

## ELECTIVE (SSC5b) REPORT

Throughout this elective placement I was enrolled in a Columbia medical student's diagnostic radiology course, a specific four week course that the students can choose to take. As such there was a comprehensive and varied timetable that enabled me to see a wide range of different imaging modalities and uses. I have been lucky enough see chest and body reporting, but also mammography, neuroradiology, paediatric reporting and musculoskeletal imaging. With respect to imaging modalities seen, I have seen plain film radiography, CT, ultrasound, fluoroscopy, and some MRIs. I feel that I learnt a great deal about all of these different modalities, however it is certainly opened my eyes to how specific and detailed each one is, and how much more there is to learn when I enter radiology training in a few years time.

One part of the course I found particularly interesting was learning about the American College of Radiology appropriateness criteria, essentially a set of guidelines about which imaging is appropriate for certain medical and surgical scenarios. While I am sure there are some differences between the UK and US criteria, for me it has been a really useful introduction in how to think about how I order imaging during my foundation years.

While I have not had much exposure to radiology in the UK, I did spend two weeks at Barts trust in the imaging department before I arrived in the US. I don't think this small snapshot really enables me to be able to say with any great certainty that there are or are not differences between the types of pathology seen in imaging. I did not see anything while at the New York Presbyterian that I had never heard of, and certainly the classic medical school adage that common things are common has held true throughout both placements, with pathology like appendicitis, renal stones, and strokes being frequently seen in both the UK and the USA. I also noticed parallels between the global health issues facing Barts trust and the New York Presbyterian hospitals, namely that at Barts there is an issue with south-east asians coming to stay with family and get free health care at world leading specialist centres, and a pattern of Dominican Republic residents doing a similar thing at NYP.

Throughout my time at NYP I got the impression that radiologists here enjoy their jobs and are enthusiastic about radiology as a career. With the current climate in the NHS and ever-present resourcing issues, in almost every placement I have been on throughout medical school there had always been an undercurrent of stress and worry about the future of the NHS and what impact government policy and spending will have on the sustainability of free healthcare provision. With respect to how this has affected me personally, I have noticed that radiologists in the UK are pressured to read as many images as possible in short amounts of time mostly due to understaffing, inevitably this means that teaching opportunities suffer, whereas on this elective, radiologists always seemed very happy to stop and answer questions.

For me, one of the most interesting parts of this elective has been to learn about the student experience within imaging but also in general in New York. I was amazed before arriving when we were asked to undertake some training in infection control and information handling, as despite these issues being exactly the same in the UK we have never actually been officially taught about infection control or about sensitive data handling. The training took a couple of hours, and I think it something that UK medical students should do before clinical years, as I certainly would have felt more confident when I first started my clinical placements. In the American system, once a medical student finishes their degree they go straight into a specialty, rather than undertaking the foundation years that we do in the UK. I can see both positives and negatives of such a system, in that for someone who knows what speciality they want to do it saves two years of jobs that they aren't going to necessarily enjoy. Initially I

wondered how the American students could possibly choose a speciality before working in it, but I learnt about their clinical years at medical school and how after an initial core clerkship year they then have a lot of choice about which specialities to spend their time in. Having finished five years of medical school in the UK and only ever having spent time in radiology outside of this I think a similar system would certainly be advantageous in the UK.

The most marked difference between the UK and the USA medical student experience I have noticed during this elective is the amount and quality of the teaching given to students. On this elective we had three, if not more, lectures a week from attending radiologists, and two lectures a week from the residents. The teaching was so clear and at exactly the right level for us, I felt that I was really being given a grounding in imaging and will feel much more comfortable in both my foundation years and also when applying for speciality training. I have never had a placement like this in the UK with so much emphasis put on our learning.

In addition to the lecture style teaching and teaching while sitting with radiologists, we had a number of cases to read and make reports on by ourselves, I think this experience above everything else over the four weeks has confirmed to me that I want to pursue a career in diagnostic radiology. Having the opportunity to personally scroll through images for as long as I needed and then writing reports using systematic guidelines we were given made me feel that I was truly getting an insight into the working life of a radiologist, and to know that I enjoyed that process makes me feel much more confident that I am making the correct choice.

In retrospect I am very glad that I used this elective time to come to NYP. From the formal teaching, the more informal teaching given when sitting with radiologists, and the cases I read for myself, I have learnt far more than I would ever have been able to learn by myself from textbooks or websites. I have had an opportunity that it would be impossible to get any other way and has given me an incredible foundation from which to continue learning.