

The Beauty in Chaos **Selma Alqattan**

Having been nominated an EDE instructor in 2017, when I took the bootcamp during my trauma fellowship in Canada, I set out the objective to bring the course home to Kuwait. With the efforts and motivation of many back home in Kuwait and the support of countless CPoCUS instructors, Kuwait now has an accredited EDE center which trains doctors and residents from all over the country, conducting monthly courses. The term “bootcamp” to us doesn’t only apply to the qualification process in which we get in all our determinant scans, but applies to the almost military-like precision in all our courses (thanks to Ray Wiss and Greg Hall), to ensure standardization and enhanced level of training while minimizing time lost to standing around which I, as a PhD holder in medical education appreciate! So, what could possibly go wrong going to Tanzania to do an EDE bootcamp with some of the best and most qualified EDE instructors?! I thought this stress-free opportunity was a great chance to scuba dive and do a bit of teaching and pick up a few CME points! Something that my A-type personality needed as the year approaches to an end and work submissions are handed in!

I arrive to the venue in Tanzania on day one, 30 minutes prior to the course, to see half the required number of ultrasound machines available, some that didn’t have the correct probes for training. The coordinator comes in ten minutes after the start of the course to start organizing the venue in getting bedsheets and filling up gel bottles. There are not enough bedsheets or tissue to wipe your hands or gel. The students trickle in a full hour later. The models come in, far less than expected. The venue is too hot with no adequate WiFi and a nauseating smell of seaweed from the adjacent beach, when we decide to open the windows. I was horrified! The challenges of day one seemed more than enough to cancel the course!

The course began over an hour late. I saw how Deirdre Duffy, the master instructor of the course, began to explain to the students that the EDE bootcamp is a 10-hours-a-day course irrespective of what time they start. The course will start when the students are there. Throughout the day, I kept seeing many challenges that required major adjustments and fast thinking with scheduling of sessions so that, when the session did start, everything was ready for it; students, equipment, instructors and all bits and pieces like photocopied paper etc. I saw how there was a lot of tough love talks given to get people to understand the course standards, and how they will not go down to anyone’s convenience. After which, I saw machines come in from the hospital ED, another from the radiology department, a third from a private clinic and one from a pharmaceutical company. I saw how, at one point, the cleaners and porters took part as models. I saw how a master instructor, had a wonder bag full of back up wires and cabling and papers to ensure a course can go smoothly no matter what the electrical status was in the venue!

The course did go smoothly. We conducted a full EDE bootcamp that had 3 added modules; IVC, comprehensive lung, and a third trimester pregnancy. During the course, I got the opportunity to talk to the students and some of the local apprentice instructors. Additionally, there was a debriefing with the master instructor. I understood *what* went wrong, but I was curious as to *why*? They were all dedicated people motivated to learn, wanting the course. Yes, there was a plan B and even C to ensure the course went as smooth as it did, but why did it need all that back up planning?! For perspective, consider the course instructors and student absences: 3 family medical

emergencies, 2 family deaths, 1 fatal plane crash, 2 incidents of hospital politics, and only 2 possibly avoidable challenges (with payment – these fixed going forward). This is what students and instructors faced behind the scenes in their private lives while sorting out an EDE course.

This was not as stress free as I had hoped but it showed the beauty in chaos and pulling through as a diverse team to make sure the best training was provided and how it went on to save lives. How do I know it saved lives so soon?! Because as we gave the course, some instructors went to the ICU to do a lung POCUS to provide answers to questions that, otherwise, would have been guessed at ...