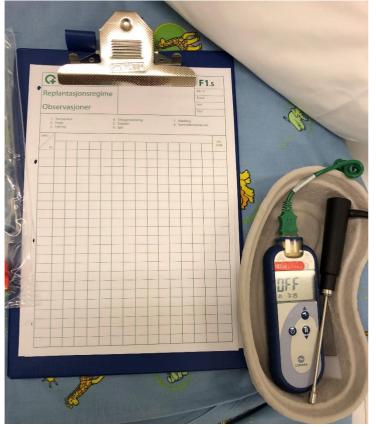
## **FESSH Travel Award: Report**

**OSLO**, Norway

I am deeply grateful for the opportunity of visiting Rasmus Thorkildsen and the clinic for Upper extremity and Microsurgical Unit at Oslo University Hospital. This could not have been accomplished without the generous support from the FESSH Travel Award as well as Börje Gabrielssons Memorial Fund. The Upper extremity and Microsurgical Unit are a national referral center for replantation / revascularization surgery, which makes the person on call the point of contact for all of Norway for discussing these cases.



My schedule was mainly 2-3 days surgery per week and the remaining days out-patient clinic or being on-call. The task of being on-call also included securing and maintaining the patient-flow in and out of surgery, sort of a 'spider in the web' kind of thing. It was a lot to handle at times – trying to grasp the full (i.e. sufficient) understanding of the system fast. Thus, it allowed for a steep learning curve always with more than one consultant available for guidance. This role also meant doing rounds, typically 1-2 patients would be in an early postoperative phase with close follow-up, as well as a mixture of the full hand surgical spectrum, including congenital malformations and brachial plexus.

Fel! Hittar inte referenskälla. to the left shows the observation sheet, which stays bed-side the 10 postoperative days after replantation. The exact point to measure temperature was marked at the time of surgery – thus obviously increasing inter-rater reliability. The small glass plate is a simple, yet valuable tool to evaluate capillary reperfusion.

Figure 1

I took part in 45 surgical cases, including both elective and acute micro surgery: Two thumb replants, one revascularization of three fingers, one toe-to-thumb transplant, two free fibular grafts, ten cases of congenital malformations including one complex symbrachydactyly. Seeing and experiencing how the whole organization is prepared for replantation surgery was impressing. A separate room was prepared for back-table preparations, Figure 3, as the patient was transported from E/A to OR.





Figure 2 Figure 3

Of the experiences I value highest is the personal meetings with colleagues sharing interests and passions. For anyone considering visiting the Unit for Hand and Micro Surgery in Oslo, I cannot recommend it highly enough. I was fortunate to be able to speak Norwegian and have my accreditation approved by Norwegian Government upon my arrival, but I trust you will receive an equally warm welcome speaking English.

A factor to consider is that many injuries happen during the day. After transportation possibly exceeding 1500 km, the surgery often takes places during the night. Being willing to jump in at any time during your stay is key. Being trusted to be on call was at times taxing, but mostly rewarding as it gave first-hand experience with decision-making and logistics - supervised by senior consultants.

I strongly encourage colleagues to visit sister clinics abroad, and to apply for the FESSH Travel Award. I am grateful for the warm welcome and including atmosphere I was met with. I would like to extend my gratitude to the FESSH Training Council and The Memorial Fund of Börje Gabrielsson for their generous support.

Sindre Gunleiksrud MD

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## Certification of attendance

FESSH Travel Award 2019 - Sindre Gunleiksrud, MD.

Rikshospitalet, Oslo 09.06.19

To the FESSH Council

As head of the Unit for Upper extremity and microsurgery at the University hospital of Oslo, I can confirm that Dr Sindre Gunleiksrud has attended and partaken in the activities as planned at the national hand unit at Oslo University Hospital ("Rikshospitalet") during the three month period from the 18<sup>th</sup> of march until the 9 <sup>th</sup> of june).

We enjoyed having Dr Gunleiksrud as a visitor at the unit and trust that is his stay was both interesting and beneficial for his hand surgical career in the future.

Regards

Rasmus Thorkildsen

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