going clinical

**ELIZABETH COTTRELL** 

### The Medical Student's Survival Guide 2



# The Medical Student's Survival Guide 2 GOING CLINICAL

### ELIZABETH COTTRELL

Foundation Year 1 Doctor University Hospital of North Staffordshire

Radcliffe Publishing
Oxford • New York

#### Radcliffe Publishing Ltd

18 Marcham Road Abingdon Oxon OX14 1AA United Kingdom

#### www.radcliffe-oxford.com

Electronic catalogue and worldwide online ordering facility.

#### © 2007 Elizabeth Cottrell

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise without the prior permission of the copyright owner.

Elizabeth Cottrell has asserted her rights under the Copyright, Designs and Patents Act, 1998, to be identified as Author of this Work.

Neither the publisher nor the authors accept liability for any injury or damage arising from this publication.

British Library Cataloguing in Publication Data A catalogue record for this book is available from the British Library.

ISBN-13 978 1 84619 213 5

Typeset by Egan Reid, Auckland, New Zealand Printed and bound by TJI Digital, Padstow, Cornwall, UK

## Contents

About the author	ίλ
About the contributors	Х
Acknowledgements	X
CHAPTER 1 INTRODUCTION  Further reading	1
CHAPTER 2 CLINICAL YEARS	5
Clinical placements Clinical skills	5
Ethics	ç
Tips for successful clinical experience	14
Learning hospital lingo	17
Answer templates for clinical questions	19
How to wear a stethoscope	22
Further reading	23
CHAPTER 3 TALKING WITH PATIENTS AND COLLEAGUES	25
The importance of learning good communication	25
The difference between men and women	26
How to learn communication skills	27
Breaking bad news	28
Phrases medics use which cause confusion	30
Patients do not always say what they mean	31
Patients are not always saying what you think they are	32
Patience with patients	33
Children	33
General tips to get you one step ahead Further reading	34 36
•	
CHAPTER 4 HISTORY-TAKING	37
How to do it	38 45
Making notes	43

	45
Further reading	46
CHAPTER 5 EXAMINATION OF PATIENTS	47
Rapport	47
Permission	47
Chaperones	48
Dignity	50
Use your senses	50
System templates	54
Say what you see	55
Final words	56
Further reading	56
CHAPTER 6 PRESENTING PATIENTS	57
Basic format for presentation of a patient	57
Further reading	60
CHAPTER 7 WARD LIFE AND ROUNDS	61
Ward life	61
Ward rounds	68
Further reading	69
CHAPTER 8 CLINICS	71
	71
What clinics do for you Tips for getting along well in clinic	71 72
What clinics do for you	
What clinics do for you Tips for getting along well in clinic	72
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE	72 <b>73</b>
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success	72 <b>73</b> 73
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre	72 <b>73</b> 73 74
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre  Preparation for your theatre experience	72 73 73 74 74
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre  Preparation for your theatre experience Behaviour in an operating theatre	72 <b>73</b> 73 74 74 75
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre  Preparation for your theatre experience Behaviour in an operating theatre  Activities you can undertake in theatre	72 <b>73</b> 73 74 74 75 75
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do	72 73 73 74 74 75 75 76
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do Further reading	72 73 73 74 74 75 75 76
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do Further reading  CHAPTER 10 COMMUNITY PLACEMENTS	72 73 73 74 74 75 75 76 76
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do Further reading  CHAPTER 10 COMMUNITY PLACEMENTS During the consultation After the patient has gone Working independently	72 73 73 74 74 75 75 76 76 77
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do Further reading  CHAPTER 10 COMMUNITY PLACEMENTS During the consultation After the patient has gone Working independently Skills you can practise in the community	72 73 73 74 74 75 75 76 76 77 78 78 78 79 80
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do Further reading  CHAPTER 10 COMMUNITY PLACEMENTS During the consultation After the patient has gone Working independently Skills you can practise in the community Not just about general practice	72  73  74  74  75  75  76  76  77  88  78  79  80  80
What clinics do for you Tips for getting along well in clinic  CHAPTER 9 THEATRE  Vital steps for operating theatre success Your first visit to theatre Preparation for your theatre experience Behaviour in an operating theatre Activities you can undertake in theatre What not to do Further reading  CHAPTER 10 COMMUNITY PLACEMENTS During the consultation After the patient has gone Working independently Skills you can practise in the community	72 73 73 74 74 75 75 76 76 77 78 78 78 79 80

CHAPTER 11 HOW TO GET THE MOST FROM MEDICAL SCHOOL	83
Sign-ups	83
Work with all types of professionals	84
Studying abroad	84
External courses	85
Further reading	85
CHAPTER 12 ELECTIVES	87
Resources to help you plan your whole elective	87
How to choose what to do	88
Finances	90
Arranging your elective	92
Ensuring it all goes well	92
Health	95
What to do when you get there	98
Further reading	98
Useful websites	98
CHAPTER 13 WHEN THINGS GO WRONG	99
What to do if you have a problem with your medical team	99
Restriction of religious practices	101
Assessing and managing deteriorating patients and emergencies	103
Coping with patients dying	105
Mistakes	106
Needlestick injury	108
Further scenarios	109
Further reading	109
CHAPTER 14 DIFFICULT INDIVIDUALS	111
Why are individuals 'difficult'?	111
Complications of the label 'difficult'	113
How to manage 'difficult' individuals	114
CHAPTER 15 LIFE AFTER MEDICAL SCHOOL	117
Career planning and advice	117
Postgraduate training	117
Preparation for job applications: your career countdown	120
Graduation	125
Surviving life as a junior doctor	126
Useful resources	132
Education: it never ends	134
What may the future hold?	134
Further reading	135
Useful websites	136

EPILOGUE	137
APPENDIX: RESOURCES	139
Talking with patients and colleagues	139
How to get the most from medical school	139
Electives	139
When things go wrong	140
Life after medical school	141
REFERENCES	143
INDEX	149

### About the author

Elizabeth Cottrell, a Foundation Year 1 doctor, achieved MBChB (honours) while at medical school. She learnt a lot from co-writing her first book, *The Medical Student Career Handbook*, during her final year at medical school. This invaluable experience helped her to develop the *Medical Student Survival Guides* with national medical student involvement from the start. Elizabeth has drawn from her experiences, and those of other medical students, to provide useful information.

### About the contributors

A few individuals deserve a special thank you for the vast amount of time, effort, work and support they have provided during the development of *The Medical Student's Survival Guides*. Each individual provided his or her time and expertise for nothing. The following individuals have been significantly involved in contributing to and critiquing chapters:

Dr Robert ('Bob') Clarke, Associate Dean for London Postgraduate Medical Education and 'a legend' to many medical students nationally. Also, thank you so much for your fantastic revision courses that helped me to become a doctor

Ms Kate Fraser, The University of Manchester Medical School

Dr Basma Hassan, Foundation Year 2 in the West Midlands Deanery

Ms Pauline Law, University of Dundee Medical School

Mr David Little, The University of Manchester Medical School

Mr Vishnu Madhok, University of Dundee Medical School

Dr Christele Rebora, Foundation Year 1 in the London Deanery

Mr Imran Sajid, The University of Manchester Medical School

Ms Laura Stevens, University of Dundee Medical School

Mr Paul White, University of St Andrews Medical School.

The following individuals contributed to the content of the *Survival Guide*: Allie Blair (The University of Liverpool), Rachel Boyce (University of Aberdeen), Nat Bradbrook (The University of Manchester), Zoe Cowan (The University of Leicester), Stephen Domek (University of East Anglia), David Douglas (University of Dundee), Esther Downham (University of Dundee), Kate Geraghty (The University of Leicester), Anna Kieslich (University of Dundee), Elizabeth Li (The University of Manchester), Jemima Miller (University College London), Oliver Shapter (University of Aberdeen), Ross Stewart (University of Dundee), Katie Thorne (The Hull York Medical School) and Alexandra Williams (University of Leeds).

## Acknowledgements

Thank you to Dr Charlene Kennedy, Foundation Year 1, who encouraged me right at the start, when the *Survival Guide* was just a bubble of inspiration floating around my brain!

A thank you must also go to all my peers, colleagues and patients, who have provided me with the material, inspiration and experiences from which the book is written.

Lastly, a 'thank you' must go to my husband, my friend and my rock, Paul. Without his support, help and encouragement I would not be the happy wife, doctor, daughter and sister I am now.



#### **CHAPTER 1**

### Introduction

Medicine is a vocation in which a doctor's knowledge, clinical skills and judgement are put in the service of protecting and restoring human well-being. This purpose is realised through a partnership between patient and doctor, one based on mutual respect, individual responsibility, and appropriate accountability.

In their day-to-day practice, doctors are committed to:

- integrity
- compassion
- altruism
- continuous improvement
- excellence
- working in partnership with members of the wider healthcare team.

These values, which underpin the science and practice of medicine, form the basis for a moral contract between the medical profession and society. Each party has a duty to work to strengthen the system of healthcare on which our collective human dignity depends.<sup>1</sup>

Medical school is fantastic, fun and fulfilling, but it is also tough. It may mean leaving home, fending for yourself for the first time, and it is mentally and physically challenging. The sister book to this, *The Medical Student's Survival Guide 1: the early years*, contains information on:

- medical school: the early days
- the people you will meet
- competitiveness, attitude and behaviour
- **⇒** course structure
- learning and exams
- **⇒** projects
- presentations
- **⇒** money
- ➡ life away from medicine
- medical student socials

1

- when things go wrong in the early years
- how to get the most from the early years.

Similar to *The Medical Student's Survival Guide 1: the early years*, this book contains information on avoiding or managing the hazards of being a medical student, as identified by the medical student welfare surveys performed by the welfare subcommittee of the British Medical Association Medical Students' Committee (BMA MSC).

To succeed at medical school, you will work harder than you ever imagined. Your role and your presence will not always be appreciated, and you will have to mature quicker than many of your non-medical student peers. That said, medical school offers unique, intriguing and humbling experiences and opportunities. Few other degrees offer such insight into the lives of other people; this will make you very worldly wise. Medicine provides the buzz of success, the heartbreak of tragedies and mental and ethical challenges that go hand in hand with caring for, diagnosing, treating and managing patients and their friends and relatives.

The two *Medical Student's Survival Guides* have been developed to provide you with realistic insights into undergraduate training. *The Medical Student Survival Guide 1: the early years* contains information on the 'pre-clinical' years at university. The present *Survival Guide* is targeted at medical students entering the later years of their course, the majority of which will be delivered in a clinical setting. Although it is recognised that this split is not as clearly defined as implied in many medical schools, as some of you will receive clinical training from the first year, information contained in each *Survival Guide* will be signposted in both books to assist you to access the relevant information. The content has been informed by the enthusiasm, experiences, challenges and successes of the author and UK medical students. The *Survival Guides* may not always provide solutions but confirmation that your views, experiences and problems are not unique. Medicine and medical training is constantly changing and evolving. Therefore be proactive in finding the most up-to-date information that is available. The *Survival Guides* will signpost you to sources of current information on many of the topics covered.

The *Survival Guides* will not guarantee you a pass in your exams; however, they will provide you with information that will make the day-to-day experience of being a medical student much easier.

The *Survival Guides* contain quotes, thought bubbles, speech bubbles, arrows and stars:

- Quotes by UK medical students and literature: opinions, thoughts and advice that demonstrate the diversity of experiences that occur throughout medical training.
- Thought bubbles: examples of questions you should be asking yourself.
- ► Speech bubbles: questions commonly asked by tutors and examiners or useful phrases for you to try in the appropriate situations.

- → Arrows: action you could take to further your experience, knowledge or practice.
- Stars: important and key knowledge that undergraduate students should grasp during medical school. Although not exhaustive, they will signpost important concepts and illustrate the level of understanding required of you.

The Appendix contains *Resources*, a directory containing comprehensive contact details for relevant organisations. Contact the organisations themselves for the most up-to-date, detailed and accurate information.

When applying to medical school many potential students declare a 'commitment to life-long learning' to demonstrate their desire to obtain a ticket to the marvellous journey that medicine provides. But what are the different routes, diversions and delays that today's medical students face, and are these causes for concern?

Medical students have to build a commendable CV in an environment where competitiveness and ambition is rife; passing written and clinical finals is simply not enough to join the bottom of the medical career ladder. So what can medical students do to distinguish themselves from a plethora of cloned colleagues? Get work published? Intercalate? Join their Medical School Committee? Evidently, competitiveness is an aspect of any career pathway, although there must surely be a feeling of déjà vu with personal statement writing and UCAS applications in the not-so-distant past for final-year students.

Another concern inherent among students is that of finances. Medical students are unusual as it is normal to spend up to six years completing an undergraduate degree. Demanding clinical timetables and gruelling revision regimens leave little scope for medical students to take on part-time employment. With several banks now offering professional loans of up to £20,000 and interest-free overdrafts, the opportunity for medical students to accumulate dangerously high levels of debt often receives attention from the media.

We must remember that the vocation of medicine is not a one-way ticket, and there are indeed many routes that may be taken before reaching the desired destination. Many doctors will reminisce about their turbulent journey and several places that they otherwise would never have had the opportunity to see while stopping en route. Although what remains evident is that 'commitment' must be a prerequisite before boarding. (Vishnu Madhock, fourth-year medical student, Dundee)

### **FURTHER READING**

MacDonald R. Rhona's rules (on what being a medical student and doctor is all about). *StudentBMJ*. 2004; **12**: 458–9.