

## Report Format for Clinical Student Bursary Holders

Please use the following list of questions to write a report of your elective. Your report should be a maximum of 4 pages of text but please include photos<sup>1</sup> and figures<sup>2</sup> which may make it longer. Please send your report to Evelyn Brealey at [evelyn.brealey@addenbrookes.nhs.uk](mailto:evelyn.brealey@addenbrookes.nhs.uk) or at the above address.

<b>1. Your Name</b>
Quan Yuan
<b>2. Your contact details including e-mail address</b>
Telephone: 07809242068 Email: <a href="mailto:qy206@cam.ac.uk">qy206@cam.ac.uk</a>
<b>3. Location, date and duration of project</b>
Location: Qingdao, People's Republic of China Date: July 28th – August 15 <sup>th</sup> Duration: 3 weeks
<b>4. Relevant background information (health statistics, infrastructure etc.)</b>
<p>I did my elective in Qingdao in mainland China and spent three weeks doing trauma and orthopaedics in Qingdao Municipal Hospital. I think there are few areas in medicine where you have the opportunity to really transform people's lives, for example, by putting them back together after severe trauma, or by giving someone back their independence by relieving their severe pain from an arthritic joint. This is one of the reasons why I am so fascinated by orthopaedics as well as the fact that it is a speciality that offers great clinical diversity. It is an area which is significantly underfunded in China (along with the healthcare system in general) where emergency services are often not fast enough to prevent permanent disability or death in trauma victims and</p>

<sup>1</sup> By including photos you are giving us permission to use them with acknowledgements in our publicity materials  
<sup>2</sup> Please provide full references where possible

where the control of chronic disease is of low quality due to the large population. Moreover, healthcare is expensive and many people cannot afford it. Despite the rapid modernisation of China, it still lags behind the UK and from previous experience, healthcare provisions are one aspect where this is very obvious. This is even more apparent in poorer rural areas where the government does not provide money to subsidise healthcare and the peasants who work the fields have to pay for it all. The situation is extremely dire in these areas where farmers and industrial workers are prone to occupational trauma but are unable to access any medical help.

**5. Describe your elective and include your main impressions and notable experiences.**

I was born in Qingdao, China so it seemed natural to return to my hometown to experience life as a doctor in China. One of my relatives worked in this hospital and so was able to find a place for me in the orthopaedics unit. I was hoping to go to a different, more modern hospital but unfortunately, due to the Olympics, that hospital was closed down to the public. During my time at Qingdao Municipal Hospital, I was exposed to all aspects of orthopaedic surgery including hip, knee, shoulder, elbow, ankle, and hand surgery. Unfortunately, due to the strict restrictions imposed by the government in the run up to and during the Olympics, I was unable to scrub in for theatre but I was allowed to observe several surgeries as well as follow patients in outpatients clinics. The Chinese healthcare system is a lot more disorganised than the British one in that clinics are informal and doctors are often called to see patients when they arrive at the hospital even though there are set times for outpatient clinic. The hospital conditions are pretty dire with no air conditioning in the wards, even though during summer the temperature was over 30°C, and no formal nursing care. The latter meant that each patient must have a relative sitting with them at all times so that if the patient's condition changes, the relative can inform the nursing staff. No food or drink is offered by the hospital so patients must rely on family members to bring them food and drink.

Surgeons in China work fast due to the high load of patients requiring operations. Because they manage to operate on so many patients due to the high population, they have very honed surgical skills. General anaesthetics are rarely used which means that during surgeries such as amputations, the patient can hear all that the doctors are saying. Unfortunately, communication

skills are not taught in medical school in China and doctors give little consideration to how patients feel about their operations. I was rather shocked to see doctors discussing the Olympic celebrations while amputating one patient's leg! Another bad side to medicine in China is the amount of corruption that exists. Patients must give thousands of Yuan to their surgeons prior to their surgeries in order to ensure that the surgeons operate. This 'bonus' is on top of the tens of thousands of Yuan that they must pay for their surgery. Because of this, information such as death rates and infection rates post-surgery are never released and I would doubt if they are even recorded. However, even though surgery in China has all these fall-backs, the surgeons see a vast number of patients and see some of the rarest conditions making them some of the most experienced surgeons in the world.

**6. Describe the project that you undertook whilst on your elective**

No specific projects were undertaken during my elective due to tight restrictions in the run-up to the Olympics. The Chinese government were desperate not to set a bad impression for foreign journalists.

**7. How did or will the local population benefit?**

I hope that I was able to make a difference (however small) in an area of China where healthcare provision, resources, and training are not as sufficient and easily accessible as in the West, and where close family members and friends have access only to these limited resources. However, I do believe that Qingdao is a modernising city in a rapidly developing country and while I was there, I was able to learn from Eastern practice and gain further surgical knowledge. I successfully built links with doctors in Qingdao which is personally very important to me as it is my home town. I do not feel that I was able to make a difference to attitudes to healthcare in a country with such a regimental attitude to healthcare and my opinions on bedside manner were inevitably met with cynicism. However, I hope that I managed to make a difference to the hospital stays of the patients that I did talk to.

**8. What new skills, knowledge and understanding do you have? How will you integrate them into your learning and practice?**

I was able to see a greater variety of patients than I had seen in the UK, many

of whom whose conditions had deteriorated to a more serious degree than would be commonly seen in the UK. Unfortunately due to the tight restrictions I was unable to participate in examining patients or clinical skills. However, I feel that the greater number of surgical cases I have seen has helped me improve academically. Moreover, I now appreciate even more the importance of good patient communication.

**9. How might Cambridge University Hospitals and the wider NHS benefit from your experience?**

I feel that my experience has emphasised the importance of good bedside manner and the impact that it has on patient care. I feel that China is a great country to see a variety of cases and that future students and doctors would benefit greatly from this exposure. I believe that the surgical expertise in China is extremely high due to the number of patients and that training in the UK would benefit greatly from exposure to the large number of patients.

**10. Please indicate if you are willing to be involved in Addenbrooke's Abroad publicity and information events. Please detail any suggestions you have for sharing learning gained from experiences abroad within the Clinical School and CUHFT.**

I would be willing to be involved in Addenbrooke's Abroad events should my experience be helpful to others.

**11. Sign and date your report.**

Quan Yuan 10/12/2008