Why This Woman Would Have Died if a Handful of People Hadn’t Said ‘Yes’ to God’s Call

Each year, I spend a few months serving at Christian hospitals located in very remote parts of Africa. I go to relieve long-term missionary surgeons so they can have a break from the exhausting pace and go back to their home countries to see their families and friends. Several years ago I was working at a small mission hospital on the banks of the Zambezi River in far western Zambia. Late one cold Winter night we were in the theatre doing an emergency surgery when there was a knock on the theatre door. Through the glass we could see Gift—the nurse on duty—and the urgency in his eyes. He told us that a young lady had just come to the hospital and that she was very sick and needed our immediate attention.

She lived in one of the many small villages on the west side of the Zambezi River across from the hospital. Several days earlier she had a miscarriage and was suffering from continuous bleeding. She had lost so much blood that she was barely able to stand and was much too weak to walk. She was in desperate need of help. Her concerned family and friends loaded her on to the back of an ox cart and after journeying for several hours through deep, sandy paths, they made it to the river long after dark. They then lifted her into a small dugout canoe, 16 inches across and just a few inches deep, and they paddled their way across the crocodile-infested waters of the Zambezi in the darkness. After making it safely to the other side, they carried her on a makeshift stretcher up the steep bank another kilometer to the hospital.

After news of her arrival, I finished an emergency surgery and

quickly went to assess her. She was cold, wet, shivering and in shock. She was *so* pale. Her hemoglobin, which should be 12-15 grams, was a mere 3 grams. Her blood pressure was unrecordable. Gift quickly took a sample of her blood to the lab to find a cross-match for a blood transfusion.

I remember so vividly that she had no shoes on her feet and her feet were calloused and scarred from her daily life of toil. And every swirl, crevice and ridge of the soles of her feet were darkly stained with the soil from around her home and village. In the bright light of the operating room, the contrast of her pale skin and the swirling dark patterns made her feet look beautiful—almost like a work of art.

After an ultrasound we saw that we needed to operate immediately to stop the bleeding. By then the operating theatre was clean and ready, so we moved her to the OR table and covered her with as many blankets as we could find. Julie Rachel, one of the long-term nurses, skillfully started two IV lines. Allison, another nurse, helped Kyombo, who works in the theatre, quickly get the instruments ready for surgery. Victor and the lab team brought us three units of cold blood. Three of us took a bag and tucked them under our arms next to our chest to try to warm them before transfusing them. We squeezed two units of blood in as fast as it would run and then hung the third one to slowly drip in. I quickly performed an operation to stop her bleeding. Within an hour her blood pressure had come up to 100 mmHg. She was now dry, warm and no longer pale.

As we waited there in the theatre after surgery, I couldn’t help but reflect on what I had just witnessed. A young lady who was desperately ill and so far from medical care. Her concerned family and friends who risked their lives to try to get her help. Gift quickly and accurately assessing her condition and making us aware. Victor, who had left his home on this cold night, coming to the lab to make sure she had blood. Kyombo and Allison and JR, tired from working all day,

never hesitating to help.

Now she is warm, her blood pressure is normal, the blood is transfused, the bleeding has stopped and the blankets are piled on top of her. She is surrounded by people who have tenderly, compassionately and expertly cared for her. And it is all in the name of and for the sake of Jesus Christ—our Lord and Savior. There is no doubt in my mind that this greatly pleases His heart.

A few days later she crossed the Zambezi again in the small dugout canoe. She trekked hours through the sandy paths back to her village. She smiled broadly as she was embraced by grateful family and friends. And she wore no shoes on her beautiful feet as she made her journey home.

This story would have had a very different ending if it wasn't for the committed and faithful men and women who said "yes" to God's call and who give their lives to help those who are sick, hurting and in desperate need.

Just like the people at this small mission hospital on the banks of the Zambezi River, you too can say "yes" to what God is calling you to do. We all have something in our hand that we can use to make a positive difference in our world. {eoa}

Dr. Paul Osteen *is a general and vascular surgeon, and he serves with his wife, Jennifer Osteen RN, and their family four to five months each year providing surgical care and education to remote and under-resourced countries in sub-Saharan Africa. When not abroad, he serves on the pastoral staff at Lakewood Church in Houston, Texas. Through their experiences on the mission field, God moved them to start the Mobilizing Medical Missions (M3) Conference, which is held in February each year in Houston, Texas. The M3 Conference brings together doctors, nurses, dentists and other healthcare professionals, as well as anyone who has a desire to use their skills to meet pressing global healthcare needs. More than 70*

global mission organizations will be at the M3 Conference – organizations that change lives, communities and nations. From caring for the sick to drilling for clean water and caring for orphans, it is done in the name of Jesus for the "least of these." The next M3 Conference will be held on Feb. 21-22, 2020. This year's conference theme is a simple question: Can you see it? For more information and to register to attend, visit .