

# Hematology Oncology – Goals & Objectives

- **Participating Site(s):** Inpatient hematology–oncology consult service; inpatient oncology service; outpatient hematology–oncology clinics
- **Duration:** 2-4 weeks
- **Required or Elective:** Required

## Rotation Overview

This rotation provides residents with structured experience in the evaluation and management of older adults across inpatient, outpatient, and post-acute care settings. The experience emphasizes recognition of atypical disease presentations, maintenance of functional independence, high-value and patient-centered decision-making, medication management, interdisciplinary collaboration, and alignment of care with patient goals and preferences.

## Overall Rotation Goal

The goal of this rotation is for residents to progressively demonstrate the knowledge, clinical skills, and professional judgment necessary to care for older adults by recognizing age-related changes in disease presentation, maintaining function and quality of life, and delivering evidence-based, high-value, and goal-concordant care.

## Educational Objectives (Aligned with ACGME Competencies)

### Patient Care

Residents will be able to:

- Evaluate patients with suspected or known hematologic and oncologic disorders and formulate prioritized differential diagnoses
- Recognize and initiate management of common oncologic and hematologic emergencies, including neutropenic fever, leukostasis, tumor lysis syndrome, spinal cord compression, and thrombotic microangiopathies
- Manage cancer-related symptoms, including pain, nausea, dyspnea, fatigue, and anemia, using evidence-based and patient-centered approaches
- Participate in the care of patients receiving chemotherapy, transfusions, anticoagulation, and supportive therapies under appropriate supervision

### Medical Knowledge

Residents will be able to:

- Explain the pathophysiology, clinical presentation, and diagnostic evaluation of common hematologic disorders, including anemias, leukemias, lymphomas, plasma cell dyscrasias, and platelet disorders
- Interpret peripheral blood smears, bone marrow aspirates (conceptually), coagulation studies, and relevant laboratory tests
- Describe mechanisms of action, indications, and common toxicities of frequently used chemotherapeutic agents and targeted therapies
- Apply evidence-based principles to the diagnosis and management of common malignancies, including breast, lung, colorectal, pancreatic, bladder, and hematologic cancers

### Practice-Based Learning and Improvement

Residents will be able to:

- Identify personal learning gaps related to hematology, oncology, and supportive care
- Incorporate current clinical guidelines and evidence-based literature into diagnostic and treatment decisions
- Reflect on patient outcomes and integrate feedback to improve future clinical practice

## **Interpersonal and Communication Skills**

Residents will be able to:

- Communicate diagnoses, prognoses, and treatment options clearly and compassionately to patients and families
- Participate in shared decision-making, including discussions of goals of care, prognosis, and treatment limitations
- Collaborate effectively with hematology–oncology faculty, nursing, pharmacy, social work, and palliative care teams

## **Professionalism**

Residents will be able to:

- Demonstrate empathy, respect, and accountability when caring for patients with serious illness
- Recognize personal limitations and seek appropriate supervision and consultation
- Uphold ethical standards, including informed consent, confidentiality, and end-of-life decision-making

## **Systems-Based Practice**

Residents will be able to:

- Utilize diagnostic testing, chemotherapy, transfusions, and specialty consultation appropriately to provide high-value care
- Coordinate care across inpatient, outpatient, infusion, and palliative settings
- Identify appropriate indications for hospice referral, palliative care consultation, and transitions to end-of-life care

## **PGY-Level Expectations**

### **PGY-1:**

- Identify common hematologic and oncologic conditions and communicate assessment findings under direct supervision
- Recognize oncologic emergencies and participate in initial stabilization and management

### **PGY-2:**

- Develop prioritized differential diagnoses and propose diagnostic and management plans with indirect supervision
- Interpret common hematologic studies and apply guideline-based therapies

### **PGY-3:**

- Independently manage routine hematologic and oncologic conditions with attending oversight
- Lead discussions regarding diagnostic strategies, symptom management, and goals of care for complex patients

## **Teaching and Learning Activities**

- Inpatient hematology–oncology consults and rounds

- Outpatient hematology–oncology clinic participation
- Case-based discussions emphasizing oncologic emergencies, transfusion medicine, and supportive care
- Review of peripheral smears, pathology reports, and treatment protocols
- Interdisciplinary discussions involving palliative care and hospice services

## **Evaluation and Feedback**

Resident performance is evaluated through:

- Direct faculty observation
- End-of-rotation faculty evaluation
- Assessment of clinical reasoning, symptom management, and communication skills
- Milestone-based assessment tools

Residents receive ongoing formative feedback and summative feedback at the conclusion of the rotation.

## **Supervision**

Faculty supervision is provided in accordance with ACGME supervision guidelines and is based on resident demonstrated competence, PGY level, and patient acuity.