SICKLE CELL ELECTIVE Rotation

Principal Preceptor:  Dr. Adetola Kassim

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Email is preferred method of communication

Rotation Site(s):

Browning in-patient service – 3.5 days/week
Benign Heme consultation service – 3.5 days/week
Outpatient sickle cell clinic – Wednesday mornings, all day Friday

Overall Learning Objectives:

At the conclusion of this elective, residents should be able to:

Knowledge:

- Understand the genetics and pathophysiology of sickle cell disease, as well as psychosocial factors, poverty and other socioeconomic factors, how PCPs fit into the care model
- Demonstrate understanding of the pathophysiology and treat of acute pain episodes and chronic pain (eg, avascular necrosis, musculoskeletal issues)
- Recognize and manage acute complications in SCD, including: acute chest syndrome, priapism, splenic sequestration, abdominal pain, vision changes
- Recognize and manage chronic complications in SCD, including: Heart, lung, and kidney issues, leg ulcers, CNS complications – strokes, silent strokes, and cognition.
- Recognize other problems that may exacerbate SCD such as diabetes, tobacco use, hypertension
- Identify disease modifying therapies: Medications (hydroxyurea, L-glutamine (Endari), voxeletor (Oxbryta), crizanlizumab (Adakveo)), chronic transfusion therapy
- Identify curative therapies for SCD: Bone marrow transplant and Gene therapy
- Feel comfortable with PCP management of SCD
- Resources for the PCP: Guidelines (2014 NHLBI, 2020 ASH), checklists, patient resources, the patient portal, apps
- Demonstrate knowledge of supportive care: Vaccines and screening, depression, women’s health, hypertension, diabetes, vitamin D and bone health, sleep, acute issues
Skills:

- Demonstrate indications and exclusions, complications, efficacies, dosing, and side effects/toxicities of how to manage hydroxyurea
- Recognize patients’ perspective of disease, including both positives and negatives of the care they receive
- Exhibit post-transplant knowledge for the PCP, including how to talk to patients about curative therapies, long term complications and side-effects
- Understand about home pain action plan and ED management approaches
- Know how to utilize available resources for psychosocial support of patients with SCD
- Utilize the medical home model, and gain knowledge of the role of the nurse case manager in coordination of care
- Recognize the impact of implicit and explicit bias on care of patients with SCD

The rotation will include:

- 7 half-days per week on the inpatient Browning or Benign Hematology consult service
- 3 half-days in the outpatient sickle cell clinic
- Afternoon didactic lectures
- Conferences: Sickle cell pathways conference 8.00 am – 9.00 am weekly
  Benign Heme conference every Friday (12 pm – 1.00pm)

Time Off:

Per department policy. Residents will have evenings and weekends off.

Conferences:

Sickle cell pathways conference 8.00 am – 9.00 am weekly

Benin Heme conference every Friday (12 pm – 1.00pm)

SAMPLE Weekly Summary grid for Rotation:

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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</thead>
<tbody>
<tr>
<td>8-9 am</td>
<td>Inpt</td>
<td>Inpt</td>
<td>Inpt</td>
<td>Inpt</td>
<td>Pathway conference</td>
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<td>9-12 pm</td>
<td>Inpt</td>
<td>Inpt</td>
<td>Clinic</td>
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<tr>
<td>12 – 1 pm</td>
<td>Inpt</td>
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<td>Inpt</td>
<td>Inpt</td>
<td>Benign Heme conference</td>
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<tr>
<td>1-4.30pm</td>
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<td>Inpt</td>
<td>Clinic</td>
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**Suggested Readings:**


