

**ELECTIVE REPORT-**

## Objective 1:

Describe the common surgical conditions in Malaysia and how they differ from the UK:

We stayed mainly with the gastrointestinal surgery team and the most common surgical problems we saw in order were acute appendicitis, peptic ulcers and hernias (mainly inguinal). The doctors I worked with told me that this was an accurate representation of the frequency of surgical conditions seen in the hospital. Compared to the UK and in fact most general hospitals in developed and many developing countries this is what one would expect, so no real surprises there.

Another thing that I thought was very common was gallstones. The doctors I spoke with explained that the diet in Malaysia meant that gallstones were very common. The surgery to deal with them was again quite similar to what was done in the UK although I think they maybe more keen to remove the gallbladder than wait and watch than in the UK but that is just going by my relatively short experience with general surgeons in the UK.

So in summary, the picture of the common conditions in Malaysia is very similar to the UK, which is just what I expected the case to be.

## Objective 2:

Describe the healthcare system in Malaysia and how it differs from the UK:

The healthcare system in Malaysia is similar to the NHS for the most part except many procedures still require you to pay for them if you can afford it but at a heavily discounted price. This is referred to as the government healthcare system in Malaysia. In tandem with this there is the private healthcare system. This takes the form of clinics or entire hospitals where only private work is done. The private hospitals are better equipped and always have more experienced doctors since junior doctors in Malaysia are forced to work for around 3-4 years in the government hospital before being allowed to work in a private hospital. When I asked various people about what they thought of the healthcare system most people said it was great but many did say that waiting times for government hospitals could become very very long. One taxi driver told me that A&E visits usually took 5-6 hours.

In summary, the system is very similar to that of the UK's except the public health system asks patients to pay small amounts for most procedures. I think this is a really great way of increasing the health budget and would love to see it implemented in the UK for people, the majority of whom could definitely afford to pay such fees in my opinion.

## Objective 3:

Identify things that Hospital Kuala Lumpur does well that UK hospitals could perhaps learn from:

In my experience being with the general surgery team and from my exploring of the hospital I think for the most part HKL is very similar to the UK. The only main thing I would like adapted is, as mentioned previously, the heavy discount for healthcare model instead of the completely free NHS model to be implemented in the UK. This would hopefully prevent more hospitals shutting down. Apart from that there are some small things however that I would love to see adapted by UK hospitals:

## SSC5C Elective Report and Reflection

1: Automatic foam hand sanitisers – These were not only automatic but also indicated if they were empty. I think they really encourage hand sanitisation since you don't need to worry about running around and trying different dispensers.

2: Health awareness posters EVERYWHERE – These were particularly prevalent in waiting areas for patients but also in doctors' offices and there were even some around reception desks that gave tips on how to identify and deal with some emergencies.

3: Patient consent taken by a nurse before the ward round in case anyone didn't want a med student or two present – I thought this was a really great way of ensuring patient dignity and autonomy and something I have never seen happen in the UK.

4: Stamps for doctors – Every doctor was given a stamp with their name, rank and GMC number equivalent on which they were required to use when signing for anything. They would hang this around their neck with their ID card. I think this is great for security and reliability and it speeds things up.

5: Patient notes filed in stronger folders – these folders didn't just completely fall apart once they got up to a certain point, something that always vexes me in the UK.

### Objective 4:

Learn about the common surgical conditions in Malaysia and their management and take note of how doctors would take histories from patients and communicate with both patients and peers:

As I will be starting on an upper GI rotation for my foundation year 1 placement it was very helpful to have my elective based on general surgery. I didn't necessarily learn anything new but it was great revision and I did learn some great pneumonics and visual clues to help with remembering various facts and anatomy.

In terms of the doctors taking histories, unfortunately most of them were taken in Malay so it was hard to understand what was being discussed but I did notice that their note taking was quite similar to what I was used to in the UK, i.e. the SOAP method of note taking. When communicating with their peers the doctors spoke in English, whether this was for us or what they were used to I wasn't sure but regardless this was very helpful when I needed to listen to case presentations, which again were quite similar in structure as the UK. Just going to show that wherever you go there are certain key things that just always stay the same. One thing that was quite different was the dynamic between peers. I noticed doctors had great respect for seniors, they were quite arrogant/confident and to the point at times and there was very little banter or joking between doctors. Everyone was quite serious and just invested in their work and when they spoke to one another they were extremely polite and formal. I found this to be very different to the UK and so a bit odd but regardless, all the doctors were very helpful and explained things to great detail when I had questions.

## **ELECTIVE REFLECTION-**

Subject: Surgery

Was it what you expected? Yes in terms of the quality of the care being quite high but no in terms of how busy the place was. It did get quite busy at times but for the most part it wasn't that hectic a hospital as I was expecting

Clinical experience? We weren't able to get much hands on experience but the doctors spoke very good English and explained whatever they did clearly. They were even more encouraging than most of the doctors I have worked with in the UK.

What did you learn about the people and the country? I know a few Malaysians in the UK and they were what I expected other Malaysians to be like, they also told me a lot about the country. When I did visit my understanding of the country and people were just reaffirmed. People in Malaysia are extremely nice for the most part and nearly all of them speak very good English. The country/city itself has a mixture of poor and very rich areas, a bit like London except the poor areas were much poorer.

What did you learn about the health care professionals you worked with? They dealt with patients in a very similar way to how they do so in the UK. In fact the juniors we spent our time with even had some of the same pneumonics.

What did you learn about the health care system in that country? The health care system is a mixture of the American and British system. There are government hospitals that provide free or heavily discounted health care and there are also private hospitals and private clinics in government hospitals. The queues for the government hospitals can be very long and so anyone with a decent income will more often go private.

What were the best bits? I think the first day during the introductions was great. We met the entire team and felt very welcome. Never have I had such a welcome during a placement. It was surreal. Also the first time you do a ward round in a foreign hospital is always odd too because often the language is foreign and there are small details that you notice that are different like the style of the patient notes or what the obs charts look like.

What were bits you least enjoyed? There were some quite early starts but I enjoyed basically all of it besides that.

Were there any shortcomings? Not really.

Would you recommend it to another student? Yes. Definitely.

Would you do anything differently? On careful consideration, I would say no. Everything that happened was an experience I had to experience, if I changed it then I would never learn from it.

What did you learn about yourself? I work well in a team, I can be the guy that keeps things at a jovial level and that I was quite good at communicating with body language and broken Malay to the few older Malaysians that couldn't speak English very well.

Were there any deviations from the risk assessment? No. I got a lot of bites from mosquitoes and ants though.

## SSC5C Elective Report and Reflection

How was your accommodation? Perfectly fine.

How were your travel arrangements? Everything was just fine.

Other experiences and information useful to future students: Don't be shy and ask the doctors what you want to see and do. They are really hospitable, pardon the pun.