

## European Studies Placement Report

### **Why European Studies?**

I chose to study on the European Studies programme because I had studied Spanish for many years in school, but having come to university I thought I would have to give up studying anything other than medicine for a while. I came through the St Andrews route so I was thrilled to discover that European Studies was an option in Manchester. I also thought it was an exciting opportunity to be able to improve my Spanish and have an outlet separate from medicine. It was nice to be able to go once a week to practice Spanish, meet people from other hospitals and, coming from Preston, it was a good chance to go into Manchester. I also thought that having the option of doing a 4 month's Erasmus placement in Spain was an exciting prospect, especially when compared to a normal 2-month elective. I have also visited Spain many times before and am particularly fond of Spanish culture and way of life, so I thought an Erasmus immersion would be the perfect opportunity to experience this more fully.

### **Living in Madrid and working at Hospital Universitario Fundación Jiménez Díaz**

I did my Erasmus placement at Universidad Autónoma de Madrid in Hospital Universitario Fundación Jiménez Díaz, which was located in Moncloa, in the north west of Madrid. I lived in the centre of Madrid, just above Plaza Mayor and right near Sol, so it was a very convenient location. To get to the hospital every day, I just needed to get the metro 5 stops to Moncloa; the whole journey took less than 30 minutes. It was a very good sized hospital and it didn't take long to learn my way around. The area around the hospital is nice, quite residential but with a lot of good restaurants and bars. The hospital serves a diverse community, but a lot of the patients are quite old. I had four 4-week rotations, which I did on internal medicine, A&E, obstetrics and gynaecology and cardiac surgery. At the beginning of the first placement we had to go to the docencia, which is an office that looks after students on placement in the hospital. The docencia in my hospital was not the most organised and were not even expecting me to turn up. They were also supposed to give me a name badge for the hospital and a locker, but said they did not have any name badges and also did not have any free lockers, so I had to use my university ID as a name badge and bring my bag with me to every placement and leave it in an office and make sure I had all my valuables with me.

I started on internal medicine, which I thought would be a good placement to start on as it provided a good overview of general medicine and I felt like I had the appropriate medical Spanish vocabulary to understand what was going on with the patients. That being said, the first few weeks were quite tough; it was hard to understand what the doctors were saying all the time, especially when they were talking amongst each other and using a lot of slang. I was with a team made up of a 'médico adjunto' or a consultant and 2 'residentes.' I also had another Spanish medical student on placement with me, which was really helpful in terms of learning about their course and medical system and she also helped translate or explain things that I might not have understood. The medical students on placement with me were in their 6<sup>th</sup> year, which is the equivalent of our final year and they mostly just have clinical placement every day with few classes or revision sessions. The placement on internal medicine consisted of a meeting every morning to discuss the patients and then a ward round, which went often went around various wards around the whole hospital, and then a meeting after to discuss plans. The residents and consultant would then write up the

patient's notes on the computer and order tests/prescribed medications. In this way, the process was a lot more expedient than in the UK, as they were not writing up notes at the patient's bedside. Some mornings we would have a meeting where one of the doctors in the specialty would give a presentation on a topic they were interested in or had done research on. On this specialty I noticed that the patients were always so grateful to the doctors, regardless of whether they had done anything or not. The patients also always had multiple family members with them whenever we went on the ward round and the doctors would often discuss the patients' condition and management at length with the family without consulting the patient; this was a cultural difference that I found quite different to the UK healthcare system.

My second placement was on A&E or 'urgencias.' I went to meet my supervisor on the first day who was a 'medico adjunto' or consultant, who then put me with a resident to shadow for the whole time. The way that A&E was set up was such that one area was for patients who needed to be monitored and assessed or the 'boxes', another area was for patients under observation before being discharged, and another area was for minor ailments or complaints called 'policlinicas.' As is the nature of A&E, the pace of the days was quite variable. I mostly shadowed the resident in the 'boxes' area and so we would go to see new patients, take their history and assess them, then write up notes and order tests on the computers. Most of the admissions were older patients with exacerbations of heart failure or COPD. There were also some inebriated patients, patients with syncope, gall bladder pathology, trauma, and various other pathology. I was on the placement with a sixth year Spanish medical student, who was again really helpful in translating terms I did not understand and on occasion we would be told to go speak to a patient, which was easier with someone who could speak fluently. On occasion I sat in on the 'policlinicas' area of A&E which felt similar to being in GP consultations.

My third placement was on gynaecology, which I found to be one of the more interesting and varied placements. While on the previous two placements we tended to do the same thing every day, which can get a bit tedious when you are observing most of the time, but my supervisor on this placement planned for me to go to different sessions every day. My week would consist of sessions such as gynaecology clinic, gynaecology oncology clinic, hysteroscopy, egg harvesting for IVF, reproductive clinic, gynaecology surgery, obstetric clinic, etc. I found this to be much more stimulating and interesting. He also encouraged me to choose sessions that I was interested in going to. In some of the sessions the doctors also let me have a hands-on experience, such as in gynaecology clinic when the doctor allowed me to assist with taking swabs. I also saw some interesting cases in gynaecology oncology clinic and subsequently in surgery.

My last placement was on cardiac surgery. At the beginning of my time at FJD hospital, the docencia gave me a list of my supervisors and their emails, except for the cardiac surgery placement. The week before I was due to start, I went back to the office to ask if they had a name of the doctor I was supposed to find, which they did not, and told me to just go and find the 'jefe' of the specialty to ask what I was supposed to do on the first day. This made things a little difficult and after trying unsuccessfully to find the office, I found the cardiac surgery ward, where there were no surgeons. I then found the office and it was empty and locked, so waited outside for an hour before one of them showed up. Nevertheless, the placement turned out to be very interesting and rewarding; I mostly attended surgery two or three times a week and short ward rounds or clinics on the other days. The surgeries were quite long but really interesting as I had never seen cardiac surgery

before; they consisted of coronary artery bypass grafts, valve replacements, etc. There were only 5 surgeons in the whole specialty, but they were all very accommodating and welcoming and let me scrub into surgery whenever I wanted.

### **Differences between British and Spanish Hospitals and Cultures**

At the beginning I found it especially hard to follow what was going on in the doctor handovers as they often involved a lot of colloquialisms and small talk, which we have not necessarily learned in classes. This was hard to transition into after having completed finals and feeling very competent with speaking to patients, deciding on a provisional list of differentials and potential investigations. I felt like I was back in third year, merely observing everything that was going on and trying to grasp at any recognisable words and phrases I had learned. It was hard to imagine at that point that I would progress enough to be able to understand the majority of conversations. Thankfully my Spanish has improved considerably, but this whole experience has really helped me to appreciate difficulties with communication that a lot of patients must experience. I have seen patients in the past who don't speak English, as well as patients who have communication difficulties because they have had a laryngectomy or are deaf, etc. I have learned the importance of nonverbal communication when I have not understood every word; I have learned to read the body language of patients well and also to express body language or facial expressions which convey empathy, warmth, or whichever sentiment is appropriate.

On my first placement on internal medicine, a few differences between the UK and Spanish healthcare systems and cultures were particularly stark. Firstly, the doctor that I was with was particularly caring and had a lot more patient to patient contact. He would comfort the patients by holding their hands or rubbing their faces. This was in stark contrast to my experiences in the past where there would be a considerable distance between the doctor and patients; there was never any skin to skin contact, unless the doctor was performing an examination. To a certain extent, this was due to cultural differences. In my experiences meeting Spanish people inside and outside of the hospital, they are a lot more open and have less personal boundaries than people from the UK. This aspect of the culture in the context of the healthcare system struck me as quite effective as manifest by this doctor's style. He came across a lot more caring and warm, two simple traits which can often help make a patient's outlook a lot better.

Another pervasive aspect of Spanish life, even within the hospital, is the relaxed, laidback nature of Spaniards. Within the hospital, even on busy days, doctors on internal medicine found time to go to the cafeteria for a coffee after the ward round or just to the vending machine for a coca-cola if there was less time. During gynaecology clinics, we would always take a break in the middle to go downstairs and have a coffee with the other doctors and nurses working in the other clinics. It was also a good time to be social and talk to everyone else, which was another way to relax and take a break from working. I found this to be a very effective part of the day as we would always go back to work feeling revitalised; it reminded me of the old adage that taking small breaks after long stretches of working in order to refuel and subsequently makes periods of time working more effective. The doctors in general seemed more relaxed and less stressed than I have noticed doctors in the UK to be.

Finally, another difference I have noticed within Spanish culture is the important role that families play in most patients' lives. Whenever I have been on a ward round on internal medicine, it was assumed that patients wanted or didn't mind the doctor telling everything

about their condition and management to any family member that was there. This could also partially be explained by the difference in Spanish culture to British culture as Spanish families seem a lot more close-knit and co-dependent than families in the UK. Of course you get similar family units in the UK, but much more infrequently. For this reason, we have been taught often to respect patient confidentiality and not give away patient information freely.

**How I have gained from this experience in terms of i) linguistic development, ii) intercultural understanding, and iii) in terms of your ideas and future plans.**

From this experience I have definitely improved my Spanish. It is very challenging at the beginning of the Erasmus placement in the hospital, however, it is important to not get discouraged by this. The doctors were mostly very helpful with explaining things I did not understand, and although not as helpful for my Spanish development, a lot of them were keen to practice and explain things in English as well. That being said, there are a few things which might have helped me develop my Spanish language more. I ended up living with 4 other Erasmus girls from various countries in Europe who were studying different subjects; naturally the common language was English so whenever I was home this was the language we spoke for the majority of the time. On one hand it was nice because it can be quite exhausting listening to and speaking Spanish all day in the hospital and so coming home being able to speak English was a nice break. On the other hand, my Spanish would have improved more had I been forced to speak it at home as well. I also think it would have been useful to have taken some Spanish classes whilst in Madrid in order to provide more structure to my development of the language.

I also think being in Madrid has helped me to become aware and learn about many different cultures, primarily Spanish. In the hospital, I learned so much about the differences between Spain and the UK, but also outside the hospital and experiencing the city was a wonderful experience, from sightseeing and showing visitors around the city to experiencing the very late night life in Madrid and enjoying the many street performers around the city. Also, living with other students from different countries in Europe was a unique opportunity to learn about many other cultures and languages as well.

From this experience I will take away many good lessons and have future plans to continue to improve my Spanish. I have learned the importance of good communication and the difficulties that patients face when they cannot communicate effectively with their healthcare providers, and this will help me to appreciate this difficulty more and actively seek ways to overcome these communication difficulties. I plan to continue improving my Spanish by possibly joining a Spanish meetup group next year during FY1 and/or taking Spanish classes. I would also like to travel within South America at some point and the development of my language skills will definitely make a trip like this more rewarding.

**Any practical issues that future students on this placement should know about.**

Exempting exams finished only about a week before the start of our Erasmus placement and so I did not have much time to think about or prepare for leaving for Madrid. I was a bit nervous about finding a place to live, but once you get there it is much easier to sort out. I would recommend is getting an Airbnb for the first week after you arrive, which will give you time to settle in a bit to the city and also to go flat hunting. One of the other European studies students booked a place to live before coming, which worked out for him, but I read past reports about scams and would recommend seeing a place before putting down a

deposit. And although you might feel panicked, don't rush into a flat, there are so many! Idealista is a good website to browse to find a flat. You might not hear back from anyone initially, but keep messaging people on whatsapp; eventually you will get replies and have many places to view. Aluni.net is also another good website to visit. Consider what is important to you – it is overwhelming to decide about where you want to live, but if being in a central location is important or living near a park, then use that to guide you. It is really hard to find everything in a flat, namely a double bed, good sized room, affordable rent in a good location. Most places have only single beds, so be prepared for that. Also consider commuting distance to your hospital. The metro is really well connected and convenient but some people lived within walking distance of their hospital which could have been nice instead of getting the metro every day. Having lived in a very central location, it was good for socialising, but it did get annoying having to listen to the same street performers outside my window every day and having to wade through all the tourists whenever I left my house.

Also a word to the wise – before I signed my contract I got a bad impression from the person managing our flat (not the landlord) who lived upstairs from us. He initially would not let me see the flat because I could not remember specific details about it, and then after allowing me to come visit it, messaged me about how he did not think I trusted him because I asked if I could pay the deposit through bank transfer (he asked for it and first month's rent in cash). While the flat I lived in was in a good location and I enjoyed living with my flatmates, he tried to control who we could bring to the flat, eventually we were not allowed to bring anyone, and would tell us that we were making up problems going wrong in the flat, such as sink blockages and gas leaks. In hindsight I do not think I should have signed the lease with him, but I don't regret living with the four girls I met. I would like to think he is an exceptional case in Madrid, but don't sign a lease if you feel uncomfortable!

When you first arrive in Madrid, get your 'tarjeta transporte público' as soon as possible instead of paying every time to use the metro. It was only 20 euros/month for unlimited rides everywhere on the metro, including on the cercanías renfe trains from Sol. We could also use the card to get the bus to Toledo for free. In order to get one, we had to make an appointment online at a metro stop where they distribute them. You have to give an address in Spain and bring your passport/copy of your passport as well as pay the small fee for the card itself. Then you just top up the card every month at one of the metro machines.

Also when you first arrive in Madrid or before, sort out having a phone that works – either speak to your UK phone provider to see if they can give you a European add-on or have a 2<sup>nd</sup> phone with a Spanish sim card. Some people used a sim in their UK phone but it would not have worked with my phone so I am not sure how it works. I used my phone only on wifi for the first 2 months until EE told me that I could have data in Europe for only 3 pounds extra/month.

Our university in Madrid, Autónoma, did not provide us with any instructions prior to arriving as to what we were supposed to do, however, on the first day of your placement you need to go to the university campus in Cantoblanco (get the cercanías train from Sol) to get the certificate of arrival form signed at the office of internal relations. You also need your passport, copy of your passport and your European Health Insurance Card or a photocopy of it (make sure it is in date) or else they will not sign your certificate of arrival. Afterwards, you need to go to the Oficina de Relaciones Internacionales (ORI) at the medical school, which is located just next to La Paz Hospital, to get more forms. To get there, just take the cercanías train back, but get off at Chamartín and take the #10 metro to Begoña.

They will finalise your placements as well and give you the contact information of a person to go speak to in the Docencia in the hospital before starting. Also make sure you have the specific Autónoma form from your docencia that you will need to get signed off at the end of every placement in addition to the Manchester forms.

Try to get signed off at the beginning of the last week of the last placement. In order to get the certificate of attendance for Manchester signed, just go back to Cantoblanco to the internal relations office. Surprisingly, we did not have to show them any forms that we got signed. We then took our UAM forms to the ORI in the medical school where they generated a 'transcript' for us to pick up a few days later.

**Any addresses, phone numbers and contacts that might be useful for future students.**

Housing websites:

[Idealista.com](https://www.idealista.com)

[Aluni.net](https://www.aluni.net)

[Easyroommate.com](https://www.easyroommate.com)

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