I was working in the woodshop, freezing my fingers and working on this little ambulance,” says DHMC’s John Markowitz, “and I started thinking, would it ever be possible to provide an ambulance for the community in Tlachichuca?”

Tlachichuca (pronounced la-chi-CHOO-ka) is a small town in a mountainous area of southern Mexico. Markowitz, an operations assistant in DHMC’s Emergency Department, first visited the area to climb a volcano and do relief work after heavy flooding in 1999. He kept going back to deliver clothes and shoes. Then he met Dr. Gerardo Reyes, whose family runs a climbing service. Reyes had recently been named Red Cross director for the area, but with the title came no medical supplies, no staff, and no ambulance. (In rural areas of Mexico, Red Cross ambulances play a huge role, assisting in all medical emergencies.) Markowitz decided he had to do more to help the region.

**Plan:** As he built the toy ambulance as a gift for Reyes, he formed a plan to send Tlachichuca a real one; he named it the MEX-AMbulance Project. First, he organized a climbing trip to Mexico and recruited 16 people who collectively donated enough to buy a used military-style truck that could be converted into an ambulance: a 1960 Mercedes Unimog that Markowitz found in Phoenix, Ariz.

Next he had to retrofit it and transport it to Mexico. Markowitz found a Unimog technician, Thilo Cass, located in Prescott, Ariz. After the Unimog arrived in Cass’s shop, it acquired new tires and brakes and a new canvas cover. A stretcher was donated by the Enfield, N.H., FAST Squad. Support parts for the stretcher were donated and installed at no charge by a national EMS supply company. Finally, after an 18-month delay waiting for it to clear customs, the ambulance arrived in Tlachichuca in 2005.

**Trips:** The MEX-AMbulance team continued to make trips to Mexico to deliver ambulance parts and clothing, and do more climbing. On a trip in 2009, Reyes told the team that a delegate for the State of Puebla Red Cross would soon be visiting his clinic to certify it. They had just two hours to do it. Markowitz; Amy Eilertsen, a care manager for the DHMC Live Well/Work Well employee health program; and her two sons went to work. They organized and catalogued boxes and boxes of bandages, casts, splints, and other supplies that MEX-AMbulance had donated—“enough to outfit everybody in the town of Tlachichuca,” says Markowitz.

**Thanks:** They finished just in time. The delegate arrived and after the review presented Markowitz with a letter of thanks and Reyes with certification as the 23rd Red Cross Site and Ambulance Center in the Mexican State of Puebla.

As an official site, Reyes can now share supplies with other Red Cross stations, receive both training and monetary donations through the Red Cross, and monitor Red Cross radio frequencies in the ambulance. DHMC is donating two more stretchers and some hospital bed
tables; one stretcher he’ll use in the clinic, the second as a bargaining chip to acquire an on-road ambulance from the Red Cross, since the Unimog works best on mountain roads.

Markowitz continues to chip away at the project, finding new ways to help. For example, a photo of the team atop a 17,159-foot volcano appeared in National Geographic Adventure. It turned out that the magazine editor’s father was in marketing with the Solar Oven Society, which sells solar ovens to resource-poor countries at low prices. Through this contact, Markowitz and his team were able to purchase and deliver 11 ovens: one to an elementary school in Tlachichuca, one to another town, and nine to a nearby mountain village, Hidalgo. MEX-AMbulance has also donated computers to Tlachichuca and Hidalgo.

Recently, the project joined forces with Rainier Mountain Engineering, Inc., a climbing service in Washington State. Rainier climbers will now help deliver supplies to Tlachichuca.

Toy: From a volcano climb in 1999 and a little toy ambulance, MEX-AMbulance has blossomed into a mammoth medical and educational mission. “What might have started out as a seed in my head has flowered into something that has been watered by many,” says Markowitz. “We just want to do some good. Only through many hands does that happen—and for those many hands, Dr. Reyes and myself are forever grateful.”

Matthew C. Wiencke

CLINICAL OBSERVATION

In this section, we highlight the human side of clinical academic medicine, putting a few questions to a physician at DMS-DHMC.

Torunn Rhodes, M.D.
Associate Professor of Pediatrics
Rhodes specializes in neonatology and neonatal pulmonology and is medical director of DHMC’s home oxygen and ventilator program for infants. She has been on the Dartmouth faculty since 1987.

How did you get interested in neonatology?
I had no exposure to newborns in medical school—they were off limits for clumsy medical students—but as soon as I set my foot in Dartmouth’s Intensive Care Nursery (ICN) as a pediatric intern in 1982, I knew that was what I wanted to do with my professional life. I believe strongly in family-centered care and strive to get the infants home as soon as possible where they can be better co-managed with the family.

What do you like most about your job?
That’s a very difficult question to answer. My job is a tapestry of intense experiences, all interwoven and important: the complex medical management in the ICN, the emotional rollercoaster we are privileged to go on with parents, the close working relationships with the staff. If I must pick, I would say the constant daily challenge. It is never a dull moment and there are always opportunities for learning. I love to go to work every day.

What advice would you offer to someone new in your field?
Listen to parents. Don’t be afraid to love your patients. Practice evidence-based medicine.

What’s the hardest lesson you ever had to learn?
The lesson I am still learning—to accept the things in my life that I cannot change.

Where did you grow up?
In Norway, in a small, idyllic coastal town. I explored the fjords and islands all summer, and skied in the nearby mountains and played in the snow all winter.

When you were young what did you want to be?
A telegraph operator on a Norwegian ocean liner that would take me all over the world (remember, this was 1950!)

What is your most memorable accomplishment?
Probably the Canadian Ski Marathon, which I did with my daughter in 1996. It is North America’s longest and oldest Nordic ski tour. We ended up with blisters and frostbite, but triumphant.

What about you would surprise most people?
I am an open book, no surprises.

What’s the last movie you saw?
The Hurt Locker. It brought the war in Iraq close to home—it was heartbreaking.

What’s your favorite nonwork activity?
Spending time with my two granddaughters.

If you invented a time machine, where would you go?
Forward five generations to 2160, so I could look at the world as I want it to be—one country, with peace and justice for all. I could get to know my great-great-grandchildren.

What is a talent you wish you had?
Playing the violin.

What was your first paying job?
I have worked all my life. My very first job was at age 8, picking up daily groceries for an elderly neighbor for about $1 a week. She would also give me a Christmas present wrapped in color-ful cellophane paper from America. It was the most elegant package under our tree.

If you could trade places with anyone, real or imaginary, who would it be?
Honestly, I would not trade with anybody.

In 1999 and a little toy ambulance, MEX-AMbulance has blossomed into a mammoth medical and educational mission. “What might have started out as a seed in my head has flowered into something that has been watered by many,” says Markowitz. “We just want to do some good. Only through many hands does that happen—and for those many hands, Dr. Reyes and myself are forever grateful.”

Matthew C. Wiencke

VITAL SIGNS

For a video about a recent MEX-AMbulance trip south, see dartmed.dartmouth.edu/sp10/we07.