PGY1 Elective Rotation: Pediatric Hematology/Oncology Ambulatory Rotation
Riley Hospital for Children
Indiana University Health

Preceptors
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Office: 948-8442/Pager: 312-7474

General Description
This rotation is an elective rotation offered to the resident as a one month experience. This rotation is designed to provide the resident with learning activities that will allow him/her to build upon a basic understanding of pediatric oncologic therapeutics and begin to develop expertise in the overall management of patients with malignancies. The resident will work closely with a multidisciplinary team of pediatric hematologists, oncologists, nurse practitioners, and nurses in the care of patients seen in our outpatient clinic at Riley Hospital and gain experience in: designing and recommending therapeutic regimens, supportive care techniques, healthcare team interaction, patient and family education, and provision of drug information to other members of the health care team. The resident will focus on the management of medical emergencies (when applicable), cultural sensitivity, effective communication and time management.

Disease States
- The resident will prepare for the meeting to sufficient depth of knowledge to be able to lead the discussion of the topic. Topics include but are not limited to:
  - Chemotherapy Pharmacology
  - AML/ALL
  - Pediatric CNS Tumors
  - Neuroblastoma
  - Pediatric Sarcomas
  - Sickle Cell Disease
  - Lymphoma
  - Wilms Tumor
  - Retinoblastoma
  - Supportive Care (TLS, CINV, constipation, Neutropenic Fever)

Topic discussions and reading key articles will be used to help develop the resident’s patient care skills for common disease states or acquiring knowledge about diseases seen infrequently on the service

Goals and Objectives
DIRECTIONS: Each Learning Experience has newly assigned goals and objectives. The paragraphs before the table explain the use of the table. Please complete the table by assigning each objective a learning activity.

Example: During the learning experience the resident will focus on the goals and objectives outlined below by performing the activities that are associated with each objective. The resident will gradually assume responsibility for all of the patients within the assigned unit. The PGY1 resident
must devise efficient strategies for accomplishing the required activities in a limited time frame.

Achievement of the goals of the residency is determined through assessment of ability to perform the associated objectives. The table below demonstrates the relationship between the activities and the goals/objectives assigned to the learning experience.

<table>
<thead>
<tr>
<th>Goals and Objectives</th>
<th>Activities</th>
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<tbody>
<tr>
<td><strong>GOAL R1.1</strong></td>
<td>In collaboration with the health care team, provide safe and effective patient care to a diverse range of patients...following a consistent patient care process.</td>
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<tr>
<td>Objective R1.1.1</td>
<td>(Applying) Interact effectively with health care teams to manage patients’ medication therapy.</td>
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<tr>
<td>Objective R1.1.2</td>
<td>(Applying) Interact effectively with patients, family members, and caregivers.</td>
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<td>Objective R1.1.3</td>
<td>(Applying) Collect information on which to base safe and effective medication therapy.</td>
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<tr>
<td>Objective R1.1.4</td>
<td>(Analyzing) Analyze and assess information on which to base safe and effective medication therapy.</td>
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<td>Objective R1.1.5</td>
<td>(Creating) Design or redesign safe and effective patient-centered therapeutic regimens and monitoring plans (care plans).</td>
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<td>Objective R1.1.8</td>
<td>(Applying) Demonstrate responsibility to patients.</td>
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<tr>
<td><strong>GOAL R4.2</strong></td>
<td>Effectively employs appropriate preceptors’ roles when engaged in teaching.</td>
</tr>
<tr>
<td>Objective R4.2.1</td>
<td>(Analyzing) When engaged in teaching, select a preceptors’ role that meets learners’ educational needs.</td>
</tr>
<tr>
<td>Objective R4.2.2</td>
<td>(Applying) Effectively employ preceptor roles, as appropriate.</td>
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**Preceptor Interaction**

**Daily:**
- 8:00 - 8:30 Clinic Morning Report
- 8:30 – 3:30 Hem-Onc & Neuro-Onc Clinic (Mon/Tues/Thurs/Fri)
- 3:30 – 4:30 Review chemo patients for the next day

**Communication:**
A. Daily scheduled meeting times: Residents to prioritize questions and problems to discuss first thing in the morning after clinic report about patients for that day
B. E-mail: Residents are expected to read e-mails at the beginning, middle and end of each day at a minimum for ongoing communication. This is appropriate for routine, non-urgent questions and problems.
C. Office extension: Appropriate for urgent questions pertaining to patient care.
D. Pager: Residents to page preceptor for urgent/emergency situations pertaining to patient care
E. Personal phone number: Provided to resident at time of learning experience for emergency issues.

**Expected progression of resident responsibility on this learning experience:**

Day 1: Preceptor to review learning activities and expectations with resident.

Week 1: Resident to work up all of the chemotherapy patients and present to preceptor daily. Preceptor to attend clinic and conduct patient interviews with resident, modeling pharmacist’s role on the health care team.

Week 2: Resident to work up all of the chemotherapy patients and discuss problems with preceptor daily. Preceptor to attend clinic with resident, coaching the resident to take on more responsibilities as the pharmacist on the team. The resident will conduct patient interviews for chemo admissions with the preceptor in the room.

Weeks 3-4: Each week the resident is expected to take over the responsibility of working up all patients, answering all medication-related questions and continuing to discuss identified problems with preceptor daily. Once the resident is able to take responsibility for all patients assigned to the team, the preceptor will no longer sit in clinic, but will continue to facilitate the resident as the pharmacist on the team.

**Evaluation**
PharmAcademic will be used for documentation of scheduled evaluations (see chart below). The resident and the preceptor will independently complete the assigned evaluation and save as draft. The resident and the preceptor will then compare and discuss the evaluations. This discussion will provide feedback both on performance of the activities and the accuracy of the resident’s self-assessment skills. Evaluations will be signed in PharmAcademic following this discussion.

- **Summative evaluations:** This evaluation summarizes the resident’s performance throughout the learning experience. Specific comments should be included to provide the resident with information they can use to improve their performance in subsequent learning experiences.
• Preceptor and Learning Experience evaluations must be completed by the last day of the learning experience.

<table>
<thead>
<tr>
<th>What</th>
<th>Who</th>
<th>When</th>
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<tbody>
<tr>
<td>Summative</td>
<td>Preceptor</td>
<td>End of week 4</td>
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<tr>
<td>Preceptor/Learning Experience Evaluation</td>
<td>Resident</td>
<td>End of week 4</td>
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</tbody>
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