Going into an international surgical mission such as Liberia, it is hard to be fully prepared for the depth of the experience. In the months leading up to January, we spent countless hours soliciting the donation of surgical supplies. We discussed the trip with attendings who had traveled in previous years. We talked with students who had been there before. We read articles and watched documentaries about the country and region. And, all of us students had previously participated in international medical missions. We thought we were intellectually prepared for what lay ahead.

Liberia is a continually evolving post-conflict country with wounds from the years of civil war still healing by secondary intention: in terms of health care, the problem of inadequate infrastructure is made worse by poverty, poor access to care and the absence of skilled providers. Phebe Hospital, the two-hundred bed regional referral hospital in Bong County where we worked over two weeks, had two operating rooms which hosted with nearly 70 elective and 5 emergency cases during our stay.

Our group, consisting of two ob/gyns, one general surgeon, four anesthesiologists, two radiologists, one nurse and three medical students, was immersed in all aspects of hospital care delivery. Our nurse educator taught the local nurses valuable skills in inpatient care. The radiologists designed and executed a much-needed x-ray and ultrasound class. Local surgeons participated in operations such as hernia repairs and vaginal hysterectomies with our own surgeons, further refining their skills. The collaboration between Phebe Hospital and Mount Sinai is flowing into its fifth year and it is clear that a solid foundation of caring and understanding exists.

But numbers, lists, or anecdotes cannot describe the feeling of being first assistant in the operating room. Or the trust and collaboration with the nursing staff fostered over management of patient after patient. Or being faced with a post-operative complication, bringing it to your fellow student, and finally
executing management under the direction and support of the team. As medical students in Liberia, you are given responsibility, perspective, and the opportunity to see medicine being practiced in something of its more pure form. We were bestowed ownership of our patients, while at the same time given direction, teaching, and the unquestionable presence of our attendings, on a level of intimacy impossible in any of the teaching settings at home. At the same time, we were privy to first hand experience with a health care system absolutely unique from our own.

Clinical experiences shape the direction of medical students’ careers and lives. Ask any three students entering their fourth year of medical school at Mount Sinai, and you’ll get three different answers. Ask another three, and you’ll get three even different answers. And although the differences in clinical experiences across the country can be taken for granted, more profound is the range of clinical experience within institutions. This variety may not be an obvious thing—of course, some students will end up at clinical sites that others will not. Similarly, differences amongst house staff teaching ability, or even willingness to teach, can significantly alter one’s experience.

More subtle differences come from what students actively take away from their rotations. Each student can offer different profundity gathered from their unique patient interactions, just as each rotation offers a different environment for lessons in health care delivery.

Despite the variety of clinical experience you can find amongst medical students across the country and within the student body at the Mount Sinai School of Medicine, for those of us who traveled to Liberia and worked alongside the staff of Phebe Hospital, who were given the opportunity to deliver acute surgical care in an environment with a seemingly endless backlog of surgical disease coupled with emphasis on resisting band-aid care through education and the promise of the mission’s continuity, it is hard to consider this clinical experience as anything but an exception to the normal breadth.

And although it will likely take weeks or months to even begin digesting, the impact of our experience in Liberia on our careers as young medical professionals will last long after we finish hanging diplomas and certificates in the years to come.

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