

NEXUS

Physician Assistants for Global Health Monthly Newsletter

**MARCH
2013**

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Making an Impact Abroad



Despite how many times we have traveled internationally, after a certain amount of time in the United States, the memory of the healthcare disparities which exist abroad can begin to fade. I found this out personally several weeks ago during a trip along a remote road which traces the Myanmar/Thailand border when I came upon a group of Germans in medical need. The road we were on was very steep, full of blind curves, and a prime place for an accident to occur. The group had been dirt biking the whole day when one of their members traveling downhill struck a truck coming around a corner. Although the dirt biker had been able to slow down somewhat, as he was braking he flew over the handlebars and struck his un-helmeted head on the side of the truck.

When we came on the scene, about 5 minutes after it happened, he was lying on the ground next to the truck (thankfully he hadn't been moved since the collision), bleeding profusely from two large lacerations on his forehead

from his impact with the truck, but fully awake and alert. After ensuring that the victim had compression on the lacerations and relative C-spine support, I settled back to wait for the ambulance to arrive from a hospital located in a nearby city. The medical transport and personnel which arrived and the manner which this high-risk patient was transported was a stark reminder for me that developing countries, even one which seems as progressive as Thailand, are in constant need of additional medical training and assistance.

As PAs, we enjoy a vast breadth of medical knowledge and skills which makes our profession ideal to continue to help improve medical care and quality around the world. The important part is to recognize the need and begin to enact a change. As we speak, many current and former PAGH members are already making this a reality. Whether deep in the mountains of Tajikistan or near the US-Mexico border, they have taken it upon

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PAGH


Physician Assistants for Global Health
Local Hands, Global Reach



World Update: Influenza Pandemic, 2012-2013

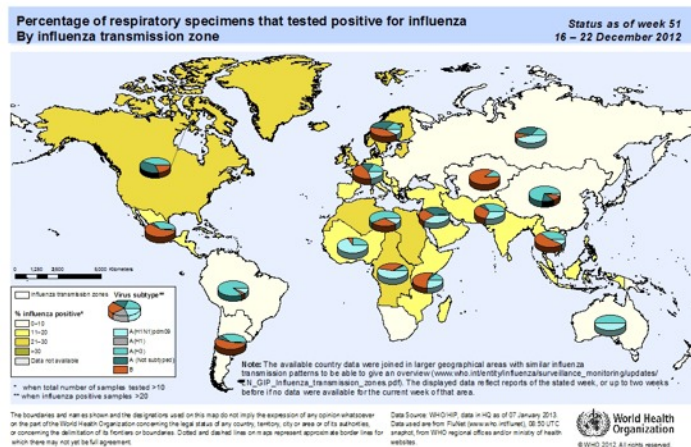
Olivia Bockoff, PA-C

The hot health topic sweeping the US this month seems to be influenza season, which has already resulted in many deaths and severe illness in others. This is also true around the globe. The World Health Organization monitors and releases influenza updates frequently throughout the season. They are reporting that many countries have had increase in influenza activity over the past few weeks including North America, Europe, North Africa, eastern Mediterranean, and temperate Asia. Some areas are seeing decreases in influenza activity including countries in sub-Saharan Africa, with the exception of Congo and Ghana, and the Caribbean, Central America, and tropical South America.

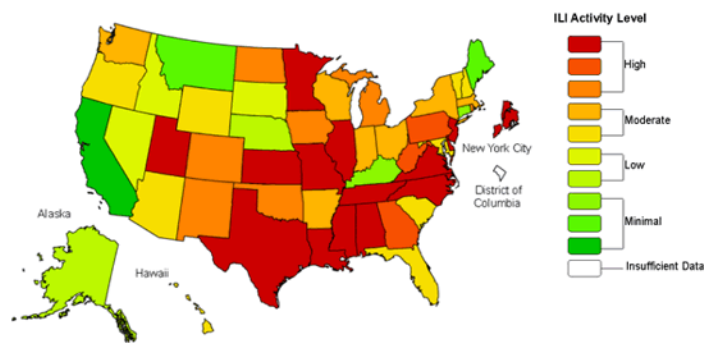
In the United States influenza activity has sharply increased and the CDC reports this is the earliest season in nearly a decade. Influenza and pneumonia mortality is slightly above epidemic threshold. The activity, which was originally isolated in the eastern half of the USA, has now spread to include almost all states with the exception of the Pacific coast. The main viruses seen are influenza A H3N2 (98% of A virus), 2009 H1N1 (2% of A virus). Influenza B has also been identified with increased numbers seen in Canada. The tested isolates have shown no resistance to oseltamivir and zanamivir. Adamantanes (amantadine and rimantadine) are not effective against influenza A or B isolates. According to the CDC, the influenza vaccine 2012-2013 is thought to be 60% effective based on early data. 

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themselves to ensure that they are making an impact. Many of our student members are completing international rotations – the groundwork for future work around the world. One of our Student Representatives, Emily Pilachowski, is completing an international rotation in Northern Thailand, less than 200 miles from where the dirt bike accident mentioned above occurred. Even those who cannot make the trips themselves can support the causes of their fellow PAs or PA students with funds, supplies, or logistical assistance.



Influenza-Like Illness (ILI) Activity Level Indicator Determined by Data Reported to ILINet
2012-13 Influenza Season Week 1 ending Jan 05, 2013



Centers for Disease Control . (2013, January 5). Retrieved January 15, 2013, from www.cdc.gov/weekly/flu (below)

World Health Organization. (2013, January 07). Retrieved January 15, 2013, from www.who.int/influenza/surveillance_monitoring/updates (above)

Regardless of the form your participation in global healthcare takes, the most important part is to act. You have already shown your dedication to healthcare by becoming a PA and you have shown your passion for global health by becoming a member of PAGH. Now, if you haven't already, please be sure to take the next step by showing your commitment to all human beings and become involved.

Sincerely,
Jacob Hauptman, PA-C, President
Physician Assistants for Global Health



International Career Spotlight: Comparing the US Peace Corps to the Department of State

Fritz Fuller, REMT-P, PA-C, DTM&H, MPH&TM

Working for both the United States Peace Corps and the Department of State have provided me with an amazing personal and professional experience. Currently, I am a Foreign Service Health Practitioner (FSHP) in Vientiane, Laos with the State Department. Prior to this, I served as a Peace Corps (PC) Medical Officer in Yaoundé, Cameroon. My next move will be to the US Embassy in Tashkent, Uzbekistan. For those interested in such a career path, I'd like to compare both United States Government (USG) organizations.

Desired Attributes, Application Process

Both the Peace Corps and the State Department require at least 3-4 years of hands-on primary care clinical experience. They look favorably on independent practice experience, especially in remote areas without immediate physician back up. My colleagues in both organizations have experience in rural settings, often Emergency departments or Primary/Urgent care. Although Pediatric experience is mandatory for the State Department, experience across the age spectrum is highly favorable in both organizations, as are clinic management, military and preventative medicine experience.

I was able to take advantage of an American Society of Tropical Medicine approved diploma course (www.astmh.org/approved_diploma_courses/4669.htm). This was an excellent full time, two month program at West Virginia University. While neither organization requires such a course, I found it helped distinguish me from other applicants and was extremely useful in daily clinical practice. This is especially true for the Peace Corps, where virtually all their assignments are in the tropics.

The PC process is quick and straightforward. Once your application goes through the initial screening process, they contact you and conduct a phone interview and, if selected, your name is placed on a list for potential openings. Then you can expect a call and another interview with the PC Country Director of the country with an

opening. If that goes well a contract will be negotiated. This can take several months.

The State Department is a more involved process. Once the voluminous application materials are submitted and screened for minimum requirements they will contact you for an interview. This takes place in DC and involves an oral interview and test of compositional proficiency. Once you pass this, your name will be placed on a list and a thorough background investigation is conducted. When an opening arises, you are invited to join an orientation program in DC. Typically this process takes 12-18 months.

First Assignment

With the Peace Corps, I chose the first opening they offered but you could potentially pass up one or two. The State Department is similar to the military in that they direct your first assignment. Both organizations reward longevity with "nicer" assignments. The countries with midlevel providers are listed on the respective web sites and are subject to change.

Daily Life

One of the things I really enjoyed about the PC was taking care of the volunteers. They are an incredibly eclectic, smart, complex and frankly idealistic bunch. This also holds true for the folks in the State Department.

For the Peace Corps, I managed a small clinic at the country's headquarters. These are usually located in capitol cities, however most of the volunteers are spread out across the entire country. This made caring for them more challenging. "Text medicine" was the most frequent means of communication. Living in more austere conditions, the PC volunteers tend to get local diseases such as malaria, typhoid, parasitic diarrhea, schistosomiasis, etc. The challenge was assessing them via text or over the phone and directing them to a local medical resource for an evaluation.



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The Peace Corps Medical Officer (PCMO) was expected to travel to the sites where volunteers lived to assess their housing safety and evaluate the PC volunteer. I would also attend “in service” training events for the PC volunteers where they came together in large numbers for professional development. Conducting prevention training was an important part of the job.

With the State Department, I am stationed at the embassy and my primary job is providing primary care for the American staff and their families. I also do a limited amount of occupational medicine for the large local staff. The staff of the embassy is generally located in the capitol city, although they do travel extensively within the country. One of the USG oddities is that the FSHP takes care of direct PC employees, not the PCMO. I do not take care of Americans who happen to be in town for various reasons unless on official orders from the US government.

Another intriguing part of both jobs is assessing in-country medical resources. Anyone who has volunteered or worked in the developing world knows medical resources can run the gamut from a fully equipped, well trained and staffed international NGO or other donor funded/run hospitals, to the worst equipped clinic with poorly trained staff. Traveling the country to do these assessments is an amazing and humbling experience.

Those of you used to coming to work and seeing a lot of patients will have an adjustment in both organizations. I found a lot more time is devoted to meetings, emails, interacting with local medical resources, and conducting training. Coming from an Emergency Medicine background

this is undoubtedly one of the bigger challenges, although not necessarily unwelcome.

Another important aspect of the job is emergency preparedness. Acutely sick or injured patients can be a challenge to evacuate under ideal circumstances. A great deal of time in both jobs is preparing for disaster/emergency type scenarios. Less emergent medical evacuations typically require a collaborative discussion with your supervising doctor in a regional center. As a midlevel I have been extremely impressed with the quality of the physicians hired by both groups, the ease of communication, and respect for professional autonomy.

The backbone and institutional memory of both organizations is the locally hired staff. This is typically a host country nurse or physician. I have had the pleasure of working with several high quality nurses and doctors in both organizations. They are the ones who know how things work and how to get things done. If you don't have the language skills they also provide yet another under-appreciated service.

Challenges and Rewards

Both groups provide for amazing travel opportunities and generous vacation and sick time. They both provide a week of paid CME usually at an overseas location. Also, I have particularly enjoyed interacting with expatriate medical providers. They are a fascinating group working for a variety of organizations. Clinically, while it can at times be much slower than your average US clinic or ED, you get to see and manage a wide variety of tropical diseases other have never heard of.

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Interested in working for the U.S. State Department?

If Mr. Fuller's experience working with the State Department appeals to you, visit the link at the end of the article for vacancy details. Now accepting applications! Due **March 13, 2013**.

Please Don't Forget To Renew!

PAGH needs to your continued support to grow! If your membership has expired, please go to www.pasforglobalhealth.us to renew now!




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If you have never lived or spent time in the developing world it can be a challenge. Both organizations provide rent-free housing and will pay to have your effects transported overseas. The PC uses a contracting model for their PCMO's (1099 worker), whereas the State Department hires you as an employee. This does present practical challenges and slightly marginalizes the PCMO's. Ironically the PC has several regional doctors who are hired as full PC employees.

At the end of the day I felt the State Department took better care of me and my family while living overseas. With the State Department I receive a full compliment of benefits including paid vacation/sick time, retirement, bonuses and access to everything at the embassy. I was also provided health insurance and medical evacuation coverage. However I know plenty of PCMO's who are very happy with their contracting arrangements.

One of the other personal concerns I had when considering working for the State Department were my political views. This turned out to be completely unwarranted as State really has a broad

spectrum of ideologies in the workforce. My other initial hesitation for serving with the State Department was the possibility of assignment to a war zone. While they make it clear you are signing up to meet the needs of the service, the midlevel providers at State have readily volunteered for those tours. To date they have not forced midlevels into war zone assignments. 

Information on Career Opportunities

<http://careers.state.gov/specialist/vacancy-announcements/hp>

<http://www.peacecorps.gov/jobs/contracts/medical>

Fritz Fuller, REMT-P, PA-C, DTM&H, MPH&TM (c) is a former Air Force Medic, firefighter / paramedic and former PAGH board of director member who can be reached at fullerfp@state.gov.

The opinions expressed herein are the author's alone and do not represent the views of the US Department of State or the US Peace Corps.

Student Corner

Emily Pilachoski, PA-S; Kendra Cutter, PA-S

Hello fellow students! 2013 is shaping up to be a big year for PAGH! As some of you may know, last month we welcomed Kendra Cutter as the new student co-rep, who is stepping in to replace Jenny. Kendra is a second year student from Pacific University, and she is excited to come on board. Look for emails from her in the future!

We have also begun preparation for our annual meeting at the AAPA conference. If you are planning on attending the conference, we love for students to volunteer to work the PAGH booth for a few hours. It's a great way to meet fellow PAGH members, learn more about the organization, and purchase a PAGH t-shirt. Jenny and Brittany, two of our former student reps, are giving a talk on refugee health, so make sure you check them out! We will keep you updated as plans evolve.

Finally, we need your help! We need contributors for the Student Corner, so if you or someone you know likes to write, we'd love to hear from you! We would also like to hear from you if you have questions about PAGH or PA school in general, concerns, or ideas on how to make PAGH better. I have received some great emails recently from student members excited about global health and have been inspired by your enthusiasm.

Until next month!

Emily & Kendra
epilachowski@gmail.com
kendra.cutter@pacificu.edu



Announcements

Welcome To Our New and Returning Fellow Members!

April Grisetti, Julie Golden, Kristi Hembre, Karen Beaulieu, Rosanna Zuckerman, Karen Hipp, Yvonne Franco, Percival Van Daam, Barbara Jordan, Larry Mack-Wilson, Joy Horstmam

Welcome To Our New and Returning Student Members!

Audrey Adams, Jennifer Elkins, Michelle Gardner, Christie Blondek, Suzanne Alley, April Kennedy, Jordan Robinson, Kaitlin Ahern, Paterson Rene, Victoria Zappi, Ross Davis, Damaris Rosado, Mallory Danielson, Jeremy Akers, Laura Erdman, Mathilde Sullivan, Kristen Hasbargen, Morgan Pearman, Elizabeth Hewes, Laura Stulken, Anna Conetta

Student scholarship applications for 2013 are available now!

For an application, please contact your Student Representative Emily Pilachowski (epilachowski@gmail.com). Due date is April 14, 2013

PAGH Positions Open:

CME Chair

(2 year position)

We are already in the midst of planning for the 2013 PAGH Global Health Symposium and it is a perfect opportunity to learn the ropes so you can then lead the planning for our 2014 PAGH Global Health Symposium.

Membership/Volunteer Chair

Help recruit future members and maintain our current membership. This position will also be in charge of coordinating any PAGH volunteers!

Research Committee

Help coordinate and execute research projects directly related to global health and the PA role. Please contact Lea Dunn for more information: leamdunn@yahoo.com

Global Health and Innovation Conference

Yale University in New Haven, Connecticut. April 13-14, 2013

Over 2,200 professionals and students from all 50 states and more than 55 countries will be attending this event, which is billed as the world's largest global health conference.

www.uniteforsight.org/conference

Helping Babies Breathe, Master Trainer Course

University of Colorado. May 9-10, 2013

www.helpingbabiesbreathe.org

Exploring Medical Missions Conference

Institute for International Medicine; Kansas City, Missouri. May 31-June 1, 2013

http://inmed.us/exploring_medical_missions_conference.asp

International Training Courses Available

Oregon Health and Sciences University; Portland, Oregon. Sept 12-Nov 22, 2013

www.ohsu.edu/xd/education/continuing-education/global-health-center/global-health-education/ptgh.cfm



Announcements / Careers

Ultrasound Courses Available

A link from our conference lecturer, Dr. von Tander to his NEJM article:
<http://www.nejm.org/doi/full/10.1056/NEJMra0909487>

Links gathered through Yale University:

http://yale-eus.com/Yale_Emergency_Ultrasound/Courses.html
www.sonoguide.com/ (free online seminars)
www.emergencyultrasound.com/course_calendar.php
www.sonosite.com - loans US machines for global health missions

Also check your local Emergency Medicine chapter, school or Global Health program (e.g: UCSD or Ohio Academy of Emergency Physicians):

www.ohacep.org/aws/OACEP/pt/sp/cme_ultrasound (no 2013 schedule yet)

Clinical Associate Mentor, South Africa

American International Health Alliance, a government-funded non-profit that works in global health primarily in Sub-Saharan Africa, is actively recruiting **Clinical Associates Mentors** to serve in a 3-12 month placements in South Africa. Launched in 2008 by the South African Department of Health, Clinical Associates are similar to Physician Assistants and are dramatically increasing the number of mid-level medical professionals in the health workforce who are able to confront the country's immediate health needs.

The Volunteer Healthcare Corps began a South African Clinical Association Mentorship Program, providing US professionals (primarily physician assistants) with the opportunity to serve as mentors and clinical trainers of the students while they are in the district hospitals, often located in rural areas. This is an unique opportunity for highly skilled health professionals to directly apply their skills and expertise in a place that desperately needs it.

www.twinningagainstaids.org/documents/SouthAfricaCountrySnapshot07-09-12.pdf

Please contact Sara Adelman for more information about this post: sadelman@aiha.com

U.S. Virgin Islands, Orthopedics and Sports Medicine

See job description on the AAPA Job Link site for more details about this unique opportunity:

www.healthcareers.com/aapa/job/certified-physician-assistant/1386743

U.S. Department of State

Now accepting applications for Foreign Service Health Practitioners. Due **March 13, 2013**.

<http://careers.state.gov/specialist/vacancy-announcements/hp>

Positions Open in Afghanistan

Onsite OHS is looking for PAs to work in Afghanistan. Make a difference to EXPATS and Third Country Nationals in our clinics. Bring your boots and spirit of adventure! 12 month contract for up to \$205,000 plus benefits. For more information please go to www.onsiteohs.com or contact jessie.dyer@onsiteohs.com



Upcoming Medical Service Trips

Project C.U.R.E.

www.projectcure.org

Nicaragua: March 1 - March 10, 2013

Timmy Global Health

www.timmyglobalhealth.org

Tena, Ecuador: March 2-10, 2013

Quito, Ecuador: March 9-16, 2013

Quetzatenango, Guatemala: March 9-17, 2013

Monti Cristi, Dominican Republic: March 9-17,
2013

Medical Relief International

www.medicalreliefinternational.org

Haiti: March 15 - March 23, 2013

The Tandana Foundation

www.tandanafoundation.org

Ecuador: March 16 - March 31, 2013

International Medical Relief

www.internationalmedicalrelief.org

Nicaragua - March 9 - 17, 2013

Ethiopia - April 18 - 28, 2013

Flying Doctors of America

www.fdoamerica.org

Panama: March 9 - March 17, 2013

Palmetto Medical Initiative

www.palmettomedical.org

Uganda: March 8 -18, 2013

Nicaragua: March 9 - March 19, 2013

Health Horizon International

www.hhidr.org

Dominican Republic: May 4 – 11, 2013; August
31 – September 7, 2013; January 4 – 11, 2014.

Amazon Promise

www.amazonpromise.org

Villages of the Yarapa, lower Ucayali, and lower
Maranon rivers: May 11 - 25, July 13 - Aug 3,
Sept 7 - 28, 2013.

Mountain Medics International

www.mountainmedics.org

Pisco, Peru, Earthquake Recovery: Ongoing
Cordillera Huayhuash, Peru: August 3 - Au-
gust 16, 2013

Flying Samaritans

www.flyingsamaritans.net

Frequent trips originating from California and
Arizona to clinics throughout
Baja California, Mexico

Peacework Medical Projects

www.peaceworkmedical.com

Ranquitte, Haiti: Summer 2013

Sea Mercy, Floating Health Care Clinic

www.seamericy.org

Tonga: June - August 2013



Volunteer Organizations

If you are aware of any trips or organizations that are looking for PA volunteers, please contact Olivia at obockoff@gmail.com. Please Note: it is not our desire to promote specific organizations only to connect PAs with opportunities and encourage professional philanthropy. This information is not an endorsement of these organizations.

Africa Cancer Care Inc - International opportunities with an oncology focus.
www.africacancercareinc.org

Amazon Promise - Medical trips to portions of the Amazon Basin. www.amazonpromise.org

Benjamin Wellness Center - Opportunities in Gatamaiyu, Kenya. www.benjaminwellness.org

Christian Medical and Dental Assistance - www.cmda.org

Community Coalition For Haiti - need for medical professionals for 1-2 week trips to staff a primary clinic in Jacmel, Haiti. www.cchaiti.org

Exploration Logistics - Places PAs worldwide to serve as medical support for various expeditions. Positions include oil rigs and other industrial projects, etc. www.elgfze.com

FIMRC Global Health Volunteer Program: Opportunities in El Salvador, Nicaragua, Peru, Costa Rica, India, and Uganda. www.fimrc.org

Flying Doctors of America provides medical assistance and hope to as many of the poor and needy as they are able to reach. Medical & dental teams to wherever the current need is.
www.fdoamerica.org

Flying Samaritans Mexico - year-round for Baja California, Mexico. www.flyingsamaritans.net

Goabroad.com - Assists different professions with placement internationally. www.goabroad.com

Grounds for Health - Uses PAs in Africa, Mexico, Peru, Nicaragua. www.groundsforhealth.org

Health Horizon International - www.hhidr.org

Health Volunteers Overseas - looking for volunteers to train and educate local health care providers around the world. www.hvousa.org

HealtheChildren - Ecuador, Haiti. Contact: jensorooni@gmail.com. www.healthechildren.us

Heart to Heart International - weekly trips to Haiti and Guatemala. www.hearttoheart.org

Hospitals of Hope - Year-Round Clinic work opportunities in Bolivia, Haiti, and Liberia.
www.hospitalsofhope.org

ICHA Outreach to fight Cardiovascular Disease - Opportunities in Ghana.
www.ichaonline.org



Volunteer Organizations

International Medical Relief :Currently recruiting for a trip to Pakistan. Also trips to Asia, Africa, South & Central America, Eastern Europe. www.internationalmedicalrelief.org

Kenya Relief - www.kenyarelief.org

Lalmba - Lake Victoria in Kenya and in a rain-forest in Ethiopia. Goals are clinical medicine, coupled with public health, and working with local physicians. www.lalmba.org

Medical Missions Response - North Africa, Middle East, South/East Asia. www.mmronline.org

Mercy Ships - volunteer opportunities aboard “hospital ships”. www.mercyships.org

Mountain Medics International - Cordillera Huayhuash, Peru. www.mountainmedics.org

Nunoa Project - two trips a year to Peru. www.nunoaproject.org

NYC Medics - deployment to disaster zones and humanitarian emergencies. www.nycmedics.org

Omni Med - work focused in Uganda. www.omnimed.org

Operation Smiles: providing surgeries around the world. www.operationsmile.org

Palmetto Medical Initiative - www.palmettomedical.org

Panama Global Connections - www.panamaglobalconnections.com

Peacework Medical Projects - www.peaceworkmedical.com

Physicians for Peace - work in Central/South America, Africa, Asia. www.physiciansforpeace.org

Project Hope - land based and ship-based care to regions around the world. www.projecthope.org

Rotations and Courses Internationally - www.gorgas.dom.uab.edu and www.cugh.org

The Carolina Honduras Health Foundation - Limón, Honduras. Active clinic, frequent need for medical volunteers. www.carolinahonduras.org

Timmy Global Health - looking for volunteers year-round. www.timmyglobalhealth.org

US Doctors For Africa - utilizes PAs for Africa work. www.usdfa.org

WellShare International - www.wellshareinternational.org

Editor’s Note: In an effort to maintain consistency, monthly issues of NEXUS will be named for the month for which they precede. Monthly editions will be published shortly before the month of their title, or on the first day of the month. Thus, this is the March edition. As a result of this naming convention, there will not be a “February 2013” edition. Apologies for the confusion during this transition. -CE

Help Nexus Improve! Your input can make a difference for future issues of Nexus. We welcome suggestions/submissions for future Book Reviews, Spotlights, or other features. And of course any and all comments are welcome. Contact chad.eventide@gmail.com

