



SONOGRAPHERS' COMMUNICATION

Observations of Sonographer Participants on the *ASE Global: Focus on India Outreach Trip*

David Adams, RCS, RDCS, FASE

In January a team of nine sonographers from the ASE travelled to India to provide cardiovascular ultrasound to an underserved population there. Organized by Dr. Partho Sengupta from Mount Sinai Hospital and Rhonda Price from the ASE, and supported by an educational grant from GE Healthcare, the sonographers and their physician counterparts scanned over 1,000 patients in two days.

While much has been written about this trip (see www.asecho.org/FocusonIndia), we wanted to use this space to allow some of the sonographers on the trip to tell of their experiences.

"I had absolutely the most incredible time in India," said **Sue Maisey, MBA, RDCS, RCS, FASE**. "Unlike my colleagues, I was born in India and raised here in the United States. For me, it was like seeing an India that could have been my home if my family had stayed there. I did not realize how poor the living conditions were for so many millions of people. It made me so thankful for what we have and what we take for granted each day," she continued. "The things we complain about are nothing compared to what the people there endure on a daily basis. I was inspired by the patience and happiness that seemed to radiate from everyone we met.

"The trip was well organized and everything ran smoothly. I can only imagine how much planning had to have taken place before this came into fruition. Many asked if we had known each other for a long time, although we just met at the airport when we were boarding the flight to India." Sue noted the cohesiveness of the team: "we all had the same goal: to provide cardiac ultrasound testing to as many people as possible. There were millions of people at the meditation camp; several thousand were waiting to see physicians for medical care. While we worked past midnight, slept and worked in a cold environment, and ate food that we weren't use to, there was never any complaining or negativity. It was a pleasure to work with such people, not to mention the patients, who were so kind and grateful that we were there."

"Yes, we had an amazing trip, saw an incredible portion of India, and have images—digital or in our minds—that will persist forever," noted **Barry Canaday, MS, RN, RCS, FASE**, who appreciated some of the more unexpected rewards and challenges of the trip. "One of the great moments came when we all realized how much we were attached to our digital devices when back home, and that here, we had none! We were freed of the continuing/incessant/nagging/required/never-ending/obligatory/mandatory/intrusive umbilical attachment to some 'mother ship' that interrupted our work days, essentially micro-managing almost all of our time. We could talk among ourselves, and we did! We also could just enjoy the Indian countryside as it whizzed by while we were on the bus. 'On the bus'—that's a great phrase—and it was a significant part of the adventure!" He laughed to remember that the long bus rides "opened up one of the personal tests on the trip—staying awake—so that you weren't immortalized in digital form, asleep, mouth wide open. There are always unforeseen new challenges in life!"

Robert Young, BA, RDCS appreciated "the opportunity to see and experience parts of the culture(s) that our patients called their own. Our group had a wonderful time together as we visited beautiful historical sites, experienced Indian cuisine, and worked together to serve the patients who came to our tables." Robert appreciated the support of the local volunteers, noting that "more important than



Sonographer David Adams performs a focused study on a young patient in India.



The ASE sonographer team (left to right): Barry Canaday, Thomas Van Houten, Minnie Thykattil, David Adams, Georgeanne Lammertin, Robert Young, Sue Maisey, Bharat Patel, Ingrid Altamar.

the large number of echocardiograms done in a short time is the number of patients who left with a diagnosis and a better opportunity to have that diagnosis addressed by capable clinicians. We could not have done so much so quickly without the enthusiastic help of the many volunteers who translated, kept the lines moving, and brought us coffee, tea, and snacks to keep us going. We were literally doted upon by our hosts.

"I left India thinking of the implications of our successes on this trip," said Robert. He went on to wonder "what if many smaller groups were to visit small hospitals across Africa or Central America, providing similar services for patients who do not have access to diagnostic imaging? Perform the echocardiograms, upload the studies to a server so cardiologists from any location can read them and provide guidance to the local caregivers. Experience gained through events like this India trip will help shape healthcare delivery to remote areas of the world. It was an honor to be a part of that process."

For **Bharatbhusan Patel, RDCS, FASE**, "it was such a humbling feeling to help these individuals, who have no other course to take care of their ailments but through projects like ours. They waited in lines for long hours to be scanned. They ranged from newborns to adults, and their smiles and hugs were more than enough thanks. We scanned till 1:00 am on first the day, yet none of us felt tired.

“As a long time sonographer, I found this a perfect time to give back to society what I have gained from my profession over the years.” Bharat offered this advice to fellow sonographers: “take every opportunity to give back, without hesitation, to people without resources.”

“The trip to India was not at all what I expected,” said **Tom Van Houten, RDCS, FASE**, “but if you asked me before I went, I don’t know that I could have told you what I expected. I felt privileged to be included. To help and serve those who don’t have access to all that we do here in the U.S. was a rewarding experience, to say the least. For anyone who has the opportunity to do something like this, I’d highly recommend it.”

Minnie Thykattil, MS, RDCS, enjoyed the experience of working “with dedicated colleagues from across the United States in an impoverished community across the world. All of us are better for this experience, and have bonded both professionally and personally.

“Meeting the people I was helping directly, on the ground, was challenging and rewarding and taught me that everyone deserves appropriate, preventive and personal medical care. It was overwhelming to see the massive crowd of patients waiting to be scanned each day,” she said. “We were rewarded with the knowledge and gratitude of the many we served, and I am sure this experience will help drive future success in bridging cultures.”