



Setting Up Your International Elective

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In 2002, Academic Emergency Medicine published an article (Dey, CC et al. Acad Emerg Med 2002; 9:679-683) that looked at the influence of international emergency medicine (IEM) opportunities on residency program selection. The authors polled all the EM interns that year and asked a variety of questions regarding international medicine. A whopping 91% of interns who responded stated an interest in IEM or international health, while 82% stated they would like to see more IEM exposure in their respective residency programs. Moreover, 62% stated that they ranked programs with IEM opportunities higher than programs that did not have IEM opportunities.

International electives are always hot topics among emergency medicine interviewees along the interview trail so these numbers are not a surprise. Although most prospective residents want the opportunity to do an international elective during their residency; as residents enter their final year of their emergency residency, the number of residents that actually do an international elective is far below 91%.

So what happens to all this excitement and hoopla over doing an international elective? Granted, as residents progress through their residency, it is not an uncommon phenomenon for idealism to erode and harden into realism. It can also be expected that marriage, children and financial barriers prevent many from fulfilling their international medicine aspirations. Many residents may not have access to the right resources. In addition, some residents might simply run out of time to set up a foreign rotation.

Here are a few suggestions on arranging an international emergency medicine elective:

1. Start early!

Of course this can be said for anything we decide to tackle, but it applies with added weight when setting up an international elective. Many of us have taken month long trips before, and we know how much planning it takes beforehand. Moreover, there are always unforeseen obstacles and requirements that pop up. Vaccine and visa requirements may take months to fulfill. There are also funding opportunities in the form of grants, scholarships or even departmental support that take time to apply for.

Here are some links for scholarship and funding opportunities:

<http://info.med.yale.edu/ischolar/description.html>
www.globalhealth.arizona.edu/Funding_Links.htm

2. Know what you want.

It is important to know what kind of experience you are looking for. You should know early on where geographically you might want to go, what language you may want to learn/improve/master and what type of setting you would want (urban vs. rural, developed vs. third world, stable vs. war torn). However, it is important to be flexible, because while there are many opportunities out there, it is never exactly as one imagines. Also, make sure you have a clear educational plan as most (if not all) residency directors will be hesitant to approve what appears to be a month long vacation.

3. Explore your resources.

Some residency programs make it easy. They have an established international medicine presence, either with an IM fellowship program or with international rotations in place where they send residents each year. Other programs may have very little international medicine presence. However, usually there is a contact knowledgeable in international opportunities in every program. Emergency medicine is a small world, and everyone seems to know someone if you look hard enough.

Meanwhile, the internet is an extremely valuable tool, full of hidden opportunities. "Many programs have established rotations that can be applied for and can be identified and contacted easily via the internet," recommends Dr. James Sadock, Director of the International Emergency Medicine Division at Kings County/SUNY Downstate Medical Center.

Here is a list of websites that may be used as starting points for internet searches:

- www.inmed.us (central organization that links students/residents/physicians to places to do an elective for 1-2 months, very organized, provides an "international medicine diploma" when the elective is completed)
- www.geocities.com/medicsabroad (diverse site with many links to other sites)
- www.missionfinder.org (Christian missions around the world)
- www.adventistdirectory.org (Seventh Day Adventist mission directory, accepts non-religious also)
- www.cabroad.org.uk/vacs/MEDEL.htm (has a nice summary about how to search for an elective as well as links to other sites)

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4. Dot your I's and cross your T's.

First of all, involve your program director early so that he/she is aware of your plans and can approve your elective month. Do not forget to schedule (or request) a convenient time for your elective month. If not planned for, you may get stuck with an elective month at the beginning of the academic year leaving you with little time to set something up. Moreover, if you plan to do an elective month in Mongolia for example, do not get stuck with an elective month in the dead of winter.

You also need to find out what type of malpractice insurance your host institution will require and the necessary documents that may be needed. "In my experience, the less developed the country, the less the emphasis on things like insurance and restriction in patient care," says Dr. Sadock. Housing is another important issue to tackle early on, especially if it is not provided by the host institution. It may be difficult to find housing that is conveniently located, safe and affordable so it may require a lot of investigation beforehand. It is advisable to contact someone from the hospital or program who knows the area well and can give you tips on where to find housing.

5. Consider your health.

Be sure to check the immunization requirements and malaria prophylaxis recommendations of the country to which you are traveling. Dr. Lawrence Proano, Director of University Emergency Medicine Foundation's (UEMF) International Emergency Medicine Fellowship at Brown University, recommends bringing treatment for traveler's diarrhea (e.g., Ciprofloxacin). Dr. Proano also emphasizes attention to other commonly overlooked dangers of international travel such as motor vehicle accidents which are among the leading causes of death when traveling to 3rd world countries (ref: Travelers' Health: Yellow Book Health Information for International Travel, 2005-2006). Other dangers include sunburns, STDs, alcohol or drug related crimes/injuries and jet lag/sleep disorders.

Dr. Proano highly recommends obtaining medical evacuation insurance which costs about \$3/day (e.g., MEDEX insurance; <http://www.medexassist.com/individual.cfm>). "We are used to American standards of rapid care and treatment, and in case of a mishap, it may be necessary to evacuate the traveler back to the States. This can be very expensive, up to six figures for a medically equipped jet, with MD, RN, pilot, etc. And they won't even leave their base until their fee is fully paid!" states Dr. Proano.

6. Cultural awareness.

As with most travel experience, your overall experience with the country and the culture is multiplied the more you learn about it beforehand. Spend some time reviewing the history and the culture of the country you are traveling to and at least learn some of the native language. In addition, Dr. Sadock reminds us, "Remember that your way may not necessarily be the right way, even though you are a formally trained U.S. based emergency physician – not everyone practices like we do, and although that is not always a good thing, you'd be amazed how much you can learn by watching quietly and by mindfully practicing cultural sensitivity."

7. Have fun!

Above all, most residents that do an international elective find that it was one of the highlights of their residency. It is an incredible opportunity to enrich your education as an emergency physician as well as enriching yourself as a person. Many residents also pair their elective time with their vacation and schedule a week or two for travel in the area. Andy Gorlin, MD, volunteered as a staff physician at Maluti Adventist Hospital in Lesotho, Africa, in 2004 for one month. He combined the rotation to line up with his vacation and spent the next two weeks traveling through game parks and coastal cities throughout South Africa.