



The Monitor

Spring 2008

In This Issue

[Important Bill Passed!
HB 1103](#)

[President's Message](#)

[Regional Reports](#)

[Membership Matters](#)

[A Letter On My Medical
Mission to Haiti](#)

[Health Leadership
International Launches
Global Health Literacy
Project in Lao PDR](#)

[HLI Post CME Training
Final Report](#)

[MEDEX NW Student
Scholarship Winners](#)



President's Message

Eugene Partridge, MPAS, PA-C



A tradition I hope started last year with Immediate past president Theresa Vance attending the AAPAs "Adventures in Lobbying". I am fresh off my trip to Washington DC where I attended the 2008 version. I am a little jet lagged but with new insight to the inner works of politics on the hill. As a constituent to AAPA myself and representing the PAs of this state; Chad Tiller, PA-S and Brian Timm, PA-S had the

opportunity to meet with aids. We met with Representative James McDermott and Cathy McMorris and also with Patty Murray and Maria Cantwell: our distinguished State Senators.

In an idealistic world, the goal was to meet with the actual legislator. In this case on this particular day they had other business or were on the house floor or Senate floor attending to business. For any PA wanting to get a taste of politics and having the honor of putting forth the PA agenda this, venue is for you. This is indeed a great way to educate the PA message onto a national stage. There is no better place than Washington DC with all of its history.



All the issues we brought to the table are important to the AAPA. These issues included Title VII, which support PA students in the health profession to provide medical care to the underserved. Since 2005 funds have been dramatically cut. Losing funding for this is a real possibility. To

learn more check out

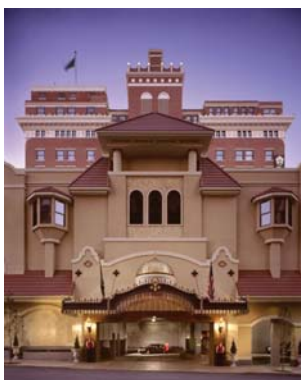
<http://www.aapa.org/gandp/factsheets/title-VII-funding.htm>

The continuity of care act would allow PAs to order home health, hospice and skilled nursing facility care. HR 1178 was a difficult concept to get across to our audience. It was in these presentations that I realized how little some people understood the role of MD/PA team. The concept of practice

WAPA

2033 6th Ave Ste 1100
Seattle, WA 98121
Ph: (800) 552-0612
Fax: (206) 441-5863
Linda Krause
Executive Administrator
Email: lmk@wsma.org
www.wapa.com

Save The Date!



October 2-4, 2008

**WAPA's Annual Fall
Conference** will be at

the gorgeous Davenport Hotel in Spokane, Washington. Please mark your calendar and plan to join us.

Brochures will be available and mailed July 2008.

Approximately 21 category I hours will be applied for through the AAPA. If you have any questions, please call or email the WAPA office at: 1-800-552-0612 ext. 3006 or LMK@WSMA.org

Important Bill Passed!

The amended bill 1103 passed just before the end of the legislative session and is awaiting the Governor's signature. This will provide for a pilot project for the Medical Quality Assurance Commission to have some autonomy over the next five years to manage their own budget, staff, regulation and discipline activities.

This is a very important step forward for physicians and physician assistants in the State of Washington! We didn't get everything we wanted out of this legislation, but it is a huge step toward independence. We

plans, state licensure and the PA role was debated. It is evident that misconceptions in regards to the role of the PA in the health care setting is or may not still be well understood and much needs to be done.

HR 2790 which would elevate the VA PA Advisor to a full-time position in the VA central Office. The AAPA has been working with the 110th Congress to elevate the PA Advisor to the Full - Time Director, located in the VA's central office. There seemed much support for this bill and not much debate was needed. You can check this out on

http://www.aapa.org/gandp/factsheets/va-patient_care.html

The Final bill is S. 1795 to Improve Federal Workers' access to care under the Workers compensation Program. It is interesting that PAs may not be able to provide care to federal workers injured on the job. As I said, much needs to be done to improve the role of PA on a state and national level.

AAPA had Mara Liasson for its Key Note speaker. She is the National Public Radio and national political correspondent who provided her perspective on the prospects for health care legislation and 2008 political landscape. If you like NPR you would really enjoy her talk. There was much excitement given the politics of the day with current elections.

I came away very impressed with AAPAs organization and this experience was very positive. My student colleagues were great partners and prepared very well. They were versed on the issues and were superb representatives to Medex NW, WAPA and all PAs.

Learning Doubled at DoubleTree 2008 WAPA Recertification Review Course and Winter Conference

*by Bill Crowell, MPAS, PA-C
CME Committee Member and President Elect*

Approximately 548 PAs and PA students attended the 2008 19th Recertification Review Course and Winter Conference held at the DoubleTree Hotel Seattle Airport, from January 26-January 30, 2008. As in previous years, there were a number of out-of-state PAs who attended. They came from Alaska, Arizona, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Iowa, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Mexico, New York, North Carolina, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Vermont, and Wisconsin.

thank all of you who contacted your legislators regarding this bill. The process regarding the implementation of the bill will be posted on the WAPA website. This will go into effect, July 1, 2008, so we have a lot of work to do before then.

We'll continue to include you in our implementation planning and keep you updated as we move forward. The bill is available through the [legislative Web site 4SHB1103](#)

WAPA Election Results

Thank you for voting!

The 2008-2009 fiscal year begins July 1, 2008.

Board of Directors who were elected are:

President Elect:

Lyle Larson

Region 2 Director:

Carmen Young

Region 4 Director:

John Tomchick

2 Year AAPA

Delegate:

Kaye Kvam

1 Year AAPA

Delegate: Jeanne

Ellern

1 Year AAPA

Delegate: Sandie

James

1 Year AAPA



L-R: Bill Crowell, Dale Sanderson, Gary Baal and Tom Hughes.

Some of the 30 scheduled lectures included the following: Overview on Chronic Obstructive Pulmonary Disease, Hepatitis A, B, and mostly C, Emergency Medicine Review; Dermatology Review; OA/RA and Fibromyalgia-The Prime Suspects; ENT Review; Management of Serious Infections in Primary Care; Primary Care Neurology Review; Diabetes Review and Primary Care Approach to Eye Diseases to name but a few.

In addition to the regularly scheduled lectures, the winter conference also featured 18 concurrent lectures on such topics as Pediatric Seizures, Approach to Fever from 2 months to 2 years; GU Review for primary Care; Nephrology Review; GI Bleeding; Transition to Insulin Therapy in Type 2 Diabetes; Caring for the Elderly; What's New in DVT; problems with pregnancy, and Management of CHF.

Secondly to the concurrent lectures, the following workshops were conducted: In's and Out's of Joint Injections and Arthrocentesis, Primary Care Neurology Review; ABC's of EKG's; XYZ's of EKG's, and IUD Insertion.

The two dinner programs, "New Advances in the Therapy and Prevention of Infectious Disease," and "Update in the Management of Alzheimer's and Parkinson's disease" were filled. Dr. David Spach was the speaker for the "New Advances in the Therapy and Prevention of Infectious Disease," which was supported by Pfizer and held at the Monsoon Restaurant on 615 19th Ave E, The "Update in the Management of Alzheimer's and Parkinson's Disease" was supported by Novartis and presented by Sierra Farris, PA-C, at the Columbia Tower Club Restaurant at the Columbia Center on 701 5th Avenue. Both were excellent programs and WAPA appreciates the representatives of both pharmaceutical companies for their educational service to the PA profession.

A special thank you goes out to the following pharmaceutical sponsors in their support of WAPA and the winter conference:

Delegate: Allison Warmington

WAPA New Members

Welcome to the following new members of WAPA. These members are either brand new to WAPA or have rejoined after some absence. The more members we have, the better collective voice we have for our patients and our profession.

OOS: Out of State member

PA-S: Physician Assistant Student

Richard Calef
Megan Landis
Kirsten Nygaard
Patricia O'Keefe PA-S
Barbara Simons
Johnny Yun
Michael Bell
Danielle Bullard
Elizabeth Choi
Bradley Coon
Mechelle Fleischer
Russell Fleischer
Angela Fulton
Devon Hanson
Rebecca Hickman PA-S
Matthew James PA-S
Gwen Jones
Cheryl Mielbrecht, OOS
Eric Renk
Matthew Williams
Melanie Wood
Tom York PA-S
Kenneth Dyball
Rebecca Hale
Daniel Hanks
Sarah Kaiser
Robin Martin PA-S
Daniel Sellers
Eric Aronsohn
Gary Baal
Adrian Choate, OOS
Maria Imbesi
Jarre Jarrett
Daniel Lipson PA-S
Hirut Nicocimos PA-S
David Reavis, OOS

Gold sponsor: Pfizer, Boehringer Ingelheim GlaxoSmithKline, and Novartis.

Silver: Merck and Genzyme.

Bronze sponsor: Gilead, Sanofi-Aventis, Forest, and OrthoMcNeil.

As always, the drawings held during the breaks for medical textbooks still remain one of the highlights of the conference. In addition, the AV Company still has lecture CDs for \$5 and DVDs for \$10 available for up to 6 months after the conference.

To all those PAs who practice in Washington, you can take pride in the fact that this winter conference was a success and that your warm reception to those PAs from out-of-state did not go unnoticed. Again, a very special thank you goes to Julie Atchley, PA-C, the CME Coordinator, who worked tirelessly in coordinating the conference and attended to the plethora of minutia details that inevitably arise at the most unexpected times. We of the CME Committee would also like to thank each and every one of you for supporting WAPA.

I want to personally thank all of you who attended the winter conference and making it a success. I hope to see you again at the Annual Fall 2008 Conference, which will be held at the Davenport Hotel, Spokane, WA on October 2-4, 2008.

Regional Reports

REGION 3

by Lisa Drinkwater, MS, PA-C

Region 3: Counties: Whatcom, Skagit and Snohomish

We have two dinner meetings planned for April 2008!

The first is April 2, 2008 at Chuckanut Manor. *David Elkayam, MD will be presenting on the topic of rhinitis management and will entertain a round-table discussion of allergy/asthma/immunology cases - Bring your questions!* This talk is sponsored by *Schering-Plough*.

The second talk is April 30, 2008 - venue in Bellingham TBD. *Mark Silver, MD endocrinologist & diabetologist will be presenting new issues in the management of lipids in the diabetic patient. Abbott sponsors this dinner event. Anthony's at the Bellwether in Bellingham, WA. 6:30 pm reception/7:00 pm dinner & talk*

I'm looking forward to finally having some dinner events! Funding issues, as well as pharma regulations have tightened up and made it more difficult to put on these dinner meetings. Thanks in advance to all of you who can attend, as that will help make it possible to continue.

As always, if any issues arise in our region I'd welcome input. Hope to see you soon.

Brandon Swisher
 Amery Baker
 K Maria Duthie PA-S
 Rick Esdenazi
 Anne Eure
 Troy Fajerson, OOS
 David Forshay, OOS
 Michelle Hunter
 Elizabeth Hutchings
 Lenora Ivanek, Aff
 Anne Jo-Nes PA-S
 Kevin Keating
 Brian Knutson
 Leon Koenck, OOS
 Krista Lindstedt PA-S
 Morgan Maier PA-S
 Sam Morehouse, OOS
 Amber Morrison PA-S
 Carl Nelson
 Carlos Ortiz
 Dale Raschko PA-S
 Sean Rossiter
 Laura Scobie, OOS
 Aileen Stas
 Marilyn Stucker
 Chad Tiller PA-S
 Brian Timm PA-S
 Ilan Wilde
 Stephen Willis PA-S
 Gretchen Wix
 Donna Beardslee
 Stacey Boomer
 Addie Bush
 Matthew Clark
 Jeffrey Elton
 Melissa Glick
 Jasmine Johnson
 Kevin LeFave
 Dwayne Hammond PA-S
 Todd McLaughlin
 Anna Nash
 Allen Noble
 Jay O'Neill
 Dena Pruitt PA-S
 Joanie Scott PA-S
 Sharmila Singh
 Paul Surette PA-S
 Heather Tonga, OOS
 Michael Young
 Anne Albert
 Deborah Brown, OOS
 Jill DeHaro
 Brian Granvall
 Todd Richards, OOS
 Mary Sheridan
 Amy Caine
 Sara Crookshank
 Lisa Dell
 Jeanette Hammond
 Tim McCurdy
 Dion Pastick
 Stacy Williams PA-S

Lisa Drinkwater, MS, PA-C

REGION 4

by John Tomchick, PA-C

Region 4: King, Pierce

April 23, 2008

6:30 pm start

Daniels Broiler, Lake Union

"Physician Assistants and the Changing Allergy Market"

Michael Weiss, MD

NW Asthma and Allergy

RSVP with Ben Lahmann of UCB Pharma at: (206) 218-7858

REGION 5

by Michael Pastick, PA-C

Region 5: Thurston, Clallam, Jefferson, Grays Harbor, Pacific, Wahkiakum, Lewis, Cowlitz, Skamania, Clark

Late winter/early spring greetings from Region 5.

As we shed winter's embrace I'm sure all of us are looking forward to leaving this particular cold and flu season behind. Those of you in any of the primary care specialties (FP, IM, Urgent Care, Peds) know first hand what a robust season this has been. One local urgent care here in Southwest Washington has had several 80+ patient days (That's with 2 providers folks). Enough lamenting about our Infectious disease woes...

I hosted a WAPA CME dinner on Wednesday, March 5th. The event, which was well attended at a local Asian restaurant, featured an excellent discussion on hypertension by Noel Guzman MD. Another dinner is being planned for mid-summer.

A WAPA board retreat will take place on Saturday, March 15th. We will be focusing on goals for the organization for the upcoming year. We all look forward to another productive year working on behalf of the PA's of Washington State.

See you in Spokane in October '08!

Membership Matters

by Sandie James, PA-C, Membership Chair

Have you ever wondered why Washington state PAs:

Are able to have their own DEA numbers, and write for schedule II to V medications? Are licensed by the Medical Quality Assurance Commission rather than a nursing board? Have PA representation on the Interspecialty Council, to the Medical Quality Assurance Commission, a liaison to the WSMA Board of Trustees, and a seat on the Osteopathic Board? Have

reliable, up-to-date information given to members through the website and the Monitor newsletter? Work with WSMA on tort reform? Have representation to the state legislature through a lobbyist who works to protect our practice rights and appropriately expand them? Have WAPA recognized as a leader in state constituent chapters? Have WAPA as a viable non-profit "business" dedicated to promoting PAs in our state?

Have you ever wondered who would fight for you if WAPA were not here?

Answer: No one! WAPA is the ONLY organization in Washington working to ensure your future as a Physician Assistant.

Have you ever wondered how WAPA pays for everything that is necessary to have an impact and make such a huge difference?

Answer: Membership dues! You can have an impact and make a difference by supporting our efforts on your behalf.

Have you ever wondered why some medical providers in Washington State appear to always "do better, get more, have more influence?"

Answer: Membership dues! They have more people who are committed to supporting the efforts of their professional organizations. More members means more influence and more money to pay for lobbyists, lawyers, staff and all that it takes to promote a profession in the state of Washington.

It's a wonderful testament!

The successes Washington PAs have enjoyed are a wonderful testament to our membership, to those dedicated PAs who have supported WAPA year after year and who know they are making a difference for their chosen profession.

WAPA membership dues allow staff and the PAs who volunteer their off-work time to serve on the Board of Directors and on committees, fighting for you. WAPA membership ensures the viability and future of your profession. There is no one else to do it for you. NO ONE! With your support, we will continue to be here for you, making a wonderful difference.

Join WAPA today and become an active participant and not a passive recipient. Your membership dues matter, and will make a difference!

A Letter On My Medical Mission to Haiti

by Randall Dickson, MPAS, PA-C, WAPA Member

Well, I made it home safely and had a few days to contemplate my trip to Haiti. It was an emotional roller coaster while I was there and I am still finding myself a bit disconnected to my realities here at home.



My trip started out with missing my

flight with the rest of our group from Miami (due to my connecting flight getting in late), then having the next flight canceled and having to wait another day to fly to Haiti, to then find out after waiting for six hours in a very small airport that there were no available seats. I was a bit frustrated at the time but was able to see my purpose why all this happened the next day. That night I went to a dance program at a boys' orphanage, which blew me away. It really was wonderful and the story of the home was a real blessing.

The next day, since our flight did not leave until 3 pm, Pat (the Haiti coordinator) and I jumped on a "tap-tap" (Haitian cab-truck that holds as many people as can squeeze together and when you want off, you "tap" on the side and they will stop) it cost about 10-50 cents to ride. We went downtown Port au Prince where I got to see this city which most of the other members of our group did not get the chance to see. The city is full of people walking around and few cars. There are no lines on the road so everyone just drives - what ever is convenient for them. Most of the Haitians make a living (70% unemployment) by selling things on the sidewalks. There are miles and miles of vendors. Some are selling five or six potatoes, charcoal, soap, or clothes that come from other countries as donations. (The Haitians call the clothes they sell after President Kennedy who started sending clothes to Haiti.)

Near the President's Palace, which was white and very beautiful, the vendors had manual typewriters where the businessmen went and dictated letters and others had them type out various forms.

But the most important thing that we did in Port au Prince was a visit to St. Vincent's school for the handicapped. This is where we setup an account and an agreement to have them do surgery and casting for our patients with club feet, that we refer. At the school the kids were on recess and all wanted to touch the "blons", the name they have for white people. (No there is not a "d" on blon.) It is not an insult but just a name.

Sometimes when they meet you they say "it is a pleasure to meet you blon", in Creole naturally. Pat the director has been going to Haiti for 20 years and speaks Creole, but all the Haitians always want to speak French to the blons because they know we would never know Creole and have been told that it is not polite to speak Creole to blons.

Although Port au Prince is known to be very dangerous, especially for Americans, I never felt unsafe. It was a bit odd to see literally 10,000 people or more walking around and we were the only two white people. Everyone does stare at you out of curiosity. Many of the houses in Port au Prince were made of concrete, even the roofs. Haiti has cut down most of their trees, and therefore, wood is scarce.

The deforestation has also contributed to an increase in air pollution and major land slides into the ocean. The houses are connected to each other and have no room for yards or plants.

It looks like a large, gray, housing project. The streets are so dirty since they have no garbage pickup; everyone just puts it on the streets. At night, you smell a lot of garbage being burned. Also, at night after 10 pm, there is no electricity.

They only have electricity for 4 hours a night. So, when the lights go out, it really gets dark.

Once I got to our final destination, an area about 10 miles west of Jeremie (which is directly south of Guantanamo, Cuba), I joined our group. There were 4 PAs, 3 MDs, 1 RN, 2 LPNs, 1 third year medical student, 1 NP, 1 Midwife, 2 nursing students and 2 water engineers. (A really great group!)

We stayed at this very large housing complex that the Catholic church built for these types of medical missions. The site was spectacular. We had a great view of the ocean and the mountains. There were a lot of farm animals all around which kept us up at night with their racket. Our sleeping arrangements were not great, but it was better than I expected. Most of us slept on air mattresses on cement floors. Some slept outside on the porches. We had no air conditioning and no hot water. But it really did not seem to bother us much. We were given three meals a day and had three cooks preparing all the meals. We ate a lot of goat. It actually was very tasty until we all watched them slaughter one.

At night along with all the animals making their noise, we had a Voodoo church close by which started very loud chanting around 2 am to 4 am. We also got a chance to visit a Voodoo priest, which was very weird. Most of the Haitians mix their Catholicism with Voodoo.

Our two clinic sites were under the trees, one close by our residence and the other ten miles further into the wilderness. We saw 1,650 patients in five days. Most of these patients showed up at 6am and were seen by us between 9-4pm. They never complained about waiting and many of them just came so they can say they were seen by a "doctor."

Other than severe malnutrition, we did have some really sick patients, such as a three week old who had never seen a doctor, who had spin bifida and a prolapsed rectum, a 16 year old with end stage AIDS, again never seen by a provider, tib/fib fracture that was never set in a 3 year old, and a 35 year old women with a sixty inch abdomen, probably a tumor, that hasn't been treated. We sent a few to the hospital and hopefully saved some from getting worse by treating their very high blood pressure and paying for their cataract surgeries. At times we all got frustrated because it seemed like most of our patients seemed to want glasses (a big fashion statement) and complained about heartburn. But then I realized most of these people just want some sense of belonging and needed someone to touch them and say they are okay.

The children were so cute. We all had a great time with them. I took balloons and plastic diamond and gem stone rings for

the kids (Mom donated the funds for this). I was a very big hit with them. They also loved having their pictures taken and when they saw themselves on our digital cameras they would laugh. I also gave the school a lot of crayons, stickers and coloring books. As I mentioned earlier, Haiti is really dirty but the people are extremely clean. They all dressed up to come to clinic; their clothes were spotless and ironed with creases. It was a bit funny to see the styles of clothes, mostly from the 70s and 80s. Remember, they all wear "Kennedy's." We treated all the patients for worms with Albendazole, since most have them. That was a bit odd for me to hear adults talk freely about having worms. The majority of the Haitians we saw also had scabies. We saw a few with malaria and typhoid fever. Dental disease is also a major problem, so we also passed out toothbrushes.

The medicine we had to offer was a bit limited as well. It is really hard to get medicine into the country. If you try to bring it in, the custom agents will often confiscate it. We packaged our own medicine at night after clinic and ran a very rudimentary pharmacy. Each provider had a Creole interpreter, which we were very grateful for. We could not have done anything without them. We paid them \$40 a day, that sounds like it is not much, but when you consider the average Haitian makes \$2-5 a day, they did pretty well.

We went to town, Jeremie, twice. (It looks like a bomb dropped on it, but there are still people living there.) Our first trip was at night to join our interpreters at a dance club. We had a lot of fun, but once again, it was very dark when we left. Our day trip was to take one of our PAs to the hospital for a high fever. She wanted to be tested for malaria and the dengue fever. (Thankful it was just the flu.) She brought all of her own needles and tubes since they probably would not have sterile ones. While we were there, I went to their ER where there was a 7 year old who spilled scalding water on him and had severe burns to about 30% of his body. He was screaming in pain and I asked the nurse to give him a shot of pain medicine and she told me they had none. This is the only hospital in town, and they had no pain meds! We gave the boy one ibuprofen we happened to have with us. Also, they would not treat the patient until his parents proved they could pay for the service, so we gave the father \$40 so they could start treating the boy. It was so sad.

I walked around the hospital to see the worst conditions one could imagine. The birthing center was basically a gurney with stirrups, a plastic sheet and a bucket to catch the bleeding, etc. The hospital beds had no sheets and some had no mattress. Most of the doctors are from Cuba. There was only one on duty for the entire hospital and only a handful of nurses. The patients in the hospital were very sick since they do not go there unless it is really necessary since they have to pay in advance.

On a lighter note, we did enjoy the swimming in the ocean every night after work. The water was 85 degrees and crystal clear. We tried to ignore that there is no sewage treatment in the country when we were swimming. Our group was really wonderful and we had a lot of laughs together. The sunrises were heavenly and we even got to see a lunar eclipse one night as well as millions of stars.

So, as you can see from this long-winded letter, I have learned a lot about humanity and how grateful I am that I am able to live the life we have here in the U.S. I am not sure what will get Haiti out of their poverty, but I wish I did. I am a different person since my visit. I am not sure if I will go back to Haiti, but I do want to do another medical mission. I want to thank Pat Labuda from St. Francis of Assisi Parish in Derwood, Maryland, the incredible medical group I worked with and the wonderful and thankful people of Haiti for letting me have this experience.

Health Leadership International Launches Global Health Literacy Project in Lao PDR

*by Phoumy Bounkeua, PA-C
WAPA Elections Committee Member*

SEATTLE, WA - A team of health professionals under the auspices of the Seattle non-profit, Health Leadership International (HLI) travelled to Lao PDR on February 1, 2008 to offer a two-week training in disease prevention and basic healthcare for village health workers from highland areas near Luang Prabang. The team was going at the invitation of the Lao Ministry of Health and will conduct classes at the Luang Prabang Provincial Hospital, Luang Prabang, Lao PDR.



Laos PDR Village

Under the leadership of Laotian-American, Phoumy Bounkeua, a Physician Assistant and Past President of Washington Academy of Physician Assistants, the HLI medical volunteers

hope to build manpower capacity in outlying villages by providing continuing medical education to those from underserved areas. The HLI teaching staff employed culturally and linguistically appropriate, low-literacy curriculum materials including Laotian health training videos and other visual aids. Course offerings will include: History and Physical, Emergency Medicine, Pediatrics, Reproductive Health and HIV/AIDS, Medical Management and Medical English.



A suture workshop

Phoumy has returned to Lao each year since 2002 and has observed the medical needs of his native land. In November, 2007 he returned to Lao PDR with two other HLI Lao project volunteers - Campbell Robert McIntyre, MD, a Family Practice Physician with experience in Reproductive Health, and Susan Reba McIntyre, PhD, who works internationally in the field of medical social work and HIV/AIDS education. The three met with Laotian Health Ministry officials to discuss Laotian healthcare priorities and to devise a curriculum plan that would address the areas of greatest need.



Health Leadership International's Staff-GLOBAL HEALTH LITERACY PROJECT IN LAO PDR

Health Leadership International is a volunteer organization that

promotes education and leadership training, strengthens health systems, and advances creative and sustainable solutions through global partnerships with local leaders. It is a registered nonprofit in the state of Washington.

HLI Post CME Training Final Report

Phoumy Bounkeua, PA-C, Past President of Washington State Academy of Physician Assistants, lead a Seattle based non-profit organization HEALTH LEADERSHIP INTERNATIONAL committed to building sustainable health projects in Lao PDR, conducted two weeks of Continuing Medical Education for the Healthcare Workers (hospital directors, doctors, medical assistants, nurses and tech-Other) of Luang Prabang Provincial Hospital.

The goal of this pilot program was to strengthen the manpower capacity of the Ministry of Health in remote Lao villages, addressing the special healthcare provider training and educational of medical assistants and nurses in District hospitals and in remote health posts. This initial pilot training program took place in Luang Prabang Provincial Hospital between February 4, 2008 - February 15, 2008. There were 108 health care workers including provincial hospital directors, doctors, medical assistants, nurses enrolled in the continuing medical education courses.

Course offerings included: Medical Leadership and Management, Advance History and Physical Exam & Assessment, Emergency Medicine, Pediatric Health, Ultrasound, Reproductive Health and HIV/AIDS, and Medical English.

HLI Lao PDR Donations

- 18 Primary Healthcare students received Where There is No Doctor, Lao edition
- 18 Primary Healthcare students from the district received medical kits with a stethoscope, blood pressure cuff, and otoscope
- 45 Reproductive Health students received Where Women Have No Doctor, Lao Edition
- HLI provided wireless Internet (WiFi) to the Luang Prabang Provincial Hospital
- HLI and SonoSite, Seattle donated two portable Ultrasound 180 units: one to Luang Prabang Provincial Hospital and the second to Oudomxay Provincial Hospital.
- Packages of basic toiletries (soap, detergent, shampoo, ovaltine) to 393 children at the Luang Prabang orphanage school.

HLI post training evaluations indicated a high satisfaction for the courses provided. The quality of teaching faculty and materials provided was well received by participants. The

participants overwhelmingly ranked Medical English as the most valuable tool for them to use for their every day practice, since there are many tourist seeking medical care from Luang Prabang Provincial Hospital. The Director Sichanh stated that the hospital staff "use to run away from the tourist who came to the hospital" now they are armed with the tool to greet and will interact with all English speaking tourists who come to the hospital for medical care. The members of the Health Leadership International team are Phoumy Bounkeua, PA-C, PhD, Susan Reba McIntyre, PhD; R Campbell McIntyre, MD; William Affolter, MD; Suzanne Tedesko, Media Director, and Scott Sato, Technical Director.

This training was made possible by financial grants and support from the Robert K. Pedersen Global Outreach Endowment/Physician Assistant Foundation, Seattle International Rotary, Planned Parenthood of Western Washington and the MEDEX Northwest Physician Assistant Program, University of Washington School of Medicine and SonoSite, Seattle, Washington, and Washington State Academy of Physician Assistants.

MEDEX NW Student Scholarship Winners

WAPA Scholarship Winners: Chris Rieman, Anne Jo-Ness and Rebecca Johnson

WAPA Barb Gunter Flynn Award: Hirut Nicodimos

WAPA Steve Thurgood Family Award: Kari Duclos



Beka Johnson, Anne Jo-Ness, Eugene Partridge, Hirut Nicodimos and Chris Rieman.

[Forward email](#)

✉ **SafeUnsubscribe®**

This email was sent to bjw@wsma.org, by bjw@wsma.org
[Update Profile/Email Address](#) | Instant removal with [SafeUnsubscribe™](#) | [Privacy Policy](#).

Email Marketing by



Washington State Medical Association | 2033 6th Ave Ste 1100 | Seattle | WA | 98121