Irish Adventures

Bridget Kennedy, MS4
Home away from home

Ireland- Population 4,588,252

Dublin City- Population 527,612
The hospitals

The National Maternity Hospital aka Holles Street
- Predominately obstetrics with a NICU onsite
- Approximately 10,000 deliveries/year

The Mater
- 2 gynecologic oncologists on staff
My interest

• Since the beginning of medical school I have wanted to be an obgyn
• With my international elective I wanted to compare the field of obgyn in the States to Dublin
• This evolved into looking at medical students, residents, and midwives in the setting of the National Maternity Hospital
The medical students

- Teaching in the hospitals was done during tutorials, a time set aside in the afternoon for consultant-student interactions.
- Each student was responsible for interviewing and examining a patient and then would present that patient during tutorials.
- Students would be stopped mid-sentence, corrected, and made to start over.
- My advisor Dr. Higgins that this emphasis on presentation style and wording is to optimize success during their oral exams which they have at both the end of rotations and at the end of medical school. She also reasoned that having strict wording and structure helps in not forgetting key portions of a patient interview.
- In the States there seems to be much more emphasis placed on note writing than oral presentations.

Examples of notes taken dictating exactly what is to be included in an obstetric patient presentation.
<table>
<thead>
<tr>
<th>The residents</th>
<th>Ireland</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The States</td>
<td>• The residents in Ireland are limited to a 60 hour work week and have flexible time off (one resident was taking off a month to prep for her wedding)</td>
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<tr>
<td>• four years at the same hospital</td>
<td>• However, training lasting longer in Ireland. Per Dr. Higgins, a person could spend 10-13 years before they are actually a consultant (an attending here in the states).</td>
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<td>• for fellowship add an additional two or three years training</td>
<td>• Intern year</td>
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<td></td>
<td>• during which a person does not have to have decided on a specialty.</td>
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<td></td>
<td>• SHO (senior house office) years</td>
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<tr>
<td></td>
<td>• 2 to 3 years and all of those years are not necessarily at the same location.</td>
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<tr>
<td></td>
<td>• Registrar years</td>
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<td></td>
<td>• Final 2 to 3 years of residency and are not all in the same location.</td>
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<td></td>
<td>• Most people pursue research and fellowships, which are most often done outside of the country.</td>
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The midwives

• A nurse midwife in charge of the antenatal floor
  – The SHOs and registrars rotate in the morning with the midwife on the antenatal patients
  – Consultants are only called if the registrars have a question about patient care

• A team of nurse midwives are responsible for the labor and delivery ward.
  – The SHOs and registrars are present for the deliveries of high risk patients.
  – Consultants are only called if there is a complication.

• In one of my many discussions with Dr. Higgins, she talked about how she believes that the presence of the midwives in the labor and delivery ward contributes to their lower cesarean rates.
Future application

• My experience as a medical student at the National Maternity Hospital will hopefully positively impact my teaching of medical students when I am a resident.

• While I am jealous of the fewer hours worked and vacations taken by the Irish residents, I am thankful for the shorter training time I will go through in the States.

• The exposure I had to midwives will hopefully make it easier for me to incorporate midwives in my future practice.
Breaking bad news

- During my last week in Dublin I spent time in the early pregnancy clinic. It was here that I was a part of some difficult conversations.
- We had multiple women who came in for vaginal bleeding who were anywhere between 10-14 weeks pregnant. One patient’s baby had no heartbeat and the others’ babies had very slow heartbeats. All were small for gestational size.
- I had never witnessed the conversation that happens between a provider and a woman who has lost her child so this was an incredibly gut wrenching, but also important event for me. As a future obgyn, these are conversations I will one day have, it was beneficial to witness a “good” example of how these conversations go.
Election time

• February in Dublin is the heart of election season so I had the opportunity to see the hanging of the campaign posters through to the election
• 11 political parties are represented
• People do not just vote for one candidate, they rank them
Ranking the candidates

• With each position there are a certain number of spots available and in order to be elected the candidates must receive a certain number of votes.
• If no one received the required number of votes then all of the votes for the last place candidate are redistributed to the people ranked second on the list.
• This process continues until all the spots are filled.
• If they, somehow, are not filled, then they have to go through the whole process again six months later.
• If this process seems confusing, the lady I was staying with informed me that she has to refresh herself on the process with every election.
Side trip

• During the two weeks after leaving Dublin I ventured to England, Germany, and Poland
• While in Poland I had the opportunity to tour Auschwitz and Auschwitz-Birkenau
• It is proof of what people can do when motivated by fear and hatred
Auschwitz

Entrance to Auschwitz “Work sets you free”

Portion of Auschwitz

Gas chamber and crematorium at Auschwitz

One of the gas chambers and crematoriums at Auschwitz-Birkenau that were destroyed by the Nazis to hide their crimes
On a lighter note... Isn’t Ireland beautiful?
Sláinte!
References