

Elective WAST 2019 Report: 10 Lessons in Pre-Hospital Care

I was absolutely delighted to win the Faculty of Pre-Hospital Care elective. The elective, run in conjunction with the Welsh Ambulance Service, offered opportunities across the UK to give an insight into the sub-speciality of Pre-Hospital Emergency Medicine. Having had very little previous experience in this area of medicine, I couldn't quite believe it when they told me I had won. During this report I've highlighted 10 of the most important lessons that I've learned in the last 6 weeks.

WELSH AMBULANCE HEADQUARTERS

My elective commenced within the Welsh Ambulance Headquarters listening in to 999 calls, with allocator services, triage nurses and on the Welsh Flying Medics desk where clinical specialists listen to calls across Wales to allocate helicopter resources to the 0.125% of calls that need their services.

Lesson 1: The Grief Reaction

Ambulance Head Quarters 999 call. 90-year-old male found deceased.

Patient: 'Hello. Sorry I don't mean to bother you but I think my husband has died...I think it happened around 3am this morning but I didn't want to take up your time at that time of day...No, no there's no point commencing CPR love, he's gone.'

Me (to call handler): 'Is this a common reaction?'

Call Handler: 'More common than you'd think.'

THE TRAUMA COURSE

Having spent time in headquarters, I proceeded on to Worcestershire. I took part in a 3-day trauma course which applied my skills from emergency medicine to the pre-hospital setting. This was an invaluable experience as it gave me the confidence to apply what I studied in medical school in the real world. We learnt the basis of the {C}ABCDE approach as well as applying the approach in trauma scenarios such as road traffic accidents, stabbings and traumatic cardiac arrest. These were skills that I not only learned but applied over the course of the elective. It also gave me a chance to appreciate the diversity within pre-hospital care. I was on the course with Fire Service, Paramedics, Military Medics, Armed Police & Doctors, who all brought different skills and experience to the table.

Lesson 2: The Importance of Self Confidence

Trauma Moulage: Stabbing Debrief

Trainer: 'So you thought it was best for your team to proceed with the examination... in the dark?'

Me: 'No, I knew we needed to move the casualty before we could assess them.'

Trainer: 'So why didn't you say anything?'

Me: 'I was scared I was wrong.'

THE WELSH AMBULANCE SERVICE TRUST

The next couple of weeks consisted of shift work with various ambulance services and vehicles across South Wales from the hustle and bustle of the Capital City at Blackweir to the rural nature of call outs in Pembrokeshire. I attended a huge variety of call outs from drunk and disorderly, trips and falls to fractured femurs, myocardial infarction, pre-eclampsia, road traffic accidents and community deaths that needed medical certification. I learned the skill of cannulating under pressure, how it's crucial to remain calm, no matter how much someone wants to make you anxious, and to never turn down an opportunity for a cup of tea or a toilet stop.

Lesson 3: The Importance of Patient Perspective

Shift with RRV in Blackweir ambulance station. Call out to a 76-year-old female with central crushing chest pain.

Paramedic: 'I'm afraid the ECG shows that you are having a heart attack so we're going to have to take you to hospital.'

Patient: 'Oh gosh. But I can't go to hospital. Fred needs me.'

Paramedic: 'Who's Fred?'

Patient: 'The dog. I can't go to hospital without Fred.'

FACULTY OF PRE-HOSPITAL CARE

During the elective I spent a week in Edinburgh at the Faculty of Pre-Hospital Care and assisted with running their DIMC and FIMC examinations. The week spent at the Faculty gave me the opportunity to see how much work goes into post graduate examinations as well as an appreciation of the calibre of candidates that sit them.

Lesson 4: The Importance of Asking Questions

During the DIMC Examinations we were placed as patients with an examiner.

Me: 'Sorry to keep asking questions.'

Examiner: 'No, never say sorry for asking questions. It's when people stop asking questions that I start getting scared.'

EMERTS, MEDSERVE & PHYSICIAN RESPONSE UNIT

During the elective I also got to spend time with the Welsh Flying Medics, attending a clinical governance day and took part in major incident training. I got the opportunity to do shifts with various members of staff in their other roles such as Medserve, a group of immediate care practitioners that provide enhanced care 24/7 across South Wales and the Physician Response Unit which is a consultant led team from the Gwent Newport, bringing A&E into the community as a way of targeting increasing admission times by discharging on scene.

Lesson 5: It's OK to be Healthy

On a Medserve nightshift a call out at 2am to a Car vs Tree 60 mph involving 5 teenagers.

Medserve: 'And on examining your patient what did you find?'

Me: 'Not much, what did I miss?'

Medserve: 'Did it occur to you that your patient may not have anything wrong with them?'

POLICE, FIRE & MILITARY

Part of the elective also incorporated spending time with the Police, Fire Service & the Military. Following a horrific accident at a local tank range, the Military, in coordination with Paramedics and The Welsh Flying Doctors, conducted a day at Castlemartin Tank Range where we had the opportunity to see the tanks in action and demonstrate emergency evacuation procedures. We also got to practise skills such as needle and finger thorocostomy and emergency cricothyroidotomy. During the elective I also spent time with the Police Service, helping with D13 examinations and gave feedback to the Fire Services new trauma course. All of these experiences gave me a different perspective of pre-hospital care and how, while we all have a common aim, we come from very different backgrounds.

Lesson 6: The Benefit of Hindsight

On observing the tank range at Castlemartin Pembrokeshire.

Military: 'We'd advise you wear these ear plugs at all times.'

Me: Forgets to wear earplugs

Tank Explodes

Me: 'Now I understand why you gave us ear plugs.'

OPERATION DARWEN, HART & MEC

One of the highlights of my elective was visiting various specialist services throughout Wales. I visited Brecon where a joint response between the Police and Paramedics called 'Operational Darwen' targets motorcycle accidents across the region. I also experienced working with the government funded Hazardous Area Response Team (HART) where I learnt to intubate, took part in confined spaces training and attended a range of different jobs from high speed motor accidents, to heroin overdoses in conjunction with the police. Towards the end of the elective I spent a week in North Wales with the Mon Enhanced Care Team (MEC), providing care at home as an alternative to hospital admission.

Lesson 8: Never Underestimate the power of Observation

On shift with HART attended a 24-year-old male heroin overdose.

Me: 'Temperature of patient is 24 degrees.'

Paramedic: 'No way, try the other ear.'

Me: 'Temperature is still 24 degrees.'

Paramedic: 'Try this machine.'

Me: 'Temperature is still 24 degrees.'

Paramedic: 'Well, he does look a bit chilly.'

Lesson 9: The Definition of Love

Whilst observing a MEC team discussion with a Carer and her husband who had a terminal diagnosis and was being managed in the community

Doctor: 'I've suggested that your husband goes into respite care while you recover from pneumonia.'

Carer: 'Doctor, whilst I appreciate your advice, I'd rather die than be separated from him. We haven't spent a night apart in 60 years of marriage and I don't plan on changing that now.'

Lesson 10: Trust your Gut

During Operation Darwen, a joint response between the police and paramedics in Brecon targeting motor cycle accidents, we were first on scene to 4 cyclists that had fallen off their bikes.

Me: 'On examination palpation revealed posterior chest crepitus over multiple ribs on the left hand side, auscultation revealed diminished air sounds over the left upper zone. Suspected flail chest and pneumothorax.'

Paramedic: 'Really???'

EMRTS: 'On arrival at hospital, patient was diagnosed with posterior flail chest and left sided pneumothorax, condition is stable.'

ADVICE FOR FUTURE CANDIDATES

When I started medical school one of the driving forces behind wanting to study medicine was to be useful. Having proceeded through 4 years of medical school I was disheartened at the practical application of my knowledge. This elective has given me the confidence to apply what I've learned to the real world. I now have a framework for tackling whatever life can throw at me. Yet one of the biggest lessons I have learned is that it doesn't matter how much you know, if you can't communicate that to your team and stay calm then you may as well know nothing.

I can't recommend this elective experience enough. Over the last 6 weeks I have learnt a lot about Pre-Hospital Care, however, one of the striking things is how much Pre-Hospital Care has taught me about myself. I'd like to whole heartedly thank the doctors, paramedics, nurses, police, military and fire service that have welcomed me with open arms, taught me skills that I'll apply throughout my career and taught me lessons about myself that I'll never forget.

If you are a candidate that was born knowing you wanted to specialise in Pre-Hospital Care, this elective will provide you with new opportunities to see the diversity of the sub-speciality. Or if, like me, you stumbled across this elective experience and didn't think you stood a chance of winning, let the Faculty make that decision. And finally, good luck!