

Actually, it's the 25th day of the 11th month of 2065, but fortunately I only have to worry about that in the operating theatre when dating my anesthetic record.

Tuesday proved to be a pleasant day in the OT. I had some concerns as we headed to Anandaban about how their long term anesthetic staff (paramedics with some additional anesthesia training and **lots** of experience with axillary blocks and spinals) would react to this 'bedeshi' wandering in out of nowhere as the 'visiting expert'. Turned out their two staff were incredibly gracious, friendly and keen to learn. Once I clarified that the younger one was giving the anesthetic and I was just standing by as I resource things went smoothly. They asked good questions and accepted advice readily. I was a little taken aback when I was invited next door for morning tea and realized belatedly that all three members of the anesthetic team were taking a break within about 10 minutes of the case getting underway.... but when I returned to the OT there was another human hand squeezing the bag (?? skill set of person attached to the hand???) and the patient was fine. Turns out they give a general anesthetic about 3 times a year, so their monitoring habits are geared more to regional anesthetics.

Wednesday Richard and I headed to Pokhara by bus, about a 6 hour ride. Again the lack of water in rivers was shocking. We arrived at Green Pastures Hospital after a 45 min 'rest' in traffic as we waited for the police to figure out how to direct traffic across a major bridge that had become one-lane after a truck broke down while crossing it. Turns out that local practice is that you fix the vehicle on the bridge. You don't tow it away. When we eventually drove past it the truck had a discouraging number of pieces disconnected and a worrisome amount of oil underneath it...

We triaged patients for the OR schedule in the afternoon. And operated full days Thursday and Friday. At least, those were Nepali 'full days'. The head OT person arrives at 10:00 a.m. If all goes well the first patient can enter the OT by 10:30. I don't know how I'll handle those 8:00 am starts back in Kingston.

We had to abort one case on Friday. A 35 year woman had a huge neurofibroma growing on the side of her face. It proved too vascular and invasive to operate on safely, so we decided discretion was the better part of valor and backed out. Back home the mass would have been embolised to reduce blood supply prior to operation, but no such resource is available here in Nepal. Three of our other cases were post burn contractures involving hands (one age 13, two 23 yrs). All had major functional impairments from the injuries. Turned out the burns occurred at 8, 6, and 9 months of age.

Must say I'm glad I was working at Green Pastures on Friday. Richard's wife arrived later than expected some time after we finished in the OT with news that there were riots in town and a travel band had been imposed. A child died after a rabies shot in the Western Regional Hospital. Sounded like an anaphylactic reaction to the immunization. Currently the response to an adverse outcome in hospital appears to be a general rampage. Family members started beating up the doctors, nurses and anyone in white and the hospital went into lockdown. Yesterday when we returned from the morning church service (church happens on Sat here) there were still hordes of riot police around the hospital entrance. Maybe medico-legals aren't so bad after all??

So far I've stayed healthy. That's a real blessing.

And now out to the Shrangri-La hotel for Sunday brunch and some R&R.

Alison