

# SCALPEL'S EDGE

*Scalpel* AT THE CROSS  
A Christian Medical Mission  
to the Peruvian Amazon

A GIFT OF LIGHT, HOPE AND SURGERY TO PERU

WINTER 2020 | ISSUE 32

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“ These improbabilities can only be explained by our team’s strength, which came through our Christ (Philippians 4:13). And at that, with complete peace through appeal to His name, week after week, which lands us precisely on gratitude (Philippians 4:6), indeed right at Thanksgiving. ”

## CRISIS SPECIALIST

By Peter A. Cole, M.D. - President, Scalpel At The Cross



As Scalpel At The Cross dials down on December, our team should not be amazed to learn that we are emerging from shock after 2020 shock, not only unscathed, but deeper grounded and broader blessed than ever before. This year we sat on the edges of our seats in a supernatural horror show, holding our breath in anticipation of how the next act would play out, because we know our God specializes in crisis.

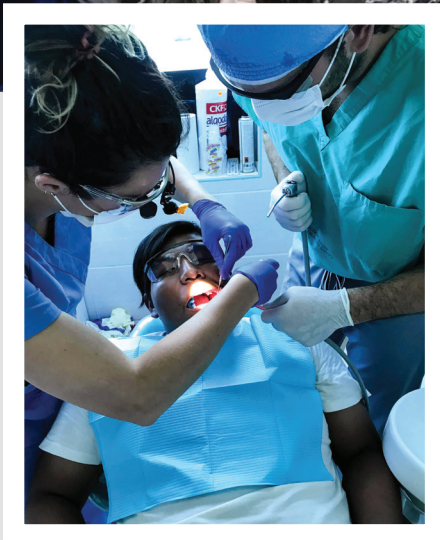
Would you not imagine that racial eruption, bipartisan flogging, western inferno, economic freefall, and a century catastrophe would

doom our humble ministry? Our ministry seeks to be a lighthouse for Christ through a medical ministry to Peru, specifically through orthopaedic surgery and care to the people of the Amazon Jungle and the missionaries who serve them. Our model relies on regular travel and generous donations, remote surgery and relationships thousands of miles away; not good, right?

Who would have thought that we could forge ahead with the purchase of new land to expand our campus, break ground and build a 150-meter wall, while employing dozens of

*Continues on page 2*

## CRISIS SPECIALIST



local Peruvians trying to escape starvation after six months of lockdown? Would you have believed we could consummate a two-year rebuild of our brand new, Mission EMR (electronic medical record)? What if I told you that we had no need to furlough any of our staff nor cut their pay, while also securing a payment protection program grant for nonprofits? Can you even imagine that we became the last link in the chain for the delivery of 30 Coventor Ventilators to Lima, which manifested from the collaboration of a University of Minnesota cardiothoracic surgeon, Boston Scientific,

Medtronic and United Health Group corporations? And certainly, it must seem improbable that we pulled off our first dental clinic and first knee arthroplasty campaign immediately pre-COVID, with nary a post-op complication. We also added another national publication on our mission work. Lastly, it would not have been rational to believe that with all this calamity, faithful donors would have emerged from nowhere and everywhere to double the pace of giving to Scalpel going into Thanksgiving, making all these things possible. God specializes in crisis.

These improbabilities can only be explained by our team's strength, which came through our Christ (Philippians 4:13). And at that, with complete peace through appeal to His name, week after week, which lands us precisely on gratitude (Philippians 4:6), indeed right

### THE ORTHOPAEDIC FORUM

#### The Development of a Surgical Mission in the Peruvian Amazon A 15-Year Expedition

Bradley A. Lezki, BA, Peter A. Cole Jr., MHA, Lisa K. Schneider, BS, MBA, and Peter A. Cole, MD

**Abstract:** Musculoskeletal disorders and injuries represent a substantial proportion of the global burden of disease. This burden is particularly prevalent in low and middle-income countries that already have insufficient health-care resources. The purpose of this paper is to highlight the vision, the history, the implementation, and the challenges in establishing an orthopaedic surgical mission in a developing nation to help address the epidemic of musculoskeletal trauma.

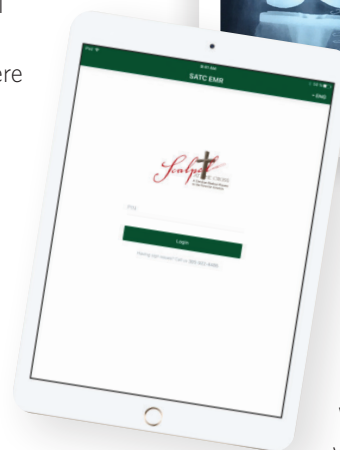
Scalpel At The Cross (SATC) is a nonprofit Christian orthopaedic surgical mission organization that sends teams of 15 to 20 members to Pucallpa, Peru, a rural town in the Amazon, to evaluate patients with musculoskeletal conditions, many that require surgery. The organization employs 4 full-time staff members and has included over 400 medical volunteers in 32 surgical campaigns since 2005. SATC has provided approximately 8.1 million U.S. dollars in total medical care, while investing approximately 2.2 million U.S. dollars in implementation and overhead.

Given the projected increase in trauma in low and middle-income countries, the SATC model may be increasingly relevant as a possible blueprint for other medical professionals to take on similar endeavors. This paper also highlights the importance of continued research into the effectiveness of various organizational models to advance surgical services in these countries.

Musculoskeletal disorders and injuries represent a substantial proportion of the global burden of disease, accounting for 11.2% of the total disability-adjusted life years worldwide.<sup>1</sup> This burden is particularly prevalent in low and middle-income countries that already have insufficient health-care resources. Low and middle-income countries claim well over 90% of all injuries, a burden that far outstrips their treatment capacity.<sup>2</sup> Many of these countries are experiencing rapid fiscal growth and, with it, there is expansion of their infrastructures. This rapid growth, accompanied by advances in wealth and technology, has led to a transition from foot or bicycle transport to the use of motor vehicles, without concomitant safety laws or infrastructure.<sup>3</sup> This has led to a substantial increase in the number of injuries from motor vehicle crashes, accounting for an estimated 1.5 million deaths and 50 million nonfatal injuries per year worldwide,<sup>4</sup> creating a true global orthopaedic trauma epidemic. With about 5.8 million lives claimed each year from injury, the number surpasses deaths due

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at Thanksgiving. Just as the Pilgrims gave thanks and praise to the same Jesus in 1621, when they celebrated for three days with the Wampanoags, one year after winter conditions took nearly half their small colony of a hundred, we too give praise and thanks for emergence through our crisis. God specializes in crisis. ✝





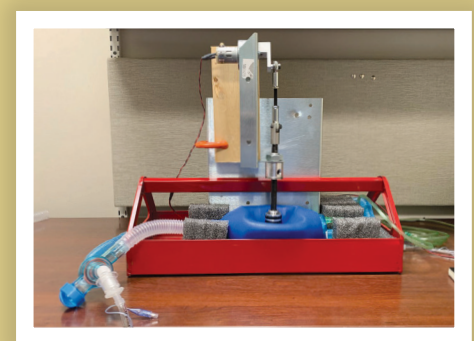
# THE COVENTOR MIRACLE

*By: Kara Rodriguez, Mission Director*

"Kara, I have a potential project for you," exclaimed Dr. Cole on the other end of the line during our regularly scheduled check in. In the life of a Mission Director under pre-pandemic circumstances this could mean many things. In the time of 'rona? All bets were off. I asked Dr. Cole to continue. "Ok, and what is it?" United Health Group, one of the largest healthcare companies in the world, was prepared to donate several life-sustaining mechanical ventilators to Scalpel At The Cross and was willing to ship them to Peru on our behalf. What exactly was this mechanical ventilator? Was there a need for this machine in Peru? And if so, how would the ventilators be transported from Lima to Pucallpa in the midst of the strictest lockdown the country had ever seen? These simple questions were just the beginning of what transpired over the span of several months and what we now affectionately refer to as the Coventor miracle.

In order to fully appreciate the Coventor miracle, we must start at the very beginning. Back in March 2020 when the coronavirus pandemic was unfolding, uncertainty was mounting with the

anticipation of a projected shortage of ventilators that would be necessary to treat those who became infected with the virus. Ventilators are typically complex machines, but in the simplest of terms, they push air in and out of the lungs of patients who are unable or struggling to breathe on their own. As the United States was bracing for the full impact of the virus, Dr. Stephen Richardson, a Cardiac Anesthesiology fellow at the University of Minnesota, and his buddy, Jim McGurran, Director of MGC Diagnostics, went "full-on MacGyver." Their mission was inspired by a simple idea: there had to be a way to automate an Ambu bag, the readily available, self-inflating bag commonly used by paramedics in manually resuscitating patients. With their combined skills, ingenuity and the help of medical textbooks from the 1960s, Dr. Richardson and Jim brainstormed ideas and began scavenging for parts in a medical device lab. Several hours later on March 15, using a red toolbox as the base, stripping and repurposing a motor from another device and connecting it all with a piece of wood, they created the first prototype ventilator. Dr. Richardson took the device to the University of Minnesota to run the



first test; he connected it to an anesthesia machine, and it worked! The Coventor was born.

By March 22 and three iterations of the prototype later, the buddies and a growing team of volunteers had a more sophisticated model that was simple, cost effective and easily scalable. The next hurdle

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## THE COVENTOR MIRACLE



to overcome? FDA approval. Typically, the agency moves rather slowly in their review and authorization of devices. However, as the threat of COVID-19 continued to grow, the FDA had already granted emergency use authorization for personal protective equipment and lab diagnostics; on March 24, the agency issued an emergency use authorization for ventilators as well. The design and invention of the Coventor was a collaborative and interdisciplinary effort with financial and in-kind donations through several companies such as Digi-Key, the aforementioned MGC Diagnostics, and Teknic, Inc. Additionally, Boston Scientific and Medtronic offered invaluable support through the FDA process. On April 14, the Coventor received authorization from the FDA, clearing the way for production. Boston Scientific manufactured the Coventor units, accessories for the device were procured through Medtronic, and United Health



Group became the distributor coordinating shipping logistics and ensuring the units made their way to healthcare facilities in desperate need of such devices to provide life-saving care.

In the midst of a global pandemic, it was clear that health care providers across the United States were not the only ones who may need these ventilators. As colleagues in the same health care system, Dr. Richardson had heard of Dr. Cole and the work of Scalpel At The Cross in Peru. At the beginning of June, he reached out to Dr. Cole, explained the incredible feat that was the Coventor, and asked, "Do you think there's a need for these in Peru?" The Coventor miracle was now in phase two.

If I'm honest, determining the answer to such a simple question and the questions that would inevitably follow seemed quite daunting. Armed with words of wisdom and reassurance from King Solomon - "Trust in the Lord with all your heart, and lean not on your own understanding. In all your ways acknowledge him, and he will make your paths straight" (Proverbs 3:5-6) - and a list of questions, I opened WhatsApp on my phone and began

reaching out to esteemed colleagues and friends of the mission in Peru. Dr. Salce and Dr. Paredes, two orthopaedic surgeons in Lima, were my first connections. They assured me there was great need as the battle against COVID raged on, and that should we be able to get the Coventor units to Peru, they would be put to use. At this time, domestic travel throughout Peru was heavily restricted, and movement between provinces was forbidden. We could get the ventilators to Lima, but transporting them to Pucallpa seemed highly unlikely. Naively, I assumed once we confirmed the number of Coventors to be donated, identified a receiving hospital in Lima, and completed the requisite paperwork, this project would be complete in a matter of weeks. That was June 10.

By June 25, through Dr. Paredes' persistence and dedication, he had identified Hospital Santa Maria del Socorro in Ica, Peru as the receiving hospital. Ica has been one of the hardest hit regions by the pandemic, and as of the writing of this article on October 1, is still under quarantine. With our receiving hospital confirmed, it was time to connect with our Peruvian legal counsel, Laines Scharff,



to begin the required paperwork and to finalize the donation agreement with United Health Group. Again, the words of Proverbs rang true, “Many are the plans in the mind of a man, but it is the purpose of the Lord that will stand” (19:21). My plans were about to be disrupted, yet again, for the purpose of the Lord. In my initial conversation with Laines, he informed me that, similar to the U.S., the Peruvian government and Ministry of Health had passed several declarations that should ensure expedited processing and ease of passage through customs for medical and humanitarian aid received for use in the fight against COVID-19. Additionally, domestic travel restrictions were being lifted with sporadic flights and inter-province travel resuming on July 15. He was confident the Coventors could reach Pucallpa.

I could write a short novel on how the subsequent chapters of the Coventor miracle unfolded, but allow me to briefly summarize the past two months. United Health Group generously committed to donate 30 Coventors to Scalpel At the Cross, and agreed to divide them into two separate shipments: 15 Coventors to be delivered to the hospital in Ica, and 15 to be delivered to Hospital Amazónico in Pucallpa. In the span of one month, the Director at Hospital Amazónico was replaced not once, but twice, slightly complicating Laines’ work in finalizing the documents required for acceptance of the donation. We prepared packing lists, finalized commercial invoices, and had the donation documents legalized by the Peruvian Embassy in Miami. On August 20, after a flurry of emails and a three-way call with United Health Group and UPS, the two pallets of Coventors were successfully picked up in Minnesota, and Laines booked his flight to Lima. The time had finally arrived; the Coventors were headed to Peru!

Based on past experience with the container project of 2018, Laines was aware of challenges that may arise and yet, the beauty of Peru (or frustration, depending on where your perspective

falls on the scale of positivity versus pessimism) is that processes and procedures are continuously changing. Ay Peru! Over the course of the next three weeks, Laines met with a slew of government officials and health organizations to facilitate the review and release of the Coventors from customs, each meeting complicated by office closures due to COVID, and slow or no responses to phone calls and emails. He met with MINSA, the Peruvian Ministry of Health, and looked on with hope and anticipation as the workers unpacked and inspected the Coventors, analyzing all the documentation pertaining to the legality of the shipment. He submitted requests to DIGEMID, the Peruvian equivalent of FDA, for the Coventors to be authorized for use in Peru. He met with SUNAT, where he was greeted by the agent with whom he worked on the container project two years prior, and who had confiscated two x-ray machines from the shipment of medical supplies bound for Pucallpa. The agent informed Laines that SUNAT had imposed a financial sanction on the two previously confiscated x-ray machines still in customs’ possession, and we feared this would impede the approval and release of the Coventors. Nancy Cole rallied the Prayer Posse, and for weeks, we prayed the Lord’s will be done. If the Coventors were needed in Peru, He would make a way.

“ A week later  
on September 18, a  
pallet of 15 mechanical  
ventilators arrived at Hospital  
Santa Maria del Socorro  
in Ica, and on September  
22 Hospital Amazónico  
confirmed receipt of  
their respective  
Coventors! ”

Each time we received approval from one office, we received a request for additional documentation from another. Late one evening, Laines expressed his

frustration to me about the constantly changing processes and requests. It truly felt like each time we made one step forward, we had to take two steps back. Will these Coventors ever make it to the hospitals? Finally, after numerous WhatsApp messages, emails, phone calls, and meetings, Laines received confirmation at 11pm on Friday, September 11: the Coventors were approved and authorized for release. A week later on September 18, a pallet of 15 mechanical ventilators arrived at Hospital Santa Maria del Socorro in Ica, and on September 22 Hospital Amazónico confirmed receipt of their respective Coventors! After celebrating their arrival with public ceremonies, the ventilators were set up and immediately put to use. But the Coventor miracle stretches beyond COVID relief. You see, the hospitals in Ica and Pucallpa operate in austere conditions with minimal resources, and coronavirus is not the only illness that may require mechanical ventilation. The global public health crisis paved the way for such a machine to be invented and ultimately delivered in our beloved Peru, and the 15 Coventors donated to each hospital will continue to provide life-saving care well beyond the pandemic.

Throughout the Coventor project there were numerous obstacles along the way, but one thing remains true. These complications did not surprise our great God; He has purposed them for good. We have been able to foster a relationship with the new Director at Hospital Amazónico who is eager to collaborate and excited to receive our next medical campaign once the pandemic subsides. Laines now has a new virtual rolodex filled with contacts at various agencies throughout Lima. If we need to contact DIGEMID, MINSA, UPS or SUNAT for future projects, Laines has a contact. I may have committed verses from Proverbs to memory decades ago, but the truth of these verses has never been more evident as it was throughout the Coventor miracle. The Lord has not only stretched my faith, but He has strengthened it. Trust in the Lord. Lean not on my own understanding. Commit my work to the Lord, and he will establish the way. †



by Peter A. Cole, MHA

## An aerial photograph showing a large, open, green field in the foreground. A concrete wall runs horizontally across the middle of the image, separating the field from a road and a large industrial or construction site in the background. The site features a large red-roofed building and significant dust or smoke rising from the area, suggesting active construction or demolition. The background is heavily forested. In the bottom left corner, the text "Page 6" is visible.





Cashibococha, a rural track of land, which has been home to several Christian mission groups as well as Scalpel At The Cross since 2004, has faced a barrage of squatting threats in recent years. This reality spurred the leadership of a Swiss Christian Mission group, located at Cashibococha's perimeter, to conclude that something must be done to protect this land with its allied ministries. The 7x1-kilometer property's only access is by a government road, spoking out of Pucallpa into the vast Amazon basin toward Brazil's western border. We decided to partner in an alignment of resources, purchase more land, and protect the perimeter and missions along this valuable base of operations, which has existed for the cause of Christ for over fifty years. Scalpel leadership determined this was a key strategic decision, not only to protect, but also to advance our mission – to use our medical and orthopaedic expertise as a lighthouse for Christ for the people of the Peruvian Amazon and the missionaries who serve them.

### THE RENEWED VISION

In its 15-year history, Scalpel At The Cross has demonstrated an efficacious model to sustain and grow a program focused on ameliorating both spiritual and musculoskeletal need through regular medical campaigns, representing

partnerships between Peruvian medical personnel and American volunteers. In 2020, board leadership recalibrated its 10-year vision to reflect the mission's growth and its concomitant ability to better serve the needs of the local environment. Such actions highlight the philosophical transition from a relief organization to one that promotes local development. Investment in the local community through educational exchange and the development of a medical micro-economy, via a brand-new clinical facility, would help to address socioeconomic determinants upstream from dire patient circumstances, thus increasing the impact of our mission in Pucallpa and surrounding regions.

### THE SCALPEL AT THE CROSS CLINICAL CAMPUS

Through the events and context above, Scalpel At The Cross acquired a 2-hectare plot of land strategically located at Cashibococha's entrance bordering the government road, with a vision to build an Orthotics, Prosthetics and Orthopaedic Rehabilitation (OP&OR) center, inclusive of an expanded campus. The facility will include a physical therapy center, an orthotics & prosthetics fabrication site, living quarters for local employees, administrative offices, a chapel and commons, and grounds to possibly scale



to a surgery center over the next decade. Even now as we ramp up fundraising efforts for The Scalpel At The Cross OP&OR Clinical Campus, a construction team is in the final stages of erecting a 130x4-meter wall to protect the facilities and neighboring organizations from invasion risks associated with squatting.

### THE CONCLUSION:

Only by God's sovereign hand could Scalpel At The Cross go from severe squatting threats in the form of mob-like inhabitations, to a grand solution for a clinical campus that we dream will transform orthopaedic care. Neither physical therapy nor orthoses and prostheses are codified offerings in the area, yet both are paramount to comprehensive and successful orthopaedic treatment. In 2021 we will embark on a one-million-dollar campaign to launch this project, a sum which will consummate in a beautiful and holistic facility merging treatment and rehabilitation of life, limb, heart and soul. Please be in prayer for the role you could play in this important endeavor to shine the light of Christ even brighter through our cherished medical mission to the people of Peru. ✝



# THE 9-YEAR-OLD MISSIONARY

*by Esteban Cardona  
Director of Development,  
Communications & Patient Care*

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**E:** Hey Caleb Beyer, it's so awesome to meet you! We want to know a little bit about you and some of the cool things you've accomplished this past year. Are you ready for a couple of questions?

**C:** Yes!

**E:** First off, how old are you?

**C:** 10 years old! My birthday was October 26th.

**E:** Do you have any brothers or sisters?

**C:** Two younger sisters named Ava and Brooklyn

**E:** Do you have any pets?

**C:** Just a turtle named Covey

**E:** What are some things you love to do?

**C:** Play Legos, soccer, cross country, tag and any sport really

**E:** What's your favorite food?

**C:** Pizza

**E:** Any special toppings on your pizza?

**C:** Just cheese

**E:** Do you have a favorite video game or tv show?

**C:** No, but my favorite movie is Captain America or Bumblebee.

**E:** How did you hear about Scalpel At The Cross?

**C:** My grandpa has been on a couple trips, and the Coles asked my dad and I if we wanted to go on a vision trip in January.





**E:** How come you wanted to get involved?

**C:** I love to travel.

**E:** What did you think of Peru when you went in January? What was your favorite part?

**C:** I loved it. I really liked the last day in Lima when we got to go to a doctor's house. He had a daughter who was 13 years old, and we got to play Monopoly in Spanish. It was my first time playing.

**E:** What was that trip like for you?

**C:** Awesome - we did a lot fun stuff, and I got to take naps when we were visiting all the hospitals which can get a little boring.

**E:** When you came back from the trip what were you thinking?

**C:** I was thinking that it was really fun trip and wanted to go back.

**E:** Did you have any special jobs to do after the trip?

**C:** Aside from chores, Peter Cole asked us to raise a million dollars!

**E:** Did any of your fundraising plans get changed because of COVID?

**C:** Not really. I wanted to do a fundraiser, and we were able to. I was also able to sell stuff.

**E:** How did your fundraiser go?

**C:** It was lots of fun. We did a one mile run with a swimming portion as well. We had two divisions, a little division (anyone under 8) and another division (ages 9-14). We gave out gift cards to the first-place winners. We also did a silent auction to sell some gift cards and other stuff that friends and family donated.

**E:** What was your favorite part of the fundraiser?

**C:** I really liked seeing friends and raising money.

**E:** Did you come up with this idea?

**C:** Yeah, I really wanted to raise money and had \$400 raised. But I really wanted to raise more, so I asked mom and dad to see if we could do fundraiser, and they said maybe. Then they helped me get ready, and we did it.

**E:** What did you sell?

**C:** Mechanical pencils, bracelets, Pokemon cards, Legos and lots of massages

**E:** How come you decided to sell them?

**C:** Because I didn't need them that much

**E:** Was it hard putting up your Pokemon cards to auction?

**C:** No, not really. I don't care about them that much and knew that Peru needed it.

**E:** Did the trip help you understand God's will in your life?

**C:** It helped because I got closer to God and now feel like I want to be a missionary.

**E:** If you could choose to be a missionary to any country where would it be?

**C:** I have been thinking about this a lot, maybe Peru, Egypt, China, India, or France.

**E:** Where have you traveled?

**C:** Mexico, Peru, Jamaica, Canada, and that's it.

**E:** What is your favorite bible verse?

**C:** The bible verse that says "to give everything you have to the poor" (Ref: Luke 12:33)

**E:** Is there anything you want to tell people who are reading this?

**C:** If you put your mind to it you can do anything with God, and if you sell something you probably won't miss it.



## A WORD FROM ESTEBAN:

Caleb's fundraising efforts were made possible by his mom, Dawn, and dad, Adam, who said all the credit deserves to go to Caleb. Caleb not only dreamed it all up but was a driving force, constantly motivating those around him to make it a reality. When Caleb was younger, Adam and Dawn asked their family friends, Peter and Nancy Cole, for advice on how to demonstrate to their children the importance of missionary work. The Coles' response was simple, "exposure." Caleb's trip to Peru in January moved him and impacted not just his life, but those around him. All of the parents who supported the silent auction were so thankful for the opportunity to share the importance of missionary work to their children, all because of Caleb. Jesus showed us that not all heroes wear capes, and Caleb reminded us of this! ✝

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# BE A PRAY- E.R.

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*by Nancy Cole, Director  
of Halo Ministries &  
Prayer Posse*



“THE DIFFERENCE BETWEEN THE WAY THINGS ARE AND THE WAY THINGS COULD BE IS THE GAP IN WHICH WE STAND AND PRAY.”

-FRANCIS FRANGIPANE

Most of us will have the opportunity to visit an Emergency Room at one point or another in our lifetime, whether due to major depressive illness, acute appendicitis, irregular heart rhythm, or grand mal seizure amongst other maladies. Facing imminent need, we present without appointment to seek relief from experts considered specialists in healthcare delivery. Married to a trauma surgeon and being a member of multiple Scalpel medical teams across the years, I am well acquainted with the E.R. work place environs; they are settings where desperation and brokenness meet restoration and healing. When a beloved sister in Christ, early on in the pandemic, exhorted friends to consider becoming “Pray-E.R.’s,” I took up the challenge as

befitting. This image truly resonated with me as I focused on encouraging, edifying, and exhorting in my roles as both clinical counselor and simply “neighbor.” A mobile “Pray-E.R.” has unbound reserve because it derives its essence from the very heart of God Himself! I savor Christ’s willingness to use me as an unworthy vessel in helping others find comfort. This calling is certainly not unique to me, as one of the marks of Christ-followers generally is that of overflowing with gospel truth and affection into the lives of the suffering. While many have endured hardship and mayhem during the past six months, I have been privileged to fulfill what I sense to be “Pray-E.R.” marching orders, which consist of crying out on behalf of wounded relational ties, a drifting nation, and our broken world.

The enduring conflicts of today certainly reveal that it will take more than the elephant or the donkey to restore health to a world ravaged with COVID and interpersonal division. I am convinced, alongside many of you, that it’s going to take the Lamb of God turned Lion of Judah, with His powerful effusion, to bring ultimate victory to these chaotic times. And what will storm the gates of heaven like none other...the confident, committed prayers of the saints who pray with contrition over our lost condition. At such a time when rifts prevail, I am personally convicted over my role being that of standing in the gap for my family, my church, my city, my state, my nation, and my world. To equip myself, I’ve been drinking deeply from the well...engaging God’s Word, extolling God’s Son, and seeking God’s Spirit.



Short of dressing in sackcloth and ashes, I have had the honor of humbly beseeching the Lord, My God, for forgiveness and healing of peoples and nations. On the grounds of God's covenant relationship with me, established by my faith in Christ at the cross, I have been pleading for personal and corporate revival rather than falling into the ensnarement mindset of blame or victimhood. "Lord, we repent of our neglect of prayer and the reading of your precious Word, of unbelief, of arrogance and pride, of spiritual blindness, of hypocrisy, of slander, of disobedience, of being an idolatrous people who chase after pleasures that fail to satisfy and treasure goods which are not great enough to meet the deepest longings of our hearts." I've appealed to God Almighty, the great Creator of the Universe who rescued His people from bondage in Egypt and Babylon, from chains through the Cross at Calvary, and in 2020, from our current plight of pandemic and social unrest. "Many are the afflictions of the righteous, but the Lord delivers him out of them all." Psalm 34:19 "Lord, may we overlay the messiness of our lives with your promises for redemption and wholeness. May we be reconciled to you, even as we reconcile with one another...coming together in one accord

on bended knee at the foot of your cross praying down your Spirit upon us. Might you deepen our resolve to make Jesus absolutely impossible to resist or ignore."

Take the challenge. Be a walking "Pray-E.R.," making yourself available to those with unscheduled, emergent needs, seeking respite and hope ultimately found in accessing the Great Physician Himself!

### **TOWARDS THAT END, JOIN US IN PRAISING THE LORD FOR:**

- Successful delivery of 30 respirators SATC was able to acquire and have sent to Hospital Amazonico in Pucallpa, as well as Hospital Santa Maria del Soccer in Ica.
- Excellent progression in the building of a protective wall around our Cashibococha campus, which has provided jobs for 16 Peruvian laborers.
- Effective rebuild of an EMR system to further support the ministry.
- Recovery from COVID of some of our SATC staff. ✝

## **PLEASE BE IN PRAYER FOR:**

- A resurgence of dengue fever in Pucallpa, causing much sickness with limited medical availability, even as COVID numbers have decreased.
- Patience to endure the extension of the National Emergency which has instituted a curfew from 11:00p.m.-4:00a.m. daily, restricted the use of most vehicles on Sundays, and required children age 12 & under to remain at home with limited 60-minute exposure to the outdoors each day.
- The resumption of international travel within Peru and to/from the U.S., as many of our full-time missionary friends are trying to return to the States for necessary medical appointments.
- Physical health and spiritual vitality of the Peruvian people generally.
- Our legal counsel, Laines, who is working with the Director of Hospital Amazónico, for release of two x-ray machines confiscated from the 2018 container project.

Psalm 34:19  
Many are the  
afflictions of the  
righteous but the  
LORD delivereth him  
out of them all.  
(KJV)



# MISSION VITALS



**1 TRIP**

February



**24**

Surgical Patients



**\$302,200**

Estimated Value of Medical Care



**30**

Coventor Ventilators Donated to  
2 Hospitals



**130 METERS**

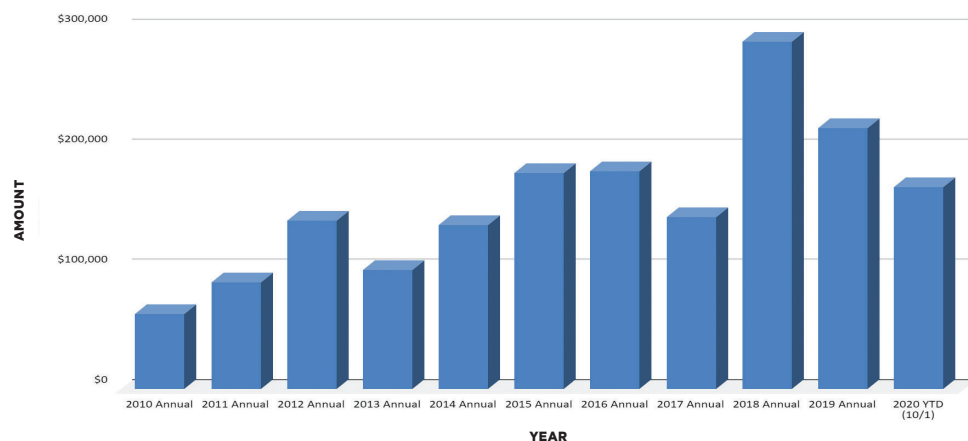
Protective Wall Under Construction,  
Creating Jobs for 16 Peruvians Over  
a 3-Month Period



**EMR**

Electronic Medical Records -  
Development of a Proprietary App to  
Enhance Patient Follow-up Program

## 2010- 2020 YTD ANNUAL GIVING SUMMARY



*please support our mission*

Online giving is easy  
and convenient at:  
[giving.ncsservices.org/scalpelatthecross](http://giving.ncsservices.org/scalpelatthecross)

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