Leading a Trip:
A Checklist for DOCARE Trip Directors

1. Devise a Global Health Outreach (GHO) trip plan that includes a purpose, location, and time frame. Secure partnerships with nonprofits, hospitals, or other entities at the destination. Work with them to determine:
   a. Local needs and desires for foreign involvement
   b. Trip purposes, process goals, impact goals, and long-term objectives
   c. Appropriate trip size (in terms of total number of participants)
   d. The necessary ratio of students to clinicians
      i. DOCARE requires one physician or nurse practitioner for every three medical students
   e. The type of clinicians that are best suited to the local needs (by professional qualification and specialty)
   f. The number of translators, lay volunteers, and allied health professionals necessary
   g. The legal requirements, such as government/customs approvals or support
   h. Health, safety, and security issues that might affect participants

2. If applicable and desirable, identify additional US-based partners for
   a. University support, including funding and course credit approval
   b. CME approval
   c. Funding and supply donations
   d. Recruiting or promotion assistance

3. **Submit a trip application to DOCARE.**
   a. If you are a new trip director, upload a resume or CV with your application that highlights prior international outreach experience.

4. Please allow 90 days for a reply from the DOCARE short term outreach committee.
   a. Once you have a reply, submit any additional documents and/or answer any questions DOCARE has for you.

5. The DOCARE office will post your trip on the DOCARE website for participants to volunteer.
   a. Please direct all interested people to fill out this form, as it integrates a liability release.
   b. Expect to receive updates at least weekly from the DOCARE office on new volunteer enrollment.

6. Reach out to trip participants within 7-10 days of their sign-up with confirmation of their enrollment and basic information about the trip. (We recommend a standardized information packet for all participants, and we can supply a sample if needed.) This communication should include
   a. Trip purposes, goals, and expectations, including pertinent clinical information
   b. Trip plans, including dates, locations and responsibilities required of volunteers
c. Specifics of health and safety specific to your destination (and to travel in general)
d. Any travel arrangements volunteers must make individually
e. How to submit payment to you or a specified entity (if relevant)
f. How to reach you or your support crew with questions or concerns
g. And a reminder that signing up for a DOCARE membership before departure is required.

7. Answer volunteers’ questions throughout the pre-travel phase.
   a. Please inform the back office of any volunteer drop-outs or emerging issues.
   b. Notify volunteers that medical evacuation insurance is required with a minimum coverage limit of $500,000. Copies of the policy’s face sheet should be provided to the trip director and DOCARE headquarters.

8. Complete group arrangements, such as lodging, ground transport, and meals.
   a. Don’t forget to prepare for your own travels! Book flights, hotels, and purchase insurance for yourself and other coordinators.

9. Manage medications and supplies.
   a. Review the WHO Guidelines for Drug Donations (PDF).
   b. Generate a list of medications and supplies needed for the trip. Customize the purchase list based on the scope of medical practice or specialty your group intends to provide, as well as the needs and desires of the local community.
   c. Research and plan for purchasing medications and supplies in the destination country (e.g. costs, logistics, etc.), if applicable.
   d. Avoid the purchase and transport of controlled unless all required documentation (both from the US Drug Enforcement Agency and destination country’s Customs authority) is completed and approved by all agencies prior to your departure.
   e. Procure the medications and supplies you will purchase in the US through a nonprofit medical supply provider:
      i. Blessings International
      ii. MAP
      iii. Catholic Medical Trip Board
      iv. Another of your choice
   f. Inform volunteers if or how they can bring donation items.
      i. Make sure to specify what is needed.
      ii. Please also provide notice of prohibited substances. Include all controlled substances (medications classified by the Controlled Substances Act as Schedule II, III, IV, or V), as well as substances restricted for importation or banned for use in the destination country.
      iii. Be sure to inform participants that all donated medications should be >6 months prior to their expiration date.
   g. Prior to departure, determine a course of action for the disposal, donation, or return to US of any surplus medications and supplies at trip completion; if applicable, identify the receiving a medical facility and/or in-country organization.
10. Deal with customs.
   a. Follow customs and immigration processes for the destination country with regards to importation of medications.
      i. Be sure to avoid importation of controlled substances, as noted above.
   b. Work with your in-country health care partner(s) to facilitate pre-trip documentation. Have this completed prior to your departure from US for the trip.
   c. Place an inventory of all supplies and medications (with expiration dates), together with photocopies of customs documentation into a folder and also into each supply bag.

11. Complete the trip.
   a. Complete a group orientation or welcome session when volunteers arrive in the destination country. We recommend that this discussion include plans for the handling of any illness or emergencies that may occur.
   b. Complete group briefings and debriefings at the beginning and end of each day.
   c. Capture data on patients served. Many groups keep a list of all patients served with date, age, and location, and also note when referrals for follow-up were made.
   d. Manage delays, problems, and emergencies; consult DOCARE policies as needed.
   e. With your in-country health care partner(s), determine if you will return, dispose of, or donate any unused medications and supplies. Carry out this plan on or about the final day of the trip.

12. After the trip is complete, follow up with the DOCARE back office and partner organizations.
   a. Share feedback with DOCARE and additional partner organization(s), including addressing any outstanding issues.
   b. Finalize any paperwork with partner organizations.
   c. Submit a data capture report to the DOCARE secretariat (form will be sent at the time of trip approval).
   d. Submit paperwork for up to $400 reimbursement of medication purchases. (Advice on medical and supply reimbursement will be sent at the time of approval.)
   e. Submit photos and stories for sharing on social media (if desired).
   f. Start planning your next trip!