T. THIRUKUMAR

## SSC 5C Elective Report

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Location: The Royal London Hospital

Supervisor: Dr Peter Shirley

Speciality: Intensive Care

This is a reflective report about my placement that I spent at the Intensive Care Unit at the Royal London Hospital in April 2012.

## Why did you choose your placement?

My placement was in the Royal London Hospital in Whitechapel in the East End of London. It is a large internationally recognised teaching hospital with a full range of local and specialist services. It is has one of London's busiest accident and emergency departments. It is also home to London's air ambulance. Furthermore it is also one of the capital's leading trauma and emergency care centres and hyper-acute stroke centres.

The hospital began life as The London Infirmary in 1740 as a charity founded by professional men, businessmen, businessmen and philanthropists. It was intended for the sick poor among the merchant seaman and manufacturing classes. In 2012 the new Royal London Hospital building was completed and the hospital becomes part of Bart's Health NHS trust.

The main appeal of this hospital is that is well known and the intensive care placement is busy so I thought I would be able to see lots of cases.

## Describe the Pattern of Disease and Illness in interest in the Population.

I saw a wide variety of cases that came either from the accident and emergency department or referred from the wards. I saw a few patients following a road traffic accident. They had been made quadriplegic, suffered multiple fractures and had bilateral flail chest.

There were some toxin related cases including alcoholic related chronic liver disease and drug abuse. This was particularly common in the Eastern European population. A major role of the intensive care team is to manage the social care of these patients and ensure that there was care for them in the long-term.

Other common conditions were infections, in particular tuberculosis. This is especially prevalent in the immigrant population. This could be because of a lower standard of housing and poor living conditions.

Other common conditions that were encountered were cardiovascular conditions such as myocardial infractions and cerebrovascular events. Type 2 diabetes was also common. Although these are common conditions in developed countries it has a particular high incidence in the End of London. This could be because of the lifestyle factors of the locals which includes smoking, poor diet and lack of exercise.

can be done for them. Furthermore some of the patients were in the department for weeks if not months so it can feel frustrating if they are not making much improvement. The career path also involves anesthesia which is a specially that we only get a few weeks exposure to at medical school.

## Conclusion

I really enjoyed my time in the intensive care unit at the Royal London Hospital. The team made me feel very welcome and they were friendly and professional. This really helped further develop my diagnostic and management skills by allowing active participate in ward rounds. I thought It was particularly useful since I felt my knowledge in intensive cafre medicine wa lacking somewhat. I would recommend it to other students.