

Dear Colleagues,

Over a year ago, the PAACS Commission stepped forward in faith in a series of areas which effectively tripled our budget over three years. God is blessing that step of faith and the end of the fiscal year showed PAACS to be blessed by God. What we need more than money, however, are men and women who will answer God's call on their lives to train young African physicians – both as career missionaries and as short-term faculty members. Please pray with us and listen carefully for God's still small voice in your own life.

One thing we enjoy is to read the stories by other missionaries within PAACS. Many of them have a blog or website and you can read them (and share them) at your leisure. They are listed at the bottom of one page in our website: <http://paacs.net/involved/paacs-resources>.

Life in a surgical training program is always difficult and both faculty members and trainees have struggles. The Fall Prayer Guide will soon be available – please remember our people in your daily prayers.

The Editors



The Pan-African Academy of Christian Surgeons (PAACS)

BULLETIN #133

July 2015



Recent get-together of the PAACS family at Soddo Christian Hospital

Changing the spiritual and physical health of a continent

Our vision: PAACS trained surgeons living the gospel and ministering to the sick.

Our Mission: PAACS exists to train and disciple African surgeons to glorify God and to provide excellent, compassionate care to those most in need.

Our goal: To train and disciple 100 African surgeons by 2020.

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A Ministry of Christian Medical & Dental Associations



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FROM THE EXECUTIVE DIRECTOR

Dear Friends of PAACS:

This month, I want to specifically thank our Heavenly Father for His continued goodness and faithfulness to PAACS. Our God has always provided for this organization; however His provision to PAACS this past year has surpassed all expectations. He not only met the needs of our financial budget but also provided exceedingly and abundantly above all that we could ask or think. This provision came directly from His hand and we are grateful for His generosity, love and care over His ministry.

As I started working for PAACS, I asked the Lord to do what I could not do for this organization. My fundraising experience was limited but I knew that I serve a God who could do beyond anything I could do in my strength. He also reminded me that in my weakness He is made strong. God is bigger than my limitations. He faithfully provided and has taken care of PAACS in a mighty way so that we may continue to glorify His name by training African surgeons to care for Africa's sick and suffering and share the gospel of Jesus Christ with His children.

Not only do I appreciate His financial provision but am grateful for everything He has done for our ministry, program directors, faculty, residents and every aspect of PAACS. God is in control of PAACS and sovereign over this ministry. I ask the PAACS family to take a moment to thank God for His goodness, mercy and faithfulness to our organization and his servants. We serve a faithful God.

His Faithful Servant,

Susan A. Koshy, PAACS Executive Director

MEET THE HALTERS

David Halter, DO, his wife Sarah and their two sons, Daniel (5) and Micah (2), arrived in Arusha, Tanzania at the beginning of June. Halter is joining the PAACS program at Arusha Lutheran Medical Centre and will assist in expanding the program to cover its sister hospital, Selian Lutheran Hospital. Halter will begin working at Selian in September and will work additionally at Arusha Lutheran Medical Centre starting in 2016.

David and Sarah have felt God leading them to East Africa and its people for many years. With previous experience working in rural Kenya, the Halters expected to go to a remote rural hospital where there was a desperate need for a surgeon. Yet they had a lingering concern that they could spend the rest of their lives in such a place, and the need for a surgeon would be just the same when they left. God led them to PAACS which gave them a vision for training, mentoring, and discipling African surgeons who love Jesus, see themselves as missionaries, and are committed to serving their own people with high quality surgical care. Since they already had a love for East Africa, when the opportunity to serve in Tanzania came, they were ready to join the team. After visiting Arusha in 2012, the Halters were sure that God was leading them there.



The journey to Tanzania, however, was longer and more challenging than the Halters expected. The intervening three years included two unexpected moves, a new baby, job changes and a tremendous amount of spiritual attack. These challenging times were also fertile ground for growth, refinement and seeing God's provision as He taught them to trust His call on their lives and to follow Him wholeheartedly. God was clearly working to prepare the Halters, increasing their faith and dependence on Him, in addition to the more practical areas of building a team of partners, learning about Tanzania and preparing both to learn another language and to engage a new culture.

Since arriving in Arusha, David and Sarah have spent June and July finding permanent housing, purchasing a vehicle, deciding on school for the children and getting started on language learning. August will be focused on language learning as David takes a 3-week intensive Swahili course and Sarah takes a 2-week refresher course. The kids will also be learning as much as they can in their own program.

Arusha is a bustling city and the Halters are finding all sorts of roads, shops and services that didn't exist on their previous visits. There are twice as many traffic lights and ten times as many motorbikes,

making city driving an exciting experience. The transition to Arusha has thus far been smoother than expected. Arusha is a familiar place and Sarah's Swahili, though rusty, has been immeasurably helpful as they get settled.

David has begun attending and participating with the residents' didactic days. He has enjoyed meeting these four young physicians who are energetic and eager to learn. He is excited to get to know each one and to encourage them throughout their training, as they grow not only in their understanding of surgery, but also their knowledge of and dependence on God for their life and work. He is delighted to work with the directors and faculty of the program, who are faithful followers of Christ, excellent surgeons and committed to teaching this next generation. He also looks forward to providing surgical care at the more rural Selian Hospital, helping develop the program there and teaching the residents in that context. The Halters are beginning to build relationships in the Tanzanian neighborhood where they are living and hope to have a strong relational ministry there as well.

REACHING OUT – A SURGICAL CAMP IN KENYA

[Editor's Note: This is the recent blog by Dr. Heath Many, a general surgeon at Tenwek Hospital. It can be found in its entirety at <http://manyfamilyonmission.com/2015/07/25/reaching-out/>]



Brase Clinic in Migori, Kenya

In previous posts and through other media forms I have tried to give a picture of the need for access to surgical care in rural Africa. Recently, this need was highlighted in a paper that was published in the Lancet and was subsequently reported on in the BBC. Please see this link to read more- No Access to Safe Surgery . The conclusion is that most of the world's poor do not have access to adequate surgical care. This growing awareness of the worldwide surgical need has prompted brainstorming from various

health organizations on how to meet this need. Certainly, training surgeons is one of the methods to help pave the way for better surgical care. This is what has drawn our family to Kenya. However, there are other ways. Surgical “camps” are one of the ways that various groups have used to try to relieve the surgical disease burden in one locality. The idea is to do as many surgeries as possible over a few days while providing this care for free or at a significantly reduced rate. Typically these camps are done in areas where there is no immediate access to surgical facilities, and, often times, it is professionals from other countries who are coming to donate their time and expertise.

Last week, I travelled to far western Kenya along with one of our third year residents, Dr. Valentine Mbithi, for a 3 day surgical camp. This well-organized camp is at a small clinic which is run by Kenya Relief. At least monthly, teams (usually from the U.S.) come to do as many surgeries as possible over 3 days. However, for July, the team travelling from the U.S. was lacking surgeons... which of course are a key ingredient in providing surgery. We were asked to help fill the gap and we gladly accepted. I felt like this would be a great opportunity for Dr. Mbithi and I to participate in mission outreach, plus it would allow her to operate a little more independently as we would both be running ORs.



Our team setting up the OR on our first day.

We arrived on a Sunday afternoon after travelling about 3 hours from Tenwek to an area that I had not been before. The last hour was on a narrow road that twisted and turned through sugar cane farms. I felt grateful to arrive in one piece- we were run off the road twice by high speed buses who were out of control on the narrow roads. After settling in, we met the team who we would be serving with. There were four CRNA’s from various locations in the U.S., as well as a recovery room nurse. We quickly made our way to the screening clinic where we evaluated and scheduled patients for the next 3 days. The most common diagnosis was thyroid goiter. These huge goiters are often times caused by iodine deficiency and can grow so large that they cause problems with swallowing or even breathing.

However, we also saw patients with hernias and other lumps and bumps. We worked into the evening, ate a big dinner, and then crashed.

By 6:30 the next morning, we were back to the clinic and ready to start surgeries. We worked out of one OR which had two surgery tables, so Dr. Mbithi and I were in close proximity. If she had a question or concern, I could quickly provide guidance. In the morning we did smaller cases independently, and as the afternoon started, we began thyroid-fest. Our team was incredibly efficient. We had almost no break between surgeries, which as surgeons, we love. Thyroidectomies are more complex cases, so Dr. Mbithi and I would work together during the key parts of the operations, and then one of us would close the wound while the other headed to the next table to start the next case. Our team worked until 9:00 or 10:00 at night for the next two days. In two and a half days of operating, we did 24 operations. In total, we removed 9 thyroids, fixed 5 hernias, and did several other smaller operations including a lip reconstruction from a poorly healed traumatic injury. We also performed the first cystoscopy (looking into the bladder with a camera) that had been done at the clinic.



Dr. Mbithi starting a hernia repair.



Dr. Mbithi still smiling after a long couple of days of surgery.

By Wednesday afternoon, we were beat. Our team members were incredible to work with and I give a big “hats-off” to Kenya Relief and the missionaries who are there on the ground making these camps happen. In addition to doing surgeries, we referred many patients who were too complex to operate on at the camp to follow up with us at Tenwek. In this manner, we were able to extend care and continuity that many short camps are unable to provide. As we drove home to Tenwek, Valentine asked me if we could bypass letting one of the other 13 residents come on the next trip so that she could return. This is

what I am most thankful for... seeing our trainees develop a vision for service and outreach to those who are in desperate need.



Dr. Mbithi and I with the Kenya Relief team

A ROAD LESS TRAVELLED - A REPORT FROM ETHIOPIA



[This is a condensed version of the most recent letter from PAACS-Ethiopia Program Director Andrew Chew]

“Going off the beaten track opens up vistas and gives an inside look into the real Ethiopia. Over 80% of the population of Ethiopia lives in rural and remote areas, supported by poor infrastructure. The terrain is a big foe to travel by car, with mountains, valleys, and rivers to traverse. Areas with heavy rainfall in the “big wet,” combined with deforestation and cultivation contribute to rock and landslides. Advancing over a road where half of the width and the shoulder had dropped away raised concerns that we might find ourselves trapped on the way



back, should the remainder of the road collapse.”

“Our guides were missionary nurses Carolyn Adolph and Ruth Weber, who prior to serving as part of our team at Soddo Christian Hospital served for 15 years at a SIM health post in Tikimt Eshet. Because children had to trek two hours each way to study, they helped build a school for the community. Among those who greeted us when we arrived was a towering young man who years before was saved from military TB by these angels of mercy. We were overwhelmed by the hospitality, invited into homes for meals, and fed chicken, a meal usually reserved for major festivals akin to slaughtering a fatted calf in our culture. We were comfortably settled into a ‘guest house,’ which had an outhouse, solar power enough to charge our phones, four walls and a roof, and an unfinished front door which was nevertheless secured with chains and a padlock. There was no running water but enough was supplied in containers to wash for the three days we stayed there. Imagine living here more than 20 years ago?”



“To say that the roads are challenging in Ethiopia is an understatement. Pedestrians, motorbikes, bicycles, animals and carts, cars, and trucks compete on unequal terms for full use of two-lane roads. There are no helmets for motor cyclists, no seat belts in cars (other than our own), few licensed drivers, no speed limits in towns, and no one to prevent drivers from driving their vehicles under the influence of

drugs and alcohol. As a result, trauma from traffic accidents contributes to more deaths than HIV, malaria and TB combined. Head injuries are one of the top admission diagnoses for SCM. The government is trying to set up warnings and posters, but we encounter tragedies all too often on our travels.”

The impact of the PAACS training program at SCH continues to grow. Andrew Chew recently reported on an emergency operation he performed with his residents on a 12 year old boy who was stabbed in the heart by his younger sister. Blood escaping from the left ventricle and the torn pericardium poured into the pleural cavity, averting a potentially fatal pericardial tamponade. Adrenaline flowed freely as the surgeons and anesthetists struggled together to keep the boy alive. Giving new meaning to the term “general surgeon,” Andrew and his team sutured the tear in the boy’s ventricle in time to save his life. After much prayer and praise to God by the Soddo team and the patient’s family, the boy was discharged home well on postoperative day four!



Incredibly, Soddo Christian Hospital has been in existence only 10 years. The recent 10th anniversary celebration included the account of its God-enabled inception in the face of impossible odds and how God is helping it overcome continued major challenges. The most recent celebration is a recent announcement by the Ethiopian government that the PAACS program has been re-certified for another 5 years.

Andrew Chew's prayer requests are

1. That government authorities will govern with mercy, righteousness, and justice
2. That God will show them an effective and systematic way of addressing public health issues so that SCM can help reduce the carnage from road traffic accidents
3. That God will help them build highly functioning teams



VISIT TO BETHANYKIDS AT KIJABE HOSPITAL

By Ron Sutherland, MD



Left to Right: Drs. Erik Hansen (Program Director), Ken Muma, George Ngock, Edmond Ntaganda, and Ronal Sutherland

I spent a great week with the BethanyKids at Kijabe Hospital Pediatric Surgery program. In addition to doing many interesting and challenging cases, I was invited to attend the graduation and welcoming celebration dinner and program for Dr. Ken Muma, the new Associate Program Director. Over 50 surgeons, nurses, staff and their families attended. Erik Hansen gave a nice presentation about the history of Kijabe, BethanyKids at Kijabe Hospital, PAACS and the Pediatric Surgery program. He

concluded with a really nice tribute about Ken's life and accomplishments. Ken is a very humble servant and really did not enjoy the limelight. However he realized that the evening was about more than just him; it was about the entire Pediatric Surgery (and more) enterprise.

That enterprise seems to be thriving. Morale is high. With Ken as his deputy, Erik is encouraged and appears less stressed than on my previous visits. The fellows, George Ngock and Edmond Ntaganda seem motivated and sharp. The spiritual climate is healthy. Ken gave an excellent devotional during their weekly morning conference. BKKH is a busy place and there is no shortage of cases. Erik compiled the list of cases over the last 4 year. It's pretty remarkable. He sent that list and the academic curriculum that he spent much time creating, to the PAACS Pediatric Surgery Task Force a while ago. He's not heard back from the task force in any critical way other than to say, "Nice job."

TENWEK SPIRITUAL RETREAT

Tenwek General Surgery and Orthopedic Surgery PAACS residency programs recently took a night away from clinical duties for a spiritual retreat.



Music and worship were enjoyable.



Chief Resident Philip Blasto enjoys the beauty of the Mara River



Small group prayers were a significant part of the experience.

They were blessed to be able to go to the beautiful Maasai Mara and combine a time of fun and safari with a time of delving into God's word to study the biblical meaning of relationships and how to love God and love others and how to glorify God even when conflict arises. Rev. Fouad and Karen Faris from New Hampshire, USA were the leaders for the sessions and the workshops of the weekend. Some of the sessions were taken from the book *The Peacemaker*, by Ken Sande. The teaching sessions were followed by small group times to discuss what we learned and to spend time in prayer.

As the team returned to Tenwek, Rev. Fouad and Karen came to Tenwek with them and held a week-long seminar on marriage. Since it was based on the scripture of loving the Lord with all your heart, mind, soul, and strength, each of the four sessions applied not only to the relationship of marriage, but to other key relationships in life. All faculty and residents participated and found the whole experience to be a rewarding and encouraging time. We are grateful for this time of spiritual enrichment, time away to enjoy the beauty of God's creation, and quite a bit of good food and fellowship.

PAACS CMO TOURS KENYA AND ETHIOPIA



Rounds at Soddo Christian Hospital
A Ministry of Christian Medical & Dental Associations



Bruce Steffes, PAACs Chief Medical Officer, was in Eastern Africa for five weeks (leaving the US June 26 and returning July 30, 2015).

During that trip, he visited the Tenwek, Kijabe and



Steffes supervising Victor Sowayi doing burr holes.

Ethiopia-PAACS programs. At each place, he had long private talks with each of the faculty members and each of the residents in order to hear their hearts and their concerns. Academic records were reviewed and options for problematic issues were discussed with the program directors. For all the senior residents, he discussed placement possibilities. Mock orals were given to all those who were to sit the MCS and FCS exams and to others as time were available. At Tenwek, he had sufficient time and sufficient types of cases to scrub and assess the surgical skills for most of the senior residents. At Soddo, he also gave grand rounds and gave the morning devotions one day to the hospital staff. He felt it a great joy to attend all the teaching conference and Bible studies that were held during his visits. At both places in Kenya, discussion about the proposed new cost-sharing memorandum of understanding was held.

He also visited two recent PAACS graduates, Dr. Jack Okumu at Aga Khan Hospital in Kisumu, Kenya and Dr. Elijah Mwaura in Chogoria Hospital in Chogoria, Kenya. Both Tenwek graduates (2014) are already impacting their hospitals and the visit was an encouragement to them.

Steffes also traveled with Dr. Jon Fielder, head of the Africa Mission Healthcare Foundation to Maua Methodist Hospital in Maua, Kenya where another PAACS graduate, Dr. Tony Mwenyemali will be going in October. He encouraged the administration to take surgical trainees on rotation and to consider recruiting an additional one or two more PAACS graduates to serve together.



Dr. Gerhard Schumacher, Dr. Bill Rhodes and Steffes
at Kapsowar Hospital

He also visited Kapsowar Hospital to talk with Dr. Gerhard Schumacher and Dr. Bill Rhodes, the latter a long time missionary general and plastic surgeon who has been solo for a long time, about possible placement of both residents and a graduate at that hospital to help relieve the load on Dr. Rhodes. There is an excellent team of young expatriate physicians there and Steffes left with great optimism.

While in Nairobi, he inspected an alternative site for the next Basic Science Conference (it promises to give PAACS a significant cost savings) and with Rich Davis, toured Mater Hospital, a Catholic Mission Hospital that is

interested in at least an exchange of rotations and maybe even a PAACS program site there. A planned meeting with Prof. Jani fell through when the professor had to go to Tanzania on short notice.

While in Ethiopia, Andrew Chew and Steffes met with Dr. Chul Soo Kim at Myung Sung, interviewed two new possibilities for regular and/or adjunct faculty and met with Dr. Rick Garner, a CURE orthopedic surgeon to continue to explore the possibility of a CURE-PAACS partnership in orthopedic surgery in Ethiopia.



Elijah Mwaura operating at Chogoria Hospital

Steffes observed, “PAACS continues to be God’s work in God’s timing – and it is making a huge difference. It was good to see the young men and working that we are training and to encourage them to consider both witnessing form day to day and to consider long-term mission service. Our program directors, although beset of many issues and stresses that can so easily discourage, are an inspiration to me and I was very blessed to sit with them, to listen to them, to pray (and sometimes cry) with them, to advise where I could and most of all to encourage and thank them for their service to the Kingdom and to PAACS.”

WHY GIVE TO PAACS?

By Rob Barto, Chief Development Officer of PAACS

Donors think about many things when they give to a charitable organization, or when they are considering a gift to either a previously supported or a new cause. I would just like to mention two of the larger points on that list in reflecting on what it means to give to PAACS.

The first is that donors are very concerned with the return on their investment (ROI). Increasingly, educated donors are considering their philanthropy as much more than one-time gifts to familiar organizations or causes that sound good. Rather, they are looking at giving as a means to extend their reach and impact in the world. Investing in PAACS is to make a significant difference in the lives and hearts of others.

Making a difference is what PAACS is doing every day. It costs \$125,000 to train a PAACS surgeon for five years. PAACS surgeons will then touch thousands of lives throughout his/her career, both physically and spiritually. After graduation, a PAACS surgeon will go on to complete between 500-1200 surgical cases each year and consult or provide care for three times that number each year. It is easy to see how worthy an investment in PAACS can be, especially when you take into account the spiritual impact that the Christian surgeon has on the patient, their family, friends and community over the length of their service. This spiritual impact has the potential to effect generations!

Secondly, donors and those thinking about becoming donors are interested in supporting a big idea. PAACS stands up to this test with a goal of training 100 or more surgeons by 2020 and transforming the health and spiritual landscape of a continent. Ideas don’t come much bigger – and thankfully we have a gracious God and committed donors, volunteers and partners that have generously blessed PAACS. Thank you for your support of PAACS.

NEWS SHORTS:

- **Remediation Exam Completed:** Thirty-one PAACS residents took the remediation exam this past weekend. Some had successfully passed the annual exam by a small margin but it was felt that the extra practice in this type of exam would be desirable. Of the total, 2/3 passed the exam. The first year students not unexpectedly struggled the most but surprisingly, so did some of the chief residents. The top three scores were all obtained by residents from the program at the Arusha Lutheran Medical Center. Most of the students who did not pass will be either placed on probation for the next academic year or asked to repeat the present year in order to help them achieve a more solid footing for the remainder of their program.
- **PAACS Commissioner Works with WHO:** In early July, Dr. Walt Johnson, a neurosurgeon and Loma Linda University liaison to the PAACS Commission, accepted the position of interim Emergency & Essential Surgical Care Program Lead in the Service Delivery and Safety Department at WHO. This position continues the programs so capably started and managed by Dr. Meena Cherian and is tasked with implementing the new surgical resolution just passed by the WHA, among other issues.
- **Kenya Has New Visa Process:** The Kenyan Government has introduced a mandatory electronic visa process with effect July 2, 2015. ALL visa applications will have to be done online. As this measure was introduced with little advance notice, there is a grace period where travelers may continue to apply upon arrival into Kenya for their visa. This grace period expires 31 August 2015.

The mandatory E-Visa application will be effective after 1st September. The Single Journey visa application will take about 7 days, while the transit about will take about 2 days. Please plan your travel well bearing in mind the time frame for the visa.

For more information, check out the following websites:

<https://account.ecitizen.go.ke/register>

<https://immigration.ecitizen.go.ke/index.php?id=5>

- **Pediatric Surgery Training Position Seeks Candidates:** The Pediatric Surgery Fellowship Training Program at AIC-Kijabe Hospital (www.kijabehospital.org) in Kijabe, Kenya, is accepting applications for a training position with anticipated matriculation in July 2016. This 3-year “Fellowship in Clinical Surgery” (FCS) training post is run in partnership with BethanyKids (www.bethanykids.org) under the auspices of the Pan-African Academy of Christian Surgeons (www.paacs.net) and is accredited by the College of Surgeons of East, Central and Southern Africa (COSECSA – www.cosecsa.org). Qualified applicants will meet the following criteria:
 1. He/she will be a citizen of an African country and be eligible to obtain a Kenyan medical license.
 2. He/she will display evidence of an active Christian faith.
 3. He/she will have completed an M.Med., FCS or equivalent in General Surgery
 4. He/she will be fluent in English.
 5. He/she will have completed the formal application (available at <http://paacs.net/involved/become-a-trainee-2/become-a-trainee-bethanykids-at-kijabe-hospital-pediatric-surgery/>), including strong letters of recommendation from a pastor/priest

or lay leader at your local church and from a Christian physician who knows you well and has worked with you.

Completed applications should be submitted to Dr. Erik Hansen (hanerik@gmail.com) with a copy to PAACS (admissions@paacs.net). All applicants will undergo a formal interview as part of the application process.

Application Deadline: **December 1, 2015**



ANNOUNCEMENTS:

- **Prayer Guide off to Press:** The Fall 2015 has gone to press and will be mailed in September. It will be posted as a PDF on the PAACS.net website for those who prefer electronic versions but if you would like a printed copy, please contact Hannah Kasper at Hannah.kasper@paacs.net and it will be mailed when it is available.

- **Errata.** In last month's edition of the PAACS Bulletin, it was erroneously stated that the highest score on the junior level PAACS exam was achieved by Ebenezer Gezahegn. He

graciously appointed out our error and pointed out that Gezahegn Tilahun was the one who had achieved that honor. We apologize for the error and wish to heartily congratulate Gezahegn Tilahun on his outstanding performance.



- **Ethiopian Residents Pass External Exam:** On July 22, 2015, Dejene Desalegn and Segni Bekele, both chief residents in the PAACS-Ethiopia program, passed the Black Lion external exam today. This will permit them to register as surgical specialists at the end of their training program in November. Both will be sitting the

COSECSA FCS exams next. Program Director Andrew Chew was permitted to be present and learned a lot about how they examine the candidates. Congratulations to both!

- **Note of Thanks:** Dr. and Mrs. Ronald Tubasiime want to thank PAACS and all the PAACS family for their prayer and financial support during Cissy's recent abdominal surgery. Shortly after returning to their home country of Rwanda for a rotation, Cissy was struck with a surgical abdomen and found to have severe pancreatitis of unknown cause. She was in the hospital for over a month and they were left with significant hospital bills which were covered by the Central African Health Organization, PAACS and friends of PAACS. Ronald says, "We praise God for her recovery and for all of our extended family who came to our aid. Thank you and may God richly bless you."



- **Birth Announcement:** Dieudonné Lemfuka, second year resident at Gabon, and his wife, Christelle Gbiatene Kasoki, welcome a new baby girl by the name of Rehema Madeleine Lemfuka. She was born on June 22, 2015 at 9:35 PM, weighed 2,650 kg, and her length 50 cm.

- **Birth Announcement:** Tenwek PAACS Surgery program welcomed a new baby girl. This was a special baby since she was born to TWO of Tenwek's residents! Dr. Mike Mwachiro (PGY4) and Dr. Elizabeth (Liz) Mwachiro (PGY4) welcomed Esther Khavugwi Mwachiro on Monday, July 20th at 5:00am. She weighed 3090gms. By 7:30am Esther was already meeting all of her surgery "Aunts" and "Uncles" as they made rounds on the new family in the maternity ward and joy abounded!! We praise God that all the Mwachiros are doing well.



Michael and Elizabeth welcome little Esther.



The rest of the surgical team rounding a few hours after birth!

PRAYER REQUESTS

- Pray for God's hand upon the new surgeons who have finished their training period – that they will find a mentor, that their families will adjust and that they will work and reflect Christ to the best of their abilities – for His glory.
- Praise God for the wonderful ministry of the dozens of short-term faculty who come to help. May God bless and teach them. Pray that others will answer the call to provide the necessary teaching of skills and the relief that is needed. Pray for peace within our countries and peace within their hearts as they answer his calls to come, to serve and to teach.
- Pray that God will call additional career surgeons to join the PAACS faculties at Kijabe Hospital in Kenya, BethanyKids at Kijabe Hospital (Pediatric Surgery) in Kenya, Soddo Christian Hospital in Ethiopia (both general surgery and orthopedics), Harpur Memorial Hospital in Egypt, and Mbingo Baptist Hospital in Cameroon.
- Pray that Mbingo Baptist, SIM-Galmi, Bongolo and Malamulo Hospitals will all receive government recognition for their PAACS training programs within the coming year.
- Praise God that the PAACS-Ethiopia training program has received a five-year accreditation which will go until 2019.
- Pray for those on home assignment (Dave Thompson, Russ White, Dan Galat and Jon Pollock who are in the US now) - for rest, for the times of speaking and fund-raising and for the times of medical work. Mike Chupp returns to Kenya in August.
- Pray for the need for orthopedic coverage at Tenwek from July through December while Dan Galat is on home assignment.
- Pray for the career PAACS faculty members who are under great personal and/or family stress. Pray for healing and the presence of the Holy Spirit in their day to day lives.

- Praise for the Halter Family as they attend language school and adjust to their new lives in Tanzania.
- Praise God for answered prayers. On July 14, the Michael Ganey's went from 80% funded to 100%! Now they are waiting on the work permit and for their house to rent. Please keep praying.
- Praise God for the good results by most residents on the annual PAACS remediation examinations. Pray for those who did not do well and for peace for all about the decisions that had to be made.
- Praise God that both Ethiopian chief residents passed their external government exams.
- Pray for the four new residents that were selected to begin in August. Pray that their move this month to their places of training will be effective, that all permits and visas will be obtained and they will have the drive and fortitude necessary to do well in their new fields of endeavor. Pray for the ability of their families to adapt to the stresses of training and a new culture.
- Pray for peace and the cessation of civil unrest in Burundi. Three of our new residents and two of our present residents are from that country. Pray for their own peace of mind while separated from family.
- Pray for God to call high-quality applicants for the next incoming class of PAACS residents.
- Pray for a satisfactory solution to the new Ethiopian visa requirements for short-term faculty which could be very counterproductive for Soddo Hospital and PAACS.
- Pray for Dr. Walter Johnson in his new role with WHO – that he might be wise and effective, serving both secular and faith-based initiatives well.
- Pray for the new parents – for wisdom and love for them and that the children will grow up in the love and admonition of the Lord.

Editors:

Bruce Steffes, MD, MBA, MA (Bib. Min), FACS, FWACS, FCS(ECSA), FICS
David Thompson, MD, FACS, FWACS