

Medical Elective in Anaesthesia

During my 5week elective placement I was delighted not only to gain exposure and experience in the world of Anaesthetics but to work alongside the inspiring consultant Anaesthetist Dr Sarpong and her colleagues. Situated in the capital of Ghana, Korle-Bu Teaching Hospital is the third largest hospital in Africa, nonetheless healthcare in Ghana is greatly dependent on the location and demographics of the area, which means rural areas rarely, have modern health care. Because of this, most inhabitants of rural Ghana depend greatly on the 45,000 practising spiritual leaders in the country. With the average temperature of 35 degrees Celsius, the welcome of fully functioning air-conditioners in theatres was much appreciated and provided a sweet escape from the hustle and chaos on the streets.

Clinical Placement

On arrival, I was introduced and placed with the final year medical students starting their 4-weeks Anaesthetic rotation. After completing my Finals and not expecting much in the form of exams I was told I had to participate in the OSCE/ORAL exam at the end of the rotation alongside my new class-mates!! With my Oxford Handbook of Anaesthesia in hand I was all ears and eager to absorb as much information as possible in order to pass this exam and avoid any embarrassment on my part.

Monday morning meetings included PowerPoint presentations of cases by SHOs and Registrars seen over the weekend including patients in ICU and a thorough run through of the mortalities and high-risk patients on the surgical wards. My main role was to observe and ask for informal teaching at every opportunity specifically on the basics in Obstetric Anaesthesia, Pharmacology of Anaesthetic agents, Airway Management and Equipment used. By day 3 I was performing tasks such as running fluid lines, cannulation, drawing up and administering drugs, intubating and extubating. Alongside various highly qualified consultants I was encourage to assist in Epidurals, Nerve blocks and Central Line insertions. My days in the Pre-op Assessment clinic highlighted the strain on the healthcare system in Ghana and the challenges faced by government hospitals. The queue of patients was never ending and often resulted in unsatisfied patients having to return due to a lack of staffing. During these clinics I was a valued member of the team as I participated fully in the review of patients and finalising Anaesthetic Plans tailored to each patient.

When the time came to sit our Exam I felt saturated with knowledge but eager to impress. There were 15 stations with 3 'manned' stations – Questions varied from 'Outline the Pre-Op Assessment of...' to 'Draw and Label a South Facing RAE Tube with Indications of Use'. The VIVA stations involved discussion of various Anaesthetic agents, their indications, contraindications and doses and finally a BLS station. Sighs of relief filled the examination room when the final bell rang but was a sign my elective placement was coming to an unwanted end.

In Conclusion

Over 5 weeks I was exposed to the variation a career in Anaesthetic has to offer but also made aware of the different attitudes and behaviours associated with the healthcare setting in a third world country. I attained vital skills in anaesthesia, easily transferable to all specialities and subject to being improved during my final year at medical school in preparation for my foundation year. Not only did I benefit greatly from this experience but I was also able to promote professionalism within the medical students and on the wards with my behaviour and conduct with patients and other healthcare professionals. During revision sessions I advised students on presentation skills during VIVA exams and ways on articulating medical information accurately and in a concise manor. The continuous praise from consultants and my exceeding results from our end of rotation exam have provided me with the fuel required to further enhance my drive and ambition towards a career in Anaesthetics.

This could not have been achieved without the generous award from the AAGBI to whom I am extremely grateful and the generous support from the Anaesthetic Department at Korle-Bu.



**Anne Burton, University of Liverpool
Korle-Bu Teaching Hospital
June/July 2016**