



KNOW BEFORE YOU GO

Mobile Medics International (MMI) is a non-governmental organization (NGO) comprised of rapid response mobile medical teams available to deploy around the globe in time of need. Our teams respond to natural and man-made disasters and ongoing humanitarian crises when requested by governments and communities.

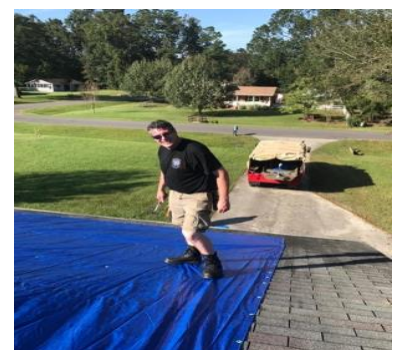
Disaster responses area defined as natural occurrences that tax the local medical resources and require outside intervention to overcome. Examples include: Hurricane Harvey in Texas, Hurricane Maria in Puerto Rico, Hurricane Florence in the Bahamas and Hurricane Idai in Mozambique Africa.

Humanitarian aid missions are defined as missions that deploy into areas that are chronically medically underserved. Examples include: Syrian refugee crisis in Greece, Italy and France, orphanages in Haiti, and medical clinics in jungle villages and remote islands in the Philippines

We step in to help when local resources have been maxed out or are not available. We utilize medically trained professionals from different backgrounds and countries. We often work in collaboration with other NGO's on joint responses. Every mission will have some combination of EMT's, paramedics, nurses, physician assistants and doctors. Not all levels will be present on every mission. You will be expected to operate as a solid unit and work with your team to complete tasks. It is not unusual for an EMT to be in clinic triaging and or our advanced providers to be going door to door with other team members and local authorities distributing food, water and medical interventions to people affected by the disaster.

It is important that you understand our mission. As part of MMI, you will be expected to assist our team in fulfilling our commitment to deploy rapidly and to help in **any way** needed. We take great pride in being flexible and helpful, whatever that looks like.

Although we do extensive pre-mission research and planning, rarely does a mission go the way we expected. Flexibility is a must. Disaster areas are unstable environments that require the ability to think fast on your feet as well as being prepared for anything.



Helping World Central Kitchen prepare food in the Bahamas, delivering water in Puerto Rico, repairing roofs in North Carolina.

ARE YOU READY FOR A MISSION?

If you are thinking about going on a medical mission, you have to do some tough work upfront. The first thing is taking a hard look at you. You will be spending approximately one to two weeks in a foreign country

with people that you may not know. The conditions may be primitive and the food will be different from what you are used to. You will be working long hours with limited supplies and equipment. Language and culture barriers will make your work more difficult.

How good are you at "going with the flow"? How do you cope when the unexpected becomes the expected? How do you feel about cold showers, or no showers? No electricity? No running water? No adequate or absent bathroom facilities? Sleeping on the floor? Sleeping in a tent? How well do you do with living in close proximity with strangers? It is absolutely crucial that you know what you are getting into and are prepared to accept it. If you go and do not like it, it will be the longest 10 to 14 days of your life! You will be miserable and make those around you miserable as well.

THE APPLICATION PROCESS

The application to volunteer can be found on our website, www.mobilemedicsinternational.org under the "volunteer" tab. The application must be filled out completely and all supporting documentation attached. Once your application is received, it will be reviewed for completeness and you will then be notified about the oral interview that will be conducted via Skype. Oral interviews take approximately 30-45 minutes to conduct and consists of questions to gauge whether we believe you are a suitable candidate. You will be given an opportunity to ask any questions you may have also. We want to make sure you are a good fit for us and we are a good fit for you.

The application and interview questions and responses are forwarded to our interview committee for review and a determination is made on eligibility. If it is determined you are provisionally eligible, you will be asked to do a background check and complete some on-line training. Both these activities will be provided to you via an e-mail link. The on-line training is free of charge and the background check is \$38.00. Once we have verification that you have completed these tasks a final review will be conducted and you will be notified on your eligibility. If accepted, you will receive the MMI handbook and be required to sign our waivers.

YOUR FIRST MISSIONS

There is a Team Leader assigned to each mission. Team Leads are personnel that have been on numerous missions and have experience in disaster and humanitarian medicine. They may not be your medical equivalent. The job of the team lead is to serve as the operational manager. They will work with local authorities to establish the role of the team in country and will help new volunteers learn the ropes during missions. While on mission, you and your team leader will review how you are doing in the areas mentioned above. You will receive feedback during the mission and with a post mission interview that will address any concerns either you or the team lead may have/had during all aspects of the mission. Our goal is to help you learn the intricacies and nuances of what we do.

There is no time frame for the two missions to be completed. You can respond to as many or as few as your schedule allows. Please understand, you will not be offered a permanent position on MMI's roster until at least two missions and evaluations have been completed and the executive team does a final review.

After successfully completing two missions, the executive team will perform a final volunteer review that includes talking with you and your mission team leaders. We will review any written documentation and then make a final decision regarding offering you a position as a permanent MMI team member. You will be notified in writing.

Evaluation criteria can be found in the handbook that will be e-mailed to you upon you being accepted and rostered for missions.

We are here to help you learn the ropes and how jungle/disaster medicine works. It's not intuitive and we want you to be successful. An important part of making it work is to ask LOTS of questions and say you don't know if you're not sure, and be willing to learn.

SOCIAL MEDIA

Each team member is expected to share any social media advertisement and fundraising for the mission they are going on. A social media campaign is usually started 30 days prior to each humanitarian mission and as little as a few days before a disaster response. The social media campaign includes any details related to the upcoming mission, any links for that mission, links to Amazon wish lists, and GoFundMe campaigns. MMI's Facebook, Twitter and Instagram pages will post often once the mission is identified. You are expected to repost MMI posts. You can also post your own information as long as it is accurate and you link to MMI's page. MMI depends solely on donations to operate. We rely on team members to get the word out. This helps us raise awareness regarding the crisis/disaster and helps us bring in much-needed funds and supplies to make our missions successful.

PASSPORT and VISA

Due to potential significant delays in obtaining a passport and or visa, only those with current passports on file will be accepted for missions. If your passport is not current or is set to expire within 6 months, then please renew before applying. Mobile Medics International (MMI) will inform you if a Visa is needed. A passport is always needed.

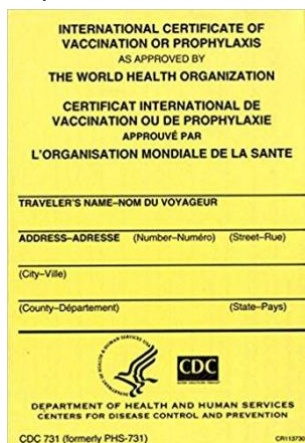
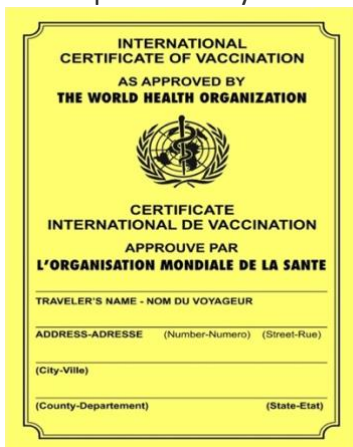
Due to restrictions in most countries, your passport cannot be set to expire 6 months or less from your time of entry into the country.

When you receive your passport, make a color copy to leave at home with a friend or family member, make a color copy for your team leader, and hide a color copy somewhere in your suitcase. Carry your passport or a color copy of your passport on your person at all times. Have I mentioned it should be a color copy?:-)

IMMUNIZATIONS

The Centers for Disease Control and Prevention (CDC) website (www.cdc.gov) is a wealth of information on country-specific immunizations, information on diseases specific to areas, and tips to staying healthy while abroad. The immunization recommendations may vary within a country (ie, mountains compared with coast, city compared with country), so it is important to follow the CDC recommendations. But remember, immunizations and preventative medications are not 100% effective in preventing diseases, so it is essential that you follow all recommendations for preventing illness and understand that even with all guidelines and recommendations followed, you may still get sick. MMI assumes no responsibility for immunizations, lack of immunizations and the consequences of immunization actions.

It is your responsibility to keep childhood vaccines up to date. (MMR, TB, Hepatitis etc.) It is highly recommended that you record all vaccines on a yellow "international vaccine record." Bring this with you on every mission. Any travel doctor should have this yellow card and can transfer your records onto it. Below are two examples of the yellow card. Either is acceptable.



HEALTH INSURANCE/MALPRACTICE INSURANCE

It is your responsibility to carry personal health and malpractice insurance if applicable. You are not an employee of MMI and are not covered under any insurance through MMI. You alone assume all responsibility for insurance. Most host countries have applicable Good Samaritan laws in place that cover those that come for humanitarian aid. MMI will make sure we know as much as we can the laws of the country and what's required prior to deployment.

Extraction insurance is strongly recommended. These services provide removal from a foreign country for personal medical emergencies or civil unrest. Plans can be bought per mission or for extended periods. A few to guide you in the right direction are www.globalrescue.com, www.ripcordrescuetravelinsurance.com, and www.internationalosos.com and www.bcbsglobal.com.

MMI is not endorsing these or any other similar companies. Do thorough research on which company is best suited for you AND MAKE SURE IT COVERS VOLUNTEER ACTIVITIES.

Volunteers without extraction insurance will be responsible for any costs associated for leaving a country for personal medical or civil unrest reasons.

COMPENSATION

All missions are volunteer. Your time will not be compensated. Depending on the mission, food, lodging, travel, or any combination of the three **may** be provided, but is not to be construed as compensation. Any supplies you contribute to MMI may be tax deductible as a charitable expense. Check with your tax professional.

TRAVEL ADVISORIES

Some of the countries we deploy to have travel advisories for US/UK citizens. In the event that we do deploy a mission to such countries, we will have established a relationship with a reliable host in that country prior to our arrival and arrange any security that may be needed. MMI will make you fully aware of any security concerns that we are aware of prior to deployment.

You can consult the US State Department at www.state.gov for any travel restrictions or warnings about the host country before you leave. It is **highly** recommended that US citizens register your travel to a foreign country at www.step.state.gov

PERSONAL COSTS

MMI does not charge volunteers to go on missions nor do we expect volunteers to provide supplies or equipment or pay for those things for a mission. We may occasionally ask a volunteer to bring some infant Tylenol or adult Ibuprofen for example, because we are expecting large volumes of patients and we anticipate needing larger amounts than we can carry from home base. But typically medically needed items will be provided by MMI.

There is usually an out of pocket cost for each mission however. We try to make sure our volunteers are aware of up-front costs for each mission. As a GENERAL rule, out of pocket runs \$200-\$500 per person per mission. That is not a firm number and can fluctuate either way. It is not a fee paid to MMI in any way, it is usually incidental costs. Examples are explained below.

Our flight partner, airlink, provides airfare but they only fly us to major cities. You may have to pay out of pocket for flights from a major airport to smaller areas. For instance, they will fly us to Athens, but not to the island of Lesbos, or to Manila but not to the island of Cebu. Some mission's airfare are completely covered. We will not know until we apply for tickets.

They do not pay baggage fees for any mission. These extra costs would be your responsibility.

Any expenses outside of airfare provided by Airlink during travel to and from the actual mission is your responsibility. For example it may be necessary to get a hotel at some point as we wait for the entire team to get in country. Volunteers in the past have arranged to share hotel rooms during travel via the Whatsapp group started for the mission.

Some missions require us to be self-sufficient and to bring our own camping gear and food. If that is the case we will announce what is needed with the mission notification and that would also be your responsibility. There is a more comprehensive list of self-sustainability equipment for missions in the handbook that will be e-mailed to you once you are accepted and rostered for missions with MMI.

WHAT TO PACK

Now begins the daunting task of deciding what to take. Even though an airline may allow two check-in bags per person, MMI allows only one of those bags for personal use. The second bag might be to take medical supplies MMI has asked you to bring for the mission. If you are not asked to bring supplies, than only one bag is allowed. Your carry on should be a backpack or something similar. All your personal gear needs to be packed in such a way that you can carry it long distances by yourself. Waterproof duffle bags are best. Conventional suitcases should be avoided.

These general rules can be used as a guideline for what to bring:

- * If it is valuable or irreplaceable, leave it at home. Theft is commonplace in areas of great poverty. The wet shoes you leave on the porch to dry may not be there on your return.
- * Laundry is often done by hand with lye-based soap that can cause streaking and dulling of colored clothing as well as pulling and running of delicate fabrics. Leave fancy clothes at home.
- * If you need it, bring it. Do not assume that you can save space by buying needed supplies when you get in country. They may not be available or will be very expensive. A great example of this is, the Philippines does not sell sunscreen. Anywhere. Trust me on this.
- * Do not wear flashy jewelry or expensive shoes or clothes. It makes you a target for thieves. I remove all jewelry, including my wedding ring prior to travel and leave it at home.
- * Be sure to carry your personal medications in your carry-on bag. Bring your personal medications in a small, pharmacy-labeled bottle. MMI requires that all medications be disclosed to the executive director and reviewed by the medical director prior to being rostered for a mission. Many countries have very strict policies of how and when certain medications can be brought in.
- * Bring a small personal first aid kit. It should consist of a few Band-aids, antibiotic skin creams, antidiarrheal and antiemetic agents, and so forth. These are for your personal use. Even if you do not get motion sickness at home it may be a different story when riding in the bed of a pig truck, a small hand crafted boat or a tiny helicopter.



Helicopter ride in the Bahamas, pig truck transport in the Philippines, bamboo boat trip Philippines.

- Remember plastic/rubber shower shoes for the shower and mouthwash for brushing your teeth in case drinkable water is limited. Wet wipes can be used in place of a bath.
- **Most third world countries are “bring your own toilet paper.” Carry TP or Kleenex with you at all times.**
- Talcum powder. Lots of talcum powder. It will become your new BFF.
- Soap and hand sanitizer. Hand sanitizer will be used extensively but it only kills the germs it doesn't actually clean your hands off. Nothing replaces washing your hands with soap and water.
- Additional items may be needed such as mosquito nets, sleeping mat, sleeping bag, dried food, etc. MMI will make every attempt to provide you with a mission specific list of personal items recommended for each deployment.
- Bring sun block and bug spray to all missions. It is required to wear daily. These countries are often plagued with cholera, malaria and other diseases that take advantage of the smallest skin area to bite or infect. Keep as much bare skin covered as possible. What can't be covered must have sunscreen and bug spray applied.
- **DO NOT OVERPACK!** I can't stress this enough. Often your personal gear will have to be moved multiple times to various locations. Waterproof duffle bags are the recommended bag for packing on these missions. Suitcases are bulky and difficult to stuff into helicopter holds, small plane holds or on tiny boats.
- Plan to wear your outerwear for more than one day without washing. Five pair of underwear, five T-shirts and five sets of socks and two or three pairs of pants will usually get you through the deployment.
- Lightweight clothing that is easily dried and that can be rolled up and packed away into the smallest space is the key.
- A microfiber towel. These types of towels dry quickly and are easy to pack.
- A **filtering** water bottle. There are a number of options for this. Lifestraw, Grayl and watertogo are a few examples. Do good research and pick the one best for you. Don't go cheap on this item, it is imperative you have a water bottle that can give you clean drinking water from a variety of water sources.
- Electronics, such as tablets, phones, e-readers etc. are great, but remember you most likely will not have ready access to electricity. Bring a portable power supply or a solar power supply for your electronics. I would strongly discourage bringing a laptop computer. A universal travel adapter will be needed in most places to plug things in.
- Weigh your duffle bag **BEFORE** leaving home. The ticket counter line is not the place to try and redistribute items because your bag is overweight. Keep your bag weight at 45 pounds to allow scale variances at airports.

- Invest in a neck pouch designed for travel or a waist belt that are RFID. Keep both out of site at all times. Have your countries currency as well as a little of the host countries currency on you, as well as a copy of your passport and medical license. I also keep one credit card on my person and one in my carry on in case one or the other gets lost.
- Footwear. Remember it's not a fashion parade. Rugged comfortable footwear with socks is a must. Closed toe. Depending on location there may be a lot of hiking or alternative forms of transport.



Morning clinic. Mozambique, Africa



Med bags. Cebu Philippines



Strategic planning. The Bahamas



Tijuana Mexico. Team photo



Moria refugee camp, Lesvos Greece



Cyclone Gita. American Samoa

FOOD

MMI will inform you before you leave whether the host in country will provide food. The food will usually be locally sourced. In most cases the food is cooked over open fires, there is no refrigeration and it will come from animals you may not be used to eating. We have been known to eat MRE's, goat, fish, rooster and "don't ask" while on deployment. There is usually a LOT of rice. The aim is for the team to be self-sufficient. It's a good idea to bring a couple MREs or freeze dried food with you. You will be advised before you deploy if more is necessary. If you have things that you really can't do without then bring them with you. Just be sure that whatever it is, it's non melty.



MRE breakfast. Haiti



Boodle fight. Philippines



Island food, Mambaca Yao

WATER

Water in a third world country is **never** to be trusted nor is the water in any area recently affected by a natural disaster. Do not drink it, do not eat the ice, do not reconstitute medicine with it, do not use it to wash wounds, do not let it get in your face and don't brush your teeth with it. Don't eat anything washed in it such as fruits and veggies. Food prepared with water that was brought to a boil is usually safe to eat, such as rice and coffee.

Showering with local water is to be done with caution. Keep it out of your face and mouth. Do not shave any part of your body as any nick or cut will be an opportunity for infection to set in.

Bottled water should not be drunk straight from the bottle. The act of screwing and unscrewing the bottle contaminates the opening. Pour bottled water into your filtered bottle to drink.

Never use ice in drinks or drink any fountain drinks. Only drink water from your filtered bottle, or pre bottled beverages where the seal is not broken. Be prepared to drink room temperature beverages the whole of your deployment

FLYING

These flights are grueling. More often than not the tickets are donated or it's a miles points ticket and therefore not a direct route, has long layovers or weird cross-country treks. Be prepared for long travel times.

THE PATIENTS

Remember that these patients do not have a stocked medicine cabinet of over-the-counter medications. They do not have acetaminophen for headaches and fever or ibuprofen for menstrual cramps or antacids for occasional heartburn.

The lack of availability is compounded by a lack of understanding on proper use of these medications. People often seek treatment for things that seem like minor complaints to us but are significant concerns to the patient. These patients may not understand what is causing their symptoms, they may not know that the condition is not serious, and they most likely will not have any medications to take to resolve their

symptoms. Education on their symptoms and appropriate use of these medicines helps them to take care of themselves.

They often do not understand how or when to take medication. My last trip to Haiti saw one woman coming back to clinic to complain she couldn't swallow the medicine I had given her the day before. It was chewable antacids. HUGE chewable antacid. I had not explained to her that she was to chew it not just swallow it!

Multivitamins are important in third-world countries. Because of poverty, lack of availability, and misconceptions about some foods, they often do not eat well-balanced diets. Prenatal vitamins are the exception instead of the norm for impoverished pregnant women. You will most likely give out more vitamins than any other medication.

Illiteracy is high in third world countries and written directions are often not useful. You may find yourself explaining to a child or other family members how medication should be taken or how to read the instructions so that child can help his elder.

No medication that needs to be reconstituted by the patient with water should ever be given. Clean water is the exception and not the norm in most of these countries and even though you instruct, "clean water only" it most likely will not happen. If a medication needs reconstitution, we will do it in clinic with our own clean or sterile water.

Refrigeration is also not available.

There may be a real deficit of things that we consider innate knowledge: washing of hands after using the bathroom and before eating, the importance of covering cuts or wounds to keep them clean, wearing shoes to help prevent parasite infections, not walking barefoot through animal dung, covering food to keep flies from contaminating it, and the importance of pure water. As you treat things remember that you will need to give detailed care instructions. Do not assume that a patient with a laceration on the foot knows to keep the wound covered until it heals and knows not to go barefoot. Also know if your patient can read written instructions or has access to someone who can.

OUR PHARMACY

MMI carries an over the counter (OTC) and prescription pharmacy. Both our medical directors and our pharmacist have reviewed all the medications we carry and have developed general guidelines for their use. These guidelines can be found in the handbook. **It is your responsibility to know our pharmacy and its uses regardless of your license level.** We work collaboratively and believe that although you may not be able to prescribe prescription medications it is important to know our medication abilities and whether a patient can be effectively treated in our clinic or may need to be transferred.

The circumstances and the country we are entering will determine which medications we will be bringing. For example, as a general rule, we do not take prescription medications to a US disaster response but we may take a full pharmacy to a humanitarian response in a foreign country. We NEVER carry narcotics. We carry a wide range of antibiotics as well as a large amount of multi-vitamins for all ages.

Our pharmacy is subject to change as medical direction determines the best medications to carry. Any changes will be sent as an update to the handbook.

OUR JUMP BAGS

MMI provides most equipment and supplies for missions. A complete list of what's in our jump bags can be found in the handbook. We strive to pack each jump bag identically so everyone knows what's in them and where its located. It is mostly BLS supplies such as bandaging and splinting and IV start supplies as well as OTC medications. We will usually not have a jump bag for each team member, but will have enough to cover the mission.

In addition, there will be one or more pharmacy bags as well as a team lead bag. Pharmacy bags will have prescription meds as well as extra OTC meds for restocking jump bags. Team lead bags may also have

more advanced equipment such as suturing supplies, advanced airway equipment and advanced procedure equipment such as chest tube, foley catheters etc. You are not expected to know all procedures associated with the equipment in every jump bag. They are for the whole team to utilize.

LAST MINUTE TIPS

- 1) You will be working under less than ideal circumstances, in deplorable conditions, without any follow up care with your patients after you leave. Always give the best care you possibly can.
- 2) Do not do anything you would not be allowed to do in your home country. In other words do not practice outside of your home countries scope for your level of medical training.
- 3) Clean, not sterile is going to be as good as it gets.
- 4) Do not give anything away to the locals unless you have enough for the entire population. It is heartbreaking to have to hide and eat so the orphans that only eat 3 days a week don't see your food. But to give one orphan even a little of your food starts a chain reaction that will have hundreds of children begging and crying at best or cause a riot at worst.
- 5) NEVER show your money or where you keep it.
- 6) Learn basic courtesy phrases in the host country language such as, Hello, goodbye, thank you and please.
- 7) Keep your eyes and ears open all the time. Trust your gut. If it seems wrong, then it is wrong and remove yourself immediately.
- 8) Stay with your team at all times. MMI has a "one out" policy. We are together as a group, always. If one of your group opts out of anything for any reason, we all opt out. No questions asked, no blame given. All or none.
- 9) Have fun. We hope this will be one of the most rewarding experiences of your life!

We are grateful for our volunteers and try hard to make MMI a place you'd enjoy working and recommend to others. We pride ourselves on our family atmosphere and approach to team cohesion and cooperation. We strive to not only make a difference in the lives of those we serve but in the lives of our volunteers as well. We want you to make lifelong memories and friendships. We hope you consider joining the MMI family. Please reach out to us with any questions or feedback you have.

Mobilemedicsintl@gmail.com
www.mobilemedicsinternational.org
+1-907-229-9537