



Division of Hematology and Hematologic Malignancies

Adult Hematology Residency Training Program

Goals & Objectives

Leukemia & Allogeneic SCT Clinics

Created: September 2016

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Adult Hematology Residency Training Program Leukemia and Allogeneic SCT Clinics Rotation

This rotation is designed to allow early exposure to the outpatient evaluation and management of patients with a variety of malignant and pre-malignant conditions, including acute leukemias, myelodysplastic syndromes, myeloproliferative disorders, and on occasion rare diseases such as mast cell disorders and aplastic anemia. During this rotation, residents will be attending a variety of hematologic malignancy clinics, at least half of which will be allogeneic stem cell transplantation (alloSCT) outpatient clinics, as this is an important treatment modality for these hematologic malignancies. This rotation will be completed during the R4 year of hematology residency and will enhance knowledge and practical experience in these areas prior to the malignant longitudinal clinic and BMT inpatient rotation in the R5 year.

Location

Tom Baker Cancer Centre

Coordinator

Dr. Mona Shafey

Preceptors

Dr. M. Geddes, Dr. L. Savoie, Dr. A. Daly, Dr. J. Storek, Dr. D. Jenkins, Dr. A. Chaudhry

Online Resources

- Alberta Provincial Guidelines for Hematological Malignancies
- Standard Practice Manual for the Alberta Blood and Marrow Transplant Program

Resident Responsibilities

- The resident will participate in the care of both new and follow-up patients in the assigned clinic and the role will include and not be limited to initial assessment, management plan, counselling, and coordinating referrals
- The resident will review the patient list prior to clinic and come prepared with applicable pre-reading as well review of the patient record of all new consults
- Residents are expected to perform relevant procedures such as bone marrow biopsies, lumbar puncture +/- intrathecal chemotherapy administration, central line removal, as the opportunity presents

- Residents will participate in either the BMT first call schedule at the FMC or the hematology first call schedule at FMC, wherever the need is greatest (to be determined by chief resident)
- Residents will attend and participate in all teaching sessions related to this rotation, including the BMT/lymphoma educational rounds (if available), hematology academic half day, and longitudinal fellows' clinic during this rotation.

Preceptor responsibilities

- Direct supervision of resident based patient care. The preceptor should gauge the level of competence of the resident and allow graduated responsibility for care and decision-making
- Provide resident teaching and direct observation of resident performance in the form of bedside assessments and consultation review and offer constructive verbal and written feedback
- Facilitate resident attendance to their academic half-day and longitudinal clinic responsibilities by dismissing them from clinic duties in a timely fashion

Objectives

MEDICAL EXPERT

- Take a full history related to the hematologic malignancy including detailed history of presenting illness, predisposing factors, and relevant comorbidities; perform a focused physical exam; and arrange further investigations appropriate for each disease.
- Demonstrate an understanding of ancillary diagnostic studies (e.g. flow cytometry for minimal residual disease (MRD), cytogenetics, and molecular testing) and their clinical application for leukemias, myelodysplastic syndromes, myeloproliferative disorders, etc., and use appropriate algorithms for risk stratification that impact treatment decisions.
- Formulate an initial treatment plan, including disease-specific therapy and supportive care components, as well as appropriate monitoring and management of treatment complications.
- Assess treatment response according to established formal response criteria for each disease.
- Assess and confirm relapsed disease, as applicable, and discuss treatment options by considering disease characteristics and comorbidities.

- Describe the mechanisms of action of chemotherapeutics and novel agents in the management of hematological diseases, including those commonly used in conditioning regimens.
- Understand the rationale for alloSCT in the management of hematological malignancies and the importance of graft-vs.-tumor effect.
- Demonstrate an understanding of the biology and immunology of the HLA system and how this impacts donor selection, as well as the rationale for non-HLA criteria important in donor selection.
- Demonstrate an understanding of the short-term and long-term consequences of chemotherapy treatment as well as myeloblastic conditioning treatment by performing patient assessment focusing on the consequences of myelosuppression, immunosuppression, organ toxicities, and secondary malignancy surveillance.
- Understand the pathophysiology, diagnosis, and management of acute and chronic graft-vs.-host disease.
- Discuss the support care requirements for patients receiving chemotherapy with or without stem cell transplantation, including transfusional support, management of iron overload, infectious prophylaxis and treatment, and use of growth factors, antiemetics, and analgesics as required.

COMMUNICATOR

- Establish effective and empathetic therapeutic relationships with patients and family members to obtain relevant history
 - a. Demonstrate awareness and sensitivity in complex family situations
 - b. Demonstrate effective listening and use of expert verbal and non-verbal communication
 - c. Gather information about a patient's beliefs, concerns, and expectations regarding their cancer and their cancer care experience.
- Accurately communicate care plans and demonstrate shared decision making with patients and families
- Maintain clear and accurate patient records, completed in a timely fashion
- Effectively present verbal reports to the preceptor of clinical encounters and plans.
- Develop a strategy for delivering bad news in a compassionate yet clear way which serves to enhance patient and family understanding

- Conduct specific discussions related to ambulatory malignant clinics such as
 - a. Goals of Care discussions
 - b. Chemotherapy teaching
 - c. Informed consent for blood product administration, and procedures
- Participate in weekly BMT clinical committee meeting and understand the importance of cooperation and communication among the varied health care professionals involved in the care of transplant patients

COLLABORATOR

- Recognize the roles and responsibilities of different members of the health care team and facilitate involvement of these members to provide best patient care.
- Facilitate referrals to the transplant program and other specialists as required
- Maintain effective communication with family physicians and referring physicians to ensure excellent seamless transition of care and maintenance of overall health.
- Effectively work with the clinical trials team to identify patients eligible for studies, facilitate patient enrolment in trials and assessment and report adverse events.
- Participate in the weekly BMT clinical committee meeting to encourage collaboration and best patient care.

LEADER

- Use evidence-based criteria for the selection of candidates eligible for allogeneic stem cell transplantation
- Contribute to the Just Culture philosophy of delivering safe, quality care (Just Culture Guiding Principles, AHS)
- Identify patient safety incidents (or near-misses) and document in the Reporting and Learning System ('RLS') and/or bring forward for educational case review sessions
- Effectively utilize information technology available, including Telehealth when applicable, to optimize patient care

HEALTH ADVOCATE

- Identify and eliminate barriers to accessing care or treatments (e.g. transportation, drug coverage, language, education)
- Advocate for the care of an individual patient
 - a. Obtaining special access or funding for therapy
 - b. Expediting tests or investigations
 - c. Exploring eligibility for clinical trials
 - d. Facilitate referrals for fertility preservation, when applicable
- Mobilize resources which enhance total care of the patient (e.g. home care, pain clinic, palliative care)
- Recognize the need to advocate for individuals as well as the need to advocate for health of a community (e.g. promote immunizations)
- Ensure appropriate allocation of health care resources and utilization

SCHOLAR

- Identify key clinical trials which pertain to the diagnosis and management of patients with hematological malignancies, and apply critical appraisal skills when analyzing these results
- Develop a working knowledge and application of the Alberta Provincial Practice Guidelines for hematological malignancies
- Recognize learning opportunities and pursue self-directed learning
- Routinely access and apply medical literature and consensus guidelines in clinical decision making
- Participate in formal and informal teaching opportunities with other learners and trainees in the clinic environment, demonstrating effective teaching strategies, when applicable
- Participate in clinical trial endeavours
- Solicit feedback from preceptors and other clinic members as an opportunity to improve personal practice

PROFESSIONAL

- Demonstrate a commitment to patients and their families, profession and society through ethical practice
- Demonstrate a commitment to physician health and sustainable practice
- Recognize limits of own expertise to improve patient care and enlist assistance as appropriate
- Understand and respond appropriately to the biomedical ethics involved in the investigation and care of patients with hematologic disorders, including appropriate decision making and management issues of patients with impaired decision-making ability, or those who hold beliefs that preclude the use of standard medical treatments.