

USF Observership Experience

1. When did you rotate with us and in what specialty?

I was in USF-TGH in April 2016. I had the opportunity to rotate in Nephrology.

2. Why did you choose USF?

I knew about the observership programs offered by USF through some of my friends who had rotated there. All of them had nothing but positive experiences to share which made me decide to do my observership at USF-TGH.

3. What was your favorite part of your observership?

The opportunity to observe how healthcare works in the US was one of the best aspects for me. It was also wonderful to understand the socio-cultural differences in the interactions amongst attendings, residents and fellows here, as compared to India. It also taught me about team dynamics and to work as a team member which helped me a great deal during my intern year of residency. The attendings made sure we had good learning opportunities each day, which made it more competitive and interesting.

4. How do you think this experience will or has impacted your future?

This observership gave me good exposure to understand how programs evaluate a potential candidate for residency and helped me hone my clinical skills. It boosted my confidence to work in a diverse environment.

5. What do you believe is the importance of international observership programs?

International Medical Graduates aspiring to pursue residency in the US need good exposure to the workings of the healthcare system here. They also need to master new skills like learning to use EMR while also improving their clinical skills and knowledge. These observership programs provide us with an opportunity to learn about all this prior to residency which makes us more poised to work in intern year, in my opinion.

6. Are you currently providing care to coronavirus disease (COVID)-19 patients? What has been your experience?

I was in Detroit while COVID 19 was at its peak in the US. I was in the Medical ICU taking care of extremely sick patients. It was a physically, mentally, and emotionally exhausting period. We were seeing hundreds of patients walk into our emergency rooms, getting intubated suddenly, only to never make it out of the ICU alive. We were having incredibly difficult telephone conversations with the patients' families who were frustrated at not being able to be with their loved ones and not understanding this whole new disease (which was new to us too) that was killing their kith and kin. I am glad that Detroit is finally getting back on its feet again.

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