IMER – University of Minnesota

St. John's Medical College, Bangalore, India

Elective Rotation

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Logistics:

Other essays and papers have covered the nuts and bolts of getting situated at the site, but here are a couple nuances that deserve mention.

First, prior to arrival make sure you confirm your arrival date (likely a day or few before your rotation state date) such that accommodations are ready at the Annexe III for you. Also, bring several passport photo copies as they are used on forms everywhere. Upon arrival at the airport absolutely make sure to use a metered cab from the line and avoid people who come up to you. You will need some 1000 Rs. in hand. To find the correct gate at SJMC, realize it is a giant square compound and some of the gates lead to parts that are not internally connected. You will want to be dropped off opposite to the BDA Complex, past the Bank of Baroda gate. If you arrive late at night, there will be a guard present (though likely sleeping—so make noise/rattle the gate).

The morning that you start, you will meet with Ms. Peters. Do realize that you will spend the better part of the first day getting signatures on various forms and meeting with numerous individuals—your real first day is most likely the following day.

As far as attire goes, for men khaki's and a short sleeve dress shirt/golf-shirt should suffice. Sandals are okay most departments, but the ICU I do know prefers shoes (though they go sans white coat). This attire choice is in line with the normal everyday wear of Indian men (button-up shirt and trouser pants). For women, one can do a similar approach as above, but if you wish to fit in better, would recommend a shalwar (aka salwar aka Panjabi suit) loose top on legging/stretch pants.

Regarding internet and phones, there are several options. I had a T-Mobile smartphone that I was using at home in the U.S. and asked T-Mobile to send me the unlock code. This allowed me to remove the SIM card and after arriving in Bangalore, pop in a local SIM card granting me data, text, and voice (less than Rs. 500/month depending on plan) in the palm of my hand. Another option is to buy a cheapo phone there (but no data access with that). Some people in our group did not buy a phone at all, but had their laptops from home for which they bought in India a 3G USB stick.

Rotations:

Since you are likely spending a minimum of 4 weeks, I would recommend rotating through a minimum of 2 different departments. Rotations at SJMC overall will depend on how much initiative you bring, critical if you wish to maximize your learning experience. I spent the first 2 weeks on Community Medicine. This involves traveling at 9am M-F via vehicle for 45 min to either the rural or urban community health center. At these clinic visits, you get a great view of primary care in action. As an elective student, your role will be more of an observer as there are no direct responsibilities given to you. However, this rotation was quite beneficial as you begin to understand the public health and systems perspectives of healthcare delivery. In addition, understanding how they are able to deliver fairly comprehensive care in a resource limited setting is quite fascinating. The day typically wraps up around 2 or 3 pm.

For the remaining 2 weeks, I was in the hospital in the MICU. The day starts with rounds promptly at 8:30am. Depending on the attending/fellow, do not be surprised if there is a greater emphasis on "being pimped" than on the aforementioned rotation. The attendings/fellows are very knowledgeable and keep an entertaining and collegial atmosphere. You will see a very diverse spectrum of critical care cases including a good percentage of pathologies rarely, if ever, seen in the U.S. After formal rounds, the team dissipates and procedures and notes are carried out. Usually after observing some procedures and the re-evaluation of patients, there is some considerable amount of down time present. There is a good selection of ICU manuals/textbooks in the nursing area which I would advise is a good way to fill in the void.