



*Division of Hematology and Hematologic Malignancies*

## **Adult Hematology Residency Training Program**

### **Lymphoma & Myeloma Clinics**

#### **Goals & Objectives**

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**Program Director:**

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## **Adult Hematology Residency Training Program Lymphoma and Myeloma Clinics Rotation**

This rotation is designed to allow early exposure to the outpatient evaluation and management of patients with lymphoma and plasma cell disorders, and will include the role of autologous stem cell transplantation for these diseases. 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 in the R5 year.

### **Resident Responsibilities**

- The resident will participate in the care of both new and follow-up patients in the assigned clinic
- 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 as the opportunity presents
- Residents will review peripheral blood smears, bone marrow or lymph node pathology samples, when applicable on patients they have seen in clinic.
- Residents will attend the hematology academic half day on Thursday afternoons and their 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
- Facilitate resident attendance to their academic half-day and longitudinal clinic responsibilities by dismissing them from clinic duties in a timely fashion
- Provide resident teaching and direct observation of resident performance in the form of bedside assessments and consultation review.

### **Location**

Tom Baker Cancer Centre

### **Coordinators**

Dr. Lesley Street and Dr. Mona Shafey

## **Preceptors**

Various, with focused interest in lymphoma, myeloma, and/or autologous stem cell transplantation for these diseases

## **Resources**

- Alberta Provincial Guidelines for Lymphoma & Myeloma
- Standard Practice Manual for the Alberta Blood and Marrow Transplant Program
- Self-directed Radiation Oncology Learning Module

## **Objectives**

### **MEDICAL EXPERT**

- The resident is expected to take a full history related to the hematologic malignancy including detailed history of presenting illness, past medical history, summary of prior investigations etc. The history shall include aspects of the history taking specific to myeloma and lymphoma including hepatitis and HIV serostatus, baseline organ function, performance status, and prognostic markers (e.g. B2-microglobulin, albumin, LDH, ESR etc).
- They will perform a focused physical exam, with emphasis on nodal and spleen examination, along with neurological examination as applicable.
- The resident will be able to arrange appropriate staging investigations appropriate for each disease.
- Formulate an initial treatment plan, including disease-specific therapy and supportive care components, as well as appropriate monitoring and management of treatment complications.
- Residents will be able to assess treatment response according to established formal response criteria for each disease.
- In the relapse setting, appropriately assess disease status, treatment options and formulate a treatment plan considering disease characteristics and comorbidities.
- Demonstrate an understanding of ancillary diagnostic studies (cytogenetics and molecular) and their clinical application in lymphoma and myeloma
- Demonstrate knowledge of the pathophysiology of lymphoproliferative disorders and plasma cell dyscrasias
- Describe the mechanisms of action of chemotherapy and novel targeted agents

- Understand standard chemotherapy protocols used for lymphoma and myeloma and rationale for alternatives and treatment modifications
- Understand the role of radiation treatment in the management of lymphoma and myeloma, and the risks of this treatment modality
- Describe the commonly used conditioning agents and regimens used for high dose chemotherapy procedures
- Demonstrate an understanding of the rationale for autologous stem cell transplantation in the management of patients with lymphoma and plasma cell dyscrasias
- Understand the short-term and long-term consequences of standard and high-dose therapy (e.g. consequences of immunosuppression, myelosuppression, organ dysfunction, and secondary malignancies)
- Discuss the support care requirements for patients receiving standard and high-dose chemotherapy, including transfusional support, infectious prophylaxis and treatment, use of growth factors, antiemetics, and analgesics as required

## **COMMUNICATOR**

The resident will demonstrate the ability to:

1. 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.
2. Accurately communicate care plans and demonstrate shared decision making with patients and families
3. Maintain clear and accurate patient records, and completed in a timely fashion
4. Effectively present verbal reports to the preceptor of clinical encounters and plans.
5. Develop a strategy for delivering bad news in a compassionate yet clear way which serves to enhance patient and family understanding (reference)
6. 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
7. Participate in weekly transplant planning rounds and understand the importance of cooperation and communication among the varied health care professionals involved in the care of transplant patients

## **COLLABORATOR**

The resident will demonstrate the ability to:

1. Recognize the roles and responsibilities of different members of the health care team and facilitate involvement of these members to provide best patient care.
2. Recognize limits of own expertise to improve patient care and enlist assistance as appropriate
3. Effectively work with the clinical trials team to identify patients eligible for studies, facilitate patient enrolment in trials and assessment and report adverse events.
4. Facilitate referrals to the transplant program as required
5. Maintain effective communication with family physicians and referring physicians to ensure excellent seamless transition of care and maintenance of overall health.
6. Participate in the weekly tumour board meetings to encourage collaboration and best patient care.

## **LEADER**

The resident will demonstrate the ability to:

1. Use evidence-based criteria for the selection of candidates eligible for autologous stem cell transplantation
2. Contribute to the Just Culture philosophy of delivering safe, quality care (reference, Just Culture Guiding Principles, AHS)
3. 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
4. Ensure appropriate allocation of health care resources and utilization
5. Recognize learning opportunities and pursue self-directed learning
6. Effectively utilize information technology available, including Telehelath when applicable, to optimize patient care

## **HEALTH ADVOCATE**

The resident will demonstrate the ability to:

1. Identify and eliminate barriers to accessing care or treatments (e.g. transportation, drug coverage, language, education)
2. 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
3. Mobilize resources which enhance total care of the patient (e.g. home care, pain clinic, palliative care)
4. Recognize the need to advocate for individuals as well as the need to advocate for health of a community (e.g. promote immunizations)

## **SCHOLAR**

The resident will demonstrate the ability to:

1. Identify key clinical trials which pertain to the diagnosis and management of lymphoma and myeloma, and apply critical appraisal skills when analyzing these results
2. Develop a working knowledge and application of the Provincial Lymphoma and Myeloma Practice Guidelines
3. Routinely access and apply medical literature and consensus guidelines in clinical decision making
4. Participate in formal and informal teaching opportunities with other learners and trainees in the clinic environment, demonstrating effective teaching strategies, when applicable
5. Participate in clinical trial endeavours and the Clinical Research Unit
6. Solicit feedback from preceptors and other clinic members as an opportunity to improve personal practice

## **PROFESSIONAL**

The resident will demonstrate:

1. A commitment to their patients, families, profession and society through ethical practice
2. A commitment to physician health and sustainable practice
3. An understanding of his or her own professional and knowledge limitations and request help appropriately.
4. Understand and respond appropriately to the biomedical ethics involved in the investigation and care of patients with hematologic disorders
  - a. includes 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.