

## **Botswana Global Health Program Anesthesia and Critical Care Residents and Fellows**

We are delighted to hear that you are interested in joining us in Botswana! This summary will give you more detailed information on the day-to-day activities you could be involved in. This rotation will fluctuate in terms of its composition. The time spent in the operating theatre versus ICU will vary based on the hospital's volume as well as the resident's interests.

### Operating Theatre Experience:

With the advent of a new anesthesiology residency in Botswana we have modified the experience from previous years to include the option of teaching and practicing alongside new local residents in the theatres at Princess Marina Hospital, the primary referral hospital in Gaborone. The cases include general, trauma, Urological, ENT, neurological, OB/GYN and orthopedic surgeries. The theatres at the smaller district hospital (Scottish Livingstone, SLH) in Molepolole are covered by a part-time anesthesiologist and full-time nurse anesthetists. There are three theatres available but due to continuing limitations on resources, one of them is usually closed at any given time. The surgeries are composed of pediatric eye operations, general surgery bread-and-butter cases (pediatrics and adults), and OB/GYN (cesarean sections as well as some bigger gynecological) cases. Throughout Botswana the vast majority of cases are done under spinal when possible, and most cases are done open, as laparoscopy is still in its nascent stages.

There are also ophthalmology and cardiac campaigns that intermittently rotate through SLH. If they are in Botswana during your time, you are more than welcome to be involved in the perioperative care of their patients.

### ICU Experience:

**SLH:** The ICU is a closed unit comprised of six beds, which includes two isolation rooms. The commonly encountered medical conditions include HIV/AIDS (along with its complications such as cryptococcal meningitis), tuberculosis, chronic lung disease (such as severe fibrosis in miners), heart failure, brain injuries (hemorrhage, embolic events, trauma) and diabetes.

**PMH:** The ICU is a semi-closed unit comprised of 8 beds, one reserved for pediatric cases. The commonly encountered medical conditions are similar to those at SLH with the addition of those needing dialysis or other subspecialty support. The ICU also has a significant number of post-operative patients, which gives it a more “surgical” component.

The ICU team also has an increasingly greater reach into the rest of the hospital as well. Assessing sick patients on the wards and emergency department will further the participants’ exposure to the types of illness seen in Botswana. Residents will learn how to manage very sick patients with minimal resources, and will also develop their teaching skills while working with the medical officers and residents in the unit.

#### General Schedule:

The majority of your experience will take place at the University of Botswana and Princess Marina Hospital. The surgical specialties must rotate days throughout the week due to theatre space shortages, thus no two days are the same in a week. Working in the operating theatres here, getting comfortable with the different anesthesia machines, drugs, and general environment allows participants to see the myriad of ways in which a safe anesthetic can be provided.

The resident will be able to see the daily schedule and choose the cases in which they would most like to be involved. If there are no cases, or the theatres end early, the resident can then move to the ICU and join rounds or help with consults and teaching sessions. Fridays afternoons will be spent in conferences with the UB residents in didactics and hands on learning.

#### Projects/Presentations:

You are encouraged to participate in research and quality improvement projects while in Botswana. Dr. Clune will touch base with you before starting your rotation to get an idea of your research interests and share what he has in the works.

You will also be assigned to lead at least one educational session for the residents, medical officers, interns, students and/or nurses. The session is 60 minutes, so planning for a 45-minute talk will leave enough time for questions at the end. Topics for presentation will be discussed and decided with Dr. Clune. The conference format varies from PowerPoint presentation, purely hands-on lessons and problem-based question-and-answer style interactions. There are also multiple trainings occurring throughout the month and your help is always welcome.

### Final Thoughts:

If you decide to join us, please be sure to read through the files thoroughly once you have received them and begin posting your documents to dropbox once your invitation is received. The two most important ones are titled *“Resident’s guide to BIDMC BOTSWANA PROGRAM May 2018”* and *“Pre-Travel Logistics, Botswana Global Health Program”*. Botswana is quite strict with its required documentation for licensing, and the instructions in the latter document should be followed closely so that you can be up and running soon upon arrival.

Feel free to reach out with any questions or concerns, and we will do our best to help you feel prepared for this elective month. We hope it will be an enjoyable and educational rotation!

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