

International Elective: Mexico
National Institute of Respiratory Diseases

I worked at the National Institute of Respiratory Diseases (INER) in Mexico City. INER is one of many hospitals comprising Mexico's National Institutes of Health. The hospital presented an interesting contrast between modern technologies (CT, MRI) and extremely rudimentary means of managing patient information (hand-filed radiographic results, typewritten patient notes, virtually no use of medical informatics). Patients come with a variety of pulmonary diseases. In contrast to the pulmonary diseases seen in the US, INER has a high prevalence of patients with interstitial diseases (alveolitis, pneumoconiosis, fibrosis) and with tuberculosis (be prepared for exposure to patients with TB, and note that no isolation procedures are used). Each of six to eight units is managed by a permanent group of attendings and nurses and are designated primarily to treat one or two groups of pulmonology patients. My experience within the hospital varied tremendously between the two different units that I worked on.

The first unit was disappointing due to the lack of structured patient care. The one resident was quite busy and unable to spend a lot of time teaching, rounds were brief and only formally made twice a week, admissions were not presented in a systemic fashion, and no equivalent of "Teaching Rounds" or "Attending Rounds" were held on the unit. The second unit that I worked on was significantly better in this regard. Twice a week we had a journal club where an article was presented and critiqued, usually two residents were present on the unit, the ward was smaller, admissions were presented while an attending and residents were seated around a table, and generally I felt more of an effort was made to include me in the direct management of patient care.

I did not spend considerable time thinking beforehand regarding my expectations for the month. My initial attempts to become an integral member of the healthcare team were frustrated by my lack

of fluency in Spanish and the challenges of becoming familiar with a different health care delivery system. It was frequently difficult for me to get over this sense of an "Observer Status". More realistic goals, such as learning more medical Spanish, becoming comfortable speaking with patients in Spanish, and becoming more familiar with life in a Mexico City hospital were more realistically accomplished.

A visit to a neighboring general hospital in Mexico City (Hospital de Nutricion) enabled me to see a more modern hospital whose services and facilities more closely resembled hospitals in the United States. I believe that this hospital or others like it may have offered a more structured learning environment and certainly exposure to a greater diversity of diseases. However, I imagine that regardless of location my lack of fluency in Spanish and my unfamiliarity with the healthcare system would pose similar obstacles as they did at INER.

Housing was provided with a Mexican family employed by INER. I paid \$400 for the month, and was provided with a comfortable room, meals, and laundry. As it turned out, I usually skipped breakfast, ate lunch at INER, and had a small dinner with the family at home, so I did not end up eating a lot with my family. While housing is also offered in dormitory style rooms at INER, I would recommend living with a family instead. The opportunity helped me to learn more Spanish, provided a welcome break from the INER campus, and enabled me to be included in many activities of the family that I would otherwise have missed.

I would be happy to speak in person with anyone that would like to hear more about my experiences.

Caleb Alexander, Class of 1998
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