



OVERSEAS SPECIALIST SURGICAL ASSOCIATION OF AUSTRALIA

TEAM VISIT – CANCAR, FLORES

JUNE 08 - 13, 2008

EAR NOSE & THROAT (ENT)

SURGICAL TEAM REPORT

Team Members:

Dr. Suren Krishnan OAM	E.N.T Surgeon
Dr. Richard Sorby-Adams	Anaesthetist
Ms. Margaret Maloney OAM	OT nurse
Ms Helen Van Der Jeug	Recovery Nurse

Counterparts

Dr. Michael	GP Cancar
Dr Erwin	GP Cancar
Dr Made Murda	General surgeon – Ruteng
Pak Mus	Nurse Anaesthetist - Ruteng

Implementation of Dr John Hargrave's Mission in East Timor and Eastern Indonesia;
Providing a specialist surgical service to the disadvantaged where the service is not available or affordable

AIMS AND GOALS

1. To provide a follow up ENT surgical service to patients at St Rafael hospital as requested by the community
2. To teach and encourage doctors in the immediate vicinity to perform simple surgical techniques primarily under supervision.
3. To work together with and provide clinical training to counterpart health workers, doctors, nurses and community-based health workers in the management, aftercare and follow-up of patients with ENT inconvenience

INTRODUCTION

This has been the second ENT visit to Cancar, the first being in September 2007 as a combined visit with the Plastic surgical team. The initial visit was undertaken following the request from Sr Reginardis SSpS who was continuously faced young children suffering from tonsillitis. Due to the relocation of the general surgeon from Ruteng to Maumere, there were no surgical services available for ENT patients in the western and central Manggarai.

The current general surgeon at the Ruteng hospital, Dr Made Murda was only on a short term attachment. He was enthusiastic and wanted to learn tonsillectomy techniques so that he could provide the service to the patients who turn up at the Ruteng hospital but could not get treatment.

Dr. Michael and Dr. Irwin who are currently resident GPs at Cancar are also very keen to learn simple tonsillectomy procedures to be able to cope with the growing number of patients that turn up for treatment at the St Rafael hospital. Dr. Michael who was already at Cancar when the first ENT surgical visit was undertaken was now more confident in performing simple procedures under supervision.

A system of regular service to be provided by the ENT surgical teams is required as already, waiting lists for tonsillectomy, ear, sino-nasal, head and neck surgery have been established and getting longer. In addition, the provision of training and development of surgical skills of local medical staff, in particular Dr Michael will be of significant benefit to the community. This allows for satisfactory aftercare which will measure up to the standards for outreach surgery as recommended by the Royal Australasian College of Surgeons (RACS).

Team Personnel:

Personnel included in this team were:

Team Members:

Dr. Suren Krishnan OAM - E.N.T Surgeon
Dr. Richard Sorby-Adams - Anaesthetist
Ms. Margaret Maloney - OT nurse
Ms Helen Van der Jeug - Recovery Nurse

Counterparts

Dr. Michael - GP Cancar
Dr Erwin - GP Cancar
Dr Made Murda - General surgeon – Ruteng
Pak Mus - Nurse Anaesthetist - Ruteng

Operating theatre nurses – RS St Rafael

Sr. Daniela SSpS

Ibu Ernavati

Ibu Viktoria

Ibu Sabina

Pak Kanis

Pak Donny

Location

St Rafael Hospital, Cancar, Ruteng, Kab Manggarai, Flores Nusa Tenggara Timur.

The organisation and management of the consultation and assessment clinics and post operative care was overseen by Sr. Yohanista SSpS and Dr Michael, resident GP of St Rafael hospital.

In the operating theatre complex, the theatre nurses Ibu Viktoria, Ibu Sabina, Ibu Ernavati, Pak Donny and Pak Kanis worked tirelessly under the guidance of Dr. Michael in the absence of Sr Reginardis SSpS.

Overview

The team met at Bali on the morning before travelling to Labuan Bajo. The Plastic team had travelled through Bali the week before and had organised the ENT team's domestic flight tickets.

On arrival at Labuan Bajo, the team was picked up by Sr. Yohanista SSpS, from St Rafael and provided lunch before the 4 hour bus trip to Cancar.

The plastic team had just left Cancar on the day of our team's arrival, accommodation for our team was provided in the VIP rooms of St Rafael hospital. Soon after arrival, the team clinically assessed about 20 patients, mostly SSpS sisters of St Rafael and St Damian, then set up the operating theatre in preparation for surgery for the week.

Prior to the team's arrival, Dr Michael had made radio announcements of an impending ENT surgical team visit. About 240 patients had registered at the hospital for consultation by our team for the following day. Fortunately only about 180 arrived for Sunday's outpatient clinic, it was anticipated that more patients would arrive during the week, as has been the case at previous visits.

The initial surgical list for the week, subject to availability of time was listed as; 14 patients requiring ear surgery - predominantly myringoplasties, 21 patients requiring nasal surgery - predominantly polypectomy and sinus surgery, 26 patients requiring tonsillectomy and 55 patients requiring head and neck surgery - predominantly thyroidectomy, 116 surgical procedures in total. Patients were made aware that there could be cancellations of cases due to time limitations. Dr. Michael was instrumental in prioritising cases relating to their symptomatology and geographical origins. The schedule was also dependent on the availability and turn around time of instruments. Concerns were raised about the schedule and its impact on hospital staff and resources, particularly the operating theatre staff and their ability to recover patients. Also about costs to patients and to the hospital and its resources.

Dr. Michael reassured our concerns on the issues that in the absence of Sr. Reginardis SSpS, he was in charge of our patients. Sr. Daniela SSpS would be working together with our recovery nurse, Helen Van der Jeugd. Nurses for the ICU have also been organised for immediate post-operative care. With regards to cost of medication for patients, the patients only pay for prescribed medications, that the hospital receives funding from the local government for each patient being given surgical treatment.

By the end of the week, the final surgical list arrived at 45 general anaesthetic procedures including 1 medial maxillectomy, 12 thyroidectomies, 2 parotidectomies, 1 submandibular gland excision, 2

thyroglossal duct cyst excisions, 1 myringoplasty and 17 tonsillectomies. There were 12 local anaesthetic procedures including a release of a buccal contracture, palliative excision of a palatal salivary gland tumour, excision of a nasal papilloma, antra washouts, cautery of turbinates and myringotomies. Of all patients listed, one was deferred to the next visit due to time restrictions.

Instruments.

Turnover and availability of instruments between cases was well managed by Margaret Maloney, this proved to be most efficient. The operating microscope is a Japanese table mounted eye “globe lit” microscope, used for simple ear surgery such as myringotomies and myringoplasties and is only suitable for the most basic mastoidectomy surgery. There are no ear drilling equipment available, Charles Long from Lifecare devices in Sydney is happy to loan a portable electric drill system used by the neurosurgeons visiting teams to Fiji, should future ENT teams wish to have access to one.

A halogen headlight system was left for utilisation by the resident surgeon at St Rafael should problems occur with post-operative tonsillectomy patients. It is anticipated that the headlight system will be utilised by future ENT teams which would save future teams in having to bring one at every visit.

Anaesthetics and Recovery

Dr Sorby-Adams spent time teaching the anaesthetic nurses some basic concepts in anaesthesia and analgesia. This was very much appreciated by Pak Mus, anaesthetic technician from the Ruteng hospital. Sr. Helen Van der Jeug oversaw post operative patients at recovery. She also taught Sr. Daniela SSpS the importance of recovery care, Sr Daniela also learned setting up, care of and packing instruments. This will be a positive exercise for the overall operating theatre staff as it will relieve the scrub nurses who are normally expected to carry out all tasks in the operating theatres.

Strengths

- Continued support from the Office of the Bupati of Manggarai, SSpS sisters – Cancar, and the Office of the Consulate of the Republic of Indonesia in Darwin
- Dr. Michael and Dr. Irwin’s enthusiasm to learn tonsillectomy techniques, their attendance at every surgical procedure and ward round demonstrated their commitment and dedication to the patients and willingness to improve their surgical knowledge and skills
- Continued active interaction with the untiring operating theatre and ward nursing staff
- Opportunity to work with available local doctors and hospital staff from Ruteng hospital
- Domestic flight bookings were problem free

Weaknesses

- Time limitations between flight arrival to Melbourne and recheck-in to the connecting Garuda flight to Denpasar, where we nearly missed getting on the Garuda flight.

An interesting observation, as our flight approached Labuan Bajo, we were asked to be on the lookout for red emergency beacons in the sea where five divers were missing for 3 days. We did not notice anything but the divers were found and brought to Labuan Bajo as we were having lunch prior to our road trip to Cancar.

Summary of Clinical Activities – April 12 – 19, 2008

Total number of clinical assessments: 207

Total number of surgical procedures: 57

General anaesthetic procedures 45

Local anaesthetic procedures: 12

Summary of Team Activities – June 06 – 14, 2008

June 06, 2008	Team members arrive in Denpasar Picked up domestic tickets at Hotel
June 07, 2008	Team departed Denpasar, arrive at Labuan Bajo. Met by Sr. Yohanista SSpS of St. Rafael. Lunch at Garden Hotel, proceeded to Cancar. On arrival at Cancar, taken to accommodation wing at St Rafael. Consulted with patients, set up operating theatre.
June 08, 2008	Consulted with patients, sorted out surgical list for the week
June 09, 2008	Surgical procedures / patient consultation
June 10, 2008	Ward round / Surgical procedures / patient consultation / ward round
June 11, 2008	Ward round / Surgical procedures / patient consultation / ward round
June 12, 2008	Ward round / Surgical procedures / patient consultation / ward round
June 13, 2008	Ward round / Surgical procedures / patient consultation / ward round
June 14, 2008	Team departs for Labuan Bajo with Sr Yohanista SSpS Depart Labuan Bajo for Denpasar Briefly met with Plastic surgical team at Cancar Depart Denpasar for Australia with Plastic team members

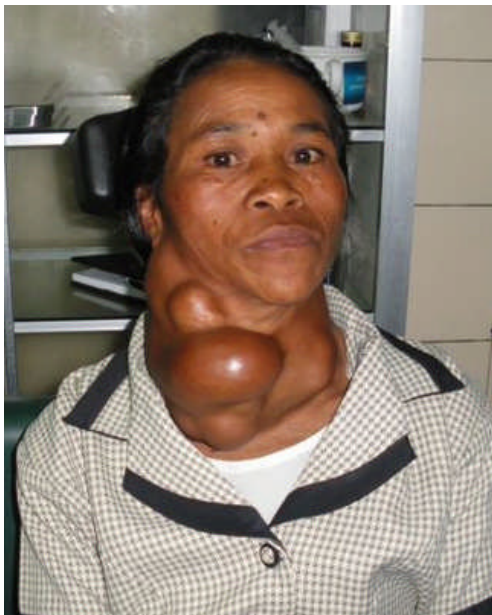
Acknowledgements

- Sr. Yohanista SSpS and Sr. Daniela SSpS and nursing staff of the operating theatre at St Rafael, especially Dr. Michael, Dr Erwin, Ibu Ernavati, Ibu Viktoria, Ibu Sabina, Pak Donny and Pak Kanis
- The Consul and staff of the Consulate of the Republic of Indonesia, Darwin for their ongoing support with visas and supporting documentation
- The office of the Bupati of Manggarai for his ongoing support
- Hospitals and Medical Institutes who donated pharmaceutical supplies and consumables
- Individual team members and their families for their understanding and support of the work being undertaken in the regions.

SUREN KRISHNAN OAM
OTOLARYNGOLOGIST
ENT/Head & Neck Surgeon



Helen Van der Jeugd and Sr. Yohanista SSpS – Labuan Bajo
before heading off to Cancar



Patients at consultation with team



Nurse Viktoria, Drs Michael and Irwin at surgery with Dr. Krishnan



Team with local hospital staff



Team members outside St Raphael Hospital.