American Society for Blood and Marrow Transplantation Guidelines for Training

PREAMBLE

A primary objective of the American Society for Blood and Marrow Transplantation (ASBMT) is to ensure the highest quality of medical practice in hematopoietic progenitor cell transplantation. It is the position of the society that all physicians performing peripheral blood, cord blood and marrow transplantation must be licensed and should be board-certified in hematology, medical oncology, immunology, and/or pediatric hematology/oncology. In addition, physicians performing hematopoietic cell transplants must receive specific training in the cognitive and procedural areas listed below. The training should be conducted in a program compliant with the ASBMT Guidelines for Clinical Centers and accredited by the Foundation for the Accreditation of Hematopoietic Cell Therapy (FAHCT) or equivalent accreditation program.

OVERALL GOAL

The overall goal for training in blood and marrow transplantation is to ensure that physicians carrying out these procedures are competent in the use of high-dose therapy for the treatment of malignancy or bone marrow failure.

COGNITIVE SKILLS

• Specific training and documented competency in each of the following areas is required:
  • Indications for blood and marrow transplantation
  • Documentation and reporting of patients on investigational protocols
  • Understanding the role of the Institutional Review Board and the ethical conduct in clinical trials
  • Pre-transplantation patient education
  • Identification and selection of stem cell source including use of donor registries
  • Methodology and implications of HLA typing
  • Understanding of chimerism analysis
  • Knowledge of leukapheresis procedure
  • Knowledge of blood and marrow processing and cryopreservation procedures
  • Management of ABO incompatible hematopoietic progenitor cell products
  • Administration of high-dose chemotherapy
  • Diagnosis and management of
    – Chemotherapy and radiation therapy–induced toxicities
    – Veno-occlusive disease of the liver
    – Interstitial pneumonia
    – CMV infection and disease
    – Other viral infections in immunocompromised hosts
    – Fungal disease
    – Hemorrhagic cystitis
    – Acute and chronic graft-versus-host disease
    – Late complications of blood and marrow transplantation
  • Management of
    – Neutropenic fever
    – Thrombocytopenia and bleeding
    – Nausea and vomiting
    – Pain
    – Terminal care patients

PROCEDURAL SKILLS

Stem cell transplantation physicians should be proficient in the following procedures:

• Bone marrow harvest
• Skin biopsy
• Stem cell product infusion

METHOD OF TRAINING

Although it is recognized that training may take several forms, it is ASBMT’s policy that adequate training requires a minimum of one year of clinical experience in both inpatient and outpatient settings. That experience must include primary responsibility for the care of patients receiving both allogeneic and autologous transplantation. If allogeneic transplantsations are not performed within the primary training program, additional training at a second center is necessary.