Katie Johnson: Good morning, and welcome to Apple A Day Lake Region Healthcare's health and wellness segment, where we feature news, and information you can use to live a healthier life. I'm Katie Johnson, your host, and my guest today is Dr. Josh Overgaard. He's one of our internal medicine physicians at Lake Region Healthcare, and he is here to talk to us today about one of the things he does outside of his practice in terms of medical missions. Good morning, Dr. Overgaard.

Dr. Overgaard: Good morning.

- Katie Johnson: Well, you have been at Lake Region Healthcare now for a couple of years, both in the hospitalist role, and in your clinic practice, as an internal medicine doctor. And one of the things we've learned about you is your Heart for Mission work. And I'd like to share with our listeners a little bit more about that. You've been on a trip recently, tell us a little bit about where you went, and what mission you serve.
- Dr. Overgaard: Sure, so I went in April to Haiti, in the capital city of Port-au-Prince. About the time I was finishing my training in residency at Abbott Northwestern in the Twin cities, I got to know some emergency department physicians who had been going on this mission since the earthquake that they had, we all heard about on the news. They'd been going to a hospital in Port-au-Prince with a mission of educating the physicians and nurses there, so I tied onto that group. This is the fourth time that I've been there, the purpose of this mission all along has been to teach. And so I've been going down to teach, and the main thing that I teach while I'm there is the use of bedside ultrasound.
- Katie Johnson: You've been there four times, what's changed over the course ... what year was it when you first went, and how much of a crisis mode were they in versus where they are today? I would imagine you've seen some noteworthy changes.
- Dr. Overgaard: Yeah, unfortunately I was still too green to be useful during the earthquake. And I know in talking to my colleagues and friends that go down there, and they were very much digging through rubble and having people limp in with all kinds of injuries, and really helped in the rebuilding acutely. The interesting thing about Haiti, the first time I was there I remember looking at all these buildings that were unfinished, and I said, "Wow, they're still ... I mean, this is when I first started going three years ago was the first time I went, and I saw all these buildings that were yet unfinished and I thought, "Wow, they're still trying to rebuild from the earthquake, that was years ago." They said, "No, it just always looks like this, they don't finish buildings all the time."

And the change is slow, and Haiti's very much a third world country, and there's a lot of poverty, and a lot of suffering there. But in the hospital ... I guess more pertinent to my mission in the hospital it's been really great. That hospital has worked closely with the group from the University of Miami, called Project Medishare, who organizes our travel there. And they've done a lot of fundraising for that facility, and they built a brand new ICU, and a new medical surgical unit,

and a new emergency department. And their construction is ongoing. The first time I was there it looked ... for example the main medical surgical unit was a room that was probably 20 feet square, and in that room there were eight beds.

I mean, they were just crammed as tightly as you could get, it was hard to get even the room to set up an IV, it was full of flies, there was no air conditioning, it was hot ... I mean, it was Haiti, it was hot. It was just ... everybody was sweating, and it smelled terrible, and that was what they had, they had a room to lay people in, and do what they could to provide them care. And now their unit looks very similar to what you would see at a hospital here, the beds are nice, the floors are clean, there's lights that are bright, the air conditioning's on, it smells like a clean room, and it's really nice.

- Katie Johnson: And that's due to the fundraising of Project Medishare, and the work of donated volunteers like yourself?
- Dr. Overgaard: Volunteers, yeah, and a lot of donated equipment.
- Katie Johnson: So do you work with the same people, have you found over the course of three years that the staff at the hospital has remained pretty consistent, or are you also training new people all the time?
- Dr. Overgaard: One of the reasons I keep going back is cause I see the effect of what we do. So the first time that I went the hospital was run almost entirely by ... in term of the provision of care by providers, by the volunteers from the States, and from Canada. And they get some from France, and other places, but mostly the United States, and Canada. And the care was provided almost exclusively by volunteers, and then as they were doing that, they were teaching Haitian medical students, and residents. And now when I go I'm back-up when I have responsibilities on hospital unit, I'm there for their questions, and they really run the show, which is great ...
- Katie Johnson: Great to see, yeah.
- Dr. Overgaard: ... and they're learning things. And specific to role there ... So the first time that I went I was there as an ICU doctor, so I went and my job was to staff the ICU and teach, but I had an ultrasound machine with, and I was using it, and they said, "Wow, you're good at that, you should teach." So now when I go I just teach, I don't have very much time where I'm dedicated as a physician on a hospital floor, I'm there just to teach courses. So the first time I went there people had had very little exposure to ultrasound, and I've been going back and teaching courses and trying to mentor them. And last time I went, I walked into the ER, and several of the ER doctors were using an ultrasound machine that we had bought for them to take care of their patients. They use it very routinely, they look things up online, they study, and they're getting really good at it, so it's neat to see.

And for Haiti especially that's a really powerful technology, because they don't have the imaging [inaudible 00:06:27] available to them that we do, they don't have a Radiologist there when it's not always possible to get a CAT scan in a timely

fashion that you would need it, or they don't have an MRI. Or even to get a regular radiology driven ultrasound is very difficult, or impossible to do, they can do it right there at the bedside, and more quickly make the appropriate diagnosis and get the patient the treatment they need.

- Katie Johnson: Now, this bedside ultrasound that you're teaching there, you've also been working with Lake Region Healthcare into implementing more use of bedside ultrasound here, is that a result of what you learned, and how you saw its effectiveness used in training and/or your mission work?
- Dr. Overgaard: Yeah, well they play off of each other. I was really fortunate in where I trained in medicine here in the States, I got in at a time when they were developing a program to teach this, it was being recognized that it was a very powerful tool. I should mention it's an ultrasound machine, it's much smaller than the ones that we're used to seeing, and if you go get a study from the radiology department they have this big machine that takes up a bunch of the room. And it's really powerful, and it gives these great clean images and they can see a lot of stuff with it, and that's fantastic. The machine that we use is smaller, the image quality's good, but it's not the same, and we use it for a much different purpose. So it's almost like using a stethoscope only it's really fancy.

So as I trained on it it was pretty easy to recognize the ways that I can more accurately, and efficiently get people what they needed when I use that technology for a whole bunch of different things. So I started incorporating into what I did here in the States, and then it was really fun to go to Haiti, and recognize how much more useful it is there. And actually I teach it there, but I also practice it there, because I see things that I don't see here, and I get to use it in a much broader scope, which is kind of fun and inspiring.

- Katie Johnson: And that's because of the conditions you see the Haitian people have probably?
- Dr. Overgaard: Well, I mean, they don't have health insurance, and they don't have regular care in the same way that we do for most of the population. I mean, there are certainly those folks in the top of the hill with resources that have very similar quality of health care to what we have, but a vast majority of the country ... And I should say a lot of them fly to Miami for their care, right, and they're very wealthy. But the majority of the population is in just really extreme poverty, so they don't ... if they have a cough or if they're short of breath, or they have pain here or there they don't go to the doctor, because they have to pay out of the pocket for it, and that might mean that they don't eat.

So it's a very different decision for them to seek care, so when they do it's because they can't function anymore, which means that illness is much more advanced. So people walk in with things that ... No one here would ever get that bad, because you would get help first, you would go to the ER months earlier, or even years earlier, so we see much more advanced illness.

Katie Johnson: How does the experience that you have with your mission work in Haiti do you

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think make you a better doctor in the States?

- Dr. Overgaard: Well, for one I certainly appreciate what we have here a lot, which is nice. I like to say whenever I go to Haiti that it reminds me that I don't have real problems. I think anytime that I teach ... I mean, I like to teach and I teach here too, and I do that because it keeps me on my toes and it keeps me fresh. So having to teach these kinds of courses again, and again and mentor my students at the bedside ensures that I understand what I'm doing, and that I'm up to speed on the latest knowledge and understanding of things.
- Katie Johnson: I would imagine you're planning on going back based on what I've heard from you.
- Dr. Overgaard: Yeah, I'm going back in November, I try to go twice a year for about a week, so I'll be back in November for another course. This time I'm going to do something a little bit differently. I've been only at this one hospital down in the middle of Port Au Prince in a pretty rough neighborhood where they don't let you leave, they lock the doors, they've got big iron doors that are locked, and there are guys with guns, and there's razor wire at the top of the walls and all that stuff, cause it's in a really tough neighborhood. But next time I think I'm going to spend more time up on the plateau in a more rural setting where it's safer, and more scenic, and probably smells better.
- Katie Johnson: Interesting, if our listeners want to know more about this specific mission or how they might be able to support it, is there some information that you could share about Project Medishare, or other ways ... Are there specific needs you have when you go that we could help provide for?
- Dr. Overgaard: The best way to get information, and to give if you are so interested, which would be awesome, would be through project Medishare. They have a website projectmedishare.org. It's really easy to donate through their website if you so wish. They also have a lot of great information on there, it's a neat website to look at. And that of course would be very appreciated, they have lots of need. In terms of specific supplies, or equipment, that's an always influx need, and usually it's easier to donate money though.

Katie Johnson: Through that ...

- Dr. Overgaard: Through that website, yeah. Though we do bring duffle bags full of random supplies every time we go, that's [inaudible 00:12:14] most of them are expired, and what have you, or leftover, but a donation is the most helpful way to do it.
- Katie Johnson: Dr. Josh Overgaard, our guest this morning on Apple A Day, sharing with us his work in Haiti and the medical mission through Project Medishare, teaching the Haitians how to use bedside ultrasound to improve their medical care. Dr. Overgaard thanks for the work you do overseas, and of course the work you do right here at Lake Region Healthcare, we appreciate all you do.

Dr. Overgaard: Thank you.

Katie Johnson:Dr. Josh Overgaard, and Katie Johnson on Apple A Day reminding you there is so
much to do here, stay healthy for it, have a great day.