Aivuk!" The sled dogs lunged forward in fan formation. My gamutik (sled) floated gracefully over the hard Arctic snow. The Inuit sped beside me on snowmobiles, buried in their sealskin suits. The temperature was –50°C.

“Auk!” I shouted. The dogs wheeled to the right.

Dog sledding was exhilarating, as was most of my elective in Rankin Inlet (pop. 2300), Nunavut. Interesting cases included reactivation tuberculosis and severe postpartum hemorrhage from retained placenta. Combined with a preceptor who hunted musk oxen, this definitely made for a memorable and exciting experience. Which brings up the topic of this article — how to go about setting up the ideal rural elective.

Positive factors that are attributed to rural electives include exposure to breadth of practice, quality of life in a rural setting, and good mentor experiences.1 And there’s another positive factor I’ll add: the opportunity to explore the pristine beauty of remote Canada.

The number of rural physicians has been steadily declining in Canada. In 1996, 9.8% of physicians practised in rural areas, compared with 14.9% in 1991. The ratio of rural physicians per 1000 population is projected to decrease from 0.79 (1999) to 0.53 (2021).2 A recent study showed that factors predictive of a physician’s choice of rural practice included rural clinical training during medical school (55.4% rural physicians v. 35.2% urban physicians) and postgraduate rural training of more than 8 weeks duration (38.8% v. 20.2%).3

Countrywide programs have been developed to assist in setting up rural electives. Most provide free transportation and accommodation. Return to service agreements and bursaries are available.

Here’s a listing of several of these programs. Good luck with setting up your ideal rural elective. You’ll never regret it.

References