

Renal Elective Bursary Report- Nepean Hospital, NSW, Australia

Michael Adair

I spent 4 weeks of my renal elective in Nepean Hospital, Penrith in New South Wales, Australia. This is a 600 bed teaching hospital in Kingswood which is a western suburb and 1 hour train journey from central Sydney. It serves the Blue Mountains local health district and aids a mixture of patients from rural and urban areas. This hospital had an in-centre haemodialysis unit and provided chronic care for renal transplant patients.

The renal team consisted of consultants, advance trainee registrars, basic physician registrars and junior doctors. There were usually around 10-20 in-patients on the ward. My typical day on renal was similar to haematology as it consisted of ward rounds reviewing all in-patients beginning at 8am followed by either consults to other wards in the hospital, ward jobs or clinic. In the afternoon I joined the consultant led ward round. On Friday afternoons there was renal departmental teaching which was case-based.

I performed various tasks that would be related to final year medical student level such as venepuncture, IV cannulation and scribing on ward rounds. On the ward I took clinical histories from patients and examined them to formulate a differential diagnosis and management plan. I had the opportunity to observe Vascath insertion for dialysis and renal biopsies, something which I had not witnessed on my renal placement in university. I was also able to appreciate the multidisciplinary approach to these patients from observing allied health professionals such as physiotherapists and occupational health professionals.

This was a great chance to be involved in the assessment and management of patients with various renal conditions. These conditions included glomerulonephritis, pyelonephritis and acute interstitial nephritis. I also saw many patients with end stage renal failure which was usually secondary to hypertension and diabetes. However, I saw cases where this was due to less common causes such as pre-eclampsia and haemolytic uraemic syndrome. I was involved in cases of fluid and electrolyte disorders. One particular case which I will remember was a 50 year old female patient with hyponatraemia and hypokalaemia who it was eventually discovered had potomania, which is a syndrome of excessive alcohol consumption that I was unaware of before.

I was able to speak to patients on both peritoneal and haemodialysis and gain a better understanding of the principles of these treatments, especially from spending time within the dialysis unit. I also developed an awareness of the problems associated with these through the care of patients on the ward. This included peritonitis due to peritoneal dialysis and infection associated with haemodialysis.

I found that healthcare delivery between Australia and the UK is very similar and that health challenges such as high rates of diabetes are common to both countries. However, one major difference was that more patients had private health insurance than in the UK and that private

hospitals are actively encouraged and promoted through advertising, even within the public hospital itself. This meant that patients had a lot more autonomy over their healthcare provision. Most presentations, investigations and management options were very similar to that at home. One difficulty was that some acronyms and abbreviations were different to the ones I am used to in the UK, such as 'U+Es' vs 'EUCs' for urea and electrolytes in the blood. However, I became used to these differences quickly once they were explained.

Overall, from my elective, I feel that I gained more knowledge on the basic sciences, presentation, diagnosis and management of renal disease from a wide variety of patients. I was able to further develop clinical skills, history taking and examination technique which will be useful taking forward into future practice. I found that throughout my elective I became more confident within the team and was able to contribute in my role as an elective student, feeling involved in the team along the way. I found that I was able to cope in a new environment on the other side of the globe and was able to make and observe great professional relationships.

I really enjoyed my time spent on elective in Australia and have gained a further insight into renal medicine as a specialty. I would like to take this opportunity to thank the Renal Association for awarding me this elective bursary.