International Elective at CloudNine Hospital Jayanagar

Achyuth Sriram MS4

CloudNine Hospital Jayanagar



Maternity Hospital in Bangalore, India 60 beds 15 bed NICU 15 bed PICU Peds Emergency Peds OR Ob/Gyn OR

All services except Burn and CT surgery

Indira Gandhi Institute of Child Health



Pediatric Tertiary/Quarternary Care Center

- Over 600 beds
- PICU with 30 beds
- NICU with up to 60 beds
- All subspecialty services
- All OR Services

Goal #1: Broader Understanding of Pediatric Practice in India

- In my experience, I was able to work in multiple settings in a private hospital and a public referral hospital giving me a broader understanding of healthcare in India
- There are two systems in India, public and government run institutions. Public institutions are free for the public but do not have many resources. Private institutions cost patients' families money but have more resources available.
- Patients and their families are very receptive to physician input and really value physician input.
- Most pediatricians also have an outpatient practice along with hospital work. All the neonatologists also had a time of week for outpatient follow ups and taking care of children as they grow older

Goal #2: Clinical Research

- Clinical research is being performed at many tertiary care centers regarding treatment with less than optimal conditions
- New research is being conducted about teaching NRP protocol to rural village shamans (midwives, alternative care practitioners) and benefits shown through that

Goal #3: High-risk deliveries

- I attended multiple high-risk deliveries which required immediate ventilator support
- Practiced my NRP over 50 times
- Learned about acute management of pre-term and late pre-term babies
- Placed Umbilical Venous
 Catheters and Umbilical Arterial
 Catheters



Expectations

- I expected to be speaking English the majority of the time as most Indians speak English but I found myself speaking Kannada more often than not
- I expected to use the same body of knowledge that I learned in the US there as well but that was not the case. TB is very common there along with malaria, dengue fever, chikingunya and even diphtheria. Those are not always top of my differential in the US
- I expected there to be a huge difference in private vs government run healthcare and there was a stark difference

New Skills



- Learned more and brushed up on my infectious disease knowledge
- Practiced resuscitation of infants
- Spent time learning anesthesia methods for use in children for small procedures
- Learned how cultural humility plays a role wherever you go

Surprises and Challenges

- I was not used to the structure and rigidity of the hierarchy of medicine which took some time to get used to
- Surprised by how easily parents listened and did not ask many questions
- Surprised that babies aren't given antibiotics at birth and that the rate of opioid addicted babies or babies with exposure to STDs are quite low in urban cities
- Surprised by lack of antibiotic stewardship and ease of access of antibiotics without a prescription
- Challenged by how to take care of patients without many resources in government-run hospitals
- Challenged by language barrier if patients or their families only spoke Hindi or another regional language

What I have gained

- Gained a newfound respect for the pediatricians in India who work really hard without many resources to help their patients
- Gained new skills in NRP, pediatric diagnosis, and triage that will help in my future practice
- Despite being across the world, physicians have the same purpose of taking care of their patients

Advice for Future Students

- Make sure to come with an open mind
- Be ready to challenge what you have learned and what you know
- Respect the hierarchy in other countries
- Have an amazing time!

Pictures by me!