

HOM CLINIC FAQs



- 1. Are there any requirements to work in the Cité Soleil clinic?** All providers (MDs, DOs, NPs, PAs) and clinical staff must bring a copy of their current medical license. Non-medical members can serve in many roles, but anyone providing medical care must work within their scope of practice. All team members must wear a name tag with professional title in the clinic.
- 2. How do we communicate with our patients?** Translators will be assigned to assist you. Although written instructions for common treatments are available, most patients are illiterate. Please use the sun, moon and star labels on all Rx.
- 3. What type of illnesses are seen in the clinic?** The most common illness are GERD, Asthma, URI, HTN, Musculoskeletal pain, Headache, DM, Rashes, UTIs and Vaginal discharge. Please remember that common complaints may require different treatment or dosing in Haiti. Several resources on managing tropical illness including guidelines for HTN and STDs are available. Remember over-treatment is as dangerous as under-treating. (See Forms and Resources at www.HaitiOM.org)
- 4. What equipment and supplies are available in the clinic? Are drugs supplied?** The clinic is equipped with basic equipment (B/P cuffs, nebulizers, glucometers, etc.) but most supplies are furnished by the teams. Clean water is available, including water in the pharmacy to re-constitute medication. Drugs are purchased on your behalf (\$1800 for a 4 provider team). Some drugs are too costly or not available in Haiti and must be provided by the team. All drugs must be labeled with an expiration date. (See Medical Guidelines at www.HaitiOM.org for a detailed list of drugs, equipment and supplies).
- 5. What if we have questions or need help at the clinic?** A "Lead" translator is assigned to every team to serve as liaison between HOM/MICECC staff and your team. MICECC MDs are available for patient care consults. Please contact only the MICECC staff member assigned to help, it is disruptive and ineffective to approach other MICECC staff during clinic operations. Remember we are guests in their clinic.
- 6. How is patient flow managed?** Patient tickets (25-35 patients per provider per day) are distributed by MICECC staff. Waiting patients are triaged by MICECC RNs, critically ill patients are seen at once, while others wait their turn. After the clinic fee is paid, they are directed to either the MICECC staff or visiting team. If working without MICECC help, providers need to assess waiting patients to identify anyone who needs immediate care. Quality of care, not quantity, is valued!
- 7. How much time is allotted for each patient?** In Haiti, there are many patients waiting to be seen, be brief but thorough. Address only 3 complaints per patient, careful histories and exams are encouraged. Note pertinent information (SOAP note) on the patient record, try to write legibly. Drugs can be dispensed from either the patient record or the RX/RTC forms. If using RX/RTC form, the prescribed treatment has to be included on the patient record so the next provider can continue care.
- 8. How is follow up care managed?** Use the RX/RTC form if a patient needs to return for follow up care for an acute illness. This form allow a patient to be seen without paying the clinic fee again. Document reason for follow up and the date to return on the RX/RTC form and on the patient record. If a patient has high blood pressure or high blood sugar, determine if readings are high due to a lapse in treatment vs inadequate treatment. Treat conservatively and have them return for follow up care. Patients can return after your departure for follow up care with the MICECC staff (or the next team).
- 9. Is there a hospital nearby for critically ill patients?** Yes, but please consult with MICECC staff prior to sending patients to a hospital. The local hospitals are often less equipped to handle patients than we are! Have your translator complete a transfer form, include vital signs, test results and treatments. Send \$20 USD with the patient to pay the hospital fee.
- 10. What happens if we run out of drugs or supplies?** Be flexible and creative! Use all available drugs and supplies first but sometimes additional items can be borrowed from MICECC or purchased locally. The quantity of drugs stocked should be adequate to treat approx. 800 patients if care is limited to 3 complaints. Do not give more than 3 drugs (including OTC drugs) in addition to worm treatment and vitamins. Most supplies are for clinic use, please do not give patients entire bottles of alcohol, nebulizers, emergency medications, etc. We do not have the budget to supply everything to all patients.

Go to www.HaitiOM.org and select Volunteer to access the complete Medical Mission Guidelines & Forms and Resources.