

The Brooklyn Hospital Center
Internship Report in Obstetrics
Gynecology

From October 8 to December 8, 2018



Dr. Vincent Jameson, MD

Resident OBGYN third year of Justinian
University Hospital

Plan

1. Introduction
2. Presentation of the hospital
3. Presentation of the assigned service
4. Activity reports
5. Comments and suggestions
6. Thanks

Introduction

The AMHE Postgraduate Program for residents coming from HUEH (Hopital Universitaire d'Etat d' Haiti) and HUIJ (Hopital Universitaire Justinien) started in 2005 at Coffeyville Regional Medical Center, Kansas. It was exclusively in Orthopedics and under the enthusiastic and devoted direction of Dr Maxime Coles. Many residents have graduated and continue to teach at many hospitals in Haiti.

Later on, in September 2007, this program extended to New York as a joint commitment by SIMACT(Societe Immobiliere Agriculture, Commerce, and Tourism) and AMHE (Association Medicale Haitienne a l'Etranger). The program is also supported actively by The Brooklyn Hospital. By groups of 2's, the residents come for 2 or 3 months of observational rotation in different services as anesthesiology, internal medicine, family medicine, obstetrics-gynecology, pediatrics, general surgery at The Brooklyn Hospital, Interfaith Medical Center, or in radiology at Colombia Presbyterian Medical Center.

Presentation of " The Brooklyn Hospital Center "

Following a public meeting convened by Mayor Smith of what was then the city of Brooklyn, the hospital was founded in May 1845 as "Brooklyn City Hospital». Several public fundraising meetings were held to financially support the hospital. Admissions began in 1847. Soon the hospital began to develop and develop, and by the early 20th century it had several buildings to serve the growing population. In 1883, the name of the Brooklyn City Hospital was changed to the Brooklyn Hospital.

The hospital has begun to modernize after the Second World War. Several mergers took place, adding to the ever- increasing size of the facility. In 1990, the name was changed to the Brooklyn Hospital Center (TBHC). In 1998, the hospital became a member of the New York-Presbyterian Health System. In 2014, he left the New York health system and Presbyterian and is affiliated with the Mount Sinai Health System.

The hospital continued to expand its primary and outpatient services, as well as acute care services, and in 2013 the Brooklyn Hospital Center became an active participant in the NYSD OH prevention program for 2013-2017. The priorities of the health initiative include the prevention of chronic diseases such as heart disease, cancer, respiratory diseases, diabetes and the reduction of childhood obesity.

Today, the Brooklyn Hospital Center has collective agreements with the unions of: NYSNA, 1199 SEIU.

The Brooklyn Hospital is located at 121 DeKalb Avenue in Brooklyn, two blocks east of Flatbush Avenue. The hospital is located on the west side of Fort Greene Park, near the intersection of Ashland Place and DeKalb Avenue. Hospital service areas include Fort Greene, downtown Brooklyn, Brooklyn Heights, Vinagar Hill and Fulton Ferry.

To date, the hospital has several medical services, with specialties and sub specialties inherent to each service. Here are the different medical services :

- Care for women (OB / GYN)
- Care in your neighborhood
- Dentistry and oral surgery
- Cancer care
- Neuroscience center
- Specialized care
- Emergency Medicine
- Pediatrics (Care for Children)
- The Brooklyn heart Center
- Medical care
- Surgical care

Presentation of assigned service

At the end of my internship, as a gynecologist obstetrician in training, I will only talk about the first service and these components , in which I was assigned : **Care for women (OB / GYN)**

This service consists of several entities with several ramifications joining a single objective : a good care of the pregnant woman or not.

1. Birthing Center
2. Perinatal Diagnostic Center
3. Prenatal Care services
4. Reproductive Genetics
5. Women, Infants and Children (WIC) Program
6. Women's Health Center

Activity reports

Given my limited time of two months in this institution and the number of knowledge to acquire, I had to rotate in the obstetrics, gynecology and sonography departments.

Here is how my internship was at the level of its various services.

Obstetrics

I start at 7am with the presentations of the different cases admitted during the care and review of all patients admitted to the service. Afterwards, I go to the triage to see the other patients with the responsible resident. And sometimes, I attend childbirth (3) and cesarean section (5).

I was also taught to use fetal monitors and to interpret certain abnormal patterns.

Gynecology

I spend most of my internship time in this department because I realize that these surgical techniques are sorely lacking, all the more carried out by laparoscopy and some times under robotic assistance . And so I participated in :

- 10 total hysterectomies by laparoscopy assisted by robotics , 2 with omentectomy and ganglion dissection
- 7 laparoscopic hysterectomies of which 1 with repair of a cystocele
- 3 abdominal myomectomies with chromotubation
- 1 laparoscopic hysterectomy 2 supra-cervical hysterectomies
- 5 laparoscopic ovarian cystectomy with chromopertubation
- 3 myomectomy hysteroscopic by MYOSURE

Sonography in the pregnant woman

In this service, I attended multiple planes of the first ultrasound (5), second (4) and third (4) trimester and completion of the Manning score. And even more interesting I attended two (2) amniocentesis under ultrasound surveillance.

Theoretical presentations

Every 2 weeks on Wednesday about 4h pm, I had to present and discuss a subject.

Here are my subjects :

- Gestational trophoblastic disease
- Uterus fibroids
- endometriosis
- ectopic pregnancy

And those of my colleagues :

- Morphin
- Acute edema of the lung
- Nephrotic Syndrome
- Cushing syndrome

I also had to participate in two lectures given by the hospital :

- October 16, 2018 : Hepatitis B : A transmissible carcinogen, speaker Robert S. Brown JR, MD, MPH

- November 20, 2018: Suicide, Speaker: Jonathan Lauter, MD, Chief, TBHC Psychiatry

Comments and Suggestions

I think this internship is a step forward in promoting a 5 star health system in Haiti. This is a very nice initiative that could be more beneficial if the original doctors Haitian, working in this hospital framed many people who do this internship in their service. Some time, we are left to ourselves, hoping to have our feet on the ground. The foundation is present, it is essential ; much more effort and support would be just as welcome.

Thanks

I thank the Almighty, for his love, blessing, and protection, handsomely given every day of my life.

I thank SIMACT for this initiative.

I thank the members of the AMHE, who without them, this course would not be possible

I thank Dr. Patrick Leblanc for his patience, support and accompaniment during this internship.

I thank Dr. Paul Nacier and Dr. Loudison Pierre, to have been my listeners during my presentations.

I thank Dr Michael Cabbad, chairman of the OBGYN department, for opening the doors of his services during the two months of my internship.

I thank all the residents of the OBGYN department, especially Dr. Asif Luqman, for his support during the first days.

Special thanks to my director of training, Dr. Yvel Zephyr and my chairman, Dr. Cyril Leconte, for having chosen this internship. I know that I am indebted to them.

I thank all the maternity service doctors from HUU, who have contributed directly or indirectly to my training.

I thank Stephanie Jean Baptiste, a third-year resident in anesthesiology at the University Peace Hospital, for being my guide during my first days of internship.

I thank my parents, who contributed to what I am today and believed in my abilities ; and all who have been of any support for me.



