Heme Onc 5 Minute Summary

Contact Information:

Rotation Director: Jennifer Andrews, MD

Resident Rotation Liaison: Teresa Evans, PGY2

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>> Email addresses can be found at: https://stanfordwho.stanford.edu/SWApp/

First Day Instructions:

Meeting Location: LPCH 1st floor, PCU 160 (1 North) physician workroom

Time to Meet: 7AM (days), 5PM (nights)

Dress Code: Professional dress (days), Scrubs (nights)

Meals: Breakfast and Lunch are provided at weekday conferences

Preparation:

- ➔ Review orientation email
- ➔ Review oncology packet from Step Up session
- ➔ Residents should get verbal sign-out AND written interim summaries from residents going off service.

Rotation Information:

Team:

- ➔ Junior Residents; two on days, two on nights
- ➔ Heme/Onc Fellow
- ➔ Heme/Onc Attending
- ➔ Heme/Onc Hospitalist (Fritz)
- ➔ Sub-Intern (occasionally)***

*** Med Student's log in to their Voalte phone with the generic login: **username**: oncmedstu **password:** 11111

Key Rotation Information:

The oncology rotation comprises a total of 8 week inpatient experience during junior year, with 4 weeks of day shifts and 4 weeks of night shifts (not consecutively!). The overnight call

component of the rotation is designed to experientially increase confidence as the resident functions as the primary provider in the Onc unit. It is quite challenging but multiple levels of support are available.

Routine chemotherapy admissions are cared for by Team B, covered by an attending and NP on weekdays and an attending on weekends. These patients are also covered by residents at nights and after weekend attendings have left for the day. NP will sign out patients to residents at 5pm daily during the weekdays. Weekend attending will sign out to day residents before leaving for the day.

Please direct all questions regarding Amion scheduling to the chiefs.

Orientation:
Brief orientation from Attending on service 1st day of block regarding expectations; residents should clarify with Attending each week preferred style for oral and written communications.

Sign-out:
7am- night residents sign out known patients to day resident. Night resident will continue to hold pager through sit rounds. Will sign out new overnight patients to day residents after sit rounds. Day team signs out to overnight resident at 5pm. Will also receive a call from NP to sign out Team B patients around 5 pm and then to sign out for the day around 7am.

Rounds:
Held in 2 phases – sit rounds followed by walk rounds. Order of rounding frequently driven by nursing availability as it is key to have all caregivers present for rounds.

Sit Rounds:
Multi-disciplinary with resident, fellow, attending, sometimes hospitalist, pharmacy, charge nurse, bedside nurse, oncology pharmacy, case management. Call charge nurse before starting. Held in conference room. Overnight resident enters orders, resident not presenting will update signouts for patients. Overnight resident stays through end of sit rounds (on all patients). Notes can be signed after discussion on sit-rounds unless issues are still open for discussion on walk rounds.

Walk Rounds:
Resident leads discussions with family to update on plan for the day. Resident not speaking with family can help with orders, answering pages, etc.

Notes:

Daily notes completed by day residents for all patients. Overnight resident writes daily progress notes for all new admissions before midnight, H+P serves as progress note for those after midnight. See rotation guide for suggestions for notes. Should be problem based.

Chemo:

Written by fellows/attendings. Questions or changes to chemotherapy orders should be directed to fellows, hospitalist (Fritz Tan) or attendings, not residents. Nurses should call/page fellow/attending/hospitalist directly.

Feedback:

- ➔ Real time feedback from Attendings + summative feedback at the end of week.
- ➔ Medhub evaluations

Conferences:

- ➔ Tumor Board will be held Tuesday mornings from 8am-9am at 1000 Welch Rd (basement).
- ➔ Interesting patient conference held Wednesday during lunch. If you'd like to go, ask your fellow or Fritz.
- ➔ There will be designated resident teaching times. Either a fellow or attending will come to the PCU 160 work room to do teaching from 8:30am to 9am, Monday through Thursday. Schedule will be posted in the 1N workroom.

Overnight Call (5PM through end of table rounds, ~11AM):

- ➔ Admit new patients overnight, routinely assess sick patients, escalate care as needed (rapid response), communicate effectively with fellow on call.
- ➔ Recognize own limitations and seek assistance from Heme/Onc Fellow, In-house Hospitalist, Heme/Onc Attending as appropriate. Also encouraged to run ideas past the night-float sup. You should never feel like you're alone!
    - ◆ Residents are **not permitted to change orders, rates, or make any modifications to chemotherapy regimens (including chemo associated fluids)**. All questions about chemotherapy orders or parameters (UA parameters, etc) should be directed to the on call Hem/Onc fellow or hospitalist , not to the pediatric residents. If there are any problems or questions at all with chemotherapy or orders, the Fellow must be notified immediately.
- ➔ ~ 11PM Conduct safety rounds with oncoming overnight charge nurse and hospitalist. Patients who are "watchers" should be discussed at this time.

- ➔ 1AM – 2/3AM RNs are encouraged to come to check in with you in the work room; do any order clean up, address any issues. You should also address lab results during this time since most AM labs are sent at MN. This will involve mainly transfusions (see handy transfusion guidelines and information on handout in workroom) and electrolytes.
- ➔ 2/3AM - 6AM RNs will limit pages/calls to urgent issues only to allow time to finish notes, prep for rounds, and rest. If you're planning to go rest, it's usually wise to check in first to avoid being called immediately about something.
- ➔ Plan to pre round on and present overnight admissions. On weekends the overnight resident will also round on roughly half the team on his/her post call morning.
- ➔ **Overnight resident stays through the end of sit rounds** (usually ~11AM) and typically enters orders for all patients so day residents can finish notes during rounds. Please run the list of orders entered with both day team residents at end of rounds. If able, helping with patient care during table rounds is also greatly appreciated. Ask the team if they'd like consults to be called during rounds, this can be helpful.
- ➔ Supervise Heme/Onc sub-intern when he/she stays for "late" call till approximately 9-10pm one weekday evening per week, particularly when there are new patients being admitted.
- ➔ Call room is on the 3rd floor in the residency lounge

Unique Expectations:

- ➔ Performs the primary patient care role
- ➔ Performs physical exam on any patients that nurses express concern about or that changes condition
- ➔ Participate in End of Life Care (please see Resource Sheet developed by Emily Johnson)

Activities / Experiences You Should Expect or Seek Out:

- ➔ Participate in care conference
- ➔ Participate in psychosocial rounds
- ➔ Attend either initial diagnosis, consent, or end of life discussion
- ➔ Procedures (LP, bone marrow aspirate and biopsy)

Typical Schedule:

Time	Monday	Tuesday	Wednesday	Thursday	Friday
0700	Sign Out	Sign Out	Sign Out	Sign Out	Sign Out
0700 – 0800	Pre-round	Pre-round	Pre-round	Pre-round	Pre-round
0800 - 0830	Morning Report	Tumor Board (1000 Welch Rd, Basement) – ask fellow for directions	Morning Report	Morning Report	Grand Rounds
0830 - 0900	Onc Teaching		Onc Teaching	Onc Teaching	
0900 - 1200	Rounds, sit-rounds from 9-10:30ish (night-float resident signs out for the day), then walk rounds afterwards	Rounds, sit-rounds from 9-10:30ish (night-float resident signs out for the day), then walk rounds afterwards	Rounds, sit-rounds from 9-10:30ish (night-float resident signs out for the day), then walk rounds afterwards	Rounds, sit-rounds from 9-10:30ish (night-float resident signs out for the day), then walk rounds afterwards	Rounds, sit-rounds from 9-10:30ish (night-float resident signs out for the day), then walk rounds afterwards
1200 - 1300	Noon Conference	Noon Conference	Interesting Patient Conf	Noon Conference	Noon Conference
1300 - 1500	Patient Care	Patient Care	Patient Care	Patient Care	Patient Care
1300-1400					
1500 - 1600			Teaching with Harvey Cohen (will coordinate a different day if clinic schedules conflict)		
1700	Sign Out	Sign Out	Sign Out	Sign Out	Sign Out

Last Updated: 11/2017