



# 2019 Valsad, India

## TRIP REPORT

OUR STORY: BY CHERYL PECK

### THIRD TIME IS A CHARM

**Kasturba Hospital – Valsad, India  
January 19 – 25, 2019**

In January 2019, Operation Medical conducted its third Surgical Mission camp at Kasturba Hospital in Valsad, India. The saying, “Third Time’s a Charm” could not resonate more clearly as this camp was successful in all respects.

#### THE PLACE:

Valsad is in the Western Indian state of Gujarat. It lies along the coast of the Arabian Sea and is 120 miles north of the Mumbai airport and according to the 2011 census survey conducted by the Census Organization of India, had a population of 114,987.



Kasturba Hospital is the largest charitable hospital in Valsad. The hospital does not

receive help of any kind, nor financial aid from the government, and survives solely on payment for services and donations. Much like Operation Medical, the Kasturba Hospital is committed to promoting and providing high quality medical care and education to their community. They average about 20 surgical cases per day, six days a week and run at about a 95% occupancy level.

Our third visit to Kasturba was highly successful in part due to the excellent job of preparation headed up by Paritosh Joshi, the hospital’s Chief Executive Officer. He shared their efforts to create awareness, including:

- Outreach to tribal areas within a 50-mile radius
- Attend community meeting in villages
- Assist with transportation to/from the hospital
- Meet with or write to the head of every village
- Advertise with media such as hand-bills, newspaper adds, pamphlets and billboards, including one that was 20 x 40 ft in the center of Valsad

#### THE STORY:

Operation Medical’s third visit to Kasturba Hospital included a team of 35 volunteers. Most of the team arrived in the very early hours of Saturday morning and enjoyed a very warm welcome from the hospital staff and supporters within the community,

A highlight for everyone was a ceremony including blessings, speeches and declarations of “Let the camp begin!” As with all of our camps, patients are not charged for our services and we thank Bayer Pharmaceutical for their sponsorship to cover costs of the hospital. There was an air of celebration as Kasturba commemorates their 75th anniversary this year and we were delighted to be part of the ongoing excitement. We cannot say enough about the efficiency of the Kasturba OR team! The staff moved with choreographed precision not to be challenged.



During our mission, we served not only the patient population, but also the hospital staff. Kasturba Hospital is committed to continuous learning and improvement. It was gratifying to be able to educate on various competencies such as improving the local practices of sterile technique, dialysis equipment use and passing instruments. Despite the frenetic pace at which we worked, operated, and turned the rooms over their willingness to learn prevailed.



Repeat patients and new patients were served as the Operation Medical and local operating team worked side by side to deliver care. We even delivered three babies (1 boy and 2 girls) by C-section and felt blessed to be the “Welcome to the World” committee for these precious infants.



Our good friend and dentist, from Detroit, Michigan, Dr. Dinesh Bhavsar, born in Kasturba hospital, joined us once again and oversaw 89 dental procedures, making those fabulous Indian smiles even happier.



**Dr. Dinesh Bhavsar**

The camp was very fortunate to have two non-surgical doctors with us, Dr. Shefali Shah, a Family Medicine specialist from Penn Medicine/Lancaster General Health in Lancaster, Pennsylvania (see spotlight below) and Dr. Kaushal Patel from Nephrology Associates of Central Pennsylvania in Harrisburg, Pennsylvania. Dr. Patel is a Nephrologist and was an extremely valuable resource for the Kasturba dialysis ward. In fact, he detected an anomaly with the equipment, was able to correct and instruct staff on the situation, which will drastically improve the care of the dialysis patients!



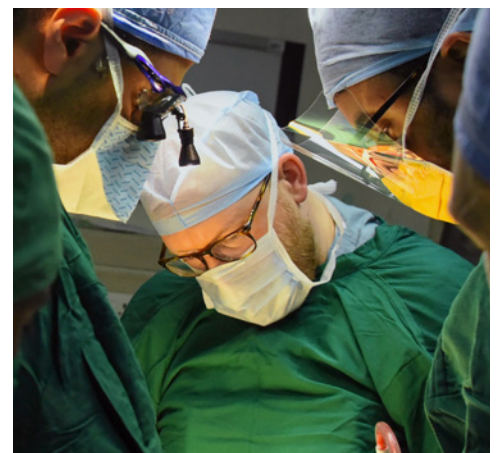
**Dr. Kaushal Patel**

Of interest, Dr. Ken Arthur, a plastic surgeon from Penn Medicine/Lancaster General Health in Lancaster, Pennsylvania, did second surgeries for two patients who previously received care from Operation Medical. One was a patient of now retired Dr. David Leber (Harrisburg, PA) who performed a first stage ear reconstruction during Operation Medical’s Valsad 2014 surgery camp. During the initial stage, cartilage was taken from the ribs and used to create a three-dimensional sculpture that looks like a normal ear. The cartilage framework is then placed under the skin at the site of the newly placed ear, to match the opposite ear. Autologous ear reconstruction requires multiple surgical stages.



Dr. Arthur performed the second stage where the new ear framework is elevated off the side of the head to match the natural position of a normal ear using a flap of tissue (fascia) from the area just below the scalp or a skin graft to cover the raised framework.

The second return patient was seen in 2017 by Dr. Arthur. This 36-year-old man experienced horrific burns over much of his body. He came to the camp when he found out we were coming back and asked Dr. Arthur to perform much needed additional burn scar contraction release. This tedious procedure took an entire morning and when the patient was seen in the ward the next day, he was so grateful, he asked Dr. Arthur to come again and help with his fingers which are very contracted.





## Interview with Paritosh Joshi: An Indian Renaissance Man

Paritosh Devkinandan Joshi was born on December 1, 1980 in Ahmedabad India. He is married to his stunning wife of 12 years, Radha (which means Goddess of Love) and has two beautiful children, 6-year-old son Sarthbak (means accomplishment) and 11-year-old daughter Aastha (means endless faith).



Several years ago, when his then 26-year-old sister Chitra (means portrait) died in his arms, Paritosh made the decision that his life's purpose was to serve others and make sure that medical care/equipment was available to save lives. He chose a town where he felt he could bring about change, raise standards, impact lives and sleep peacefully at night, and settled in Valsad, his current home. Here he was able to accomplish just what he set out to do, working for the last 10 years at Kasturba Hospital as General Manager and since 2012, Chief Executive Officer.

He shared that his challenges include keeping costs low and quality high. He involves his staff to find solutions on a consistent basis. His five-year plan is to grow Kasturba from a 260 to 400-bed hospital with all specialties.

Paritosh welcomes Operation Medical, the only group that comes to this hospital to do outreach. He states that our visits here have uplifted staff commitment and skills and the Kasturba Hospital community looks forward to many return trips.



Paritosh Devkinandan Joshi



### Details:

**Education:** Commerce Graduation from Gujarat University

**MBA** from Allahabad University

**Languages:** include English, Hindi, Gujarati & Nepali

**Interests:** Books, Motor Bikes, Playing Snooker, Music and Cooking

## REFLECTIONS:

**Dr. Shefali M. Shah****(Family Medicine Physician for Penn Medicine/Lancaster General Health)**

The week with Operation Medical was an incredible learning experience. I ended up spending time in just about all areas of the inpatient and outpatient hospital setting. Something that really stood out to me was the dizzying speed at which the patients were seen in the clinic as well as the lightening rounds on the inpatient units. I soon realized the invaluable contribution of the nursing/ancillary staff in improving the understanding and caring of the ill.

I felt very honored and privileged to be asked to speak at the Valsad Medical School to address the student body. Having been given just a couple of hours' notice to address the medical students, I was in a quandary as to what to impress upon, however, a topic came to me shortly after a conversation I had with one of volunteer medical students, Nandhini, a recent graduate of medical school in Mumbai. She wanted me to talk about a challenge she and her classmates have faced: they were too afraid to ask questions of their professors and teaching staff in the clinical setting. I spent the half hour allotted to me talking about taking baby steps to change that culture and addressed two issues I saw as major changeable common practices:

- Automatic IV antibiotic orders for all that came to the ER
- Lack of differential diagnosis development by house staff

I discussed the commonly used mnemonic to generate differentials. I also spent a bit of time on antibiotic stewardship, trying to impress the importance of giving the appropriate antibiotic due to resistant strains of MRSA and ESBL and multidrug resistant TB that are the norm in India.

I look forward to seeing how I may contribute on another trip with Operation Medical in the future.

**Alicia Shuey**

This mission trip with Operation Medical was first presented to me about a year ago by one of my preceptors, Dr. Ken Arthur. My gut reaction was to find a valid excuse of why I couldn't go, such as not being able to take the time away from school, the trip not counting for school credit, not being able to afford it, not feeling comfortable with being in a foreign country, traveling with people I didn't know – the excuses could go on and on. Those excuses would have been completely valid, but something within me felt that I was being called to serve. So, I took a leap of faith and committed to being a member of this mission.

On January 17th, we began the long and grueling journey. After over 24 hours, we landed in Mumbai and boarded a bus and 4 hours later arrived at a hotel in Valsad to wash up and rest. Although it was nighttime during this drive, I was very clearly able to visualize the disparity of this country. All of the infrastructure from the buildings, roads, and trucks was old, worn down, and dirty. Trash littered the streets and cows, pigs, goats, cats, and dogs roamed free wherever they pleased. Driving in India was unlike anything I've ever experienced. There are no street signs, street lights, stop signs, road lines and there are cars, trucks, buses, scooters, tuck tucks, bikes, carts, pedestrians, cows, goats, pigs, and dogs out in the road all at the same time. Yet, somehow it flows effortlessly.

On day one of surgery, the team of over 30 volunteers - surgeons, residents, nurses, scrub techs, students and support staff seamlessly fell into their roles. It was so empowering to witness and participate in such a great display of teamwork. We also worked directly with the Kasturba hospital staff and even with the language barrier, the common goal of patient care was successfully completed. There were many differences between an OR in the US compared to where the camp was held. Two of our ORs had 2-3 beds each, local staff wore flip flops, equipment was rusty, and power was commonly lost for short periods of time. I was definitely wide eyed the first day as I processed these differences.

Throughout the week, I witnessed several life changing surgeries including a cleft lip repair on a 2-month-old girl, burn scar contracture releases with skin grafts for patients with severe burn scars, and several cesarean sections. I also had the opportunity to share a room with a medical student from Mumbai and it was eye opening to learn about her life growing up and going to medical school in India. I went on this trip to serve others less fortunate than myself; I returned feeling that they served me. Being surrounded by such a high density of people of completely different culture, language, and socioeconomic status than me made me fully aware of the smallness of my life and my tendency to be selfish and ungrateful. It was a humbling reminder to be thankful, outward focused, and to pay it forward. This trip to India has ignited within me a passion for serving others and I'm already thinking about when I can participate in another medical mission.



## REFLECTIONS:

**Dip Shukla**

As an immigrant from Gujarat, India, I have an ongoing interest in learning about and contributing to healthcare within my home country. Through Operation Medical, engaging in this mission trip to Kasturba Hospital in Valsad, Gujarat, India was a wonderful opportunity and unique window into surgical care abroad and how it can be extended to those in medical and financial need.

Through the 3rd year medical student perspective, this experience was an impactful combination of trainee education, volunteerism, and local collaboration with the overarching goal of providing high-quality patient care. Our team consisted of volunteers from various healthcare professions and levels of training, with wonderful guidance and oversight of trainees by senior staff. With as many as 40 surgical procedures performed daily, there was a significant opportunity to contribute within the operation theater as well as peri-operatively.

Considerable thought and craft optimized surgical conditions, equipment availability, and turn-over time with seamless collaboration between the local and US teams. It was encouraging to see the camaraderie and friendship that quickly developed within and between our teams. In addition to the fellowship, engaging with our patients was most meaningful. In the mornings and post-procedure, I had the opportunity to routinely engage in patient rounds as a translator. Interfacing with the local team, I came to appreciate the immense care taken in optimizing peri-operative care and follow-up for such a high patient volume. The patients' gratitude for this support was no less evident.

This trip was a great experience into providing responsible, sustainable healthcare abroad. As I progress through my medical education, I look forward to building upon this experience and contributing to care for those in need within the US and globally.

**Nandhini Iyer**

My experience at the camp was as a medical student from India. The first day was spent setting up the supply room and organizing for the week ahead. It was also a very good opportunity to interact with and get to know the others on the team. In all honesty, being from a different country, I was initially worried about getting along with all the others, but everyone was so nice and kind and made it very easy for me. Our hosts and the team from Kasturba Hospital were also very hospitable and welcoming.

Over the next week, each day was busy with over forty surgeries in general surgery, plastics and ObGyn. Every day was managed very efficiently and with a level of organization that I personally hadn't come across before. Also, the role of a surgical technologist and a physician assistant were foreign to me prior to this and I realized how significant they are in a set up.

From an educative perspective, there was a lot to learn and the attending physicians and residents took the time to patiently explain things I didn't understand and to answer questions and to teach me. Incidentally, I got to scrub in on my first surgery ever during this camp and it was a very satisfying experience that I will always remember and be grateful for. It also reinforced my wish to take up a surgical field ahead. There also was a lot to learn in ObGyn, from scrubbing in, and delivering a baby and following up in the NICU to understanding various vaginal surgeries (hysterectomies and prolapse procedures) that I've always found complicated to read. Getting to attend

morning rounds for post-op patients and evening clinics to screen patients for the next day helped to interact with them and added more value to the experience.

Overall, it was a very enriching and fulfilling experience in every way, and I got more than I could give. I'm very grateful for the opportunity and hope I can volunteer for more camps in the future with hopefully more to contribute too.

## PATIENT SPOTLIGHTS:

**A New Smile**

Savya, three months old, is the second daughter of Monika and Hemantbhai Patel. Her 24-year-old mother works at a bakery supply store and her 39-year-old father at a water filtration plant. Unlike her older brother she was born with a cleft lip and palate. This facial deformity not only compromises one's appearance, but also prevents proper swallowing and speech, and can lead



to hearing problems. She is fed warm milk using a glass dropper as she cannot breast feed. Her parents were devastated and came to nearby Kasturba Hospital for help. Dr. Ken Arthur repaired the cleft lip facial deformity on the second day of the 2019 mission. Savya will need another operation to close the roof of her mouth, but the critical first step has now been successfully completed. With assistance in learning to feed and speech therapy, she will be able to lead a normal life. Her parents, grandparents and cousins are very supportive and grateful for this surgical intervention.

**Husband and Wife Patients**

Three years ago, then 25-year-old Anitaben pumped kerosene to her stove, not realizing that some had sprayed onto her sari. When she lit the match, her sari and shirt caught fire. She started screaming and her husband, Jigneshbhai, rushed in and unwrapped her sari. With that, his nylon shirt ignited and melted into his skin. Anitaben poured water over herself, while Jigneshbhai ran outside where his father put a jute bag over him to stop the fire. They both were treated at Kasturba Hospital over the next one and a half months and return home to their family to receive care.



Over time, Anitaben developed post-burn scar contracture of her neck and right armpit and Jigneshbhai has extreme contracture of the chest, armpit and back – he could not lift his right arm. When they learned of the Surgery Camp, they returned to Kasturba Hospital where Dr. Ken Arthur released the tissue contractures and grafted skin at the site of the wounds for both patients. As you can see from the photo, this married couple of 15 years is relieved and happy!

**Genetics and Polycystic Kidney Disease**

Dr. Kaushal Patel cared for many patients during the week, and one was Isamuuddin Lalmiya Shaikh, a 49-year-old man who lives in Pardi, roughly 14 km south of Valsad. Mr. Shaikh has Polycystic Disease. The cysts in polycystic kidney disease are noncancerous sacs containing water-like fluid. They can grow very large. Many

people with this condition have kidney failure by age 60. Dr. Patel educated Mr. and Mrs. Shaikh about the high incidence in this condition within the Indian Muslim population, which studies have shown as a result of genetics and intermarriage. Mr. Shaikh continues his dialysis and is grateful for medical care and the knowledge to share with his community and own children about the disease.

**Women's Health**

Meeraben Bararbhaji Patel, like many women in this region have no access to health-care and screenings, including Mammograms. This 55-year-old single woman had a lump on her left breast for over 2 years and thought it was a boil. Thanks to the advertising of the surgery camp, (she saw the billboard) and checking with her sister, she was seen by a doctor at Kasturba hospital about a month ago and had some diagnostic testing. Meeraben has advanced breast cancer. Dr. Naomi Weins, a general surgeon from Pinnacle Health in Harrisburg, Pennsylvania performed a modified radical mastectomy on the patient during the camp. Ms. Patel was most grateful for the medical care, and we wish her the best in recovery.





**CASES BY GENDER:**

Female – 120  
Male - 105

**CASES BY AGE:**

Youngest – 3-month-old  
Oldest – 82-years-old

**CASES BY TYPE:**

- Cesarean Section
- Cholecystectomy
- Circumcision
- Clef Lip Repair
- Diagnostic Laparoscopy
- Excision Cyst / Growth
- Excision Fibro adenoma
- Excision Foreign Body
- Excision growth
- Excision Lipoma
- Excision of Mass
- Fistulotomy
- Hemorrhoidectomy
- Hernia & Hydrocele Repair
- Hernia Repair
- Hydrocele Repair
- Hysterectomy
- Hysterectomy with Incontinence Procedure
- Hysterlaparoscopy
- Hysteroscopy
- Laparoscopy with Ovarian Cystectomy
- Mastectomy
- Myomectomy
- Orchiectomy
- Pelvic Prolapse Repair
- Penile Amputation - Partial Reconstruction Ear
- Rectal Exam Under Sedation
- Release and/or Revise Burn Contracture
- Repair Cleft Lip
- Revision Scar
- Sphincterotomy
- Thyroidectomy

**The Team**

**Surgeons**

- Adnan Alseidi, MD
- Kenneth Arthur, MD
- Parul Krishnamurthy Iyer, MD
- Katherine Jackson, MD
- Matthew Kalliath, DO
- Stephen Kaplan, MD
- Anuj Parikh, DO
- Bipinchandra Patel, MD
- Justin Rosenberger, DO
- Jeff Segil, MD
- Naomi Wiens, DO

**Dentist**

- Dineshkumar Bhavsar, DDS

**Anesthesia**

- Philip Eck, MD
- Uma Parekh, MD
- Mukul Parikh, MD (Trip Leader)
- Neelima Parikh, MD
- Ben Segil, DO
- Scott Slocum, CRNA

**Physicians**

- Kaushal Patel, MD
- Shefali Shah, MD

**Nurses**

- Hayley Mitchell, RN
- Bonnie Peffer, RN
- Bhakti Solanki
- Kim Synder, LPN
- Bhavu Heet Tailor

**OR Techs**

- Karmae Amsbaugh, CST
- Crystal Newcomer, CST

**Students**

- Nandhini Iyer - Medical
- Alicia Shuey - Physician Assistant
- Dip Shukla - Medical

**Support Staff**

- Rise' Enoch
- Krishna S. Iyer
- Margaret Marchaterre
- Pratima Patel
- Cheryl Peck



**Team Leader Impressions**

**Mukul Parikh**

Our 2019 Valsad mission was a smashing success. It was a large team of 35 volunteers who were extremely cohesive and competent. They worked together with the local staff to achieve the goal of providing compassionate and quality care to the patients we served. We were happy to be the opening act for Kasturba Hospital's yearlong celebration of their 75th Anniversary. My wish is that all missions go this well.



**Special Thanks**

To Paritosh Joshi, the trustees and staff at Kasturba hospital for the outstanding organization of the 2019 surgery camp.

To Hetal Desai and the Desai family for continued support, logistics and planning of meals for our volunteers.

To KD Patel for ensuring lodging, transportation and many more logistics are always in order for the team.

Operation Medical is thankful for all of the participants and welcomes them to join us for another camp

Please check our website at [www.operationmedical.com](http://www.operationmedical.com) to see how you can get involved to provide global healthcare!