



Last month, after receiving an invitation to join HANDS International on their mission to Trinidad, I had many reasons to decline. However, this interruption to my summer, along with the financial impact on my practice paled compared to the hardship experienced by the patients awaiting me in Trinidad. The only caveat would be that my wife Siliva would have to agree to accompany me. She agreed without hesitation. In addition, my friend John, a local physical therapy provider would join, as well. I now had my three member Orthopaedic team.



Leading up to our July 20 departure we had several organizational meetings. It was a multidisciplinary team led by Newark's Dr. Rey Agard. Seven thousand patients were expected along with 350 orthopaedic patients, for our 4 day clinic.

Calculating patient visits per day, along with potential surgeries, I had some work ahead of me. I was given a patient roster prior to our visit. The majority of patients suffered with osteoarthritis and I would possibly perform joint replacements on a few. Joint replacement surgery is very dependent on equipment and trained personnel. I was assured that both were available.



The VIP welcome at the Port of Spain, Trinidad airport included representatives from the US Embassy and local press. Following our greeting the surgical team including anesthesiologist, nurses and general surgeon boarded the bus that was destined for the hospital in order to do pre op assessments. We were running about 2 hours late due to travel delays. Of course, our bus would not start. Five of us packed into a small car and headed to the hospital.



Two rudimentary surgical suites were available, but only one suitable for general anesthesia. Looking around the surgical suite, I could not find any equipment suitable for my needs. Upon speaking with the nursing coordinator, I was informed “Once you cut past the skin and muscle, we do not have any equipment for you”. This necessitated a change in plans.

With disappointment, I greeted about ten pre-operative patients in the clinic, downstairs. They had waited hours to see me and many traveled for 2-3 hours for a consultation. Dejected, I informed them that surgery would not be possible. To a few, I suggested seeing me in the clinic the following day for an injection and further discussion. In the back of my mind, I was thinking that if I could get them to Delaware we could provide definitive care.





Concerned, we left the hospital for our hotel. I needed to determine the mission of the clinic given minimal surgical capacity. My military experience would allow me to improvise accordingly.



Expecting over 7000 patients , Hands International essentially took over the Seventh Day Adventist Hospital , in Port of Spain. Our medical team included General Surgery , Internal Medicine , Orthopaedic Surgery , Cardiology, Gastroenterology, Anesthesia, Mental Health, Pharmacy and other wellness service. In addition to the hospital itself, we occupied the parking lot, with tents.



Given our assigned area, my three person team settled in to our table and chairs. While still tired from travel we waited about 15 minutes for our clinical direction. None came. Reflecting on my days as a resident, I realized that it was time to procure supplies from the hospital.

While in residency, with our long clinical hours, when bandages, syringes or other supplies were needed, we did not have time to order the supplies through appropriate channels. Instead, we roamed the halls found supply closets and took what we needed. I suppose that this behavior led to lost dollars for the hospital and soon all supplies were locked and monitored.



Regardless, we had work to do. I found the hospital clinic grabbed some syringes, needles, lidocaine, etc. Eventually, I located a nurse, and with a friendly smile was able to get the needed supplies through appropriate channels.

I had little surgical capability, so much of the clinic consisted of injections for arthritis and physiotherapy.

Overwhelmingly the patients were most grateful of our efforts. While many on the island have private insurance, the wait time for rudimentary care at the public hospital can be years, and costly as well.



A couple brought their 2 year old son to see me. He sustained trauma at birth that resulted in nerve injury and partial paralysis of the right arm. Unfortunately, nerve recovery is unlikely. I spent time with the parents counseling the with regards to their son's excellent prognosis despite the nerve injury. However, appropriate intervention can be of functional benefit. I mentioned to them that a friend of mine, at Shriners' Hospital of Philadelphia, is a world expert on such injuries.

Shriners' Hospital provides care without charge and would make arrangements for the family, as well. Tears were in their eyes. The following morning I made contact with my colleague and they are working with the family to bring him to Philadelphia.



There were numerous other touching encounters. One woman, from Cuba, had traveled to Trinidad in effort to have her loose hip prosthesis revised. I did not have good options for her but told her that if she can get a visa to enter the US , then I would try to find someone to care for her.

On day two, I had two patients that were candidates for minor hand surgeries. Both were clinical scenarios that would be treated promptly in the US. However, one patient suffered with carpal tunnel syndrome for years and the other had a benign mass compressing on a nerve in his wrist. He suffered with pain for 10 years and drove 2 hours to see me.



My novice ortho' team consisted of my wife Silvia and friend John. Neither with OR experience. We headed to the OR late that afternoon. I instructed them on the fundamentals of maintaining sterility. The surgical staff was most helpful, too. Starting late we finished operating around 7:30 pm.

We did not have a ride back to the hotel. No Uber. No taxi. We encountered our carpal tunnel patient at the hospital exit. We must have looked tired. She and her husband offered to drive us back to the hotel. We obliged.

I am grateful for the opportunity to work with the Hands International Team and to help so many patients in need.