

Aravind 2013 Postcard 4



Monday 7 October 2013

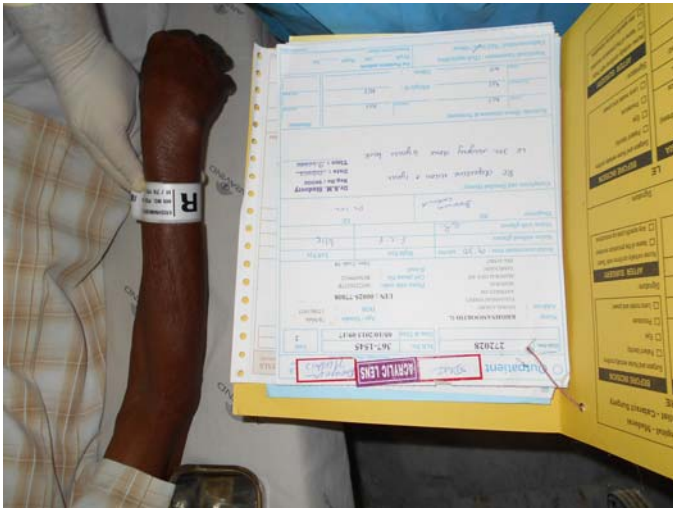
(as if I have to be told!)

INTRODUCTION TO THE MAIN OR

The main OR is in a relatively new building called the Inpatient Block. The facilities are large, spacious, and the equipment superb.



I started my observations in the block room, a big room with 25 cots. Patients were brought from their rooms in order.



Patients are identified by a wrist band that in large letters identifies the eye to be operated along with the name, age, allergies.



Retrolubar and facial blocks are administered by a Sister who has done thousands; akinesia is ensured. A house staff member reviews charts prior to block.



The operating theaters are large, spacious, and monitors are slaved to the scopes so everyone can understand the progress of the procedure.



There is a "foul line" on the floor about the position of the patient's shoulders; if you are not scrubbed you cannot cross it.



Some old traditions remain.



Some sidewalk art seen on way to lunch before the Wet Lab



Following a lecture on wound creation, we practiced on donor eyes.



I was able to construct about 10 wounds under careful supervision, learning on fresh tissue.

The wet lab is superbly equipped. I started by practicing suturing after doing another two hours on the VRSystems simulator, this time with an instructor at my elbow, talking me through capsulorrhexis management. Various tears would be created by the instructor, Suganya, a senior resident assigned the SICS teaching block for the month. She would make a problem and I would try and get out of it. I realize that it is not the same as the real thing- but it doesn't have to be. In some respects, it is better- the parameters that describe the tissue can be changed – the capsule be made more or less elastic. SICS requires a very large rhexis so my scores went down (the system evaluates a phaco rhexis).



Couldn't resist- Suganya offered me a ride back to the hostel on her scooter. No bumper car action "Trust me I'm a Surgeon".

First case tomorrow. Wish my patient well. Thank you all for this opportunity!

Regards, Joe

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