

**PHYSIOTHERAPY TWO MONTHLY INTERNSHIP PLACEMENT REPORT AT
KAGANDO HOSPITAL**

FOR 12th SEPTEMBER TO 12th NOVEMBER 2018

FUNDED BY INTERFACE UGANDA

JUSTUS MUHWEZI

(Bsc. Physiotherapy MUST)

SUPERVISOR

GLORIA NDEKEZI CHIMPAYE

Table of contents

INTRODUCTION.	2
PERSONAL OBJECTIVES OF THE PLACEMENT	3
BENEFITS OF HAVING A PHYSIO INTERN AT KAGANDO HOSPITAL.	3
CASES SEEN	4
ACHIEVEMENTS	16
Improved clinical competence	16
Photos	17
Adherence to physiotherapy treatment and physical activity recommendations	18
Team work and management skills.	18
Social and spiritual growth.	19
CHALLENGES	19
Inadequate resources.	19
Ebola outbreak in Congo	20
RECOMMENDATIONS	20
APPRECIATION	20
Interface Uganda	20
Kagando hospital	20
Medical Rehabilitation department.	20

INTRODUCTION.

Kagando Hospital under Kagando Rural Development Centre (KARUDEC) holds a mission of serving and empowering communities through promotion of quality healthcare, education and spiritual development. KARUDEC is composed of a hospital, Nursing School, Primary School, water project, Electricity project.

One of the ways Interface Uganda promotes professional development of young medical professionals in East Africa is through facilitating a physiotherapy internship placement at Kagando hospital for six months. The physiotherapist intern works as an integral part of the Rehabilitation Team to increase man power and gain hands on skills relevant for future clinical practice.

I am grateful to God and Interface Uganda for such an amazing opportunity that has enabled me to work in such a setting that had always been my dream first employment while at school. I am also glad to be part of a team that contributes a lot towards improvement of patients' quality of life at Kagando hospital.

Having completed four months of placement, I have had a significant achievement and development of my clinical, social and interpersonal skills through work based learning. Similarly my presence in the physiotherapy department reduces workload on the staff hence leading to provision of better quality services.

It has indeed been a dream first working experience I would have wished to have after school. The warm environment and support given to me by the entire Kagando hospital team especially the Rehabilitation department is more than mere words can describe.

PERSONAL OBJECTIVES OF THE PLACEMENT

- To be an effective member of the physiotherapy team to provide high quality, Safe, cost effective and evidence based treatments to all patients requiring physiotherapy Services within the catchment area of the hospital.
- To improve my clinical and hands on skills in physiotherapy management of different Conditions that I have learnt from my previous four years.
- To be able to gain experience in assessing and prescription of appliances and assistive devices for clients.
- To continue developing my leadership and managerial skills through caseload management, multidisiplinary team work, self, patient and care taker management.
- To engage in quality improvement projects within the physiotherapy Department and hospital at large that will enhance quality of life of patients under my service.
- To share the knowledge and life experience I have had in life to the hospital staff, practicing Students, patients and communities of Kagando.
- To attain social growth through interacting with a number of stakeholders and spiritual maturity by engaging in church activities at the hospital.

BENEFITS OF HAVING A PHYSIO INTERN AT KAGANDO HOSPITAL.

- Reduction of workload on the physiotherapist. Kagando hospital has a very busy outpatients department on a daily basis. Similarly there are patients on wards that need physiotherapy treatment. Presence of a physiotherapy intern leads to better caseload management by sharing work at the outpatient clinic and on wards between the physiotherapist and the physiotherapist intern.
- There is proper and effective discharge planning of inpatients since there is always a physiotherapist on wards that can be consulted about rehabilitation needs of the patient. As a result, patients are discharged with better functional abilities after achievement of rehabilitation goals. Therefore, other medical professionals have learnt what

physiotherapy can do to improve the quality of life of patients through reducing pain and improving functional ability at discharge. Recently the number of referrals from wards has increased and this adds on the workload of the physiotherapists. However, it is always encouraging when we get more work because of a good experience patients get at the physiotherapy department.

- Kagando hospital physiotherapy department is a good learning center that handles a variety of conditions. The department has an experienced and knowledgeable physiotherapist and other professionals including orthopedic officer, Occupational Therapist, Nurse and Orthopedic Technologist. It gives a fresh graduate an opportunity to grow professionally by work based learning and practicing under minimal supervision.

CASES SEEN

During the two months spent at the hospital, I have been able to work on a wide variety of conditions ranging from pediatric rehabilitation. Neurological rehabilitation, amputee rehabilitation, orthopedic and many other conditions.

In addition to the patients seen in the first two months of internship, I have also seen the following patients during the last two months.

Cases seen	Physiotherapy case management
Week 1	
64 years old female with sciatica	Heat, relaxation massage, sciatic nerve stretches, LL strengthening.
2 years male with meningitis	Passive ROM, education about condition, 2 hourly turning, supported sitting and standing.
58 years old female with mechanical low back pain	Heat therapy, Spinal Mobs, McKenzie Back mobilising exercises, back soft tissue massage, back care advice.
38 years old female with complete spinal cord injury	Health education, positioning to reduce tone, passive joint ROM, Passive muscle stretches, sitting in a wheelchair.

80 years female with Rt. Hemiparesis due to stroke	Strengthening Rt. side, normalizing tone, stability and balance training, gait training, bed mobility and transfers.
1 year old female with Developmental delay	Education to mother about condition, neck strengthening exercises, motor stimulation with toys, trained sitting balance.
62 years old female with mechanical low back pain and coccydynia .	Heat, deep frictional massage, rubber ring in sitting, back mobilisation
64 years old female with Lx. spondylosis	Heat therapy, Spinal Mobs, McKenzie Back mobilising exercises, core strengthening, back soft tissue massage,back care advice.
2 years male with cerebral palsy	Health education about condition,visual and motor stimulation, training weight bearing on upper limbs and lower limbs, joint mobilization.
38 years female with Low back pain	Heat, Soft tissue massage, Transversus muscle activation, postural education
28 years male with mechanical low back pain.	Heat, trigger point release, back muscle stretches, general aerobics, postural correction.
Week 2	
3 years old male with hip septic arthritis	Heat therapy, Lower limb Passive joint ROM, relaxation massage, gluteal muscle stretches, ambulation training.

65 years female with knee osteoarthritis	Heat, hamstring muscle stretches, active knee range of motion, isometric quadriceps strengthening, patella mobilisation.
84 years male with Lx. , Cx. Spondylosis	Heat, soft tissue relaxation, Strengthening deep neck flexors, active Lx. and Cx. ROM, core stability training.
19 year female with VVF and Lt. LL weakness.	Health education about condition, pelvic floor strengthening exercises, Transversus activation exercises, bladder retraining program, LL strengthening and ambulation training.
59 years female with neck pain and frozen shoulder.	Heat, soft tissue massage, shoulder manipulation, back muscle strengthening and stretching, shoulder joint mobilization exercises.
8 months female with CP	Normalizing tone, training milestones, worked on head control, parents education about the baby's condition
57 years female with chronic calf strain	Heat, STM, trigger point release, calf muscle muscle stretches.
34 years male with Rt. hemiparesis	Upper and lower limb strengthening, Trained transfers, balance training, ambulation training, education of patient about his condition.
Week 3 48 years male with adhesive capsulitis.	Heat, soft tissue massage, joint manipulations, Joint ROM exercises and joint mobilization exercises.

<p>80 years male with mechanical low back pain</p> <p>66years female with lumbar spondylosis.</p> <p>35 years male with rheumatoid arthritis.</p> <p>69 years female with CVA</p> <p>70 years female with CVA</p>	<p>Heat therapy, myofascial trigger point therapy, back strengthening exercises.</p> <p>Heat, soft tissue massage, Lx. manipulation, back muscle strengthening and stretching and postural education.</p> <p>Ice, TENS joint ROM exercises, education about condition.</p> <p>Caretakers education about condition, trained bed mobility, joint ROM exercises, balance and coordination training, gait training</p> <p>Caretaker education about condition, trained bed mobility, joint ROM exercises, 2 hourly turning to prevent bed sores, ambulation training.</p>
<p>Week 4</p> <p>75 years female with backpain</p> <p>10 months old female with developmental delay</p> <p>75 years male with coccydnia.</p>	<p>Heat, soft tissue manipulation, Rt. LL stretching and strengthening exercises, home exercise program.</p> <p>Training of the delayed milestones, parents' education about the condition.</p> <p>Heat therapy, Mobilizations (PA glides to the coccyx, deep transverse frictions to affected ligaments, massage for coccygeus muscle, and postural adjustments in sitting and adjustment in ergonomics.</p>

<p>70 years female with Rt. knee osteoarthritis</p>	<p>Heat, soft tissue manipulation, Rt. LL stretching and strengthening exercises, home exercise program.</p>
<p>94 years female with general body weakness</p>	<p>General strengthening exercises, training bed mobility, gait training, home exercise program.</p>
<p>55 years female with sciatica due to Lx spondylosis</p>	<p>Heat, soft tissue manipulation, back mobilizing exercises, core stability training and sciatic nerve stretches.</p>
<p>50 years female with hip osteoarthritis</p>	<p>Heat, soft tissue massage, grade II longitudinal caudad, LL muscle stretches.</p>
<p>58 years male with low back pain</p>	<p>Heat, soft tissue massage, Active Lx mobilization and strengthening exercises.</p>
<p>1 year female with developmental delay due to malnutrition.</p>	<p>Play Therapy activities, trunk stability training, dynamic balance training, head control improvement, retraining delayed milestones</p>
<p>80 years female with Lx. Spondylosis</p>	<p>Heat, trigger point release, knee ROM exercises, LL strengthening, health education about ergonomics.</p>
<p>70 years female with knee osteoarthritis</p>	<p>Heat, deep frictional massage, piriformis muscle stretches.</p>
<p>59 years female with sciatica sciatica secondary to piriformis syndrome.</p>	<p>Heat, soft tissue massage, back mobilization exercises, Mackenzie Therapy, LL strengthening, general body aerobics and</p>

75 years female with lumbar spondylosis	strengthening exercises.
85 years male with Rt. Hemiplegia due to stroke.	<p>Bed exercises, trained transfers, UL and LL strengthening, trained sitting balance, gait retraining.</p> <p>Education about condition, regular turning to prevent bed sores, chest physiotherapy.</p>
2 years male with clubfoot.	Assisted in manipulation and casting with orthopaedic officer.
75 years male with general body weakness and low backpain.	Back care education and ergonomics, general body strengthening, ambulation training and low impact aerobics.
72 years female with lumbar spondylosis.	Heat therapy, Spinal mobs, McKenzie therapy, low back soft tissue mob, Aerobic Exs, lower limb stretches, and general body fitness Exs.
Week 5	
33 years female with VVF and RVF.	Health education about condition, pelvic floor, muscle strengthening, Lower limb strengthening exercises.
71 years female with bilateral hip osteoarthritis.	Heat therapy, soft tissue manipulation, hip joint R.O.M Exs, Stretching Exs for lower limb muscles, strengthening Exs
59 years female with Lx. Spondylosis	Heat, soft tissue massage, hamstring muscle stretches, patella mobilization, knee joint active ROM

<p>50 years male with Rt. Lung atelectasis.</p>	<p>Positioning for chest drainage, deep breathing exercises, ambulation training and low impact aerobics.</p>
<p>38 years female with a complete spinal cord injury</p>	<p>Educated patient and caretaker about condition, 2 hourly turning to prevent bed sores, taught bed to chair transfers, UL strengthening exercises, trained wheelchair use.</p>
<p>70 years female with coccydnia.</p>	<p>Heat, STM, Back care education, postural modification in sitting, back muscle stretches, coccydneal manipulation.</p>
<p>60 years female with lumbar spondylosis</p>	
<p>Week 6</p>	
<p>63years female with stroke.</p>	<p>Bed exercises, trained transfers, UL and LL strengthening, trained sitting balance, gait retraining</p>
<p>26 years female with pelvic floor muscle weakness</p>	<p>Pelvic floor muscle strengthening and bladder retraining programme.</p>
<p>50 years male hip osteoarthritis</p>	<p>Heat, Hip active ROM exercises, longitudinal caudad, gluteal muscle stretches</p>
<p>80 years female with Lt. knee osteoarthritis</p>	<p>Heat, trigger point release, isometric quadriceps strengthening, resisted active LL strengthening</p>
<p>22 years male with Rt. quadriceps tendonitis</p>	<p>Heat, soft tissue manipulation, Back mobilization and strengthening exercises, and ambulation</p>

71 years female with Lumbar spondylosis	Hip Joint ROM, Stretching hip flexors, assessing client for wheelchair, training use of wheelchair.
2 years male with Lt above knee amputation	Training sitting and standing balance, gait training, Lt. hip joint mobilization, education about importance of nutrition and exercises.
51 years male with paraparesis due to transverse myelitis.	UL strengthening, core strengthening, LL stretches, assessed patient for wheelchair, trained on use of wheelchair.
51 years female with lumbar spondylosis	.Heat, Soft tissue massage, core strengthening exercises, back muscle stretches, sciatic nerve stretches, education about backcare.
68 years male with frozen shoulder.	Heat, soft tissue massage, back muscle stretches, active back ROM exercises.
69 years male with mechanical low back pain	Heat, soft tissue massage, Active Lx mobilization and strengthening exercises
38 years male with acute back muscle strain	Ice, Soft tissue release, Knee joint ROM, Grade III PA and PA glides on tibia,
21 years female with mechanical low back pain	Bed exercises, trained transfers, UL and LL strengthening, trained sitting balance, gait retraining
2 years old male with spastic CP.	Joint ROM, muscle stretches, trained standing balance, core strengthening, provided standing frame.
75 years male with Lt. hemiplegia due to stroke.	

Week 7	
37 years male with general body weakness due to prolonged TB.	General body strengthening exercises, sitting patient out of bed, trained sitting and standing, ambulation training.
75 years female with Rt. hemiplegia due to stroke	Bed exercises, trained transfers, UL and LL strengthening, trained sitting balance, gait retraining.
74 years male with hip osteoarthritis	Heat, soft tissue massage, Active Lx mobilization and strengthening exercises
84 years male with lumbar spondylosis	General body strengthening, training sitting and standing balance, gait training, education about importance of nutrition and exercises.
80 years female with bilateral sciatica	Heat, soft tissue massage, sciatic nerve stretches, core stability training, backcare education
60 years male with low backpain	Heat, soft tissue massage, Active Lx mobilization and strengthening exercises
2 years male with hip septic arthritis	Heat, soft tissue massage, LL stretching and strengthening exercises, ambulation training.
59 male with neck pain	Heat, cervical traction, active neck ROM, deep neck flexor strengthening exercises.
2 years male with developmental delay.	Slow passive joint ROM exercises, passive stretches, motor stimulation with toys, UL and LL weight bearing exercises, advised mother on nutrition.

64 years female with low back pain	Heat, Soft tissue massage, core strengthening exercises, back muscle stretches, sciatic nerve stretches, education about backcare.
25 years male with gluteal muscle spasm	Heat, trigger point therapy, stretching exercises, ambulation training
51 years female with cervical spondylosis	Heat, soft tissue massage, active neck ROM exercises, deep neck flexor strengthening.
29 years pregnant woman with eclampsia	Passive joint ROM, positioning,chest physiotherapy, health education to caretaker about condition.
33 years male with quadriceps tendonitis	Heat, soft tissue manipulation, stretching exercises and Rt. Quadriceps strengthening exercises strengthening, ambulation training
Week 8	
10 years male post abdominal operation due to intestinal obstruction.	Heat, soft tissue manipulation, stretching exercises and core strengthening, ambulation training.
75 years female with mechanical low back pain	Heat, trigger point release, knee ROM exercises, LL strengthening, health education about ergonomics
70 years female with knee osteoarthritis	Heat, soft tissue massage, Active Lx mobilization and strengthening exercises
86 years female with lumbar spondylosis	Piriformis muscle stretches, heat therapy, soft tissue manipulation, hip joint R.O.M Exs, Stretching exs, for lower limb muscles,

60 years male with incomplete spinal cord injury.	strengthening Exs., Passive mov'ts, training transfers, trunk mobilization exes, gait rehabilitation
86 years female with Rt. Hemiplegia due to stroke	Passive movements, training transfers, trunk Mobilization exes, gait rehabilitation.
50 years male with mechanical low back pain.	Heat, traction, step bed, soft tissue massage, back stretching and strengthening exercises, sciatic nerve stretches, general body fitness exercises.
Week 9	
70 years male with low back pain	Knee and ankle ROM exercises, trigger point release, active calf stretches.
78 years male with cervical spondylosis.	Heat, manual traction, extension SNAGs, PAIVMs, active neck ROM
42 years male with soft tissue injury to the Rt. arm due to accident	Heat, soft tissue manipulation, back stretching exercises and core strengthening.
1 year male with cerebral palsy.	Health education on exercise and nutrition, trained head control, motor stimulation with toys, trained UL weight bearing.
43 years female with low back pain	Heat, trigger point release, knee ROM exercises, LL strengthening, health education about ergonomics.
83 years female with hip osteoarthritis	Mobilized knee and hip joints, LL and UL strengthening, core strengthening, trained ambulation with walker.

<p>9 months male with cerebral palsy.</p>	<p>Trained hand function, motor stimulation with toys, weight bearing exercises through Rt, LL, ambulation training.</p>
<p>5 years female with Rt. hemiplegia due to seizures.</p>	<p>Reducing tone, training milestones, worked on head control, parents education about the baby's condition</p>
<p>3years female with with Cerebral palsy</p>	<p>Heat, soft tissue manipulation, back stretching exercises and core strengthening. Heat, AP glides on sacrum, hip joint active and passive ROM.</p>
<p>Week 10</p>	
<p>41 years male with acute low back pain</p>	<p>Heat, soft tissue manipulation, Lx. mobilization exercises, back stretching exercises and core strengthening and general body fitness exercises.</p>
<p>78 years female with Sacroiliac joint dysfunction</p>	
<p>55 years male with paraplegia due transverse myelitis.</p>	<p>Positioning to prevent bed sores, active stretches through, passive stretches, joint mobilization. Assessed client for wheelchair, trained use of wheelchair.</p>
<p>3 years old male with quadriparesis secondary to meningitis.</p>	<p>Passive joint mobilization, motor and visual stimulation with coloured toys, trained sitting balance, assessed and fitted patient for mortistat, home exercise program given to mother.</p>
<p>76 years female with Lx. Spondylolithesis and early osteoarthritis both knees.</p>	<p>Heat, soft tissue massage, Lx. Mobilization exercises, knee ROM exercises, terminal quadriceps strengthening exercises.</p>

WHEELCHAIR FOLLOW UP OUTREACH AT MUNKUNYU.	<p>Assessed 3 pediatric clients and 3 adults for wheelchairs.</p> <p>Health education to patients about importance of physiotherapy in rehabilitation.</p> <p>Assisted in assembling and fitting five wheelchairs.</p>
---	--

ACHIEVEMENTS

Working as an intern at Kagando hospital has far reaching benefits ranging from improved clinical competence, social and spiritual growth. The following are some of the achievements I have obtained by working at Kagando hospital as an intern;

Improved clinical competence.

Having worked on a variety of conditions, my clinical skills and decision making has improved over time. My theoretical knowledge has been translated into practical knowledge.

I thank God for the privilege of working with colleagues from whose experience I can learn a lot.

In addition to getting practical experience, my theoretical knowledge has improved. We sometimes share through some challenging conditions, do further reading to improve our knowledge and we are already conducting department based continuous medical education sessions to update our knowledge on evidence based physiotherapy practice recommendations.

I have also participated in supervision of students from Mbarara University over the past six weeks. This interaction is important to any physiotherapist as it allows for improvement of management skills and work based learning. I therefore would like to thank Mbarara University for trusting and sending students to Kagando Hospital Physiotherapy department.

I have also improved my knowledge in wheelchair service provision through participation in more wheel chair outreaches and provision of wheelchairs at Kagando Hospital Rehabilitation department. I have learnt how to assess patients for wheelchairs and how to fit them after they

are assembled. This experience is important for my clinical practice since some of our patients require wheelchairs.

We have done two outreaches for assessing, fitting and assembling wheelchairs at Bwera and Mnkunyu and it was a really nice learning experience for me. I hope I can improve my experience in wheelchair service provision through participation in more outreaches.

It has been possible to have a physiotherapist on the outreach since the other physiotherapist is able to continue running work at the hospital. Having physiotherapy opinion on wheelchair provision is important since wheelchairs should be good enough to avoid pressure sores, musculoskeletal pain from uncomfortable posture and address the ability of the client to use the wheelchair. I am happy to be part of this team that improves the quality of life of patients served by Kagando hospital.

Photos

A) From the Wheelchair outreach at Bwera





**B) During a therapy session
at the department**



C) From graduation with colleagues

Adherence to physiotherapy treatment and physical activity recommendations.

Due to health education and goal setting with patients, we have been able to achieve rehabilitation goals with most of our patients. Having two physiotherapists reduces also the waiting time patients have at the department and this further enhances their adherence to physiotherapy review.

Regular attendance for review means that patients and caregivers can learn their home exercises properly as they can be reminded some of exercises from the first session that they could have forgotten. Adherence to home exercise programs is key in achievement of rehabilitation goals. These findings are similar to what was found out in a study, ‘Adherence to home exercise programs among caregivers of cerebral palsy patients’ at Mbarara Regional Referral hospital.

Team work and management skills.

Working at the Medical rehabilitation department has strengthened my ability to communicate and relate better with each of the members of the team.

Improved clinical competence also allows other team members to delegate some responsibilities to me whenever there is need. For example on days when we have outreaches, I am able to manage work at the department with the help of at least a nurse while other team members go for outreach. It is my pleasure to know that I can now manage a diverse caseload of patients on my own. On the other hand, I am also working hard to improve my knowledge in wheelchair service

so that I will always be able to offer physiotherapy services on outreaches whenever there is need.

I would recommend that there should be continued funding to maintain the demands of the hospital in terms of physiotherapy service provision. It is motivating for the team to know that they can get the work done and this has been possible because of the presence of three physiotherapists in the department.

Social and spiritual growth.

Interacting with people of a different cultural setting is one of the most interesting things I have enjoyed in Kagando. I personally have special interest in appreciating different Ugandan cultures. I have therefore been learning norms practices and languages spoken in Kasese. I am lucky that I am able to speak Luganda, Rutooro, Runyaruruguru and Runyankole which are commonly used languages in Kasese. I have also been interested in learning Rukonzo especially from my teammates which is related to the other Western Uganda languages.

My goal was to be able to complete a physiotherapy assessment in Rukonzo without support and I am now able to do that at the moment.

I also like the fact that each working day at Kagando begins with spiritual devotion. It has enabled me to boost my personal relationship with God. Moreover the fellowships and interactions with people in Kagando have also enabled me to improve my spiritual wellbeing. This is probably the best place one would want to Pray from every day.

CHALLENGES.

Inadequate resources.

Kagando hospital physiotherapy department has limited space and resources yet the number of patients received is high. The outpatient department is a two bed capacity space and some important equipment such as parallel bars, dolls and floor mats that would be used in pediatric rehabilitation are not available. However, we are still able to improvise and treat our patients with the resources that we have.

Ebola outbreak in Congo

Another challenge was the recent Ebola outbreak that has been in Congo, where some of the patients to Kagando come from. There have always been worries about the disease spreading to Uganda. However we have now been vaccinated and there are less worries.

RECOMMENDATIONS.

It is my request and recommendation that if possible my stay at Kagando be extended so that I continue to continue support the staff in the department as well as continue developing my experience.

It would be my recommendation that more funding in terms of resources and infrastructure is allocated to solve the above challenge.

APPRECIATION.

Interface Uganda

I would like to thank Interface Uganda for choosing me as the successful candidate for physiotherapy internship this year. I also would like to thank them for continuing to fund my stay at the hospital. I really like the experience that I am getting, especially that I have been able to develop links between my theoretical and practical knowledge. This was the best way to begin my physiotherapy career. I hope the experience obtained here can always be used to improve quality of life of patients under my service as this is my goal for every patient.

Kagando hospital

My sincere appreciation goes to the KARUDEC administration especially the hospital management. I appreciate the great reception and making work comfortable for everyone around here. I now know why the hospital has a good reputation across the country. I thank all the hospital staff from the doctors down to the lowest ranked personnel for the warmth and reception given to me.

Medical Rehabilitation department.

I would like to appreciate the friendship, orientation, mentorship and guidance given by the head of Rehabilitation Services, Kagando hospital. There is much to learn from her including clinical skills, social skills and management skills. I am privileged to work with her as I have benefitted a lot from her experience.

In a similar way, I wish to appreciate the role played by our physiotherapy colleague who is a volunteer from Germany. Her presence enabled me to get proper orientation to work. I have also been able to learn from her especially management of a caseload of patients both at the outpatient department and on wards as well as many physiotherapy treatment techniques.

My stay at Kagando hospital will always be an important memorable experience.

I am a member of a team, and I rely on the team, I defer to it and sacrifice for it, because the team not the individual, is the ultimate champion (Mia Hamm)