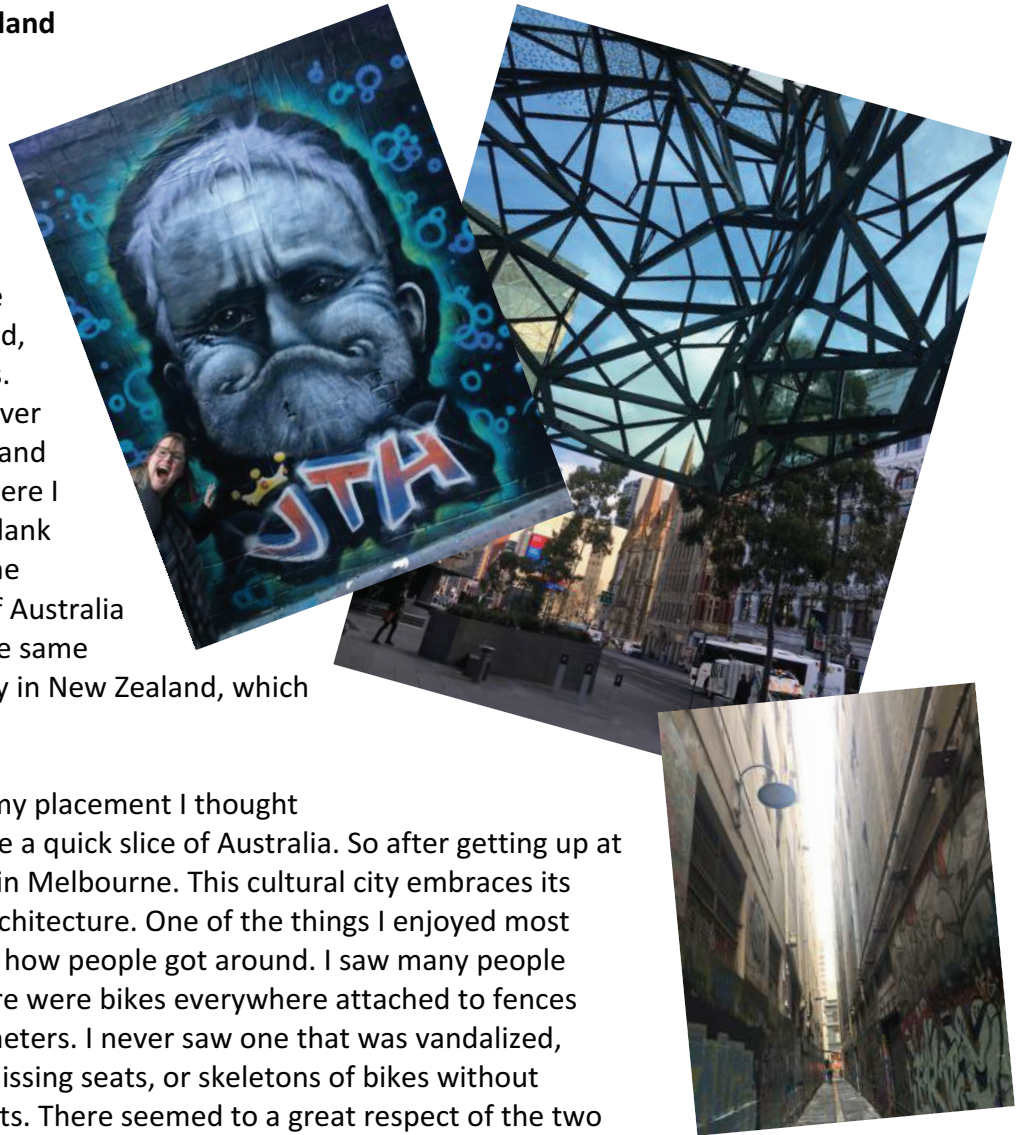


## Australia – East Gippsland (Bairnsdale and Lakes Entrance)

I was luckily enough to be selected to go on the Australian placement. This meant that I was to be based in East Gippsland, Victoria for two weeks. This is a place I had never heard of before RMIP and when I told people where I was going I received blank looks. This area is in the bottom right corner of Australia and funnily enough the same latitude as Hawkes Bay in New Zealand, which is where I grew up.

Before I cracked into my placement I thought I had better experience a quick slice of Australia. So after getting up at 4am NZ time I landed in Melbourne. This cultural city embraces its eclectic culture and architecture. One of the things I enjoyed most about Melbourne was how people got around. I saw many people riding their bikes. There were bikes everywhere attached to fences and posts every few meters. I never saw one that was vandalized, there were no bikes missing seats, or skeletons of bikes without wheels chained to posts. There seemed to be a great respect of the two wheeled human powered transport that is often lacking at home. Melbournians didn't just get around on bikes there is a pretty awesome public transport setup. Due to the wide streets of Melbourne (originally designed so that a horse and carriage could do a U-turn,) trams were able to provide transport within the city. The train system was also extensive and was meant to provide our transport from Melbourne to Bairnsdale, but due to upgrades this was not to be the case until our return trip home.

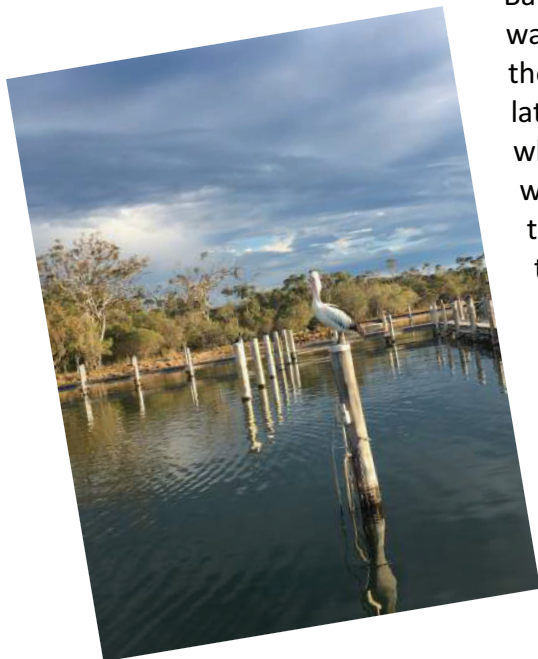




I had one other quick gallivant of adventuring with two other RMIP students prior to my placement. We spent time camping in the Grampians National Park.

And wow, Australia does sprawling landscapes very well.

Once I finally arrived in Bairnsdale, which is where I spent my first week, me and Georgia met the 4<sup>th</sup> year medical students from Monash. These guys were awesome, took us under their wing and showed us the town. This didn't take long but still had significantly more shops than Balclutha. Bairnsdale has a population of around 15000 and has an economy mainly run by agriculture and farming.



Bairnsdale Regional Health Service is interesting as some of the wards are run by general practitioners, who see their patients in the hospital in the morning and return to their general practices later. This I did not see however as I was placed in a rehab ward, which was overseen by a general medical consultant. There were many patients in this ward that had had surgeries, like total knee replacements, in larger hospitals and came back to this hospital, closer to home and their support network to recover. Other patients were there for respite and others were there to recover from strokes or other serious medical issues. What struck me about these patients is that they were very knowledgeable about their conditions and the medications that they take. They asked the doctor some pretty hard questions and took a lot of autonomy in their health.

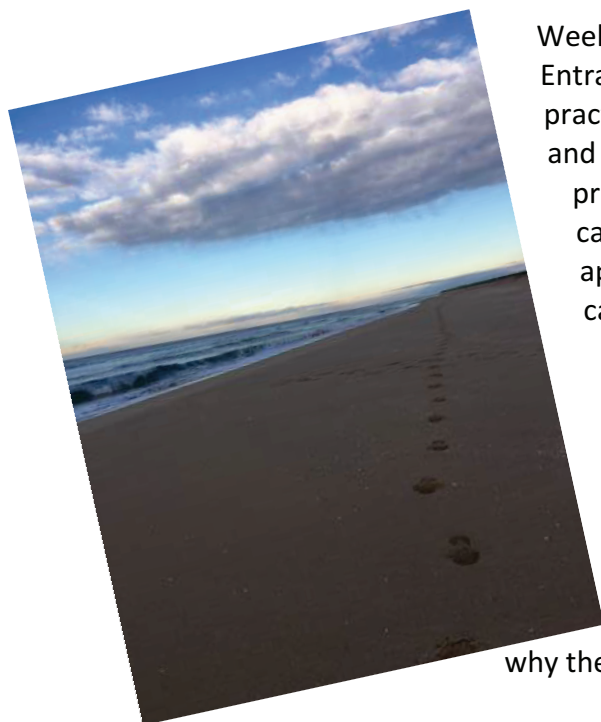
The other two days I spent in the ED department. Having had minimal experience in any New Zealand ED department I do not have much to compare it to. My biggest impression from this time is that Australian healthcare is better funded than New Zealand. There were a lot of staff and no one seemed to blink when they decided to order CT scans and MRIs. This potentially does mean that less things are missed. A women presented with a

suspected transient ischemia attack was imaged, and from this it transpired that she had a space occupying lesion the size of a tennis ball. During this first week I was staying in Monash accommodation. This meant that I was staying with 5<sup>th</sup> years (final year medical students in Australia) who were doing a 6-week placement. One day when not much was happening on the ward, me and one of the fifth years went to Raymond island. This island is famous for its wildlife, especially Koalas. This island was awesome, we saw an echidna, many albatross, kookaburra and I had a scary encounter when one of the local bears charged at me (please see picture).



the rivers and the the past were then given the deeds to property on the sandbar. Today's these properties, in Carpentertown, are not allowed water or electricity, and no structural renovations are allowed to take place. These properties can only be passed down the generations.

In the weekend Georgia and I were reunited in Lakes entrance and we celebrated by going on a local wine cruise. This gave us a tour of the local water ways and the tour guide provided the gossip on which famous person owned which waterside mansion. We also learnt that the entrance, between sea was man made. Those people who dug out the sand bar in the past were then given the deeds to property on the sandbar. Today's these properties, in Carpentertown, are not allowed water or electricity, and no structural renovations are allowed to take place. These properties can only be passed down the generations.



Week two I was based in a private general practice in Lake Entrance. In Australia there are public and private general practices. The public resource is often over catered for and people have to wait weeks for an appointment. The private practices run similarly to New Zealand, where capitation is provided, but this can only bring appointments down so much. Therefore, those who cannot afford a private practice then have to wait a long time for an appointment in public. I spent my time in the practice mostly following general practitioners and nurses. The most interesting case I had was a man who had been in a hunting accident 3 weeks ago, and wanted bullets removed from his legs. This poor guy had been too close to the fox his friend had wanted to shoot and ended up in hospital for 3 days. No one was really sure as to why the bullets were left in until now.

I spent a morning with one of their general practitioners who was really on to it with opportunistic screening. She never missed an opportunity to ask about patient's last smears or cardiovascular checks. Somehow she managed to complete the consults, dealing with any issues or concerns that popped up with the patient and ensure that screening was all followed up. She tailored her treatments for patients such that they got the treatment they best suited and were most likely to follow. And after all this she wasn't that far behind by lunchtime.

I loved my time in Australia. Everyone welcomed me warmly and were very keen for my questions and input. The health system seemed very similar to New Zealand but with a few positive and negative differences.



*NB: Lots of serious medicine occurred even though the photos do not show it.*

Report by Sarah Logan