

# Elective Grant Report

**Marlee Paterson**

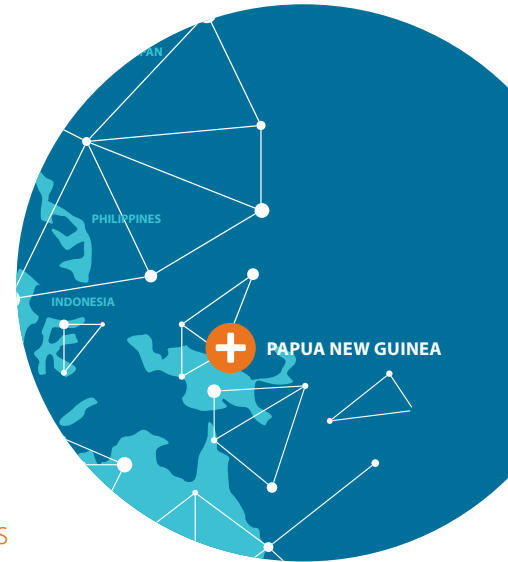
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**Port Moresby General Hospital**

Port Moresby, Papua New Guinea



Presenting the stethoscopes and blood pressure machines to the Internal Medicine Department



Hello my name is Marlee, and I did my elective at Port Moresby General Hospital (POMGH) in Papua New Guinea (PNG). I really enjoyed my time at POMGH and learnt a lot about infectious diseases. Initially I was anxious about my elective placement in Port Moresby, unsure of what to expect at the hospital and what life in PNG would be like for the next four weeks. On my first day I was nervous to start and hoping to fit in at POMGH, I was warmly welcomed by Dr Maino, and given a tour of the hospital and was introduced to the staff on the Internal Medicine ward and Cardiology Clinic where I would be spending most of my time. I felt a part of the team from the very beginning and felt a special connection working along side other Indigenous peoples working in health care.

Each day at POMGH began with a hand over meeting and I was assigned to take notes of any patients that were admitted to the ward I was placed on. After hand over finished, ward rounds would commence and I would help the junior doctor write notes. I was also responsible for noting down which patients were getting discharged and helping write discharge summaries at the end of the ward rounds. Each ward round was different as the registrar would take time to teach the junior doctor and myself about different diseases that were present on the ward and how they are managed in PNG.

It was very eye opening to see several cases of Tuberculosis (TB) every day in both young and old people. TB is eradicated in Australia and I had never met anyone with TB until my placement at POMGH. It was interesting to learn that TB medication is free and patients are commenced on anti-TB agents as soon as they are clinically assessed in the Emergency Department and transferred to the ward. During my elective I made sure to always wear the correct N95 respirator mask to protect myself. I noticed that not all the staff including nurses who work in direct contact with some of the TB patients did not have the right mask or any masks at all. This made me really consider how under resourced the hospital was, as many of the staff were unable to source correct personal protective equipment. This was really sobering as I realised how fortunate we are to live in Australia and how easy it is to access basic medical supplies. Another situation I noticed was that patients with TB are not kept in isolation from other patients, as the hospital does not have the space or facilities. The other common conditions I saw during ward rounds were Cryptococcus Meningitis, which is an AIDS defining illness. Patients with HIV and Cryptococcus Meningitis were treated symptomatically and shortly discharged, as the hospital did not have palliative facilities.

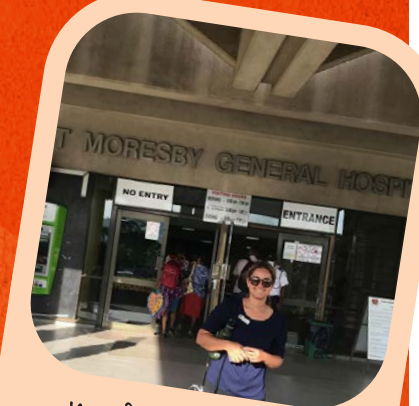
During my time at POMGH I did a few emergency department shifts. This was an amazing experience as I got to observe many procedures including lumbar punctures, chest drain insertion for the drainage of pneumothorax, peritoneal dialysis and suturing. The emergency department was often very busy with the waiting room packed full of people waiting several hours to be seen, with many leaving without being seen for their serious conditions.

*As the ED also lacked basic supplies of syringes, iodine and chest drain tubes, there was a lot of improvisation on the job with many of the doctors using whatever equipment they had access to, to provide the best possible care necessary this was very confronting as improvising was a very common practice amongst doctors to keep up with the patient load.*





Dr Maino and myself



My first day at Port Moresby General Hospital



Buying local produce at the Boroko Vegetable Market

I also spent time in the cardiology clinic. The clinic is an outpatient facility where people attend when they need to see a doctor about their cardiovascular health. Often patients would come in to get their blood pressure managed. This is because there isn't a Medicare system in place for general practitioners to bulk bill local Papua Guineans from low socioeconomic backgrounds. This meant that the cardiologists were also treating community conditions that would normally be managed by a GP in a first world country. This also contributed to increasing wait times for patients to see the cardiologist.

*After consulting with a number of the cardiologist and registrars who work on the wards it became clear that there was a great need for stethoscopes and blood pressure machines. I organised with a local medical supplies company (MEDDENT) the purchase of 9 stethoscopes and 8 blood pressure machines. MEDDENT also generously donated a number of tourniquets to give to the hospital. These resources were presented at the internal medicine department morning hand over meeting and many registrars and young doctors were able to take a stethoscope to have and use to help with their management of patients.*

I really enjoyed my time in Port Moresby, I regularly visited the Boroko vegetable market to purchase fresh fruit and vegetables and Koki fish market to purchase some local fresh fish. The people have such a kind nature. I had the privilege of going to a nearby island with some locals on their fishing boat and experiencing their version of a barbecue on the beach. I was met with such warmth and hospitality. At times I even felt like royalty, as the locals would all wave at me and I would be constantly waving back and saying hello. There is a real sense of community among the local people and I was touched to see thriving Indigenous communities working together with ex-patriots and immigrants as well. I would highly recommend those who have the opportunity to go and experience PNG for its richness of culture. I look forward to going back when I am a fully qualified Doctor.

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