

Salle Bhumlu, Kavre District Nepal - Wild Medic Project Clinic Report

25th and 26th February 2019



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Approximately 240+ presentations were seen over the two-day health clinic service in Salle Bhumlu. The exact amount of medications that were prescribed is unknown due to the large patient flow causing the Nepalese physician and WMP team to at some points refrain from appropriately documenting treatments. Omeprazole, ninja gel and paracetamol were the most widely used medications.

This Wild Medic Project Team consisted of nine Central Queensland University 2nd and 3rd year paramedic students, two CQU paramedical science lecturers and a registered paramedic and expedition leader in Dean McCort. The free health camp setup was designed and run mostly by the CQU paramedic students who rotated roles and positions over the two practicing days. Two (and later three) triage desks were placed in front of the health camp building under tin roofing. These triage stations were worked by CQU students and Nepalese translators in order to ascertain main patient details, a baseline set of observations and chief medical complaint. From here, patients were one by one escorted to a waiting area inside or outside the assessment building (depending on traffic) for further assessment (secondary assessment) or treatment. The assessment building (pictured above) was split into two sections; the first section was where patients would enter and be seated to wait for appropriate medication and final assessment by the Nepalese physician, Dr. Shiva

Bhatarra. In this first half of the building, paramedic students would handover patient details to each other and to the paramedic lecturers for initial treatment of basic conditions such as minor musculoskeletal conditions and basic gastric reflux conditions. The second half of this building held a hidden-from-view assessment bed where Nepalese physician and CQU students could provide further medical assessment and treatment if necessary. Additionally, this section of building also housed the medication and was where CQU students would dispense, under instruction of Dr. Bhatarra, appropriate drugs and medication information. Nepalese translators were present during all interactions between WMP team members and patients. Students worked in groups of two or three during the triage and assessment phases and one-on-one with the Nepalese physician.

Table 1: Chief medical complaints documented during the Salle Bhumlu Wild Medic Project Health Clinic during 25th-26th February, 2019.

Condition	No. of presentations
Musculoskeletal	80
General Health (including general check-ups and conditions otherwise categorised as 'other')	62
Gastrointestinal	24
Eye	23
Respiratory	13
Urinary	10
Skin	8
ENT	8
Gynaecological/Obstetrics	7
Suspected cardiac	3
Metabolic	2
Total documented presentations	240

Please note: the majority of patients had more than one medical complaint almost always involving a musculoskeletal, gastrointestinal and ophthalmological origin.

Updated drug count post Salle Bhumlu WMP Clinic days:

- 1575 Aciloc
- 473 Amice
- 100 amitriptyline
- 106 amlodipine 5mg
- 5 azithromycin 200mg
- 3 azithromycin 500mg (30ml)
- 362 azithromycin 500mg
- 30 acetaminophen
- 2 betadine liquid
- 5 betadine ointment
- 20 albendazole chewable
- 4 beta 2 salbutamol syrup

- 8 bronchodyne
- 14 brica
- 580 b complex with vit c
- 44 bisacodyl
- 15 ciproflaxin eyedrops
- 7 ciproflaxin tab
- 235 colguard
- 4 clobetasol propionate
- 482 ciprodac 500mg
- 15 calomine lotion
- 925 calcium with vit d3
- 22 candid b cream
- 335 combicillin
- 5 cetirizine
- 160 cetron
- 25 celesemine
- 160 doxyfylline
- 100 decopan
- 15 dicy MPS
- 74 enclave
- 95 electrolyte sachet
- 274 etophyline and theophyline
- 94 flucanazole
- 95 fexofenadine 180mg
- 110 fexofenadine 120
- 100 flontin
- 35 glyfall 500
- 140 gilmepiride tab
- 300 gilmepiride 2mg
- 140 glumil
- 496 hyoscine butylbromide
- 100 ibuprofen/paracetamol
- 1 ibuprof/paracet suspension
- 80 INAR 25
- 679 IVU Vit b16 and Calcium
- 2 lubricating eye drops
- 20 lospill 50 (losartan)
- 929 metronidazole 400mg
- 520 medazole df
- 20 mupir ointment
- 80 metformin
- 170 mefcid 500
- 60 minil 20
- 0 ninja gel
- 0 omeprazole
- 6 ocupol eye ointment

- 5 otosoft 10ml
- 1 otorex
- 220 ondansetron
- 13 normogel
- 13 nemox
- 130 prelin
- 330 paracetamol
- 175 pantoprazole
- 80 protogyl forte
- 176 peridox
- 80 prednisalone
- 4 pregnancy test
- 2 stagell antacid
- 4 swiftus
- 35 salbutamol pmdi
- 231 tinidazole
- 11 Terbinafine HCL cream
- 9 Zod (lice)
- 6 500ml 0.9% nacl
- 100 Vemenil

Donations to under-resourced health post and community (medication handed over to community paramedic):

- 50 tooth brushes (given to school children)
- 50 tooth paste (given to school children)
- 80 sanitary pads (some given to school, rest given to health post)
- 25ml Neat Feet Spray on Foot and Heel Balm
- 150 tablets tinidazole tablets 500mg
- 649 ranitidine tablets 150mg
- 290 paracetamol tablets 500mg
- 50 ibuprofen/paracetamol tabs
- 50 electrolyte sachets
- 6 knee braces

Salle Bhumlu – Location

Salle Bhumlu is accessible by hike or 4x4 and seems to have a fair amount of construction and population growth. Each day saw construction trucks hauling heavy materials to and from the village for repairs and general infrastructure growth.

The village has a vibrant population of young people with around 50 students attending the local school ageing between 5-12. The health clinic noticeably saw an older demographic ranging from ages 60 through to 100. Younger people aged 20+ are, as told to WMP, keen to find work in different areas of Nepal.

Salle Bhumlu has a noticeable wild dog population ranging from 7-10 different animals. No dog to human aggression was seen at any time, although the dogs were comfortable with humans and on some occasions had to be removed from the WMP eating area. It should be noted that dog-to-to aggression was, on more than one occasion noticed by the WMP team. It would be advisable for future WMP groups to be aware of the dog-to-dog aggression in Salle Bhumlu and to distance themselves from the animals as appropriately as necessary to ensure an accidental bite is avoided.

The WMP were appropriately located approximately 30m from two drop toilets which were shared by the school. The sleeping area was more than adequate and safe for future projects to replicate.

A small, under-resourced health post was located near the centre of Salle Bhumlu. The 'community paramedic' who works at this post speaks good English and is keen to share his thoughts on medical assessment and diagnosis. The exact level of training and scope of practice of this person is unknown to WMP. He is the only medical service in the area.

The weather observed by the WMP team during 24th February to March 1st was mostly dry and mild during the day with a top of 20 degrees Celsius and a low of 3 degrees Celsius at night. However, thunder and lightning storms on the 27th and 28th of February produced the first snow storm seen in the area in over a decade. Snow fall recorded on 28th February.



Recommendations:

- Drinking water to dispense during clinic hours for patient administration of PO medication
- Extra physician for this area
- More band aids
- Moisturiser (sorbolene)
- Suitable sharps container
- Safe automatic lancets for BGL – single use sharp probes caused pain to patients and were an avoidable dirty sharp
- More cough bottle variation
- Duct tape
- Liquid tear eye drops
- Bars of soap (especially for hand hygiene section)
- More ninja gel and omeprazole
- Laryngoscope bulbs faulty
- Vaccinations, tetanus shots
- Extra clinic days
- Australian BGL monitors (the Nepalese 'on-call' BGL monitors were avoided due to faultiness)
- Be aware of dog-to-dog aggression
- NOTE: 3 pulse oximetry probes and 2 BP cuffs were rendered broken and irreparable prior to the clinic days. This equipment was removed and replaced with donations, however it would be recommended that future WMP teams plan on donating one or two SP02 probes or BP cuffs to replace current ageing equipment.

Report compiled by team leader Dean McCort. For any clarifications, please contact dean.mccort@gmail.com or deano_1111@hotmail.com