

# World Mission Alliance Medical Missions Clinic Protocol

## WMA Medical Missions History

World Missions Alliance began short term medical missions in 2014 under the leadership of Dr. Richard Bartlett, MD during a mission in Northern Iraq which served refugees fleeing ISIS invasion.

The vision of Dr. Bartlett and the founders of World Missions Alliance, Helen and Chuck Todd, was to meet the physical needs of the marginalized people groups throughout the world by providing free medical care and medicine through medical teams. This outreach was intended to complement and expand the main vision of World Missions Alliance - sharing the Gospel of Christ and building the body of Christ (the church) around the world.

Since 2014, WMA has hosted medical clinics in countries like Lebanon, Egypt, Argentina, Romania, Nepal, Serbia, Mexico, Albania, and many others serving the most vulnerable, marginalized, and underprivileged segments of the population.

## WMA Medical Missions Leadership Team

### **Dr. Richard Bartlett - Director**

Dr. Bartlett, MD has practiced medicine for 28 years, serving as medical director of public and private ambulance services, hospitals, and emergency rooms. He is the recipient of the Meritorious Service Award from the Texas Health and Human Services Commission and was appointed in 2002 by the Governor of Texas for a two-year assignment on the Texas Health Disparities Task force as the advisor to the Governor, Lt. Governor, and the Speaker of the House on improving access to quality healthcare for all Texans. He has been CBS News Medical Expert of West Texas for over 20 years.

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### **DeAnna Moore RN, MSN, FNP-C**

DeAnna Moore is a graduate of University of Texas SON and is currently employed as a Family Nurse Practitioner at a family medical practice in Midland, Texas. Her medical background as a nurse is highlighted by her time in ICU and Trauma units as well as membership in Sigma Theta Tau. DeAnna was called to missions at a Mission Anglican World Wide Conference. At this conference, a Sudanese Anglican Bishop prophesied that DeAnna would one day go to the nations. 25 years later, Dr. Bartlett invited DeAnna to travel with WMA on a medical mission trip. Since that first trip, DeAnna has led many medical teams to numerous countries through WMA. She invites everyone to “come and see!” about medical missions with WMA.

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**Kenna Cowart RN, BSN, CCRN**

Kenna Cowart is a critical care registered nurse who has been traveling on medical missions for over ten years. Kenna came to WMA after graduating nursing school, and she has since been on many medical and non-medical trips with WMA. Kenna currently lives and works in Branson, MO where she is able to combine her love of nursing and her love of medical missions more than ever before. Her hope is that through medical missions, we are able to reach the unreached and to tell patients of their ultimate Healer, Jesus Christ.

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**WMA Medical Missions Overview**

Due to the nature and setting of short-term medical clinics, team members must be ready and engaged for a flexible and unified approach. Rapid transitions may be necessary to successfully fulfill this component of the Great Commission.

WMA medical clinics focus on basic health issues. The objective of the clinic is primarily education based with preventative medicine in mind. Minor procedures can be performed; however, the clinic will focus mainly on assessing and diagnosing patients, prescribing medications if needed, and providing long term medical education to the patients.

Although medically based, the clinic's ultimate purpose is to show and tell people about the love of Jesus by providing medical care they would not otherwise receive.

The following guidelines and protocols are outlined to provide important information and clarification of the medical team members' roles, responsibilities, and accountability.

<b>Team Member Roles</b>	<b>Team Member Responsibilities</b>
<b>Medical Team Leader</b>	MD, PA, NP, DO  Must be assigned by the Todds or the designated Team Leaders of WMA on each mission trip.  Responsible for assessing, diagnosing, and treating patients.

	<p>Responsible for directing the setup/flow of the clinic and addresses any issues/needs as designated by other providers or nursing staff. Assess the clinic flow including registration, prayer team and children's ministry.</p> <p>Works with the local pastor to assess the clinic setup, scope, and design of layout for the patients in each designated clinic area.</p> <p>Responsible for having the medications shipped to their home address to then be transported overseas by the Medical Team Leader to the mission location.</p> <p>If medications cannot be brought into the mission location, the Medical Team Leader is responsible for assisting in buying the medications (will be reimbursed by WMA) at a local pharmacy with the help of a local translator.</p>
<b>Doctors</b>	<p>MD, DO</p> <p>Any licensed MD or DO. Must be willing to care for, diagnose, and prescribe any age group.</p>
<b>NPs &amp; Pas</b>	<p>Nurse Practitioner, Physician Assistant, Midwife Advanced Practice.</p> <p>Must be certified, licensed, and capable of accepting patients in their scope of practice including adults, pediatrics, women's health, and infants.</p>
<b>Nurses</b>	<p>RN/ LPN/LVN</p> <p>Licensed and/or retired. Assists in the following areas:</p> <ul style="list-style-type: none"> <li>Dispensing medications as RX by Med Providers</li> <li>Re-check of VS PRN</li> <li>Patient education</li> <li>Setup and take down of clinics</li> <li>Provides nursing care and nursing procedures PRN</li> <li>Basic wound care</li> <li>Basic therapeutic exercises</li> </ul>



<p><b>All Team Members</b></p>	<p>All Medical Team members must be willing to accept “shift clinic hours” as approximately six to seven hours per clinic if needed. WMA does its best to time clinics with breaks and the average length of clinics are historically five hours per clinic. There are circumstances where clinics may be held outside and/or at night. We as a medical team are responsible to assist with any patients who may present during “after hours” of a scheduled clinic, if needed and/or is a reasonable request by the church leader.</p> <p>Please bring your own medical and nursing equipment if possible. All Medical Providers are encouraged to bring supplies with specific needs of vitamins (adult &amp; pediatric), one first aid kit, over the counter meds to treat team members for various common problems that may occur, one electronic blood pressure kit and one electronic thermometer (sensor type), if possible. Our medications are common and treat some chronic and acute issues.</p> <p>Dental and eye exams will not be provided unless a dentist or optometrist is volunteering to see these types of patients.</p>
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## **Clinic Set Up**

Clinic locations can be different in every country/mission location. The medical team must be flexible with where/how the clinic is set up. The points below explain how the WMA clinic would be ideally set up.

**Location:** in a church/building with multiple rooms (clinics can sometimes be outside/in a tent depending on ministry), room for registration table, room for patients to wait, area for children's ministry, separate room for pharmacy, separate room for advanced practice provider or a separate room for private assessments of patients

**Timing:** one hour of set up, the medical team leader sets the length (recommended 5-7 hour clinic, 30 minute coffee break, 30 minutes for breakdown of clinic

## **Clinic Flow**

- Patients will enter the clinic and be directed to the registration table.
- Registration table will perform intake (see registration table row above) and complete vital signs on a numbered intake form (provided by WMA team leader). This number will be assigned to the patient for the time they are at the clinic and with the prayer team. The numbered intake form determines the patient's place in line and helps the prayer team know what specific condition to pray for.
- Escort patients to the waiting area (preferably with chairs). While waiting, team members can share testimonies, give salvation messages, hand out bibles/gospel tracts, talk with patients and start the children's ministry.
- When an advanced practice provider is ready to see a patient, the patient's number will be called.
- Patient is assessed and diagnosed by the provider.
- If needed, the patient will receive medications from the pharmacy.
- Patient is escorted to a physical therapist, a social worker, a licensed counselor (if present).
- Patient is escorted to the prayer team.
- Once finished with prayer, the patient can leave the clinic or stay for further ministry if it is scheduled.

\*Before any patient leaves the clinic, the intake card MUST be collected by a designated volunteer from the prayer team for WMA documentation purposes.

\*Local translators/interpreters will be provided by the local church/partner to aid in the clinic. Not every person on the medical team will have their own translator.

\*If any vital signs are emergent or a patient is gravely ill, please notify the medical team leader immediately regardless of clinic flow.

\*All members, including the medical provider, are welcome and encouraged to share the Gospel with patients regardless of clinic flow.

## **Recommended Supplies:**

For medical team leader/Provider:

- Intake forms (provided by WMA team leader)
- Stethoscope
- Blood pressure cuff (manual and/or automatic)
- Otoscope
- Ophthalmoscope
- Thermometer
- Glucometer
- Oximeter
- Sphygmomanometer
- Basic wound care supplies such as gauze, tape, and ace bandages.

For Nurses/Medical professionals:

- Stethoscope
- Blood pressure cuff (manual and/or automatic)
- Oximeter
- Glucometer
- Index cards
- Sharpies and pens
- Zip lock bags (different sizes)
- Hand sanitizer
- Scissors
- Thermometer
- Basic wound care supplies such as gauze, tape, and ace bandages.

For non-medical team members:

- Stickers for children
- Candy

- Gospel tracts
- Activities for children

Items for each team member to bring:

- Folic acid
- Magnesium
- Children's Vitamins
- Adult multivitamins
- Women's motivation
- Iron
- Prenatal supplements
- Vitamin D
- Vitamin C
- Zinc
- Tylenol
- Aspirin
- Ibuprofen
- Reading glasses
- Toothbrush, toothpaste, floss

### **Key Points to Remember:**

- Levels of authority/leadership exist during the mission trip and the medical clinic.
- Chuck and/or Helen Todd or designated WMA team leader are in charge of deciding the clinic schedule with the local pastor/partner as well as the ministries associated with the clinic.
- The WMA medical/clinic team leader is in charge of aiding in the clinic schedule, flow of clinic, and designation of other medical team roles. The medical team leader must be respected and be seen as the final decision maker when it comes to clinic decisions and medical assessments/protocols.
- Being flexible is key. The clinics will vary per trip and during the trip.
- Work as a team. Every role is important and needed.



- Be willing to open your mind to new ways of running a medical clinic in a foreign country. It can and will most likely be very different from a medical setting in the United States/Canada.
- Treat the patients with grace and kindness. Do the same for other members of the team.
- Most importantly, be willing to share the love of Jesus to all who enter the clinic as well as your fellow team members.

**“Heal me, Lord, and I will be healed; save me and I will be saved, for you are the one I praise.”  
Jeremiah 17:14**

**“The Spirit of the Lord is on me, because he has anointed me to proclaim good news to the poor. He has sent me to proclaim freedom for the prisoners and recovery of the sight for the blind, to set the oppressed free.” Luke 4:18**

\*All medications/pharmaceuticals have been generously donated to WMA Medical Missions.

\*In certain countries, WMA is not allowed to bring bulk medications into the country. In this circumstance, WMA medical clinics rely on donations (\$1000-\$2000 per trip) to purchase the needed medications.