

A Report about the Medical Clinic Held During the Mission from March 10 - 20, 2022

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Introduction

The clinical work was so successful despite a few challenges. We were able to attend to all the places of the mission plan that's, Kyamagemule, Nyanzi, Seeta Nazigo and Kiroba. We were able to reach out to 503 patients and all had different illnesses of which some were beyond our management and needed referrals.

We did deworming of 1000 people comprising of adults and children. we also gave vitamin A mouth drops to over 200 children under five years in all the schools in the places we visited. I am happy that our clinic reached out to many people though it appeared small.

We underestimated the number of patients in the first places that we visited. We thought we would do mainly deworming and Vitamin A to the churches and schools and treat a few people who are sick. Surprisingly the number of sick people was quit bigger than we expected so we had to use medicines we had which was enough for the first place of visit (Kyamagemule) but wasn't enough in the second place of visit (Nyanzi) however only few people missed the medicines. I had to get lots of medicines in the Pharmaceutical shop when we got back to Kampala which was more than enough for the entire places we visited till some were left and were kept at the guest house on Entebbe Road.

In Kyamagemule, we were joined by two Village health teams from the government who wanted to volunteer and help in the clinic work. I told them to have a health talk with the people which they did since they are not trained to dispense or prescribe the medicine.

Pastor Bob Hayes was always funding the purchase of the drugs whenever we would run short of the medicine. He was always available and quick to respond whenever we would approach him about the purchase of the medicine.

This report will take us through the department of the

medical clinic during the mission exclusive of the rain water project and evangelism which were also part of the mission work.

Number of patients

Number of Patients, Age & Gender		
Age	Females	Males
0-12	50	30
13+	323	100
Total	373	130
Grand Total	503	

Cases clinic referred for advanced care		
Conditions	Number	Specialist
Ovarian cysts	2	Gynecologist
BPH	5	Urologist
Hernia	10	Surgeon
Dental issues	30	Dentist
Eye conditions	15	Ophthalmologist
ENT	10	ENT

Diseases incurred at the Clinic	
Disease	Cases
Malaria	15
Bacteremia	13
Respiratory tract infections	96
Hypertension	50
Epilepsy	1
Otitis media	8
Wounds	3
Cerebral palsy	2
Down's syndrome	2
Fungal infection	45
Vulvo vaginal candidiasis	48
Sexually transmitted infections	10
Adult neurological disorders	60
HIV confirmed cases	20

COVID 19 Suspect	5
Skin infections	20
Eye conditions	15
Dental conditions	30
Ear conditions	5
Hernia	10
Diabetes mellitus	15
Phlebitis	1
Other Issues	38

Achievements:

Patients received quality and effective medications. Almost all who presented their complains were attended to. We saw good prognosis of the treatment we gave to our patients. Some of them gave testimonies at the church during Sunday services of how they were feeling better after the medication. The medical clinic was supplied with a variety of good and quality medicines that served the purpose. We were able to provide health education talks to the churches and to our patients.

We did deworming of 1000 people both adults and children. We were also able to administer Vitamin A mouth drops to all the children in nursery section in all the places that we visited.

Challenges

The time we had at places we visited was not enough to attend to overwhelmingly big number of patients who turned up for the clinic. We had only one Doctor and one nurse attending to the big number of patients. This led to lots of crowding of patients at the clinic. We had cases that were beyond my expertise and needed the specialists for example surgical cases, ophthalmic cases, ENT among others. We had no examination and treatment beds in our clinic. We also lacked screens at our clinic that would provide privacy of patients. The interpreters we had were not professional health workers who would first narrate a lot of unnecessary information. They would also go into emotions in case they hear or see strange illnesses and fail to interpret. On addition, they interrupted the privacy of patients as some of them were already known to patients.

Way forward

Next time we hope to expand the clinic into a medical camp enriched with different specialists and expertise in the medical field. We should have more clinics for example the general clinic eye clinic, ENT clinic, Dental clinic etc. This help us handle patients presenting with a variety of different cases without necessarily referring

them. It will also help us with enough manpower to disperse the big crowds of patients.

Each place we visited; Kyamagemule, Seeta Nazigo, and Kiroba should be having a clinic that will be providing free services to school children under sponsorship as their sponsor fund the clinic and the community people will be paying cash for the clinic services offered to them. This is so important as it would provide quick treatment to school children and the staffs.

I remember treating two children late at night who were both in boarding section at Kyamagemule. One of main concern was a five-year-old boy who had a temperature of 102.2°. He was prone to febrile convulsions. Such clinics will be important to attend to such emergency cases of both the school children and staff. This clinic will also be our basis whenever we want to conduct a medical camp as we can use the name of clinic. In the future we hope to have medically knowledgeable interpreters.

Acknowledgment:

First and foremost, we thank our God for His strength, provisions and protection throughout this mission. By His grace, the mission was a very successful one.

My heart felt gratitude goes to Pastor Bob Hayes. His supporters made it possible for him to show mercy and respond quickly to needs that arose. He was always ready and willing to do whatever was necessary.

I extend a vote of thanks to Mr. Fred. He is a very social man of God. He was always asking how he can help me in the clinic. Sometimes we would administer vitamin A to children together. Neither Fred nor Pastor Bob ever displayed an attitude of "we can't do that" even when that really was the case.

Finally, I can't forget to thank our nurse who was our Dispenser. Pastor. Moses Odokaje from Seeta Nazigo is also a graduate nurse and a very hardworking man and willing to serve. God bless you so much.

Thank You!
Rotich Walter
Medical Clinical Officer, Uganda.