Welcome to the **Hematology** consult service! The following are some guidelines to help you get the most from your time with us and to help the service run smoothly. If you have any difficulties or questions during this rotation, or if you have an interest in learning more about a career in hematology or oncology after your rotation with us, please contact Malinda West or Feifei (Zizhen) Feng, the co-chief fellows for hematology and medical oncology, at westmal@ohsu.edu and fengzi@ohsu.edu.

In addition to this letter, you will find a schedule outlining your specific rotation dates and any assigned weekends. As assignments may change from day to day to ensure coverage of the inpatient hematology and oncology consult services, please review this calendar carefully. **The hematology consult service covers both the University and the VA from 8am to 5pm M-F and on your assigned weekends.** If you are also on medical oncology service, please refer to its orientation sheet for additional oncology-specific information.

# **Nuts and Bolts for the First Day:**

- We begin at 8 am.
- On the morning of your first day, please plan to join us for our Monday morning fellows' conference in CHH2 room 13016 (webex during pandemic, your consult fellows should send you a webex link)
  - o If you are unable to attend, have a different first day, or happen to start during one of the fellows-only fellows meetings, please page the on-call hematology fellow after 8 am.
- Talk to the fellow on day one on days off you may have coordinated with your primary department
- Your fellow will give you a list of patients on the service and identify those you will be following.
  - o The weekend resident or fellow will either email the sign-out list or place it on the Hematology/ Oncology box account (<a href="https://ohsu.account.box.com/login">https://ohsu.account.box.com/login</a>) the night before you start service.
  - o There are also existing EPIC patient lists ("Hematology-Consult") for the OHSU patients on the hematology service.

### **Daily Schedule:**

#### Work Hours

- o Expect to work from 8 am to 5 pm
- o Hematology consults ebb and flow, but it tends to be a busy service
- o New consults may be called any time
  - Any consult called on weekdays before 5pm should be seen or at least discussed with the attending.
  - Any consult called on weekend days before 3pm should be seen or at least discussed with the attending.
- o If the service is busy, you may need to stay later than 5pm
- o If it becomes apparent that you will be working more than 80 hours a week, please notify the chief fellow as soon as possible.

# Rounding

- o Timing of rounds depends on the attending and their clinic schedules.
- o Please coordinate with the fellow regarding that day's rounds.
- o Typically, fellows and residents review and see old consults in the morning and new consults throughout the day. Rounds tend to be later in the day.
- o If rounds occur earlier in the day, it is critical to review new consults and issues with old consults before the end of the day.

## • Updating teams and sign-out

o It is important to update primary teams with new recommendations throughout the day as issues arise. Many teams appreciate daily contact even if no new recommendations are made.

- A simple FYI text page can suffice.
- o During the week, the fellow coordinates updating sign-out with residents to notify the overnight on-call fellow of any issues and prepare the patient census for the following day.

#### **Conference Schedule:**

- We strongly encourage you to attend the core Internal Medicine conferences to maximize your educational experience.
- Please remind your attending and fellow to round at times that allow you to make it to conference.
- While you're with us we also encourage you to attend our weekly conferences as availability allows.
- If the timing of a sub-specialty conference conflicts with IM core conferences, the program requests prioritization be given to attendance at the **IM conferences**, unless it is deemed by the resident or faculty that there is an individual resident educational goal that would be better met by attending the sub-specialty conference.
- Weekly conferences are as follows:

Monday	Tuesday	Wednesday	Thursday	Friday
8-9am(currently Webex meeting) CHH2 13016 Fellows' Conf.		8-9am(currently Webex meeting) CHH2 13020 CHM Grand Rounds		8-9am(currently Webex meeting) CHH2 13016 Fellows' Conf.
12-1 Medicine Noon Report	12-1pm Medicine Noon Conference	12-1pm Medicine Noon Report  12-2pm (currently Webex meeting) Fellows tumor board at the VA Building 101, Room 335	12-1pm Medicine Noon Conference	12-1pm Medicine Noon Conference
				12-1 pm(currently Webex meeting) 14 <sup>th</sup> Floor Hatfield Conference Room Hemostasis & Thrombosis conference.
			1:15-2:15pm Medicine Resident Report	1:15-2:15pm Medicine Intern Report

### **Weekend Schedule:**

• If your rotation is for two weeks or longer, you will be scheduled to work one weekend during the rotation.

#### • Holidays:

- If you are assigned on rotation over a holiday, you will not be expected to come in that day (please see <a href="https://o2.ohsu.edu/human-resources/benefits/time-away-from-work/holidays.cfm">https://o2.ohsu.edu/human-resources/benefits/time-away-from-work/holidays.cfm</a> for which holidays apply)
- o If you are assigned over a holiday weekend that bridges a 2-week rotation, you are *not* expected to cover on that one holiday, but will still be required the weekend
- You will cover hematology consults from 8am 5 pm
- Weekend rounding time and format vary depending on census and the attending for the weekend. The
  fellows and weekend attending should include you in any communication (email or verbal) about weekend
  plans.
- You DO NOT take outpatient calls (these should go to the infusion APPs, or, in rare instances, the Hem/Onc Fellow On-call).
  - o If the operator pages you that an outpatient is holding please politely redirect the operator to page the Hem/Onc Fellow on call instead.
- The inpatient oncology service ("Chemo service") is covered by the hem/onc fellow on-call.
- Bone marrow transplant and leukemia service is separately covered by the Hem Malig advance practice providers (APPs).
- If for any reason you cannot work your assigned weekend or have another scheduling conflict, please notify the chief fellow as soon as possible.

#### Workroom:

We do have a dedicated workspace at OHSU: 14<sup>th</sup> Floor Hatfield Room 14D80. We also have a workspace at the VA which we share with the oncology service (6C-111, ask your fellow for room code). Because this area is small and is sometimes in use by the oncology service, fellows also sometimes choose to meet use the 14K workroom, 6D VA work area, and other resident/fellow workspaces.

#### **Charting:**

Please be sure to use the official Hematology/Oncology templates for your notes. Ask your fellow to assist with accessing templates.

#### At OHSU:

- Dot phrase for new consults: HEMONCCONSULTNEW
- Dot phrase for follow-ups: HEMONCCONSULTFOLLOWUP
- Dot phrase for bone marrow biopsy: BONEMARROWBIOPSY
- Be sure to delete any irrelevant parts of the note (eg. References to oncology, Labs that aren't completed, etc.)
- For an initial consult on CHH patients, please email or route your note to their outpatient provider

#### At the VA:

- You may use a generic consult/follow-up note of your choice or your fellow may provide you with theirs
- PLEASE NOTE THE NEW DOCUMENTATION PROCEDURES which are to be used for all consult services at the VA:
  - o Before starting the note, change the location to INPATIENT- Hematology
  - o Enter note, add the attending as cosigner
  - o At or before signing, complete the encounter form, be sure to include:
    - Level of service
    - Service connection yes/no
    - Providers (enter your attending as primary, then yourself)

- Diagnoses
- Please add the following as additional signers to your note:
  - Consult attending
  - o Primary team attending
  - o Resident

# **Learning Objectives:**

Though we expect you will learn much more than what is outlined below, the following are your learning objectives during your time with us. Please discuss these objectives with your fellow and attending and seek out relevant learning opportunities.

# By the time you finish the rotation you should be able to do the following:

- 1. Review a peripheral blood smear with improved familiarity of normal morphologies of red blood cells, platelets, and white blood cells and also to gain perspective on common abnormalities, such as dysmorphic red blood cells and immature (blast) forms
- 2. Describe the steps involved with bone marrow biopsy and aspirate and identify the components collected (eg. liquid aspirate with "spicules," solid core).
- 3. Identify and initiate management of some hematologic emergencies, including tumor lysis syndrome, TTP, febrile neutropenia, hyperviscosity syndrome

**Educational Resources** (reading list, videos, online resources, please include relevant physical exam resources/pearls for your rotation):

Below are links to educational resources broken down into common consult questions/topics.

• OHSU IM Residency Educational Resources Website – Hematology Section <u>www.IMRESPDX.com</u>

# **Additional Hematology Consult Tips:**

- Common consults include cytopenias, VTE, bleeding disorders, and hemophilia.
- You may have the opportunity to perform bone marrow biopsies on this rotation. Please discuss your interest in this opportunity with the fellow early in the rotation to coordinate.
- Part of the hematology consult experience is reviewing peripheral blood smears.
  - o It is generally easier to call the core lab (OHSU x45549 or VA x56726) to prepare these in advance.
  - O You may ask the medicine team to contact the lab directly to assist with preparing smears for the hematology team to evaluate later.
  - O You can use cellavision to easily view a smear from any computer.
- Initial diagnoses of hematologic malignancies (eg. Lymphomas, multiple myeloma, and myelodysplastic syndromes) often originate with a hematology consult.
  - O You should expect to be consulted on patients with lymphadenopathies or other features concerning for lymphoma.
  - o Preferred biopsies are excisional > incisional > core > FNA (FNAs are not very helpful for first-time lymphoma diagnoses) and preferably before administration of any steroids.
  - o In contrast, medical oncology consults relate to tumors of solid organs (eg. lung cancer, breast cancer) and are covered by the medical oncology consult service.
  - o Patients with acute myeloid or lymphoblastic leukemias as well as bone marrow transplant patients are generally automatically admitted to the CHM/BMT service or are seen by a CHM/BMT attending directly if they are in the ICU. Exceptions are at the discretion of the general hematology and the CHM/BMT attendings.

- Patients with a new diagnosis of a hematologic malignancy (eg. Lymphomas, chronic leukemias, multiple
  myeloma, myelodysplastic syndromes) are seen by the hematology consult service at the university, but are
  transferred to the hem malignancy/BMT service for ongoing management. Please discuss with your fellow or
  your attending if you are not sure if a patient should be consulted by the general hematology team or the
  CHM/BMT team.
- All hematologic malignancy patients at the VA (including acute leukemias) are followed by hematology, not oncology, consults. CHM service is only at OHSU.