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communiqué

Delivering Health and Hope to the World

DISASTER RELIEF Saving Lives a World Away

Immediately following the earthquakes, Thomas Dickey, a PA from Colorado went to **NEPAL** to help and has been saving lives, providing comfort and delivering health & hope in small rural areas since then.



Tom Dickey stabilizes Laxmi Tamang for transport to Borle and then Kathmandu.

“To think that they were in dire need dug at me like a skewer in my stomach. I had to go. I had to help. I’m medically trained now, and I could help in an immediate, direct and personal way,” said Dickey. Tom arrived in Nepal with several of our C.U.R.E. Kits—large duffle bags of medical supplies and medications. He described his initial days, “I went to outlying towns in the Kathmandu Valley that were devastated by the quake and treated many patients. I helped many organizations connect with each other so that there would be a synergy between them.”

In fact, Tom began working with a group organized by Rasuwa Relief that needed his skills in a remote area north of Katmandu. After a long ride, he arrived in the village of Borle. There were 5,100 patients to attend to in the village. Armed with supplies from Project C.U.R.E., Dickey saw patients well into the night. He said, “I sutured by headlamp, dispensed medications and calmed anxious, traumatized people with hearts of gold.”

Someone told him about a woman on the other side of the valley. She had her back broken in the first earthquake, but it was too late in the day to reach her. Early the next morning, Tom and his team headed down the steep trail leading 4,000

feet to the river below and then back up 1,500 feet on the other side to the small village. He found Laxmi Tamang lying on the side of the road. Tom described that moment as “the most compelling and rewarding tale of this emotionally draining journey.”

Silent, expressionless, and immobile, it was immediately apparent to Dickey that, while Laxmi may have had a broken back, from the position of her legs, she likely also had a fractured pelvis or hip. Before he examined her, he was handed x-rays of the back and pelvis. They clearly showed an unstable, serious pelvic fracture. The most puzzling and confounding fact was that Laxmi had actually been airlifted to a mobile camp, seen, x-rayed, evaluated, and then released with no treatment whatsoever. She was put in a small bus that traveled the rugged, rocky, cracked road for 34 hours back to her village.

“I still can’t wrap my mind around this. A pelvic fracture such as hers is treatable, and high up on any emergency triage protocol. Stabilizing her and holding her for surgery later seems like a not too difficult thing to figure out,” he said. “To send her out to die is still too hard for me to understand. I was incredulous. Who in their right mind would actually

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Outdoor hospital unit in Kathmandu.

discharge this woman with an unstable fracture of her pelvis? As I asked questions about all this, I learned that she was also 8 ½ months pregnant and lost her child. That meant she had to deliver her dead baby through that broken pelvis too!” said Dickey. “The woman’s pain—physical, mental and emotional—is beyond anything I can imagine. She wore the mask of a woman who could no longer feel pain, no longer feel anything. Close to death, and not having anything left to even fight with, she was a shell of a person, waiting—simply waiting,” he said.

Dickey made a stretcher out of supplies from the C.U.R.E. Kit and the surrounding area, and then the young men of the village carried her down the slick, steep hillside, through the stream, and over the bridge to the precipitous 4,000 foot climb back to Borle. The next day the ambulance arrived. The ride seemed “interminable,” partly because Tom had contracted dysentery and was getting worse. He felt weak and was barely able to stand by the time they reached the



Laxmi walks again on June 26, 2015.

hospital in Kathmandu. Upon arrival at the hospital, medical staff immediately started IV fluids and blood transfusions on Laxmi. While she was being treated, Tom was given an IV by a friend. The next day he gave himself another IV of 2 liters of fluids, and he saw more than 80 patients using the C.U.R.E. Kits and other donated supplies.

Laxmi remained in the hospital for 10 days before getting her operation. Her leg and pelvis were put in traction to align them to make surgery easier, and they felt she needed the time to become more medically stable and strong enough to survive the surgery. She was operated on and four days later was discharged from the hospital, much to the chagrin of Tom, who believed that she needed to remain in the hospital to heal. However, the hospital needed the beds for new patients who were coming in after the quakes. Laxmi was released to a rehabilitation center run by Samrat Banet, a man who had transformed his office into a specialty facility. Under Samrat’s care, Laxmi began healing emotionally and physically with the help of a group of kind-hearted and skilled strangers.

During Tom Dickey’s medical mission to Nepal, he used supplies from the multiple C.U.R.E. Kits he took with him—treating hundreds of people in the streets that needed the most basic healthcare. He stayed in Nepal for just over 2 weeks and then returned to the U.S. However, he continues to raise funds for those in need in the rural villages of Nepal. What’s more, Laxmi thrived with the rehabilitative team in Kathmandu and miraculously stood up and walked again on June 26th.

West Africa—Although the Ebola outbreak no longer consumes the media, the virus continues to affect the healthcare infrastructure of West Africa. Doctors, nurses and healthcare workers are desperately trying to rebuild an infrastructure that was crushed under the crippling disease.

Having worked for many years in West Africa prior to the outbreak, Project C.U.R.E. was prepared to mobilize urgently needed medical supplies to West Africa to aid those treating the Ebola outbreak. In response, **Project C.U.R.E. sent 24 containers valued at more than \$8.5 million.** These contained the most critical PPE (personal protective equipment) items.

Many organizations stepped up to contribute to the crisis including Medline, Hill-Rom, Covidien, ShurTech, Uline, Parkers Perfect, Nokero, Chevron Corporation, Newmont Mining Corporation, DHL, London Mining, IMA-International Medical Assistance, Dreitzer Foundation Inc., Montview Presbyterian Church, the Project C.U.R.E. Young Professionals Board, recording artist Charlotte Sass, civic-leader Susan Hoefling, and multiple individual donors.

Jordan/Syria—It takes a global village to bring health and hope to those affected by disasters. We are currently delivering supplies to refugees on the Jordan/Syria border. **You can donate to this effort** at www.projectcure.org/syriancrisis.



containers to date: 47 countries served in 2015

For the year ending May 31, 2015 Project C.U.R.E. delivered 145 containers to 47 countries in need of healthcare supplies and capital equipment.

I CAN DO THAT: Couple Provide Desperately Needed Supplies to Peru



Rachel Ibarra arrives with medical supplies at a clinic in Huancane, Peru.

Project C.U.R.E.'s success depends on volunteers who dedicate their time to serving others. Recently Rachel Ibarra and David Hall, had an adventure delivering a C.U.R.E. Kit to a Peruvian clinic. Rachel and David were introduced to Project C.U.R.E. when their company, RevGen, hosted a Kits for Kids packing party.

Both frequent travelers, the two were inspired to take a C.U.R.E. Kit on their trip to Peru. The couple planned to deliver their C.U.R.E. Kit to a facility in Sicta. Upon arriving, they learned that the only hospital in the area was in Huancane, along the northern edge of Lake Titicaca. Because the region does not attract a lot of tourists, the hospital lacks resources.

In traveling to the facility, Rachel and David ran into some challenges. There were protests in Southern Peru over copper mining. The roads were covered in shattered glass, blocked with animal skulls and the protesters were burning tires to disrupt the bus transportation in the area. Determined to make their donation, they hired a taxi to Huancane. Rachel and David convinced the protestors to help move the debris

and allow them to leave the city. According to Ibarra, **the experience, "was scary, but totally worth it."**

When they arrived at the hospital, the doctor and nurse were surprised and thrilled to receive a gift of approximately \$2,000 of donated medical supplies. The medical professionals who were working at the small hospital smiled with tears of disbelief as they unpacked the supplies. Looking around the sparse supply room, Rachel and David truly understood that the C.U.R.E. Kit they had hand-delivered was important to the medical workers—but even more—it was a life-saving gift to the community.

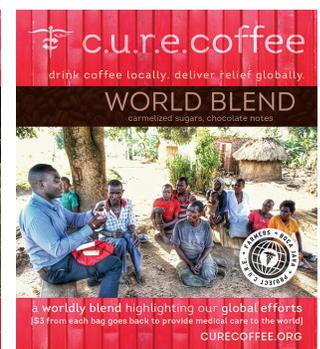
C.U.R.E. Kits are approximately 48 pounds of life-saving medical supplies packed in two large canvas bags. They are designed to take on an airplane as luggage. Medical professionals use these C.U.R.E. Kits, and they make a great gift for communities in need.

For more information about how you can get involved, go to www.projectcure.org/curekits.

coffee can change
the world



C.U.R.E. Coffee launches two
new lines with Boca Java



Every year, coffee consumers annually drink more than 500 billion cups of coffee—that's more than 55% of Americans over the age of 18 drinking coffee every day. If you love coffee and want to change the world, this is for you!

Boca Java proudly partners with Project C.U.R.E. to offer coffee that delivers critical medical relief to people who need it the most. Each time you buy a bag of Project C.U.R.E. coffee, you provide \$60 worth of medical supplies

and relief by donating and shipping medical supplies to those in need.

Until recently, our coffee project was focused on Nicaragua. This month, Project C.U.R.E. and Boca Java added a World Blend to our family of coffee, and will soon add a Kenyan Blend. Now you can enjoy these amazing flavors while making a world of difference one cup at a time. Order your C.U.R.E. Coffee online at www.curecoffee.org.



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