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Chairman Department of Urology St. Vincent's Campus
Specialist in Minimally Invasive Prostate Surgery and Diagnostics
Prostate Cancer Specialist

DR. ILAN GIELCHINSKY M.D.

Dr Ilan Gielchinsky was my robotic fellow for the year January 2017 to January 2018 under my direct supervision. He was in our robotic surgery and minimally invasive cancer surgery programme.

During this programme, Dr Gielchinsky was trained in the following:

1. Robotic surgery for prostate cancer (radical prostatectomy, nerve sparing, wide resection and lymph gland dissection).
2. Robotic surgery for kidney cancer (partial and complete radical nephrectomy and nephroureterectomy).
3. Robotic surgery for bladder cancer (total cystectomy male and female and ileal conduit and ileal neobladders, as well as partial cystectomy).
4. Robotic surgery for ureter (pyeloplasty reimplantation and distal ureterectomy).
5. Brachytherapy treatment for prostate cancer - this involved preparation, patient selection, volume assessment, preoperative preparation, seed deployment and follow up and expected outcomes and counselling.
6. High-dose rate brachytherapy for prostate cancer - this involved patient selection, patient preoperative preparation, appropriate counselling, technique of implantation of cannulas, postoperative management and long-term follow up and expected outcome.
7. Laparoscopic surgery for kidney cancer.
8. Focal therapy for prostate cancer using the NanoKnife system - this involved patient selection, preoperative preparation, patient counselling, procedural technique, postoperative follow up, long-term management and expected outcomes.



The Kinghorn
Cancer
Centre



St Vincent's
prostate cancer
centre

Prostate Cancer

Prostate Cancer Imaging
and Diagnostics

2nd Opinion Service

Minimally Invasive
Prostate Cancer
Treatment

Robotic Radical
Prostatectomy

Brachytherapy

Focal Therapy

Active Surveillance

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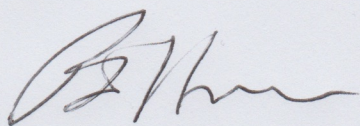
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9. Transperineal biopsies and MR fusion biopsies - the technique of transperineal biopsy, template sampling with 3D configuration, the use of the BioJet system to fuse biopsies for targeting for MR ultrasound fusion techniques, the interpretation of the results, assistance in publications on this topic and preoperative mapping.
10. Insertion of marker seeds and SpaceOAR hydrogel before radiation therapy.
11. Incontinence surgery including AdVance slings, artificial sphincter insertion, included the workup of patients with incontinence and the workup of patients after failed incontinence devices.
12. Potency surgery - this involved patient selection and technique in the use of insertion of three-piece inflatable penile prostheses both in the primary and revision setting.
13. The use of Botox injection for overactive bladder, both patient selection and technique and follow up.
14. The use of all standard treatments for benign prostatic hyperplasia including the UroLift system.
15. The use of laser therapy for benign prostatic hyperplasia and bladder coagulation in post-radiation complications.

In addition to these techniques, the uro-oncology postgraduate training and education consisted of participation in second opinion clinics, participation in multidisciplinary discussions on a second-weekly basis, the coordination of several conventions and conferences pertaining to prostate cancer and the training of postgraduate registrars in urology training. The conferences co-ordinated by Dr Gielchinsky included a workshop on multiparametric MRI, MR ultrasound fusion and robotic surgery.

Clinical research at the Garvan Institute of Medical Research was performed in the areas of prostate cancer in association with the St Vincent's Prostate Cancer Centre - Dr Gielchinsky was primary author in a work on prostate cancer in the young population and also the effect of the under 50-year-old age group on MRI interpretation. In addition, he co-authored multiple publications on NanoKnife, PSMA imaging and focal therapy.

Yours sincerely,



PHILLIP STRICKER