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"Why Russia and St. Petersburg? And why anesthesiology?" were some of the most frequently asked questions in our surroundings. The answer is both simple and still worth mentioning. We are both related to that country by the background of our family, by speaking Russian as (a second) mother tongue and by having relatives in "Saint Pete" and Moscow. Nevertheless none of us has ever been there yet. The choice of interning at the institute of anesthesiology has roots in straight field interest as well as prior experience in emergency service.

Unfortunately, our university (LMU Munich) does not cooperate with the SZGMU. That is the reason why we had to organize the internship in St. Petersburg by ourselves by contacting the international office of the SZGMU, which turned out to be some paper work, but absolutely manageable. Due to the international office (which was the first highlight of our trip) and particularly Alyona Kubina and Kseniya Krylova, every fear of complex administration was baseless.

The excellent organization furthermore continued with Prof. Konstantin Lebedinsky, head of the anesthesiological department, who ensured that we could rotate between different clinics where we always had a local contact person navigating us directly every single day.

What did a typical day look like? It consisted of joining several operations and observing anesthesiological processes, for instance anamnesis and patient information, induction, maintenance and termination of anesthesia, as well as surveillance of vital parameters. As a positive side effect we also got a fascinating insight into different surgical techniques.

During one month we've spotted remarkable matters:

More than once we have been made aware of the usage of several German monitoring and medication devices. Doctors and medical staff had a few sets of their own colorful surgery scrubs, caps and in some cases even masks, all of this being washed privately. Partially, there was no change between surgical scrubs and normal ward scrubs, and in one clinic no wearing of masks in the operation room (OR) in absence of patients. In some OR more than one operation at once were performed. To welcome each other, men shook hands with men, but not with women or women with each other. We could observe ambulance with flashing blue light waiting in red traffic light queues. And these are only examples of a bunch of noteworthy observations.



Our feedback turns out to be very positive, as all anesthesiologists, ordinators and interns were caring and sympathetic. Continuously, every doctor we met was keen on explaining us a lot and answering all of our questions. We are truly impressed by their technical and didactical expertise in spite of partial deficiency of clinical resources. However, opportunities to improve and learn practical skills by delegated tasks were, unfortunately, quite rare (but of high quality tutoring).

Apart from gaining an insight into the Russian health care system and the internship itself, we enjoyed the unique opportunity to witness an excerpt of modern Russian culture, warm-hearted people and a gorgeous and affecting city of intellectuals, literates, musicians and artists.

To conclude, we would like to express our deep gratitude to the international office, to Prof. Lebedinsky and to all of the anesthesiologists. We will do our best to initiate a link between the LMU (University in Munich) and the SZGMU, so that more students might benefit from our experiences.

