Global Health Residency Program

Site Locations
Why Global Health?

To change the outcome for children around the world through research, education, training and patient care.
The Global Health Residency Program at Cincinnati Children’s is designed to empower residents to make a difference for all children, especially the poor and under-served children, here and around the world.

From the Americas to Africa to Asia, our residents have worked in clinics and hospitals across the globe. With the help of faculty, we have established educational and research relationships at many sites, and have made it a priority to promote the exchange of ideas between participating institutions. We encourage all Cincinnati Children’s (CCHMC) residents to participate in this one-month (at minimum) global health experience.

The program offers a structured Global Health experience for all of our residents as well as a Global Health Pathway for residents who are passionate about global health. The program has various target sites throughout the United States and the world. These are sites that have established connections to which our faculty, fellows, or residents have planned or ongoing projects. We encourage the residents to participate at these already established sites. However, we will work with residents interested in looking at other opportunities in Africa, Asia, Europe, Central America, and South America in order to tailor one’s experience in the program.

Global Health Resident Experience
(Open to all residents)
To support our residents in these global experiences, the Global Health program provides administrative and financial support. This rotation will encourage residents to view the world differently after their global health experience and will help them to better understand and contribute to the reversal of health inequities in our country and abroad.

Global Health Residency Pathway
The Global Health Pathway is a three year program designed to engage and inspire residents to seek post residency opportunities and training in the field of global health. As a participant of the Global Health Pathway, the residency experience will be tailored to provide ample opportunities to go abroad while equipping leaders in the field of global health medicine. Typically, five residents per year are part of the Global Health Pathway.

The Global Health Pathway is now open to all combined residents though the requirements of the individual combined programs must still be met. Residents in the Global Health Pathway who participate in 70% of all Global Health Electives, meetings, etc., complete two Global Health Rotations and complete a scholarly project will receive a certificate of achievement.

Please contact the Global Health Residency Program Coordinator at 513-803-2966 for more information on any of the sites, including a list of recent residents who have traveled there.
Target Sites

The following pages include brief summaries of established sites where residents have participated.
Kamuzu Central Hospital
Lilongwe, Malawi

Kamuzu Central Hospital (KCH) is a tertiary referral hospital located in Lilongwe, serving as a major referral center for the surrounding area. There are generally 250–400 pediatric inpatients in the pediatric ward at any given time. Within Pediatrics, there are the Emergency Zone (EZ), the Red Zone, HDU, Children’s Ward B, Children’s Ward C, NICU, the Nursery (0–6 months), and the Nutrition unit. Affiliated with the hospital, is the UNC research program and the Baylor HIV Clinic.

While at KCH, residents are generally free to rotate through any of the pediatric areas. However, they most commonly need help in the EZ. On a typical day, residents would go to morning report to learn about the number of inpatients and any interesting cases overnight and then start seeing patients. In the EZ, rounds will likely get interrupted by new patients coming in. With limited nurses, residents will frequently start IVs, draw blood, run Malaria tests, check hemoglobins, give breathing treatments, and visit the blood bank. Residents primarily deal with new patients and moving patients out of the EZ. Afternoon rounds allow everyone to be seen again. When seeing patients, residents should try to grab a medical student or a nurse to translate. Residents will perform exams and write notes, then help implement a plan. Departure time is between 5–7 pm., which may not seem like a long day, but is much more exhausting than in the US, as you actively resuscitate a large number of patients. While at KCH, residents are encouraged to see what the Baylor people do and also try to see a district hospital to see how different the system is.

About Malawi

Lilongwe has existed for centuries as a small fishing village on the banks of the Lilongwe River. It is the capital and largest city of Malawi. The city is located in the central region of Malawi, near the border of Mozambique and Zambia and has an estimated population of 781,538 as of 2012. Lilongwe is divided into a New and Old City. The former has hotels, embassies and offices while the latter has markets, bus stations, cafes and restaurants. There are many excellent restaurants in the city within a reasonable distance from the CCHMC house. The modern shops of the city are contrasted by the street and walled markets of Old Town. Several markets, including the main city market, a smaller vegetable market, and a more touristy craft market are within easy walking distance from the house. There are also several opportunities for safari leaving from Lilongwe; more popular options go to South Luangwa National Park in Zambia. Lake Malawi is another popular weekend destination.

Malawi has 46.9% of their population ranging from age 0–14, and the median age is 17. The infant mortality rate is 48.01 deaths/1,000 live births. It was estimated in 2004 that there was 53% of the population below the poverty line. From November to April is a warm rainy season (malaria and malnutrition are seen most commonly at this time). The hospital is potentially most quiet June–August.
Gallup Indian Medical Center
Gallup, New Mexico

Gallup Indian Medical Center (GIMC) is a 99-bed hospital in Gallup, New Mexico on the border of the Navajo Reservation. GIMC provides primary and secondary/specialty care for the Southeastern service unit of the Navajo Reservation and the Zuni Nation. GIMC is one of the busiest Indian Health Service (IHS) sites in the nation with 304,000 outpatient encounters and 5,800 inpatient admissions annually, and it has the largest staff of all Navajo Area IHS facilities. Clinical specialties at GIMC include Pediatrics, Internal Medicine, Cardiology, Anesthesia, OB/GYN, General Surgery, Orthopedics, Ophthalmology, ENT, Radiology, Pathology, Psychiatry, Emergency Medicine, and Urology.

Residents will be supervised by IHS pediatricians in the Outpatient Pediatric Clinic and Emergency Department. They will participate in off-site prevention and treatment programs associated with Envision New Mexico, an initiative for child healthcare quality, school-based, community, and traditional Navajo health efforts.

About Gallup
The Plateaus and mountains close to Gallup offer opportunities for hiking, back-packing and camping. There are several national mountains and parks within easy driving distance. Albuquerque, with all the services and cultural events offered in a city its size, is just two hours East of Gallup. There are many choices for cross-country and downhill skiing within 1 to 3 hours of Gallup.

The city of Gallup has a population of approximately 23,000. It is perhaps best known as the main trading center for the Navajo Nation. It is estimated that 85% of the entire world’s trade in Native American arts and crafts is distributed through Gallup area businesses. Historic Route 66 still runs completely through Gallup.

Forty percent of Native American children live in poverty. The Navajo Nation had a poverty rate of 42% and a median age of 24 in the 2000 US census. Infant Mortality Rate is 5.4 deaths/1,000 live births.

There are nineteen HPSAs on the Navajo Reservation. Compared to US averages, the Navajo Nation has higher rates of death from suicide, homicide, injury, pneumonia and influenza. Navajo children also have higher than national average rates of type II diabetes, teen births, infant deaths and post-neonatal deaths.

Places to Visit
El Morro: www.nps.gov/elmo/index.htm
Chaco Canyon: (a longer and rather more trying trip) www.nps.gov/chcu/index.htm
Canyon de Chelly: Two hour drive from Gallup to Chinle, AZ

More Information
www.envisionnm.org
www.nps.gov/elmo/index.htm
www.nps.gov/chcu/index.htm

CCHMC Contact:
Dr. Stephen Warrick
stephen.warrick@cchmc.org
Dr. Brian Volck
brian.volck@cchmc.org

Flight: $450–$500
License: None required.
Must complete extensive paperwork and obtain fingerprints. (See Global Health Coordinator for paperwork.)

Lodging: $55–$75/night
Meals: $20–$30/day

Recent Resident(s): Matt Graves, Ligia Alfaro, Susan Lee, Jessica McPhaul
Christian Medical College Hospital
Vellore, India

The Christian Medical College (CMC) hospital began as the effort of an American physician named Ida Scudder, one of the first female graduates of a US medical school, who began a clinic in Vellore in 1900. By 1918 she had built a 40 bed hospital and began training young women. In 1942, she started a Women’s Medical College and in 1947 CMC began admitting both male and female students.

The hospital has grown substantially, and now has a total of 1,957 beds in the main hospital plus an additional 500+ beds in the affiliated hospitals in Vellore Town. The annual number of inpatients is 190,000, and annual outpatient is 1.8 million. The 7,600 staff includes 1,200 physicians and 2,400 nurses.

The CMC, a center of excellence, has set a record of achievements. It has completed 2,500 renal transplants and over 10,000 open heart surgeries. The hospital is also a pioneer in bone marrow transplant.

The hospital is the regional referral center for both adult and pediatric care and has a high level pediatric ICU and cardiac ICU. There are also opportunities to attend a variety of outpatient clinics (such as tuberculosis, HIV clinics, as well as other sub-specialties).

CMC is well known for a substantial research portfolio, including over 30 collaborations with institutions around the world. CMC has among the highest number of research publications per year among the 300+ medical colleges in India.

About Vellore Region
There are excellent opportunities for weekend travel from Vellore such as Mohaballipuram, Kerala, Goa, the Andaman Islands, Delhi (home of the Taj Mahal), and Mumbai.

In July 2014 India’s population was estimated to be 1,236,344,631. Of that, 29.7% of the population is under the age of 15. The infant mortality rate is 43.19 deaths/1,000 live births, and the median age is 26 years old. Health expenditure is 3.9% of GDP. It was also estimated in 2010 that 29.8% of the population is below the poverty line.

More Information
www.cmch-vellore.edu/
www.cmch-vellore.edu/misc/volunteer_guide_new/main.htm
Contact: Prof Anna Simon, annasimon@cmcvellore.ac.in
CCHMC Contact: Dr. Mark Steinhoff, Prof – Div Dir Global Child Health Center mark.steinhoff@cchmc.org
Dr Steinhoff was faculty at CMCH from 1980–1985.

Flight: avg. $1500
Visa: Required. Process takes about three weeks. Papers and passports must be sent to NY, but it is not a complicated process.
License: A letter and a form from the program director detailing what rotations you will be doing is required. The vice principal from the college will help with the application process. Observers have to pay about $200 for one month. Paperwork takes about 2–3 weeks.

Accommodations: Bagayam College Campus, a nice big area about 7 km from the hospital. 90% of the attendings live there as well as medical students and other employees. About $13 a day for a two bedroom with one bathroom with A/C. Rooms cleaned twice a week. Internet access can be obtained at the Campus library – $8 a month for one device at a time. WIFI also works in the hospital. Can get room with cable internet access and use the same password.

Recent Resident(s): Carmen Leon Astudillo, Catalina Cabrera Salcedo
Hospital Infantil Robert Reid Cabral
and/or Centro de Obstetricia y Ginecología
Santo Domingo, Dominican Republic

Two hospitals are available to rotate through, Hospital Infantil Robert Reid Cabral or Centro de Obstetricia y Ginecología.

Hospital Infantil Robert Reid Cabral
The Hospital Infantil Robert Reid Cabral (Dr. Robert Reid Cabral’s Children’s Hospital) is the primary pediatric hospital in the Dominican Republic and is located in the capital city of Santo Domingo. The hospital aims to provide great improvements to the healthcare of children in the Dominican Republic.

This free standing children’s hospital is a 350-bed teaching hospital with most pediatric specialties available. Through the division of infectious diseases, residents will get acquainted with tropical diseases such as Dengue fever, malaria, leptospirosis, and cholera. Residents from HIRRC have done rotations at CCHMC and we would love to have more CCHMC residents doing rotations at Hospital Infantil.

The hospital is also developing research initiatives in Epidemiology and other clinical areas, all of which are aimed at improving the quality of medical care in the country.

Centro de Obstetricia y Ginecología
Centro de Obstetricia y Ginecología is one of the major delivery centers in the city. It is a private hospital with an estimated 2,500 births per year. A former CCHMC Neonatal Fellowship graduate, Rafael Mena, runs the newborn NICU and hospitalist service and will spend one-on-one time with residents opting to do this rotation.

Universidad Iberoamericana
Universidad Iberoamericana (UNIBE), the main university, has an arrangement with CCHMC for their students to rotate in Cincinnati while UNIBE hosts CCHMC residents to interact with their medical students. CCHMC residents could actively participate in lectures and workshops on topics such as quality improvement, patient safety, simulation and evidence based medicine.

About Dominican Republic
Dominican Republic (DR) was the first country discovered in the America’s by Christopher Columbus in 1492. It still has the first cathedral and university of the Americas. DR is a developing nation with a population of 10 million; 28% are under the age of 14. Infant mortality rate is 19.63 deaths/1,000 live births. Health expenditure is 5.4% of GDP The main language is Spanish, though, many can speak English. It has beautiful beaches, sunsets, and people. The summer months, June to August are very hot. The best months are January to April with mostly 70–80 degree weather.
CCHMC Brazil
Fortaleza, Ceará, Brazil

In recent decades, Brazil has emerged as the clear economic and scientific powerhouse of Latin America, yet stark disparities in child health persist, especially in the country’s developing Northeast region. Faculty at CCHMC are engaged in education and research initiatives throughout Brazil, with a major focus in Fortaleza—an urban center of 3.5 million people in the Northeastern state of Ceará. Together with colleagues at the Institute for Biomedicine(IBIMED)/Center for Global Health at the Faculty of Medicine of the Federal University of Ceará (UFC), they conduct NIH- and Gates Foundation-funded research addressing the epidemiology, pathophysiology, and interventions for childhood diarrhea and undernutrition. Researchers are initiating collaborations in Fortaleza focused on influenza and prematurity. This exciting opportunity bridges tremendous institutional strengths of CCHMC with educational and research opportunities in Fortaleza.

Venues to support clinical and research training for CCHMC trainees include:

• Hospital Infantil Albert Sabin: a 330-bed tertiary children’s hospital, with multiple pediatric subspecialties, including emergency medicine and pediatric and neonatal intensive care.
• Hospital Sao Jose: a 135-bed infectious disease hospital, with a dedicated pediatric wing and pediatric infectious disease physicians. Treats patients with a variety of infectious diseases, including, but not limited to, HIV/AIDS, TB, hepatitidities, leshmaniasis, leptospirosis, and neurocysticercosis.
• Hospital Maternidade Escolar: Directly adjacent to IBIMED. Public maternity hospital with dedicated NICU and normal newborn nursery. The hospital attends 5,000 births a year, 12% of which are premature.
• The Institute for Early Childhood (IPREDE), an outpatient center focused on early childhood interventions for nutrition and neurodevelopment.

About Fortaleza
Fortaleza is the capital city of the northeastern State of Ceará. Fortaleza has more than 3.3 million people, making it the fifth largest metropolis in Brazil. Visitors are attracted by a combination of the sunny beaches, the busy and safe nightlife, the delicious food, the rich Brazilian culture, and the very peaceful and friendly people.

As of July 2014, Brazil’s population was reported to be 201.4 million. Infant mortality rate is 19.21 deaths/1000 live births. Health expenditure is 8.9% of GDP.
Non-Target Sites

The following pages include brief summaries of additional Non-Target sites where Residents have completed rotations.
Mbingo Baptist Hospital
Cameroon

Mbingo Baptist Hospital is a 280-bed referral hospital in rural west Cameroon. The west side of the country is primarily English-speaking, but there are some patients that speak French or Pidgin English only. Translation is provided via Cameroonian nurses and residents, who usually speak all three languages. Mbingo has a pediatric ward, NICU, HIV/AIDS treatment center, and residency program for Cameroonians. Mbingo is a mission hospital with a Christian background, but they are accepting of all 2nd and 3rd year resident rotators who are respectful of the Christian faith of its employees.

The day usually starts with 7:30 am chapel, followed by morning report at 8 am. The Cameroonian residents present a case from the previous night, and visiting resident provide additional teaching. The resident teams then split up to round on the wards. When rounding is completed, residents finish up any procedures that need to be done. The Cameroonian residents then staff the outpatient clinic, but visiting residents usually provide pediatric expertise as needed in the afternoon.

Residents visiting from the United States are able to perform hands on work and see patients. Mbingo accepts 2nd and 3rd year residents only, because they act in a supervisory and teaching role for the Cameroonian residents.

About Cameroon
Cameroon’s population is 23.2 million, and 42.9% are under the age of 14. Infant mortality rate is at 55.1 deaths/1,000 live births. Health Expenditure is 5.2% of GDP.

More Information
CCHMC Contact:
Elizabeth Schlaudecker, MD, MPH
Assistant Professor
elizabeth.schlaudecker@cchmc.org

Flights: Ranges $1800–2200, depending on the number of stops. Best route is: Cincinnati > Paris > Douala > Cameroon.

Meals/Accommodations: Room and board costs approximately $25 per day. There is a large guesthouse with multiple single rooms, as well as stand-alone homes with multiple rooms for families or groups.

Visa: A Cameroonian visa is required and should be obtained several months in advance.

License: Cameroon does not require a Cameroonian medical license. They accept the American medical license.
Soroka University Medical Center
of the Clalit Health Services
Ben-Gurion University of the Negev
Negev, Israel

The Israel Exchange Program (IEP) at CCHMC works to improve the health of children worldwide through partnership with leading Israeli medical centers and universities. Through these partnerships, Israeli and Cincinnati Children’s physicians jointly treat patients with complex conditions in both Cincinnati and Israel. Ben-Gurion University has emerged as one of CCHMC’s leading strategic partners. Residents will focus on clinical care for the tribal Bedouin community both in remote villages and in the hospital. Housing is available near campus. CCHMC is very committed in this partnership and the Israel committee will help with arrangements for interested residents.

Soroka University Medical Center
Soroka of the Clalit Health Services is the second largest hospital in Israel and the only one in the Negev, which covers 60% of the geographical area of the country. Soroka hospital is a tertiary center with approximately 1,000 hospital beds, providing medical services to the over one million residents of the region. The Faculty of Health Sciences of Ben-Gurion University of the Negev, including the School of Medicine, is located on the Soroka campus and collaboration with the University provides fertile ground for research and teaching. The main aim of the elective is to introduce Pediatric residents from CCHMC to the unique diseases and medical needs in the Jewish and Bedouin population in Southern Israel. Pediatric residents from CCHMC will observe patients in the hospital as well as in the community.

In the hospital residents will be introduced to the general diseases that require pediatric emergency visits and hospitalization, learn about specific infectious diseases in the region, with regard to the Jewish and the Bedouin populations, as well as learn about the various genetic diseases that are unique to the Bedouin population. In the community, residents will observe how the medical services in southern Israel manage the special population needs. Residents will also have opportunities to work in the mother and child vaccination centers learning about the vaccine program in Israel, and learn about the differences in providing primary medical care in Jewish and Bedouin populations.

Research Opportunities
Residents will learn about what studies are being done in the field of inter-cultural medicine in the Negev region in southern Israel, and may also take on a project related to inter-cultural medicine in the Negev region.

About Negev
Negev has a diverse population which includes immigrants from the former Soviet Union, Ethiopia, Argentina, and other countries, along with veteran Israelis, and the Bedouin population (Bedouin are pastoral nomadic Arab tribes living in the Negev region in Israel).

Israel’s infant mortality rate is 3.98 deaths/1,000 live births.
Health expenditure is 7.7% of GDP
Southeast Alaska Regional Health Consortium (SEARHC)
Sitka, Alaska

SEARHC is a non-profit tribal health consortium that serves 18 native communities. It is one of the oldest and largest native-run health organizations in the United States. Mount Edgecombe Hospital is the single inpatient hospital for SEARHC and is located in Sitka, AK but serves the whole southeast region.

Mount Edgecombe Hospital is a 27-bed hospital that also has a large outpatient primary care center. The hospital provides acute care, critical care (3 ICU beds), obstetrics, surgery, perioperative care, outpatient care, and mental health. There are approximate 24 providers mostly composed of family medicine physicians but also pediatrics (x1), ob/gyn (x2), surgery (x1), ENT (x1), radiology (x1), anesthesia, and psychiatry. Additionally there is an ophthalmology and denture clinic as well as anticoagulation clinic. Support staff include respiratory therapy, physical therapy, occupational therapy, and clinical pharmacists. The hospital has ultrasound, CT, and MRI as well.

Residents primarily work in the walk-in clinic and the emergency department. You will have the opportunity to see all the pediatric patients but will be expected to see adults as well. If a patient needs to be admitted from the ED or walk-in clinic you will be expected to do the admission H&P and orders. You may have the opportunity to round on the inpatient side if desired, but inpatients are almost all adults. Residents will have a LOT of autonomy. You will primarily work with the family medicine physicians or the single pediatrician.

About Sitka
Sitka is the 7th largest city in Alaska with just under 9,000 people. Sitka is an island community and is technically a rain forest so is very different than other areas of Alaska. Sitka is well known for fishing so many people depend on the fishing and tourist industry for their income. There is a lot of outdoor activities in Sitka including amazing hiking opportunities, fishing, and running. You can see wildlife all over or can even visit the Raptor Center and Fortress of the Bear, where animals are rescued. You can do local things such as trivia night, take knitting classes, visit the historical sites, and more.

More Information
www.searhc.org

How to Apply: Visit the IHS website, select Alaska. www.ihs.gov/physicians/index.cfm?module=opportunities

CCHMC Contact: Dr. Charles Schubert
Dir. of Residency Global Health Program
chuck.schubert@cchmc.org

License: Alaska Residency Medical License required, cost covered by SEARHC

Flight: approx. $500–$600

Lodging: Cheap through hospital and on-site but can get covered

Meals: Breakfast and lunch free at the hospital

Recent Residents:
Chris Carosella, Peds-Neuro
Danielle Weber, Med-Peds

NOTE: Many things may be covered by SEARHC, and you may be able to get some CCHMC funding
University Pediatric Hospital
University of Puerto Rico
San Juan, Puerto Rico

University Pediatric Hospital is a 215 bed hospital in San Juan. The hospital is a comprehensive hospital facility fully dedicated to the care of children in Puerto Rico and the Caribbean. The Department of Pediatrics provides excellent clinical training for students and residents amid high quality physical facilities and equipment.

The program is ACGME approved. Established in 1926, this beautiful ocean-side building next to the Capitol House at the entrance of Old San Juan is the symbol of the rich tradition of the institution as pioneers in the fields of research and medical education in Puerto Rico.

The University of Puerto Rico (UPR) is the state university system of Puerto Rico and a government-owned corporation of Puerto Rico. The system consists of 11 campuses and has approximately 64,511 students and 5,300 faculty members. UPR has the largest and most diverse academic offerings in Puerto Rico and the Caribbean, with 472 academic programs and 32 doctoral programs.

Residents from Cincinnati will be immersed in a new culture and will be expected to have functional Spanish language skills. The rotation will include time in the inpatient or outpatient clinics, and if desired there are available out-reach programs. The opportunity to understand the issues of underserved children in this culture and to expand this to immigrant children in the USA will be a major focus of this site.

Residents going on rotation to Puerto Rico will need to obtain a Provisional License and should start the process 3–4 months in advance of the rotation.

**ACGME Accredited Specialty Programs:** Anesthesiology, Dermatology, Diagnostic Radiology, Emergency Medicine, Family Medicine, Internal Medicine, Neurology, Neurosurgery, Obstetrics-Gynecology, Ophthalmology, Orthopedic Surgery, Otolaryngology, Pathology, **Pediatrics**, Physical Medicine and Rehabilitation, Psychiatry, Surgery and Urology.

**ACGME Accredited Sub-Specialty Programs:** Cardiovascular Disease, Child and Adolescent Psychiatry, Endocrinology, Gastroenterology, Neonatology, Nephrology, Neuromuscular Medicine, Pediatric Critical Care Medicine, Pediatric Hematology/Oncology and Pediatric Neurology.

**About Puerto Rico**

In 2012 the Government reported a population of 3.6 million of which 32% was younger than age 20, with 58% of children under 5 living in poverty. The infant mortality rate is 7.73 deaths/1,000 live births. In addition, island and mainland Puerto Rican children have the highest rates of asthma and asthma morbidity of any ethnic group in the United States.

**More Information**
www.md.rcm.upr.edu/pediatrics/

**Contact:**
Dr. Yasmin Pedrogo
yasmin.pedrogo@upr.edu

Milagros Santos
milagros.santos@upr.edu

**Flights:** avg. $450–$550

**Ground Transportation:** Roughly $900 for the month

**License:** Required, $250

**Visa:** Not required

**Lodging:** Univ of PR Campus Dorms
Couples $500 x mo
Singles $350–$375 x mo
Includes phone, wireless internet, washer/dryer

**Transportation:** Monorail, Car rental

**Language:** Conversational Spanish is needed to get a history from families.

**Recent Resident(s):** Paria Wilson, Saide Rodriguez

**NOTE:** Residents interest in doing this rotation must start process at least 6 months in advance due to extensive paperwork requirement.
Leeds General Infirmary
Leeds, West Yorkshire, England

Leeds General Infirmary (LGI) is a 1100 bed, tertiary care adult hospital with a 150–180 pediatric bed hospital within it. The Leeds Children’s Hospital offers a full complement of tertiary pediatric care comparable to CCHMC with everything from general pediatrics to liver/kidney/bone marrow transplants to Cardiology. The Infirmary is run by the government funded National Healthcare System (NHS) providing free medical care to patients. This offers a unique perspective of pediatric medicine in a nationalized, resource-dependent health care system that is uniquely different from the way medicine is currently practiced in the United States.

Although it is not feasible to get a short-term medical license for direct clinical care in the UK, clinical observerships are possible. Time is split as desired between inpatient rounding, outpatient clinics and research project time as many of the faculty are excited to mentor a research project.

Currently the established contacts are within the department of hematology/oncology and hospital medicine. All residents who have gone have found the experience to be deeply enriching, rewarding, educational, and culturally enlightening.

England’s Population is at 63.7 million. Infant mortality rate is 4.44 deaths/1,000 live births. Health expenditure is 9.3% of GDP

About Leeds
Leeds is one of the largest metropolitan areas in the UK with a population of over 750,000. It is located on the River Aire approximately 3.5 hours north of London and 4 hours south of Edinburgh, Scotland. Recently refurbished downtown, with plenty of shopping, diverse array of quality restaurants, and most importantly an easily accessible train station, placing the rest of the UK within easy reach.

Leeds’ natives are called “Loiners.”

Easy weekend trips include London, York, Scarborough, Lake District, and Edinburgh, Scotland.

More Information
LGI: http://www.leedsth.nhs.uk/patients-visitors/our-hospitals/leeds-childrens-hospital

Contact: Dr. Bob Phillips
bob.phillips@york.ac.uk
Division of Pediatric Oncology
An excellent mentor and host.

Lodging: On-site hospital dorm: $500 per person for 1 month


Transportation: BritRail train, local bus also available but walking in Leeds is preferred

Food: Local groceries/restaurants within walking distance, small kitchenette in dorm

Weekend excursions: avg. $100–$500

Recent Resident(s): Lisa Herrmann, Mary Carroll, Jamie Frediani
Shanghai Children’s Medical Center
Shanghai, China

Shanghai Children’s Medical Center (SCMC) is one of the largest pediatric hospitals in Asia. The hospital currently has 604 beds with plans for expansion to 1000 beds in the near future. SCMC houses departments in all major pediatric medical and surgical subspecialties, and it is a renowned center for Cardiology and Hematology/Oncology. Inpatient, outpatient, and emergency care are provided. SCMC also embraces medical research and education, and is leading the way in changing how pediatrics is practiced in China while training the next generation of Chinese pediatricians. Over the course of its existence, SCMC has developed strong relationships with multiple U.S. facilities, including CCHMC.

While at SCMC, residents will function primarily as observers. Depending on interest, residents could rotate through any number of areas in the hospital. While observing, you will be paired with a Chinese resident who will serve as your teacher and translator. There is a strong emphasis on bedside teaching. While rotating at SCMC, residents have the option to attend any conferences or teaching sessions held at the hospital. Days typically start around 8 am and finish at 4 pm. In addition to rotating at SCMC, the hospital can arrange a visit to the community clinic and a Traditional Chinese Medicine facility.

About Shanghai
At approximately 25 million people, Shanghai is one of the largest cities in the world, and it has developed into one of the economic centers in Asia. It has a rich history spanning from ancient Chinese times through a colonial period and up to its recent modernization. The city has many diverse neighborhoods, expansive shopping districts, restaurants serving food from all over China and all over the world, multiple museums, Chinese theatre, and numerous parks and gardens. Travel around the city is easily done by subway. There is easy access to Western restaurants (McDonald's, Starbucks, etc.) and Internet. In addition, Shanghai is an easy portal to elsewhere in China with an extensive number of destinations reached by China’s easily navigable high-speed train system.

China has a population of 1.35 billion people. Infant mortality rate is 14.79 deaths/1,000 live births. Health expenditure is 13.3% of GDP.
Himalayan Health Exchange
Northern India

Himalayan Health Exchange is a non-profit U.S. based organization that has been providing healthcare in the Indian Himalayas since 1996. The program focuses on providing basic medical and dental care to rural villagers. By returning to the same locations on a yearly basis, the organization effectively provides "annual check-ups" to the diverse population of the region. In addition to providing care, expedition members provide valuable health education and assist villagers in better interacting with the existing health infrastructure in the region. Expeditions are comprised of attendings, residents, and medical students from all over the world. Perhaps the most unique aspect of each expedition is travel from village to village is often done by foot. Trekking over the land and through the communities being served, provides an excellent method for better understanding the lives of those being helped.

In general, there are two different types of days on an expedition – travel days and working days. Travel days can be variable, ranging from 7–8 hour treks to full day van rides. Working days are all similar. Typically, clinic runs from 8 am to 4pm. Residents function as preceptors for medical students. Most residents are assigned 2–3 residents at a care station. There are dedicated care stations for pediatrics, adult medicine, and OB-GYN. Each expedition member will also spend several days working the triage station and the pharmacy. There are attending level physicians available for consultation with any questions. Overall, the structure is similar to working at a CCHMC continuity clinic. Each station is staffed with an interpreter.

About Northern India
Most expedition members fly into New Delhi and then take a domestic flight north to join the group. It is easy to arrange extra days in New Delhi, a vibrant and busy city. New Delhi also provides easy access to other sights, including the Taj Mahal, in the Golden Triangle of India. Once north, one escapes the hustle and bustle of the big city. The area HHE primarily works in is at an altitude of 5,000–14,000 feet. The mountains are dotted with small villages, Hindu temples, and Buddhist monasteries.

The population of India is 1.2 billion, 28.5% is under the age of 14. Infant mortality rate is 43.19 deaths/1,000 live births. Health expenditure is 3.9% of GDP.

More Information
www.himalayanhealth.com/index.shtml
Contact: Dr. Jacob Redel
Dr. Zachary Berrens
Flight: avg. $1500–1800
Inclusive Expedition Cost: avg. $2000
Visa: Required, $80–100
Lodging: Included in the Inclusive Expedition Cost (above), either hotels or tents
Food: Almost all meals included in the Inclusive Expedition Cost (above). Besides food purchased in the airport, plan on bringing $50–100 for additional food. Street food is very cheap.
License: Not Required
Cash: Overall, bringing at least $200 should provide more than enough money for food, drinks, emergencies, etc.
Recent Resident(s): Zachary Berrens, Jake Redel
Upper Cardozo Health Center
at Unity Health Care
Washington, DC

Immigrant Health Elective

Upper Cardozo Health Center, located in Columbia Heights, is one of many community health centers operating under the umbrella of Unity Health Care (UHC). UHC is a non-profit agency offering a continuum of medical care and human services to the homeless and medically underserved in DC. Upper Cardozo serves many new immigrants from Latin America and elsewhere, as well as children living in poverty.

The rotation will include supervised clinical work with patients at the clinic and the opportunity for advocacy in the neighborhood and on Capitol Hill. Examples of ongoing clinic efforts in which learners could easily participate include: childhood obesity prevention, violence and injury prevention, and prevention of teen pregnancy with support for young families.

About the District of Columbia

Thirty six percent of children in the District of Columbia live in poverty. Unity Health Care at Upper Cardozo Health Center mainly serves working class Latino families of low socio-economic status as well as poor families from other ethnic minorities. Upper Cardozo is situated in the District of Columbia’s Ward 1, where 37.8% are poor. Compared to US averages, children in DC have higher rates of being overweight and having asthma.

Due to the large Latino population, some Spanish would be helpful.

More Information

www.unityhealthcare.org/

CCHMC Contact: Ryan Buchholz, former CCHMC Internal Medicine – Pediatric Chief Resident
513.319.5076

Contact: Keisha Hazzard
khazzard@unityhealthcare.org
202.715.7914

Andrea Anderson, MD
Medical Director
aanderson@unityhealthcare.org

Phone: 202.745.4300 or 202.715.7900
Shoulder to Shoulder Clinics
Santa Lucia/Concepcion, Honduras

Shoulder to Shoulder is an NGO that takes medical/dental/public health/educational brigades to Honduras year round. Residents, medical students, and nurses from various academic medical centers can be in attendance, and CCHMC pediatric residents are always welcomed to join.

Shoulder to Shoulder’s (Spanish, Hombro a Hombro) mission is to work together with the communities to create and operate sustainable health, nutrition, and education services with equitable access for everyone.

A typical day consists of groups leaving to various communities with activities ranging from field clinics to diabetes and hypertension clubs (where teaching takes place). Some days include health fairs which offer women’s health initiatives (such as pap-smears), dental revisions and education as well as a variety of labs such as pregnancy and HIV tests and blood pressure screenings. Residents will be totally hands-on while in Honduras and precepted by a Honduran physician who has many years of experience with large brigades and individual Residents. Home visits, as well as visits to other villages might be made.

Research Projects
Shoulder to Shoulder and Hombro a Hombro, along with the government of Honduras and our academic and research partners, engage in major research projects. Utilizing our extensive database, infrastructure, and community relationships, we conduct research in women’s health, children’s health, nutrition, water quality, and public health.

About Santa Lucia and Concepcion
Both cities are growing in commerce with the coming of a paved road. Both villages, and those to which you would travel to provide care, are in southern Honduras, near the El Salvador border. Subsistence farming is still the main occupation in the area which leads to much poverty and need.

Honduras has a population of almost 8.6 million people. Of that, more than half of the population falls below the poverty line. There is an estimated 35% who are under the age of 15, and the median age is 21. The infant mortality rate in Honduras is 19.48 deaths/1,000 live births. Health expenditure is 9.1% of GDP.

More Information
www.shouldertoshoulder.org

Contact: Sharon Mullen
sharon.m@shouldertoshoulder.org
513-484.2559

Flight: $750–850 + airport tax (avg. $50)

Visa: Only if traveling with a non-US passport – and even then most other nationalities don’t need Visas.

License: Not Required

Lodging: Around $2000. There is an $1100 brigade fee which covers all in-country travel, food, lodging and required (by STS) evacuation insurance.

Conversational Spanish helpful

NOTE: Travel restrictions to Honduras by the U.S. Department of State are often in place. Please check with both the U.S. Department of State and Shoulder to Shoulder before planning your rotation.
Additional Sites

We are constantly expanding the number of site options.
Additional Sites
Our Residents have visited:

**Ecuador:** Interhealth

**Ghana:** Baptist Medical Center

**Haiti:** Project Medishare for Haiti

**Kenya:** Tenwek Hospital, Kijabe Hospital

**Laos:** Health Frontiers

**Lesoto:** Baylor Pediatric HIV Site

**México:** Health Frontiers, Tijuana Free Clinic

**Nicaragua:** Friends of Bradley’s House of Hope

**Nigeria:** Bower University, Ogmoso

**Thailand:** Ramathibodi Hospital, Bangkok

**Zambia:** Mukenge Hospital

For more information please contact:

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