

NOVEMBER 2020

HOPE AMIDST THE PANDEMIC

Prayer

- For the challenges in Mbingo with respect to consistent access to electrical power and internet services.
- For wisdom and fairness as we conclude end-of-year exams for Internal Medicine residents.
- For perseverance in the midst of the SARS-CoV-2 pandemic. After witnessing a lull in the number of cases for a few weeks, there is again an uptick among local students and hospital staff.

Praises

- For the help and perseverance of our external examiner in Canada who has been of great assistance to the residents during their examinations.
- For the recent granting of a visa to a cardiologist one of our first outside visitors since the start of the pandemic. Scheduled to arrive at the end of November, he will prove an invaluable asset for teaching residents, as well as offering encouragement as this year's graduation speaker.

Why, my soul, are you downcast? Why so disturbed within me? Put your hope in God, for I will yet praise him, my Savior and my God.

PSALM 42:11 (NIV)



Demonstration of use of PPE to our socially distanced doctors early in the pandemic.

The COVID pandemic has done much to change our way of life and alter many of the norms which have been established over the years. Physicians who had planned trips to Cameroon to help with the residency program have had to cancel. Others who are willing to come have been denied visas, as Cameroon's borders remain officially closed. This has also substantially impacted the way end-ofyear exams have been conducted for CIMS (Christian Internal Medicine Specialization) residents.

Towards the end of 2019, a decision was made to normalize the curriculum of Mbingo's Internal Medicine residency with Cameroon's major medical school – the School of Biomedical Sciences of the University of Yaoundé. Thus, beginning in 2020, the academic year was adjusted to commence in January. This resulted in graduation being moved to the end of the calendar year. Graduation of this year's class is planned for November 28. We've very recently, therefore, been in the midst of conducting exams to conclude the current academic year.





Evaluation of a first-year resident via an audio Zoom session with our Canadian consultant.

From the inception of the residency, CIMS has benefitted from the help of a Canadian Internist. Dr. Brian Wirzba, clinical professor at the University of Alberta, has given of his time each year to travel to Cameroon for the purpose of conducting end-of-year resident examinations onsite. In the span of two weeks, Dr. Wirzba offers a written exam for the entire group, a bedside physical exam for each resident, and an oral exam whereby each resident is expected to offer a systematic approach to a hypothetical clinical problem. To our great dismay, the COVID pandemic made it impossible for him to join us this year. Testing therefore, in large measure, devolved upon the faculty.

Dr. Wirzba did, however, generously offer to conduct an oral exam remotely for each of the fifteen residents. This involved an early morning hour for him in Alberta and a mid-afternoon time frame for us. We quickly learned that our internet signal was not strong enough to support a video link. However, with sufficient advanced preparation, audio sessions were generally feasible. So, in addition to on-site testing, we joined the rest of the world in holding Zoom sessions remotely.

During this time, our internet services were very sporadic, leading to frequent interruptions and delays in the testing process. Also during this time frame, the sole back-up generator supplying the

hospital failed – further compounding not just our communication issues but, more importantly, patient care.



Working with another faculty member, Dr. David Sunday, to conduct a bedside evaluation for second-year resident.

The testing time spanned one month. During this period, faculty members developed a schedule to conduct on-site physical exams for each resident. In early October, a written exam was also administered to the entire group. As of October 20, testing was completed. What remains is the task of compiling results so that residents can receive feedback in a timely manner.

The pandemic-imposed isolation, the disruption to our usual way of life, and restrictions prohibiting outside help have been demoralizing. Amidst the pressures, the ever-present technical failures, and the discouragement, one can – like David – nevertheless choose to say, "Let the name of The Lord be praised!"

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