

ARRIVAL IN LAUSANNE

ACCOMMODATION

PAPERWORK/BUREAUCRACY

CITY OF LAUSANNE

VISITING SWITZERLAND

LIFE OF A STAGIAIRE

PLACEMENTS

Paediatric surgery

My first week on the 11th floor of the CHUV (Centre Hospitalier Universitaire Vaudois) as a stagiaire in paediatric surgery was quite overwhelming, especially since there was no real induction and the department didn't seem to have any idea I was coming. My french and my confidence quickly improved however, and I settled in after a week or so. My main activities on this placement were helping the médecin assistant of the week and watching surgeries. I occasionally got to scrub in and assist, more towards the end of the placement as the more senior doctors got to know me a bit better. My jobs included: clerking in new patients, updating patient notes, writing discharge letters, liaising with other departments over the phone (mostly radiology), and presenting patients in handover. In the last week and a half I was given my own patients to look after (with supervision from the assistant). It was a good example of life as a junior doctor, however it wasn't my favourite placement as I found the seniors to be pretty unapproachable/unfriendly with a strong sense of hierarchy; it was the stereotype of a surgical placement. For example, when attending clinics with the senior doctors I was mostly put in the corner and not spoken to. This was despite my best efforts at seeming interested and asking questions. That said, the ward includes patients from all surgical specialities so if you're interested in paediatric surgery it's a great opportunity to see a variety of conditions and surgeries. Specialisms include neurosurgery, urology, general surgery, plastics, ENT, and orthopaedics. I saw the treatment of burns patients, correction of anorectal malformation, surgical correction of scoliosis (arthrodthesis), re-anastomosis of stoma, an osteosarcoma and a pulmonary sequestration. Whatever you're interested in, you'll find something. If you're an aspiring surgeon and you're motivated I'm sure you could have the opportunity to scrub in and assist much more than I did. Doctors are usually pleased that you're interested. Another aspect of the placement I enjoyed was following the junior doctor on call for 'urgences'. When a call comes in you can go down to A&E and take the history/examine the patient. The CHUV is also the centre for paediatric trauma that comes in via air ambulance, so you have the opportunity to see how resus works and to assess traumas/spinal injuries.

Adolescent medicine

I spent my second month at the Division Interdisciplinaire de la Sante des Adolescents (DISA). The placement was well organised, I was welcomed by all the staff from day one, and I loved my month here. The centre provides outpatient appointments for teenagers (aged 13-20), mostly with paediatricians but there is also a social worker, sexual counsellor and psychologist who specialises in eating disorders and conducts family interviews ('entretiens de famille'). As a stagiaire, I assisted in consultations with the paediatricians, saw any 'urgences' (same day emergency appointments) by myself and presented them to the supervising doctor, saw patients at the paediatric psychiatric ward (new patients and any new medical complaints) and observed a few consultations with the sexual counsellor as well as a few family interviews with the psychologist. I also spent a half day at a juvenile prison in Palézieux and a day at an inpatient ward for eating disorders at the Hôpital St Loup. The department also asks all stagiaires to do a 20 minute presentation at the end of the placement, during the Monday meeting.

I liked the holistic approach the doctors have towards their patients, who have lots of psychosocial challenges. Many patients were unaccompanied migrants, were in care or had turbulent family lives. The head of the department specialises in the management of functional problems and there are also many patients with eating disorders and those who self harm. There is a strong culture of teaching and developing communication skills, with weekly teaching sessions and roleplays.

Internal Medicine in the PMU (policlinique médicale universitaire)

I spent my last two months in the policlinique médicale universitaire (PMU) working in a general practice setting (that is quite far from the GP practices we have over here). The PMU is attached to the CHUV, and you can access it by walking through the hospital, but it functions as its own organisation with strong links for referrals to the CHUV, and uses the same system for patient electronic records. It's worth noting that I had a smaller salary at the PMU (the CHUV recently increased the salary given to stagiaires), and human resources would only pay me for the first 3 weeks of May, which meant I was significantly worse off than my friends at the main hospital. That said, it was the best placement in terms of experience.

Stagiaires in the department have their own shared office and we were each given a 'bip' (mobile phone) and card with useful contact numbers within the department and the main hospital for e.g. Radiology. Most days we were allocated our own consultation room within the department so that we could see our own patients. I spent time seeing patients in the 'urgences' at the PMU main site, or at their satellite site in Flon, in Lausanne city centre. I saw the patients, examined them, then presented them to the supervising chef de clinique (senior registrar/consultant level). I was then expected to come up with a management plan which I discussed with my supervisor. Any investigations or future appointments were my responsibility to organise.

I also was given new patients to see and acted as their 'médecin traitant' during my two months. This gave me a taste of what general practice (or its equivalent) is like in the Swiss system. Each new case I saw for around an hour initially, covering any problems they wanted to discuss, as well as a full overview of their general health, ensuring vaccinations were up to date, and practising preventive medicine - depending on age/gender this included cardiovascular health, screening for colorectal cancer, screening for cervical cancer, mental health problems, alcohol risk and smoking cessation. The follow up then depended on each patient and the investigations carried out. Seeing my own patients really gave me a good taste of working as a junior doctor in Switzerland, and I saw a big improvement in my spoken and written French.

The placement also involved observing specialist consultations including respiratory, lipids (post-stroke or MI follow up), dermatology, 'tabacologie' and 'alcoolologie' (smoking and alcohol cessation clinics). I did a day and night shift with the doctor on call for the town, doing visits to patients' houses. I also spend an afternoon at a local prison with one of the doctors - not somewhere I would choose to work but a memorable experience!

This placement gave me real responsibility and was a confidence boost before F1, despite the fact that it wasn't hospital based. My medical French also improved the most on this placement, as I spent a lot of time talking to patients and discussing with my supervisors, as well as documenting everything in the notes.

There was a good culture of teaching at the PMU, with one afternoon a week dedicated to teaching the juniors. I also spend 2 days at an internal medicine conference. The variety of activities available to stagiaires was very enjoyable.