



DDU

Guide to

elective planning

© Ilana Pignatelli – Lover's Bay, Tobago – Elective photo competition entrant





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© Angela Kwan – Townsville, Australia – Elective photo competition entrant

Many of our members agree their elective was one of their most memorable experiences as a student. Completing your elective is an opportunity to widen your experience; not only of your profession, but also of other cultures should you decide to go overseas.

We believe that completing an elective can help students become better dental professionals by providing them with practical and challenging experiences before they graduate. We aim to do all we can to support you during this exciting time.

How we can help you

Indemnity – As a student member you can seek our assistance if problems arise from your involvement in the clinical care of patients during your elective. We can also help with indemnity for claims arising from any Good Samaritan acts you perform.

Before you go on your elective, please contact our membership team on freephone **0800 085 0614** to confirm details of your elective and the benefits available to students undertaking electives in the country you're planning to visit¹.

Dento-legal advice – If you need help with a dento-legal or ethical issue before or during your elective, you can call our dento-legal helpline. Experienced dentists are on hand to respond to queries and offer expert support and guidance.

Our dento-legal team is available between 8am-6pm Monday to Friday. Advice is available 24 hours a day, 365 days a year for dento-legal emergencies or urgent queries. You can call us on **0800 374 626** or **+44 (0)20 7202 1500**.

Elective photo competition – Taken an elective photo you're proud of? Enter our competition to win **£80** worth of gift vouchers. Simply email your favourite photo to **photos@theddu.com** and include a description and the location. We pick a winner every two months.

Visit **theddu.com/photocomp** for more information.

¹Due to legislation we are unable to offer indemnity for any work undertaken in Australia during your elective. We can however provide you with access to our dento-legal helpline and indemnity for Good Samaritan acts. We would expect any clinical work undertaken on an elective to be directly supervised by a registered practitioner carrying their own indemnity.

Where to go and what to do

Electives don't just happen; they're usually the product of a lot of planning and organisation. Many popular destinations may have had elective positions reserved up to two years in advance.

Things to consider

There are dozens of factors which might influence your choice of elective, such as budget, or an interest in a particular specialty or country. Ideally an elective combines personal and professional development. Talking with other students and lecturers, browsing through travel brochures or going online may help firm up your ideas.

What you can offer

While you're thinking about what you'd like to get out of your elective do also consider whether your host will benefit from your visit. Take time to think about the ethical implications of your planned trip. If you're going with an organised provider think carefully about their impact on the local community and take time to consider where your money is used.

Rural dental practices in developing countries are popular destinations. They may provide experience of exotic conditions and many may appreciate an additional pair of helping hands. However, some organisations that have previously helped students on electives have become reluctant to continue.

Dental practices offering electives usually need confirmation from the student's dental school of their stage in training. Some may ask for an elective booking fee and expect a student to undertake a medical. If there's no formal system for arranging your proposed elective send a covering letter, CV, project outline and official authorisation from your dental school.



© Jessica Roscoe – Sydney – Elective photo competition winner

Plan ahead

Some destinations are popular with students from all over the world. It's not unusual for students to apply for up to 30 organisations to do an elective and receive the same number of rejections. But don't give up – expand your search and find back-up options as well. Research remote locations carefully.

'I travelled alone so I was very restricted about what I could do as a single female. I couldn't swim, unless fully clothed and with local women. The diving and snorkelling was supposed to be the best in the world but, as I was on my own, I had to miss out.'

Elective student, Papua New Guinea

Electives in mainland Europe are increasingly popular, particularly for those who speak the national language.

'These last two months in Spain have given me new insight into Spanish history and culture. I may not have been to Africa, India, China or Australia but I am certain that my time in Spain was unique.'

Elective student, Spain

Many students opt for an elective closer to home, sometimes because finding funds for overseas travel is difficult. Electives in the UK and Ireland can be very rewarding, especially if they broaden your experience.

'I had planned my elective in Hong Kong but it fell through at the last minute, so I spent my time in Hammersmith. The experience was worthwhile and probably more relevant than that of my friend who was having a great time in Tobago! In some ways I do regret missing out. I've travelled since qualifying but the chance to spend two months overseas probably won't come again until retirement.'

Elective student, London

Research and planning

Your school may have elective links with other organisations. Check these with lecturers and electives advisers. Many schools require students to complete a risk assessment of their chosen elective placement to ensure that any possible risks have been identified and considered.

Elective reports from previous years are usually held by the faculty library and are often a good source of inspiration and recent first-hand information.

Elective evenings organised by your school are an ideal opportunity to hear from your lecturers and guest speakers, and share ideas with your fellow students. DDU[†] liaison managers attend most school electives evenings and will be able to tell you more about the electives support we offer.

Other sources of information

The British Dental Journal
nature.com/bdj

The Christian Medical Fellowship
cmf.org.uk

Lonely Planet Guides are a great resource to take on your elective.
lonelyplanet.com

The British Dental Association (BDA) has a library open to its members. They produce an advice sheet on electives which can be downloaded from their website at
bda.org

Sponsorship – funding your elective

You may be fortunate enough to be able to fund yourself. Or, like many students, you may need extra financial support. You could also consider the following sources:

- prizes and endowments offered by your school or other sources
- bank loans
- charities (especially educational and dental)
- churches and religious groups
- colleges
- commercial organisations.

Check for other sources of funding at the back of this guide.

If you're applying for a loan or a grant, do the basic checks first. Find out if your application meets their published criteria, identify the department or individual who will respond to your request and check any supporting documentation you may need to provide with your application. Remember to note the criteria on which grants are made. You may be asked to present a detailed report or give a presentation and this needs to be planned along with other elective tasks.



Travel information

The host institution will often provide a booklet for elective students or suggest a contact who can give information and sometimes arrange free accommodation. Even if this is the case, try to gather additional background information to avoid any nasty surprises – like taking sterling travellers cheques to an area where only dollars are accepted.

Sources for travel information

- ↘ Lonely Planet and Rough Guides are great sources of information for independent and budget travellers.
- ↘ The embassy or commission of the country you're visiting. Many are based in London with offices in major UK cities.

Flight information

When comparing prices check whether your travel agent is registered with ATOL and the airline is registered with IATA; whether there are student discounts available, if there are hidden costs such as airport taxes; flight times and durations; and whether the flight is direct or not.

Travel insurance

In addition to making indemnity arrangements you should ensure you have adequate travel insurance. There are many organisations that offer travel insurance and it is always a good idea to compare costs and policies. If you intend to take part in any potentially dangerous sports such as scuba diving or skydiving make sure your cover extends to these activities.

We strongly recommend that our members purchase travel insurance.

Travel money

As you will be away for an extended period of time it's important to consider how you're going to access your money: cash, travellers cheques and credit/debit cards.

Most travellers carry a combination of all three. Many cash cards now also come with an international withdrawal facility, such as Maestro, which will allow you to withdraw local currency from your bank account at home. Fees for this facility vary so you should check with your bank in advance.

Passport, visas and other travel documents

Make sure your passport is valid for the length of your stay. Some countries insist that it should be valid for six months after your intended date of return. Many countries refuse entry to anyone without the proper paperwork. Sometimes, you will require separate written permission to travel within a country. Check well in advance with the embassy or high commission and apply for visas in plenty of time.

Remember, many embassies and consulates refuse to issue visas on the spot, even to those who apply in person. Some embassy websites have visa application forms that you can download. HM Passport Office has information on renewal and validity requirements.

[*gov.uk*](http://gov.uk)

Access a searchable directory of embassies and consulates throughout the world.

[*embassyworld.org*](http://embassyworld.org)

If you're worried about the stability of a country you intend to visit seek advice from the Travel Advice Unit of the Foreign & Commonwealth Office.

[gov.uk](https://www.gov.uk)

It can be worth registering with the consulate or embassy of your host country. If there are any problems during your stay which require repatriation, the British Consular staff will know your location.

Confirming your indemnity arrangements

Before you go on your elective it's important to make sure you have adequate indemnity in place. Your elective host may ask you for written confirmation of your professional indemnity, or may even ask you to pay for your indemnity. As a student member, you can seek our assistance if problems arise from your involvement in the clinical care of patients during your elective*. We can also help with indemnity for claims arising from any Good Samaritan acts you perform.

Depending on local legislation and indemnity arrangements, your host hospital/practice may be liable for your acts and omissions. We recommend you find out the position from the hospital/practice you're visiting.

When you've decided on the destination for your elective it's important to get a letter from the DDU confirming your elective indemnity. You can do this by logging in to theddu.com/mymembership Just enter the destination and dates of your elective and a confirmation letter will be produced. You can then download and print or email the letter. Alternatively, you can have it posted to the address we have for you. This will provide you with written confirmation of your indemnity arrangements with us.

In general terms, if you stay within the limits of your knowledge and experience during an elective overseas or in the UK, and work under the direction of an appropriately qualified practitioner, it's unlikely you will encounter any legal or dento-legal problems.

*Contact our membership team before you go. Visit theddu.com/yourelective for full benefits for students on elective.

What to bring

It's a common mistake to take too many clothes and unnecessary items. However, these items have been recommended by other students:

Basic items

- ✘ Mobile phone and charger.
- ✘ Plug adaptor for your destination country.
- ✘ Passport photos.
- ✘ Money belt.
- ✘ International driving licence (available from AA or RAC).
- ✘ Photocopy of your passport.

In hospital

- ✘ Latex gloves.
- ✘ Mirror, probe.
- ✘ Oxford handbooks.

Health

- ✘ Medical kit.
- ✘ Sunscreen.
- ✘ Contraception.



Carrying dental supplies

Some organisations may ask students to carry extra dental supplies and equipment. Be aware of any restrictions in the places you're travelling to. The general advice is to obtain a letter from your host hospital/practice requesting dental supplies and a letter from your university confirming you are a student and carrying supplies for your elective placement, making it clear you're carrying a donation.

You should always pack your own bags and check the contents of packages you're asked to carry through customs.

Do they still expect you?

It may be some time since you were in touch with your host organisation, especially if you organised your elective well in advance. Reconfirm everything with them about a month before departure to check your arrangements are still in place.

Staying healthy abroad

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The last thing you want on your elective is to be unwell. Therefore you must understand the risks involved with your plans and ensure that you do the following.

- Do all that you can in preparation before you leave e.g. organise immunisations and antimalarial prophylaxis as appropriate.
- Take precautions while you're away e.g. prevention of insect bites and exposure to blood-borne viruses.
- Know what to do and who to contact in the event of problems.

Your own dental school may have detailed information about health and safety on electives. Make sure that you read this carefully and follow the advice given.

Before you leave

Medical insurance

The amount of medical cover available to residents of the UK varies around the world. Eligible travellers from the UK should obtain a European Health Insurance Card (EHIC). The card entitles you to free or reduced medical treatment costs if you fall ill or have an accident whilst visiting a European Economic Area country.

Visit gov.uk/european-health-insurance-card for more information on EHICs and how to apply for one.

The UK also has a reciprocal agreement with other countries around the world. It is advisable to find out if the country you're going to is included. A list of all the countries that have a reciprocal agreement can be found on the NHS Choices website, healthcare abroad.

nhs.uk

Don't forget that even if you're travelling to a country which has an arrangement with the UK, this may not cover all the expenses you might incur, including returning to the UK for treatment. Therefore, travel insurance is strongly recommended.

Medical insurance will usually be a part of your travel insurance. You may be expected to pay for any treatment up front and then be reimbursed by the insurance company on your return, so keep all the receipts. With this in mind you may wish to consider taking a credit card for use in emergencies. Keep the telephone number of your travel insurance company's 24-hour medical advice line with you at all times.

Accessing health information

Check at least three months in advance of travelling whether you need immunisations for your destination. Don't forget to get information about all of the areas and countries you're travelling to, even if you're only planning to be there for a few days.

In order to obtain up-to-date advice on immunisations, prophylaxis and

other measures to prevent illness, visit the National Travel Health Network and Centre (NaTHNaC). nathnac.org

Another useful resource is the CDC Yellow Book by the US Centers for Disease Control and Prevention. bit.ly/2LO0v0P

The following may also be helpful:

- International Medical Volunteers Association (IMVA). imva.org
- WHO International Travel and Health. who.int
- Fit For Travel. fitfortravel.nhs.uk

Travel immunisations

Although the person responsible for student health may have seen you at the beginning of your clinical studies, it is important to be sure that you're immune to hepatitis B, polio, measles, mumps, rubella, varicella, diphtheria and tetanus. You will need specific advice for the countries to which you intend to travel. You may require travel immunisations as recommended by the authorities listed above e.g. hepatitis A, typhoid, rabies, Japanese encephalitis, and yellow fever. Be sure to keep a record of any immunisations you have had.

You may arrange your vaccinations through any of the following ways.

- Your dental school may offer a service via Occupational/Student Health.
- Your GP.
- Medical Advisory Service for Travellers Abroad (MASTA). masta-travel-health.com
- Hospital for Tropical Diseases Travel Clinic. thehtd.org
- Trailfinders London Travel Clinic. trailfinders.com
- Globetrotters Travel Clinics. globetrotterstravelclinics.com

There are a number of other commercial companies besides the ones listed above who also offer immunisation services; your travel agent may have special deals with these groups. Vaccinations can be very expensive.

Those administering the vaccines will advise about reactions and contraindications, details of which are included in the Department of Health book *Immunisation against infectious disease* (the 'Green Book' gov.uk). As well as vaccines, you may need advice about antimalarial prophylaxis. Remember that open-ended travel may take you into high risk malarial areas, and consider your holiday destinations as well as your elective travel.

Evidence of vaccination or immunity, or freedom from infection

You may be asked for evidence of immunity to certain infections, or you can be asked for evidence to show that you're not infected.

Yellow fever

This disease has a high mortality rate and is found in parts of Africa and South America (it has never

been seen in Asia but travellers entering Asia after visiting these endemic areas must also show a vaccination certificate to immigration officials). Once immunised, you will receive a yellow fever certificate which you can only get from a designated yellow fever vaccination centre. WHO guidance is now that a single vaccination confers lifelong immunity. Keep the certificate safe with your passport.

If you lose your certificate, the yellow fever vaccination centre that originally issued the vaccine can usually provide you with a replacement certificate for a modest fee. Keeping an electronic scanned copy of the certificate would help this process.

Others

A number of host institutions ask students to provide evidence of immunity to, or freedom from, a range of infections: for example, antibody tests for anti-HBs (hepatitis B virus), measles, mumps, rubella and varicella. These blood tests and reports may be arranged through your Occupational Health service or at your local hospital. It may be

necessary to have a booster dose of hepatitis B vaccine or a dose of the other vaccines if you're found to be non-immune. Some countries such as Australia are now frequently asking that visiting students have recent immunisation against pertussis. You may need to discuss this with your vaccine provider because pertussis vaccine is not routinely available for non-pregnant, previously vaccinated adults in the UK.

You may also be asked to have tests for tuberculosis. These include the tuberculin test, evidence of a BCG scar, a chest radiograph or an interferon gamma release assay (IGRA) blood test. The provision of evidence that you're free from TB is particularly problematic since many students have received BCG and so may be tuberculin-test positive (some countries consider that a positive tuberculin test means you could have latent infection). You will need to enquire carefully about the requirements of the hospital(s)

where you will be based for your elective, as these vary considerably. It can be difficult, and expensive, to arrange these tests. Ask your school about what might be available in your area.

If you have been asked to provide a chest radiograph, ask the receiving hospital if they would accept a negative IGRA result instead, so that you do not have unnecessary exposure to radiation.

Screening swabs for methicillin-resistant *Staphylococcus aureus* (MRSA)

In some countries, healthcare workers may be asked to provide evidence that they have been screened recently for MRSA. This usually means a nasal swab (some hospitals might request a perineal or groin swab in addition). This should be done several weeks before you leave, typically in the eight weeks before you arrive at the host institution – but check their exact requirements. An

MRSA screen can usually be done in your own hospital and a report is available in about two to three days. You will need a report stating that you have been screened and are negative. If you're MRSA positive you can be decolonised using topical preparations, but it may take a week or two before you can be shown to be clear, so make sure you allow enough time after the screen and before travel.

Recently, some host institutions have asked students for evidence of training in the use of facial masks. They are referring to high-efficiency masks that are sometimes used for the care of patients with severe infections caused by new strains of viruses such as influenza or coronavirus. In Europe, the masks for such cases meet a standard known as FFP2 or FFP3, whereas in North America the standard is N95. Healthcare workers using these masks must be trained and 'fit tested' i.e. a check is made that the mask is secure and functions properly. If you're asked to provide evidence of 'fit testing' it may be possible to arrange it through your student health department, or you could arrange to have it done when you arrive at the host institution. That way you can be sure that the fit testing uses the type of mask available in the hospital/practice.

Obviously you will need to organise this evidence well in advance of your travel.

Malaria prophylaxis

The morbidity and mortality associated with falciparum malaria should not be underestimated and a number of travellers returning to the UK each year die from it. If you used to live in a malaria endemic area, you will have lost immunity fairly quickly after moving to the UK. You must get up-to-date advice concerning affected areas and current prevention

and treatment. Ensure that you have sought advice about prophylaxis, that you take the tablets and that you take all precautions to avoid being bitten by mosquitoes. The NaTHNaC website provides options for different antimalarial tablets according to the countries visited.

Remember the **ABCD** of malaria:

Awareness of risk

Behaviour – appropriate clothing, use of repellents and bed nets

Chemoprophylaxis

Diagnosis – seek urgent help if you become unwell

If you're visiting more than one malaria endemic country and the prophylaxis recommendations differ, take the prophylaxis that covers the most resistant strains of plasmodium (e.g. some countries still only require chloroquine prophylaxis, but chloroquine resistance is common in many places). It may also be worth asking the hospital you're visiting. You must start taking the prophylaxis before you leave. Also, you must continue to take the drugs for a specified period after you leave the malaria endemic country.

Always remember to take your antimalarial tablets. Set the alarm on your phone or watch! Do not be persuaded by fellow travellers to stop taking them, or reassured by locals who don't take them - they may have acquired immunity.

HIV and other blood-borne viruses

HIV may be significantly more prevalent in the country you're visiting than at home. For example, HIV is highly prevalent in some parts of sub-Saharan Africa. You can check the prevalence of HIV by country on the WHO website

who.int

In addition, HIV prevalence among hospital in-patients can be higher still, especially in sub-Saharan Africa. Furthermore, infection control procedures may be poor in some countries. You should follow your school's advice on HIV; many schools recommend some restrictions on practice

where the prevalence of HIV is high, standards of infection control are poor and when exposure-prone procedures are likely to be performed – for example complex oral surgical procedures.

You should also consider:

- having a dental check-up before you go
- taking an adequate supply of gloves, masks and eye protection if appropriate
- taking a medical emergency travellers pack.

HIV post-exposure prophylaxis (HIV PEP)

The Department of Health has issued guidance about clinical staff, including dental students on elective, who are working abroad in countries with high HIV prevalence (*HIV post-exposure prophylaxis: Guidance from the UK Chief Medical Officers' Expert Advisory Group on AIDS*, Department of Health, 2008). Since this guidance was issued, HIV drugs have become much more widely available worldwide, particularly in high prevalence countries. Although some dental schools will suggest

you take a 7 day “starter” pack of HIV PEP medicine with you, others may provide you with advice and support to obtain PEP locally.

Your school should provide you with advice about HIV PEP, how to use a PEP pack, and what to do if you have a needle stick injury, or other exposure to blood and body fluids.

Exposures regarded as significant are percutaneous injury (from needles, instruments, bone fragments, significant bites which break the skin etc.) exposure of broken skin (abrasions, cuts, eczema etc.) and exposure of mucous membranes, including the eye, and sexual exposure.

Report any exposure as soon as possible and seek advice immediately to establish the HIV status of the source patient. If the patient is subsequently shown to be HIV negative, the PEP can be discontinued.

If the exposure is to blood or body fluids/tissues from a patient shown to be strongly suspected of being HIV positive, and a negative test result is not confirmed, you should

continue to take the anti-HIV drugs for four weeks, according to the prescription. Prolonged PEP can be quite unpleasant to take and healthy individuals often feel quite unwell during this time.

You should be followed-up by a local Occupational Health Department, HIV/infectious disease physician, medical microbiologist or virologist. The starter pack will give you time to arrange a follow up and, where necessary or appropriate, for further supplies to be obtained or couriered out.

Sexual transmission of HIV is of course the most common mode of spread of the virus. Ensure that any sexual encounters are safe.

Other blood-borne viruses

Other viruses which need to be considered following a significant blood or body fluid exposure include hepatitis B and hepatitis C viruses. You should be immune to hepatitis B. With regard to hepatitis C, follow-up blood tests will be required. It is essential that following any blood or body fluid exposure you report to Occupational/Student Health on your return to the UK.

Medical kits

Many students purchase a medical emergency traveller's pack. You may wish to seek advice from your elective co-ordinator at your school or GP about additional medicines to take. These could include the following.

For diarrhoea:

- oral rehydration solution
- loperamide (not to be used if there is a dysentery-like illness including bloody diarrhoea)



- ✘ Carrying antibiotics is recommended less often now in UK Travel Medicine practice. Antibiotic resistance is rising to salmonella, shigella and campylobacter, and taking antibiotics for mild diarrhoea will further disrupt your gut microbiome. If your diarrhoea is severe or if you feel significantly unwell it is best to seek medical attention.

You could also consider the following:

- ✘ antiseptic cream: it is very common for insect bites to become infected with *Staphylococcus aureus* or *Streptococcus pyogenes*, and such infections can be severe (if infection develops, seek medical attention)
- ✘ anti-histamine cream/tablets for bites
- ✘ motion sickness tablets
- ✘ painkillers/anti-inflammatory tablets
- ✘ any other regular medications and medicines to treat personal vulnerabilities e.g. ear infections.

Carry information on your person about medical conditions you may have, medications and allergies. If you have a significant chronic condition, you should carry contact details for the doctor who normally looks after you.

Health and safety checklist

- ☑ Arrange medical insurance.
- ☑ Consult health information on immunisations, prophylaxis and other measures.
- ☑ Obtain appropriate vaccinations and tests (plus certificates or reports if necessary) for both travel and healthcare work at the institution.
- ☑ Obtain malaria prophylactic tablets, nets, repellents, insecticides, appropriate clothes.
- ☑ Organise HIV PEP – if appropriate.
- ☑ Buy a medical kit if you wish and other medications e.g. for diarrhoea.
- ☑ Buy a medical tag/wristband about chronic illnesses/medications/allergies if necessary.
- ☑ Take contact details in case of emergency.
- ☑ Take a mobile phone and charger and ensure your phone works in the countries you're visiting.
- ☑ Email yourself details of itinerary/document numbers or carry photocopies.
- ☑ Remember to leave your contact details with your school and your family. Tell them where you're going and when you expect to return to the UK.



General precautions while away

Ask your hosts to familiarise you with the area e.g. the transport system, the nearest telephone and bank, a street map, personal safety issues etc. In some developing countries it may be advisable to give your details to your embassy or consulate.

Diarrhoea

In developing countries the most common health problem is diarrhoea. As the well-known saying goes, 'travel broadens the mind and loosens the bowels'. The golden rules to avoid gastro-intestinal upsets are:

BOIL IT, COOK IT, PEEL IT OR FORGET IT!

Also remember to:

- ↘ drink bottled or boiled water and use it for brushing teeth and cleaning dishes
- ↘ avoid ice and also fruit and vegetables that may have been washed in contaminated water
- ↘ purify water by boiling or use purifying tablets
- ↘ wash hands before preparing or eating food
- ↘ avoid swimming in non-chlorinated pools, or in stagnant or slowly flowing water (note also that in some countries fresh water swimming carries a risk of acquiring schistosomiasis).

Bottled water is widely available but always check the seal. If you're planning remote travel then take a method of purifying water such as iodine tablets or an ultrafiltration water bottle. Most cases of diarrhoea will resolve spontaneously within 48-72 hours. The most important measure during this time is to rehydrate with sachets of sugar and electrolytes. This is extremely important since severe dehydration can be life-threatening, even in a fit young person.

If you do not have any ready-made rehydration solutions, make up your own solution following this recipe:

- ↘ eight level teaspoons of sugar
- ↘ half a teaspoon of salt
- ↘ added to one litre of boiled water.

Do not travel or work if you have significant diarrhoea, but stay at your main base. Avoid alcohol as this will add to dehydration. If diarrhoea continues, loperamide might help. If you have a high fever, the diarrhoea does not settle, or contains blood, seek medical advice promptly.

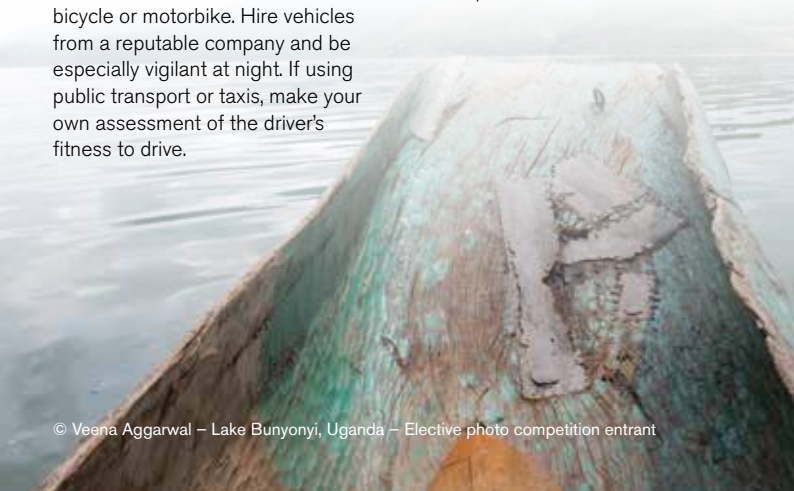
Road traffic accidents and other hazards

Unfortunately, after diarrhoea, accidents are the next most common difficulty to befall travellers. Observe general road and pedestrian safety especially when traffic flow is the opposite of that in the UK. Use seat belts in cars and wear a helmet if on a bicycle or motorbike. Hire vehicles from a reputable company and be especially vigilant at night. If using public transport or taxis, make your own assessment of the driver's fitness to drive.

Heaters and boilers in your accommodation may not be properly maintained and carbon monoxide (CO) poisoning is a serious risk. Cheap CO detectors are now available in shops. Make sure that fires and the whole room are well ventilated; turn off any gas heaters or boilers in a room in which you're sleeping. Take special care with all electrical equipment.

Sunburn and sunstroke

Use a high factor (SPF 30-50) especially in snow or near water. Wear protective sunglasses and a hat. Stay in the shade during the heat of the day and keep well hydrated by keeping your fluid intake up.



Animal bites

Try to avoid close contact with animals and seek advice before you go about whether a rabies vaccination would be appropriate for the country you're visiting. If you're bitten, seek medical advice immediately regarding post-exposure prophylaxis; use a detergent such as washing-up liquid to cleanse the wound since rabies virus is killed by detergent. If you have not received rabies vaccine before travelling, you may need post-exposure prophylaxis with vaccination and immunoglobulin. Even if you have been immunised, if there is a risk of rabies from the bite you should seek two doses of post-exposure vaccine (which is widely available worldwide) but you will not need immunoglobulin.

Remember that monkeys may transmit the herpes B virus which can cause severe and often fatal encephalitis. Aciclovir can be taken as PEP.

Ticks may be infected with rickettsiae or other pathogens and you should check your body regularly while travelling and working in rural areas.

Arthropod-borne infections

Dengue

Dengue fever is the most widely distributed arthropod-borne infection worldwide. A new vaccine is available in some countries for semi-immune people, but it is not recommended for travellers. Travellers to dengue-endemic zones should take measures to reduce exposure. The mosquitoes which transmit dengue feed during the day. Therefore, wear suitable loose-fitting clothing to protect arms and legs and use repellent during the day as well as at night. Dengue typically causes a self-limiting illness with fever, rash, headache and arthralgia, although severe illness can occur.

Chikungunya

This is becoming more common and is similar to dengue. However there is often a more marked arthralgia and sometimes arthritis in addition to the fever and headache. Precautions are the same as for dengue.

Zika

A large outbreak in South America brought zika to the world's attention in 2015. The epidemic has since waned but this infection,

like dengue and chikungunya, remains a risk for travellers and the same measures to prevent mosquito bites should be used.

Check current guidelines with respect to conceiving a child after visiting a zika-endemic region. In 2018 UK advice was to avoid conception whilst in the region, and for eight weeks afterwards for females, and for six months afterwards for males. bit.ly/2n6UfTe

Malaria

Whilst you're away avoid mosquito bites by:

- using insect repellent with DEET e.g. 55%
- spraying your room and mosquito nets with pyrethrum insecticides, or use impregnated nets
- using a bed net and inspecting for and repairing holes
- checking inside the net before going to bed
- wearing long sleeve shirts and trousers in light colours (less attractive to mosquitoes).

Be aware of the following symptoms of malaria both whilst away and several months after your return:

- fever
- headache
- flu-like aches and pains
- rigors.

Seek medical advice immediately whilst away, and when back in the UK, if you become unwell. Mention that you have travelled to a malaria endemic area.



Needlestick injury and other exposure to blood and body fluids

If you sustain a needlestick injury it can be a very harrowing experience. Try and lessen the possibility of infection by being aware of the following guidelines.

On arrival, check local protocols for exposure to blood and body fluids, and establish the local procedures.

To prevent injury:

- ↘ wear gloves
- ↘ cover wounds
- ↘ use protective eye wear
- ↘ dispose of sharps safely
- ↘ do not re-sheath needles
- ↘ take particular care when performing exposure-prone procedures such as surgery.

While on your elective, if you have a percutaneous or mucosal exposure to potentially HIV-infected blood or other high-risk body fluid, immediately do the following.

- ↘ Encourage the wound to bleed by holding it under running water, wash it using running water and plenty of soap. Do not scrub the wound while you're washing it.
- ↘ Don't suck the wound.
- ↘ Dry the wound and cover it with a waterproof plaster or dressing.
- ↘ Irrigate contaminated conjunctivae or mucous membranes with a lot of sterile saline or clean water for 10 minutes.
- ↘ Assess whether the patient may be HIV positive or suffering from AIDS. Where possible, arrange for the patient's blood to be tested for HIV (and HBV and HCV) with the informed consent of the patient. Someone else should arrange this for you e.g. the doctor in charge of the source patient, a staff/student Occupational Health Department,

a HIV/infectious disease physician, a medical microbiologist or a virologist.

- Report the incident to an appropriate authority or medically qualified person locally, and keep a copy of the accident report.
- Try to contact someone at your school as soon as possible, to report the incident, get advice if necessary and/or confirm that it is being managed appropriately locally. Determine specifically whether HIV PEP is indicated. All such incidents are treated confidentially. If PEP is indicated you must have supervision from a physician.
- Report to the Occupational/Student Health Department on your return to the UK.
- If you have been at risk of acquiring HIV infection, you should use condoms and refrain from donating blood until a blood test confirms that you're uninfected.

Safe sex

Remember that alcohol and drugs can affect your judgement. Avoid casual sexual contacts and use safe sex precautions, including condoms.

Culture shock

If your only travelling experience has been on family holidays, arriving in a new continent on your own, or with only one friend, can be a shock. Add in a dose of jet lag, unfamiliar climate, unfamiliar language, and different food and you can feel overwhelmed. Expect this and be prepared to feel a little unsettled initially. Take your time and do not begin a punishing schedule immediately. Stay in one place for a few days and ensure you get adequate rest and meals. Discuss any concerns you have with fellow travellers.

Cultural differences

If you're visiting a country with a different religion from your own, you may wish to consult a senior member of staff at the host hospital about customs which you should be aware of, especially in relation to talking and dealing with patients. Make sure your clothing is appropriate to the local cultural norms.

For example, usually you should dress as smartly for the wards as you would in a UK hospital, even if the climate is hot. Some cultures will expect men and women to wear closed shoes for smartness, and it may be common to have to remove shoes frequently, so bringing some smart, lightweight shoes that are easy to slip on and off is a good idea.

Research the local cultural norms around eating as you may be lucky enough to be invited for dinner with colleagues. For example, in some cultures declining a second helping suggests you didn't like their cooking, but leaving food on your plate is acceptable as it satisfies the host that they gave you enough food. Consider bringing some small lightweight gifts from the UK.

What to do if you have problems

Make sure you know who to contact in the event of any difficulties. In addition, let your dental school and family know exactly where you're going, and how you may be contacted in the event of any emergency. Obtain the addresses and telephone numbers of embassies and consulates in the countries which you visit. If there is a serious local event such as an earthquake or hurricane, let everyone know you're safe.

Theft

Keep all your important documents such as passport, tickets and money in a pouch around your neck, close to your chest and with your t-shirt tucked in as thieves can cut ties easily. Consider using a chain and padlock when travelling so that you know your rucksack will stay where you left it if you fall asleep on a train. If you do have something stolen, contact the local police so that you have a crime number to claim from your travel insurance on your return.

Lost tickets and passports

Most airlines now issue e-tickets but if you do have paper tickets that are lost or stolen, contact the travel company or airline directly who can re-issue another ticket. This sometimes involves travelling to a central office with proof of purchase and identity. Many travellers now email a copy of their itinerary and important documents to themselves before they leave so that they can have access to them from any internet café in the world. Alternatively, keep a photocopy set of all important documents separately.

If you're unfortunate enough to lose your passport, contact your embassy as soon as possible.

How to say no!

Even the best-laid plans can go wrong and electives can disappoint. There have been reports of students arriving on their elective to find that there was a lack of supervision.

We recommend that students are supervised by qualified practitioners at all times and be aware of the standards set by the General Dental Council (GDC) which will apply to them as future dentists. In their guidance, *Standards for the Dental Team* (2013), the GDC states: 'You should only deliver treatment and care if you're confident that you have had the necessary training and are competent to do so. If you're not confident to provide treatment, you must refer the patient to an appropriately trained colleague.'

You may want to refer to these guidelines during your training and especially during your elective when you may take on additional duties. Visit gdc-uk.org

If you have any concerns, contact your school elective tutor. A rescue position may be possible, such as arranging a transfer to another hospital/practice locally or even returning home so that another elective can be arranged in the UK.

On your return

You'll probably be expected to provide a report to your dental school or maybe even to the body that sponsored your trip.

If you have ongoing health concerns on your return, seek medical review. Be vigilant about any unexplained symptoms for several months afterwards and don't forget to continue your malarial prophylaxis!

Finally, let others benefit from your experience by sending a copy of your elective report to: marketing@theddu.com or **Marketing team, The DDU, FREEPOST MDU SERVICES LTD.**

Some organisations, particularly in developing countries, benefit enormously from the support provided by skilled volunteers. If you have spent your elective in this kind of situation, recording your experience may encourage other dental students to return in the future. If things didn't go well for you on your elective, you may want to warn other students about avoidable pitfalls.

Sources of funding

The following organisations are potential sources of elective funding to individuals who meet certain criteria. Enquiries should be made directly for further details.

EMMS International

The Campden Charities

British Dental Association

British Endodontic Society

British Orthodontic Society

British Society for Periodontology

We hope the information provided in this booklet helps you plan a successful and rewarding elective. Good luck!



How to contact us

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