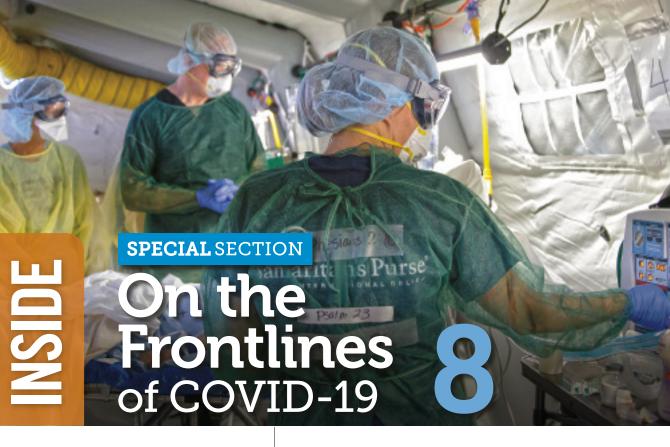
WORLD MEDICAL MISSION®

SUMMER 2020

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BANGLADESH
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A MINISTRY of SAMARITAN'S PURSE®





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Prayer is the most important "tool of the trade" for biomedical technicians serving in Bangladesh and our COVID-19 field hospitals.

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A word from World Medical Mission co-founder, Dr. Richard Furman



COVER PHOTO:

Stephanie Morales, a physician's assistant, clasps a New Testament as she prays for patients at the Samaritan's Purse Emergency Field Hospital in Cremona, Italy.



WHERE IS GOD CALLING YOU?

Look at the latest "Calling for Help" to see which mission hospitals need volunteers in your specialty.



World Medical Mission assists evangelical mission hospitals and clinics by sending Christian medical professionals as volunteers, and by providing equipment, supplies, and other resources that help them treat patients in the Name of the Great Physician.

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DEAR FRIEND

THE GLOBAL PANDEMIC has now spread to 213 countries, infected 10 million people, and taken more than 500,000 lives. Throughout these perilous and unprecedented times, healthcare workers have emerged as superheroes, risking their lives and working in extraordinarily difficult conditions to treat COVID-19 patients.

I am especially grateful for the brave men and women who served with Samaritan's Purse this spring in our two Emergency Field Hospitals and at overseas mission hospitals through World Medical Mission. Your work and, most of all, your witness for Jesus Christ, were exemplary. When family members could not visit with their dying loved ones, it was some of you who prayed with patients and held their hands as they took their last earthly breath. And it was some of you who joined in ringing the cowbells to celebrate a patient's discharge from the respiratory care tents and their joyous return home.

The special COVID-19 section in this magazine celebrates how God used frontline medical workers to be the hands and feet of Jesus in the midst of the crisis. We realize that travel prohibitions prevented many of our volunteers from serving overseas at the mission hospitals, but we pray that more doctors than ever before will schedule short-term assignments when travel restrictions are eventually lifted.

Please continue to pray for our partner hospitals, which have taken a hard hit financially due to COVID-19 disruptions. Pray also that God will bring an end to this terrible disease, and that many souls will turn to Him for deliverance from a far worse pandemic—the disease of sin. Now more than ever, let us remain committed to telling others the Good News of the Great Physician, who said, "Those who are well have no need of a physician, but those who are sick. I did not come to call the righteous, but sinners, to repentance" (Mark 2:17). God bless you.

Sincerely,

Franklin Graham

President, Samaritan's Purse





Insights from some of the medical personnel who serve in mission hospitals in more than 20 countries through World Medical Mission.

Niger

Philip Foster is a rehabilitation technician from Alabama who served at Galmi Hospital.

When I met Mousa, he was 3 years old and weighed 12 pounds. He had active TB, and a pretty serious head trauma. Needless to say he was struggling, and to make things worse, his joints were frozen in the fetal position. I worked with him to improve his functionality. The first time I saw him, I had to force his joints in motion, to which he responded with yelling and screaming. Nonetheless we persisted, and I continued to encourage him to move. Slowly but surely, he progressed. After four weeks of tears, laughter, and exercise twice a day, he began to stand again on his own and then shortly thereafter, began to walk. Then the real fun began; we started to play soccer. Now Mousa is a healthy weight for his age, and from what I've been told, he is recovering well!





Honduras

Dr. Anthony Miele is an internist/ pediatrician serving at Hospital Loma de Luz through the Post-Residency Program.

Honduras is experiencing more COVID-19 cases daily, yet we have seen none at Hospital Loma de Luz. But there have been deaths at the hospital. Patients with advanced cancer and beloved infants didn't make it to see Easter weekend. Yet in the middle of it all, we have that Hope. A Savior. A Creator who cared and sacrificed Himself to be with us, to atone for our sin. And because He lives, death is defeated, and the tomb is empty. If that is true, why wouldn't we devote our lives to Him? In worship, in testimony, in life and death, our lives are now His. Nothing can separate us from His love.



Important Announcement!

Due to the COVID-19 pandemic, Samaritan's Purse has canceled the 2020 Prescription for Renewal medical missions conference.

While we are disappointed that we cannot host Prescription for Renewal after such a successful program last year, we look forward to planning an exciting conference in 2021.

Mark your calendars now!

The event will return to the Renaissance Orlando at SeaWorld in Orlando, Florida, September 16-19, 2021.

Details on speakers and breakout sessions will be posted at **samaritanspurse.org/pfr** as that information becomes available.

On the Frontlines of COVID-19

Samaritan's Purse

Samaritan's Purse

THEY KNOW WHAT'S AT STAKE: Lives, souls, hope. The Christian specialists who serve with World Medical Mission and the Samaritan's Purse Disaster Assistance Response Team (DART) have been battle tested before. But the global sweep of SARS-CoV-2 and the unpredictability of this invisible enemy present a different set of challenges. Despite formidable odds, these medical professionals stepped up with quiet heroism and stalwart faith in God's healing power.

In the following special section, we highlight the army of healthcare workers and chaplains who served valiantly on the frontlines at our field hospitals in New York City and Cremona, Italy, as well as those who helped maintain patient services when our partner mission hospitals experienced staff shortages and economic fallout due to the coronavirus.

Samaritan's Purse

Samaritan's Purse

Samanian's Purse

Angels of Compassion in Central Park

During a five-week deployment to New York City, Samaritan's Purse DART members treated 190 patients at our Emergency Field Hospital.

frantically grabbed the nurse's hand, his eyes wild with panic as he struggled to take short breaths. Cheryl Kaufman squeezed back, reassuring him that she was going to help him get better and that Jesus was watching over him. The patient did not need to feel terrified. A check of his oxygen levels showed a saturation of 83

on't let me die!"The patient

Kaufman asked if she could pray for him. "Yes," he responded, without hesitation. The patient listened intently. His levels started to rise and he became calmer. Again he asked her not to let him die.

percent. He was doing OK.

His breathing continued to improve during the next three days. The following day he was discharged. Kaufman was among the medical staff who cheered as the patient jubilantly exited the Samaritan's Purse tent hospital in New York's Central Park and entered a new stage in his life.

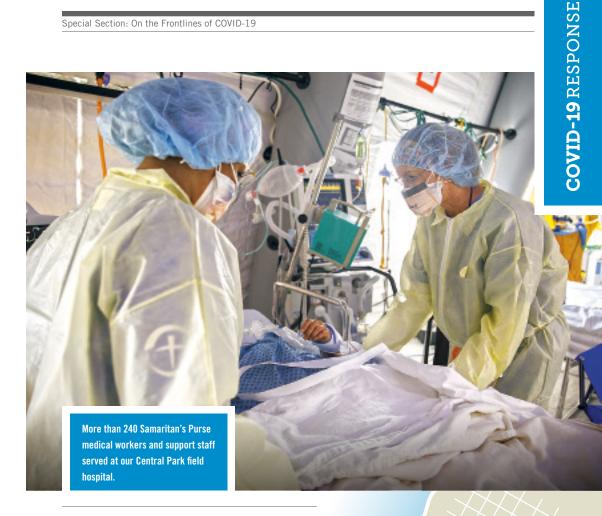
"He didn't say much, but a few tears were running. He was so thankful to be going home," recalled Kaufman. "My own tears were flowing as I reminded him that Jesus is with him."

That celebratory occasion was among the happiest moments for the Ohio nurse during

"Don't let me die!" The patient frantically grabbed the nurse's hand, his eyes wild with panic as he struggled to take short breaths.

several unforgettable weeks in New York City. Always eager for an opportunity to serve, this was Kaufman's fifth Disaster Assistance Response Team (DART) assignment. She also served as a World Medical Mission volunteer at Hospital of Hope in Togo for nine months in 2015.

This spring Kaufman was scheduled to go on a 10-week World Medical Mission trip to Jordan. When COVID-19 forced the cancellation of those plans, she immediately turned her attention to New York. Her assignment was confirmed at 5 p.m. on a Saturday evening, and wasting no time, she



boarded a plane headed to the Big Apple the next morning.

Caring for the complex needs of her patients was a privilege, but also exhausting. "I have never seen so much fear, not with Ebola or Iraq, or any other work. But the patients are so thankful. They appreciate you. So often they say you are an angel who came to help."

Samaritan's Purse deployed more than 240 nurses, doctors, biomedical technicians, and other personnel to staff the 68-bed field hospital in Central Park, which included a 10-bed intensive care unit. The field hospital was one of three locations in New York City where Samaritan's Purse partnered with Mount Sinai Health System to provide supplemental care for medical facilities that were overwhelmed by the influx of COVID-19 patients.







Dr. Mathew Woodley turned an unforeseen change in plans into an opportunity to respond to the medical crisis in New York City. He and his family have been on home assignment in Pennsylvania after completing the Post-Residency Program in December at Kudjip Nazarene Hospital in Papua New Guinea.

They were set to return to Papua New Guinea as long-term missionaries in March—around the time the coronavirus disrupted international travel. With their trip delayed indefinitely, the emergency room physician signed up to join the Samaritan's Purse DART in Central Park.

Woodley worked the night shift in the ICU tent, caring for the sickest of the sick. His experience at Kudjip had already prepared him for a dose of harsh reality, where he saw many tragic cases of tribal violence and children dying from preventable causes. But he also marveled at truly miraculous patient outcomes.

"Through witnessing both the tragic and the miraculous, I have learned to give both the bad and the good to God. So it has been here," he explained. "We have witnessed tragedy and we have witnessed healing, but through both we have seen God at work." One of his most endearing patients was a man in his early 70s. For two weeks Edgar (name changed) had not seen his family, and he did not own a smartphone. One evening, Woodley helped connect Edgar via a video chat with his wife, children, and grandchildren. The smile on Edgar's face and his family's tears of joy tugged at the hearts of Woodley and the nurses.

Unexpectedly, Edgar's health took an abrupt downturn the next morning and he had to be placed on a ventilator. The following day, he suffered a pulmonary embolism and died.

"Although we grieved losing him, we had peace in knowing Edgar had the assurance of salvation, and we were able to do our best to let him know that he was not alone," Woodley reflected.

Dr. Michael Post, who has twice served with World Medical Mission on the Ruth Bell riverboat in Bolivia, described the three weeks he spent at the field hospital as "an emotional and spiritual tsunami."

"I was not fully prepared for what I saw—not only raging pulmonary disease, but multisystemic disease. COVID-19 attacks the

lungs, coagulation, the oxygen transport system, the heart, the kidney, the liver, the GI system, and the neurologic system," he said. "Many came in terrified. They were literally being asphyxiated."

Watching his patients struggle valiantly, and without the presence of their loved ones, deeply grieved his own heart. The Michigan internist admitted there were times when the suffering caused him to doubt his calling and even doubt God's presence.

"Each time that this happened, I found that God's goodness showed up in so many ways," he added. "An unexpected patient improvement, a word of encouragement from a fellow worker, a prayer with a chaplain, or hearing about the multitude of prayers from all of those back home and around the world. All of these encouraged me greatly at times I needed it most."

A seasoned veteran of Samaritan's Purse DART responses, Dr. Peter Kwan said he was never afraid in his previous deployments, but this event was different.

"I know I am not as young anymore, and with my existing medical conditions, I most likely would not do well if infected. These are real concerns, and I had to pray hard and often," said the family medicine specialist.

Despite the personal health risks and long, stress-filled days, staff expressed their gratitude to be a part of such an extraordinary response during extraordinary times.

Kaufman said her greatest joy was the opportunity to pray and to give patients hope through Jesus Christ. "He will never leave you alone, but will walk beside you all the way," she consoled them.

"Even in the face of COVID-19."



The Joyous Clanging of Cowbells



PHOTO CREDIT: BGE

t's just a cold," George Hayer kept telling himself. The mild fever dissipated with home remedies. But a few days later whatever was ailing him returned with such a vengeance that he drove himself to a Brooklyn area hospital.

He spent time in the ICU, was transferred to another hospital, and three weeks later began receiving care at the Samaritan's Purse tent hospital in Central Park. Try as he might, George could not stand up on his own. Even with assistance, he barely managed to walk 5 feet before getting winded.

The 63-year-old retired bus driver became increasingly frustrated and anxious. Two years ago, his wife passed away with cancer, leaving George and his two sons heartbroken. If he died now, what would they do, especially his 18-year-old son? He lay awake at night, praying to God to spare his life and let him see his children again.

"Every day I heard the cowbells ring and people cheering when a patient was discharged," said George. "Every day I saw somebody in the tents go home. But they wouldn't release me to go home."

One day he couldn't take the disappointment any longer. He sat at the edge of his bed, sobbing uncontrollably.

That's when Randy Cole, a chaplain serving alongside Samaritan's Purse through the Billy Graham Evangelistic Association, was called over to comfort the distraught man. A bond of friendship developed as they talked about their children and their lives. George showed Randy pictures of his wife and sons on his cellphone.

"If it wasn't for Randy, I don't know what I would have done," George said. "He listened to me. He told me it was OK to cry. He prayed with me. And he changed my life. He's my friend forever."

Randy returned later that day to check on George. Every day he stopped by. Their conversations lengthened with each visit.

"We spent a lot of time talking," Randy agreed. "George is a true people person, and he got to know some of the other patients in his tent. We started praying for them too."

On April 22, George's longawaited day finally came. Medical workers and patients joined in a rousing send-off of cheers, clapping, and the resounding clang of bells. His friend Randy applauded. And George rattled the cowbell in unabashedly fierce triumph.

"I was ringing the bell so hard, I thought it might break," he said. "I wanted to take it home with me. I didn't want to hand it over."

Now he wants to spend as much time as he can with his sons, who were waiting in the driveway when he arrived home. He looks forward to taking a trip to New Mexico this summer to visit a friend. And he plans to invite his new friend Randy over to his house for dinner.

"I'm glad to be alive," he said. \oplus



Thoughts from New York City

By Dr. Lance Plyler, Director of World Medical Mission

t our respiratory care unit in Central Park, we unfortunately have witnessed firsthand the loss of many lives. But we have also seen many people recover, patients who, through the provision of meticulous medical care and diligent prayer, were able to walk out of the unit alive, with a new lease on life.

Fighting the virus is by no means easy. Given its extreme contagiousness, our staff must don full PPE (personal protective equipment) in order to treat all afflicted with the disease, and prevent them from transmitting it back in return. While the PPE is the only barrier of protection from contracting the deadly disease, it also makes the long hours seem longer; the N95 masks hinder breathing, the Tyvek® suits are cumbersome and disruptive, and the gloves inhibit fine motor grasp.

The virus does not discriminate, and fortunately, neither do we. The virus almost arbitrarily chooses its next victim, and we treat all arrivals with equal love and respect. Each shift is met with many challenges, as well as the great frustration of having neither a definitive therapeutic antidote, nor preventive vaccine. In the midst of great challenges, however, there are also great glimmers of hope. Encouragingly, through epidemiological data, there is now evidence of a favorable waning of the disease.

Equally encouraging, each evening at exactly 7, we heard the resonating sound of cheers and support throughout Central Park and beyond, with thousands of New Yorkers celebrating the efforts of those on the frontlines. Should you doubt the significance of the applause, more than once I know the sounds of support brought tears to our eyes and fortitude to our souls, a renewed determination to persevere and to serve. Thank you, people of New York!

I believe we can defeat this raging war between us and COVID-19. As a Christian humanitarian and medical missionary, I have battled a number of plagues, including Ebola, cholera, diphtheria, and now coronavirus. I believe disease and pestilence are but tools of Satan. As I have read the Bible. I know he will be defeated. In the midst of my past encounters and intense struggles with these deadly diseases, I am always reminded of the encouraging words from Psalm 91:9-10: "Because you have made the Lord, who is my refuge, even the Most High, your dwelling place, no evil shall befall you, nor shall any plague come near your



Staying in Place

World Medical Mission volunteers rise to the challenge by fulfilling and even extending their commitments at overseas mission hospitals.

s countries around the world began to shutter their borders due to COVID-19 concerns, our short-term volunteers who were serving overseas had to make a quick decision.

Dr. Alison Mitchell arrived at ELWA Hospital in Liberia at the end of February for a two-month assignment, her first with World Medical Mission. The emergency medicine physician was just getting acclimated to her new surroundings when the rapidly spreading virus disrupted global travel. She could cut short her stay and head immediately home to Australia, or remain in Liberia.

Her decision was an easy one.

"There was such a short window between travel restrictions being placed and flights out of the country being canceled that I don't think I could have returned to Australia, even if I wanted to," she said.

Like our other partner hospitals, ELWA was bracing for more than just a potential influx of COVID-19 patients. One of the concerns



was how to deal with a shortage of medical personnel. World Medical Mission doctors who were scheduled to serve at the hospital in the spring had their flights canceled and plans derailed because of the pandemic.

Mitchell was among several short-term volunteers who opted to fill the staffing gap by completing and even extending their time of service at mission hospitals. Her work in the emergency room at ELWA was greatly needed, as injuries and vehicular accidents continued to be among the main staple of cases.

The hospital also worked quickly to prepare for any incoming patients exhibiting symptoms of the coronavirus. Their clinical care team turned the female ward building into a respiratory treatment unit for patients having breathing issues. A large tent donated by Samaritan's Purse is serving as a respiratory outpatient clinic to care for patients with milder symptoms.

Sadly, two elderly individuals with breathing difficulties were brought to ELWA during the first week of April and died. Both tested positive for COVID-19.

Mitchell is even more worried that fears of the virus are keeping people away who need treatment for more common, but also potentially fatal diseases, like malaria. "I think this could be the uncounted death toll from this virus," she said.

A U.S. orthopedic surgeon serving at Chogoria Hospital in Kenya felt that he was exactly where God wanted him when he heard about the pandemic. Eighteen months ago, he suffered a mild stroke that led to his retirement. But the doctor battled back to full strength, and through World Medical Mission, found that his skills were much in demand at mission hospitals.

"Thank God for His healing grace. He is



literally a God of new opportunities and a provider of new work," the physician said. "I feel like I can contribute here in ways I never could at home."

Drs. Steve and Katie Hoyt, a family practice physician and an OB/GYN, were weeks away from completing their two year Post-Residency Program assignment at Galmi Hospital in Niger when COVID-19 cases began popping up in Africa. They decided to delay their return to the U.S. and help out at the hospital.

"We do feel a shortage of physicians since short-term volunteers had to cancel their plans," said Steve in April. "We would appreciate prayers for protection of the hospital and for the arrival of a part we are awaiting from the U.S. to fix our oxygen plant." (The much-needed part arrived a short time later and the oxygen plant is back in operation.)

The mission hospitals are used to relying on God—and seeing Him deliver—so their approach to dealing with the coronavirus is not any different from other challenges. The work of saving lives and sharing the Good News of eternal life through Jesus Christ remains their focused mission.

Sometimes it is the patients who teach unforgettable lessons of faith and courage to the doctors.

That was the case for Dr. Katherine Miller, a fourth-year resident in orthopedic surgery in

LEFT: Drs. Steve and Katie Hoyt serve in World Medical Mission's Post-Residency Program at Galmi Hospital in Niger. PRECEDING PAGE: Dr. Katherine Miller playfully does an "elbow bump" with one of her pediatric patients. The orthopedist is excited for the opportunity to do medical ministry in Kenya.

Texas who is serving with World Medical Mission at Tenwek Hospital in Kenya.

Miller originally planned to complete her assignment at Tenwek and then head to Tanzania for a long-held dream to climb Mount Kilimanjaro. Without reservation, she put that bucket list goal on hold to assist the undermanned staff.

Recently Miller helped treat a patient with a recurrent leg infection. The medical team had to deliver the awful news that the man needed another operation to cut his leg at a higher level to save his life.

"The next day I watched him lift himself onto the operating table, despite having one leg, despite his pain, and despite the fact that this was probably the sixth time back to the operating room," said Miller.

Sometimes it is the patients who teach unforgettable lessons of faith and courage to the doctors.

While the rest of the team left to assist another patient, Miller stayed because she didn't want him to be alone. "Don't worry. We are going to take care of you," she said, searching for words of comfort.

The patient turned his eyes toward her. "I'm not afraid," he replied.

"It's really all I can do to match the faith and bravery of these patients," Miller said, "trusting that God works through our hands and He has a plan for every one of us."

Calm in the Storm

As medical staff treat physical needs, chaplains in the mission hospitals play a crucial role as counselors and ministers of the Gospel during these uncertain times.

un Narayan Shrestha has served as the head of pastoral and social service care at United Mission Hospital Tansen in Nepal for 31 years. As a chaplain, he is always eager to share the hope of Jesus Christ with patients. That singleness of purpose remains unchanged during the heightened worries about COVID-19. The difference is, now more people are listening.

"People are fearful. Day-to-day life has become hard. During this time people are seeking prayer and help, even those who before did not want to hear the Gospel," said Shrestha.

Their nine-member team stays busy conducting daily chapel services, overseeing departmental devotions, praying with patients, serving as counselors, and connecting people with local

When he visits patients, Shrestha often reads reassuring Scriptures about God's provision. Some patients have requested personal copies, so the hospital is handing out Gideon Bibles to those who want to take them home.

People are fearful. Day-to-day life has become hard. During this time people are seeking prayer and help, even those who before did not want to hear the Gospel.

Shrestha said he is currently conducting stress management counseling with the medical staff, as potential COVID-19 infection weighs on their minds too. His wife is a nurse educator at Tansen and is involved in training the staff in infection control.

The chaplains also encourage and support one another as they deal with personal challenges. Like



WORLD MEDICAL MISSION - A Ministry of Samaritan's Purse

PHOTO CREDIT: Jason Troxell, ELWA Hospital

The Rev. Moses Gwole prays with a patient at ELWA Hospital in Liberia. "Our role as chaplains is to point them to Christ in the Scriptures," he said.

everyone else, normal life is far from routine for Shrestha's family.

"My father lives with us and is sick with COPD and chronic asthma. Due to the lockdown, he can't go out and is depressed," he said. "We have two sons. One is in his fourth year of medical school in China, and he is now with us during an extended winter leave. The youngest one is studying in Australia and is also struggling with uncertainty. Both are learning to trust God."

At ELWA Hospital in Liberia, the Rev. Moses Gwole enjoys engaging discussions with patients who are asking many questions about spiritual matters. "Some conclude that God is using COVID-19 to bring people back to Him, while others think this is a sign of the end times," he said. "Our role as chaplains is to point them to Christ in the Scriptures."

The Rev. Moses Munda praises God for the men and women who are turning to Christ every week at Kudjip Nazarene Hospital in Papua New Guinea. His team of chaplains is encouraging believers to stand firm in their faith and to disciple others.

"The global fear of COVID-19 may help us to see new vision in our ministry," he said.



"Leave It All on the Field"

by Dr. Mark Agness

Dr. Mark Agness is an ER physician from California who served at the Samaritan's Purse Emergency Field Hospital in Cremona, Italy. Dr. Agness and his wife, Melisa, a diagnostic radiologist, have also served with World Medical Mission at Soddo Hospital in Ethiopia.

'm seeing patients my own age with families and careers whose lives have been halted by the coronavirus. The random and unpredictable nature of who is hit hardest and ends up in the ICU is hard to process. It is very easy to see myself in their places but for God's grace. Some patients seem to be completely resistant to any and all interventions both by the Italian doctors and nurses and the Samaritan's Purse team. There is a nearly constant "retooling" and ongoing learning process to try to understand the pathophysiology of this disease and how we can best change its course.

One patient is a retired nurse from the local hospital. She arrived on the ventilator sedated. Over the course of several days she awakened. Initially, she was able only to open her eyes and acknowledge our presence. Over time she was able to communicate with a translator. Her nurse was truly saintly in managing her care. It became clear she was afraid and needed human touch. I spent parts of several shifts just holding her hand and stroking her head, reassuring her in a language she didn't understand. I prayed over her, for her, and with her as did others. She was eventually extubated and was sent to the ward!

Her "awake" experience in our ICU wasn't easy. She was alert and aware of the nearly constantly unfolding drama. Her ward mates didn't fare as well as she did. She witnessed some who died in her presence, others who failed attempts to extubate and rehab. I imagine there will be a component of PTSD for many of the survivors who will have a hard time processing the suffering and death they have witnessed.

In the face of so much pain and suffering in Cremona, I spend much time in prayer. Most of my patients are unable to respond so I pray over them. I can't say I've had a patient that I've been able to verbally share the Gospel with, but I hope we're sharing God's love through action.

It's an absolute honor to serve as Jesus' hands and feet. God gave us an opportunity to serve His children. I can't tell you how proud I am to be associated with Samaritan's Purse and all those who comprise it. Personally, I am amazed I've been able to sustain this level of care and intensity over weeks. I'm no longer young, but God has helped me find reserves I didn't think I had any more.

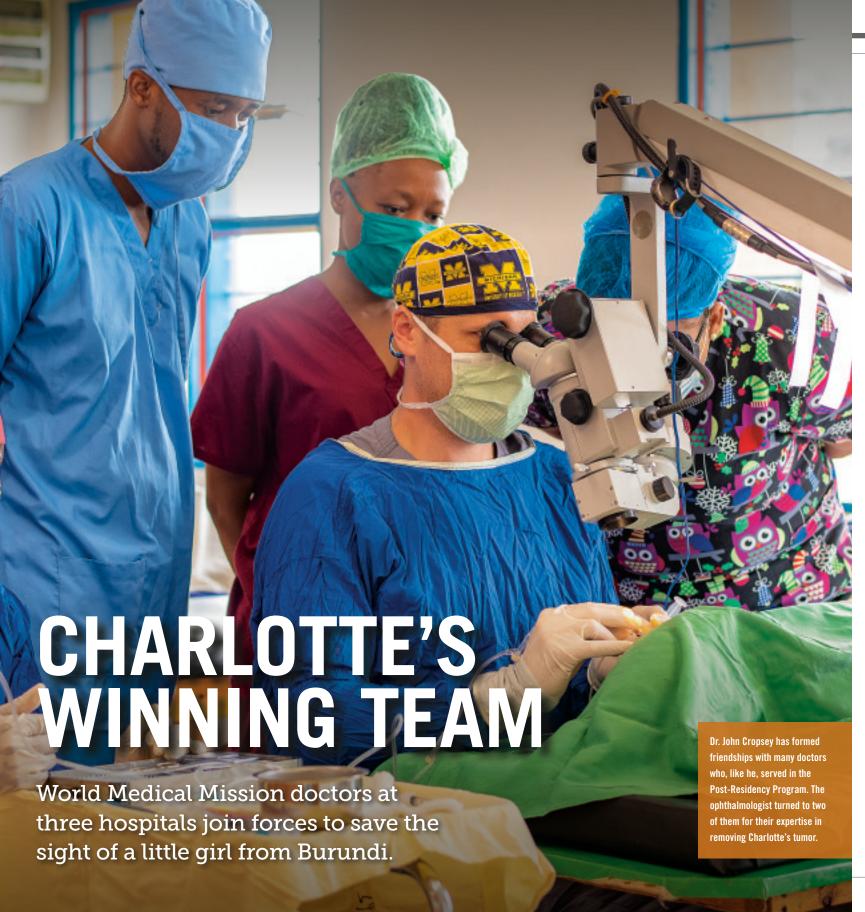
I sometimes pray, using an old sports analogy, that God will let me "leave it all on the field." In other words, I want to walk away

from this DART with the feeling that I've given it my all. One of my favorite verses is 2 Corinthians 12:7-9 in which Paul wrestles with his own personal physical challenges. I identify with him and claim God's promise that "My grace is sufficient for you, for My strength is made perfect in weakness." Hallelujah!









irst came the headaches, so severe that she wanted to scream in agony. The frustrating weakness that curbed much of her physical activity, including playing with her friends and going to school. And then the horror as month after month her right eye began shifting toward the side of her head.

Eight-year-old Charlotte was terrified. Her concerned family didn't know what to do except pray; they are very poor, and the doctors they had visited offered no hope. Even if a state-of-the-art hospital were next door, they wouldn't be able to afford the medical bills.

The slow progression of the tumor had been occurring for over a year. Now her vision was being affected.

Commonly listed among the poorest nations in the world, Burundi's population is plagued by very limited healthcare. There are approximately 20 surgeons and about the same number of eye doctors in a country of some 12 million people.

As a last resort, the family decided to take Charlotte to Kibuye Hope Hospital, a mission hospital located on the other side of Burundi. With the little bit of money they had saved and the generosity of others, Charlotte and her mother set out on a long bus ride in search of help.

At Kibuye, Charlotte was examined by Dr. John Cropsey, an ophthalmologist who joined the hospital staff in 2013 after serving for two years at Tenwek Hospital in Kenya through World Medical Mission's Post-Residency Program. Exploratory surgery revealed that Charlotte had what appeared to be a mucocele, a large cystic mass growing inside the sinus cavity behind her eye. The tumor was benign, but it was beginning to threaten her vision, and if left untreated, would continue to grow.

"I put a drain in to relieve the pressure and draw the mucus out through her nose," Cropsey said. "But she came back six weeks later and the eye had moved over again."

Further investigation revealed her mucocele was due to a bigger problem, a massive bony



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tumor originating from her skull base fibrous dysplasia.

The tumor needed to be removed, but there was no otolaryngologist at Kibuye. Cropsey sought help from Dr. David Nolen, another former Post-Resident who was based at Kijabe Hospital in Kenya. Knowing they didn't have the money, Cropsey made the arrangements for Charlotte and her mother to travel to Kenya.

Dr. Nolen removed the baseball-size tumor but had to take out a lot of bone material and do reconstructive surgery. To hold her right eye in place, he took connective tissue from her leg and used it to create a sling for her eyeball.

After extricating the tumor, Nolen discovered that the large growth had already disrupted the covering of her brain, leaving Charlotte leaking spinal fluid out of her nose. This complication could result in a potentially deadly infection of her brain.

Since Kijabe did not have a neurosurgeon present at that time, Dr. Nolen then turned to the expertise of Dr. Will Copeland at Tenwek Hospital, about three hours away from Kijabe. Copeland, also a graduate of the Post-Residency Program, completed his two-year assignment at Tenwek and decided to remain there as a long-term missionary.

Nolen made arrangements to transfer Charlotte from Kijabe to Tenwek. By God's grace, Dr. Copeland had the assistance of a second neurosurgeon, Dr. Mark Redding, who had recently arrived at Tenwek as a short-term volunteer with World Medical Mission.

"Dr. Redding and I temporarily removed the front part of Charlotte's skull and repaired the covering of her brain using tissue from her thigh," Copeland explained. "That stopped the leaking, but as we feared, Charlotte became quite sick and another CT scan showed that she had developed an abscess within the brain.

Charlotte's Winning Team

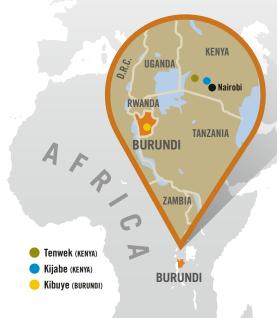
Enter team member number five! Dr. Josh Hughes, a good friend and co-resident of Copeland's from Mayo Clinic in Rochester, Minnesota, was visiting the hospital at the time. Also a neurosurgeon, he used his skills to reopen Charlotte's skull and remove the abscess.

After a long course of antibiotics, Charlotte recovered and was ready to go home. She and her mother had been away from Burundi for a few months.

"Teamwork makes the dream work," commented Copeland. "Our family friend Anna says this to our kids all the time. As I reflect on Charlotte's case, that is what comes to mind."

God brought together five surgeons, from Burundi, Kenya, and the United States, to provide life-saving care for Charlotte that she would not have had access to otherwise.

But Charlotte's story does not end here. God used the compassionate heart of someone who



is not a surgeon to encourage the little girl.

Sometimes Copeland's children come to the hospital wards at Tenwek and visit with the pediatric patients. On one occasion he was deeply moved when his 7-year-old daughter, also named Charlotte but nicknamed "Charley," spent some time with the child shortly before her return to Burundi.

Although they spoke different languages, Kirundi and English, they were able to bond over a coloring book and crayons. Finding a new friend brought delight to both girls.

Charlotte returned to her home community last fall. She has come back to Kibuye twice for follow-up exams with Dr. Cropsey.

Now the little girl can run and play with her friends again, and she is especially thrilled to be back in school.

Cropsey is thrilled too and so thankful for the team of doctors who combined their skills to transform Charlotte's life. "So many times patients come to us with tumors that we can't treat or it is too late to help them. I knew there was a chance we could really make a difference for Charlotte," he said.

"Without surgery she would have been grossly disfigured, and the tumor could have potentially killed her over time. But now she is living a normal life. That is such a blessing to me."

Overwhelmed with gratitude, Charlotte's mother told Cropsey she could never give enough thanks to him and the team of surgeons.

The doctor replied that he did have one favor to ask of Charlotte's family.

"Invite me to her wedding," he said. "I know that will be many years from now, but I want to be there on the day that she gets married."

Charlotte's mother was happy to comply.

"My words are too small to say how thankful I am to God for what He has done for my family through Dr. John," she said. "It was by prayer that this huge miracle, the healing of my daughter, occurred. I have gone to my church to give testimony to all the people of what God has accomplished in our family."



OPERATION PRAYER

Prayer is the most important "tool of the trade" for biomedical technicians serving in Bangladesh and our COVID-19 field hospitals.

'm looking for a Philips Optimus 50 X-ray machine. Do you have one in your warehouse?"

The inquiry came from

Dr. Stephen Kelley, head of the surgical department at Memorial Christian Hospital in Bangladesh. The 54-year-old facility was being replaced by a brand new hospital, and Dr. Kelley was in search of high-quality

medical equipment.

Samaritan's Purse did not have one in its

World Medical Mission warehouse, and
biomedical technician Monte Oitker explained
that it was unlikely for a specialized machine
like that to be donated to the ministry.

used machines to replace some of the aging

"Then I will pray that someone gives a machine to you," Dr. Kelley replied.

One month later, Oitker received a phone call from an orthopedic care center in Virginia. They had a used X-ray machine that they had purchased in 2017—a Philips Optimus 50—and had never removed it from the box. "Could World Medical Mission find a home for it?" the caller asked.

That X-ray machine, as well as anesthesia machines, patient monitors, and other types of equipment were shipped to Bangladesh, and awaited the arrival of Oitker and fellow biomedical technician Todd Poor to install at the hospital. The duo also trained hospital workers in the nuances of operating and maintaining the machinery.

Their work was part of the preparations for the grand opening of a 120,000-square-foot, four-story brick hospital in February. The new Memorial Christian Hospital more than triples the size of the previous medical complex, with numerous operating rooms, plans to expand to 120 inpatient beds, and an outpatient clinic that can treat up to 300 patients a day.

"Memorial Christian Hospital already has a reputation for being a stellar healthcare provider in the region, and with this really nice facility, it is going to improve the experience of its patients even more," said Oitker. The technicians spent two weeks getting equipment in tiptop shape, working primarily in the new operating rooms and in the imaging department, which Oitker described as "a gigantic transformation" from the limited setup in the old hospital.

Their main undertaking was the installation of the Philips Optimus 50. "It was quite challenging because the ceiling in the X-ray room was too high for mounting the machine at its proper height," Poor said.

With a combination of ingenuity, teamwork, and prayers, they constructed a clever resolution to their dilemma. The hospital's fabrication team designed metal trusses and bolted them to the ceiling. This dropped the ceiling by about 14 inches, allowing for the X-ray machine to be mounted to the trusses.

But the challenges weren't over. When powering the system for the first time, it refused to boot up all the way. Oitker and Poor carefully checked the connections, and through trial and error, the machine finally came to life. There were error codes to resolve in the programming process. And the X-ray table was not completely functional. They

replaced a bad component on a circuit board, but still nothing changed.

"We mentioned to Dr. Kelley that he should pray again," Oitker said.

The table did start working a few hours later, and the team praised God when the X-ray system became fully operational.

Having served with World Medical Mission for 19 years, first as a volunteer and for the past five years on staff, Poor was excited to contribute his skills to a hospital that will provide Christ-focused compassion as well as state-of-the-art healthcare.

"Each of us has talents and special gifts that God has given us, and one of mine involves using a wrench," said Poor. "I see my work as an opportunity to give back, a great way to bless others with what God has provided to us."

Those skills are invaluable, as World Medical Mission's biomedical technicians truly serve as a lifeline to our partner mission hospitals. Throughout the year they travel overseas to install, repair, and help maintain equipment. They train hospital staff in the operation of delicate instruments. With persistence and prayer, they find innovative ways to keep

Todd Poor mounts the Philips Optimus 50 X-ray machine to ceiling trusses at Memorial Christian Hospital in Bangladesh.





machines functioning so doctors can focus on patient care.

Their expertise was especially crucial during the setup and five-week operation of the Samaritan's Purse COVID-19 respiratory care units in New York City and Italy. The six biomedical department staff who were deployed to these sites kept the ventilators, oxygen concentrators, infusion pumps, and patient monitors in working order. When problems developed with the equipment,

they found creative solutions that ultimately saved lives.

David Bucklin, an electrician and the supervisor of World Medical Mission's biomedical department, had the privilege of serving in both Italy and New York.

"Every time we go on a deployment, it's something new, and we often say to ourselves, 'we never thought we would be doing this," reflected Bucklin. "This has been a really great experience. It's the Lord at work."

WORLD MEDICAL MISSION IS LOOKING FOR CHRISTIAN BIOMEDICAL TECHNICIANS AND ENGINEERS

Once international travel resumes, World Medical Mission is looking for Christian biomedical technicians and engineers who can serve alongside one of our staff technicians on one-to-two-week volunteer assignments at mission hospitals.

For more information, please contact the biomedical department at (828) 278-1954.





FUTURE PHYSICIANS

At Myungsung Christian
Medical Center, World
Medical Mission PostResident Laura Johnson is
living a dream, continuing
a family legacy, and hopeful
about the future of medicine
in East Africa.

r. Laura Johnson's desire to practice medicine in Ethiopia has been kindled from the beginning by her grandfather's stories. She recalls as a little girl hearing his tales of God's work in the East African country where her father grew up and where her grandparents served as medical missionaries many years before she was born.

"I hoped I would be a missionary doctor," Dr. Johnson remembers thinking from a very early age. "My parents were missionaries, and I grew up thinking that's one of the best things to be."

Now more than a year into her stint as a World Medical Mission Post-Residency Program physician, her childhood dreams have become reality. She understands more every day why she has been drawn to the country's people and its culture.

Serving as an internist and pediatrician at Myungsung Christian Medical Center in Addis Ababa, she gets to treat every age and ailment among the people she loves. But this isn't her only, or even central, role at Myungsung—a hospital that was given as a gift in 2004 by South Korea to commemorate Ethiopia's valiant fighting during the Korean War.

It's the country's most esteemed hospital, and the associated Myungsung Medical College has become its most admired institute for training Ethiopian physicians. This is how Johnson wants to carry on her family missions legacy. She wants to help train future doctors.

"These students are our biggest mission field," Dr. Johnson said. "We have the opportunity to

impact them and shepherd them and disciple them over months and years."

This vision has been carried by Dr. Roger Holland, a World Medical Mission doctor who arrived at Myungsung with his wife, Rita, in early 2016 at the invitation of radiologist Dr. Kuhn Hong, a World Medical Mission volunteer since 1999.

They want to train excellent physicians who are humble enough to mop floors. The school's motto is Mark 10:45: "For even the Son of Man did not come to be served, but to serve, and to give His life a ransom for many."

"When they go out to serve in communities throughout the country, we want people to see there's a different type of doctor coming from Myungsung," Johnson said. "We want them to see servant leaders who aren't too good to clean floors or fold laundry."

Through Myungsung's outpatient clinic for the poor, which opened last year, students are putting this into practice. They are practicing



medicine hands-on and learning how to serve joyfully at even the most menial of tasks.

"Instead of the students just watching while someone else provides the care, they see the patients first, assess their needs, outline the course of treatment. They also learn how to counsel and pray for patients," said Johnson. "And it gives us an opportunity to mentor them and shepherd them in providing Christhonoring care."

A TEAM EFFORT

Myungsung wants to see the best and brightest in Ethiopia help transform the country's medical profession one graduating class at a time. Many students were at the top of their classes back home, but in Addis Ababa they get a chance to discover their weaknesses and develop Myungsung's essential ingredient—humility.

"In Ethiopia the doctor is second to God," Laura said. "Our prayer is that no one would see it that way anymore, unless they are saying 'I saw the grace of God and the mercy of God in that doctor.' This is why we regularly tell stories about our mistakes and our failures."

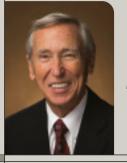
Dr. Johnson's husband, Larry, bolsters this side of medical training as a counselor and mentor. Trained as a pastor, he guides students toward a Christ-filled response to their failings as they face academic stress like they never have before.

"What we teach them is that when they put on that white coat, they actually become the servant to the patient," Larry said. "The truth is we're all fallible, and admitting fallibility actually makes you a better doctor."

The Johnsons have seen two graduating classes during their time in the World Medical Mission Post-Residency post at Myungsung, and they hope to see many more—at least until they find their replacements.

"Our prayer is that our students would be changed by Jesus and discipled during their time at our school," Dr. Johnson said. "That their brokenness and their trials of learning medicine would be a catalyst for change. I want to be replaced in my job by our graduates. I want them to be the ones who are mentoring future generations of doctors in Ethiopia."





ANSWERING THE CALL

Dr. Richard Furman, co-founder of World Medical Mission

hat makes World Medical Mission different? Recently I was having a conversation with a small group of medical professionals about where each of us was planning to go to serve this year. I mentioned a trip to four hospitals in Africa where World Medical Mission sends doctors. One of the gentlemen in the group spoke up and stated that he has a good friend who made similar trips with another humanitarian medical organization.

"Not unto us,

O Lord, not

unto us, but to

Your Name

give glory."

-PSALM 115:1

His statement got me thinking. The organization he was referring to has a great group of doctors who certainly help a lot of people medically. I then remembered the words of Bob Pierce, the founder of Samaritan's Purse. He said that our goal is not just to help others. Our goal is to lead people to Jesus Christ. I was reminded of the reality that a patient's spiritual health is more important than their physical health.

There is a verse in the Bible that addresses this truth. Jesus called His 12 disciples together and gave them instructions concerning what He wanted them to do. Luke 9:2 states: "He sent them to preach the kingdom of God and to heal the sick."

Luke 9:6 tells what they did in response to His instruction: "So they departed and went the

"So they departed and went through the towns, preaching the Gospel and healing everywhere." There were two directives concerning their journey. Likewise, our focus at World Medical Mission is not only about doing good. We are all about Jesus.

A few weeks before the COVID-19 outbreak, I went with a team from Samaritan's Purse and the Billy Graham Evangelistic Association to visit Tenwek Hospital in Kenya to begin preparing a one-year learning course for all the chaplains in our more than 50 partner hospitals. This online course will focus on hospital evangelism. We want the doctors and chaplains to work together not only to heal the sick, but to proclaim the Gospel.

Jesus instructed His disciples to integrate healing and evangelism. We want to be certain to do the same. The hospitals and clinics are like magnets that bring people to us so we can carry out both instructions. We want to bring them together for healing—and evangelize them to come to know Jesus Christ.

I encourage anyone reading this column to take a moment and join us in praying for guidance as World Medical Mission initiates this new program, by which we take on the responsibility of making certain we proclaim the Kingdom to every patient and family member we treat medically.



Please pray for these mission hospitals and consider volunteering if you are a medical professional in one of the following specialties.





Calling for Help

If you are interested in serving overseas, please complete our Volunteer Application online at **samaritanspurse.org/medical/volunteer-application**. Due to the COVID-19 pandemic, international travel has been temporarily disrupted and we are unable to

place volunteers at this time. Please pray for these mission hospitals and their ongoing critical needs. For further questions, call World Medical Mission at (828) 278-1173.

ANESTHESIOLOGY

Baptist Medical Centre. Ghana Bongolo Hospital. Gabon ECWA Egbe Hospital, Nigeria ELWA Hospital, Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Diospi Suyana, Peru Hospital Loma de Luz, Honduras Hospital of Hope, Togo Hospital Shalom, Guatemala Kapsowar Mission Hospital, Kenya Karanda Mission Hospital, Zimbabwe Kibogora Hospital, Rwanda Kijabe Hospital, Kenya Kudjip Nazarene Hospital, Papua New Guinea Litein Hospital, Kenya Macha Mission Hospital, Zambia Memorial Christian Hospital, Bangladesh Mukinge Mission Hospital, Zambia Nkhoma Mission Hospital, Malawi Restricted Country Soddo Christian Hospital, Ethiopia

Surgery Sub-Specialty Teams Tenwek Mission Hospital, **Kenya** United Mission Hospital Tansen, **Nepal**

CARDIOLOGY

Chogoria Hospital, **Kenya**ECWA Egbe Hospital, **Nigeria**ELWA Hospital, **Liberia**Galmi Hospital, **Niger**Hospital Diospi Suyana, **Peru**Hospital Shalom, **Guatemala**Myungsung Christian Medical Center, **Ethiopia**Nkhoma Mission Hospital, **Malawi**Restricted Country
Shalom Family Medical Center, **El Salvador**Soddo Christian Hospital, **Ethiopia**Tenwek Mission Hospital, **Kenya**

DENTISTRY

Baptist Medical Centre, **Ghana** Chitokoloki Mission Hospital, **Zambia** Chogoria Hospital, **Kenya** ECWA Egbe Hospital, **Nigeria** ELWA/Trinity Dental Clinic. Liberia Hospital Diospi Suyana, Peru Hospital Loma de Luz, Honduras Hospital of Hope, Togo Hospital Shalom, Guatemala Jungle Hospital, Honduras Kapsowar Mission Hospital, Kenya Karanda Mission Hospital, Zimbabwe Kibogora Hospital, Rwanda Kijabe Hospital, Kenya Kudjip Nazarene Hospital, Papua New Guinea La Fuente Centro, Peru Macha Mission Hospital. Zambia Memorial Christian Hospital. Bangladesh Restricted Country Ruth Bell Riverboat. Bolivia Shalom Family Medical Center. El Salvador Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital, Kenya

DERMATOLOGY

Chogoria Hospital, **Kenya** ELWA Hospital, **Liberia** Hospital Shalom, **Guatemala**La Fuente Centro, **Peru**Litein Hospital, **Kenya**Macha Mission Hospital, **Zambia**Restricted Country

Shalom Family Medical Center, **El Salvador** Soddo Christian Hospital, **Ethiopia**

EMERGENCY MEDICINE

Baptist Medical Centre, Ghana
Bongolo Hospital, Gabon
Chogoria Hospital, Kenya
ELWA Hospital, Liberia
Galmi Hospital, Niger
Hopital Baptiste Biblique, Togo
Hospital Diospi Suyana, Peru
Hospital Evangelico, Honduras
Hospital of Hope, Togo
Kapsowar Mission Hospital, Kenya
Karanda Mission Hospital, Zimbabwe
Kudjip Nazarene Hospital, Papua New Guinea
Macha Mission Hospital, Zambia
Mukinge Mission Hospital, Zambia

Myungsung Christian Medical Center, **Ethiopia** Nkhoma Mission Hospital, **Malawi** Restricted Country Shalom Family Medical Center, **El Salvador**

Soddo Christian Hospital, **Ethiopia** Tanalian Bible Camp/OHOP, **Alaska**

FAMILY PRACTICE

Bongolo Hospital, **Gabon**Chogoria Hospital, **Kenya**ECWA Egbe Hospital, **Nigeria**ELWA Hospital, **Liberia**Galmi Hospital, **Niger**Hopital Baptiste Biblique, **Togo**Hospital Diospi Suyana, **Peru**Hospital Loma de Luz, **Honduras**Hospital of Hope, **Togo**Jungle Hospital, **Honduras**Kapsowar Mission Hospital, **Kenya**Karanda Mission Hospital, **Zimbabwe**Kijabe Mission Hospital, **Kenya**Kudjip Nazarene Hospital, **Papua New Guinea**La Fuente Centro, **Peru**

Memorial Christian Hospital, **Bangladesh**Mukinge Mission Hospital, **Zambia**Myungsung Christian Medical Center, **Ethiopia**Nkhoma Mission Hospital, **Malawi**Restricted Country
Shalom Family Medical Center, **El Salvador**Soddo Christian Hospital, **Ethiopia**Tenwek Mission Hospital, **Kenya**United Mission Hospital Tansen, **Nepal**

GASTROENTEROLOGY ECWA Egbe Hospital, Nigeria

ELWA Hospital, **Liberia**Galmi Hospital, **Niger**Hopital Baptiste Biblique, **Togo**Hospital Diospi Suyana, **Peru**Hospital of Hope, **Togo**Hospital Shalom, **Guatemala**Kibogora Hospital, **Rwanda**Kudjip Nazarene Hospital, **Papua New Guinea**Myungsung Christian Medical Center, **Ethiopia**Nkhoma Mission Hospital, **Malawi**Restricted Country

Soddo Christian Hospital. Ethiopia Tenwek Mission Hospital, Kenva

GENERAL SURGERY

Baptist Medical Centre, Ghana Bongolo Hospital, Gabon Chitokoloki Mission Hospital. Zambia Chogoria Hospital, Kenya ECWA Egbe Hospital, Nigeria ELWA Hospital, Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Diospi Suyana, Peru Hospital of Hope, Togo Hospital Shalom, Guatemala Kapsowar Mission Hospital, Kenya Karanda Mission Hospital, Zimbabwe Kibogora Hospital, **Rwanda** Kijabe Mission Hospital, Kenya Kudjip Nazarene Hospital, Papua New Guinea Macha Mission Hospital, Zambia Memorial Christian Hospital, Bangladesh Mukinge Mission Hospital, Zambia Myungsung Christian Medical Center, Ethiopia Restricted Country Soddo Christian Hospital, Ethiopia

HEMATOLOGY

ELWA Hospital, Liberia Galmi Hospital, Niger Hospital Evangelico, Honduras Kudjip Nazarene Hospital, Papua New Guinea Myungsung Christian Medical Center, Ethiopia Nkhoma Mission Hospital, Malawi Soddo Christian Hospital. Ethiopia

INTERNAL MEDICINE

Baptist Medical Centre, Ghana Bongolo Hospital, Gabon Chogoria Hospital, Kenya ECWA Egbe Hospital, Nigeria ELWA Hospital. Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Diospi Suyana, Peru Hospital of Hope, Togo Karanda Mission Hospital. Zimbabwe Kapsowar Mission Hospital, Kenva Kijabe Mission Hospital, Kenya Kudjip Nazarene Hospital, Papua New Guinea La Fuente Centro. Peru Litein Hospital, Kenya Macha Mission Hospital, Zambia Memorial Christian Hospital. Bangladesh Mukinge Mission Hospital, Zambia Myungsung Christian Medical Center, Ethiopia Nkhoma Mission Hospital. Malawi Restricted Country Shalom Family Medical Center. El Salvador Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital, Kenya

NEONATOLOGY

ELWA Hospital, Liberia Galmi Hospital, Niger Hopital Baptiste Biblique. Togo

United Mission Hospital Tansen, Nepal

Kapsowar Mission Hospital, Kenva Kibogora Hospital, Rwanda Kijabe Mission Hospital, Kenya Memorial Christian Hospital, Bangladesh Nkhoma Mission Hospital, Malawi Restricted Country Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital, Kenya

NEPHROLOGY Chogoria Hospital, Kenya ELWA Hospital, Liberia Hospital Shalom, Guatemala Kijabe Mission Hospital, Kenva Nkhoma Mission Hospital. Malawi Restricted Country Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital, Kenya

NEUROLOGY

Chogoria Hospital, Kenya ELWA Hospital, Liberia Hospital Shalom, Guatemala Myungsung Christian Medical Center, Ethiopia Tenwek Mission Hospital, Kenya

NEUROSURGERY

ELWA Hospital, Liberia Kijabe Mission Hospital, Kenya Myungsung Christian Medical Center, Ethiopia Surgery Sub-Specialty Teams Tenwek Mission Hospital, Kenva

OBSTETRICS/GYNECOLOGY

Baptist Medical Centre, Ghana Bongolo Hospital, Gabon Chogoria Mission Hospital, Kenya ECWA Egbe Hospital, Nigeria ELWA Hospital. Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital I oma de Luz. Honduras Hospital of Hope, Togo Hospital Shalom, Guatemala Jungle Hospital. **Honduras** Kapsowar Mission Hospital, Kenya Kijabe Mission Hospital, Kenya Kudjip Nazarene Hospital, Papua New Guinea La Fuente Centro, Peru Litein Hospital, Kenva

Macha Mission Hospital, Zambia

Mukinge Mission Hospital, Zambia

Nkhoma Mission Hospital, Malawi

Soddo Christian Hospital, Ethiopia

Tenwek Mission Hospital, Kenya

United Mission Hospital Tansen, Nepal

Surgery Sub-Specialty Teams

Memorial Christian Hospital, Bangladesh

Shalom Family Medical Center, El Salvador

Bongolo Hospital, Gabon ELWA Hospital, Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Loma de Luz Honduras Hospital Shalom, Guatemala Kapsowar Mission Hospital, Kenya Kijabe Mission Hospital, Kenya Restricted Country Shalom Family Medical Center, El Salvador

ONCOLOGY

Restricted Country

Chogoria Hospital, Kenya ELWA Hospital, Liberia Kudjip Nazarene Hospital, Papua New Guinea Tenwek Mission Hospital. Kenva

OPHTHALMOLOGY

Bongolo Hospital, Gabon Chogoria Hospital, **Kenya** ECWA Egbe Hospital, Nigeria ELWA Hospital, Liberia Hospital Diospi Suyana, Peru Hospital Evangelico, Honduras Hospital of Hope. Togo Hospital Shalom, Guatemala Kapsowar Mission Hospital, Kenya Karanda Mission Hospital, Zimbabwe Kijabe Mission Hospital, Kenya La Fuente Centro. Peru Macha Mission Hospital, Zambia Tenwek Mission Hospital, Kenya

ORAL MAXILLOFACIAL SURGERY

Bongolo Hospital, Gabon ELWA Hospital, Liberia Galmi Hospital, Niger Kapsowar Mission Hospital, Kenya Myungsung Christian Medical Center, Ethiopia Soddo Christian Hospital. Ethiopia Tenwek Mission Hospital, Kenya

ORTHOPEDIC SURGERY

AIC-CURE International Children's Hospital, Kenya Bongolo Hospital, Gabon Chogoria Hospital, Kenya ECWA Egbe Hospital, Nigeria ELWA Hospital. Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Loma de Luz, Honduras Hospital of Hope. Togo Kapsowar Mission Hospital. Kenva Karanda Mission Hospital, Zimbabwe Kibogora Hospital, Rwanda Kudjip Nazarene Hospital, Papua New Guinea Memorial Christian Hospital, Bangladesh Myungsung Christian Medical Center, Ethiopia Nkhoma Mission Hospital, Malawi Restricted Country Soddo Christian Hospital, Ethiopia Surgery Sub-Specialty Teams Tenwek Mission Hospital, Kenya United Mission Hospital Tansen, Nepal

OTOLARYNGOLOGY

Kudiip Nazarene Hospital, Papua New Guinea Tenwek Mission Hospital. Kenva

PATHOLOGY

Chogoria Hospital, Kenya ELWA Hospital, Liberia Galmi Hospital, Niger

Kijabe Mission Hospital, Kenya Myungsung Christian Medical Center, Ethiopia Soddo Christian Hospital, Ethiopia

PEDIATRIC ORTHOPEDIC SURGERY

ELWA Hospital. Liberia Galmi Hospital, Niger Kibogora Hospital, Rwanda

Calling for Help

PEDIATRICS

Baptist Medical Centre, Ghana Bongolo Hospital, Gabon Chogoria Hospital, Kenva ECWA Egbe Hospital, Nigeria ELWA Hospital, Liberia Galmi Hospital, Niger Hopital Baptiste Biblique. Togo Hospital Diospi Suvana, Peru Hospital Loma de Luz, Honduras Hospital of Hope. Togo Hospital Shalom, Guatemala Jungle Hospital, Honduras Kapsowar Mission Hospital. Kenva Karanda Mission Hospital, Zimbabwe Kijabe Mission Hospital, Kenya Kudjip Nazarene Hospital, Papua New Guinea Macha Mission Hospital, Zambia Memorial Christian Hospital. Bangladesh Mukinge Mission Hospital, Zambia Nkhoma Mission Hospital, Malawi Restricted Country Shalom Family Medical Center, El Salvador Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital, Kenya United Mission Hospital Tansen, Nepal

PEDIATRIC SURGERY

Baptist Medical Centre. Ghana Bongolo Hospital, Gabon Chogoria Hospital, Kenya ECWA Egbe Hospital, Nigeria ELWA Hospital, Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Shalom, Guatemala Kibogora Hospital, Rwanda Kijabe Mission Hospital, Kenva Kudiip Nazarene Hospital. Papua New Guinea Mukinge Mission Hospital, Zambia Restricted Country Tenwek Mission Hospital, Kenya

PHYSICAL MEDICINE & REHAB

Baptist Medical Centre. Ghana ECWA Egbe Hospital, Nigeria ELWA Hospital, Ghana Galmi Hospital, Niger Karanda Mission Hospital, Zimbabwe Kibogora Hospital, Rwanda Kijabe Mission Hospital. Kenva Litein Hospital, Kenya Myungsung Christian Medical Center, Ethiopia Nkhoma Mission Hospital, Malawi

Dr. Andrea Parker Receives ASE Education Award



The Association for Surgical Education honored Dr. Andrea Parker in April with the "Excellence in Innovation" Education Award. Dr. Parker is the Pan-African Academy of Christian Surgeons (PAACS) Assistant Program Director at Tenwek Hospital in Kenya.

Andrea and her husband. Robert, are general surgeons who completed the Post-Residency Program at Tenwek in 2017 and are

now serving at the hospital through a long-term sending agency. According to the ASE website, the annual "Excellence in Innovation" award promotes excellence, innovation, and scholarship in surgical education.

Restricted Country Soddo Christian Hospital, Ethiopia

PLASTIC SURGERY

ECWA Egbe Hospital, Nigeria ELWA Hospital, Liberia Galmi Hospital, Niger Hospital I oma de Luz. Honduras Kapsowar Mission Hospital, Kenya Kibogora Hospital, Rwanda Kijabe Mission Hospital, Kenya Macha Mission Hospital. Zambia Mukinge Mission Hospital, Zambia Nkhoma Mission Hospital. Malawi Restricted Country Tenwek Mission Hospital, Kenya

PSYCHIATRY

Chogoria Hospital, Kenya ELWA Hospital. Liberia Nkhoma Mission Hospital. Malawi Restricted Country

PSYCHOLOGY

Chogoria Hospital, Kenya La Fuente Centro. Peru Restricted Country

RADIOLOGY

Baptist Medical Centre. Ghana ECWA Hospital Egbe, Nigeria ELWA Hospital. Liberia Galmi Hospital, Niger Hopital Baptiste Biblique, Togo Hospital Evangelico, Honduras Hospital Shalom, Guatemala Kapsowar Mission Hospital. Kenva Kibogora Hospital, Rwanda Kijabe Mission Hospital, Kenva Nkhoma Mission Hospital, Malawi Restricted Country Shalom Medical Center. El Salvador Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital. Kenva

RHEUMATOLOGY

ELWA Hospital, Liberia Tenwek Mission Hospital, Kenya

THORACIC SURGERY

Kijabe Mission Hospital, Kenva Tenwek Mission Hospital, Kenya

UROLOGY

Bongolo Hospital. Gabon ECWA Hospital Egbe, Nigeria Galmi Hospital, Niger Hospital Shalom, Guatemala Kapsowar Mission Hospital, Kenya Karanda Mission Hospital, Zimbabwe Kibogora Hospital, **Rwanda** Kijabe Mission Hospital, Kenva Litein Hospital, Kenya Nkhoma Mission Hospital. Malawi Soddo Christian Hospital, Ethiopia Tenwek Mission Hospital, Kenya United Mission Hospital Tansen, Nepal



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