Summary

As of 04 May 2015, the Government of Nepal (GoN) has confirmed 7,365 deaths and 14,355 persons injured following the 7.8 magnitude earthquake that struck Nepal on 25 April. As of 03 May, the World Health Organization (WHO) reports that a total of 32,002 patients have received treatment in various hospitals in Kathmandu valley and outlying areas and 4,460 have been admitted to hospitals. Districts that remain a priority for health assistance include Bhaktapur, Dhading, Dolakha, Kathmandu, Kavre, Lalitpur, Makwanpur, Nuwakot, Okhaldhunga, Ramechhap, Rasuwa, Sindhuli and Sindhupalchok.¹

Highlights

- On 04 May, International Medical Corps’ emergency response team (ERT) traveled by helicopter to Laprak located at approximately 3,000 meters altitude where two patients with spinal injuries were evacuated for treatment.
- The ERT has been operating mobile medical units (MMUs) in Dhading and Gorkha districts, Kathmandu and Bhaktapur and has conducted a total of 440 consultations.
- International Medical Corps has 39 international staff and over 25 volunteers on the ground responding in Nepal, including doctors, nurses and surgeons in addition to specialists in nutrition, mental health/psychosocial care, and water, sanitation, and hygiene (WASH).

1. Situation Overview

On 25 April 2015, Nepal was struck by a 7.8 magnitude earthquake at 11:56 local time with the epicenter in Lamjung District (northwest) of Kathmandu, which caused massive loss of life and destroyed hundreds of thousands of homes. Nepal’s Ministry of Home Affairs continues to coordinate the response, along with the National Emergency Operation Centre (NEOC).

The Office for the Coordination of Humanitarian Affairs (OCHA) reports that over 100 foreign medical teams (FMTs) have registered in-country and over 90 have deployed to the field. However, several of the large military medical teams will withdraw in the coming days, and assessments are being conducted to identify potential gaps in the wake of their departure. Additionally, on 03 May, the GoN requested international search and rescue (SAR) teams to begin demobilization and implement exit plans.

OCHA is leading the coordination of assessment information and has requested all organizations involved in the earthquake response to report ongoing or planned assessments. OCHA will release maps identifying assessments being conducted in affected areas which will highlight any gaps in services.

In Dhading, where International Medical Corps is operating mobile medical units, it is reported that 36 health facilities have collapsed and 17 are partially damaged. The United Nations Children's Fund (UNICEF) has sent supplies and tents to Dhading and other locations. In Gorkha, where International Medical Corps also has MMUs, 35 health facilities have collapsed, 40 are partially damaged, and there is a reported outbreak of diarrhea in the district (approximately 30 to 40 cases). In Kathmandu, there is a need for general surgery, along with critical and trauma surgery services which has resulted in discussions around locating surgical health facilities. There are plans by WHO to increase its presence in the affected districts, particularly Gorkha, where the organization will coordinate with partners to support the provision of health services.

The ERT reports that all organizations in Nepal have been requested to immediately strengthen their capacity and provide humanitarian assistance in affected areas outside of Kathmandu. Furthermore, the government has reiterated that priority areas include shelter and WASH, with a focus on procuring plastic sheeting and expediting the distribution process for relief supplies. The United States Military is also involved in the earthquake response and will primarily operate through the UN’s logistics cluster.

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3 Ibid.
4 Ibid.
6 Ibid.
7 Ibid.
2. International Medical Corps response

International Medical Corps continues to coordinate with local partners and is providing critically needed services in Dhading, and Gorkha districts, Kathmandu, and Bhaktapur. In Dhading and Gorkha districts, International Medical Corps has formed an operational base and is responding in remote locations, several of which are only accessible by helicopter. Teams are providing emergency medical care, WASH services, and protection and psychosocial support and services. The ERT plans to implement new programming in the areas of nutrition and shelter, as well as the distribution of non-food items (NFIs). The ERT has also coordinated Psychological First Aid (PFA) trainings for staff from 13 different districts in Nepal.

At the request of the District Health Office (DHO) in Gorkha, International Medical Corps deployed an MMU to Laprak by helicopter. Laprak is a Village Development Committee (VDC) located at approximately 3,000 meters altitude and nine hours away from the last point of road access. While there, the team treated over 100 patients and evacuated two patients with severe spinal injuries. The DHO has also requested medical assistance for the VDCs of Uhya and Kasigaun, with the latter being prioritized for emergency medical services. Currently, there are no known organizations present in these three VDCs. Another MMU is preparing to deploy by helicopter to the VDC of Kerauja located in northern Gorkha district where the team will provide critically needed emergency medical services and distribute relief items.

In Dhading, International Medical Corps’ ERT is in the process of implementing WASH interventions and extraction of earthquake-affected individuals. The six identified VDCs are Kumpur, Pida, Kiranchok, Mahadevsthan, Naubise, and Darkha. Five of the six VDCs are accessible by main road, however, many of the roads have blockages caused by the earthquake. The remaining VDC, Darkha, is only accessible by helicopter. Distribution of hygiene kits and household water purification tablets, along with hygiene promotion are also being considered.

In Lalitpur district, WASH staff have deployed 20 latrines to camps and pit latrine construction is underway in three sites: Bungamati where two latrines are being constructed, Khokana which is set to complete four latrines today, and Harisiddhi where 15 locations have been marked for latrines. The construction is scheduled to be completed within the week. In addition, a rapid assessment of Dhading Besi and Kumpur was conducted and these communities will be targeted for latrine construction (immediate construction of 50 emergency latrines in Dhading Besi, and 15 emergency latrines in Kumpur). The ERT also went into Kautunje for a rapid assessment.

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