

OP **Walk** TALK

A PUBLICATION FOR THE FRIENDS OF OPERATION WALK DENVER

www.opwalkdenver.org



TEARS IN GUATEMALA

by Aileen Paez, RPT

Guatemala City, Guatemala. We arrive at the Military Hospital for the preoperative clinical exams. People line the hallways anxiously waiting to be seen by “los doctores americanos”, the American doctors. Some mouth words silently — I can only imagine that they are praying. There is a woman with clenched hands and a tear slowly going down her face. A tear of anticipation.

As the morning continues, patients get interviewed and then examined by our medical and orthopedic teams. I assist Lorena, a forty-three year old woman with severe Lupus which has eroded both of her hips. I can see the pain in her face as she tries to lie down on the stretcher to be examined. The examination starts and the pain increases. I give her my hand to hold, and she nearly crushes it. The tears of pain start without a single sound. She endures the examination and with tears gives me a smile.

Later that morning we meet Walter and his wife. Walter is examined. He is a forty-six year old man who fractured his hip after falling off a roof while at work. Subsequently he had many complications and has not been able to work for 3 years. After he is examined, Dr. Haas asks me to translate to them that if the medical team clears him, he would love to give him a new hip. As I finish the words, tears start streaming down both of their faces. Tears of joy.

Surgeries begin that same day. The surgical teams are busy right away. As part of the therapy team, we restlessly wait our turn to help these patients. The next morning I meet Jose who has

had both knees replaced. I explain what therapy will entail this morning and we begin. He is told that I will have to push him a little, which he happily accepts. We start with slightly gentle exercises and then we begin to bend. With a little “help” from me, he bends his knees to 100 degrees, which for those who don’t know, this is unbelievable for only one day after surgery. I look at him and realize I have caused tears of pain. Before I have a chance to apologize, he quickly places his hand on my forehead and blesses me.

Later that day, I have the privilege of working with Flor. She is amazing. She gets up and begins walking almost as easily as I can. As we head back to her room, tears begin to run down her face. I am not sure what these tears are about, so I ask. She tells me she is so happy, she can now be an active part of her family. I ask her in Spanish, “Did you not believe that before you had surgery?” She replies, “Before I hoped. Now I know”. Tears of accomplishment.

The next few days are filled with moments like these. Our last day arrives. Just the day before, Lorena, the woman I met on the first day, had her hip surgery. I am excited to be able to work with her. She does wonderfully. She smiles with confidence. She is pleased with her own success. The tears start streaming. I realize that the tears are not hers but my own. She, and all of these people, have touched a part of my heart and will be with me for a long time. Tears of gratitude. So, thank you, Guatemala. We hope to see you again.



Photo credit: Cohan Zarnoch, R.N., OpWalk volunteer



PLEASE TAKE A NUMBER

by Jim Boyle PA-C, *Operation Walk Denver Medical Coordinator*

When organizing a mission trip with Operation Walk, it is very easy to get caught up with numbers. We have a team of at least 65 people. We screen over 80 patients. We operate on 60 patients and replace over 70 joints. We do this all in less than 7 days. You can imagine the potential chaos that ensues when we arrive at a site and have very tight time restrictions as well as a language barrier to deal with. Typically, the average patient has 3 or 4 proper names. Many of the patients share 1 or 2 of the same names! It can be very frustrating keeping track of everyone's names as well as all their medical information. So, we are forced to assign OpWalk numbers to every patient. With this system in place, we are able to converse about and follow patients for efficiently. Therefore we have less chances of making errors or having identity problems with the patient population. As the medical team is presenting a patient's case, or the operating room is calling for a patient from the floor, it is always prefaced with a number. "Dr. Dennis, did you see #35? Can you ask the floor to send for #56? Has #67 labs come back?"

But, wait a minute! If mission work is truly the essence of good medicine, how can we possibly be calling these people by number?! Isn't that cold and insensitive? Don't they deserve better than that? Have we done so many mission trips that we resorted to a numerical logging system for human lives touched? I wanted and needed to find out.

What I realized is that an Operation Walk mission trip can possibly be considered a modern day miracle. Webster defines miracle as "an extraordinary event manifesting divine intervention in human affairs." It is very hard to argue the fact that God is with us on every trip we take. For us to accomplish our goals in such a short amount of time and achieve the results that we do, it truly can be considered an extraordinary event. An event we could never complete without the presence and grace of God. I overheard our recovery room charge nurse, Sharon, whisper in each patient's ear, "Vaya con Dios" ("Go with God") as she kissed them on their foreheads when they left to return to the nursing floor. I witnessed physician assistants and doctors praying with patients before and after their surgeries. Nurses and physical therapists hugging and laughing with patients as their eyes welled up with tears of joy. Other team members comforting patients by holding their hand and sharing a warm smile. A smile that seems to say, "Everything is going to be ok." I even have seen patients singing to our team! And most importantly, patients WALKing for our team. For they all want to WALK, to show how their lives are changed. It is the best sign of appreciation they can show.

So, as Sharon tells our patients "Vaya con Dios" as they complete their first hurdle to recovery, I tell them on the nursing floor, "Camina con Dios" ("Walk with God") as they WALK down the hallway to enjoy a new life!

What I discovered was anything but insensitive. In fact, I never knew just how much emotion and feeling can go into a number!



Photo credit: Cohan Zarnoch, R.N., OpWalk volunteer



A SUCCESSFUL MISSION IN GUATEMALA

by Douglas A. Dennis, MD, *Executive Director, Operation Walk Denver*

Spring means mission time for Operation Walk Denver. We have recently returned from a very successful mission to Guatemala in which 70 total hip and knee replacements were performed on some of the most complex patients we have encountered. It was our first trip to Guatemala and was extremely rewarding working with a very conscientious local medical team who are most dedicated to their impoverished Guatemalans. This is certainly a site we plan to return to in the future.

I would like to share a touching story about Jose, a sixty-seven year old man, who was barely able to walk with severely bowed knees (35 degrees; see photos). We replaced both of his knees without any complication. Our only problem was he continued to remove the Ace wrap dressing from one of his knees and kept wrapping it around both of his legs very tightly because he feared his legs would “go crooked again.” After our reassurance, he progressed rapidly and our Guatemalan medical team emailed that he was walking nearly normally at two weeks following his knee replacements. It was so gratifying for those of us who were involved in his care.



Planning is well on its way for our fifth annual “Walk of Dreams Gala” to be held at the Marriott Denver City Center hotel on September 18, 2010. This year our entertainment will feature Dr. Kevin Fitzgerald, a well known comedian and television personality. This has been a popular event for my patients, friends and supporters of Operation Walk Denver. Please add this date to your calendars. More details are contained within this issue of Op Walk Talk.

Additionally, I want to provide you with an update of our Principal Gift/Endowment campaign. The purpose of this endeavor is to ensure the long-term viability of Operation Walk Denver missions. Our goal is to raise a minimum of four million dollars over the next two years. Accomplishing this goal would provide the financial means to ensure two missions each year for many years to come, as well as for us to expand our ability to provide satellite based education to surgeons in impoverished

countries to help them care for their own people who suffer from disabling arthritis. We are pleased to announce we’ve received our first one million dollars in endowment commitments, but still have a ways to go. I’m excited to envision Operation Walk Denver as being a part of the legacy of our donors and their families.

Lastly, I want to express my sincerest thanks to all of my Operation Walk Denver team, who worked tirelessly to help so many patients. Additional thanks are due to Porter Adventist Hospital who donated many of our supplies, DePuy, a Johnson and Johnson Company, who provided us with all of the total joint implants; and to the many other generous donors who provided us with the cash required to travel to our international sites. Without all of your help, our missions would not be possible.



SAVE THE DATE: September 18 2010 *Walk of Dreams*

Marriott Denver City Center

ENTERTAINMENT:
Dr. Kevin Fitzgerald
Doctor of Veterinary Medicine, Comedian, T.V. Personality

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Thank You to Our Volunteers

Entering through heavily guarded gates, 63 dedicated volunteers of Operation Walk Denver spent their time at Militar Centro Medico in Guatemala City, Guatemala during our April 2010 mission.

17 pallets of donated supplies, 53 boxes of donated implants and surgical instruments, totaling approximately 9,078 pounds of cargo, were carefully packed and shipped prior to the trip.

Six surgeons and operating room staff spent 7,774 minutes, almost 130 hours, in the operating rooms completing 70 total joint replacements on 59 patients. All this was accomplished by a top-notch sterile processing team with access to only one autoclave to sterilize the surgical tools.

The cooperation and coordination among team members from Denver and Guatemala was non-stop. Beginning with the preoperative teaching of exercises, IV

placement, and transportation, then on to the operating room, post-op care unit, and back to the floor nurses care and continual physical therapy instruction and aid.

The patients of Guatemala received quality care that only gracious hearts and souls of the volunteers could provide. From the bottom of our hearts, we wish to sincerely thank the following people who generously contributed to the success of our mission.

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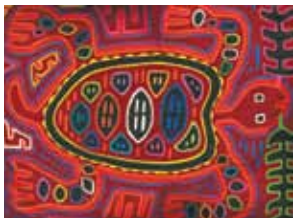
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