

IMER Essay:
Elective Programme at the University of Oxford
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Beginning in early May 2011, I went to Oxford University for 6 weeks to participate in their Elective Programme, which enables visiting medical students from all around the world to have a taste of the University of Oxford and the National Health Service, England's health care system. I joined the Oxford medical students in their Clinical Medicine clerkship, which would be the equivalent of Internal Medicine in the United States.

All of my clerkship activities were at the John Radcliffe Hospital in Headington, which is about 3 miles from the Oxford city centre. Morning rounds began at 9:00am. My team consisted of the consultant (equivalent to the attending doctor), junior staff, senior resident, interns, and multiple medical students. Each medicine team could have 20 or more patients to follow. Medical students mostly observed, and the consultants I had were amazing teachers. Students were sometimes asked to go ahead of the team to find out what happened to a patient overnight and present that patient when the rest of the team arrived, but we were not required to continuously follow the same patient or pre-round. We would do a complete history and physical and present newly admitted patients when the team was on-call. Students were occasionally asked to place IV's or draw blood for tests or cultures, which is the medical team's responsibility if the nurses are not successful. The weekday afternoons typically consisted of lectures, which included everything from large auditorium lectures on organ systems and diseases, to small tutorials on pharmacology or specific disease processes like valvular heart disease, to practical workshops on how to place IV's, draw blood, or write prescriptions.

I should make a note here about the British education system. Medical school begins after secondary school, the British equivalent of high school. It takes 6 years to complete, and clinical activities do not begin until the fourth year, but there is still much didactic teaching during the clinical years. The Oxford system is based on tutorial education, meaning they utilize more discussion groups for learning, and their exams are often oral and essay rather than multiple choice. I experienced some spectacular teaching on this clerkship, directly from senior consultant doctors, and it is apparent that teaching is truly important to them.

I came to Oxford eager to experience the British healthcare system, which is nationalized. Having never spent an extended amount of time in another Western country before, I assumed many things would be quite similar, if not the same. The theory of diagnosis and treatment of disease was pretty much equivalent to what is done here in the U.S. However, my impression was that they conduct far fewer labs and imaging than we do; they are less likely to do the test that is unlikely to return positive but is done here in the U.S. "just in case." One major difference I noticed was how end-of-life issues were approached. The medical team, patients, and patients' family members seemed more open to accepting palliative care rather than

defaulting toward treatments that were probably medically futile. Also, their primary care system appeared to be quite effective as the front line, as the emergency department was not full of non-emergencies like sore throats and mild viral gastroenteritis. I did observe some inefficiencies; for example, inpatients took several days to get imaging if it was non-emergent. Also, inpatients who were ready for discharge could spend several additional weeks in the hospital waiting for home care arrangements.

The Elective Programme does not charge tuition and they do provide housing free of charge if space is available. The housing is located on the grounds of the John Radcliffe Hospital, where I completed all my clerkship activities. A great advantage of being in the provided housing is meeting the other Elective students. When I first arrived, I had the fortune of meeting a Tanzanian who was completing medical school in Beijing, a medical student from Iowa, and a medical student from Switzerland. Later, 3 more medical students from Tanzania arrived. At the time of my placement, Oxford and most medical schools around the world were winding down for summer break; an earlier slot in the school year might have allowed interaction with even more elective students as well as Oxford students.

Since only a few students at a time were expected to be present during weekend call, and there was no overnight call for students, I had the chance to explore England during the weekends. I went to London, Stonehenge, Cambridge, and Bath, all of which are within a few hours bus or train ride from Oxford. Oxford itself has enough to explore for 6 weeks without having to leave. One of the oldest universities in the world, Oxford has great depths of history to delve into, not to mention the aesthetic beauty of the old buildings and architecture.

It was quite a sublime experience to be able to study, if only briefly, at an institution associated with such great names in medicine as William Osler and William Harvey, as well as other great names in the history of academia. I would recommend the Oxford Elective Programme to any medical student. Applications must be submitted more than a year before the beginning of the intended academic year of attendance (e.g. June 2009 for a placement any time between September 2010 and August 2011), so one must plan far in advance. More information can be found at <http://www.medsci.ox.ac.uk/study/electives>.