# Senior elective in Emergency Medicine & Anaesthetics in Fort William, Scotland (2023)

## **SUMMARY**

**Location:** The Belford Hospital, Fort William.

## **Objectives:**

- **1)** To gain experience of A&E in a rural setting. This will include triage, resus, appropriate investigations, and subsequent treatment or referral.
- **2)** Due to the location of the hospital, the student will gain experience of outdoor pursuit injuries.
- **3)** To gain knowledge regarding treatment escalation from a rural trauma centre to a major trauma centre.



**Picture 1:** The view of Belford Hospital from the street, with the entrance to A&E in the background.

**Setting:** Flexibility to experience hospital areas; CAU, general ward, A&E, one surgical theatre, anaesthetics & pain management clinics. Limited hospital accommodation, contacts who lease accommodation available from hospital administration. Opportunity to visit Lochaber Mountain Rescue base, hiking/climbing, mountain biking and open water swimming.

### REFLECTIVE ACCOUNT

My placement in Fort William was planned with my supervisor, an anaesthetist with an interest in chronic pain management. I have an interest in anaesthetics and A&E. On arrival I was told I could spend time wherever I felt beneficial in the hospital, this freedom provided

incredible opportunities for learning. The small nature of the hospital meant I could start on the ward and then progress to A&E after ward rounds, and clinicians would find me to show cases of educational relevance. I experienced some busy night shifts, made easier by the fact that my accommodation was in the hospital. Other educational opportunities included attending neonatal resuscitation training and assisting in surgery. The rural setting allowed me to enjoy lots of time outdoors walking, climbing, and swimming. One striking aspect was the sense of community. In a rural setting, where everyone knows each other, the healthcare team felt like an extended family. This environment fostered strong bonds among the staff, which translated into a supportive atmosphere.



**Picture 2:** The anaesthetic room leading to the one surgical theatre in the hospital. There is also a room for scope procedures.

#### **RURAL HOSPITALS**

It is no surprise that rural hospitals have less resources. For example less ward space, fewer imaging options, and fewer specialities on site to consult. This helped me become comfortable with asking for advice regarding management over the phone. It was clear that whilst doctors working at The Belford had their speciality, they were also experts in other areas. They have taught me the importance in adaptability and creativity in delivering quality care. The rural nature of The Belford provided



ample opportunity to witness trauma injuries, despite there not being onsite orthopaedics.

#### UCI CYCLING WORLD CHAMPIONSHIPS- MOUNTAIN BIKE DOWNHILL

An opportunity I had whilst in Fort William was assisting the medical team providing care at the Downhill Mountain biking competition. This was an excellent opportunity to;

- witness the practicalities of pre-hospital medicine.
- observe patterns of injuries seen in high-impact sporting incidents
- learn about very basic assessment performed in environments suboptimal, stabilisation of casualties and triage.
- Learn about the ATMIST acronym to communicate details from the site of incidents to medical staff at the base (picture 3) (figure 1).



Picture 3: The medic base at Nevis range. Supplies were available to treat minor incidents and to stabilise patients for transfer to hospital via Ambulance Services based on site.

Age	Age and Sex of casualty
Time	Estimated time of arrival and the time of incident
M.o.i	Mechanism of Injury.  -The Gross mechanism of injury (Crash, stab etc)  - Known Factors associated with major injuries E.g. entrapment, rollover, ejected.
Injuries	Seen or Suspected
Signs	-Vital signs, Heart Rate, Blood Prssure, Respitary Rate, SP02, GCS/AVPU -An indication to whether the patient has improved or deteriorated since arrival
<b>T</b> reatment	Treatment Given

Figure 1: The
ATMIST acronym is
used to summarise
casualty information
to allow succinct
handover between
pre-hospital
healthcare providers.
Incident cards were
created for casualties
using this format.

My experience in Fort William has allowed me to gain a unique perspective on the challenges and rewards of working in a remote healthcare setting. The cons of this placement related to accommodation as Fort William is becoming a popular tourist destination! The chance to integrate with junior doctors provided invaluable insight into the lifestyle of the rural Foundation year programmes. I would recommend this placement to someone who: is interested in A&E trauma, would like to improve their practical skills, who enjoys the outdoors and would like to experience the pros and cons of living in a close-knit community.