



# RCSI

ROYAL COLLEGE OF SURGEONS IN IRELAND

COLÁISTE RÍOGA NA MÁINLEÁ IN ÉIRINN

## Grant/Fellowship Report Form

<b>Fellowship/Grant Holder Name</b>	Mr Gregory Nason
<b>Brief biography, including qualification and year of graduation (no more than 100 words)</b>	2009- BA MB BCh BAO (Hons TCD)- Trinity College Dublin 2014- MSc in Human Factors and Patient Safety, RCSI 2017- FRCS Urol. 2018- Fellowship of European Board of Urology 2020- Society of Urologic Oncology Fellowship, University of Toronto
<b>Title of Project/Fellowship</b>	Society of Urologic Oncology Fellowship, University of Toronto
<b>Year of Award:</b> <b>Commencement Date:</b> <b>Conclusion Date:</b>	2019 July 2019 June 2020

### Summary (no more than 250 words)

Following completion of higher surgical training in Ireland, I embarked on a two year fellowship in urologic oncology at the University of Toronto. I am the first Irish urologist to complete the Society of Urologic Oncology accredited fellowship here in Toronto.

The two year fellowship consists of one year primarily in research and clinics and the second year is a purely operative year. The fellowship in Toronto offers a unique balance of academic and clinical practice. The academic year was a great experience which allowed me to broaden my research skills, present at international meetings, be awarded peer-review grants and partake in clinical trials.

The second year of the fellowship was the highlight for me. As any surgeon, we look forward to our theatre days the most. The operative year of the fellowship has been an intensive immersion in complex urologic oncology. Our base hospital- Toronto General is consistently a top 10 hospital in the world (4<sup>th</sup> in 2019, 7<sup>th</sup> in 2018)- it is a tertiary referral centre for Ontario and Canada. During this past year, I have operated 4-5 days a week and have been involved in over 300 major oncological resections. We perform a mix of open and robotic surgery. We have close links with our surgical oncology colleagues and regularly participate in multi-visceral resections with the colorectal, gynae, HPB, orthopaedic and sarcoma services. The fellowship has enhanced my operative skills and given me an appropriate degree of confidence for consultancy.

**Grant Report (in the region of but no more than 500 words)**

Objectives of Project/Fellowship:

1. Accreditation as a Urologic Oncologist
2. Competence in complex open urological oncology
3. Competence in robotic pelvic and upper tract oncology
4. Participation in multi-visceral resections

Did you achieve these objectives?

Yes- I have graduated as a Society of Urologic Oncology fellow. I have gained the appropriate level of skill and confidence to practice as an independent Urologic Oncologist. I have broadened my knowledge and clinical skills to diagnosis, risk stratify and manage urologic oncology patients. The second year of the fellowship was essential for my operative independence. One of the highlights of the operative year was the involvement with the sarcoma service. These resections required huge degrees of coordination between services to achieve firstly oncological clearance and then secondly to reconstruct their anatomy for a functional life.

In your opinion, what is the value of your award to:

(a) Yourself

In the simplest form, the grant provided me with financial support which was essential in moving myself and my family to Canada. Fellowships are an expensive endeavour yet very fulfilling both personally and professional. The support of the RCSI certainly eased the early transition to life abroad.

The fellowship has broadened my skills and confidence to practice as a consultant. It enhanced my training in Ireland and proved to me that we are training young surgeons to a high standard in Ireland. Irish fellows are coveted abroad as we have good clinical skills and have a degree of maturity to run clinics and operative lists.

(b) The institution in which you worked

The fellowship benefits hugely from international fellows. Firstly- fellows are the backbone of the clinics. Fellows see the vast majority of patients in outpatient clinics. Secondly, fellows are part of the city wide on-call rota. Thirdly, fellows are engrained in the training both academically and operative of the University of Toronto residents. For more routine cases, it is often the fellow who supervises the residents. Finally, the fellowship appreciates an international perspective- every health service is different and international fellows bring a new flavour to the program.

I also hoped to develop a fellowship link here which could be utilised for future Irish urology trainees. This coming July another Irish urologist is commencing the 2 year fellowship.

(c) In the future for Irish patients

My goal has always been to return to Ireland and practice as a Urologic Oncologist. I am now in the position to offer care to Irish patients from diagnosis through their cancer journey. I believe I will be able to offer complex oncological care to Irish patients and will participate in the training of future Irish urologists.

