



## GLOBAL OPHTHALMOLOGY: WHAT TO KNOW BEFORE YOU GO

Hunter Cherwek, MD

6/1/2018



### PRE-TRAVEL HEALTH

Who has been to a travel health clinic?

Hepatitis A in Nashville

Go to a travel clinic 4-6 months before you planned departure & get WHO Yellow Booklet for Immunizations

2-4 weeks before going visit dentist & PCP and get refills of all medicines for HAND-CARRY luggage

Investigate your medical coverage and consider purchasing medical evacuation insurance

If you are ill before travel, consider rescheduling

Global Ophthalmology: What to Know Before You Go

6/1/2018 | 2



## CUSTOMS & IMMIGRATION

Visa- Business or Tourist

Letters of invitation/support from partners and what is approved by the local authorities

Make printed color copies of passport and extra passport photos

Split into two bags (Cherwek's Law and the ONE bag that had all the Trypan Blue)

Expired medicines/good may be illegal



## MALPRACTICE

Malpractice

- Does the NGO or host have a malpractice policy for you?
- Does your malpractice have an international volunteering coverage option?
  - If so, does it meet conditions? Have you let them know your plans?



## MEDICAL LICENSING & CREDENTIALS

Most NGOs are now doing this and this can literally take months. Find out what is needed and take this process seriously.



## MONEY

### **Credit Cards**

- Inform company of plans
- Find out about fees/limits
- Get a phone number to call if your card gets lost abroad

### **Cash**

- Bring crisp/new \$100 and keep in two places

### **Exchange**

- Know rates and have \$50 in local currency before you exit Arrivals

### **ATM**

- Check fees and may not always be available**



## COMMUNICATION

Call your cell phone carrier to check –

Roaming voice and data availability/rates

Wifi

Skype

?International Plans?

Local Sim

Phone Tree

Hotel Business Cards

Translators & online apps

Back up phone & computer



## COMMUNICATION WITH HOSTS

Cybersight & Prescreening (Aligning objectives, expectations, and SCM)

Communication cadence

1-4 month – monthly Skype calls

Last month consider weekly calls to minimize surprises

PLAN for post-program follow-up



## RESEARCH YOUR DESTINATION

History

City/Streets - Address of Hotel/Embassy

Language - Thank you, Hello, Bathroom, etc.

US Department of State

Smart Traveler Enrollment Program (STEP)



## GLOBAL OPHTHALMOLOGY: HOW TO THRIVE ONCE YOU HAVE ARRIVED



## TWO KEY ITEMS TO PRIORITIZE EACH DAY

### Safety

**Personal (Family)**

**Patient**

**Medical Team**

### Impact

**Service Delivery**

**Skill Transfer**

**Systems Transfer**

**Communication**



## PERSONAL SAFETY- HAVE A MENTOR IN COUNTRY

**Roads - Driving is your greatest risk. Avoid night driving, wear your seat belt, avoid uncovered vehicles, and don't be afraid to tell driver to slow down.**

**Food & Water - Bottled water (!Stay Hydrated!), cooked foods, clean restaurants and bring OTC GI meds & Powerbars**

### Chemoprophylaxis & Meds

**Malaria- Travel Clinic (also check Hep A & Tetanus)**

**Needlestick- Check your Hep B & HIV prophylaxis meds**

**Practice needle/instrument passing/sharps disposal**

**Try to avoid new meds (Ambien) and hand carry personal meds (Insulin)**

### Security - Hotel safe for passport/cash

- Latch your hotel room door

- Local SIM Card and hotel business card with key contacts on the back

**Know your Health Insurance Policy & Evacuation (?where to go for personal healthcare?)**

**Have copies of your passport, visa, medical history/contacts, airline tickets, etc.**

**If you bring your family, consider a professional guide**



## **PATIENT SAFETY**

### **Patient Selection/Translators**

**Anesthesia- Especially pediatric and oculoplastics- do they have patient monitors, recovery, suctioning, O2, defib, etc?**

**Sterilization & Re-use-**

**SSCL/Timeout/Marking Surgical Site**

**Informed Consent/Documentation/MoU-**

**Follow-up-**

**Model best and most sustainable practices!**



## **TEAM SAFETY**

**Have a local mentor/sponsor**

**Travel in groups (ideally with professional drivers)**

**Avoid unsafe hotels/lodging (ideally would have safe, Internet, 24 hour front desk)**

**Phone Lists/SIM CARDS**

**Your team is only as effective as your least aware member**



## BE PREPARED & INFORMED CLINICALLY BEFORE SURGICALLY

Use Day 1, to get acclimatized and learn about the conditions, culture, and hospital (be observant during the tour). Specifically:

- Inspect the OR in the morning BEFORE signing up cases, especially the microscope (?hand adjustment/teaching side scope?), bed, and chair
- Meet with anesthesia- ?pre-op work-up? & presence in the OR/IV access
- Be respectful of local customs/protocols/facilities- wearing scrubs out of OR, footwear, etc.
- Instrument trays and consumables
- Biometry & IOL power library (“range”)
- If teaching, gauge use the clinic to assess gaps and establish communication patterns (“STOP”, etc.)
- Power outages/generator delays



## PATIENT SELECTION & SCHEDULING

- Avoid VIP surgery (consultations may be necessary)
- Avoid high risk cases/equipment intensive cases
- What is THEIR turnover time (be prepared to use down time for teaching) and instrument tray situation
- Throw yourself softballs your first day and do your hardest cases mid week to allow for longest follow-up
- See post-ops in the morning (in case a re-op is needed)
- General anesthesia, diabetics, elderly in the morning
- Consider admitting patients before and after surgery to minimize “no shows” and maximize start time, NPO, & follow-up
- Make & distribute a schedule
- See ALL patients one last time on your last day (especially, complications, glaucoma, & cornea patients)
- Consider evening rounds or lectures
- Before going to bed, go over the OR list for the next day





## FIRST OR DAY

**Use the first day and the first case to make sure YOU are comfortable before teaching or treating more difficult cases**



## WHAT DID YOU BRING? DO YOU HAVE A LETTER FOR CUSTOMS?

**?Expired products?**

**Personal instruments**

**Local "FDA"- Avastin, corneas, devices (?transformer- 220?)**

**Examples of your notes/charts**

**Lectures/teaching videos (beware of unique identifiers)**



## THINGS TO THINK ABOUT

**Permission to take photos- what will you do with them**

**I am only bringing things that I can live without (computer, cameras, iPhone, etc.)**

**Check your sponsoring agency/NGO medical malpractice insurance coverage as well as your own**

**Taking notes every day of all data points (patients, hosts, tips, concerns, restaurants, etc.)**



## WHEN YOU GET HOME

**Pay it forward (learn of and recruit teams going)**

**Look to have your individual effort feed into a broader strategy (NGO, Academic Bridge, etc.)**

**Make your own travel/medical checklist**

**Email or Skype your hosts to check on patients**

**Start thinking of how you can make “next time” better and what you can do between now and next time (?fundraise, network with others, etc.)**



## CHERWEK'S LAW - MURPHY WAS AN OPTIMIST

**Bottom Line** - You can not over-prepare and once you arrive your awareness/attention to the details, needs, and risks can not be over-emphasized.



## EXCELLENT RESOURCES

CDC Website

SOS International

Embassy Security

Wilmer Online GO Courses