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Choosing my elective specialty was the easy part; I have always had a particular interest in cardiology and want to pursue it as a career. However, location was more tricky; I wanted a large English speaking country, and, having done a previous placement in the US (which I enjoyed tremendously), I settled on Canada. More specifically, Montreal.

My elective experience can be divided into three broad sections: the cardiology, the healthcare system, and the country.

I was lucky enough to be allocated time in each of the three main hospitals in Montreal (Montreal General, Royal Victoria, and Jewish General), and spent time in many different areas of cardiology: coronary care unit, ward and emergency consultations, echocardiology, electrophysiology, and clinics. Without the pressures of upcoming exams, I applied myself as much as possible, and was rewarded with ever-increasing responsibilities as the team saw my capabilities. The basics of cardiology, as with much of modern medicine, are a universal language for doctors. Hence, I tried my best to notice the subtle differences, such as different scoring systems (eg TIMI as opposed to GRACE) and drug regimes, in an effort to understand their benefits and drawbacks. Communicating with patients for whom English was a second language was also challenging at times, especially when trying to elicit symptoms with more nuanced vocabulary; towards the end I felt as though my more detailed questioning was certainly improving.

Montreal's hospitals all fall under Quebec's nationalised healthcare system, in which private healthcare is illegal. On reflection, this has many benefits, not least that all clinicians dedicate all their clinical time to all patients, rich or poor. However, drawbacks such as extensive waiting times for basic scans and operations are certainly an issue. Moreover, the fact that "staff" doctors (equivalent to consultants) are almost exclusively paid per patient within the hospitals, has distinct positives, such as an emphasis on working efficiently to maximise income, but brings the possibility of abusing the system and not providing the best possible care for each patient, in the interests of time.

Lastly, spending my time in Quebec, Canada's largest province, has been an unforgettable experience. Montreal is a unique city in North America, with both a European and North American flavour, and has an overall atmosphere somewhere in between Paris and New York. Although there are tensions between the French-speaking Quebecois population and English speakers, the people I interacted with from both sides of the debate were immensely welcoming. Touring around the historical sectors of Montreal, Quebec City, and Ottawa, visiting museums and national landmarks, and viewing some areas of outstanding natural beauty have helped me to understand the richness of Canada's history, and Quebec's place within it. Not to mention, the food was delicious, and Quebec's favourite dish, the poutine (chips, cheese and (parev) gravy) made me certain of one thing – I'll be back for more!

I have thoroughly enjoyed my elective experience, and am thankful to the Jewish Medical Association for their financial assistance in this endeavor.

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