

(Left to right) Dartmouth representatives Anne Sosin (Dickey Center) and Lisa V. Adams (Geisel) celebrate the renewal of the partnership with Hospital Cayetano Heredia with the hospital director Dr. Aida Cecilia Rosa Palacios Ramirez (center), Dr. Manuel Diaz De Los Santos, and Dr. Raúl Acosta.



GEISEL RENEWS PARTNERSHIP AGREEMENT WITH PERUVIAN HOSPITAL

THE GEISEL SCHOOL OF MEDICINE HAS RENEWED ITS PARTNERSHIP agreement with Hospital Cayetano Heredia—a public university hospital in Lima, Peru, and one of the leading clinical teaching and research institutions in the country.

“For a number of years, we’ve been sending undergraduates and medical students to Peru to work with Dr. Raúl Acosta and it’s been a fabulous experience for them,” says Lisa V. Adams, MED ’90, director of the Center for Health Equity and associate dean for global health at Geisel. “Dr. Acosta has been one of

the best mentors that our students have had. He’s very ‘hands-on,’ he gives them discrete and manageable projects to work on, so they’re really contributing.”

The five-year agreement reflects a collaboration of mutually beneficial projects that address a variety of health priorities in Peru,

including ongoing research, capacity building, training, an exchange of faculty members and students, and builds on previous work that was started by Dartmouth and the hospital in 2013.

Adams and Acosta also talked about potential projects. “Dr. Acosta introduced us to partners at another hospital, and now we’re looking at doing a policy project for the Ministry of Health on telehealth in conjunction with the Dickey Center’s Global Health Policy Lab, which would involve pulling a team of students together to assess telehealth potential in the country,” she says.

Adams also met with the medical school’s leadership who are interested in starting a bilateral medical student exchange program.

Creating these kinds of reciprocal opportunities for students who are interested in international health enhances their readiness to work in an increasingly connected world, says Adams. “It’s right in line with so many of Geisel’s values—about having impact where we can, building partnerships, and training our medical students to take on some of the biggest challenges that we know are going to be facing health and healthcare in the future.”

TIM DEAN

YEARS OF WORKING AS EMERGENCY MEDICAL TECHNICIANS (EMTs) in rural New England gave second-year Geisel students Nick Valentini ’20 and Karissa LeClair ’20 shared insight into the challenges patients face at home, and the need for a home healthcare resource that is readily available and of no cost to this vulnerable population.

The first partnership of its kind in New Hampshire, the pilot Community Paramedicine program, developed and implemented by Valentini and LeClair, provides ongoing care for patients with manageable chronic health issues by partnering medical students with Upper Valley Ambulance paramedics and EMTs to make house calls. The program launched earlier this year in two New Hampshire communities—Piermont and Orford.

“Providing preventative care is a great bridge between primary care and emergency medicine,” LeClair says. “As medical students, we have no idea what patients experience in



A BRIDGE TO PRIMARY CARE FOR RURAL PATIENTS

their homes and the same is true of physicians who send patients home with instructions without understanding that there may be obstacles to patients complying with those instructions. Nick and I saw these obstacles as EMTs, so we wanted to bring that awareness to medical students while also being a resource for patients.”

Paramedics and medical students serve as the eyes and ears of a primary care physician when visiting patients in their homes—taking vital signs, reviewing medications (including over-the-counter drugs and herbal remedies), and listening to the needs of the patient to

gain a better picture of their overall situation. Paramedic Stephen Sanborn says the program eases the logistical challenges of rural life.

“Nick and Karissa deserve a lot of credit for their persistence in making this happen,” says Clay Odell, executive director of Upper Valley Ambulance. “With a territory encompassing nine rural communities spread over 340 square miles, there are many who could benefit from this service—I see this as a model for the future, particularly here in the Upper Valley.”

SUSAN GREEN