

Elective Posting: Sabah Experience



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Introduction

As we were given the right to choose our placement for the elective postings, two polar ideologies arose in our mind: one being placement in a familiar hospital nearest to our home, thus maximising the time spent amidst the warmth of our family, another being adventurous to explore a foreign healthcare system from another state or foreign country. I was more inclined to the latter, but with a different purpose. Besides wanting to step out from a comfort zone, meeting new people and learning in a new environment, I wished to explore my potential housemanship placement in the future. With these objectives in mind, a close friend of mine and I chose Sabah Women and Children Hospital (SWACH), better known as Hospital Likas, situated at Kota Kinabalu, Sabah.



The entrance of Sabah Women and Children Hospital

Hospital Settings

We had heard many great things about Sabah from seniors and friends alike, the good food, beautiful coast lines and sunset, and friendly locals. But none told me what I am about to reveal: There are three different hospitals with different, exclusive and non-overlapping departments at Kota Kinabalu, Sabah; namely Hospital Queen Elizabeth I for medical posting, Hospital Queen Elizabeth II for surgical posting, and SWACH for Paediatric and Obstetrics & Gynaecology posting. Thus, I wish to share these thoughts here to provide tips to my friends in the coming years while applying for these placements at Sabah. Since these hospitals are quite far from each other, accommodation plans have to be planned accordingly as well.

Tips on Accommodation and Transportation

One common challenge faced when requesting for elective posting placements in Sabah is the logistic issues on accommodation and transportation. Having handled it, I would like to share some tips in dealing with that. First, try your best to contact

friends from *Universiti Malaysia Sabah* (UMS). They would have spent a great deal of time in Sabah as a student, and would be more than happy to help you out in this matter. Alternatively, a quick google search of "Sabah elective posting" will reveal a very helpful ophthalmologist from Sabah, who will help you find a place to stay.

The Learning Experience

We met with Datuk Dr Soo Thian Lian, the Head of Paediatric Department on the first day, and we were given a simple message: "Learn as much as possible". We were advised to frame our own time table and he expected active participation. We were expected to join the morning round commencing 8.00 am, followed by clinical attachment from 10.30 am to 1.00 pm, then lunch break to be followed by a two-hour continuing medical education (CME) session, and close the day with passing over rounds.

Clinic Attachments

Specialist clinic attachments were the highlight of our entire elective posting. Likas Hospital being the tertiary referral centre for paediatric cases for Sabah,



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we had the excellent opportunity to see rare cases from multiple sub-disciplines: Angelman Syndrome, Noonan Syndrome, Dravet Syndrome, Neurofibromatosis Type 1, Sturge-Weber Syndrome, Duchene Muscular Dystrophy, Hyperexplesia, and Japanese Encephalitis ... just to name a few! The doctors encouraged us to present short cases on patients, and make spot diagnosis, which reinforced our memory with the diseases and their symptomology. It was an exemplary experience when patients and their family members were very friendly and cooperative, and extended consent

to record the physical findings for educational purposes.

CME – A Thought-provoking Platform

CME was held three times a week from 2.00 pm to 4.00 pm, with participation from house officers to consultants. The topics discussed included:

1. "The Grand Ward Round" – The medical officers would present an intriguing case encountered in the ward to share insight on making a correct diagnosis and providing most appropriate management.
2. Journal Club – Relevant published scientific articles and journals were brought up for open discussion to determine the feasibility of implementing them into clinical practices.
3. Basic Sciences – The house officers were given the opportunity to present fundamental topics like fluid replacement therapy and type of acute kidney injury, to further strengthen the foundation of medical knowledge and facilitate the application of those core principles in clinical practices.
4. Guest speakers from other sub-disciplines discussed parenteral feeding, cost of cow milk, baby formula and others which served to improve the understanding of other facets of patient management.
5. A light-hearted session added to the flavour where the house officers presented on non-academic topics like "How to Survive Housemanship", "10 Ways to Improve Your Memory", and even a live demonstration of a fitness programme, *Crossfit*.

We found the CME sessions to be tremendously helpful and informative. The sessions were often highly interactive and engaging, encouraging independent thinking and critical discussion.

Patient-Centred Approach

One thing that caught our attention during our elective placement is the holistic, patient-centred approach that the hospital had implemented in clinical practices. To exemplify that, there were daily sessions called 'play therapy', where most of the young patients were encouraged to gather in a play room to carry out activities together, facilitated by the nurses. Sometimes they made handicraft



Playtherapy room is well equipped with toys, playing facilities, and donated books



The clinics are well equipped with toys, not only to keep the young ones occupied, but immensely helpful in examining their developmental milestones

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 together, other times organised a colouring contest, or had a movie/cartoon/animation session. We had the privilege of joining one of the sessions and it was amazing to see how they were enjoying themselves despite the fact that many of them were ill. In addition, each ward of Likas Hospital has a dozen of portable DVD players for the families to borrow and keep

the young patients occupied. The toys and playground facilities in the public area of the specialist clinic were very well-maintained; children were having fun while waiting to be called in by the doctors. This made me believe that these efforts not only provided entertainment and distraction to the young patients in the wards, but also facilitated the healing process by minimising their emotional strains from staying in a ghastly new environment.

Accommodation, Transportation And Expenditure

We rented a room of terrace house from an UMS student as he went back to his home town. It was located conveniently at the Kingfisher Park, surrounded by many restaurants and grocery stores, and is only ten minutes walking distance away from the hospital. We usually walked to the hospital despite the erratic weather, but renting a motorcycle from a friendly local is another great option for transportation. We spent a total of RM 2,000 each during this elective posting, inclusive of accommodation (RM 250), flight tickets (RM 450), public transportation and car rental (RM 350), food (RM 850), souvenirs (RM 100), and travelling (RM 150).

Things To Do In Sabah

Sabah is well-known for its rich varieties of natural treasures and tourist attraction. Despite our hectic schedule, we visited Tanjung Aru for its breathtaking dusk, Desa Cattle Dairy Farm for its 'New-Zealand-ish' vibe, Tunku Abdul Rahman Marine Park for snorkelling and Island hopping, white water rafting at Sungai Kiulu, joined Klias Wildlife and fireflies river cruise, and took a tour at Lok Kawi Wildlife Park. These outings gave us the much-needed distraction and relaxation from the otherwise hectic hospital attachments.

Conclusion

We would like to express our sincerest gratitude to UCSI University for giving us the chance to experience a fruitful and experiential elective posting in Sabah, and to all the staffs of Likas Hospital for their hospitality and teaching. The learning experience, knowledge and skills we obtained from the one month period were invaluable in complementing our professional and personal development.