



Health Care Professionals Information Packet



Global Medical Brigades Healthcare Provider Packet

MEDICAL BRIGADES – Nicaragua

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Global Brigades, Inc.
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Dear Health Care Professionals:

It is our honor and privilege to welcome you to Global Brigades – the nation’s largest international student movement. By reading this information packet, you are already taking an important first step toward positive social change.

Global Brigades’ operations incorporate hands-on global health initiatives while respecting local culture. Thus, it presents a unique opportunity for you to apply your education, intellect and creativity to help the Honduran, Panamanian, and Ghanaian people realize their potential to change the world around them. We encourage students, volunteers, and health care professionals to use this time to build skills, networks, friendships, understanding, and stronger connections to our global community.

Thank you for your interest and leadership in Global Brigades. As a student-led movement, you have the freedom to truly make this experience your own. Ask for more. Share new ideas. Keep the momentum alive. Wherever this experience takes you and your team, we are here to support and guide you every step of the way.

Welcome to the Global Brigades family,

Dr. Shital Chauhan
CEO and Cofounder, Global Brigades

Dr. Jose Espinosa
Medical Brigades Director





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I. HOW TO GET INVOLVED

Join a Medical Brigade

Every medical brigade consists of dedicated student volunteers, medical and dental professionals, pharmacists, and auxiliary staff providing primary health care to rural communities. The group functions as a mobile medical and dental unit, setting up small clinics to diagnose and treat patients at no cost.

If you have any interest in joining one of our university chapters on a brigade, we will connect you with the nearest group whose brigade will coincide with your schedule. Healthcare professionals return from the trip having not only served underprivileged communities, but also having empowered the next generation of professionals to strive for global access to healthcare. We will provide you with all necessary information to help prepare you for a successful brigade in an environment unique to many existing programs.

If you are interested in joining a Medical Brigade, but do not know of a chapter nearby, please email admin@globalbrigades.org

Once you have joined a brigade, Global Brigades will need to verify with the local Ministry of Health that you are a licensed practitioner. In order to do so, an in country Program Associate will request the following documents from you directly:

1. Notarized copy of your diploma*
2. Notarized copy of your license, and any specialization certificates (if applicable)*
3. Passport copy
4. Resume/CV

*Notary must be on the copy of the documents, not on a separate piece of paper

Without these documents, healthcare professionals will not be allowed to practice in Nicaragua. Any medical student who has completed at least his/her fourth year can work as a healthcare provider under the supervision of a licensed professional accompanying the group from their home country or preferably the medical school the student is attending.

For medical students- an in country Program Associate will request the following documents from you directly:

1. A letter from the professor or dean of their school that states your status

Please note that the in-country law requires an in-country physician to accompany all medical brigades, and that this in-country physician will assume all medical liability for treatment received on brigades. We will provide an in-country physician to join your brigade; it is not your responsibility to recruit them.





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Support A Chapter's Brigade Preparation

If you cannot attend a brigade, you can still make a tangible difference by equipping students with the supplies needed for their brigade. It is essential that we have enough medications, anesthesia, and supplies in order to effectively treat as many people as possible. Without donations from members of the medical community, our brigades would not be possible. For a complete list of needed medication and supply donations, please see the appendix.

We also welcome monetary donations. Global Brigades is a non-profit organization, and all donations are tax deductible:

Step 1: Go to www.globalbrigades.org/chapters-map, and search for the university you'd like to support

Step 2: Select the appropriate brigade you wish to donate towards and click "DONATE"

Step 3: After making a donation, you will automatically be emailed a receipt.

II. How to Prepare for the Brigade

Basic Travel Needs

General list of necessities prior to traveling:

- Valid Passport which must NOT expire within **6 months** of departure from Nicaragua (the end of your trip).
- It is required to bring a vaccination record with proof of the following vaccines: Hepatitis A, Hepatitis B, MMR, DPT, Polio, typhoid fever, and Varicella Zoster.
- Please visit the CDC website for current information on what medications and vaccinations are recommended for travel to Nicaragua: <http://wwwnc.cdc.gov/travel/destinations/clinician/none/nicaragua>
- Any prescription medication currently being taken
- \$10.00 entrance fee to enter Nicaragua and about \$50-\$200 for souvenirs
- A cell phone is not necessary but cell phone service is available in some areas. If interested you will need to contact your cell phone provider for details on international service; sim cards will NOT be available.
- Emergency contact information: Upon your arrival, Global Brigades will send an email to your emergency contact, notifying them that you have arrived safely. This information will be collected via your chapter's president before your departure. This email will also contain in-country contacts and instructions for how to contact you should an emergency situation arise at home.

Accommodations

Upon your arrival you will be met by a Brigade Coordinator at the airport who will guide you to your bus, organize your luggage, and get you on your way to our accommodations. Our accommodations are one to three hours away from the airport depending on where you are lodging. Once you are settled in, you will be given a tour of the





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surrounding area until dinner. After dinner, there will be an introduction to the country, your program, and time to address any questions you may have at that point.

We will always try to provide healthcare professionals with room quarters that are separate from students. However, during busy brigade seasons this may not always be possible and therefore we ask that you be flexible. When possible, healthcare professionals will be placed with other healthcare professionals. A twin bed including sheets and a pillow will be provided along with a towel. If you require any additional items, please bring them with you. Running water is available in all accommodation sites, but it is often cold and has low pressure.

Bottled water for drinking will be provided. Breakfast and dinner will be communal and served buffet-style at the compound. Packed lunches will be provided in the community at the brigade site. If you have any special dietary needs or restrictions, please inform your group leader in order for our in-country staff to plan accordingly.

Your brigade will travel to the brigade site(s) each morning and return before nightfall. All traveling is done as a group in buses or trucks. Global Brigades ensures that each compound is safely secured by providing armed security around the clock.

Nicaraguan climate is characterized by two distinct seasons—dry and rainy. The dry season lasts from November through April and the rainy season from May through October. Suggested attire is light, airy clothing that can be worn in layers, as the temperature can vary greatly depending on altitude. Some rain gear is also suggested.

Most healthcare professionals bring scrubs to wear during the brigade. Nevertheless, it's best to bring whatever attire you will be most comfortable wearing in warm weather. Laundry facilities are not consistently available.

III. What to expect on the Brigade

Typical Brigade Format

Global Medical Brigades has treated thousands of patients in hundreds of different communities in Nicaragua. We see each community roughly every six months. During a brigade day, we treat around 300 patients in the community.

In our commitment to improving the long-term health of our communities, we visit communities every 6 months, in 3-4 consecutive days. We do this in order to be able to provide a larger range of services and a more focused education component. This arrangement ensures that each patient has the opportunity to spend more time during his or her consultation with a physician or dentist.

In addition to medical care, patients also have access to dental care. In Nicaragua, we offer restorative care in addition to extractions. We also offer PAP smears to all communities in Nicaragua. The results of these tests, as well as others for which our physicians may order referrals to be conducted at a hospital or clinic, are relayed





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through nurses or Community Health Workers (see “Community Health Workers” section below). On our brigade, all patients—both children and adults—receive education in basic hygiene and other regional-specific topics, including: dental care, water purification, home remedies, first aid, women's health, and prenatal care.

Spending multiple days in each community also enables us to enter a higher quantity and quality of information into OpenMRS, the patient management program that we use in our Data Informatics System. This information will not only enable us to provide follow-up care, but will also be used as an assessment tool for analyzing the health of communities as a whole and for measuring our impact over time.

Patients typically arrive in family groups and generally all the members have complaints. These are mostly primary care populations who need wellness check-ups; tropical medicine books are rarely necessary. (For a more detailed list on types of symptoms patients will present, see Patient Consultation Specifics in Appendix). As you practice, your goal is to empower and educate the patients to manage themselves within their local control. While many patients come to the brigades solely to obtain medication, it is also important to provide them with education on how to treat and prevent minor ailments so as to diminish sole dependence on brigades.

Most first-time physicians learn the brigade process as they go, developing a standardized approach to the main complaints that were seen throughout the brigade. This packet will help hasten this process, offer a more standardized approach to our patient population, provide the best care to all, and allow doctors to spend the most time with those in need.

Student Involvement

While it is important to remember that our highest priority is the health of the community members, our second priority lies with our students. To this end, it is important that they feel accomplished and that they gained knowledge in the process. Therefore, we will expect that in addition to providing quality care to our patients, you will act as a teacher to our students. If you have questions or are unsure of how to prepare for this role, we will be more than happy to offer guidance.

Brigade Location and Organization

The physical site of the brigade and details of the setup will vary depending on the community and available resources. Most often, the site will be a local health center in the community. Spatial areas or different rooms will be designated for distinct functions. Below is the patient flow chart of a typical brigade format. The brigade operates similarly to a traditional hospital. Patients will be transitioning from intake to triage to medical consultation to a gynecology and/or dental consultation (if necessary) and ultimately to the pharmacy. While waiting for their prescriptions to be filled in the pharmacy, adult patients will attend a public health education workshop while pediatric patients will partake in a dental education program. During the dental education program, children will receive a fluoride treatment along with materials and demonstrations for proper teeth

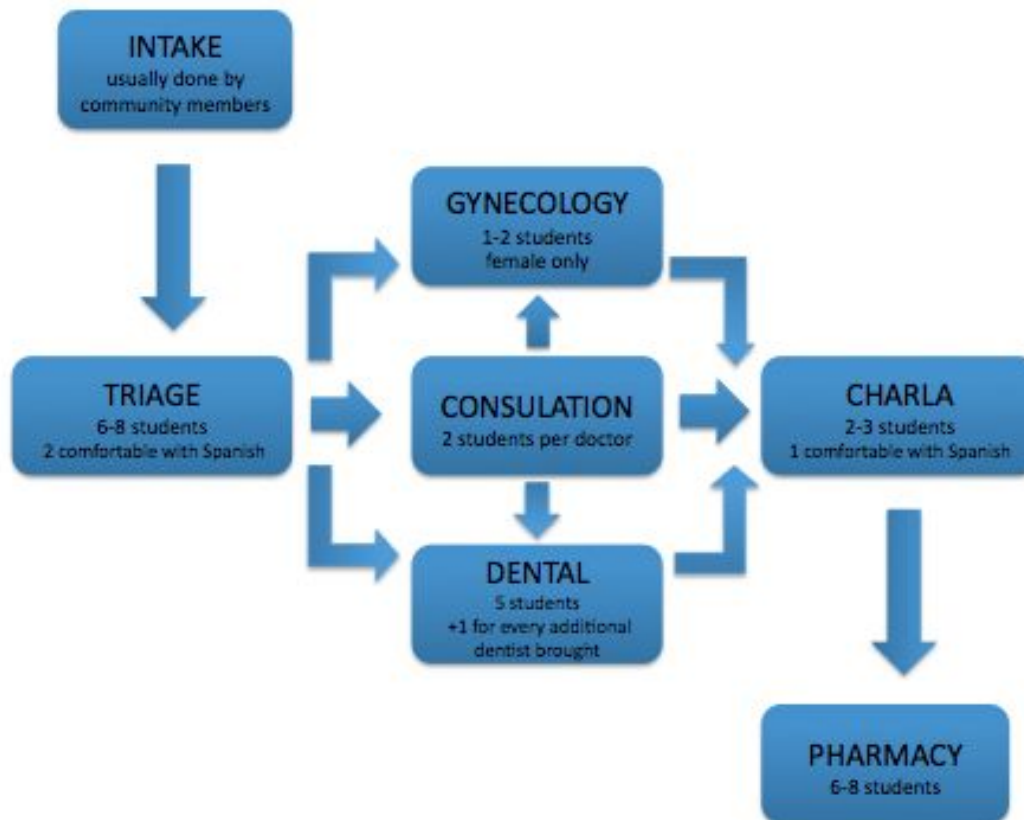




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brushing and dental and basic hygiene. After receiving their medication, all patients will turn in their patient sheet to staff members turning in the medications. Students will enter data into our OpenMRS program throughout the brigade stations.

Global Medical Brigades is currently working to create and encourage a more sustainable level of care for our communities. Before being treated, each patient is given a form that records demographic information, vital signs, complaints, diagnoses, and prescription information (see parts of form below). Generated reports based on the patient intake forms allow for the health trends of each community/village to be determined. Additionally, they contribute to the understanding of the overall basic medical health needs of Nicaraguans.



Intake: The first station is intake. Volunteers from the community will be responsible for operating this station and filling out the basic information in the section of the patient intake sheet shown below.

PATIENT INFORMATION

Name/Nombre	_____	
Date/Fecha	Age/Edad	Sex/Sexo
Community/Comunidad	_____	
Aldea/Caserío	_____	
ID Number/Numero de ID	_____ - _____ - _____	



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Triage: After intake, patients pass to triage, where they relay their symptoms/ ailments to volunteers who:

- Take blood pressure for patients 35 years and older, or with a family history of hypo/hypertension
- Take weight and height of children under 12
- Take temperature of children under 12 and those who complain of a fever in the past 3 days
- Gather information about medication and current health conditions

Family History / Antecedentes Patológicos Familiares: _____

Current medications / Que medicamentos está tomando?: _____

Medication Allergies / Es Alérgico a algún Medicamento: _____

VITALS/SIGNOS VITALES

Weight/Peso: _____ Height/Altura: _____ Temp: _____ Respiratory Rate/Frec. respiratoria: _____

Blood Pressure/Presión Arterial: _____ / _____ Glucose/Azúcar: _____ Pulse/Pulso: _____

PREGNANT/EMBARAZADA? YES/SI NO MONTH/MES _____ BREASTFEEDING/DANDO PECHO? YES/SI NO HA COMIDO HOY/HAS EATEN TODAY? YES/SI NO

REVIEW OF SYMPTOMS/SINTOMATOLOGIA

CHIEF COMPLAINT/SINTOMA PRINCIPAL: _____

Consultation: This station is comprised of healthcare professionals and interpreters when necessary. If you are not comfortable treating patients in Spanish on your own, you will be provided with an interpreter. Healthcare professionals consult, diagnose, and then prescribe medication best suited for each individual patient. Again, please note that an in-country law requires that an in-country doctor accompany all medical brigades and that this **in-country doctor will assume all medical liability for treatment received on brigades.** We will provide an in-country doctor to join your brigade; it is not your responsibility to recruit them.

The consultation room is often a shared room in a local health center and depending on the location, set-up will vary. Doctors can expect tables and chairs. The majority of supplies needed for the clinic, including gloves, hand sanitizer, and all medications are supplied by Global Brigades and are included in your individual program contribution.

Dental: This station is comprised of dental professionals who attend to patients wishing to receive dental services. The dentist will perform a routine consultation to determine which procedure the patient should receive. Treatments include: extractions, fillings, scaling, and/or sealant. Working alongside volunteering dentists will be at least one local dentist. The in-country law requires a local dentist to accompany all dental brigades. This local dentist will assume all medical and dental liability for treatments received on brigades. Dental professionals are also provided with an interpreter based on need.





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Flossing / Hilo dental Brushing / Cepillado Fluoride treatment / Tratamiento de fluor

Scaling / Raspado Prophylaxis / Limpieza

ODONTOGRAMA

Extraction / Extracción: (X)

Filling / Tapón:

Sealants / Aplicación de sellantes: (S)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
			A	B	C	D	E	F	G	H	I	J			
			T	S	R	Q	P	O	N	M	L	K			
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

Exam notes / Notas: _____

Gynecology: In this station, a Nicaraguan doctor will perform PAP smears and check-ups on any female patient who elects to visit the gynecologist. Foreign healthcare professionals are only allowed to perform PAP smears on brigades if they are licensed OB-GYNs in their home country. All female patients are asked if they would like to visit this station. Because Nicaraguan culture is more conservative than that of the United States, Canada, or UK, women are often reluctant to visit the gynecologist. We encourage regular checkups and screenings in our Public Health Education Workshops (see “Public Health Education Workshop” below) and every medical brigade offers gynecological services. The results of these tests are relayed through nurses or Community Health Workers (see “Community Health Workers” below).

Public Health Education Workshop (Charla): We realize that education is absolutely essential in order to truly change the health of any community. To this end, we have developed a number of presentations on topics such as basic hygiene, dental hygiene, first aid, and nutrition. The patients are seated in front of a presenter that facilitates an educational discussion. Meanwhile, the prescriptions of the patients are being filled in the pharmacy. Hygiene packs are also passed out at this station (bags of soap, toothbrushes, floss, etc.)





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Many of the topics covered in the charla are adult orientated. The community volunteer leading the charla is trained during the pre-brigade visit done by our Medical Program staff. Because many patients are children, students will have the opportunity to prepare and present dental educational skits, activities, and games for children. During this children's charla, each child will learn about basic hygiene, how to properly brush his or her teeth, and will receive a fluoride treatment.

Pharmacy: In this station, prescriptions are filled with the medicine students have fundraised for through their program contributions. A pharmacist oversees this station and answers any questions that students or patients may have. Medicines available on brigades vary depending on what the students are able to donate. A general list is provided at the end of this packet.

Data Informatics: Since December 2010, all medical brigades have implemented the use of an electronic medical record system (Data Informatics). The benefits of Data Informatics are numerous—we are able to analyze health trends within our communities, track patients over time, follow-up on previous conditions and offer better, more personalized care.

We have adapted the OpenMRS system, designed by Partners in Health, to function with our brigade model. Currently, we are using student computers to collect information primarily in the exam room with the students working alongside providers as data-entry clerks. Your role as a provider will be to work with the patient as well as the student to make sure that information is entered as accurately as possible. Paper forms will still be used for the time being as a backup in case of system glitches—they are still the only records used in the pharmacy (OpenMRS does not yet have a pharmacy module that is compatible with our brigade model). If all data isn't entered during the day, students spend some time completing the data entry in the evenings.

If you have any questions about the Data Informatics System or would like more information, please contact the Data Informatics Program Lead, Ariel Corrales, at ariel.corrales@globalbrigades.org

Patient Referral System

The Patient Referral Program was created at the suggestion of brigaders who were interested in improving the process of follow-up care after a patient leaves the brigade. Global Brigades' Patient Referral System helps to ensure that patients who require additional medical attention are cared for after a brigade.

While on a brigade, an in-country physician identifies a patient who needs some kind of follow-up care and writes a referral for that patient to visit their nearby health center or hospital. With this referral sheet, the patient is guaranteed to be seen and is advised to go seek the medical attention within a couple weeks after the brigade. A full-time staff member is dedicated to facilitating the referral system process and checking in with patients after their initial visits to the health centers.

All referrals are entered into the data informatics system providing us with the ability to track and monitor the patient. In addition, a staff member responsible for responding to emergency cases accompanies each brigade. If





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there is an emergency case on a brigade, the patient is transported from the brigade site to the appropriate location to receive the necessary care.

A small amount of funding for the Patient Referral System is included in the annual budget. However, many costs exceed the current funds allocated by the budget. Thus, we actively seek student involvement to fundraise and solicit donations for these patients to bring them the necessary care. The additional care provided by the referral system promotes a more sustainable health care system for our patients.

The referral process will be discussed further with healthcare professionals upon arrival in country. Please note: the in-country doctor and dentist is the only professional who can write a referral. If you have specific questions, ideas, or concerns, about the referral program please email jose.espinosa@globalbrigades.org.

Community Health Workers

Global Brigades also sponsors the Community Health Workers (CHW) Program, known as “Brigadistas” or “Guardianes de Salud”. The CHW Program currently partners with communities in Nicaragua to provide intensive health worker training to elected community leaders. The program was created to empower local leaders, to perpetuate a consistent level of health care and to improve access to medical and dental services inside rural communities. The program also provides CHWs with the knowledge to provide adequate follow-up care between medical brigades and prevent potential health complications.

The CHWs are trained through a 4 to 6 month course featuring a health promoters’ curriculum based on the well-known training books, “Where There Is No Doctor,” and “Helping Health Workers Learn.” Supplemental information for these trainings is taken from the Nicaraguan Ministry of Health. Topics of the course include first aid, tropical diseases, STIs, family planning and nutrition. The CHWs learn how to track the health status of community members and to teach them about preventive health measures. Each member is taught how to give basic treatment for acute diseases, to manage medication for chronic illnesses, and to refer complicated cases to the next level of care. This program has shown the capacity and importance of having trained CHWs in the communities.

The CHW Program is a way to bring more sustainability to the communities in which we work by educating community members on how to maintain a consistent level of health care. It helps to ensure that the good we are doing during Medical Brigades is being perpetuated after we leave by promoting the prevention of future health complications and for the follow-up care of chronic patients. For more information about the Community Health Workers Program please email marelyn.mayorga@globalbrigades.org.

V. Additional Information

Please visit our website (globalbrigades.org/volunteer-tools) for any of the following:





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- Testimonials from healthcare professionals who have worked with Global Medical and Dental Brigades in the past
- Information about safety
- Information about HIV prophylaxis

Contact Information

Dr. Jose Espinosa - jose.espinosa@globalbrigades.org, Medical Program Lead

Dr. Marelyn Mayorga - marelyn.mayorga@globalbrigades.org, Community Health Worker Program Lead

Ariel Corrales - Data Informatics Program Lead

VI. Appendix

Patient Consultation Specifics

Based on commentary by John Bachman, M.D.

These consultation guidelines were written for all physicians coming along with Global Brigades so as to provide them with an idea of the kinds of issues that will be faced and for suggestions on how best to treat patients. As with all medical care, your own judgment should always guide treatment.

Worried Well

As with any primary care population, most families will complain about ‘self-limited’ (a disease process that resolves spontaneously with or without specific treatment) illnesses. A disease model approach—“this is a URI, this is gastritis, this is low back strain”—will only lead to a superficial impact that leads to higher use of medication and repeat visits. On the other hand, a family based model will provide insight into the real issues leading to the visit. Asking questions such as “How do you feel with your pain?” opens the box to see if there are underlying issues of abuse, depression, and stress. Other questions to ask the patients include ones about primary emotions: “Are you angry (frontal headaches), sad (neck pain), anxious (jaw clenching), and to a lesser degree surprised, disgusted, joyous (pregnancy being okay).”

Cough and Cold

Coughs and colds are some of the most prevalent complaints for a variety of reasons including: in-house smoke, close confinement, and the simple fact that 50% of Hondurans are children. Remember to explain to the patient that viral infections are self-limited and that antibiotics are not useful. Encourage the patients to drink fluids, especially tea or hot water with honey (not for children < 12 months). This will also be covered in the education seminar on home remedies. This education seminar has been proven to be more effective in children than cough/cold OTC medications. DO NOT provide cough/cold medications to





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children other than acetaminophen/ibuprofen for comfort. Our goal is to have patients self-manage this illness/condition without our assistance in the future. Ear infections are also generally self-limited, but if they complain of ear pain it is reasonable to do an ear exam. If infected, you may treat with Amoxicillin (80 mg/kg/d) for 5 days in order to avoid yeast infections. If a child complains of sore throat look for Strep in order to avoid rheumatic fever.

Abdominal Discomfort

Many of our patients come in complaining of abdominal discomfort/pain, usually the result of parasites. Typical symptoms include bloating and decreased appetite. We treat everyone with Albendazole except infants and pregnant women.

Diarrhea

Diarrhea is generally self-limited with the biggest danger being dehydration. Management of diarrhea involves oral rehydration therapy. Brigades often have oral rehydration packets but you may encourage patients to make their own with the following recipe: Begin with 8 level teaspoons of table sugar (sucrose) and 1 level teaspoon of table salt mixed in 1 liter of boiled water. Fructose (fruit sugar) or artificial sweeteners should not be substituted for the table sugar in this recipe. A half-cup of orange juice or half of a mashed banana can be added to each liter both to add potassium and to improve taste (also included in home remedies). This recipe is preferable to sports drinks, which are formulated to rehydrate healthy individuals and thus contain too much sugar and too little electrolytes for this purpose. Remember that ORT should only be used for 12 hours and then nutrition should begin to supply potassium and calories for repair. Rice is an excellent supplement to add after 12 hours. The biggest drawback is confusing the amount of salt for the amount of sugar in the recipe. If you accidentally add 8 level teaspoons of salt instead of just 1 level teaspoon, it will result in eight times more salt than the child needs and this can be fatal. Make sure the parent tastes the solution. It should taste sweet not salty!

Dysentery

If the diarrhea is bloody it is reasonable to prescribe a combination of Cipro/Flagyl. This will cover amebiasis, giardia, campylobacter, and shigellosis. If amebiasis is truly suspected a longer course of antibiotics should be instituted.

Chronic Diarrhea

Giardia is common and is often associated with epigastric pain and diarrhea. Metronidazole is effective as is boiling water.





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Fever

Explain to patients, especially parents, that fevers in general are not dangerous (and explain warning signs that may indicate otherwise). A fever is simply the body responding to infection. It is reasonable to treat fever with sponge baths. Parents and siblings can use washcloths that have been made wet, spun in the air and placed on the body. When children have a fever, they should not be bundled.

Olivia's Syndrome

Many mothers carry children who are heavy and do hard work at home. Many have several children and are stressed. The resulting symptom complex (Olivia's Syndrome) is headache, shoulder, chest, arm, neck, and back pain. During the exam, you will find that the insertion of the pectorals will be tender and their TM joints will be sore. If you ask, most will say they clench their teeth. Treatment is daily massage of the neck and emphasis on postural mechanics when not carrying children. The simplest thing is to roll a towel and put it in the small of their back when sitting.

Scabies

Generally scabies, when present, will occur in multiple family members. Provide treatment to everyone, including those not present at the brigade, and also make sure bedding is washed. Instructions for treatment are on our scabies lotion bottles.

Vascular ulcers

Multiple pregnancies and age lead to varicosities and ulcerations. No topical agent alone will help that ulcer unless you use compression (ace wrap, etc.) If you use a wrap, cover the ulcer (under the wrap) with a dressing soaked in vinegar and water (this needs to be changed 3X/day). You can also cover it with honey -- a daily change is enough. Another suggestion is a solution of one part white vinegar and 10 parts water (previously boiled). Vascular ulcers are common in older women.

Skin conditions other than scabies

When patients sweat their skin may become dry (possible dermatitis). We usually have skin cream in our pharmacy. You will also see lots of fungal infections including tinea capitis and tinea pedis. Sometimes we have systemic antifungals, but we normally only have topical creams. It is therefore particularly important to talk about hygiene and how to avoid getting fungal infections, especially with onychomycosis.

Arthritis

Many patients will present with "dolor en mis huesos" (pain in my bones). Groups regularly take sufficient





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quantities of NSAIDs to provide patients some pain relief. For severe cases, referrals to a local clinic may be made, where intra-articular hydrocortisone injections can be provided.

Medicine List

The table below provides a list of all medications you will have available to you to prescribe on brigade:

Vitamins

Folic acid
Calcium 600mg
Iron + folic acid suspension
Adult multivitamins
Infant multivitamins (drops)
Children's multivitamins
Ferrous sulfate
Prenatal vitamins

Analgesics

Acetaminophen 120mg/5mL * 120mL
Acetaminophen 500 mg
Acetaminophen 80mg/1mL * 30mL
Antimigraine tablets
Diclofenac sodium 50mg
Diclofenac gel
Ibuprofen 100mg/5mL * 120mL
Ibuprofen 400mg
Methocarbamol 500mg

Asthma

Beclomethasone inhaler
Ipratropium bromide inhaler
Salbutamol(Albuterol) inhaler

Antibiotics for Adults

Amoxicillin 500mg
Amoxicillin + clavulanic acid
Azithromycin 250mg
Cefalexin 500mg
Ciprofloxacin 500mg
Clindamycin 300mg



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Dicloxacillin 100mg
Fluconazol 150mg
Metronidazole 500mg

Antibiotics for Children

Amoxicillin 250mg/5mL
Azithromycin 200mg/5mL *30mL
Dicloxacillin 125 mg/5mL * 120mL
Metronidazole 125mg/5mL * 120mL
Nystatin * 15mL

Allergies

Diphenhydramine 12.5mg/5mL
Diphenhydramine 25mg
Ketotifen 1mg/5mL
Loratadine 10mg
Loratadine 5mg/5mL *120mL
Saline solution nasal spray

Gastrointestinal

Albendazol 400mg
Albendazol 400mg/10mL
Antispasmodic tablets
Dimenhydrinate 50mg
Gemfibrozil 600mg
Aluminum hydroxide suspension
Omeprazole 20mg
Ranitidine 150mg
Simethicone drops
Simethicone 80mg or digestive enzyme tablets
Simvastatin 20mg
Oral rehydration salts

Cough and Cold

Ambroxol 15mg/5mL
Cold capsules
Liquid cold medication
Infant cold medication
Dextromethorphan suspension
Miel balsamica



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Chronics

Aspirin 81mg
Atenolol 100mg
Captopril 25mg
Carbamazepine 200mg
Enalapril 20mg
Gabapentin 400mg
Glibenclamide 5mg
Hydrochlorothiazide
Losartan 50mg
Metformin 500mg

Topical

Betamethasone
Clotrimazol
Diaper rash cream
Triple action cream
Hydrocortisone cream
Ketoconazole cream
Neomycin + clostebol
Permethrin 1%
Lice shampoo
Triple antibiotic

Vaginal

Clindamycin cream
Clotrimazol ovules
Metronidazole ovules

Optic/ophthalmic

Ophthalmic chloramphenicol
Gentamicin
Ophthalmic antihistamine drops
Ciprofloxacin-dexamethasone otic
Artificial tears

Venous Insufficiency

Factor P4





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Questions or concerns? Please don't hesitate to reach out to our team. Thank you for choosing to volunteer your time and skills with Global Brigades Nicaragua!

