

## EVALUATION SUMMARY

Western Section AUA  
 Tuesday, Oct. 27, 2009, 3:30pm - 5:30pm  
 Bladder & Urethra

	Scale: = POOR / ADEQUATE / EXCELLENT				
	1	2	3	4	5
<b>PROGRAM OBJECTIVES</b>	<b>Total Pts</b>	<b># Returned</b>	<b>Total Ave Score</b>		
Describe the limitations of bladder cancer management in underdeveloped areas.	820	182	4.51		
Compare the outcomes of robotic cystectomy in various stages of bladder cancer and importance of positive margins.	813	182	4.47		
Review the results if surgery for advanced testis cancer.	812	182	4.46		

## OVERALL EVALUATION

Increased My Awareness/Understanding of the Subject	830	182	4.56
Will Influence How I Practice	783	182	4.30
Helped Me Improve Patient Care	788	182	4.33
Was Educationally Sound and Scientifically Balanced	829	182	4.55
Avoided Commercial Bias or Influence	840	182	4.62

## Points that will influence the way I will practice:

Chemotherapy management.  
 Contemporary surgical outcomes - standardization of complication reporting.  
 Do more extensive lymph node dissection for bladder cancer.  
 I will avoid practicing in Mongolia.  
 Repeat TUR for high.  
 I learned about the principles of diet in relation to urothelial carcinoma.  
 Don't try NOTES surgery - looks too difficult.  
 Neoadjuvant chemotherapy is becoming important in downstaging disease.  
 I will refer cystectomies to our robotic surgeon as it now appears possible to do this surgery.  
 Bowel injury common to pelvic GSW.  
 Cont. to treat TCC soon enough.  
 Remember: "Bad cancer is bad, big bad cancer is worse."  
 Robotic potential to reduce positive surgical margins.  
 Interested in pursuing laser ablation of strictures rather than multiple DUIU.  
 Keep cystectomy "on the table" even while pursuing other options in Rx of CUB.  
 The importance of margin status after cystectomy and survival.  
 Treatment of bulky testes tumors and chemo.  
 Will discuss dietary risk factors for bladder cancer more with my patient.  
 I will consider using laser ablation of urethral strictures.  
 Do extended mode dissection during cystectomy. Act early in aggressive T1 disease.  
 The presence of advanced disease in T1 TCC bladder - highlights the need for more aggressive management of these patients.  
 Use of Holmium Laser for urethral strictures.  
 Dietary factors are important in prevention and control.  
 More research work needed for bladder cancer patients.  
 Use of Holmium Laser for urethral strictures repair.

**Points that will influence the way I will practice: (Continued)**

Push for extended node dissection. Strongly consider neoadjuvant chemo for higher risk bladder cancer patients.

Use of laser vaporization for urethral and bladder neck strictures.

Use laser if best for bladder neck strictures.

Consider use of holmium laser treatment for urethral strictures.

<b>Mark Gonzalzo, M.D. - State of the Art</b>			
The speaker demonstrated current knowledge of the topic.	851	182	4.68
<b>Moderators: Siamak Daneshmand &amp; Dr. Theresa Koppie</b>			
The moderators guided and enhanced this session	842	182	4.63

**Comments about moderators:**

Very Good.

On time, guided good discussions.

Well done - guided discussion.

Excellent session.

Enjoyed the presentation.

Good questions.

Good. Kept on time.

Outstanding.

Did a good job.

Well done.

Knowledgeable.

Dr. Daneshmand was very engaged and seemed prepared. Dr. Koppie not so much so.

Very Good.

Good direction.

Very good comments and time management of session.

Good comments.

Good.

Good job.

**Comments about speakers/course content:**

Excellent talk by Dr. Gonzalzo.

Good.

Well-covered.

Would prefer for the moderators not to present and module at same session - one or the other- different mtg.

Good variety of topics.

Great.

Good presentation.

Interesting topics this session.

Knowledgeable.

Excellent.

Excellent presentations.

Very good.

Very good topics & presentations.

Excellent and clear presentations

Useful and appropriate.

Good.

Good job.

(Continued)

**Recommended topics for future meetings:**

State of the Art Lecture on testis cancer management.

Would love a new technology lecture.

Confocal laser endomicroscopy (bladder real time).

Urinary diversion techniques in bladder cancer patients.

Intravesical chemotherapy.