

REPORT ON GUATEMALA PTC COURSES
JUNE 16-20 / 2005

PURPOSE OF THE VISIT

To run two PTC courses, one PTC basic and one PTC instructor to Guatemalan physicians and try to get PTC program re-started after 2003 first limited experience to two PTC basic courses.

EXECUTIVE SUMMARY

After a 2 years silence, Asociacion Guatemalteca de Anestesiologia, Reanimacion y Terapia del Dolor (AGARTD) contacted early 2005 to PTC Latin America Chairman, Dr. Oscar Gonzalez, asking for a new chance to run PTC courses in Guatemala. Dr. Victor Pineda, AGARTD president, was in touch with Dr. Oscar Gonzalez and both set the dates and the way to get funds for basic and instructor courses. The instructor's staff was conformed by Dr. Juan Carlos Duarte (team leader), Dr. Anibal Farias and Dr. Nerio Bracho from Venezuela, and Dr. Nelly Castro and Dr. Gustavo Cifuentes from Ecuador. Together, we were lodged at Guatemala City's Conquistador Ramada, the same location for PTC courses. On Thursday June 16th and Friday June 17th, PTC basic course was run with attendance of 13 people, and then we got an off day on Saturday 18th to knowing a little bit more from this beautiful place. On Sunday June 19th and Monday June 20th 10 physicians were taking a successful PTC instructor course so Guatemala has now an own instructor staff. Of high relevance is 4 of 10 Guatemala's instructors are involved in the executive board of AGARTD, which represents a high commitment with PTC development in Guatemala. On Tuesday June 21st most of instructors flied back home after a very productive PTC week abroad totally convinced PTC future in this new site is in the right people and will open the way to conquer another countries in Central America.

KEY STAFF INVOLVED PLANNING AND CO-ORDINATING

Dr. Victor Pineda and all of others AGARTD executive board members did a invaluable effort to get everything we needed to run both courses, since materials until money to refund air tickets of some instructors, allowing WFSA saves money for future new sites. Dr. Oscar Gonzalez, as PTC Latin America chairman, played a paramount roll in planning and coordinating every detail of this trip, working as liaison between WFSA-PTC and AGARTD members to make sure the PTC future in Guatemala. He had to do his best effort to motivate Dr Pineda and AGARTD to re-start PTC after a 2 years blackout and then worked so hard to get instructors, funds and everything ready for the starting date. They all did a great complementary job in backstage arranging all before instructor's trip to Guatemala.

COURSE PARTICIPANTS

13 physicians were present for basic course on Thursday June 16th and Friday June 17th: 3 anesthesiologists, 6 residents in anesthesiology, 1 general surgeon, 1 general physician, 1 pharmacologist and 1 critical care doctor working at emergency department. Most of them work at Guatemala City's public or private hospitals including Dr. Victor Pineda, AGARTD president. They all completed the 2 day course and got their certificates at the end. The complete list of their names is as follows:

COURSE INSTRUCTORS

PTC instructors from Ecuador and Venezuela were in charge to run this 2 day basic course. From Ecuador, Dr. Nelly Castro and Dr. Gustavo Cifuentes. From Venezuela, Dr. Anibal Farias, Dr. Nerio Bracho and Dr. Juan Carlos Duarte.

DETAILS OF ACTIVITIES

The arrival of instructors to Guatemala City was in different days and flights. Dr. Juan Carlos Duarte arrived at evening on Tuesday 14th; Dr. Nelly Castro and Dr. Gustavo Cifuentes arrived

at noon on Wednesday 15th. Dr. Nerio Bracho arrived at 6 PM and Dr. Anibal Farias at 9 PM on Wednesday 15th. On Wednesday 15th, Dr. Juan Carlos Duarte did the matching between checklist sent to Dr. Pineda and what they had got at this time. This job was done together with some of members of executive board of AGARTD.

We were all lodged at Conquistador Ramada, a very nice hotel, with all of basic requirements in the building and close to many interesting places. The meeting room at lobby level was the place where both lectures and workshops were run and we got a suite to materials' storage as well. Definitely this did easier the job because everything but the attendants was at the same place allowing not losing time in transportation. The meeting room was big enough to allow run 3 workshops simultaneously without disturbance and one In Focus device was used both days with one OHP, one flipchart and one slide projector as back up. No microphone was necessary. Coffee breaks were served at meeting room and lunches at special area of restaurant besides meeting room. Coffee, pastries, beverages and food were all very good. At the end of course, everyone received attendance's certification and the recognition from instructors. There was one very special case: A pharmacologist from Belize (born in USA), speaking English and able to read but not speak in Spanish, was a "late minute attendant". We decided to allow his participation taking in count he was able to understand most of we spoke in Spanish and we could speak in English to him during workshops. Fortunately all of instructors understood this situation and did an extra effort with him. His final performance was very satisfactory.

SUBSIDIARY ACTIVITIES

At the end of second day's course, we were invited to have dinner with all of AGARTD executive board at Dr. Victor Pineda's house. We were picked up at lobby and they took us in their cars until Dr. Pineda's home. It was a really nice dinner and an excellent opportunity to share experiences on the ways to develop PTC in the future in our continent. We could feel the high commitment of all of them to develop PTC in Guatemala and take it under direct supervision of AGARTD.

MEDIA COVERAGE

Nil. We encouraged them for future to promote PTC courses to the media.

CONTENTS OF THE PRIMARY TRAUMA CARE BASIC COURSE

Day 1, Thursday June 16th, starting at 8:45 AM (45 minutes delay):

Introduction (Juan Carlos)

Local trauma perspective and MCQ (Victor Pineda)

ABCDE of trauma and primary survey (Nerio)

Airway and breathing (Nelly)

Circulation and shock (Juan Carlos)

Skill stations: Airway, Cervical spine and immobilization, chest drains

Secondary survey (Gustavo)

Demonstration scenario (All instructors)

Scenarios (All)

Chest injuries (Nerio)

Abdominal injuries (Anibal)

Head and spine injuries (Gustavo)

Summary (Gustavo)

Day 2, Friday June 17th, starting at 8:10 AM (10 minutes delay):

Pediatrics and obstetrics (Juan Carlos)

Limbs injuries (Anibal)

Burns (Nelly)

Workshops: Pediatrics, Neurological assessment, transportation and analgesia

Disaster management (Juan Carlos)

Demonstration scenarios (All instructors)
Scenarios (All instructors)
MCQ paper
Summary and evaluation (Juan Carlos)
Certificates and close

EVALUATION OF THE SUCCESS AND RELEVANCE OF THE VISIT

It was a typical 2 day course run “by the book”. Most of the attendants were participating very actively along the lectures and skill stations, and we could feel their basic knowledge in trauma was right but the systematic approach was unknown. At the end of the course, everyone, including the pharmacologist, had got learn it perfectly. All of the instructors felt 100% satisfied and proud with the improvement and final results. We think the message was delivered and they got it. The seed is in the soil; we do believe this soil is fertile and the seed will grow soon!

PTC BASIC COURSE EVALUATION FORMS

Every attendant filled it out. Our lowest qualification (0 to 5) was 3 (twice) and mostly we had 4 to 5 in their opinion about each topic of course. We feel very pleased with these qualifications. They considered mostly scenarios (first one) and workshops (second one) as the best part of this course.

SUMMARY OF MCQ SCORES BEFORE AND AFTER THE COURSE

Most of participants got around 50% of right answers at pre-course test, ranging 27% to 66%. Everyone got to improve notoriously at post-course test and most of them had around 80% of right answers, ranging 66% to 96%. If we check this scores in conjunction with performance of everyone at final scenarios, we must be very happy with this because of the message was delivered and PTC philosophy was acquired. We did the job!

CONTENTS OF THE PTC INSTRUCTOR COURSE

This was the program designated for this 2 day instructor course:

Day 1, Sunday June 19th, starting at 8:30 AM (30 minutes delay)

Welcome and introduction – Juan Carlos

What is PTC / Concept, objectives and mission – Gustavo

How adults learn – Juan Carlos Duarte

Asking questions - Anibal

Presentation 1 - All instructors and participants

Feedback – Nelly

How to give presentations / Introduction – Nerio

Lecture – Juan Carlos

Discussion group – Anibal

Presentation 2 – All instructors and participants

Teaching a skill – Nerio

Skill stations / put into practice – All instructors and participants

Summary – Juan Carlos

Day 2, Monday June 20th, starting at 8:00 AM

PTC international – Juan Carlos

Teaching Scenarios – Nelly

Scenarios / put into practice – All instructors and participants

Language issues – Nerio

Writing PTC reports – Gustavo

How to run a PTC course – Anibal

Presentation 3 / Topic introduced by instructors, discussion group, consensus, presentation of their conclusions by one of each group of participants (2 groups of 3 people and one of 4) in whatever was the style selected by themselves

Where to go from here – Juan Carlos

Summary, close and certificates – All instructors

PTC INSTRUCTOR COURSE PARTICIPANTS

10 physicians took place for this 2 days instructor course. 7 of them were anesthesiologists, 2 residents in anesthesiology and 1 orthopedic surgeon. 7 of this 10 people group had taken PTC basic courses 2 years ago when first attempt to set PTC program in Guatemala was done and we did not know them. The remaining 3 people were known to us because they completed the basic course 2 days earlier. 4 members of AGARTD executive board were taking this course, including Dr. Victor Pineda, which reassure their commitment with PTC program

PTC INSTRUCTOR COURSE INSTRUCTORS

Instructor staff for this course was the same for basic course. Dr. Nelly Castro and Dr. Gustavo Cifuentes from Ecuador, and Dr. Anibal Farias, Dr. Nerio Bracho and Dr. Juan Carlos Duarte from Venezuela. I think it is a real advantage because it allows to develop a great team work at this point of courses.

PTC INSTRUCTOR COURSE EVALUATION FORMS

We had evaluation forms filled out from all of the attendants. They qualified with 4 or 5 almost all parts of this course and the most voted best parts of this course were scenarios and presentations. I think it is logical because PTC course is mostly practical and is through skill stations and scenarios how we can teach more and better, and presentations are the way to learn to teach PTC stuff in different ways and circumstances no matters neither technological or environmental resources.

COMMENTS OF PTC INSTRUCTORS

At the beginning, it was obvious 3 people had got some advantage due they had taken basic course a couple of days back and the remaining 7 had done it 2 years ago, but when everyone got focused in the real objective, to learn how to teach, the group showed homogeneous. They participated very actively in each session and were so enthusiastic and accessible to change after feedback on their particular performances. At the end, we had a strong group of future instructors, with excellent skills to give presentations, teach scenarios and skill stations. We felt very happy with the final results of this group and do believe PTC future in Guatemala is in excellent hands.

OBSERVATIONS AND RECOMMENDATIONS FOR THE FUTURE

I think there are 3 main recommendations to be given for future courses:

1. We have to insist in having a participant's database, with enough information on each one, in real advance to starting date. It is quite difficult to planning a PTC course if you do not know who you are teaching to, which is the scientific level of audience, if they are all the same kind of physicians or there are different specialties in the attendants. We had to face a "late minute case" of somebody who did not speak Spanish although he was able to read it quite well and understand at least 50% what he listened. Fortunately, PTC instructor course has taught us how to handle these cases, but if we do planning in advance, results will be better.
2. We must to be clear enough with local people about all related to instructors travel. Is quite disappointing when you get pass customs of a foreign country and nobody is out there waiting for you as you had understood (some of my fellow instructors lived this experience). Moreover, Instructors should not pay nothing related air ticket, taxes, taxi, lodging or meals if these are strictly related to PTC courses.

3. We must make sure for future basic and instructor PTC courses all of invited people receive in advance the relevant information (manuals, brochures, emails, etc.) from PTC national committee or PTC Latin America people. In this way we will have students better prepared and up to date with the information they will be getting in the courses. In cases where we have participants in an instructor course who had taken basic PTC courses long time ago (6 months and up), this precautions will be a key for better results.

TEACHING MATERIALS PROVIDED

We were very fortunate as we had 2 laptops, 1 printer, 1 multimedia projector, 1 overhead projector, 1 slides projector, 1 flipchart and markers along both courses. What we wanted to use to teach we got it.

ACKNOWLEDGMENTS

PTC Latin America is indebted with AGARTD executive board, particularly with its president, Dr. Victor Pineda, for the tremendous effort to run PTC courses again in Guatemala. It is pleasant to see how a national anesthesiologist's society takes the command on trauma care through information, teaching and spreading of PTC concept, a useful tool in trauma care in developing countries.

AS leader of this crew, I am very gratefully to my fellow instructors that had the opportunity to go to Guatemala and run the courses. We worked as a team although it was our first time together. They were the key for the success.

I would like to say a special thanks to Dr. Angela Enright, Dr. Ruth Hooper, Dr. Frank Walters, Dr. Douglas Wilkinson and, of course, Dr. Oscar Gonzalez, our Latin America Leader, for making every possible effort to get everything ready on time. I was very fortunately to be called to coordinate this mission and would like to say thanks to Dr. Oscar Gonzalez for believing in me. I hope be able to do the job every time I get this honor!

To Menarini Guatemala and Abbott Guatemala, a especial acknowledgment for their support to AGARTD in running the PTC courses. I hope they go on supporting PTC in Guatemala.

To all Guatemala's colleagues that shared this experience with us and did all possible to make us feel at home, many thanks!!!

Dr. Juan Carlos Duarte G.
PTC Chairman - Venezuela