

# **Erasmus placement: Descartes University Paris 2018**

## **European studies and choosing Paris**

I have always enjoyed learning languages and was frustrated at stopping French after AS level in order to focus on science subjects for A2 level. For me the European studies programme seemed like the perfect opportunity to broaden my education and carry on with French. I knew that I would never have another opportunity to study in France and be so immersed in the country. I had already done a placement in France at George Pompidou Hospital in Paris during my 3<sup>rd</sup> year PEP and so I knew that I wanted to go back as there was so much going on and I knew that if I was spending 4 months there I wanted to have plenty to explore and do. I also felt that I wanted to be with a big group of Erasmus students to make moving to a new city easier.

## **Arrival in Paris**

I arrived in Paris the Saturday before we were due to start, my accommodation wasn't ready until the Tuesday so I spent a few nights in an Air BnB in Clamart which is south of Paris. It was hard to transport everything which I needed for 4 months from the airport to my room. I would say that most people went home at least once during their Erasmus and we all had visitors. It might be better to bring less stuff at the beginning and then get things as the weather improves to make moving easier.

On the first Monday when I arrived in hospital for my placement nobody had any idea who I was. I had been told to go to an office on the first day where I was told to meet a member of staff who was in charge of anaesthetic students. However, this woman had no information on my placement and was purely responsible for administration. The university didn't have information on my supervisor either so eventually I found the name of a senior anaesthetist and e-mailed him to introduce myself and he was able to tell me what to do.

On the Tuesday I went to collect my keys for my accommodation. However, when I was arrived I was told that I had been given the wrong date to move in and in fact had to wait a further two days to move in. It was daunting thinking that I had nowhere to stay and I was very lucky to have a friend who lived in Paris.

The reason I have included this is to warn you that things will not go to plan!!! I remember after a particularly bad day checking planes home and trying to work out how long it would take me to get home to the UK. Moving to Paris was incredibly stressful and you will rely on each other to help you out and keep you going. But when we had finally settled in it was amazing and I am so glad that I stayed.

## **Accommodation**

I lived in the 13<sup>th</sup> arrondissement of Paris in Crous accommodation called residence Chevaleret. Crous is the name of housing for students which is subsidised by the French government. When you get offered a place at university you will have the option to apply for university accommodation. Crous is

around half the price of equivalent accommodation in Paris and you have the reassurance that it is a legitimate. I lived in a studio apartment which had a single bed, shower, desk and small kitchen with two hobs, a sink and a fridge. Bedding was not provided and neither was kitchen equipment. My accommodation was very modern, clean and well heated. In terms of finances this was a very affordable option with my room only costing 350 euros per month.

In terms of buying things for your accommodation if you don't have anything provided I would recommend going to IKEA. There is one just outside of Paris which is accessible by shuttle bus. That way you can buy bedding and kitchen equipment all in one go and save a lot of money compared to going to supermarkets. Leroy merlin is also a good store for buying home wear type stuff.

Although technically halls it had a very different feel to halls in the UK. The accommodation is mainly for students from lower income backgrounds or exchange students and so had students in all years rather than being mainly for freshers. With no communal areas I had very few interactions with other students. It also was relatively quiet and other students didn't seem to have predrinks in their rooms in the same way students do in the UK.

Whilst in France I rented out my room in Manchester. This was easy to sort out and once I had the agreement of my landlord and housemates to change the tenant in my room I advertised on spareroom.com. It was very useful not to be paying two rents at the same time since I found Paris a very expensive city to live in.

It is possible to get money back on your room in Paris through a system called CAF which reimburses people based on their income. However, after the difficulties of moving in and the complicated administration I heard was involved I decided not to apply for it.

## **Hospital placements**

In terms of hospital placements I was able to choose two two month placements. Initially I asked for 2 months of anaesthetics and two months of A&E. As A&E is a competitive placement I ended up getting two months of anaesthetics. After a week in anaesthetics I realised that I wanted to have some ward experience so I went to the university office and asked to change my second placement to internal medicine which was very easy to do.

For anaesthetics I was based at Hospital Cochin. At Cochin anaesthetics is divided into surgical specialities, orthopaedics, obs and gynae then ophthalmology and colorectal. I was placed on orthopaedic anaesthetics. Had I known about this I may have requested a different service but in the end I loved the time that I spent there. Anaesthetics in France is heavily supported by anaesthetics nurses or 'infirmiers anesthésiste diplômé d'État' (IADEs) who are nurses who have done an additional 3 year degree to specialise in anaesthetics. They are allowed to intubate patients and are often left alone in theatre with patients.

My day would typically start at 7:30 when I would arrive to change. I would then head to theatres and select a list that looked interesting. Then in the anaesthetic room I would help prepare medications and equipment with the anaesthetic nurses. We were not given a time table and medical students or 'externes' were one per theatre so it was a case of getting there early if you wanted a choice of lists. I would then look through the patients notes and begin to fill in their anaesthetic chart. Then at the interne and chef would arrive (the equivalent of a trainee and a consultant) Normally in orthopaedics patients would have a general anaesthetic and ultrasound guided nerve block. The internes would do the nerve block supervised by the consultant. They took

the time to explain the USS image and would talk me through the procedure. When that had finished I was nearly always allowed to manage the airway. This meant I got a lot of experience using bag valve mask to ventilate the patient and also using a laryngoscope to intubate. Moving into theatre I would help set up. Normally once the patient was on the table and the operation had started I would go for a coffee break with the interne. In theatre I would then fill in the anaesthetic chart, and had the opportunity to ask any questions I had to the interne or anaesthetics nurses. It was unusual for the consultant to stay for the duration of the operation. At the end of the operation I would accompany the patient to recovery or 'salle de surveillance post-interventionnelle' (SSPI), and I was given the task of doing the 'transmission' or handover. During my time in anaesthetics I was able to practice ultrasounds guided nerve blocks and by the end of the placement had the opportunity to do them on patients whilst supervised by an interne and chef.

In anaesthetics the relationship between students and doctors was great. I was well supervised and doctors were very keen to teach and help me develop my skills and over time gave me more responsibility. I think this is because the ratio between doctors and students was 2:1 which made the environment safe to learn in. I would recommend an anaesthetic placement if you are considering it as a career option.

My next placement was internal medicine and also based at a cochin hospital. Internal medicine is a speciality which predominantly focuses on autoimmune conditions and haematological conditions.

My day would start at 9 am or 8:45am if we had teaching. We would then head to the ward where we would go and see our patients. We had between 3 and 4 everyday and were responsible for checking up on them, seeing if there had been any changes in their condition writing in their notes and then reporting to the interne responsible for that patient. We would then be responsible for carrying out any jobs that the internes had for our patient, this would range from filling in request forms, ringing other hospitals to chase results or even doing skills such as lumbar punctures. I found that there was a massive difference going from being theatre based to being ward based. My spoken French was not as good as it could have been and I think that the doctors and students picked up on this and initially wouldn't give me jobs to do. This made the placement very slow to begin with. Also one interne would always delete any notes I had written which started to become very frustrating. To demonstrate that I was keen I would always ask if there were things to do and I would try and check my work with other students and the internes. Things got a lot better when the internes changed. At this point my spoken French had improved and I felt more comfortable in the ward environment. I was then given the same responsibility as the other students.

During internal medicine we had lots of teaching organised by the hospital. This was compulsory in contrast to university teaching which was not. On each ward medical students were expected to present at patient, my fellow externes allowed me to present with them which was quite daunting but a good opportunity.

French medical students are expected to attend teaching in their afternoons, do weekends 'astreintes' and 'gardes' or oncalls overnight. As Manchester students we are not expected to do any of these things and are just expected to attend placement during the day. However, it is possible to do on calls and attend teaching if it interests you.

My timetable for anaesthetics was very flexible and I was able to choose which days I wanted to attend provided I did enough hours. In contrast for internal medicine my hours were very rigid, and when I had to organise time off to attend a conference people were worried that there wouldn't be enough students on the ward. The dynamic between doctors and students was also different on

internal medicine and felt more formal although members of staff were still friendly and approachable.

### **Linguistic development**

I thought that by the end of my placement I would be close to fluent but I realise now that was unrealistic. In terms of linguistic development I think the area which I have most improved is my listening and comprehension. My spoken French also improved but not to the same extent and I found it hard initially to find the confidence to speak a lot of French. Over time this disappeared, not necessarily because I had improved massively but because I became a lot more comfortable with making mistakes. I would say my grammar has not improved significantly as I didn't have much need to write in French other than in patient notes.

The thing that surprised me the most was how much I still had to work on my French to improve it. I realised that I was mainly exposed to medical vocabulary and so I tried to read books and news articles in French and also watch some French TV. This wasn't always easy to do and often I felt like I wanted a bit of a break from French after being in hospital. I made a conscious effort to look up new words and I used an app on my phone Linguee which allows you to download a French/English dictionary so that you can use it offline. I also tried to make a note of new vocabulary but this was hard to keep up with.

### **Culture**

I found that Parisians were generally quite direct. Initially I found this quite shocking for example one time when I was in theatre I was told by an anaesthetic nurse that if I didn't learn how to do more things and get more involved I was going to be a waste of space, useless and annoy everybody. (This is probably the worst example that I have and people didn't generally speak to me like this) Having been used to having more of an observer role in the UK I didn't want to presume that I could do things and because I felt unconfident at the beginning I generally waited until I had permission to do things. Having discussed this incident with a French friend she pointed out that the nurse was probably just trying to explain how I could get more out of the placement and that I shouldn't see it as a personal attack. This was good advice as I found the nurse perfectly friendly to me afterwards and it really encouraged me to get more involved.

Administration is made very complicated in France. For example, my accommodation fell through before I arrived despite me having followed correct procedures. My advice would be to never assume things are going to work out as planned. So with accommodation and placement e-mail the relevant people not once but until you get a response confirming plans.

In my whole time in France I remember seeing 3 obese patients and 2 with type 2 diabetes. I think this is a reflection of the fact that the French generally take their health a lot more seriously than we do in the UK. I think in part this is a product of that fact that it is easier to see a doctor in France, but also because people take great care of their diet. It was obvious even from the hospital food that generally people eat less sugar and fat and have lots of fruit and vegetables in their diet.

### **Future plans**

I really enjoyed living in Paris. Although an expensive place to live it has so much going on and is so easy to get around compared to Manchester. I will definitely head back to Paris for holidays and if I did have the opportunity to work there I would take it up. I did think a lot about the practicalities of taking the ECN or the French medical school finals. Their system for job allocation means that you receive a job purely based on your ranking in that exam, which means that it could provide a route into a speciality if it is too competitive in the UK. Realistically it takes two years to study for and I don't know about how it works to take the exam as an 'external student'.

### **Setting up a bank account**

You may want to set up a French bank account, this is particularly useful if you are at a hospital that pays you for being on placement as Descartes did which was around 200 euros a month. Otherwise if euros are paid into a foreign account you lose money due to exchange rates but also due to transfer fees. It is also useful to have a French bank account so that you can withdraw euros without being charged. You will require proof of address so be sure to ask for some when you move into accommodation. You will also require photocopies of your passport. The first step is to make an appointment at a local bank and find out what documents they require. You may have to wait over a week for an appointment so sort this out as soon as possible. Make sure you are eligible for an account there as some banks only allow people who live or work in that arrondissement to open an account. After setting up an account it is possible to take out insurance for accommodation which is a requirement of French law.

### **Transport**

The best and cheapest way to get around Paris is to use the Navigo pass. These can be purchased at any metro/train station and require you to have a passport sized photo. They cost around 75 euros a month and give you access to the metro, all buses and the RER system in and around Paris. If you save your receipts your hospital should re-imburse 50% of the cost. It's worth noting that whether you buy a monthly or weekly pass it will start on the 1<sup>st</sup> of the month or the Monday of the week.

### **Things to do/general information**

I lived very close to the bibliotheque national de France, which is a beautiful library. It cost 15 euros to take out a 'readers' membership for a year which meant that I had access to the library, could use their computers and if needed print or photocopy documents. I found this useful for doing work such as portfolio or doing general admin as I found I didn't really enjoy using my apartment to work in.

The MK2 cinemas have cheap tickets Monday to Friday for people who are less than 26 years old. It only cost 4:60 per showing. Most films which are English language are shown in VO or version original with SF subtitles Francis.

I joined affordable yoga which hosts yoga, fitness, ballet and Pilates classes throughout Paris. It cost roughly 50 euros for access to 10 lessons and you could sign up for any lessons that you liked the look of. It was very flexible and cheap.

I used the meetup app in Paris to find events and groups. I ended up finding a book club for English speakers but the app had lots of different events and is worth checking out.

Gilbert Joseph is a famous bookstore which sells books including textbooks. They always have second hand titles in stock and I was able to pick up some medical textbooks very cheaply which I ended up using on my placement.

Remember to bring photocopies of your passport/birth certificate and passport size photos. You will often have to provide several forms of ID when setting up accounts/organising accommodation etc.

You can only buy medication in Pharmacies in France never in supermarkets. This includes paracetamol, ibuprofen and hayfever tablets. I wasn't able to buy generic versions either so I would recommend taking some with you as they are much more expensive in France.

I ended up using the Monzo card in France as my debit card. It doesn't charge commission for using a foreign currency like most banks do and is linked to an app so it is very easy to track spending on your phone. The card takes around a week to arrive and I would recommend getting one before you arrive in France.