Paediatrics Department, Royal Children's Hospital, Melbourne, Australia

I spent four weeks on the neonatal intensive care unit (NICU) and the last two weeks with Ambulance Victoria's Paediatric, Infant and Perinatal Emergency Retrieval (PIPER) team at the Royal Children's Hospital in Melbourne, Australia.

On the very busy neonatal ICU I was quite self-directed with clinical opportunities as and when they presented themselves. I learnt how to cannulate neonates and take heel prick bloods and capillary blood gases, which the nurses taught me how to do on the wards and have since been incredibly useful skills for my foundation jobs.

Typically my day was around 8am-4pm. I attended handover and ward rounds in the morning and then helped the junior doctors with their jobs. I was able to sit in on family meetings and interesting psychosocial meetings with social workers, music therapists, physiotherapists and OTs. I also joined the teaching day for the junior doctors, participating in SIM sessions and physiology teaching. There was also a fascinating NICU specialist ethicist who I observed for a little bit. On NICU there were also bedside surgeries (e.g. exploratory laparotomies) as RCH is the main centre for Paediatric Surgery in Melbourne which I was able to observe. The hospital also hosts regular lunchtime lectures and Grand Rounds for anyone to attend which were interesting and useful for those interested in Paediatrics.

Early on I was offered opportunities to get involved with academic research. I completed an audit as part of a wider research project at the RCH looking at the long-term neurodevelopmental outcomes at 2, 5 and 8 years of neonates born with features of VACTERL association which I really enjoyed and found very interesting; in particular I looked at the incidence of multiple VACTERL association in neonates admitted to NICU with tracheo-oesophageal fistula or oesophageal atresia over a ten year period. I have since presented this audit as a poster at a conference at the John Radcliffe Hospital, Oxford which was very well received.

For my last two weeks I joined the Neonate Emergency Transport service, which retrieves unwell neonates from all over Victoria (and sometimes beyond) and brings them to tertiary centres for further investigation and management and/or surgery. This was an incredible experience as I got to join the team on trips to other hospitals in the city and outskirts as well as on aeroplane trips to hospitals further away from Melbourne in Victoria to collect patients. From a learning perspective it was a bit different from the skills-based experience on NICU as it was more acute and more case-based around the babies we were retrieving. My NETS experience was not part of my original elective plan, however I asked if I could spend some time with the team after observing their handover of their patients to the NICU and I enjoyed my first day with them so much I spent another two weeks there!

I applied for this elective placement at the Royal Children's Hospital (RCH) through the University of Melbourne external students' elective programme and I would highly recommend it to anyone interested in pursuing a career in Paediatrics.

Sarah Simons Nottingham