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FINAL REPORT

GRANT NEB-0001-G-SS-2071-00

POLAND RELIEF PROGRAM

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The People-to-People Health Foundation, Inc.  
The Project HOPE Health Sciences Education Center  
Millwood, Virginia 22646

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May 1985

This is the final report, required under terms of Grant NEB-0001-G-SS-2071-00 dealing with emergency relief to hospitals in Poland and covers events from the start date of the grant (September 1, 1982) to the closing date (February 28, 1985).

### Overview of Project Activities

In March 1982, before the start date of the grant, Project HOPE agreed on a plan with the Government of Poland (GOP) to deliver vitally needed emergency medical relief supplies and some equipment to a number of Polish hospitals to improve their ability to care for mothers and children. Based on its years of experience with the Polish health care system, HOPE and its Polish counterparts established a list of 19 hospitals throughout Poland. The list was agreed to by the GOP, and the Polish Catholic Church was accepted by HOPE and the GOP to monitor receipt and proper use of supplies by the hospitals.

In June and September, 1982, two survey teams of HOPE staff and medical consultants surveyed the hospitals on the original list and four others which had been added.

The first shipment was made in July 1982 and consisted of US\$1.1 million worth of supplies purchased with funds provided to HOPE by private sector donors. From September through December 1982, another US\$2.4 million worth of supplies, donated to HOPE by private sector donors, were shipped before our grant funds were expended.

Principal activities carried out under the grant included the following:

1. Survey Visits of Each Proposed Recipient Hospital.

Each recipient hospital was visited by HOPE staff and consultants before any shipments were made to it.

The objective was to become directly acquainted with the unique needs of each institution. The visits were also used to educate the staff of the hospital as to the purposes of the relief, i.e. to supplement needed supplies and basic equipment which were currently in short supply or impossible to obtain. The restriction to maternal and pediatric services, and services supporting maternal and child health, was explained. A tentative list of most acute needs was completed on site.

2. Establishment of a Procurement and Delivery System for Materials

Utilizing the already existing HOPE International Headquarters and HOPE's Dulles Terminal Warehouse and shipment facilities, a computer-driven system of procurement, storage and shipping was developed especially for the project. This was a very complex and time-consuming part of the project activities.

The receiving operation in Poland was headquartered in The American Children's Hospital in Krakow where HOPE has had a continuous presence since 1976. The Director of that hospital, Professor Jan Grochowski,

was selected as Polish coordinator. Two full-time Polish employees assist him there and work with the site visit teams. Signed invoices for all goods, with the confirmation of the local church monitor, are sent there from each hospital after each shipment.

Two distribution points--one in Warsaw for hospitals in the North and the other in Krakow--were eventually established but with control remaining in Krakow. Transatlantic legs of all shipments were on Polish ships or airplanes, at Polish expense.

3. Quarterly Assessment Visits.

These were carried out by regions by four teams of HOPE staff and consultants. In general, the same team visited a given group of hospitals throughout the course of the grant which enabled them to become familiar with hospital staff and to monitor activities more easily and thoroughly.

The objects of these visits were to:

- a. Double-check that supplies had, in fact, arrived intact and completely and were appropriate for the individual hospital.
- b. See that supplies and equipment were being used appropriately. (The value of using health professionals familiar with the Polish health care system was great in this activity.)

- c. Confer with hospital authorities about changing needs so that the material sent matched changing shortages.
- d. Assist Polish staff where necessary in better use of the materials shipped.
- e. Recommend to HOPE the types and amounts of material for subsequent shipments.

To carry this out, HOPE utilized three of its permanent senior staff and some 40 volunteer consultants familiar with Poland. The volunteer group included physicians, pharmacists, a biochemist, nurses and respiratory therapists. A list of the volunteers is included as ATTACHMENT A.

4. Meetings Held Concerning the Project.

- a. Nine of the site-visit volunteers plus HOPE staff formed a committee which met at intervals at HOPE's Headquarters in Millwood, Virginia, to plan assessment visits and to make final selections of material to be sent in each shipment.
- b. The Polish coordinator was able to attend a few of these meetings at the HOPE Headquarters. In addition, the HOPE Program Director (Mr. John Walsh) plus some HOPE staff and volunteers, met on an ad

hoc basis in Warsaw with Ministry Officials and in Krakow with hospital officials to monitor progress, to consider requests from other hospitals to be added to the recipient list, and to discuss dropping some original hospitals when their major needs had been met.

This kept the relief effort dynamic, and during the course of the grant, three additional hospitals (one in Tychy and two in Zabrze) were added, and one, in Lodz, was dropped.

- c. Several permanent HOPE staff members formed a working group to assure efficient purchasing and shipment procedures. This included several members of our Development, Logistics, and Administrative Departments.
- d. One very important meeting was held in the Vatican when the Program Director and three volunteers met with Pope John Paul II on April 27, 1983, to give him oral and written reports on the progress of the project and to thank him for the cooperation of The Polish Church authorities in checking the arrival of supplies.
- e. As discussed in the next section, education of Polish doctors, nurses, and other health professionals in the optimal utilization of the equipment and supplies became an obvious necessary and one enthusiastically endorsed by the Poles.

Many organizational and development meetings were needed in the US to plan and execute this aspect of the project, some at HOPE Center, others at the universities and/or hospitals of the faculties who would present the seminars.

## 5. Educational Activities

An epidemiologic/demographic study done by a senior HOPE staff person during the course of the project indicated that a rising trend of infant mortality in Poland began in the winter of 1981-82 as a result of the deprivations brought about by martial law and Western economic sanctions.

This humanitarian relief project accented maternal and child health care for this precise reason. In addition to basic needed supplies (antibiotics and other drugs, disposables, dressings material, etc.) it was obvious that some monitoring equipment and treatment equipment would be necessary. The professional isolation of basically well-trained Polish health professionals over a 4-5 year period meant that for them to be brought up to date in the use of this equipment, symposia and workshops would be needed. Accordingly, a series of these was held throughout the course of the project.

They were received enthusiastically beyond our greatest hopes and lessons learned were immediately put into practice. They were held in Krakow, either at the American Children's Hospital or the Institute of

Obstetrics/Gynecology. One to two hundred registrants or more were present for each and came from all over Poland. Nurses and other health care personnel attended as well as physicians.

Very distinguished groups of American specialists made up the faculties as HOPE volunteers. Course material was prepared in Polish and equipment to be discussed was on hand and demonstrated. Questions from the floor were extremely numerous and relevant and indicated a hunger for improving current knowledge that was very rewarding to our faculties.

A list of the courses given is included as ATTACHMENT B. ATTACHMENT C is a summary of one course as an example of their organization and contents.

6. Summary of Commodities Shipped and Financial Status.

Material valued at at \$856,389 was purchased with grant funds in the period from July 1, 1984, until the closing date of the project as detailed in ATTACHMENT D. Total value of material purchased with grant funds during the course of the project is \$4,563,130.

In addition, gifts-in-kind shipped to Poland by February 28, 1985, reached a value of \$6,597,737 for supplies, equipment and books.

7. Summary of the Financial Status of the Project.

Details of the expenditure of the grant funds over the life of the project are given in ATTACHMENT E.

Conclusion

The project was successful based on any criteria we have been able to use to measure it.

1. The amounts of equipment and supplies purchased and augmented by gift-in-kind have been large enough and carefully enough selected to have a significant impact on hospital care of women and children in the recipient institutions.
2. The Polish institutions have been very careful users of the material:
  - a. None has been diverted to illegal or inappropriate use.
  - b. Their accounting for it has been meticulous.
3. The response of Polish health professionals to the educational components was positive far beyond our expectations and resulted in a rational and skillful use of new diagnostic and therapeutic modalities immediately upon their becoming available.

Our conclusion is that the relief program, with some difference in emphasis to broaden its impact even more, should be continued for another two to three years. During that time, we would:

1. Reassess the list of recipient hospitals to be certain that our impact will continue to be maximal for funds expended.
2. Continue the educational component covering some new areas and reemphasizing some of the ones previously discussed.
3. Extend our outreach into some primary care institutions in the southeast of Poland (where hardship is greatest) including with supplies and education some prospective analysis of the most effective ways for Polish primary care givers to minimize prevalent health problems so that our efforts will be maximally beneficial to Polish women and children.

MEDICAL PERSONNEL PARTICIPATING IN THE PROJECT HOPE RELIEF PROGRAM  
September 1, 1982 - February 28, 1985

Marvin E. Ament, M.D.	University of California at Los Angeles
Philip Balderston, R.R.T.	Children's Hospital of Philadelphia, The University of Pennsylvania
Daniel Baranowski, R.R.T.	Children's Hospital of Philadelphia, The University of Pennsylvania
Shelly Baranowski, R.N.	Hahnemann University and Health Sciences Center
Charlotte Cady, R.N.	Children's Hospital of Philadelphia, The University of Pennsylvania
Lynn Cook, M.D.	University of Virginia Medical Center
Dennis a. Cotcamp, M.D.	The University of Florida School of Medicine
Robert K. Creasy, M.D.	University of Texas School of Medicine
Gary Cupit, Ph.D.	Pennsylvania College of Pharmacy and Science
Barbara J. Degnan, B.A.	McGaw Medical Center of Northwestern University
Susan DeHoog, R.D.	University of Washington Hospital
Floyd Denny, M.D.	University of North Carolina Medical Center
O. Richard Depp, III, M.D.	Northwestern University School of Medicine
Joann Desilets, R.N.	The Children's Hospital of Philadelphia, The University of Pennsylvania

Mary E. Donar, R.N.	The Children's Hospital of Philadelphia, The University of Pennsylvania
Henry R. Drott, Ph.D.	The Children's Hospital of Philadelphia, The University of Pennsylvania
Alexander Fakadej, M.D.	West Virginia Medical Center
Vickie Frey, R.R.T.	York Hospital
Pamela K. Fry, R.R.T.	The Children's Hospital of Philadelphia, The University of Pennsylvania
John Gallagher, M.D.	The University of Virginia Medical Center
Brett B. Gutsche, M.D.	Hospital of the University of Pennsylvania
Conley Heaberlin, Jr., R.R.T.	Presbyterian-University of Pennsylvania Medical Center
John J. Herbst, M.D.	University of Utah/Primary Children's Medical Center
C. Jeffrey Hoydu, R.R.T.	The Children's Hospital of Philadelphia, The University of Pennsylvania
Dale Johnson, M.D.	University of Utah/Primary Children's Medical Center
John Kattwinkel, M.D.	The University of Virginia Medical Center
Kim L. Kaufman, R.N.	The Johns Hopkins University
Robert G. Kettrick, M.D.	The Children's Hospital of Philadelphia, The University of Pennsylvania
James D. Kitchin, III, M.D.	The University of Virginia Medical Center
Gerald B. Kolski, M.D.	The Children's Hospital, The University of Philadelphia

Richard A. Molteni, M.D.	The Johns Hopkins University School of Medicine
Susan T. Loud, R.N.	University of Virginia Medical Center
John D. Murphy, M.D.	The Children's Hospital of Philadelphia, The University of Pennsylvania
William I. Norwood, M.D.	The Children's Hospital of Philadelphia, The University of Pennsylvania
Richard H. Paul, M.D.	University of Southern California
Nancy Jo Reedy, MPH	Northwestern University Medical School
Rudy E. Sabbagha, M.D.	Northwestern University School of Medicine
Benjamin Silverman, M.D.	University of Pennsylvania/College of Medicine and Dentistry of New Jersey
Milton Skolaut, Ph.D.	Duke University Medical School
Alexander Spock, M.D.	Duke University Medical School
Stanislaw Szyfelbein, M.D.	Harvard Medical School/Massachusetts General Hospital
Lawrence Ten Eyck, R.R.T.	Bear Medical Systems, Inc.
M. Rita Thomas, R.D.	University of Utah
Kent Ueland, M.D.	Stanford University Medical Center
Sandra Wadlinger, R.R.T.	The Children's Hospital of Philadelphia, The University of Pennsylvania

EDUCATIONAL CONFERENCES-PROJECT HOPE RELIEF PROGRAM

Perinatal Continuing Education Program  
November 15-17, 1982  
Attendance: 125

Pediatric Pulmonary Pathology and Disease  
June 6-9, 1983  
Attendance: 175

Postgraduate Course in Management of High Risk Pregnancy  
June 4-7, 1984  
Attendance: 150

Postgraduate Course in Nutrition and Gastroenterology  
October 16-18, 1984  
Attendance: 200

Neonatal/Pediatric Respiratory Intensive Care Symposium:  
Focus on "Mechanical Ventilatory Life Support"  
November 26-28, 1984  
Attendance: 125

NEONATAL/PEDIATRIC RESPIRATORY INTENSIVE  
CARE SYMPOSIUM  
FOCUS ON:

"MECHANICAL VENTILATORY LIFE SUPPORT"

TO BE HELD AT:

THE INSTITUTE OF PEDIATRICS  
THE AMERICAN CHILDREN'S RESEARCH INSTITUTE AND HOSPITAL  
KRAKOW, POLAND

NOVEMBER 26, 27 & 28, 1984

SPONSORED BY:

PROJECT HOPE

AND

INSTYTUT PEDIATRII AKADEMII MEDYCZNEJ  
MIKOLAJA KOPERNIKA  
THE AMERICAN CHILDREN'S RESEARCH INSTITUTE AND HOSPITAL  
KRAKOW, POLAND

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## SYMPOSIUM DIGEST DIRECTORS

Pamela K. Fry, B.S., R.R.T.  
Clinical Coordinator, Respiratory Therapy Education  
The Children's Hospital of Philadelphia  
Philadelphia, Pennsylvania

Shelley L. Baranowska, M.S., R.N.  
Director of Nursing/Assistant Administrator  
Maternal Child Health Care  
Hahnemann University Hospital  
Philadelphia, Pennsylvania

Daniel F. Baranowski, B.A., C.R.T.T., R.R.T.  
Director, Department of Respiratory Care Services  
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Chairman, International Respiratory Care Committee  
American Association for Respiratory Therapy

### Translation by:

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### Typing assistance by:

Anne White  
Secretary/Administrative Assistant  
Department of Respiratory Care Services  
The Children's Hospital of Philadelphia

## SYMPOSIUM GENERAL OBJECTIVES:

To review with the physician the concepts, practices and techniques of artificial mechanical ventilatory life support of the neonatal/ pediatric patient. Additionally, the physician will be trained to operate the Bear II Volume Ventilator, the Bear Cub BP-2001 and the Bear BP-200 Infant Pressure Ventilators and assorted accessory ventilator and respiratory therapy equipment.

To review with the bedside nurse with basic concepts of artificial ventilation. To orient the nurse to the basic operation and safety features of volume and pressure ventilators. To train the nurse to deliver routine respiratory care to ventilator-dependent neonatal/ pediatric patients.

To familiarize the bio-medical engineer in the basic functions of a mechanical ventilator and to train the engineer in the repair and routine maintenance of the Bear II Volume Ventilator, the Bear Cub BP-2001 and the Bear BP-200 Infant Pressure Ventilators.

## WHO SHOULD ATTEND:

Physicians (anesthesiologists, neonatologists, obstetricians and pediatricians) responsible for the application of mechanical ventilatory life support on premature infants, neonates, infants, children and obstetrical cases should attend.

Nurses responsible for providing bedside respiratory care and respiratory therapy to intensive care patients; especially the ventilator dependent patient should attend.

Hospital bio-medical engineers responsible for the repair and maintenance of technological life support systems should attend.

Twelve (12) hospitals have been invited to participate in this symposium. The symposium attendance is limited to a total of 60 physicians, 24 nurses and 12 bio-medical engineers. Therefore, each hospital should send maximally 5 physicians, 2 nurses and 1 bio-medical engineer.

## SYMPOSIUM FORMAT:

This respiratory intensive care symposium on mechanical ventilatory life support will be conducted according to two major formats.

Each morning (8:00 A.M. to 12:00 P.M.) a series of lectures will be conducted with the design to provide the participants with a conceptual framework in which to understand the applications, practices and techniques of artificial mechanical ventilatory life support.

Each afternoon (1:00 P.M. to 3:30 P.M.) a series of training workshops will be conducted in which the operation, function, repair and maintenance of 3 different types of mechanical ventilators will be taught. These ventilator training workshops are focused on Bear Medical Systems, Inc. ventilators which each institution participating in the symposium will receive. Additionally, a workshop on respiratory therapy equipment will also be conducted.

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Moreover, a separate series of training workshops will be conducted for nurses on the bedside respiratory care of ventilator dependent patients. Finally, a separate training workshop will be conducted for bio-medical engineers in the repair and maintenance of 3 specific Bear Medical System, Inc. ventilators.

The workshops will be given on a rotating basis throughout the course of the 3 day symposium.

#### CLINICAL TEACHING IN THE FIELD:

Special teams (a physician, a respiratory therapist and a nurse) made up from the American Symposium faculty will travel to hospitals participating in this symposium immediately following the symposium. These clinical field teaching visits will take place beginning on November 29th and run through December 7 of 1984. It is expected that all 12 institutions participating in this symposium will receive a 1 or 2 day visit by a symposium team.

The major purpose of the clinical field visit is to reinforce the concepts and training provided at the symposium as well as to provide an opportunity for a review of this information directly at the clinical site. Hopefully, during these visits all mechanical ventilatory equipment and accessories can be checked for function and actually applied on patients where needed. A schedule of the proposed team visits will be provided through the director's office of the Institute of Pediatrics at the American Children's Hospital in Krakow.

#### SYMPOSIUM FACULTY:

##### Host Faculty

Jan Grochowski, M.D.  
Professor of Surgery  
The Mikolaja Kopernika Akademia Medyczna  
Director, American Children's Research Insititute and Hospital,  
Institute of Pediatrics  
Krakow, Poland

Waldemar Macheta, M.D.  
Chief of Anesthesia and Intensive Care Units  
Institute of Pediatrics  
American Children's Research Institute and Hospital  
Krakow, Poland

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### Program Directors

Robert G. Kettrick, M.D.  
Associate Professor of Anesthesia  
University of Pennsylvania School of Medicine  
Medical Director, Pediatric Intensive Care Intermediate Unit  
The Children's Hospital of Philadelphia

Daniel F. Baranowski, B.A., C.R.T.T., R.R.T.  
Adjunct Faculty, Hahnemann University, School of Respiratory Therapy  
Director, Department of Respiratory Care Services  
The Children's Hospital of Philadelphia  
Chairman, International Respiratory Care Committee - American  
Association for Respiratory Therapy

Shelley L. Baranowska, M.S., R.N.  
Adjunct Faculty, Graduate Program in Nursing  
University of Pennsylvania  
Director of Nursing/Assistant Administrator  
Maternal Child Health Care  
Hahnemann University Hospital, Philadelphia, Pennsylvania

### Medical Faculty

Richard A. Molteni, M.D.  
Associate Professor of Pediatrics  
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Baltimore, Maryland  
Attending Neonatologist and Pediatrician  
The Johns Hopkins Hospital  
Chief, Department of Pediatrics  
Baltimore City's Hospital

Gerald B. Kolski, M.D., Ph.D.  
Assistant Professor of Pediatrics  
The University of Pennsylvania School of Medicine  
Director, Clinical Pediatric Allergy  
Attending Pulmonologist, Pediatric Intensive Care  
The Children's Hospital of Philadelphia  
Philadelphia, Pennsylvania

Dennis A. Cotcamp, M.D.  
Pediatric Intensivist  
Department of Anesthesiology  
The University of Florida School of Medicine  
Gainesville, Florida

### Respiratory Therapy Faculty

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Adjunct Faculty, Bryn Mawr Hospital/West Chester State University  
School of Respiratory Therapy  
Clinical Coordinator, Respiratory Therapy Education  
The Children's Hospital of Philadelphia  
Philadelphia, Pennsylvania

C. Jeffrey Hoydu, B.S., R.R.T.  
Adjunct Faculty, Gwynedd College, School of Respiratory Therapy  
Supervisor, Department of Respiratory Care Services  
The Children's Hospital of Philadelphia  
Philadelphia, Pennsylvania

Lawrence Ten Eyck, C.R.T.T., R.R.T.  
Product Specialist, Bear Medical Systems, Inc.  
Riverside, California

Nursing Faculty

Mary Elizabeth Donar, B.S.N., R.N.  
Adjunct Faculty, School of Nursing  
University of Pennsylvania  
Head Nurse, Pediatric Intensive Care Intermediate Unit  
The Children's Hospital of Philadelphia  
Philadelphia, Pennsylvania

Kim L. Kaufman, B.S.N., R.N.  
Adjunct Faculty, School of Nursing  
University of Maryland  
Assistant Head Nurse, Neonatal Intensive Care Unit  
The Johns Hopkins Hospital  
Baltimore, Maryland

RESPIRATORY INTENSIVE CARE PROGRAM

MONDAY; NOVEMBER 26, 1984

8:00 - 8:30 A.M.  
Registration

8:30 -9:00  
"Introduction and Welcome"

Jan Grochowski, M.D.  
Waldemar Macheta, M.D.  
Robert G. Kettrick, M.D.  
Daniel F. Baranowski, R.R.T.  
Shelley L. Baranowska, R.N.

9:00 - 10:30 A.M.  
"A Practical Review of the Anatomical and Physiological Aspects  
of the Cardiopulmonary System as They Relate to Artificial Mechanical  
Ventilatory Life Support"

Gerald B. Kolski, M.D., Ph.D.

Part A: Functional Anatomy of Bronchopulmonary System, Mechanics  
of Ventilation and Respiration, Control of Respiration

Part B: Pulmonary Blood Flow and Gas Transport in Blood, Tissue  
Oxygenation, Ventilation Perfusion Relationships

10:30 - 11:00 A.M.  
Morning Break

11:00 - 12:15 Noon  
"An Introduction to the Anatomy and Mechanics of Volume and Pressure  
Ventilators"

Daniel F. Baranowski, R.R.T.

12:15 - 1:15 P.M.  
Lunch Break

1:15 P.M. - 3:45 P.M.  
"Workshops":

- A. Bear II Volume Ventilator  
Lawrence G. Ten Eyck, R.R.T.
- B. Bear Cub BP-2001 Infant Pressure Ventilator  
Pamela K. Fry, R.R.T.
- C. Bear BP-200 Infant Pressure Ventilator  
Pamela K. Fry, R.R.T.
- D. Respiratory Therapy Equipment  
C. Jeffrey Hoydu, R.R.T.

E. Nursing Care  
Shelley L. Baranowska, R.N.  
Mary E. Donar, R.N.  
Kim L. Kaufman, R.N.  
Pamela K. Fry, R.R.T.  
C. Jeffrey Hoydu, R.R.T.  
Richard A. Molteni, M.D.

F. Intubation and Airways Management  
Robert G. Ketrwick, M.D.  
Richard A. Molteni, M.D.

3:30 P.M.  
Adjournment First Day

TUESDAY, NOVEMBER 27, 1984

8:00 - 8:30 A.M.  
"Intubation: Techniques and Tubes and The Management of Artificial Airways"

Waldemar Macheta, M.D.

8:30 - 9:10 A.M.  
"A Review of Indications for Mechanical Ventilation: Focus on Early Intervention"

Robert G. Ketrwick, M.D.

9:10 - 9:40 A.M.  
Morning Break

9:40 - 10:40 A.M.  
"Mechanical Ventilatory Manuevers: Continuous Positive Airway Pressure (CPAP)/Positive End Expiratory Pressure (PEEP) and Mean Airway Pressure (MAP)"

Richard A. Molteni, M.D.

10:40 A.M. - 12:00 Noon  
"Approaches to the Institution of Mechanical Ventilation"

Neonatal: Richard A. Molteni, M.D.  
Pediatric: Dennis H. Cotcamp, M.D.

12:00 - 1:00 P.M.  
Lunch Break

1:00 - 3:30 P.M.  
"Workshops Repeated"

3:30 P.M.  
Adjournment Second Day

WEDNESDAY, NOVEMBER 28, 1984

8:00 -8:40 A.M.

"Complications of Positive Pressure Breathing and Mechanical Ventilation"

Gerald B. Kolski, M.D., Ph.D.

8:40 -9:20 A.M.

"Monitoring the Patient on Mechanical Ventilation and Monitoring the Equipment"

Dennis H. Cotcamp, M.D.

9:20 - 9:50 A.M.

Morning Break

9:50 -10:45 A.M.

"Principles and Techniques of Bedside Care for the Ventilator Dependent Patient"

Shelley L. Baranowska, R.N.  
Robert G. Kettrick, M.D.

10:45 - 12:00 Noon

"Clinical Indications for Weaning Mechanical Ventilatory Support and Weaning Techniques Including Extubation and Follow Up"

Neonatal: Richard A. Molteni, M.D.  
Pediatric: Dennis H. Cotcamp, M.D.

12:00 - 1:00 P.M.

Lunch Break

1:00 -3:30 P.M.

"Workshops Repeated"

3:30 P.M.

Adjournment Third Day

#### COURSE SYLLABUS AND WORKING LIBRARY:

Each participant to the symposium will receive a course syllabus which will extensively outline each lecture and workshop.

Additionally, each participating institution will receive a library of 10-12 selected textbooks which will serve as major references for all information presented in the symposium. Included in this library will be an anthology of the selected articles from numerous publications as they relate to mechanical ventilatory support.

WORKSHOP SCHEDULE

1:00 P.M. - 3:30 P.M. Each Day

<u>MONDAY</u>	<u>TUESDAY</u>	<u>WEDNESDAY</u>
BEAR II VOLUME	BEAR II VOLUME	AIRWAY MANEUVERS
Krakow Peds Poznan Peds Poznan OB/GYN Kielce Peds	Gdansk Gen Lublin Peds Warsaw Trauma	Gdansk Gen Warsaw Trauma Bialystok OB/GYN Nowy Sacz Tychy Krakow OB/GYN Zabrze
BEAR BP-200	BEAR CUB 2001	BEAR BP-200
Bialystok OB/GYN Nowy Sacz Tychy Zabrze	Krakow Peds Krakow OB/GYN Poznan Peds Poznan OB/GYN	Kielce Peds Lublin Peds
RESP THER EQUIP'T	RESP THER EQUIP'T	RESP THER EQUIP'T
Gdansk Gen Warsaw Trauma Lublin Peds Krakow OB/GYN	Kielce Peds Nowy Sacz Tychy Bialystok OB/GYN Zabrze	Krakow Peds Poznan Peds Poznan OB/GYN
<u>Nursing Workshops:</u>		
All nurses from all institutions: 1. Monitoring and recommendations 2. Artificial airway and cares 3. Chest physical therapy 4. Ventilators and humidification systems 5. Oxygen therapy 6. Nursing care plans		

Each institution has been scheduled for workshops according to equipment (i.e. ventilator) received from Project Hope. All physicians and bio-medical engineers are expected to attend the workshops as outlined above.

All nursing personnel will attend a workshop each afternoon as well. This workshop will be designed to meet specific goals each day.

POLAND GRANT NEB-0001-G-SS-2071-00  
Activity through February 28, 1985

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<u>Description</u>	Funding Provided by Grant NEB-0001-G- SS-2071-00	Funding and Donations Provided by Project HOPE and Other Organizations <u>and Individuals</u>
Salaries	\$ 148,509	\$ 160,984
Fringe Benefits	28,268	7,257
Transportation	74,741	32,647
Allowances	4,260	4,029
Other direct Costs	144,888	318,289
Commodities	<u>4,563,130</u>	<u>7,657,661</u>
Total	\$5,000,000	\$8,180,860

