

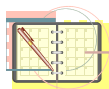
TRAVEL AWARDS

IMER Medical Student Travel Award Applications

Deadline: April 30th

Applications for the Gault, Carlson, Jacobson, Quie, Kersey, Spink, Seoul National University and Niigata University Travel Awards are available at: www.meded.umn.edu/IMER/index.html
Stop by the IMER Office to learn more about the purpose of each of these travel awards and about the history of the outstanding faculty members who have made these awards possible.

Mark Your Calendar



Annual Wesley W. Spink Memorial Lecture

Thursday, April 24th, 2008 at noon

Room 2-690 Moos Tower

Guest Speaker: Christopher J. L. Murray, M.D.

Director, Institute for Health Metrics and Evaluation,
University of Washington

Public Health Film Festival

Co-sponsored by the Global Health Pathway & Global Health Course

Film Festival (free and open to the public)

April 7-11, 2008

For more information about the festival, including film times and directions to the theater, visit

www.sph.umn.edu/filmfest08

Physicians for Human Rights – Global AIDS Town Meeting

U of M Event Monday, April 28th

12:00-1:30pm

Mayo Auditorium

Local, national and international experts, health professionals, students and community members will come together to discuss the global shortage of health workers, how women and girls are disproportionately affected by HIV/AIDS and the need for rights based health systems that protect vulnerable populations and empower all people to claim their right to health, dignity and justice. Speakers: Ilan Lewis, Executive Director of the Stephen Lewis Foundation; Dr. Keith Henry and Dr. Omobosola Akinsete of Hennepin County HIV/AIDS Clinic and the Honorable Congresswoman Betty McCollum



IMER Director Receives Honorary Degree

An honorary doctorate in medicine will be awarded to Phillip Peterson, Director of the IMER Program from the Karolinska Institutet in Stockholm, Sweden. Dr. Peterson has led the development of a close collaboration between the Karolinska Institutet and the University of Minnesota. The award ceremony will be in Stockholm May 9th, 2008.

Quie-Farbstein Healthcare in Israel

The IMER office has developed a new program in Israel with approval from the Office of International Programs which will involve a team of two faculty mentors, Drs. Paul Quie and Marshall Hertz, and 4 medical students for a 4 week clinical and cultural experience at Baruch Padeh Medical Center - Poriya. This program was conceived by Dr. Jaime Gaviser in Minneapolis and Dr. Jacob Farbstein at Poriya Hospital to honor Regents' Professor Paul Quie for his 50 years as a faculty member at the University of Minnesota Medical School. Students beginning their fourth year of medical school will be in Israel May 26 to June 20. We anticipate this will be a wonderful experience for all participants and hopefully may be an annual program for IMER and U of M faculty and students.



Global Friends Network - New Program

IMER is in the beginning phases of setting up the new Global Friends Network. The program will match visiting international medical students with U of M medical students. This will give our visiting students the opportunity to meet new friends and ask questions about their electives and time in Minneapolis. This is also a great opportunity for our medical students to learn about another culture and meet students from a site that they would like to visit during their medical education career. We have 21 incoming international medical students between April and August from the sites listed below. Please contact Shannon in the IMER office if you are interested in becoming a Global Friend.

Incoming visiting international students:

Niigata, Japan -3
Seoul, Korea - 2
Tiberius, Israel -2
Galway, Ireland - 4
Goteborg, Sweden – 1
Pakistan - 2
England - 2
Scotland - 1
Graz, Austria - 4

Interested in hosting an international student?

U of M medical students or faculty members, who would be interested in providing housing for visiting international students, please contact the IMER Office. From past experience, we can assure it will be great fun to interact with these students (and they can help defray rent, etc. while they are here) and it is a great way to contribute to the cultural exchange.



Student Report (edited)
Cassandra McMillan
Bangalore, India



My intent in traveling to India was to get a broad taste of their medical system and to be able to see diseases/pathology I would not regularly see in the States. With this goal in mind, I decided to change departments each week. I found this to be a good decision as I was able to see a lot of patients in different specialties.

General/Tropical Medicine It was a really good experience serving as a nice introduction to the Indian medical system for my first week in Bangalore. I was minimally involved in patient care but the doctors and residents did a good job explaining the patient's course to me and letting me examine any pertinent findings. I saw lots of TB, HIV with severe complications, malaria, dengue fever, and a mastitis that had spread to the brain. This posting lacked much hands-on involvement, but served as a nice introduction to the state of healthcare in India. I also saw patients we essentially had to kick out without treatment (unable to finish antibiotic course, no retrovirals, etc.) because they couldn't afford it. During this week, I spent 2 days in the outpatient clinic which was an excellent experience for getting a broad taste of common medical conditions in India. The doctors will see 40-50 patients in a morning, all within a single exam room. They will have 4 patients in the room at the same time (with all the patients' family members)—it's chaotic but certainly made me rethink my complaining of the 15 minute outpatient visit. People are also generally much sicker than the average patient in the States due to the cost. I worked with Dr. Girija Singh whom I found to be very enthusiastic about getting me involved.

Community Health. This was my best experience in India. The villages are a different world compared to Bangalore. Each day is spent with a different "clinic"—maternal/fetal, geriatric, psychiatric, etc. Much of this was shadowing due to the language barrier between myself and the patients, but I was able to assist with drug dispensing, lab draws, etc. During this week, I spent a night at the hospital in Mugalar with the Indian medical students who have to do a two-week rural immersion program there. I went to the villages with them where they took me through villagers' houses and introduced me to the many challenges the villagers face. The students put on a health fair with skits explaining water purification, hand hygiene, etc. Working with these students really deepened my understanding of life in the village and the health challenges faced with this population. I was also able to attend the medical student classes teaching community health, which were very interesting. In the evening we had a BBQ and bonfire and I was able to get to know several medical students.

Dermatology. As described by previous essay writers, this provided an excellent mix of bread n' butter derm (acne, psoriasis, atopic dermatitis) and more exotic diseases (secondary syphilis, leprosy). I found the teaching in this department to be particularly strong, as the physicians strived to consistently translate for me and keep me involved. I especially recommend working with Dr. Elizabeth or Dr. Sujata. Mornings started with rounding on the in-patients for a couple hours, followed by work in the outpatient clinic.

Similar to medicine, the derm outpatient will have several doctors working in a single exam room at once. This served to my advantage, as I was able to see many more cases than if I'd been in a room with a single doctor. The doctors on this service would often assign me topics to read about and would then quiz me about the "assignment" the next day. It wasn't difficult, but I was expected to spend some time researching the various diseases I was seeing.

Obstetrics and Gynecology. I was able to see emergency surgery for a ruptured ectopic pregnancy and a twin delivery this was a mix of Labor and Delivery and surgery. In both of these, you will only be observing. I enjoyed the variety of the posting, but found teaching to be pretty minimal. L&D was also very quiet while I was there, typically with only a single delivery a day, so I spent a lot of time talking with the interns and patients. Seeing the differences between the American and Indian operating theaters was interesting, but it was very difficult to appreciate much in the gynecologic surgeries, as there were also residents and interns vying for the opportunity to be involved.

Travel and Sightseeing

There were two Aussies, one other American, and several German students studying at St. John's while I was there. Getting to know this group was a lifesaver, as they helped me navigate the basics of life in Bangalore. We regularly ate and spent weekends/evenings together. I visited several sites around Bangalore: ISKON temple, MG Road, Cubbon Park, Lalbagh Gardens, Bull Temple. Although interesting, the crowds and pollution made travel around the city pretty exhausting. Navigating India solo as a woman is not impossible, but it can be challenging. Doing much of anything alone after dark was generally considered a bad idea. Conservative dressing (pants and kurtas/longer shirts) and dark sunglasses helped reduce unwanted attention.

Final Thoughts

Be prepared for the inquisitive attitudes of Indians. People were very friendly and interested in knowing more about the West, resulting in hours of questions on bus rides, at lunch, etc. People also regularly asked me questions about things we don't generally talk about, such as salaries and personal finances. You quickly learn to take it in stride. I actually found it nice to be able to respond with my many similar questions about Indian culture.

Another thing to note, medical textbooks are much cheaper in India, so it may be worth your time to stock up if you have room in your suitcase.

Please feel free to contact me if you have any questions!

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