



# RCSI

ROYAL COLLEGE OF SURGEONS IN IRELAND

COLÁISTE RÍOGA NA MÁINLEÁ IN ÉIRINN

## Ethicon Grant/Fellowship Report Form

<b>Grant Holder Name</b>	Niall Davis
<b>Brief biography, including qualification and year of graduation (no more than 100 words)</b>	<p>I am recently graduated from the Irish higher surgical trainee (HST) in urology. I completed my clinical fellowship in The Austin Hospital in Melbourne, Australia in February 2019. The primary focus of my fellowship was on minimally invasive urological surgery.</p> <p>I obtained an honours degree in medicine in UCD in 2006, completed my PhD in urology in 2012 and graduated with my FRCS Urol in 2015 in Dublin. I have completed a Diploma in Health Economics and published 96 publications in pubmed indexed medical journals. I have been registered on the Specialist Division of the Register for urology in Ireland since January 2019.</p>
<b>Title of Project/Fellowship</b>	Minimally invasive urological surgery in The Austin Hospital, Melbourne, Australia
<b>Year of Award:</b> <b>Commencement Date:</b> <b>Conclusion Date:</b>	<p>Year of award: 2017</p> <p>Commencement date: July 2017</p> <p>Conclusion date: February 2019</p>

<b>Summary (no more than 250 words)</b>
---

I commenced my urological fellowship in August 2017 in the Austin Hospital in Melbourne, Australia. The Austin Hospital is a high-volume tertiary referral centre for Victoria and the Urology Department consists of a team of 20 consultant urologists, 2 international fellows, 3 Australian Urological trainees and 3 Clinical Nurse Specialists. My weekly timetable included 7 theatre sessions, 1 research session, 2 teaching sessions, 1 outpatients clinic and 1 endoscopy list.

My fellowship was primarily focused on minimally invasive urological techniques such as percutaneous nephrolithotomy (PCNL), upper tract laparoscopy and robotic surgery. In the field of endourology I gained proficiency at PCNL and mini-PCNL. I also learned how to make my own access and tracks into the kidney for this procedure under fluoroscopic guidance. During my fellowship, I was taught laparoscopic procedures including laparoscopic radical nephrectomy, laparoscopic donor nephrectomy, laparoscopic retroperitoneal nephrectomy and laparoscopic partial nephrectomy. The robotic aspect of my fellowship initially consisted of simulation based training, a laboratory module in Sydney and this was followed by a weekly theatre session where I learned robotic procedures such as robotic prostatectomy and robotic partial nephrectomy.

There was also a strong research component to my fellowship. I collaborated with Irish and Australian research groups to successfully complete several projects. Upon completion of my fellowship, I published 10 manuscripts in high-impact urological journals, of which 8 were as 1<sup>st</sup> author. In addition, I presented my research internationally at the American Urological Association (AUA) in San Francisco and nationally at the Urological Society for Australia and New Zealand (USANZ) in Melbourne.

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

Objectives of Project/Fellowship:

Objectives of Project/Fellowship:

My 3 clinical aims during my fellowship were as follows:

1. To become skilled and independent at performing PCNL and mini-PCNL. This involved learning how to gain my own access to the kidney under fluoroscopic guidance.
2. To gain competency at upper tract laparoscopy; with a focus on laparoscopic donor nephrectomy
3. To obtain certification in robotic urological surgery and to learn how to perform robotic prostatectomy and robotic partial nephrectomy

Did you achieve these objectives?

I believe all my fellowship objectives were achieved. The fellowship is structured in a modular manner so that each international fellow can gain exposure to their specific areas of interest. During my fellowship I completed >50 PCNL procedures, 100 flexible ureteroscopies, >50 laparoscopic procedures and 40 robotic urological procedures. I was also exposed to open pelvic surgery and performed >60 open pelvic urological procedures such as radical cystectomy and radical prostatectomy. In addition, the fellowship has a focus on core urological procedures, and I learned how to perform procedures such as transperineal prostate biopsy and Greenlight laser prostatectomy.

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

(a) Yourself

The Ethicon Grant helped me to achieve my clinical goals during my fellowship. I was able to complete different training modules in robotic surgery which allowed me to become certified in this

field. With the grant, I was able to attend training workshops on PCNL and mini-PCNL so that I could gain proficiency in this procedure.

(b) The institution in which you worked

The Ethicon Grant demonstrated to my institution that the RCSI are supportive of their surgical trainees completing an international fellowship so that their trainees can learn a new skillset. This enabled my institution to develop similar grants for their trainees that are contemplating international fellowships.

(c) In the future for Irish patients

With the Ethicon Grant, I was able to successfully complete my 18 month fellowship in urological surgery. I learned several minimally invasive urological procedures that are associated with excellent clinical outcomes, rapid recovery times and low blood loss. A quick recovery while achieving an excellent clinical outcome will be of an undoubted clinical benefit to Irish patients. In addition, I aim to teach my future trainees the skillset that I have learned so that patients all over Ireland can benefit from the advantages of minimally invasive surgery