

## **LEARNING OBJECTIVES**

**10-18-22**

**PERFORMANCE GAP/ ACTIVITY NEED:** Major treatment paradigms are continuing to occur in the landscape of renal cell carcinoma management. There is an increased use of renal mass biopsy as standard of care, genetic testing on newly diagnosed RCC patients, and advances in systemic therapy. It is important for primary care physicians to order appropriate diagnostic imaging before referral and for urologists to incorporate updated management strategies. [RN, personal communication, 10/7/22].

**DESIRED OUTCOMES:** At the end of the activity, attendees will be able to:

- incorporate into practice diagnostic imaging for renal masses.
- recommend treatment options based on biopsy and size criteria of RCC.
- compare and contrast systemic therapy options in RCC.

**LEARNERS:** urologists, general surgeons, medical/radiation oncologists, geneticists, internists, general/family practitioners, radiologists, pathologists, research

**DESIRABLE PHYSICIAN ATTRIBUTE:** provide patient centered care, work in multidisciplinary teams, employ evidence-based practice

**CULTURAL/LINGUISTIC DIVERSITY/IMPLICIT BIAS (AB241)** Reflect on the patient populations most affected and consider how implicit bias may impact appropriate care of these patients. Promoting prevention of hypertension and chronic kidney disease as possible modifiable risk factors is particularly important in the care of African Americans.