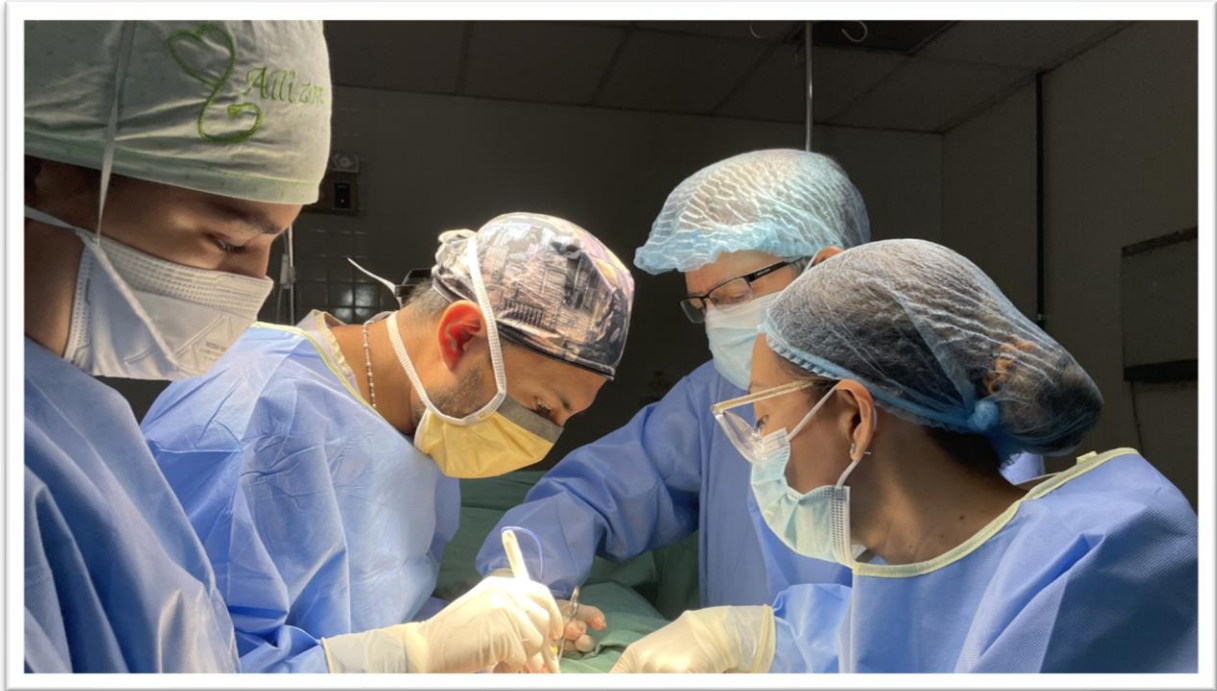


# **Surgical Resident Rotation at Hospital Nacional de San Benito, El Peten Guatemala**



**Location:**

Hospital Nacional de San Benito, El Peten Guatemala

**Duration:**

Four weeks

**TABLE OF CONTENTS**

Overview ..... 3

Mission Statement ..... 3

Requirements ..... 4

Expectations from Applicants ..... 5

Resident safety ..... 6

Signatures and approvals ..... 7

Traveling to Guatemala in the time of COVID ..... 8

Flights ..... 8

House and boarding ..... 8

References ..... 9

## OVERVIEW

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There are substantial differences in the delivery of health care between high-income (HICs) and low- to mid-income countries (LMIC). Marked differences emanate from available resources to health care governmental policies to training to local traditions to pathology encountered primarily within a specific population. Guatemala is a LMICs and El Peten is the largest district of the country. Hospital Nacional de San Benito (HNSB), a 144-bed facility located in El Peten, is the largest referral hospital within the department.<sup>1</sup> The most common elective operations are inguinal hernia repair and open cholecystectomy, which are performed in three operating rooms within the hospital. In 2021, 87 cholecystectomies were performed in the hospital. The most common emergent operation is an open appendectomy (n=127, in 2021). In 2021, 688 elective and emergent operations were performed at HNSB.

A notable difference in the surgical approach to appendicitis and biliary colic between hospitals in United States and HNSB is the laparoscopic *vs.* open approach.<sup>2,3</sup> In U.S. hospitals the gold-standard approach to benign gallbladder disease is laparoscopy.<sup>4</sup> However, at HNSB, even in the elective setting, cholecystectomies are performed via the open approach.<sup>3,5</sup> Similarly, the diagnosis and management of acute appendicitis between U.S. hospitals and HNSB is markedly different.<sup>2,6</sup> Currently, most U.S.-trained residents rarely perform an open appendectomy in adult patients and elective open cholecystectomies are similarly seldom performed. Additionally, emergent inguinal hernia repairs are less common in U.S. hospitals compared to HNSB.<sup>4,7</sup>

With these differences, HNSB presents a unique environment for U.S.-trained residents to develop skills in open techniques. Simultaneously, residents will bring a unique perspective in the management of surgical issues to the operating surgeons at HNSB.

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## MISSION STATEMENT

The primary goal of a surgical rotation at HNSB is to expose surgical U.S.-trained residents to the substantial gaps between HICs and LMICs. This would hopefully translate into training future surgeons interested in minimizing/eliminating this gap.

A second goal of this rotation will be to train U.S. residents in open surgical techniques that are less commonly performed in U.S. residency programs. Residents will also be exposed to surgical pathology differently encountered in LMICs compared to U.S. hospitals.

U.S.-trained residents will also bring a new perspective to a LMIC to discuss different treatment options and approaches to surgical disease.

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## REQUIREMENTS

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1. Residents must have completed at least two years of surgical residency at a U.S.-ACGME accredited program
2. Be a good standing resident within the residency program: an accompanying letter by the program director is required for participation indicating good standing and permission for participation in the rotation
3. An updated CV
4. Commitment to participate in all activities related to patient care at HNSB and private hospitals in El Peten Guatemala
5. An additional letter of recommendation from an individual other than the PD
6. A one-page statement addressing the following points: (1) why this rotation? (2) what does global surgery mean to you? (3) what benefits do you expect to bring to this rotation? (4) what do you expect to gain from this rotation
7. Approval of all documents and letters by Dr. Huerta and the current chief of surgery at HNSB with a written letter signed by both
8. Residents must be proficient in medical Spanish to be able to communicate with staff and patients at HNSB. This will be determined by an interview with Dr. Huerta.

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RESIDENT SAFETY

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Dr. Huerta has been traveling to HNSB since 2014. He has since been traveling to the same hospital two to three times a year. In none of these trips has he witnessed any form of violence or danger in the places that he has visited. The place where students and residents are expected to stay is the island Flores, which is highly touristic. HNSB is in a much less touristic area. However, the security around the hospital is magnificent and no one is allowed into the hospital without a reason or an identification card.

Medical students have been traveling to El Peten Guatemala for research electives since 2016.

1. Juan Herrejon in 2016
2. Corey Timmerman in 2017
3. Arifa Plummer in 2018
4. Maria Ruiz in 2019

Testimonials from all these students have been extremely positive regarding safety. However, there is no place in the world that is 100% safe. Thus, caution and common sense are expected to all that visit Guatemala.

Multiple surgeons and friends of Dr. Huerta will be looking after the safety and security of the residents during the rotation.

The U.S. State department has travel advisor recommendations for anyone traveling anywhere in the world and residents are encouraged to review these at the time of their departure to El Peten Guatemala and report any concerns to Dr. Huerta.

[Guatemala Travel Advisory \(state.gov\)](https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories/guatemala-travel-advisory.html)

<https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories/guatemala-travel-advisory.html>

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SIGNATURES AND APPROVALS:

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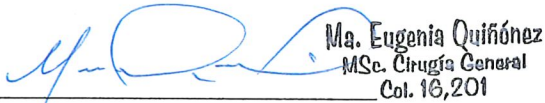
The following documents serve to certify that residents from a U.S.-ACGME accredited program who have completed at least two years of surgical training and are in good standing can participate in the operating room as surgeons or first-assist under the direct supervision of a staff physician at Hospital Nacional de San Benito and the distant supervision of Dr. Huerta. Residents can also see consults, assist in clinic, and perform minor procedures in clinic or in the emergency room. This document also certifies that Dr. Huerta has privileges to operate and see patients in clinic and in the emergency department as well as in house at HNSB.



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University of Texas Southwestern Medical Center  
Staff Physician  
VA North Texas Health Care System



**Cesar Augusto Ortiz Vargas, MD**  
Director  
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Hospital Nacional de San Benito



**Maria Eugenia Quiñonez Arias, MD**  
Chief of Surgery  
Hospital Nacional de San Benito

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## **Traveling to Guatemala in the time of COVID-19**

- As of January of 2022, it is safer to be in Guatemala than it is in the United States. Omicron has not had the effect that we observed in the U.S.
- I was in El Peten, Guatemala at the Hospital Nacional de San Benito (HNSB) from January 18 to January 22, 2022. This was the first trip that I made in the time of COVID. The goals were:
  - To determine what is like to travel during the time of COVID to Guatemala
  - To determine how COVID has affected HSNB

Traveling was easy and SAFE.

- There is an app called VERIFLY, where the vaccination record and the results of a negative COVID test can be uploaded. Once the information is reviewed and accepted, a check mark on the application deems the traveler safe to travel at the airport leaving the U.S. and on arrival to Guatemala, other than that, the passport is all that is needed.
- The COVID test can be performed with a home self-kit. I did this and there were no issues. I took an extra test for the way back, but it was not needed because HNSB did a free test for me. VERIFLY can also be used to come back to the U.S.

### **Flights**

Flight into Guatemala City and then to Flores:

DFW has frequent flights to Guatemala City. The flight from DFW to Guatemala City is 3 hours and 10 minutes. From Guatemala City, there is a second flight to Flores international airport. This flight is about 45 minutes. Currently two airlines are doing this flight. The most familiar to Dr. Huerta is TAG. All the flights to El Peten Guatemala and back to the U.S. can be arranged in advanced in the United States.

A second alternative is to fly to Belize and then from Belize to Flores. However, this alternative has been more challenging based on Dr. Huerta's experience.

### **House and Boarding:**

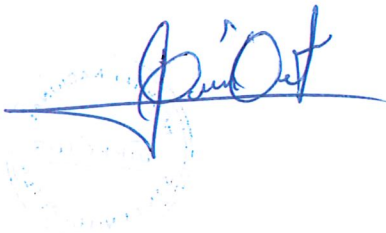
1. Housing TBD
2. Food and transportation TBD



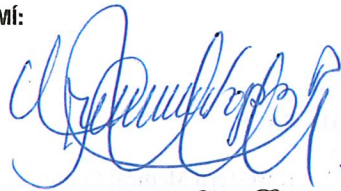
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En la ciudad de Guatemala, el día doce de julio del año dos mil veintidós, Yo Edith Cristina López Barrios, como Notaria Doy fe: Que las firmas que anteceden a la presente, signadas únicamente en su anverso, son **AUTÉNTICAS** por haber sido reconocidas el día de hoy en mi presencia por el señor **Cesar Augusto Ortiz Vargas**, quien se identifica con el Documento Personal de Identificación, Código Único de identificación número Un mil setecientos setenta y siete espacio cuarenta y un mil novecientos noventa y seis espacio un mil setecientos tres(1777 41996 1703), extendido por el Registro Nacional de las Personas de la República de Guatemala, Centroamérica. El signatario firma la presente acta de legalización, a la que se adhiere los timbres de Ley.



ANTE MÍ:



*Edith Cristina López Barrios*  
*Abogada y Notaria*

