## An Elective Experience in Japan

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The life of a medical student is not easy. It starts with getting into a medical college but learning has no end. There is a strong competition for limited number of residency spots available to international students at developed countries. The desire to do an international clinical elective forced me to search for opportunities for clinical electives abroad. Having an interest in cardiac surgery and knowing that United States, United Kingdom and Canada have fewer training opportunities for international medical graduates, I decided to look for a different developed country that could offer me the best training.

After searching for a long time online, I concluded that the University of Tsukuba, Japan was the right place for me. The reason that I chose this place for my clinical elective was the relatively easier path that they offer as compared to the other international medical graduate (IMG)-friendly countries noted above. Apart from this reason, I was also attracted by the Japanese culture. They are known to be humble, and the respect that they showed was a big motivational factor.

I mailed the person in charge of the international affairs at the university to inquire about the procedure to obtain clinical clerkship. I was told that I can apply for one to four departments, for two weeks each. I chose cardiac surgery, gastrointestinal surgery and breast surgery for a total of six weeks. Requirements included an English language certificate from my medical school, a vaccination certificate and a letter of recommendation from the principal of my school. After sending all the relevant requirements and getting the host university's approval, I was able to get Japanese visa on my passport.

Tsukuba Science City is named after a mountain 'Tsukuba San' and is approximately a 90 minute drive from Tokyo. Most of the city residents are students and faculty members as the city has several universities. Nearly every tenth person I met was a foreigner in Japan.

After landing at the Narita International Airport, I reached Tsukuba in approximately 100 minutes. A Ph.D. student was waiting there to welcome me after which she directed me to my guest house. It was a few minutes' walk from the hospital building. The accommodation was arranged by the university and cost me 2500

Japanese Yen for a day.

On the morning of the very first day of my clerkship, I went to the International Office where I was warmly welcomed. I was given a cell phone through which I could be contacted by local students or the faculty members, a library card and a key for student's locker. Soon after, I met the professor of gastrointestinal surgery who introduced me to the rest of the faculty members, which included the assistant and associate professors, the residents and the students. A resident was assigned to answer my queries and translate everything that was being discussed. They communicate in Japanese and even their computers were in Japanese. I realized that overcoming this language barrier is not going to be as easy as I had imagined.

The morning meeting began and the patients on list were discussed, followed by a morning round. Then we moved to the operation theatre or the operating room (OR), as they call it. The case to be operated was discussed with the operative plan. There were afternoon meetings and rounds, where physicians from all relevant specialties met together and decided the next step in the management of the patient. My schedule remained the same for the next two weeks, where I mostly observed cases pertaining to cancer, most of which were gastric cancer and colon cancer. The most interesting surgery was the subtotal esophagectomy with tri-area lymph nodes resection. I got to witness total esophagectomy with as little as 100 ml blood loss. The laparoscopic surgery for higher anterior resection was also worth observing. The high standards of sterilization were commendable. During my rotation, I was also asked to prepare a case presentation, where my performance was much appreciated.

Next rotation was the most awaited cardiac surgery, where the patients' presentation was in bimodal age groups. Either patients were infants with congenital anomalies or older with coronary artery disease or valvular defects. I was welcomed to scrub in and assist in surgeries. During my rotation, I explored the new surgical treatment modalities for congenital cardiac anomalies like tetralogy of Fallot (TOF), transposition of great arteries (TGA), ventricular septal defect (VSD) and atrial septal defect Conflict of Interest: None declared

This article has been peer reviewed.

Article Submitted on: 29<sup>th</sup> September 2012

Article Accepted on: 6<sup>th</sup> February 2013

Funding Sources: None declared

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Cite this article: Moughal U. An elective experience in Japan. J Pak Med Stud. 2013; 3(2):68-69 (ASD). However, the procedure that fascinated me the most was total cavopulmonary connection (TCPC).

Cardiac surgery was followed by breast and endocrine surgery elective. The faculty was very friendly, like I experienced in my previous rotations. With a similar schedule as was in my previous rotations, I got to observe and assist sentinel node biopsy, subtotal thyroidectomy, mediastinal and neck lymph nodes dissection, adrenalectomy and mastoplasty.

The overall hospital experience was very informative, and it added a lot to my knowledge and experience. The best part was the hands-on experience that I got while assisting surgeries with experts. At the end, I was awarded an attendance certificate and letter of recommendation from three different departments that defined me as an excellent student. To practice medicine in Japan, one has to pass the Japanese NBME, which requires one to be fluent in Japanese language and to clear the Japanese Medical Licensing Exam.

I found enough time on weekends to explore the beauty of Japan. I visited many cities, of which Tokyo, Yokohama, Hitachi, Kawasaki, Mito, Tsukuba and Chiba are a few. It is a beautiful country with a lot of beaches, waterfalls, mountains, volcanoes, and greenery - all in one place! I also got to witness their traditional festivals of Omersari and Hanabi.

During the lunch breaks at the hospital, the students used to come to me and ask questions about me, my country, my religion, my customs and traditions, my people, and my life style. I had a lot of trouble in obtaining Halal food owing to the fact that the ingredients were written in Japanese and I was not able to read Japanese. Six weeks in Japan where the communication is purely in Japanese, the survival was tough but the clinical experience was worth it. I experienced the best of the Japanese culture; the people are extremely modest, true in their dealings, and men of words who value their customs. They gave me such a warm welcome that I did not feel an odd one there. I will surely miss the rich culture and the welcoming gesture of the Japanese people.