

ELECTIVE (SSC5b) REPORT (1200 words)

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

1. Describe the differences in approaches to Burns management between the US and UK.

I initially had thought that there might much difference between burn management in the US and UK but during my visit I was able to see that both approaches are quite similar. The fundamentals of burn management focuses on effective critical care and wound management. However, I found that having a sole department responsible for burn injuries meant that patients are usually seen quicker and receive the treatment they need in a timely manner which is so important in the effective management of burns.

During my time in the operating theatre the techniques used in conducting skin grafts is very similar to the approaches used here in the UK. However, one marked difference I saw was the responsibility given to Physician Associates (PAs). PAs are a very highly valued member of the team in the United States and often have the same knowledge and experience as some of the consultants/ attendings present within the team. At first I found this very strange but I quickly came to appreciate the presence of the PAs. Physician Associates are slowly being introduced into the NHS system and I feel they would be a great addition to the working system. Not only are PAs able to share the workload but they can also provide invaluable opinions and experience. Allied professionals such as Physical Therapists and Dietician are an integral part of the burn team in the US. All of these individuals play an integral role in ensuring individuals recover quickly and with the maximum function.

2. Describe the factors that lead to effective burns management. Can any improvements be made to the way burns are managed within the UK or US.

Burn management focuses on a variety of factors which ultimately lead to effective wound healing and quick recovery times. One of these factors is the importance of a protein rich diet which plays an important role in promoting wound healing. It must be ensured that injured individuals continue to consume an effective diet and so that is why it is so important to monitor the nutrition of a patient as to ensure this. In the US patients are daily assessed on their nutritional consumption and a lot of discussion focuses on how this can be optimized and discovering why a patient may not be consuming as much as they should be. In the UK I think we are faltering in understanding the importance of diet in burn patients as it is important to realise that these patients are in a hypermetabolic state and so their dietary requirements need to be increased. Often during patient conversations, we fail to focus on such issues and focus primarily on the medical issues. Simple things as to how much a patient is eating and drinking can help immensely in the recovery of individuals.

Another factor vital to burn management is the involvement of psychiatric services. Burn injuries can often be life changing and so many individuals can have a difficult time dealing with such change. That is why it is so important that patients are given support through counselling and other such services which can help them through such a difficult time and also help to understand the circumstances surrounding their injuries. Unfortunately, it is important to rule out self-harm when such injuries occur as often burn injuries can be deliberate and so it must be ensured that an individual will not try to do the same thing again. In the US each patient is given an initial psychology consultation and often followed through their admission. Whilst patients have the authority to refuse such consultation,

often patients will appreciate such contact it can help them understand the implications of their injuries and also help the transition back into daily life when they are discharged. I feel it would be very useful if such important on a holistic scale would be encouraged in the UK.

3. Describe the differences of healthcare provisions in the US and UK. What impact has political change had on the healthcare system in the US.

The healthcare in the US relies heavily on healthcare insurance. The two main healthcare insurance policies are- Medicare and Medicaid. Both schemes have different eligibility requirements and coverage. Unfortunately, many healthcare insurance policies are not accessible by everyone due to financial reasons or immigrant status. This means that many people in the US do not have healthcare cover and so are not entitled to many treatments. For this reason, many individuals are risking their lives as they cannot afford to pay for their medical treatment. It has been found that the main cause of bankruptcy in the US is due to unresolved healthcare bills.

Former President Barack Obama wanted to bring out the Affordable Care Act (ACA), known as Obamacare, which would help people buy insurance. It would use family income, local cost of health insurance, age and smoking status to determine financial aid. However, new President, Donald Trump wants to base this aid primarily on age. The new proposed American Healthcare Act is being championed by the Republican government but many feel that it would increase cost disparities between age groups and would increase premiums for Americans more prone to illness. Much controversy continues to surround the new act and it remains to be seen whether it will come into effect as many think it is unmanageable and will cause many individuals to not have healthcare cover.

4. To be able to further my research skills and to gain a greater understanding of burn management.

During my placement I was fortunate enough to spend a lot of time with patients and follow patients from the point of admission through to when they would become outpatients. By doing so I was able to gain a better understanding of how burn patients are triaged through the system. Through my previous experience I had not been able to see how patients are managed within a critical care setting and during acute resuscitation. Such patients have to have a specific resuscitation pathway in particular focusing on fluid resuscitation, known as "The Parkland Pathway". I was able to see firsthand as to why having such a specific pathway is so important during the first 24hours post injury.

One of my main aims during this placement was to gain more knowledge of the different types of burns and what treatment is applicable to each type. It was very interesting to see the different types of wound dressings that are available and how effective wound management can lead to beneficial results without the need of surgical intervention. My own research focuses on keloid and hypertrophic scarring in burn patients and it was interesting to see the management of such scars. The burn unit at NYP is going to recently acquire a laser machine for treating such scars and it was very interesting to go through the rationale as to why they were going to start using it and who would be eligible for such treatment.