The LAYMAN'S DOCTOR

CONQUER INTERNSHIP

The Layman's Doctor's guide to internship

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Foreword

When I began internship I never imagined that at the end of it I would have written a guide, that did not focus on the academics of internship, but the various nuances. The idea for this was not my own, a new intern from the class of 2020 sent me a message on twitter which, ended in her saying she would read a guide if I wrote one. I really hope she's reading this now and tells me what she thinks. I chronicled my own internship experience on my blog and to a lesser extent on my various social media pages, I learnt a lot during these 12 months. Many of the lessons shared with are lessons I learnt the hard way and some were passed down to me.

This guide would not have been possible without the advice shared with me by other interns and more senior physicians. I am grateful that many of them openly shared both their experiences and biggest lessons. In fact, check out a blog from a fellow doctor for even more about the internship experience at: www.wellreadrobin.com/tag/internship/.

Medicine has always been an apprenticeship, this means at some point we will all be mentors of some sort. It is our duty to help those who come after us to have better experiences than our own. While as doctors we must play the advocates for our patients, we must also be advocates for ourselves and our kind.

May your journey as a doctor be fruitful and fulfilling.

Enjoy.

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Part one

The Role of Internship

Internship is a 12 month period, usually after the completion of final examinations. In order to practice as a fully licensed doctor in Jamaica, this internship period must be completed and passed. Internship is spent in one of the several approved hospitals. These hospitals are usually type A or B and offer at least the four specialities that interns must rotate through.

During these 12 months, interns spend 3 months each on four different rotations, namely: General Surgery, Internal Medicine, Obstetrics and Gynaecology and Paediatrics, they will be practicing at all times under the supervision of senior physicians. These three months are spent managing patients among other tasks, and is a practical way for knowledge garnered during medical school to be put to use.

Internship is all about learning and cementing skills. This is the only time where interns will be exposed to the 'core' specialities of medicine. As such, as much knowledge and skills should be learnt during this time. I see internship as an extension of medical school, interns are assessed and graded. Yes, the possibility of failure exists, but is usually unlikely. At pledge ceremony and orientations, information is given about the various forms that need to be filled out. The most important two are the assessments (filled out in triplicates) and the pre registration certificate as these require your consultant to fill them out +/- sign them.

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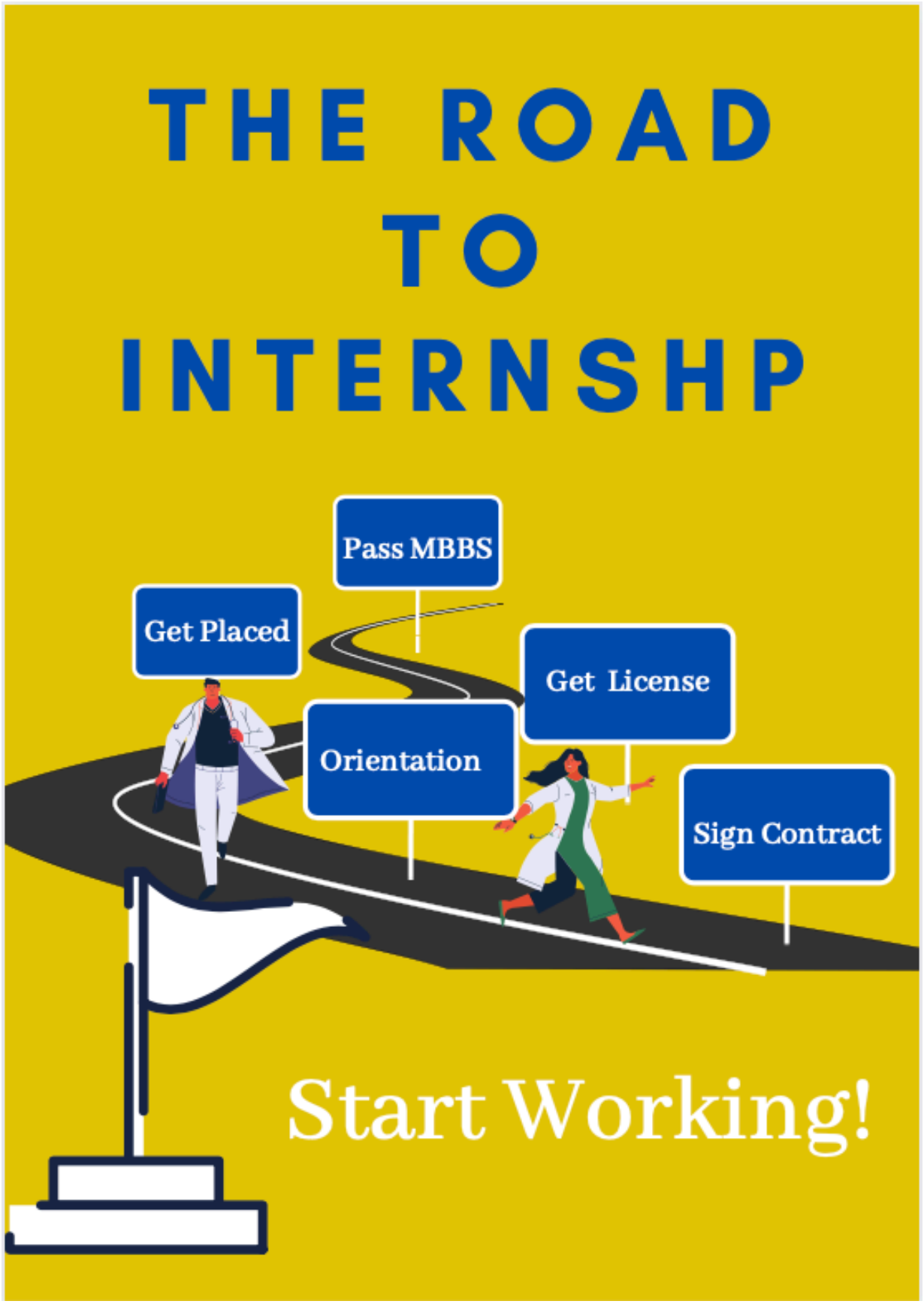

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After you pass MBBS, the Ministry of Health and Wellness will inform you of your placements. After you have been placed. You register for your provisional license at the Medical Council of Jamaica. This registration comes at a cost, you will need your placement certificate and your letter to show you have passed MBBS. You also need two references who are medical doctors.

Once you have all the above its time for orientations. Each region has their own orientation. At these orientations you find out information about your region, salary, leaves and so on. You may also be asked to submit your documents here or at your hospital orientation. Various regions need different things and you will be informed accordingly. Ensure that you have your TRN, NIS and an account you want your pay to go to.

On the first day of work, you should sign both your contract and assumption letters which indicate legally that you have begun internship. Then the fun part comes- you start working!

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The Role of an Intern

During the first draft of this I had that there was no written guide to tell you what your role as an intern is- but I am wrong there is. I vaguely remember it and don't recall it having much of the things I did as an intern- this sentiment was also echoed by my peers. Since, there's still some confusion on what interns actually do, from my own experience and those of other interns I have come up with a very general list.

Sometimes, interns are used to close the gaps in public hospitals, so you will find yourself performing tasks that are clearly mandated for others to do. While at times it might be necessary- I encourage interns to respectfully hold all workers accountable and not to allow yourselves to be used. Since other workers roles are usually more clearly defined, it's easier to know what *isn't* your job.

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On the Wards:

- SOAP patients
- Ensure all medications are up to date on the treatment charts and are given
    - You do not give medications routinely[1]
    - Document medications given and the number of doses for antibiotics and drugs such as prednisone
- Review vitals over last 24 hours and look for any abnormalities
- Collect, document and review lab results
- Direct the ward rounds[2]
- Complete the TODOs after ward rounds are completed

[1] Some medications you will have to give. I won't bother to name them here as it varies from hospital to hospital and even rotation to rotation. Also, sometimes you may choose to give a missed dose of medication even though it ought to be the nurses once you make them aware of the missed dose. It all depends on the situation. I often times simply give the missed medication especially if it was missed because of a lack of an IV access.

[2] Yes! You are in charge of the ward rounds. You know all the patients and can give concise updates that allow your seniors to make decisions. Since interns see patients and their results first it's now your role to put all the information together and present abnormalities and updates.

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On Emergency Duty

The roles on emergency duty are completely dependent on the rotation and the hospitals. In many rotations you will be expected to go to Accident and Emergency[3] to see patients.

- Manage the ward and any emergencies
    - Resuscitations
    - Re-siting IV accesses
    - Reviewing patients[4]
- Assist in admitting new patients and carrying out todos

[3] Technically this is the role of the senior, however, it is one of the ways you learn how to manage patients. It varies hospital to hospital and rotation to rotation. I say, don't fuss too much about going to A&E just ensure that you're actually learning and your senior reviews and corrects you.

[4] If the nurse calls you with a new complaint from a patient you are to review them. If a patient was handed over as a review it is usually your seniors job… but sometimes they'll 'ask' you to do it.

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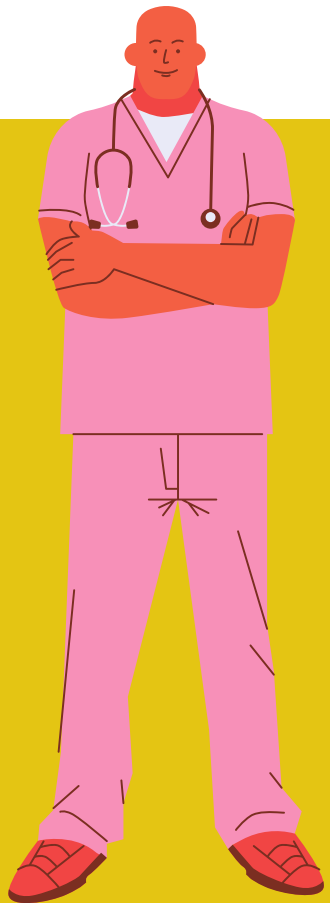
Part two



Conquering Internship

In this part of the document, I will be sharing tips and tricks on how to make the internship experience an easier one. Not only do I want internship to be easier for you, but I also want it to be a fulfilling experience. You should come out of internship a confident in your new found knowledge and skill.

Before Starting a Rotation

- Create your personal objectives for the rotation
  - My objectives for each rotation were different. They often were aimed at strengthening my weaknesses in the area and garnering useful practical skills
- Avoid having preconceived notions about a rotations and the workers, it is best to form your own assessment
- Come prepared to do duty on the first day of a rotation
- Come prepared with the instruments you'll need eg. Tape measure on Obstetrics and Gynaecology

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Work Attire

Dress however you feel once it hits these major points:

- Comfortable
    - Wear shoes you can walk in
    - Wear pants/skirts that are easy to bend and move in
    - Don’t wear clothes you’ll cry over if they get ruined
    - Wear comfortable undergarments
- Create a uniform
    - Take the hassle out of getting dressed by either preparing the night before and simply rotating the same ‘styles’ or ‘outfits’
- Avoid dressing provocatively or overly formal
- Avoid tops with sleeves that might contaminate procedures or get in the way of a task

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Forging Relationships

- Try to learn the names of your coworkers
    - This helps with both rapport and documentation
- Be respectful to everyone
- Build rapport with your seniors and learn their nuances quickly
    - Don't force it if they don't want to
    - Stick to the seniors who will teach you
    - This goes for consultants and senior registrars too!
- Do not allow yourself to be bullied
    - Especially if you're being told to do a task that is not your job[5]
    - Don't be afraid to report and speak up about ill-treatment or refusal to perform an assigned task.
- Form relationships with staff (you don't have to be friends)
    - Sometimes when you're in a pinch, knowing the lab technician or porter can really help you out
- Learn about each department as much as you can
    - This helps a lot with navigating the system. Interns do a lot of the 'scut' work which means you have to learn the system quickly. Speak to the pharmacists, the lab technicians, physiotherapists and so on. This has helped me a lot during my own internship.
- Try to avoid intimate relationships with work colleagues, especially seniors.
- Remember, you catch more flies with honey than with vinegar.

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[5] Again, this is dependent on the situation. Unless it is an emergent or urgent situation, let the person assigned to it do it.

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When Seeing Patients

- Don’t forget to ask for identifying information
- Be courteous
- Allow patients to talk- but also know when to reign the conversation back in
- Do not assume you already know whats wrong with the patient
    - Especially at A&E because the officer has already made an assessment, do not assume that that is what the patients diagnosis is or that its the only diagnosis
- Avoid taking short cuts
- Prioritise your patients by seeing the illest patients first
- Never undertake critical management decisions without knowledge and permission of a senior

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When Documenting[6]

- Write legibly[7]
    - This is difficult for many of us, however make the extra effort when writing prescriptions, lab forms or lists for others to read.
    - Your assessment and plan should be clearly documented as well
- Always write the date and time
- Ensure each page is properly headed up
- Document who called you or who told you something along with date and time
- If you have a conversation with a patient or their relative- document it.
- Always inform your senior and document same
    - Please remember you're practicing under supervision at all times
- Keep your dockets neat and tidy
    - I like to have the notes at the front and all results at the back.
- Do not use your pen to punch holes in the dockets
- Avoid stapling dockets as much as possible

[6] I wrote a LinkedIn article: https://www.linkedin.com/pulse/how-properly-document-medicine-samantha-johnson/

[7] This was never my strong area especially as it got later in the day

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When SOAPing Patients[8]

- Write the problem list and the day of admission at the top
- Document which medications were or were not given
- Document the 24 hour vitals from the lowest to the highest
- In your assessment, make comments that either support or update the patients progress
    - Eg. After seeing a patient with pneumonia in your assessment you would write 'Bronchial Pneumonia on day 4 of antibiotics, improving"

[8] I wrote a LinkedIn article: https://www.linkedin.com/pulse/mastering-soaps-samantha-johnson/

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When Directing Ward Rounds

- Prepare your trolly with the dockets, extra papers and the charts
- Give pertinent details and updates
    - New complaints by the patient
    - Abnormalities in laboratory results
    - Improvements in indices
    - Important events
        - Such as the patient getting a transfusion or a procedure done
    - Important negatives/ changes eg. The patient no longer has tenderness in the RUQ
- Know your patients well so you can answer questions quickly and correctly[9]
- Don't be afraid to speak up, give your opinion or suggest a plan.
    - You have a lot to add to the management of a patient, many times interns give ideas or observations that make a dramatic impact

[9] This can take some time, it did for me at least. Especially if they're a lot of patients it can be hard to know everyone through and through all the time

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Performing Tasks and Other Roles

- Be organised and write things down. Avoid relying on memory
- Don't be afraid to call for help
- Don't shy away from procedures
    - Even if you've never done it, volunteer to do it. See one do one! Experience makes you quicker.
- Measure twice, cut once. Basically, prepare before you do something to avoid having to redo it or realising you need apparatus you don't have.
- Do it well the first time
- You can learn a lot from nurses and other supportive staff. In the first few weeks, nurses who have worked for years the speciality can really help you out with management in a pinch.
- Ask to do the hard, next level stuff! You will pick up so many skills that will last you a lifetime.[10]

[10] Your confidence will skyrocket, learn the difficult practical skills on all your rotations and it will level you up as a doctor

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When Handing Over[11]

- Include the patients name, bed number, pertinent points in the management and what is required
- Handover verbally, a text message is not considered a handover but it can supplement a verbal one
- Have the person you are handing over to acknowledge the handover
- Don't handover things you could have done in the day- be kind. You never know how the duty will go
- Always hand over critically ill patients so that the person on call is aware of them
- Don't accept bad handovers

[11] I wrote an article: https://www.thelaymansdoctor.com/blog/handover

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While on Emergency Duty

- Prepare for your duties
  - Bring food
  - Pack your bags with toiletries, a change of clothes and scrubs
  - Always have extra money
  - Bring sanitary napkins
- Sleep as much as you can
- Eat
- Shower and change the next day, even if it means you'll be a little late
- PACE yourself.
  - Take breaks- it is okay to tell your senior to hold on, *believe it or not!*
- When called for an 'emergency' on the ward ask for more information
  - What is the name of the patient, the diagnosis and the reason for the call
    - This helps you know if you need to head to the ward immediately +/- with a senior
    - It also helps you prioritise. Sometimes you will have to drop everything you're doing or it can wait until you have completed your other tasks
  - Ask what management has already been instituted
    - eg. If you are called because a patient is in pain, ask if the patient is written up for pain medication and if it has already been given
  - Ask 'why' the patient needs the intravenous access

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    - This helps you determine if you need to resite immediately or it can wait.

      eg. If it is for medications due at 6 am you can go closer to six based on your preference

- Please, do not drive tired.

Working With the Other Interns

- Work together efficiently
    - Divide the work such that everyone gets a chance to sleep or that there is balance in work load
    - If your ward is light, go help out on the other wards
    - If you have a light duty, sometimes you can help another intern who might be struggling[12]
        - Don't just help interns on your rotation but also those on other rotations too
- Speak to each other respectfully
- Keep personal hiccups out of the professional space
- Be kind to one another

[12] When I was on medicine my duty siblings on surgery were always super over worked. Sometimes I would help them with IVAs or some of their todos such as taking bloods.

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Practical Advice

- Hold veins of the elderly because they often look big and juicy but they love to dance
- If you're going for the radial artery always do the Allen's test and go at an angle of about 10 degrees
- Always flush your IV access after siting and BEFORE resiting them- a lot of times the access is simply blocked by a clot.
- You will make mistakes, might as well learn from them

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Other Miscellaneous Tips:

- Be punctual.
- Now is the time to take financial planning seriously, speak with someone with good financial skills who you trust about how to start
- Don't let financial advisors bully you into buying anything
- Sort out your pre registration certificate and assessments from early
- Apply for SHO period as early as you can
- Check your pay slips![13]

[13]The system relies heavily on humans and humans make mistakes. Keep track of your duties and how much pay you should be getting every month

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Part three

Taking Care of You

Internship can be a difficult 12 months, it also can feel like a thankless job. Often, you may feel overworked, overwhelmed and under appreciated. It is key to remember that you are human and also an adult, that your coworkers are your colleagues and you must set clear boundaries.

Please pay keen attention to your mental health during this time, as it is easy to become anxious or depressed. Surround yourself with a loving support system and give yourself a break.

Here are just a few tips to help you get through this:

- Take all your free days and all your sick days
- A mental health day counts as a sick day
- The work will go on without you, don't let the work load that will be left prevent you from taking a day if you need it
- Pursue other hobbies
- Spend time with your friends and family
- Do not abuse drugs and alcohol to help alleviate the stress
- Get as much sleep as you possibly can
- Have an outlet
- Don't work 24/7
- Explore your country and take mini vacations
- Enjoy your money, you earned it!

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ABOUT THE AUTHOR

Dr. Samantha C. Johnson is a graduate of the University of the West Indies, Mona MBBS class of 2019. She started her blog 'The Layman's Doctor' in 2018 after realising there was a gap between doctors and patients. Initially, she only focused on patients but soon found herself writing for health care workers and chronicling her own experience as a doctor. Soon, 'The Layman's Doctor' extended to speaking about soft skills and other aspects of the profession that aren't taught but are often picked up as you go along. Dr. Johnson, believes wholeheartedly in living by example and learning from your mistakes. This short guide is a culmination of her very own lessons and those of her peers.

Closing Remarks

Thank you for taking the time to read this very quick and general guide. You will learn much more than I can offer by being on the job, learning from your peers and making your own mistakes. Surround yourself with persons who have your best interest at heart.

Medicine is an apprenticeship, learn from others and develop your own style of practicing by learning from both the positive and negative behaviours of others.

You will never forget these twelve months.

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