LIFEBOX VIETNAM

Dr Peter A. Schenk says he was privileged to be part of a NZSA Lifebox (NZ) trip to Vietnam to distribute pulse oximeters. He writes about his ‘gratifying’ experience and how Lifebox supports the delivery of quality care for Vietnamese patients.

I accompanied Dr Indu Kapoor (NZSA Lifebox Chair) in June to distribute pulse oximeters to anaesthesia medical practitioners, aiming to achieve 100 per cent coverage of operating locations in Binh Dinh.

We were invited guests of the Vietnam Society of Anaesthesiologists (VSA), which coincided with the Society’s national conference. I gave a short presentation during the Quality and Safety session of the VSA meeting. The Lifebox workshop was made possible by working closely with the Department of Health Binh Dinh province, the New Zealand Vietnam Trust and the VSA.

I had been keen to get involved in work of this nature and when the opportunity presented itself, after talking with Dr Kapoor about her experiences with Lifebox in Vietnam and the ability to participate, I jumped at it. I had been to Vietnam before as a tourist and am captivated by this South East Asian country; its beautiful verdant valleys, pristine beaches, divine cuisine and most of all, its gentle, friendly, engaging people. Our activities took place in Quy Nhon, the coastal provincial capital city of Binh Dinh province. We settled in and met with our Vietnamese counterparts, in particular Mr Phuc Nguyen – translator and organiser extraordinaire who helped us prepare for our workshop, run by Dr Kapoor and myself.

Prior to the workshop, the NZSA purchased 37 Lifeboxes and 10 neonatal probes from the Lifebox donations given to NZSA, most distributed at the workshop held at the Quy Nhon District Hospital. Invitations to attend the workshop were based on a needs assessment undertaken prior to our arrival and representatives from 14 out of 15 hospitals in the province attended.

Dr Kapoor opened the session with a historical narrative on how the project, Global Safe Surgery Initiative, was conceived and its goals. We then launched into an interactive tutorial on Hypoxaemia, emphasising early diagnosis, the very important role of pulse oximetry and introducing an algorithm on management. The World Health Organisation’s (WHO) pre, peri and postoperative checklists were also discussed. The Hypoxia algorithm and WHO checklists had been translated and were provided to participants as an aide de memoire and to take back to their hospitals or clinics. There was an exercise to demonstrate the safe and appropriate use of the equipment. Ten oximeters came with neonatal probes and were distributed to hospitals providing neonatal anaesthesia care, and to the Department of Health via Dr Johan Morreau (Paediatrician/Neonatologist and Chairman of the New Zealand Vietnam Trust) who was also in Quy Nhon on a teaching mission. He sent us a photo later in the day of four neonates under phototherapy that were being monitored with the new pulse oximeters.

The workshop ended with an immensely gratifying experience – the official handing over of the pulse oximeters to participants. This equipment, which we take for granted in the western world, will make a real difference to the delivery of quality care for Vietnamese patients.

There are still 24 Lifeboxes remaining with the VSA that will be distributed (alongside Lifebox education) to the smaller centers via trainees visiting university hospitals for training.

I came away from the experience wanting to be more involved, either to run more of these workshops or to come back as a teacher/trainer in various aspects of quality care provision.

I am very aware that work of this nature needs to be commissioned from within; to that end I hope to hear of an invitation in the not too distant future!