



Bridges to Community

Medical Volunteer Information Packet



2018-2019

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Introduction

Our mission is to build a more just and sustainable world through service learning and community development by engaging volunteers to work in developing countries- building community and changing lives.

Bridges to Community is a service learning organization that brings volunteers of all ages to engage in meaningful development projects and programs within communities in Nicaragua and the Dominican Republic. Over 700 volunteers travel with Bridges each year to work alongside community members in housing, education economic development and health projects.

In Nicaragua, for every 10,000 inhabitants there are 12 hospital beds, 9 doctors, 8 nurses and 7 nursing assistants. Although the national healthcare system is set to provide a network of services, most health posts, centers and hospitals are underfunded and understaffed for the high demand of medical treatment. Access to healthcare is also very limited depending on location within Nicaragua with access extremely limited in the rural areas. Because of these factors, the national healthcare system depends on community health leaders, midwives, health brigadistas and international medical brigades to assist in attending to the health needs of the Nicaraguan population.

The BTC medical program provides cost-free medical consultations and medication to rural Nicaraguans in the underserved communities of the country. Coordinating with the Ministry of Health of Nicaragua (MINSa), BTC brings medical brigades to health posts where volunteers work side by side with local professionals to provide critically-needed medical services, including preventative treatments, workshops, care for women and children, immunizations, medication and mosquito-borne illness information. impactful medical assistance for people in the communities.

Volunteers who have little to no medical background can also assist in medical brigades by assisting in triage, organizing clinics and by providing community health care workshops.



Where BTC Works

The Bridges to Community health program focuses in the municipality of Siuna, an autonomous region on the North Atlantic coast of Nicaragua. Due to natural disasters, distance from the capital and lack of access to resources and infrastructure, the Atlantic coast of Nicaragua is the poorest part of the country. In Siuna, we coordinate with Nicaragua's Ministry of Health (MINSa) and community health promoters to bring health projects and health brigades to the community epicenter of Hormiguero.

The community of Hormiguero serves as the vital trade point to 50 communities, and is the location of the health post for almost 18,000 community members. Common health issues reported and treated in the region are and reflective of the lack of water and sanitation infrastructure and the physical demands of rural country living, and include diarrhea, parasites, pneumonia, asthma, kidney infections, arthritis gastritis and dermatological conditions.

The Ministry of Education and community health promoters are limited by staff and resources to serve such a large population, making Bridges health brigade participation critical to the region. Brigades support MINSa initiatives, bringing essential personnel, resources and knowledge to community members and advocate permanent behavior change as a preventative tool.

Volunteer brigades will also have the opportunity to visit the *casa materna*, a maternity ward built by Bridges to Community in 2014 that houses women before and after birth who for distance of poverty are unable to receive pre and postnatal care. expectant mothers travel hours or even days to stay at the casa materna for their last month of pregnancy where they have guidance and care by a doctor and nurse. Volunteers will also tour the local health post that currently serves the 28 communities. Underway is a new regional facility right next door, funded by Bridges to Community and partner organization Building Goodness Foundation, scheduled to be completed by March 2018.

Medical Brigade Trip Description

All volunteers are met at the airport by Bridges to Community staff, who will stay with the group 24/7 for the duration of their trip. Medical trips are 8-9 days, including travel time to the clinic site. Longer, extended trips for 2-4 weeks are also available.

Trip fees include in-country hotels and housing, travel expenses including roundtrip airfare to Siuna, all meals, 24 hour a day accompanying staff, clinic translators as well as some medical equipment to use during the clinic. Airfare to Nicaragua is not covered in the price.

The Hormiguero location, where volunteers will work, eat and sleep, provides a community environment that allows volunteers to be immersed and with direct access to witness the conditions in which their patients and participants live, providing a firsthand experience of understanding. Public health groups are housed in a dormitory, which has basic bunk beds, latrines and shower stalls. All meals are prepared on-site by hired cooks that have been trained in hygiene and proper food handling protocol. All food is prepared using purified water, which is also available for drinking at all times.

Optional housing is available in local hotels for an additional fee.



For a general guide to

Bridges to Community trips, please review our [Volunteer Handbook](#)

Safety

All Bridges to Community staff are trained in First Aid and CPR protocol, renewed every year. Staff also carry a first aid kit with them at all times to minor illnesses and injuries.

Bridges purchases Travel Medical & Evacuation Insurance for every volunteer that travels with us. This plan provides \$15K USD worth of coverage per volunteer as a "Secondary" Medical Policy in the case where medical treatment is required for a volunteer while in-country. This coverage also includes Emergency Evacuation Coverage and is applicable when "the level of medical service required is non-existent" in the country where the volunteer is located and in order to be treated successfully, they need to be transported by to the US aboard an air ambulance.

One Week Sample Itinerary

	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7	DAY 8
7:00 AM		Breakfast	Breakfast	Breakfast	Breakfast	Breakfast	Breakfast	
8:00 AM							Check in to La Costena. Return to Managua	Transport to airport
9:00 AM		Travel to Siuna	Clinic	Clinic	Clinic	Clinic		
10:00 AM								
11:00 AM								
12:00 PM		Lunch	Lunch	Lunch	Lunch	Lunch	Lunch	
1:00 PM	Arrive in Managua. Dinner. Stay in hotel	Travel to Hormiguero	Clinic	Clinic	Clinic	Pack up clinic	Tourism activity	
2:00 PM		Set up dormitory				Pack up dormitory		Travel to Siuna
3:00 PM		Set up clinic				Tour Siuna		Hospital
4:00 PM								
5:00 PM		Free time	Free time	Free time	Free time	Free time		
6:00 PM		Dinner	Dinner	Dinner	Dinner	Dinner	Dinner	
7:00 PM		Reflection	Reflection	Reflection	Reflection	Reflection	Reflection	

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Clinic Organization

Setup

Medical brigades work in the Regional Health Center in the community of Hormiguero. The center has a laboratory, pharmacy, emergency room. As well as 9 private consultation rooms that volunteers will use to see patients. Volunteers will divide the tasks of registration, triage, consultation and pharmacy. Bilingual translators will be provided for the week.

Clinical Equipment

BTC keeps a supply of basic medical equipment for use by volunteers. Volunteers who decide to bring their own equipment must register all pieces with MINSA before arrival, please review details in the [Required Documentation](#) section below. Please see [Appendix II](#) for full list of equipment provided by Bridges to Community, and [Appendix III](#) for recommended equipment to bring.

Medications/Pharmacy

Groups will be provided a set of medications designed to treat common illnesses. Amounts are based on treating acute conditions and starting therapy for chronic conditions until the patient can be reassessed and possibly continued on the medicine after reevaluation by a MINSA physician. Our pharmacy is based on what is available in the region and what is used by MINSA. Please see the full list of medications provided in [Appendix I](#). Please check out how to fundraise for your group's medication in our [Fundraising Guide](#).

Clinic Staff and Records

The Hormiguero Health Center will have local medical staff present on the premises during the trip, providing assessments of follow ups for patients, shadowing opportunities, advice and exchange. We hope our interactions will foster cross-cultural exchange of both medical and non-medical information. In keeping with local staff's record requirements, BTC staff and your team will keep basic documentation of medical interactions. To help with this process, we have medical documentation forms to use during our interactions as well as Discharge and Referral forms (see Appendix).



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Fundraising

Bridges to Community recommends that each volunteer reach out to friends, family, coworkers and other individuals to help them fundraise for their trip costs.

Additionally, to keep the health center's pharmacy stocked throughout the year, we ask volunteers to help fundraise for the medications that will be used during the week of their trip. All remaining medication is donated to the health center, where local health professionals will access it to continue providing medication throughout the year. Each brigade's fundraising goal is US\$2,000. Please refer to our [Guide to Fundraising](#) for fundraising ideas. If you are excited about your trip with Bridges to Community and committed to helping make a difference in the world, you should have no problem asking for support from friends, family and strangers. You are offering them a way to get involved in creating a more just and sustainable world—a cause most people won't argue with!

Medical Group Documentation Requirements

In accordance with Nicaraguan Ministry of Health regulations, Bridges to Community must supply complete licensing and certification information for every medical volunteer who participates in our programs. To comply with Ministry of Health's strict deadlines and regulations, BTC must receive the following information from each medical volunteer **2 months** prior to their arrival. Upon receiving the following documents, BTC staff will acquire the necessary written endorsement from the Ministry of Health's local and national offices.

All documents requested below must be signed, notarized, scanned and emailed to rosaisela.mendez@bridgestocommunity.org and paula.mulhair@bridgestocommunity.org. All stamps & notaries must be visible on the scanned copies. Seals that are embossed or raised will not appear and cannot be accepted.

All original copies of the following documents must be brought to Nicaragua to be presented to the Ministry of Health upon arrival of the group.

Needed Documentation for the Medical Brigade

➤ **Donation Letter** : To be filled out if you are bringing medicine or equipment that will be used and left in country/ brought home. This form is used to provide the **total value(\$\$)** of medicines, disposable materials, instruments and medical equipment that will be brought to and **will stay** in Nicaragua. It also provides the **total value(\$\$)** of instruments and medical equipment that will be brought to but **will not stay** in Nicaragua (i.e. stethoscopes). These total values come directly from the medicines, instruments and medical equipment listed on the Donations and Temporary Equipment Lists (Formulario # 1 and #2).

The letter must be printed on official paper from the medical school/institution, stamped with an official stamp from the medical school/institution, signed by an administrative position of the medical school/medical institution, and be signed and notarized by a notary. All stamps & notaries must be visible on the scanned copies. Seals that are Embossed or Raised will not appear and are unacceptable.

➤ **Travel Itinerary**: Please provide a list of all participants (medical personnel, medical students and volunteers), their names, current titles, specializations (if applicable), and their flight itinerary. The travel

itinerary must be printed on official paper from the medical school/institution, stamped with an official stamp from the medical school/institution, and be signed and notarized by a notary. All stamps & notaries must be visible on the scanned copies. Seals that are Embossed or Raised will not appear and are unacceptable.

➤ **Informational letter:** This letter formally announces the arrival and intentions of each medical brigade, the dates they'll be in country, where they will be working, etc.

Bridges to Community will write this letter once we have received the details regarding the group's dates. The letter must be printed on official paper from the medical school/institution, stamped with an official stamp from the medical school/institution, signed by an administrative position of the medical school/medical institution, and be signed and notarized by a notary. All stamps & notaries must be visible on the scanned copies. Seals that are Embossed or Raised will not appear and are unacceptable.

➤ **MIGOB report:** Bridges to Community must report the names, birth dates and passport numbers of each volunteer that visits Nicaragua with our organization to the Nicaraguan government a minimum of 7 days (excluding weekends) before the group arrives. Bridges Nicaragua will create and turn in this report after we have received all names, birth dates and passport numbers of participants, this information we will receive after each participant has filled out and submitted their Bridges to Community application.

Needed Documents for Medical Professionals

➤ **LICENSES:** Please provide scanned copies of updated medical pocket licenses for every physician, resident, physician assistant, nurse and dentist. All license copies must be valid for the dates of the trip, signed and notarized.

➤ **RESUMES:** Please provide scanned copies of resumes for every physician, resident, physician assistant, nurse, and dentist. All resume copies must be signed and notarized.

➤ **DIPLOMAS:** Please provide scanned copies of diplomas for each physician, resident, physician assistant, nurse, and dentist. A digital photo of larger diplomas will work. All diploma copies must be signed and notarized. If a doctor has a specialty listed on their resume, there are 2 options: provide a signed and notarized copy of the specialty diploma, or edit the resume to not mention anything regarding the specialty. The latter option will require that they still send their General Medical Diploma, signed and notarized, this will not affect the doctor's work in any way in-country.

Other Documentation Sometimes Needed

➤ **Intention Letter:** To be filled out **if you are not bringing medicines**, but are bringing **equipment to be used in-country** and will take back to the U.S.

This letter must list the **total value** of the instruments and medical equipment that will be used while the group is in country, but **will be brought back** to the US upon completion of the medical trip. These total values come directly from the instruments and medical equipment listed on the Donations and Temporary Equipment Lists (Formulario # 1 and #2).

The letter must be printed on official paper from the medical school/institution, stamped with an official stamp from the medical school/institution signed and notarized, signed by an administrative position of the medical school at the University. **All stamps & notaries must be visible on the scanned copies.**

➤ **Letter for Eye Glasses:** this letter must be present if there is an eyeglasses donation, and an optometrist is not part of the group. Each pair of eyeglasses must be listed on the Donations and Temporary Equipment List (Formulario #2) with their prescription strength.

Bridges to Community will write this letter once we have received the details of the eyeglasses. The letter must be printed on official paper from the medical school/institution, stamped with an official stamp from the medical school/institution, signed by an administrative position of the medical school/medical institution, and be signed and notarized by a notary. All stamps & notaries must be visible on the scanned copies. Seals that are Embossed or Raised will not appear and are unacceptable.

The group **must** bring all original copies of all the following documents to Nicaragua to be presented to the Ministry of Health upon arrival. All physicians, residents, physician assistants, nurses, and dentists must bring all their original notarized documents with them.

Common Health Complaints

Worried Well

As with any primary care population, most families will complain about ‘self-limited’ (a disease process that resolves spontaneously with or without specific treatment) illnesses. A disease model approach—“this is a URI, this is gastritis, this is low back strain”—will only lead to a superficial impact that leads to higher use of medication and repeat visits. On the other hand, a family based model will provide insight into the real issues leading to the visit. Asking questions such as “How do you feel with your pain?” opens the box to see if there are underlying issues of abuse, depression, and stress. Other questions to ask the patients include ones about primary emotions: “Are you angry (frontal headaches), sad (neck pain), anxious (jaw clenching), and to a lesser degree surprised, disgusted, joyous (pregnancy being okay).”

Cough and Cold

Coughs and colds are some of the most prevalent complaints for reasons including: in-house kitchen smoke, close confinement and young age. Remember to explain to the patient that viral infections are self-limited and that antibiotics are not useful. Encourage the patients to drink fluids, especially tea or hot water with honey (not for children < 12 months). DO NOT provide cough/cold medications to children other than acetaminophen/ibuprofen for comfort. Our goal is to have patients self-manage this illness/condition without our assistance in the future. Ear infections are also generally self-limited, but if they complain of ear pain it is reasonable to do an ear exam. If infected, you may treat with Amoxicillin (80mg/kg/d) for 5 days in order to avoid yeast infections. If a child complains of sore throat look for Strep in order to avoid rheumatic fever.

Abdominal Discomfort

Many patients complain of abdominal discomfort/pain, usually the result of parasites. Typical symptoms include bloating and decreased appetite. Treat patients with Albendazole (excludes infants and women).

Diarrhea

Diarrhea is generally self-limited with the biggest danger being dehydration. Management of diarrhea involves oral rehydration therapy. Brigades may offer oral rehydration packets and/or encourage patients to make their own with the following recipe: 8 level teaspoons of table sugar (sucrose) and 1 level teaspoon of table salt mixed in 1 liter of boiled water. Fructose (fruit sugar) or artificial sweeteners should not be substituted for the table sugar in this recipe. A half-cup of orange juice or half of a mashed banana can be

added to each liter both to add potassium and to improve taste (also included in home remedies). Remember that ORT should only be used for 12 hours and then nutrition should begin to supply potassium and calories for repair. Rice is an excellent supplement to add after 12 hours.

Dysentery

If the diarrhea is bloody it is reasonable to prescribe a combination of Cipro/Flagyl. This will cover amebiasis, giardia, campylobacter, and shigellosis. If amebiasis is truly suspected a longer course of antibiotics should be instituted.

Chronic Diarrhea

Giardia is common and is often associated with epigastric pain and diarrhea. Metronidazole is effective as is boiling water.

Fever

Explain to patients, especially parents, that fevers in general are not dangerous (and explain warning signs that may indicate otherwise). A fever is simply the body responding to infection. It is reasonable to treat fever with sponge baths. Parents and siblings can use washcloths that have been made wet, spun in the air and placed on the body. When children have a fever, they should not be bundled.

Olivia's Syndrome

Many mothers carry children who are heavy and do hard work at home. Many have several children and are stressed. The resulting symptom complex (Olivia's Syndrome) is headache, shoulder, chest, arm, neck, and back pain. During the exam, you will find that the insertion of the pectorals will be tender and their TM joints will be sore. If you ask, most will say they clench their teeth. Treatment is daily massage of the neck and emphasis on postural mechanics when not carrying children. The simplest thing is to roll a towel and put it in the small of their back when sitting.

Scabies

Scabies, when present, will generally occur in multiple family members. Provide treatment to everyone, including those not present at the brigade, and also make sure bedding is washed. Instructions for treatment are on scabies lotion bottles.

Skin conditions other than scabies

When patients sweat their skin may become dry (possible dermatitis). Fungal infections include tinea capitis and tinea pedis, for we have topical creams. It is important to discuss hygiene and how to avoid getting fungal infections, especially with onychomycosis.

Arthritis

Many patients will present with "dolor en mis huesos" (pain in my bones). Groups regularly take sufficient quantities of NSAIDs to provide patients some pain relief.

Appendix I- One Week Pharmacy

Medication Type	Medication	Unit strength	Dispensing Unit	Total Units
Analgesics	Acetaminophen	500 mg tab	1 tab	1000
	Acetaminophen	120 mg/5ml	115 ml BTL	10
	Acetaminophen	80 mg/0.08ml	30ml drop/BTL	10
	Acetaminophen	100 mg	1 suppository	15
	Ibuprofen	100 mg/5ml	4 oz BTL	25
	Ibuprofen	800 mg tab	1 tab	1000
	Naprosyn	500 mg tab	1 tab	300
	Acetaminophen/Codeine	325 mg/5mg	1 tab	25
EENT	Cipro/dexamethasone otic	Otic drops	30 ml BTL	5
	Terramicina Ophthalmic	5gm tube	1 tube	25
GI	Alum/Alugel liquid antacid	suspension	240ml BTL	10
	Ranitidine	300 mg tab	1 tab	400
	Omperazole	20 mg tab	1 tab	100
	Loperamide	2 mg tab	1 tab	75
Antibiotics	Amoxicillin susp.	250 mg/5ml	60 ml BTL	10
	Cephalexin susp.	250 mg/5ml	100 ml BTL	10
	TMP/SMX susp.	Bioprin susp	115 ml BTL	10
	Metronidazole	250 mg/5 ml	115 BTL	4
	Amoxicillin	500 mg tabs	1 tab	210
	Cephalexin	500 mg tabs	1 tab	210
	TMP/SMX -DS	160/800 tabs	1 tab	150
	Azithromycin	250 mg tabs	1 tab	90
	Dicloxicillin	500 mg tabs	1 tab	150
	Doxycycline	100 mg tabs	1 tab	150
	Metronidazole	500 mg tabs	1 tab	200
	Albendazole	200 mg tabs	1 tab	300
	Ceftriaxone Injectable	1 gm vial	1 gm vial	5
Dermatology	Mupirocin ointment	Ointment	20 gm tube	3
	Triple antibiotic ointment	Ointment	20 gm tube	20
	Hydrocortisone	1% cream	28.4 gm tube	5
	Dexamethasone	2% cream	20 gm tube	15
	Clotrimazole	1% cream	20 gm tube	5
	Ketoconazole	2% cream	20 gm tube	5
	Permethrin	5% cream	60 gm tube	10
	Piopol Lice Shampoo		30ml BTL	10
OB/GYN	Clotrimazol	100 mg sup.	1 sup.	70
	Fluconazole	150 mg tab	1 tab	10
	medroxyprogesterone	10 mg tab	1 tab	35
	Oral Contraception	E2/P2 pkt	1 pkt	3
Pulmonary	Dextromethorphan	Suspension	115 ml BTL	20
	Salbutol MDI	MDI	1 MDI	8
Vitamins	Pediatic PolyVitamin	suspension	1 bottle	30
	Ferrous Sulfate drops	125 mg/ml	30 cc BTL	10
	Prenatal Vitamins	1 Tab	1 tab	600
	Ferrous Sulfate	325 mg Tab	1 Tab	600
	Adult Multi-vitamin	1 tab	1tab	900
Antihistamines	Diphenhydramine Susp.	12.5 mg/ 5 ml	115 ml BTL	5

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	Diphenhydramine	25 mg	1 tab	150
	Loratidine	10 mg tab	1 tab	100
Cardiovascular	Aspirin	81 mg tab	1 tab	300
	Aspirin	325 mg tab	1 tab	200
	Enalapril	10 mg tab	1 tab	450
	Atenolol	50 mg tab	1 tab	450
	Furosemide	40 mg tab	1 tab	300
Endocrine	Metformin	1000mg	1 tab	500
	Prednisolone Susp.	15mg/ml	240 ml bottle	10
	Prednisone	5 mg tabs	1 tab	540
Psych/Neuro	Carbamazapine	200 mg tabs	1 tab	30
Miscellaneous	Oral Rehydrating Solutions	Packets for 1 L	10 packet	20
	Lidocaine 2% injection	50 ml bottle	1 BTL	3

Appendix II

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Items	Units	Number to purchase
Saline Solution for Irrigation 0.9 %	1 Liter Bottle	6
Wound wash	1 Liter Bottle	4
alcohol pads	Box of 100	2
PURELL	Bottle of 355ml	8
Nitrile Gloves - Med	Box of 100	6
Nitrile Gloves - Large	Box of 100	6
Ace Wrap, 6"	UND	12
Ace Wrap, 2"	UND	16
latex sterile gauze square. 4 "x4"	UND	50
Fiberglass splint, (4"X15") Package of 10	Package of 10	1
Cotton gauze, non sterile roll 3 "X 4yds	Bag of 12	12
Cotton gauze, non sterile roll 6 "X 4yds	Bag of 6	12
Suture sets	1	4
Disposable sterile scalpel No. 11	1	8
Tongue Depressors 6" package of 100	100/box	2
Swabs 6 " Package of 100	100/box	1
Saline Solution for Irrigation 0.9 % 1 liter	1 liter bottle	4
Wound wash 1 liter bottle	1 liter bottle	4
Arm Sling-Lg	1	6
Disposable vaginal speculum (Large 6 inch plastic	Sleeve of 10	2
small bandages box of 40	1	2
finger splint	Sleeve of 8	1
masks	Box of 100	1
medicine cups 30 ml	Sleeve of 100	1
Bottle of Bleach 1 liter	1 liter Bottle	3
plastic basins -large	1	8
2"transparent tape	1	10
Betadine 60ml bottle	1	10
band-aides box per 100 units	100/box	2
Items	Units	
Garbage bags	20	
Duct tape	1	
Sandwich baggies	200	
Pregnancy tests	20	
Glucometer test strips		
Glucometer lancets		
Hemoglobinometer test strips		
Index cards		
Digital thermometer covers		
Pens	1 box	
Urine dipsticks		
Batteries		

Disposable Medical Equipment


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Appendix III

Medical Brigades Equipment to Bring to Nicaragua

Appendix III Clinic Chart for Practitioners



			
Name/Nombre:	DOB / FAN: / /	ID#	Community / Comunidad:
Age / Edad:	Sex / Genero: M F	Wt / PESCO: Kg	Ht / Estatura: Cm
Temp:	HR / Cardíaco:	BP / Presión:	Pulse Ox / Oxígeno:
Chief Concern /Problema :			
Physical Exam Findings:			
Diagnosis:			
Treatment / Trato:			
Referral / Referencia:			

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