

## **ELECTIVE (SSC5b) REPORT (1200 words)**

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

**My elective placement took place at Central Manchester Hospitals including Manchester Royal Infirmary, Royal Eye Hospital and St. Mary's Hospital. These hospitals are located in central Manchester. My main aims during this elective were to investigate the possibility of a career in Anaesthetics, and improve my practical skills during my placement which would prepare me for the foundation year training commencing in August.**

**Manchester hosts a diverse population ranging from British, Afro-Caribbean's, South-East Asians and Eastern Europeans. This diverse community has varying medical beliefs in relation to their perceptions and knowledge of medical content as well as communication barrier in some communities. There is a high prevalence of type 2 diabetes mellitus and hypertension, often related to obesity. The presence of these conditions makes the patient more at risk of anaesthetic and operative complications. Due to the complexity of these cases I found that the anaesthetic team was well prepared and equipped if potential complications were to occur. Patients received high level of care from one senior anaesthetist (consultant) and occasionally a senior trainee. This experience encouraged me to read more about the American Society of Anaesthesiologists' (ASA) classification of Physical Health and how it can be used to assess the preoperative health of surgical patients. Through literature search I found that associations between ASA scores and specific surgical complications and outcomes have been reported in several studies.**

**Central Manchester Hospitals are well equipped with knowledgeable staff. The surgical and anaesthetic team treated a range of conditions including general surgical, colorectal, vascular, orthopaedic, obstetric and gynecological, and ophthalmological diseases. I spent my time in the anaesthetic department. This was a large department consisting of 100 anaesthetists including consultants and trainees. During my six-week attachment I shadowed many consultants and senior trainees in different sub-specialities including colorectal, ENT, obstetric and gynecology, vascular and renal transplant surgery. as the anaesthetic department in these hospitals is well equipped I was able to observe a range of different techniques, including the use of fibre-optic bronchoscopes to aid intubation, ultrasound guided practical procedures including central lines, portable radiological equipment and transoesophageal echocardiography. Other interesting operations I observed included repair of ruptured abdominal aortic aneurysm, insertion of cochlear implant, open fixation of mandible fractures, surgical tracheostomy and egg retrieval for IVF under sedation.**

**During my time I attended pre-operative clinics where I observe pre-operative assessment and helped prepare patients pre-operatively for surgery. The senior clinicians regularly made a conscious effort to teach me theoretical principles intra-operatively including physiology, pharmacology and pathophysiology. I also attended a teaching session organized and led by anaesthetic trainees where I was able to build my theoretical knowledge of anaesthesia. This teaching session involved three different presentations presented by ST1-3 registrars. Although the content of the presentations was beyond my level of knowledge and experience, I was able to learn about emerging skills and equipment required to manage a 'difficult airway'. In addition to developing my theoretical knowledge, during my six-week placement, I also had many opportunities for practical skill development including airway management, intubation, vascular access and spinal block (under close supervision). I was very grateful**

for being provided with these opportunities to develop my practical skills as they will be directly applicable to my upcoming work as an FY1 in August 2018.

As Manchester is a diverse community, there are many variations in medical knowledge and understanding between different patients. However, I found that the anaesthetic staff was very experienced in communicating with patients from different backgrounds and providing them with information regarding the anaesthetic procedure. All staff members gave a very thorough explanation of certain treatment and interventions and the patient was given many opportunities to ask questions or raise any concerns. The doctor-patient relationship observed in this hospital was inspiring and something I would like to take away from this experience and apply it to my own work in the future.

As central Manchester hospitals are affiliated with University of Manchester, there were occasions where the theatre had more than one student present, limiting the learning opportunities for both students, junior doctors and ODP trainees. Nonetheless, the clinicians made sure all students and trainees were given equal opportunities and the tasks were distributed according to level of knowledge and skills. The trainees were very helpful and taught me key skills required as a junior doctor, these skills included recording and interpreting blood gases, administering drugs, preparing an intravenous infusion and prescribing in a drug chart.

I am very happy with the level of teaching I received in this trust and really appreciate the support provided by the anaesthetic team, and would like to give special thanks to my supervisor. This placement in anaesthetics has enhanced my knowledge of the subject and has made me more comfortable at managing a patient's airway, and gaining vascular access, both of which will be invaluable when beginning my upcoming FY1 placement.