

HEMATOLOGY / ONCOLOGY

INTRODUCTION:

Residents are required to take a minimum of a one month rotation through the Hematology/Oncology service at Huntington Hospital. Residents will also spend a month rotating through the Hematology service at L.A.County+USC Medical Center. During the rotation at Huntington Hospital the resident will have the opportunity to learn both inpatient and outpatient aspects of this specialty. The resident will work under the tutelage of the Hematology/Oncology faculty member assigned to the service for the month and see patients as primary care physician for patients directly admitted to the Hematology/Oncology service and as consultant to physicians who have requested inpatient consultations. The resident will attend the outpatient Dispensary Hematology/Oncology Clinic as part of the rotation.

EDUCATIONAL GOALS AND OBJECTIVES:

Patient Care

The resident will develop skills in determining appropriate diagnostic and therapeutic plans for each patient. He/she will assess the patient's prognosis, identify the risks and benefits of proposed treatments and convey the information and recommendations to patients and their families. Because of the side effects inherent in many of the interventions involved in treating cancer patients, the service will provide the resident with an opportunity to gain a working appreciation of potential drug toxicity which will serve an example for decision-making that applies to any medical intervention. The resident will have significant opportunity to manage infections in immuno-compromised patients.

The resident will have the opportunity to develop skills as a primary physician for oncologic patients of the City of Hope Oncology Group and oncologic patients in the Dispensary Clinic. The resident will also provide consultations to other inpatient services including the general medicine service.

By the end of this rotation, R1 and R2 residents are expected to:

- ✓ Gather essential, accurate information in interviews and physical exams and review other data in order to provide the basis for an informative and helpful consultation or admitting note
- ✓ Prioritize the work day to assure that urgent problems are taken care of appropriately
- ✓ Present cases to the attending faculty in an orderly, coherent manner
- ✓ Demonstrate thoughtful decision making in formulating a recommendation to a referring physician

- ✓ Provide continuity of care to the patients of the oncology group who are admitted to the hospital
- ✓ Know indications, contraindications, and risks of invasive procedures and oncologic treatments
- ✓ Function as an educational resource to residents on the House services who request consultations
- ✓ Spend time appropriate to the complexity of the problem and the needs of the patient and family, appreciating that the needs of cancer patients are often unspoken

Medical Knowledge

The resident is expected to become knowledgeable in the following subject areas:

- Erythrocyte disorders, particularly anemias and hemoglobinopathies
- Platelet disorders and coagulopathies
- Leukemias and lymphomas
- Neutropenic fever
- Common solid tumors including breast, colorectal, lung, pancreatic, prostate, testicular and ovarian cancers.
- Myeloma
- Oncologic Emergencies

It is likely that the resident will also be exposed to some of the rare forms of cancer during the rotation.

Categorical residents are required to take the annual ACP In-Training examination and review their performance with the Program Director as a guide to monitoring their level of medical knowledge in Hematology / Oncology.

By the end of this rotation, R1 and R2 residents are expected to:

- ✓ Demonstrate knowledge of basic physiology, natural history, diagnosis and treatment of the cancers listed above
- ✓ Demonstrate and apply knowledge of epidemiologic and social behavioral sciences to the care of the patient
- ✓ Demonstrate an investigatory and analytic approach to clinical situations

Practice-based Learning

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Residents are expected to:

- analyze practice experience and perform practice-based improvement activities using a systematic methodology
- locate, appraise, and assimilate evidence from scientific studies related to their patients' health problems

- obtain and use information about their own population of patients and the larger population from which their patients are drawn
- apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness
- use information technology to manage information, access on-line medical information, and support their own education
- facilitate the learning of students and other health care professionals

By the end of this rotation, R1 and R2 residents are expected to:

- ✓ Understand their limitations of knowledge in a subspecialty utilizing treatment regimens with which the general physician is minimally familiar
- ✓ Acquire knowledge through self motivated reading on each patient on whom the resident consults or cares for directly
- ✓ Use computerized sources of results and information to enhance patient care
- ✓ Accept feedback and develop self-improvement plans
- ✓ Read and discuss all articles or references proposed by the attending
- ✓ Facilitate the learning of medical students and referring residents by providing information, particularly in areas pertaining to less well known treatment regimens
- ✓ Analyze personal practice patterns systematically and strive to improve
- ✓ Compare personal practice patterns to larger populations
- ✓ Demonstrate commitment to on-going professional development by independent reading

Interpersonal and Communication Skills

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients families, and professional associates. Residents are expected to:

- create and sustain a therapeutic and ethically sound relationship with patients
- use effective listening skills; elicit and provide information using effective nonverbal, explanatory, questioning, and writing skills
- work effectively with others as a member or leader of a health care team or other professional group

By the end of this rotation, R1 and R2 residents are expected to:

- ✓ Write pertinent and organized notes
- ✓ Use effective listening, narrative and non-verbal skills to elicit and provide information to patients and their families, understanding the particular needs of cancer patients
- ✓ Work effectively as a member of the health care team particularly in providing continuity between the attending physician and patients
- ✓ Provide education and counseling to patients, families and colleagues
- ✓ Discuss end of life care and quality of life issues with patients/families
- ✓ Consider patient preferences when making medical decisions
- ✓ Provide clear consultative advice and communicate it clearly to referring physicians

Professionalism

Residents must demonstrate a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population. Residents are expected to:

- demonstrate respect, compassion, and integrity; a responsiveness to the needs of patients and society that supersedes self-interest; accountability to patients, society and the profession; and a commitment to excellence and on-going professional development
- demonstrate a commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- demonstrate sensitivity and responsiveness to patients' culture, age, gender, and disabilities

By the end of this rotation, R1 and R2 residents are expected to:

- ✓ Establish trust as a consultant or primary physician with patients and staff
- ✓ Treat all patients equally
- ✓ Show regard for opinions and skills of colleagues being aware of the role of a consultant
- ✓ Respond promptly to requests for consultation regardless of the time of day and treat each consultation equally important regardless of its nature

Systems-based Practice

Residents must demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value. Residents are expected to:

- understand how their patient care and professional practices affect other health care professionals, the health care organization, and the larger society and how these elements of the system affect their own practice
- know how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- know how to partner with health care managers and health care providers to assess, coordinate, and improve health care and know how these activities can affect system performance

By the end of this rotation, R1 and R2 residents are expected to:

- ✓ Advocate for high quality patient care and assist patients in dealing with system complexity
- ✓ Apply knowledge of how to partner with other health care providers to assess, coordinate and improve patient care
- ✓ Use systematic approaches to prevent and reduce errors
- ✓ Participate in developing ways to improve systems of practice and health management

IMPLEMENTATION:

- Daily rounds are held with the attending faculty member where all patients admitted to the service and all consultations are reviewed. Case management and didactic aspects of each case will be discussed.
- A series of seminars appropriate to the patients on the service and designed to address the basic education needs of Hematology / Oncology will be provided.
- The faculty will provide guidance with selected reference material and recommendations.

EVALUATION:

- The attending physicians on the service will personally evaluate the resident for competence in Patient Care, Medical Knowledge, Practice-based Learning, Communication Skills, Professionalism and Systems-based Practice. The faculty member will provide a face-to face evaluation of each resident at the conclusion of the rotation. The faculty member is encouraged to acquire input from nursing staff and other ancillary personnel in formulating his/her evaluation.