Easily accessible, up-to-date and standardized training model in Urology:
E-Learning Residency training program (ERTP).

INTRODUCTION AND OBJECTIVE: There is no standardized and up-to-date education model for urology residents in our country. We aimed to describe our National E-learning education model for urology residents.

METHODS: The ERTP working group; consisting of urologists specialized in their field was established by Society of Urological Surgery to create E-learning model and curriculum at April 2018 Learning objectives were set up in order to determine and standardize the contents of the presentations. In accordance with the Bloom Taxonomy, 834 learning objectives were created for a total of 90 lectures (18 lectures for each PGY year). Additional to Campbell-Walsh Urology11- Edition/2016, EAU and AUA guidelines of 2018, Core training program of National Curriculum Development and Standardization System of Medical Specialization Board (TUKMOS 2017) core training program and Society of Urological Surgery Accreditation Commission-Urology Specialization Training (UCDYK) core training program were used for preparing learning objectives. Totally 90 videos were shoot by specialized instructors and webcasts were prepared. Each instructor has also prepared 10 multiple-choice questions and they were embedded into the lectures for the quality assessment of the videos. Webcasts were posted at uropedia.com.tr, which is the web library of Society of Urological Surgery. Feedbacks of webcasts were requested and also satisfaction evaluation forms were filled from both instructors and urology residents. An assessment exam was performed at the end of the ERTP in 31 May 2019.

RESULTS: A total of 43 centers and 250 urology residents were included in ERTP between 2018-2019. A training supervisor was assigned from each center for the follow-up of ERTP. Ninety lectures were presented between September 2018 and May 2019. There were 93/38/43/34/25 urology residents at 1st/2nd/3rd/4thand 5th year of residency, respectively. Majority of the residents (99.1%) completed the ERTP. The overall satisfaction rate of residents and instructors were 4,29 and 4,67(min:1 so bad, max:5 so good). An assessment exam was performed to urology residents at the end of the ERTP and the mean score was calculated as 57.99 points (min:20, max:82). A detailed report including exam results and lecture tracking status was given to the residents and the all training supervisors at the end of the program.

CONCLUSIONS: We used this reliable, easily accessible e-learning platform for standardization of training in urology on national basis. We aim to share this model with international residency training programs.