

## A Day with the Lutheran Mobile Clinic



The day begins around 7:30am when Beth Evans, our Nurse in Charge, along with Kennedy Nyrenda, our housekeeper and Brighton Chirwa, our gardener, begin the process of loading the ambulance for the day's visit to clinic. Storage trunks with all the clinic's medical equipment, medications, test kits, record books, etc. were restocked after the previous day's work and stored overnight in the pharmacy. This ensures they are ready for loading the following morning. Beth collects the vaccines from our fridge and loads them in a cooler. The ambulance has a large roof rack where most of the containers, along with maize and soya for our nutrition program, are loaded and then, covered by a large tarp and tied down for departure. Bags of pill bottles and smaller boxes of supplies are placed under the seats in the back of the ambulance.

The ambulance departs at 8:20am and our driver begins the process of picking up staff along the way to clinic. Our staff, living in several different areas of Lilongwe, make their way early in the morning to the various pick-up points by travelling in typically overcrowded minibuses.



Fully loaded, the ambulance will have up to 10 staff members onboard plus the nurse in charge as they make their way on some very rough, dirt roads to the clinics. They typically plan to arrive at clinic sometime between 9:00am and 9:30am depending on traffic, and in the rainy season, the condition of the road itself.



At the clinic sites, people have started gathering before 9:00am, ready for the start of clinic. Our village staff will measure patients' weights and determine their place in line with a number. On a typical day, it is not unusual to have over 200 people attending clinic. The patients are a mix of antenatal patients, underfives, family planning, outpatients and nutrition

Our clinic buildings sit in open areas in the villages, and there are often vendors who come to sell fruit and vegetables to our patients. At Suzi and Thunga villages, large markets are held with 100 feet or so of the building



The first activity is a devotion, conducted in Chichewa, the local language, either by a Pastor or more typically, an elder of the congregation. This elder also does our building maintenance. The devotion includes a hymn, Biblical message, prayer and a blessing.





After the devotion, one of the medical staff conducts a health teaching session for the people attending clinic. The teachings cover various topics such as malaria, respiratory illnesses, scabies, diarrhea, nutrition, and most recently, coronavirus.



The teaching session is the time when our nurses conduct a visual triage of the waiting patients, identifying particularly sick or critical cases that need the immediate attention of one of our clinicians.



Once teaching is over, the crowd starts to form lines outside and enter the building through a door. Different doors are designated for different reasons to visit the clinic. Within the building there are seven workstations: Under-fives, antenatal, family planning, two clinicians for outpatients, the pharmacy and a station for vaccinations.



While teaching is going on, the staff is organizing each workstation to be ready to see patients. Patients move along benches as they wait their turns. The Malawi government provides Health Surveillance Assistants to help give vaccinations. During the rainy season, malaria is our main diagnosis and our staff tests patients for this in a separate room. They are often doing over 150 tests a day, so there is a long line stretching outside.



HIV testing and counseling are also carried out in a separate room. This includes working with our new antenatal clients and their husbands. As the clinic building fills up, it is not unusual to have 50 or more people inside our 40 feet long by 18 feet wide building at one time.

Gradually we see all the patients with the outpatients and the pharmacy being the last to clear. The medical staff complete their paperwork and begin to pack up medical equipment and medicines, which are reloaded back onto the ambulance for the ride back to Lilongwe. The nurses on pharmacy duty will review the medicines issued that day and provide an order for medications to be replaced.





The clinic staff are dropped at various locations so that they can connect to their minibus ride home. The ambulance returns to the house where everything is again offloaded and placed back into the pharmacy. Unused vaccines are returned to the vaccine fridge. Some time that afternoon or evening the nurse in charge will take the order form and restock the medications and equipment list to make sure everything is ready for the next day's clinic.