ASA-GHO Resident International Anesthesia Scholarship and ASA Overseas Training Program in Guyana: Two Reports From the Field

Whitney McLeod, M.D. Berend Mets, M.B., Ph.D., FRCA, Chair Committee on Global Humanitarian Outreach

Dr. Whitney McLeod, Resident International Anesthesia Scholar, reports:

Less than 12 hours after arriving in Guyana, I introduced myself to the staff at Georgetown Public Hospital Corporation (GPHC) by walking in and immediately breaking a rule. In attempting to find my soon-to-be coworkers, I stepped over a yellow line on the floor delineating an area requiring scrubs from the entryway where anything could be worn. Still in my street clothes, I learned how accommodating my hosts would be when they handed me a pair of scrubs, gently guided me back out and helped me find the locker room.

I had arrived in Guyana with arrangements made through the Resident International Anesthesia Scholarship. Last fall, just prior to my scheduled departure to Ethiopia, a crisis there necessitated cancellation of my planned trip to the CURE International hospital in Addis Ababa. As an alternative location, the ASA Committee on Global Humanitarian Outreach (GHO) helped arrange my visit to Georgetown, the capital city of Guyana.

After changing into scrubs that first day, I joined an anesthesia team consisting of a consultant, a senior resident, a junior resident and a nurse anesthetist student – all in the same O.R. This team had started working through their day's case list, which included a thyroidectomy, a mastectomy and a thoracotomy. I observed diverse approaches and supplies that one may expect in anesthesia care in a resource-limited setting. The propofol supply had recently waned so I quickly relearned the pharmacology of sodium thiopental. For the thoracotomy, the residents would choose one of two endotracheal tubes, a 35Fr or a 37Fr, place it without a fiberoptic scope and then verify placement via auscultation.



Georgetown Public Hospital Corporation, Georgetown, Guyana.

Although you will find such limitations in any resourcelimited environment, Guyana stands out from other overseas work that I have done in that the young anesthesia residency there is full of anesthesia providers eager to share learning experiences with a guest resident. On my arrival, Dr. Susan McConnell, a U.S. volunteer and Dr. Alex Harvey, the residency program director in Guyana, helped me navigate a complex system of training. Trainees include nurse anesthetist students, nurse anesthetists, medical students, interns, medical officers and residents who are all supervised by registrars and consultants. Consultants generally have the highest level of professional responsibility, but registrars are also fully trained, independent practitioners.



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Fewer than 10 permanent consultants and senior registrars, trained in various countries from Canada to Cuba to China, are available to teach every trainee in Guyana. As I would soon learn, visiting professors help alleviate this overwhelming burden.

During my third week, Dr. Berend Mets, Chair of the ASA GHO Committee, arrived and daily taught me, along with Guyanese residents, as part of the ASA GHO Overseas Training Program (OTP). As a resident, I have limited knowledge of international volunteer opportunities available to consultant anesthesiologists. I discovered that the OTP affords such volunteers a teaching experience that goes far beyond the provision of clinical care. I also developed a sense of the future possibilities for exchange between U.S. and Guyanese residents. For example, we could prepare journal clubs and morbidity and mortality conferences to host prior to traveling to Guyana. The residents also expressed great interest in oral board practice. Visiting residents may benefit in their own studies from preparing to assist with this request!

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As a guest, I often hoped that the residents appreciated having us in their presence as much as I appreciated this opportunity. On our last night in the country, they alleviated my doubts about this when two of them stopped by to deliver us parting gifts from the group and to bid us farewell. I find it hard to describe how appreciative I am that not only did I get to take such an educationally beneficial trip during my residency, but also that I had the fortune of meeting my global colleagues. The first class of residents from Guyana, Dr. Onica Higgins and Dr. Youlanda Hendricks, trained on a similar schedule to mine. We will all be graduating residency this summer, only in different countries. To have been welcomed by them and the other residents at this point is an honor that I will carry with me throughout my career.

Dr. Berend Mets, ASA GHO Volunteer, Reports:

Having had the opportunity to spend time in Georgetown in 2014, bringing a group of ASA volunteers to teach pulse-oximetry for a GHO Lifebox program initiative, I became keenly aware of the fledgling residency training program that Dr. Alex Harvey, a Guyanese consultant anesthesiologist, was establishing at the Georgetown Public Hospital. Subsequently, on hearing that the Canadian Anesthesiologists' Society International Education Foundation (CASIEF) sought ASA's help in supporting this residency training program, I endeavored to help bring American volunteers to teach here.

Together, the ASA GHO Committee and CASIEF have now organized the opportunity for American and Canadian volunteers to teach for more than six months a year in support of this residency program. The ASA GHO side of the program is ably coordinated by Drs. Julia Wienkauf and Kerry Kreidel. American consultant anesthesiologists volunteer to spend two to four weeks, providing clinical teaching in the operating room and ICU, while delivering lectures on a structured curriculum coordinated by Dr. Alex Harvey, the program director for the residency training program, now comprising 12 residents.



Dr. Berend Mets, Dr. Whitney McLeod, Dr. Alex Harvey, Dr. Onica Higgins and Dr. Bibi Mohamed.

The four-year residency training program is structured to fulfil the criteria for graduates to achieve a master's of medicine in anesthesia and intensive care under the auspices of the School of Medicine in the Faculty of Health Sciences of the University of Guyana, supported by McMaster University in Canada, where the residents rotate to achieve specialist experience in cardiac and neurosurgery that cannot be achieved in Guyana.

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I visited the program from January 28 to February 11, 2017, not as the chair of the committee but simply as a volunteer teacher to see how it is all working out. Here is my report:

My two-week period overlapped with the four-week attachment of Dr. Whitney McLeod to Georgetown Public Hospital. Dr. McLeod, a Resident International Scholarship Recipient, joined the Guyanese Residents at all of the didactic lectures I gave.



From left: Dr. Whitney McLeod, Dr. Berend Mets, Dr. Youlanda Hendricks, and Dr. Onica Higgins.

A proposed teaching plan for my stay was provided by Dr. Alex Harvey at least four weeks before my arrival, allowing me to prepare for the planned lecture series. Didactic lectures were conducted by laptop, roundtable discussions/ presentations, in an office fit for the purpose and seconded to the department of anesthesia at Georgetown Public Hospital.

The lectures were meant to be held in six scheduled two-hour blocks, the time adjusted each day depending on the clinical workload and availability of the residents. A variety of sessions were conducted over the two weeks:

Curricular Subject Matter

- 1. Cardiac anatomy and physiology.
- 2. Shock: circulatory, cardiac and obstructive.
- 3. Respiratory anatomy, physiology, respiratory mechanics, lung function testing.
- 4. Valvular heart disease, diagnosis, anesthesia management.
- 5. Cardiac conduction physiology, abnormalities, clinical EKG scenarios.
- 6. Respiratory disease, tracheal stenosis, asthma, empyema and thoracic anesthesia physiology and management.

Clinical Teaching

Teaching was conducted in the five operating rooms on a daily basis, helping conduct some of the anesthetics, as well as consulting on cases with the five attending anesthesiologists (all of high caliber and ability) in the department.

Accommodation and Stay in Georgetown

Project Dawn, a converted former clinic, was very comfortable and welcoming. It was also completely safe, as it is gated and guarded around the clock. Just down the road is the Seawall, a wonderful location for all Program Dawn guests to go for a walk or run, or to meet many local residents doing the same thing.

An airtrip to Kaiteur and Orinduik Falls is not to be missed. Kaiteur is the highest waterfall in the world at 741 feet. It was spectacular – there were only 10 tourists at this world-class site, the number that could fit into the plane.

The ASA-GHO overseas training program in Guyana is off to a tremendous start. The department of anesthesia at Georgetown Public Hospital is well respected in the institution and is managed by competent faculty. The residents are highly engaged. Volunteers are warmly welcomed by all in the department and our careful input and ideas are certainly valued. I encourage willing ASA consultant volunteers to help us train the next generation of anesthesiologists in Guyana.

Please visit the GHO Committee webpage at **www.asahq.org/gho** to learn more.



Dr. Berend Mets (left) with Dr. Whitney McLeod at Georgetown Public Hospital in Guyana.