



Core 300's 7 Stage Jiggers Clinic Process

NOTE: Serving in a Jigger's Clinic is very hard--often heart-rending--work. Harsh weather and terrain are common.

We have a 7-step process--and are aligned with Hope Matters Hospital's process as follows:

Orientation

The Clinic Director (an experienced and Certified PBL Coordinator, Cluster Leader, or Board Member) should be supported by a Deputy Director. They jointly plan and run the event and assure the skills competencies for each volunteer. Each directly assists or intervenes as needed. In addition, the Director-Team:

1. The week prior: Assure the purchase and shipping of all chemicals, medicines, bandages, shoes/socks, sprayers, For a clinic of 100-200 you will need between 8-14 volunteers to do the work and minister to the patients and their parent/caretaker properly.
2. Be prepared to work with sensitivity with any unique tribal, faith, or governmental entity.
3. Make sure you have skilled and trained surgical techs who will do the nail cutting and lancing, and removal of the nests.
4. Obtain and confirm the presence of trained volunteer Jigger clinicians for each of the surgical foot-basin stations the day before.
5. Assure transportation of workers
6. Determine which of the volunteers have experience in the three main clinical zones: 1) Surgery; 2) Rinsing and Drying 3) Ointments and Bandaging
7. Assure that new and existing volunteers are trained for their assignment and that they understand the purpose and flow of each station
8. Assign an experienced leader for each.
9. Assign the stronger volunteers (male) for carrying 30 lbs of water from each arm, refilling the dirty washing tubs, and refreshing used permanganate tubs

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NOTE: Make sure the dumping of the foot basin happens 40-60 feet away from all 3 staging areas and that it is dumped on the ground lower than all three as well.

Staging - your clinic zones; Patient Seating: look for benches or bleachers to set up the washing, soaking, surgery, and rinsing area.

Water: Bring a hose and attach to a nearby spigot or fill 10 x 5-gallon water buckets to the closest water source, and return to the staging area; Patients will sit on the lower bench or available seats, side by side;

Washing - Space 5-7 large foot-washing basins 2 meters apart on the ground. Fill the foot basins each with 8" of clean rinsing water and a bar of soap;

Empty dirty basins regularly and refill with clean water

Soaking - Mix rinsed basins with permanganate powder (for soaking in pesticide) to kill all Jigger larvae and incubating egg nests.

Nail Clipping - Toenails/Fingernails using large size fingernail/toenail clippers,

Jigger Removal is done with sterile, 1-use surgical needles (or sterile scalpel or 1-use razor blades) and sanitary towels within reach for the clinicians doing the work.

Drying area - within 15 feet of the surgical area, layout large blankets with stacked towels for each patient to rinse and dry the feet and other infected areas.

Ointment and Bandaging - After air-drying for 20-30 minutes, have large supplies of Neosporin ointment handy to cover the surfaces of the cleansed areas and any other open wounds. Wrap affected areas with rolled gauze or gauze pads, secured by medical white tape. Also set the gauze wrap and athletic tape nearby, along with white socks and new shoes.

Seven Stages of a Safe and Effective Jiggers Clinic

1. **Each volunteer working in any of the 3 staging areas will need to wash their hands with antiseptic soap and put on surgical gloves**
2. **Washing** - Those in 1 should have their patient soak his feet in the washing water for a minute and then begin scrubbing the cacked on dirt away until the foot- and jigger nests are clean and easy to see their feet and hands

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3. **Nail Cutting** - The Jigger nest will often lodge deep under the toenails and fingernails--often rotten--will need to be carefully cut away and trimmed back
4. **Removal of Jigger larvae nests** - Rinse the patient feed with clean water before using the needles. Hold the needle in one hand and grasp the foot (or hand) with the other. Carefully identify each nest and press the needle until pierces the nest sac. Squeeze out each of the larvae in the nest. Rinse again
5. **Antiseptic/pesticide soak** -Carry the child to the next staging area to place the patient's feet, hands, or other infected areas, into the antiseptic/pesticide liquid (Permanganate and Diazonal solution) Make sure the entire affected area of hands, feet, and other body areas--submerge and soak for at least 10 minutes
6. **Washing and Drying** - Remove the child from the pesticide foot basin and rinse off the solution. Apply a towel to dry the affected areas gently. Allow the child to sit on the blanket and air dry for 15-20 minutes
7. **Binding and Bandaging** -Taking the child to the third staging area where Neosporin will be liberally applied to all wounded areas and then wrapped with gauze, taping securely to make the gauze secure. Next, place a new pair of socks carefully on their feet and fit them for new shoes--trying them out for usefulness. These shoes, if the patient is able, will take him home where he will be made to lay down and rest. The bandages should not get wet.

The same day or maybe the next, several men will be assigned to the several villages from where the patients came to talk with the parents on hygiene and disease—Jiggers in particular--prevention. In addition, they will spray inside and outside the walls of each home/hut with insecticide spray plus close by bushes. Time allowing every hut will be treated in the same way.

Finally, as we have identified the local school(s) where the patients hope to return to work, the volunteer sprayers will spray the inside and outside of the classroom buildings where some were infected in the first place

A Core 300 healthcare worker will return to the village within 2-4 weeks to check on the viability of each patient, returning in 3-6 months to visit the students at school. Many times the children will see the worker and run to them, surrounding them with smiles and hugs of thanks for getting their life and hope back again.

VIDEO: Click or type in the link below to view a live Kjigger Clinic by Stage:

https://www.youtube.com/watch?v=KyhU8MtMdLA&t=6s&ab_channel=ArtHobba

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Supplies and Budget for a 100 victim Jigger Clinic: are on page 4

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NOTE: 100 Kenyan Shillings (kes) = apprx. \$1.00 US

Table 1: Budget for a 100 victim Jigger Clinic in Poor Regions of Kenya/Uganda

Materials	Type	Amount	kes	kes
Potassium Permanganate	grams	200	7	1400
Jet sprayers	each	25	50	1250
Gloves	1 box	1/2	750	375
Cotton Wool	1 kg	1/2	2000	1000
Surgical blades/Needles	1 box	1/2	3000	1500
Jellies	pcs	50	50	2500
Pairs of plastic shoes	pcs	100	80	8000
Diazinon Insecticide	pcs	25	250	6250
Towels	pcs	150	100	1500
Lunch and breakfast	each	20	300	6000
Volunteers Travel	each	4	1000	4000
Hand Sanitizers \$ Soaps	each	20	100	2000
Masks	each	120	50	6000
Large Foot basins	each	4	400	1600
Motorbikes (wear-tear)	each	2	1500	3000
Waterbottles	1.5 liter	100	80	8000
Fuel	liters	20	150	3000
Labor (Coordinators only)	each	4	1000	4000
TOTAL				61335

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\$560 US

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