



Harold "Knut" Panuska
1928 • 2020



NewsBreak 2020

Annual Newsletter of International Health Service of Minnesota

Knute Panuska - In Memoriam

Harold “Knute” Panuska was a truly remarkable man, a true Renaissance man in every respect. His accomplishments are too many to mention. A few highlights: he grew up in St. Paul near West 7th street, he was a classmate and good friend of Nick Mancini. Knute started his working career delivering papers twice a day. This enabled him to purchase his first car, a 1921 Ford with a “planetary” transmission for \$41. As he was about to start the trip home, a friend wrote on the very dirty windshield, “Hold her KNUTE, she’s headed for the barn” - the name stuck for the next 70 plus years.

After high school, he attended Augustana for a year, followed by the University of Minnesota for undergraduate work, dental school, and later post graduate training. Knute went to Camp Ripley as a bugler at age 15, then enlisted in the U.S. Marine Corps at 17, eventually becoming a pilot with VMF 234 at Wold Chamberlain field.

With the assistance of a professor, Norm Holte, Knute enrolled in graduate school from 1955-58, becoming an oral/maxillofacial surgeon with training in anesthesia as well. A long successful career as an oral surgeon followed. Knute led a team of dentists including Don Watson, Jack McNeil, Roger Stubbins and Bob Harris to Central America in the mid 1970’s. These trips culminated in an organization called International Health Service (incorporated in 1982) that provides dental, medical, surgical and eye care to the poorest of the Hondurans. Knute’s work and that of IHS was supported and enhanced by his dear friends in La Ceiba, Rosario and Chin Arias. Knute remained active with IHS until recent years, and the organization continues its work in Honduras sending groups twice a year. With Knute’s urging and leadership, the initial volunteers ventured out to the remote Honduran region of Gracias a Dios, providing dental and medical care to the indigenous people of far Eastern Honduras (Moskito Indians) centered around the town of Puerto Lempira.

Knute was the Honduran Consul in Minnesota for many years, he was in the Shrine and Orono Lions Club for years, he was an exceptional auctioneer and helped to establish the Luce Line trail. He was a skilled winemaker, certified wine judge and member of the “Purple Foot Club”. Most importantly, with Knute’s vision and dedication, IHS has continued his work for decades now, providing care to tens of thousands of the very poor in Honduras.

From Rosario and Chin:

Knute began volunteering with CMS, Christian Medical Society, under the leadership of Dr. Gustav Hemwall and coordinated here by Margaret Beckman, a good friend, who requested my help with translations and housing arrangements. Knute and Roger Stubbins, his longtime friend, were the Arias guests from that moment on, in the latter half of the 1970’s. A true friendship was born with both those fine men that lasted all their lives, as they have passed away before us.

President's Letter

The February 2020 IHS project is in the books. This marks our 38th consecutive February bringing Medical, Surgical, Dental and Eye Glass teams to Hondurans in various and remote locations. As in the recent years we have learned to work with fewer volunteers. This year we had added challenges for our teams scheduled to go to the Moskitia. Our usual airline, Aero Caribe, needed a specialized part that needed to be ordered from Europe, Czechoslovakia specifically. The plane, a 19 passenger Lett, was out of service because of the need for this part. With a total of approximately 45 people in disjointed air travel to Gracias a Dios, our Project Director John Pope worked his magic with Diana Paz at Aero Caribe to get everyone inserted and returned to La Ceiba safely, albeit with some minor delays and readjusted flight connections.

The October Kruta River team was again a success with Marianne Serkland, MD Ret., the lead.

With the help of some of Hospital D'Antoni's professional nursing personnel the La Ceiba Urology team had a productive weeklong surgery team experience. Combined with the La Ceiba surgery team, IHS was able to finally arrange for the Cell Saver Program to have Bruce Bjelland return and provide hands-on updated skill level instruction. This will enable the targeted professional staff at Hospital D'Antoni to safely use the Cell Saver with future patients. Additionally, IHS delivered 12 Kidney Dialysis machines that were donated. President's Message continued after Cell Saver article.

Project Director's Report

I want to thank this year's volunteers for all the hard work they did to make this past years October and February Missions successful. We should especially thank Drew Mathews, Bill Roussel and Steve Rice for getting to Honduras early in February to oversee the container unloading and distribution. We were able to place 4 Medical/Dental teams, 2 Surgery teams and 1 Eye Glass team this year. This year all 4 Medical Teams had at least one Dentist. Although this past year was challenging, it was nothing compared to the challenge we have ahead of us. I also want to acknowledge the help we get from Dr Marianne Serkland in Puerto Lampira. She assists IHS with logistics, receiving supplies and medicines, and organising and preparing for our brigades. She should get a heartfelt thank you.

While we were in Honduras, the COVID-19 pandemic started raising its head. Luckily, it did not arrive in Honduras until all our volunteers had left. As a result of the pandemic, we have decided to not go to Honduras for the balance of 2020. We will decide on the February mission at the September board meeting. With the continuing increase in cases both in the US and in Honduras our mission in February may also be at risk. One thing we did right away, when it became clear that this was a serious pandemic, was to make available to various medical groups our supplies both in the US and in Honduras. This does leave us short of supplies for future missions so fund raising will be more critical in the coming months. Please watch our web site for information.

With great sadness, I have news of the passing, this past May, of one of our founders, Knute Panuska. Even after he had retired from active participation with IHS, he was still looked upon for guidance. He will be missed by many of the volunteers who had the opportunity to meet him over the years. We have an article in this year's NewsBreak written by several of the volunteers that went with him in the early days.

I am looking forward to getting through these tough times so we can resume our normal activities in helping the poor people of Honduras.

John Pope, Project Director

Kruta River (October)



Serving another person in a way that improves their overall health and well-being is an honor bestowed onto all who work in healthcare. It is truly a passion for most of us as well. For me as a former Paramedic and current Registered Nurse I have always felt a draw to helping others, especially those who need help the most. In addition to helping others, I love the opportunity to travel. When the opportunity came to provide my medical services to the people in remote locations of Honduras, I was excited to join the team.

Preparation for a trip into the remote areas of Honduras to provide health services can be daunting. Thankfully IHS supplied a packing list and the support from leaders was amazing in that matter. I did however, and in hindsight, overpack just a bit. This being my first medical mission trip I wanted to be over prepared.

Upon arriving in Honduras, I was absolutely amazed by the beauty of the country. This beauty was complimented very well by the wonderful people that I interacted with and of course the IHS team members I was meeting for the first time. Having only a minimal grasp of the language, I was very concerned over the ability to communicate with people, including the patients I was going to be treating. Once again, IHS had that all taken care of for me. Many of the team members were able to speak Spanish and some even spoke Miskito. Fortunately we also had interpreters at our side at all times when we were in clinic.



The boat ride up the Kruta River was a lot of fun. It allowed many of us to really get to know each other and it also gave me my first look at what life was like for the people of remote eastern Honduras. I had prepared myself for what I was going to see and feel, but I was still very astonished by the resiliency of such wonderful people. When we stopped either for a break along the river, or to set up a temporary clinic, the people were so excited and welcoming.



Kruta River (October)



Setting up for the clinic in the village, I was once again humbled by the welcome we received. Everyone came down to help us unpack and set up for the next five days of clinic. I was so impressed by the people and the beauty of the area. I was also very interested and amazed by the village, the culture, and daily life.

When the sun came up each day, we were treated with a symphony of noises coming from both man and animal alike. The local roosters would crow, the howler monkeys were calling, the cows, pigs and fowl completed the morning song. Soon, the laughter of children let us know it was definitely time to get up for the day and set up clinic. It was very surprising to see the number of people already waiting outside our quarters that we had set up in a school building. This would also double as our clinic area for the duration of our time there. During the day we would see patients essentially from dawn to dusk. With two medical stations, the pharmacist behind us, and our support team, we would see patients in family units of up to five people at a time. Most of what we treated were general medical complaints and environmental issues. As an American, there were a lot of diseases I had never encountered in my 28 years of medical service. Simple things that we never see due to hygienic practices and easy access to medicine. I was blessed to have an experienced crew working at my side so if I had any questions, they were there to help out.

All in all as a team, we saw hundreds of villagers from the surrounding area. I was fortunate to have this opportunity as this is something most will never get to experience. God willing, I will be able to return and do this all over again. To see the friends I have made. To be able to make a positive impact on the lives of those who need it most. This was in my opinion, the most rewarding experience of my entire career.

Doug Schlangen, RN, BSN, PHN, CFRN



Kruta River Team

Dr Marianne Serkland, Irene Schaper, Jan Brown,
Bill Roussel, Dale James, Doug Schlangen,
Karen DeMorett, Claudia Melgar, Jeanette Lopez, Kolby
Palmer, Andres Martin, Walter Tatallon, Riley Morfy

Lisangnipura

The opportunity to work with the International Health Service of MN has presented us with an experience that goes beyond words. We were assigned to a team to work in Lisangnipura. This report comes from the viewpoint of the support staff. Never having done anything like this before and not knowing any of the members of the team until we all met in La Ceiba gives a perspective of wonder and fulfillment at how participating in this endeavor was so gratifying.

The team members were such a wonderful, charitable, experienced, well-traveled group of professional individuals. The days spent together and the meals and conversations shared with each other developed an amazing camaraderie. Swimming in the river, walking trails, listening to Dr. Paul playing guitar, drinking coconut water, watching soccer matches all added to the experience.



Lisangnipura is a small place not found on a map. It is a 90 minute plane ride to the Catholic Compound headquarters in Puerto Lempira and then a 3-hour trek in rusty pickup trucks loaded with supplies and people. Upon arrival, after bouncing over trails and fording rivers, you find a couple of cement buildings that are the clinic and the church and a few crude wooden structures on stilts for housing. This is Lisangnipura - no electricity, no running water, no cellphone service or internet. It does sit beside a beautiful clean flowing river and life revolves around the river. It supplies the drinking water, the bathing, the laundry, the swimming, the playground.

The clinic saw between 100 and 200 people each day. Dr. Joe and Dr. Paul with Nurses Robin and Liz saw patients in groups of families.



Lisangnipura

Kyle ran a busy stocked pharmacy, Molly ran labs and provided reading glasses, Claudia had 3 dental chairs full all day and Larry kept this all running with a 5-horsepower generator and one solar panel. The meticulous organizational skills of Dale, our team leader, and translator Ibrahim kept things running smoothly. The local liaison Hilario coordinated with the local people to help with water, food, maintenance, transportation, supplies, etc. As general help we were able to be a part of the whole operation. We cooked, filtered water, fixed doors, set up tents, kept the team hydrated, made the very popular popcorn, and ran errands as needed. A lasting project we took on was making water filters for the local people. Dale had brought along many 5-gallon pails and 20 Sawyer water filter kits which he donated. Wayne turned them into filter systems.



The people that attended the clinic walked for hours to receive treatment. Once there they registered, then waited for more hours. They were friendly and grateful and helpful to one another. Children carried babies very lovingly and motherly. Smaller children were shy and giggly but had wide curious eyes and smiles. I would take a picture of each one individually, show them the picture, and then speaking the only words I knew in Miskito: “Man Ninam Dia?” (what is your name?) they would give me their name, and then I shook their hand and said “Tengki Poli” (thank you). This activity brought many smiles. But the most heartwarming moment came when the mother of the lady who cooked dinners for us came up to me, took my hands, looked into my eyes with her tearful eyes and spoke in Miskito many words that I did not understand, but I understood completely the sincerity of her gratefulness that we all had come to their village to help. We both held each other and cried. I knew then this trip was worth it.

Our biggest success story comes from the little boy who had an injury to his eye. The eye injury was a bee sting directly to the globe of the left eye. Dr. Joe had decided that we needed to save the eye at whatever cost was needed. Larry worked hard to get communication to the parties that needed to be involved and arrange transportation to the hospital in La Ceiba.

Dr. Joe asked all the members of the team if we could all chip in to get airfare for the boy and his parent. After many arrangements were made we got the boy and his father on a motorcycle to Puerto Lempira and on a plane to La Ceiba. The boy and his father were transported to Dr Ponce in La Ceiba via Aero Caribe at no cost. After several days we received communications that we got the boy there in the nick of time to save his sight. We were all delighted and it turned out that the owner of the airplane did not charge for the flight and the Gran Hotel Paris owner provided a free room.

This wonderful team all came together for this cause and celebrated with the successful news.

The experiences of this venture were so heartwarming and inspiring, and the friendships made were such a reward, we are wanting to do this again.

Wayne and Linda Rotz

Lisangnipura Team

First Row: Claudia Melgar,
Molly Weavers, Vida Martinez,
Robyn Hansen, Joe Tombers,
Elizabeth Schultz
Second Row: Ibrahim Hilsaca,
Hilario Nixon, Dale Watson, Larry Foster, Paul
Farley, Kyle Ames, Wayne Rotz, Linda Rotz

Tocoa Surgery



Eight of us arrived in the lovely city of Tocoa on a bright, hot, sunny Saturday. The bus was loaded with surgical supplies, personal luggage and eight eager missionaries of different backgrounds, languages, and medical specialties. Six of us had been there before; two of us for the first time. As usual, we met Dr. Marolanda at the hospital and he, his team of wonderful helpers and our team unloaded there, and moved to our lockers at the top of incredibly steep stairs. Via pickup truck and flatbed trailer and a few very strong young men (plus one young medical student, the two older anesthesia staff, one surgeon, one buff surgical technologist), we moved the rest of the heavy equipment to the hospital. It was incredibly well orchestrated by our Team Leader. Lisa has done this once or twice before.

Sunday, after Dr. Dan, assisted by our two interpreters, Vinnie and Denis, saw patients in the clinic, the rest of the team unloaded supplies, made order out of chaos, and tested equipment for the upcoming surgeries. We started our surgical procedures that afternoon!

There were the usual electrical blackouts, water shortages, steam sterilizer issues, but because of the tried and true methods of Lisa's administrative hand, we made people better. Watching Dr. Dan over the last ten years, I still marvel at his skill and kindness toward our patients. Our team was a marvel to watch operate, surgically and otherwise.

Tocoa Surgery

I'd like to speak to our individual team members and their contributions:

Dr. Dan Jaffurs

When you say a picture speaks a thousand words, you can take that to the bank with our gifted surgeon. His surgical prowess is combined with a kind and sweet personality to his patients and his team. He is truly the Captain of the ship and my friend.

Dr. Brian Partridge

Our anesthesiologist, singer of lullabies, and saver of lives. Dr. Brian was summoned to the other OR where he truly saved a trauma victim's life while he was being resuscitated. Cool, calm and at the same time teaching our Honduran colleagues. I have been associated with colleagues like him for over forty years and I can say without a doubt, he's that good!

Steve Baker

Watching Steve in the OR is like watching a flawless ballet between surgeon and tech. Sometimes there is not one word said, but the right instrument is passed, the correct material is prepared and that happens every surgical procedure. As a personal aside, Steve took care of this old RN for 3 weeks as well. My brother.

Sydney Char

"Dr. Syd", our 4th year medical student was everywhere, all the time and had skill beyond her training (my opinion). Her kind, intelligent, thoughtful personality made for the perfect milieu, in and out of the OR. She and Steve also became the watchers of the old guy for the trip. She's my friend. She's going to be a great surgeon!

Denis Roussel

One year I wrote, "Denis can be in two places at once speaking two different languages." There has been no change there. We are so grateful to Denis for the constant kindness toward our team, our colleagues, and the people of Honduras. It was also nice to have someone who walked as slow as me.

Vincenta Turcios (Vinny)

Vinny was a late add-on to our team. She joined in with vigor and not only performed her translator duties, but was a runner of messages, supply clerk, and assistant to the nursing staff. She became a good friend to all of us.

Lisa Hayes-Swartz

Lisa is the glue that held the team together! Director, choreographer, data retrieval expert, CPA, attorney, recovery room nurse, OR circulator, pharmacist, educator, planner of goodwill... and a lady that I sit next to at Mass. The team and IHS owe her a debt of gratitude that is impossible to pay.

Craig Gill

I can't speak about myself in the third person, so let me just say, "I love it!" Loved the team, the Honduran people, but especially the chance to be of service. Nuff said.

So, I have a question.

Tocoa Surgery

Just how do you measure a volunteer surgical team's success?

Sheer number of surgeries? (40)

Complexity of surgical procedures?

Lives changed for the better?

Lives saved?

The continuing education of our Honduran Colleagues?

The good will from IHS and our team?
Goods and services donated?

Perhaps all the above?

I think there is a simpler answer; to love another person is to see the face of God.
We saw Him daily.

John Craig Gill, CRNA



Tocoa Team

Left to Right around table
Steve Baker, Sydney Char, Craig Gill
Brian Partridge, Dan Jaffurs,
Lisa Hayes-Swartz, Vicenta Turcios
Denis Roussel

Knute Panuska - In Memoriam, continued.

CMS was already going out to La Mosquitia, and Knute was one of the volunteers on that mission front. However, even though a man of faith, he noticed that much time was spent in prayer and that medical help was given more to the people that belonged to churches than the population in general, with so much need. There is where his brainchild, IHS, was born. He wanted to form a group of medical-dental assistance that had not religious affiliation but catered to anyone in need. I personally believe that he loved La Mosquitia, apart from knowing the great need and lack of medical and dental care among its people. So, together with others from CMS, with similar feelings--Roger Stubbins, Jim Hamilton, Don Watson, and a couple others that slip my mind, he proposed to form a new group with this purpose. I know this well, as it was in the Arias family room that he explained his idea and, of course, we jumped aboard. Not only us, but doctors Rigo Rodriguez, Will Sandoval, Cesar Rodriguez, Luis Alberto Ponce, all well-known physicians of La Ceiba. I was challenged as coordinator, a role I gladly accepted and formed a local committee with Ricardo Irias, America Everett, Horton Kivett. We were able to meet Robert, John and Stephen Panuska, as young men, as their dad thought it important that they know what this part of the world looks like. And in 1982, IHS was born.

It is important to state that La Mosquitia was not as it is today. I remember them telling me that their food was: rice and beans for breakfast, beans and rice for lunch and beans with rice for dinner. No communications, except ham radio. Traveling was supported by the Honduran Air Force and the American Air Force out of Palmerola and Dole cooperated with the shipping, Red Cross with the customs for liberating the containers. So much has changed in these 38 years

From Teri Houle:

“One of my special long time IHS friends, Knute, has passed over the rainbow into heaven. He was my 1st Team Leader on adventuresome missions beginning in 1990. Those days were very different when we had small multitasking teams (Knute was the ham radio operator & dentist, nurses were a nurse and worked the pharmacy), we slept on mats, in small screened tents with ropes tied every which way to hold them up, ate MRE's or with villagers in their homes eating whatever they served, traveled in dugout canoes through the rainforests, outhouses were a good thing otherwise it was the bush, lines of people coming to the clinic as far as we could see. Knute was a Founding Father of IHS back in the early 1980's & gave many volunteers over the years this passion to serve the Mosquito Indians and Honduras. I'll remember his charisma, enthusiasm, knowledge & laughter on many IHS trips!”



Gracias



The Lucky 13

Thinking of joining IHS on a mission trip to Honduras? Have no fear, I am here to convince you why should sign up. This was my first mission trip, and if I am being totally honest, this is the first time I have ever travelled internationally by myself. Going into this trip, I was nervous, but IHS impressed me with their organization and teamwork. If I had to describe the trip in two words, humbling and lucky are what come to mind. I was lucky to meet three other people from my same small hometown of Glenwood, Minnesota. I now get to call them friends: Karen Demorett, Dr. Tom Haus, and Caryl Nelson. Plus nine other awesome team members. I count myself lucky to be one of the “Lucky 13” that travelled to Gracias, Lempira.

I was humbled by the people of Honduras. A country with so little but whose people have enormous amounts of faith. As one of the Lucky 13, I got to serve over 1,400 Hondurans. Our clinic was able to help a myriad of people receive basic medical needs. We stitched up one young gentleman up after a motorcycle accident, but mostly we helped women, children, and men get access to the basic medical care that you and I can receive from walking into a clinic or pharmacy. Simple things like prescribing antibiotics for ear infections, blood pressure meds, cortisone cream, fungal creams, eyeglasses, and sunglasses. Things that we can pick up at the nearest Target without the blink of an eye. We helped, we educated, and we extended a helping hand to those who needed it the most. Now that I have returned home, I am beyond thankful for all I have.

I am also thankful for the other 12 members of my team. Without them, this trip would not have been nearly as enjoyable as it was. Dare I say fun and exciting. Don't get me wrong, we worked hard on this trip: 11 clinic days in 7 different villages. Over 4,100 prescriptions given out, and 282 teeth pulled by our dentists. It was the teamwork and spirit of the group that led Karen, our team lead, to dub us the “Lucky 13”. The medical team was very seasoned; this was Karen's 24th trip. Her co-team lead, Dale and his wife, Jeanne, have been on even more IHS trips. During our free time, I sat back and listened to all of Jeanne's wise stories of their adventures together. Dr. Tom Haus (one of my fellow Glenwood-ians) has worked directly with the people of Gracias a handful of times. It was amazing to see the passion that Dr. Tom has poured into helping the local hospital in Gracias. He is helping them to get access to needed equipment. As I am writing this, here in Minnesota, we are in the midst of the Covid-19 pandemic. The whole country is concerned about the number of mechanical ventilators we have available. Dr. Tom has been working with sponsors and Rotary Clubs both here in the U.S. and in Honduras to get grants for two Hamilton T1 ventilators for the hospital in Gracias, Lempira. This is

Gracias



a project he was inspired to take on during his last visit with IHS. Dr. Tom arranged for us to take a tour of the hospital one evening. We got to meet Dr. Miguel, one of the local ED physicians and see the trenches that he works in every day. I say trenches because in a city of 50,000 people, there isn't a single mechanical ventilator. There was one 'ambulance' for the whole city, and by ambulance I mean a pick-up truck with a stretcher in the back under a topper with a single tank of oxygen. They had minimal cardiac monitoring equipment, and a crash cart that is sparsely filled. I can only think about how lucky we are in the United States for all that we have on an average day and especially now during this pandemic. I reflect in thankfulness and pray for the people of Honduras during this time.

During our clinic days we were so lucky to have Dr. Miguel work with us. He was an abundant resource of local information. He helped us educate patients and help lead them to where they can get follow up care if needed. Our team members were truly what made the trip great. They motivate me to want to sign up for next year's trip. To see familiar faces and to meet even more generous people from all over the world. Which leads me to tell you about one of my favorite team members. Choua Yang was one of our general helpers. She was the spirit of our Lucky 13. She always had a smile on her face and more energy than a 4-year-old who just ate a giant ice cream cone before bedtime. Choua helped with everything from registration, organizing our interpreters, to cooking (with Caryl), to being the leader of adventures. Choua brought joy everywhere she went. Encouraging people to get out and experience every moment of the trip and life! I never would have gone zip lining if it weren't for her. She kept the morale of the team going after an exhausting day of seeing patients. There were three more newer comers in the "Lucky 13": Michelle Radloff (paramedic), Steve Knowles (general helper), and Dr. Steve Mannis. Michelle and Steve were two of the hardest workers I have ever met. They were always the first ones at the trucks loading and unloading boxes when we had to move to a new location. Dr. Steve came with a strong background in emergency medicine and Spanish speaking skills. All the seasoned "IHSers" took us under their wings. Together with their guidance, our clinic ran smoothly each day. Sometimes we had to enact plan B & C, but together we succeeded. Clay was our radio/communications guy. Mike was our engineer, or as we would call him in the EMS world, "MacGyver". Carly helped over 200 people get reading and sunglasses, and she made a tasty pot of coffee each morning to get the team going. And last but not least was Josue, our resident translator. Josue is from Oman Cortez, Honduras. This was his second trip translating for IHS. Josue has big dreams. It was powerful to see the group rally around helping him to achieve those dreams. Dr. Tom is hoping to host Josue in his home in the U.S. if he can get a student visa so he can attend higher education. The first step is for Josue to pass an English proficiency exam. Together we raised enough money, out of our own pockets for him to take this exam. Josue helped us not only in the clinic but helped us navigate during our free time and buy gro-

Gracias

ceries at the market. He was Choua's translator for all adventure planning. I will never forget the way she would summon him by shouting "JoSWAY" (insert silly-teasing tone of voice, and a little giggle).



There are numerous inside stories that I could tell you. But I must end my story somewhere. The team never failed to make me smile. Everywhere you turned there was good conversation and a helping hand. I will never forget the people on my team or the people of Honduras, including the local high-schoolers who came out to the clinic each day to help translate for us, and our host group FINEC who helped us get from place to place. I can't wait for my next trip back to Honduras. I look forward to helping more people and seeing so many familiar faces. If you're thinking about signing up, I would highly encourage you to give it a try. While this is a medical brigade and we are always looking for medical personnel, we need general helpers too. We always need more people like the "Lucky 13".

Danielle Boutain, RN



Gracias 2020 Team

Back Row - Clay Cougar, Stephen Knowles, Michelle Radloff, Mike Vickers, Danielle Boutain, Tom Haus, Dale James
Front Row - Choua Yang, Jeanne James, Karen DeMorett, Caryl Nelson, Josue Gonzalez, Steven Mannis

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Our set up at PLP was slightly different than my previous trip. Thanks to Drew Mathews and others coming into country early, the normal “box brigade” formed the first days at PLP was vastly abbreviated and the sorting of supplies and equipment was simple and efficient. After Grant’s traditional climbing of the compound’s tower to mount the HF antenna, Grant and I had the task of investigating and designing new methods for fixed communications as the VHF repeater antenna had been completely taken down when the compound’s new FM station’s tower was constructed. Drew managed the spontaneous administrative minutiae that always appears during set up and worked long hours establishing the traditional “Drew Mart” and absolutely essential coffee station. Grant presented Toto with a complete set of overhaul parts for a generator Marcial was rebuilding a perfect example of the relationship of IHS and the people of Honduras.

Using available supplies and materials, we put together a field expedient kit for the VHF repeater that Grant mounted on the new FM station tower. We also mounted a backup antenna on the dorm building using an antenna I supplied, a 10 foot length of PVC pipe, and a pipe mount made of scrap. There is nothing Grant can’t build, as long as he has Marcial’s welder. Communications was established as planned with the teams, on a daily basis with minimal disruption and went well throughout the tour.

One particular event that stands out is the amount of effort all the teams made to save the sight of a child who had been stung in his eye by a bee. Everyone involved worked together to successfully transport the patient to the Hospital for immediate care. Transportation, housing, and medical care was provided at little or no cost to the patient and his father - most importantly, the patient’s vision was saved. I was proud to play a minor role providing communications in this and similar activities.

I know it has been said by others many ways and times, but it bears repeating; the folks that volunteer to support IHS are the most dedicated and purposed people I have seen in my career. Although, due to knee issues, it looks like my trips to Honduras will be curtailed, I will always be honored that I was allowed to do my part to support the IHS mission.

Robert Littler



▲ PLP Admin Team
Left to Right
Drew Mathews,
Marcial,
Grant Hanson,
Robert Littler
Not pictured -
Dr Marianne Serkland

▼ PLP Eye Team Feb 2020
Back Row
Richard Westwood
Barb Fleming
Keoni Rison
Jan Brown
Irene Schaper
Mike Stapp
John Pope
Front Row
Honduran Helpers



La Ceiba Surgery



Surgery is a team sport. It is a results-oriented effort with definable outcomes. This year's Urology Team in La Ceiba overcame challenges and experienced successes. It started with joining together talented, committed individuals from Minnesota and Honduras who solved the challenges in short order and changed patient lives for the better.

Many suffer for years with urological problems that U.S. surgeons fix in short order. In the USA many operations are “in-and-out” procedures, or at most, overnight stays. Modern non-invasive technology makes this possible. In Honduras we are often talking about “open procedures” that are prohibitively expensive even in the government sponsored hospital. With help from D'Antoni Hospital IHS creates a week where the “unaffordable” becomes affordable and where months or years of pain become past history. The patients see it as a magical diversion from the routine they know.

In my past five years I have seen IHS create a “Brigadoon-like world” where pain is converted to health. Patients regard it like magic but in reality it begins months earlier in Minnesota. Supplies are purchased, stored and packed by dedicated nurse volunteers, shipped by container (courtesy of Dole Foods) and then unpacked and set-up for use before the first patient arrives. Then 5 to 6 days of surgical magic happens after which everything is inventoried and repacked until next year's mission.

We are blessed with volunteers who blend their skill sets to provide safe and efficient care for each patient. In the U.S. we have time to create efficient teams. In Honduras it is virtually overnight. On a medical mission like this one, team members are volunteers who come from different parts of the country, most often, but not always, with similar training.

Our surgeon, Dr. Steve Moore, has done 11 missions in Honduras. He works with a local urologic surgeon, Dr. Gabriel Montoya. Both are modern surgeons who retain an old school set of skills. They are well practiced at doing the “open procedures” dictated by the lack of available modern technology. Dr. Montoya selects patients throughout the year based on surgical complexity and patient inability to afford surgery in the public hospital.

Often nurses are called upon to blend the skill sets of the different specialties into a coordinated team. That proved the case with the three separate anesthesiologists from the local area who stepped forward to help us. Varied English to Spanish and Spanish to English language skills made this blending effort paramount.

La Ceiba Surgery

I was helped in this effort by Jenine Graham. She is a nurse practitioner who has done a number of missions with IHS in remote Honduran villages. This year, she stretched her skills to fill the role of scrub nurse on the La Ceiba Urology Surgery Team. Her nurses' training included a stint in the OR. With that background, strong attention to detail, and some mentoring, Jenine found herself scrubbing for major surgical procedures from day one. Jenine also managed the post-op medications for our patients and rounded with Dr. Moore each morning. She is fluent in Spanish, which came in handy in helping with communication with patients, our Honduran anesthesiologists, and hospital OR staff.

Jenine's friend, and frequent IHS volunteer, Idalia Maldonado from Tegucigalpa, was the third member of the nursing team and invaluable in helping with support tasks. She did instrument processing for the procedures involving sets that could not be steam sterilized.

The language barrier always presents a challenge. Favorable outcomes depend on clarity with patients in pre-op, between staff in the OR, and in coordinating post-op procedures with Dr. Montoya. Fortunately we could call on Jenine's language skills. We also got help from Dr. Montoya's son, Emanuel, and classmates from a bilingual school in La Ceiba who, in addition, willingly did tasks such as running for supplies and providing lifting help for patients.

D'Antoni Hospital assigned their OR staff member Enrique Foot, RN, to us for the week. He did the work of three people with energy and good humor. He met with patients in pre-op, provided instrument trays and trouble-shooting equipment as needed. This last item was critical. We were working without backup equipment. When old equipment broke or malfunctioned, Enrique would step in, solve the problem and return to "washing back" instruments from cases, and sterilizing instruments as needed—several times a day, and staying late to sterilize instruments for the next day.

Our team leader – board member and treasurer, Steve Rice – besides serving as a translator, coordinated with hospital administration for work space for us to stage supplies, helped with unpacking, setting up, and moving supplies, kept us well-fed during the week, and then helped with inventory and packing up for next year.

When the week of non-stop surgery concluded, Elias Lizardo, D'Antoni Hospital administrator, hosted the entire team for dinner. He had been checking in daily and clearly understood that the magic experienced by the patients was really old fashioned "hard work." Most importantly our patients remember the week that changed their life.

Anne Jones, RN



La Ceiba Team

left to right

Leyda Reyes, surgical RN;

Dr. Jeisi Santamaria;

Dr. Gabriel Montoya, surgeon;

Anne Jones, RN; Dr. Steven Moore,

surgeon; Idalia Maldonado;

Bruce Bjelland (Haemonetics), Steve Rice;

Enrique Foot, RN; Jenine Graham, RN

Cell Saver

In Honduras people are reluctant to donate blood. Many regard it as unsafe for the donor and the recipient. Consequently supplies are short and available blood is expensive. In contrast, the US population donates readily and we also have machines that can harvest and recycle our own blood during an operation. Nearly every hospital in the US has blood recycling technology, but not so in the more remote Honduran cities. Accordingly surgery has significantly different risks.

Three years back, Drew Mathews, IHSMN board president, and Bruce Bjelland from Haemonetics introduced blood recycling technology commonly known as the “Cell Saver” to D’ Antoni Hospital in La Ceiba. During the staff training sessions on the use of the Cell Saver a post delivery mother with uncontrolled hemorrhaging was transferred to D’Antoni for surgical intervention. The doctors and assisting staff were able to clean and re-transfuse her with her own blood. Her previous operations had already exhausted supplies of her specific blood type and she was in dire straits. The technology and the surgeons were credited with saving her life. A week later she was home with her baby. The experience convinced IHSMN of the importance of introducing appropriate technology in Honduras.

This year Bruce Bjelland joined IHSMN’s mission to La Ceiba Honduras and provided advanced training, updated Cell Saver supplies, and made needed software repairs to the device. Team leader, Steve Rice, along with the surgical staff used the repeated training classes to generate a Spanish training manual. The process was so successful that students themselves were leading the training sessions at the end of the two weeks. At this time we are confident that D’ Antoni Hospital has physician and nurse teams ready to use the life-saving Cell Saver when the need arise.



President’s Message Continued.

by Saint Cloud CentraCare. Two anesthesia machines through Dr. Tom Haus were also delivered to Hospital D’Antoni.

During the February project unfounded rumors were circulating regarding the possibility of the COVID-19 virus finding its way into Honduras. There was nothing we could do except remain alert and observant to the evolving news. Currently like in the USA, the COVID-19 situation in Honduras is evolving. Regarding the COVID-19 situation in Honduras, many other NGO’s are withholding any plans for missions and IHS is also not going to send an October team as we have in the past. IHS has offered both Hospital D’Antoni and Marianne Serkland access to supplies IHS currently has in storage for potential needs should COVID-19 begin to strain the current supplies at their locations.

Even though IHS is pausing our October and possibly February 2021 projects, to make sure of absolutely safe conditions, we still need to have funds donated so when IHS can again bring Medical, Surgical, Dental and Eye Glass teams we will be financially strong enough.

Most gracious thanks to all the Board members, project volunteers and monetary and equipment donators without whom IHS would not exist.

Drew Mathews, President

Rus Rus



Friday evening, February 14, we met our group for the first time at the kickoff dinner. The next morning four of our team rose to board a 4:15am bus to the airport to travel with the rest of the advance team to PLP. It was a short 90 minute flight to PLP, landing on a dirt airstrip with kids playing soccer along the edges. We unloaded our gear into a truck and then walked the few blocks into the city to the Catholic compound, with its dormitories where IHS bases its PLP operations.

That Saturday evening and Sunday were filled with pulling out stored boxes and transported supplies, purchasing fresh food, sorting them into team piles and preparing our gear for the trip to Rus Rus. Temperatures were into the 90s during the day and 80s at night.

Monday the rest of our 13 member Rus Rus team flew in to join us. By 10:45 am we had two trucks loaded with our gear and supplies, and we were headed down the road. The road travels through what looks like an African Savanna with both pine trees and palm trees. The landscape became greener the closer we got to the Rus Rus river. Crossing the Rus Rus bridge, with its old wooden planks, reminds us of how rustic this area is. A few houses and the clinic arise through the trees. Originally built by Friends of America, it continues to be the base of medical care in the southern Mosquitia area of Honduras and northeastern area of Nicaragua.

After six hours and a couple of stops we arrive and unpack. That evening Mission Air Group (MAG) graciously fed us dinner, and we headed to bed. We have tiled floors with screened windows and running cold water. Our kitchen has a propane stove with 4 of 5 working burners and an oven. There is a fridge for keeping things cold. We filter water nightly for the next day. There is an old satellite internet link with WiFi when turned on, for limited use. A Nicaraguan cell tower is reachable for calls most of the time, IF you stand in the magic spot on the runway. Ham Radio is our fallback, sure communication. While we



were there, the generator usually ran from 8am until 9pm most nights. This provided the refrigerator with enough power to keep food cold. Compared to other teams with tents, we had it pretty good.

The crowds of people were spread out through the seven days of work. Even so, the waiting room is filled each day, and as we end just before it gets dark, there usually are people still on the list for the morning. Somehow, it stayed that way the entire time. Saturday was an extra long push as anyone left on the list would have to wait until Monday, sleeping away from home, potentially short on food.

Sunday we enjoyed a nice visit to a bird refuge in a nearby village, plus we watched soccer teams that had traveled many hours to play competition games. Many enjoyed a swim in the river and a relaxed evening. Most nights we played Yanev, a card game taught to us by Mark Spiro.

We saw more than one thousand, four hundred patients in 7 days of work, handed out 150 reading glasses, painted many, many kids' teeth with fluoride. Most of our patients came from across the border in Nicaragua which is a walk over 5 miles away. We had one burn patient, who apparently spilled boiling milk on his stomach, an infant with 6 fingers on each hand, a young mother who couldn't nurse and was feeding her baby pineapple juice and coconut milk. We transported two surgical patients to PLP.

We had an excellent team that worked well together. Our MD's were Mark Spiro and Gerard Rudy. After Med school Gerard came to Honduras for some international experience... and stayed almost 20 years before moving back to the states. Since then he has come back with IHS for 7 years. Fluent in Spanish and Moskito, he was our gentle giant, always patient and kind. Mark is also a Honduras veteran with 6 years of IHS service. Two local workers assisted them for a few of the days. They were Dr. Montaro for most of the week and his boss who dropped in to say hi and worked the whole day.

Our dental team was equally well qualified with Dr. Tom Gelhaus and Dr. Gilma Zavala. Tom is another Honduras veteran as well as serving in other parts of Central America for many years. He enlightened us with his discussions on the ills of soda pop and the damage it has done to the villagers' teeth, as well as sporting some amazing bug bites to the group. Tom is also a big believer in saving the villagers' teeth when it's reasonably possible. So, he did many fillings that otherwise would have resulted in extracted teeth. Gilma is a recent local graduate of dental school completing her second 6 months of government service. Her ability to speak Moskito and Spanish was a real help, too. Supporting Tom was his son Eddie, our movie star. He has a real love for the children and often travels with his father to assist.

Rus Rus

For support staff, we had our local nurse Geraldina Coleman, the grandmother of the village and keeper of the clinic year-round. She kept patient registration going smoothly, directing and managing the families as they arrived. Our RN's were Barb Spiro, Julia Rodriguez and Calvin Smalls. Barb is a veteran having travelled with her husband Mark for years. Julia is also a returning veteran, born in Honduras but raised, educated and living in the States; an RN and EMT fluent in Spanish. This was Calvin's first trip; he is a work associate of Julia's who is also an EMT and RN.

For Rebecca Bloyd, our pharmacist, this was a return trip to Rus Rus from 5 years ago. She managed the pharmacy with ease, keeping everything in order and the doctors updated on what was running low or out.

John Kirckof was our team lead, a 25 year IHS veteran. This was his 8th trip to Rus Rus with more to come. The team was supported by Dave Anderson who has come with IHS for 5 years Dave manned the eye glasses desk as well as cooking and helping where needed. Cindy, my wife, former RN, acted as a cook and helper. She assisted in the pharmacy, painting fluoride on molars of school aged children, and handing out toothbrushes.

We were assisted by the wonderful people from MAG led by Esau Nunez. They are the administrators of the Rus Rus clinic operations.

The trip was a wonderful, rewarding experience for us. We love the people we served and those we served with. The group was an amazing, kind, patient, compassionate, and caring group that we hope to go with again sometime soon.

Neal Westwood, KG7I



RusRus Team

Front row (L to R)

Cindy Westwood GH, Julia Rodriguez RN, Gilma Zalaya DDS,
Barb Spiro GH, (RN) local worker, local worker

Rear row (L to R)

Eddie Gelhaus Dental Ass't, Esau Nunez MAG coordinator,
Calvin Smalls RN, Mark Spiro MD, Gerard Rudy MD,
Geraldina Coleman local nurse, Tom Gelhaus DDS,
Rebecca Bloyd RPh D, local worker
John Kirckof Eng, Team Leader, Neal Westwood Radio,
Dave Anderson, Gen Helper

Patuca



I still can't quite believe that I have been lucky enough to experience such a beautiful country in such a special way.

After 4 years of Elinor Japp, my godmother and the dentist on Patuca, coming back and telling me stories about life on the Patuca river, I just had to come along and see what all the fuss was about.

When we arrived, the excitement had already begun. As I was told, Rio Patuca is never complete without a few surprises. Teri delivered the 'bad news' - we were going to be taking the smaller plane (6 seater) to Wampusurpi instead of the big plane, but we didn't know when, or if, we would get all of the team and cargo there in time.

After an early start and a long, long wait, we made it to Wampusurpi. Coming in as a general helper for the first time, you really don't know what exactly you're going to do. However, I got stuck in straight-away; that's definitely one thing I realized about this particular team - everyone helps do what needs to be done to create a 'well-oiled machine'.

Clinic days often went by in a blur. I was helping Mary in the pharmacy - goodness knows how many times we both spoke our broken Spanish telling patients how many tablets and when. We would see over 150 patients a day at least. Mary would tell me stories of previous trips, about the patients they have helped and some whom they have lost. It made me realize how invaluable these 12 days on the river were to the people along the Rio Patuca.

Patuca



Mealtime was always welcomed with a skip to the kitchen. You would forget how hungry you were until a head popped around the corner to say, 'food's ready!'. Eating together in our wonderful makeshift kitchen and imaginary dining table gave us all a chance to get to know each other. You are given such a precious glimpse into some exceptional peoples' lives through this trip. The stories they all have, the lives they have lived. We knew we were a part of an unusual team; we would come together to talk through the day, listen to one another to plan the clinic or further tweak the itinerary and we knew our voice would be heard. Another reason I can see why this team worked so well together.

After the pots and pans had been scraped clean and bellies were full, we would all go about relaxing in the evening. Some of us read, chatted about the day and others played cards until late. We all brought our own card games – Yaniv, Con Queso, Irish Snap and Cribbage – this was when people's true characters came out!

The days on the river had to be the best days of all. Yes, it meant an early start to finish the pack down of camp and ensuring everything got into the boat, but those were the days when you would witness the true meaning of community. Everyone, old or young, would come and help carry the boxes for us. I still don't understand how those women managed the boxes on their head; they're heavy and painful. I know because I tried!

The Rio Patuca is a magical place for sure. You take a breath of fresh air; you take in all you can see, and you listen to all the sounds of a secret life

Patuca



going on all around you. There is no easy way to describe the feeling of being on the river. Even now, I don't really know what to say. It is definitely something you have to experience for yourself to see the beauty and understand the calmness - even if the boat almost capsizes along with all our worldly goods!

I truly take my hat off to each and every one of you who come along and help with IHS. Each and every person brings something different to the whole team, but you know that we are all here for the same reason and that is to see people are given the help they want and need. I believe I am going to be a part of IHS for a long time to come. There is no way out now!

Thank you IHS and thank you everyone who supports them.

Julie Ekblom



Patuca Team

Left to Right

Gustavo Cardena, Andres Mrtin, Doug Pflaum, Julie Ekblom, Blanca Sanchez, Bill Roussel, Jeanette Lopez, Mary Bierman, Teri Houle, Elinor Japp, Kory Tuominen, Walter Tatalon, Jim Lavoie

October 2019 & February 2020 Team Statistics
Total Patients Served - 8,574



Dental Teams

Patients – 1,417

Extractions – 1,936



Medical Teams

Adults – 3,212

Children – 2,755

Surgeries – 27

Glasses – 1766



Pharmacy RX's

13,450

Vitamin Packets – 5,379



Surgery Teams

Surgeries – 57



Eye Care Teams

Patients – 1,128

Prescription / Reading / Sunglasses – 2,028

OFFICERS and BOARD MEMBERS

President	Drew Mathews
Vice President	John Pope
Treasurer	Steve Rice
	Nick Houle
	(co-treasurers)
Secretary	Open
Assistant	Jean Yunker
Project Director	John Pope
Anesthesia	Drew Mathews
Communications	John Kirckof
Assistants	Bill Roussel
	Steve Posner
Dental	Kelly Koehnen
Engineering	Dale Watson
Eye Care	John Pope
Fund Raising	Open
Medical	Joe Tombers
	Doug Pflaum
	(Co-Directors)
Nursing	Jenni Lange
	Teri Houle
	(Co-Directors)

Pharmacy	Mary Bierman
Assistants	Dewey Essig
	Kristi Anderson
Recruiting	Open
Assistant	John Kirckof
Surgical	Dan Jaffurs
Consultant	Lori Jackson
	(Nursing)
Consultant	Marianne Serkland

**CALENDAR OF
UPCOMING EVENTS**

**There will be
no travel in
2020**

**DATES TO REMEMBER
2020-2021**

**Check our website for
updated information
on 2021 projects**

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

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

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

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

**CentraCare Houle Medical Scholarship
(donor advised fund)**

Volunteers can apply for this scholarship online to use towards a mission trip. Go to the following link to get the application:
<https://www.centracare.com/foundation/grants/medical-mission/>

IHS Projects October 2019 & February 2020



H O N D U R A S

Simplified location map of IHS Honduran projects

October 2019

February 2020





International Health Service

Participant Application - please print clearly

February 12- February 26, 2021

Note: The Feb 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 2021 mission begins Friday evening February 12 and ends Thursday evening February 25. Many participants in February will extend to Sunday, February 28, 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	\$625

Total February project fee \$750

* 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

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 \$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.

This year we have three lists: First, a list of those who donated throughout the year to our general operating fund, or to the endowment fund; Second, a list of those who made in-kind donations of medical supplies and support services, and Third, those who made extra donations for those who were “Special Patients” with serious concerns that could not be addressed within our official mission dates. Finally, a number of donations came in “in memory of” deceased volunteers and or family members, and “in honor of” current volunteers and board members. This final group includes Karen and John Kirckof, Kelly Koehnen, Doug Pflaum, Amy Sullivan, Joe Tombers, Jean Yunker and Marianne Serkland.

Endowment Fund Donors

Chris and Marge Knoff

Platinum Donors - \$1000 and up

William and Bonita Cook,
 Good Shepherd Lutheran Church,
 LCMC
 David Goodall
 Nicholas & Teri Houle for Special Patients and General Fund
 Dr. Dan Jaffurs for Surgical Equipment and Supplies

John Mastrocola
 Doug Pflaum in memory of Ruth and Douglas Pflaum
 John Pope
 Louis Plank
 Bill & Denis Roussel for Special Patients and in memory of Charlie Brown and Rene Donnelly
 St. Paul Lutheran Church
 Mark Spiro
 Joe Tombers
 Mr. & Mrs. Harry Thibault
 Charles Wilber
 Dale Watson for Support Material

Gold Donors - \$500 and up

Willamete Brenamann
 Nancy and Merv Kiryluik
 George Nemanich
 Steve Rice in memory of Rene Donnelly and Dr. Panuska
 Helen Skutley for Special Patients and General Fund
 Lucy Ussatis
 United Way (Anonymous)
 Gertrude Staubitz in memory of David Staubitz
 First Lutheran Church Endowment
 St. Peter Lutheran Church Women for in-kind Supplies
 Leslie Koehnen in honor of Kelly Koehnen
 Anonymous

Silver Donors - \$250 and up

Peter Harris
 Jennifer McKemie in memory of Dan Walker and Sallie McKemie
 Living Word Lutheran
 Kenny and Marcie Wright
 Parallel Diamond
 Drew Mathews in-kind and for Honduran Tariff Charges

Bronze Donors - \$100 and up

Kelly Bobick
 Mary Boyle
 Meryl Barthel for Special Patients
 Kerry Beckenbach
 Susan Cavis
 Richard and Mary Hill
 Lori Jackson
 Donna and Robert Kennedy in honor of Doug Pflaum
 Cara Knittel
 Kelly Koehnen
 Deb Lavoie
 Beno Marx
 Caryl Nelson
 Wendy Nelson in honor Kelly Koehnen
 David and Joanne Peterson
 Jan and Susan Philipsen in memory of Daryl Zimmer
 Susan Philipsen in memory of Susan Philipsen’s mother
 Dr. Perry Severance

IHS Endowment Funds

Help IHS Grow for the Future

IHS now has two endowment funds designed to help support increasing costs of ongoing missions, through fund earnings. IHS’s newest fund, **The Knute Panuska Endowment Fund**, honors IHS Founder Knute Panuska.

The Chris Knoff Endowment Fund was established several years ago.

Anyone who would like to contribute to either Fund can do so using the enclosed envelope.

If you have any questions please contact IHS Endowment Fund Committee Chairman Nick Houle at 612-889-3485 or e-mail nicholashoule61@gmail.com

Gordon and Bonnie Stock in honor of John Kirckof
Jean Yunker in memory of Knute Panuska
Maureen Kelly
Karla Lavine
Dale Watson
Patricia Willenbring

Copper Donors – up to \$100

Virginia Aghevli in honor of Kelly Koehnen
Benevity Community
Debra Fischer in memory of Rene Donnelly
Marge Haaga in honor of Karen and John Kirckof
Pamela Hallahan
Sharon and Marlan Johnson in honor of Kelly Koehnen
Larry Krakowski in memory of Knute Panuska
Pat Kirsch in honor of Kelly Koehnen
Diana Lange
Magnolia Forwarding Company, Inc.
Ann Montanez in honor of Kelly Koehnen
Network for Good
Amy Sullivan
Gary Stephen
Tony Stephen
John Schackman
Arla Walz
Lynn and Fred Engman

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

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

In Kind Donations 2019-2020

Aero Caribe - discounted flight fees for volunteer insertion/extraction
Americares - discount medications
Anchor Scientific – receiving and storage services
Anoka Rotary Club - 100 lbs. of hygiene items
Black Forest Inn - plastic buckets for shipping and water filtration
Blessings International – medications, vitamins, lab test kits
Drew Mathews - portable generators and medical supplies
Meryl Barthel – tubs of school supplies, toothpaste, toothbrushes, shampoo, soap, etc.
CentraCare Foundation – trip scholarships
CentraCare Monticello – medical supplies
CentraCare Health System – Donation of twelve dialysis machines
Carla Olson, Jodi Lillemoen and Medical Unit Staff at CentraCare Foundation - medical supplies
Church of the Epiphany - 500 lbs. of hygiene items
Coon Rapids Senior Center - 750 lbs. of hygiene items
D'Antoni Hospital – medical supplies and snake anti-venom
Dole Fruit Corporation - free ocean transportation
Fairview Southdale Hospital – rapid HIV test kits at cost and monthly use of high-tech meeting room
Grand Hotel Paris – discounted room rates
Janice Wallace - personal time sorting and packing
Jan Poole, Lab Director Fairview
Jill Schmidt – 100 baseball caps
Jim and Jan Hartley – 50 cardboard

packing boxes.
Jose Luis Pinto – AV fuel purchasing and shipping and use of pickup
Katun Warehouse - storage of IHS supplies between trips
King's Place Restaurant – plastic buckets for shipping and water filtration.
Liberty Carton Company - cardboard packing boxes
Mission Outreach (Franciscan sisters of Springfield, IL) – medical supplies
Puerto Lempira Catholic Compound – storage and accommodations
Puerto Lempira Hospital – surgical suites
Rosario de Arias – Honduran Red Cross Project site and storage
Joyce Specht - warehouse packing supplies
St. Paul Lutheran Church Members – hygiene items, sheets, towels
Sharlyn Whittlef (Thrivent) – \$250 used for medical supplies
SOSA Air (Juan Antonio Sosa) – AV fuel at cost
Steve Bakke – NewsBreak creation
Tom Roper – NewsBreak creation
Tocoa Honduras Hospital – surgical suites
Tourist Options Honduras – personnel and cargo travel arrangements
Trumm Pharmacy
Thrivent Insurance – member designated donations
Larry Zavadill - 75hp motor for use by the October Kruta River team
Mayor of Wampusirpi – use of his boat and motor

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.

This Issue of News Break was Edited and Art Directed by the creative team of Steve Bakke and Tom Roper.

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