

## Student Elective Report

<b>Name</b>	Daniel Jones
<b>Medical School</b>	university of Leeds
<b>Email (optional)</b>	

<b>Country visited</b>	UK
<b>City or town</b>	Leeds
<b>Hospital/unit/clinic</b>	LGI
<b>Dates visited</b>	16/07/2018 - 24/08/2018
<b>Supervising doctor</b>	Clinical Supervisor: Mr James Smith (ST7 Plastic Surgery Registrar)
<b>Contact details of your host:</b>	

<b>Please give an overview of what you saw / did (200 words max)</b>	<p>My time was spent observing and assisting in both elective and acute cases as well as attending clinics and pre-operative assessments. I used this opportunity to discuss management of the different cases and common injuries, as well as learning some basic surgical skills; suturing and hand tying technique for severed blood vessels.</p> <p>The operations varied enormously. I was fortunate to assist in some of the more niche procedures carried out at LGI including isolated limb infusion for a patient with recurrent melanoma around the right ankle. Typically, a single melanoma is excised, and the defect covered with a full thickness graft. Here however a closed vascular circuit was created in the lower right limb using a percutaneous femoral balloon catheter and a pneumatic tourniquet, this allowed delivery of high dose chemotherapy to the affected limb only, thereby sparing major organs. I also assisted in electrochemotherapy for breast cancer treatment, full and split thickness skin grafts, played a minor role in assisting in some poly-trauma cases and observed a number of hand trauma operations including reverse cross finger flaps and fracture fixation with K-wires.</p>
<b>What were the best things about the visit? (120 words max)</b>	<p>The highlight for me were the poly-trauma cases. In one such operation, a patient with a complex injury to his distal forearm while driving abroad, presented with significant necrosis of the distal radius and ulnar, obliteration of the distal radial artery and necrosis of much of the flexor compartment muscles. Prior to the operation a team of orthopaedic, plastics hand and plastics lower limb consultants met to discuss how they would approach the case. This meeting exemplified the 'multi-disciplinary approach' and highlighted how plastic surgery is often about applying surgical techniques to create a solution to a problem rather than following a set surgical procedure.</p>

## Student Elective Report

<b>What problems did you encounter? (120 words max)</b>	The main limiting factor for me was my inexperience which limited the extent to which I could assist. However I was able to use this opportunity to improve basic skills such as suturing. I also observed how surgeons dealt with complications while operating. During resection of axillary lymph nodes for a breast cancer patient, a artery was severed. The consultant remained calm and was able to clamp the vessel, though quickly realised he was unable to tie it off without additional support. A message was quickly sent to ask for assistance and the issue was soon resolved with minimal blood loss – this highlighted the importance of recognising the limits of your ability even as a consultant .
<b>What accommodation was provided?</b>	None
<b>Would you recommend this to someone else? (explain if necessary)</b>	Yes. This elective gave me the opportunity to explore a wide range of sub-specialities within plastic surgery, many of which are not available at other hospitals. All the staff were very friendly.
<b>Are you more likely to choose a career in plastic surgery as a result of this experience?</b>	Yes. This elective confirmed what a enjoyable and varied job plastic surgery can be.