

The RCGP Curriculum

The Curriculum Topic Guides

Super-Condensed Topic Guides 2021



Haematology

The Role of the GP and emerging issues in primary care

- Increasing prevalence of chronic haematological disorders
- Evolving anticoagulant options
- Increasing use of ambulatory and shared care management plans between secondary care specialist teams and the community.

Knowledge and Skills Self-Assessment Guide

Symptoms and Signs

- Bleeding, bruising, petechiae and purpura
- Bone pain or pathological fractures
- Fatigue, weight loss, pallor, recurrent infection or recurrent miscarriage
- Hyperviscosity symptoms (headache, visual loss, acute thrombosis)
- Jaundice (e.g.: secondary to haemolysis)
- Lymphadenopathy, splenomegaly and hepatomegaly
- Skin manifestations of haematological disease (e.g. mycosis fungoides)
- Systemic manifestations of haematological disease (e.g. sickling crisis)

Common and Important Conditions

- Anaemia and its causes
- Anticoagulants: indications, initiation, management and reversal/withdrawal

- Clotting disorders including genetic causes such as haemophilia and von Willebrand's disease, infective causes such as meningococcal septicaemia and disseminated intravascular coagulation
- Common abnormalities of blood films and their management (e.g. macrocytosis, microcytosis, spherocytosis, neutrophilia)
- Enlarged lymph nodes of any cause +/- splenomegaly, including infection and malignancy (both primary and secondary); management of a single enlarged lymph node
- Haematological malignancies
- Haemochromatosis
- Haemoglobinopathies such as thalassaemia, sickle cell disease
- Haemolytic diseases including management of rhesus negative women in pregnancy, autoimmune and transfusion haemolysis
- Lymphatic disorders such as primary lymphoedema
- Myelodysplasia and aplastic anaemia
- Myeloproliferative disorders such as polycythaemia rubra vera, thrombocytosis
- Neutropenia: primary and secondary including chemotherapy and drug-induced
- Pancytopenia and its causes
- Polycythaemia: primary and secondary such as to hypoxia, malignancy

Examinations and Procedures

- Appropriately obtaining blood samples including near patient testing

Investigations

- Normal haematological parameters and interpretation of laboratory investigations
- Antenatal screening for inherited haematological disorders (e.g. thalassaemia, sickle cell)

How this might be tested in MRCGP

AKT

- Appropriate use of different anticoagulant therapies

- Interpretation of haematinic results
- Differential diagnosis of lymphadenopathy

RCA

- Woman was investigated for tiredness and lethargy and has macrocytic anaemia and hypercholesterolaemia
- Child has developed purpuric rash on her legs (photo supplied) and three days of mild abdominal and joint pains
- Teenager has had a persistent and worsening sore throat for five days and now has abdominal pain and lymphadenopathy

WPBA

- Case Discussion on the management of a patient with persistent thrombocytopenia who is otherwise well
- Audit of the practice data on the appropriateness and value of requests for 'routine' haematology laboratory tests
- Learning log about the care of an elderly man who lives alone and has just been diagnosed with chronic lymphocytic leukaemia

How to learn this topic

This section describes *examples* of opportunities for learning.
We recognise that Covid-19 restrictions have significantly affected their accessibility



Other relevant specialties:

- Oncology
- Stroke Medicine
- Metabolic and Endocrinology
- Cardiology
- Obstetrics
- Paediatrics
- Dietetics

Acute

- A+E eg: acute stroke or haemorrhage.
- Seeing & managing haematological diseases in hospital/ urgent care
- Following the patient journey e.g. via ward rounds, MDT meetings, discharge planning
- Observing investigative procedures
- Responding to out of hours emergencies

Primary Care

- Day to day practice
- OOH
- Community Specialist clinics
- Risk assessment and management of long term anticoagulation
- Care of vulnerable communities eg. BAME

Core Themes

- Communication and Consultation** - Risk-benefit conversations (e.g. screening, testing, prevention); appropriate communication of the status of a deteriorating patient; health literacy; diagnostic overshadowing
- **Prescribing** – cost-effective and evidence-based management
 - **Co-morbidity** – interaction with other disease processes; complications
 - **Teamworking** - learning from health professionals and patients who have lived experience and specialist training
 - **Ethical and medico-legal** - confidentiality/disclosure, data protection, consent, immunisation, autonomy and patient 'activation'; primary and secondary prevention

Community/MDT

- Anticoagulation clinic
- Palliative Care teams
- Clinical nurse specialists in haematology
- Community pharmacists – drug safety and medicines use review
- Management of patients in nursing homes and residential care

Tips

- Audit
- Significant Event Analysis
- Clinical governance
- Risk Assessment
- Dr as teacher
- Leadership
- BNF
- NICE guidelines