Resource Guide

Generated November 21, 2026 · 3 open facilities · closed facilities are not listed · call before you go: details change quickly

Haiti

Cloud Forest Medical Clinic – "CTC – CHOLERA TREATMENT CENTER" (Supported by: Humanity First USA and Haitian Christian Outreach HCO)

Medical Facility · Open

Medical Clinic

Lat: 18.314764; Long: 72.227273; Alt: 5,355 ft, Baie d'Orange (Sequin area)

Web wherethestarsstillshine.org/id11.html
Service Temporary

5/19/11 Email from Kyle Denison Martin
There is some concern that there is a small outbreak occurring in the mountain communities of Seguin and Upper Macary. Dr. Clayton Bell and the Cloud Forest Medical Clinic (Baie d'Orange) have confirmed that there have been three deaths recently and an increase in cases near Parc Lavisite and Upper Macary.

On Sun, Jan 9, 2011 at 9:28 PM, Clayton Bell wrote:

HEAS,

We were able to confirm our river cholera samples from Mawiotie Bouret via a rapid test from MSF Spain. We are hoping to pick up a test kit tomorrow and start on a Cholera Recon Mission into the river valley where we obtained the initial hot tests. From there we will travel by foot East through the remote mountain villages and conduct recon as well as set up ORS Stations and distribute Aquatabs and education. We are so busy it would be impossible for us to make it down to Grand–Anse at this time. If you can bring the samples to us we will do it here for you (pending if we get the test kit). Cholera is very sensitive to acidity and heat. Boiling water for 1 min will kill the vibrio in infected water. I would boil for 5 min though and use aquatabs to be safe.

Also if someone can shoot me contact info for the Kenscoff Orphanage we can rendezvous in Kenscoff and test your water samples. We will be coming through early Thurs morning or Wed evening.

For the next 2–3 weeks we have volunteers lined up for the Cloud Forest Medical Clinic & CTC. As Jim mentioned we have seen 35 cholera cases here (25 admissions in the past 11 days). MSF Spain built us an amazing CTC facility, so we are well prepared for the expected surge of cases that we expect over the following 2–3 months. I want to start lining up volunteers for Feb & March now so please contact me or Kyle if you are interested.

We have no access to fuel within 1 1/2 hrs and are spending $21 on diesel per night. That will be $1,800 for the next 3 months. We can save a lot of money by obtaining some deep cell batteries (8–12) and an inverter. MSF Spain said they think they can possibly get the batteries, but an inverter and solar panels would be extremely beneficial as well.

We need motorbikes, 4 wheelers or rhinos to access these remote regions with speed and efficiency. We are hoping to purchase a 4x4 truck next week (compliments of Humanity First) which will make our logistic challenges much easier.

MSF Spain is also hooking us up with a GPS unit tomorrow to start marking recon locations, ORS Stations, infected water sources, infected villages, patient deaths, etc...

If you would like to volunteer or help contribute to our "Compe Kolera Campaign" in the Sud–Est MTNs contact me. The sheer breadth of our physical area and remoteness invites all NGOs to join in this cholera prevention, education and management mission. Because of our staff of medical volunteers which came in this evening, I will be freed up to do a remote Mountain Recon Mission for the following few days and will be out of contact.

Namaste,
Clayton Bell, MD
Cloud Forest Med Clinic & CTC
Humanity First USA
"Where the Stars Still Shine"
www.wherethestarsstillshine.org

1/8/11 Email from Dr. Clayton Bell
This is my first email in 5 days so here goes.

1. We have seen 31 cholera patients, 21 admissions in the past 11 days. 2 deaths. Most patients are from Seguin (NW 15 min hike) and Baie d'Orange(surrounding zone to our East and immediate North & South). Cases have come from all directions with a higher propensity from our mtns to the North and NW.

2. We are operating a fully functioning 20 bed CTC. It is equipped with everything (kitchen, log quarters, latrines, etc...) to classify it as a CTC. MSF was very clear with me about the classification. We expect to add 10–30 beds over the following 2–3 months. All data trends suggest we will continue to increases in cholera patients over the following 2–3 months. The rainy

seasons begins in 2 months as well so things should crescendo at that point. We need to stockpile supplies now while things are still relatively quite.

3. We have 3 MSF National Nurses who are assisting us. MSF Spain will be sending 3 nurses per week to help out over the following few weeks. I called Dr Loubert from MSPP (Med Director of Marigot province) about more nurses. He has yet to call back. Will speak to his superior, Dr Deslouches, in the coming days. I am planning to hire 1–3 full time nurses but we will be in dire need of additional medical personnel in the upcoming weeks and esp months.

4. As Kyle previously mentioned. We are perfectly geographically and socially suited to launch a Forward Staging Reconnaissance Expedition.

Looking forward to meeting with you soon Jim and Ron. I have CCed Paul to this email. epidemiological questions can be directed towards him for the time being, then Kyle will be the man to speak with.

Namaste,
Clayton Bell, MD

From: James Wilson <jim.wilson@ praecipiointernational.org>
Date: January 3, 2011 4:33:13 PM CST
To: haiti–epidemic–advisory–system@googlegroups.com
Subject: FLASH REPORT: Possible contamination of Sud Est Mountain Region river

HEAS,

I'm relaying the below information to you courtesy of Dr. Clayton Bell of the Cloud Forest Medical Clinic / Seguin. As you may recall, the Seguin Plateau and points west, south, and east have reported cholera. Dr. Bell estimates they have now seen >25 cases locally with 2 fatalities seen by their medical providers. But with the discovery of Mawotie Bourette's 15–20 fatalities last week during his on–foot multi–hour expedition, this again highlights the high vulnerability of the isolated peoples of this region. Water samples tested by Dr. Bell's team at Mawotie Bourette tested positive (rapid test) for cholera, implying threat to all of the communities downriver. In the attached jpg image, Mawotie Bourette is highlighted east of Furcy, as is the suspected contaminated river, highlighted in BLUE.

Thanks to the hard work of MSF–Spain, Cloud Forest now has a CTC, however they are in need of nursing staff and community educators. This is not an insignificant challenge given the sheer breadth of area and challenges for transportation. Cloud Forest is in need of the following:

1. staffing– nurses
2. no local access to fuel
3. no access to ATVs or motorcycles to enable rapid surveying of villages distant from Cloud Forest
4. GPS units needed for village / event site mapping

We view Cloud Forest as a premier staging site for mountain recon, with interest in Furcy and several other secondary staging sites. This evaluation is ongoing. I will take the initiative to move this information to the HEAS ARO portal but ask that all members of the HEAS community in position to assist consider this information.

Thanks,

Jim

This site is not 'officially' designated as a 'CTC' on the latest PAHO list dated 12/13/10, however, it is set up as one per the email below dated 12/23/10 as advised by Dr. Clayton Bell.

RE: Large Tent Needed for CFMC in Sud–Est
Tuesday, December 28, 2010 12:46 PM
From: "Christophe Block" <block_c @hotmail.com>
To: christinakr58@ gmail.com, haiti–epidemic–advisory–system@googlegroups.com
Cc: tonofearth7 @ yahoo.com

MSF Spain has answered the call. Thanks all!

Christophe Block RN
Humanity First USA
Where The Stars Still Shine
Cloud Forest Medical Clinic
http://wherethestarsstillshine.org

Large Tent Needed for CFMC in Sud–Est
Tuesday, December 28, 2010 7:23 AM
From: "Kyle Denison Martin" <kdenisonmartin @ gmail.com>
To: haiti–epidemic–advisory–system@googlegroups.com, "Clayton Bell" <tonofearth7 @ yahoo.com>, "block_c" <block_c @ hotmail.com>

Hi everybody,

Dr. Clayton Bell and I are looking for a large tent that we could use to set up a cholera treatment near the Cloud Forest Medical Clinic (CFMC) in Baie d'Orange/Seguin (Sud–Est Department). Please contact kdenisonmartin@gmail.com or tonofearth7@yahoo.com if you can help.

We are willing to come pick up the tent, if necessary. Thanks much!

In kindness,

Kyle Denison Martin
kdenisonmartin @ gmail.com

12/23/10 HEAS Watchboard note from Jim Wilson:

""Supply drop for 48 hrs' of materiel sent on 12/16. Will likely need very close monitoring given strategic location of site within vast Sud Est Mountain Trade Nexus".

Phone convo with Dr. Bell indicates situation deteriorating rapidly. Narrow window of time now to mobilize CTC assets, including personnel, to Cloud Forest Clinic as a staging site for Sud Est mountain region."

Re: Sud Est Mountain Region: Emergency Conditions Overview
Thursday, December 23, 2010 6:22 PM
From: "Clayton Bell" <tonofearth7 @ yahoo.com>
To: haiti–epidemic–advisory–system@googlegroups.com

The CTC in Seguin is up and running. Supplies are limited, initial estimates place supplies lasting for 10–20 acutely ill patients. We have set up the CTC in the local school over the holiday break. It currently has 15 beds and we have room to expand to nearly double that size, provided we receive more beds (cots).

Our current limiting factor is the rural landscape. We are focusing our efforts on actually getting the sick patients in the surrounding areas to our facility. We are heading out tomorrow in all directions to establish contacts in each village. We plan to then use these contacts for intel, education, and distributing supplies.
In a side note, we have acquired moto drivers who are willing to transport sick patients to the clinic.

If we can get personnel to the mountain to man the CTC it will free us up to head out via foot to establish mobile clinics. In an optimal scenario we could get a team of 2–3 personnel minimum to man the CTC. Then with 4 teams of 2 led by our local points of contact we could head out via motos, machines, and foot travel in the 4 cardinal directions traveling to the villages that are in need.

However, we will be unable to leave the CTC until we can get personnel to the mountain to assist in running the CTC. This is our greatest need.

Namaste,
Clayton Bell, MD

12/23/10
From: "James Wilson"
To" "Clayton Bell"
Cc: haiti–epidemic–advisory–system@googlegroups.com

Hi Clayton,

Thanks so much for this detailed report. It is much to our chagrin that we had, in fact, heard of "20 fatalities" in "Morotiere Bourette" from one of the Furcy elders– she was quite specific and emphatic they needed help emergently. Unfortunately, we were unable to get a GPS coordinate or any other map location for the village. That is not the only one either… It is very frustrating not to have an accurate mapping of the Sud Est mountain region.

We may want to approach the Catholic Church in Furcy to see if they would be willing to serve as a sister CTC to Seguin given the unbelievable logistical challenge we are seeing. Furcy has a helo LZ right next to the church (a soccer field).

In regards to reports of "hemorrhagic fever", we note the following:

1. All four serotypes of dengue are present in Haiti at hyperendemic levels. Theoretically, it is possible to see dengue hemorrhagic fever (DHF), however in the nearly 12 months of HEAS operations we have not seen a single report in Haitians and have not seen one epi intel report in years past stating the clinical presence of DHF. The going hypothesis, after checking with world experts in dengue epidemiology, is those of African descent may carry genetic traits as yet undefined that provide protection against severe dengue infection. Further, we have exited the major rainy season…

2. We have been unable to find documentation of yellow fever in Haiti in the last quarter–century.

3. Leptospirosis might be a consideration, however it is anecdotally associated with periods of flooding. We are largely out of the major rainy season.

I default to "cholera" until proven otherwise. Over the years our team has spent monitoring Africa, we have seen claims of "hemorrhagic" this or that associated with very bad (IDIS Cat 5) cholera epidemics in areas without medical support. People

experiencing cholera with the perception of the situation being out of control (i.e. up to 50% fatality if untreated) and without hope of medical intervention often describe the situation in the most grave of terms and use explicatives that are non–routine and unusual for the community involved. Under such conditions, communities often disintegrate, meaning transient voluntary evacuation– which often facilitates the spread of the disease.

This region requires immediate, aggressive evaluation with mountain–ready expeditionary teams and multiple carefully considered CTC staging sites with helo LZs.

Cheers,
Jim

On Dec 23, 2010, at 9:10 PM, Clayton Bell wrote:

HEAS Colleagues,

> Today we hiked from the Cloud Forest Medical Clinic in Seguin over the mountains to the North and stopped in the mtn village of Carrefour Badjo. Badjo is situated about 1/2 way between Kenscoff and Seguin on the main trade route 101. A local community leader, Pastor Raymond, called a community health meeting and over 80 local villagers attended. We gave a 2 hr lecture on cholera which included an intensive Q & A session and handed out Aquatabs to all participants. We were able to ascertain knowledge that there have been 19 reported cholera deaths between Ti Boucan (village a 1 hr hike to the South from Badjo) and the Kenscoff area. The most alarming statistic was that 17 of these deaths have all been from the remote mtn village of Mawotye Bouret (Marotie Bourette, not sure of exact spelling). This village is apparently very isolated and a 2 hr hike to the East of Badjo. They have no medical personnel and have had much trouble getting their sick to a CTC. Villagers told me that many of their cholera patients had been sent to Fermate to receive healthcare (most likely to the Baptist Mission but I have not confirmed that with anyone who works there). The villagers in Badjo were very frightened about cholera and extremely eager to learn preventative measures. Today we also had 4 people delivering cholera prevention education and selling aquatabs at the Seguin Market which is attended by about 1,000 people every Thurs. Yesterday we had 2 teams deliver cholera prevention education to the market in Mabriole. Tomorrow we have 2 teams delivering education and aquatabs to the village of Fean Jean Noel and the large weekly market in Marigot/Peredo area.

> In the Seguin/Baie d'Orange region we had 4 confirmed cholera cases as of Tues. In 3 cases the patient had become infected in the Port–au–Prince region and brought the illness back with him. One case was a transfer from husband to wife; she needed 38 L LR & 1 L D5 to resuscitate her. Our 4th patient died in a convulsive vomitous fit within 10 min of me seeing him and hooking up 2 IVs. On Wed we had 3 children present to the clinic with cholera. One of the children is still here with us receiving ORS and food; his mother left him and has not returned. The cases we know of likely represent a very small proportion of actual cholera cases in the area. Our geographical isolation and that of the communities we serve creates a physical barrier to timely initiation of healthcare. We have our CTC/CTU up and running as of today. We are lightly stocked but can handle the first wave. Immediate resupply will be needed thereafter. Thus far our life saving treatments have taken place in the patients' homes as they were too weak to walk to our facility. We need personnel to man the fort here so we can go mobile and reach our patients before it is too late. If anyone has access to a dirt bike, rhino or 4 wheeler that would help immensely. We are in the process of obtaining a 4x4 truck thanks to Humanity First, hopefully we will have it within the next few days.

> With regards to the mystery hemorrhagic fever we have seen no cases at the Cloud Forest Medical Clinic. Nor have we encountered any cases in our house calls, recon missions or treks over the mtns. The area described falls into our patient base, if we see any cases I will notify HEAS.

Namaste,
Clayton Bell, MD

From: Kyle Denison Martin
To: haiti–epidemic–advisory–system@googlegroups.com
Cc: Clayton Bell; James Wilson
Sent: Fri, Dec 17, 2010 8:04 am
Subject: Cholera Update: Sud–Est Mountains

Here is the most recent update on the cholera situation in the mountains of Sud–Est, Haiti:

The initial case of cholera in Baie d'Orange is recovering well after transitioning from IV fluids to ORS. His wife (the second case) has required a large amount of IV fluids to replenish her bodily needs but is expected to transition to ORS later today.

A third case has developed near the home of the first two individuals. A 20 year–old male from Petionville (where he is a student) developed acute diarrhea on 12 Dec after arriving in Baie d'Orange. His family members gave him "a pill" (assumed to be loperamide) that briefly stopped the diarrhea. However, his symptoms soon resumed and, beginning on 15 Dec, he began vomiting a clear liquid. The patient was

given doxycycline and IV fluids and is also recovering well. It is expected that he will transition to ORS later today.

This morning, I will head to Mabriole to investigate a potential fourth case of cholera in the community. One of our "point persons" heard reports of an individual with vomiting and diarrhea beginning three days ago. This individual reported a travel history from Port–au–Prince. I will keep everybody informed of what I find.

It would seem that the route of cholera infection, for the time being, is via Port–au–Prince and the Kenschoff Trail. It should be expected that there are numerous additional cases along the route from Kenschoff to Seguin. I would recommend that these regions be surveyed as soon as possible. Unfortunately, the terrain in this area is challenging. Trucks and even motos cannot navigate the trail. The best available methods are by "Rhino," mountain bike, or foot. It will be difficult to get aid to these communities, in some cases even by helicopter. Fatality rates due to infection will most likely be high even if action is taken straight away.

We have spread our network of "point persons" at churches and schools throughout the mountains of the Sud–Est, addressing all of the major areas along the route to Fond JnNoel and Macary. Our network of point persons has been expanded to include voodoo officials and doctors as suggested to us by other organizations currently combating cholera. We have also begun employing aquatab vendors as health agents in community markets throughout the Sud–Est. Our aim is to try to have symptomatic patients referred to the clinic as soon as possible. Since our first case was detected on 13 Dec, we have had three patients referred with symptoms suggestive of cholera. Only one of these patients has been actually suspected of infection. We expect a high rate of referrals for non–cholera–related diarrheal illness in the future.

As our preventative efforts spread, we remain in need of additional ORS. If you can help to meet this need, please contact us at cloudforestmed @gmail.com. All questions regarding the current situation in the Seguin Plateau and surrounding mountains should be directed to that email address as well.

Thank you all for your support so far as we continue to manage the cholera situation.

In kindness,

Kyle Denison Martin
Director of Community Health
Cloud Forest Medical Clinic – Baie d'Orange, Haiti

Re: Cholera Confirmed in Seguin
Monday, December 13, 2010 8:01 PM
From: "James Wilson"
To: "Clayton Bell"
Cc: "Brenda Zimmerman, "PaP Surgery Magician Lori Boyko", Cholera JP from JP HRO, "MMRC LP", "MMRC BP", "Cholera MDI Leslie", "Haiti PROMESS", "PROMESS DR Klopfenstein3", "Haiti Kyle Martin", "HF Waleed", "HF Dr Quereshi", haiti–epidemic–advisory–system@googlegroups.com, "Ivan Gayton"

Hi Clayton,

Thanks for your note. I have spent the day working on our ground ops report for the areas north of the mountains… the situation is simply this: cholera is spreading from the northern flood plains south into the mountains, and from the coastal communities in the south to the north into the mountains. We are observing bad outcomes as cholera reaches the rural mountain communities because it takes too long for them to come down while ill– they die en route and are buried along the road.

Either way, evidence points to a very bad outcome for the mountain communities in Sud Est due to isolation and extremely difficult access. We now have evidence of cholera reaching the initial front range communities in the north, and now we have your report to the south– analogous to a "pincher grip". Speaking of difficult access, we lost 2/4 4WD vehicles in our convoy on the way to Belle Fountaine, for instance. One of the vehicles was able to turn around, the other blew the clutch in Belle Fountaine… it is still there. Rain and fog in the mountains blocks helo support…

We are able to redeploy our recon team again to Seguin. I understand you met (?) Lincoln. He did not have time to survey other communities in the area, so we'll return and do a rapid recon of points south of your location.

Cheers,
Jim

On Dec 13, 2010, at 9:35 PM, Clayton Bell wrote:

Today we had our first confirmed cholera case in the Seguin/Baie d' Orange area. The epidemic has been slowly creeping our way for several weeks and we knew it was only a matter of time. Our Cloud Forest Medical Clinic is strategically positioned deep in the remote mountains of Haiti and we along with the local Gov Depository (whom we are partnering with) have the only medical facilities between the Fermate Mission Hospital all the way south to Peredo and the Caribbean Sea. We are located in Seguin, Sud–Est along the popular trade route where several cholera cases have recently been reported (today's case is the first to be confirmed by medical personnel). At this point we are ramping up our prevention and education efforts through daily cholera prevention classes to all our patients, speaking about water purification, hygiene and sanitation to all the local schools & churches, mobilizing our community health workers and empowering community leaders as additional cholera point of contacts. Right now we have a few boxes of ORS along some LR, IV tubing and Abx (Azithro & Doxy), but are in no way prepared for an outbreak of any significance. At this point we do not need additional medical personnel, but I want our cholera supplies stocked up and medical teams on standby so when shit hits the fan we are ready. Our clinic serves all the surrounding mountain villages (for hrs in every direction) and we have the best chance to prevent a large scale outbreak in this region. Please support us by notifying potential medical teams and bringing in a UNHAS chopper full of supplies. We have plenty of landing zones nearby. Latitude & Longitude coordinates are:

Lat: 18.314764
Long: 72.227273
Alt: 5,355 ft

Supplies we are in greatest need of include (# of *s indicates level of need):

***Lactated Ringer's soln
**ORS
***IV caths (22, 20, 24, 18 & 16 gauge)
**IV/PO Promethazine (Phenergran) & Ordansetron
*IV tape (clear sticky variety, not cloth tape)
*Hep Locks & Hep Flushes
**Vomit/Diarrhea buckets
*Bleach, Mops & Disinfectant sprays for cleaning
*Tarps (to lay across the church floor when we convert it into a cholera hospital)
*Cots (for makeshift hospital beds)
*gauze pads
*Aquatabs for prophylactic distribution

Please email us at cloudforestmed @gmail.com or call me directly at 3898–3233 if you have any questions.

Namaste,
Clayton Bell, MD
Humanity First USA
"Where the Stars Still Shine"
www.wherethestarsstillshine.org

12/13/10 email from Dr. Jim Wilson to Lionel St. Pierre:

"Lionel,
We had a guy go down there yesterday, and he interviewed the doc in Seguin who said there was no cholera. He did not survey other communities, but I plan to return to the area and do a more comprehensive assessment.
Jim"

Cholera Update from Seguin
by Cloud Forest (Seguin) Medical Clinic on Thursday, October 28, 2010 at 5:05am

I've received several emails from people asking about whether the current cholera outbreak in Haiti had spread into Seguin and how they could help the staff at the Cloud Forest (Seguin) Medical Clinic prepare should cases begin to appear.

At this point in time, it appears that the Seguin community is at relatively low risk of being affected by the outbreak. Most of the current cases have been located in the Central Plateau region of Haiti near the Artibonite River floodplain. While several cases of cholera have been detected in Port–au–Prince, each of the infected individuals reported recent travel in the Central Plateau. Domestic and international health organizations fear that in recent weeks cholera may spread into the many "tent cities" in Port–au–Prince unless massive public health measures are taken. Several organizations have stepped up efforts to distribute water purification systems and provide education on hand washing. Other organizations have deemed the spread of cholera into Port–au–Prince an inevitability and are stocking up on ORS (oral rehydration salts), IV fluids, and antibiotics.

Seguin is blessed with a natural barrier against the spread of infection from Port–au–Prince. Located about 5,600 ft. in the mountains south–east of the capital, Seguin is buffered to a certain degree. There is a trail through the mountains leading from Seguin to Port–au–Prince that is commonly used by vendors to sell their goods. As a result, there remains a chance that one of these vendors could bring cholera into Seguin. However, this chance is relatively low and would depend on a number of factors falling perfectly into place. Furthermore, Seguin's primary water sources are (1) rain water and (2) natural spring water. It is unlikely that either of these water sources could be contaminated in a way that would affect the entire community.

Despite the low likelihood of cholera spreading into Seguin, a number of efforts have been taken to assure that the community is protected. Free water purification tablets (Aquatabs) have been distributed through two of the local churches. These tablets have also been distributed each day at the Cloud Forest (Seguin) Medical Clinic. Each day at the clinic has begun with a short lesson on proper hygiene and sanitation. This weekend, I will purchase several hundred bars of soap to distribute throughout the area. On Tuesday, our Community Health Workers had a special lesson on cholera prevention and sanitation. After this lesson, they were sent out to educate their neighbors and further distribute water purification tablets.

Should cholera arrive in Seguin, the pharmacy is stocked with adequate ORS for about 1,000 patients and IV fluids for 200 more. Our supply of antibiotics is extensive. We are awaiting CDC reports on the antibiotic sensitivity of the cholera bacteria to determine how to best treat potential patients.

In the case of a cholera outbreak, we have several health care workers ready to travel to the clinic and help with management efforts. Nonetheless, we remain hopefully that the assistance of these individuals will not be needed.

Please keep Haiti in your thoughts and prayers as the outbreak continues to spread. It will likely be several months before fears begin to die down and years before the threat of cholera is eliminated from the country.

Do not hesitate to contact me if you have any questions about the outbreak and what we doing in Seguin.

Kyle Denison Martin
kdenisonmartin @ gmail.com

FACEBOOK: http://www.facebook.com/note.php?note_id=158999520806610#!/cloudforestmed?v=wall

Services offered: Information Resource, Online Networking, Facebook Page/Group; Information Resource, Situation Reports & Status Reports; Medical, Facility, Capacity, Hospital Beds; Medical, Facility, Cholera, Cholera Treatment Center (CTC); Medical, Facility, Clinic, Mobile Field Medical Clinic; Medical, Facility, Clinic, Outpatient Clinic; Volunteer Opportunities, International
Campaigns: 2010 /2011 Haiti Cholera Epidemic; HEAS (Haiti Epidemic Advisory System); MSF (Médecins Sans Frontières) – Doctors Without Borders
Updated May 19, 2011 · https://reliefdb.org/shelters/7232

Cascade Pichon Heart to Heart Clinique du Sante

Medical Facility · Open

Clinic
Next to l'Hotel Deruisseaux; Commune Confirmed Lpar 2/25/11, Cascade Pichon

Web	www.hearttoheart.org
Checks payable to	Heart to Heart International/Haiti
Service	Permanent

2/25/11 Email from Josh Jakobitz
STAFF: Staff: Dr Micheline Deruisseaux Jacobsen, 2 translators, 2 drivers/security guys

We (Heart to Heart) staff this clinic during monthly visits. It is not so much a clinic as somebody's house. We have been given land to build a clinic and will do so in the next year.

We also have an RN based out of Cascade Pichon who rides a donkey to a different village 5 days/week. I do not know the names of these villages, and I am attempting to get GPS coordinates for all sites surrounding the CP area.

Heart to Heart Main record in Haiti
https://reliefdb.org/shelters/5144

Heart to Heart Internationa's Headquarters at:
https://reliefdb.org/shelters/1472
Campaigns: 2010 Haiti Earthquake; Heart to Heart International
Updated Feb 26, 2011 · https://reliefdb.org/shelters/7678

Hopital Bon Berger

Medical Facility · Open

Hospital
18.2500° N, 71.8500° W, Thiotte

Service	Temporary

HealthC ID: 2339002 · PCode: –

Services offered: Medical, Facility, Hospital, Acute Care Hospital
Campaigns: 2010 Haiti Earthquake
Updated Nov 28, 2010 · https://reliefdb.org/shelters/6899