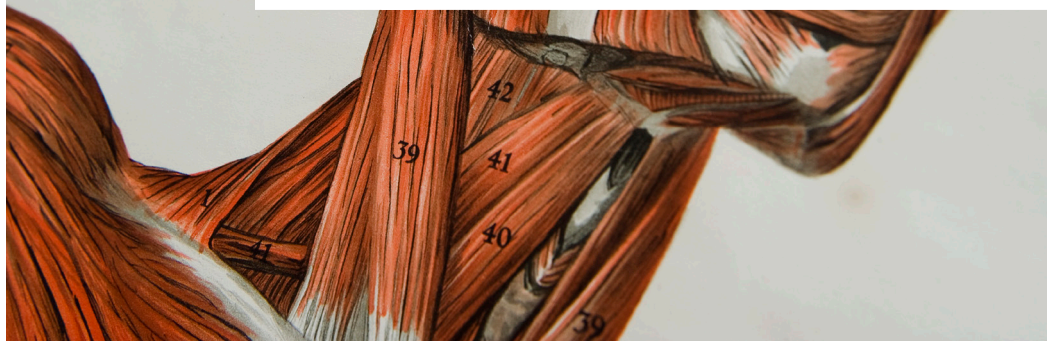


LUND
UNIVERSITY

Handbook for visiting students

FACULTY OF MEDICINE, LUND UNIVERSITY





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Photos: Front cover, top picture and bottom picture right Kennet Ruona, bottom picture left Håkan Røjder. Page 2 Kennet Ruona. Page 3 Agata Garpenlind. Page 4 top picture left Apelöga, top picture right Agata Garpenlind, bottom picture Kennet Ruona. Page 5, 6 Kennet Ruona. Page 7 left pictures Kennet Ruona. Page 8 Mikael Risedal. Page 10 left pictures Kennet Ruona, right picture Apelöga. Page 12 Kennet Ruona. Page 13, 14 Charlotte Carlberg Bårg. Page 15 Kennet Ruona.



Welcome!

Maria Björkqvist

Dean of the Faculty of Medicine
at Lund University

Welcome to the Faculty of Medicine at Lund University - a faculty that strives to understand, explain and improve our world and human health. In close cooperation with agents within public healthcare and medicine, we aim to contribute to increasing knowledge that is highly relevant to human health. We do this through education and research of the highest quality in cooperation with wider society. Our activities are characterised by great international ambitions through participation in strategic international networks, teaching staff and student exchanges, internationalisation of courses and international research collaborations.

Today our faculty offers a wealth of research, postgraduate and undergraduate education programmes in medicine and health sciences. We have 2,900 full-time students enrolled in eight undergraduate and two master's programmes, 1100 PhD students and 2000 employees. Our international collaboration with close partners throughout the world is absolutely vital.

We are delighted that you have chosen to spend time with us and hope you will enjoy your stay!

International Office

The International Office at the faculty coordinates international activities in close cooperation with the educational programmes. We assist and support prospective and current international students and students at the faculty wishing to spend time abroad within their studies. We serve as a link between the faculty and the partner university and between student and teacher or clinical/laboratory supervisor. The international coordinators will assist you with practical issues related to your studies at Lund University.

[Contact information to International Office and international coordinators](#)

Contact us at international@med.lu.se



Studying at the Faculty of Medicine

The Faculty of Medicine is one of nine faculties or scientific disciplines at Lund University. The faculty encompasses 2,900 full-time students enrolled in 8 undergraduate and two master's programmes, as well as 1100 PhD students and 2000 employees. The Faculty consists of six departments that pursue research and education in Lund and Malmö, offering a stimulating environment for all students, with research that ranges over a broad field from experimental research to clinical research, closely involving patients.

The faculty is closely associated with Skåne University Hospital, which has two locations, one in Lund and one in Malmö. There is a research centre associated with each of the two hospital locations of Skåne University

Hospital, the Biomedical Centre (BMC) at Lund and the Clinical Research Centre (CRC) in Malmö. There are three further research and training centres: the teaching hospital in Helsingborg, the Health Sciences Centre which provides research and teaching in nursing and midwifery, occupational therapy and physical therapy, and Medicon Village which is a venue for research, innovation and business development in the field of life sciences.

GRADING SCALE

The grading scale applied at the Faculty of Medicine is Pass (G) and Fail (U). We are unable to supply students with any other grading scale.

[Grading scales at Lund University](#)



International Buddy Group

Students at the Faculty of Medicine run a buddy group for all international students. The buddy group organises one activity a month throughout the academic year, activities such as hiking, Swedish 'fika' and pub nights. The group provides a perfect opportunity for you to get to know Swedish students and other international students within the faculty. Sign up for our mentor group by sending us

an email or by visiting our Facebook group!

Contact us at: internationalbuddygroup@gmail.com

Join International Buddy Group at [Facebook](#)



Studying in a clinical environment

HEALTH DECLARATION FOR CLINICAL PRACTICE

Visiting students who will be in contact with patients must complete a health declaration proving immunization/negative test result to Hepatitis B, Measles, Tuberculosis and MRSA .

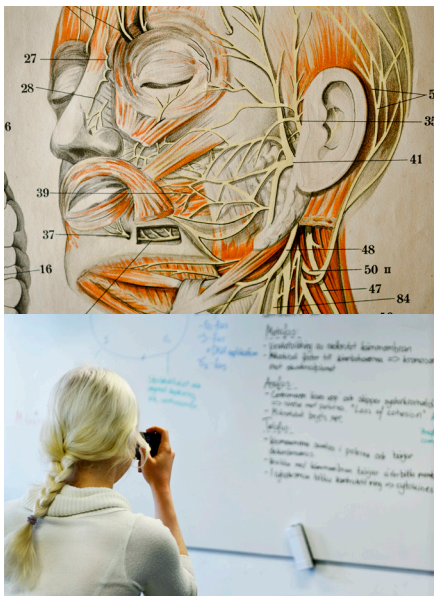
Before arriving at Lund, students must submit written evidence of:

- 3 doses of Hepatitis B Vaccination or Hepatitis B antibody serology test
- 2 doses of Measles (MMR) vaccination
- Only necessary for students from a TB-risk country: PPD test <10 mm or negative Quantiferon test. PPD test 10 mm or a positive Quantiferon test must be followed-up by a chest x-ray within three months prior to arrival

- Negative test result from MRSA screening in close relation to your arrival at Lund*

Due to local regulations MRSA screening, including bacterial cultures from nasal mucus membrane, throat, perineum and from any piercing or wound/skin changes, must be repeated upon arrival at Lund. This screening is free of charge and administered by the International Office. You must have a negative screening result from Lund to start your clinical studies as planned.

*Students from the Nordic countries (Sweden, Norway, Iceland, Finland and Denmark, included Åland, Faroe Islands and Greenland) are exempted from the MRSA screening.



EXTRACT FROM THE CRIMINAL RECORD

Students undertaking clinical placements within pediatrics will be required to present an extract from their criminal record.

If you are scheduled for a clinical placement in pediatrics, you need to be prepared to provide this documentation as part of the placement requirements. Please note that it may take time to receive this documentation.

Hygiene rules and dress codes

SCRUBS

Scrubs are supplied by the employer and include all visible items of clothing except shoes and socks. If a headscarf is worn, it must be fastened up. The headscarf must be changed daily. Scrubs are short-sleeved and must be changed daily, or more often if required. Lab coats or jackets with rolled-up sleeves do not count as short-sleeved clothing. This means that lab coats and jackets are not acceptable clothing for examination, care or treatment.

JEWELRY, NAILS AND HAIR

Hands and forearms must be free of watches and jewelry. Nails must be cut short and not be varnished. Artificial nails, nail extensions and nail jewelry are not permitted. Long hair must be fastened up.

PROTECTIVE CLOTHING

Protective clothing must be used when there is a risk of contamination of the work clothes. Examples include duties that entail a risk of splashing or contact with bodily fluids, personal care, or handling contaminated objects, such as when making beds or for invasive examinations and treatments. Preferably, use a disposal, patient-specific plastic apron. Otherwise, use protective gowns that are patient-specific and changed daily.

SPLASH PROTECTION

Wear a mask and safety goggles or a visor in situations where there is a risk of splashes towards the face.

GLOVES

Disposable gloves must be used if there is a risk or likelihood of contact with bodily fluids/

secretions. Gloves must be patient-specific and be disposed of directly after use. The outside of gloves becomes contaminated and they therefore spread infections in the same way as unprotected hands. In order to avoid the spread of infection when performing alternately dirty and clean work, gloves must be changed between different tasks for the same patient.

HAND DISINFECTION

Hands must be disinfected with disinfectant:

- before and after each patient
- before clean work and after dirty work
- before and after use of gloves

HAND WASHING

Hands must be washed with liquid soap and water if they feel or are visibly dirty and after care of a patient with diarrhea and/or vomiting. After hands are washed, they must be dried thoroughly and then disinfected.

MEASURES IF THE RULES ARE NOT FOLLOWED

Negligence of the rules may jeopardize the rest of your clinical studies at Lund University.



Confidentiality

According to Swedish law, you cannot pass on information concerning a patient's health or other personal conditions, unless revealing the information does not cause any harm or discomfort to the patient or his/her relatives. The confidentiality regulation applies to all medical activities. You will be asked to sign an agreement confirming that you have read and understood the confidentiality regulations. Note that you are bound to the confidentiality regulation after the completion of your exchange studies as well.

INFORMATION PROTECTED BY CONFIDENTIALITY

The following health and personal conditions are protected by the confidentiality regulation:

- personal information (name, date of birth, address, contact details etc)
- health condition
- information on past, current or planned medical treatments
- state of mind
- work capacity
- family relations
- This is information that might appear in medical records, emails or fax messages, test results or communicated face-to-face with medical professionals.

COMMUNICATING PATIENT INFORMATION

Be careful when communicating patient information by fax, i.e. use a pre-programmed card number or call the addressed person in advance. When sending sensitive information by email, both sender and receiver must use an email account locked by an electronic

id-card and the message must be encrypted.

OBLIGATIONS

As a medical professional, you are obliged to report if:

- you suspect a child to be abused or neglected. Contact the police and Social Welfare Agency
- the police may require information about a patient. If you as a medical professional suspect a patient to be involved in a criminal act, contact the police on your own initiative
- the Social insurance office may require information about a patient

The patient's right to have access to his/her medical record

In general, a patient has the right to read its own medical record. There are some exceptions, i.e. if revealing information may harm current treatment or health condition.

Do relatives to a patient have access to sensitive information?

A patient's relatives cannot claim confidential information. You are only allowed to give general information about the patient's location and well being, unless the patient has said otherwise.

Confidentiality concerning children and adolescent

When it comes to children younger than 18 years old, the general rule is that parents as guardians decide who should have access to the information received from the child's medical record. The older and more mature the child is, the child's own will must be considered. A general guideline is 12 years. This

means that from that age a child can decide whether a parent/guardian has the right to receive information from the medical records.

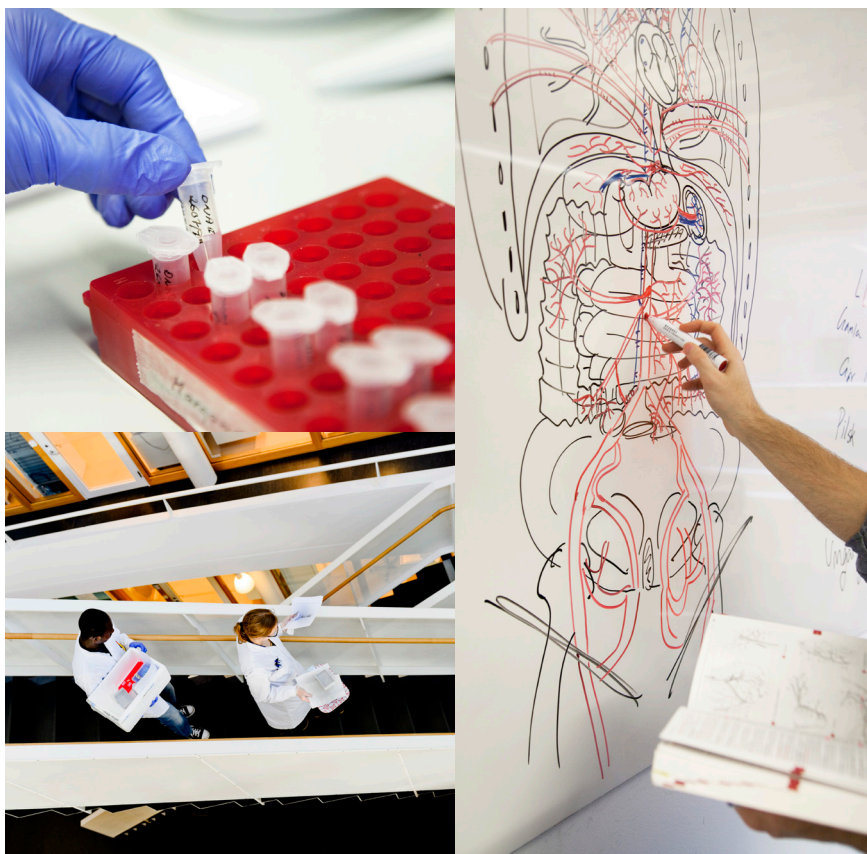
WHAT DOES 'INTERNAL CONFIDENTIALITY' MEAN?

'Internal confidentiality' means that only a medical professional that is currently treating a patient and needs the information within the framework of health care, has the right to read the patient's medical record.

MEASURES IF THE RULES ARE NOT RESPECTED

If confidential information concerning a patient is revealed, knowingly or by negligence, the medical professional may be in breach of applicable regulations and be subject to civil liability or even criminal prosecution.

Consult your supervisor if you are asked to share information from a patient's medical record.



Studying in a laboratory environment

SAFETY RULES AND GUIDELINES

Your supervisor is obliged to introduce you to the laboratory environment. To assure that you have received an introduction programme you will fill out the form "Checklist for student working in research groups" together with your supervisor. A risk assessment for your project must be performed and you will be asked to sign the checklist to assure that you have read, understood and agreed to abide by the safety rules of the research group.

Below, you will find important general safety guidelines. Please take the time to read them carefully. The research group will provide you with more specific safety rules related to your project.

- A lab coat must always be used in the lab. The lab coat must be buttoned and have long sleeves. It should hang in the lab when not in use and sent to laundry regularly.
- Disposable protective gloves should preferably be made of nitrile. Vinyl or latex gloves are poor alternatives. The gloves should be long enough to be pulled up over the sleeve of the lab coat to avoid a gap. The gloves must be changed often and taken off when you leave the lab. This to avoid contamination outside your workspace and exposing colleagues to unnecessary risk. Keep in mind; chemicals can permeate a protective glove. This can happen without visibly affecting the glove's material and without causing you pain or discomfort. Protective gloves are disposed of as hazardous waste.

- Respiratory protection must always be used for protection against harmful pollutants in the air, unless you are protected by other means such as by working in fume hood or ventilated bench.
- Please note! Be sure not to use contaminated gloves outside the lab (avoid doors and cabinet handles etc). Take off the gloves whenever you leave/take a break!
- Wear shoes that fully cover the feet. Sandals and clogs are not adequate. Shoes provide a great deal of initial protection in the case of dropped containers, spilled chemicals, and unseen hazards on the floor.
- Apart from working with hazardous chemicals, protective gloves must also be used when working with animals, blood and blood preparations, biological agents and/or dirty work.
- Hearing protection must always be used when there is a risk of harmful noise. The work should be planned and conducted with the aim to reduce exposure to a minimum. It may also be appropriate to use hearing protection to avoid the tiring effects of continuous exposure to monotonous noise such as work in LAF cabinets with noise > 55 dB(a).

Risks are eliminated or reduced in the following order:

1. Dangerous substances to be replaced by less hazardous
2. Working practices, processes, and technical devices are chosen in order to reduce risk
3. Protective measures taken in case of hazard
4. Work is sited to specific time or place

Good to know

CRISIS SIGNAL

The warning system, VMA, is tested four times a year, at 15:00 on the first non-holiday Monday in March, June, September and December.

The signal sounds continuously for seven seconds, followed by fourteen seconds of silence. The signal test lasts for at least two minutes. At 15:05, the signal that the danger is over comes, a signal of 30 seconds.

HOW TO SEEK HEALTHCARE

If you are in an emergency situation where there is danger to life, property or the environment, call 112. At 1177.se you can get health advice. You can also call the 1177 helpline around the clock if you are ill or injured. Your call will be answered by a nurse. You can choose to speak Swedish or English. The nurse can give you advice on how to manage your condition. If necessary, they can tell you where to go for care.

HEALTH & SAFETY AND HARASSMENT

Lund University does not accept violations or harassment.

Contact your international coordinator or supervisor. If needed they can help making it clear that it is unwelcome. You can also get help from someone else you trust in the workplace.



Healthcare system in Sweden

The Swedish health system performs well in general, life expectancy in the country is high and the general health among the population is good. Reports from the World Health Organization (WHO) and the Organisation for Economic Co-operation and Development (OECD), among others, confirm that healthcare in Sweden provides good access to high-quality care.

AGEING POPULATION

Just as in many other developed countries, people in Sweden are living longer and longer. The average life span among Swedes is now 84.73 years for women and 81.34 years for men. A positive development, of course, but also one that places demands on the healthcare system and increases the need for elderly care.

About one in five people is 65 or older. That means Sweden proportionally has one of Europe's largest elderly populations. Statistically, the share of children born per woman in Sweden is 1.52, close to the EU average of 1.53.

DECENTRALISATION OF HEALTHCARE IN SWEDEN

Healthcare in Sweden is decentralised – responsibility lies with the regional councils and, in some cases, local councils or municipal governments.

Sweden is divided into 290 municipalities and 21 regional councils. The decentralisation of healthcare is regulated by the Health and Medical Service Act. The role of the central government is to establish principles and guidelines, and to set the political agenda for

health and medical care.

The National Board of Health and Welfare (Socialstyrelsen) is a government agency under the Ministry of Health and Social Affairs that compiles information and develops standards to ensure good health, social welfare and high-quality health and social care for the whole population.

PUBLIC AND PRIVATE HEALTHCARE IN SWEDEN

In Sweden, there are both public and private providers of healthcare, and the same regulations apply to both.

When regional councils buy services from private healthcare providers, it is based on a model where the healthcare is financed by the council but carried out by the private provider.

There are several digital healthcare solutions provided by private actors, such as patient-doctor apps.



Main hospital sites for medical education

Region Skåne, or Skåne Regional Council, is the self-governing authority of Skåne, the southernmost county of Sweden. Region Skåne's competences include health and medical services, regional growth and development, public transport, culture and cross-border and interregional cooperation. It serves a population of approximately 1.3 million people, but has a larger catchment area.

Lund Infirmary, one of the oldest hospitals in Sweden, was founded as early as 1768. Malmö General Hospital was opened in 1896, since then the two hospitals have developed side by side. In 2010 the two university hospitals merged to form Skåne University Hospital (SUS). SUS is the third largest university hospital in Sweden and provides emergency and specialist care in all medical areas. In addition to being a central healthcare provider in Southern Sweden, SUS trains and teaches students in medicine and healthcare as well as medical interns, residents and medical doctors in specialist and subspecialist training. Helsingborg General Hospital is one of

Region Skåne's four complete emergency hospitals, providing advanced emergency healthcare around the clock covering all specialist medical areas. As one of three main hospital sites to host clinical education in the Medical programme, Helsingborg General Hospital has close ties to Lund University and medical research.

Skåne University Hospital

Catchment area: 1,7 million people

Number of employees: 12,000

Number of beds: 1,500

An average day at Skåne University Hospital:

22 children are born

420 emergency departments visits

129 patients have surgery

5 scientific articles are published

2 500 students are receive training

1071 inpatients are cared for

Helsingborg General Hospital

Catchment area: 250 000 - 300 000 people

Number of employees: 3000

Number of beds: 320



More information

RELEVANT HEALTHCARE ACTORS AND LEGISLATION

- The National Board of Health and Welfare (Socialstyrelsen) plays a fundamental role as the central government's expert and supervisory authority.
www.socialstyrelsen.se
- 1177.se is the healthcare system's website. It is also a telephone number
www.1177.se
- Health care in Skåne. Hospitals, dental care, Care Centres and Other Primary Care, Psychiatric Care.
www.skane.se
- The Swedish Council on Health Technology Assessment (SBU Kunskapscentrum för sjuk- och hälsovården) seeks to identify the best treatment methods for patients and most effective use of resources.
www.sbu.se
- The Dental and Pharmaceutical Benefits Agency (Tandvårds- och läkemedelsförmånsverket) is a central government agency assigned to determine whether a pharmaceutical product or dental procedure should be subsidized by the state.
www.tlv.se
- The Medical Products Agency (Läkemedelsverket) is the national authority responsible for regulating and monitoring the development, manufacture and marketing of drugs and other medical products.
www.lakemedelsverket.se



Glossary



Personnel

medical student
physician
junior doctor
consultant
surgeon
general practitioner (GP)
student nurse

nurse
auxiliary nurse
midwife
health care assistant/
physiotherapist
occupational therapist
radiographer

audiologist
speech therapist
caretaker
secretary
ward clerk
ward
ward round
ambulance
emergency room

first aid
intensive care unit



Personal

läkarstudent
läkare
underläkare
överläkare
kirurg
allmänläkare
sjuksköterske-
student

sjuksköterska
undersköterska
barnmorska
sjukgymnast/
fysioterapeut
arbetsterapeut
röntgensjuk-
sköterska

audiolog
logoped
vaktmästare
sekreterare
receptionist
avdelning
rond
ambulans
akutmottagning,
"akuten"
första hjälpen
intensivvårds-
avdelning, IVA



Equipment

referral
medical record
confidentiality
next of kin
emergency
date of birth
personal identity number
notice
appointment
x-ray
prescription
anamnesis
injury
ill
pain
ache
fever
cough
diagnose
treatment
drip
syringe
injection
painkiller, analgesic
antipyretic
white coat
scrubs
stethoscope
disposable gloves



Utrustning

remiss
patientjournal
sekretess
närmast anhörig
nödfall, akut
födelsedatum
personnummer
kallelse
tidsbokning
röntgen
recept
anamnes
skada
sjuk
smärta, ont
värk
feber
hosta
diagnos
behandling
dropp
spruta
injektion
smärtstillande
febernedsättande
vit rock
arbetskläder
stetoskop
engångshandskar



Useful words

hospital
university hospital
primary care centre
child health care centre
(generally located within a primary care centre)
antenatal care centre
(generally located within a primary care centre)



Användbara ord

sjukhus
universitetssjukhus
vårdcentral (VC)
barnvårdscentral (BVC)

mödravårdscentral (MVC)

Skåne University Hospital Area, Lund



LUNDS SJUKHUSOMRÅDE



Regionfastigheter 2023-06-12

Gatadresser och teckenförklaring

Exempel: 26 Tornavägen 26

● Akutgatan	● Lasarettsgatan	i Information	🚌 Stadsbuss	🏠 Bankomat	+ Akutmottagning
● Baravägen	● Remissgatan	P Parkering	🚌 Regionbuss	💊 Apotek	▨ Byggarbetsplats
● Barnvägen	● Systervägen	P Parkeringshus	🚆 Tåg	☕ Café	🎯 Här är du
● Entrégatan	● Sölvégatan	P Cykelparkering	🚆 Spårvagn	🍷 Kiosk	
● Hålsögatan	● Tornavägen			🍴 Mat	
● Klostergatan	● Strålgården				
● Klinikgatan					

Skåne University Hospital Area, Malmö



MALMÖ SJUKHUSOMRÅDE



Regionfastigheter 2023-11-01

Gatuadresser och teckenförklaring

Exempel: 14 = Jan Waldenströms gata 14

- Carl-Bertil Laurells gata
- Fritz Bauers gata
- Inga Marie Nilssons gata
- Jan Waldenströms gata
- John Ericssons väg
- Ruth Lundskogs gata
- Tora Kjellgrens gata
- Brita Granlunds gränd



Helsingborg General Hospital Area



Helsingborgs sjukhusområde



Gatuadresser och teckenförklaring

Exempel: 15 = Svarbrödragränden 5

- 1 Charlotte Yhlens gata
- 2 Svarbrödragränden
- 3 Karlina Widerströms gata
- 4 Bergaliden
- 5 Bergendals gata



Information



Parkering



Parkeringshus



Cykelparkering



Parkering för rörelsehindrade



Akutmottagning



Stadsbuss



Regionbuss



Apotek



Café



Kiosk



Mat



Bankomat

Regionfastigheter 2023-03-07

www.medicine.lu.se/exchange-studies



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