Student Elective Report

Name	SARA CATERINA MARIA O'ROURKE
Medical School	UNIVERSITY OF MANCHESTER
Email (optional)	

Country visited	FRANCE
City or town	PARIS
Hospital/unit/clinic	NECKER HOPITAL ENFANTS MALADES – SERVICE DE CHIRURGIE PLASTIQUE ET MAXILLOFACIALE (Paediatric plastic and maxilla-facial surgery)
Dates visited	19/03/2018 – 18/05/2018
Supervising doctor	PROFESSOR ARNAUD PICARD ASSISTANT PROFESSOR ANNE MORICE
Contact details of your host:	

Please give an overview of what you saw / did (200 words max)	 During my placement, I aimed to: Reflect : More accurately gauge whether Plastic surgery was for me, and whether I was right for the speciality Research : Find a niche to research and learn more about, with a view to potentially write a case report/series or otherwise Create : Design something to give back to the hospital service and the patients, in the form of informative leaflet or poster
	 I am pleased to report that I have achieved the following : Direction : I feel pleased and in many ways relieved that I have come out of the experience more determined than before to pursue a career in Plastics. For me, it satisfies the need to be practical, creative, but also to do work in a field that is continually changing. For Plastics, I feel I can bring hard-work, an inquisitive and imaginative nature and a little punch. Case Series : I have been able to work on a case series on Washio retroauricular flaps in children, used in the reconstruction of nasal defects. Poster : I have completed a poster for the ward on the protocol management of dog bites in France. This follows both a pathway for the patient and for the dog and its owner.

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What were the best things about the visit? (120 words max)	Many of the most positive aspects of my experience relate to the wider practice of medicine and surgery in France. In particular, there is certainly a different environment that exists between doctor and patient. Perhaps somewhat archaic, there is a resounding element of respect for medical staff from patients and the public. It felt nice to be treated this way. Moreover, I was very excited and privileged to be part of a surgical team that works on children that travel not only from France but from a multitude of countries to seek expert surgical help. This exposed me to numerous rare and severe conditions, and, by extension, to some amazing patients and families whose stories and strengths I attribute a lot of the passion for the speciality that I have witnessed and I, too, possess more and more.
What problems did you encounter? (120 words max)	I did not encounter any particular problems during my elective period in France. However, it is critical to highlight the huge importance given to having a decent command of French language. While the vast majority of the medical world have a good level of spoken English, it is the 'French way' to perhaps be a little stubborn and try and more or less only speak French to visitors and tourists alike. The elective itself was also quite intense, with long working hours. While I was not expected to do any on-call or night shifts, the language and the high volumes of new information I was assimilating on a daily basis was exhausting at times. Those looking for less of a baptism of fire introduction to a speciality would not do well here.
What accommodation was provided?	Accommodation was provided by the University Paris V (Descartes). We were given priority as Erasmus students to apply for what was very limited university accommodation in and around Paris. I was allocated a small studio in the 18 th arrondissement. The building itself was very old and dilapidated, but it was much less expensive than having to find private housing in such an expensive city. The journey to the hospital, by metro, would take around 40 minutes one way.
Would you recommend this to someone else? (explain if necessary)	Certainly, there are many aspects to working in France as a doctor – even as a junior – that we would not ordinarily have an opportunity to experience in the UK. First, the service of Maxillo-facial surgery is, in France, a speciality that is normally combined with Plastics and is reserved for doctors. In the UK, it is only those who have a dual training experience of Medicine and Dentistry who have access to this.
	On a similar vein, as junior doctors in France are essentially allocated a

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	speciality straight after medical school (unlike our two compulsory years of Foundation Training), they are exposed to the key skills of their speciality much earlier. This means that those who want to do surgery, in particular, get to assist in theatre a lot more and a lot sooner than in the UK. This part was particularly great – I learnt so many surgical skills and actually got to see whether or not the speciality suited me (and I suited the speciality!) It can be very hard to know before trying things out on the practical level, and for that in particular, I am hugely grateful and relieved.
Are you more likely to choose a career in plastic surgery as a result of this experience?	Definitely. As aforementioned, surgery is such an entity of its own that it can be difficult to fully appreciate the realities of the vocation as a junior doctor or least as a medical student. Now that I have been included in the team, taught surgical skills and had the opportunity to test my manual dexterity, hand-eye coordination and general knowledge of anatomy – I feel much more excited about becoming a plastic surgeon. Furthermore, I feel more confidence going into my Foundation Training rotations in surgery.