HARBORVIEW HEMATOLOGY-ONCOLOGY CONSULT SERVICE
Location: Harborview Medical Center

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OVERALL EDUCATIONAL PURPOSE

1. To provide exposure to a broad spectrum of Hematologic and Oncologic disorders and Transfusion Medicine in adults.
2. To develop problem-solving and diagnostic skills related to Hematologic and Oncologic disorders and Transfusion Medicine.
3. To develop treatment skills related to basic Hematologic diseases and Transfusion Medicine problems.

The discipline of hematology-oncology relates to the care of patients with solid tumors and disorders of the blood, bone marrow, and lymphatic systems, including anemias, hematologic malignancies, and other clonal processes, and congenital and acquired disorders of hemostasis, coagulation, and thrombosis.

The general internist should be competent in 1) the detection of abnormal physical, laboratory, and radiologic findings relating to the lymphohematopoietic system; 2) the assessment of the need for bone marrow aspirate and biopsy and lymph node biopsy; 3) the initial diagnostic evaluation and management of thrombosis and bleeding; 4) the assessment of the indications and procedure for transfusion of blood and its separate components; 5) the management of therapeutic and prophylactic anticoagulation; 6) the diagnosis and management of common anemias; 7) the pharmacology and use of common chemotherapies; and 8) the management of neutropenia/immunosuppression; 8) the diagnosis and general principles of management of common solid tumors 9) end of life care

The range of competencies expected for a general internist will vary depending on the availability of a hematologist-oncologist in the primary care setting. For example, in some communities a general internist may be responsible for bone marrow examination and administration of chemotherapy for certain disorders in conjunction with consultative assistance from appropriate hematologist-oncologist and pathologist colleagues.

TEAM STRUCTURE

The Hematology-Oncoogy consult service at HMC consists of a consult attending and a hematology-oncology fellow.

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PRINCIPAL TEACHING METHODS

Direct Supervision of Patient Care
The Attending physician on the Hematology-Oncology consult service provides supervision of the consult team (fellow, resident, and student). In the weekly Madison Hematology-Oncology clinic, Dr. Virginia Broudy provides direct supervision.

Case-Based Discussion
This occurs during attending rounds (3-5 days/week) on the consult team and in the Madison Clinic.

Formal Conferences
Conferences include Hematologic Malignancy Conference at the SCCA/UWMC on the first and third Friday of the month from noon-1 PM. HMC Tumor Board meets the fourth Thursday of the month from noon-1 PM in R&T 121.

Didactic lectures include weekly Medicine Grand Rounds (8-9 AM on Thursdays), weekly Hematology-Oncology Fellows Conference (7-8 AM on Fridays), and Hematology Grand Rounds/Hematology Fellows Conference (8-9 AM on Fridays) in the Pelton Auditorium of the Thomas Building at the Seattle Cancer Care Alliance.

EDUCATIONAL CONTENT

Mix of Diseases
The Hematology-Oncology Consult Service and Clinic at HMC encompass a broad range of Hematologic-Oncologic disorders and Transfusion Medicine problems including bleeding disorders (e.g., disseminated intravascular coagulation, idiopathic thrombocytopenia purpura), hematologic malignancies (lymphomas, myeloproliferative and myelodysplastic syndromes, chronic leukemias), solid tumors (e.g., lung, liver, colon), and HIV-associated disorders (e.g., Kaposi’s sarcoma, autoimmune thrombocytopenia).

Patient Characteristics
Patients admitted to Harborview Medical Center represent a full socioeconomic spectrum; the ethnic mix reflects the City of Seattle.

Types of Clinical Encounters
Patients seen by the Consult Service include in-patients on Medical, Surgical, and Psychiatric Services. Madison Hematology-Oncology Clinic patients include follow-up from in-patient consults and new referrals of patients with HIV-associated Hematology/Oncology problems. Clinical encounters on the Consult Service generally involve a directed history and physical at the time of initial evaluation, an initial note completed at that time, presentation to the Attending within 24 hours and daily follow-up visits and notes as warranted. Madison Clinic patients are presented to Dr. Virginia Broudy during the clinic.

Procedures
Bone marrow aspirate and biopsy are the most frequent procedures. Lumbar puncture, Omaya tap, and paracentesis are sometimes also performed.
**Services**
The Hematology-Oncology Consult Service at HMC provides 24 hour coverage including a Fellow and Attending. A Transfusion Medicine Consult Service with a Blood Center Physician is also available 24 hours daily through the Puget Sound Blood Center.

**ROTATION SPECIFIC SCHEDULE**

**Tuesday**
Madison HIV/Hematology Clinic at HMC from 1:30-4 PM

**Thursday**
HMC Tumor Board from noon-1 PM the 4th Thursday of the month

**Friday**
Fellows Core Lecture Series 7-8 AM at the Seattle Cancer Care Alliance
Hematology Grand Rounds/Hematology Fellows Conference 8-9 AM at the SCCA
Hematologic Malignancy Conference noon-1 PM the first and third week of each month at SCCA/UWMC.

**Call and Weekend Responsibilities**
The resident is expected to take call on one weekend (Friday evening to Monday morning) during the rotation. This entails phone calls throughout the evenings and days and rounds on Saturday and Sunday mornings.

**PRINCIPLE EDUCATIONAL MATERIALS USED**

**RECOMMENDED READINGS**
Computers at the fellow’s desk provide access to internet an literature search services. Hoffman’s textbook of Hematology and DeVita’s Textbook of Cancer are considered to be the standard reference texts. Access to the National Comprehensive Cancer Network (NCCN) practice guidelines is available through the internet as are the educational program books from the American Society of Hematology and American Society of Clinical Oncology.

**PATHOLOGIC MATERIALS**
Teaching slides for morphology are maintained in the Laboratory Medicine area designated for Hematology.

**METHODS USED IN EVALUATING RESIDENT AND PROGRAM PERFORMANCE**
Residents are evaluated by the Consult Service Attending and the Clinic Attending based upon case presentations, consult and clinic notes, and interactions during attending rounds and clinic. Comments on the Resident’s performance are also solicited from the Hematology-Oncology

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Fellows. Attendance at conferences and didactic lectures is considered in evaluation of performance.

At the end of the rotation, the resident is evaluated using an online form and his/her performance is reviewed by every attending and fellow he or she has worked with for a significant amount of time. The evaluator rates the resident’s performance on a nine-point scale in each component of clinical competence (i.e. patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, system-based learning, educational attitudes, leadership, overall clinical competence).

The resident is given the opportunity to evaluate in writing the quality of the curriculum and the extent to which the educational goals and objectives of the rotation have been met. The resident also evaluates the teaching competence of each attending and fellow with whom s/he has interacted for a significant amount of time.

**EXPLICIT LINES OF RESPONSIBILITY FOR CARE OF PATIENTS ON THIS SERVICE**

The Resident on the Consult Service is expected to assume responsibility for the initial evaluation of the consult patient and, after discussion with the Consult Attending, to communicate recommendations of the Consult team for management to the patient’s primary physicians. Although the Hematology-Oncology Fellow may provide input and advice, the Resident is also required to discuss all assessments and recommendations with the Attending prior to communicating with the primary physicians. The Consult or Clinic Attending is solely responsible for all therapeutic decisions. The Resident may arrange the order of routine blood products directly with the Puget Sound Blood Center.