





OPEN HEART INTERNATIONAL

ANNUAL REPORT 2012/2013

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Our Mission

Open Heart International is Interventional, Developmental and Sustainable. We improve the global quality of life through service delivery, training and capacity building in developing countries.

Our Goals

We will implement projects that:

- Provide medical treatment for patients in developing countries who do not have access to such treatment owing to a lack of the necessary technical or financial means in their own country, irrespective of their nationality, race, or religion.
- Provide training for local medical, nursing, and allied health staff in the specialist fields associated with different diseases.
- Empower local health professionals and support staff in the countries we visit to deliver enhanced health care.
- Create awareness and support the development of prevention and rehabilitation services in developing countries.
- Facilitate and support Australian healthcare professionals to engage in the health care development processes in developing countries.

From the Chairman - Philip Currie



In my role as Deputy CEO of Adventist HealthCare Limited, I chair a lot of committees. All are important, and give me an opportunity to meet with great leaders right across the organisation.

As Chairman of Open Heart International, I have often marvelled at the great depth of leadership, and the passion of the Open Heart International management team. This team is the backbone of all of our projects.

Supported by a capable and growing office team, Open Heart International has certainly come a long way since its humble beginnings. One only has to look at the new website, or engage in one of the many social media platforms, to see the amazing amount of work Open Heart International can pack into any year. It is a truly remarkable success story.

Adventist HealthCare Limited aims to provide care for individuals in a holistic manner, promoting healthy living, providing state-of-the-art acute healthcare, and touching people's lives through our compassionate and expert care. Open Heart International, as one of the organisation's many divisions, strives to deliver the same level of care in the developing world, as we are able to provide here in Australia. We are proud of what Open Heart International is continuing to contribute to the healthcare systems in developing countries.

It is my pleasure to present to you the 2012/13 Open Heart International Annual Report. I hope you enjoy reading it as much as I did.



From the Manager - Michael Were



It is very exciting to be able to present our Annual Report for the first time under our new name, Open Heart International.

The journey towards consolidating all of our previous names and

brandings was lengthy, and I am very grateful to many of you that were involved and assisted us during the process. The new name derives its meaning from the openness, and the giving nature, that our volunteers display whenever they are a part of our team. I am continually amazed by the passion and commitment of all our volunteers who work tirelessly year round.

Since launching the new brand a few months ago, we have been overwhelmed with positive feedback, and we are already seeing some of the benefits that we had hoped for.

Our name may have changed, but our commitment to developing countries, its people and their health systems remains the same. Since our last report, an additional 771 patients have received life transforming surgery, and countless hours have been spent training in-country medical professionals.

We have also taken the opportunity to change the timing of our Annual Report, from a calendar year to a financial year basis. For continuity purposes this report covers 18 months of activity. For the first time, we have also included a financial summary.

We are indebted to a wonderful group of donors, supporters and volunteers that contribute so much each year. Thank you again for continuing to choose Open Heart International as a cause to support.



Achievements

Project	Country	Overall Visits to Date	Total Patients to Date	Jan 2012- June 2013 Patients
	Cambodia	4	57	27
	China	3	42	-
	Fiji	22	738	80
	Mongolia	3	25	-
	Myanmar	14	631	149
	Nepal	6	62	-
	Papua New Guinea	20	806	27
	Rwanda	6	133	22
	Solomon Islands	2	50	-
	Tonga	6	143	-
	Vanuatu	7	126	-
	Vietnam	7	52	-
	Cambodia	5	177	-
	Cambodia Clinic	1	N/A	-
	Philippines	1	142	142
	Nepal	3	233	233
	Nepal	18	1041	91
Total		128	4458	771



Our Team



Philip Currie

Chairman, Open Heart International Management Committee

Deputy CEO, Adventist HealthCare Limited



Michael Were

Manager, Open Heart International



Megan Townend

Marketing & Projects Assistant, Open Heart International



Annette Baldwin

Management Committee Member

Retired Nursing Executive Officer - Sydney Adventist Hospital



Chris Waite

Project Coordinator - Myanmar

ICU/CCU Nursing Unit Manager - Sydney Adventist Hospital



Coralie Batchelor

Project Coordinator - Nepal Women's Health

Special Care Nursery Nursing Unit Manager - Sydney Adventist Hospital



Fiona Hyde

Project Coordinator - Cambodia

Self-employed



Dr Ian Nicholson

Surgical Representative
Consultant Cardiothoracic Surgeon



John Sanburg

Project Coordinator -
Nepal Burns Surgery
Information Systems Project
Manager - Sydney Adventist
Hospital



Dr John Wallace

Project Coordinator -
Tonga
Emergency Care Doctor -
Sydney Adventist Hospital



Katia Lamas

Finance Manager
Assistant Accountant - Sydney
Adventist Hospital



Melanie Windus

Project Coordinator - Fiji
Patient Flow Manager - Sydney
Adventist Hospital



Russell Lee

Project Coordinator - PNG
& Rwanda
Self Employed

You can read further information about our team, including a short biography, by visiting our website www.ohi.org.au.





Cambodia

Open Heart International's first cardiac work in Cambodia started in 2007 following an invitation to visit the Angkor Hospital for Children.

During two visits by the team, local Cambodian surgeons became competent and confident in performing off-bypass surgery for a condition known as Patent Ductus Arteriosus (PDA). As a result of this skills sharing, this procedure is now regularly performed all year by the Cambodian surgical team, and there is no longer a waiting list at Angkor Hospital for Children for this type of surgery. The project was re-established in 2012 to teach more complex "open heart" surgical techniques.

The Cambodian team is already showing great enthusiasm and increased initiative and competence, particularly in the operating theatre. This has resulted in the visiting Open Heart International team reducing in size as the Cambodian team show proficiency. It will however take many years, and likely training outside of Cambodia, for surgical techniques to be completely mastered.



The two most common heart conditions that require surgical intervention in children in Cambodia is Ventricular Septal Defect (VSD) and Atrial Septal Defect (ASD). During visits in March 2012 and April 2013, 27 patients have received corrective surgery. With a waiting list of over 3,000 children, there is much work still to be done in Cambodia. The only true way of reducing the waiting list will be an independent and self-sufficient Cambodian surgical team.



is less than what the majority of Cambodians survive on per day



children are on the waiting list for paediatric heart surgery in Cambodia



Partnership

with Angkor Hospital for Children, Siem Reap



Success story

Chea, a cheeky six year old, had recently lost both of his parents and was left at a Women's Crisis Centre by a villager who didn't know what else to do. Unable to stay at the crisis centre long term, no orphanage or children's home would accept him due to his deteriorating health related to his heart condition.

In March 2013, Chea was operated on by the Open Heart International team and had an implantable device inserted to maintain and support the heart's structure. His improvement in health post-surgery was dramatic, and he quickly became the life of the Hospital once he was mobile again.

Chea has now been placed in a loving children's home thanks to the assistance of the social workers at Angkor Hospital for Children.

Looking Ahead

- Continue to encourage the active participation of Cambodian surgeons.
- Source suppliers of all equipment required, with the intention of purchasing all supplies locally.
- Create more formal learning packages for nursing staff in Intensive Care.
- Seek opportunities for training positions overseas for the Cambodian surgical team.
- Continue to commit to visiting Cambodia twice per year.





Fiji



Open Heart International, in partnership with the Fiji Ministry of Health, has been providing specialist cardiac services since 1990.

This includes actual surgery, but also assisting local doctors with the diagnosis and treatment of heart disease patients. Open Heart International also provides ongoing education for Fiji medical, nursing and allied health staff. This is achieved each year with formal lectures and bedside one-to-one training.

2012 saw the 21st visit by Open Heart International to the Colonial War Memorial Hospital, where 37 patients received critically needed cardiac surgery. In May 2013, 51 volunteers were part of the team that provided surgery to an additional 43 patients.

Positive development in Fiji occurred in 2013 with the establishment of the Specialised



Clinical Services Network program. Open Heart International is looking forward to working as part of the program, and to develop a more effective training and development program for medical and nursing staff under the direction of the Fiji Ministry of Health.



Success story

Seini was at university studying a Bachelor of Economics until early 2013 when she had to stop her studies as she was too tired to attend classes. Tiredness is just one of many symptoms associated with Rheumatic Heart Disease.

Seini's brother was engaged last year, and all the family members were planning to come for the wedding. Seini was so excited to be asked to be a bridesmaid. Her excitement soon faded to disappointment when she was unable to walk short distances, and knew she would not be able to walk the length of the aisle during the wedding ceremony.

Seini was admitted to hospital in March and seen shortly afterwards by the Open Heart International screening team. She was selected for surgery and operated on in May. Shortly after Seini was walking the corridors of the Hospital, getting out of bed as soon as possible to aid in the recovery process.

"Seini is counting the days and knows that nothing will keep her from walking down the aisle now. She is already walking the length of the corridor. She just keeps on walking. Seini is so happy" her mother told Open Heart International volunteers in the days following surgery.



of the population of Fiji live below the poverty line



Limited health services

The only cardiac surgery provided in Fiji is from international visiting teams



In partnership

with the Fiji Ministry of Health

Looking Ahead

- Integrate the project goals and direction in line with the Fiji Ministry of Health's new Specialised Clinical Services Network program.
- Increase the patient screening numbers to 80 patients suitable for surgery to allow full use of operating time.
- Establish a more effective mechanism for appointment of local nursing staff to work in partnership with the visiting Open Heart International team.
- Create a formal nursing training workshop for in-country nurses who will work with the team.





Myanmar

Open Heart International celebrated a 10-year working relationship in Myanmar (commonly known as Burma) in 2012.

The project is solely focused on teaching and development of medical staff in already established cardiac centres.

Formal training packages concentrating on Advanced Life Support, Echocardiography and other Intensive Care practices were delivered.

Open Heart International volunteers also provided expertise and practical learning for Burmese health professionals in Interventional Cardiology, Cardiac Surgery, Cardiac Electrophysiology, and Intensive Care.

Biomedical Engineering volunteers also assisted in providing scheduled maintenance and repair to equipment in Myanmar.

Support to the country increased again, with Open Heart International now working in five hospitals, across three different



cities, including the newly established cardiac surgery unit at Yankin Children's Hospital in Yangon.

The expansion of Open Heart International's work is made possible by an enthusiastic Burmese medical team, and a commitment to implement the changes that improve the cardiac services they provide in their country.



Success story

Dr Win Win Kyaw has been receiving ongoing training and mentoring by Open Heart International volunteer Dr Bruce French since 2006. Her training has included time on attachment in Hospitals in Australia.

"Yangon and Sydney have similar populations, yet Sydney has eight or nine cardiac units which conduct around 4,000 surgeries per year while Yangon has two hospitals conducting only around 300 procedures," says Dr Bruce French.

In 2012, Dr Kyaw led the development of a new cardiac surgery unit at Yankin Children's Hospital in Yangon, the city's third cardiac centre. The centre will primarily provide paediatric surgery but also some adult cardiac surgery.

The new centre will be another key focus for Open Heart International's work in Myanmar in future years.



has now opened in Yangon



In recognition of the progress towards democracy, some Australian government sanctions have been lifted



is the number of hospitals Open Heart International now works in across three cities

Looking Ahead

- Support the development of the new cardiac unit at Yankin Children's Hospital in Yangon.
- Review the possibility of assisting to establish a new cardiac unit in Mandalay.
- Continue diagnostic and interventional cardiology training of in-country professionals in Mandalay, MayMio, and Yangon.
- Look at opportunities to develop projects in other surgical specialties.
- Provide ongoing education packages and skill transfer opportunities in Yangon General Hospital and Defence Services General Hospital.





Nepal Burns Surgery

In Nepal, fire is a necessity for warmth and cooking. However, it is the cause of many health risks ranging from chest infections to burn injuries.

Many injuries affect children, who develop contractures after inadequate post-burn care. Permanent impairment is common, resulting in the restriction to daily living activities. Employment can be difficult and in a country without social security, incapacity is a financial hindrance to the family unit. Disfigurement also becomes a social barrier causing isolation and abuse.

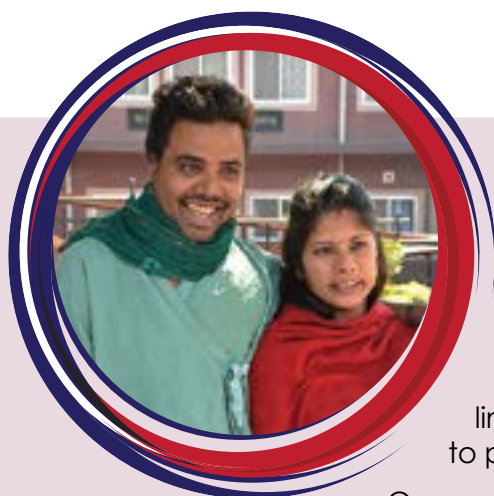
The project contributes to our in-country partner, Scheer Memorial Hospital's mandate to deliver quality care to the disadvantaged. This is achieved by providing specialist surgical services that are widely unavailable in the country. Corrective surgery provides improved functionality and quality of life.

Skills transfer opportunities are provided to Nepalese healthcare professionals who work side-by-



side with the visiting Australians. A series of more formal education lectures is also provided on varying subjects based on the requirements and interests of the Nepalese staff.

In 2013, Open Heart International was also able to support the Scheer Memorial Hospital with a shipping container of donated medical equipment including operating tables, x-ray machine, ventilators and anaesthetic machines.



Success story

Sita Ram suffered horrific burns at the age of three, when his mother left him unattended while she went to work. Sita Ram burned himself on the cooking fire in the house. The scars left him severely contracted in the neck area, and with limited motion and mobility he struggled to perform basic functions.

Open Heart International released the contractures during an operation in 2012, allowing improved functionality throughout his head and neck.

Sita Ram returned to visit the team during the 2013 visit. "I feel very grateful to have had surgery and am grateful to the team" he told OHI. He was also very excited to introduce to the team members his wife. Certainly life for Sita Ram has significantly improved as a result of surgery!



are the second most common injuries in Nepal



Life as burn victims is extremely difficult due to their appearance and unnecessary disability



with Scheer Memorial Hospital

Looking Ahead

- Continue to provide specialist surgery.
- Provide ongoing teaching and skills transfer opportunities.
- Deliver "Essentials of Pain management", a one day course designed to be taught to medical and paramedical staff working in the developing world.
- Explore the opportunity to create a "Burns Contracture Centre of Excellence" at the Scheer Memorial Hospital.





Nepal Women's Health

The Women's Health project has grown rapidly enabling the team to expand to a second hospital.

Uterine prolapse can result from prolonged labour, poor family planning, improper delivery due to unsupervised births, and resuming work too soon after childbirth. All these factors are common in rural Nepal.

The condition has varying levels of severity. The majority of the cases Open Heart International undertakes are third-degree prolapses, where the uterus slides outside the body. Women often experience incontinence and frequent infections, that can lead to isolation and abuse.

The primary goal of the program is to provide humanitarian relief to marginalised women in Nepal. By providing help it not only improves the health of these women but allows them to lead more productive lives which will flow on to their families and wider community.



A small team visited Scheer Memorial Hospital in October 2012, and a larger team worked in the HDSC-Team Hospital in Dadeldhura, and Scheer Memorial Hospital in March 2013. 184 women received treatment and relief from this debilitating condition.

Following the March visit, the HDSC-Team Hospital was reclaimed by the Nepalese government, and Open Heart International is unable to return at this stage. The Scheer Memorial partnership will continue, and consideration on a potential replacement project site has begun.

Success story

Janaki lives in far western Nepal in the province of Dadeldhura. Like most women in Nepal, the responsibilities of running a home are vast. She does everything around the home, including cleaning, cooking, lifting and carrying.

She had six children – all born at home, two have since passed away. Janaki had been living with uterine prolapse for approximately 12 years. With limited funds and access to healthcare, she had learned to cope. Her condition worsened, and she developed urinary retention. One of her sons and some neighbours carried her for three hours until they could catch a bus for the two hour trip to the hospital.

The hospital she arrived at happened to be the same hospital that Open Heart International was working in at the time. On examination, Janaki had a complete uterine prolapse, and had successful surgery shortly after. Janaki did not know our team would be coming to the hospital. She was very grateful for the help she received and said "I was almost dead and they made me alive - I am very thankful".



30 million

people live in Nepal which is roughly twice the size of Tasmania

600,000 Women

in Nepal suffer from uterine prolapse

In partnership

with Scheer Memorial Hospital and ADRA Nepal

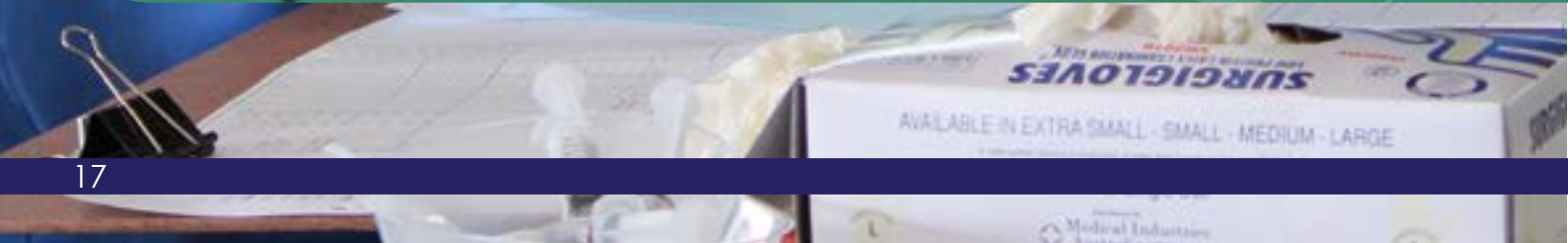
Looking Ahead

- A return visit is being planned for April 2014.
- Establish the possibility of funding a staff gynaecologist so that year round surgery can be provided at Scheer Memorial Hospital.
- Explore an alternate project site to replace Dadeldhura.





Papua New Guinea



Open Heart International's long term commitment to Papua New Guinea (PNG) spans twenty years, and now sees the country nearing self-sufficiency in cardiac surgery.

Some cardiac procedures are now completed independently of project visitations, with PNG surgeons now competent in surgical techniques. During the 2012 visit, 51 patients received surgery - 24 of these surgeries were independently completed.

The team coordinated two concurrent operating theatres; one for training of the local PNG team and the second for providing as much assistance as possible to the ever growing waiting list for surgery.

Open Heart International is continuing to focus on post-operative care with training projects for local nursing, anaesthetics and perfusion staff. This training is achieved through our visits to assist and perform cardiac surgery.



During each visit, the Intensive Care Unit (ICU) is completely full with patients following cardiac surgery. As a result an additional ICU facility is set up to cater for the existing demands of the hospital.

With the assistance of additional volunteers, Open Heart International has turned this into a unique training environment for the PNG nursing staff that learn by working in partnership with Australian professionals, and caring for a range of different patient needs.



Success story

Three year old Bethlyn had been in and out of hospital more times than her parents could remember.

Her family lives on a remote island in northern Papua New Guinea where getting basic treatment for her was expensive and difficult as the nearest hospital is a 12 hour boat ride away.

Struggling to cover the costs of travel and hospital expenses, the family resorted to traditional herbal medicines to treat Bethlyn's deteriorating health.

"She had shortness of breath and was continuously coughing. We brought her to the hospital and after a number of tests, the doctor found that Bethlyn had a heart problem," her mother told OHI.

Bethlyn was selected for surgery to correct her congenital heart defect during the 2012 visit by Open Heart International. Recovering quickly, she was playing and laughing in the hospital ward only days after surgery her mother recalls.

"She is enjoying life just like any other child. Soon she will be able to run, play, swim, and climb mountains and trees...and who knows!"


51
patients

received surgery; 24 of which were independently completed by trained PNG surgeons


3-bed
cardiothoracic

2012 saw the unveiling of the new ward in Port Moresby General Hospital


In
partnership

with the PNG
Department of Health

Looking Ahead

- Continue training and development of local surgeons, nursing and medical staff.
- Provide on-the-job skills transfer and education opportunities through the non-cardiac ICU project.
- Increase assistance with Adult cardiology screening.
- Provide surgical expertise to maintain or reduce the waiting list for paediatric cardiac surgery.





Philippines

After three years of planning, the first Eye Surgery project coordinated by Open Heart International began.

The northern regional area of the Philippines primarily consists of subsistence farming, with most of the population living on meagre incomes. The cost of health care is a luxury only a few can afford. An estimated 140,000 people are living with avoidable blindness in this region.

Working in partnership with Adventist Hospital Santiago City, the project aims to provide additional capacity to the Cagayan Valley region to increase the cataract surgical rate as well as infrastructure to allow improved surgical techniques.

The long term goal is to establish a sustainable eye care centre at the Hospital, and remove barriers that prevent cataract surgery being provided to people living with avoidable blindness.



In the first surgical visit, 142 patients received cataract surgery during a two week period by Open Heart International volunteers. The visit established strong professional ties with the ophthalmologists working in the area, as well as refined systems and process for high volume surgery at the Hospital. The learning's of the visit can be easily built upon in future visits to ensure that more patients can be treated.

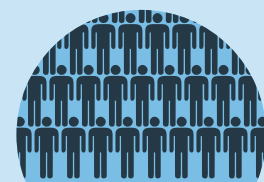


Success story

Cataracts mainly occur later in life, however for a number of reasons they can also occur in young children. Herbi lost the vision in his right eye at three, and his left eye at five. With no funds to be able to afford surgery, he has been living in complete blindness ever since.

A few years ago, there was a chance for him to receive surgery, however an unrelated illness thwarted his chance, and the family had resigned themselves to the fact Herbi may never see again.

Herbi celebrated his 12th birthday with a rather novel gift. Open Heart International provided surgery on his left eye to remove the cataract and give him his sight back. Later in the evening, and turning down the dressings covering his eye, Herbi was able to see his mother for the first time in seven years!



**140,000
Filipinos**

are living with avoidable blindness in the Cagayan Valley Region



**Cost
effective**

According to the World Health Organisation, cataract surgery is one of the most cost-effective health interventions



**In
partnership**

with Adventist Hospital
Santiago City

Looking Ahead

- After a successful initial surgical visit, increase the size of the team, from both Australia and the Philippines so that more surgery can be completed.
- Foster greater collaboration with local ophthalmologists in the area, and regular clinics for low socio-economic patients.
- Encourage the recruitment of a staff ophthalmologist so that year round surgery can be provided at Adventist Hospital Santiago City.
- Find finance to fund the cost of surgical equipment and surgical instrument purchases.
- Give consideration to an additional project site in the northern Philippines for 2015 and beyond.





Rwanda

Open Heart International visited Rwanda for the sixth time in 2012.

Devastated by genocide less than twenty years ago, the country continues to rebuild. The overarching goal is to develop an independent cardiac surgery unit, while at the same time address the needs of an ever growing waiting list for surgery.

Open Heart International collaborates with three other visiting teams; one from Belgium and two from the United States of America. Joint objectives and goals are set between the Rwanda Ministry of Health and the visiting teams to ensure.

A comprehensive screening program covering the whole country is a key focus for the future so that patients are identified early before their cardiac condition significantly worsens. This is a challenge given there



are only three cardiologists for a population of 11 million people.

Despite some significant infrastructure and equipment challenges during the November visit, 22 patients received surgery during Open Heart International's ten-day visit.



Success story

Quality surgical outcomes start with appropriate equipment and facilities. Open Heart International is experienced and accustomed to working in challenging hospital settings that are unlike Australian hospitals.

Biomedical Engineers volunteers like Jonathan and Shirley provide support to the fleet of equipment that travels with Open Heart International, but also fulfil an important role in developing, supporting and assisting their Rwandan counterparts to improve their facilities.

A new oxygen concentration plant and an uninterruptible power supply were installed following challenges that Open Heart International had encountered during previous trips. As the hospital infrastructure develops it means we can reduce the amount of equipment we need to transport. During 2012 we used predominately monitoring equipment owned by the project partner, King Faisal Hospital.

The benefits of great infrastructure not only benefit Open Heart International visits but helps provides quality healthcare facilities for the benefit of all patients.

11
million

population of Rwanda, of which 43% are under the age of 14

26
procedures

were performed in 2012 (22 patients, 20 open and 6 closed heart procedure)

In
partnership

with King Faisal Hospital and the Rwanda Ministry of Health

Looking Ahead

- Assist in finalising the business plan for a sustainable Rwandan cardiac surgery program.
- Standardise the supplies used by all visiting international teams, and establish a Rwandan acquisition process.
- Contribute to the development of a national screening program to allow for better geographic coverage.
- Work towards a national database to cater for the screening, surgical and follow up care.



2012-13 Corporate sponsors

On behalf of those people who received life changing surgery, and their families, we thank you for your generous support of Open Heart International.

Organising Partners



Corporate Partners

ADRA Australia	Medtronic Australasia Pty Ltd
Alcon Laboratories (Australia) Pty Ltd	N Stenning & Co Pty Ltd
Australian Government - Department of Foreign Affairs & Trade	Ross Fehlberg Pty Ltd
Edwards Lifesciences	Royal Australasian College of Surgeons
Foresight Australia	Scanlan International
Fresenius Kabi Australia Pty Ltd	St Jude Medical Australia Pty Ltd
Inka Surgical Pty Ltd	Rotary Club of Mosman
Johnson & Johnson Medical Pty Ltd	Terumo Corporation Australia Branch
Mayo Healthcare	The Novus Foundation Inc

Corporate Supporters

3M Australia	Fiji Ministry of Health	Reid Healthcare Pty Ltd
Abbott Australasia	GE HealthCare	Sanofi-Aventis
Advanced Biomedical Pty Ltd	Hospira Australasia Pty Ltd	Sentry Medical Pty Ltd
Air Niugini Ltd	HeartKids NSW Inc	Sigma Pharmaceuticals (Australia) Pty Ltd
Aspen Pharmacare Australia Pty Ltd	Imaxeon Pty Ltd	Smith & Nephew Pty Ltd
AstraZeneca Pty Ltd	Kimberly-Clark Australia Pty Ltd	Sonosite
Atrium Australia – Pacific Rim Pty Ltd	Lovell Surgical Supplies Pty Ltd	SPD Travel
B Braun Australia	Lifehealthcare Distribution Pty Ltd	Stryker South Pacific
Baxter Healthcare Pty Ltd	Maquet Australia Pty Ltd	The Children's Hospital Westmead
Biotronik	Medtel Pty Ltd	Travel Specialists Mosman
Boston Scientific	Molnlycke Health Care Australia	Travelmanagers Australia Pty Ltd
Cellplex Pty Ltd	Multigate Medical Products Pty Ltd	University of Papua New Guinea – School of Medicine & Health Sciences
Convatec (Australia) Pty Ltd	Pall Corporation	Vanguard Charitable Endowment Program
Coral Sun Fiji	Phebra Pty Ltd	Welch Allyn Australia Pty Ltd
Covidien	Philips Medical Systems	Westpac Banking Corporation (Fiji)
DeFries Industries Pty Ltd	PNG Air Freight Ltd	Whitely Medical
Device Technologies Australia Pty Ltd	Proact Medical Systems (Australia) Pty Ltd	
Drager Medical Australia Pty Ltd	Pure Fiji	
Fiji Airways		

Financial Summary

Description	2012-2013		2011-2012	
	OHI Revenue & Donations	AHCL Contributions	OHI Revenue & Donations	AHCL Contributions
REVENUE				
Donations	\$ 843,269	\$ 190,054	\$ 709,125	\$ 179,917
Grants	\$ 390,950	\$ -	\$ 165,769	\$ -
Other Income	\$ 148,982	\$ -	\$ 223,871	\$ -
TOTAL REVENUE	\$ 1,383,201	\$ 190,054	\$ 1,098,765	\$ 179,917
EXPENDITURE				
International Projects	\$ 1,105,587	\$ 5,194	\$ 960,416	\$ 28,723
International Projects Support Costs	\$ -	\$ 46,686	\$ -	\$ 47,745
Fundraising Costs	\$ 8,409	\$ 44,895	\$ -	\$ 41,343
Accountability and Administration	\$ -	\$ 77,199	\$ -	\$ 55,069
Depreciation & Minor Capital	\$ 15,775	\$ 15,216	\$ 11,960	\$ 6,033
Repairs and Maintenance	\$ -	\$ 865	\$ 75	\$ 1,004
TOTAL EXPENDITURE	\$ 1,129,771	\$ 190,054	\$ 972,451	\$ 179,917
EXCESS OF REVENUE OVER EXPENDITURE	\$ 253,430	\$ -	\$ 126,314	\$ -
HELD IN RESERVE AT START OF PERIOD	\$ 639,056		\$ 512,742	
EXCESS OF REVENUE OVER EXPENDITURE	\$ 253,430		\$ 126,314	
HELD IN RESERVE AT END OF PERIOD	\$ 892,486		\$ 639,056	

Open Heart International is a division of Adventist HealthCare Limited. Open Heart International's revenue is received through two sources, San Foundation and Adventist HealthCare Limited.

Adventist HealthCare Limited is audited by General Conference Auditing Services and also by Grant Thornton. San Foundation is audited by WL Brown and Associates.

Adventist HealthCare Limited's financial reporting period for 2012/2013 was June 18, 2012 to June 17, 2013. For 2011/12 it was June 19, 2012 to June 17, 2013.

San Foundation's financial reporting for 2012/13 was June 18, 2012 to June 17, 2013. For 2011/12 it was July 1, 2011 to June 17, 2012.

The above figures do not include payments made direct to third parties by sponsors/supporters which sometimes occur in relation to some in-country expenditure. Furthermore there is no allowance for in-kind donation of products or services, or the donation of professional expertise by volunteers.



2012-13 Team Members



Cambodia

Fiona Hyde

Ashish Katewa
Carolyn Wilkinson
Catherine Roberts
Chris Lapointe
David Baines
Elizabeth Tongue
Ian Nicholson
Jasmyn Davies
Joanne James
Jonathan Egan
Jordan Haworth
Karin Stevens
Kym Stuart
Lisa Altmann
Lorraine Baines
Lorraine Flynn
Lynne McKellar
Maree Standaloff
Melissa Nicholson
Paul McKellar
Philip Roberts
Rebecca Dinn
Ryan Haworth
Sandra Berg
Stephanie Van Hilten
Sue Clubbe
Sue Haworth
Wade Mann
Wendy Corkill
Yishay Orr

Benjamin Ferry
Benjamin Uprichard
Brendon Carter
Calvin Rutene
Charlie Corke
Craig Dunlop
Craig Smith
David Baines
Declan Lee-Smith
Emma Ireland
Fabio Ramponi
Fane Buinmasi
Foini Gautusa
Helen Dodshon
Ian Nicholson
Ingrid Peppou
Jann Bews
Jayme Bennetts
Jim Dennis
Joe McCaffrey
John Dittmer
Julie Hulston
Kale Dyson
Kathy Jays
Kerrie Richardson
Kerry Lewin
Kristen Jays
Linda Thomson Mangnall
Lisa Heywood
Louise Pearsall
Malcolm Richardson
Marina Rakovkaia
Mark Markou
Mark Windus
Marlon Goldsmith
Marvin Goldsmith
Matthew Bayfield
Mechelle Irvine
Melissa Cooke
Melissa Radford
Melissa Smith
Mere Edwards
Michele O'Brien
Neeta Rampersad
Neil Orford

Nerelle Steele
Nora Pertz
Olivia Elieff
Phuong Markman
Rachel Sharp
Ranjan Joshi
Ross Wallace
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Yishay Orr

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Bronwyn Gaut
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David Pennington



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Coralie Batchelor

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Philippines

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Natalie Moore
 Matthew Ball

Rwanda

Russell Lee

Adrian Deluca
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