



Dear Mission Team Volunteer,

Hope Clinic International (HCI) wants to thank you for your interest in being part of a medical mission team to Nicaragua, to provide health care for children in medical need who have not yet had the opportunity to meet you.

The following is information regarding our 2009 Mission trips to Nicaragua.

Brief History of HCI

Dr. Dan Heffernan, a family physician, founded Hope Clinic International (HCI) in 1997. Dr. Heffernan was moved to establish HCI after personally observing the poverty, lack of medical resources and overwhelming need in Nicaragua, Central America. Dr. Heffernan is also the founder of Hope Medical Clinic in Ypsilanti, Michigan, established over 20 years ago to serve the working poor in his own local community.

The purpose of our international mission program is to provide donated medical and surgical help to women and children in Nicaragua where medical and/or financial resources and skills are not available. Our mission is built on Judeo-Christian principles that value the dignity of the human person and gives preference to the poor and those without hope.

Since its inception, HCI has sent volunteer **medical teams** to the towns of Estelí, Jinotega, Matagalpa, Leon, Masaya and Chinandega, Nicaragua, conducting walk-in pediatric clinics in partnership with the Saint Vincent DePaul Society in Nicaragua. The medical team cares for between 600 and 1,000 children during each two-week trip, and provides an examination and prescription medications. Each child also receives anti-parasitic medication and vitamins. HCI currently sends teams three times a year, in February, June and November.

HCI also has sent **surgical teams** to Chinandega and more recently to La Mascota Children's Hospital in Managua. During the annual surgical mission trips, volunteer surgeons have helped children with congenital and acquired defects needing complex surgical procedures. They have also trained Nicaraguan surgeons in these same procedures.

Volunteering for HCI

Team members are selected on the basis of their qualifications, the needs of the team and their ability to represent Hope Clinic International. Volunteers must be at least 18 years of age or be accompanied by a parent or adult given legal responsibility by the parent. Each participant becomes an ambassador not only for Hope Clinic International, but for all Americans. It is expected that all participants conduct themselves in a manner consistent with the mission of Hope Clinic International and that is sensitive to the cultural values of the Nicaragua people. Participants are expected to demonstrate responsible behavior that builds positive relationships, affirms the value of the individual and culture, contributes to respect for self and others, and brings hope to the poor.

Team Member Responsibilities

The Medical Team normally consists of a team leader, two to four physicians, translators, several nurses, medical students or other health care professionals and pharmacy support staff. The team will normally see between 60-100 children in a day.

The **physicians** must be willing to attend pediatric patients for generally minor acute care problems. More serious problems are referred to the local hospital in the towns we are working. We also request that physicians be willing to work with local physicians where we have the cooperation of a local provider of care.

The **translators** are assigned first to work with any non Spanish speaking doctors and then to the pharmacy to explain to the parents how to give the medications. The translators do not need to know medical Spanish but must understand and be able to translate colloquial conversational Spanish.

Nurses, medical students and other health care professionals that do not speak Spanish will either help with intake, i.e. height and weights, blood pressure and temps, or in the pharmacy filling prescriptions. **Non medical professionals** normally assist in the pharmacy or in the waiting room area helping entertain the children while they wait or helping in whatever way directed by the team leader.

The Surgical Team normally consists of a team leader, one to two surgeons, an anesthesiologist or nurse anesthetist, OR nurse, post op recovery/peds nurse, circulation nurse and 1-2 translators, 1-2 support staff or students. We work with the Nicaraguan surgeons and staff. Usually one or two Nicaraguan nurses assist us in the OR and keep records. The chief pediatric surgeon in charge evaluates patients for surgery on the first day of the week and then schedules the surgeries. All surgeries are considered teaching opportunities and some of the more complex cases can be very long.

Mission Team Costs

Total cost of the medical team trip per volunteer for 2009 is expected to be:

- o **\$700 (for 2 weeks – This does not include airfare).**
- o **Airfare typically runs between \$500 and \$700.**

**½ the Payment is expected by 3 months prior to departure (if airfare is included) and the remainder of the cost by one month prior.
If you are purchasing your own airline ticket, \$100 is expected 3 months prior to departure and the remainder 1 month prior.**

The above cost represents an average of the following expenses

1. Round trip airfare expenses to Managua, Nicaragua. Hope Clinic International will be responsible for making these travel arrangements (unless you would prefer to make your own arrangements), with every attempt to locate the lowest possible group rates available.
If you cancel your trip after tickets are purchased you will be responsible for the full cost of this ticket.
2. Personal lodging and meal expenses. HCI will make these arrangements.
3. Transportation costs in-country.

The cost of the trip is an average of total costs per team member and not an exact amount. Team members make a donation which is tax deductible to offset the overall cost of the trip. HCI does not charge team members for administrative expenses or medications and supplies.

The following are the personal responsibility of each team member:

1. Expenses pertaining to all personal phone calls, wants or needs.
2. The obtaining and paying of insurance on personal equipment, and personal medical, travel, accident, life, and liability insurance. (Many insurance plans do not cover when traveling outside the USA. You may want to purchase travelers insurance for the time you are away.)
3. The safety of personal belongs.
4. Immunizations. We suggest you consult your own physician, local health department or a Travel Clinic. Again, these expenses are your responsibility.
5. Passport and visa expense. (Visas are not needed in Nicaragua but there is a \$5.00 entrance fee.)
6. Help collect medical supplies and equipment. Typically each team member checks one bag of medical supplies that weighs less than 50lbs. We use a roll-away that is 62 lineal inches (Len + Width + H), the airline maximum size.
7. Participate in any orientation or packing team meeting for team members within driving distance to Ann Arbor, MI. The packing meeting is essential to the success of the mission trip. Please ensure that you have blocked out time for attending. It is typically held on a Friday evening about two weeks prior to departure.

Hope Clinic International will arrange and be responsible for the following:

1. All transportation in Nicaragua.
2. The coordinating of the entire medical trip and the liaison between HCI and our host, the Saint Vincent de Paul Society.
3. Medical supplies and equipment for your mission.
4. Permissions to practice from the Ministry of Health and all customs permits.

If you are interested in volunteering for a Mission please complete the attached Application Form and Fax it to me at: 734-929-6621 or mail it to the above PO Box.

Thanks again for your interest in volunteering; I look forward to hearing from you.
Please give me a call if you have any question at 734-929-6620

Sheryl Snyder
President
Hope Clinic International
ssnyder@hopeclinicinternational.org



MEDICAL TEAM APPLICATION

DATE: _____

P.O. Box 980573
 Ypsilanti, MI 48198-0573
 Tele: (734) 961-1224 Fax: (734) 484-6825

I am interested in being considered as a supporting team member for a future HCI mission trip.

Please Print:

NAME (AS IT APPEARS ON YOUR PASSPORT)		PASSPORT NUMBER	PROFESSION
NURSES, PARAMEDICS: LIST CERTIFICATIONS OR MEDICAL SPECIALTIES		STUDENT OR NON HEALTH CARE PROFESSIONAL PLEASE LIST AREA OF STUDIES OR EMPLOYMENT:	HIGH SCHOOL YEAR OF GRADUATION COLLEGE DEGREE(S) OR GRAD YEAR 1. 2.
ADDRESS (HOME)	CITY	STATE	ZIP CODE
PHONE NO. (HOME)			
ADDRESS (WORK)	CITY	STATE	ZIP CODE
PHONE NO. (WORK)			
SPANISH PROFICIENCY NONE <input type="checkbox"/> SOME <input type="checkbox"/> FLUENT <input type="checkbox"/> BILINGUAL <input type="checkbox"/>	HOW DO YOU PREFER TO BE CONTACTED EMAIL <input type="checkbox"/> REGULAR MAIL <input type="checkbox"/> <input type="checkbox"/> OTHER _____	IS THERE SOMEONE WE COULD CONTACT FOR A REFERENCE? PLEASE INCLUDE NAME AND PHONE #	
DESCRIBE ANY MEDICAL CONDITION OR ALLERGIES YOU HAVE THAT MIGHT REQUIRE SPECIAL TREATMENT ON THE TEAM TRIP			
EMAIL ADDRESS		I prefer to work with Medical team. <input type="checkbox"/> I prefer to work with Surgical Team. <input type="checkbox"/> I have no preference. <input type="checkbox"/> (please check one)	

Please write a brief statement explaining why you are interested in participating in a Medical Mission and how you found out about us.

If you have any further questions, please call us.
 Thank you for your application.

Send To:

Hope Clinic International
 P.O. Box 980573
 Ypsilanti, MI 48198-0573