

NewsBreak 2018

Annual Newsletter of International Health Service of Minnesota



President's Letter

The February 2018 Project again produced success for the IHS teams. The total number of participants again were a little fewer than previous years. It is becoming more the rule that fewer volunteers are signing up for the Medical, Dental, Surgical and Eye Glass teams. Each year we hope the recruiting efforts will not only bring in sufficient numbers of volunteers but also younger professionals and supporting volunteers. An example of need for younger individuals was evident at the beginning when we were loading our collected supplies into the container that DOLE Fruit sent to our donated warehouse space, Katun. When we loaded the container January 17, 2018, outside of the load master Doug Pflaum MD, the average age of the 14 worker bees was 70+ years. Every thing went well without any problems.

Planning is always a process of having an initial plan that we hope will be uneventful. We have learned from experience that we need to have plans B,C,D – well, you get the idea. That brings up two words that I try to live by - not always successfully - flexibility and patience. I try to impart these words and ideas to participants on the project. This project was going to be different in a way we had not worried about in the past, namely we were going to be without dedicated consistent small plane support for moving teams and supplies as in past years. Teams in La Moskitia would have to be transported by trucks to Rus-Rus and Lisagnipura. Rus-Rus would take 4-5 hours one way and Lisagnipura 3 hours by the newer short route (the old road takes 5 hours). This also affected our attempts to transport potential medical and surgical referrals and getting the referrals back to their villages. The problem was multifaceted. The husband/wife team missionaries were being sent on a very deserved furlough. Wes was also the pilot we used over the years. MAG Missionary Air Group was the organization responsible for the air support based at Rus-Rus. MAG was trying to find an identical missionary pilot, husband/wife team, but the possible pool of missionaries to satisfy this remote location's skill set will be difficult to fill. In addition the plane had to be sent back to the USA for a complete overhaul and updating of instrumentation. MAG is working on all of this and said as much as they are committed to helping IHS and are working to at least having small plane support for the February 2019 project. The cost of plane support is expensive so any donation support is greatly appreciated.

The Patuca river medical/dental team again was a success in bringing services to much needed villages up river from Wampusirpi, also known as Wampu. Eye glasses in La Ceiba. Medical/Dental in a new place, Gracias. Urology surgery in La Ceiba and Plastic surgery again in Tocoa.

At a number of these specialty surgery sites IHS is anticipating that some of our more experienced professionals will be looking at some of their last trips in the next few years. With this anticipated, future needs will be operating room trained nurses, surgical technologists, anesthesia practitioners.

The success of the project is a function of all the specialty Board of Directors and all of the participants pitching in, sometimes out of their comfort zone: thank you very, very much.

Remember IHS is a 501c3 tax exempt organization and as such your donations of money or equipment are tax deductible. We also have an Endowment Fund that we hope to keep adding to so that IHS can continue to fund projects in the future.

Drew Mathews
President

Project Director's Report

First, I want to thank the IHS board and other IHS volunteers for being there on Friday night and Saturday morning to help with the Opening Banquet and Orientation session. I was delayed getting to Honduras until Saturday afternoon. I also want to thank the people that came early to help with the unloading of the container. We had another great year. Drew and I went to the Sustainability Conference on Honduras last September and made some good contacts. The October 2017 project on the Kruta River went well, although things were quite wet for them.

This last February, we had 5 Medical teams, 4 teams with Dentists, 3 Surgery Teams and 1 Eye Glass team. Another fabulous thing this year is we had 10 Honduran volunteers join our teams. Of the 5 Medical/Dental Teams, we went to a new location, Gracias. The Honduran Dentist that went with the October team is part of the San Pedro Sula Rotary. The Rotary gave IHS a proposal to take a team to Gracias and we accepted. It looks like from the comments so far, to be a location to return to in upcoming missions.

Much of what we do would not be possible without the network of Honduran volunteers we have working with us. I wish to thank them for all the hard work they do in making it easier for IHS to do the work we do. I also want to thank the IHS board of directors and the volunteers that help with the logistics of putting the IHS missions together each year. Finally, I wish to thank the people that go on our missions each year. I hope this edition of the Newsbreak properly reflects the idea of the good work that goes on each year. I have already started working on the October 2018 mission and look forward to another great year for IHS.

John Pope
Project Director



Foundation / Endowment Fund

Help IHS Grow for the Future



IHS has set 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.

Kruta River (October)



After being accepted to participate on the October Kruta River Team I was filled with excitement and a sense of adventure. When I told friends, colleagues and family of my plans... frequently the response was “how could you do that.” My goal was to treat this work as a “life learning adventure.” I wanted to soak in and experience as much knowledge as I could.

It did not take long for this to occur. In fact, the first major learning opportunity occurred before we even boarded the boat to go out on the river.

I was learning about the rest of the team over coffee and fresh coconut bread at Dr. Marianne Serkland’s prior to leaving. In our discussions, I quickly learned how committed each person on the team was to helping the people in Honduras. Most of the team had been doing this work for decades. I quickly felt embarrassed that I have not contributed to improving the world prior to now.

I had known of Dr. Marianne in prior years as I work at the same hospital where she retired from Cardiology. The Cardiology group in general had a reputation for expecting their “team of caregivers” to provide superior care. I was nervous to work with her as I was not knowledgeable in tropical medicine and the health needs of the village. I did not want to let her or others on the team down.

She took me under her wing that first day and taught me more than I can list. She challenged my thinking on how to care for the patients and medical resources we take for granted back in the USA.

I quickly learned that Dr. Marianne has great compassion and is committed to making Honduras a better place. I am in awe of her efforts for the people of Honduras. I have visions of retiring in the next several years on our lake in Minnesota. While she “retires” to feeding over 90 children per day, assisting IHS plan and operationalize health care teams, providing a home for several abandoned children, promoting children’s education and a better future, working to be a health care advocate for the people of the villages in La Mosquitia, assisting patients who come to her for care.

I feel my volunteering has been somewhat insignificant when I compare my contributions to the other members on my IHS team and Dr Marianne. In the future when someone tells me “how can you do that” my reply will be “how can you not.” Watch out IHS, I will be back.

Carla Olson, RN



What an adventure! Friday night, October 20th, 2017: my flight leaves the next day and I was only starting to pack, along with the feelings of anxiety and nervousness. About 10 hours later, I was sitting on a plane and headed to Honduras for my first mission trip with IHS. Finally after three plane trips, one bus ride, and two hotels, we landed in Puerto Lempira.. With our rain jackets on, we headed over for a seven hour boat ride up the Kruta River. We sat in the pouring rain and got soaked (so much for rain protection gear). As for the next four days the word best used to describe them is RAIN. Lots and lots of rain.

But besides the weather that we could not control, the trip was fantastic and a great learning experience. As a first-time traveler with this team the thing that hit me the most was the realization that the people in the country of Honduras, and especially the people in the village of Tiki Raya, have so much less than we do; often times we take advantage of the stuff we have. Everyday we saw tons and tons of families just feverently trying to make their way into the clinic to get help and medicine. They were usually either sick or hurt, and our clinic was able to give them vitamins and the other medicine they needed to become healthier. My job was to be the general helper throughout the clinic. I helped package medicine for the pharmacy, observed nursing, helped in the kitchen with food and drink, and tried to stay busy and be useful where I could. There was one other place where I could have assisted...the dentist. I walked into the room and asked Elenor (one of our dentists) if I could observe. I watched her pull one tooth and basically passed out. I wish someone would've taken a photo because I was told that I looked like a pale ghost! I am almost positive I won't become a dentist in the future.

In the village we really felt as though all the attention was on us as the people would watch our every move with great curiosity. They were always standing outside our kitchen in hope to get food (or just watch us) because they were hungry with eating mostly rice, beans, and bananas. They would also try to watch between the loose boards of the school house, where we would sleep and set up the clinic. They would always be around. And although I didn't know Miskito, the language they spoke, we could always greet each other with a smile or the word nauxa - hello.

One thing I thought would be worse was the bathroom. The bathroom wasn't bad (thanks Bill for adding the toilet seat to the wooden hole) and every day, when I got up around 4:30 am, I put on my "wellies" (rubber boots) and walked out to the bathroom. It was so peaceful in the morning, and from a distance away you could hear the howler monkeys in the forest. Along with monkeys there was usually a cow that lay right in the walking path. The first time it was unexpected and gave me a little scare, but eventually I got used to it.

After getting back from Tiki Raya and into Puerto Lempira, many of the adults on the team asked me how I thought the trip went and if it made me want to travel. I responded that the trip was fantastic and everyone did the best they could under the circumstances (like the weather) with what we had. The trip itself, and all the experiences that my grandmother, Karen DeMorett (nurse) has had, has certainly made me want to travel when I'm older. The journey was fantastic and a great way to get to know new people and new cultures.

Oh! And I can't forget that the trip was filled with lots and lots of coffee making, for a team who needed a great amount of caffeine.

Maddie DeMorett,
General Helper

With this being my 2nd trip up the Kruta river, I noticed how much IHS has done and helped in the health and wellness of the people of Honduras. IHS, with help from donations and volunteers is able to provide medical and dental services twice a year, especially those who are in remote villages along the Rio Kruta, such as TikiRaya.

My assessments consisted of listening to lungs and heart, doing manual blood pressures, looking into eyes and ears and palpating areas of discomfort. My overall conclusion is that the people of TikiRaya are much healthier than when I saw them 6 years ago - IHS is truly making a difference. Thanks for allowing me to be a part of such a great October 2017 team.

Jodi Lillemoen, RN



October Rio Kruta Team

*Front Row:
Roberto Kattan, Dentist,
Riley Morfy, Interpreter,
Karen Demorett, RN,
Maddie McDermont, General Helper
Jodi Lillemeon, RN, Teri Houle, RN*

*Back Row:
Jeanne James, General Helper,
Walter Tatallon, Interpreter,
Dr. Marianne Serklund,
Irene Schaper, General Helper,
Bill Roussel, Interpreter,
Elinor Japp, Dentist, Carla Olson, RN,
Dale James, Pharmacist*

La Ceiba Eye Team

Again this year, the IHS Eye Glasses team worked at the Red Cross office in La Ceiba. We were a small team of six veteran volunteers plus one newcomer. Jan and Charlie handled refraction and vision checks. Irene and Barb fitted patients with glasses and re-checked their vision. Mike tested clients for reading glasses and distributed sunglasses. Lead IHS interpreter Carlos and first-time interpreter “Carlito” rounded out the team.

Eye exams and vision tests are rare in La Ceiba so clients turned out in large numbers. Our clinic operated for nine days and served nearly 1200 patients. We saw people of all ages, from school children who received their first pair of glasses to seniors who needed stronger prescriptions. Some arrived at the Red Cross as early as 4 AM, so they would not miss the opportunity for an exam. We saw some familiar faces too - some had visited our clinic last year, returned for another check, as their vision needs had changed. Everyone told our team members how much they appreciate the help of the IHS brigade. Eye glasses have a profound impact on peoples’ lives - with them, they can continue to work, sew, cook and read.

The La Ceiba Red Cross staff, volunteers and Las Dames de La Cruz Roja women’s group were again the key to our clinic’s success. The staff promoted clinic hours via radio, television and social media. It provided 20 or more support volunteers each day to manage the facility, register and schedule patients, handle all paperwork, provide additional interpreters and arrange medical referrals when and as needed. The partnership between the La Ceiba Red Cross and IHS has been in place for some 35 years. It grows stronger each year and continues to provide services to the people of Honduras.

Mike Stapp,
Examiner



La Ceiba Eye Team

*Left to Right:
Examiners Mike Stapp,
Barb Fleming, Jan Brown,
Charlie Brown, Irene Schaper;
Interpreters Carlos Scheer
and Carlos “Carlito” Rodriguez.*

La Ceiba Surgery Team



Ever since my very first mission trip to La Ceiba I knew that I wanted to pursue the medical field as a lifetime career. Helping others in need has always been a great factor in my life, no matter where I am in the world. Traveling to Honduras for the third time has strengthened my translating skills as well as my knowledge of the medical field by volunteering on this team.

Side note-I couldn't thank my uncle (Dr. Steven Moore) enough for inviting me to volunteer once again!

The 2018 surgery team at La Ceiba's D'Antoni hospital consisted of Anne Jones (RN), Steven Moore (surgeon), Brady Rajala (helper/student), Steve Rice (interpreter), Cynthia Scott (RN), Beth Smyth (RN), Sydney Sarmiento (helper/student), Jeff Sarmiento (anesthesiologist), Wendy (surgeon), and myself, Valentina Moore (interpreter/student).

During our week-long journey of performing surgeries, we had the pleasure to assist patients with urologic diseases such as kidney stones, benign prostatic hyperplasia, and some rare cases. In the short amount of time we had we completed around 20 surgeries, including a nephrectomy.

Stone disease is very prevalent in Honduras and many patients come in with chronic pain from stones that have obstructed their kidneys for months or years. Unfortunately, a country like Honduras does not yet have the technology to do minimally invasive procedures to retrieve the stones so the majority of the patients required open surgery to extract them. Just like kidney stones, prostatic disease is very common amongst older men- our technique was to do TURP's (transurethral resection of the prostate) to alleviate their pain.

The most interesting case we performed was on a younger individual born without a bladder (bladder exstrophy). He had ureters transplanted to the skin that required opening and dilating because he was going into kidney failure. I had never heard of or seen anything like his condition before.

Although we had our difficulties some days, we faced our challenges and our team thrived very pleasantly. At first, it was an operating room full of strangers but with everybody's skills and hard work it turned out to be a great mission that we had all volunteered for. We operated together, laughed together, and learned from each other. Traveling to Honduras not only taught me valuable information, but it contributed to the satisfaction I obtain from seeing grateful patients that needed our help dearly. It is truly a tremendously rewarding experience. The Honduran people at the hospital, as well as patients and families were always very friendly and gracious to us - it is a feeling I will never forget.

Valentina Moore
Interpreter/Student



La Ceiba Surgery Team

Front Row:

*Beth Smyth, RN, Ann Jones, RN,
Valentina Moore, Interpreter,
Sydney Sariemento, General Helper*

Back Row:

*Cindy Scott, RN
Dr. Steven Moore, Surgeon,
Brady Rajala, General Helper,
Dr. Wendy, Surgeon,
Steve Rice, Interpreter,
Jeff Sarmiento, Anesthesiologist*

Tocoa Surgery



The first time my sister, Dr. Audrey Nguyen, brought up this trip to me was in September. I was thrilled about the idea of going to Honduras on a medical mission trip, but I never really expected it to happen. I have never been happier about being wrong in my life. After discussing the logistics of this trip with my parents and my teachers (to my chagrin I still needed permission from my school) I was finally ready to say yes.

Before I knew it, it was February and Audrey and I were ready to fly out of LAX— en route to Honduras. I was beyond excited, but also quite nervous. This was my first time on a mission trip of any kind and Audrey was telling me all I had to do was listen to what people told me to do. To be frank, it did not do much to calm my nerves. I didn't even know specifics in the operating room! So, when we landed in Honduras and arrived at Hotel Paris, I was overwhelmed. Seeing all these people gathered in one place, with one goal in mind, was an incredible thing to witness. Audrey tugged me along to dinner where I realized I was the youngest person in the room with close to no real-world experience. It was intimidating. But as I sat down with our team, I was introduced, and I felt immediately welcomed. Lisa Hayes-Swartz, our team leader, gave me homework to do from day one and gave Audrey and me the run down of what would be happening the next few days. She was the very first member of the team to welcome me with open arms and she really was my go to for clarification about what I needed to do and where I needed to be. With every word, I became increasingly excited about what was to come. That night, Audrey showed me a presentation about the operating room (OR), the dos and don'ts and the jobs of each person in the room; I felt a bit more prepared.

Fast forward to the day we left for Tocoa. We had to load all our materials and equipment onto the bus and then from the bus to Hospital General San Isidro. We then had to load the carts and boxes from a storage room a few streets from the hospital onto trucks and the bus back to the hospital. I honestly did not expect heavy lifting to be a part of the mission trip experience, but it made me feel useful to the team. It was that day that Steve Baker, our surgical tech, took me under his wing and basically let me follow him around the OR like a little baby duck. He showed me the ropes and answered all questions I had. That day, I loaded and moved carts into the OR, restocked materials, and helped Steve set up the OR. Steve was a true blessing to me this trip, we got along awesomely and he was such a proficient worker who always found something that needed working on or that needed prep; I don't think I saw him sit down once! Audrey was busy with Dr. Jaffurs, our chief surgeon, and Denis Roussel, our amazing translator, in clinic the entire day. They saw a total of 95 people in clinic and from there, the schedule for the following two weeks was set. I got to see our nurse anesthetists, Craig Gill and Susan Wodrich, set up the doses for these tiny babies. Jean Yunker, our circulating nurse, was always there in the OR, helping out and being the one person I could talk to when Audrey, Dr. Jaffurs, and Steve were scrubbed in.

After that first day in the OR, I never imagined that I would be so involved in all the cases we had; it felt like I had found my place on the team. I helped prepare the OR, organize supplies and surgical kits, clean the instruments, and transport patients. Teamwork was key; everyone on the team helped each other clean and turn over the room. It was such an incredible and eye opening experience. Each day brought new cases and new opportunities for me to learn, to grow, and most importantly to help. The very first day we arrived, Dr. Marulanda was a blessing to us all. He was unlike anything I expected from the head surgeon at a hospital. He was kind, humble, and had the greatest sense of humor. From the minute we began unloading equipment to the minute we finished, he was there the entire way, helping us in any way he could. I was humbled and amazed by his actions, and he showed me that just because you may hold a position of higher prestige than others, doesn't make you any better than anyone else. The second day we were at the hospital, I got to witness my very first cleft lip surgery. Observing how the team worked so cohesively and seamlessly showed me just how functional this team was; there were no mishaps or second-guesses. However, on the third day, I got to get up close and actually see what Dr. Jaffurs and Audrey were doing. Dr. Jaffurs even took some time to explain to me what he was doing: why he was making specific incisions, what exactly a cleft lip was, and where it connected to the baby's nose. It was absolutely insane. Even though I know that cleft lip surgeries are no walk in the park, Dr. Jaffurs made it look so effortless I was shocked. The ease with which he performed these surgeries was unbelievable. I couldn't have watched a more dedicated or fun surgeon at work (besides maybe my sister).

There is an indescribable feeling that comes from helping those who cannot help themselves, and I finally got the chance to immerse myself in that experience. I was so fortunate to be on a team that not only functioned like a well oiled machine but also made me feel so welcomed and needed. This trip not only showed me how the OR operated on mission trips in foreign countries, but it also showed me how crucial it is that everyone plays their part. I have always known that I wanted to do something in the medical field, and this trip has strengthened my resolve to do so. Dr. Jaffurs especially played a pivotal role in this. Watching him work and have fun and enjoy what he was doing made me want that for my future as well. Knowing that Dr. Jaffurs has done this mission trip for eight years only makes me appreciate what he does even more. He is humble, driven, and has the driest sense of humor. I can't count how many times Audrey and I have burst into laughter because of his comments or jokes. Craig was another person who really opened my eyes to what it means to be a part of a team. He was such an inspiration for me to be kind and to try my best to be as helpful as possible. Craig showed me what it was like to joke and have fun, but also how to take your job seriously. He was so lovely to be around and was someone who always put a smile on my face. I would like to thank the entire Tocoa Surgery Team for guiding me through this inspiring mission trip and for making me feel like I was truly a part of this fantastic team. Thank you to everyone.

Dawn Duong
General Helper



Tocoa Surgery Team

*Susan Wodrich, RN
Jean Yunker, RN, Craig Gill, CRNA
Steve Baker, Surgical Tech,
Lisa Hayes-Schwartz, RN
Dr. Dan Jaffurs
Front: Dawn Duong, General Helper.
Dr. Audrey Nguyen.*



Evelyn's Cloud Forest Adventure Team

When I signed up for this experience, I expected one of the biggest learning curves would be adjusting to the living conditions in Honduras. In reality, I ended up at the most “cushy” site where my only hardship was sleeping in a tent on a gorgeous balcony, but I still managed to learn far more than I had anticipated.

Our team was primarily located in BelAire, which was a short 27-mile bus ride from La Ceiba, but we also visited Berlin, Pueblo Nuevo, and Sonaguera. In BelAire, we stayed with Evelyn, the founder of the Clinic of Angels. At this clinic and the other sites, we saw 1225 patients, filled 3180 prescriptions, and dispensed 1248 packages of vitamins. While working in the pharmacy, I thoroughly enjoyed my first taste of independence. As a student, my work always has to be verified by a pharmacist; in Honduras, I got to be the pharmacist. It was a valuable experience that boosted my confidence as I prepare to step fully into this role following graduation this May. I also had the opportunity to step outside of my role as a pharmacy student to learn how to give intramuscular ceftriaxone injections.

Don't worry, I wasn't the only one having an adventure in Honduras! The team worked on many exciting cases, including a bullet extraction, removing extra digits from the hands of two young boys, and delivering a baby, who was named after the two healthcare providers that delivered her: Evelyn Jenine. We also examined the business side of medicine by helping to brainstorm ways to make the Clinic of Angels self-sustaining.

Aside from the hard work, we also enjoyed many adventures together. We started the trip off with a bang by watching Kory “break into” the pharmacy after we had locked ourselves out. In the evenings, we enjoyed conversing and learning about one another; this included discovering that Dewey's first job was fishing with Jesus (joke courtesy of Kory). We also enjoyed Evelyn's zoo (howler monkeys, a spider monkey, dogs, cats, rabbits, chickens, cows, a bird, and a sloth), a relaxing day off at Villas Pico Bonito, and a bucking bronco of a ride to the clinic in the clouds (Jenine, Kory, and I stood in the bed of the truck the entire ride up the mountain). Of course, a trip to Honduras is not complete without an “I am clearly still a student” moment. After spending all morning reaching my hand into the bucket of extra-strength acetaminophen, I discovered a fake-looking scorpion. My first thought was that Chet was trying to prank me with a rubber scorpion. As it turns out, the scorpion was quite real. Everybody came running to investigate when they

heard me throw the bucket on the ground and yell, “Oh my goodness, it’s alive!” After all of this excitement, we clearly had to end the trip with a bang as well as with Chet’s choking episode at the closing banquet following a joke from me that was actually funny. He survived, of course. I guess that is what I get for trying to be funny.

Overall, this was an eye-opening experience for me to be exposed to this drastically different way of life. Not only did it provide valuable pharmacy experience, but it also taught me to be more appreciative and thankful, even in times where it seems like there is little to be thankful for. It also helped remind me of what is truly important in life: people and my relationships with them. I was blessed with a wonderful team to go on this crazy adventure with.

Lauren Kuschel,
Pharmacy Student



BelAire Team

Front Row:

*Dr. Kory Tuominen,
Jenine Graham, CNP,
Lauren Kuschel, Pharmacy Student,
Renee Donnelly, EMT,
Idalia Malonado, General Helper*

Back Row

*Alberto Molina, Interpreter,
Chester Norris, Radio Operator,
Dewy Essig, Pharmacist*

Gracias



On the 18th of February the Gracias clinic team boarded a bus for the 8 hour ride through the mountains to our destination. The ride was absolutely gorgeous, and we only had to get out and push once. Gracias is the most beautiful city I have ever had the luck of visiting. It is strung loosely together on telephone wires, and its tangled streets are full of color, life, and a wide variety of stray dogs. Upon our arrival we were greeted graciously by our hosts, who provided us with comfortable quarters and an overabundance of food. For the first 4 days of our stay we set up a clinic in Gracias, later moving it to the dusty village of Villami and finally up into the mountains to Cedros. The ride to Cedros involved spending 50 minutes being bounced up and down in the back of a pickup truck, and I loved every second of it. While working in Gracias the mountains had been dark behemoths, looming on the horizon, but during the ride to Cedros, they swallowed us whole. It was lovely, and a little frightening. In the mornings I would help in the dentistry tent, and I witnessed hundreds of teeth being pulled out of sometimes smiling, sometimes screaming mouths. We often shared the clinic with a number of stray dogs, who would wander around looking for scraps and advising the doctors. Drugs were dealt, glasses were handed out, and my father cut a hole in a man. We helped a wide variety of patients, and were well paid in smiles and gratitude. When the workday was over, the team would return to our base, where we would eat too much food and be beaten at soccer. Sometimes, we would wander out into

the city streets together, a herd of clueless white people, trying not to get lost. At night we curled up in our beds and tents and fell asleep to the sounds of birds, bugs, and distant churches, where people were singing to God. I shared my bed with numerous spiders and ants, but I have never been more in love with a bed.

I could go on and on about this trip. I could talk forever about the mountains or the trees or the dogs or the people, but I could never do it justice. Trying to summarize this experience is like trying to bottle the sky. For the last two weeks we've done our best to help this beautiful, troubled community, and in exchange we've received hundreds of priceless memories, and hundreds of really good tortillas. Though we must now part ways, everyone on the team will return home with something more than they left with. Everyone, that is, except me. For I have decided to join a nice group of stray dogs and live out my days here, eating garbage, barking at chickens, and chasing the moon.

Ana Haus,
Interpreter



Gracias Team

*Front Row:
Josman Gonzales, Interpreter,
Dr. Tom Haus,
Cheryl Schraeder, Team Leader,
Daniel Harren, Medical Student,
Kristen Binger, Pharmacy Student,
Roberto Kattan, Dentist (Not Pictured)*

*Back Row:
Char Zimmerman, RN,
Dave Anderson, Engineer,
Steve Posner, Radio,
Luanne Dear, RN, Amy Sullivan, RN,
Karen DeMorett, RN,
Jeanne James, General Helper,
Anna Haus, General Helper,
Dale James, Pharmacist*

PLP Admin

The three skilled people on the PLP Admin represent a vast base of knowledge. Leader Drew Mathews is the key to the functionality of the PLP Admin. His vast knowledge of the medical field, logistics planning, and interaction with area resources create a very workable team.

Grant Hansen, who is an expert mechanic in his own business, brings his skills and knowledge to the group. He can repair most equipment for IHS or the local church and hospital. If it is broken he can fix it. Sometimes he has to fabricate replacements on site.

John Wagner, who is the Ham radio operator for the PLP Admin Team brings down his radio equipment from Katy, Texas. He sets up High Frequency Radio for voice and email communications between medical teams out in remote villages. He also maintains a VHF repeater which allows for voice communication between the Admin Team, PLP Hospital, and remote villages 20 to 30 miles from PLP. This is used every year for doctors to confer with each other.

John Wagner
Radio Operator



PLP Admin Team

*Left to Right
Grant Hanson, Engineer
Drew Mathews, Team Leader
John Wagner, Radio Operator*

*Not Pictured:
Dr. Marianne Serkland*

PLP Surgery

There are moments in life when you feel confident and secure in your personal and professional achievements that you start asking yourself, how can I give back to society what it has given me? That time came to me a few years ago when Dr. Joe Tombers contacted me to request my expertise in the laboratory field. Through the years I was able to support IHS with laboratory equipment and testing materials, however, the invitation to participate in future IHS expeditions was offered to me and I made the necessary efforts to accomplish it. My first participation in the humanitarian medical trip to Honduras was a great experience in many ways. From the very beginning I felt the spirit of altruism on every single person during the welcoming dinner, and later during our deployment to Puerto Lempira with the surgical team which I was fortunate to work with.

Experiencing life and the day-to-day activities in Honduras, particularly in Puerto Lempira, was a humbling experience. As an Ecuadorian citizen from origin, I had been exposed to similar socioeconomic conditions, however, I felt like the Honduran citizens living in the remote areas of the country require urgent attention to basic needs including medical care, and it feels very rewarding that organizations like IHS and the multidisciplinary team of professionals can provide medical care for the time being.



There were multiple surgeries that our team performed in a short period of time, some of them basic, others more complex, but the outcomes brought a sense of fulfillment for both the surgical team and the patients. One of those memorable events involved the supportive participation of our surgical team in a complicated gastrointestinal surgery on a septic patient that the local hospital's surgeons were performing. It was a risky procedure not only because of the critical condition of the patient, but because of the limitations on the equipment and medications of the hospital. Nonetheless, we were able to support the local surgeons with procedure and testing suggestions that allowed them to finalize the surgery with relative success. Unfortunately due to post-operative complications and the inability to offer ICU monitoring the patient did not survive. In following up with this case on the next day, we met with the local hospital surgeons to have a debriefing of the surgery, discuss what went wrong and what went well and share ideas of alternative ways to manage similar cases in the future. Events like this make you realize how important the work we do is and how our efforts can help the people of Honduras to have the opportunity to live a healthier life under the possibilities.

I think we made a very significant contribution to the wellness of the people of Puerto Lempira, and that was manifested by the positive outcomes and expressions of gratitude from all the people that we attended during our stay in Puerto Lempira. I appreciate the opportunity to have participated in this medical expedition and the support that I received from my team members and everyone who form part of this wonderful organization. Special thanks to Joe Tombers, JoAnn and Jim Prater, Meredith Johnson, Amy Mays, Kirstyn Indgier, James Dunn, Rick Reiter, Drew Mathews, Grant Hanson, and John Wagner.

Pedro Castaneda,
Interpreter

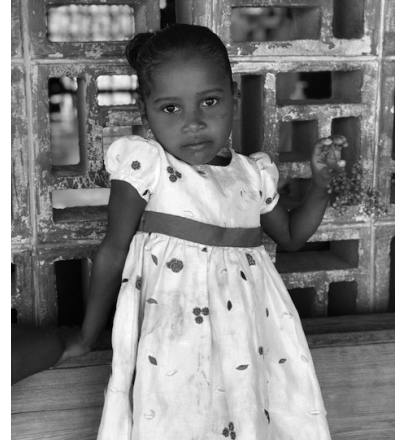


PLP Surgery Team

*Front Row:
Dr. Jim Dunn*

*Back Row:
Jo Ann Prater, RN, Pedro Castaneda, Interpreter,
Merideth Johnson, RN, Jim Prater, Team Leader,
Kirstyn Indgier, CRNA, Amy Mays, RN,
Ricardito Reiter, (Not Pictured)*

Lisangnipura



Lisangnipura: The Good, the BLAD, and the Ugly

Our first experience with IHS was quite an adventure! This was our first time on a medical mission trip, and it was eye-opening and memory-filled. Life in Lisangnipura is vastly different from life in the Midwest, as villagers grow their own crops, work as a team and do not earn wages, live in small wooden houses on stilts, have essentially no electricity or clean running water, and do not know the luxury of flushing toilets.

The day after arriving in Honduras, we hit the ground running with an early departure to Puerto Lempira to spend two days on the Advance Team. Here, we got a taste of how much organizing is required to make sure boxes upon boxes of IHS supplies get to the right village. We then left for Lisagni in a small plane and were greeted by many local people upon arrival.

Our clinic was busy, especially on Day 1 when 260 patients were seen. At the pharmacy, we worked late into the afternoon, finishing up our final prescriptions in the dark. It was a challenge to attempt to communicate in Spanish - a language in which neither of us was even close to being fluent - to our Miskito interpreter. After Day 1, we quickly learned that our interpreter was very knowledgeable in regard to medication counseling, and the remaining clinic days went much more smoothly. Overall, our clinic saw 1357 patients. Additionally, our rock star dentist, Julia, pulled a total of 370 teeth. One thing that amazed us during the mission was how stoic the children were. One two-year-old boy calmly held a nebulizer by himself during his daily treatments, and another young child with a broken leg did not even cry.

As the title of this reflection indicates, we experienced several challenges and triumphs during the mission. One of the most notable challenges was Dr. Mark's sudden illness on Day 3. After feeling ill all afternoon, it was determined that he likely had a kidney stone and was flown to Puerto Lempira before sunset. Moral of the story: if you go on morning runs in La Mosquitia, be sure to stay hydrated! Despite this unexpected challenge, Dr. Mark's flight was a blessing in disguise, as an extremely ill two-year-old was able to be flown along with him and admitted to the hospital.

Of course, with the remote nature of La Mosquitia came intrinsic challenges. Sleeping in tents made for interesting nights (especially for Felix whose air mattress had holes in it), and there was nothing quite like waking up to roosters crowing at 4:00am, the 5:30am bell, or dogs barking loudly in the night. Trekking to the outhouse after a downpour (or, if you're Jenni, getting stuck in the outhouse during a long downpour) and hanging out with the cockroaches and frogs made life interesting. In regard to the "BLAD" part of the mis-

sion, the women managed to accidentally re-set the lock combination to the women's dorm multiple times, to the point where no real word options were left and "BLAD" was our best option.

Thus far, we have pointed out mainly challenges in Lisangni, but we also had countless wonderful times that made the experience unforgettable. One day, we went to the "Cascada" with a Miskito-speaking helper. It turned out that there was no actual waterfall, but we had so much fun swimming and skipping rocks with the helper and a couple of local children. It became clear that sometimes it is not necessary to speak the same language, and laughter is the same in all languages. Our favorite part of each day was going to the river - the clearest river either of us has ever seen - to bathe before heading to supper (which, as the team often joked, typically consisted of rice and beans). Another team joke revolved around Jenni's support of the local economy by purchasing Batana oil, which will cure just about anything if you have faith in it. We pharmacy students also look back and laugh at our amazement that nearly every patient's last name was "Edad" the day we ran out of the usual registration forms. It turns out that "Edad" actually means "Age" in Spanish, and our Miskito interpreter had a good laugh when we finally pieced together that "Edad" was not a last name. (Clearly we are still students, as it took us three whole days to realize this.) Other highlights of Lisangni included petting the cute little pigs and watching the talented athletes of the village play soccer. On our last night in Lisangni, the local people threw a big dance party, and there were lots of laughs as the villagers' dance skills clearly surpassed our team's dance skills.

When it came time to leave Lisangni, we enjoyed an exhilarating truck ride back to Puerto Lempira. It was bittersweet to say goodbye to the villagers who saw us off as we boarded the plane out of La Mosquitia.

We are grateful for having had the opportunity to experience the clinic in Lisangni. Our team was wonderful and truly became our family for the week. It is awesome that our team's efforts will help improve the health of the people of Lisangni and those who walked many miles to come to the clinic. We will cherish our many memories and use this experience as a guide in the future.

Sarah Calhoun and Kristen Schroeder,
Pharmacy Students



Lisangnipura Team:

Front row:

Jenni Lange, RN, Kristen Schroeder, Pharmacy Student, Ibrahim Hillsaca, Interpreter, Dr. Joe Tombers, Anne Lind, Lab/General Helper

Back row:

Hilario Nixon, Interpreter, Dale Watson, Team Leader, Larry Foster, Radio Operator, Sarah Calhoun, Pharmacy Student, Julia Kattan, Dentist, Felix Rodriguez, Interpreter

Not pictured: Dr. Mark Spiro

Rus Rus – The Power of Proximity

Down the corridor I hear the voices of other medical staff but I cannot understand what they're discussing. Although I am fluent in Spanish, I need an interpreter to understand Miskito, the local language of Rus Rus. I continue cleaning my exam room with the weak light of my headlamp.

The voices grow louder. I round the corner to pinpoint the origin of the mayhem. An emergent patient just walked in: a seventeen-year-old boy from Nicaragua. He is alone. No words are needed to understand why he is here: a gunshot wound has quadrupled the size of his right hand. Despite excruciating pain, he is composed. I ask the local nurse, Ingrid, for his information and vital signs and then usher him into the room as she attends to another patient.

Outside the clinic walls, dusk succumbs to darkness. My small exam room becomes a stage, revealing my nursing interventions to dozens of curious eyes peeking through the window. The boy, Omier, winces instinctively as I wrestle blood stains from his hand. He motions to the window. "Primo," he says. He is telling me that his cousin is watching. I nod, generous in my facial expressions and movements. Without Ingrid at my side, our verbal communication is limited.

Dr. Gerard Rudy, Brett Applebach, PA, and my fellow nurse, Erin Muyres, work steadily in the clinic, multitasking like worker bees, each of us concentrated on a different task. In the pharmacy Gabriel Chang doubles as pharmacist and assistant. We worked diligently all day so that we could leave the clinic at a reasonable hour. This was not for a specific purpose, since our evening plans that evening merely consisted of beans, spaghetti, and collapsing into bed. Our important goal each evening was a suitable night's rest. After they finish in the pharmacy and operating room, each takes a turn examining the boy's hand. All we can do now is keep the wound clean and prescribe antibiotics and pain medication. We ask him to return in the morning so we can evaluate his hand again. Forty-five minutes later Geraldina, the local lead nurse, secures the lock at the clinic. We part ways for the evening. The stars dangle above us, suspended in the sky. Dinner that evening is quiet, with only occasional murmurs of conversation. As soon as we finish, we retreat to our rooms and tuck ourselves in before 9:00 pm.

Over the course of the week, Omier's hand swelling reduces and he regains minimal movement of his digits. Still, despite minor improvements, his prognosis is poor. We brainstorm daily how to best care for this young patient. Since he lacks Honduran citizenship it would be futile to transfer him to a higher care facility in Puerto Lempira. The best option for medical care is in Nicaragua. However, he is estranged from his parents and isn't sure where his national ID card is. Omier doesn't seem to be too worried, though. He has no urgency to leave. Every meal he joins us, coaxing us to life through Honduran music that he plays at an aggressive volume. We can't help but smile; after a few days he is part of our eclectic team.

Omier's role in our story, although small, is a testimony to the importance of trust. Not every patient returned for follow up like we requested. Many were afraid to come back, fearing pain or bad news. Others couldn't make a return trip because of the amount of time or resources required. Omier had nowhere to go, so he stayed near our clinic. Each day he came closer and closer to us, until he joined us in team photos.

Through many travels and work overseas, I have learned again and again that relationships can make or break an experience. Thankfully, the relationships in Rus Rus helped our team and our patients flourish.

I am thankful for the hardworking nurses of Rus Rus, who served diligently alongside short term volunteers and allowed us into their territory. I am thankful to non-medical staff (John, Clay, and Carlos) who labored with logistics to bring some of our patients from dire to hopeful situations. I am thankful for the dentist and his wife (John and Sue Chope) who traversed an ocean to provide dental care to men, women, and children suffering from pain. I am thankful for a team who checked on each other, cooked and cleaned for each other, and was gracious enough to have hard and honest conversations together.

To the people of Rus Rus and surrounding villages: thank you for receiving us and for trusting us. You are a gift.

Kayla Innis

que Dios le bendiga



The Rus Rus Team

Front row:

John Kirckof, Team Leader, Erin Muyrese, RN, Sue Chope, General Helper, Kayla Innis, RN, Brett Applebach, PA-C

Backrow:

John Chope, Dentist, Clay Couger, Radio, Gabriel Chang, Pharmacist, Charlie Chavez, Interpreter, Dr. Gerard Rudy



Slowly the silent tears rolled down her cheeks. She kept looking at her hand, and for that I gave her credit. If I had sliced open my hand - lacerating all the way through the tendons while chopping firewood with a machete, the last thing I would be doing is eyeing it up as the physician cleared away the dirt and blood. Dr. Pflaum prepped the suture area while Teri circled, waiting to help with what was needed.

Our patient kept glancing at me, probably wondering what my role was in this process. All I could do was smile back or rub her arm for whatever little comfort I could give. I hated this language barrier- not being able to use words to comfort was very frustrating.

For fear of her passing out, our interpreter Walter tried to encourage her to close her eyes. Dr. Pflaum sutured the tendon explaining to me the difficulties that could arise and techniques to overcome them. Ever the teacher that he is, Dr. Pflaum then called over Lori, our newly graduated Nurse Practitioner, to teach and give her the experience of suturing the wound closed. The entire time our patient remained stoic with silent tears rolling down her cheeks. This was only day number two, and I was already loving this trip.

The experiences continued as we travelled to four more villages only accessible by boat. Several times, our team of thirteen packed up camp, gathered all of our supplies, and got ourselves into the boat to travel to the next village on one of the most beautiful rivers in the world. So quiet and serene, a jungle in a world of its own.

Throughout our trip we saw over 1700 patients, sutured several more times, cleansed multiple wounds, gave much needed medicines, all while providing multi-vitamins and antiparasites to all. Our dentists saw hundreds of people and extracted several hundred teeth. These two dentists by far were the hardest working members of our team, and by the end they proved to have the strongest arms too.

A lot of rain this year made traveling the river by boat easier, but also made rubber boots a necessity as we climbed those river banks up into our next village.

We heard some great stories from many team mates having years of experience with IHS. Yet we made some great unforgettable memories ourselves. One of the closing memories being the escape of a small forest fire.

The work was great, the days were hot, and the nights were full of good company. It was great to be part of the 2018 Patuca River Team.

Kendra Ernste,
Pharmacy Student



Rio Patuca Team

Kelly Koehnen, Dentist, Lori Jackson, RN, Elinor Japp, Dentist, Gustavo, Boatman, Kendra, RPh Student, Dr. Doug Pflaum, Teri Houle, RN, Mary Bierman, RPh, Bill Rousell, Engineer/Radio, Dr. Paul Farley Deb Lavoie, General Helper

A Special Little Patient



In February 2017 our Patuca River team met a 4-year-old girl. Our little patient had been playing with her friends and cousins early in her life when an accident happened and her right eye was injured leaving her blind in that eye. The eye ball swelled at times causing pain and and it watered continuously. Over this past year we spoke with various people trying to coordinate plans to help this little patient meet up with an eye team that comes to Honduras.

In Feb 2018 we met her again in her home village of Kungskungwas. When we examined her, it was noted the eye was worse and causing her more discomfort. However, this time we were in a position to help. With the help of a group of



to meet up with the Bersoni Eye team from Syracuse, New York, as they were working near La Ceiba. Travel coordination is one of our biggest expenses and greatest hurdles to organize.

sponsors and the coordination of several people our patient (with her father accompanying her) was able to travel down the river to Wampusirpi, fly with Osman Paz of Aero Caribe to Puerto Lempira, and travel by air with Dr. Marianne Serkland

A huge thank you to the Bersoni Eye Group, Dr. Marianne Serkland, and everyone who donated time and money making this possible.

October 2017 & February 2018 Team Statistics
Total Patients Served - 8,231



Dental Teams

Patients – 1,008

Extractions – 1,600



Medical Teams

Adults – 3,574

Children – 2,680

Surgeries – 32

Glasses – 1,582



Pharmacy RX's

17,855

Vitamin Packets – 5,152



Surgery Teams

Surgeries – 75



Eye Care Teams

Patients – 894

Prescription / Reading / Sunglasses – 1,992

**SUNDAY, SEPT 9, 2018 12:00 NOON
FOR OUR FUND RAISER !**

SAVE



**Fairview Southdale Hospital International Room, Lower Level
6401 France Avenue, Edina, MN 55435**

Fantastic Feast of Finger-licking Favorites (buffet)

Frosty Fruit Flavored Fluids Included (non-alcoholic beverages)

Firewater and Fizzy Fermentations (limited cash bar available)

Fascinating - Play Lotería and vie for Prize Raffles

Fantasy - Win Big at the Silent and Live Auctions

Friends, Family and all Fabulous Fans of IHS are invited.

Advance Reservation: \$30.00 per person* Pay-at-the-Door: \$40.00 per person

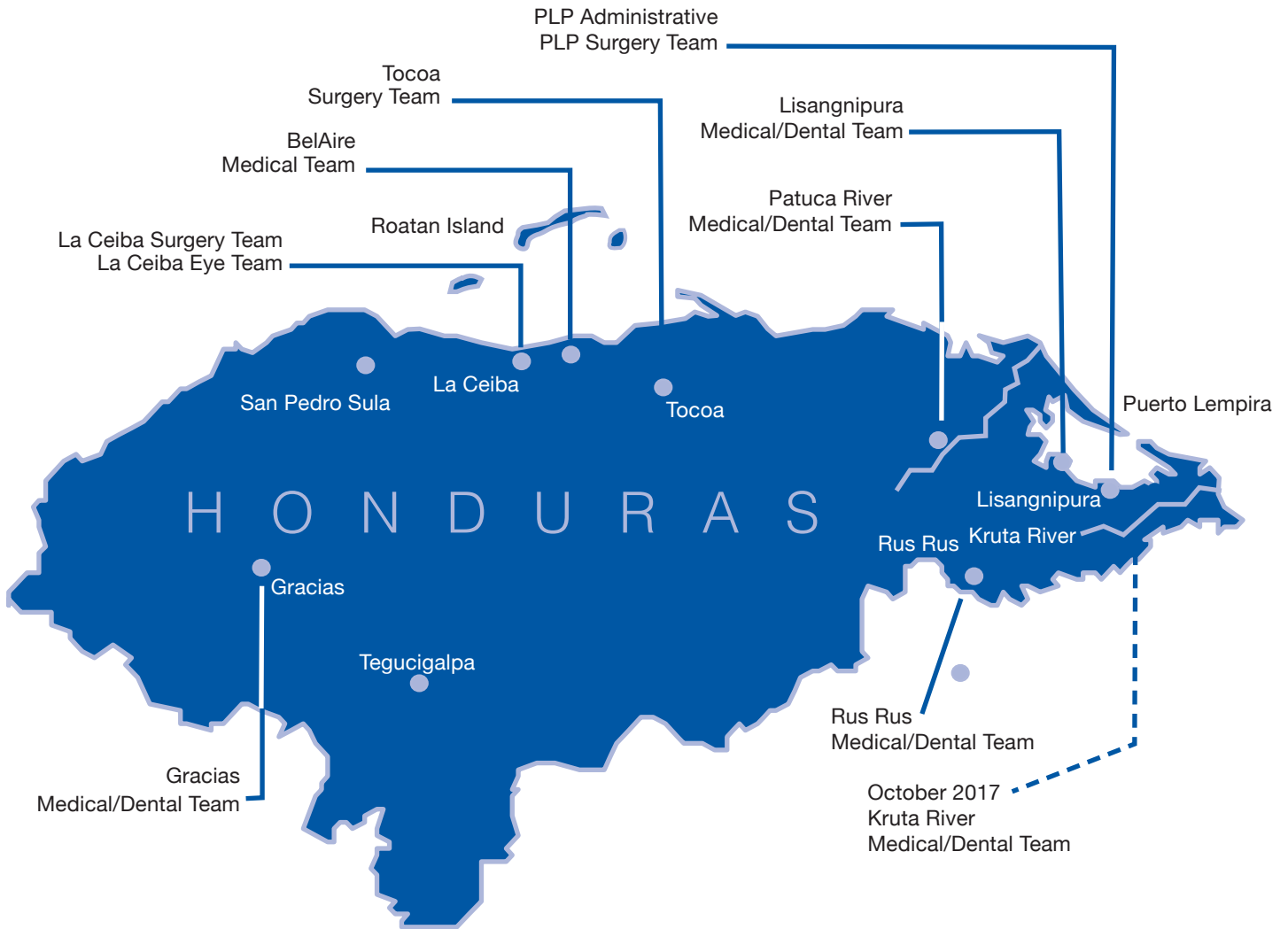
By U.S. Mail: Please make check out to INTERNATIONAL HEALTH SERVICE. Send to: IHS. c/o REITER, 2200 2nd AVE. STE. 101, ANOKA, MN 55303. Please include a note with your email address so we can confirm your reservation.

Online: Please go to www.ihsnmn.org. Click on DONATE. Click on PayPal icon. Follow PayPal instructions on how to pay, through PayPal or by one-time credit card payment. Under Special Instructions, type "Fall Festival". Please check box to verify your email address so we can confirm your reservation. Thanks.

*Advance Reservations must be received by September 3, 2018. Thanks.

This is a fundraiser for International Health Service. All proceeds help fund IHS medical/dental/surgical/eyecare teams' semi-annual trips to Honduras.

IHS Projects October 2017 & February 2018



HONDURAS

Simplified location map of IHS Honduran projects

October 2017 

February 2018 





International Health Service

Participant Application – *please print clearly*

February 15 - March 1, 2019

Note: The February mission dates are the latest arrival dates in La Ceiba (usually by plane to SAP followed by bus) and the earliest departure date. The February 2019 mission begins Friday evening February 15 and ends Thursday evening February 28. Many participants in February will extend to Sunday, March 3, 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 _____

Please mark the type of team assignment (s) you prefer (check all that apply)
Please take note: We cannot always guarantee you will be placed at your preferred choice.

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

February Trip

* Due October 1	Application/Deposit/Licenses	\$125
Due December 15	Project fee balance/Paperwork	\$600
	Total February project fee	\$725

* Applications received before first due date for the 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:
 \$125 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 Service
 Mail application & forms to:
 IHS - Attn: Project Director
 3500 Vicksburg Ln N, PMB 405
 Plymouth, MN 55447

(Application - continued 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 SERVICE
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 Service 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 Service 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 Service 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 Service 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 _____

*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 are not included in the project fee and are a separate fee.

•February Trip – Orders and payments for these items will only be accepted until 15 November so plan ahead, (T-shirt sizes available are: S M L XL 2XL) T-shirts 2 \$15 - how many _____ size _____ Ball Caps \$12 – how many _____

Please include the cost for these items with your deposit and this application.

INTERNATIONAL HEALTH SERVICE – 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.

Endowment fund

July 2017-2018

Ken Benson
John/Marge Knoff

Platinum 1,000 and up

Margaret Claeson
Nick & Teri Houle
Michael Lindseth
Doug & Anne Pflaum
Wayne Thalhuber
Joe Tombers

Gold - \$500 up

Michelle Bevis
Karen Benz
Leon & Deborah Ernster
First Lutheran
Good Shepherd Lutheran
Gene & Elizabeth Kissner
Leslie Koehnen
Caryl Nelson
David & Joanne Peterson
John Pope
Helen Skutley
St Peter Lutheran
Trudy Staubitz

Silver - \$250 up

James Anderson
Rod Brown
Kathy Claeson
Tanya & Bruce Freske
R.E. Gandrud
Karen Gausman-Haus
Peter Harris
Robert Haus
Lawrence Kenney
Deborah Lavoie
Aubry Olson
Dianne and Jack Reed
Steve & Marietta Rice
Carlos Scheer
Gordon Stock
Thrivent
Trumm Drug
Nancy Zupan

Bronze \$100 up

H.C. Anderson
Kristi Anderson
Meryl Barthel
Mary Bierman
Mary Boyle
Boe
Ms Jann Browne
Geraldine Carter
Marcia Davis

Melissa Daniels
Erickson
Earley
Linda Erdman
Rosalie Eckhoff
Jan & Steven Ferguson
William Fernandez
Doris & Gerald Gausman
Jean Girardot
Grant Haugen
Pamela Hallahan
Susan Hasti
John Hinz
Richard Hill & Mary Lahr-Hill
Dr D.G. Hunter
Lori Jackson
Kelly Koehnen
Michele & Lary Krakowski
Lois Maher
Mary McGibbon
Jennifer McKemie
John & Karen Miller
Susan Philipsen
Bill & Denis Roussel
Carol Santer
Cheryl Schraeder
Richard Schmitz
Dr Perry Severance
J.E. Stafsholt
Larry & Ann Stensrud
Marlene & Jerome Stein
Kathleen Trueman
Mary Ann Thompson
Dale Watson
Mary Warbasse
Jerry & Susan Wright
Merle & Bonnie Wagner
Merle & Bonnie Wagner
Jean Yunker

Copper - Up to \$99

Nancy Anderson
Susan Anderson
Yvonne Anderson
David Benton
Bob Bowlin
Ellen Boyle
Rod Brown
Susan Cavis
Kristal Chase-Zeit
Betty Christiansen
Ronald Cin
Kathy Claeson
Kathy Claeson
Iva Cooley
Karen Demorett
Darlene Dixon
Marcia Davis
Marcia Davis

Duaine Essig
Gretchen Eull
Audry Erickson
Brad & Cynthia Forbrook
Harvey Fleitman
Jeanne & Douglas Frederick
Brad & Cynthia Forbrook
Jan & Steven Ferguson
Melissa Feigum
Jack Fulton
Jeanne & Douglas Frederick
Glenwood United Parish
Sylvia Gunderson
Coleen Gandrud
Jenine Graham
Kathleen Gustafson
Grant Haugen
Joyce Hague
Barbara Hamilton
Darlene Haus
Grant Hanson
Richard Hill & Mary Lahr-Hill
Brian & Karen Hodnefield
Marvin & Katherine Hoffman
Lavonne & Michael Holland
Brian & Karen Hodnefield
Donna Kennedy
Laurence Kenney
John Kirckof
Michele & Lary Krakowski
Bernard & Mary Levesque
Roger & Margaret Lasota
Carol & Dale Lietzau
Amy Lee
Sharon Larson
Magnolia Forwarding
Coral Johnson & Cheryl Mangan
David & Luella Mangel
Melissa Mangel-Enzler
Eileen & Donald Mc Cory
Joyce Milton
Marlys Mickelson
Minnewaska Wellness Ctr
Laurie & Doug Musselman
Mark Murphy
Wendy Nelson
Caryl Nelson
David & Joanne Peterson
Dean Paulson
Joan Patton
Marian Pladson
Linda & Thor Pederson
Jack Riordan
Mark Roen Construction
Cody Rogahn
Donna Sandmeyer
Leon Sawyer
Lester Shafto

Kathy Sibell
Ann & Larry Stensrud
Gary Stephen
Denise & Gergory Stoen
Marian Stradtman
Connie Sukola
United Parish Women
Arla Walz
Carolyn Woehle
Rene & John Wolters
David Watkin
Carla Wildman
Janice Wallace
Leslie & Donald Woolery
Char & Wayne Zimmerman
Dr M.A. Zaidi

In Kind Donations 2017-2018

Aero Caribe discounted flight fees for volunteers insertion/extraction
Americares for discount Medications
Anchor Scientific – receiving and storage services
Anoka Rotary Club - 100 lbs, Hygieneitems
Drew Mathews for portable generators and medical supplies
Meryl Barthel - Tubs filled with school supplies, toothpaste, toothbrushes, shampoo, soap etc.
Centra Care foundation – trip scholarships
CentraCare Monticello – Medical Supplies
Church of the Epiphany - Donation: 500 lbs, Hygiene items
Coon Rapids Senior Center -750 lbs Hygiene items
D'Antoni Hospital - surgical suites and medical supplies
Dianne Luckett - silent auction donation
Dole Fruit Corpora- tion - free ocean transportation
Fairview Southdale Hospital – Monthly use of high tech meeting room
Fairview So Hospital – use of Beland International room for the IHS fundraiser
Global Ministries - surgical supplies
Janice Wallace Personal time sorting and packing in the warehouse.
Health Systems Cooperative Laund-ries Mary Huber and Mark Ves- tal sheets/blankets/scrubs/gowns.
Jan Poole, Lab Director Fairview So. Hosp –rapid HIV Test Kits at cost
Jim and Jan Hartley - Donation:

Officers & Board of Directors

50 cardboard packing boxes.
Jose Luis Pinto for AV fuel purchasing and shipping and use of pickup
Katun warehouse - storage of IHS supplies between trips
Liberty Carton Company - cardboard packing boxes
Mission Outreach (Franciscan sisters of Springfield, Ill) medical supplies
Puerto Lempira Catholic Compound – Storage and accommodations
Puerto Lempira Hospital surgical suites
Rick Reiter Jr. Donation: 60 headlamps and 50 mini-flashlights
Joyce Specht - Warehouse Packing Supplies
Rosario de Arias / Honduran Red Cross Project site and storage
Sharlyn Whittlef Thrivent Donation \$250 used for medical supplies
SOSA Air, Juan Antonio Sosa - flight fuel at cost
Steve Bakke- NewsBreak
Tom Roper NewsBreak
Tocoa Honduras Hospital – surgical suites
Trumm Pharmacy
Thrivent Insurance for member designated donations
United Hospital St Paul loan of surgical Resectoscope

The officers, board members, participants, and especially the people of Honduras wish to express their deep gratitude and appreciation for your contribution.

Every donation, no matter how big or small, makes a huge difference in helping us continue our work with the poor people of Honduras!

All endeavors have been made to list all contributors correctly and we apologize for any names that may have inadvertently been missed .

International Health Service of MN
Serving the Board 7/1/2018-6/30/2019

Officers of the Board

President: Drew Mathews
Vice President: John Pope
Secretary: Rick Reiter
Jean Yunker & Lainey Kotta
Assistants
Treasurer: Steve Rice

Directors

Project Director: John Pope
Anesthesia Director: Drew Mathews
Communications Director: John Kirckof / Bill Roussel & Steve Posner Assistants
Dental Director: Kelly Koehnen
Engineering Director: Dale Watson
Eye Care Director: John Pope
Fundraising Director: Rick Reiter
Medical Directors: Joe Tombers & Doug Pflaum
Nursing Directors: Jenni Lange & Teri Houle / Jean Yunker & Amy Peterson Assistants
Pharmacy Director: Mary Bierman/ Dewey Essig & Kristi Anderson
Assistants
Recruiting Directors: John Kirckof & Renee Donnelly
Surgical Director: Seeking Candidate

Consultants:

Knute Panuska,
Marianne Serkland MD, Lori Jackson (Nursing)

Advisors

Advisory Council: Cheryl Schraeder, Carlos Sheer, Rod Brown, David Ashby, and Nick Houle (Treasurer Advisor)
Endowment Fund Advisor: Chris Knoff
Honduran Advisory Council: Rosario D' Arias, America Everett, Jose Luis Pinto, Frances Romero McNab, Hector Goodoy, and Ibrahim Hilsaca

Don't lose contact with IHS!
Send us a note when you change your e-mail or mailing address!
Send changes to: secretary@ihsmn.org

You can opt out of receiving a hard copy of the News Break and just receive the digital copy.
E-mail to: newsbreak@ihsmn.org
to be put on the mailing list or submit stories and photographs
Contact: newsbreak@ihsmn.org

This Issue of News Break was
Edited by: Steve Bakke
Art Direction by: Tom Roper

Upcoming IHS Projects

2018

July 15, 2018

Application and Deposit due for October Project

September 15, 2018

Balance of October Project fees due.

October 1, 2018

Applications and deposit due for February project

Fall Project

October 21 – October 31

Mid October

Planning Team heads to Honduras

Early November

Team selection for February Project

December 15, 2018

Balance of February Project fees due

December 21, 2018

Shipping deadline for February Project

2019

Mid January

Load container in the Twin Cities

February Project

February 15 – March 1

May 1, 2019

IHS NEWSBREAK team articles and photos due.

email to newsbreak@ihsmn.org or mail to IHS

3500 Vicksburg Ln N PMB 405
Plymouth, MN 55447



Follow us on Facebook by "liking" our International Health Service of MN page.

**IHS Web Site: www.ihsmn.org
contact@ihsmn.org**



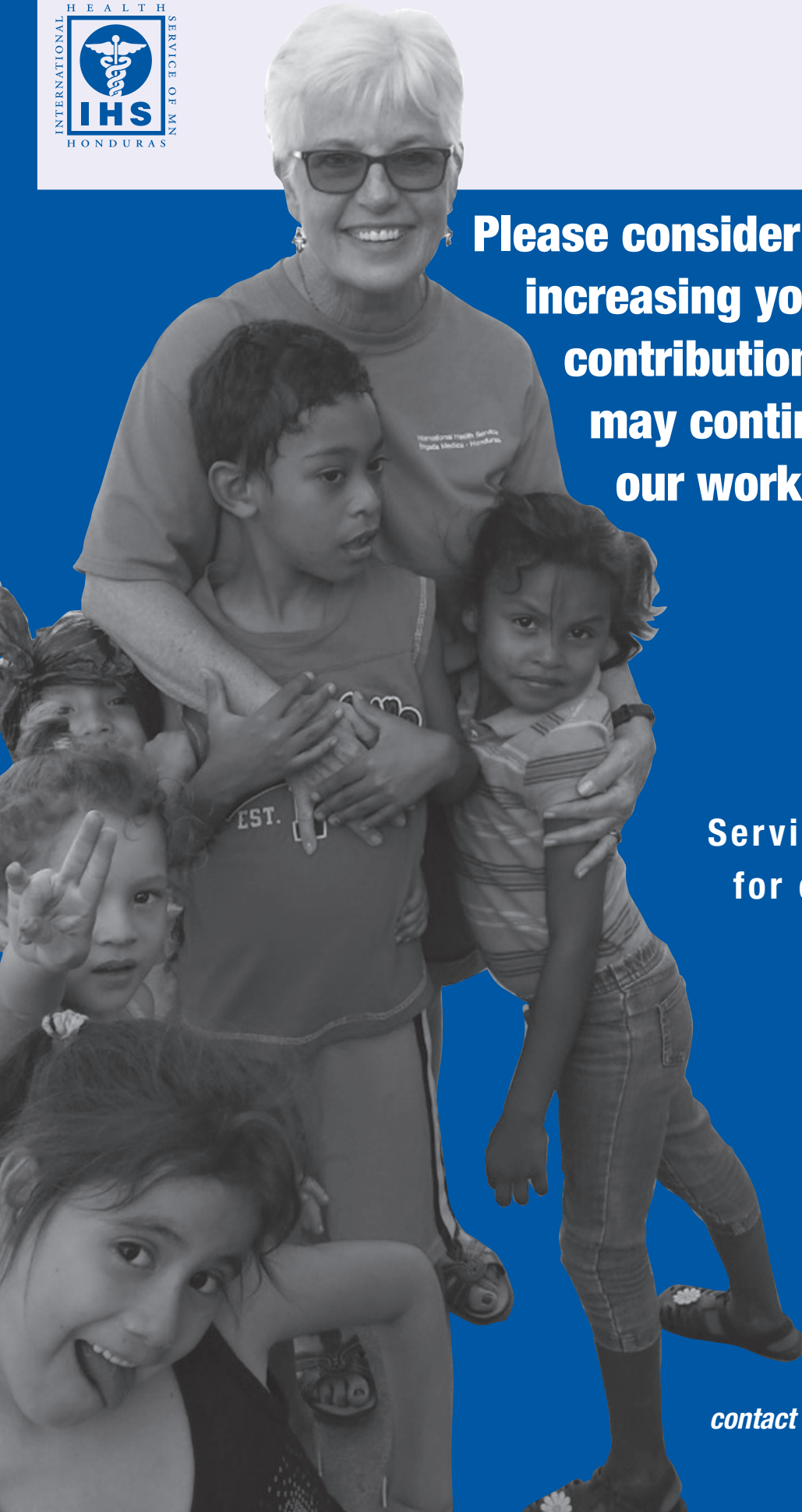
IHS Co-founders Knute Panuska and Rosario Arias

The IHS Postage Permit cannot be used by individuals to mail the News Break. Please use an envelope and correct postage

International Health Service
3500 Vicksburg Ln N PMB 405
Plymouth, MN 55447



NONPROFIT ORG
U.S. POSTAGE PAID
TWIN CITIES, MN
PERMIT NO. 29626



**Please consider
increasing your
contribution so we
may continue
our work!**

**Serving Honduras
for over 36 Years.**

contact fundraising@ihsmn.org