International Medical Rotation Curriculum – Inner Himalayas, India
The Himalayan Health Exchange is a health care service program established in 1996 with the mission to provide medical and dental care to the underserved people living in remote regions of the Indian and Nepal Himalayas.

Goals:
1. Provide exposure to diseases not generally encountered during US medical training.
2. Develop medical skills with less reliance on modern technology.
3. Provide a cross-cultural medical experience beyond what is possible in the US.
4. Allow students and residents to develop and nourish their sense of altruism.
5. Expose physicians, early in their career to the possibilities of working in the developing world and/or under served populations.
6. Understand the interaction between health and social, cultural and environmental issues.

Objectives Based on Competencies
Consistent with the overriding framework of the ACGME (6) competencies, the educational objectives are followed, in bold italics, by the specific competencies they promote. Competencies are abbreviated as follows: Patient Care (PC), Medical Knowledge (MK), Practice Based Learning and Improvement (PLBI), Interpersonal and Communication Skills (IPCS), Professionalism (P), Systems Based Practice (SBP)

By the end of the rotation with student or resident will:
Demonstrate the ability to learn local customs and cultural mores (IPCS, P)
Behave in a culturally appropriate manner as a visiting foreigner (IPCS, P)
Provide culturally sensitive medical care (PLBI, IPCS, P, SBP)
Function as a team member in a large mobile medical team in a challenging environment (PLBI, IPCS, P, SBP)
Work with health care providers from different cultures and perspectives (PLBI, IPCS, P, SBP)
Develop and improve clinical diagnosis based on history and physical (PC, MK)
Develop and expand the differential diagnosis of outpatient complaints (PC, MK)
Improved understanding of the effect of socioeconomic conditions on health and disease (PC, MK SBP)
Modify treatment plans to available resources (PC, MK, SBP)

Instructional Strategy:
1. A team of 20 to 30 people from US medical schools and residencies from the US will travel to rural India. They will travel together and will be overseen by The Himalayan Health Exchange. The team will consist of medical students, residents, non-medical support personnel, and physician instructors.

2. This medical-dental expedition/trek takes us to a remote tribal region of the Western Himalayas. A combination of rail and road takes us from New Delhi to Shimla for an overnight stay. The next morning we will begin our overland journey towards the Greater Himalayan Range to reach settlements and tribal villages of Dodra and Kwar. A trail over ‘Chansal’ - a 11,800 ft high pass connects these villages to the outside world. This region remains cut- off for 6 months of the year due to heavy snow accumulations on Chansal, leaving the native population with little or no access to health care. Our team will run clinics in 4 different sites, totaling eleven clinic days, and provide care to approximately 1,800 patients. Local nurses and ancillary staff will also participate in providing patient care. In addition, the team will work with local physicians who will also provide oversight and instruction.

3. Medical students will see patients with residents and attendings and independently based on their level of education and experience. Oversight is provided by an appointed US trained physician(s) in conjunction
with local physicians where available.

4. At the end of every clinical day the group will meet for a formal 1 hour teaching time. Each resident will be required to teach one of the sessions. Topics include:
   - Tuberculosis in the developing world vs. the US
   - Leprosy
   - Common dermatological diseases
   - Common gynecological diseases
   - Rheumatologic heart disease
   - Gastrointestinal infections and abdominal pain
   - Basic principles of remote medicine
   - High altitude physiology and illness
   - Cultural disease concepts
   - Question and answer night

**Evaluation Method:**

1. Students and residents will be evaluated based on the following:
   - Ability to adapt to a foreign environment
   - Ability to work as a team member
   - Medical abilities, knowledge and judgment

2. Each student and resident will be expected to provide any necessary evaluation forms to the lead attending physician for completion.