

Please complete this form and return it with your cheque (or advice of your bank transfer) to:

Title (Mr, Mrs, etc.) : _____
 Initials/Forename: _____
 Surname: _____
 Address: _____
 Postcode: _____
 Signature: _____
 E-mail address: _____

Please tick the box/boxes for which fund you want to donate to:

- ☐ Equal distribution all 4 hospital funds
☐ Tansen Hospital
☐ Okhaldhunga Hospital
☐ Patan Hospital
☐ Amp Pipal Hospital

Date: _____

I wish to make a donation of £ _____.

- ☐ Cheque payable to " UMN Hospitals' Endowment Trust" is enclosed
☐ Bank transfer to account " UMN Hospitals' Endowment Trust" , account no.61370928 at bank sort code 40-44-51 has been made. (Please use your surname as reference)

✂ Cut here

Gift Aid

This declaration confirms my wish to make this and any future donations to the UMN Hospitals' Endowment Trust under the Gift Aid Scheme. I confirm that I am a UK Income or Capital Gains taxpayer. I have read this statement and want the charity named above to reclaim tax on the donations given on the date shown. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax in the tax year at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs I donate to, will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify. I understand the charity will reclaim 25p of tax on every £1 that I have given.

1. You can cancel this declaration at any time by notifying UMN Hospitals' Endowment Trust
2. If your circumstances change and you no longer pay Income Tax or Capital Gains Tax equal to the tax the charity reclaims, you can cancel your declaration
3. If you pay tax at the higher rate you can claim further tax relief in your Self Assessment tax return.
4. If you are uncertain whether your donations qualify for Gift Aid relief, ask the charity.

Hospitals' Profiles 2025

Tansen

Beds: 200
 Outpatient visits: 72,159
 Charity care costs: £127,436.68
 Patients helped: 1,850

Okhaldhunga

Beds: 50
 Outpatient visits: 32,598
 Charity care costs: £131,126.60
 Patients helped: 1,279

Amp Pipal

Beds: 50
 Outpatient visits: 41,171
 Charity care costs: £232.39
 Patients helped: 13

Patan

Beds: 650
 Outpatient visits: 460,187
 Charity care costs: £100,256.72
 Patients helped: 1,813

The Trust's income from investments is given each year to support the treatment of impoverished patients. While unable to meet all the charity care costs, the Trust alongside other donors facilitates the provision of this service.

OKHALDHUNGA • PATAN • TANSEN • AMP PIPAL

Hospitals and Health Care in Nepal
 Supporting their work
www.umnhet.org.uk



Trustees:

Dr Cleve Chevassut MBBS MRCP
 Timothy Trimble BSc ACA
 Dr Gary Parkes MB ChB PhD MRCP
 Alison Chevassut SRN SCM
 Dr Katrina Butterworth MBBS MRCP
 Ian Chadwell MSc
 Dr David Rodgers
 Yub Raj Acharya

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UK Charity Registration number 1083226

The United Mission to Nepal first established health work in Nepal in 1954 with a maternity clinic in Bhaktapur and a hospital in Kathmandu was opened a month later. This was to become Shanta Bhawan Hospital, evolving in 1982 into Patan Hospital. 1954 also saw the start of medical work in Tansen, and by 1957 a school and a dispensary were established in Amp Pipal. By 1959 a dispensary had been established in Okhaldhunga, from which Okhaldhunga Community Hospital evolved. Other Community Health programmes were also started, and the UMN to this day continues to be a major contributor to health care.

However, the UMN vision was to develop, educate and eventually empower local communities to play a much larger part in the general management of its hospitals, and now both Patan Hospital and Amp Pipal Hospital have achieved that independence. The desire to continue the impartial and, where necessary subsidized, care to all who come for help regardless of status, caste, creed or resources is intended to remain integral to their work, whether under the UMN umbrella or under local management. In 2000 the United Mission to Nepal Hospitals' Endowment Trust (UMNHET) was set up to enable this commitment to continue.

Nepal has a population of approximately 29.6 million, 80% are rural and 28% of rural people are poor (UNDP 2021- Multidimensional Poverty Index). Nothing akin to our NHS exists in the country, so there is a great need for the funding of subsidized and charitable care. The pandemic of 2020/21 has worsened health care delivery and added to the increasing requests for assistance, and the trustees urge you to consider giving even a small contribution to the general 'Medical Assistance Fund'.

Grants are sent to the hospitals and health care programmes every year for their 'free care budget' and are always received with much gratitude. Both patients and staff are always encouraged by your concern.

Updated September 2025

Grateful acknowledgement to Okhaldhunga Community Hospital and Dr Gary Parkes for stories and images.



15 day old Kumar was brought by his parents because he had stopped breast feeding and had a fever for 3 days. He was critically ill with neck and back spasm so bad he was continuously arched backwards.

The two possible diagnoses were tetanus (but his mother had been given protection immunisations during pregnancy) or meningitis. He was treated in the simple wooden incubator and given intravenous antibiotics and fluids.



He remained seriously ill for three days and then started to improve. 14 days later he was discharged completely well, with very happy parents (and staff).



Laxmi was 9 years old when she came with swelling of her whole body and face for 3 weeks. She was diagnosed with kidney disease (Nephrotic syndrome) and started on steroids.

She also developed a very painful swollen abdomen, which looked like peritonitis. After 4 days of intravenous antibiotics she made a dramatic recovery and the swelling and pain disappeared, leaving her looking like a different person.



Snake bites are not very common in Okhaldhunga and the main danger is the tourniquet that is placed (because of fear of poison) around the limb, stopping the circulation and endangering the limb, potentially causing gangrene and amputation. This lady had put a tourniquet for 4 hours and the hand was blue and swollen. After a few days of elevation and pain killers the hand completely recovered.



Little Sumitra, aged 2, had a cough, fever and breathing trouble and a swollen abdomen for a month. A chest X-ray and Ultrasound showed the right chest cavity was full of fluid and the abdomen was full of biscuits and noodles!

After starting antibiotics and putting a wide tube in the chest, 300ml of thick pus was drained immediately and continued to drain for 3 days. She made a full recovery and the tube was removed 6 days later when it dried up.

Her parents were then persuaded to feed her with healthier snacks!

