

THE PULSE



Spring Edition 2019

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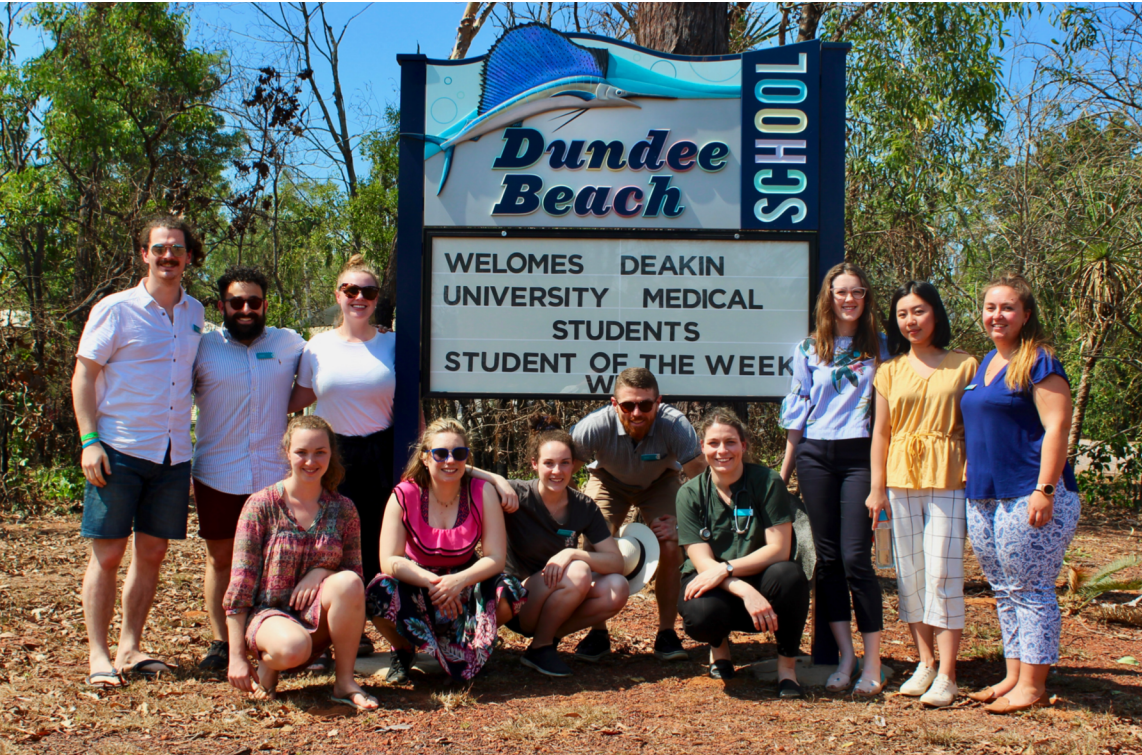
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MeDUSA

Deakin Medical Students' Association

THE PULSE

The Pulse is a medical student magazine published on behalf of the Deakin Medical Students' Association, the official representative student organisation for the Deakin Medical School.



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MESSAGE FROM THE PUBLICATIONS CHAIR

Welcome to the another issue of the Pulse! We are almost finished with the year. This issue we've got interesting articles from interesting people, and a snapshot of some incredible things that Deakin medical students have done these last few months.

Please feel free to share the link with friends and family :) Sadly, my time as publications representative comes to an end with this edition. Its been a great journey meeting many different people to bring you the latest. I hope you've been informed, entertained and thank you for your continued interest in the Deakin medical community.

Liem Tran - MeDUSA Publications Chair 2019



CROSSIN THE BOR

A MAMMOTH RIDE FOR STRUGGLING YOUTH

WHO - WE - ARE

We are a diverse team of 15 men and women from a range of backgrounds and professions. The majority of us study medicine together, while other group members are involved in creative fields, in careers such as graphic design and advertising. Those of us studying medicine have had unique exposure to the challenges that mental health providers face in the treatment of mental health in Australia. And, like most Australians – many of us have been exposed to the harsh realities of mental illnesses first hand or through loved ones. With an experienced graphic design team on board and support from a media representative, together we make a formidable team uniquely poised to bring attention to mental illness in Australia.

WHAT - WE - AIM - TO - ACHIEVE

Our aim is to ride across the Nullarbor plain from Geelong to Fremantle, raising money for the Black Dog Institute; a fantastic Australian organisation that organise and fund research into mental illness and how to treat it. They are known as a translational research institute and focus on facilitating the application of medical research into tangible interventions for those suffering from mental illness.

In addition to raising money to fund life-saving research, we also hope to reduce the damaging stigma that surrounds mental illness by speaking openly about our personal reasons for choosing to embark on this challenge. As part of our fundraising effort, we will be reaching out to media outlets to promote our cause. We will also be engaging heavily with social media platforms, thereby reaching out to our existing networks in an effort to both raise money and get serious conversations about mental health started with our friends and family.

FOLLOW OUR JOURNEY



@crossinthebor

Email:

crossinthebor.charityride@gmail.com

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<https://teamblackdog.everydayhero.com/au/crossin-the-bor>



NOMAD in Darwin



We sat down with Jo Eaton (2nd year), to hear more about her recent experience in Darwin...

Jo Eaton (MD2)

From crocodiles to pre-schoolers, 11 second year medical students braved it out in Darwin for a week of hands on health education with primary schools throughout the region.



We started off in Litchfield National Park to prepare ourselves for the week ahead which would see us working with almost 900 children in total. Depending on their age, these students either had the opportunity to participate in our Teddy Bear Hospital visits or our High School Outreach workshops which consisted of first aid, infectious diseases, beer goggles masquerading as 'low vision glasses' and bandaging 'broken' arms.

The kids seemed to have so much fun with it that when it came to question time, there was a significantly higher proportion of "we had a great time" comments than any genuine questions. We took that as a positive reflection on our work and chose to ignore that the majority of them didn't actually know question words. Yay for working with preps!



The older students also had a blast, getting to watch their teachers try out the 'low vision glasses' and learn about how the eye works as well as a myriad of other things.

Whilst there wasn't consensus among our group as to the preferred year level, we unanimously agreed on our favourite school. After driving over 2 hours out of Darwin we came to a place called Dundee. A town of maybe 200 people with **no** GP, nurse or even first aid facilities. What Dundee did have though, was a school with 15 amazing students. We had the privilege of spending the day getting to know each and every one of these amazing kids, getting shown through all the rock pools on the beach, talking about puberty with the older few, reading and sharing stories, and watching their eyes light up at the workshop equipment we'd brought out.



One of the older students, Ty, had just finished writing a persuasive piece in class on how desperately the community needed a doctor. That day, the principal joked that there were more doctors in Dundee than in Darwin. We'd gone to cultural awareness training, heard from GP's in the NT and had a wonderful day at Menzies School of Public Health learning about the unique issues faced by the NT, but none hit home quite so much as this. The rural health workforce shortage is a very real problem and a key reason we went up to Darwin. We sowed the idea of working in the healthcare sector, what this would look like and how each child was creative and skilled enough to make this happen. I hope future years will continue to go back and nourish these ideas, as I have no doubt that they will one day bear fruit.



THE EVOLUTION OF THE TEDDY BEAR HOSPITAL

By Mieke Foster (MD3) and Christina Benke (MD2)

The Deakin Teddy Bear Hospital aims to reduce childhood anxiety towards healthcare settings, improve the health literacy among children in our community, enhance the paediatric communication skills of Deakin health students, and promote interdisciplinary networking and collaboration between health disciplines. Many Deakin health students will have attended one of our primary school visits, public events or training nights. This article aims to portray the history, recent achievements and future goals of the Deakin Teddy Bear Hospital.

The first recorded Teddy Bear Hospital was run in 1994 by [Liz Santen and Theresa Feldman](#) in Kentucky, United States. Since then, it has grown to be run by at least [30 universities worldwide](#), including at least 8 universities in Australia. There is an annual [Teddy Bear Hospital National Conference](#) that takes place in the United Kingdom, and there have been numerous [publications](#) from [across the world](#) on the benefits of the program. [The University of Melbourne](#) and [Monash University](#) both started their Teddy Bear Hospital programs in 2009.



NOMAD also started the Deakin branch of the Teddy Bear Hospital in 2009. To create the curriculum, **Claire Joyner** liaised with a then registrar from the Royal Children's Hospital. The first Teddy Bear Hospital had six education stations including slip/slop/slap, healthy eating, teeth brushing, needles, exercise and scrubs dress up. In 2010, the program expanded from a pilot of 30 volunteers to a team of 50 medical students who visited three local primary schools. Between 2010 and 2016, the program steadily grew, including having its first public event at Waurin Ponds Shopping Centre in 2015.



In 2017, **Tara Grayson**, **Sarah Laing** and **Mieke Foster** decided to try and pioneer a larger public event than had ever previously been achieved, this time at Westfield Shopping Centre. With 70 medical and allied health student volunteers involved, we raised over \$600 for the Children's Ward of the University Hospital and saw over 300 children throughout the day. The success of this event heralded a massive expansion of the committee, from three representatives to 11 Teddy Bear Hospital committee members from a range of medical, nursing and allied health disciplines.



FEATURE

The new, expanded team got to work in 2018. With **Ryan Cooke** and **Rachael Marshall** running the schools and events portfolios respectively and **Mieke Foster** as Chair, the program saw a record 300 volunteers visit 16 schools across Geelong and a highly successful event at [Deakin Waterfront](#), overall reaching over 1,000 children in our area. The involvement of allied health grew across nursing, optometry and medical imaging. We set up a number of new partnerships including with the Deakin Child Play Therapy to provide ongoing training, a visit to the Wautharong Aboriginal Co-Operation Early Learning Centre and re-established the RCCS Teddy Bear Hospital visits within rural townships. We had a very hardworking committee that continued to build and create new opportunities within the program.



This year, with **Jacob Gordon** and **Sarah Kensworthy** taking over the schools and events portfolios and **Christina Benke** coming in as Chair, we ran a total of 25 primary school programs and [two large events](#). We grew to have 450 registered volunteers and continued to build our external partnerships, such as with the Waurin Ponds Shopping Centre School Holiday Program. We also travelled with NOMAD on a tour of remote Northern Territory where we ran 7 schools visits and engaged with close to 700 children. The program expanded to the clinical sites, with Teddy Bear Hospital programs being run in Warrnambool and Ballarat. Our [Ballarat event](#) was run in collaboration with four other universities and received [significant media attention](#), saw 600 children attend and raised \$872 for the Ballarat Health Services Children's Ward.



In order to continue to grow the program, we have now established the **Deakin Teddy Bear Hospital** as a separate entity that will continue to work closely with NOMAD. In 2020, **Ryan Cooke** will again join the team, this time as President, with the program moving to central Geelong to be based nearer Barwon Health. We will have 18 committee members take on a number of new roles including sponsorship, training, equipment, media and more. We hope to increase the spread of involvement over the four years of the Deakin MD as well as broaden the participation of nursing and allied health students.

We hope to build a stronger relationship with Barwon Health, including raising the possibility of running our events at the hospital. This is based on our success at Ballarat, where we received feedback that it made sense to allay children's fears of coming to the hospital by having them associate their local hospital with the program. We hope to start running social events that encourage the networking of volunteers, including an annual end-of-year celebration. We also hope to build on our existing relationship with the Deakin Child Play Therapy team to generate a curriculum for volunteers to be able to improve their paediatric communication skills.



Rural children are significantly disadvantaged when it comes to accessing health awareness programs, and we want to continue to increase our reach within rural Victoria. Previously, it has been difficult to find volunteers for school visits that are further away. This year, we had to cancel a trip to Colac at the last minute due to insufficient sign ups despite significant promotion. We hope, by collaborating with NOMAD for these visits, we can provide further incentives for volunteers, such as transport, a meal or a tour around the local town. We also hope to continue the Northern Territory trip with NOMAD.

Dr. Claire Joyner is now in her second year of advanced training in paediatrics, dual training in general paediatrics and perinatal and neonatal medicine. She hopes to be able to provide a general paediatrics service for children with complex needs close to her rural hometown in the Gippsland region, which currently lacks any paediatric care.

“Navigating the health system can be challenging at the best of times, and even more so when complex children have many subspecialties involved. It would be nice to be able to provide a service that can help them navigate and liaise with so many teams, while also keeping an eye on their overall health and development, which sometimes get missed!”

We are very excited about what the future of the Deakin Teddy Bear Hospital may look like, and we hope the program continues to inspire future healthcare professionals to work together to help the children of Western Victoria. We are so grateful to all the volunteers over the years who have helped make the program possible, to the many generations of NOMAD committees for their enduring support, and to our own past and present committee members for their hard work. If you are a Deakin medicine, nursing or allied health student, we would love for you to get involved as part of the Deakin Teddy Bear Hospital team in 2020, in what is sure to be an exciting year. To get involved, [click here](#). Applications close Sunday 20th October at 5pm.



FEAST ON DIVERSITY

ON THE UNION GREEN
AT DEAKIN UNIVERSITY,
WAURN PONDS

MUSIC, FOOD, SPORTS, FESTIVAL

Free Entry - \$5 for dinner

FRIDAY OCTOBER 25

5pm - 9:30pm



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FEAST ON DIVERSITY

6 AMAZING MAJOR PRIZES AND 15 MINOR PRIZES

Major Prize 1

LITTLE CREATURES

BREWERY TOUR with
3 x T SHIRTS
worth \$416



Major Prize 2

SURF COAST
COFFEE TOUR
worth \$200



Ginger
Monkey



moby



Major Prize 3

\$200 COLES/MYER
GIFT CARD
donated by Specsavers

Specsavers

Major Prize 4

YOGA BUNDLE

Worth \$170



Major Prize 5

GEELONG COFFEE TOUR
worth \$140



THE
VILLAGE
DOOR

Major Prize 6

FOOD LOVERS
PACK worth \$130



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FEAST ON DIVERSITY

6 AMAZING MAJOR PRIZES AND 15 MINOR PRIZES

Minor Prizes

Geelong Fc Poster

5 x Gravity Worx passes worth \$80

2 x Remedy Kombucha slabs worth \$48 each

Ark clothing Scarf + styling voucher worth \$90

The Book Bird voucher worth \$20

The Rock climbing gym Family pass worth \$70

Hawthorn Fc poster

\$100 Torquay Bowls club voucher

15 x swim passes to Geelong Leisure centers

World Series Paintball voucher worth \$79

curlewis 100 ball range voucher

vinaceous! Blanc de Blancs champagne

4 x bottles of wine

5 x movie vouchers to the Pivotonian cinema



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By Eb Cassidy (MD2)

Warning: This feature contains references to self-harm and suicide which could act as triggers to some readers.

I hear the muffled sounds of ward round being conducted in the room next to mine, followed by a door closing gently and then the clickety-clack of footsteps coming down the corridor towards me. I burrow deeper into my thin hospital blanket, drawing the off-white folds up to my chin... this is not going to be fun.

There's a cursory knock on the door (left open so the nurses can keep an eye on me) and the consultant marches in, trailing a team of fresh-faced medical students and the overnight intern. A ripple of unease passes through the room as the students half-recognise me – this isn't my rotation group, I'm supposed to be on the surgery ward this morning, but my short purple hair sticks out like an erythematous thumb in a lecture theatre full of

natural blondes and brunettes, and it's thrown into stark contrast against the white sheets of the hospital bed.

The intern shuffles through his notes to find my file. He's bleary-eyed from too many hours without sleep – I met him first nearly twelve hours ago, when he admitted me to the unit from Emergency, and I doubt he's been home since.

"Laura Mesham is a twenty-three year-old medical student..." – more whispers at this – "... who presented to Emergency last night reporting suicidal ideation and feelings of panic. She was admitted just after 11pm, and has since..."

I feel a slow-burning anger start to ignite in my chest,

deep to my xiphoid process and extending superiorly until I can sense my face starting to flush. It should be me presenting patients this morning, reciting histories and vital signs to well-paid consultants and anxious juniors, but instead I'm curled up in a hospital bed listening to a sleep-deprived trainee explain how he stitched my arms back together last night. He finishes his summary and glances at the consultant, who nods shortly and starts grilling one of the students on assessment of the acute psych presentation.

I ignore the rapid-fire torture session being conducted at the end of the bed and stare at the walls, painted an antiseptic shade of grey from floor to ceiling.

approaching the bedside and mumbling something that sounds like a request for permission. I fix my eyes on him and glare furiously, daring him to come any closer, and silently pull the blanket further up so that it gathers over my wrists and hands. He dithers for a moment, glancing at the consultant. She stares back impassively, waiting, and the student sighs, reaches for my hands through the sheets to try to uncover my upper limbs.

I recoil like an angry cat, practically hissing as I slap his hands away with as much strength as I can muster. The effort makes my stitches sting, and I feel the bandages catch and tug on the dried blood underneath, but I don't care – how *dare* he try to expose me. The student jumps back – half

scared, half affronted – and retreats back to the safety of his group, rubbing his smacked wrists and looking dolefully at the intern, who smiles wryly and whispers something like *silence is not consent*. The other juniors stare at me, wide-eyed and perhaps a little frightened at the sight of a classmate gone feral, bandaged and bleeding in an acute care bed.

I could scream, I'm so angry and sad and humiliated, but instead I gather the blankets and wrap them tight around my upper body like my own personal straitjacket and turn to face the wall. My face burns with shame and my eyes sting but I refuse to let them see me weeping and weak, a failed fourth-year who couldn't handle the pressure of the late nights and early mornings and endless

exams and assignments...

I squeeze my eyelids shut to keep the tears back. The consultant looks down at me, coldly, then turns and leads the students out of the room, onwards to the next patient - probably a fat man with acute COPD or a little old NOF, maybe a heart attack or an unusual pneumonia if they're lucky. Someone cooperative, who'll let them examine her and be a compliant patient, that they can diagnose and treat and send away and think no more on – someone a little less like them, without the years of effort and heavy expectation staring back at them through accusing eyes.

AN ELECTIVE IN COPENHAGEN, DENMARK

By Andrew Macdonald (MD4)

Your elective at the end of fourth year is an amazing opportunity to broaden your horizon beyond Waurin Ponds. I spent five weeks at the largest hospital in Copenhagen with the cardiothoracic surgery team.

The opportunity to watch and assist in some incredible surgeries, including transplants and paediatric heart operations, was really special. Copenhagen itself is a very liveable city; safe and easy to traverse on bike. The Danish medical students are a lot of fun and there is a great university scene which is easy to integrate into. However, the most significant benefit of this elective was the level of organisation. Scott and the overseas team have done an amazing job building relationships over here, which allowed for greater flexibility in numbers and rotations. Being able to travel with four of my good friends is an experience few other electives offered.

There are a few things to consider before you pack your bags. The elective is free but the city of Copenhagen itself is eye-wateringly expensive so consider yourself warned. Also, to the surprise of no one, the Danes speak Danish. While 99% of people you met will be able to speak English this is not their default, making morning meetings, ward rounds and elevator rides an awkward affair. If you've ever felt like everyone in theatre is speaking another language this is your chance to experience that reality.



I avoided the white coats, didn't want to give the patients hypertension.



I didn't learn much Danish but you only get changed in the wrong room once before you learn words for "Men's".

In summary I would encourage you to have a genuine think about what you want to get out of your elective, and where is best place for you to accomplish that. If your heart is set on a non-English speaking country consider surgical and anaesthetic rotations, to limit your patient exposure. Also consider what you want to experience outside the hospital setting. My elective in Copenhagen was amazing but so was Sail Croatia, Oktoberfest, the Ashes and a multitude of other activities I managed to fit into 6 weeks. If you have any questions about Copenhagen or electives in general I would be more than happy to help you out.



What followed was a heated discussion about whether we were 'upstream' or 'downstream'.