

Dear Friends of PAACS:

While the rest of the world is still in the firm grasp of a pandemic, Africa is just beginning to face its own reality as numbers on the continent begin to climb. We plan to raise our voice as one body for Africa on June 8 – please join the prayer conference that will take place on the Zoom platform.

PAACS held its first-ever set of video-conference committee and Commission meetings. Several new subspecialties were approved and the new structure for the soon-to-be-independent organization was approved.

We are presently facing a significant deficit in this year's giving (no doubt due in large part to the economic effect of the pandemic) and yet we have the conviction that we should actually expand in the coming year. A new record-high budget was approved at the Commission meeting – because PAACS believes this is what Jehovah-Jireh would have us do. Please prayerfully consider what you can do to make a difference. If the pandemic precluded your time of service this year, maybe giving the money you would have spent might still be your sacrifice of praise. Just a thought. Please join us in prayer for PAACS and in particular, join us on June 8.

The Editor



PAACS PAACS Bulletin Bulletin

Our goal: To train
and disciple 100
African surgeons by
2020.

**No. 191
May, 2020**

Our vision: PAACS trained surgeons living the gospel and ministering to the sick.

Our Mission: PAACS exists to train and disciple African surgeons to glorify God and to provide excellent, compassionate care to those most in need.

IN THIS NEWSLETTER

[From the Executive Director](#)
[PAACS Global Family Prayer Gathering](#)
[Semi-Annual Commission Meeting via Zoom](#)
[Earthly and Heavenly Treasures – How they Differ](#)
[PAACS Statement of Faith](#)
[PAACS-Tenwek to Begin Training Neurosurgeons](#)
[News Shorts:](#)

PAACS In-Service Exams This Weekend
PAACS Applications for January 2021
In Memoriam – Michael Momtaz

Follow-up – Jim Brown in NYC
Mwachiro Paper Published
Andrea Parker Wins Award
Robert Riviello Appointed Distinguished Chair
First Phase Tenwek Cardiothoracic Center under Construction
Update on Adam Davis

[Announcements:](#)

Surgeon Needed at Kijabe
Long-Term Surgeon Needed at Bongolo
Mark Your Calendar

[Prayer Requests](#)

FROM THE EXECUTIVE DIRECTOR

Dear PAACS Family:

We are one month away from PAACS becoming an independent ministry. PAACS officially becomes a stand-alone organization on July 1, 2020. Praise God for His faithfulness.

When PAACS started as a ministry 24 years ago, we started as a committee under the Christian Medical and Dental Associations (CMDA). PAACS eventually grew to become a Council and then a Commission of CMDA and operated as one of their ministries for over two decades. CMDA provided guidance and support to PAACS throughout the years and we are grateful to them for blessing our organization.

PAACS and CMDA may be legally separating but we are not parting ways. It is the intention of both ministries to work hand-in-hand as sister ministries. We desire to honor God by working in unity and love for the common goal of expanding God's kingdom here on earth.

As PAACS becomes an independent ministry, we will start collecting donations and issuing donation receipts. If you are automatically sending gifts on a regular basis, you need to make sure you change the recipient and the address. As of July 1, 2020, all donations should be sent to:

PAACS
PO Box 735262
Dallas, TX
75373-5262

In addition, the PAACS Commission, which is the current governing body, will become a Board of Directors. Dr. Thomas Robey will be the first Chairman of the new PAACS Board of Directors, and there will be 16 other Board members. PAACS will also be operating under a new set of bylaws, policies, and governing documents. PAACS will have 11 employees in the US working directly for our ministry. We will also be registered in all 50 states to solicit donations, handle our own finances, complete an audit, and operate as an autonomous organization. It is our prayer that the independence will help PAACS be more streamlined and efficient in our work.

Nothing is expected to change for our PAACS surgical training programs in Africa as we become a stand-alone organization. We will continue to offer quality surgical training to residents at all of our sites. We will also remain focused on discipling residents to share the Gospel with those in need of hope in Africa.

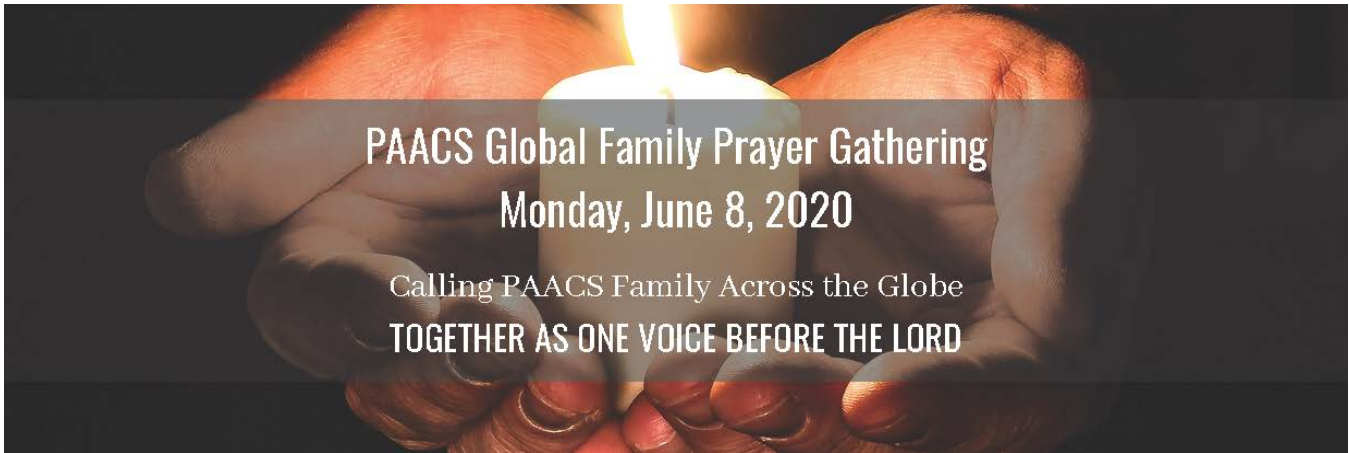
Most of all, as PAACS moves forward, we will continue to be steadfast in our mission to serve God and bring Him glory. We remain dedicated to training and discipling African physicians as surgeons to care for the poor and share the love of Christ with those in need. May all that we do bring glory and honor to Him.

Please continue to pray for a smooth transition for PAACS and that we will be able to complete all that needs to be done by July 1st.

Blessings,

Susan Koshy, JD, MPH

Executive Director



PAACS is calling upon all who have partnered with us to come together as one voice in a concert of prayer to seek God and ask for His protection over our PAACS residents, faculty, graduates, supporters, hospitals, and partner organizations amidst the COVID-19 pandemic.

"Do not be anxious about anything, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. And the peace of God, which surpasses all understanding, will guard your hearts and your minds in Christ Jesus." Phil 4:6-7 ESV

On Monday, June 8, we will be holding two prayer gatherings on Zoom at two different times. See below for details. Please choose the most convenient meeting for your schedule and use the link below to join the gathering. Let us come boldly before the throne of God to ask for His divine mercy and healing.

=====

GATHERING #1

- Eastern Time, USA: 1:00 pm EDT
- Central Time, USA: 12:00 noon CDT
- Mountain Time, USA: 11:00 am MDT
- Pacific Time, USA: 10:00 am PDT
- Eastern Africa Time: 8:00 pm EAT
- Central Africa Time: 7:00 pm CAT
- West Africa Time: 6:00 pm WAT
- Greenwich Mean Time: 5:00 pm GMT

JOIN LINK:

<https://us02web.zoom.us/j/89018363329?pwd=UmJmWHNRWmUxbFpQenBDYnkwelhOUT09>
Meeting ID: 890 1836 3329
Password: 906150

One tap mobile

- +13126266799,,89018363329#,,1#,906150# US (Chicago)
- +16465588656,,89018363329#,,1#,906150# US (New York)

Dial by your location



- +1 312 626 6799 US (Chicago)
- +1 646 558 8656 US (New York)
- +1 301 715 8592 US (Germantown)
- +1 669 900 9128 US (San Jose)
- +1 253 215 8782 US (Tacoma)
- +1 346 248 7799 US (Houston)

Meeting ID: 890 1836 3329

Password: 906150

Find your local number: <https://us02web.zoom.us/j/kcG0ZFw2c2>

=====

GATHERING #2:

- Eastern Time, USA: 8:00 pm EDT
- Central Time, USA: 7:00 pm CDT
- Mountain Time, USA: 6:00 pm MDT
- Pacific Time, USA: 5:00 pm PDT
- Eastern Africa Time: Tue, Jun 9, 2020 at 3:00 am EAT
- Central Africa Time: Tue, Jun 9, 2020 at 2:00 am CAT
- West Africa Time: Tue, Jun 9, 2020 at 1:00 am WAT
- Greenwich Mean Time: Tue, Jun 9, 2020 at 12:00 midnight GMT

JOIN LINK:

<https://us02web.zoom.us/j/83774975905?pwd=N0huK2NSR05ycUJBL0hzUExsbkhvQT09>

Meeting ID: 837 7497 5905

Password: 730484

One tap mobile

- +13126266799,,83774975905#,,1#,730484# US (Chicago)
- +16465588656,,83774975905#,,1#,730484# US (New York)

Dial by your location

- +1 312 626 6799 US (Chicago)
- +1 646 558 8656 US (New York)
- +1 301 715 8592 US (Germantown)
- +1 669 900 9128 US (San Jose)
- +1 253 215 8782 US (Tacoma)
- +1 346 248 7799 US (Houston)

Meeting ID: 837 7497 5905

Password: 730484

Find your local number: <https://us02web.zoom.us/j/kcG0ZFw2c2>



SEMI-ANNUAL COMMISSION MEETING VIA ZOOM

By Susan Koshy and Keir Thelander

Like many organizations in these days of COVID19, PAACS used Zoom videoconferencing for the first time in lieu of face-to-face meetings. Prior to the May 1 PAACS commission meeting, many committees and councils met the challenges and despite the occasional awkward stuttering discussions and choppy audio, God's presence was clear in each discussion and decision.

The Professional Development Committee met with Chair Jim Smith leading the discussion and agenda. They discussed the COVID-caused cancellation of the week-long Faculty Development Seminar that was originally planned for the first week of June and how it might possibly be rescheduled. Additionally, the committee continued its pursuit of creating faculty development requirements for PAACS Faculty, Program Directors, and residents. They discussed how it might be best delivered and possible collaboration with others who are developing or have already deployed online Learning Management Systems. With the growing internet access and bandwidth throughout the continent of Africa, this medium has become an increasingly viable option to deliver high quality content. Pray with us as a program is developed and pray for the availability and affordability of increasing internet bandwidth in Africa to allow for the successful implementation of this ambitious online learning requirement.

The Curriculum committee had over 10 attendees. They heard presentations from 3 new specialty training programs: Neurosurgery, Anesthesia, and Surgical Endoscopy. The presentations were thorough and demonstrated a depth of understanding of the realities of the need for neurosurgeons, anesthesiologists, and surgical endoscopists, throughout Africa. The committee members were challenged by their desire to have a unified and uniform approach, balancing the highest possible standards with the uncertainties inherent with starting a new program. PAACS wants to have a significant impact in training in sub-Saharan Africa where all three specialties are so badly needed. The need for surgeons is actually surpassed by the need for trained anesthesiologists. The committee felt that the Neurosurgery and Anesthesia curricula were of the necessary depth and rigor to recommend these specialties for approval with only minor revisions. The Surgical Endoscopy group had a much shorter lead time and preparation, so the decision on the curriculum for the Surgical Endoscopy fellowship was delayed with suggested areas for improvement which should be easily corrected.

The Program Committee also sat in on the presentations to the Curriculum Committee. During this overlap, over three dozen attendees were on the Zoom call, including members of the various task forces. It is a challenging reality that the very places where training is need most are the same places where it is difficult to obtain sufficient numbers of trainers. The Program Committee received status updates from the ob/gyn task force, which will start the first PAACS Ob/gyn training program at Tenwek Hospital in January 2021. Additionally, the Plastic Surgery Task Force related the challenges of getting their program approved by the Kenyan Medical Council, yet there is still hope that a January 2021 start of Plastic Surgery training at Kijabe Hospital is quite likely. Kibuye Hope Hospital General Surgery training was approved a year ago, but it still struggles with the right timing to accept the responsibilities of running a PAACS General Surgery Training program. None the less, they seem to be growing in courage and are moving towards January 2021 for their inaugural trainees to arrive at KHH. In similar fashion to the Curriculum committee, the Program Committee deliberated the wisdom and challenge of starting new programs in remote locations with limited faculty and resources. With some reticence, yet with faith and conviction, the Program Committee approved the inclusion of Neurosurgery, Anesthesia and Surgical Endoscopy training programs in the PAACS family. These recommendations from the Curriculum and Program Committees

were subsequently debated at the commission level on May 1. The Lord's guidance was evident as each discussion was carefully navigated amidst some differing viewpoints. Agreement was clear and God's hand was evident throughout these first ever PAACS Zoom committee meetings.

The General Surgery Council, as with all councils, is required by the PAACS Commission to meet semi-annually. Also using the Zoom videoconferencing platform, Carl Haisch, the Chair, built on the last PAACS General Surgery Council meeting held in November. Much was discussed, with the overarching theme being how to support the existing programs in their quest to be excellent training and discipleship programs. One way that is growing in interest and definition is the pairing of supportive US-based volunteers with the various PAACS sites. These partnerships are meant to enlarge the number of people vitally engaged in each program, providing support to programs with small numbers of faculty and those faculty members carrying a heavy load (actually, that is true of all the PAACS sites). The Committee was update on new possible program sites, noting that none are quite ready for a robust in-depth consideration. Exam preparation for the PAACS Annual General Surgery In-Service Training Exam was also discussed. There remains a great need for high-quality exam questions and volunteers to write them are desperately needed. Writing a good question and reviewing it can take hours. In spite of PAACS' large question bank, the dynamic nature of medicine requires a constant supply of new questions and revisions of old questions (as the "right answer" changes with additional research).

Commission Meeting

On May 1, 2020, PAACS held its first virtual Spring Commission meeting. The COVID-19 pandemic prevented the PAACS Commission, leadership, and guests from meeting face-to-face in Chicago. Despite this obstacle, we were able to meet by Zoom and were grateful for this technology.

Over 90 participants from the United States, Canada, and Africa met for an open session of the Spring Commission Meeting on that Friday. The first part of the conference was open to all participants. We were especially happy to welcome several of our PAACS faculty who joined from Africa and Canada—Drs. Amanda McCoy, Andrea Parker, Mike and Liz Mwachiro, Yakoubou Sanoussi, David Halter, and Sherif Hanna.

Dr. Thomas Robey, PAACS Chair, led the virtual meeting and welcomed the participants. Dr. Ed Searce led off the meeting with a time of devotion and prayer. Citing the parable of the rich fool in Luke chapter 12 and emphasizing the faithful steward who becomes a good manager of his master's resources, Rev. Searce referenced Luke 12:48, quoting, "for everyone who has been given much, much will be demanded; and from the one who has been entrusted with much, more will be asked."

Following the time of prayer, a series of reports and presentations were made to the group. Susan Koshy, PAACS Executive Director, presented an administrative overview of the PAACS ministry. She discussed the PAACS separation from CMDA and provided an outline of events and work to occur for PAACS to become an independent ministry on July 1, 2020. Dr. Keir Thelander, PAACS Chief Medical Officer, then reported on the current training programs and the future growth of PAACS. These reports were followed by Dr. Mike Chupp, CEO of CMDA, and Dr. Gloria Halverson, the President of the CMDA Board of Trustees, as they shared their thoughts about PAACS and CMDA and praying for the PAACS ministry as we separate. Dr. Bill Wood, PAACS Academic Dean, then prayed for CMDA and its future.

Each PAACS Committee Chair provided a ten-minute report at the open session meeting. Each of the Committees met virtually as described above prior to the Commission meeting on May 1st. The Chairs of the Advancement, Alumni Liaison, Curriculum, Program, Professional Development, and Spiritual Development Committees presented on the work of their individual committees and actions. There were a number of questions

asked during these reports from meeting participants using the chat function on Zoom. Unfortunately, because of the number of participants on the call, participants were unable to ask questions directly and had to work through problems with the technology.

After the Committee reports, the open session of the PAACS Commission meeting concluded and we moved into the closed session with PAACS Commission and administration members only. This was the last meeting that this governing body would meet as a Commission. After July 1st, this group will become the new Board of Directors for PAACS.

During the closed session of the meeting, the Commission accepted changes to the PAACS Faith Statement as presented by the Spiritual Development Committee as well as changes to the PAACS bylaws and board policy manual as presented by the Governance Committee. These documents are available upon request.

The PAACS Advancement Committee presented a new Gift Policy and a Donor Bill of Rights that will be on the PAACS website after the July 1st. This was approved. The Finance Committee presented the 2020-21 budget for review and discussion. The new PAACS budget in the amount of \$ \$2.48M for the 2020-2021 fiscal year was approved. The Commission also approved an additional position on the new Board of Directors for a PAACS graduate to serve as a voting member and a Travel Fellowship for that PAACS graduate which would be funded through the Alumni Liaison Committee. Additionally, the Commission approved the starting of the following programs in 2021 if all criteria were met: ob-gyn, anesthesia, neurosurgery, and surgical endoscopy. Finally, the Commission approved new faculty to serve at our PAACS sites.

It was a very busy meeting and a lot was accomplished in seven hours through this virtual meeting. We were also able to include our PAACS family from Africa, who would not have been able to attend otherwise. However, we certainly missed the time of fellowship and sharing that face-to-face interactions would have provided. The next PAACS Commission meeting will be held October 29-31 in Chicago. We are trusting God that we will be able to meet face-to-face, but we are holding our hands open before God and allowing Him to have His way. We are thankful for the opportunity to meet through Zoom and for everyone who took the time to participate.

EARTHLY AND HEAVENLY TREASURES – HOW THEY DIFFER

By Louis Pisters, MD

“Do not store up for yourselves treasures on earth, where moth and rust destroy, and where thieves break in and steal. But store up for yourselves treasures in heaven, where moth and rust do not destroy, and where thieves do not break in and steal. For where our treasure is, there your heart will be also.” (Matthew 6 19-21)

In 1972, when I was growing up, my parents bought a brand new 4-door Oldsmobile Cutlass Supreme. It cost around \$2,300 brand new - a lot of money in those days. My father had sticker shock! For our middle-class family, this Oldsmobile was an earthly treasure. Our Oldsmobile was a creamy yellowish brown and we nicknamed the car, “The Bomb”. I have a lot of fond memories of growing up and the old Oldsmobile played a part. We traveled to Florida to take vacation in that car. We all learned how to drive on that car. We got over 200,000 miles out of it.

We had fun even when it wasn’t moving! The 1970’s and 80’s were the era of hood ornaments; most cars in that era had an ornament. One fun memory I have was when we used to climb up on the hood of “The Bomb” and

become human hood ornaments by mimicking the pose of the angelic Rolls Royce ornament. We would laugh at who could do the most angelic pose and took pictures of our attempts.

What become of The Bomb? The salt on the roads during the Canadian winters rusted it out, just like our scripture passage says. The floorboards rusted away first and eventually, you could see the road underneath as you drove along. Eventually, the car ended up in some junkyard. To me, this is an example of what Jesus calls an earthly treasure. A fond memory but absolutely of no eternal value.



The Bomb with 171,000 miles – and rust!



Now, let me give an example of storing up treasure in heaven. My parents gave money to the PAACS organization to train up surgeons. They could count on two separate long-term exponential chain reactions that would follow. First, one trained surgeon will train others to do surgery. Imagine if one surgeon trains five surgeons and each of those surgeons train five others and this cycle is continued. The cumulative number of surgeons trained grows exponentially and this is the best way to expand access to surgery in undeveloped, poor places like parts of Africa. If we estimate that one surgeon does 500 cases per year

and works for 30 years, then one surgeon may impact 15,000 lives over his career. It is a greater number in actuality because of the non-operative cases he will see. Secondly, in the PAACS program, we use the spiritual curriculum and teaching moments to disciple the residents for their spiritual growth. The PAACS residents and graduates often witness to their patients. So, imagine if each graduate treats 15,000 people or more over their career and through their witness, some patients accept Christ as Lord and Savior. These patients might then lead others to Christ in an exponential manner providing salvation for untold thousands.

My parents have both transitioned to Heaven and I bet that one day someone will walk up to them and say, “You know that surgeon you help train? Well, he operated on me and helped me over my illness. But while I was recovering in the hospital, I was also introduced to Jesus and that is why I am here!” This is how a treasure in heaven is different – it provides eternal gains.

Jesus goes on to warn us later in the chapter in verse 24 that “No one can serve two masters”. “You can’t serve both God and Money”. The Message reads, “You can’t worship God and Money both.” Jesus knew that OVER-attachment to material things (our “stuff”) could be problem for many of us.

As PAACS approaches the end of our financial year, we find ourselves in a global pandemic that has caused enormous loss of life and economic suffering. Clearly, some people may not be in a good position to give. But others may find that their expenses have actually gone down due to lockdowns, travel bans and not eating out at restaurants, etc. I find myself in that position and am increasing my giving because my expenses are lower than usual. As of May 21, PAACS faces a year-end budget shortfall of \$338,475. May the Holy Spirit work in all of us to reveal how much we should give to finish the financial year strong!

PAACS STATEMENT OF FAITH

[Editor's note: This revised Statement of Faith was approved May 1, 2020.]

- We believe that the Bible, in its entirety, is the only inspired, inerrant Word of God.
- We believe that there is one God eternally existent in three persons: The Father, the Son, and the Holy Spirit.
- We believe that Jesus Christ is God the Son, born of a virgin, who willingly died on the cross for the sins of all people and rose from the dead to sit at the right hand of the Father.
- We believe all of mankind is by nature sinful and consequently separated from God.
- We believe that the forgiveness of sin and the gift of eternal life come only through repentance and faith in Jesus Christ. Those who have repented and have placed their faith in Jesus Christ are born again believers.
- We believe the Holy Spirit, as a person of the Godhead, is sent by Jesus Christ from God to convict the world of sin. He regenerates those who repent of sin and believe in Jesus Christ. The Holy Spirit instantly indwells believers, becomes their teacher, and empowers them to live a life pleasing to God.
- We believe in the personal return of Jesus Christ to reign in power and glory on the earth and to judge all people. Those who have believed in Christ will receive eternal life. Those who have not will be eternally separated from God.
- We believe in the unity of all believers. They share the common goal of together becoming fully devoted followers of Christ who love, worship, and obey Jesus Christ as the Son of God.
- We believe that it is the responsibility of all believers to proclaim His gospel, make disciples of all nations and respond with compassion to the suffering of all people in the ways that Jesus did.

PAACS-TENWEK TO BEGIN TRAINING NEUROSURGEONS

By Scott Boswell

[Editor's note: After the approval of the application to begin neurosurgical training, the Neurosurgery Investigational Task Force, headed by Carter Harsh and Scott Boswell, is now in the process of converting to a Neurosurgery Council.]

The neurosurgical need in Sub-Saharan Africa is immense. The WHO recommends 1 neurosurgeon for every 200,000 people and in most western countries, the ratio is in fact 1:80,000. In Sub-Saharan Africa, however, the ratio is 1:10,000,000 with an estimated additional 8400 neurosurgeons needed. The few neurosurgeons that do exist tend to be localized to urban or university settings. This influences medical care here dramatically. Traumatic brain injury is the greatest contributor of death and disability after traumatic accidents and there are 180,000 cases of pediatric hydrocephalus in Africa, bearing the largest burden of disability among pediatric surgical diseases. Furthermore, neural tube defects (e.g. spina bifida and anencephaly) are one of the most common classes of congenital anomalies in this region.

There is a group at PAACS trying to change access to neurosurgical care in Sub-Saharan Africa. Dr. Will Copeland, along with 30 other Christian neurosurgeons, have applied to start a PAACS Neurosurgery residency at Tenwek Hospital, Kenya. This application was recently approved at the May PAACS meeting! Last March, it was also approved for the four-year FCS program by the College of Surgeons of East, Central and Southern Africa (COSECSA), the largest accrediting agency in the region. Dr. Copeland is permanently practicing at Tenwek, and the other neurosurgeons will take turns visiting the hospital to offer training. This residency will first start with 3 residents, with the opportunity to grow in the future. The residents will be trained in a wide variety of

neurosurgical cases, including trauma, pediatrics, tumors, spinal pathology, and vascular abnormalities. They will also be undergoing the same spiritual training as other PAACS residents. The first residents are scheduled to start training in January 2021.

PAACS generally no longer begins a training program with only one faculty member, but the need is great. Please pray that God will provide one or two more neurosurgeons to join the Tenwek Hospital neurosurgical staff. With more faculty members, more new neurosurgeons can be trained and the sustainability of the program will be greatly enhanced. In the interim, there is a continuous and great need for neurosurgeons to provide regular scheduled short-term volunteer service (twenty-four neurosurgeons providing two weeks a year would be ideal).



If you are interested, please contact Dr. Scott Boswell at ksudoc43@gmail.com or Dr. Carter Harsh at carterharsh@aol.com for more information on how you can be involved with supporting this residency. Join us as we congratulate, pray for, and support Dr. Copeland, the Neurosurgical Council, the residents, and the patients they will help.

Caption: Dr. Copeland (left), with Neurosurgery Medical Officer Emmanuel Wafula, is spear-heading a movement to start a neurosurgery residency at Tenwek Hospital to help meet the neurosurgical needs in Africa.

NEWS SHORTS:

- **PAACS In-service Exams this Weekend:** The 2020 PAACS in-service exams were moved up a week earlier than usual because of the planned faculty development conference which was cancelled due to the COVID19 pandemic. The junior and senior level exams are scheduled for Saturday, May 30. Those programs with adherents to the Seventh Day Adventist faith may be taking their exams on May 29 to avoid conflict with their Sabbath. The Harpur program in Egypt has two residents will be taking the junior exam and two residents taking the senior exams later in the year. Forty-four junior (first- and second-year) residents will be sitting the junior exam and 34 senior level (third-, fourth- and fifth-year residents) will be taking the senior exam. Each exam consists of 200 multiple-choice-items. If any fail to pass, a remediation exam is scheduled in eight weeks. Please take a moment to pray for the residents and that their performance will fairly reflect that amount of studying, reading and learning they have done. The junior and senior COSECSA written exams are scheduled for the first Wednesday of September.
- **PAACS Applications for January 2021:** This past December, COSECSA announced an earlier registration deadline for their trainees. Additionally, PAACS trains many residents in a country other than their passport country, which requires a lengthy visa application process. These two factors led PAACS to move its deadlines to an earlier date in the year. A few years ago, PAACS moved to a two-step application process. The deadline for Part 1 is now April 15. The deadline for Part 2 is now May 15. Part 1 requires submission of demographic and historical data from the applicant as well as their preference of PAACS training

programs. Part 2 involves a more extensive inquiry into their testimony and their motivation for joining PAACS as well as recommendations from their supervisors. The terms of the mutual agreement are also spelled out in Part 2.

Keir Thelander writes, "We are thankful for over 200 applicants for the first time in the history of PAACS. What a change from a decade ago! Writing about the situation in 2010, Steffes related, 'Each year before this, applicants to train were never abundant but enough could be found to fill the open slots. However, due to a shortage of qualified applicants, only three candidates were accepted for the incoming August class; 12 candidates had been sought.'"

If all the new programs start in 2021 as planned, PAACS will accept up to 34 new trainees in total this year, the most ever. The fact that 200 applicants are vying for the 25 spots in the current programs speaks loudly to the reputation of PAACS and the desirability of the training programs that PAACS has throughout the continent. The present application numbers do not include trainees for the new programs just approved. The number of applicants will increase yet again as PAACS seeks to fill the additional 8 slots.

Thelander continues, "Though we lament not being able to offer training slots to more applicants, we praise the Lord for the applications we have received from so many high-quality candidates. May the Lord grant the Program Directors and PAACS administration wisdom in the selection of these future surgeons"

- **In Memoriam:** Dr. Michael Momtaz has gone home to be with his Lord. A resident for three years at Harpur Memorial Hospital until December 2018, he underwent a lymph node biopsy in February which confirmed a diagnosis of Stage IV Hodgkin's lymphoma. His course of chemotherapy was complicated by a gastric perforation for which he underwent surgery at a university hospital in March. He passed away on March 11, 2020 after he was transferred to Harpur and continued to have a rocky course.



Todd Lavery, in his newsletter, wrote, "Michael's training as a PAACS surgeon was already underway when we first arrived in Egypt back in 2017. He and his family welcomed us to Menouf, the seasoned student welcoming his new teacher. As any teacher will attest, not every student brings you great joy, but for me it was both a joy and a relief when I found myself on-call with Michael, in clinic with him, or standing across the OR table with him. I appreciated his independence and gentleness, his kindness and generosity, and his sense of humor. I found that his few years of working in Saudi (before beginning his PAACS training) gave him a keenness of thought and

maturity in perspective that served him well as a surgeon. I appreciated his willingness to ask difficult questions about faith and life."

Our prayers and condolences go out to his wife Miriam, his son Yusef, his infant daughter Cecilia and his extended family and friends. Pray especially for his family as they mourn in this strange time of coronavirus when the traditional funeral arrangements are not possible.

- **Follow up – Jim Brown in NYC:** Jim Brown left the NYC field hospital set up for treating COVID patients in Central Park. He spent three weeks on the night shift in the ICU and two weeks on the day shift in the same unit. He spent 14 days of self-quarantine after returning home. He writes, “We are hoping to return to Cameroon as soon as Cameroon opens its borders and international flights resume, but no one is sure when that will be – I hope sometime in June. No one knows what the conditions will be for return- maybe a negative COVID test, maybe mandatory quarantine on arrival, maybe limits on in-travel.”

Samaritan’s Purse operated their respiratory care unit in Central Park from April 1 to May 5. Through their partnership with the Mount Sinai Health System, they treated more than 300 coronavirus patients in New York, including 190 at the park site.

You can listen to an interview with Dr. Brown by [Clicking Here](#).

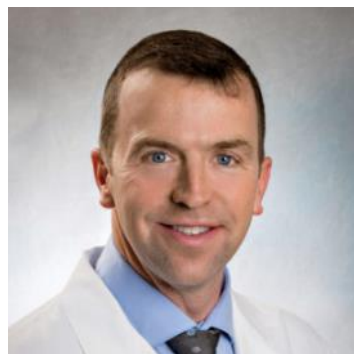


- **Mwachiro Paper Published:** Michael Mwachiro, general surgeon at Tenwek hospital, had a paper titled “Surgery in The Time of Covid-19: Reflections on A Pandemic” published in the Annals of African Surgery (the journal of the Surgical Society of Kenya). It can be read at: <https://www.annalsof africansurgery.com/surgery-covid-19>.

• **Andrea Parker Wins Award:** The Association for Surgical Education gave its 2020 “Excellence in Innovation” award to Andrea Parker, MD, Tenwek Hospital, Kenya and Brown University, for her work on the development of the COSECSA MCS curriculum.



- **Robert Riviello Appointed Distinguished Chair:** On April 28, it was announced that Robert Riviello, MD, MPH, was appointed the Steven C. and Carmella R. Kletjian Foundation Distinguished Chair in Global



Surgery. As Chair in Global Surgery and Director of Global Surgery for the BWH Center for Surgery and Public Health, Dr. Riviello continues to dedicate his career to improving surgical access and quality for vulnerable people. Riviello is a member of the PAACS general surgery council. In 2017, the Steven C. and Carmella R. Kletjian Foundation gave a gift of \$1M to establish an endowment for Global Surgery work at Brigham and Women’s Hospital. Robert Riviello, MD, MPH, with that gift, has been working to reduce surgical disparities and improve delivery of care in developing nations. Recently, Carmella Kletjian has donated an additional \$1M to establish the Steven C. and Carmella R. Kletjian Foundation Distinguished Chair in Global Surgery.

- **First Phase of Tenwek Cardiothoracic Center Under Construction:**



The 80,000-square-foot, \$45M facility will serve patients across East Africa and beyond. Right now, Tenwek has 300 beds and five operating rooms—jammed with patients. The new cardiothoracic center will add 100 beds, a cardiac catheterization lab, and six new operating rooms. These will increase Tenwek’s capacity to perform critical heart surgeries and other pressing procedures, including operations for those with cancer of the esophagus—one of the leading cancers throughout Kenya.

- **Update on Adam Davis:** In late 2018, the Rich Davis family left Kijabe Hospital in Kenya. This move was due to a diagnosis of genetic dilated cardiomyopathy in Adam, their oldest son, and his need for advanced care. In March 2019, Dr. Davis joined a General Surgery practice in Los Angeles and the family settled into a new reality, while living at Davis’ parents’ family home in Northridge.

He wrote recently with an update on Adam’s health. Davis reported, “The prognosis of genetic dilated cardiomyopathy in the long term is not good. His cardiologist told us that Adam would likely reach a plateau, stay there for some time, and then deteriorate and eventually need a transplant. When I reviewed the literature, this was true for about 85-90% of patients. When I raised the possibility to our cardiologist that Adam could be in that favorable 10-15% that recovered, he was pessimistic.”

He continued, “Through all this, Adam continued to work hard. His love of mountain biking drove him to exercise as much as he could, first on the electric bicycle that friends crowdfunded for us (thank you if you were part of this!) and then on a regular bicycle. He tolerated the frequent bathroom breaks that came with being on diuretics. His echocardiogram continued to improve. The cardiologist stopped his metolazone, then the Lasix. At our last visit, they told us that his left ventricular end-diastolic volume was almost in the normal

range! And as a more visible measure, he is firmly beating me on the climbs when we ride our bikes together, the way an 18-year-old should beat a 50-year-old. He is still on four cardiac medicines but moving in the right direction. So that's where we are now – thankful for God's faithfulness and that at this time, he has allowed us to “beat the odds” even as we appreciate our cardiologist's expertise!”

After getting the oldest two, Adam and Gabi, settled in college, Davis feels it is likely that he and his wife, Stacy, will return to Africa. Adam starts this fall at Colorado Christian University studying Nursing. Davis concludes, “We are very thankful for your prayers, emails, calls and support through this time. We give God the glory!”

ANNOUNCEMENTS:

- **Surgeon Needed at Kijabe:** Dr Beryl Akinyi, general surgeon at AIC Kijabe Hospital, will be on maternity leave from mid-March to early July. Dr. Peter Byrd needs someone to help cover part or all of that time. Dr. Byrd is going on a one-year home assignment in July and surgeons will be needed during that time as well. Please contact World Medical Mission if you can help.
- **Long-term Surgeon Needed at Bongolo:** The Bongolo Hospital general surgery residency program needs a general surgeon who is able to serve under a sending agency for at least 2 years starting in 2021. Please contact bongolopd@gmail.com if you are interested.
- **Mark your calendar** for the following events you may wish to attend or uphold in prayer:
 - **African Colleges Exams & Conferences:**
 - COSECSA written exams for MCS and FCS will be given on Wednesday, September 2, 2020.
 - COSECSA oral exams for MCS and FCS (Zambia) – NOTE CHANGE OF DATE! December 7-8, 2020 and COSECSA General Meeting & Conference (Zambia) – December 9-11 2020

PRAYER REQUESTS:

- Pray for the PAACS residents as they take the in-service examinations May 29 and May 30. May they be rewarded in proportion to their study.
- Pray for healing and salvation for this world in the face of this pandemic.
- Pray for internal peace as the PAACS family faces the uncertainty of separation from family, of unknown medical demand, and limited medical resources.
- Pray for all the missionaries and the hospitals – for personal health and safety and for financial viability of the charity hospitals in this tough time.
- Pray for all the patients who cannot get transportation to the hospitals for their care.

- Pray that the international flights will re-open to allow two-way traffic to the hospitals so that both long-term and short-term faculty can travel safely and conveniently. Pray that God will make it possible for the short-term missionaries to return to service in the mission hospitals.
- Peace and stability in the PAACS countries.
- Pray that PAACS will glorify God and be used to impact Africa for His Kingdom. Plead that many lives will be saved through surgery and many people will come to know the love of Jesus.
- Pray that God will provide the right applicants for PAACS for the 2021 training year and that the programs will make the right selections.
- Request strength, stamina, wisdom, and blessings upon the PAACS faculty as they seek to train and mentor PAACS residents. Pray that God will bring His chosen long and short-term missionary and national surgeons to help train African residents in the PAACS training programs.
- Pray for PAACS graduates that are serving God's people. Pray for God's grace, protection, provision, strength, and blessings to cover the PAACS graduates.
- Beseech God for success and needed help for all of the 16 current PAACS programs. Pray for governmental approval of the plastic surgery program will come for the AIC Kijabe Hospital in Kenya.
- Pray for the administrative and other preparations needed for potentially opening the recently approved new programs of Neurosurgery and Anesthesia. Also, pray for the opening in January 2021 the previously approved new program in General Surgery at Kibuye Hope Hospital in Burundi and Plastic Surgery at Kijabe Hospital.
- Pray for the need for general surgery faculty at Kijabe for the 15 months between March 2020 and July 2021.
- Pray for the Harpur training program in the of absence of Sherif Hanna and for all those who remain there on staff. Pray for them as the Hannas plan to return for an undefined period of time this summer.
- Praise God for the safety and health extended to Jim Brown during his service at the Samaritan's Purse Emergency Hospital in NYC. Pray that the Browns will soon be able to return to service in Cameroon.
- Pray for the needs at Bongolo Hospital – for coverage during the O'Connor's home assignment and for a shipping container coordinator.
- Pray for the Soddo-Cure Orthopedic Program in Ethiopia that has a great need for additional faculty members at Soddo Christian Hospital and pray for the Tenwek Orthopaedic Training Program which has an equally great need.
- Pray for those faculty members on home assignment – for their rest, for the times of medical work and for the largely impossible task of meeting with their supporters and raising funds. Pray for the faculty members that must cover their absence. Pray that God will provide direction for those who need it that may be considering returning to the US or other locations on repatriation flights.

- Pray for the manpower shortage at the mission hospitals. Even if international travel restrictions are lifted, most countries will require a 14-day quarantine before allowing them free movement – which will essentially wipe out most short-term mission efforts.
- Please pray for full recognition of PAACS by WACS if it be God's will. Pray to God that He will provide surgical subspecialists who will answer God's call on their lives to serve in PAACS hospitals as full-time missionary surgeons – this is the largest hurdle for WACS acceptance.
- The economic downturn due to the pandemic is already starting to affect giving to PAACS. Please pray that God will provide and you are the chosen method, that He will demonstrate who Jehovah-Jireh is to you.
- Pray for the grieving family and friends of Michael Momtaz.
- Praise God for the continuing healing of Adam Davis.

Editor: Bruce C. Steffes, MD