

## **ELECTIVE (SSC5a) REPORT (1200 words)**

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

I organized the second half of my elective in Jordan, as this was a country that I had become familiar with over the past couple of years while visiting friends and family. I had always thought that it was a country with an interesting culture and that the people were extremely welcoming, therefore I knew that I wanted to conduct my elective here, as I was sure it would be an invaluable experience. Within the Specialty Hospital, a well established hospital in Amman, I chose to work in the emergency medicine and intensive care departments, as I wanted to challenge myself and be a part of the medical team dealing with acute medical situations. I knew that this would allow me to develop my medical skills, but also provide coverage of some aspects of medicine that we do not get much exposure to in our medical degree. Throughout the three weeks I spent in hospital, one week was in intensive care and the remaining two weeks were in emergency medicine. During intensive care, I was able to take part in ward rounds and work with the team to provide care for patients in critical condition, while in the emergency department, I was able to practice history taking and examinations. All members of the team supported me thoroughly throughout my placement, and spent time teaching me about the most common presentations to hospital in Amman.

### **Learning Objectives**

‘Discuss the pattern of acute disease in the population of Amman and how this relates to global health’

I completed this learning objective by working in the emergency department of the Specialty hospital and analysing the most common presentations to the emergency room over two weeks, as well as speaking to members of the MDT to gain a better understanding regarding the conditions they encounter the most. Two of the most common presentations were divided into medical and surgical, and these were chest and abdominal pain respectively. Most patients presenting with chest pain were middle aged males, and when taking histories, it was apparent that most were longterm smokers with a sedentary lifestyle. Conversely, the population attending with abdominal pain were mainly women and children with a very wide range of differential diagnoses, and this group of patients were seen by the surgical team after initial assessment by the medical team present. As cardiovascular disease is one of the leading causes of death globally, when speaking to patients I tried to assess their understanding about the risk factors associated with cardiovascular disease. When taking into consideration the patients presenting with chest pain, it was very apparent that the population in Amman were not well informed about these risks, as public health campaigns to tackle smoking and promote exercise were not well established as seen in the United Kingdom. This stemmed from lack of education about the harmful effects of smoking, minimal exercise and poor diet.

‘Discuss the structure of the healthcare system in Jordan and how this differs from the UK’

The healthcare system in Jordan is very different to the UK, as it is a mix of private and public, whereby the status quo is that affluent individuals mainly attend private institutions using health insurance, whereas the lower middle class population find themselves only able to use public healthcare. This forms a great disparity in the care provided and is very dissimilar from the UK, whereby a majority of the population use the healthcare provided by the NHS. The hospital I was working at is a private hospital, and is very expensive in the absence of insurance, therefore, most people need to ensure they have the correct

paperwork before being admitted. With regards to how the system runs, most of the day-to-day procedures are conducted by the nursing staff, therefore doctors do not take part in phlebotomy or cannulation etc., which is a key aspect of the junior doctors job in the UK. Moreover, the day starts with a very swift ward round followed by documentation, however this is very brief in comparison to the UK, whereby detailed ward rounds and documenting is fundamental to good medical practice.

One of the most interesting aspect about the hospital system in Jordan is that any private doctor in the country, regardless whether they work in a certain hospital or not, can admit a patient into a hospital of their choosing and provide care for that patient. The doctor will then get paid by the hospital directly. This makes the job of the junior staff more challenging, as they have to contact multiple doctors who are off site to give updates about the patients. This is very different from the system in the UK, whereby most patients will attend the hospital and be seen by the doctors present in that institution.

Lastly, when requesting imaging, the doctors do not need to request confirmation from the radiology department, but instead send the patient directly to the imaging room to wait in a numbered queue, unless it is an emergency situation. In the UK, the radiologist needs to vet the need for the imaging and confirm before anything further can be conducted.

‘Describe the inequalities in provision of healthcare in a country with large disparities in wealth and resources based on region, and determine how this may impact delivering care in an acute setting’

The topic surrounding inequality in healthcare based on wealth is extremely dense and well known, however, while working in Jordan, it has become even more apparent. Many studies have quoted that greater wealth is associated with lower mortality, higher life expectancy and decreased risk of obesity, smoking and hypertension, all of which contribute to serious diseases such as cancer, and more acutely cardiovascular disease. As I have mentioned previously, in Jordan affluent individuals are capable of attending private healthcare with health insurance, while lower middle class population attend public institutions with massive waiting times and overworked staff, all of which have a great impact on healthcare provision. Moreover, in Jordan, another aspect is the availability of resources, particularly in areas of the country with low income, there is a huge lack of medical devices and equipment, which indirectly effect the healthcare that can be provided.

‘Develop generic attributes including adaptability and flexibility to enhance understanding of a career in medicine, while gaining experience and acquiring knowledge in an unfamiliar healthcare setting that may benefit personal development and patient centered care in the future’

One of my main objectives in undertaking this elective was to learn how to be a better doctor for the future. During medical school we have many different placements over the years, however due to the underlying stress of examinations or other tasks, it is not always easy to fully engage in these clinical experiences. Due to this, I wanted my elective to give me the opportunity to learn how to work in a team, while learning about the jobs that I will have to undertake in the near future. Moreover, I also wanted to understand whether a career in surgery or medicine would be more suited for me to pursuit in the future. Although my placement in emergency medicine and intensive care was only 3 weeks in duration, I have definitely addressed some of these factors and by working in a different country I was able to enhance my communication skills and confidence in speaking to patients from a different background. By working with the MDT and attending morning ward rounds, I was able to learn how to communicate with patients and other members of the team. The junior doctors were kind enough to give me tasks to complete throughout the day, including creating a jobs list, communicating with radiology, answering bleeps and

undertaking history and examinations. All of these experiences have allowed me to develop the generic attributes that I will need to thrive in the first year of my medical job. Moreover, the registrar was very helpful in teaching me about the presentations of common emergency conditions and how to investigate and initiate treatment, therefore enhancing my knowledge in this field. Overall, I am proud to say that this has been one of the most educational experiences of my entire medical degree.