

## OBJECTIVES AND REQUIRED EQUIPMENT

### OBJECTIVES

- **Capture clear, high-quality “BEFORE AND AFTER” patient photographs. This is your number one objective.**
- Capture “**ENVIRONMENTAL**” photographs for the website and promotional materials.
- Produce **DAILY BRIEFINGS** for the team and sponsors each day (see next section for more information).
- Capture AfS **BRANDING** - images that include the AfS name and logo.
- Create a **2 to 3 MINUTE MULTIMEDIA PRESENTATION** on-site documenting AfS on this mission.
- Make sure to bring plenty of dongles (such as USB C to A), cables, and thumb drives so you can share photos between volunteers who may have different operating systems or equipment than you have.

### EQUIPMENT

- **DIGITAL SLR OR MIRRORLESS CAMERA WITH ZOOM LENS AND BUILT IN OR EXTERNAL FLASH.**
  - **ZOOM LENS** should have wide-angle capabilities, which can be a benefit in some of the small OR’s.
- **BACK-UP CAMERA.** A newer smartphone or a point-and-shoot camera can work well for a back-up.
- **LAPTOP COMPUTER** (either PC or Mac) with high-speed processor and lots of storage.
- **THUMB DRIVE** to transfer files from your laptop to the recordkeepers laptop (internet is not always available)
- **SOFTWARE: ADOBE LIGHTROOM or ADOBE BRIDGE.** The photographer should be able to edit, move, save, re-name files, etc. in Adobe Lightroom or Bridge.
- **SECOND STORAGE OPTION FOR FILES** is necessary in case of computer failure.

## DAILY BRIEFINGS

**The Daily Briefing** is a document created for the mission team and the AfS community that contains human interest stories about patients, families, volunteers, hospital staff, the local culture, etc. It also includes statistics such as the number of patients treated to date and the on-call schedule for the next day. AfS will provide you a template in Microsoft Word or Adobe InDesign, depending on your preference. You may also use another program if you like, as long as the end result matches the template.

The Daily Briefing is the responsibility of the photographer, but you can ask the Mission Director, Ward Coordinator, and other volunteers to help. Please also ask team members to note and share stories that you can include in the briefings. Each morning during the mission there will be a team meeting; this is a great time to remind everyone to be looking for good stories. The Mission Director may also provide a daily message to the team and mission sponsors.

Each day, after the briefing is completed, you should email it to the team members and AfS office. If there is currently a Social Media Intern volunteering at the office, you will be connected with this person prior to the trip; you should send them the briefing as well.

*At the end of this document, we have provided samples of previous daily briefings to give you an idea what to include. Feel free to use your imagination!*

## “BEFORE AND AFTER” PHOTO PROCEDURES

**1. PHOTOGRAPH AND DOCUMENT EVERY CHILD, BEFORE THEY SEE THE DOCTORS, IF POSSIBLE.**

During opening clinic, you should be the second stop of the “triage” process. Once children have been poked and prodded by the doctor and nurses, they are in no mood to be photographed.


Arrange with the Mission Director to have a room or area away from as much of the noise/crowd as possible where you can take “before” shots. Find a spot with a plain background and good natural light if possible. The opening clinic will be chaotic but take your time, stay calm, & try not to feel intimidated. Isolate clear head shots and photograph all the patients to document them before surgery.

**2. SHOOT AT LEAST 3 IMAGES PER CHILD.**

When in doubt, shoot more. Pixels are cheap. Going back for more photos is often impossible.

**3. PHOTOGRAPH EACH CHILD’S PATIENT CHART JUST BEFORE AND AFTER PHOTOGRAPHING THE CHILD.**

**This is ABSOLUTELY NECESSARY in order to maintain the identity of the patient.** (Follow the same protocol for “After” shots.) The patient medical record folder has a label on the front with the patient’s name, record number, basic health information, a “triage” checklist, and “additional photos” checklist.

	MRN : _____	_____ -GQ23B																		
	<b>Guayaquil, Ecuador – November 2023</b>																			
(English) Family Name: _____ Given Name: _____  Gender:(circle) M F Age: _____ Birthdate: (mm/dd/yyyy): _____  Distance Traveled: _____ Time Traveled: _____  Phone Num 1: _____ Phone Num 2: _____  City/Town: _____ Mode Transit: _____	<table border="1"> <thead> <tr> <th colspan="2">TRIAGE CHECKLIST</th> </tr> </thead> <tbody> <tr><td>REGISTRATION</td><td>_____</td></tr> <tr><td>PHOTOGRAPHY</td><td>_____</td></tr> <tr><td>NURSE INTAKE</td><td>_____</td></tr> <tr><td>SURGEONS</td><td>_____</td></tr> <tr><td>ANESTH.</td><td>_____</td></tr> <tr><td>PEDIATRICIANS</td><td>_____</td></tr> <tr><td>DENTAL</td><td>_____</td></tr> <tr><td>SPEECH PATHAL</td><td>_____</td></tr> </tbody> </table>		TRIAGE CHECKLIST		REGISTRATION	_____	PHOTOGRAPHY	_____	NURSE INTAKE	_____	SURGEONS	_____	ANESTH.	_____	PEDIATRICIANS	_____	DENTAL	_____	SPEECH PATHAL	_____
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*Example of the patient chart label with the checklists.*

**4. CHECK-OFF THE APPROPRIATE AREA ON THE TRIAGE CHECKLIST ONCE YOU HAVE TAKEN THE BEFORE PHOTOS.**

The “additional photos” checklist is for photos taken on subsequent days.

**5. WHEN FINISHED WITH PATIENT PHOTOS, ROAM AROUND AND TAKE CANDID AND ENVIRONMENTAL PHOTOS.**

During the Opening Clinic, when you are not busy, walk around the clinic and take candid shots, environmental shots, and close-up photos of children who are not crying. You can verify the identity of the child by photographing the chart again or just the patient number written on their wristband.

## NAMING AND RESIZING THE FILES FOR RECORDKEEPING

- **USE THE FOLLOWING CODES FOR EACH TYPE OF PHOTO SESSION:**

**A = OPENING CLINIC.** This is the “before” photo.

**D = DISCHARGE PHOTO.** This is the “after” photo, taken as the child is discharged from the pediatric ward.

**E = FINAL CLINIC.** This is another “after” photo, taken several days to a week after surgery. Not all children will return for the final clinic, but this is a great opportunity to get a photo of the patient after they have had time to heal.

(Note: codes B and C are used for intra-oral photos taken on the operating table. We no longer require these photos).

**Example of a correct filename:**

**001-A-WZ14-01**

001 = the patient’s medical record number. (Find this info on the patient’s wristband and/or patient chart)

A = the photo session. (Use the codes above.)

WZ14 = the mission code. (The record keeper will give you this code.)

01 = the photo sequence. (Take several photos for each session; feel free to use any photo sequence that makes sense to you.)

In the above example 001-A-WZ14-01 is a “before” photo, taken of patient 001, on the Wenzhou 2014 mission; it is the first photo taken in that sequence.

- **ALL “BEFORE” AND “AFTER” PHOTOGRAPHS MUST BE HORIZONTAL, IN FOCUS WITH NO OBSTRUCTIONS, AND SHOW PATIENT’S FACE FROM THE TOP OF THE HEAD TO JUST BELOW THE SLOPE OF THE SHOULDERS.**
- **ALL “BEFORE” AND “AFTER” PHOTOGRAPHS MUST BE RESIZED TO 640 X 480 PIXELS AND CROPPED TIGHT FOR THE RECORD KEEPER. Please also keep the original resolution files for other uses.**

*Examples of correctly sized, cropped, and named photos for patient 015 in Retalhuleu in 2019*



Before:  
**015-A-RE19-02**



After:  
**015-D-RE19-01**



Final Clinic:  
**015-E-RE19-04**

- **THE RECORD KEEPER WILL NEED ONE “BEFORE” AND ONE “AFTER” PHOTO PER PATIENT.**
  - Give the Record Keeper a thumb drive each day with the photos you have taken the previous day – named and sized as described above.
- **KEEP UP WITH THE WORKFLOW.** At the end of every day transfer the photos from the camera to the laptop and back-up to the external hard drive or cloud (if internet is available).

## REQUIRED PHOTOS

- **“BEFORE” SHOTS OF EVERY PATIENT RIGHT AFTER THE PATIENT IS REGISTERED**
  - (most will be taken during the Opening Clinic)
- **“AFTER” SHOTS OF EVERY PATIENT ON THE DAY OF THEIR DISCHARGE**
  - These are literally the “money” shots that bring in donations and grants for future missions.
- **OTHER PHOTOS**
  - Parents interacting with their children
  - Parents handing over children to the team
  - Parents receiving child, post-op
  - Volunteers and/or the local team/partners
  - Testimonials from parents, hosts, & medical team
  - Operating room with good color & composition
  - Close up shots of equipment, files, wrist bands, hands, signs, etc.
- **MATERIAL FOR SOCIAL MEDIA**
  - Each day choose several photos and stories for social media to either post yourself (if you have access to AfS social media) or to provide to the social media point person at AfS.
  - Email this material to the AfS office, even if you have access to post it yourself, so that the staff also have access to it.
- **VIDEOS (IF POSSIBLE)**
  - When time allows, record short videos of patient/doctor/nurse/parent interactions, interviews, expressions of gratitude, hope or expectations, etc. Ask all team members to do the same when a moment presents itself and to give you the videos at the end of the mission. B-roll of the environment, ORs, Opening Clinic, etc. can also be very helpful for AfS videos.
- **TEAM PHOTO**
  - Arrange a time and place with the Mission Director in advance to take a team photo. The best time is on the morning of the Final Clinic Day. Pick an interesting spot with stairs or levels. Every team member should wear their AfS shirt.
- **MULTIMEDIA PRESENTATION THAT SUMMARIZES THE MISSION**
  - Create this near the end of the mission.
  - Should be 2 to 3 minutes in length.
  - You may use either video or a slideshow of still photography, but a combination of both is often most effective.
  - Select music that’s appropriate to your message.
  - Acknowledge sponsors at the end (the AfS staff and/or Mission Director should be able to tell you who these are).
  - First-hand testimonials are key; tell the story in the words of the patients, families, and volunteers.

## **AFTER THE MISSION**

### **CREATE FOLDERS FOR THE OFFICE WITH THE FOLLOWING PHOTOS**

- Before and after high resolution photos
- Before and after downsized photos (640 x 480 pixels)
- Please organize all other photos in the manner that is easiest for you. In case it is helpful, most of our photographers organize them either by day (Day 1, Day 2, etc.) or by location/occasion (Opening Clinic, Operating Rooms, Recovery Room, etc.).

**WHEN ALL IS DONE, PLEASE UPLOAD EVERYTHING TO THE CLOUD STORAGE LOCATION OF YOUR CHOICE, OR THE AFS DROPBOX ACCOUNT (the office can provide you with the information needed to access it).**

**Thank you for volunteering your time & talents to capture the life-changing impact of our missions!**

**Samples of daily briefings appear on the next two pages. As you can see, they include a lot of detail. Please try your best to avoid extremely brief or general updates and try to include names and details about the day or photos as much as possible. Interviews with local staff or families also make great material. Thank you!**



# DAILY BRIEFING

## THANK YOU

to our partners for making this mission possible!

**Our Host:** THE ROTARY CLUB OF SAIGON

**Our Partners:**

CAN THO UNIVERSITY OF MEDICINE & PHARMACY HOSPITAL  
ROTARY CLUB OF SAN FRANCISCO



### DAY 9 - STORY OF ONE FAMILY



Mom with two year old Khan at the opening clinic



Mom holding Khan's hand in the recovery room



The noise of the recovery room fades away for the mom watching over her baby after surgery



Eight year old Dang resting after the surgery



Mom, Grandma, Dang and Khan in the ward.



Dr. V checking on Dang during morning rounds



Grandma's face lit up when she saw the AfS doctors walk into the ward to check on the brothers last night.

We have only two more days of surgeries left. It has been amazing meeting all the families affected by cleft and hearing their stories. Here is one of them:

There seems to be a genetic element to cleft along with circumstantial ones, like lack of vitamins, smoking/drinking during pregnancy and environmental factors.

A couple of days ago our surgeons operated on two brothers: eight year old Trach Hao Dang needed his palette repaired and a tooth extracted; two year old Lam Bao Khan required palette and lip repair and some dental work as well.

The boys have different fathers, but their mother, who has a barely noticeable scar on her upper lip, told us that she has had her cleft repaired when she was 17 months old by another mission that happened to be in the area.

The family lives in the highlands, not far from Can Tho, an area where they speak a native language and children don't learn Vietnamese until middle school. The family was very emotional and extremely grateful for the opportunity to give the brothers a chance to grow up healthy. I think Grandma's face on the photo below says it all!



# ALLIANCE FOR SMILES DAILY BRIEFING



## GUAYAQUIL, ECUADOR, July 26, 2023

Thank you for making this possible!



Dr. Wendy Delaney checks the vitals of Dean Pabon before his surgery, July 26 2023

A doctor removes a tongue suture from Oscar Marquez after palate surgery, July 26 2023



Dr. Karl Wustrack takes a quick look at his next patient, Jandrick Parra, July 26 2023



Danna Muñiz waits for her check-up the day after her surgery, July 26 2023



**On the Pediatric Ward**  
 Pediatrician Dr. Wendy Delany is in charge of the ward. She examines every child before they head into the OR to make sure they are healthy enough for surgery. Then in the days following surgery, she monitors each kid to make sure they have recovered, before sending them home with detailed instructions for the parents. Without the precise attention of Dr. Wendy, the mission wouldn't go as smoothly as it does. Another essential step in creating new smiles for our little patients.



Dr. Wendy works on a patient's chart with the ward nurses, July 26 2023



**Alliance FOR Smiles**

[www.allianceforsmiles.org](http://www.allianceforsmiles.org)

### Surgeries to

**date: 23**

**Palates: 11**

**Lips: 12**

### On Call Schedule

**SURGEON: Karl W. | ANESTHESIOLOGIST: Jie Lan**  
**PEDIATRICIAN: Wendy D. | LEAD NURSE: Rochelle S. | OR NURSE: Rosemary W. | PACU NURSE: Erin M.**

**Day 4**