

THE PURPOSE OF THIS PARTICULAR PROTOCOL IS TO MAKE WHAT WE BELIEVE TO BE HELPFUL SUGGESTIONS TO TEAMS AND TEAM MEMBERS AS TO THE LOGISTICS OF SETTING UP A MEDICAL CLINIC.

LAY-OUT OF THE CLINIC - We suggest that the supplies for the following areas of the clinic be grouped and boxed together and coded as such, so as to allay confusion when setting up the clinic.

A. Have one area (table, preferably) for DRESSINGS stocked with the following supplies:

1. Tape
2. 4 x 4'
3. gauze
4. dressings
5. basins
6. surgical scrub brushes
7. gloves
8. band-aids
9. alcohol, peroxide, betadine
10. irrigation set-ups
11. other supplies you deem necessary for this area.

B. Every medical station (table), should have the following medications:

1. Topical creams such as Cortaide, Triple Antibiotic, Antifungal, etc.
2. Vaginal creams and applicators
3. Liquid Tylenol (both kinds: children's & baby's)
4. Eye and Ear Medication
5. Injectable Antibiotics
6. Syringes and Needles
7. Alcohol Swabs
8. Sterile water or Saline for injection
9. Local Anesthetics
10. Albendazole

C. Have one area, (table), for MISCELLANEOUS ITEMS of the following nature:

1. IV tubing and starter kits (or equipment needed for starting IV's).
2. Cast supplies
3. Instruments of Various kinds
4. Ace wraps
5. Towels, linens, draps
6. Water bottles
7. Any supplies (including those from the other mentioned areas not in use).

D. Have 3-4 areas designated as stations for the examination of patients depending on available personnel. We suggest that each station be equipped with the following:

1. Some type of tray (a silverware tray works well), stocked with band-aids, cottonballs, tongue blades, pens and miscellaneous items you deem necessary
2. A small supply of the creams and liquid medicines to readily hand out, restocking as needed
3. Otoscopes, stethoscopes, penlights or flashlights, scissors, extra batteries, etc.

SUGGESTIONS FOR STRATEGIC PLACEMENT OF PERSONNEL

A. Have one nurse designated to screen and triage patients (this may involve the help of a non-professional person) in the following areas:

1. taking of blood pressures and vital signs
2. weighing of patients
3. rating the children and infants on the Growth and Development Scale
4. controlling traffic in and out of clinic (taking the people to the different stations and triaging the sicker ones to the physicians).

B. If available, have one professional fluent in Spanish conduct hygiene lectures before the people enter the clinic. This works best if this person receives small groups of people directly from the evangelistic services, meets with them for 5-10 minutes teaching preventive health education (basic hygienic instruction), and then from here the people are directed to the screening nurse in the clinic. This professional will need Laminated pictures demonstrating the following:

1. handwashing techniques
2. how germs are spread
3. proper disposal of human excrement
4. proper nutrition

C. If available, have one nurse designated as a floater who handles:

1. scrubbing and dressing of wounds
2. assisting in any minor operative procedures
3. assisting in any other miscellaneous procedure or emergency
4. giving all injections
5. keeping the stations organized and supplied with creams and liquid meds
6. perform any other duties necessary including examination of patients if needed

RESPONSIBILITIES OF THOSE INTERVIEWING THE PATIENTS

Each professional interviewing patients needs to obtain the following information and DOCUMENT IT on the patient's card:

- A. Whether or not a qualifying female is pregnant and/or breast feeding (if pregnant, how far along)
- B. The grading of diarrhea on a scale similar to: 1-3 stools per day--MILD, 4-5 stools a day--MODERATE, 6 or greater stools a day--SEVERE
- C. A written out PRIMARY DIAGNOSIS (this is gleaned from the primary complaint, what they state is their problem) even though as a professional you may ascertain an underlying problem of more significance - You may include this and other findings in a SECONDARY DIAGNOSIS along with appropriate designated treatment.
- D. If patients are referred to a regional hospital
- E. If patients have a communicable disease such as:
 - 1. Mumps
 - 2. Measles
 - 3. TB
 - 4. VD
 - 5. Rabies
 - 6. AIDS
- F. ASKING if patient has any drug allergies and making sure this is documented on the card
- G. Putting your initials and date on all cards

OTHER HELPFUL SUGGESTIONS

- A. In one of the team meetings prior to going, have the Pharmacist/Physician review the formulary with each medical professional and provide helpful information as to what drugs could be used to treat the various maladies possibly encountered.
- B. Provide a copy of the formulary to each clinic team member as well as a list of the medical supplies being taken.
- C. Have each clinic team member bring their own otoscope, stethoscope, penlight/flashlight, scissors, and extra batteries if possible.
- D. Suggest that women and men wear scrubs during clinic hours (they are easy to pack and dry quickly after sweating.)
- E. The following reference material may come in very handy for use in the clinics:

1. Emergency treatment reference (EmergiCard Cards)
2. Merck Manual
3. Internal Medical Handbook
4. Some form of Drug Reference Book
5. Some from of Spanish Medical Book
6. Spanish Dictionary
7. The book "Where There is No Doctor" in English, and also in Spanish "Donde No Hay Doctor"
by Dr. David Werner.

Most of the above books may be purchased for your convenience through Amazon.com by clicking on the Mission Book Store link in the column on the left of this page.