

Week 3 started with an early bus ride from Kathmandu to Bandipur. It's about a 3-hour ride west on the highway towards Pokhara to the town of Dumre. From Dumre, there's a dirt road heading south that climbs the final 8 km, finishing with a set up switchbacks that lead to the mountain town of Bandipur. Around 11 am, we arrived at our home for the next two weeks, the Bandipur Mountain Resort, and were met with a rather chaotic scene. Apparently, a large group of guests had showed up unannounced and without reservations that morning, and in the rush to accommodate them, the resort hadn't had time to prepare our rooms. So while the hotel staff worked on getting our rooms ready, we walked over to Bandipur Hospital, where we would be volunteering for the week. The hospital is just a 5 min walk from the hotel and has 4 small buildings. The main building houses 3-4 exam rooms that double as offices for the physicians working there. It also has a 6-bed ER, and a small pharmacy. The waiting room is the simply the lobby of the main building and is constantly full of patients during clinic hours.



Bandipur

Adjacent to that is the inpatient ward with 24 beds, of which only a few were in use when we visited. Across a short walkway was a building that was in the process of being converted into a maternity building as far as I could understand, where expecting mothers could live prior to their deliveries. This is where our team set up, as it was a large space with several rooms we could use as makeshift exam rooms without adding to the congestion of the main building. Finally, there was also a small building that housed an X-Ray machine and a small lab. The hospital is staffed most days by a single attending and two medical officers (physicians who had completed medical school but had not yet started residency). In Nepal, it is common for physicians work as medical officers for 2-3 years prior to pursuing residency (either in Nepal or abroad).

After touring the hospital and heading back to the hotel for lunch, we walked into town to explore a little bit. The center of town was about a 10-minute walk from our hotel and consisted of a single pedestrian-only street that has several small hotels, restaurants, cafes, and shops selling various food items and snacks. It's a quaint town known for its wooden Newari architecture, and we found a nice café with pretty good WiFi to hang out in for the afternoon. The owner of the café had four very young kittens that were a big hit with the group. They played on one of the tables for about 5 minutes before they sprawled out across one another and passed out from exhaustion.

The hospital sees patients from 10-2pm Sunday through Friday and patients begin to line up around 9am. We would arrive around 9 am each day and round on patients in the inpatient ward from 9-10 and then set up triage in the main lobby. Rounds were usually presented by Dr. Abhaya Khatiwada, who is a terrific medical officer planning to apply for U.S. residencies in the fall. Patients in the inpatient ward this week included a patient recovering from alcohol withdrawal (alcohol abuse is quite common in Nepal) and being monitored for delirium tremens, an older gentleman recovering from a cholecystectomy, and a young child (maybe 1-2) recovering from severe burns to his genitals and legs following an accidental fire in his home kitchen.



In terms of volunteering at the clinic, we were lucky enough to have Dr. Sternau (the world's coolest neurosurgeon) with us this week again. We were also joined by two fantastic physicians from Tribhuvan Teaching Hospital in Kathmandu, Dr. Narayan Mahotra, an internal medicine doctor, and Dr. Prashant Tripathi, an ENT. So as we triaged patients, anyone with ENT related issues was directed to Dr. Tripathi, while anyone with potential neurological issues was directed to Dr. Sternau. Patients with other chief complaints were directed to Dr. Schuster (founder of the Bicol clinic) or Dr. Mahotra. As students, we divided into groups of 2-3 that would run triage, take H&Ps, or shadow one of the 4 attendings. We would generally stay at the hospital until the last patients had been seen, which was usually about 3-3:30 depending on how many patients had been triaged before the clinic stopped accepting patients at 2pm.

Having the ability to shadow a different physician each day, and the ability to practice H&Ps, made for great learning experience all week. People in triage became experts (if they weren't already) in taking blood pressures and using a glucometer. Each of us had 1-2 days in the H&P room taking full patient



histories and then presenting them to one of the attendings. I think we all quickly realized the extent to which we are novices in presenting patients and so it was extremely helpful to be able to not only present several patients a day, but to be able to present them to different attendings and get feedback from each. As in Pokhara, if a patient one of us presented needed treatment that the physicians could teach students on site (e.g. a subpatellar joint injection or IM injection for joint pain), we were taught how to give that treatment and given the option of administering it if we were comfortable doing so. However, the highlight of the week for most of us from CU

was being able to shadow Dr. Sternau and Dr. Tripathi. Since we had limited exposure to neuro as MS1s, this was an incredible opportunity to learn and gain first-hand experience with the neuro exam and with an otoscope/ophthalmoscope. Dr. Tripathi might have been the busiest attending this week as many patients came in with complaints of ear pain or loss of hearing. Students shadowing him became pros at the Rinne and Weber tests. In my shift with him, we saw multiple bacterial and fungal ear injections, two patients with ruptured ear drums, and a child with nearly complete loss of hearing due to compacted ear wax in both ears. Dr. Sternau was also incredibly busy all week, with many patients coming in with chief complaints of headaches or muscle aches, although in my shift with her, all patients had negative neuro exams and the underlying causes of their symptoms were often undetermined. Clara was with Dr. Sternau when she saw some interesting cases, including a young woman with cerebellar ataxia and nystagmus due to suspected typhoid fever (given antibiotics).



Another cool part of the way Dr. Schuster organized this trip was that he asked students to present interesting cases each morning and provide additional information on the underlying disease or condition. This week, he also asked Dr. Sternau and Dr. Tripathi to present in the morning; Dr. Sternau talked us through the neuro exam for 45 minutes or so while Dr. Tripathi taught us about all things related to ENT for close to an hour. Both were outstanding informal talks and just another perk of being able to work with these physicians in this setting. We were so lucky to have Dr. Sternau, Dr. Mahotra, and Dr. Tripathi with us for most of the last two weeks. They added so much to the experience, but unfortunately their schedules only allowed them to stay through this week. The hotel put on a small happy hour/party for us

Friday night and it was a great opportunity to say goodbye to them and thank them for all they had contributed to the trip!

We also had a lot of fun with our time off this week! Bandipur is a gorgeous town with phenomenal views of the Annapurna region, and it is increasingly becoming a tourist destination for people visiting Nepal. Just based on the number of small hotels in town, it must become quite crowded during peak tourist season in October and November. Just past town, there is a hike up a small mountain that can be hiked in 20-30 minutes that gives you amazing views of the whole town with the Himalayas in the background (first photo was taken from that spot). It was a popular sunrise and sunset hike with the group and I think many people did it multiple times. There was also a large open space just outside our hotel where local kids would congregate each night to play pick up soccer games (Ben and James would join most nights!). The field, and the rest of the open space, sits on the edge of cliff overlooking the valley below Bandipur, which makes for a very scenic setting. The only problem we encountered was soccer balls getting through the fence and tumbling maybe 1000 feet down to the valley floor! The other open space also had a makeshift pull-up bar that became the center for impromptu evening workouts with our group. Most nights, we were joined by a few of the local Nepalis, including a ridiculously athletic 13-year named Sujal who would challenge us to push-up and pull-up contests each night!

We also ended up having both Friday and Saturday off this week and managed to explore the area around Bandipur a little bit more. On Friday, the group hiked to Siddha cave, which is the second largest cave in Asia. The 45-minute tour through the cave followed slick rock up and down the passageway culminating in a sketchy metal platform that led to a ladder down into the largest cavern in the cave, all of which our guides gracefully covered in flip-flops. A few of us were not so graceful! But it was a very cool tour and the cavern at the end was quite impressive with a 50-meter (165 feet) high ceiling covered by a massive colony of bats.



On Saturday, a group of 8 of us continued to explore central Nepal by going whitewater rafting on the Trishuli river. Saturday was the only day this week with consistent rain all day and rafting ended up being the perfect outdoor activity as we were going to be drenched anyway. For those who have ever experienced rain while whitewater rafting in CO, this was a different experience! In CO (and probably a lot of other rafting states), the river water is so cold that a lack of sun, and especially rain, usually makes for a less than pleasant day with a lot of shivering. Luckily, the water in Trishuli is relatively warm (at least in June) and we still had a blast on the 3-hour trip down the river!

As I may have mentioned earlier, the work week in Nepal is Sunday-Friday. So tomorrow we are off to a new clinic located about an hour north of Bandipur near the town of Bhotewodar. All we know is that the clinic is relatively small, even by Nepal standards, but that they are expecting more patients than normal because they have advertised that there will be a team of U.S. and Nepali physicians visiting. So far, the whole trip with the Bicol clinic has been incredible, so hopefully that continues for what will be our final week of clinical experiences!