

CHAPTER 2

第 二 部



TZU CHI FOUNDATION

醫療義診

醫者父母 痛如己身

FREE MEDICAL SERVICES

MEDICAL CARE WITH A PARENT'S HEART

5月1日，由四位骨科醫師和一位麻醉科醫師組成的五人醫療團隊從臺灣出發前往尼泊爾支援，他們是大林慈濟醫院副院長簡瑞騰、關山慈濟醫院院長潘永謙、臺北慈濟醫院骨科醫師曾效祖、花蓮慈濟醫院骨科醫師劉冠麟及臺中慈濟醫院麻醉科醫師林昌宏。

在尼泊爾與第一梯次賑災醫療團的四位醫師會合後，兵分三路發揮專長——第一隊由外科系簡守信院長領軍，參與骨科醫院開刀；第二隊由內科系趙有誠院長帶領，在當地醫師尼爾蒂斯·釋迦協助安排帶路下，前往臨時帳篷區、偏鄉山區進行義診；第三隊則在巴塔普健康照護中心駐診。由於當地醫材匱乏，醫療團所需的骨材與醫療用品由臺灣及印尼運抵，義診後並贈與當地衛生部門及醫院。

因應災區健康需求不斷推移變化，各梯次安排接力的醫護人員專長也隨之調整。當骨科及外傷緊急醫療的需求趨緩，災民求診多半為感冒、腸胃不適、筋骨痠痛等症狀，因此改由內科、小兒科、中醫師為主；接著，六月雨季來臨，如何維護公共及個人衛生教育則成為醫療團的重點。其中，特別是地震後災民的心理創傷十分普遍，因此慈濟醫療體系醫護人員及國際慈濟人醫會志工成員結合慈善，透過訪視及行動義診的關懷服務，更是切合民眾的需求，受到普遍肯定。



1. 慈濟醫療團隊在巴塔普健康照護中心外成立第一個臨時義診中心，醫師陣容堅強，內外科兼具，但人手有限，醫師也同時扮演藥師和助手的角色。右起簡守信院長（外科）、趙有誠院長（內科）、花蓮慈濟醫院創傷小組王健興主任、大林慈濟醫院急診部主任李宜恭，以及當地醫師尼爾蒂斯。（攝影 羅瑞鑫）

The medical team established the first temporary treatment site outside the Bhaktapur Community Eye Center. The team is fully functional with a strong line-up of both surgical and internal medicine experts who complement one another well. In the circumstances where manpower is lacking, each doctor has to serve as both a pharmacist and an assistant at the same time. From right to left, surgeon Dr. Sou-Hsin Chien, internal medicine Dr. You-Chen Chao, trauma team leader Dr. Chien-Hsing Wang, ER director Dr. Yi-Kun Lee, and Nepalese Doctor Nirdesh Shakya. (Photo credit: Jui-Hsin Lo)

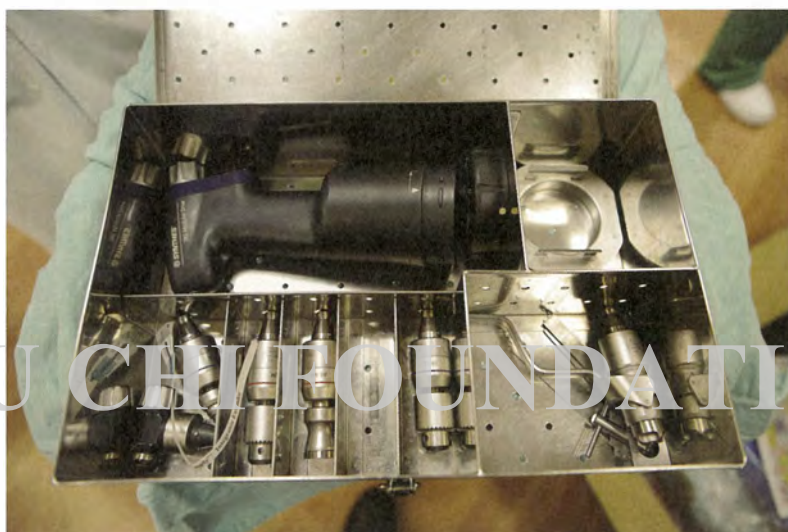
FREE MEDICAL SERVICES

MEDICAL CARE WITH A PARENT'S HEART

On May 1, a medical team composed of four orthopedists and one anesthesiologist of Tzu Chi hospitals set out to Nepal from Taiwan. This team consisted of Dr. Jui-Teng Chien, vice superintendent of Dalin, Dr. Winghim Poon, superintendent of Kuanshan, Dr. Shiao-Tzu Tzeng of Taipei, Dr. Kuan-Lin Liu of Hualien, and Dr. Chang-Hung Lin of Taichung.

After meeting with the four doctors from the first Tzu Chi Disaster Relief and Medical Team, they were divided into three sub-teams to focus on their specialties. Dr. Sou-Hsin Chien led the first team, which was responsible for all the surgery. Dr. You-Chen Chao led the second team in internal medical. With the help from Dr. Niradesh Shakya, they went to temporary tent districts and remote mountain areas to hold free clinics. The third team was directed to Bhaktapur Community Eye Centre. Due to the lack of medicine locally, all the medicine needed by the medical team was shipped from Taiwan and Indonesia. The surplus of medicine was later donated to local hospitals.

As medical needs changed, the medical teams adapted to the situation. Over time, the demand for orthopedists and surgical resources slowed, while increases in colds, flus, stomach pain, and muscle soreness led to a greater need for internal medicine, pediatrics, and traditional Chinese medicine. With the coming of the rainy season in June, public sanitation and personal hygiene became the medical team's main focuses. It is common for people to suffer psychological trauma after a major disaster like an earthquake. Therefore, staff of Tzu Chi hospitals and members of Tzu Chi International Medical Team (TIMA), together with Tzu Chi volunteers, took great care of the people through visits and free clinics. Their hard work was widely recognized locally.



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2. 善用現代科技軟體，身在尼泊爾災區的簡守信院長，透過即時訊息與在臺灣的大林慈濟醫院副院長簡瑞騰聯繫，向臺灣各慈濟醫院提出當地緊急醫療的需求。（攝影 何姿儀）

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Using modern technology, Dr. Sou-Hsin Chien was able to communicate with Dr. Jui-Teng Chien from the affected disaster areas of Nepal through instant messaging to request urgent medical care needs from Tzu Chi hospitals. (Photo credit: Zi-Yi Her)

3. 臺北慈濟醫院接獲賑災團提出的需求，隨即展開各項醫材、藥品的準備工作，其中的電動骨鑽，利用電池電力可使用十小時。（攝影 吳裕智）

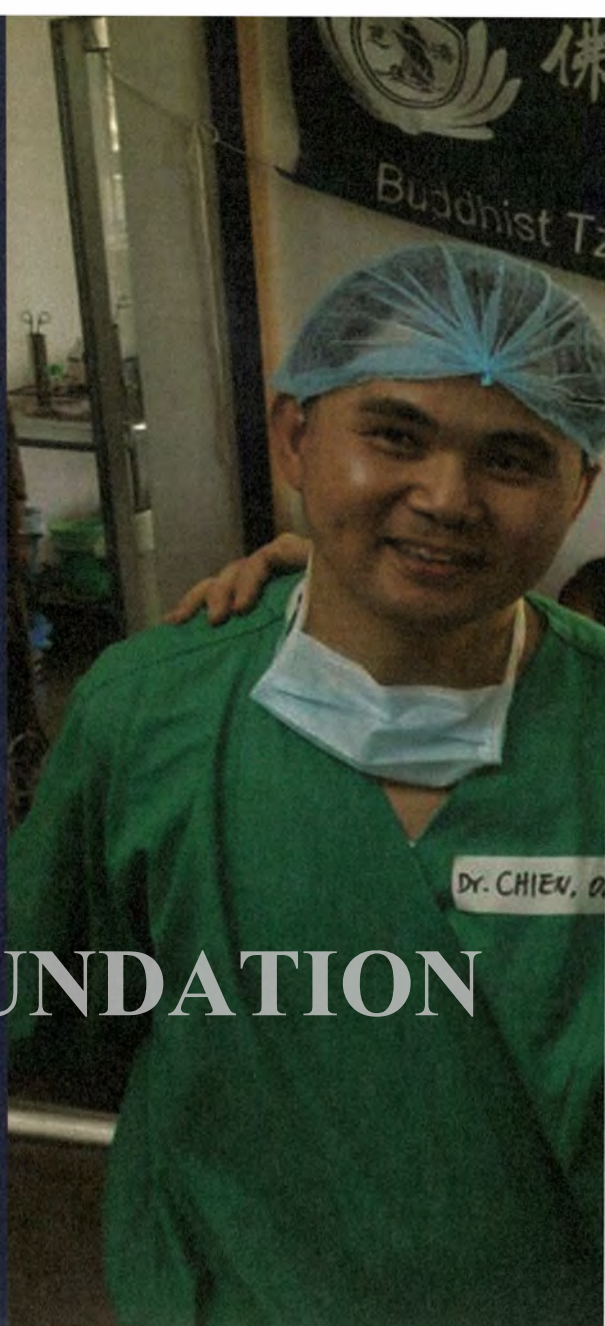
Once Taipei Tzu Chi Hospital received messages, it immediately started to pool together medicines and equipment. Among the collected items was an electric bone drill, which can have a battery life of up to ten hours. (Photo credit: Yu-Jhih Wu)

骨傷需求及動員

第二梯次賑災醫療團帶著骨科手搖電鑽、手術器械、骨板六十片、骨釘七百六十支及相關藥品，在5月1日半夜抵達尼泊爾，翌日一早即由臺中慈濟醫院院長簡守信領隊，在馬達普醫院施行手術。

專長骨科的大林慈濟醫院副院長簡瑞騰，參與過印尼日惹地震後的醫療救援，深知災區可能電力不穩，因此自備了手搖骨鑽、老虎鉗等相關器械；臺北慈濟醫院醫護人員則備齊各種尺寸的骨材和藥品。一整天的手術沒停過，一位整型外科醫師、三位骨科醫師和一位麻醉科醫師上場，雖是初次見面，兩地醫師彼此卻培養出不錯的默契。在手術房門口外懸掛起「慈濟」標誌的布條，為臺尼兩方醫療的合作留下歷史的見證。

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TZU CHI DOCTORS MOBILIZED IN NEPAL

The second Tzu Chi Disaster Relief and Medical Team arrived in Nepal at midnight on May 1 with orthopedic hand drills, surgical tools, 60 bone plates, 760 bone pegs, and related medicine. After a brief rest, the team led by Dr. Sou-Hsin Chien, superintendent of Taichung Tzu Chi Hospital, started performing surgery at Madhya-

pur Hospital the next morning.

Dr. Jui-Teng Chien, an orthopedic specialist and the vice superintendent of Dalin Tzu Chi Hospital, had previously been involved in earthquake relief efforts in Indonesia and knew that there may not be adequate electricity on site. Therefore he brought orthopedic hand drill, pliers, and other necessary tools. In addition, Taipei Tzu Chi Hospital personnel had prepared orthopedic materials of different sizes as well as medicine.



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1. 左起大林慈濟醫院副院長簡瑞騰、臺中慈濟醫院院長簡
 宗信、臺北慈濟醫院醫師曾效祖。(攝影：慈濟基金會提
 供)
 Left to right: Dr. Jui-Teng Chien, vice superintendent of
 Dalin Tzu Chi Hospital; Dr. Sou-Hsin Chien, superintendent
 of Taichung Tzu Chi Hospital; Dr. Shiau-Tzu Tzeng, Taipei
 Tzu Chi Hospital. (Photo provided by Tzu Chi Foundation)

Surgeries continued throughout the day, with one plastic surgeon, three orthopedic surgeons, and one anesthesiologist. Even though these doctors were meeting for the first time, they were able to work very well with each other. They even hung up a Tzu Chi banner outside the operating room to commemorate the collaboration.





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2. 面對緊急醫療，資深的醫師也能隨時放下身段擔任副手補位，所有的工作不分彼此，共同承擔。(攝影 林昌宏)
During emergency treatments, even experienced doctors are willing to put everything aside to fill in as assistants for others. All assume their responsibilities regardless of status. (Photo credit: Chang-Hung Lin)

3. 手術中突然停電，醫師利用手機的燈光照明為傷患開刀，繼續完成手術。(攝影 林昌宏)
As power goes out during surgery, doctors use the light from their cell phones to complete the surgery. (Photo credit: Chang-Hung Lin)



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4.

「在重大天災之後，新生命的誕生總是能夠帶來希望與喜悅。」林昌宏醫師原本以為來到尼泊爾，只要為骨折傷患麻醉而已，沒想到因為慈濟醫療團隊與當地醫院連日來合作無間，5月3日居然臨危受命要與當地醫師合作，緊急為一對雙胞胎接生。

原來這位媽媽已經懷孕滿四十一週，本來安排好剖腹產的時間，沒想到卻被地震延遲一週，幸而在這艱難時刻，還能平安地生下三千及二千九百公克的雙胞胎寶寶，為災區帶來一股希望的能量。（攝影 林昌宏）

“After a major natural disaster, the birth of new life can always bring hope and joy.” Dr. Chang-Hung Lin thought that his job in Nepal would simply be to perform anesthesia on patients with broken bones. Little did he know, the collaboration between the Tzu Chi medical team and local hospitals allowed him to help bring a pair of new lives to the world during a dire situation on May 3.

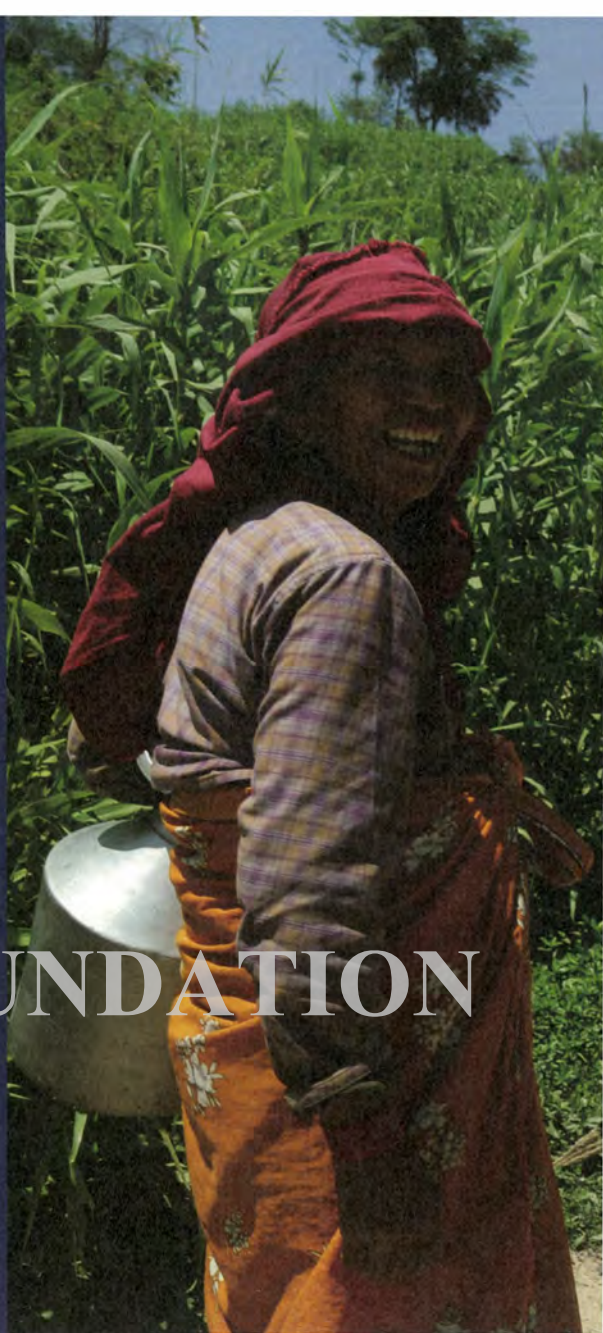
The mother had already been pregnant for 41 weeks. She was scheduled for a C-section, but it was delayed for a week due to the earthquake. Thankfully, she was able to safely give birth to twins weighing 3 kg and 2.9 kg, bringing new hope and energy to the disaster area. (Photo credit: Chang-Hung Lin)

行動醫療

當賑災醫療團外科醫師在手術室為骨折患者開刀時，身為內科醫師的臺北慈濟醫院院長趙有誠憂心還有更多傷患無法來到醫院就醫，於是啟動行動醫療，「病人走不過來，我們就走過去，慈濟向來如此！」在當地醫師尼爾蒂斯的帶路下，深入各偏遠村落及帳篷區義診。

每天早上出發前，臺灣賑災醫療團成員沖泡香積飯帶著當午餐，然後與尼泊爾的醫護人員、翻譯志工擠在一輛小車子裡顛簸前進災區。為了搶時間救助災民，趙有誠一行人每天馬不停蹄到不同的村莊義診，有時在臨時搭建、簡陋的棚子下看診；有時在未傾倒的房子裡為災民服務；有時找不到地方，在馬路旁併起兩張桌子就成為臨時醫護站，車子來了，還得移動桌子，讓車子通行。

通往山區村莊的路斷了，車子到不了，大家就徒步把藥品、器材搬運上山。在那緊急迫切的期間，共醫治了超過二千人次的病患。



MOBILE FREE MEDICAL SERVICES

While the medical team surgeons were operating on bone fracture patients in the operating rooms, Dr. You-Chen Chao, superintendent of Taipei Tzu Chi Hospital, was sincerely worried. There were many injured victims who were not able to go to the hospital for such a treatment. He thought, “If patients are not able to come to us, we (as doc-

tors) will go to them. This is how Tzu Chi has always been.” Without further delay, and with local doctor Nirdesh Shakya leading the way, the disaster relief medical team took medical treatment into remote villages and relief tent areas.

Every morning before departure, Tzu Chi Disaster Relief and Medical Team members would bring Tzu Chi’s instant rice to mix with water for lunch. All tightly packed together in a small car with local healthcare staff and translation



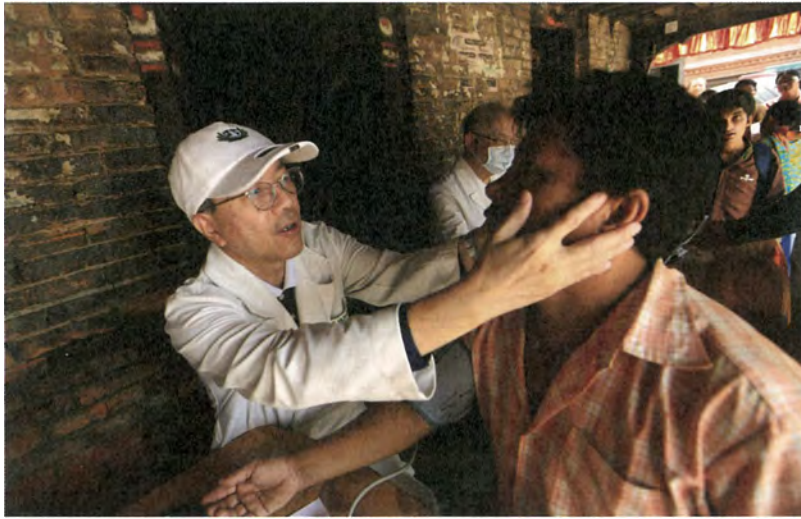
1. 醫療團隊前往巴塔普的偏鄉加克爾時，車子無法進入村落，醫師只得徒手搬運藥品，步行走入村莊中義診。(攝影：羅瑞鑫)

When the medical team went to Jhaukher, a rural town neighboring Bhaktapur, the car they rode in was unable to access one of the villages. Therefore, the doctors in the team had to carry medical supplies with their bare hands and walk to the village to provide medical services. (Photo credit: Jui-Hsin Lo)

volunteers, the team quickly advanced toward the disaster areas. In order to race against time to save disaster survivors, Dr. Chao and his team visited different villages nonstop just to treat disaster survivors, sometimes in simple, temporary shelters to perform health examinations, sometimes in old, abandoned houses to give medical services. Sometimes, when they could not find an appropriate place to render their services, the team would have to set up two tables on the side of a road as its temporary medical station. Any-

time a car came along the road, they had to move the tables to let the car pass by.

When roads leading to mountain villages were no longer accessible to cars, everyone had to walk to carry medicine and equipment up the mountains. In the first few days of emergency relief, over two thousands patients were treated.





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賑災團前往陶瓷廣場設立行動醫療義診服務站。花蓮慈濟醫院院長高瑞和為鄉親看診。(攝影 黃宗保)

The disaster relief team went to Pottery Square to setup a mobile clinic service station. Dr. Ruey-Ho Kao, superintendent of Hualien Tzu Chi Hospital, sees a patient. (Photo credit: Tsung-Pao Huang)

3. 行動義診能找到教室作為看診的地方，算是非常難得的。圖為設於私立羅山英文學校的行動義診服務站，村民正排隊求診。(攝影 陳國麟)

Finding a classroom to be used as a mobile clinic for diagnosis and examination was a rare and fortunate event. Here, villagers queue for treatment at the mobile clinic service station at Roshan English School. (Photo credit: Kuo-Lin Chen)

4. 賑災醫療團前往巴塔普區偏鄉奇翠普設立義診服務站，為災民提供醫療援助。簡陋的桌椅一擺就是問診處，地上架起福慧床就是行動藥局。(攝影 李美儒)

The medical team went to Chitapol, a rural town near Bhaktapur to set up a medical service station to provide medical assistance to earthquake victims. This modest setup of tables and chairs is where patients received a diagnosis. The Jing Si Multi-purpose Folding Bed on the ground is the makeshift pharmacy. (Photo credit: May-Lu Lee)

5. 慈濟人醫會神經外科醫師陳子勇細心為阿嬤看診。(攝影 莊慧貞)

Neurosurgeon Dr. Tzu-Yung Chen, member of TIMA, carefully sees an elderly lady. (Photo credit: Hui-Chen Chuang)

醫者仁心

語言不通，加上災後物資短缺，有時得尋遍整個村子，才能拼湊出一組簡陋的桌椅以供看診，行動醫療基本上就是克難醫療。醫護人員面對蜂擁而至的鄉親，一整天下來往往累到撐不起腰，然而只要看到鄉親解除病苦壓力，露出歡喜笑容，一切的辛苦都是值得的！

特別是許多鄉親在地震後，普遍出現災後創傷壓力的症狀，不敢安寢，稍有餘震就驚慌失措，經過醫護人員看診時細心的膚慰，通常就是最好的安慰劑。這時，醫療結合身心關懷，行動醫療便是愛心醫療！

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DOCTORS WITH LOVING AND KIND HEART

On top of language barrier, a simple task such as finding a set of stools and a table had proven to be difficult after disaster struck. It was no surprise that mobile health care faced constant hardship. After a long day of treating endless waves of patients, all the volunteers could barely move. Even though the exhaustion was unbearable, putting a smile on patients' faces made everything worthwhile.

After the disaster, many survivors suffered from post-traumatic stress disorder, waking up in the middle of the night from the slightest shaking. Medical volunteers not only treated wounds, but also their minds. A big hug, some simple caring words, or a light caress on the hand could help victims recover from the darkest time in their lives.



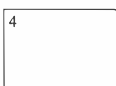
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1. 一張塑膠桌可以用來看診、放藥，也可以隨時轉換成病床，即刻為傷患進行清創消毒。(攝影 周幸弘)

A simple plastic table serves as a pharmacy and place to be seen by the doctor, and if required, an immediate platform for doctors to disinfect a patient's wounds. (Photo credit: Hsing-Hung Chou)



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2. 花蓮慈濟醫院神經外科陳新源醫師比手畫腳，再加上翻譯志工的協助，也能跨越語言障礙，圓滿每一場義診活動。(攝影 莊慧貞)

With help from local volunteers, neurosurgeon Dr. Shin-Yuan Chen of Hualien Tzu Chi Hospital uses hand gestures and body language to overcome the language barrier. (Photo credit: Hui-Chen Chuang)

3. 在人稱「猴廟」的斯瓦揚布納特寺旁的帳篷區裡，臺北慈濟醫院中醫師陳舜鼎以當地罕見的拔罐及針灸療法，為災民舒緩病苦。(攝影 葉晉宏)

Next to Swayambhunath (Monkey Temple), traditional Chinese Doctor Shun-Ting Chen of Taipei Tzu Chi Hospital uses the alternative medical treatments of cupping therapy and acupuncture to relieve pain for a patient. (Photo credit: Ching-Hung Yeh)

4. 花蓮玉里慈濟醫院院長張玉麟蹲下來為鄉親治療腳傷，醫治完畢後，彼此互相感恩祝福。(攝影 簡淑絲)

Dr. Yuh-Lin Chang, superintendent of Yuli Tzu Chi Hospital, squats down to treat a Nepali local's leg wound. After the treatment, they exchange words of gratitude and blessings with each other. (Photo credit: Shu-Szu Chien)

克難診所

穿行過蜿蜒崎嶇的山路，司機雖然停住了車，但趙有誠院長及大林慈濟醫院急診部李宜恭主任下車卻仍看不到聚落、聽不到人聲，這才發現，還需要步行一段路，才能到達尼泊爾的偏鄉皮卡爾村。

遠遠看到緩緩而行的白袍身影，村民奔相走告「醫師來了！」由於當地都是危樓，村民索性自發找來一塊塑膠布，用竹竿撐起兩角，充當臨時的義診醫療站。不一會兒，塑膠棚外排了上百位村民等著檢查。

雖然語言不通，透過翻譯志工，仍用心聆聽病人的需求，兩位醫師才能將診斷結果傳達給鄉親。看診完畢、村民離去之前，趙院長還不忘殷殷叮嚀，提醒村民用藥。

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貼心，超越語言的隔閡；醫師的關懷，使村民立即感受到那一分疼惜。臨走前，小娃的合十感謝，就是給醫師最好的回饋！



HUMBLE FREE CLINIC SITE

Cars bumped along uneven roads in rural areas until the drivers finally managed to park. Dr. You-Chen Chao, and Dr. Yi-Kun Lee could not find or hear anyone talking. Only until then did they realize that they still needed to cover a bit more distance on foot before arriving at the secluded Pikhel Village in Nepal.

Seeing the figures in white moving slowly towards the village, villagers exclaimed, “Doctors are here!” and spread the word around. Dilapidated buildings were all that could be seen. Villagers grabbed a plastic sheet and bolstered two of the corners with sticks. And so, a temporary station for free healthcare services was built. Shortly after that, hundreds of villagers lined up in front of the tent, waiting to be seen by doctors.

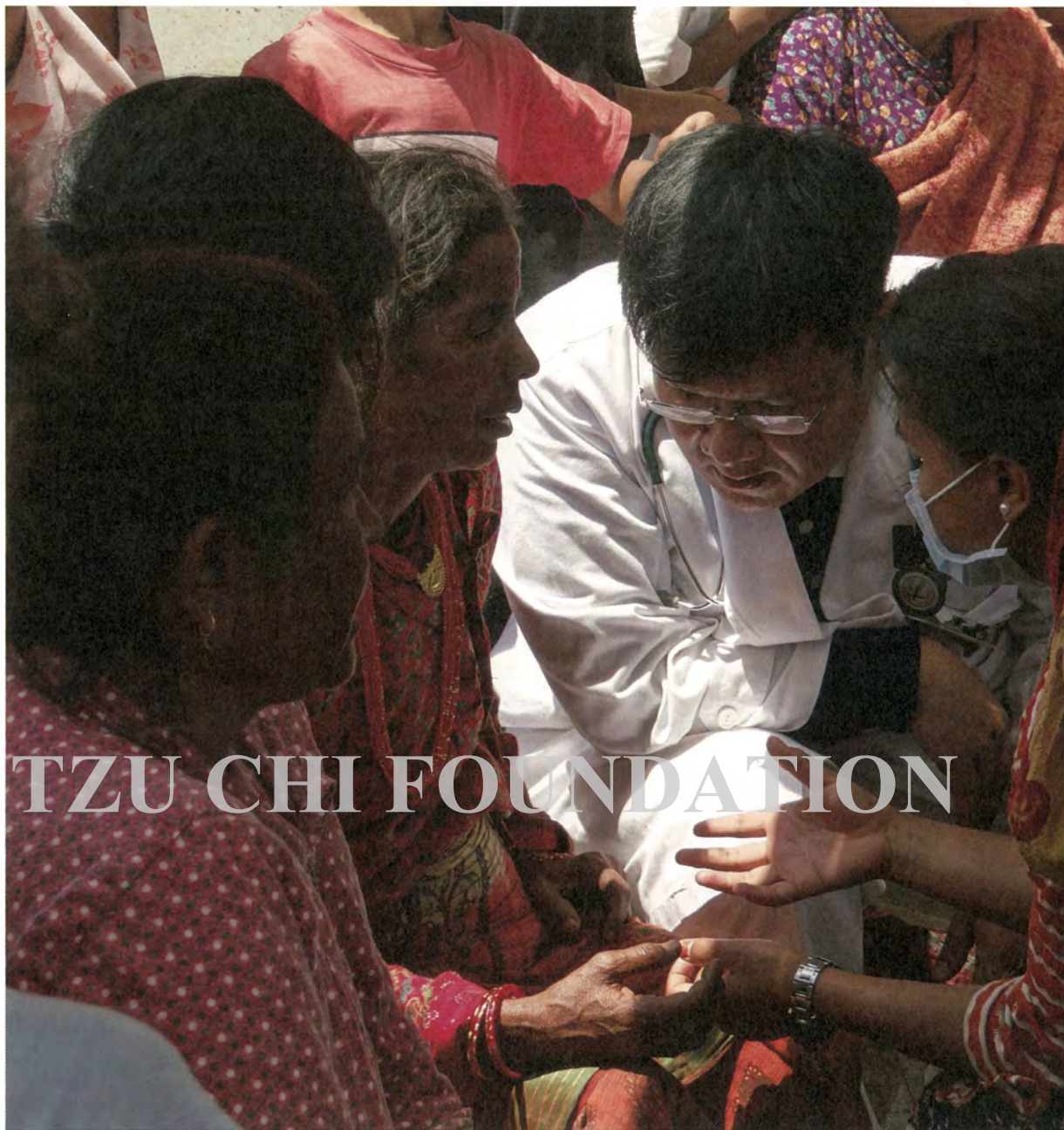


1. 村民用塑膠布、竹竿搭蓋起簡單的帳篷，充當臨時的義診醫療站。(圖片：羅瑞鑫)
Villagers built a temporary tent out from a plastic sheet and sticks for the free healthcare service. (Photo credit: Jui-Hsin Lo)

With the help of interpreters, both doctors could show the diagnosis results to the villagers. Before people left and the service ended, Dr. Chao reminded villagers to take care of themselves and to take their medicine regularly.

Love and care are beyond words. Villagers can feel doctors' great care immediately through their caring service. A child showed gratitude to the

medical team by putting his palms together before leaving, which the doctors considered their best reward.



2

2.

李宜恭主任用心聆聽鄉親的醫療需求。(攝影 羅瑞鑫)

Dr. Yi-Kun Lee, ER director of Dalin Tzu Chi Hospital, listens patiently to villagers' medical requests. (Photo credit: Jui-Hsin Lo)



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3

3. 小男孩合十感恩醫師用心為他看病。(攝影 羅瑞鑫)

4

A little boy thanks the doctors for their services by putting his palms together. (Photo credit: Jui-Hsin Lo)

4

4. 醫護人員和鄉親們在臨時醫療站前歡喜合影，鄉親一掃悲傷情緒，展露出災後難得一見的愉悅笑容。(攝影 羅瑞鑫)

The medical team and villagers take a happy picture together in front of the temporary medical station that villagers built. As the villagers' sorrows were swept away, smiles of joy, rare since the disaster, begin to emerge. (Photo credit: Jui-Hsin Lo)

再會了，芊迪！

罹患先天性水腦症，造成腦部萎縮、四肢變形的芊迪，在尼泊爾地震後第四天被救出，由於長期臥病在床，全身上下共有十五處褥瘡，頭部、臀部的傷口幾可見骨，傷口處發出腐臭味，蒼蠅也不時在她身邊穿梭。5月12日，慈濟醫療團隊將她後送至加德滿都的醫院急診，但因為醫院床位爆滿，收治困難，家人又把她送回曼索里帳篷區。

5月31日慈濟第六梯次醫療團隊準備將芊迪送醫時，她卻已陷入昏迷……

不過，大家還是不放棄，合力把她抬出帳篷，小心翼翼地送上救護車，不捨地目送她離去，期望著能及時挽回她的生命。歷經一個多小時的車程，救護車終於抵達位於山谷中的蘇希瑪·寇瑞拉紀念醫院。

芊迪的身軀嬌小且變形，而褥瘡傷口卻非常大，主治醫師傑森瓦·釋迦馬上幫芊迪診斷，並請護士即刻換藥，但語帶保留對志工說：「她情況很嚴重，我們會試著救她，但無法保證救得活。她身上多處褥瘡傷口都有細菌感染，必須先清洗傷口後，再動手術清除所有的死皮。需要的時間可能要超過三個月，再評估看看，能不能進行植皮手術。」

當一切安置妥當，不可思議的是，原本奄奄一息的芊迪，從治療室被推到病房後，突然睜大雙眼，面露微笑看著大家。

馬來西亞的李曉卿醫師靠近關懷，跟芊迪說「Namaste」（尼泊爾語，您好！），她虛弱地回應：「Na …… ma ……」讓陪同的姊姊和嫂嫂及慈濟志工無不欣慰和感動。

終究，天不從人願，四天後，芊迪仍因器官衰竭往生。然而，所有關懷照顧過她的志工，都相信她在人生最後一段，是安詳無憾地離去，留下的是一段跨越國界、永恆互愛的動人故事。





1

1. 慈濟賑災醫療團醫師發現罹患水腦症的褥瘡病患芊迪，並為她換藥、清創。(攝影 蕭耀華)

Tzu Chi Disaster Relief and Medical Team cleaned wounds and changed medicine for hydrocephalus patient Chandeashori. (Photo Credit: Yiu-Hwa Hsiao)

GOODBYE, CHANDEASHORI!

Rescued on the fourth day after the earthquake, Chandeashori suffered from congenital hydrocephalus, which caused brain damage and deformation of her limbs. Due to being bedridden for long periods, she had 15 bedsores and serious injuries on her shoulder and head to the point that her bones were visible. A stench was coming out of her wounds and flies circled around her.

On May 12, her illness grew worse and she ran a high fever. The Tzu Chi medical team sent her to a hospital in Kathmandu's emergency ward, but due to hospital beds being full and difficulties in getting her admitted, her family sent her back to the Maheswori tent area.

As 32 year-old Chandeashori prepared to bid farewell to the sixth medical relief group, on May 31, she fell into a coma.

Nevertheless, no one gave up hope. They worked together to carry her out of the tent and carefully put her on the ambulance. Saddened to see the ambulance leave, they hoped deeply that her life could be saved.

After an hour of driving, the ambulance arrived at Sushma Koirala Memorial Hospital, located in a valley.

Chandeashori's body was small and deformed,

while her bedsores were big. Attending doctor Jaswan Shakya immediately diagnosed Chandeashori and asked the nurses to change her medicine. He quietly said to the volunteers, "Her situation is serious. We will try to save her, but there is no guarantee she'll survive. Her body is full of infected bedsores; we need to clean and sanitize them and perform surgery to take care of the dead skin. This may take over three months; afterwards we can evaluate if we can graft new skin."

The hospital provided a free bed and treatment and agreed to help Chandeashori undergo wound cleaning and recovery surgery. After the treatment was done and Chandeashori was taken from surgery back to the patient room, the weary Chandeashori suddenly opened her eyes wide and gave a smile for everybody.

Malaysia doctor Seow Kheng Lee from Malaysia approached Chandeashori and said "Namaste" ("hello" in Nepali). Chandeashori weakly replied "Na...ma..." letting all the nearby family and volunteers feel overwhelmed and touched.

However, Chandeashori passed away four days later due to organ failure. The volunteers who cared for her in these last few days all believe that she left peacefully and without regret. What she left behind is a moving story of love and care across borders.



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2

2. 躺在帳篷裡的芊迪。(攝影 李美儒)
Chandeashori lies in the tent. (Photo credit: May-Lu Lee)

3

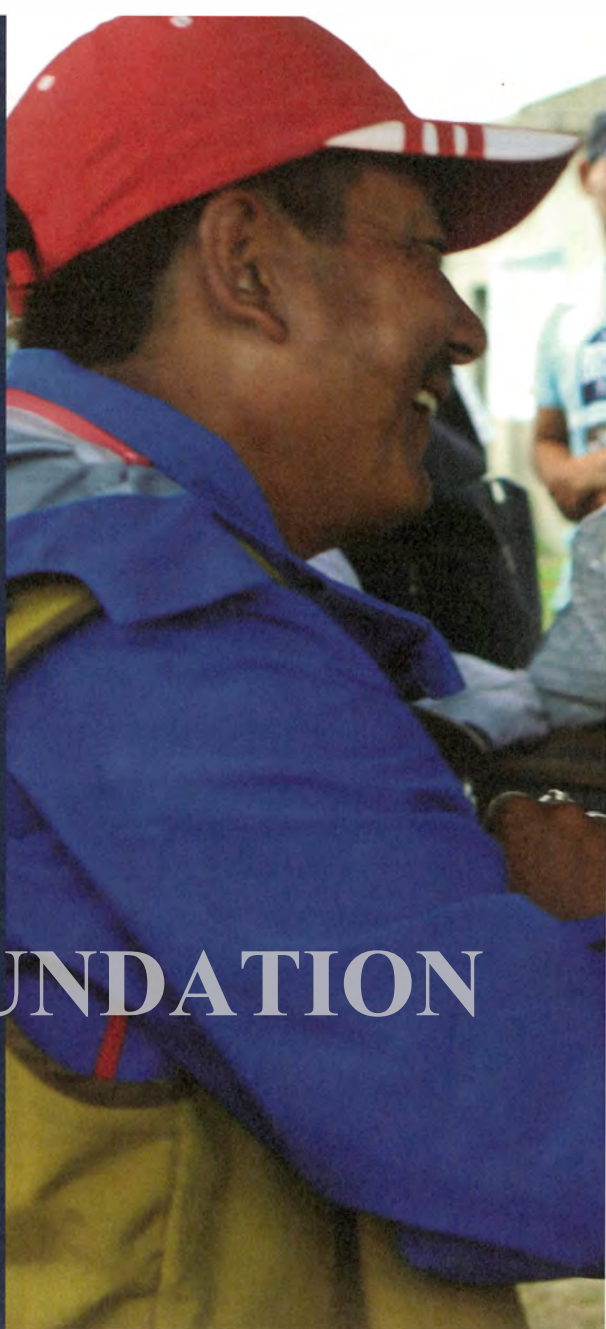
3. 馬來西亞慈濟人醫會醫師李曉卿(中)、慈濟志工潘柏宏至醫院探訪芊迪，並送上平安吊飾結緣品給予祝福。(攝影 李美儒)
In the hospital, Dr. Seow Kheng Lee and volunteer Po-Hung Pan visit Chandeashori and give her a gift of blessing. (Photo credit: May-Lu Lee)

人醫帶動

慈濟醫護人員主動登記、自費自假的報名參加尼泊爾賑災，以志願服務的精神，走入遙遠國度苦難的無醫村。他們以真心陪伴、親如家人的關懷，紓解鄉親的孤獨恐懼，彼此建立起真摯的情誼。

透過義診，醫護人員感同身受，從自己的生命走出去，進入每一位苦難人的生命中，感受病苦，貼心地施醫給藥，膚慰每一個受創的心靈。同時在見苦知福中，看到許許多多窮困的人，貧病交加、生活環境惡劣，面對著缺陷的人生，也體悟到自身生活的富足與豐厚，啟發了人生嶄新的視野及生命的意義，也帶動了當地人醫種子的萌芽。

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INSPIRING MORE MEDICAL PROFESSIONALS

Tzu Chi medical professionals willingly used their own vacation time and expenses to volunteer in disaster relief work in Nepal. With a volunteering spirit, they marched into villages with no medical care in a faraway country. In the short time for treatment, they sincerely accompanied locals with familial care and established genuine friendship that relieved loneliness and fear.

Through volunteering at the free clinic, medical professionals experienced firsthand the pains and suffering of everyone they cared for. They prescribed medicine thoughtfully and nurtured the spirits of those traumatized. At the same time, they realized their own blessings by seeing others' suffering. Seeing those who are less fortunate living with poverty and disease, they appreciate more what life has given them. This inspired the people there to find new meanings in life and to nurture these seeds of hope.

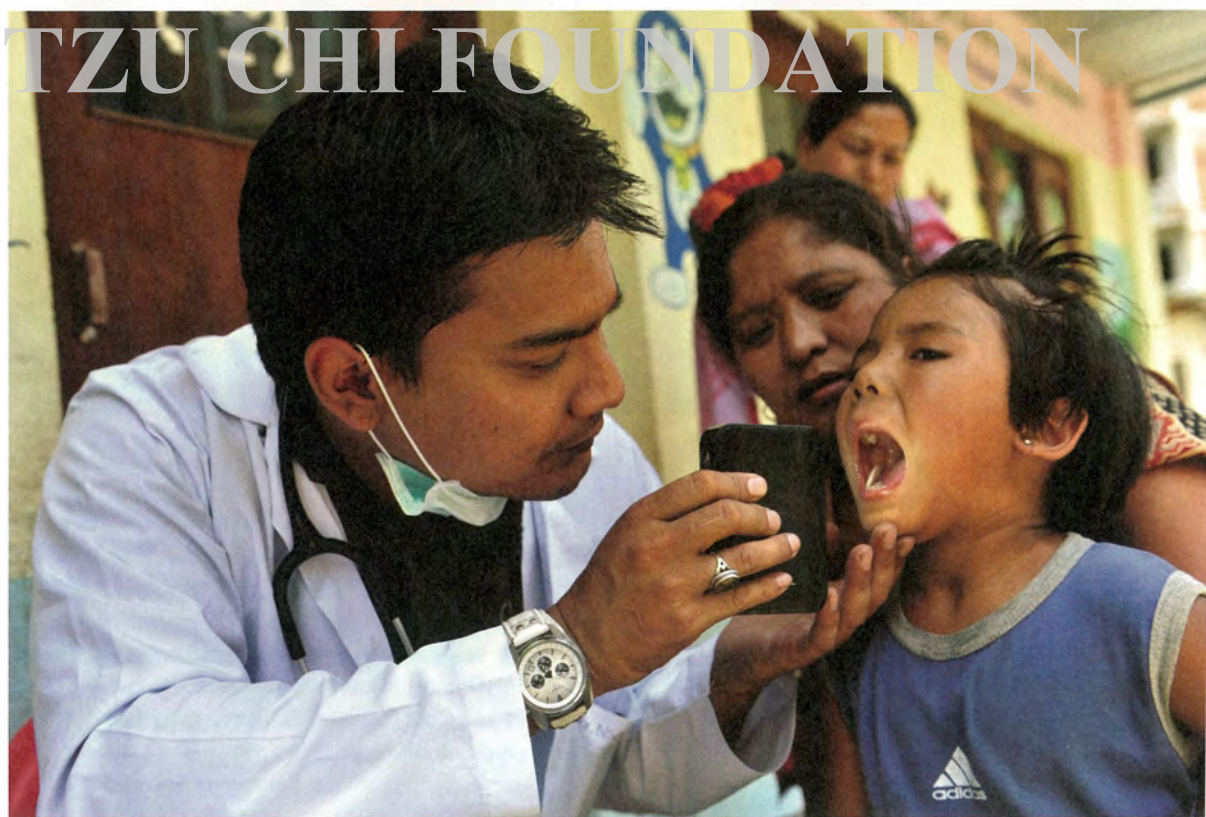


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1. 奇翠巴蒂帳篷區行動義診中，馬來西亞人醫會醫師陳劍虹親切的問診，讓受災鄉親露出最美的笑容。（攝影 黃宗保）

Free mobile medical service in Chuchepati tent area. The patient shows the most beautiful smile to Dr. Kim-Hong Chan, member of Tzu Chi Medical Association in Malaysia. (Photo credit: Tsung-Pao Huang)





2.

尼泊爾當地的勝偉醫師在巴塔普癌症醫院工作時，曾到臺灣的國泰醫院進修肝癌診療與照護半年。而身為佛教徒的他，在前往臺灣之前，他的師父特別叮囑，要他到臺灣後去找「慈濟」，因而結下好因緣。所以當他聽到尼泊爾發生大地震時，特地在4月30日趕回故鄉，也在第一時間聯繫慈濟，跟著參與救災。

勝偉醫師認為：「每一個醫師，都是藥師佛小小的化身，當醫師有很大的機會修行佛法。」（攝影 張清文）

Dr. Sarvesh Gyawali, a local Nepali, works at Bhaktapur Cancer Hospital and previously interned for several months in the liver cancer care center of Cathay General Hospital in Taiwan. As a Buddhist, his dharma master specifically urged him to go find Tzu Chi when he went to Taiwan, and he then built a rapport. When he heard the news of the earthquake, he rushed back to his hometown on April 30, contacted Tzu Chi at the very first moment, and has since participated in the disaster relief efforts.

Dr. Sarvesh Gyawali believes, "Every physician is the manifestation of the Medicine Buddha. Doctors have the tremendous opportunity to practice dharma." He also shared that because of Tzu Chi, they had the opportunity to provide medical care to the villagers. If not for Tzu Chi, they may not have been able to carry out the mission by themselves. (Photo credit: Ching-Wen Chang)

3.

尼爾蒂斯醫師是前科技部長卡夏的兒子，因為在中國大陸天津醫學院唸過書，能說簡單中文，在加德滿都擁有診所，但是地震過後，他寧可讓自己診所休診，也要跟著臺灣來的慈濟醫療團隊深入災區救人。他熟悉當地狀況，是協助慈濟尋找義診點、擴展醫療關懷面最有力的推手。

由於他從第一梯次到第九梯次，全程陪伴、參與慈濟賑災醫療團的義診服務，讓他對慈濟團體有深刻的認識，從中他深受感動，進而投入志工行列，並帶動其他當地醫護人員投入義診，希望能讓慈濟人醫的大愛精神，在尼泊爾延續下去。（攝影 陳國麟）

Dr. Nirdesh Shakya, son of former minister Dr. Keshab Man Shakya, is able to speak simple Mandarin after studying at Tianjin Medical University in China. After the earthquake, he closed his clinics temporarily to accompany the medical team to disaster areas to save lives. Familiar with the local areas, he helped quickly locate relief stations and make medical outreach work possible.

From his full participation in the first medical team mission all the way to the ninth, he gained a deep impression and understanding of Tzu Chi. He was moved by Tzu Chi and is now committed in volunteer efforts while encouraging other local doctors to help. He wishes to help Tzu Chi's great love continue to grow in Nepal. (Photo credit: Kuo-Lin Chen)

翻譯志工

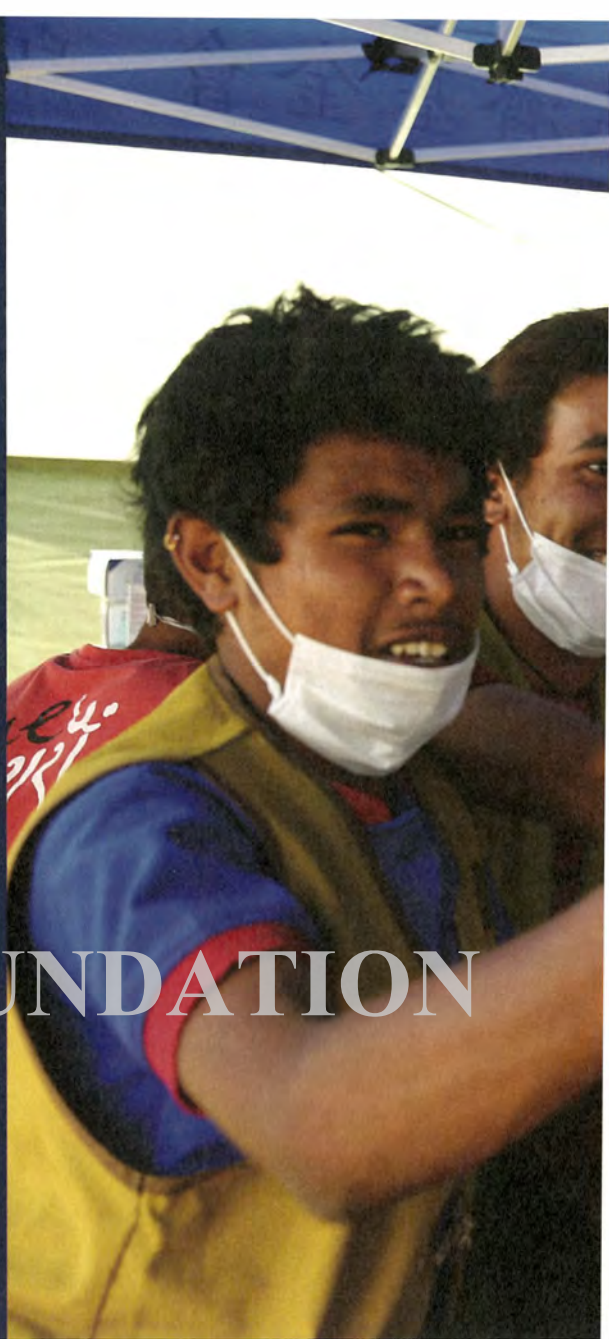
每天在帳篷區的醫療站與醫護人員互動最為密切的，就是當地的年輕志工，他們的年紀大都在十五至二十二歲左右，能穿上志工背心和醫療團一起工作，為同胞服務是他們最感到開心的事。有一天，大愛電視臺的攝影師希望能記錄他們當志工的心情，以一、兩句標語唸出來或是唱出來，結果不到半天時間，其中一位年輕志工迪諾索立即寫下，並且譜成曲：

「Every time the world faces some disaster or famine or any other problems. We are there. For a little help of the world. We are Tzu Chi volunteers. 」

(面對世界一些問題或飢餓，我們在那裡，盡我們所能提供協助，我們是慈濟志工。)

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當他們一起大聲地唱出來時，所有的志工都感動得流下淚來，藥師蔡佩珊說：「這些小志工有的也是家毀人亡，但他們仍然展露陽光般的微笑，用勇氣與愛服務著自己的同胞，也陪伴、幫助了我們。」



YOUNG TRANSLATION VOLUNTEERS

Interacting closely with the medical volunteers at the clinical tents every day were young local volunteers, ranging from 15 to 22 years old, who donned volunteer vests to work with medical volunteer groups. To them, helping others is what makes them the happiest. One day, a cameraman of Da Ai TV asked them and hoped they could express their volunteering reflections in a few phrases to be read or sung. Within half a day, one of the younger volunteers, Dinosl Khadgi, wrote

down these words:

“Every time the world faces some disaster or famine or any other problems. We are there. For a little help of the world. We are Tzu Chi volunteers.”

When they sang it out loud, all of the volunteers were moved to tears. Tsai said emotionally: “Some of these young volunteers also lost their homes and families, but they are still able to share their smiles, using their courage and love to serve their fellow citizens while accompanying and helping us.”



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1. 慈濟賑災醫療團號召曼索里帳篷區的年輕人投入志工行列，鼓舞大家將流過的淚水換成現在相伴的笑聲，歡喜付出。(攝影 簡淑絲)

The Tzu Chi Disaster Relief and Medical Team called on young people from the Maheswori tents to join the ranks of volunteers, encouraging everyone to replace tears with laughter and give with joy. (Photo credit: Shu-Szu Chien)



2

3

2.

奇翠普的義診服務站裡，當地醫學院學生潤如加入義診行列，協助翻譯及擔任醫師助手，花蓮慈濟醫院副院長王志鴻也藉機傳授醫療知識。（攝影 莊慧貞）

At Chitapol's clinic service station, local medical student Ranju Deaju joined the ranks of clinical volunteers by helping with translation and serving as a physician's assistant. Dr. Ji-Hung Wang, vice superintendent of Hualien Tzu Chi Hospital, also took this opportunity to teach medical knowledge. (Photo credit: Hui-Chen Chuang)

3.

慈濟賑災醫療團在加克爾設立義診服務站，當地護校學生也加入志工行列，協助配藥。（攝影 李美儒）

Tzu Chi Disaster Relief and Medical Team set up clinical service stations at Jhaukhel, and the local nursing students joined the ranks of volunteers by helping to dispense medicine. (Photo credit: May-Lu Lee)

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頭蝨清除與衛生教育

慈濟教師聯誼會的老師與帳篷區的孩子互動時，發現他們上課不專心，總在搔頭。將孩子的頭髮撥開檢查……赫然發現有許多白色的點點附著在頭髮上，原來是頭蝨在作怪！曼索里帳篷區的大人竟然也有頭蝨寄生，慈濟志工決定來場蟲蟲大作戰。

上街採買藥粉及浴帽等除蝨的必備品，志工才發現當天是尼泊爾的假日，只好一家一家地收購，跑了八家藥局才買到二十三罐藥粉及一百零九包的洗頭藥水。一時之間買不到這麼多浴帽又該怎麼辦呢？最後，急中生智想出了以塑膠袋代替浴帽。

除蝨用品準備完畢後，便可以進行第一次的「抗戰」，由於在缺水的帳篷區，平日要洗頭就非常不易，衛生條件不佳，因此造成頭蝨問題，大人小孩罹患頭蝨的比率高達九成五，為此志工還特地邀請醫師黃銘義先做簡單的衛生教育。

接著慈濟志工與本土年輕志工戴起口罩和手套，一個接一個開始幫大家投藥除頭蝨，尤其是長髮女孩更要仔細投藥，一絲一縷的髮絲都要梳開來上藥。由於塗抹藥物後，還要靜待二十分鐘才可以清洗，在等待的過程中，帳篷下出現一個個套上紅色塑膠袋的包頭，大人小孩都化身成故事中的小紅帽。帳棚裡漸漸熱鬧起來，大家的神情也隨著藥效發揮輕鬆了起來……



HEAD LICE TREATMENTS AND HYGIENE CLASS

During humanistic classes in the Maheswori tent area, some students often scratched their heads and could not focus in classes. After separating these children's hair with rulers and inspecting carefully, teachers of Tzu Chi Teacher Association found that the troubles were caused by head lice. In the tent area, not only children, but adults also suffered from head lice. Thus, in order to help the locals, the Tzu Chi volunteers decided to fight against lice.

Volunteers soon found it was not easy to purchase necessities for these “battles,” such as medical powders and shower caps, since it was a



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1. 慈濟志工前往猴廟旁的帳篷區關懷，用剛買來的除頭蝨洗髮精為大家洗頭。（攝影 張如容）

Tzu Chi volunteers wash people's hair in the tent area near Monkey Temple with newly bought anti-lice shampoo. (Photo credit: Ju-Jung Chang)

holiday in Nepal. After visiting eight pharmacies, the volunteers eventually got 23 cans of medical powder and 109 bottles of medical shampoo. However, it was impossible to collect enough shower caps for everyone. Finally, the volunteers came up with a clever idea: using plastic bags as shower caps.

Once the necessities were ready, the volunteers started the first treatments. In the Maheswori tent area, people had difficulties washing their hair because of the lack of water, causing their poor sanitary conditions. About 95% of local people had head lice. Therefore, the volunteers invited Dr. Min-Yi Huang to briefly teach the locals some public health basics.

After that, Tzu Chi volunteers and local young volunteers wearing masks and gloves carefully smeared anti-lice medicine on their heads. For girls with long hair, they especially had to separate their hair strand by strand in order to smear the medicine sufficiently. To ensure effectiveness, the medicine had to be kept on for 20 minutes before rinsing; people wore shower caps and plastic bags during the waiting time. Since many plastic bags were red, children and adults in the tent city looked like "Little Red Riding Hoods" from the fairy tale. As the medicine started to take effect, the expressions on people's faces gradually became more comforted and relaxed.





2	3
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2、3.

帳棚下一個個套上紅色塑膠袋的包頭，讓大小朋友都化身成了故事中的「小紅帽」。(攝影 李美儒)

In the tent area, the red plastic bag shower caps make children and adults look like “Little Red Riding Hood” from the fairy tale. (Photo credit: May-Lu Lee)