

News from the University of Iowa Hematology/Oncology Fellowship Program

Spring 2020

Teacher of the Year Puts Fellows First



Grerk Sutamtewagul, MD

Grerk Sutamtewagul, MD, is known as the kind of attending physician that fellows can call in a pinch or consult on any case. "He has a great fount of knowledge," said fellow Nanmeng Yu, MD, PhD. "If his door is open you can always drop in and ask questions. He's very approachable." He keenly understands that, while book knowledge is important, there are many practical questions that can only be answered from a person in the field.

Sutamtewagul, a clinical assistant professor and medical oncologist, has been named the teacher of the year in the University of Iowa Division of Hematology, Oncology, and Blood & Marrow Transplantation. He grew up three hours outside Bangkok, Thailand, completed an internal medicine residency at Texas Tech University in Lubbock, Texas, and was a hematology oncology fellow at the University of Iowa. He has been a UI faculty member for three years.

He's had many great teachers and wants to pass on their passion and love of teaching knowledge and skills. He places himself in the shoes of his students. "Being able to understand the learner is probably the most important teaching skill," he said. Learners need more than book smarts. He said, "Within the realm of medical indication, we think about the knowledge, the skill, the interpersonal skill, the ability to work with the system." These things can allow the fellows to use their knowledge and skills in real life, he said.

Sutamtewagul's specialty is lymphoma and benign hematology with an area of interest in chronic lymphocytic leukemia. His clinics are highly sought after for fellows to get into because he teaches so well, Yu said. He said that the biggest part of teaching is bedside teaching, and Yu confirmed that he's exceptional at it. "He gives us the space to develop our own plan and lets us communicate that with the patient. I think that's important because if we don't get the chance to do that now, when will we do that?" she asked.

His advice to fellows is to know the basics of how to take care of patients and to keep up to date with the latest knowledge in a quickly advancing field.

Those fellows don't hesitate to call him – but maybe they should, just a little. "He may get a bit more phone calls than other attendings but we try not to bug him," Yu says with a laugh. "I definitely agree he is one of our best teachers."





Faculty Spotlight, Usha Perepu, MBBS

Usha Perepu, MBBS, MRCP, has developed a chemotherapy simulation tool that uses real-world scenarios to teach fellows how to administer chemotherapy.

This high-tech solution to medical training was born from a traditional idea. Perepu, a clinical associate professor of Internal Medicine in Hematology, Oncology, and Blood and Marrow Transplantation and an associate program director for the fellowship program, spent her fellowship and early years in medicine hand writing every prescription for every drug given to patients. Before electronic medical systems, providers would have to memorize everything, including why they were giving certain medications, at certain doses, in certain forms, and what complications could result.

Now, fellows use programs like Beacon, a computerized order entry platform for chemotherapy, which make prescribing easier, limiting the need to learn every detail of the treatment regimen. The University of Iowa also has a layered system of checks, limiting the possibility of errors. While this has dramatically reduced errors and improved efficiency, electronic templates have negatively impacted fellow education and competence in chemotherapy administration. "The fellows are not really needing to think about it because you click on it and everything's there and you just sign," Perepu said. "They're not thinking through the process." When fellows leave Iowa, they may not work in places with such advanced systems and may need the kind of knowledge like that imparted in Perepu's early years. The simulation fills that gap.

Perepu went to medical school in India and did her residency and fellowship in the United Kingdom. She spent a year in research at the University of Michigan in Ann Arbor and started at the University of Iowa in 2009. As the faculty hematology liaison for first- and second-year medical students, she teaches their core curriculum in hematology. She is also involved in teaching residents and fellows. Her clinical focus is mainly in general hematology, which includes bleeding and clotting disorders. She is also the only provider at UI caring for sickle cell patients.

In 2017, she received an American Society of Hematology award for this educational project. She piloted the project by creating four simulation scenarios with the help of UI hematologist Grerk



Usha Perepu, MBBS

Sutamtewagul, MD. Twelve fellows tested the program, themeducator.com, in May. Post-simulation surveys showed that the fellows appreciated the real-world information, such as how much detail is necessary to prescribe medications. "The most rewarding part of all of this is not so much what I like but the positive feedback from the fellows," she said. They felt the modules were real-world issues commonly encountered and would like more modules to be created for training purposes.

Future developments could include scaling the simulations to various other chemotherapies with the help of content experts; nonchemotherapy areas, such as dosing blood thinners such as heparin; testing the program at other fellowship programs; adjusting scenarios to educational level, such as medical students to residents to fellows; developing a question bank for institutions nationwide to use; and adding an assessment component. "It would be great for the University of Iowa to champion this because no one in the country has a chemotherapy simulation like this. This is very unique," Perepu said.



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New SCTCT Unit Brings Comfort, Healing

The Stem Cell Transplant and Cellular Therapy (SCTCT) Program at the University of Iowa Hospitals & Clinics has always delivered top-notch care. The old SCTCT Unit was outdated and at overcapacity for several years before a new unit opened in December 2018. Not only did the new unit provide needed relief, with nine additional beds, it also delivered even more – an unprecedented level of patient comfort and amenities. "Anything we can do to make their stay more comfortable matters so much for our staff," said Clinical Associate Professor Umar Farooq, MD, who directs the cellular immunotherapy program.

Patients, families, and staff all gave input on the new unit's design. Features include large, light-filled, private rooms with ample storage and family space; a family lounge; attractive lighting and colors; an exercise room; walking routes; electronic device charging stations, whiteboards; and zero-entry, wide-open showers with ergonomic power shower chairs.

"The patients are so grateful!" said Clinical Professor Margarida Magalhaes-Silverman, MD, the SCTCT BMT program director. According to Shannon Hunger, RN, SCTCT unit nurse manager, "Patients sleep so much better on the new unit because construction included soundproofing, darkening shades for the windows, and mood lighting. Patient rooms are quiet, centrally HEPA-filtered, and duel-control thermostats for their bathroom and larger room."

The unit's timing was great. The Food and Drug Administration approved the use of CAR T-cell therapy around the same time that the unit opened. Both transplant and CAR-T cell patients are treated there. "It gives us more rooms to treat patients timely so that they don't have to wait," Farooq said. The unit was operating at greater than 95% capacity before the COVID-19 crisis.

Staff spaces, which are bigger than in the previous unit, are also efficiently designed and located and have cutting-edge technology. The program is expanding, delivering more transplants and novel cellular immunotherapies.

It's all wrapped in an attractive environment that brings benefits to all. "Patients state comfort, quietness, and that the unit feels, looks, and sounds like the healing environment they hoped for," Magalhaes-Silverman said.



Margarida Magalhaes-Silverman, MD

See back for additional photos





