education as well as future Scandinavian research projects and clinical exchange.

This residency group: To get this group approved we need to wait to the next general assembly in NUF at Sandefjord, Norway at 20-24th of August 2013.

A name for this group of residents within NUF was decided "Nordic Residents in Urology". Also we need to get a link on the NUF homepage and to our Facebook group "Nordic Residents in Urology". Mikkel and Sven will contact the NUF President and Secretary General and inform them about the group and our plans. If approved by the President and Secretary General, Mikkel and Martin will contact the Webmaster of NUF, Jørgen Bjerrgaard from Aarhus, Denmark about the NUF homepage.

Courses: Further work in this group would be to arrange joined non-compulsory courses within the Nordic countries. Because of the high expense of "hands on" courses, we decide to begin with theoretical courses. Everyone agreed that a main goal was to make joint courses of high quality. Also there was some discrepancy about the founding of those courses. Problems include that the Norwegians were not able to attend company-sponsored events. Danish residents were not likely to get credit towards residency for attending those courses. Sweden could have problems to get the courses approved also. Furthermore it was important for the Swedes to get a diploma.

NUF meeting: At the next NUF meeting in Norway I 2013 a resident session of about three hours will be planned (ex. Tuesday afternoon). An invited speaker will give a 1 hour lecture followed by a "nightmare session" where 8 residents present clinical cases and a panel of experts are discussion this with the residents and the audience. This would create a nice atmosphere for asking questions. It is important that the moderator of the discussion is very active.

Clinical studies within Scandinavian: It was pointed out that there is a need for an expanded cooperation in Nordic countries to perform large volume clinical studies (ex. retrospective studies) that could compete with the European and American studies. An aim could also be to write non-original work, which might be published in Scandinavian Journal of Urology, in a kind of "residents' corner"

One proposal was to make a database in which younger researchers within urology, write a short description of the project they are working with. This could create a basis for further collaborating within the Nordic countries.

Finally all agreed that a structure for this group of residents must be in place as soon as possible, so future generations can take over easily.

5. Structure and mission statement of the Nordic Residents in Urology

- How should we define our overall goal(s)?

To increase collaboration and networking between young urologists in the Nordic countries in order to improve overall education and research opportunities.

- How many representatives should we have from each country and how should these be chosen?

Two from each of the Nordic countries. The members should be elected from the Younger Associations of Urology from each county. In Finland the two members should be elected among the residents within the national urological association, as no separate association for young urologists exists.

Mikkel Fode was elected as chairman of the group.

- How often should we aim to meet in the future?

Two meetings each year, one of those meetings should be a Skype meeting. There should always be meetings in connection with the biannual NUF meeting.

- Who takes responsibility for formulating a draft of this prior to the next meeting?

Mikkel and Martin.

6. Organization of concrete ideas

- What concrete plans is realistic and desirable?

Session at the next NUF conference (2013)

Joint Nordic theoretical courses (after the next NUF conference)

A research database on the NUF webpage (before the next meeting in 2012)

A Facebook group (now)

Continued meetings within the Nordic Residence in Urology group

- What steps will need to be taken before the next meeting?

Permission from the NUF board (Sven / Mikkel)

Inquiring from the Scandinavian Journal of Urology about a residents' corner (Sven)

Setup the skeleton for the database at the NUF webpage (Martin)

Facebook (Martin)

7. Next meeting

- When and where will the next meeting be held?

Next meeting is planned to be 20-21th September 2012 in Sandefjord, Norway.

- Who will organize it?

Sven organizes the meeting and Mikkel is responsible for the agenda

- What Items should we aim to put on the agenda?

Arrange the session for the next NUF meeting in Sandefjord in August 2013.

Early organization of the first joint course.

Follow up on the research database and facebook page.

8. Dinner

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