Medicine Clinical Elective in Botswana for Residents

A. Background

This elective provides an opportunity for residents to work in a resource-limited setting and to provide general and specialized medical care in a country with a generalized HIV epidemic. The goals are to learn how to deliver quality care in a resource-limited setting, to enrich the medical training and experience of participating residents and local health staff, to fortify the clinician-educator role of participating residents, to encourage career paths in global health and research, and to provide physician support for Scottish Livingstone (District) Hospital in Botswana.

B. Overview and Eligibility

Rotation Description: Qualifying residents will spend at least 4 or more weeks working at the Scottish Livingstone Hospital (SLH), which is a large district hospital in Botswana located an hour from the capital city of Gaborone. The physician will be integrated into the daily routine of the hospital, focusing on participation in inpatient ward rounds and outpatient clinic work, including opportunities to work in Urgent Care clinic or the Infectious Disease and Care Clinic (IDCC) connected to the hospital. In the inpatient setting, participants will be responsible for leading a team rounding in either the male or female medical ward several days per week. Commonly encountered inpatient conditions include chronic medical diseases like heart failure, hypertension, renal failure, infectious diseases such as TB, complications of HIV infection, and a broad range of other medical problems. In the outpatient setting, participants will see an average of 20 patients per day and will manage all aspects of their care in conjunction with the SLH permanent staff. One night of overnight call per week is an encouraged additional part of the rotation. The on-site BIDMC-affiliated attending physician will supervise all rotations.

Participants may also identify educational and training needs at the hospital, and will be expected to prepare at least one lecture or training for the medical staff during their elective. During ward rounds, residents will be expected to teach on complex cases. Past participants have led educational activities such as journal clubs and lectures, and have initiated collaborative research projects through this elective. There are also opportunities to further the work of several longitudinal quality improvement projects ongoing at the hospital with BIDMC staff.

Eligibility: Eligible candidates for the program are residents who are comfortable working in a developing world setting, able to work with a multi-disciplinary team and lead inpatient rounds, and who possess cultural sensitivity and humility. Preference will be given to eligible candidates applying from Harvard-affiliated hospitals and then to non-Harvard affiliated candidates.
C. Mentorship

Dr. Tomer Barak (BIDMC) will be the on-site mentor at SLH in 2013-2014. He is supported by other infectious-disease colleague physicians who work with the Botswana-Harvard Partnership research program in Botswana and who are intermittently in Botswana and at SLH, including Dr. Roger Shapiro (BIDMC), Dr. Chris Rowley (BIDMC), as well as Dr. Jonathan Crocker, Director of the Global Health Program for Medicine at BIDMC. Participants will work closely with the hospital superintendent and other physicians and nurses at SLH.

D. The Scottish Livingstone Hospital and the Botswana National Antiretroviral Treatment Program

The Scottish Livingstone Hospital in Molepolole is located in a large town located 60 km from the capital city of Botswana, Gaborone. Molepolole has a population of 63,000 inhabitants within the Kweneng East district (190,000 inhabitants), which has an age adjusted HIV prevalence of 32.1%. In 2007, the hospital opened a new facility that has greatly improved the physical infrastructure of the hospital. However, there remains a serious shortage of medical personnel to staff this new facility and to provide medical care, a gap this elective is designed to partially address.
In 2002, the Government of Botswana launched the National Antiretroviral Treatment Program. The program has now expanded nationwide, and SLH is one of the busiest sites in the country. Persons eligible for ART in this program include adults with an active or recent AIDS-defining illness (including tuberculosis) and / or CD4 cell count < 350 cells/mm\(^3\). The first-line and second-line Government ART regimens are similar to those used in the United States, and newer agents have recently been added as options for salvage therapy. CD4 cell counts, plasma HIV-1 viral loads, routine chemistries, and hematology are available through the program for monitoring patients and making treatment decisions. Viral genotyping is available for clinical decision-making purposes at the time of second treatment regimen failure.

Inpatient and outpatient medical cases requiring other services not available at SLH are referred to the tertiary (central) Princess Marina Hospital in Gaborone.

**E. Applications and Permissions**

The initial application materials that will be requested are:

- Current CV
- Statement of support from residency program director
- Dates of interest

Prior to departure, applicants will need to provide proof of malpractice coverage during the time of intended work at SLH. This is not provided by BIDMC Global Health program. Please check your current policy or seek additional coverage.

Applicants should send materials and/or contact Dr. Jonathan Crocker (jcrocker@bidmc.harvard.edu) and Dr. Tomer Barak (barak@bidmc.harvard.edu) with questions. Additional information is available at:

http://www.bidmc.org/MedicalEducation/Departments/Medicine/ResidencyinInternalMedicine/GlobalHealth/SiteLocations/Botswana.aspx