This 31st Medical Practicum to Central America was the 21st to Nicaragua and the fifth to the remote villages of the Alto Wangki-Bocay accessible only by dugout canoe. We held health clinics for nine days in the communities of Somotignes, Amak, and Wisuh, the last two of which are Mayangna indigenous people. This work was made possible by contributions from many individuals, businesses, and organizations.

Medicines and medical supplies were obtained with $15,824 from 30 donors, with Brotherhood Mutual being the largest contributor. Many items were purchased in Nicaragua through Acción Médica Cristiana, a Nicaraguan non-governmental organization that establishes nonprofit pharmacies in underserved regions. Patterson Dental of Spokane, Wash., and Manchester Family Dentistry of North Manchester, Ind., donated most of the dental items. CTK BioTech donated the Chagas tests. Blessings International and World Dental Relief provided the remaining items for low prices. Any medicines and medical supplies not prescribed or consumed in our clinics were left with the nationwide system of small clinics called Sistema Local de Atención Integral en Salud (SILAIS).

We performed 1,440 medical consultations, saw 87 dental patients, and extracted 132 teeth, focusing on acute care. For the third time, we used a “see and treat” approach for detection and treatment of cervical pre-cancers, with acetic acid visual inspection and CO\textsubscript{2} tank cryotherapy. Lab testing included diabetes (HbA1c), \textit{H. pylori}, pregnancy, sexually transmitted diseases, and, for the first time in the region, wide-scale screening for Chagas disease. All medical work was done in coordination with the Nicaraguan Ministry of Health and its SILAIS division. A veterinarian accompanied us for the third time, deworming 71 cattle, 68 dogs and 232 pigs, 3 mules, and 16 horses.

Our group from the United States counted 16 students, six physicians, two pharmacists, two nurses, one dentist, one dental assistant, one veterinarian, one laboratory coordinator, three support people, and faculty. In Nicaragua, our group added eight English-Spanish translators, two assistants, two physicians, one community health worker, one nurse, two watchmen, and 12 boat drivers. This group of 64 people traveled 160 miles in six motorized dugout canoes to access the communities, where we ate food prepared by villagers, purified water, slept in hammocks, and lived without electricity. Many relationships started and flourished, both within our diverse group and also between group members and villagers.

The goals of the Manchester University Medical Practicum are to educate undergraduate students through working with U.S. health care providers as they provide health care in an international, less-developed setting. Working and living alongside U.S. health care providers was a wonderful educational opportunity for the students. The students also learned an incredible amount about poverty, structural inequalities, cultural differences, communication in another language, and living outside their comfort zone. We provided health care and became better able to see the world from the viewpoint of other people. These results lead us to believe the 2015 Medical Practicum was worth the effort.

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