

O4. Haematological emergencies

Assessment of these competencies is via Mini-CEX, CbD (formative or summative) or ACAT-EM and a reflective log.

Potential presentations in which these competencies could be assessed include the following:

- Severe pain or breathlessness in patient with known Sickle cell disease, thalassaemia or other haematological disease e.g. Hodgkin's disease
- Acute widespread purpura/ bruising
- Any presentation of patient with β Thalassaemia Major or Sickle Cell- where care may be impacted by disease
- Sepsis in patient receiving chemotherapy/ immunosuppressives
- Patient with acutely swollen leg and suspected DVT or chest pain and suspected PE

Trainees are expected to achieve EPA level 2 (Direct active – full supervision by senior clinician, with prompting/ verbal and actual guidance and help throughout) in these competencies.

Knowledge/ Skill/ Behaviour	Detail of competency
Knowledge	Understands the pathophysiology and likely presentations of acute haematological emergencies e.g. disseminated intravascular coagulation
	Is able to outline common acute presentations of sickle cell and β Thalassaemic major/ minor disease, including acute painful crises, osteomyelitis/ avascular necrosis, acute infections, anaemia, acute chest syndrome, stroke and thromboembolic events
	Understands the types of infection likely to present in a patient with sickle cell or thalassaemia
	Is able to diagnose, organise follow- up and explain types of thrombocytopenia
	Knows the causes and initial investigation of patients presenting with bruising and spontaneous bleeding, including over-anticoagulation and its reversal (in life threatening situations)
Skills- History	Obtains a detailed history of sickle cell and thalassaemic disease including of current treatment/ transfusion regimen, treatment of previous episodes, any concerns they may have about current episode
Skills - Examination	Rapidly and systematically assesses the patient in terms of ABCDE, and temperature
	Is able to differentiate different types of rash e.g. purpura

Knowledge/ Skill/ Behaviour	Detail of competency
Skills- investigation and treatment	Is able to assess pain, use the appropriate pain score for age and institute analgesia using an analgesic ladder
	Administers oxygen, establishes intravenous access, takes blood cultures and administers antibiotics and intravenous fluids and pain relief
	Organises, interprets and acts on initial investigations including bloods, ABGs, blood cultures
	Is able to initiate management of life- threatening causes of purpura and bruising
Skills- Clinical decision making and judgement (In addition to CC1)	Elects the appropriate arena of care and degree of monitoring for patients with an acute haematological emergency
	Refers to appropriate specialist and seeks senior support in timely manner
Behaviour- communication & professionalism (In addition to CC7 & CC8)	Understands the patient's expertise in their own condition of sickle cell or thalassaemia
Paediatric	No additional competences