Shadowing in Lima, Peru
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**Case 1**
**Internal Medicine: Schematic of Case Evaluation**

34 y.o. female came in with nausea, vomiting, light stool, dark urine, and jaundiced skin; History of kidney stones

- Regular liver tests (for the past 2 years) show something alerting sent for further advanced liver test
- Blood test came back with elevated ALT and AST, also liver fibrosis (LFT); possibly triggered by two kidney stones
- If normal, do not need to check for kidney stones

**Case 2**
**Intensive Care Unit: Head Trauma**

36 y.o. male presented in ER one day prior with head trauma caused by a machine launching a rock at the side of his head

- Had an emergency craniotomy to reduce pressure from the intracranial bleeding and give the brain space to swell
- In the ICU, has shunt in his brain to drain excess blood and CSF; is conscious and semi-responsive
- CT scans and x-rays showed no major fractures or brain tissue abnormalities, just bleeding
- Physicians considered him to be extremely fortunate, likely to fully recover

**Case 3**
**Oncology: Urinary Bladder Neoplasia**

70 y.o. male, hospitalized because of urinary bladder neoplasia (cancer)

- Had bladder removed and piece of his intestine converted into a new bladder
- Intestine temporarily continues to produce mucus secretions after surgery (still behaves like an intestine), making patient susceptible to infection

**Case 4**
**Surgery: Skin Graft**

25 y.o. female presented in ER two weeks prior with chemical burns on both ankles

- Burns would not heal on their own, so skin graft surgery had to be performed under general anesthesia
- Skin was taken via a split-thickness graft from patient’s right inner thigh
- Graft was meshed — 1 inch wide piece of skin stretched to cover a 4 inch wide burn per ankle
- Graft was attached with sutures and covered to heal

**Medical School**

- Learning how to take blood pressure manually
- Simulations looking at pulmonary, cardiac, and neurological symptoms
- Learning how to do an arterial puncture to obtain arterial blood
- Reading brain scans — identifying hematoma, tumor, and stroke

Also participated in daily case analyses with a group of other students, looking at hypothetical patients with pulmonary, cardiac, and neurological symptoms and coming up with a differential diagnosis and treatment.