

The Volunteer Connection



Summer 2011

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Society of Gynecologic Oncologists

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CFC # 12147
United Way # 0342

HVO Programs Encompass Cancer Care

72% of all cancer deaths occur in low and middle income countries

HVO has recently been expanding its efforts in global cancer care. With the support of our sponsors - American Society of Clinical Oncology (ASCO), American Society of Hematology (ASH), and our newest, Society of Gynecologic Oncologists (SGO), HVO is able to offer opportunities to address this critical need in additional regions of the world.

According to the World Health Organization, "cancer is a leading cause of death worldwide and accounted for 7.6 million deaths (around 13% of all deaths) in 2008." By 2030, the number of deaths is projected to exceed 11 million. What makes this issue so relevant to HVO is that 72% of all cancer deaths occur in low and middle income countries, and 30% of all cancer deaths can be prevented.

The CDC states that, globally, 12.7 million people each year learn that they have cancer. While there are many types of cancer, those resulting in the most deaths are lung, stomach, liver, colorectal, and breast. Among women in low-income countries, cervical cancer is a leading cause of cancer death, and liver and stomach cancers are more common in developing countries than in the US.

HVO's initial programs in providing training in oncology were through our hematology programs developed in conjunction with ASH. HVO currently has three hematology programs addressing the need for training in the treatment of malignant blood disorders including leukemia (cancer of the bone marrow's blood-forming cells) and lymphoma. Hematology volunteers with expertise in that area can provide training to their colleagues in Cambodia, Uganda and Peru.

Leslie Kean, MD, PhD, is HVO's Program Director for the Hematology Program in Cambodia. She recently reported on the work there:

HVO and ASH are also helping to establish a leukemia treatment strategy for the Angkor Hospital for Children (AHC) in Siem Reap, Cambodia. Although in developed countries leukemia can currently be cured in more than 80% of children, in resource-poor countries, such as Cambodia, many children still go untreated, and die of this otherwise curable disease. In collaboration with the physicians at AHC, volunteers from HVO are helping to establish treatment strategies for leukemia at the hospital. This includes linking the AHC with established leukemia treatment centers in the US and other countries, sending volunteers with expertise in leukemia to help train the physicians at AHC, and providing ongoing consultation on leukemia diagnosis and treatment.

The devastating impact of cancer knows no boundaries and, increasingly, it is becoming a focus for health ministries in developing countries.

continued on page 6



Health Volunteers Overseas • Improving Global Health Through Education

News & Events

LETTER FROM THE EXECUTIVE DIRECTOR



“Volunteerism is a source of community strength, resilience, solidarity and social cohesion. It can bring positive social change by fostering respect for diversity, equality and the participation of all. It is among society’s most vital assets.”

*Secretary-General Ban Ki-moon
Message for the International Volunteer Day
for Economic and Social Development
5 December 2009*

Dear Friends,

Some thirty years ago, I served as a Peace Corps Volunteer in South Korea. For the last couple of years, the Korean government has very generously hosted return visits for volunteers and I am anticipating a return to my program site in the fall. While I am certainly eager to see all the changes that have occurred in that time, I am most looking forward to seeing friends, colleagues, and acquaintances at my site. When I first arrived, I was considered a bit of a novelty and was often the catalyst for much laughter. After working and living among this community, I was accepted as a member and a valued colleague.

The experience I gained as a volunteer certainly shaped my life and I hear similar expressions from HVO volunteers. Tangible change at a site may be difficult to see but, with time, it is apparent. Just as difficult to quantify is the change that occurs in volunteers and their counterparts as they begin to see the world through others’ eyes. As the Secretary-General states, such an experience fosters “respect for diversity, equality, and the participation of all.”

I wish you all a wonderful spring, and many opportunities to volunteer!

Sincerely,

Nancy A. Kelly, MHS

Nancy A. Kelly, MHS
Executive Director



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- Academy of Dentistry International
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- Pediatric Orthopaedic Society of North America
- UCSF - Department of Orthopaedic Surgery
- University of Utah, Department of Orthopaedics



Active Program Sites

CURRENT VOLUNTEER OPPORTUNITIES

Anesthesia

Ethiopia	2 - 4 weeks
India	2 - 4 weeks
Peru	1 - 4 weeks
South Africa.....	2 - 4 weeks
Vietnam	2 - 4 weeks

Dermatology

Cambodia	2 - 3 weeks
Costa Rica	1 - 2 weeks
India	2 weeks
Peru.....	1 - 4 weeks

Hand Surgery

Honduras	1 week
Peru.....	1 - 2 weeks

Hand Surgery/Hand Therapy

Nicaragua	1 week
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Hematology

Cambodia	2 - 4 weeks
Peru.....	1 - 4 weeks
Uganda.....	2 - 4 weeks

Internal Medicine

Bhutan	1 month
Cambodia	2 - 4 weeks
India	2 - 4 weeks
Peru.....	2 - 4 weeks
Uganda	1 month

Nurse Anesthesia

Bhutan	1 month
Cambodia	2 - 4 weeks
Ethiopia	2 - 4 weeks

Nursing Education

Cambodia	2 weeks
India	2 - 4 weeks
Tanzania.....	3 - 4 weeks
Uganda.....	3 - 4 weeks

Oncology

Ethiopia	2 - 4 weeks
Honduras.....	1 - 4 weeks

Oral Health

Cambodia	2 weeks
Honduras.....	2 weeks
Laos.....	1 - 2 weeks
Peru.....	1 - 2 weeks
Rwanda	2 weeks
Samoa.....	2 weeks
Tanzania	2 weeks

Orthopaedics

Bhutan	1 month
Cambodia	2 - 4 weeks
Cameroon	1 month
China	2 - 4 weeks
Costa Rica	1 week minimum
Ghana.....	2 - 4 weeks
Malawi	1 month
Moldova.....	2 weeks
Mongolia	2 - 4 weeks
Nicaragua	2 weeks
Peru.....	2 week minimum
St. Lucia	2 - 4 weeks
South Africa	1 month
Tanzania.....	2 - 4 weeks
Uganda	1 month

Pediatrics

Bhutan	1 month
Nicaragua	2 - 4 weeks
St. Lucia	2 - 4 weeks
Uganda.....	1 month

Physical Therapy

Bhutan	4 months
Ethiopia	2 - 4 weeks
Haiti	2 - 4 weeks
India	2 weeks
Peru.....	2 - 4 weeks
St. Lucia	2 - 4 weeks
Suriname	2 - 4 weeks
Vietnam	2 - 4 weeks



Photo courtesy of Ted Sussman

*Volunteer Ted Sussman –
Internal Medicine - Cambodia*

Special Projects

Emergency Medicine

Bhutan	1 month
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Mental Health

Bhutan	3 months
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Pharmacy

Uganda.....	1 month
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Wound Management

Cambodia	1 - 2 weeks
India	1 - 2 weeks
Peru.....	1 - 2 weeks
St Lucia	1 - 2 weeks

Please Note: New programs are added regularly and volunteer assignments are made on a rolling basis. For the most up-to-date information on volunteer sites and scheduling, contact the HVO Program Department: programs@hvousa.org or 202-296-0928. Visit the website www.hvousa.org.

News & Events

SUPPORT FOR HVO

IRA Rollover Extension

A recent tax act has extended Individual Retirement Account (IRA) rollovers to charitable organizations such as HVO through December 31, 2011. Individuals who are age 70 ½ or older can make tax-free distributions of up to \$100,000 per taxpayer from IRAs (either traditional or Roth) that are transferred to charities. For more information on this opportunity please consult your tax and/or financial advisors. **Remember this opportunity expires December 31, 2011.**

SGO Joins as Sponsor

HVO welcomes the Society of Gynecologic Oncologists as a sponsor. Formed in 1969, the mission of SGO is to “promote and ensure the highest quality of comprehensive clinical care through excellence in education and research in gynecologic cancers.” Their membership of more than 1300 members includes gynecologic oncologists as well as candidates, fellows, and residents in oncology training programs. HVO looks forward to working with SGO as HVO expands its programs in cancer care.

I Do Foundation

For those getting married, please remember that a wonderful way to acknowledge your commitment is to register with the I Do Foundation. Designate HVO as the recipient for charitable donations and urge friends and family to contribute, in lieu of wedding presents. Further information can be found at www.IDoFoundation.org



A planned gift ensures that HVO will be able to continue to make important educational strides in the improvement of health care in developing countries.

When you write or review your will, please consider leaving HVO a charitable bequest as an investment in HVO's future. You may bequeath a specific amount of money or a percentage of your estate. Another relatively simple option is to designate HVO as the beneficiary of a life insurance policy or the assets of a retirement plan.

If you are interested in creating a charitable bequest in your will or in discussing some other charitable aspect of your estate planning, please contact Nancy Kelly at giving@hvousa.org. If you have already made a charitable bequest, please let us know! We will honor all requests to remain anonymous.

Thank you to the following people who have made such a commitment:

Anonymous (3)
Kim Dunleavy, PhD, PT, OCS
Dr. & Mrs. David Frost
Nancy Kelly & Michael Hagan
Celia Pechak, PT, PhD, MPH
Steven Stoddard, MD

Richard Coughlin, MD
Germaine Fritz, DO
Elaine Goodall, PT, MEd
Paul Muchnic, MD
James Pembroke
Dr. & Mrs. Harry Zutz



News & Events

CELEBRATING HVO'S 25TH



Health Volunteers Overseas

Included in the 2010-11
*Catalogue for
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the best small charities in
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region.”

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Get ready for our 25th anniversary!

HVO plans to observe its 25th anniversary with a year-long celebration. The kick-off will be August 1, 2011, with the official anniversary on April 7, 2012 (World Health Day). We will be launching a new anniversary page on the website

where we will share information on upcoming events to mark the occasion, as well as stories and photos. A photo contest is planned, so start looking through your photos and trip reports. We hope to have a variety of photos and stories to share, all the way back to the early days of 1986. For those who have consistently volunteered over many of those years, and wish to share photos of how volunteering has allowed them to age gracefully, we will be happy to show the world!



Resources on the HVO website – www.hvousing.org

KnowNet Tutorial

Want to learn how to use the HVO KnowNET? Check out the PowerPoint tutorial located under **Resources** in the **Volunteer Toolkit** (<http://www.hvousing.org/volunteerToolkit/knownet.shtml>). This tutorial will walk you through the basics of navigating the site and will give you an overview of the types of materials available. The HVO KnowNET has an impressive array of material about every program, as well as an extensive set of resources. Not sure where you want to travel next? Visit the HVO KnowNET and read some trip reports from various sites. Getting ready for an assignment? Just about everything you need to know is at your fingertips!

Research Policy

The HVO Board of Directors recently approved a policy statement regarding volunteers and clinical research. The purpose of this policy is to assure that any clinical research undertaken by an HVO volunteer is conducted in a manner that is both ethical and transparent. To read the complete policy, go to **Forms and Policies** under **Resources** in the **Volunteer Toolkit**. (<http://www.hvousing.org/volunteerToolkit/research.shtml>)

Need a Gift for Someone Special?

By giving a Tribute Gift in someone's honor, you acknowledge their importance in your life and you help support the work of HVO. Your honoree receives the satisfaction of knowing your gift improves lives around the world through better health care.

Honorees receive a card informing them of your gift and all gifts are acknowledged in our newsletters and annual report.

News & Events

CANCER CARE

Cancer Care *continued from page 1*

In an assessment report of Ethiopia, Dr. Kenneth Miller of the Dana-Farber Cancer Institute in Boston noted:

The impact of non-communicable diseases (NCDs) in general and of cancer, in particular, is becoming more profound in low-resource countries (LRC). Unfortunately, in LRCs cancer treatment facilities and a trained workforce are scarce or even non-existent. Uganda, for example, has a population of 33 million people and 3 medical oncologists while Ethiopia has 80 million people and 4 oncologists.

HVO has just started an oncology program in Ethiopia and the Ministry of Health has a strategic plan to establish five cancer centers throughout the country within five years, as they recognize the need for cancer care. The Ministry estimates there are 135,000 new cases each year, but only about 2,000 are seen at Black Lion Cancer Center, as it is currently the sole provider for the country. Approximately 70% of the cancer patients are women, most of whom have cervical or breast cancer. Since it is not uncommon for women to have not previously seen a physician, about 2000 mastectomies are done each year, as the women arrive in an advanced stage. HVO will be assisting with the training of a skilled workforce to address the vast needs in the country. As Dr. Miller stated:

Unfortunately, the demand for cancer care exceeds the capacity of the Black Lion Cancer Center, the physicians, the availability of chemotherapy, the radiation facilities, and the associated support services. For example, women who undergo mastectomy typically need to wait for anywhere from one to six months on a waiting list to start chemotherapy.

Similarly, women with cervical cancer may wait up to six months to start radiation therapy during which time the staff has noted that many progress from having a potentially curable disease to a terminal illness.

Working with the Ministry of Health, HVO will assist the faculty at the Black Lion Hospital to establish a residency training curriculum in clinical oncology, assist in the teaching and training of oncology service providers and allied health providers, provide training in multidisciplinary methods of management of cervical and breast

cancer and training in diagnostic methods, support and consult on the development of a Cancer Control Plan for Ethiopia, and develop lectures for medical students and residents on prevention messages.

In Honduras, the site of HVO's initial oncology program, training falls under the five categories of pathology, cancer control, workshops and seminars on medical/surgical/radiation oncology, curriculum development, and student and resident education.

The focus is on the ongoing development of an oncology training program for both adult and pediatric oncology at three centers in the capital of Tegucigalpa. The government of Honduras has a National Strategic Plan – Fight Against Cancer, and their priorities are in lung, gastric, breast, leukemia, and cervical cancers. They are also very interested in cancer care for women as, culturally, mothers are the primary family support.

In their trip report, Drs. Fredric V. Price and Linus T. Chuang spoke of the gynecologic oncology needs:

There is a very large number of patients with gynecologic cancer at Hospital San Felipe. In their 20 bed women's surgical oncology unit, 14 beds are reserved for gynecologic oncology patients at all times. As such, the surgical oncology residency-training program is in need of gynecologic oncology training. They perform an average of two radical hysterectomies a week, in addition to surgical management of vulvar lesions, pelvic masses and uterine cancer. The radiation oncology department has 60-80 patients under daily treatment for cervical cancer. The medical oncology unit is filled with many gynecologic cancer patients receiving chemotherapy as primary or adjuvant therapy, in conjunction with radiotherapy, and as palliative care. There is a large palliative care oncology ward, which is largely composed of patients with untreatable gynecologic malignancies.

Dr. Hernan Sabio, a pediatric hematologist/oncologist, worked in one of the teaching hospitals and the resources seemed rather well established, although he noted that his many years of practice still left him "challenged with how to adapt practice from 'what is ideal' to 'what is available.'"

The care team in Hospital Escuela is led by three trained pediatric hematology/oncology specialists, a team of skilled nurses, data managers and additional support personnel. The program is affiliated with the St.



News & Events

CANCER CARE

Jude international outreach program and with the Monza project for international pediatric oncology.

Despite the limitations that do exist, and the many challenges ahead, Dr. Melanie Thomas, an adult medical oncologist, indicated that there is certainly hope for the future:

The Surgical Oncology residency program at Hospital San Felipe was established approximately 4 years ago, and currently has residents in each year of training. The residents are very knowledgeable, self-motivated, and extremely eager to learn and actively seek new knowledge. They appreciate the multidisciplinary nature of oncology care, and would welcome involvement in their training from colleagues in medical, surgical and radiation oncology. The residents work in very challenging conditions, where the physical facilities, diagnostic and therapeutic equipment are older than what would be standard in the U.S. However, despite these challenges,

the residents demonstrate strong critical thinking skills, understand the value of evidence-based medicine, and appear to consistently strive to provide the best possible care within the limitations they face. Most notably, every resident and student I met is committed to practicing in Honduras and dedicating their careers to serving the Honduran people.

In addition to the programs in Honduras and Ethiopia, plans are under development for an HVO oncology program in Hue, Vietnam, where they are seeing 60-70 new cases per month. Cancers seen there are primarily lung, gastrointestinal, breast, cervical, ovarian, and lymphoma.

Each of these programs offers very different snapshots of cancer and its impact around the world. HVO, with the support and guidance of its sponsors, is working to provide access to cancer care and towards its prevention.

ADOPT-A-PRACTICE Rebuilding Dental Offices in HAITI

An ADA-HVO Initiative

American Association of Oral & Maxillofacial Surgeons

American Dental Association Foundation

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Joseph Walton, DDS

Janice Wenger, DDS

Warren Zahner, DMD

Barbara Zajicek, DDS

*Donations received between October 1, 2010 –
February 28, 2011*



Reflections from the Field

Juliette Lee, MD • Dermatology • Cambodia

My stay in Cambodia was short but it was a remarkable educational experience. Truly, I felt that I benefited more than anything I could have contributed to the clinic myself. I saw an eye-opening breadth of dermatologic disease which could not be approached in the US, and through my interactions with the Cambodian physicians, patients, and people of all walks of life, I learned a great deal about the Cambodian people and their culture. I found my interactions with Cambodians to be unfailingly positive and rewarding. I was profoundly impressed with and inspired by Dr. Mey, who is a fantastic clinician and a dedicated, passionate proponent of medical education in Cambodia – he clearly has a far-reaching impact.

Jon Kolkin, MD • Hand Surgery • Malawi

Breaking the students' teaching into 2 blocks each lasting about 2 weeks may have its advantages. It will give them some time to absorb some of the information they have already obtained and also be exposed to more pathology. They can also practice some of the techniques we discussed. I think they would have been overloaded if hand surgery had been condensed into a continuous 4-week program.

Julia Shannon, OT • Physical Therapy • Haiti

... the scheduling of therapy is quite different from the United States. Outpatients are scheduled for the morning or afternoon, which usually depends on where they live. Whoever arrives first is served first. Patients line up along the wall and they may wait for hours, without complaining. Depending on where they live, the frequency of therapy may be once a week or once a month. It may take patients several hours or several days to get to the hospital.

Sarah Pae, MD • Anesthesia • Ethiopia

Overall, it's been a great experience. The first week is daunting - I seriously thought someone was going to perish under my care due to lack of monitoring, drugs, technology etc., but then you get the feel for things and realize that the best monitor is yourself and that you have to dig deep into all your training and experience to provide the best care for these patients. Be confident!

Sally Hewett, DDS • Oral Health • Laos

My estimate, from observing the school children we saw that morning, is that 1/4 to 1/3 of young children have dental abscesses, not to mention rampant decay. Fluoride toothpaste is not available for a reasonable cost, and understanding of oral hygiene is low. One opportunity that I see is that the children are really well behaved and honor what their elders, teachers, and parents say. With a good public education program, there is possibility for improvement in the future, and we must always keep public oral health education a high priority in our projects and collaborations.



reflections...

Ellen Milan, RNC-NIC • Nursing Education • Uganda

Working with little technology and, at times, without necessary supplies challenges my expertise, encourages my ingenuity, and brings me back to the all-important basics of neonatal care. Working in the consistently busy and understaffed Special Care Baby Unit is a very humbling experience. Working side-by-side with my Ugandan colleagues who share my love and dedication to the care of sick and premature newborns and their families makes returning to Uganda year after year a privilege.

Neil Hanson, MD • Anesthesia • Vietnam

I also want to take this opportunity to mention Dr. Chung as the person that has really touched me the most during my time in Vietnam. There are really not enough words to describe how impressive an individual he is. Very few physicians I have ever met are as dedicated to their patients. Not only is Dr. Chung an excellent anesthesiologist, but he has really attempted to improve the infrastructure at his hospital in order to better serve his community. Without any sense of ego, Dr. Chung welcomes instruction from anyone in the world so that his Department can benefit from new concepts and new ideas. He is also one of the most generous people I know, welcoming members of HVO at the airport regardless of the hour they arrive. He frequently will take visitors out for dinner and give them tours of the city so that they become acquainted with the environment. He has even gone so far as to drive HVO visitors personally to and from the hospital. I cannot say enough how impressed I am.

Mary Ellen Brown, MS, OTR/L • Hand surgery/hand therapy • Nicaragua

We saw a two-year-old boy with right hemiplegia who had a thermoplastic AFO for night use, but the AFO did not fit into his one pair of shoes for support during the day. His mother reported that since he really wasn't walking yet, she could not afford to buy another pair of shoes to fit the AFO. We made a smaller AFO from lighter thermoplastic material which fit into his shoe and he immediately was able to walk with the AFO in his shoe! (We took a very short video of him walking!)

Paul L. Nadler, MD • Internal Medicine • Cambodia

The ability to precept in the wide variety of clinical venues - emergency room, inpatient wards, and continuity practice - ensured that my clinical contributions were directly beneficial to the patients, and provided ample educational interactions with the residents and trainees, and some valuable collegial time with the staff physicians. I had an opportunity to do direct patient care, as well as primarily interpret EKGs and CXRs. I was able to consult with the staff physicians, residents, and trainees on the provision of care in every case I encountered. I had plenty of opportunities to sit down with trainees on a one-to-one basis and discuss differential diagnosis and management strategies. I felt that the most valuable activities for the institution were the formal didactic lectures and "chalk board" talks I gave. These lectures provided an academic structure to the clinical day, and ensured that the residents and trainees were getting a complete and modern medical education to complement their clinical experience.



Volunteer Perspectives

TRAVELING FELLOWSHIPS AND SCHOLARSHIPS

Traveling Fellowships and Scholarships – A Growing Initiative

Typically when one thinks of HVO, one thinks of a highly motivated self-funded health care professional from the US (or Canada, UK, Australia, etc.) committing an average of 4 weeks to a site to share clinical knowledge and expertise. HVO places nearly 500 volunteers annually and this description is accurate for a large majority of these people.

Over the years, however, there have been several other opportunities that have evolved – some that support the travel of US and Canadian residents interested in having a global health opportunity early in their careers. In addition, there have been a growing number of funded opportunities to support the travel of local colleagues from HVO sites to travel to international meetings and workshops, as well as to participate in 4 to 6 rotations at institutions in the US, Canada, Hong Kong or other countries. Both of these developments are exciting and valuable, albeit in differing ways.

Fellowships for Residents

Providing a funded, structured opportunity overseas for a resident nearing completion of his/her training is a way of establishing a relationship that may result in a lifetime of commitment to improving health care globally.

In addition to the exposure to challenging clinical cases, however, the professional development that occurs on such a rotation is equally as important. The UCSF Department of Orthopaedics offers an international elective as a standard component, an opportunity they have offered since 1998. In a recent, case-control study¹, conducted by the University, they looked at graduates from the program who had participated in the international rotation. Their control group consisted of graduates from other residency programs who had not participated in an international rotation.

The results of the survey were striking in terms of professional development, health care resource usage, and outlooks and attitudes towards the delivery of health care. Those who had participated in the rotation were more likely to endorse a commitment to treat indigent patients in their practice, expressed a strong interest in volunteering both internationally and domestically, and also believed that MRI and CT scans are over-utilized in the US.

It is this growth in the resident's development and understanding of their role as an orthopaedic surgeon that is so important in today's rapidly changing world. The experience of an international rotation impacts on their values and beliefs, by emphasizing the role of the physician within a community. It allows them to develop their cross-cultural skills, which serves them well in an increasingly diverse society. It also strengthens their commitment to volunteering, either at home or abroad.

Scholarships for Host Country Colleagues

Equally exciting is the growing number of opportunities HVO is able to offer local clinicians, faculty and residents with whom we work overseas. Opportunities for travel and full participation in the global, or even regional, professional community are extremely restricted for most of our colleagues in developing countries. Limited incomes mean that airfares, hotel costs, meeting registration fees, etc., put attendance at meetings out of the realm of possibility. HVO has been able to identify a growing number of donors willing to underwrite these costs – donors who recognize the value of developing intellectual capital in these countries and providing the framework for professional development and mentoring.

1 “The International Orthopaedic Health Elective at the University of California at San Francisco: The Eight-Year Experience”

Alexander R. Disston, Gabriel J. Martinez-Diaz, Sarath Raju, Maria Rosales, Wil C. Berry and R. Richard Coughlin
J Bone Joint Surg Am. 2009;91:2999-3004.



Volunteer Perspectives

TRAVELING FELLOWSHIPS AND SCHOLARSHIPS

HVO Fellowships and Scholarships 2011

Fellowships:

AFSH Traveling Fellowship

Eligible: R3, R4, R5, and professionals within three years of completing fellowship

Commitment: 4 weeks at an HVO teaching site for hand surgery

With generous support from the American Foundation for Surgery of the Hand

Orthopaedics Traveling Fellowship

Eligible: Final year orthopaedic residents

Commitment: 1 month at an HVO teaching site for orthopaedics

With generous support from Dr. Dean & Catherine Matsuda and Dr. Paul Muchnic

SEA-HVO Traveling Fellowship

Eligible: Final Year anesthesia residents

Commitment: 3-4 weeks at an HVO anesthesia teaching site

With generous support from: Dr. Ronald L. Katz, Dr. Gary Loyd, Society for Education in Anesthesia members, Dr. Jo Davies, Dr. Chris & Rebecca Dobson, Feintech Family, FAER and Dr. Lena Dohlman

Dr. Edward Blair Memorial Fellowship for Residents in Orthopaedics

Eligible: Residents in an ABOS-recognized orthopaedic training program

Commitment: 1 month at the Queen Elizabeth Central Hospital, Blantyre, Malawi

With generous support from Dr. Richard and Mary Kemme

Dr. Edward Blair Memorial Fellowship for Young Professionals in Orthopaedics

Eligible: Surgeons who have recently completed residency at an ABOS-recognized orthopaedic training program

Commitment: 3 months at the Queen Elizabeth Central Hospital, Blantyre, Malawi

With generous support from Dr. Richard and Mary Kemme

Scholarships:

OrthoCarolina International Program

Eligible: English-speaking, chief or graduating residents from residency programs in developing countries (4 recipients selected annually from nominations submitted by Orthopaedic Program Directors)

Commitment: Four-week rotation in Charlotte, North Carolina

With generous support from OrthoCarolina, Charlotte, North Carolina

South West Orthopaedic Trauma Association (SWOTA)

Eligible: Orthopaedic surgeons and residents from Cameroon and Uganda

Commitment: Attendance in SWOTA's PGY2 Trauma Course

With generous support from SWOTA

For more information on these opportunities, please check the Volunteer Toolkit on our website (www.hvousing.org) or contact us at: info@hvousing.org

Special Thanks

DONORS & IN-KIND DONORS

...to the following individuals and companies who have so generously donated teaching materials, equipment, supplies, and other support:

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Jeffrey Dover
Journal of Bone & Joint Surgery
Linvatec Corporation
McMahon Publishing Group
New England Journal of Medicine
Sammons Preston
San Diego Outpatient Surgery Center
Skin Care Physicians
West Bay Dermatology
Carline Wilkel, MD

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Salma Abdu, DDS
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