



Louisville Hematology Highlights, In Memory of Roger H. Herzig, MD

11/11/2023

This activity was created to address the professional practice gaps listed below:

- Utilizing CAR T-cell therapeutic approaches because it is not available for relapse T malignancies.
- Recognizing haplo-identical allogeneic stem cell transplantation as a treatment option.
- Recognizing the molecular mechanism in acute leukemia and large granulocytic leukemia.
- Utilizing the most up-to-date clinical practice standards in current treatment approaches for hematologic malignancies and stem cell transplant.
- Utilizing state-of-the-art research and best practice methods for stem cell and bone marrow transplantation.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagree		Agree
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [27-3.78]	(1) 3.70%	(0)	(3) 11.11% (23) 85.19%

2. Please elaborate on your previous answer. (14)

Strengthened my understanding of CAR T therapy

Management updates and a variety of areas of hematologic malignancy.

Great speakers and interesting topics. Very informative and information I will use in practice.

Amazing speakers discussing the latest in therapeutic options and scientific data

Very informative. Nice to see the latest treatments in Lymphoma's and MM

New treatments for ALL exclusive of stem cell transplant

Improved ability to discuss transplant, CAR-T, treatment options

I was unaware of some of the new indications for CAR-T. Also learned more in depth info about the molecular level of leukemia and new trends in treatment.

I learned why blood cells are made in bone marrow

Discussions with colleagues

Great info

Presentations were excellent for updating knowledge in the field.

I am more competent and up to date in my treatment and management of a variety of hematologic malignancies.

Learned a great deal about bone marrow transplant therapy and cancer therapy.

3. Please evaluate the effectiveness of the following speakers in improving your competence. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Robert Gale, MD, PhD [27-3.70]	(0)	(2) 7.41%	(4) 14.81%	(21) 77.78%
Gordon Phillips, MD [27-3.67]	(0)	(1) 3.70%	(7) 25.93%	(19) 70.37%
Donna Reece, MD [28-3.71]	(0)	(2) 7.14%	(4) 14.29%	(22) 78.57%
William Tse, MD [28-3.57]	(1) 3.57%	(1) 3.57%	(7) 25.00%	(19) 67.86%
John P. Leonard MD [27-3.78]	(0)	(1) 3.70%	(4) 14.81%	(22) 81.48%
Richard Nash, MD [28-3.86]	(0)	(1) 3.57%	(2) 7.14%	(25) 89.29%
Catherine Coombs, MD [27-3.89]	(0)	(1) 3.70%	(1) 3.70%	(25) 92.59%
Jason Chesney, MD, PhD [27-3.85]	(0)	(1) 3.70%	(2) 7.41%	(24) 88.89%
Robert Emmons, MD [28-3.96]	(0)	(0)	(1) 3.57%	(27) 96.43%
Nicholas Short, MD [27-3.93]	(0)	(1) 3.70%	(0)	(26) 96.30%
Sameh Gaballa, MD [27-3.81]	(0)	(1) 3.70%	(3) 11.11%	(23) 85.19%
Rami Komrokji, MD [27-3.89]	(0)	(1) 3.70%	(1) 3.70%	(25) 92.59%

4. Please elaborate on your previous answers. (17)

Knowledgeable

Excellent relevant summaries of key areas of hematology.

I really enjoyed the presentations from Dr. Coombs, Dr. Short, and Dr. Gale.

great information

VERY ORGANIZED AND INFORMATIVE

Dr Gale's topic a bit off target

Dr. Coombs and Dr. Gale were two of the best speakers I have ever heard. Phenomenal line up.

n/a

Some kept my interest better than others. All knowledgeable in their field.

Outstanding content, data and video of neurological autoimmune therapy effectiveness

Lots of information

all excellent in their field

Great knowledgeable presenters

All had excellent presentations.
Particularly enjoyed Dr Short and Dr Coombs
most were excellent. a few were not.
I really enjoyed the speakers from this program.

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.)
(21)

Education was helpful
Paradigm in large cell lymphoma
Implementation of new drugs and closely monitoring the outcomes
New protocols.
being aware of new adult cancer treatment
New protocol
CarT and preparing for such treatment
Use of pediatric AYA ALL protocols for fit patients under 39
when to offer transplant
n/a
Our program should work on establishing relationships to support trials in therapy for autoimmune diseases, both neurological and other organ focused diseases.
I will use Gazyva and Venetoclax first line in CLL
None
Different medications
Different medications.
More polatuzumab upfront in DLBCL patients. More consideration of CAR-T therapies as earlier lines of therapy for lymphoma. Increase use of luspatercept for MDS patients.
consult bone marrow transplant for recalcitrant autoimmune disease
this helped to improve my knowledge of cutting-edge therapies for hematologic malignancies
I thought it was great!

6. How certain are you that you will implement this change?

(22)

Certain ⁽¹²⁻
54.55%)

Very Certain ⁽⁶⁻
27.27%)

N/A ⁽¹⁻
4.55%)

Maybe ⁽³⁻
13.64%)

7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (20)

Advances in treatment in MM

MRD

Multiple myeloma treatment. ALL treatment. CLL treatment.

Myeloproliferative Neoplasms

anything is good

MDS

Would like to hear more on SINE therapy

Newer CAR T products. Gene editing therapies

More of the same.

n/a

Cart, immune therapies novel diseases, regenerative medicine, TILs, prep regimen, DSA algorithms, autoimmune disease therapy

Gene therapy for sickle cell disease

Stem cell collection

nurse based

CML

Any undated research in sct

CAR T treatments and updates. AML.

I would like to hear more about benign hematology pathologies and their management as I do see a fair amount of benign hematology cases in my clinic.

cart and bite therapeies

bone marrow transplant, GVHD

8. Were the patient recommendations based on acceptable practices in medicine?

(24)

Yes (24-
100.00%)

9. If you answered No on the question above, please explain which recommendation(s) were not based on acceptable practices in medicine? (4)

n/a

NA

10. Do you think the presentation was without commercial bias?

(25)

Yes (25-
100.00%)

11. If you answered No on the above question, please list the topics that were biased?

(3)

n/a

NA

12. Please indicate any barriers you might encounter in implementing these changes in your practice (select all that apply).

Lack of support from management [28] (2- 7.14%)

Reimbursement issues [28] (4- 14.29%)

Lack of authority to facilitate such change(s) [28] (7- 25.00%)

Not enough time [28] (4- 14.29%)

I do not anticipate any barriers to implementing these strategies [28] (13- 46.43%)

Other (please specify): (1)

I am a nurse, not a MD so I wont really be doing anything

13. The format and functionality of this educational activity was effective.

(27)

Yes (26-
96.30%)

No (1-
3.70%)

If no, please explain. (2)

n/a

Excellent speakers, open to ask questions.

14. Please provide any additional comments you may have about this educational activity. (10)

Excellent content. Looking forward to next year!

Very well done with great speakers. Well organized.

all is great

The environment , vendors and food offerings were top notch

n/a

Conference room was uncomfortably cold.

The structure of the room being very wide did make question and speaker communication more difficult for hearing.

This was not for nurses, we were just bodies there....

Great program

none

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

This evaluation is confidential and no individual will be identified by this office (Continuing Medical Education and Professional Development). It will only be used for quality improvement.

Names or contact information of learners will not be shared with any ineligible company or its agents without the explicit consent of the individual learner.

We look forward to seeing you at future University of Louisville events. Thank you very much.

