TRAINING OBJECTIVES FOR 2ND YEAR FELLOWS: ROTATION AT LOUISIANA COAGULATION LABORATORY

Objectives for the 2nd year Pediatric Hematology Fellow as part of their rotation in the coagulation laboratory:

1. Each physician will review the procedure manuals to get familiar with the various aspects of performing a procedure related to hemostasis.

2. The physician will discuss the importance of specimen collection and processing and how this has an effect on the result of any given test.

3. There will be interaction with a technologist at the various work stations in the coagulation lab. These workstations will include mechanical and optical clot detection, chromogenic assays, enzyme-immuno assays, platelet aggregation and genetic studies. The principles of each of these test methods will be discussed. The problems associated with test results as related to clinical situations will be highlighted.

4. The physician will be given some insight into the sources of differences in reagents used by coagulation laboratories and how these variations may impact the patient result.

5. Charts representing a variety of abnormal coagulation cases will be given to the physician to review. These cases will then be discussed based on what procedures are used to derive the clinical diagnosis.

The physician will meet with the lab’s Clinical Director to discuss important points used in clinical consultation related to the evaluation of hemostatic problems.
Goals and Objectives: Hematopoietic Stem Cell Transplantation

ELECTIVE

for 2ND Year Pediatric Hematology-Oncology Fellow

This rotation will provide the clinical fellow with a comprehensive overview of the application of hematopoietic stem cell transplant (HSCT) as treatment for both malignant and non-malignant conditions, understand the pathophysiology of disease processes such as GVHD, GVL, VOD, and Engraftment syndrome and learn the histocompatibility testing with matching strategies between donor and recipient.

The rotation is built around HSCT inpatient rounds, HSCT clinics, didactic sessions with the transplant physician, interactions with the HSCT team, and observations in the HSCT laboratory.

Specific Objectives for this Elective are:

1. Learn the pathophysiology & treatment of different diseases & complications peculiar to HSCT:
   a. Graft versus Host Disease (GVHD)
   b. Veno-Occlusive Disease of the Liver (VOD)
   c. Infections
   d. Engraftment/graft failure

2. Understand the process of matching between donor & recipient
   a. HLA matching by molecular typing
   b. Clinical factors: gender, age, CMV status
   c. What constitute “best donor”

3. Identify the required process to provide stem cell donor clearance

4. Know different sources of stem cell available for transplantation:
   a. Bone Marrow (BM) vs. Peripheral Blood Stem Cells (PBSC) vs. Cord Blood (CB)
   b. Composition, cell yield, outcome
   c. Requirements for successful engraftment

5. Learn the different forms of conditioning given to patients
   a. Ablative vs. non-ablative
   b. Reduced intensity conditioning (RIC)
Goals and Objectives: Inpatient Rotation

Team Structure and Responsibilities:

The Pediatric Hematology/Oncology inpatient team consists of an attending physician (full-time faculty), a Pediatric Hematology-Oncology fellow (first or second year fellow), 1-2 upper level residents (junior (PL-2) or senior (PL-3) residents), 2 interns (PL-1), and 2 nurse practitioners (NP). Other members of the team include nurse coordinator, social worker, and 3-4 medical students. Also available are pharmacist, nutritionist, psychologists, and child life specialist.

The attending physician has the following responsibilities:

- Holds appropriate clinical privileges at our institution
- Supervises and has ultimate responsibility for the care of patients on the inpatient service of the team
- Conducts daily rounds with the team, which includes reviewing clinical information and the plan for each patient and patient-based teaching.
- Oversees order writing. Residents and NPs write all routine orders (i.e., not chemotherapy) for patients under their care. In the unusual circumstance when the attending physician writes an order, he/she must communicate that information to the appropriate resident/NP in a timely fashion.
- Writes admission notes and a daily progress notes in conjunction with the residents for all patients on the service. Notes for patients in the ICU are written by the inpatient fellow under the supervision of the attending.
- Provides verbal feedback and written evaluation of all members of the team.

Responsibilities of the fellows:

- Oversees care of all patients on the service, including those in the ICU.
- Writes all chemotherapy orders (checked by attending, nurse coordinator, staff nurse, and pharmacist).
- Home night and weekend/holiday call one week every third.
- Third year fellows do 4 weeks (2-week block) of “pre-tending” or junior attending. During those periods, the third year fellow functions independently as attending for the team, including all clinical and teaching responsibilities with the indirect supervision of the attending physician.

Overall Goals:

1. To be competent in the comprehensive care of acutely ill pediatric patients with malignancies and hematologic diseases. (Patient care, medical knowledge, professionalism, interpersonal and communication skills, practice-based learning and improvement, systems-based practice)

2. To learn about the pathophysiology, diagnosis, and management of malignancies (including, but not limited to acute leukemias, lymphomas, brain tumors, sarcomas), as well as hematologic disorders (such as bone marrow failure states, hemolytic anemias, immune thrombocytopenic purpura, bleeding disorders and thrombophilic states). (Patient care, medical knowledge, practice-based learning and improvement)
3. To be competent in the recognition and management of a broad range of complications in patients with hematologic disorders and malignancies, including, but not limited to: (Patient care, medical knowledge)
   a. Neutropenic fevers
   b. Anemia
   c. Thrombocytopenia
   d. DIC
   e. Tumor Lysis Syndrome
   f. Graft-versus-host disease (GVHD)
   g. Gastrointestinal hemorrhage
   h. Acute renal failure
   i. Metabolic and electrolyte imbalance
   j. Infection

4. To understand the basic principles in managing patients who are undergoing chemotherapy, radiation therapy, and bone marrow transplantation. (Medical knowledge)

5. To recognize and manage hematologic and oncologic emergencies, such as spinal cord compression, acute chest syndrome, superior vena cava syndrome, and tumor lysis syndrome. (Patient care, medical knowledge)

6. To perform and interpret the technical procedures requisite to our sub-specialty including, but not limited to: (Patient care, medical knowledge)
   a. Reading peripheral blood smear
   b. Performance of bone marrow aspirate and biopsy
   c. Reading bone marrow aspirates and biopsies
   d. Perform lumbar puncture
   e. Access Ommaya reservoirs
   f. Administer intrathecal chemotherapy
   g. Interpret CSF cytology
   h. Interpret laboratory studies of hemostasis
   i. Interpret histocompatibility testing

7. To function as a member of a multidisciplinary team caring for patients with cancer or hematologic disorders. (Patient care, professionalism, interpersonal and communication skills, systems-based practice)

8. To participate in and, ultimately lead family meetings and be an effective communicator. (Professionalism, interpersonal and communication skills)

9. To learn to address end-of-life issues with patients and family members, including an understanding of effective pain management and palliative care. (Patient care, medical knowledge, professionalism, interpersonal and communication skills, and systems-based practice)
Objectives (Competencies addressed)

At the completion of this rotation, the fellow will be able to:

First-Year Fellow:

1. Gather complete clinical data, including the performance of a detailed history, a complete and accurate physical examination, and order, collect and interpret relevant laboratory tests and imaging studies. (Patient care, medical knowledge, professionalism, practice-based learning and improvement, interpersonal and communication skills, systems-based practice)

2. Formulate a differential diagnosis, and outline a plan for evaluating and managing patients admitted to his/her service. (Patient care, medical knowledge)

3. Demonstrate organizational skills necessary for the care of hospitalized patients, including prioritization of patient problems and the use of information technology. (Practice-based learning and improvement, systems-based practice)

4. Demonstrate the appropriate utilization of consult services and diagnostic testing. (Medical knowledge, practice-based learning and improvement, systems-based practice)

5. Provide accurate, thorough, and prompt documentation of all patient/family interactions. (Professionalism, communication and interpersonal skills)

6. Participate in family conferences and communicate effectively to patients and families. (Professionalism, communication and interpersonal skills)

Second-Year Fellow:

1. Function effectively as a consultant to other multidisciplinary teams to ensure proper care and welfare of patients. (Patient care, medical knowledge, professionalism, interpersonal and communication skills, systems-based practice)

Third-Year Fellow:

1. Understand the indications for, risks of, and be able to perform and supervise residents in the performance of procedures, such as bone marrow aspirates, biopsies, and lumbar punctures. (Patient care, medical knowledge)

2. Function as an effective team leader and teacher. Lead family conferences and communicate effectively with patients and families. (Professionalism, Interpersonal and communication skills)

3. Demonstrate ability to supervise discharge planning and follow-up, including provision of appropriate level of care. (Patient care, medical knowledge, professionalism, interpersonal and communication skills, practice-based learning and improvement, systems-based practice)
Goals and Objectives: JUNIOR ATTENDING ROTATION FOR THIRD YEAR
Pediatric Hematology-Oncology Fellow

Goal:

The third year fellow will function independently (as a junior attending) in the management of the common and daily activities in the Pediatric Hematology-Oncology unit under the supervision of the faculty attending. This rotation is a total of 4 week rotation divided in 2-week blocks.

Objectives:

1) The fellow will conduct daily rounds with the residents and medical students discussing the acute care and management of the in-patients. The fellow will write the daily notes under the supervision of the attending physician.
2) The fellow will teach the pertinent topics related to Pediatric Hematology-Oncology to the residents and medical students during rounds and in lecture format. The goals and objectives for the resident’s rotation are distributed to the fellow to facility these teaching activities.
3) The fellow will make the diagnostic and management decisions of newly diagnosed patients. The fellow will be in charge of family conference, convey bad news to the family when indicated, and lead the team in the appropriate tests and procedures to enroll patients in protocol.

Duties and responsibilities:

1) Daily rounds with the residents and medical students. (Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-based Learning, System-based Learning)
2) Write the notes describing physical exam, assessment, decision making and plan and discuss these with the team (Medical records and documentation appropriately kept). (Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-based Learning, System-based Learning).
3) Answer consults. (Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-based Learning, System-based Learning).
4) Teaching and lecturing the residents and medical students in the topics related to the rotation. (Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-based Learning, System-based Learning).
5) Lead the team in the diagnosis and management of new hematology-oncology patients. (Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-based Learning, System-based Learning).
6) Perform family conferences with the patients and the families as needed. (Patient Care, Medical Knowledge, Interpersonal and Communication Skills, Professionalism, Practice-based Learning, System-based Learning).
Goals and Objectives: Outpatient Rotation

Team Structure and Responsibilities:
The Outpatient Clinic consists of 2-3 Attending physicians, 1-2 Pediatric Hematology-Oncology fellows and 1-2 residents and medical students.

Attending Physician:
- Holds appropriate clinical privileges at our institution.
- Supervises and assumes ultimate responsibility for the care of outpatients in their respective clinics.
- Reviews the clinical information and plan for each patient and performs patient-based teaching.
- Oversees order writing, but fellows must routinely write all orders for patients under their care. In those unusual circumstances when the attending writes an order, he/she must communicate this to the fellow in a timely manner.
- Responsible for providing verbal feedback and written evaluation of all members of the team.

Fellow:
- Oversees the care of all patients seen in the outpatient setting.
- Responsible for communicating test results to patients and family members and provide information to the referring physician.
- Writes all chemotherapy orders.
- Performs procedures of the patients taken care for

Overall Goals:
1. To be competent in the comprehensive care of chronically and acutely ill patients with hematologic and solid organ malignancies and benign hematologic disorders. (Patient care, medical knowledge, professionalism, interpersonal and communication skills, practice-based learning and improvement, systems-based practice)

2. To learn about the pathophysiology, diagnosis and basic principles of management of common pediatric malignancies including, but not limited to, acute leukemias, lymphomas, brain tumors and sarcomas, as well as benign hematologic disorders such as hemoglobinopathies (sickle cell anemia, thalassemia syndromes), hemolytic anemias, disorders of hemostasis, disorders of WBC’s, and immune function. (Patient care, medical knowledge, practice-based learning and improvement)
3. To be competent in the medical management of chronically and acutely ill patients with a broad range of hematologic and solid organ tumors. This includes: (Patient care, medical knowledge, systems-based practice)
   a. Understanding general goals of therapy (i.e., curative, neoadjuvant, adjuvant, or palliative)
   b. Recognizing and managing complications of chemotherapy:
      i. Neutropenic fever and infection
      ii. Anemia
      iii. Thrombocytopenia
      iv. DIC
      v. Transfusion-acquired graft versus host disease
      vi. Metabolic and electrolyte derangements
   c. Recognize when patients require immediate hospitalization, and know how to implement prompt care for the acutely ill patient.

4. To understand the basic principles in managing patients who are undergoing chemotherapy, radiation therapy and bone marrow transplantation. (Medical knowledge).

5. To develop a rational approach to pain management in the cancer patient. (Patient care, medical knowledge)

6. To learn how to function as a member of an outpatient multidisciplinary team caring for patients with hematologic malignancies and solid tumors, as well as chronic benign hematologic disorders. (Patient care, professionalism, interpersonal and communication skills, systems-based practice).

7. To learn to provide prompt evidenced-based consultation on a wide variety of hematologic and oncologic conditions, and to communicate those findings and recommendations to referring physicians in a professional manner. (Patient care, professionalism, interpersonal and communication skills, systems-based practice).

8. To be able to participate in family meetings and be an effective communicator. (Professionalism, interpersonal and communication skills).

9. To learn how to address end of life issues with patients and family members. This includes an understanding of effective pain management and palliative care. (Medical knowledge, professionalism, interpersonal and communication skills, systems-based practice)
Objectives (Competencies addressed)

At the completion of this rotation, the fellow will be able to:

First-Year Fellow:
1. Formulate a differential diagnosis and outline a plan for evaluating and managing patients referred as a consultation. (Patient care, medical knowledge)

2. Demonstrate organizational skills necessary for the care of out-patients, including prioritization of patient problems and the use of information technology. (Practice-based learning and improvement, Systems-based practice)

3. Demonstrate baseline competency and improvement in medical interviewing and physical diagnosis. (Patient care, Interpersonal and communication skills)

4. Discuss the differential diagnosis and direct the evaluation and management of out-patients. (Patient care, medical knowledge, Professionalism, Interpersonal and communication skills)

5. Participate in family meetings and communicate effectively with patients and their families. (Professionalism, Interpersonal and communication skills)

6. Demonstrate ability to supervise admission planning and appropriate level of care. (Patient care, medical knowledge, Systems-based practice)

7. Promptly document all patient interactions in a concise, thorough manner. (Professionalism, Systems-based practice, Interpersonal and communication skills)

8. Demonstrate organizational skills necessary for supervising the care of community-based patients. (Patient care, Practice-based learning and improvement, Systems-based practice)

9. Understand the indications for, risks of, and become competent in the performance of procedures such as bone marrow aspiration, bone marrow biopsy, and lumbar puncture. (Patient care, Medical knowledge)

Second-Year Fellow
1. Demonstrate an understanding of the appropriate utilization of consult services and diagnostic testing. (Medical knowledge, Practice-based learning and Improvement, Systems-based practice)

2. Understand the indications for, risks of and be able to supervise house staff in the performance of procedures such as bone marrow aspiration, bone marrow biopsy, and lumbar puncture. (Patient care, Medical knowledge)

Third-Year Fellow
1. Demonstrate competency in the diagnosis and management of patients with hematologic and solid organ malignancies, as well as benign hematologic disorders as outlined above. Understand the natural history of hematologic and oncologic disorders through longitudinal experience with outpatients. The fellow should be able to perform independently with indirect or minimal supervision of the attending physician in the outpatient setting. (Patient Care, Medical Knowledge, Professionalism, Interpersonal and Communication Skills, Practice-based learning and improvement, Systems-based practice).

2. Function effectively as the head of an outpatient multi-disciplinary team to ensure proper care and welfare of patients. (Patient care, Professionalism, Interpersonal and communication skills, Systems-based practice)

3. Function as an effective team manager, leader and teacher. (Patient care, medical knowledge, professionalism, interpersonal and communication skills, practice-based learning and improvement, systems-based practice)

4. Lead family meetings and communicate effectively with respect to explaining the diagnosis, prognosis, plan of therapy, and any research issues. (Patient care, medical knowledge)
**Goals and Objectives: PATHOLOGY ROTATION**

**First Year PHO Fellow**

**Duration:** Weekly x 4 during outpatient months

**Location:** Department of Pathology at Children’s Hospital

**Goals:**

1. Discuss different methods used in the laboratory to support the hematology/oncology service. *(Medical Knowledge, Practice-based, and System-based Competencies)*
2. Discuss the advantages and limitations to techniques used in the laboratory. *(Medical Knowledge, Practice-based, and System-based Competencies)*
3. Recognize normal hematopoietic cells, abnormal hematopoietic cells, tumor cells, and common childhood tumor histologies [Cell Morphology]. *(Medical Knowledge, Practice-based, and System-based Competencies)*
4. Learn the correct technique to prepare bone marrow and peripheral smears. *(Medical Knowledge, Practice-based, and System-based Competencies)*

**Objectives:**

1. Review slides daily with pathologist of bone marrow (BM) aspirates, clot sections, and special stains. *(Patient Care, Medical Knowledge, Practice-based, and System-based Competencies)*
2. Correlate histology with clinical and laboratory findings [i.e. flow cytometry, cytogenetics]. *(Patient Care, Medical Knowledge, Practice-based, and System-based Competencies)*
3. Review all flow cytometry workups, results, and participate in the interpretation of those results. *(Patient Care, Medical Knowledge, Practice-based, and System-based Competencies)*
4. Observe techniques in the laboratory, including automated CBC’s, coagulation procedures, hemoglobin variant analysis and correlate clinically. *(Patient Care, Medical Knowledge, Practice-based, and System-based Competencies)*
5. Perform peripheral blood and bone marrow differentials and determine differential diagnosis. *(Patient Care, Medical Knowledge, Practice-based, and System-based Competencies)*
6. Present a 1 hour conference to the pathologists regarding a hematology/oncology/pathology topic. *(Medical Knowledge, Practice-based, and System-based Competencies)*
7. Observe the preparation of frozen sections and the relevance in the preliminary diagnosis of potential malignant solid tumors. *(Medical Knowledge, Practice-based, and System-based Competencies)*
8. Record all activities performed and observed during the rotation (BMA smears differential performed, laboratory procedures observed, BMA & Bx reviewed with pathologists). *(Medical Knowledge, Practice-based, and System-based Competencies)*
9. Assist the hematology technologists on BM procedures preparing bone marrow aspiration slides and assessing the adequacy of BM biopsies. *(Medical Knowledge, Practice-based, and System-based Competencies)*
Goals and Objectives: RADIATION ONCOLOGY ROTATION
2nd Year Fellow Pediatric Hematology-Oncology

Length: 2 weeks
Location: Touro Infirmary

Goals:

1) The fellow will get familiar with modern radiation oncology practice and procedures:
   (Medical Knowledge, Patient Care, Practice-based, and System-based Competencies)
   a. Consultation
   b. Simulation
   c. Treatment planning
   d. Treatment management
   e. Post-treatment follow-up of diverse patient population, including adult and pediatric patients.
2) Understanding of evidence based indications for radiation treatment in adult and pediatric oncology patients. (Patient Care, Medical Knowledge Competencies)
3) Understand external beam and implant radiation techniques. (Medical Knowledge, Patient Care, Practice-based, and System-based Competencies)
4) Understand expected toxicities and side effects of radiation treatment and their appropriate management. (Medical Knowledge, Patient Care, Practice-based, and System-based Competencies)

Objectives:

1) Understand interaction of multimodality therapies including surgery, chemotherapy, and radiation therapy with emphasis on multidisciplinary communication and coordination to improve patient care. (Medical Knowledge, Patient Care, Practice-based, and System-based, Interpersonal and Communication Skills Competencies)
2) Understand the benefits of sophisticated planning techniques (i.e. IMRT) with particular emphasis on the unique clinical considerations of pediatric radiation oncology patients. The fellow also has the opportunity to observe intracranial radiosurgery procedures with Gamma (γ) Knife and extracranial radiosurgery procedures with Cyber Knife. (Medical Knowledge, Patient Care, Practice-based, and System-based Competencies)
3) Evaluate and participate in the care of patients in clinic under direct supervision of attending staff. (Medical Knowledge, Patient Care, Practice-based, and System-based, Interpersonal and Communication Skills Competencies)
Goals and Objectives: Scholarly Activity

First-Year Fellow:
1. The fellow will write a case report to be presented at a local or regional meeting.
2. The fellow will develop a teaching portfolio based on the teaching material and lectures given to the residents, medical students, and PHO core lectures.
3. The fellow identifies a clinical mentor, who will give the fellow during the years of training and helps with the research project when needed.

Second-Year Fellow:
1. The fellow will identify a project that will be pursued during the second half of this year and third years of training.
2. The fellow will identify a research mentor for the project, with approval by the Program Director (PD), Division Chief, and SOC when needed.
3. The fellow will identify at least three members for his/her Scholarly Oversight Committee (SOC) with the assistance of the research/clinical mentor and the PD. At least one member of the SOC must be from outside the Division of Pediatric Hematology/Oncology.
4. The fellow is encouraged to write at least one grant proposal while the fellow is pursuing the project. This may be directed toward one of the internal training grants.
5. Pursue scholarly activity at least 80% time.
6. Schedule SOC meeting no less often than every 6 months. First meeting must be before the beginning of the research project.
7. Get satisfactory progress reports from the research mentor and the SOC.
8. Prepare and present poster reporting progress on project at SOC and Research Day if enough data available.

Third-Year Fellow:
1. Continue to pursue project 80% time.
2. SOC to meet no less often than every 6 months. Last meeting in June of third year must independently conclude that fellow has made satisfactory progress.
3. The fellow will present his/her project at Grand Rounds for the Department of Pediatrics.
4. Submit written report of scholarly activity to Program Director. Preferably this would be in the form of a first author publication, suitable for submission to a peer-reviewed journal. If the project is incomplete, a summary progress report will be considered, but only if the SOC report from June of the third year has documented satisfactory progress.
5. It is desirable that, in addition to a report of the fellow’s scholarly activity, that the fellow also publishes reviews and case reports.
6. To present results of scholarly activity at regional or national meeting.
Goals and Objectives: TRANSFUSION MEDICINE ROTATION
2nd YEAR FELLOW

This 2-week rotation is designed to give the Hematology Oncology Fellow an overview of Transfusion Medicine from donor qualification, through processing and compatibility testing/ immunohematology. In order to provide a complete overview this rotation is carried out in The Blood Center and Children’s Hospital. The Blood Center is a free-standing donor center which collects whole blood donors, plateletpheresis donors, produces components and has an AABB accredited Immunohematology Reference Laboratory. Children’s Hospital Transfusion Service performs compatibility testing, component modification, and irradiation of blood products.

By the end of this rotation the Hematology Oncology Fellow will:

1. Outline the process for allogeneic whole blood donor qualification and collection and processing (testing)
2. Describe platelet apheresis including donor requirements and testing
3. Outline the process for production of components from Whole Blood (Red Cells, Fresh Frozen Plasma, Platelets and Cryoprecipitated AHF)
4. Discuss Quality Program and Regulation of The Blood Center
5. Discuss the following serologic problems/ processes
   a. Routine antibody screening and compatibility testing
   b. ABO Discrepancies
   c. Antibody identification
   d. Indications for elution
   e. Absorptions- warm, cold
   f. Direct Antiglobulin Testing
   g. Neonatal immunohematologic testing
6. Therapeutic apheresis in pediatrics.

The attached schedule is designed to provide the rotation in Transfusion Medicine and permit the Fellows to participate in their continuity clinics and other required activities. The schedule may be modified on an individual basis.

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<thead>
<tr>
<th>DAY</th>
<th>DURATION</th>
<th>LOCATION</th>
<th>SUBJECT</th>
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<tbody>
<tr>
<td>Day 1</td>
<td>Full day</td>
<td>TBC</td>
<td>Donor qualification and collection, platelet apheresis, component production</td>
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<tr>
<td>Day 2</td>
<td>Full day</td>
<td>TBC-Hammond</td>
<td>Donor testing, labeling</td>
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<tr>
<td>Day 3</td>
<td>Half day</td>
<td>TBC</td>
<td>Quality Program/ Regulation</td>
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<tr>
<td>Day 4</td>
<td>Half day</td>
<td>TBC</td>
<td>Medical Affairs</td>
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<tr>
<td>Day 5</td>
<td>Full day</td>
<td>TBC</td>
<td>Immunohematology</td>
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<tr>
<td>Day 6</td>
<td>Full day</td>
<td>TBC</td>
<td>Immunohematology</td>
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<tr>
<td>Day 7</td>
<td>Half day</td>
<td>Children’s</td>
<td>Therapeutic apheresis</td>
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<td>Day 8</td>
<td>Half day</td>
<td>Children’s</td>
<td>Immunohematology (Neonatal)</td>
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