

ELECTIVE (SSC5b) REPORT (1200 words)

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

Great Ormond Street Hospital (GOSH) are "an international centre of excellence in child healthcare", they are the only paediatric Biomedical Research Centre in the UK and thus they attract many of the leading physicians in their fields to their employ. Even beyond their excellence in treatment and research they are a large centre of education boasting that they train the largest number of paediatric nurses in the UK along with training paediatric doctors, medical students and numerous other healthcare professionals.

Having made contact with an orthopaedic surgeon who works at GOSH, I developed a strong desire to spend time there in order to aid my development as a competent, compassionate and inquisitive healthcare professional. After observing the high standard of holistic care that is delivered at GOSH, I can now understand more fully why the hospital and their affiliated charity attract so much respect and recognition.

There were many similarities and common themes that I encountered at GOSH that I had experienced as a student in an East London medical school. However, there were some notable differences that drew a dramatic contrast between my experiences in hospitals in and around East London and the working environment of the West London hospital of Great Ormond Street. During almost every clinic and theatre list which I observed at Great Ormond Street Hospital (GOSH), I saw patients, and families of patients who had spent a considerable amount of time and money travelling in order to receive care at the hospital that day. GOSH holds a unique position as one of the leading paediatric hospitals globally, and due to their expertise, the breadth of illness does not necessarily reflect the scope of healthcare requirements in the area that the hospital is situated in. Indeed, it would be more accurate to state that due to the specialist nature of care that GOSH is able to offer, the hospital handles some of the most specialised and severe cases of illness within a much larger population over an area that is far greater than what would be expected of most hospitals.

Conversely, hospitals in East London are likely to contain a more representative sample of the levels of health and disease within their local population, as their remit is not as far-reaching as GOSH, nor do many of the hospitals in East London have as many departments within them that are so highly specialised. It is worth noting though, that healthcare staff in many East London hospitals will frequently provide care to a considerable number of patients who are suffering from a tropical disease and many other illnesses not typically associated with the healthcare landscape of the UK. This is likely due to the high proportion of patients who are first generation immigrants residing in East London; some of these patients frequently visit their home countries and return with a foreign ailment.

However, it ought to be noted that it is not only the severity of illness which determines which patients are seen at GOSH but also the family's means; by this I am referring to the fact that more impoverished families would struggle to travel many hours across country and thus this slightly warps the landscape of their patients also.

I would also like to draw attention to how this hospital differs from any in the remit of the medical school which is by very nature of the fact that it is a paediatric only hospital. This affects not only the

decoration of the building and furniture but how every healthcare practitioner there behaves; it certainly does alter your practice considerably when the wants and needs of the families of every patient are also being considered, something which is not done in a normal hospital where the vast majority of patients are adults. Many entire areas of the hospital are dedicated as communal family space not to mention the individual space adjoined to each patient room where a family member may sleep so that the patient may never have to spend time alone, something very important to a child experiencing potentially one of the scariest nights of their young lives.

Among the many observations I made about the hospital and patients there I also remained conscious of the practices I witnessed and how they directly related to my learning and professional development.

As a prospective f1 who is starting to seriously consider what it is I would like to do as my future career, this placement was a useful opportunity to do some reflection and observation with this goal in mind. While with the orthopaedic team at GOSH I did not come across any f1 doctors (the majority of their junior doctoring is carried out by their SHOs) so directly observing the workload of an f1 doctor proved difficult. This is not to say that I cannot draw on valuable skills observed during this placement when developing my abilities as an f1: organisation, communication and general medical knowledge. It seemed though, that this placement would be better spent reflecting on my motivations for my future career where no specific insight into the work of an f1 was to be had. I have believed for some time that a surgical speciality would be the most likely area (from what I have experienced) to bring me happiness as I continue my medical training. Although, choosing which surgical speciality I most prefer has been a tougher decision.

While at GOSH I have been improving my insight into orthopaedics as a speciality. Over the weeks I have spent there I have noted some particular areas which draw me to the department. My main learning points pertaining to what orthopaedics would be like as a career have been:

1) Orthopaedics is one of the frontrunners for surgical specialities who are working towards eradicating bullying from the commonplace in surgical training. Indeed, one of the registrars currently working in the orthopaedic department at GOSH founded the #HammerItOut campaign which endeavours to accomplish just that which I have described.

2) Orthopaedic tools and gross motor dexterity skills used by the surgeons are something that I find much more appealing than the fine and intricate work done by, for example, interventional radiologists and laparoscopic surgeons; in other words, I enjoy the robust mechanical implements found in orthopaedics and find limited appeal in surgery that involves less tactile feedback. I also enjoy the biomechanics-based problem-solving elements of orthopaedics that, in my mind, liken this speciality to a form of engineering. Obviously I understand there are vast patient benefits to the operating techniques of other specialties, however orthopaedic surgery holds a firm grasp on my imagination.

3) The psychological aspect of orthopaedic illness and the road to recovery from orthopaedic ailments is something I find endlessly fascinating; these patients' whole lives are changed when their ability to mobilise is improved; it literally ameliorates their personal freedom. Being able to observe how the work of the orthopaedic surgeons changes the lives of the patients and their families has been a privilege, which I shall endeavour to remember as I move on to treating my own patients next year.