

Welcome to Bone Marrow Transplant (BMT) Service!

While the BMT patients are complex and the presentations and rounds are very particular, there are a lot of opportunities to think about physiology and to learn a ton about an area that a lot of residencies don't get the chance to cover.

- **This is no longer a standard rotation during AY26-27, but if you are interested in BMT as an elective please reach out to the chief residents.**

Your feedback matters: fill out this [SHORT survey](#) at the end of each clinical rotation (excluding ELN/ELC/vacation/ADB) so we can catalyze change. Make sure you include your name in the separate link (feedback is still anonymous) for completion credit!

Staffing

- **Sign out:** Please coordinate signout with the outgoing residents prior to your transition

General Information & Announcements

- **Overview of BMT/SCT Program:** The BCH program is one of the largest pediatric transplant centers performing over 100 transplants per year.
 - Offer all types of transplants (autologous, sibling donor, unrelated donor, umbilical cord blood, haploidentical donor) as well as novel approaches such as gene therapy for immunodeficiencies and storage diseases.
 - There are 14 beds on the main unit on 6W, but all of the 6th floor is trained to care for transplant patients and patients are occasionally on other floors as well
 - These patients have long hospital stays and are often critically ill. Our goal is to increase your knowledge about and proficiency in caring for these patients who have multisystem problems
- **Workroom:** On 6 West behind nurse's station (Room 604.2)
- **Patient List:** Stem Cell Transplant Team A
- **Vocera roles:** Assignments --> Manage --> Team Intern or Team Resident --> *Medical Teams --> select Stem Cell Transplant A Team
- **NP Staffing:** As we move into the 2026 academic year, the inpatient oncology APP team is expanding in response to changes in residency and fellowship schedules, and to strengthen overnight coverage for both oncology and SCT. You may notice more APPs scheduled on certain shifts. This is part of a large onboarding effort for new graduate APPs. In many cases, one APP will be in a precepting role and one in a training role. This temporary increase in staffing supports safe, high-quality care during orientation and is not reflective of our long-term coverage model.

Day Information

- **Sign Out Times:** 7 AM and 5 PM
- **Team:** Consists of an attending, a 1st year fellow, NP or PA, and the resident
- **Census:** Typically around 20 patients, which will be divided between the resident and NP
- **Schedule:** Monday- Saturday Days only
 - 7:00 AM: Get sign-out on your patients from overnight physician/provider, pre-round on your patients and examine any who are acutely ill
 - 7:30- 8:00 AM: Friday AM resident lecture for you and the oncology residents. This is a mandatory lecture during your BMT block
 - 8:00 AM: Round with team (9:00 AM start Thursday because of staff development conference)

- ~9:00- 10:30 AM: Attending and fellow break away to round on ICU patients (when present), you are welcome to join
- Afternoon: Examine your patients, write new orders, write daily progress note in EPIC for attending to cosign, prepare patients for discharge (prescriptions, discharge summary)
- 5:00 PM: Sign-out your patients to the team A APP who will then sign-out all team A patients to overnight APP at 7:00 PM
- **Clinics:** You will have your primary care clinics while on BMT
 - When you have clinic you should sign-out patients and their pending labs etc. to the APP on your team – let fellow/attending know if there are “watchers”

Resources/Attachments

- [BMT flowsheet teaching](#)
- [BMT presentations](#)
- [BMT discharge](#)
- [BMT overview/article](#)

Please keep me posted throughout the rotation, I value your feedback and will incorporate it in my efforts to continuously improve the rotation.

Thanks!

Taylor Kratochvil