



# NewsBreak 2015

Annual Newsletter of International Health Service of Minnesota





# Project Director's Report 2015

It is hard to believe another year has gone by and we are starting to plan for our October 2015 and February 2016 projects already. I wish to thank Steve Rice for his leadership as Project Director for these past few years. The handoff went pretty well with just a few bumps along the way. This past year was a very successful year. The October 2014 project saw two teams out in La Mosquitia, the Kruta River Medical team and an Eye Glass team that was based in Puerto Lempira. The Eye Glass Team was able to work in a great location at the Puerto Lempira Hospital. This will be a fantastic location for future Eye Glass Teams.

The year also gave rise to some logistical difficulties in traveling to La Mosquitia. One of the major air carriers in Honduras stopped flying to Puerto Lempira. That left just one well-known carrier to work with for our February Project. With one carrier it makes it more difficult to get all the people out to La Mosquitia in a timely manner as well as getting them back. First, we needed to limit the number of people going to La Mosquitia so the team sizes out there were smaller this year. We also sent more people with the advance group. The logistics are even more challenging when there are no flights going to Puerto Lempira on Sunday. It worked and we got everyone out there and back. It looks like there may be another carrier by next February. We will be checking that out during our October planning trip.

One other fantastic thing happened last year and that was the partnership and the collaboration with MCAD (Minneapolis College of Art and Design). A couple of years ago, a couple of our directors went to MCAD because they had heard about a program there in Entrepreneurial Studies. We were looking for materials to take to Honduras to be used for training and education that would stand up to the harsh environment there. There was an initial group that agreed to take on the task and did a presentation. Two from that group then volunteered to go with the 2014 October Medical team because they needed first-hand knowledge of the people and environment. They produced some amazing photos and video. We just finished year two with the new MCAD class and they also produced some amazing materials which we are going to take to Honduras in October to use during the Medical Mission. We will report back to MCAD on what worked or didn't work. I am looking forward to seeing what the new class can do for the coming year.

Finally, I would like to thank all the people and groups that helped to make this past year a success. To the volunteers, companies that donate space and supplies, and to all the people that help support us financially, very little of our work could be completed without them. We hope this edition of the NewsBreak can give everyone an idea of all the good work that goes on and all the great people that work to make it happen.

**John Pope**  
**Project Director**

## Kruta River (October)



When someone has asked me about my trip to Honduras and what I did, it is difficult to break it down in a few short sentences. The whole experience was challenging and rewarding. Before we had even left to return home, I was already thinking of my next trip.

Reno Olvera and I were introduced to IHS through a course at Minneapolis College of Art and Design. We worked on a team project that focused on sustainability and education, with help from Kelly Koehen and Lori Jackson. Reno and I became very invested in the project and wanted to take it to the next level to learn more.

I have to admit, when I arrived in San Pedro Sula, I was a little nervous. I didn't really know the people that I would be traveling down the river with. What would happen if we for some reason didn't mesh well together? There I stood with a gigantic pack on when I found part of the group. I knew things would be just fine when a fellow named Victor made me laugh when he poked fun at my gigantic pack.

Because Reno and I arrived a little early, we were able to help with some preparations in La Ceiba and we all got to spend some time

getting to know one another. The first day, Rosario welcomed us with a lovely barbeque at her home. Rosario has been working with IHS for over 30 years. My introduction to Honduras was a real positive one.

We were up bright and early for our flight to Puerto Lempira. I had no idea how beautiful Honduras is. The sky was crystal clear and all the mountains were in perfect view. The major setback was our luggage being placed on two separate planes, which caused a delay in our departure on the river and a night in PLP. We had a small team that headed down the river: Teri, Mary, Karen, Bernice, Tanya, Steve, Reno and I. Andres and Andy were our guides and translators.

Initially, I was prepared for rain on the boat ride, but somewhere in the midst of repacking some things, my gear ended up buried in the bottom. When bad weather hit, I had to be creative with trying to keep dry. Pretty much, I hid under a backpack cover for at least an hour. It felt like an eternity.

Reno and I had done a lot of research on the Mosquito coast, but you can only read so much. His focus was to gather footage for making



a short documentary and I wanted to gather notes and information for future students. First stop was Tikiraya. Over the course of two days, we saw over 500 patients. One of the jobs that Reno and I had was handing out the parasite medicine. Let me tell you, the little kids were not super fond of me after that. We headed to Kanku after that and in two days, we treated over 400 patients.

The information that we collected was passed on to a new group of students working with IHS. These students are currently making short animations of children brushing their teeth and have created beautiful illustrated books about hygiene. The material is being printed on paper that can endure extreme temperatures too.

Never would I have guessed that a college course would lead me to the coast of Honduras with a group of doctors and nurses. I also never imagined that I would drink so much Crystal Light either.

Making the choice to go with IHS on the Kruta River was one of the best choices I have ever made. I was challenged mentally, physically and emotionally, and I loved every second of it. I've worked with groups of people before on projects, but this team almost seemed like it was perfectly created. I am forever grateful for this opportunity that I had to not only assist with treating patients, but to work with the strong, selfless leaders and share this trip with such great people.

*Katie Kaelin*  
*General Helper*



***Kruta River Medical Team Oct 2014***

***Back Row – Andres, Andy, Boatmen***

***Dr. Bernice Rodrigues, MD***

***Reno Olvera, General Helper***

***Middle Row – Steve Rice, Translator***

***Karen DeMorett, RN***

***Front Row – Teri Houle, RN***

***Mary Bierman, Pharmacist***

***Tanya Schrobilgen, PA***

***Katie Kaelin, General Helper***

# Caratasca



The Caratasca Lagoon team traveled with the advance team to Puerto Lempira out on the Mosquito Coast of Honduras. We transported our personal bags to the Catholic compound for a day of gathering totes of supplies for the remote La Mosquitia teams and purchasing fresh fruits and vegetables to take on our trip. As we were arranging the stored items, a truck came with items that were shipped from Minnesota to a port outside of La Ceiba, Honduras, and put on a cargo ship for the teams that would leave from Puerto Lempira. Watching the local children help us unload the truck was incredible!

We were able to organize our supplies and load them into a 50 ft. boat for transport to the first of two villages where we would work. After we double checked that everyone had their motion sickness pills to cross the Caratasca Lagoon we were ready for our adventure. In total, the boat ride was 2 ½ hours (1 hour on the lagoon & 1 ½ hours on the Laca River) to Lacatabila.

Upon arriving, people from the village came to greet our team and carry our supplies to the Catholic Church where we would live and work for the next four days. We rearranged and set up medical, pharmacy, dental, kitchen and

sleeping quarters within the building. The villagers' main language was Mosquito so we quickly learned some basic phrases to get us by. We thankfully had a father and son, Andres & Andy, who were our trusty boatmen, translators and logistical magicians! They took great care of us and we would not be able to do anything without them.

Most days were hot and humid but went by quickly seeing families that needed our help. At night we were able to relax by sitting outside and enjoying the natural beauty of the evening. The stars are so amazing and bright.

Our next journey was a three hour boat ride on the Caratasca Lagoon which had large waves due to a "northerner" that had come to the area the day before. Another adventure! Along the way we saw Mosquito people fish with nets and use sheets for makeshift sails for their boats. The village of Krata lies on a strip of land between the lagoon & the Caribbean. This village is not as remote as the first with daily boats that transport people to Puerto Lempira. The source of income is gathering fish, shrimp, lobster and jellyfish for export, as well as farming – primarily rice, beans, yucca, watermelon and



plantains. We were given multiple coconuts from the villagers to show their appreciation for us being there to provide free care.

At both villages we watched soccer games in open fields with some of our teammates participating in the fun. We were able to give new soccer balls to both villages through the donation by an MD who volunteers with IHS.

Our team of 11 was great! Even though some of us didn't know each other we worked and lived together in this new, challenging environment. We were composed of an MD, Dentist, Paramedic, two Nurses, Pharmacist, Pharmacy Student, Ham Radio Operator/Translator and General Helper/Engineer. Our energetic, cohesive team definitely added an extra bonus to an already amazing adventure!

**Rachael Vetter**  
PharmD Student

**Branden Watanabe**  
General Helper/Engineer



**Caratasca Team Members**  
**Front row – Dr. Kelly Koehnen, Dentist**  
**Branden Watanabe, Engineer**  
**Dr. Tom Ziebarth, MD**  
**Teri Houle, RN**  
**Back row – Kellie Iramina, RN**  
**Michael Vickers, Paramedic**  
**Bob Hoyt, Radio Operator**  
**Mary Bierman, Pharmacist**  
**Rachael Vetter, Pharmacy Student**

## Tocoa



The Tocoa Eye Team saw almost 1300 clients over a period of eight days and supplied them with 751 pairs of prescription glasses and 876 readers.

Tocoa is a small city in northeastern Honduras midway between the mountains and the sea. Many of the people we saw were from the surrounding rural area. They ranged in age from four to 98 and from illiterate to people desperate for appropriate reading glasses so that they could better see their cell phones.

For the first time, we used a computer-based system for matching glasses to clients. For the most part, it worked very well, especially when combined with a bit of ingenuity on the part of the person fitting the glasses.

Because of the automated system, we were able to see many more people than in the past. Thus, we ran out of mainstream glasses much earlier than usual. In the future, we'll know to plan for more capacity.

Irene Schaper

I have written a number of these after action reports for our team, but this time our team leader suggested that I consider "WHAT did we do to change the lives of our patients." With your permission I'll not write a travel log but dig just a little deeper.

I have often wondered WHY we volunteer for the various teams that dot the landscape of Honduras. Some of us leave spouses, children, grandchildren, busy practices, or a blissful retirement to come and do what we do. Personal reasons are legion, but the common thread is because we want to make a difference in the lives of our patients and their families.

It's gloriously obvious when you see the smiles on the faces of mom, dad and grandparents after their little ones have had their often grotesque deformities of face and limb made functional by our surgeon and staff.

Is that the only difference we make as surgical members of IHS Tocoa? I have seen our staff change the lives of the workers at the hospital by in services, new and recurring friendships, professional exchanges with doctors, nurses, technicians, and housekeepers. We enriched the lives of so many children in the pediatric ward, the home for abused moms and their children through our gifts brought from our homes and loving communities





in the USA. No matter where we reside in our home away from home, we have brought the kindness and goodness that is inherent in our country. So, in closing, I tip my OR cap to:  
 Doctor Dan Jaffurs (miracle worker), Trudy Staubitz (Team Leader and everybody's mom), Jean Yunker (Co-team leader and the best back up hitter around), Meredith Johnson (master of the plastic closure), Lisa Hays-Swartz (clinician and administrator exceptionale), Doctor Joe Rumley (the creator of the "magic syringe"), Steve Baker (surgery tech extraordinaire), Ann Jones (with the kind smile), and last but not least, Denise Roussel (who can actually cohabit two places at once in two languages).  
 Strong work! We did indeed "change the lives of our patients."

John Craig Gill  
 CRNA



**Tocoa Surgery Team Members**  
**Front row – Trudy Staubitz, RN**  
**Back row – Meredith Johnson, RN**  
**Jean Yunker, RN**  
**Craig Gill, CRNA**  
**Lisa Hayes-Swartz, RN**  
**Dr. Dan Jaffurs, Surgeon**  
**Denise Roussel, Translator**



**Tocoa Eye Team Members**  
**Left to Right: Irene Schaper, Eye Examiner**  
**Gordon Murray, Radio Operator**  
**Charlie Brown, Eye Examiner**  
**Jan Brown, Eye Examiner**  
**Not pictured:**  
**Sarah Sanders, Translator**

## Carbajales



**M**y experience in Honduras is something I will never forget! This was my first time with IHS. I had always been interested in doing a medical mission, so I was very excited when the opportunity presented itself. Going in I didn't know what to expect but I was hopeful that I would come back feeling I was able to help impact some people's lives, and that my life would be impacted as well.

I was on a team who traveled to Carbajales. This was the first time IHS had been to this village. The village population was 1102. There was so much sense of community in the village and it made me feel so welcome. Upon arriving people came to help our team unload the bus. During our clinic hours, people in the village came to help us check patients in, translate, and just make sure we had everything we needed. Once in the clinic it was evident that I was a part of a strong team. I have never seen so many people with such drive and ambition. It was amazing how 14 strangers all came together to help those in need. During the 12 days in the village we were able to help 1,642 people. It was amazing the teamwork and organization that went on, so that we were able to see such a high number of people.

There were so many people who touched my heart and impacted my life while I was there. While in the clinic we saw a variety of things ranging from

a cough, cold, sore throat, scabies, lice, kidney stones, ringworm, machete wounds, and a birth. If we didn't have such strong people with years of medical backgrounds the mother who had just given birth to her 7th child would not have made it. I think that was something that impacted most people's lives on our team that helped with that situation. Over the course of our time there I think the community came to trust us more. Toward the end of our time there, there were a few nights where people came to the house we were staying at with medical emergencies. Some of these being a baby with a high fever who had had a seizure, a mother who had an infection brewing from a recent C-section, and the village nurse that had extreme pain from kidney stones. Also, there was an incident one day at the clinic where two men came in carrying a woman who was going in and out of consciousness. Word got out and all of a sudden we had people carrying in an exam bed for us to lie the woman on. It was incredible to see the community come together. Everyone was there for the good of the community.

This experience is one I will always remember and hold dear to my heart. I am extremely grateful I was given this opportunity.

**Alecia Bellefeuille**  
LPN

**D**uring February 2014 I led a group of Rotarians to visit the Olanchito Rotary Club and they took us to meet with several villages. In Carbajales one of the needs the village leaders talked about was the need for medical care. So, I worked with the Olanchito Rotary Club and IHS to organize a medical team to work in Carbajales. The village is situated in the valley along the Aguan River with the mountains nearby, and just down the road are the Standard Fruit (Dole) banana plantations. There are 13 small communities close to Carbajales and I asked the Rotary Club if possible to assign days for each community to come to the clinic. The Rotary Club had posted a schedule in each of the villages, at the Catholic Church where we worked and at the Central Salud. I asked for a place to work and stay... Rotary found a new 3-bedroom, 2-bath house for us to live in and the Catholic Church to work in. Of course it wasn't "4-star": we had to take bucket showers and flush the toilets with a bucket of water. I asked for a laundry lady (Fernanda) and a cook (Maritza); these were provided and neither would take payment for their services. Octavio (the village leader) was always checking on us to make sure we had what we needed. He also brought us food – apples, grapes, corn on the cob and corn-milk (new experience for me). The Rotary Club and Carbajales leaders also saw that we had help with the clinic: two translators, one person to register folks, the Salud nurse, two doctors, four dentists and children from the school. In talking with Carolina, president of the Olanchito Rotary Club, she told me that she called Octavio every couple of days to make sure that we were being taken care of. Of the 23 years of coming to Honduras, this village showed so much care towards our team and was the most grateful village I have ever worked in. Amazing people!

The team saw many people over the eight days we worked, and there are two cases that I will talk about. First is a little lady that was 99 years old... a spry lady for her age. She said her husband was also 99 and he went to work every day. They had a small herd of 20 cattle and he milked 8 cows every day. Amazing people!

Next case. Early one morning a man came and told us his wife was having a baby and there was much blood. In talking with him I found out that this was her 7th baby and that there was a woman with her (I assumed a mid-wife). While the doctor and nurses were getting supplies (needed to find the person with a key to open up the church) I went with the man to his house. The baby (named baby 'Cheryl') had been delivered and the umbilical cord was still attached but the placenta had not been delivered yet and she was bleeding. The team (Dr. Marynell, Jackie, Jenine and Mike) arrived with supplies and went to work. Mom's blood pressure was 40/60 and falling and the placenta was breaking up and coming out in chunks. While the medical team was starting an IV and preparing mom to be transported to the

hospital I talked to dad to have him arrange for transportation. Jackie and Mike went with mom to the hospital... straight to the emergency room... they didn't want her there and told them to take her to the maternity ward. Mike, our paramedic, said that department was 'top-shelf' and knew exactly what to do. Amazing people!

This was a great place to work with unbelievable support from the community and the Olanchito Rotary Club. And, on top of all that I had a super team to work with. Many, many thanks to my team! Amazing people!

**Cheryl Schraeder**  
Team Leader



**Carbajales Team Members**

- Front row – LyLy Le, PA**
- Jenine Graham, RN**
- Alecia Bellefeuille, LPN**
- Jackie Wilson-Kroeker, RN**
- Middle row – Cheryl Schraeder, Team Leader**
- Dr. Marynell Jelinek, MD**
- Back row – Mike Ward, Radio Operator/ EMT**
- Dale James, Pharmacist**
- Steve Wardell, General Helper**
- Michele Bevis, Translator**
- Karl Kroeker, General Helper**
- Jeanne James, General Helper**
- Paula Rumbaugh, General Helper**
- Hallan Noltimier, General Helper**

## Lisangnipura



In the past, I had studied abroad in Guatemala for five weeks. In that time, I lived with a family and was able to get a glimpse at the poverty that affects so many nations. However, it was not until the IHS mission to Lisangnipura that I was absolutely immersed in a poverty-stricken community. I have never been humbled faster and more sincerely than when Ashley and I stepped off the plane on the grass landing strip in my “old” American clothes and were surrounded by children in dirty and ripped clothing. I later learned that most people in the village did not even own a pair of shoes! Suddenly I felt that the luggage I packed for the trip was extremely excessive.

It was surprisingly easy to adjust to a more simplistic life without the material items that seem to be necessities at home such as beds, mirrors, and air conditioning. Even the absence of running water was a welcome change when it was replaced with a refreshing clear river to bathe in. Waking up naturally with the sun every morning started out the day more peacefully, even though the sun was helped along by seemingly hundreds of roosters and military battle cries!

The Lisangnipura clinic was run as a smooth operation as most of the team had been a part of IHS trips in the past. Renee was the team leader and made sure that everyone had what they needed to ensure that the clinic did not have any bumps. She also did a large amount of the cooking that was always delicious after a long day. Anne worked as a general helper by helping around the kitchen and clinic and mainly registering patients to be seen. Our other general helper, Ron, worked around the village closely with Dale, our engineer, to repair necessary fixtures such as the church, bridge, and wells with creativity and expertise. Larry, our radio operator, kept us in touch with



the world. He made sure that arrangements could be made to fly patients to Puerto Lempira that needed further care. Hilario was the local leader on our team that ensured that everything ran smoothly in and around the clinic and organized local help such as translators and workers that assisted with repairs. Rick was the team translator who helped with a nursing station as well as made sure there was no major miscommunication between the people of Lasagnipura and our team. The medical team was made up of a doctor, nurses, oral surgeon, and pharmacist. Doctor Joe did an outstanding job of running a station with the nurse of the village, Renaldo. Doctor Joe was very gracious in helping every patient and consulting with the nurses on more complex patients to find the very best treatment. He has a heart of gold and everyone who works with him can tell that he truly cares about the outcomes of his patients and community. The nurses on our team, Jenni and



Lori, each had their own station but worked together extremely well to get as many patients through the clinic while still spending time and helping each family with their individual needs. Jenni and Lori each had little surprises that they would give the children being seen such as a wrist bracelet or toy car that would make the children's eyes light up with delight. After clinic, we could see the children around the village playing with their toys and holding on to them with extreme caution so as not to lose them. Rich worked as the dentist of our team and pulled out endless teeth without complaint. He was always in good spirits and eager to help with anything around the clinic or with the team. The last day he even put out stations of beads for the children to make necklaces and bracelets! The children of course loved it! Dan was the paramedic on our team and worked to perform UAs and find correct glasses for patients. We could count on Dan to always have a smile on his face and a story to tell when we had down time. Ashley was the pharmacist of our team. She worked extremely hard in the pharmacy but made everyone laugh constantly. Ashley let me decide a lot of the medications and dosages that we gave to patients, with her guidance of course. She was a wonderful mentor to work with and I was lucky to be assigned with her!

We did see some interesting cases in our clinic, including two cases of malaria, a badly infected machete wound, and a little girl with half a cockroach in her ear, among various other things. The Lisagnipura team was wonderful to work with and their dedication and drive to help the people of the community was inspiring and made my experience more than I could've hoped for. Through all of the frustrations and worries, seeing the impact we made on the village of Lasagnipura made me want to be better and continue to serve people the way that many of my teammates had numerous times before.

Jacqueline Adams  
Pharmacy Student



**Lisagnipura Team Members**  
**Front row – Hilario, Local Translator**  
**Middle row – Anne Lind, General Helper**  
**Renee Donnelly, Team Leader**  
**Jacqueline Adams, Pharmacy Student**  
**Ashley Engle, Pharmacists**  
**Jenni Lange, RN**  
**Dr. Joe Tombers, MD**  
**Back row – Dr. Rich O'Day, Dentist**  
**Dan Walker, Paramedic**  
**Rick Reiter, Translator**  
**Larry Foster, Radio Operator**  
**Dale Watson, Engineer**  
**Ron Engle, General Helper**  
**Lori Jackson, RN**

## Rus Rus



To some, Rus Rus is just a tiny village in the middle of one of the poorest and under-served areas of Honduras. It is important to note that Rus Rus is like an oasis with a presence of Missionary Air Group (MAG) operating a small hospital and providing health care and other services to the very needy of that region. The cooperative arrangement MAG has with IHS is a great one that provides a means to care for many people with very serious health-care needs. Stepping up to these efforts was our February 2015 Rus Rus team who selflessly accomplished many things to better the lives of those we served.

It may be said a lot but I really think we had one of the best teams this year! Credit for that goes to many things including the IHS Directors for doing a good job of selecting where each participant was to go. Ultimately, the most credit goes to all the team members, for the Rus Rus team did such a good job with the resources they had. If I had to do it over again, I would not change a thing.

I am not sure where to start but one good place that comes to mind is the IHS medical team of Dr. Mark and nurses Barbara, Becky, and Shabnam. Working with them also was Honduran Dr. Stacy from Roatan. They saw nearly a thousand patients in the medical area of the hospital. Considering all the ailments that came with them, they did a great job. Two thirds of our patients walked five miles or more from beyond the Coco River in Nicaragua so you know they did not come just because they had a headache. The pharmacy area was very efficient also. This year we had just two people... pharmacist Kristi plus student Shelby, who is a pharmacist in her own right. They were so efficient that they kept up with everyone who came to their counter. Part of their efficiency was the prepacking of all the vitamins plus all the meds that the dental folks needed to hand out.



Speaking of the dental care, this year we had an amazing dental set up. In addition to our veteran dentist Tom and his son Eddie assisting him, we also had the help of another Honduran dentist, Diana, plus nurse Peggy, who was very skilled at dental hygiene and doing fluoride treatments. Karen was in the thick of it all helping in many ways such as cleaning instruments, helping do fluoride treatments, and handling the patient forms to assist getting each person to the correct place in the dental clinic. Their setup was great as I watched the work being done at the three dental chairs lined up in the main room. Tom would do all the fillings and sealants for the teeth that were in reasonably good shape while Diana was at the middle chair doing extractions for the teeth that were in more serious shape. Peggy was at the last, portable chair doing her work prior to sending patients to the other two. This type of care goes well beyond just numbers of patients or extractions. As Tom would say, they gave the best dental care that they could so that the dental health of the community in years to come will be good.

One last group of team members that were just as instrumental in making all this work was the support people. Bob did radio work and helped his wife Francia doing interpreter work. They both, along with local helpers, did



the reading glasses as well. Carlos, Geraldina, Alfredo, and Marvin were local and MAG people who also helped do interpreting, often for the many patients who only spoke Miskito. My part in all this, besides doing some engineering tasks and doing team leader stuff, was to work with Bob to get the referral patients out plus I used my computer to keep track of all the patient statistics.

Looking back at how the overall medical clinic operated, we were not just handing out medications but also talking with the patients so they understood what was wrong with them and learned how to manage their own health and hygiene. Part of the credit goes to Wes and Denise, who live in Rus Rus, plus the MAG organization, as they have worked hard on such long-term projects as obtaining a water purification system that is for the entire village of Rus Rus. In an informal study, they found that after the water purification system was in place, the number of water-borne diseases went down to near zero for the Rus Rus villagers.

The medical mission in Rus Rus this year was a huge success, but it was through the many collaborative efforts of many people and several organizations working cooperatively to make it such a success. We truly were able to significantly help those we came to serve.

**John Kirckof**  
Team Leader



**Rus Rus Team Members**

**Front row, L to R -**

**Dr. Tom Gelhaus, Dentist**

**Eddie Gelhaus, General Helper**

**Kristi Anderson, Pharmacist**

**Bob Watson, Radio Operator**

**Francia Watson, Translator**

**Shabnam Sabur, RN**

**Becky Morgan, RN**

**Rear row, L to R -**

**John Kirckof, Team Leader**

**Barb Spiro, RN**

**Dr. Mark Spiro, MD**

**Shelby Ling, Pharmacy Student**

**Karen Kirckof, General Helper**

## PLP Surgery



The 2015 surgery team at PLP consisted of Joan Gately, Kerri Libert, Danielle Pitts, and JoAnn Prater - Registered Nurses; Dr. Daniel Dunn - General Surgeon; Kris Budke - Anesthetist; Carlos Scheer - Interpreter; and Jim Prater - General Helper.

The team flew to PLP on Saturday which gave us all day Sunday to get set up. Hospital staff had prospective cases lined up so we were able to start immediately and do six cases on Monday including two gall bladders and an inguinal hernia. After the IHS medical teams arrived at Lisangnipura, Rus Rus, and Caratasca Lagoon Monday evening, a number of patients identified at those sites were sent to PLP for further evaluation, treatment and sometimes surgery. Most were flown to PLP and, where possible, home again by Wes Wiles, a missionary and pilot who lives at Rus Rus.

Our experience at PLP can best be summed up by the following comments from team members:

Joan Gately, RN - This was my second trip to Honduras and to PLP. What struck me that I hadn't noticed before, was that in La Ceiba it was like a big family reunion with a lot of hugging and laughter. Many of the volunteers have been returning year after year. I found it was very nice to be on the

team that went out early. I had no idea of the planning and preparation that goes into a trip like this, or the amount of boxes that have to be sorted and moved. What an amazing bunch of people that worked tirelessly. Kudos to our leaders. The different talents that each individual brought to share made the trip a success. For example, Grant Hansen, a member of the PLP Administrative Team, and Chris Budke were somehow able to fix an operating room table and an anesthesia machine that had been broken for years. What a wonderful blessing for the hospital! Thanks to all who make these trips possible!

Kerri Libert, RN - I was grateful to have met Jim and Joann Prater in the fall last year because they offered me an opportunity of a lifetime! This was my first year to be a part of the IHS medical mission in Honduras. It is one that I will never forget. Although I was a little nervous being part of the surgical team because it is not something I have ever done or trained for in the States. But I was put at ease after meeting the great people I was able to work with. They were so patient as Danielle and I learned on the job! I was most amazed by the work the Honduran hospital staff are able to accomplish with so few resources, things that we take for granted here at home. It was an experience that I will never forget and I look forward to being a part of another IHS mission in the future!



Danielle Pitts, RN - Before October, I had never heard of IHS and the great work they do for the people in Honduras. I have been missing out! For my first medical mission, I was lucky enough to be placed on the Puerto Lempira team and work in the OR alongside a group of truly wonderful people. Although I did not have experience in the operating room, I was graciously welcomed and quickly taught the ins and outs of an OR nurse. With a little extra patience from the team, I was circulating and scrubbing into surgery in no time. The administrative team back at the compound worked hard to provide us with patients in need and made sure we had everything we needed to get the job done. Since I have been home I take every chance I have to tell people about IHS, Honduras and what they can do to help for next year. This is an experience I will never forget. Unfortunately I had to leave Honduras early due to a family emergency. Drew Mathews, Grant Hansen and John Wagner along with John Pope, Frances Romero McNab, and her team did everything they could to help me get home safe and sound to be with my family. Jim, Joann, Dr. Dunn, Kris, Carlos, Joan and Kerri were also supportive and comforting while I was awaiting my return. I could never thank them enough. I hope we meet again.

Carlos Scheer, Interpreter - I participated in many conversations, including the dialogues among our surgeon and the local surgeons at the Puerto Lempira hospital. I was much impressed by the high personal and professional mutual respect in their interactions, both working together in the operating room and throughout the hospital, trying to learn from each other's knowledge and experiences, developed in totally different environments and with a variety of resources in Honduras, Cuba and the United States.

Dr. Daniel Dunn, Surgeon - This was my first and hopefully not my last trip to Puerto Lempira with International Health Service. We had a productive 10-day experience with a variety of surgical procedures. We had a collaborative, cooperative, dedicated group that made this experience memorable. We had a veteran operating room staff and a couple of rookie nurses who had never stepped foot into an operating room as surgical techs. Not to worry, they were quick learners and by the end of the week they were making suggestions on how I might improve on some of my surgical techniques.

A seven-week old baby boy was admitted with vomiting and failure to thrive. The baby was only eight pounds. He was diagnosed with pyloric stenosis, which is a not very common congenital abnormality of the muscle at the end of the stomach that regulates flow of food out of the stomach and into the small intestine. This muscle was obstructing the stomach so the baby had been vomiting and had not gained weight for the previous two weeks. The operation to correct this problem is a procedure to cut the pylorus and open up the stomach. This baby was a patient of Dr. Gonzales, an excellent Cuban-trained pediatric surgeon at the hospital. While putting



the baby to sleep the baby stopped breathing and the anesthetist from the hospital could not place the breathing tube into the baby's trachea. Kris Budke, our anesthetist from Amery, Wisconsin, happened to be in the hallway and was asked to help. Kris immediately realized that the baby was in dire straits, was not breathing and the endotracheal tube they were trying to place was too large. The baby by this time had not had oxygen for a considerable amount of time and a cardiac arrest was imminent. Kris quickly assessed the situation, changed the tube and began breathing for the baby within seconds of almost certain death.

I have been doing general surgery for 40 years but I had to come to Puerto Lempira to witness a rapid series of events in a life and death situation that could not be duplicated.

The next morning the baby was resting quietly in the neonatal intensive care unit that was fully equipped and had only recently been opened. Thanks, Kris, and the rest of the team for making this trip one I will never forget.

JoAnn Prater, RN - My thanks to the PLP team members. The cooperation began with moving of boxes of supplies into the hospital, then sorting and storing everything in the space provided by hospital staff. With the

identification of patients by Dr. Hugo Reyes, a long-time surgeon at PLP and now the chief of surgery, the operating team started to coalesce. Twelve days later we were saying thank you and goodbye to the hospital staff and boarding the plane back to La Ceiba. As we left the runway, the thought that kept running through my head was, "What a great experience!"

Jim Prater, General Helper – I was most struck by the willingness of every team member to pitch in and do whatever was needed. That cooperative spirit extended to the PLP Administrative Team as well. The surgery team could not have succeeded without the help of Drew Mathews - Team Leader, Grant Hansen – Engineer, and John Wagner – Radio Operator.

Kris Budke, Anesthetist - The good that we do as a surgical team is easy to see as the cases go by. This year I found an appreciation for what the mission did for me. It was such a pleasant team. No drama, no tension. I hope I was as easy to work with as everyone else was. This includes the Honduran health professionals. It was an exceptionally collegial group. Something else that occurred to me this trip was the impact it has on me to associate with such a positive group. These are good people and they tell wonderful stories of other good people. In the end I got more than I gave.

Kris said it best in his final comment. We all got more than we gave. We always do.

Jim Prater  
Team Leader



***PLP Surgery Team Members***

***Front row, l to r:***

***Dr. Daniel Dunn, Surgeon***

***Jim Prater, Team Leader***

***Center:***

***JoAnn Prater, RN***

***Danielle Pitts, RN***

***Kerri Libert, RN***

***Joan Gately, RN***

***Rear:***

***Kris Budke, CRNA***

***Carlos Scheer, Translator***

## PLP Admin

**P**LP Admin sounds pretty exciting doesn't it...yeah right. Why would three relatively sane men whose combined age is pushing nearly 200 years want to do such a boring job when everyone else is having great fun out in the sticks? Well the truth is, it's so rewarding, and in the end isn't really boring at all.

In our era of cell phones, we all know how important communication is. Out at PLP, lives can be on the line and John Wagner's skills keep us all connected. We are five different teams out here in a part of Honduras known as La Mosquitia. John keeps us all connected and working together. As a bonus, the wire he strings up for his radio equipment that is powered by a Honda generator connects us with family back home through emails. I think that's pretty cool, don't you?

Drew is the icon of IHS out here. He knows so many of the locals and is able to organize like few can. He will arrange for hundreds of items to be shipped out here and then the transporting of the teams out to those remote places. It can be quite stressful at times. At the same time, he is also like a big teddy bear! This year, one of our teammates had to go home in the middle of the mission due to a death in the family. Drew helped her through the hoops out here and stayed with her for comfort until she was off on her flight back home. I'm certain that was appreciated.

I am the third of our happy trio. At age 66 in a few days, I am the youngest. I spent an average day transporting patients from our dirt runway landing strip to the hospital our surgery team is at. Once that part of the job is complete, I usually helped in refueling the plane that brought the sick or injured. An average refueling is approximately 50 gallons. A Honda generator, an electric pump pulling the fuel from 60 gallon drums we haul to the airport, and filtering funnels are our tools. When there was time to do it, I made repairs to different things that made life easier for our teams and also would be of help when we all left.



John Wagner, Radio Operator; Drew Mathews, Team Leader;  
Grant Hanson, Engineer

will often help in off-loading patients from the plane to a pick-up truck one of the local churches lets us use when we are down here. I carried a child who was between 4-5 years old and handed her back to her mother who is now seated in the truck waiting for the ride to the hospital. My memory is that this child was only about 10 pounds. The words of the Christian pilot who flew them in were that this one has life in her eyes. She deserves a chance to live.

In closing, perhaps one of the most rewarding parts of this mission trip is working with people the Bible calls "the salt of the earth." In my nine or ten trips down here since 2004, I've gotten to know several of these very special people. One day the three of us will become two. Volunteering to fill that slot will give someone memories money can't buy.

Grant Hanson  
Engineer

## PLP Eye Team (October)



**PLP Eye Team Members**  
**Back row – John Pope, Team Leader**  
**Victor Chu, Optometrist**  
**Front row – Hilario, Translator**  
**Dale Watson, General Helper**  
**Cristy Garrido, Translator**

## Santa Fe



This year was the third consecutive year International Health Service of Minnesota provided clinics in the Santa Fe area. Santa Fe is located on the northern coastal area of Honduras about three hours east of La Ceiba. For this trip, we had a doctor, nurses, pharmacist and pharmacy student, translators, radio communicator, engineer, and a general helper. Over the course of two weeks, we saw numerous patients and provided many services including antiparasitic medications and vitamins, wound irrigation and care, treatment of infections, and providing sunglasses and reading glasses.

We offered the first clinic in the city of Quinito, about an hour boat ride west from Santa Fe. We stayed in Quinito for the first two days of our trip. After the second day of clinic, the team witnessed a soccer game and a couple team members participated for a short while. That night team members joined a number of the villagers at a bonfire where they played music and shared their traditional local dance called La Punta.

The next town we served was Plan Grande. This town was about fifteen minutes east of Quinito. There was a different feeling being in this town with pigs and chickens walking throughout the town without being corralled. For the clinic, we set up ropes with sheets hanging from them to create private exam rooms. While in Plan Grande, a storm blew in requiring the team to stay for another day. Although an unfortunate setback, we made the best of the situation by hiking to a waterfall to swim, playing frisbee and soccer with some locals, a LOT of cribbage, singing, and bonding with each other in general.

After Plan Grande, we returned to Santa Fe and traveled to Guadalupe where we provided the next clinic. Guadalupe is about a twenty-minute car ride



west of Santa Fe. We completed two days of clinic in Guadalupe while staying in Santa Fe. At this point of the trip, Bill (our team leader) notified us we needed someone to speak at the closing banquet about our trip. With some discussion, we concluded to describe our trip by changing the words of "I Just Can't Wait to be King" from The Lion King since our team thoroughly enjoyed singing, and this song was the most commonly sung.

Our final clinic destination took place in Santa Fe. The best part about being in Santa Fe was the children. There were a few kids that would stay outside of our shelter each night waiting for us. They loved to tickle us, kick a ball around, or even steal my hat multiple times and run around with it. After one of the clinic days, the children were waiting outside and walked back with us holding our hands. This was definitely one of the highlights for this trip.

On the final day, we packed the clinic and took inventory of just about everything. After inventory, we attended dinner. This dinner was a little



different than the rest. They served a pretty traditional meal with fish, rice, beans, and tortillas, but it included more. As we finished eating, they provided drummers and dancers to perform four traditional dances of their ancestors. The locals even encouraged us to dance with them as well. After the dancing, our team received gifts ranging from hand-made ships to necklaces to small drums.

In the end, we sang our song at the final banquet and definitely bonded as a team during the trip quite well. This was my first experience on an IHS medical trip, and, hopefully, it will not be my last. Also, I recommend this medical mission to any and all pharmacy students and simply any person that wants a new, amazing experience. I am very thankful for having this wonderful trip with an even more wonderful team and would not have changed anything about it for the world.

**Joshua J. Ladwig**  
Pharm. D. Candidate



**Santa Fe Team**

- Left to Right: Gary Kirckof, Engineer**
- Dr. Tom Haus, MD**
- Donna Kirckof, General Helper**
- Bill Roussel, Team Leader**
- Amber Herdzina, RN**
- Stephen Golub, Radio Operator**
- Paula Lofamia, RN**
- Josh Ladwig, Pharmacy Student**
- Idalia Maldonado, Translator**
- Alyssa Carey, Medical Assistant**
- Emily Haus, Translator**
- Sarah Thompson, RN**
- Diana Biorn, RN**
- Shaina Hunt, RN**
- Dewey Essig, Pharmacist**

## La Ceiba



**B**efore I signed up for this mission trip I had a great desire to make a positive difference, a goal which I believe many of us share. To be more specific, my goal was to go out and lend my knowledge and skills as a nurse to people who, because of unfortunate circumstances, needed it.

I checked out a good number of organizations to find the one group that not only shares my goals, but also provides the opportunity to experience and grow in my chosen objective. During my search, I came to know a group called International Health Service of Minnesota through my co-worker Jackie Wilson-Kroeker. It must be fate that led me to this group as things went smoothly from the time of my application to my integration into the group. Not long after that, I was given the privilege of joining a mission to Honduras, to a town called La Ceiba.

I quote a very powerful line from a book by Tommy Barnett: “Bringing about positive transformation is never easy and rarely quick. But it is always satisfying. You just have to act.” I remembered this inspiring quote when we arrived at our destination. The town of La Ceiba may be a small drop in the ocean of the world’s concerns, but the greatness of the transformation needed to make a significant difference to the lives of people living here cannot be contained within a line from a book. Reality hits me on my first step into the place. We have a lot of work to do. I was about to see first-hand that Mr. Barnett was right.

The La Ceiba group, which we call “The Team”, is composed of people with valuable experiences and characteristics. The team was led by Steve Rice, a kind hearted man that responsibly looked after our needs during the entire

mission, including our Frisbee request for our end-of-day fun back at the hotel. Dr. Steve Moore, a man with substantial experience and involvement with IHS missions, is the team’s surgeon. Another person who has been around previous missions is Shaina Hunt, a trained ICU nurse from Ohio. The first timers of the group are Dr. Joseph Rumley, an anaesthesiologist from New York; Steve Baker, a scrub technician from California; Anne Jones from Minnesota with more than 25 years in perioperative nursing; Dr. Moore’s niece Valentina, our very young and pretty translator; and myself, a registered nurse from the Philippines who now resides in Manitoba, Canada. What amazed me with this group is that, despite our differences in origin and culture, we ended up as a well-functioning team.

The whole experience was life changing, not just for the people we operated on, but also for us who travelled a long way for this mission trip. The La Ceiba group operated on seventeen urology cases. We learned to be flexible, how to cope with high levels of stress and get by with the limited resources that we had. The demand was very high. The team members arrived Thursday afternoon and were already on the call of service the very next day. We visited the hospital, the D’Antoni Hospital, and checked our supplies. The hospital’s employees were amazing and very accommodating. They showed us around and helped us however they could during our stay. They allowed us to move things around and set up our supplies so that we could work conveniently. They designated a surgical theatre for us to use. Across the hall, we tidied up a vacant room and converted it into our supply storage area.



Our long days of work were all served with professional excellence with frequent discussions and healthy arguments. The evening gatherings served as our socialization time which made it crystal clear that the group truly cared a lot about each other. Some of us may be more outgoing than the other members of the team, but every single person engaged in their own way. The gathering was filled with fun, laughter, teasing, and the joy of being together.

Our mission began when all of us arrived in a strange and unfamiliar operating room, but that same operating room transformed into a place of memories by the end of the week. I describe camaraderie as a feeling of trust and friendship, and I discovered the true essence of this definition among the people that run from Gran Paris Hotel to D'Antoni Hospital, despite the locals thinking we were out of our minds. There was a great sense of reliance and bonding during the long hours of surgery. Each day, hope was born as we helped one Honduran at a time. It is at this time that teaching and learning was experienced by all the people involved.

At the beginning of this journey, I had the goal of satisfying my desire to help others and make a difference. The mission did not just satisfy a goal, but rather, it gave me the desire to serve more. My Honduran experience will forever burn in my memory.

**Paula Lyn Lofamia**  
RN



***La Ceiba Surgery Team***

***Front row –Ann Jones, RN***

***Paula Lofamia, RN***

***Valentina Moore, Translator***

***Back row – Steve Baker, Surgical Tech***

***Dr. Joe Rumley, Anesthesiologist***

***Dr. Steven Moore, Surgeon***

***Shaina Hunt, RN***

## OCTOBER 2014 & FEBRUARY 2015 TEAM STATISTICS

### Total Patients Served – 9,522



**Dental Teams** Patients – 942 Extractions – 1366



**Medical Teams** Adults – 3,809 Children – 2,740 Surgeries – 44 Glasses – 1,142



**Pharmacy RX's** – 16,050 Vitamin Packets – 4,890



**Surgery Teams** Surgeries – 90



**Eye Care Teams** Patients – 1,941 Prescription / Reading / Sunglasses – 3,879

### Dates to Remember

## 2015

**July 15** Application and Deposit due for October Project  
**September 1** Balance of October Project fees due  
**October 1** Applications and deposit due for February Project  
**Fall Project** **October 25 - November 4**  
**October** Planning Team heads to Honduras  
**November** Team selection for February Project  
 Team information will be sent out  
**December 21** Shipping deadline for February Project

## 2016

**January 1** Balance of February Project fees due  
**January** Load containers in the Twin Cities  
**February Project** **February 12- February 26**  
**May 1** IHS News Break team articles and photos due  
 email to [newsbreak@ihsmn.org](mailto:newsbreak@ihsmn.org)  
 or mail to IHS  
 PO Box 16436, St. Paul, MN 55116-0436



## ENDOWMENT FUND

*Help IHS Grow for the Future*

IHS is currently working on setting up an endowment fund to help support, through its earnings, ongoing missions and possibly scholarship funds for students who wish to participate in its missions.

Anyone who would like to contribute to the principal of the fund can contact Chris Knoff at 763-588-5858.



## Officers & Board of Directors

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Carlos Scheer, Interpreter



IHS Co-founders Knute Panuska and Rosario Arias

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IHS Web Site: [www.ihsmn.org](http://www.ihsmn.org)  
[contact@ihsmn.org](mailto:contact@ihsmn.org)

## Upcoming IHS Projects

### Fall Projects:

#### Oct 25 – Nov 4, 2015

We have fielded two teams for the  
Project – a medical/dental team,  
and an eye care team in Puerto  
Lempira visiting villages on the Kruta  
River.

Fall trips fill up early, so do not delay.  
This is usually filled by publication  
date!—Questions or more information –  
[contact@ihsmn.org](mailto:contact@ihsmn.org)

### Planning Trip – Early October

Around the same time as the Octo-  
ber Project, a small group of people  
head to Honduras to lay the ground-  
work for the February Project. They  
determine team sites, arrange logis-  
tics, housing and meals. If you would  
be interested in getting involved with  
this aspect of the project **contact the  
IHS President at: [president@ihsmn.org](mailto:president@ihsmn.org)**

### February Projects:

#### February 12 – 26, 2016

Up to 100 participants from through-  
out the USA and around  
the world participate in the  
February Project. Everyone  
gathers in La Ceiba and then, with  
their teams, head out to remote  
locations around Honduras for  
approximately two weeks.  
The Project usually consists of six  
medical/dental teams, two surgery  
teams, two eye care teams, and two  
administrative teams.  
Many seasoned IHS'ers arrive early  
in La Ceiba to help with the many  
assorted tasks required to get every-  
thing set up. If you can help please  
let the Project Director know before  
the trip:  
[projectdirector@ihsmn.org](mailto:projectdirector@ihsmn.org).

Before or after the Project many  
participants schedule side trips to  
the Bay Islands, Copan, or enjoy  
other areas in Honduras. If you plan  
to visit a different country before the  
IHS Project be sure to check health  
requirements for entering Honduras  
from that country before setting up  
your trip!

## I•H•S Projects October 2014 & February 2015



## H O N D U R A S

Simplified location map of I•H•S Honduran projects

IHS Projects:

October 2014 

February 2015 



## International Health Services



### Participant Application – please print clearly (Circle trip dates you are applying for)

October 25 – November 4, 2015  
February 12 – 26, 2016

**Note:** The Feb mission dates are the latest arrival date in La Ceiba (usually by plane to SAP followed by bus) and the earliest departure date. The Feb 2015 mission begins Friday evening Feb 13 and ends Thursday evening Feb 26. Many participants in Feb will extend to Sunday, 1 March, 2015 to accommodate an optional side trip. This is important to know when you get airline tickets.

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Date of birth (D/M/Y): \_\_\_\_\_  
 Zip: \_\_\_\_\_ Country: \_\_\_\_\_ Name to put on nametag: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Specialty (*check all that apply*) Send copies of license – Physicians and dentists must also send copies of diploma  
 \_\_\_ DDS (specialty) \_\_\_\_\_ Dental Ass't \_\_\_ RDH \_\_\_ RPh  
 \_\_\_ MD (specialty) \_\_\_\_\_ NP \_\_\_ PA \_\_\_ Paramedic  
 \_\_\_ RN (specialty) \_\_\_\_\_ LPN \_\_\_ CRNA \_\_\_ EMT  
 \_\_\_ OD \_\_\_ Interpreter \_\_\_ Radio Operator \_\_\_ Engineer \_\_\_ General Helper  
 \_\_\_ Other (*please specify*) \_\_\_\_\_  
 Where are you currently working? \_\_\_\_\_ If not, when did you last work in this field? \_\_\_\_\_  
 Name of current or past supervisor \_\_\_\_\_ Phone \_\_\_\_\_  
 Briefly describe your work experience \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**October 2014 project** is smaller and teams go to one or two locations – contact Project Director for details.

**February project only:** Please mark the type of team assignment(s) you prefer (*check ALL that apply*)

Admin team – La Ceiba \_\_\_ Logistics team – PLP \_\_\_ Eye care \_\_\_  
 River/Lagoon \_\_\_ Remote (La Mosquitia) \_\_\_ Inland (mountains, etc) \_\_\_ Surgery \_\_\_ Any assignment OK \_\_\_  
 List specific team site preference (if any) \_\_\_\_\_ List any assignment you would NOT accept \_\_\_\_\_  
 Number of previous IHS projects you have been on \_\_\_\_\_ Would you be willing to be a team leader? \_\_\_\_\_  
 How well do you speak Spanish? None \_\_\_ Words \_\_\_ Phrases \_\_\_ Conversational \_\_\_ Proficient \_\_\_ Fluent \_\_\_

#### Application Deadlines & Project Fees

October Trip		
* Due July 15	Application/Deposit/Licenses	\$100
Due September 1st	Project fee balance/Paperwork	\$450
	<b>Total October project fee</b>	<b>\$550</b>

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February trip		
Due October 1st	Application/Deposit/Licenses	\$100
Due January 1	Project fee balance/Paperwork	\$575
	<b>Total February project fee</b>	<b>\$675</b>

\* Applications received before first due date for each project will receive priority in team assignments. Those received after will be considered only if their specialty is needed.

For applications to be considered the following must be attached

- Completed application with signed waiver                      - Deposit
- Copy of professional licenses    - Physicians & Dentists: copy of diploma also
- Copy of Amateur Radio license (Radio operators only)

**Note:**

\$100 deposit is non-refundable and due with the completed application. Upon request, deposit will be refunded if your application is not accepted.

**Make checks payable to:**  
International Health Services

**Mail application & forms to:**  
IHS - Attn: Project Director  
PO Box 16436  
St Paul, MN 55116-0436

(application continues on next page)

How or from whom did you hear about IHS? \_\_\_\_\_

Please list any major surgeries or serious illnesses in the past 5 years \_\_\_\_\_

Mark **Yes** if you are able and **No** if not able and explain any limitations below:

_____ Lift and carry 25 pounds multiple times	_____ Climb two or more flights of stairs
_____ Work in extreme heat and humidity	_____ Walk on uneven terrain
_____ Travel by any type transportation	_____ Bend or stoop multiple times

Explain any limitations \_\_\_\_\_

**INTERNATIONAL HEALTH SERVICES  
ACKNOWLEDGEMENT OF RISK AND WAIVER OF RESPONSIBILITY**

I, (*print name*) \_\_\_\_\_ along with all members of my family, in consideration of the benefits derived, if accepted for the International Health Services project, hereby voluntarily acknowledge the risk I am undertaking and waive any claim against the local and international organization, local officers, its sponsoring institutions and all leaders of International Health Services for any and all causes in connection with the activities of the above organization.

The use of illegal drugs is strictly prohibited by IHS and alcohol consumption by team members during the mission workdays is against IHS policy. In addition, team members should use alcohol with discretion, in moderation, and be sensitive to local customs regarding the use of alcohol. I understand that as a volunteer I represent IHS and agree to abide by this policy.

International Health Services does not provide any type insurance (medical, liability, travel, medical evacuation, life) for any participants. My signature on this form indicates my full understanding that I must provide my own insurance.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**PHOTO RELEASE**

International Health Services requests permission to use photographs and narrative descriptions of participants and the work they do on projects for the purpose of public relations, advertising promotions, and fund raising. These photos may be used in, but not limited to: Power point presentations, the IHS NewsBreak, and the IHS web site. This authorization is only for the IHS organization. IHS has no control over how teammates and other participants use photos for purposes of their own. This authorization will remain in effect for at least one year. IHS cannot guarantee that your image from this trip will not be used after that period of time.

Yes, you may use my photo !

Signed \_\_\_\_\_ Date \_\_\_\_\_

No, I prefer you not use my photo.

Signed \_\_\_\_\_ Date \_\_\_\_\_

*First time participants must also complete the Project Suitability Form on the next page.  
If you select NO, please make sure one team picture is taken excluding you, to submit to the annual Newsbreak staff.  
It is your responsibility to submit the correct picture to the Newsbreak editor.*

**T-SHIRTS & CAPS.....** T-shirts and caps are not included in the project fee and are a separate fee.

- **October Trip – Available caps and t-shirts sizes might be limited so order ASAP.**
- **February Trip – Orders and payments for these items will only be accepted until 1 December so plan ahead.**  
(T-shirt sizes available are: S M L XL 2XL) T-shirts @ \$15 - how many \_\_\_\_\_ size \_\_\_\_\_ Caps @ \$12 – how many \_\_\_\_\_  
**Please include the cost for these items with your deposit and this application.**

## International Health Services — Project Suitability Form

( required of first time participants only )

IHS projects are not for everyone as some locations are very remote and some people react differently when placed in a situation different from their normal life. To assist you in determining if this project is right for you and to assist us in placing you on the correct team, please complete this form and return with your application.

All IHS projects begin in La Ceiba, Honduras. Upon arrival participants will stay one or two nights in a hotel or with a local host family during our orientation programs. Teams will also return to La Ceiba at the end of the project, usually for one night, for debriefing, storing supplies and equipment plus a farewell dinner. Also, many repeat participants return to the same location as they get to know the local people.

The following questions are not meant to discourage you. Instead we hope they give you an understanding of the places we go and challenges that may happen.

Briefly describe any camping, hiking, or adventure trip experience you may have had. \_\_\_\_\_

Remote areas of Honduras have limited electricity or modern transportation and few telephones. Many IHS participants return year after year so they understand this change of life and the experience of helping people in this environment. Can you honestly say you can handle 8 to 10 days in locations that have solar showers, outhouses, bugs, humidity and the possibility of sleeping in a screen tent? \_\_\_\_\_ Comments: \_\_\_\_\_

For many, the time at the team site will be spent in a remote location away from telephones and TV with people who speak a different language, use different money, and have different habits, values and social norms. Can you handle being disconnected from friends and family for two weeks? \_\_\_\_\_ How do you plan to keep busy during quiet/slow hours? \_\_\_\_\_

Most of Honduras experiences a hot and humid climate. Mountain teams may get chilly at night. Many participants will do a lot of walking on uneven ground, carrying their own bags, lifting, moving, loading, and unloading many boxes of supplies. Can you do your share of the work and are physically up to going on this trip? \_\_\_\_\_

Frustration can happen on the trip. You are in a foreign country where Murphy's law can happen. You may experience "hurry up and wait". You will be with a group of people you have never been with before and interacting with a different culture. All this can be challenging. How do you handle frustration? \_\_\_\_\_  
Does your temperament allow you to "not sweat the small stuff"? \_\_\_\_\_

IHS teams may see many patients, which can require long days. Some teams will be working in hot, humid locations. How is your temperament and physical stamina in times like this? \_\_\_\_\_

Teams that have the most enjoyable experience work together with each team member contributing their part to the group's overall function. This requires you to do your job well every day, trusting others to do their job, and always stepping up to help with the small tasks that need to be done every day. To what extent are you a team worker? \_\_\_\_\_

There will be times when people work with patients in their own specialty. However, many tasks require the help of ALL team members working as a team. Group decisions are made when possible but the Team Leader has final say. Can you work within a group and be respectful of decisions made? \_\_\_\_\_

**\*\*\* February team only**.... some team sites have limited local communications so they also have ham radio operators who use radios to talk with the Admin team and Project Director in La Ceiba plus the logistics team in Puerto Lempira. There is telephone and/or cell phone use at some team sites. Many radio operators also have a limited e-mail capability. In the unlikely event of an emergency the Project Director and all radio operators work together to make sure the correct people are notified as soon as possible. Because electricity and other services are not available all the time, we need to understand that everyone will do their best to be timely but things do not always happen instantly. Participants need to tell family and friends at home about this situation. As with all details of each team site, participants will get information from their Team Leader about what communications and site facilities will be available for their use.

**Monetary Donations**



**Founders Gift – \$2,000 up**

Benson, Ken (endowment fund)  
 Good Shepherd Lutheran Church LCMC  
 in Morris, MN  
 Mathews, Drew  
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Benson, Doug and Kathy O'Connell  
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*The officers, board members,  
 participants,  
 and especially the people  
 of Honduras wish to express their  
 deep gratitude  
 and appreciation for your  
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*Every donation, no matter how big  
 or small, makes a huge difference  
 in helping us continue our work  
 with the poor people of Honduras!*

*Thank You.*



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 Bruce and Diana Illies for medical supplies  
 Carl Wallin, DDS for donated dental supplies  
 Carol Witt and Julie Lloyd for medical  
 supplies  
 CentraCare Monticello MPD  
 CentraCare Monticello wound clinic  
 Dan Walker for glucometers  
 Drew Mathews for gasoline, anti-venom  
 and surgical supplies  
 Eileen Anderson for donated toothbrushes  
 Fairview Southdale medical supplies and lab  
 for rapid HIV test kits  
 Gerald Maher, DDS for donated dental  
 supplies  
 Hope for the City, (medical supplies)  
 Integra Dental from Andover, MN for  
 toothbrushes and toothpaste  
 John Kirckof for donated radio gear  
 & team supplies  
 Katun Corporation (warehouse space) Jim  
 Johnson  
 Liberty Carton Company for the boxes  
 Mary Huber, St. Paul for the sheets and  
 blankets  
 Mission Outreach; Franciscan Sisters of  
 Springfield, IL (medical supplies)  
 North Memorial Ambulance Service  
 Patrick Taufen from CentraCare, St. Cloud  
 Hospital for medical supplies  
 Quality Family Dental Care for toothpaste  
 Rocky & Maren Bergau for medical supplies  
 St. Cloud Hospital lab services for donating  
 urinalysis strips for the teams  
 Tom Gelhaus for medical supplies  
 Tom Klett (use of truck and trailer)  
 Trumm Pharmacy for medications

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 contributors correctly and we apologize for  
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 missed .*



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