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Interview with Dr Lai Yi Rong

Interviewed by Dr Tan Eng Chun, MCFP(S)



Dr Lai Yi Rong

Recently, the social media was abuzzed with a story by a grateful father recounting how a family physician saved his 4 year-old son, Brandon, from impending anaphylactic shock from Buckwheat noodles. The post garnered nearly about 20,000 likes within hours. The mainstream media quickly picked up the story, and featured the heroine, Dr Lai Yi Rong, on their news.

College Mirror caught up with our heroine, who is an alumna of the 2014 MMed (FM) graduating class to recount for us the incident.

College Mirror (CM):

Can you briefly tell us what happened that day?

Dr Lai Yi Rong (YR):

It was at 8:20 pm and I was getting ready to close the clinic when I heard the worried voice of a mother at the clinic counter saying, "My son is very sick." From behind the closed door, I heard a high pitched cough outside which sounded like stridor. Sensing that something was wrong, I rushed out of the consultation room to look at the boy. The boy appeared flushed with facial swelling, and the first thing that struck me was that he is gasping for air and in respiratory distress.

I immediately got the young boy into our treatment room and my

differential then was either upper airway obstruction or bronchospasm. Thinking it was bronchospasm, I mixed salbutamol and adrenalin solution in the nebuliser and put it on my young patient.

Meanwhile, the mother was concerned that it was the oranges or buckwheat soba noodles that he has eaten that caused this. Worried that the child could be having anaphylactic reaction to buckwheat, I encouraged the mother to keep the child awake while I prepared the adrenalin solution for intramuscular injection. To my relief, the young boy improved dramatically after the nebuliser and the wheezing stopped.

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(continued from Cover Page: Interview with Dr Lai Yi Rong)

CM:

How is the family now?

YR:

Brandon was sent to the hospital, where he recovered well. He was discharged after 2 days. The mother mentioned that he was quite well when he reached the hospital but the doctors wanted to admit him for observation.

CM:

What are your thoughts or lessons you would like to share with our fellow colleagues from this experience?

YR:

I like the fact that one of the newspaper article mentioned that Family Physicians are not just "cough and cold doctors". My post graduate training, through the GDFM followed by MMed (FM), has sharpened my clinical skills and prepared me to handle this emergency situation and other complex clinical cases. As Family Physicians, we provide comprehensive, continual and holistic care for our patients, even those with complex care issues. This requires extensive clinical knowledge, and integrating skills from various disciplines. These are skills sets unique to the family physicians that no one clinical discipline possesses.

Patients of today have increasingly complex medical issues and as Family Physicians, we have to continuously upgrade and acquired other clinical skills. I thus took up Graduate Diploma in Palliative Medicine after my MMed (FM). Currently, I am providing Home Care Services for a Non-Profit Organisation to various patients that require palliative and homecare medical services during my non clinic days.

■ CM

(continued from Page 2: Infectious inspiration)

Lastly, College can never be what it is today if not for our diligent secretariat staff, who are the unsung heroes at the end of the day. We wish to make special mention in this issue for Miss Jennifer Lau, who has tirelessly worked for College and earned her prestigious 10-year long service award! We hope that our secretariat will grow from strength to strength and continue their good work for the College!

Yes, the infectious inspiration is spreading slowly but surely in our College, amongst her tutors, sub-editors and secretariat. This is one infection that is good and needs no prescription to treat.

■ CM