

Duties of On-Call Resident for Pediatric Hematology/Oncology:

Weekdays –Evenings:

1. Handover will be done at 4:30 pm on 3B either by the hematology-oncology resident, Nurse Practitioner or staff; if the on-call resident does not get a hand-over, he/she can page the staff (on ward duty – not the staff on call) by 5:30 pm.
2. On Wednesdays the staff on call will cover in-patient issues until 7:30 pm; for patients referred to the ER between 4:30 – 7:30 pm, the pediatric resident will assess the patient and discuss with the staff on call. If there is no pediatric resident available (ie the in-house resident is from Family Practice or another subspecialty doing their pediatric rotation) the staff may be requested to help with the admission. A written handover for the evening resident will be available on the ward. If no handover is available the resident should page the staff member who was on ward duty that day for a verbal handover.

Weekdays – Mornings:

1. Handover regarding overnight issues will be given to the hematology-oncology resident or Nurse Practitioner (both of whom should be in the building by 8:00 am most days). If there is no resident or nurse practitioner that day then the resident should page the staff member covering the ward.

Weekends

1. Handover will occur at 4:30 pm Friday.
2. The staff will do rounds on Saturday and Sunday addressing both routine and urgent concerns. Lines and radiological investigations should be organized by staff on weekends, UNLESS it is an urgent scenario that requires emergent intervention when the staff member has left/not arrived. After rounds, the staff will handover to the pediatric senior resident (pager 1645).
3. For elective admissions for administration of chemotherapy, admission notes and orders will have been done by the team during the week and should be available to the nursing staff on the ward.
4. For emergency admissions/assessments, the senior pediatric resident or designated junior pediatric resident will assess and admit as needed.
5. If the ward calls the pediatric resident regarding urgent issues prior to the staff's arrival (staff arrive at different times on the weekend), they are expected to deal with the issues. Non-urgent questions can wait until the staff arrives.

General Statements:

1. If the ward calls the resident about a patient concern overnight or when the staff member is not available in house on the weekend, they are expected to respond to the issue. If this requires a call to the staff member, then the resident should be calling the staff and not leave it for the nurse.

2. The senior pediatric resident may designate the junior pediatric resident to admit or attend to pediatric hematology/oncology patients as needed depending on other responsibilities they are attending to during the call.
3. The residents should note that tumor board reports are generally available on all oncology patients in the “Decentralized Transcription Reports” of Meditech, which may facilitate the ‘past medical history’ and details of the disease for any admission.