## Elective report - Summer 2018

<table>
<thead>
<tr>
<th>Name</th>
<th>Izzy Terry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elective location</td>
<td>Anaesthetics Department, Great Ormond Street Hospital, London.</td>
</tr>
</tbody>
</table>
| What I did each day | - General anaesthesia, spinal anaesthesia, epidural anaesthesia, nerve blocks  
- Procedural sedation  
- Crash team  
- Pain WR  
- M&M meetings  
- Consenting pts / parents  
- Pre-op assessments  
- Independent study  
- Project  |
| I was fully involved with every pt I encountered: never an observer, always part of the team. For each pt on a theatre list, I was either (a) managing their airway, (b) leading the dialogue between ourselves / the pt / their parents, (c) establishing IV access or (d) the lead entertainer / distractor! (Lots of blowing bubbles & Peppa Pig!) |
| My project | I designed a survey to seek the opinion of parents regarding the concept of short-acting pre-procedural sedation, prior to brief, simple, but potentially distressing procedures such as venepuncture or cannulation. |
| Tutorial topics included... | i. Basic CV & respiratory physiology  
ii. Phases & stages of anaesthesia  
iii. History of anaesthesia  
iv. GA agents & their chemistry, pharmacokinetics, pharmacodynamics & side effect profiles  
v. Awareness during anaesthesia & the conundrum of ‘consciousness’ VS ‘awareness’  
vi. Neuromuscular blockade  
vii. Analgesia & pain  
viii. Local anaesthetics  
ix. Malignant hyperthermia, anaphylaxis & other anaesthetic emergencies |
**Clinical experience gained**

- Airway management
- Paediatrics per se!

I was taught - and subsequently practiced - skills such as...

- Bag valve mask ventilation
- Use of a laryngoscope
- Endo-tracheal intubation
- Management of anaesthetic emergencies
- Advanced IV access skills

**Great bits**

- Unlimited opportunities to interact with paediatric pts & their families (without worrying about taking histories or examining the pt: just the rare privilege of simply being able to listen, talk & learn from their experiences)
- Becoming fully ‘embedded’ within the department over the course of my elective, meeting more & more of the enormous team each day. They were hilarious!
- Anaesthetists took it upon themselves to set aside time to give me teaching: they were so positive, so generous with their time & seemed genuinely over the moon that I was interested in anaesthetics
- Fantastic teaching, close supervision & continual encouragement gave me the confidence to do things I’d never expected, WITHOUT shaky hands!

**Single most memorable moment**

Caring for a pt ‘from start to finish’:

a) Counselling about risk, exploring concerns, consenting them for the procedure
b) Calculating & drawing up the appropriate anaesthetic drugs & doses
c) Leading the ‘communication aspect’ of induction, chattering to the child / parents / nurse, whilst simultaneously gradually altering the gas mixture
d) Providing ventilation for the child, then inserting an endotracheal tube & wheeling them into theatre
e) Handing the child over to the nursing staff in Recovery, being there when the child woke up & reassuring the parents that the procedure & anaesthetic all went smoothly & ‘as planned’

This felt absolutely amazing.
What I didn’t enjoy

- Seeing children that were so sick that they had never been able to leave hospital, since being born
- Children that didn’t look anxious / cry in the anaesthetic room. The fact that they were used to doctors / needles / general anaesthetics is very sad, when you think about it… Crying would be a normal response.
- Realising that a lot of the children at GOSH are so incredibly sick, and that this is reflected in the anaesthetic risk, the mortality of surgical procedures & the frequency of cardiac / respiratory arrests

Lessons learnt for future practice

1. The art of ‘opportunistic medicine’ & ’open mindedness’ when it comes to interacting with children (of all ages & developmental stages)
2. Emotional intelligence & choosing your words / intonation very carefully
3. The variety of belief structures that families hold (strongly) & how to approach / manage these
4. A thicker skin, and a more considered perspective on paediatric medicine

Advice for next year’s students

- Please, please do not be quick to disregard an Elective placement at home: it was fantastic
- You wouldn’t “just be watching”: I had been under the impression my role at GOSH would primarily be as an observer (especially given that it is a ‘quaternary’ centre, in a developed country) - in fact, I was given countless opportunities to gain clinical experience in areas I’d never have dreamed of
- Undergraduate students (& even junior doctors, to a certain extent!) are a relatively rare breed at GOSH, and everyone I encountered was unbelievably eager to teach / chatter / offer advice - on all manner of topics. It was a lovely novelty
- Contrary to my expectations, this was a very laid-back placement, with timetables that were more akin to those who organised electives abroad, as opposed to ‘normal’ Clinical School placements! Certainly, long weekends every weekend! It was wonderful to return to Cambridge feeling as if I’d truly had a ‘holiday’ & a chance to relax / catch up with friends & family!
- All of the above aside, this was a sensible decision for me to make financially, & with the generosity of my college (& relatively low outgoing costs) I was able to ‘net £0’ this summer. Subsequently, I was able to instead enjoy a holiday abroad in the few weeks I had free… What I’m trying to say is: I didn’t miss out on the sun, sea & cocktails!
If I had my time again

- I would walk the 3 miles to work each day, rather than tackling 45 minutes of travel on the London Underground each morning & each evening, throughout the summer heatwave. It was SO unpleasant.

How I organised it

- I was talking to a couple of anaesthetists in the coffee room during my Neurosurgery placement & the subject of electives came up in conversation. When I said that I would probably have to think about staying in England, they were very encouraging, offered advice on hospitals (GOSH & Queen's Square) & gave me a couple of email addresses. From then on, it was just a case of numerous emails, sending my CV, filling in forms / DBS (etc etc).
- I organised this in October 2017 (9 months in advance)
- GOSH charges £750 for an elective placement