



The 65th ASH Annual Meeting Abstracts

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903.HEALTH SERVICES AND QUALITY IMPROVEMENT -MYELOID MALIGNANCIES

Does Implementing Calendars Outlining Inpatient Chemotherapy Schedules in Patient Rooms Improve Patient's Experience?Kashmira Wani, MD¹, Vrushali S. Dabak, MD²¹ Henry Ford Health, Detroit, MI² Henry Ford Hospital/Wayne State University, Detroit, MI

Background: Patients who receive inpatient chemotherapy for malignancy are dealing with both a physically and mentally challenging admission. Their chemotherapy regimen is predetermined and usually only discussed during rounds. Often times, patients feel overwhelmed and may miss the outline of their schedule. Furthermore, patients families may not be able to attend morning rounds and may miss the proposed schedule. This can lead to a feeling of loss of control in both the patient and their family, and thus, frustration. First year medicine residents are also overwhelmed with a large patient load and having to keep track of multiple chemotherapy regimens. We are hoping that by providing a calendar that outlines patient's anticipated chemotherapy schedule, we may be able to give patients a small sense of control back and help residents provide the best care to their patients. Ultimately, we hope that this leads to a better inpatient experience.

Methods: Patients admitted to the hematology/oncology floor at Henry Ford Health Hospital in Detroit, Michigan over three months were screened, and those receiving inpatient chemotherapy were selected. Within this group, any patient that was getting inpatient chemotherapy for longer than three days was asked if they would like to participate in the study. If the patient agreed, they were provided a calendar that outlined their chemotherapy schedule. Calendars were updated if any adjustments were made to the schedule. At the end of their inpatient stay, patients filled out a questionnaire asking if the calendar helped them understand their schedule better. The primary resident caring for the patient was also asked if the calendar helped them keep track of their patient's schedule.

Results: Overall, patients responded positively to the calendars. We have preliminary data on ten patients and four providers from three months. On average, on a scale of 1-10 (with 1 indicating not helpful at all, and 10 indicating extremely helpful) patients rated the calendars helping them at a level of 7.5. Patients found that the calendars particularly helped their families who were not able to come visit in the hospital. Providers found the calendars extremely helpful, rating the calendars at a level of 10. We will continue to collect data and update our results.

Conclusions: Implementing patient calendars in inpatient rooms helps patients keep track of their chemotherapy schedules and leads to a positive inpatient experience. We are hoping to implement this as a standard of care in all inpatient rooms on the hematology/oncology floor.

Disclosures No relevant conflicts of interest to declare.

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SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1 Cycle 1 Day 1 Cytarabine Daunorubicin
2 Cycle 1 Day 2 Cytarabine Daunorubicin	3 Cycle 1 Day 3 Cytarabine Daunorubicin	4 Cycle 1 Day 4 Cytarabine	5 Cycle 1 Day 5 Cytarabine	6 Cycle 1 Day 6 Cytarabine	7 Cycle 1 Day 7 Cytarabine	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31	1	2	3	4	5

Figure 1