



IMR CLINIC OPERATIONS PACKET

Read this to learn more!

ABOUT THIS PACKET

- This packet has been created to serve as a resource for IMR Volunteers. It follows the information given on the weekly conference calls.
- This packet provides you with important information necessary for your trip preparations. You are responsible for reading the contents in this packet in preparation for the trip. This will help answer many questions that you may have.
- The contents herein are not for distributional purposes and are intended for the use of the team and their families. Sources of the information all come from public record and documentation. You may access any of the information and more updates directly from the World Wide Web and other public sources.

This packet will help you understand the following about IMR clinics:

- IMR's Mission Statement
- The importance of FLEXIBILITY
- What IMR clinics look like
- How clinics operate
- What IMR treats
- What departments we have in clinic
- What roles need to be filled for effective operations

ADDITIONAL PACKETS

In addition to this packet, you will be provided with the following additional packets:

- **IMR BRIEFING PACKET:** The information you really need to know to be prepared for the trip. Includes a packing list, volunteer checklist, information about insurance, and much more.
- **COMMUNITY HEALTH EDUCATION PACKET:** This packet will explain in detail the IMR community health education program.
- **PROVIDER PACKET:** This packet will explain in detail how the IMR clinic will operate. It will give specific role descriptions for each member of the clinic and give a 'Walk through Clinic' explanation of the typical events that take place in clinic.
- **DEPARTURE PACKET:** This packet will be emailed to you just before departure and will include information about airport logistics, arrival forms, and customs.
- **FUNDRAISING PACKET:** If you are among those interested in fundraising for the trip or clinic supplies, this packet includes helpful tips to get you started, and sample letters, donor forms, and receipts. Provided upon request. Please contact your team leader.
- **Public Health Information** will be sent from a variety of sources

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IMR's MISSION STATEMENT

International Medical Relief provides medical, dental, and surgical care to underserved and vulnerable people around the world through medical mission trips.

IMR recruits qualified medical teams and offers short-term assignments for volunteer doctors, dentists and other health care professionals as well as non-medical volunteers to conduct overseas medical clinics in areas where health care is limited or difficult to obtain.

Overview

- IMR conducts mobile acute care clinics with an emphasis on health education, acute medical care, and acute dental care.
- The following information is highly variable and is designed to provide a general overview of what an IMR clinic might look like, and not to describe what clinics you participate in will look like.
- Your trip may look similar or very different on any given day. Your team leader will set up clinic flow and assign roles. Your cooperation and support will make the difference between good and great clinics!

Flexibility

- This is the single most important concept on IMR trips after excellent patient care and “Do No Harm.”
- Your flexibility will help you to have a trip that meets your expectations and desires.
- The more flexible the team is, the more patients we will treat with excellence and compassion.
- Working in remote areas or areas of great poverty mean that not every clinic will have a great workspace, lots of tables and chairs, and cool, tropical breezes. Many clinics will be “make do” - sometimes the villages will be building tables for your use when you arrive!
- Flexibility extends to working with your teammates – seek to understand the perspective of



Flexibility - not every pharmacy has a table, but they all usually have an audience! Nepal, 2016, rural team

your teammates and grant them trust that everyone is working toward the same goal

What we treat and what we don't treat

[Click here to link to Provider and Well Care Protocols](#)

1. IMR provides acute medical and dental care and health education for all patients.

- We treat acutely ill patients, reassure well patients, and educate everyone on how they can be healthier.
- If a patient requires care beyond our ability, we refer to local hospitals and clinics. We may be able to help with needed surgeries through the **IMR PARTNER PROGRAM**.

2. IMR does not treat chronic illness with medication.

- Hypertension, Diabetes, HIV/Aids, TB, and other chronic illness are prevalent around the world and among our patients.
- IMR teams provide education, encouragement to see a local provider, and a small quantity of medication if a patient is in crisis. Education is the key.

3. Why doesn't IMR treat chronic illness? Or test patients for HIV/AIDS or TB?

- Chronic medications usually require titration and monitoring – we can't do that and can't insure that patients will get follow-up care.
- Patients with chronic illness (especially communicable illnesses that are progressive) need to be in the medical system, where they can receive continuity of care and medications.
- If a patient is suspected of having HIV/Aids or TB, it is important for the patient to be in their local system. Access to care starts with testing. If you suspect a patient has HIV/AIDS or TB, refer them to their local hospital or clinic for testing and follow-up care.



Physician and Medical Resident in the clinic ICU, Cambodia, 2012

[Nurse Practitioner transports an acutely ill elderly patient to the local hospital, Cambodia, 2012. The patient in the background is also being transported.](#)



Patient Transports

- Patients in clinic frequently require hospitalizations for acute illness, surgeries, or minor procedures that are not safe to perform in clinic. The **IMR PARTNER PROGRAM** provides funds for these patients, separate from the team costs.
- Transports take many shapes, from tap taps (Haitian taxis) to mini-vans; patients are sent to the hospital with IMR staff, based on the needs of the patient.

What does an IMR Team Look Like?

- IMR teams consist of licensed medical professionals and non-medical staff members



Nurse providing well care, Brazil, 2014

- Teams are 100% volunteer and are always different. The one constant is that they ROCK in caring for their patients!
- Our ideal grouping is 25% providers, 25% nurses, and 50% medical staff. We need a village to have a clinic!
- Some teams are big, others small, but all are caring, professional, and hard working.

Clinic Roles

Opening and Closing of Clinic:

- Each team member will be responsible for a specific department or task to set up in the morning and break down at night.
- **Each department will have a self-contained bag with all of the supplies for that department and a packing list. It is important that every bag is unpacked and packed carefully for clinics to function efficiently!**

Examples of Assigned Tasks:

- Putting up department/location signs and putting out garbage bags
- Establishing location of team bathrooms, lunch, and patient privacy area and notifying team
- Setting up team hand washing area and patient hydration stations
- Setting up provider and patient waiting and treatment areas: registration, triage, community education, patient/provider stations, wound care and laboratory, and pharmacy
- Establishing control of clinic patient entry points
- Packing and preparing lunch for the team
- Pre-packing medications and doing statistics in the evening



Nurse Practitioner using a Doppler to check an unborn baby's heartbeat, Thailand (Mystery Trip), 2016

Examples of Roles During Clinic:

MEDICAL/DENTAL

- Sick Providers (Physicians/Advanced Practice Providers)
- Well Providers (RN/EMT-P)
- Dental Providers
- Clinical Pharmacists
- Triage (RN/EMS)
- ICU/Laboratory/Wound Care (RN/EMS)
- Statistics (Providers/RN/EMS) (Evening)

NON-MEDICAL STAFF

- Community Health Education (everyone welcome!)
- Vital Signs (EMS/medical staff)
- Patient Runners
- Historian
- Dental Staff
- Pharmacy Staff
- Reading/Sunglasses
- Medication Pre-Pack team (Evening)

What does Clinic Look Like?

- Every clinic will look and feel different. The site, the number of patients and their culture, and the capability of the team all contribute to the uniqueness of the day.
- IMR clinics are designed to benefit the care our patients receive. You can expect to see each department in clinic to have a unique space. This might mean that the laboratory and wound care share a table in the center of a tarp or that each have their own room in a school. Your team leader and your team will work together to create a function and efficient space for you to treat your patients.



A large, open gymnasium, Brazilian Amazon, 2014



Some clinics build themselves, Myanmar, 2014



Some clinics take place in dimly lit classrooms, Kenya, 2014

How does Clinic Start?

- Our patients and our team are best served by a clinic that is orderly and quiet. It is important for you to be able to treat your patients in a quiet area, where you can speak softly and think clearly.
- A calm, orderly flow starts immediately by establishing a waiting area for patients already waiting for the team upon arrival away from the main clinic. To help this process, patients will be assigned a number during registration that will determine when he or she enters the patient flow.
- The team contributes to a smooth clinic by performing their assigned activities and not rushing the opening of clinic.
- **Most importantly, sick or elderly patients should be moved forward in the line and seen as soon as possible, especially if it is hot.**



Patients wait in orderly lines at the registration table in India, 2014.



In Africa, where the culture is often boisterous, the people line up closer together and push more, Senegal, 2013

HOW CLINIC OPERATES

Clinic Departments

The order of these departments may vary depending on the clinic site or the patient load.

- Registration
- Vital signs
- Triage
- Community Health Education
- Acute Medical Care (Well or Sick)
- Laboratory
- Wound Care
- Sick/Well Pharmacy
- Acute Dental Care
- Specialty Clinics

Examples of department/patient flow

Clinic 1	Clinic 2	Clinic 3	Clinic 4
Registration	Community Education	Registration	Registration
Vital Signs	Registration	Vital Signs	Community Education
Triage	Vital Signs	Community Education	Vital Signs
Community Education	Triage/Labs	Triage/Labs	Triage/Labs
Sick/Well Providers	Sick/Well Providers	Sick/Well Providers	Sick/Well Providers
Wound Care	Wound Care	Wound Care	Wound Care
Dental clinic	Dental clinic	Fluoride	Fluoride
Sick Pharmacy	Sick Pharmacy	Sick Pharmacy	Sick Pharmacy



Patient runner helps patient cross a gangplank between a small shipboard clinic and pharmacy, Brazil, 2014

Patient Movement through clinic

- Patient runners move patients through clinic to ensure comprehensive care. Runners help control the flow of control by letting the first station know when to slow down the flow of patients coming in.
- Not every team will have runners depending on the size of the team and the clinic layout.

Registration

- Each patient is uniquely registered as they arrive at clinic and given a number to determine their order. A waiting area is established for patients until they are registered.
- Adult patients read and sign a release of liability and each patient receives an intake form that becomes their IMR patient medical record.
- If the IMR electronic medical records (EMR) system is being utilized:
 - Each unique patient receives a paper record with a unique bar code on it.
 - Patients take their paper record to each station, where the bar code is scanned and the notes are entered into the electronic medical records at each station.
 - The paper form serves as a backup to the EMR.
- The IMR team triages patients waiting in line to be registered throughout the day
 - **Sick and elderly patients are seen as soon as possible!**
 - Our team triages the patient line and give water on a regular basis.

Vital Signs

- All patients have their vital signs taken prior to or during triage.
- Medical staff members are frequently trained to take vital signs and work side-by-side with providers in this area.
- Blood pressure cuffs, stethoscopes, pulse oximeters, thermometers, and scales are sent with every team
- **All patients older than 6 months and under 5 years receive albendazole (deworming) and vitamin A (with permission of responsible adult)**



Vitamin A and Albendazole dispensing, Senegal, 201



A young team member records the height and weight of a child during vital signs, Haiti, 2014

What do we capture?

Age	Temperature (Kg)	Height / Length	Weight	Blood Pressure	Vitamin A	Albendazole
< 6 months	X	X	X			
6 m < 5 y	X	X	X		X	X
5y <18 y	X		X			X
18y <65y	X			X		Treat symptoms
65y+	X			X		Treat symptoms
PREGNANT WOMEN	X		X	X		NO ALBENDAZOLE

Triage

- The triage team obtains the chief complaint and makes the initial determination if patients are sick or well.
- Patients are triaged to the most appropriate providers on that team.
- Patients may see more than one provider during their visit.
- Patients requesting dental only go directly to the dental waiting area, where they receive a well check examination and blood pressure.



EMS provider triaging a patient after vital signs, Nepal, 2016



Sometimes, we have the honor of delivering a new baby into the world!
Cambodia, 2012

Community Health Education



Excellent collaboration between the IMR educator and a local teacher to provide effective education on family planning, Haiti, 2014

Sustainability

- One of the greatest assets that our teams leave behind is our knowledge.
- **Community Health Education is the sustainable component to our short-term medical mission.** Our patients leave clinic with valuable knowledge that can at times be life saving. Health education will improve the quality of their life, just as it does in the United States. It can truly change an entire community for the better and is an important part of what we do.
- **Every patient receives basic health education classes and individual education based on their health needs from their provider.**
- Please don't rush the community health team to finish quickly to get patients to providers – their work is of the utmost importance.

Teaching

Even if you don't think you want to teach community education, give it a try!

- Our team members say it is one of the most rewarding activities in clinic. Providers, Nurses, EMS, Pharmacists, and all medical staff are welcome and encouraged to teach classes!
- Patients will receive instruction using health education classes prepared by IMR. Please take a look at the Community Health Briefing Packet for more information about our classes.
- Soap, toothbrushes, and other health related gifts are distributed after the classes are finished and before

sending patients to the next station.



Local teacher after training, teaching independently, Tanzania, 2014



Community Education class, Ethiopia, 2016

Training of Local Health Care Workers

IMR may train and certify local health care workers, teachers, or health care students to deliver community education classes. 1 complete set of posters is left for each community we serve so their leaders can teach it forward.

Acute Medical Care

- IMR teams work collaboratively to ensure that each patient sees the providers most qualified to care for them. Providers, Pharmacists, Nurses, EMS, and Medical/Nursing students will work in care teams, enabling you to easily reach out to other providers for a consult or to transfer a patient.
- A triage team (Nursing and EMS) determines the chief complaint of each patient and the level of care needed.
- Nurses provide care for our well and slightly sick patients while physicians and advanced practice providers treat our sicker patients. We see many families in clinic so sick and well patients are often mixed together, resulting in multiple providers working with a family group.
- **This setup also facilitates sharing interesting cases.** It is a basic tenet of IMR to teach among our team members. Please ask your patients if you can show an interesting case to others on the team.



Family Practice physician performing a complete examination on a failure to thrive infant, Brazil, 2014

Laboratory

- Each team carries basic lab tests for use in clinic, including urine pregnancy tests, urinalysis strips, glucometers, and malaria tests.
- Injectable antibiotics, including ceftriaxone, are kept in the laboratory.
- Rapid HIV tests are carried in the Chief Medical Officer bag. If there is an exposure to a team member, the patient is tested to determine the best course of treatment for the team member.

Wound Care

- The wound care station can be very busy with significant wounds.
- Each team has a fully stocked wound care bag including local injectable anesthetics and minor surgical equipment.



A well-organized wound care station, Haiti, 2014

Sick Pharmacy

- Pharmacy staff ensures that patients receive the correct medication and provide education on how to appropriately take and store medication safely.
- **All patients take their first dose of prescription medication in clinic to ensure they understand the directions and can manipulate the packaging.**
- Clinical pharmacists work as part of the provider team to ensure appropriate prescribing and substitutions as required.
- Prescription medications and suspensions are dispensed at the sick pharmacy; the pharmacy may deliver medications to the provider for teaching and education if necessary.

A well-organized pharmacy and a proud pharmacy staff, Haiti, 2014



The team bonds while pre-packing over the counter medications for the next day's clinic, Brazil, 2014

Well Pharmacy

- The purpose of the well pharmacy is to reduce wait times for medications as patients finish clinic.
- The team will “pre-pack” commonly used over the counter medications into dispensing bags and place a label with the medication name inside each bag in the evening.
- Providers dispense pre-packed medications throughout the day at their stations.
- Examples: pain medications, vitamins, antifungal creams, hydrocortisone, PPIs, allergy medications



A well organized pharmacy in Haiti, 2014

Dental

- The Dental Clinic is one of the busiest places on an IMR team. Check-ups, oral hygiene education, fluoride treatments, deep cleanings, and extractions take place all day. Improving dental health will improve the health of the community as a whole.
- The dental clinic is frequently separated from the main clinic and has its own waiting line, quiet space, and sterilization set up.
- Patients can self-select to dental only, medical only, or both and can be referred from one area to another.



Dental team performing an extraction while an IMR pre-dental student holds the hand of the frightened patient. This is what it is all about. Cambodia, 2013



An Oral Surgeon runs a dental residency program for 3 Cambodian dental residents. The most important teaching: "Don't hurt your patient." Cambodia, 2013

Fluoride

- When there is no formal dental component, IMR sets up a fluoride station for all children under 5. Older children can be referred for fluoride treatment. Oral hygiene education is taught in the fluoride station for the children and in community education



Fluoride station for school aged children, Thailand, 2016

Specialty Clinic Areas

Respiratory

- Nebulizer treatments are provided for acutely ill patients.
- Respiratory therapists and nurses teach correct inhaler use.



Nebulizer treatment, Zanzibar, 2016



Rehydration station in the laboratory, Senegal, 2013

Oral Rehydration

- Oral Rehydration home brew is taught in community health
- On hot days, set up an oral rehydration station that patients can access at will
- Triage the registration line frequently and offer patients water if a station can't be set up outside



Not every department looks like what you think. ICU in Nicaragua, 2014

ICU

- An ICU is established for IVs and patients requiring monitoring.
- Minor procedures also take place in this area of clinic

Privacy Room

- Ideally, each clinic should have a private area for exams and counseling.

Acupuncture / Chiropractic / Massage/ Physical Therapy

- There are many different types of specialty providers that join our teams



Acupuncture clinic, Cambodia, 2013

Psychiatry/Psychology/Counseling Services

- Psychologists and trained counselors frequently join IMR teams and provide greatly needed therapy for patients. Grief, anxiety, depression, and other psychological illness is frequently seen, often presenting as headaches, insomnia, stomach aches, and general pain.

Reading Glasses

- Reading glasses and sunglasses may be distributed at a separate station, by the providers, or in community education. Reading glasses are provided to any patient who needs to see, regardless of literacy. The grandmother who needs to see a grandchild's rash, the seamstress, the mechanic, and the butcher: seeing clearly helps all.



Fitting reading glasses for an elderly patient, Thailand (Mystery Trip), 2016

Vaccination Clinics

Vaccination clinics are often sponsored by **IMR Partners**. They are usually run under the direction of the Ministry of Health in side-by-side clinics with IMR. Sometimes, IMR purchases vaccinations in country and hires local personnel to vaccinate patients.



Vaccination Clinic, Senegal, 2013

Sometimes the best medicine for patients and teams don't involve "medicine."



The hallmark of IMR: compassion, teamwork, and patient care. This is immediately after a large aftershock in Nepal, 2016. The patient is an elderly blind woman, the nurse is evacuating her outside from the building in the background, a nurse practitioner is holding the board the IV is hooked too, and the nurse in the background is carrying wound care materials for her care. The patient was tachycardic, hypertensive, and agitated. You can't see the psychologist, who was influential in keeping her calm. WAY TO GO, IMR!