Dear ESO Team,

I am writing to sincerely thank the European Stroke Organisation for providing me with the opportunity to undertake a Department-to-Department (D2D) visit at Department of Stroke Medicine, Leicester Royal Infirmary, United Kingdom, under the mentorship of Professor Dr. Jatinder Minhas. This experience has been an invaluable part of my professional and personal growth, and I am truly grateful for the support that made it possible.

During my stay, I was able to observe several aspects of stroke care across different clinical settings. I gained direct exposure to acute stroke services, particularly in the Emergency Department and Acute Stroke Unit with Dr. Minhas and team, where I learned how patients are rapidly assessed by consultants and registrars, transferred for imaging within minutes, and thrombolysed when indicated. This efficiency of care and structured pathway was an important learning point for me. I also attended the virtual Heart-Brain multidisciplinary team (MDT) meeting, where I witnessed how complex cases are reviewed holistically, and decisions are made collaboratively, keeping both neurological and cardiovascular aspects in view.

In addition to acute stroke, I spent time in the TIA and outpatient clinics with Dr. Musarrat, where I observed follow-up patients and learned how recurrent or mimicking conditions are approached in the UK system. I also joined ward rounds in the acute stroke ward with Dr. Moqsith, where I deepened my understanding of inpatient management and protocols. I was particularly impressed by the seamless use of electronic medical records — integrating prior history, scans, referrals, and prescriptions into one platform — and how this supported safe and efficient care delivery by both doctors and nurses. This experience was vastly different from what the practices are at our center and Nepal as a whole.

Another important component of my visit was shadowing with the consultant during stroke rehabilitation services at a community hospital. There, I saw how patients discharged from tertiary care hospitals continue their recovery, with emphasis on physical, emotional, occupational, and social reintegration. The model of utilising highly trained nurses with consultant input during rounds was especially enlightening, and it broadened my understanding of how stroke care is extended beyond acute treatment into long-term rehabilitation.

Beyond the hospital, I had the opportunity to experience Leicester's diverse cultural and social environment. Professor Minhas was an outstanding mentor who not only guided me clinically but also helped me integrate into the local setting, introducing me to members of the community and encouraging me to explore the city and beyond. His mentorship, hospitality, and encouragement

were central to making this visit as rewarding as it was, and I remain deeply grateful to him.

Following my observership in Leicester, I also had the privilege of attending the ESO Stroke Research Workshop in Edinburgh (September 2025). The workshop was immensely insightful and helped me refine and shape my own research ideas. The sessions on study design, methodology, and collaborative opportunities provided me with practical tools that I plan to integrate into my future work.

Overall, this ESO-supported visit has been a truly transformative experience. As a primary care physician in Nepal with aspirations to specialise in neurology, I will carry these lessons forward and hope to work with local stakeholders to strengthen stroke pathways and rehabilitation services in my own setting. I am also keen to continue collaborations in the future, both with ESO and with colleagues I met in Leicester.

Thank you once again to ESO for making this possible.

With warm regards,

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