

## SUMMARY REPORT

### **Healing the Children Foot Surgery Medical Mission to San Lucas Toliman, Guatemala February 2 -9, 2013**



After a rewarding HTC/Rotary Medical/Surgical Foot Surgery Mission to the Hospital Parroquia San Lucas in San Lucas Toliman, Guatemala in early 2012, an invitation was extended by the Hospital Administrator, Pablo Bendicto and the Hospital Medical Director, Dr. Rafael Tun, for a return mission in 2013. The 22 surgical patients from 2012 healed successfully and there were no complications during their follow-up care. The hospital is a community hospital serving the 25,000 residents of San Lucas Toliman as well as the 17,000 people in the surrounding area and beyond as the reputation of the clinic and mission surgery teams

continues to expand into the communities surrounding Lake Atitlan.

This medical mission evolved out of the efforts of Healing the Children volunteers Will and Diane Boegel who served on HTC medical mission teams to Guatemala (2004) and Vietnam (2007) and subsequently felt called to return to Guatemala to serve the needs of the poor, the indigent, the sick and the forgotten in a society, particularly the Mayan community, emerging from the 36 year civil war and its effects. They sold their house in the US and moved onto a finca (farm – Opal House) near the town of San Lucas Toliman. ([www.opalhouse.com](http://www.opalhouse.com))

The hospital has 65 beds distributed through three wards plus an OR, recovery area, central supply for sterilization and a very active delivery room and ER. (<http://www.sanlucasmission.org/healthcare.php>) Dr. Tun is the sole medical physician at the clinic/hospital and Dr. Will Boegel conducts free clinic days for foot and ankle orthopedics twice a week. There is also a fully equipped dental clinic with local dental technicians and occasional visiting volunteer dentists. The surgical team this year was sponsored by The Healing the Children Oregon and Western Washington chapter ([www.htcoregonwashington.org](http://www.htcoregonwashington.org))

This team of 17 volunteers committed to sacrificing precious time from their busy work schedules to help the poor and needy people of San Lucas Toliman and surrounding Lake Atitlan. It consisted of 4 surgeons, 2 anesthesiologists, 1 family physician/team physician, a nurse anesthetist, a resident, 3 nurses, 2 scrub techs, a team administrator, a logistics assistant, and a premed student. Although most were from Seattle and Anacortes, Washington team members also came from Philadelphia, PA; Atlanta, GA; Rice Lake, WI; and, West Kingston, RI. Dr. Boegel and Diane Boegel were able to contribute their surgical skills as vital members of the team. The Team Leader was Stephen Miller, DPM and the Team Administrator was Marc Estvold.





Dr. Boegel has brought a lot of medical equipment and supplies to the hospital to make it more functional, especially for surgery. Since our last mission He and Dr. Miller as well as other volunteers were able to get another half-container of equipment and supplies to the hospital, including a fluoroscopy C-arm machine. Blood transfusion bags were delivered for urgent blood needs in the future (this mission does not typically need any blood transfusions). A donor was able to acquire and pay for a sevo vaporizer for one of the anesthesia machines. Dr Tun and Pablo Benedicto were instrumental in helping our team navigate

through all the bureaucracy to register our medical volunteers and have our medications and supplies clear customs.

The staff at Hospital Parroquia San Lucas all were gracious hosts to the HTC Team. They included all the hospital support staff as well as the following:

Hospital Medical Director: Rafael Tun, MD

Local Mission Liaison: Will Boegel, DPM, Opal House

Hospital Administrator/Director: Pablo Benedicto

A number of long-term parroquia volunteers were helpful as translators and two fourth-year medical students from the University of Virginia who happened to be doing a rotation at the hospital were especially helpful and able to participate in various aspects of the surgical care. Another volunteer from the US who provided tremendous support was Glen Barde.

Patients were initially procured via the local clinics and networks of Dr. Tun and Dr. Boegel. Many more arrived for the screening day (Feb 2nd) as a result of local advertising and word-of-mouth. Several presented at the hospital during the mission. Unfortunately, the team was unable to successfully procure a volunteer orthopedic surgeon for this mission and there were many patients who would have benefitted from such expertise.

The goal of the HTC medical mission team was to treat children with foot and ankle deformities and to donate equipment and supplies and medications to the hospital to enable more surgery to be done locally. The pathology encountered included clubfeet (virgin, rigid, neglected, residual and partially corrected), partial dropfoot, hardware for removal, tumors, cerebral palsy, isolated equinus, congenital pes valgus, short limb, valgus ankle post-trauma, and digital deformities of the lower extremities as well as a child with Streeter dysplasia. During the mission the team evaluated 60 patients, 25 of whom were accepted for surgical intervention, undergoing 59 surgical procedures. There were 11 patients who failed to show-up at the hospital in spite of precious arrangements.

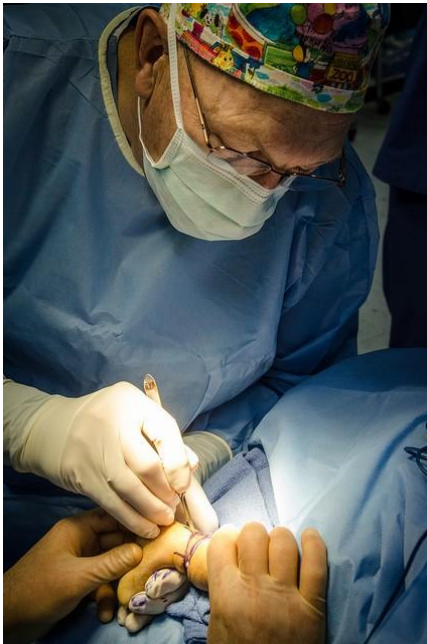
Follow-up care will be provided by Dr. Will Boegel at no cost to the patients or their families. A modest fund was



left with the hospital administrator to cover costs of x-rays. Those taken for the mission patients were covered as well.

As listed in the Summary Statistics Report, a large amount of surgical equipment and instrumentation was donated to the hospital. This included Stryker Electric TPS hand switches procured through ProjectCURE; a 1.5-4.0 mm cannulated screw set loaned from MetaSurg; a pin cutter; some new hand instruments; and, some sterilization trays. Especially valuable were the many AFO braces donated by Cascade DAFO for follow-up care. Most medications were supplied by Group Health Global Health at cost. To all these generous donors we are very grateful.

Several needs were discovered that would enhance the operating room. Since there are two operating tables and only one overhead set of OR lights there is still a need for another set of OR lights. Also the fluoroscopy C-arm machine needs a new set of batteries to bring it to full function. Above all, the very old and worn hospital x-ray machine needs to be replaced with an upgraded model. Some pediatric-sized tourniquets to go with the existing machines would be helpful as well as a couple of portable suction machines that could be left there.



In order to cover some of the in-country expenses such as some snacks, tips, miscellaneous supplies purchased locally, transportation, tips, etc. \$100 each was collected from the team members BEFORE the mission trip. This made it less onerous on the volunteers so they did not have to carry so much cash and did not have to be burdened with one or more unexpected expense donations during the trip. This was of great help in budgeting. However, it was somewhat confounded by request for a donation to HTC on the volunteer application form. This tends to cause unnecessary confusion. Other sponsors of this mission were the Rotary Club of Fidalgo Island and some private donors.

In summary, the team felt welcomed and well-supported by the hospital with no requests for financial payments per patient other than for x-rays. Dr. Tun and Pablo Benedicto made it abundantly clear that not only did they appreciate the team's work and care and donations this visit but look forward to future visits from our medical team. Organization was less chaotic this year and the Jornada Dinner hosted by HTC for the team and hospital staff and volunteers generated enormous goodwill. Through the efforts of this HTC medical mission, many lives were enhanced and the hospital left much improved and better supplied. For one child the donated surgery avoided a limb amputation.

Stephen Miller, DPM, Team Leader

Addendum: Dr David Hunter, ObGyn, who scouted the hospital and medical support in the area last year had been invited back to provide his ObGyn surgery skills to the local community with the full support of the hospital, was unable to make it due to other commitments. However, he is planning to return.