

# Thanks to all of you in Miami!



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First of all, I'd like to thank everybody who was in the 2013 IMIA International Conference in Miami and was worrying about me and caring about me. I am the person who got a fracture on the right knee cap on the first day of the conference, after coming to Miami all the way from Japan on the previous day.

I really appreciate Ms. Izabel S. Arocha, the executive director of the IMIA, Ms. Kazumi Takesako, the IMIA Japan Chapter Chair, and Ms. Chieko Sakihana, the IMIA West Japan Chair, who really did take care of me despite their busy schedule during the conference. Especially, I owed a lot to Ms. Sakihana. Without her support, I could not have attended the conference at all and could not have come back to Japan. The followings are the report about what happened to me and my comments about it.

## 1. Personal Special Program:

Thanks to this accident, I ended up in arranging a special program for me to see an ER in the US. Before coming to the US, Chieko and I had talked about a plan to visit some hospitals in or around Miami after the conference to know the US medical interpreter system or the conditions and the situations in the US hospitals. Wow, I made it happen by myself on the first day!

## 2. 8 Hour Medical Terminology Boot Camp and the instructor, Ms. Yadira Williman:

Because of the accident and others, Chieko and I could join the class for only 2 hours in the morning section, although it was a class for 8 hours in the whole day. We missed the precious another 6 hours. Even though the time was limited, we really enjoyed the class so much. It was so interactive that every student seemed to enjoy it and was eager to answer any questions. The students got involved in the class so actively. Her way of teaching was great, aiming at us learning medical terms easily, effectively and efficiently by ourselves in the end. She used big pictures of each body system. She used medical term cards. Her explanation about diseases was well summarized and was easy to understand.

After the morning section, we were going out of the room for lunch. Later, I found that that was the moment I should have said, "Good-bye", to the class. In the lunch break, I got the injury. I heard that not

only Ms. Williman but also the students felt sorry for me after hearing about my accident. Thank you for your consideration!

Two days after the workshop, Ms. Williman kindly came back only for informing me about how to continue the study. And, in addition to that, she told me about her life, how she overcame her difficulties and how she made things she had wanted happen. Again, it was for me, in order to encourage me. I would deeply appreciate her kindness here again. Thank you, Ms. Williman!

3. The persons at the reception desk, serving as receptionist for us voluntarily:

The ladies and the gentlemen helped me all the time from the beginning to the end in the conference. Especially, the young gentleman! Oh, God! I forgot to ask him his business card and don't know how I should call him now. He was kind enough to permit us a late registration of the Boot Camp. And, later, he turned out to be a key person who helped me a lot in the whole process of my injury.

They kindly let us know how to go to a good restaurant for lunch. After hearing it, Chieko and I left the conference building. Then, I fell suddenly and my whole weight was put onto the right knee at the pavement in front of the building. It was so sudden that I had no idea what had happened to me. But I heard the sound of the fracture from my right knee. I wonder why? My heels might have been wrong. More than that, I think the way of finishing the surface and the curve of the pavement, which looked like being painted in bright orange or shocking pink was different from Japan's. That's why my body or leg could not appropriately respond to the surface.

Most of the receptionists came out of the building to us and the young gentleman said, "I called 911." I just nodded to him. But, in my heart, I spoke to myself, "Thanks God!"

4. Ambulance:

The ambulance soon came to us. The ambulance staff asked me, "Do you want us to send you to a hospital? You need to pay for it." I said, "Yes." In Japan, using an ambulance is free. Japanese travelers in general are supposed to know this difference before coming to the US. I was asked how I fell, my name, birthday and so on by the staff. Finally they asked me to write down my signature to make sure I had asked the transportation by the ambulance to a hospital. If I had asked a medical interpreter for me at that time, he or she would have known the difference and explained it to the Japanese patient.

5. ER:

I was on a stretcher, brought to a hospital named Mount Sinai Medical Center, which, I heard, is the No.1 and only one hospital in Miami, and lined up along the side of the corridor among other patients. A man coming to us introduced himself with his name and his title, nurse, and asked me how the fracture occurred. Later, an orthopedist came to me. I could know that because he also introduced himself. In Japan, I have rarely heard a doctor, even a nurse, introducing himself/herself at a hospital. Then, I got X-rays. They found a simple fracture on my right knee cap. The doctor said, "After finishing what you had planned in the US, you need to get a surgery at home."

I was discharged with a knee brace, a pair of crutches, a prescription of a painkiller and a piece of paper called disclaimer, telling about my case in the following style:

\*Discharge instructions: Your nurse will review these instructions with you in detail to assure that you understand the care and precautions you will need to take after leaving the hospital.

\*Information about your condition: This literature provides details about your diagnosis, possible

treatment options and other information that may be of assistance in the days ahead

\*An explanation of your medication: We will provide details about all the medication you are taking, along with the proper dosage and any possible side effects

\* A list of neighboring pharmacies: . . . . .

I think this is very easy, handy, useful information for a patient, especially, a tourist coming from abroad like me. Personally, I have never received this kind of information when discharged in Japan. We may ask for a medical certificate for insurance money or a medical referral to another doctor. The contents might be similar to this but the information is not for a patient to understand his/her conditions. I heard that Florida is prospering with international tourism, medical tourism, and new residents from all over the world. That might be the reason why they know how to handle foreigners so well. Actually, unlike an American TV series, "ER" which was televised in Japan, everything was well organized. They did not waste any time. In order to prosper with tourism, I think that we should have a system like the one I saw in the US in this point.

The only thing I regret was that I did not ask a medical interpreter, pretending perfect LEP. I did not even try to ask about the medical interpreter system in the hospital. Of course, I was too busy with my injury to come to think of it; "Who will come next? What will happen next? We need to go back to the conference ASAP!"

#### 6. The conference:

Coming back to the conference next day, I found a wheel chair arranged for me. It was the young gentleman at the reception desk who had asked it to the conference hall. With the wheel chair, I took part in every workshop, panel and plenary session I wanted to be.

On hearing the sound of the fracture, I felt I was destined to get it to arrange the special program for myself. And the trip to the conference was my first step or my debut to the international medical interpreter's world. All of you were pure, warm and passionate. I was really happy to be among you and surrounded by you. I know that there is the IMIA code of ethics. I strongly believe that we are the persons who do love people and who do care people.

#### 7. Coming back to Japan:

After coming back to Japan, I went to see an orthopedist, got hospitalized and had a surgery. I have been staying at the hospital for rehabilitation for almost one month from that time on.

At the first visit, after seeing my fracture and documents from the US hospital, the orthopedist said, "I have seen many patients who got an injury overseas and came back with miserable treatment there. You are quite lucky to have been sent to and examined in a good hospital." She said that one of the cases was that the patient got surgery but came back to Japan with no follow-up information." Was it because of the hospital system or the language barrier? Anyway, I think it is important that both should be adjusted or arranged to a growing global village as we heard from the keynote speaker, Mr. Guadalupe Pacheco, at the plenary session in the conference.

I feel the move of my right leg is improving, day by day. In a few days, I will be discharged. Here, I would like to apologize for the delay of this report because of the hospitalization.