9:30 - 10:15 – Dr. Ulrickson: Acute Leukemia

1. Understand the incidence of AML and ALL in adult populations.
2. AML:
3. List several risk factors for AML.
4. Describe the clinical syndrome (including lab values) that should make an internist suspect AML, and specifically pro-myelocytic AML.
5. List three clinical scenarios associated with AML that require emergent diagnosis and management.
6. Describe the prognosis for the favorable, intermediate, and unfavorable risk groups.
7. Describe the induction treatment and consolidation treatment for AML.
8. Describe the situation in which an allogenic bone marrow transplant should be considered after induction treatment.
9. ALL:
10. List several risk factors for ALL.
11. Describe the clinical syndrome (including lab values) that should make an internist suspect ALL.
12. Understand the importance of testicular exam and LP in patients diagnosed with ALL.
13. Describe some favorable vs. unfavorable prognostic factors.

10:15 – 11:00 – Dr. Ulrickson: Bleeding disorders

1. Differentiate the history and clinical syndrome of a patient with a bleeding disorder involving primary hemostasis (thrombocytopenia and qualitative platelet defects) from secondary hemostasis (humoral clotting factor problems).
2. Draw a simple representation of the clotting cascade. Interpret the laboratory tests used to evaluate bleeding disorders including prothrombin time (PT), activated partial thromboplastin time (aPTT), thrombin clotting time (TCT) and understand what part of the clotting cascade each of these tests measure.
3. Describe the indication for ordering mixing studies and know how to interpret the results.
4. Describe the clinical presentation and laboratory findings of hemophilia A and B (including coagulation factor levels), and von Willebrand’s disease (including von Willebrand factor activity and antigen levels). Distinguish between hemophilia and von Willebrand’s disease based on genetic inheritance patterns.

11:30 – 12:15 – Dr. Ulrickson: Transfusion pearls

1. List the indications for the transfusion of packed red blood cells, fresh frozen plasma, platelets, and cryoprecipitate.
2. Compare and contrast the following transfusion reactions including their clinical
3. presentations, diagnostic evaluation, and treatment: Acute hemolytic transfusion reaction, delayed hemolytic transfusion reaction, febrile transfusion reaction, transfusion associated circulatory overload (TACO), and transfusion associated acute lung injury (TRALI).
4. List the indications for transfusing specific types of blood products including CMV negative, leukoreduced, washed, and irradiated products.