

Neonatology, Hadassah Ein Kerem and Hadassah Mount Scopus Hospitals, Jerusalem

I had the privilege of undertaking my 4-week medical elective in the Neonatology Departments of the Hadassah Ein Kerem and Hadassah Mount Scopus Hospitals in Jerusalem, in the Summer of 2017. I organised this elective through the "Hadassah Medical Exchange Program"

(<http://www.jerusalemmedexchange.com/>).

I arrived in Israel several days before my placement was scheduled to start. After an overnight stay in Tel Aviv I headed to Hadassah Ein Kerem Hospital, which houses the main medical student hub. I was warmly welcomed to the hospital by the medical students who coordinate foreign elective students. I was given directions on how to get to the Neonatal Intensive Care Unit (NICU) and went to pick up the hospital bedding and towel that were kindly lent to me before heading off to the Hebrew University Dorms to settle in. The Kfar Hastudentim (Student Village) houses around 1600 students from all over the world (including many local students as well) and is located a mere 10-minute walk from Hadassah Mount Scopus. The bus journey to Hadassah Ein Kerem took around an hour each way but it was an incredibly picturesque journey through the hills of Jerusalem and the buses were very reliable and cheap (and most importantly, air-conditioned!)

Following a weekend of sightseeing and meeting new friends, I started my elective at Ein Kerem. My supervisor welcomed me to the department and introduced me to the other attendings and residents (consultants and registrars) before we joined the morning ward round.

Daily routine and medical learning opportunities

A typical day during my elective would generally start with the morning ward round at 8am. This was typically conducted in Hebrew, although sometimes the doctors would speak in English for my benefit. I was also lucky that in Ein Kerem there was an American social worker on the team who would translate what the doctors and nurses were saying as we went along. I would then go with the residents to the Nursery to check the babies who were due to be discharged that day. It was very useful to get lots of practice of this important multisystem examination, and to become more familiar about what was normal and abnormal in neonates. Following a quick coffee break, we would return to the NICU and I would see my "own" patients. In Ein Kerem I would see 4 or 5 babies in the step-down section of the NICU. I would examine them, review their notes, note down their observations and blood test results. I would then discuss my findings and thoughts with a doctor and we would formulate a management plan together and document this in the notes. In Mt. Scopus, I would independently see one or two more complex babies. I would make notes on the baby and then present my findings and thoughts to the team in the pre-lunchtime ward round. The afternoons were generally more varied, and I was fortunate to have the opportunity to see a wide array of different procedures. I attended at both Caesarean sections and vaginal births, spent time in theatre watching gastrointestinal and cardiothoracic surgeries being performed on the babies from the NICU, observed many procedures such as intubation, central line insertion, VP shunt insertion and PEG insertion, and watched lots of imaging tests. It was very valuable to watch cardiac echocardiograms and brain ultrasounds, and often the doctor performing the test would talk me through what they were seeing as they went along. This then allowed me to have a better idea of the patient's situation. The afternoon ward round took place between 4 or 5pm, and following this I would go home.

I learned a great deal about Neonatology from my elective. In addition to the many complications of prematurity (such as necrotising enterocolitis, neonatal sepsis, neonatal respiratory distress syndrome and jaundice), I also observed the presentation and management of many congenital conditions. It was particularly interesting to see patients with congenital cardiac abnormalities including transposition of the great arteries and tetralogy of Fallot. One particularly memorable patient was a baby born with an omphalocele. I went with the Consultant to speak to the mother who had gone into preterm labour and was not yet entirely aware of the implications of the ultrasound finding of an omphalocele that had been noted previously. After watching the subsequent birth and initial management of this baby, I later watched the surgery to insert his bowel into his abdomen. Over the four weeks that followed, I would check him daily and follow his progress as he came closer to being discharged.

I also learned about the healthcare provision in both Israel and in Palestine during my elective. I was able to arrange a 3-hour tour of the hospital from one of the guides who works there, and learned about its past, present and proposed future. This was also a good opportunity to see other parts of the hospital I had not yet encountered, including the Major Trauma Centre, the Emergency Department, the Helipads and the Adults Wards. I was interested to learn about the different protocols and preparations they have in place in case of an attack on the hospital (which has happened in the not-too-distant past), including extra beds and supplies hidden in between each floor, and additional underground areas for treating patients. I also learned that they are able to turn the Emergency Department into a bomb shelter and have the supplies to contain people for 14 days, although fortunately they have never had to test this strategy.

Challenges

Despite being extremely educational, rewarding and enjoyable, my elective was not without its challenges. First and foremost, not speaking Hebrew caused me some difficulties at times. Although many members of staff were happy to translate into English for me, and I was allowed to write my own notes and findings in English, it is also worth noting that all the other patient records and reports, test results, and vital signs are written in Hebrew. Fortunately, I am able to read Hebrew reasonably well, and therefore, in combination with hefty use of GoogleTranslate on my phone, I was able to accurately access the patient information I needed in order to write the management plans for the neonates I was seeing.

Non-medical opportunities

In addition to thoroughly enjoying my elective placement, I also had a fantastic time outwith the hospital. This was my fifth time in Israel in the last seven years but I have still left feeling as if there is so much more left to do and to see! Having grown up in the relatively small Jewish communities of Edinburgh, St Andrews and Glasgow, I made the most of being in Israel by throwing myself into Jerusalem Jewish life. I attended numerous different synagogues for weekday and Shabbat services. I was welcomed incredibly warmly into the local Jewish community and was fortunate enough to be hosted for at least two meals for each of the four Shabbats of my elective, which really opened my eyes to the kindness and hospitality of complete strangers! I was also fortunate enough to attend a series of evening lectures at the Pardes Institute for Jewish Studies which were very interesting. My Hebrew reading and speaking skills also undoubtedly improved significantly which I was pleased (and relieved!) about.

At the end of my elective, I holidayed in Israel for a week with my family (visiting lots of museums, going on free walking tours and taking trips to Tel Aviv, Masada, Ein Gedi and the Dead Sea) before going on a further week-long trip run by the Union of Jewish Students to give both Jewish and non-Jewish students the opportunity to engage with different political, social and religious groups in Israel and Palestine, with a focus on Interfaith dialogue, minority groups, and the Israel-Palestine conflict. This complemented many of the very moving and insightful conversations I had had with doctors I had worked with and new friends I had made from varied backgrounds – including Palestinians, Israeli-Arabs, Ultra-Orthodox Jews, and Israelis living in West Bank Settlements, in addition to many individuals I had met who were actively involved in Jewish Feminism and the promotion of LGBT rights and tolerance in Israel. By the end of my 7 weeks in Israel, it is safe to say that I have learned a huge amount about Neonatology, Judaism, and Middle Eastern politics, and also have gained confidence in my own abilities to travel alone and go about my daily life in a foreign language.

Conclusion

I am extremely grateful to the Jewish Medical Association for their generous scholarship which allowed me to undertake this elective. I am also more than happy to offer advice to anyone thinking about doing an elective in Jerusalem.

Sarah Levy
Glasgow