

LETTERS TO THE EDITOR

Anaesthetics: a year out

Sir

I trust I will be forgiven for the pun in the heading of this article. It has recently been my good fortune to have worked in the Anaesthetic Department at the Royal Victoria Hospital, Belfast. As a doctor pursuing a career in accident and emergency, I considered this part of my overall training. During that year I have had the varied experience of working in many different areas of anaesthesia including general surgery, orthopaedics, neurosurgery, ear, nose and throat and cardiothoracic. These are all spheres of medicine we encounter in accident and emergency departments, and it is useful to see what happens to patients after they have left our department and so increase our knowledge and understanding of the breadth of accident and emergency work.

Initially, there is a considerable amount of new information, special techniques and practical procedures to be acquired. Several events can be considered as landmarks (i.e., your first solo general anaesthetic, initial spinal and regional block). Later on, you progress to doing these on your own, but with your senior colleagues near at hand to help and assist in your new field of operation. In time you feel you are part of a team and you are being more productive and useful. So in due course there is a sense of achievement and recognition.

On the emergency side of the work, the junior anaesthetist can be involved with cases requiring urgent intubation because of trauma, overdosage or other pathological conditions. He will be involved in the transfer of patients from the intensive care unit to the CAT-scanner and sometimes the unfortunate cases of brain death where kidney or corneal retrievals are performed. The work is both varied and interesting, although at times it may appear that everything is occurring at once and you wish it would all evaporate.

My year in anaesthetics has been a new challenge and I consider it a worthwhile experience. I have been taught new skills and given a wider medical knowledge. It opens up a completely new sphere and the ability to intubate and place intravenous lines, with a higher than average success rate, are invaluable skills for any doctor, but a period of training in anaesthesia is a very beneficial experience for those involved in accident and emergency medicine. I would encourage all trainees in accident and emergency medicine to secure an attachment to an anaesthetic department for at least 6 months and consider it to be an essential part of their training.

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