

ROUNDUP

Volume 2, issue 1

Summer 2010

RURAL MEDICAL IMMERSION PROGRAMME

RMIP Class of 2010

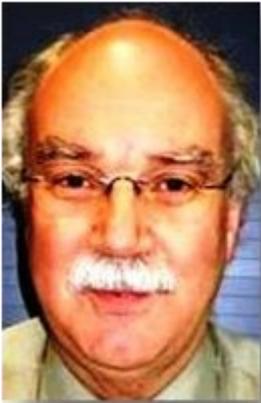


Virta Sharma, Wendy Lowe, Rachael Cowie, Cindy Grobler, Mike O'Connor
Elinor Millar, Meagan McLeod, Natalie Reid, Briary Crawford-Zachernuk
Estee Parsons, Yoska Eerens

Alex Frankpitt, Helen Saywell, David Grant, Kylie Cox

James Slater, Chris Badenhorst, Morgana Woolhouse-Williams, Ashton Ellison

From the Director



This was a challenging year, the first year without Pat Farry, whose baby this programme really is. We have kept the programme running, and have moved the department from Hercus Building across the road to 55 Hanover Street. What a difference. We have also had the first year of students taking responsibility for their accommodation. This has worked out OK in the end. Another serious loss has been through the resignation of Michele and that presents another challenge.

Otorhinolaryngology, Orthopaedics, Rheumatology, Mental Health, Laboratory medicine and Radiology, Obstetrics and Gynaecology.

After ingesting all that information we went out for a meal.



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Residentials

We started the year here with a residential week, all bright eyed and bushy tailed. The aim was to get to know each other and give some preparatory sessions to set the scene for the ongoing work in the localities, and to get an understanding of the elements of the programme and its interactions with Paediatrics, Public Health, Medical Ethics and Pharmacology, and to get a uniform understanding of the special physical examination methods of Ophthalmology,

ROUNDUP

During the course of the year, further week-long Residentials were held in Christchurch and Wellington to fill in some of the gaps perceived by the students and the coordinators. Subjects like pharmacology, neurology, infertility, secondary gynaecology, how to pass an OSCE and more from the specialties were all popular and helpful. The weeks together were also exciting and vibrant with the students from the six centres getting together, sharing notes, experiences, enjoying each others' company and sometimes exploring the cities with the eyes of rural people.



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Conferences

This year we elected to provide an allowance of up to \$300.00 for each student to attend conferences of their choice. This was well taken up and made more possible by the generosity of the conference organisers who made huge concessions to allow students to attend. Most students attended at least one conference, some two. They found it a valuable experience getting good clinical material and experiencing presentations of what did happen in various rural regions. They also felt the inclusiveness, warmth and friendliness that rural practitioners showed towards the students from the Rural GP Network



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Conference. They learned heaps from the massive NZMA GPCME conferences held in Rotorua and Christchurch, great for a huge variety of straight clinical learning sessions.



NZ Rural GP network conference



NZMA GPCME conference Christchurch

And another enjoyable dinner afterwards

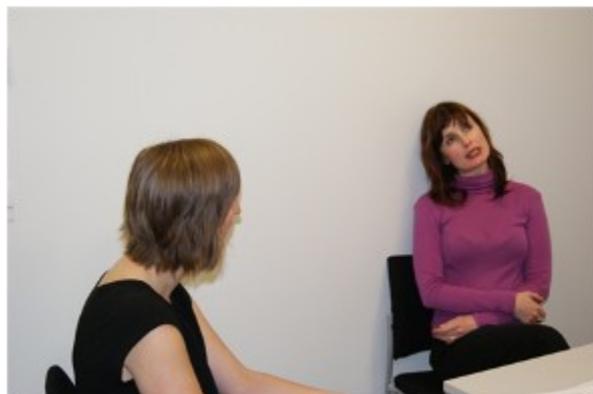


There was a lot of serious work done in the regions

We started the year with a bang. Each centre puts on a simulated car crash and students work with ambulance and fire brigade personnel who often also use the opportunity to train new recruits.



Students saw lots of patients in the regions as they worked in the rural hospitals and GP surgeries. Each patient had a story to tell and lessons to teach. The students presented short and long cases, discussion groups were held and a lot was learned. They saw cases of accident victims with hypothermia and ruptured spleens, congenital cardiac abnormalities, myasthenia gravis, occipital horn syndrome, paranoid schizophrenia and many, many more medical conditions.



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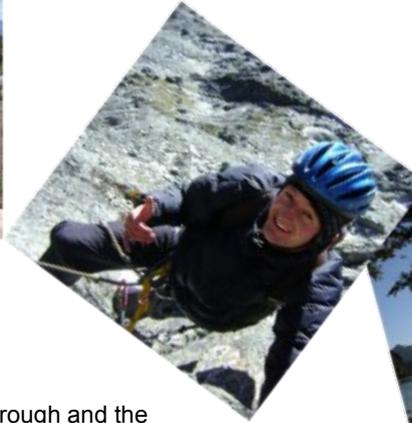
The students performed minor procedures, some on patients and some on animals (under suitable supervision of a vet).



They worked on the Mobile Surgical Services bus, here performing a nasotracheal intubation successfully



There was opportunity to enjoy the regions



The vineyards and beaches of Marlborough and the Remarkables in Queenstown

The year ended with a party hosted by the students of Marlborough in their fabulous beachside residence.



Dodgy Lot

BEN CURRAN - photo

By KATHARINE PICKFORD - The Marlborough Express

University of Otago medical students, from left, Elinor Millar, Cindy Grobler, and Helen Saywell and Mike O'Connor, front, swapped their stethoscopes for sweat bands and ran a dodge-ball tournament to raise money for a parents' room at Wairau Hospital's new children's ward to be opened in November.

Teams of six were invited to battle it out in the game where participants try to hit other players with balls and avoid being hit themselves. A 2004 movie, *Dodgeball, A True Underdog Story*, starring Ben Stiller and Vince Vaughn, raised the profile of the "sport" and inspired teams looking for costume ideas. The best-dressed team received an award. A sausage sizzle was held and a bar was available after the game.

The organisers were fifth-year students based in Marlborough for the Rural Medical Immersion Programme.

Medical student Cindy Grobler said the parents' room would be a place for the parents of ill children to watch television, have a cup of tea and sleep after the 9pm curfew. "Most parents prefer to stay in, if they have kids sleeping over, especially if they are young," Miss Grobler said. "You can pretty much guarantee at least one parent will stay the night."



Pat Farry Rural Health Education Trust

The enormous contribution and dedication to rural health in New Zealand made by the late Dr Pat Farry has been recognised through the establishment of an education trust.

Queenstown-based Dr Farry died suddenly while working locum duty in Twizel on October 8, 2009. He was 65.

In memory and in recognition of Dr Farry's dedication, family and friends have established the Pat Farry Rural Health Education Trust to commemorate his achievements and to further develop and maintain his vision.

"Pat made an enormous contribution to rural medical education and it is fair to say that he not only helped in its revival, but possibly in its very survival," said Trust Chairman John Farry.

"At the funeral of his brother, the late Robert Kennedy said: 'Most people see things as they are and say: Why? My brother saw things as they could be and said: Why not?'"

"My brother Pat Farry held a strong belief in precisely the same principle," said John Farry.

The Objectives of the Trust are to support the sustainability and quality of health services to rural communities by:

- Supporting the provision of innovative patient-centred rural community-based health education;
- Utilising real life experiential learning, integrating primary, secondary and tertiary health care;
- Ensuring high quality inter-professional teaching associated with rural health teaching centres;
- Encouraging interested undergraduate and post graduate students to pursue a career in rural health practice;
- Enhancing links between rural general practice, rural hospitals and urban teaching hospitals;
- Enhancing the development of distance education technologies in health education;
- Supporting rural academic career opportunities and encouraging both recruitment and retention of rural health professionals.

The other Trustees are Pat's wife Sue, Stuart Gowland, John Hillock, Branko Sijnja, Kirsty Murrell-McMillan and Michele Wilkie.

Donations to the Pat Farry Rural Education Trust can be made to PO Box 1252 Queenstown, or visit www.patfarrytrust.co.nz.

Outcomes

It was a mixed year. Eighteen students sat finals, all passed with one achieving distinction. We were sad to lose one student through a total career change early in the year and one was not awarded terms.

Graduates

It was a thrill to see the 2009 class graduating at the end of the year. Congratulations all of you.



Thanks

Many thanks to Jim Reid, Michele, Sharon, the coordinators, teachers and administrators for their support and advice during this difficult year. Thanks to the students who took a punt and came into the RMIP and without whom there would be no programme. Finally thanks to Janine and the fantastic actors, their fortitude and consistency is a tribute to them.

Rural Medicine: immerse yourself!

RURAL MEDICAL IMMERSION PROGRAMME



AIMS of the RURAL MEDICAL IMMERSION PROGRAMME

- To utilize real life experiential learning, integrating primary, secondary and tertiary care
- To encourage interested students to pursue a career in rural general medical practice
- To enhance links between rural general practice, rural hospitals and urban tertiary teaching hospitals
- To enhance the development of distance education technologies in undergraduate medical education
- To provide rural academic career opportunities and hence encourage both recruitment and retention of rural doctors
- To utilize the large range of rural community clinical learning experiences which are not available to students in tertiary teaching hospitals
- To undertake continuous evaluation of the course using defined criteria of success

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We're on the web!

<http://rmip.otago.ac.nz>