

The

2014 第二期

Callina

LUKE CHRISTIAN MEDICAL MISSION

當做在那最小的身上

Do It Unto The Least



北美路加醫療傳道會

LCMM

LUKE CHRISTIAN MEDICAL MISSION



藍瑪烈 (Ms. Randall) 生日



龍樂德醫師 (Dr. Long)
2013 聖誕節



譚維義醫師 (Dr. Dennis)
2013 聖誕節



薄柔鏡醫師 (Dr. Brown)
2013 summer with LCMM co-workers



2013 杏林愛、故鄉情-愛的傳承感恩音樂會



2013 泰國西部
緬甸交接的小桂河基督教醫院



2013 台美醫護學生文化交流營-馬偕醫學院

In this Issue

行囊.....	1
行囊序.....	1
The Calling Relay.....	2
傳遞呼召.....	2
Rabbits and People.....	3
人與兔子.....	3
Nebobongo Evangelical Hospital.....	4
Dr. Helen Roseveare 創建的尼波邦戈福音醫院.....	5
April 1983 Newsletter at Taitung Christian Hospital.....	5
1983年四月于台東基督教醫院Newsletter.....	6
A Little Boy in my Memories.....	7
記憶中的小男孩.....	8
Our retired years as Missionaries.....	9
宣教士的退休生活分享.....	10
Taitung, Taiwan was our Home.....	11
台灣台東是我們的家.....	13
He left his love in Hualien.....	14
愛留花蓮.....	15
The Hot Water Bottle.....	16
熱水瓶.....	17
Helen Wilms.....	18
魏海蓮女士.....	19
我們愛 因為神先愛我們.....	20
We love because He first loved us.....	22
Reflections from Taiban.....	24
台東台坂部落宣教實習心得.....	25
在好事上富足 - 感謝，代禱.....	26
To Be Rich in Good Deeds.....	27
特別感謝.....	28

行囊

文/吳方芳

拎一只行囊，一只名叫鄉愁的行囊。
甸甸的方盒裡：
一包新焙的咖啡豆、一本聖經、相簿，
一款款慈母裁縫的衣衫、一襲醫袍，
和一頁頁父親在失眠夜裡，含淚書寫的叮嚀。

拎一只行囊，一只名叫捨己的行囊。
拾掇了不知幾回、
也淚了不知幾回的皮箱裡，
最沉重的是牽掛，最難的是放下。
放下風中翻飛著的老父的白髮，
放下晨光裡老母劬勞的身影，
放下揪心的故鄉，
放下全然獻上的自己。

拎一只行囊，一只名叫信靠的行囊。
情深意重的負荷裡；
盛裝著至死方休的信守與悍然。
啊！基督犧牲之愛如鼓聲咚咚，
福爾摩沙的召喚如浪濤隆隆。

拎一只行囊，一只既離家又回家的行囊。
斑駁的行李箱裡；承載著
一輩子的忠心殷勤、醫病醫心、
一筐子的恩惠慈愛、福杯滿溢
和一頭灰白、一個老身。

拎一只行囊，淚眼濛濛。
離別的碼頭，薄霧迷離，
這方是摯愛的家鄉，
那端是血脈相連的至親。
啊！臨老又要離家，
是回家還是離家？
最難的仍是放下，放下揪心的故鄉！

行囊序

鄭博仁

最近路加同工拜訪台東基督教醫院，與現任院長呂信雄夫婦有共同的感動，要跟隨這些宣教士的佳美腳蹤。夫人方芳姊出了“一粒麥子種在後山”這本書，紀念這些宣教士在東台灣的貢獻。方芳姊特別寫了“行囊”這首詩送給北美路加，一起來紀念這些宣教士，也一起在醫療宣教能更多讓神來使用。

The Calling Relay

Bruce H. Lin, MD



After the publication of the first issue, some have thanked us for reminding them the sacrifices made by these medical missionaries, some have told us they are inspired by the stories of these servant angels, and some have asked us what about those places still underserved? What about them and what are we doing for them?

The enduring impact of these medical missionaries is evident throughout China and Taiwan - the people healed, the souls saved, the families restored, the hospitals built, and the countless lives changed forever. We are still feeling the loving impact. In reality, there are countless untold stories and miracles about these missionaries and it would be impossible to tell them all. Some of these stories have already been well publicized. But dwelling in the past is not sufficient.

These missionaries will tell us that it is time to pass the baton. They answered their divine calling and came to serve the needy in China and Taiwan when we needed them. We received and built upon their sacrificial love. And now we have the skills, capital and infrastructure to do the same for those still in need. But have we heard our calling? Faith unaccompanied by works is dead. A good track coach will tell us that the key in winning a relay race is in the transfer of the baton. The exchange can sometimes be “nonvisual” and demands that the outgoing runner have a certain degree of faith in the process. As such, an effective handoff of the baton requires that the recipient be ready and eager to receive the baton and continue the race with the same zeal that it has been run - for the glory of God.

Thus in this issue and the ones to come, we will not only continue to honor the stories of service and sacrifice from the past that so inspire and move us, you will also hear about the ongoing faithful struggles and needs in the current mission fields around the world. Many have found and answered their callings and embarked on their relays in remote jungles of Africa, hills of southeast Asia and villages in Central/South America. We pray that the mission baton being handed off from the Western missionaries is about to be eagerly received by us, carried across Asia, Middle East and back to Jerusalem.

傳遞呼召

林鴻志醫師
翻譯: 邵陽博士

第一期出版後，有些讀者感謝我們提醒他們這些醫療傳教士所作的犧牲，有些讀者告訴我們，他們都受到這些僕人天使的故事激勵，有的讀者問我們那些貧困地方現況如何？他們這些醫療傳教士現況如何？我們在為他們做些什麼呢？

這些醫療宣教士的深遠的影響力顯然遍及整個中國大陸和台灣 - 醫好的病人，得救的靈魂，重建的家庭，建成的醫院，無數人的生命永遠地改變了。那愛的震撼力今天我們仍然能感受到。其實，有無數不為人知的故事和關於這些傳教士的奇蹟，不可能盡數傳揚。其中一些故事已經廣為宣傳。但沉湎於過去是不夠的。

這些傳教士會告訴我們，現在是交棒的時候。他們回應了對他們的神聖召喚，在我們需要他們的時候，來到中國大陸和台灣服務有需要的人群。我們領受了他們犧牲的愛並將此發揚光大。而今我們有技術，資本和基礎設施，為那些仍然有需要的人群做同樣的服務。但我們聽到我們的呼召了嗎？沒有行為的信心是死的。一個好的田徑教練會告訴我們，要贏得一場接力賽，關鍵是在接力棒的傳遞。棒的交接有時是“神不知鬼不覺”的，並要求即將離任的選手過程中有一定的信心。因此，接力棒的成功交接要求接棒人準備充分，並渴望得到接力棒，以同樣的熱情繼續比賽 - 為神的榮耀奔跑。

因此，本期和後續各期，我們不僅會繼續刊登宣教士服務犧牲的故事以鼓舞和激勵大家，你還會聽到關於今日普世宣教禾場上正在進行的忠心奮鬥和需要。許多人已經聽到，並回應了神對他們的呼召，接棒開始走入在非洲的偏遠叢林，東南亞的丘陵和中/南美洲的鄉村。我們祈求宣教的接力棒正從西方傳教士手中交給滿懷渴望的我們，將福音傳到亞洲，中東，傳回耶路撒冷。

Rabbits and People

Roland Brown, MD



There is not much similarity between people and rabbits. People don't sleep with their eyes open. We don't hop along on four legs. There used to be a comment about people who could run real fast that they ran like a jack-rabbit. In England a more common name for a rabbit is a hare. One peculiarity of rabbits is that their upper lip is divided in the middle. One of the birth defects that happen to people is to be born with a split upper lip, called a cleft lip or a hare lip. This happens in the human embryo when the right and left sides of that part of the face don't come together and fuse. Sometimes the cleft is more than just the lip. It can involve the maxillary ridge and teeth, and even the palate all the way back to the pharynx. There is an organization called the Smile Train that raises money to pay for surgery for these children.

When we first went to Taiwan I saw a few patients with this problem but I did not try making repairs because I had not had any training in doing that. But when we returned to the States for me to finish my surgical residency, I had two rotations to the Detroit Children's Hospital. There I had opportunities to work with plastic surgeons on such repairs. To get a good repair you can't just bring the two sides together and sew them together. You need to cut some flaps and fit them together.

After we returned to Taiwan I had to do many of these repairs. After some fifteen years, since cleft lip repair was not really my specialty, I invited a plastic surgeon friend of mine, also a missionary doctor, to come down from Taipei with his team every two months. We would register the cases as they came to the hospital and then call them in for surgery when he came down. There would be nothing but cleft surgery for a couple of days. I did feel gratified when he commented that my repairs were better than those of another plastic surgeon.

Having a good repair can have a large psychological affect on the growing child because every time people look at you they look at your face, and with a good repair people don't need to be embarrassed. And their speech is improved. It is certainly gratifying to the surgeon.

人與兔子

薄柔纜醫師

人與兔子並沒有太多相似的地方。人們睡覺的時候並不會把眼睛張開，我們也不會像兔子一般用四條腿跳躍著。曾經有人形容比喻人跑的非常快就像所謂的「捷克兔」。在英國對兔類的一個通俗的稱呼就是野兔。一般來講，兔子的一個較特別的地方就是，他們的上唇中間會分開成左右兩側，俗稱兔唇。先天的幼兒出生後的一個畸形現象，就是出現上唇分裂，形成所謂的兔唇，也就是胎兒的顏面左側跟右側有所分裂，無法完全完美的融合在一起。有時候這些裂縫也不僅僅局限在唇部。甚至會影響到上顎與牙齒甚至往後延伸到喉嚨部位。在社會上有一個專門的機構，叫做「微笑列車」，他們致力於籌募款項用來為這些兒童做手術的費用。

當我們第一次到台灣的時候，看到有些病人有這方面的問題，但是當時並沒有為他們做任何手術，因為在這之前，我們並沒有接受過相關的訓練及經驗。但是當我們返回美國完成外科住院醫師的訓練之後，有兩次機會輪調到底特律兒童醫院實習。在哪裡我才有機會與相關的整形外科醫師做顏面修補的相關工作。事實上，如果要做這樣的手術，你不能只是把兩邊的顏面縫合在一起，你甚至必須要切下某些皮膚把它們放在合適的位置並且縫合在一起。

在後來當我返回到台灣以後，我必須做許多類似的手術縫補工作，只是兔唇的修補工作並不是我的專長。直到再過了15年左右的時間，我邀請到一位外科整型手術的朋友，也是一位傳教士醫師，與他的團隊，希望他們每兩個月能夠來台灣一次。在這種情況下，如果有病人或病例，我們會先把它登記下來，直到有醫生來的時候再請他們過來就診並做手術。接下來的幾天我們就不再做其他的事情，只是專心做手術。有時這些專業的手術醫生會稱讚我做的還比其他的外科整型醫師做的還好，當聽到這些話時，我就會感到非常的欣慰滿足。



Nebobongo Evangelical Hospital- Founded by Dr. Helen Roseveare

Tania Smith



Children of Nebobongo

the poorest in Africa.

This 100-bed hospital consists of 7 sparse buildings with no running water or electricity. Water for cleaning, drinking, laundry and patient care is hauled from springs in five gallon jerry cans, over a mile round trip by foot. There is no sewage disposal system, so the hospital uses outdoor pit latrines. Malaria nets hang over every bed which are often shared by 2-3 persons with infectious diseases. Food and water for each patients must be provided by their families who cook and sleep outside the hospital. Due to unpaved roads there is great difficulty in bringing supplies. Latex gloves are washed and reused. The pharmacy is never fully stocked and the lab lacks basic testing equipment. The mortality rate is as high as 50% as patients arrive late in their illness.

The Nebobongo Evangelical Hospital, for all of its resource challenges, remains the best-equipped and staffed hospital in the area. The hospital is owned and operated by the regional church of the Evangelical Community of Christ in the Heart of Africa. The fees the patients pay do not cover the basic needs of the hospital or staff, yet the indigenous Christian community remains dedicated to the mission of keeping the hospital open. All patients and their families are invited to attend at least one service where they can hear the gospel of Jesus Christ while they are at the hospital. Chapel services are held in the open air in the large hospital courtyard two days a week. This is a major part of their mission but medical care is provided regardless of race, ethnicity or religion.

Dr. Jean Claude Bataneni, who grew up in Nebobongo, serves along with his physician wife Christine and two other doctors. He is the first



ICU ward with malaria nets above each bed

Nebobongo Evangelical Hospital is a small missionary hospital in jungle of the Democratic Republic of the Congo, a war torn country overrun by rebel groups. There are no paved roads leading to it and yet it serves a region of 250,000 people, among



Families cooking food for their loved ones

Due to the extreme conditions, this hospital lacks much. Since 2010 there has been an exponential rise in the number of critically ill children admitted at Nebobongo. Children die from treatable illnesses such as severe anemia, malnutrition, malaria and pneumonia. The pediatric area has only 24 beds but often there are three children per bed, each with an adult family member holding them and helping in their care. The most pressing need is a new pediatric building estimated to cost \$120,000. It will be constructed for running water and solar electricity but for now the running water will come from a gravity fed cistern next to it. Would you consider helping their community?



Latex gloves are washed and reused

We are partnering with Medical Ministries International to send funds and closely overseeing their use. Earlier this year \$5000 was sent, and has been turned into bricks, but more are needed. Tax deductible donations may be sent to: Medical Ministries International, 1004 San Jose Ave., Ste. 101, Clovis, CA 93612. Please indicate Nebobongo Hospital—New Pediatric Wing. If you have any questions please feel free to contact me at 925-640-7899 or forsmith@comcast.net

Tania Smith,
Ultrasound Technologist
Washington Hospital Healthcare System



For more images of the Nebobongo Evangelical Hospital, please go to youtube link: https://www.youtube.com/watch?v=C_ObzEm_Okk or search for Nebobongo Evangelical Hospital by Tania Smith on the youtube website.”

Dr. Helen Roseveare 創建的尼波邦戈福音醫院

Tania Smith

尼波邦戈福音醫院是位在剛果的一個小型宣教醫院，這也是一個飽經戰亂蹂躪的國家。這個醫院位處非洲最貧窮的地區，即使沒有任何道路可以抵達此地，它依然服務並造福當地的25萬民眾。

醫院的100個床位散落在七棟建築當中，但沒有水也沒有電。用來照顧病患，清潔或洗濯衣物所需的水，都必須要步行到一哩路遠的水源區，用五加侖的汽油桶汲取帶回。也因為沒有污水排放系統，廁所茅坑都要設在醫院外面。一個床位通常要擠兩三個病人，並掛上防瘧疾的蚊帳。食物及飲用水都必須由他們睡在院外的家人供應。乳膠手套在清洗過後都需再重複使用。藥品永遠都不夠用，也缺少基本的檢驗設備。送到醫院來的病人常已經為時太晚，所以死亡率高達百分之五十。儘管如此資源缺乏加上各種的挑戰，福音醫院依舊是這地區醫療人員與設備最完善的醫院。這個醫院是由非洲中部的基督教福音區域教會所經營，雖然病人所付的費用遠不足以支付醫院的基本開銷及人事費用，這裏的基督教社區人員還是竭力維持醫院的正常營運。在病人的住院期間，他們的家屬至少一次都會被邀請來聽關於耶穌基督的福音。在醫院外面的空地也每隔一天就會舉行佈道。這些伴隨著醫療服務的宣教活動，正是他們在當地最重要的使命，且不侷限於任何種族，宗教或族群。



醫院的巴它內力醫師(Dr. Jean-Claude Bataneni)是在尼波邦戈本地長大的，他也是此地的第一個外科醫生，一同在此服務的還有他的太太克莉絲汀醫師及另外兩位醫生。醫療器材只能靠燒木頭所產生的熱蒸氣來消毒。一直到去年，巴它內力醫生都還在用釣魚線做傷口縫合。手術室是利用太陽能發電系統來供應電力，但也常被暴風雨的雷電所摧毀。德國宣教師馬提亞霍母醫生(Mattias-Holmer)

操作的超音波設備，也要靠這個太陽能來發電。感謝主，去年2013年1月有加州的醫療團隊來此教導婦兒科及超音波的相關知識。巴它內力醫生盼望未來仍會有各種長短期的醫療或工程團隊來此協助。

由於情況艱困，醫院在各方面都非常的匱乏。2011年起，在尼波邦戈罹患重病的兒童人數急劇增加。很多

原本是可以治好疾病的病童，卻因併發有貧血症，營養不良，瘧疾及肺炎而死亡。小兒科部門現在只有24張床位，但一張床常必須擠上三個兒童，每一病童又都要有一個家人抱著就近照顧，所以現在最迫切需要的就是增建小兒科的新病房，預估需要12萬元。未來這個新建築要能供應水以及太陽能電力，目前的水僅能來自醫院旁邊的蓄水池。你願意為這些需要提供援助嗎？

我們將與一個國際醫療機構合作來把募得的款項送過去，也會密切監督這些錢的運用。今年稍早我們已經寄出五千元，也已開始用在土木事工上。但我們仍需要更多的財務資助，您的捐款也都可以用來抵稅。請將捐款寄到：Medical Ministries International
1004 San Jose Ave., Suite 101, Clovis, CA 93612
註明：Nebobongo Hospital- New Pediatric Wing

若有任何問題，請不吝與我聯絡
電話 (925) 640-7899, or 電郵 forsmith@comcast.net

Tania Smith
Ultrasound Technologist
Washington Hospital Healthcare System



Gravity fed water cistern

April 1983 Newsletter at Taitung Christian Hospital

Frank Dennis, MD



In our April 1983 letter I mentioned the problem of Susan Pahn (Su-ching), now 13, who has had infections in feet and hands since age 4. I was hoping to learn how to manage her problems when on furlough. Many specialists in orthopedics, infectious diseases and rheumatology shared their ideas and we have since proven that she has a T-cell deficiency and a rare fungus infection. I have fused the left ankle, put her on Ketaconazole which has controlled the fungus and all her wounds are healed. Now she still needs surgery on her left elbow which the fungus disabled, and a special shoe for her left foot, and she will be able to walk - we hope. She is now at

the Children's Home sponsored by Kids Alive, going to school in a wheelchair. Now the problem is we have run up a bill of U.S. \$4,680 and still have an operation to go, plus the special shoe for her left foot. If you would like to help out on Susan's needs, a gift sent to TEAM, marked, --"Taiwan Hospital - Susan Pahn" would be used for her.

As soon as Dr. Stafford returned from furlough in August, we went to Hong Kong for a two-week vacation where we met Kathy, our second daughter, as she ended a year of "Teaching English Teachers how to teach English" in Xian, China. I enjoyed visiting a children's orthopedic hospital in Hong Kong and learned several new operations. We house-sat a friend's 28th floor apartment overlooking Hong Kong harbor, which greatly reduced expenses and raised the interest. We spent a lovely five days together before Kathy headed to Java to visit Sandy and Finn for ten days, and then returned to the Twin Cities. Sandy and Finn be starting their first furlough this February, and we will be passing through Taiwan enroute to Minnesota. Steve and Diann and little Alice Joy (who will be 16 months old before Grandpa Dennis gets his first look at her) live in St. Paul and are seeing a lot of Billy, who is staying with them while attending the U of M as a Junior. Our youngest daughter Ruth and husband Jeff Gucker have presented us our second grandchild, Dennis Jefferson Gucker on November 11, and how do we feel? Delighted, joyful and distressed at not being able to see the little fellow until July. Hally, Sally's twin, became a grandmother two months before Sally. Pretty close! We are looking forward to a seven-month furlough, probably beginning July 1986. We hope to make contact with as many of our friends and loved ones as is reasonable. If you think we may not have your correct phone number, would you please send it to us? We so appreciate letters and news of our friends, and even have enjoyed visits from some, here in Taiwan. Have you considered coming to see the mission field first hand? Has

the Lord give you some gift that may be helpful here? Or just come and cheer us on! Our Tel. 011-886-89-323-720



Some items for prayer: We have a new English Bible Study here at our home on Friday nights and have a very mixed group with strong Christians, new Christians, a Mor-

mon, an English teacher who has been my patient for many years and is just now interested in the Gospel, and the wife of my scuba diving instructor with no Christian background at all. Pray for the Holy Spirit's power to be active, and to bring the ones of His choice.—The father of a crippled child at the Children's Home has broken his neck and is paralyzed from the neck down. Her mother was killed in an accident last

Christmas leaving a 4-year old, an 8-year old brother, and a 15-year old sister. Pray for the Jen family, for finances, spiritual strength to sustain them and for us as we try to help. - And continue to pray for us, too, as we daily need His grace in our contacts with patients and staff. Only as we have His Spirit filling us can we overflow to others. Thanks for praying.

When we count our blessings at Christmas time, we think of friends like you. May the blessings of Christ be yours through the New Year. Frank & Sally-Dennis

The Evangelical Alliance Mission
P.O. Box 969 Wheaton, IL 60189-0969
Box 30 Taitung, Taiwan 95099

譚維義醫師1983年四月 于台東基督教醫院Newsletter

譚維義醫師



■近300位小兒麻痺患者到東基醫院之初獲得醫治

我在1983年四月給你們的信件中所提到的那個女孩SusanPahn,她今年已經13歲了。從四歲開始,她的雙手雙腳就一直常有感染或發炎,我一直努力想要找出她的病因,也與包括骨科、感染科、與風濕科的專科醫生們交換意見;後來我們發現病人的體內缺少一種" T型免疫細胞",也還有一種罕見的黴菌感染。我就在她左腳的踝骨上,使用一種抗黴菌的抗生素,她發炎的傷口逐漸有復原的跡象;那受黴菌感

染後已經失去功能的左手,我必需用手術來治療;以後她還需要一隻特製的鞋,或許就能夠正常地走路。她現在仍住在兒童之家,以輪椅代步上學。

目前比較大的問題是,她的醫療費用如今已達到美金4,680元,這還不包括她所需要的手術及特製鞋的費用。假如你有感動願意幫助這個孩子,你可以將捐款直接寄到"Taiwan Hospital - Susan Pahn"。

在八月中，我們一等到蘇輔道醫師 (Dr.Stafford) 休假回來就隨即去了一趟香港，在那裡與我們的二女兒Kathy會合，她剛在中國西安完成「英語老師如何教英語」的一年培訓課程。我也趁機參訪了一家骨科醫院，學到了一些新的手術技術。在香港的兩個星期中，我們住在可以俯瞰香港海灣的28樓高公寓，朋友的愛心讓我們不但省下住房的開銷，還欣賞到神所創造的美景。

五天的相聚後，Kathy前去印尼Java島拜訪姐姐Sandy，之後她會回到美國的雙子城 (TwinCities)。我們也計劃在從台灣回到美國之前，順道去明尼蘇答州 (Minnesota) 看看兒子Steve一家，他們剛有一個小女兒，算算等到小Alice第一次見到阿公阿嬤時，她都已經是16個月大的孩子了！

我們的小女兒Ruth也在十一月為我們添了第二個孫子。如果你問我感受如何，我會告訴你，那種感覺簡直是棒極了！但喜悅之餘卻仍有一點點惆悵——因為還要等到六月才能見到他們！很湊巧地，我太太Sally的雙胞胎姐妹，在相距不到兩個月的時間幾乎同時都當了祖母。我們將利用六月之後可能有的休假時間，盡可能和我們的每一位好友聯繫，假如你不確定我們是否有你的電話號碼，請儘快告訴我。我們在台灣期間最高興的事就是接到好友的信件或是登門造訪。你是否有感動親自來台灣看看宣教的禾場，神或許給了你特別的恩賜讓你來加入我們的事奉，請和我們聯絡。

幾個代禱事項：每週五在我們家裡有查經班，成員有不少信主多年，也有剛信主不久的基督徒，一個摩門教徒，一個曾經是我多年病人的英文老師，他還是一個慕道友，另外還有我的潛水教練的太太，她完全沒有接觸過基督教，但也願意加入我們的查經。祈求聖靈動工引領這些人歸主。

也紀念一個行動不良、住在兒童之家的孩子，她的母親在去年聖誕節時意外死亡，留下她和一個四歲，一個八歲的兩個兄弟、及一個十五歲的姐姐；如今她的父親又跌斷了頸椎，頸部以下四肢都癱瘓了，請為他們一家的生計及屬靈的生命禱告。也為我們能夠給他們有更好的幫助禱告。更要為我們在這裡服事病人或與人共事時，所需要的一切來自神的恩典和力量禱告，求神的靈親自充滿我們，讓我們能將這靈的工作傳給人。感謝你們的代禱。

A Little Boy in my Memories

Bonnie Dirks



A cute little 4 year-old boy was brought to our clinic by his mother. He was sick with a number of problems. His body was puffy; he was not eating well, among other things. After getting a history and some lab exams he was diagnosed with Nephrotic Syndrome, a chronic kidney disease. He was admitted to our pediatric unit for treatment.

The family lived outside of Taitung, along the coast, about an hour's drive to the north. His father had gone to Saudi Arabia to get a job, hoping to help them financially, while the mother stayed home to work in their fields. Yen-byau was left to fend for himself other than another relative helping periodically.

After admission to the hospital, further lab work was done and he was started on medication and healthy meals. In our pediatric department he enjoyed playing with the other children as well as hearing Bible stories from our chaplain's office personnel. He happened to be in the hospital during Christmas when the nurses sang Christmas carols, and each child was given a small Christmas gift that was theirs to take home when they were discharged.

The day came when the doctors felt he had improved enough to go home. He did well for a period of time, but his mother would bring him back again, looking almost as "puffy" as before! Since the mother was the only one to care for their fields, she sometimes forgot his meds and he was again admitted to the hospital. He would come back saying: "Your little mountain pig has returned!" He would stay in the hospital for a few weeks for regulation of meds and diet. As he began to get well, he was a typical little boy – mischievous, very intelligent, and won the hearts of everyone.



He loved to sing and listen to Bible stories. One day he asked me questions about the stories and said he wanted to believe in Jesus. We prayed together and he was so happy to know that he had Jesus in his heart!

Later, he developed other complications and had to have surgery. The first few days were hard, but he was patient until one day, when his mother was there, he said, "Just take me home,

I don't want you to have to spend more money on me". Many were praying especially for him, and the following day he was much better! He reached up to shake Dr. Dennis's hand and we all rejoiced with him. He continued to improve and was able to go home. He asked if some of the nurses would come to his home and tell his neighborhood friends some Bible stories he had been hearing in the hospital. A few weeks following his discharge, some of the nurses and I took the train to his village and the nurses sang some of the songs he knew and told a Bible story. On that trip we learned that he had been sharing with his friends, and praying before meals.

Sometime later, on a Sunday morning, I had a phone call from the nurses at the hospital saying that Yen- Byau had just come down to Taitung (it was Christmas Day!) and he wanted to go to church with me! I was happy to see him - dressed nicely and looking well. During the service he asked to see my Bible and turned to Psalm. 133:1-3.

*"How good and pleasant it is
when brothers live together in unity!
It is like precious oil poured on the head,
running down on Aaron's beard,
down upon the collar of his robes.
It is as if the dew of Hermon were falling on Mount Zion.
For there the Lord bestows his blessing, even life forevermore."*

Following the service, I asked how he knew about those verses. His reply was, "We sang those verses often when I was in the hospital and I really liked it." God's Word was rooted in his heart!

記憶中的小男孩

德樂詩護理師

一個可愛的四歲小男孩被他的媽媽帶到我們的診所。他生病了，且有各種病痛。他的身體腫起來了、他吃不好，另外還有很多症狀。在得到一些歷史資料跟經過實驗室測試，他被診斷出是腎病症候群，一種慢性腎病。為了治療他我們安排住到我們的兒科部。他的家庭住在台東的外圍，沿著海邊，往北約一小時的車程。他的父親前往沙烏地阿拉伯去尋找工作，希望能在經濟上幫助他們，母親則留在家中的田地工作。除了定時來幫忙的親戚以外只能自己照顧自己。

住院後，他做了更多的檢驗，也開始接受藥物治療跟吃較健康的餐點。在我們的兒科他喜歡跟其他小孩相

處，也喜歡在我們的醫牧部聽聖經故事。他住院時正好是聖誕時節，護士們唱著聖誕詩歌，每個小孩也拿到一份出院時可以帶走的聖誕小禮物。

醫生們覺得他的情況進步到可以回家了。回家後，他有一陣子還好好的，但過一陣子他的母親又會把r帶他回來，他看起來跟住院之前一樣「腫」！因為母親是家中唯一照顧農務的人，她有時會忘記要給他吃藥，他又住院了。回來住院時，他總說「你們的小山豬又回來了！」。他會待在醫院幾週調節藥物和飲食。當他的健康好轉，他又是個標準的小男孩——調皮，非常聰明，也贏得大家的歡心。

他愛唱歌及聽聖經故事。有一天他問我有關那些故事的問題，說他想要信耶穌。我們一起禱告，而他好開心知道耶穌在他心中！

後來，他產生了其他的併發症並且必須動手術。開始的幾天很辛苦，但他很有耐心，直到有一天當他的母親在場時，他說：「帶我回家吧，我不想要你在我身上花更多錢了。」很多人特別為他禱告，隔天他好多了！他伸出手，握住了譚維義醫師的手，而我們都跟他一同歡喜。他的身體狀況繼續好轉，後來可以出院回家。他問一些護士能不能到他家，跟他的鄰居好朋友們講訴他在醫院聽到的聖經故事。他出院幾週後，我和一些護士就搭火車到他的村落，護士們唱他知道的一些詩歌，也說了一個聖經故事。那一趟我們得知他一直跟朋友分享聖經故事，餐前也一定禱告。

過了一些時日，有一個禮拜天早上，醫院那邊的護士打電話跟我說，Yen-byau 剛剛來到台東（那天正是聖誕節呢！），而他想跟我一起去教會！我好高興看到他打扮的很整齊，氣色也看起來很好。在做禮拜的當中，他說想看我的聖經並翻到詩篇133篇1 - 3節。

「看哪，弟兄和睦同居，是何等的善！何等的美！
這好比那貴重的油，澆在亞倫的頭上，流到鬚鬚，
又流到他的衣襟。

又好比黑門的甘露，降在錫安山上，
因為在那裡有耶和華所命定的福，就是永遠的生命。」

禮拜之後，我問他怎麼知道那些經節？他回答說：
「我們在我在醫院時常唱那些經節，我非常喜歡。」

神的話早就在他的心裡紮根了！

OUR RETIRED YEARS AS MISSIONARIES

Susan Kehler



NOTE: Since Luke Christian Medical Mission focuses more on medical missions, this article will be more of my experiences even though my husband was a “Church Planter”.

When reading/ studying Scripture and find many, many rather elderly persons very actively engaged in witnessing for God, plus reading a host

of books of missionaries, it becomes obvious that there is no such thing as “retiring” from being a witness for God and for our Lord.

We terminated our missionary services in Taiwan in 1980. Perhaps the main reason being that at that time Peter and I were married. Both his family and I (as a single missionary) served in Taiwan --their family as Church Planters and I as a medical missionary. They, as a family returned to Canada in 1975 due to Peter’s wife’s illness. She passed away in 1978 and we were married in 1980. At that time Peter was on staff in our Mission Agency in USA, so, after marriage, I too took a teaching job in one of our Church College’s as an Assistant Professor in Nursing. Some years later we returned to Abbotsford, BC, Canada (Peter’s home territory since youth). Again, Peter took a job as a Conference Minister and I in nursing.

In 1991-93 we again returned to serve in Taiwan; this time to formally “turn over” the foreign missionaries’ work to all local personnel. On the sideline I lectured both in our hospital and other mission hospitals as well as in a variety of local nursing colleges and in several Nursing Departments in local universities.

In 1996-97 Peter and I served in Ukraine! Peter as Church Planter and I did much “Public Health” work in private homes, ministering both to physical and spiritual needs. Briefly I’ll share one incident:

Maria was not a Christian but she invited us down for lunch. Since she shared of her up-coming eye surgery, I, at the end of the meal said, “Maria, wouldn’t it be good that we have a word of prayer for you.” “Ah, Suzanne (Susan),” she said, “You should know I’m an atheist!” “I’m so sorry,” was my response. But she added, “You can pray when you get home!” “So true,” was my response.

Several days later I phoned her. “Yes,” came her first words, “Your God has answered your prayers. I am well, and, I have a friend, Vera. She has terminal cancer and she needs peace in her heart. I’ll take you to see her in the hospital.” I made a number of visits to Vera –Maria felt she HAD to be present to translate even though Vera and I managed rather well using the German language. One day, I thought I would see Vera by myself! Who should meet me at the door of Vera’s apartment but Maria with the words, “Vera says she wants to be baptized!” (Here my husband became involved). Vera found Eternal Rest, and several years later Maria accompanied her Canadian relative to a village helping him sing hymns with the local people. Also, we corresponded and although she never fully admitted her belief in the Lord, I felt she had grasped “life in Christ.”

Many more stories could be written of our experiences there. We had many opportunities to share our experiences of the Lord’s leading here in our home country..

In the early years of 2000 the Medical Superintendent of our Mission Hospital in Taiwan asked me to write a book on the History of our Nursing School, which was completed and ‘launched’ in 2003. It contains numerous stories of precious years and years that followed in which we learned of the lives of those nursing students –altogether a total of 136 (divided into 13 classes) that graduated from our Nursing School.

When collecting materials for the book, many interviews took place. Personally I was deeply stirred when hearing one graduate say, “I learned to follow the Lord in my training days and because I knew the Lord, three of my sisters also found the Lord!” What a testimony. About three others started nursing homes for the elderly and served in that way. Almost all students professed Jesus as Lord before graduation! And, what a surprise when one non-Christian grad shared with me, “After 18 years of nursing, I could not forget the Bible stories we learned in our training years, and now I’m a baptized Christian and my job is running a Christian Life-line, helping and counselling others with deep needs!”

Many more stories could be shared but let me add that currently I’m still involved in ESL teaching in our Church where I meet new immigrants from various countries, and have opportunity to share the Gospel News.

Susan Kehler
February 18, 2014.

宣教士的退休生活分享

馬素珊護理師

我注：由於北美路加醫療傳道會專注於與醫療相關的福音宣教事工，這篇文章主要將分享我的一些醫療宣教經歷，雖然我的先生是植堂的牧者。

在研讀聖經時，我發現很多長者非常積極地在為主作見證，加上閱讀了不少傳講福音的書籍後，我清楚地意識到在為主我們的神作見證這件事情上實在是沒有「退休」一詞的。

我們在1980年結束在臺灣的宣教事工。也許這件事的發生最主要的原因是因為那時Peter和我結婚了。他的家庭和我（單身的宣教士）都在臺灣服事，他們是植堂的牧者，我是做醫療宣教。1975年，因為Peter當時的太太生病，他們舉家搬回加拿大。她於1978年過世，我們在1980年結婚。當時Peter是我們在美國的宣教機構的一名職員，所以婚後我也在我們的教會學院任職護理系助理教授。幾年後我們回到加拿大的Abbotsford, British Columbia (Peter的家鄉)。Peter再次任職會議部長Conference Minister，我作護理。

1991至1993年間，我們再次回到臺灣服事；這次是正式地將外國人宣教事工全部「移交」本地人員。與此同時我也在門諾醫院與其他的教會醫院，以及護理院校和當地大學的護理系教課。

1996至1997年間，Peter和我去了烏克蘭服事。Peter植堂，我在私人家庭里做了很多「公共健康」方面的事工，照顧那些身體上的以及屬靈上的需要。我簡略講一件事：

Maria不是基督徒，但她請我們去吃午飯。她提到她將要接受眼部手術，吃完飯後，

我說：「Maria，我們如果為你做個禱告不是很好嗎？」

Maria說：「哎呀，Suzanne（即Susan）」「你應該知道我是個無神論者！」

我回答：「對不起」

Maria馬上補充道：「回家以後你可以禱告的！」

我說：「對的」

幾天後我給她打電話。

Maria的第一句話就是：「是的，你的上帝已經聽了你的禱告。我復原了。可我有一個朋友，Vera。她的

癌症已是晚期，她需要內心得到平安。我會帶你去醫院看她。」

我去了醫院幾次去探望Vera，Maria認為她也必須一起去醫院給我們做翻譯，其實Vera和我完全可以用德文溝通。有一天，我本想自己一個人去看Vera！但Maria已在Vera的公寓門前等我，她說「Vera說她想受洗！」（這時我先生開始參與進來了）Vera找到了永恆的安息，幾年後，Maria陪著她的加拿大親戚去一個村莊，幫助他去給當地人唱聖詩。我們仍有書信往返，儘管Maria沒有完全承認她的信仰，我感覺到她已經在追求「基督徒的生活」了。

我們還有很多這樣的經歷可以寫出來。在我們自己的國家，我們有很多機會分享神帶領我們的經歷。

在2000年的初始，我們臺灣的教會醫院的院長要我寫一本書，講述有關我們門諾護理學校的歷史，這書於2003年完稿並出版了。書中包括了那些寶貴歲月中的很多故事，以及之後幾年我們護理學校畢業生中，共計有136位（來自13個班）得救重生的故事。

在為本書搜集材料期間，我作了許多訪問。我個人深受感動的是當一個畢業生說，「我在培訓期間認識了上帝，而因為我找到了上帝，我的三位姐姐也找到了上帝！」這是多麼美好的見證！另有三人開了老人護理院並在那裡服事。幾乎所有的學生在畢業之前都宣稱耶穌是主！而當一個非基督徒畢業生跟我分享時，我是多麼的受震撼，她說「從事了18年的護理工作之後，我仍無法忘記我們在培訓的那些年聽到的聖經故事，現在我已經受洗，我的工作就是經營一個基督徒生命線（Christian Life Line），幫助和提供諮詢給那些內心有需要的人！」

還有很多的故事可以分享，現在我在我們教會教英文，也就是ESL（English as a Second Language英語非母語），我在此遇到來自不同國家的新移民，也有機會給他們傳講福音。

Susan Kehler

寫於2014年2月14日

TAITUNG, TAIWAN WAS OUR HOME

Dr. Robert Long



Dr. and Mrs. Long and their 3 children leave for Vietnam 1970

Our first visit to Taitung was in May of 1969, when we were considering long-term medical missions in Asia. We spent two days with Doctor and Mrs. Frank

Dennis and were moved by the beauties of this rural area of Taitung. Logefeil Memorial Hospital was completed but the inpatient facilities were not yet in use. Doctor Dennis was the only doctor at that time, and there was a need for a family practice or general doctor, but not a pediatrician.

In 1970 as I finished my 2 ½ year U.S. Army requirement, God led us into medical missions. He very clearly led us to go with three young children to Vietnam during the Vietnam War. During the five years we were there I directed a 100-bed children's hospital owned by the World Relief Commission of the National Association of Evangelicals. We served as medical missionaries in Vietnam until the country fell to communist North Vietnam in March of 1975.

When we left Vietnam in 1975 several people said, "Now that you have done your 'thing' serving overseas why don't you settle in the U.S. and give your children the advantage

of growing up in the U.S. Besides, there are many medical needs here too!" I replied, "The medical and spiritual needs overseas are so much greater in most other countries. Many have very limited opportunities for good medical care, or to know Who Jesus is and what He has done for them. Our call into missions hasn't changed, although the country of service has changed. We have already adapted to overseas cross-cultural living, so it is much easier for us to go again. And we really feel there is a great advantage to our children growing up overseas.

From 1975 - 1976 in preparation for returning overseas I studied at the Columbia Graduate School of Bible and Missions. While there we received a call from a TEAM (The Evangelical Alliance Mission) board member. He stated that Billy Graham was donating the proceeds of his book Angels to build a new pediatric wing at Logefeil Memorial Hospital, and now they would need a pediatrician at the hospital.

Following a short time of deputation we left for Taiwan, arriving in cold, damp Taipei after midnight on Jan 7, 1977.

We studied Mandarin language in Taichung for two years, with a summer break in Taitung in 1978 where we were able to use some of the Mandarin we had learned, and I was also able to practice pediatrics at the hospital. In June of 1979 we moved permanently to Taitung. The Dennis's very graciously gave us their house to live in as most of their children were no longer at home. This was the beginning of almost twenty-five years in Taitung which quickly became home to us and our children.

Many people think it was a sacrifice for us to serve in Taiwan, especially in the rural area of Taitung. We never considered it a sacrifice at all, but a real privilege! It was a great joy to first of all serve the Lord God and secondly serve the beautiful people of Taitung.



BOB and JUDY LONG
David Danny Beth Bekky

Dr. and Mrs. Long and their 4 children leave for Taiwan 1977

We have many fond memories of the "our" Taitung church as well as serving at Logefeil Memorial Hospital. In addition to my serving at the hospital as Chief of the Pediatric Service and sometimes Medical Director or Acting Hospital Director, we were involved in various Bible studies and teaching, English, cooking and family classes, music and piano, weddings and pot-luck dinners, church outings and other church functions, home groups and fellowshiping with individuals in the church and hospital.

We were with hospital staff and church

members in difficult times and in times of great joy. We learned to “Rejoice with those who rejoice, and weep with those who weep” (Romans 12:15). We, too, were greatly encouraged as the Taitung church members and hospital staff rejoiced and wept with us through some of our challenges.

Seeing the growth of the hospital and Taitung church not only in numbers but in spiritual depth, discipleship and reaching out to others was a great joy, blessing and encouragement.



Some of the most memorable times in Taitung were working with the staff of the Taitung Christian Hospital, both the Chinese and the short-term and long-term missionary staff, and seeing

the Lord’s work through medicine in Taitung.

At first we had the only Neonatal and Pediatric Intensive care unit in Taitung County. It was our privilege to care for “Mei En”, the 600 gram baby brought to us for care. Mei En is the only Chinese baby I have named! I named her “Beautiful Grace”, telling the parents, “It is only God’s grace helping your child live, not primarily my skill as a pediatrician.” We had the privilege of seeing her graduate from high school before we retired in 2002.



“Mei En” in 2002

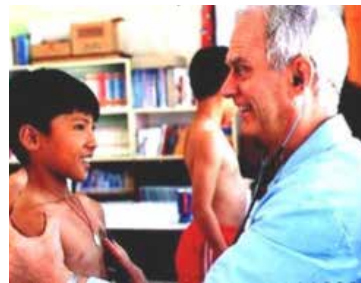
We have seen the hospital grow in size, and staff, and seen other larger hospitals take over some of the referral care



School Physicals

which used to be our responsibility.

One of the biggest challenges, and also most enjoyable service projects, was being able to contribute to the public health of all the elementary school children in Taitung. As we went to several elementary schools performing complete physicals on the school children sponsored by World Vision we discovered very few of the children in Taitung had ever had a school physical exam. We also discovered many had medical conditions requiring treatment or surgery. We went to the elementary school closest to the hospital and offered to do free physicals on their 835 elementary school children. We were very surprised to find 26 of those children had inguinal hernias since they had never had a physical exam before they were unaware of this condition. Seeing this need for the children of Taitung which wasn’t being met by the Public Health Department or any other medical facility, I felt even as a small hospital we could help meet this need for the Taitung elementary school children. From 1990 - 1991, with the backing of the Department of Health, we performed complete physical examinations on all 24,000 elementary



school children in Taitung County, traveling to each of the 125 schools in the county (some of the most beautiful places in Taiwan!). We found 6% of the children had urgent medical conditions. In addition to our own hospital doctors we had

the help of some of the short-term American physicians who came to help at the hospital during that time.

Before we retired in 2002 we had great joy to see the continued growth and ministry of both the Taitung Christian Hospital and Taitung church. We have been amazed to see how the testimony of those of us who had the privilege to work there over the years has continued to bear fruit throughout Taiwan.

But over the years our biggest joy has been to see many patients and contacts not just receive medical help, which is only temporary, but also receive eternal life as they personally trusted in Jesus Christ to be their own Savior and “Sin-Bearer”. We are really looking forward to spending eternity with these dear friends from Taitung and Taiwan, both young and old.

Our children consider Taitung their home. They all grew up there. Our son, Dave, was baptized at the Taitung Church. He now serves as a lawyer in Washington, DC. Our oldest



2009 Taiwan Reunion

daughter, Beth, and her family (including three of our grandchildren) continue to serve at Morrison Academy in Taichung. Our son, Dan, and his family (including three more of our grandchildren), is on the faculty of Taipei American School. He takes every opportunity to return to Taitung and to bring some of his Taipei friends to see the most beautiful spots in Taiwan located in Taitung. Our daughter, Becky and her family (including seven of our grandchildren) are serving in Tanzania. Our first ever all family reunion was held in Taiwan in 2009 as all of our children returned “home” to Taiwan and we introduced some of our grandchildren to the Taitung heritage of their parents and grandparents.

Our family verse over the years has been “I have no greater joy than to hear my children (and grandchildren) walk in truth.” (3 John 4). We have printed this on the back of the reunion shirts and we are so blessed to have this joy and see the part our years in missions in Vietnam and Taiwan has played in the lives of our children and grandchildren.



台灣台東是我們的家

龍樂德醫師
翻譯: 陳穎瑞

當時我們考慮在亞洲長期的醫療宣教，所以在1969年5月第一次來到台東。我們花了兩天時間拜訪譚維義醫師夫婦，也被台灣優美的鄉村景緻所感動。台東基督教醫院雖然建造完成，但住院設施還尚未啟用。譚維義醫師當時是唯一的醫生，醫院需要家庭科或一般門診的醫生，不需要小兒科醫生。

1970年，我在美國陸軍服役滿2年半後，神帶領我們進入醫療宣教。祂很清楚要我們帶著三個年幼的孩子，在越戰期間到越南。往後在越南五年的時間，我在全國福音教派協會的全球救援會 (World Relief Commission of the National Association of Evangelicals)，管理有100個床位的兒童醫院。我們在越南醫療傳宣教直到北越在1975年3月淪陷在共黨之下。

我們在1975年離開越南，當時有人說“既然你已經做過海外服務，為什麼不回到美國定居，給孩子在美國成長的優勢？況且在美國也有很多的醫療需要！”我回答說“醫療和屬靈的需求在海外是如此龐大，世上大多數的國家都有需要，許多國家的醫療保健十分有限，當地人也不知道耶穌是誰，祂為人成就的工作。我們的宣教呼召沒有改變，但要服事的國家已經改變。我們已經適應了海外跨文化的生活，所以要再出發對我們來說很容易。而且我們真的覺得讓孩子在海外長大是很大的優勢。”

1975至1976年我們準備回到海外，當時我在哥倫比亞大學的聖經與宣教研究所就讀。有天我們接到了宣道會 (The Evangelical Alliance Mission) 一位董事的來電。他說，葛培理 (Bill Graham) 要捐贈他的著作『天使』一書的版稅，要在台東基督教醫院創建新的兒科大樓，現在需要一名兒科醫生。很快被差派後，我們便出發前往台灣，在1977年1月7號潮濕寒冷的午夜抵達台北。

我們在台中學習中文兩年，1978年暑假到台東時，我們能使用一些學過的中文，而我也開始在小兒科看診。1979年的六月，我們搬到台東定居。譚維義醫師一家非常慷慨地讓出他們的房子給我們住，因為他們的孩子大多不住在家裡了。這是我們在台東的開始，往後將近25年這裡成為我們和孩子的家。

很多人認為我們為台灣服務是一種犧牲，尤其是在台東的鄉下。我們從來不認為這是犧牲，反而是一項特權！能夠服事神是莫大的喜樂，加上又能服事美好的台東人。

我們在台東教會，以及台東基督教醫院有屬於“我們的”許多美好回憶。我在醫院擔任小兒科主任，有時是醫療總監或是代理院長，我們參與各種查經和教學活動，像是英語、烹飪、家政、音樂和鋼琴、婚禮、聚餐，教會郊遊和其他教會活動，家庭小組，以及參與教會和醫院的團契。

我們與醫院同事和教會弟兄姊妹有福同享，有難同當。我們學會了“與喜樂的人要同樂；與哀哭的人要同哭”(羅12:15)。台東教會成員和醫院同事在我們歡喜快樂時一同分享喜悅，也在我們面臨挑戰時與我們一同哀哭。

看見醫院以及台東教會，不僅在人數上成長，而且在屬靈的深度，門徒訓練和事工外展有成長，不僅是莫大的喜悅，也是個祝福，鼓舞激勵我們。

在台東最難忘的回憶，包括在台東基督教醫院一起工作的同事，不管是本地人、短期或長期的宣教人員，看見神的工作透過醫療在台東拓展。

剛開始我們是唯一在台東縣有新生兒及兒科重症病房的醫院。我們有幸能照顧“美恩”，她被帶來時只有600公克。美恩是唯一我用中文命名的嬰兒！我為她取名“美麗的恩典”，告訴她的母親說“是神的恩典讓你們的孩子活下來，不是因為小兒科醫生的醫術”。我們在2002年退休前，有幸能見到美恩從國中畢業。

我們目睹醫院在規模、人員的成長，也見到其他大型醫院接手一些轉診病患，這曾經是我們的責任。

其中最大的挑戰，也是最令人享受的服務項目，就是能對台東國小學童的公共衛生有所貢獻。在世界展望會資助下，我們到幾所小學提供完整的體檢，才發現台東很少的孩子曾在學校接受體檢，同時還發現很多症狀需要醫療或手術治療。我們到離醫院最近的小學，為校園內 835位學童提供免費健檢，很驚訝地發現其中26位有腹股溝疝。因為他們從來沒有體檢過，所以不知道有這種狀況。有鑒於公共衛生部或其他醫療機構，並無法滿足台東孩童的需要，雖然我們是一家小醫院，還是可以滿足台東國小學童的需要。在衛生署的支持下，1990到 1991年我們對台東縣境內 125所小學（有些是台灣最美麗的地方！），24,000名小

學生進行全身健康檢查。我們發現6%的孩子有緊急醫療狀況。除了我們自己醫院的醫生協助義診外，有些短期來訪的美國醫生也那段時間在醫院幫忙。

在我們2002年退休前，很高興能見到台東基督教醫院、台東教會的事工，兩者同時成長。聽到過去幾年有幸在台東工作的果效，持續在全台灣發芽結實，這樣的見證著實令我們驚嘆不已。

但多年來我們最大的喜悅，是看到許多患者和所接觸的人不只是接受醫生的幫助，其實是短暫的幫助，還獲得永生，相信耶穌基督是個人生命的救主，揹負世人的罪。我們很期盼能與在台東以及台灣的朋友，無論老少，一起共享永生。

我們的孩子也認為台東是他們的家，他們在那裡長大。我們的兒子大衛是在台東教會受洗，他現在在華府當律師。我們的大女兒貝絲和她的家庭（包括我們三個孫子），繼續服務於台中的馬禮遜美國學校。我們的兒子丹和他的家人（包括我們另外三個孫子），是台北美國學校的教師。他有機會就回台東，並且帶他台北的朋友見識位於台東的最美台灣景點。我們的女兒，貝基和她的家人（包括我們七個孫子）則是在坦桑尼亞服務。我們有史以來第一次全家族聚會2009年在台灣舉行，所有的孩子回到在台灣的“家”，也向幾個孫子介紹影響父母、祖父母的台東文化傳統。

我們家族的經句，多年來一直是“我聽見我的兒女們（包括孫兒女）按真理而行，我的喜樂就沒有比這個大的。”（約翰三書1:4），我們把這節經文印在這次團圓 T恤背面。我們很被祝福能有這樣的喜樂，看到我們在越南和台灣宣教的歲月對子孫所帶來的影響。

He left his love in Hualien

Marilyn Tank



Dr. Alvin T. Friesen was a Canadian Mennonite who graduated from The University of Manitoba Faculty of Medicine. He answered the Lord's calling and came to Taiwan in 1958 to join the Mennonite Mobile Clinic serving those who lived in the remote mountainous areas of eastern Taiwan. He later married Ruby (daughter of an Amis tribal chief) who was among the first graduating class of the Mennonite Nursing School. Dr. Friesen was a faithful and compassionate physician. He gave 18 years of his life to Taiwan. Not only did he frequently offer to pay his patients' medical bills, he was also known to donate his own blood to his patients whenever it was needed. He finally returned to Canada in 1976 to care for his aging parents. In his quiet but true Mennonite way, Dr. Friesen only gave and never sought recognition. In 1995, he was finally called home by our Heavenly Father.

“When you give to the poor, do not let your left hand know what your right hand is doing” (Matthew 6:3).

Al Friesen was the son of a Canadian preacher. I first met him at the Taipei Language School. Along with two Mennonite nurses he studied Mandarin as they prepared to serve in the Mennonite Christian Hospital in Hualien.

A couple of years later my husband and I moved to Hualien. I remember nervously hosting the missionary prayer meeting. As the guests left, Dr. Friesen assured me “everything was perfect.” He was the only one who thought to comment and I was reassured.

Eventually our separate missions moved us until we found we were next door neighbors.

One day a young Taiwanese student came to my door. “Is this Dr. Friesen’s home?” he asked. I said “No, he lives next door.” I found out the student was trying to return some money he had used for school fees. (So Al Friesen helped people financially!)

When I mentioned the incident to Al he commented, “I can sympathize with students. I, too, have had to skip lunch too many times because of no money.”

One day I brought my son to the Mennonite Hospital. “Why is this child always getting earaches?” I complained.

“Want to swap?” Al retorted. “One of my children is cutting teeth and cried all night. The other coughed all night.”

I heard from friends who worked at the hospital. “When a baby is born and not breathing, Dr. Friesen immediately gives it mouth to mouth resuscitation. He doesn’t wait for the baby to be washed off - he just goes into action. The nurses in the birthing room were awed by his heedless self sacrifice.”

One time at a missionary prayer meeting a person from the hospital appeared. “Anyone in here has O blood?” he asked. Al Friesen quietly put his hand up. One of the mission nurses turned to him. “You can’t give again, Al. You already gave today!”

One day I had a sore throat and went to see the doctor. There was an American short term on duty and Al was the translator. Of course with all of us speaking English, Al could take a break. I saw a witty side of him.

“Are you running a fever?” the short term inquired. “I never get a fever” I answered impatiently. “She keeps her cool.” Al interposed...

After about 20 years of ministry Al and his family returned to Canada. His parents were aging.

Al left an awesome legacy of sacrificial love. We are still feeling the impact.

富瑞生醫師 (Dr. Alvin T. Friesen) 加拿大人，畢業於MANITOBA大學醫學院，一九五八年加入門諾巡迴醫療隊，上山下海為原住民默默付出，並娶得門諾護校第一屆畢業生 (阿美族新娘) 王金蘭為妻。富醫師是一位愛主愛人的醫師，在台灣行醫十八年，經常捐血給病患及幫忙病患付醫藥費，曾當選全國好人好事代表，一九七六年，因雙親年邁返回加拿大。富醫師是典型的門諾人，只求付出，不求掌聲。

愛留花蓮

翻譯: 邵陽博士



富瑞生醫師是個加拿大傳道人的兒子。我第一次見到他是在台北語言學校。他和兩位門諾護士一起學國語，因為他們準備去花蓮的門諾會基督教醫院服事。

一兩年後我先生和我搬到花蓮。我記得當時在家裡舉行宣教士禱告會時緊張極了。當結束後客人們離開時，富瑞生醫師向我保證“剛才凡事都完美無缺”。他是唯一想到給我好評的人，讓我有了確據。

之後我們因為宣教各奔東西，直到我們又搬到一塊兒成了鄰居。

一天一個年青的台灣學生來敲門。“這是富瑞生醫師的家嗎？”他問道。

我說，“錯了，他住隔壁”。我發現這位學生正打算還他借來付學費的錢。（原來艾爾還用錢幫助他人！）當我對艾爾(Al)提起這事時他說：“我很同情那些學生。我也曾因為沒錢好幾次沒午飯吃呢！”

一天我帶兒子去門諾會醫院。“為啥這孩子總是耳朵疼？”我抱怨道。

“想和我換換嗎？”艾爾反駁道：“我一個孩子在冒牙，

整夜哭不停。另一個整個咳不停。”

我從在醫院工作的朋友那裡聽說，“當嬰兒剛出生，還未呼吸，富瑞生醫師會立即進行口對口心肺復蘇。他不等嬰兒洗乾淨就立即行動。接生的護士們都被他的無私無畏感動。”

一次在宣教士禱告會中來了一個醫院的人。“這裡誰是‘O’型血？”他問道。富瑞生醫師默默地舉起手。一位宣教士護士對他說：“艾爾，你不能再捐了。你今天已經捐過了。”

一天我喉嚨痛去看醫生。有美國短期醫療隊到訪當

值，艾爾當翻譯。當然我們互相都講英文，艾爾就可以在一旁休息。我發現了他急智的一面。

“你發燒嗎？”短期醫療隊員問道。

“我從未發過燒”我不耐煩地答道。

“她總是很酷”艾爾插嘴道。

將近二十年的服事後艾爾和家人搬回了加拿大。他父母已老邁。

艾爾給我們留下的捨己的大愛傳奇，直到今天還造福於我們。典型的門諾人，只求付出，不求掌聲。



Dr. Helen Roseveare was an English Christian missionary to the Congo from 1953 to 1973. Helen Roseveare went to the Congo through WEC International and practised medicine and also trained others in medical work. She stayed through the hostile and dangerous political instability in the early 1960's. In 1964 she was taken prisoner of rebel forces and she remained a prisoner for five months, enduring beatings and being raped. She left the Congo and headed back to England after her release but quickly returned to the Congo in 1966 to assist in the rebuilding of the nation. She helped establish a new medical school and hospital (for the other hospitals that she built were destroyed) and served there until she left in 1973.

Helen Roseveare was born in England in 1925. She became a Christian as a medical student in Cambridge University in 1945. She continued to have strong links with the Cambridge Inter-Collegiate Christian Union and was designated as the “CICCU missionary” during the 1950s and 1960s. Since her return from Africa, she has had a worldwide ministry in speaking and writing. She was a plenary speaker at Urbana three times. She is now retired and lives in Northern Ireland. Her life of service was portrayed in the 1989 film *Mama Luka Comes Home*.

THE HOT WATER BOTTLE –A True Story By Helen Roseveare, Missionary to Africa

Published May 27, 2011 | By womenof7

One night, in Central Africa, I had worked hard to help a mother in the labor ward; but in spite of all that we could do, she died leaving us with a tiny, premature baby and a crying, two-year-old daughter.

We would have difficulty keeping the baby alive. We had no incubator. We had no electricity to run an incubator, and no special feeding facilities. Although we lived on the equator, nights were often chilly with treacherous drafts.

A student-midwife went for the box we had for such babies and for the cotton wool that the baby would be wrapped in. Another went to stoke up the fire and fill a hot water bottle. She came back shortly, in distress, to tell me that

in filling the bottle, it had burst. Rubber perishes easily in tropical climates. “...and it is our last hot water bottle!” she exclaimed. As in the West, it is no good crying over spilled milk; so, in Central Africa it might be considered no good crying over a burst water bottle. They do not grow on trees, and there are no drugstores down forest pathways. All right,” I said, “Put the baby as near the fire as you safely can; sleep between the baby and the door to keep it free from drafts. Your job is to keep the baby warm.”

The following noon, as I did most days, I went to have prayers with many of the orphanage children who chose to gather with me. I gave the youngsters various suggestions of things to pray about and told them about the tiny

baby. I explained our problem about keeping the baby warm enough, mentioning the hot water bottle. The baby could so easily die if it got chilled. I also told them about the two-year-old sister, crying because her mother had died. During the prayer time, one ten-year-old girl, Ruth, prayed with the usual blunt consciousness of our African children. "Please, God," she prayed, "send us a water bottle. It'll be no good tomorrow, God, the baby'll be dead; so, please send it this afternoon." While I gasped inwardly at the audacity of the prayer, she added by way of corollary, "...And while You are about it, would You please send a dolly for the little girl so she'll know You really love her?" As often with children's prayers, I was put on the spot. Could I honestly say, "Amen?" I just did not believe that God could do this. Oh, yes, I know that He can do everything: The Bible says so, but there are limits, aren't there? The only way God could answer this particular prayer would be by sending a parcel from the homeland. I had been in Africa for almost four years at that time, and I had never, ever received a parcel from home. Anyway, if anyone did send a parcel, who would put in a hot water bottle? I lived on the equator!

Halfway through the afternoon, while I was teaching in the nurses' training school, a message was sent that there was a car at my front door. By the time that I reached home, the car had gone, but there, on the veranda, was a large twenty-two pound parcel! I felt tears pricking my eyes. I could not open the parcel alone; so, I sent for the orphanage children. Together we pulled off the string, carefully undoing each knot. We folded the paper, taking care not to tear it unduly. Excitement was mounting. Some thirty or

forty pairs of eyes were focused on the large cardboard box. From the top, I lifted out brightly colored, knitted jerseys. Eyes sparkled as I gave them out. Then, there were the knitted bandages for the leprosy patients, and the children began to look a little bored. Next, came a box of mixed raisins and sultanas -- that would make a nice batch of buns for the weekend. As I put my hand in again, I felt the... could it really be? I grasped it, and pulled it out. Yes, "A brand-new rubber, hot water bottle!" I cried. I had not asked God to send it; I had not truly believed that He could. Ruth was in the front row of the children. She rushed forward, crying out, "If God has sent the bottle, He must have sent the dolly, too!" Rummaging down to the bottom of the box, she pulled out the small, beautifully dressed dolly. Her eyes shone: She had never doubted! Looking up at me, she asked, "Can I go over with you, Mummy, and give this dolly to that little girl, so she'll know that Jesus really loves her?" That parcel had been on the way for five whole months, packed up by my former Sunday school class, whose leader had heard and obeyed God's prompting to send a hot water bottle, even to the equator. One of the girls had put in a dolly for an African child -- five months earlier in answer to the believing prayer of a ten-year-old to bring it "That afternoon!" "And it shall come to pass, that before they call, I will answer; and while they are yet speaking, I will hear." (Isaiah 65:24)

Helen Roseveare, a doctor missionary from England to Zaire, Africa, told this as it had happened to her in Africa. She shared it in her testimony on a Wednesday night at Thomas Road Baptist Church.

Dr. Helen Roseveare, 一位英國宣教士, 在1953到1973年間受環球福音會 (WEC international) 差派到剛果, 從事醫療宣教的事奉, 同時也在當地訓練醫護人員。1960年代, 她在非洲渡過了敵對且緊張的政治情勢, 在1964年遭叛軍抓進監獄, 在獄中的五個月期間, 她在剛果渡過了敵對且緊張的政治情勢。她被釋放以後曾回到家鄉英國, 但是很快的, 在1966年她再度回到剛果, 並參與戰後的重建, 她更積極地幫助、建立當地的一所醫學院和附屬醫院, (因為之前她所建立的醫院已經在叛亂中被摧毀) 她在這所新建的醫院服事一直到1973年, 才離開剛果。

熱水瓶

— 非洲宣教士 Dr. Helen Roseveare
的一個真實故事

Published May 27, 2011 | By women of 7



在中非洲的一個夜晚, 我盡全力在產房中幫助一位母親生產, 但是她最後仍然死了, 留下一個很小的早產嬰孩和一個哭哭啼啼的兩歲女兒。當時要使這個早產兒存活是非常的困難。我們沒有保溫箱, 也沒有電來維持保溫箱, 更沒有餵食的裝備。我們雖然住在赤道上, 但是夜晚通常非常涼而且冷風颼颼。

一位學生助產士把嬰孩用棉絮包起來放在一個盒子裡。另一位學員升火準備熱水，灌入熱水瓶中。不到一會兒，她很緊張的跑來告訴我，灌熱水的時候熱水瓶爆裂了。因為橡皮在熱帶型氣候很容易損毀。她驚呼：“這是我們最後一個熱水瓶啊！然而，就如西方的俚語說的“為灑掉的牛奶哭泣是沒有用的。”在中非洲也可以說“為爆裂的熱水瓶哭泣是沒有用的”。樹上既不會長出熱水瓶森林步道的前面也沒有雜貨店。我對她們說“妳們把嬰孩放置在靠近火爐的安全距離內，睡在嬰孩和門的中間來擋住門縫吹進來的風。妳們的責任就是幫助嬰孩保暖。”



第二天中午，我如往常到孤兒院去，和那些常與我在一起的孩子們禱告。我告訴孩子們需要禱告的事項以及有關那個小嬰孩的需要。告訴他們為那小嬰孩保暖的問題禱告，也提到需要熱水瓶的事。如果著涼這個小嬰孩很可就活不成了。我也提到那位因媽媽過世而悲傷哭泣的兩歲姊姊。在我們禱告的時候，有一位十歲的女孩Ruth，用非洲孩童一向直接了當的方式求告神：“神啊，求你寄一個熱水瓶給我們。神啊，不是明天，是今天下午，不然那個小嬰孩就會死掉。”當我聽到這樣勇敢的祈求，心中倒抽一口涼氣。她接著又繼續禱告，“當你在做這事時，可不可以請你也寄一個娃娃給那個小女孩？這樣她就知道你非常愛她。”孩子們的禱告，對我來說，通常也是個考驗。我是否能夠誠心的說“阿們”？我很難相信神真會如此作。當然，我知道祂是無所不能。聖經就是這麼說的。但總是有些限制（難成的？）不是嗎？神應允這樣特別的禱告唯一的方法就從我的家鄉寄一個包裹來。我當時在非洲已經快四年了，從來沒有收到過任何從家鄉寄來的包裹。無論如何，即使有人會寄包裹給我，誰會想到要給住在赤道上的我寄熱水瓶！

當天下午，我正在護士訓練學校教課時有人傳話給我，有一輛車停在我家門前。等我到家時，那車子已經開走了，留下一個22磅重的包裹在房子的前廊！我當時幾乎熱淚盈眶而無法自己開包裹，便找了孤兒院

的孩子們來和我一起打開包裹。我們鬆開繩子，小心翼翼得解開每一個結。把包裝紙摺好，盡量小心不撕破。大家越來越興奮，三四十雙眼睛都專注在那個大紙箱。我從最上層拿出許多件彩色鮮豔的運動衫。每個孩子接到手時，都是眼睛發亮。然後是一些為痲瘋病人預備的手織繃帶。孩子們開始有一點分心了。接著是一盒各式的葡萄乾，這個週末可以用來烤麵包作點心。當我的手再伸進去，可以感覺到…。難道是真的嗎？我深呼吸，然後拿出來。是真的！我驚叫：“一個全新的橡皮熱水瓶。”我沒求神寄個熱水瓶給我，我也不太相信祂真會如此作。Ruth站在孩子們最前排，衝上前大叫：“如果神寄來熱水瓶，祂一定也會寄個娃娃來。”她翻到紙箱的最底層，拿出一個美麗精緻的小娃娃。她雙眼發光，從來沒有懷疑過。抬起頭來問我：“Mummy，我可不可以跟你一起去把這個娃娃給那個小女孩？這樣，她就會知道耶穌是多麼的愛她。”

這個包裹是整整五個月前，我主日學班的孩子所準備的。班上的老師聽到而且順服神的吩咐寄一個熱水瓶給我，甚至寄到赤道。五個月前，班上的一個小女孩，把一個小娃娃放進紙箱中，要送給一個非洲的小孩，神應允一個十歲女孩真切的祈禱，“當天下午”包裹寄到！

“他們尚未求告，我就應允；
正說話的時候，我就垂聽。”（賽65:24）

Helen Wilms

Marilyn Tank



Helen Wilms was a Canadian Nurse who worked at Mennonite Christian Hospital (MCH). “My parents went to Canada from Russia” she told me. “There were 8 children in our family and I remember my mother had a large bag of flour which she used to make zwieback bread. Because there were so many children, we all had chores to do. Sometimes, nowadays, there are only 2 children in a family. Because the mother can handle the work she does everything and the children do not learn responsibility in the home.”

member my mother had a large bag of flour which she used to make zwieback bread. Because there were so many children, we all had chores to do. Sometimes, nowadays, there are only 2 children in a family. Because the mother can handle the work she does everything and the children do not learn responsibility in the home.”

Helen seemed to be everywhere. She visited our Mustard Seed maternity home. The tribal mothers looked sad and tired. “You don’t have to test these women’s blood. Just give them iron pills. They are all anemic.”

Helen visited our Mountain Babies Home. “The babies are dehydrated,” she commented. “Put a large covered container of water near the cribs and the babies will point to it when they need water!”

Helen was even quick with me. I smile as I remember arriving at MCH for a routine blood test early one morning. Predictably my body rebelled at being out without coffee and I started to faint. Helen happened to be in the hall. To my amazement she had a wheelchair under me before I hit the floor!

Helen came to see me about the babies born in our maternity home. “Tell the midwife not to encourage feeding baby formula instead of breast milk,” she advised.

I knew often the malnourished tribal mothers did not have sufficient breast milk to feed their babies. Also some tribal women may have felt baby formula was a new product perhaps more progressive and advanced than breast milk. They wanted their babies to have the best. The midwife received a commission for each can of milk powder she sold.

“Once the baby is drinking from a bottle, the mother’s milk dries up. It is expensive to keep buying formula once you are back in the mountains. Also, mountain mothers often do not have the facilities to sterilize the bottles. MCH is getting sick dehydrated malnourished babies, often with diarrhea and we feel it can be due to the canned milk powder.” Helen had analyzed the situation.

When Helen retired she returned to Canada. She married a man who shared her enthusiasm. Together they cleaned churches and baked zwieback bread. Helen and her husband went to be with the Lord within a few months of one another.

魏海蓮女士 Marilyn Tank

魏海蓮女士是曾在門諾醫院工作的加拿大護士。「我的父母是從俄羅斯來到加拿大的。我們家總共有八個小孩。我記得母親總有一大袋的麵粉拿來做烤乾麵包用的。家裡有那麼多的小孩，每個人都必須分擔家事。不像現代一個家庭就只有兩個小孩，母親自己應付得來就什麼都做了，反而小孩在家學不到該盡的責任。」

海蓮關心許多大大小小的地方。在芥菜種會的產院，看到原住民媽媽們個個面露愁容與疲憊。「你不用抽血也知道她們都有貧血，直接給她們鐵劑就好了。」

到了山地嬰幼兒之家。「嬰兒們都脫水了。」她建議，「在嬰兒籃旁邊放一個有蓋子的大水瓶，叫孩子們想要水的時候就指指它！」

連我也有被海蓮照顧到的經驗。說來好笑：有一次我必須一大早就到門諾醫院來抽血。我的身體可能因為沒有喝到咖啡跟我抗議，開始有點暈眩。海蓮正好在走廊，就在我要跌落到地板前就已坐上了她推過來的輪椅！

海蓮找過我討論產院出生嬰兒的營養問題。「叫產婆



最好不要給他們喝奶粉，還是母乳比較好。」為什麼原住民媽媽會捨母乳而使用配方奶？有的媽媽是因自身營養不良，

沒有足夠的母乳可給孩子們喝，另外一些則以為配方奶是新產品可能比母乳更先進，她們只是想讓孩子用最好的。助產婆還可以從賣出的奶粉抽取佣金。

她分析說：「一旦嬰兒改從奶瓶喝奶，母乳很快就會停止分泌。等回到了山上，繼續購買配方奶粉就會很貴。此外原住民媽媽也缺少方便消毒奶瓶的設備。門諾醫院常碰到很多脫水又營養不良的嬰孩，也常伴有腹瀉，這些相信都是因為配方奶粉所導致的。」

海蓮退休回到加拿大後，與一樣有熱忱的男性共組家庭。他們會一起打掃教會，也一起烤乾麵包。後來，她跟她的丈夫相繼在幾個月內都蒙主恩召了。

我們愛 因為神先愛我們
顏耀亮弟兄見證



四十年前在臺灣省台東縣山鎮有

個四歲多的小男孩。有一天晚上六點多，小男孩與鄰居玩樂時追逐要跑過大馬路(花東路省道)時，正好遇到一輛裝滿油的大貨車要停靠。小男孩一不小心，頭被大貨車撞了一下，一失去重心跌倒後，雙腳正伸入緩緩而行的貨車輪下。逃也來不及逃，就眼睜睜的看雙腳被大貨車慢慢壓過。一陣撕心裂肺的劇痛後，小男孩已近昏厥的失聲嚎啕大哭。路旁的路人目睹後，有人大聲喊叫“你撞到小孩了！”司機停住了卡車約三十秒後，竟一不做，二不休的緩緩將貨車倒車，要再壓一次，試圖將小男孩壓死。小男孩看到大貨車再度緩緩倒車，如大山般的壓過來時，全身顫抖，但虛弱的無力移動身軀。再度看那如巨獸般的大貨車無情的壓過已血肉模糊，不聽使喚的雙腳。壓過第二次後，當時小男孩的奶奶聽到鄰居尖叫後衝出來看狀況，竟發現是自己心疼的孫子被壓傷，奮不顧身的直接抱起血流如注，奄奄一息的小男孩直接衝往醫院。行文至此，或許讀者會有疑問，為何筆者能如此清楚的描述當時所發生的細節？很簡單，因為筆者就是這個小男孩。我被送到小診所後，因情況危急要先止血，醫生也於簡單的消毒後，在完全沒有麻醉下，直接用粗針在傷口上縫了六十四針。那種痛徹心扉的痛，至今仍歷歷在目。心有餘悸。在止血包紮後，我雙腳的骨頭奇蹟式的完好如初，但右腳被撕裂了一塊長約四十公分寬約五公分的大傷口。而整個左腳都嚴重淤青，腫得近兩倍大。過一個星期後，我被轉診到台東的醫院，

但漸漸的，因傷口嚴重發炎，所有醫生都警告我父母，若情況沒有好轉，為保命，很有可能保不住右腳。這種消息，對我父母而言，如同晴天霹靂。心急如焚，無法置信。百般打聽之後，有人建議，不如轉到台東基督教醫院。聽說那個小醫院有個來自美國的骨科醫生，最擅長醫治腳的毛病。於是我父母立即轉院。當時來自美國的醫生就是譚為義醫生。他於細心診療後建議我父母需儘快進行最新的植皮手術。譚醫生是當時台東唯一懂植皮手術的醫生。或許也是當時台灣少數懂植皮手術的醫生。但他不確定何時能動手術。我父母當時也沒多問原因。

隔天，譚醫生通知我父母，今天可以動手術了。我父母當時心急的問“如果我兒子自己的皮膚不夠用時該怎麼辦？”他們的意思是想問譚醫生他們需不需要也預做準備，萬一我皮膚不夠用時，他們可以立即做手術，移植自己的皮膚給我。我想天下所有的父母親都完全可以理解。但譚醫生突然對他們說“不用擔心，如果待會手術時真的不夠用，我會直接移植我的皮膚給你兒子來醫治他。你們放心！”我父母不可置信自己所聽到的話。至今念念不忘，感恩譚醫生之仁心。感謝主，我自己的皮膚夠用，手術也極其順利。我的傷口於三個月內奇蹟式的康復。後來經過約一年的推拿復健後，我的雙腳上除了留下一個大疤之外，所有一切都正常，完全沒什麼後遺症。

各位弟兄姐妹，請仔細思索剛才提到的兩個人。一個自私自利的卡車司機，為了想規避高額的醫療費用乾脆想要壓死我。另一位是跟我非親非故的美國醫生，可放棄美國當醫生的榮華富貴，遠渡重洋的到當時貧瘠的台灣，而且選的是最窮的台東行醫約四十年。可以無怨無

悔的為一個素昧平生的四歲小男孩承諾願意捐自己皮膚。世界上哪有這種醫生？這是何等的大愛？我知道我不是唯一的一個譚醫生特別對待的病人。聽說譚醫生也常捲起袖子，主動捐血給急需的病人。只是他都為善不欲人知。不願多提。只自謙那是他應盡的責任。我以前只覺得譚醫生是個大好人，但是一直到八年前，我被主呼召來美國讀博士，於一連串自己與神的特別經歷而信靠主耶穌後(因經歷冗長，一時無法詳細說明，日後再另文解釋)，才恍然頓悟了原來譚醫生的愛是來自於主耶穌。若非出於神，一般凡夫俗子怎可能做到？我常常想起譚醫生為善不欲人知的義行時，會不自覺的熱淚盈眶。心中一直有個感動，希望有朝一日能對譚醫生表達謝意。但因功課繁忙，一直沒機會。我於2010年博士畢業後，原想回台灣任教，最後我乖乖的聽從神的呼召，留在美國就讀於改革宗神學院。

約四個月前，我在台灣的姐姐興奮地告訴我，譚醫生出了一本新書“一粒麥子落在後山”。她告訴我，我就是那個在書中第56頁的小男孩。當我讀完後，我更加確信譚醫生是天父派來拯救我的天使。也解開當年為何譚醫生為何說我需手術，越快越好，但不確定何時能手術，而隔天又突然告知我們當天就可以手術之原因了。

在書中，早在我入院前幾個月，譚醫生在美國的醫生朋友寫信問他需不需寄什麼醫療補給品過來。當時譚醫生發現皮膚植皮手術刀片庫存量不多，於是要他朋友幫忙訂購，直接請美國工廠寄到台灣來。三個月後，所有皮膚植皮手術刀片都用完了。當時我正被送進了譚醫生的醫院。譚醫生知道我急需手術，但巧婦難為無米之炊。也不知何時

才能幫我手術。但是感謝神，神蹟發生了。就在我需要手術的當天，所訂的皮膚植皮手術刀片不晚不早的寄到台東基督教醫院。譚醫生於書中特別提到，因為他是與神一起工作，所以類似的巧合或神蹟多得不勝枚舉。此事也讓我印證了經文中的：神從創立世界以前、在基督裡揀選了我們(弗1:4)明白了神的奇妙帶領與多方印證後，更確定了神早已選擇了我。所有在我人生裡發生的奇事，都是神的安排帶領，而非巧合。

當我讀到譚醫生的書時，更想感謝他，但卻又不知如何聯絡他。感謝神的安排，在今年一月五號，我有機會去 Atlanta 台灣長老會聚會時，認識一名簡姐妹，她已 70 多歲了。碰巧的是，她也在台東長大，父親也是傳道人醫生，她小時的肩骨曾斷過，也是被譚醫生醫好的。所以我拜託她替我打聽譚醫生的聯絡方式。感謝神，垂聽我的禱告。我終於找到譚醫生在美國的地址了！我以謹慎又雀躍的心情，寄出了對譚醫生的感謝信。因為他無私的奉獻大愛深植我心，讓我願意信靠主成為基督徒，最後願意將自己擺上，走上全職事奉的天路。我感謝譚醫生救了我的腿。要不然，我的人生會大大不一樣。撒旦想透過這個車禍毀掉我的腿，但神親自動工，奇妙的安排譚醫生到台東行醫，並早已安排好手術所需的特殊刀片於手術當天即時的寄達。讓我順利康復。我也感謝譚醫生，縱使他從未親口對我傳講神的道，但透過他無私的奉獻，從他身上我可完全看到主耶穌的身影，實踐了聖經中愛人如己的教導。

很高興，譚醫生於收到信後很快的回覆我。他很高興能知道我仍記得他並且因為他的醫治能幫助我。在他心中，或許他覺得自己是一個盡職的醫生，但卻不是一個稱職的傳道人。他從未想過，四十年前的醫治，竟然也將福音的種子無意中深植我心。最後經神親手帶領，也讓我走向全職事奉的道路。對於一位退休

傳道人醫師而言，這個消息是一個最欣慰的鼓勵，激勵他能在未來的日子中，要更加勤奮地為主傳福音。因為神會透過各種機會，將福音的種子傳播出去。讓更多的人因此而能得到福音。我栽種了、亞波羅澆灌了。惟有神叫他生長。可見栽種的算不得甚麼、澆灌的也算不得甚麼。只在那叫他生長的神。(林前3:67) 俗語說、那人撒種、這人收割、這話可見是真的。(約4:37)

因譚醫生聽到我人在 R.T.S. (Reformed Theological Seminary, Jackson, MS 改革宗神學院) 就讀，他很高興的告訴我，他於 1975 年時有來過 R.T.S.，因為他來拜訪 Jackson 第一長老會。後來第一長老會成為日後資助他台灣醫療傳道之行的教會。我聽完嚇一大跳。因為神帶我來 R.T.S.，要我在第一長老會敬拜，我一直不太懂原因。原來於四十年後，神引導我回到了當年資助譚醫生的教會。我在該教會敬拜已兩年了。若非譚醫生親口提及，我



根本無法想像。這些事件裡有任何的關連。太不可思議了。難怪神說：耶和華說、我的意念、非同你們的意念、我的道路、非同你們的道路。天怎樣高過地、照樣我的道路、高過你們的道路、我的意念、高過你們的意念。(賽55:8-9)

約於一個月後，我將與譚醫生聯絡的事與幾個在 Oxford, MS 的美國屬靈朋友分享。當年我還不是基督徒時，神透過他們帶領我認識祂，歸向祂。其中有位任教於 University of Mississippi 的教授 Dr. Kroeger 看到譚醫生名字後嚇一跳，趕緊聯絡

譚醫生，後來確定真的是老友。於四十多年前他們曾一同在 Minnesota 州同一教會敬拜。後來因譚醫生到台灣行醫四十年就失聯了。譚醫生與 Dr. Kroeger 的父母原是好朋友，而 Dr. Kroeger 夫婦帶給我們的溫暖是讓我們當初決定要留在那間教會的最初原因。經過此事後，我更加驚奇神的奇妙帶領。在我人生中，神透過祂許多的天使一路引導我走向祂要我走的路。

在神學領域中，要明白神的主權與人的自由意志在人有限的思維中似乎有所衝突。很難理解神如何能讓神的主權與人的自由意志選擇下能並行來彰顯神的榮耀。經過我與譚醫生的聯絡過程，神讓我把人生中不同區塊的拼圖拼成了一幅清楚的畫面。果真證實了神的主權與人的自由意志選擇能平行運行不悖。在我人生中，經歷過多少抉擇，透過我們的自由選擇，神仍可帶領我們來成就祂的旨意。

一般人很不容易接受神能透過我們所受的苦難來彰顯神的榮耀。但從我的故事中一再地印證聖經裡的話語，從前你們的意思是要害我、但神的意思原是好的(創50:20)(卡車司機)；我們曉得萬事都互相效力、叫愛神的人得益處、就是按他旨意被召的人。(羅8:28)。神透過我們的苦難彰顯了祂的慈愛與榮耀，而留在我們心裡的是滿滿的感動與信心的提昇。因此，當弟兄姐妹遭逢人生的苦難或逆境時，仍要學習忍耐，並相信神有祂的美意。當神帶領我們走過這一段黑暗後，一定能了解並讚嘆神的作為，讓我們可以成為榮耀祂的器皿。當我們在做福音的事工時，撒種是我們的責任。種子何時萌芽就交給神。因為神才是真正栽種的人。不要太急躁，也不要沒有立即看到成果而沮喪，舉足不前。我栽種了、亞波羅澆灌了。惟有神叫他生長。可見栽種的算不得甚麼、澆灌的也算不得甚麼，只在那叫他生長的神。(林前3:6-7) 一粒麥子不落在地

裡死了、仍舊是一粒。若是死了、就結出許多子粒來。(約 12:24) 所有的基督徒在神的安排中，都有不同的職份。我們需要警醒自守，勿因善小而 不為。要在別人的需要上看到自己的責任。也要在自己的生活，工作上見證主的榮耀。讓更多的人，能因為你我的原因，來被神的愛吸引。願意信靠神，而得到永生。

願我能透過親身的經歷來讓大家體會認識到神的大能。也能藉此感謝譚醫生燃燒自己，照亮別人的在臺灣四十年的無私奉獻。他無疑是個最好的基督徒典範。對於不信主的朋友，您可曾好好思索這個課題。譚醫生與台灣非親非故，何苦需放棄一切榮華富貴於四十多年前來到台灣犧牲奉獻一生？他能得到什麼？這般的愛，從何而來？完全的違反人性。為何他做得到呢？動機是什麼？為何那麼傻？您可曾好好思索耶穌基督道成肉身到世間來，最後他願意捨棄生命，被釘上十字架上，只為你我的過犯，罪行而死。這般的愛，從何而來？我們是誰？為何值得得到這份愛？我相信所有的基督徒會直接回答“我們愛、因為神先愛我們。(約壹 4:19)”願主祝福您。

(筆者現就讀於Reformed Theological Seminary, Jackson. leoyen@yahoo.com)

We love because He first loved us

Leo Yen

Six PM, one evening some 40 yrs ago in the town of Quan-Shan, Taitung, a four year old boy was playing with the neighborhood children and ran across a busy street (Hwalien-Taitung Hwy). He was met by an incoming truck which struck him in the head. The little boy lost his balance and fell, his legs extending under the rolling truck. He felt a searing pain as he helplessly watched the cargo laden truck's tires roll over his legs, almost losing consciousness from the indescribable pain.

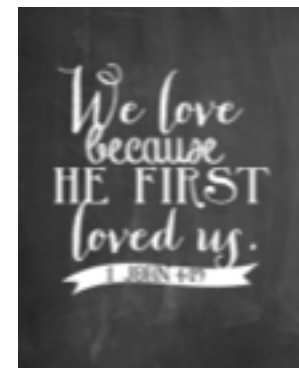
The bystanders who witnessed this heart wrenching event shouted at the truck driver, attempting to alert him of the little boy in harm's way. The driver halted the truck, waited half a minute or so, and began backing up towards the incapacitated boy lying on the road. The little boy watched in terror as the monstrous truck once again rolled towards him, his legs now shattered beyond recognition and unable to move; all he could do was watch the horrible trauma replay again in disbelief. After being crushed twice and lying on road exsanguinating, the boy's grandmother came outside to check out the commotion only to find her grandson bleeding at the scene of the accident. After the initial shock, the grandmother immediately picked up the nearly lifeless body and rushed towards the local clinic.

At this point the readers might be curious: how am I able to describe this event in such detail? Because I was the little boy. After I was carried to the clinic, the doctor tried to stop the bleeding. He cleaned up the wound and, without anesthesia, began to suture the wound. The piercing pain from the 64 stitches remains hauntingly vivid in my memory to this day. My feet were bandaged and the fractured bones made a miraculous full recovery later. However, for a week after the incident, a 40 x 5 cm large laceration remained open in my right foot and left leg was markedly swollen and ecchymotic.

One week later, I was transferred to a hospital in Taitung for further care. The wounds became infected and the doctors warned my parents that amputation of the right foot may be necessary in order to save my life. The unbelievable news came as great shock to my parents and they were extremely worried. They sought advice from family and friends and finally heard that there was an American orthopedic surgeon who specialized in the legs and feet and he was at the small Taitung Christian Hospital. My parents transferred me there. The surgeon was Dr. Frank Dennis.

Dr. Dennis examined my wounds and suggested that I would need skin grafts. At that time, he was the only doctor in Taitung who knew how to do skin grafting. But he was not sure when he'd be able to perform the surgery. At that time, my parents did not question why. The next day, Dr. Dennis notified us that I could undergo surgery. My parents anxiously asked: what if my son's skin alone was not enough? In their minds, they were thinking that they needed to be ready to donate skin to me if needed. I am sure all parents understand how they felt. However, Dr. Dennis assured them: "if your son's skin is not sufficient during surgery, I will donate my own skin to your son for skin grafting. Do not worry." My parents could not believe it! They remembered that answer to this day, eternally grateful for Dr. Dennis' unselfish love. Thank God my skin was

sufficient for grafting and the surgery went smoothly. Within 3 months, my wounds miraculously healed. After another year of physical therapy, I recovered completely except for prominent scars in my legs.



Brothers and sisters, please think about the two persons mentioned in the story so far: one is a selfish and malicious truck driver who tried to finish me off in order to avoid paying for medical expenses.

es. The other is a foreign doctor unrelated to me who gave up the luxuries of a good life in America and answered the calling to serve the underprivileged in an unfamiliar island. He chose to serve in the poorest areas of Taiwan for 40 some years, willing to donate his own skin to a four year old boy whom he did not know. Where in the world can one find this kind of doctor? What kind of unselfish love is this? I knew I was not the only “special” patient of Dr Dennis. I was later told that he frequently rolled up his sleeves and donated blood to his patients who needed transfusions. He never mentioned such acts. When asked, he merely said that was his duty.

In the past, I just knew that Dr. Dennis is a generous and kind person. However, it was not until eight years ago when the Lord called me to the United States for graduate studies that I realized the love I experienced from Dr. Dennis was the love of Christ. If not so, how can ordinary people manage to do that? Every time I thought about what Dr. Dennis had done for me, I'd be moved to tears, filled with a desire to find him and thank him. I did not get a chance to do so then. In 2010, I finished graduate school and had planned to return to Taiwan to teach. But once again, I felt called to stay and enroll in the Reformed Theological Seminary.

Approximately four months ago, my sister who lives in Taiwan excitedly informed me that there was a new book out about Dr Dennis, called “A wheat kernel fell in the mountains”. She told me that I was the boy in one of the stories in the book. When I finally read the book, I was further convinced that Dr. Dennis was the angel sent by God to save me. The book finally explained why, 40 some years ago, Dr. Dennis said I needed surgery immediately but he was not sure when he was able to perform it. Then the next day he suddenly was able to perform the urgent surgery on me.

As described by him, Dr Dennis mentioned that one of his colleagues in the United States had asked him what supplies he needed in Taiwan so he could send it. This was a few months before my accident. Dr. Dennis mentioned that he did not have enough scalpels for skin grafts so he requested some to be sent. Three months later, all scalpels were depleted and I arrived at the hospital. Dr. Dennis knew I needed the skin grafts but he did not have the appropriate tools to do so. Miraculously, the supplies arrived the day I needed surgery, sent from the US. Dr Dennis mentioned in the book that such miracles happened frequently because he is working with God. This is testimonial to the bible verse “for He chose us in him before the creation of the world...” (Ephesians 1:4). I understood that He had already chosen me and had been guiding me. For these things He had

planned for me were not coincidental.

After I read the book, I really wanted to thank him in person but simply did not know how to find him. Once again divine intervention led me to a sister in Christ, Mrs. Chien. She is in her seventies now but grew up in Taitung. Her father was also a medical missionary. When she was young, she broke her shoulder and was treated by Dr. Dennis as well. I asked her to help me locate Dr. Dennis. The Lord answered my prayers and we were able to finally obtain his contact information in the US.

I sent him a letter with gratitude and excitement. As a result of his unselfish love and giving, he planted a seed in my heart for my faith, and inspired me to follow the path of full time ministry. Satan tried to destroy me by physically injuring my legs. God healed me by sending Dr. Dennis to Taitung to heal me physically and spiritually. Even though he did not preach to me, he showered me with love and sacrifice, mirroring Jesus Christ and testifying to the teachings of Christ on selflessness. My life would be much different had I not been saved by Dr. Dennis.

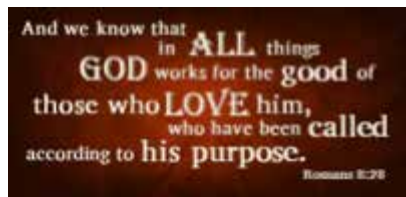
I was overjoyed when I received a reply from Dr. Dennis. He was glad to hear from me and still remembers me. In his mind, he may think that he was simply doing his duty, but not being a qualified minister. But he could not have conceived that the healing 40 yrs ago also planted a seed of faith in my heart. God then led me to follow and serve Him. For a retired medical missionary, this was encouraging and further inspired him to continue to spread the gospel via every channel and possibilities. “I planted the seed, Apollos watered it, but God made it grow. So neither he plants, no he who waters is anything, but only God, who makes things grow.” (1 Corinthians 3:6-7). “Thus the saying ‘one sows and another reaps’ is true.” (John 4:37)

When Dr. Dennis heard I am studying at Reformed Theological Seminary in Jackson, MS, he told me that he had been there in 1975 when he visited the First Presbyterian Church there. Later on, that church became a main supporter of his medical missions in Taiwan. I was simply amazed when I heard this. When I was first led to attend the First Presbyterian Church, I was not quite sure about it but felt led somehow to worship there for two years now. Now I understand the connection. No wonder the Lord says “for my thoughts are not your thoughts, neither are your ways my ways. As the heavens are higher than the earth, so are my ways higher than your ways and my thoughts than your thoughts.” (Isaiah 55:8-9).

A month later, I was sharing this amazing story with some friends in Oxford, MS. These friends led me to Christ and salvation years ago. One of them, Dr. Kroeger, is a professor at

the University of Mississippi. When he heard Dr Dennis' name, he was quite astounded and immediately contacted him. As it turned out, they had attended the same church in Minnesota forty some years ago! They lost touch of each other after Dr. Dennis left for Taiwan. Their mutual parents were very good friends. Dr. and Mrs Kroeger were so kind and loving to us when we first arrived that they became instrumental in our continued attendance at the First Presbyterian Church. This series of events further affirmed my faith that God has been steadily guiding me towards His plan via these angels in my life.

In theological terms, God's sovereignty may seem conflicting with our freewill for our finite mind to comprehend. How these two work together to glorify God is very difficult to grasp for most of us. Through my reconnection with Dr. Dennis, these life puzzle pieces gradually pieced into a clearer picture and proved God's sovereignty does seamlessly intertwine with our freewill. I made many choices in my life, and through these freewill choices, our Lord still led us to His greater sovereignty and plan.



Most people find it difficult to comprehend the rational of glorifying God through suffering and painful events in our lives. But my story bears testimony to the biblical verse "you intended to harm me, but God intended it for good to accomplish what is now being done, the saving of many lives" (Genesis 50:20). "And we know that in all things God works for the good of those who love him, who have been called according to his purpose." (Romans 8:28). God grants us His love and mercy through our sufferings, and leads us to faith building and gratefulness. Therefore, when we encounter hardships in our lives, we need to learn perseverance and maintain faith that He will lead us through the darkness in order for us to understand His good works. In doing so we shall be molded to glorify Him.

As we participate in ministries, planting the seeds is our responsibility. But we should remember to allow God to make the seeds grow in His timing, for He is the one who can do so. Do not be rushed, and do not be frustrated and give up when you do not see the fruits. "I planted the seed, Apollos watered it, but God made it grow. So neither he plants, no he who waters is anything, but only God, who makes things grow." (1 Corinthians 3:6-7). "I tell you the truth, unless a kernel of wheat falls to the ground and dies, it remains only a single seed. But if it dies, it produces many seeds." (John 12:24). We followers of Christ each has his/her own place and calling. We shall understand our responsibilities by being cognizant of others' needs. We

shall exemplify the glory of God in our daily lives and through our love, lead others to seek faith in the Lord, be loved by the Lord, and be saved.

I hope my sharing will bear testimony to God's almighty sovereignty. And also express my gratitude for Dr. Dennis' forty years of unselfish acts of servitude and sacrifices in remote Taiwan. Undoubtedly he led a Christ-like life and example. For those of you who are nonbelievers, let me challenge you to these questions: why would a doctor sacrifice a comfortable life in the US, travel across the ocean to a remote and foreign island and serve the needy for forty some years? What did he gain? Where does such extraordinary love come from? It is totally against human nature to do what he did. Yet how did he accomplish that? Why such foolishness one may ask? Have you ever wondered why Jesus was willing to be crucified and die for our sins? Who are we to deserve such sacrificial love? I believe all Christians will tell you: "We love because He first loved us." (1 John 4:19).

(Author Leo Yen is completing his degree at The Reformed

Reflections from Taiban

Florence Hsiao



Florence Hsiao, who was born in America, is a second-generation LCMM coworker. After graduating in 2013, she traveled to Taiwan with Galilee Family Social Welfare Foundation to participate in the Village Starlight Project. She is living in a remote aboriginal village called Taiban serving as a "Star Teacher".

Before I go into describing my first two weeks living in Taiban (台坂), a small village in the mountains of Taitung, Taiwan (台東), I want to first thank Luke Medical Missions for their spiritual and financial support. Most of all, I want to thank them and thank God for entrusting me with the honorable task of serving on this short term missions trip. I cannot be more thankful for this opportunity, and I pray that God will use my experience here to open more doors for more people to witness the transformational power of God's love in this place.

Two weeks ago, I moved to Taiban where I have been liv-

ing with and working with a missionary who I will call FY. She was sent here to start up a station in the village by her host organization, Galilee (家立立), to primarily serve, counsel, and care for the kids here. To be honest, when I first arrived, I was not quite sure why I was there. This two-month internship/short-term missions trip is not part of an official program, and there is no real project that I need to accomplish. My main job is to serve with FY and learn more about the people's needs. With this very open job description, I entered the internship with an attitude of learning.

Allow me to walk you through a typical day here in Taiban. At 5:30 AM, I wake up with the rest of village as they get ready to go to school or work. Then, at 6 AM, FY and I take a walk for an hour, praying for the land and people. At 7 AM, we come back home and prepare breakfast. After breakfast, I usually spend some more time with the Lord before I go about that day's tasks. Because my first two weeks here have been more about meeting the people here and learning about their culture, every single day has been a little different. I participated in the weekly Bible study that FY leads. I led the kids in the local elementary school in some English activities. I went and chatted with the doctor who comes once a week to see patients at the local clinic. But my biggest task these past two weeks have been helping FY write the story that God wants her to share with the people here.

In a nutshell, the story, entitled "The Lighthouse of Joy", describes how the aboriginals of Taiwan have forgotten their identity as the children of God the creator and need to return to God's love in order to step out of the darkness they currently live in. This story is filled with aboriginal imagery and is told in way that parallels the village's oral tradition. Working on the story has helped me to gain insight into the culture and background of aboriginals living in Taiban, and also showed me more of God's heart for his people there.

As I soaked in my surroundings in Taiban, I realized that the people here don't really need any material goods. What they need is hope. The kids in the village grow up being taught that they come from a history of hopelessness and rejection, which goes directly against their true identity in God. Broken families due to abuse and alcohol use are common. In this kind of environment, no material good will bring these people hope. Only the love of God can. What's particularly interesting is that almost every village in 台東 has a church because missionaries came decades ago and brought the Gospel into their lives.

However, not too many people go to church even if they recognize that God exists. The problems in these kinds of villages are complex and can only be solved by long-term commitment of individuals like FY to bring the love of Christ directly into the lives of people.

Personally, I have been spending a lot of time with the elementary school children who look to me as a big sister. Starting this week, I will be teaching English in two local elementary schools, so I pray that my relationships with these children continue to grow deeper. My desire is to help these kids realize their value, especially their value in God's eyes, so that they can stand up and start taking ownership of their futures. I will be incredibly busy in the upcoming months teaching first to sixth graders English, but God has already filled me with ideas and I cannot be more excited to be doing His work.

Please pray that God continues to give me opportunities to personally connect with the students, particularly 5th and 6th graders who are more closed off than the younger students. I know that God is building up an army of young people in this village to bring His light in Taiban and neighboring villages because He is already doing amazing transformative work among the parents. Praise God for never giving up on His people and for chasing after each one of us relentlessly with His love!

In Christ, Florence Hsiao

台東台坂部落宣教實習心得-

四月28日 - 五月11日, 2014

蕭翔中

蕭翔中(Florence Hsiao)美國出生, LCMM同工的第二代, 2013大學畢業. 回台參與台東"家立立社福慈善基金會"社會關懷事工-部落星光Project, 入住部落、成為長駐偏鄉的"星光老師".



首先我要感謝路加醫療傳道會支持我在台坂的宣教實習,(台坂是在台東山裡的一個小部落),我何其榮幸,神賜給我這個短宣的機會,盼望我的經驗讓更多的人

願意來這裡見證神的愛和祂的大能.

兩週前我搬進台坂,與宣教士FY生活,工作在一起.FY是”家立立”差派來服侍是台坂的兒童們.我起初並不知道我來這裡的真正目的,當時也沒有一個確切的計劃或目標,只曉得我來和FY同工,並了解村民的需要,因此我就抱著學習的態度開始.

我們每天5:30AM 起床,村民也是這個時間開始準備工作和上學.6AM,我跟著FY漫步全村,為這塊土地和居民禱告,並找機會和村民認識,7AM回到住處,早餐與靈修之後才開始一天的工作.前兩週,我主要是認識部落的人和他們的文化,參加FY帶領的查經班,帶領本地國小的英語活動,我也到村裡的診所,認識每週一次來部落看診的醫生.許多時間是幫忙FY寫故事,這故事是神特別感動FY為村民寫的.

這個故事的名字是”喜樂的燈塔”, 講述台灣的原住民忘記了自己是創造宇宙萬有的神的兒女的身分, 他們必須從現在所處的黑暗中,回到神的愛裡. 這個故事充滿了原住民的想像力,也與他們部落口傳故事與傳統有關. 經由翻譯這篇故事,幫助我了解住在台坂村原住民的背景與文化,更明白神對祂子民的心意.

當我逐漸認識台坂村之後, 我才明白他們所需要的不是物質上的幫助. 他們真正的需要是”希望”. 村中的孩子從小就從他們的歷史中看到被排斥的無望, 這與他們真正的身分-神的兒女,完全相牴觸. 家暴與酗酒是經常事.在這樣環境中,物質是無法帶來希望.只有神的愛才能改變一切. 有一件很特別的事,就是在台東的各村莊中都有教堂, 宣教士們在幾十年前就把福音傳到各部落.大多村民雖然相信有神,但都不去教會. 其中的問題是很複雜,解決之道就是要有像FY這樣的長期委身的宣教士,將耶穌的愛直接帶到村民的生活與生命中.

我每天花很多時間與小學的孩子在一起, 他們看我像一個大姊姊. 從這個星期開始,我將會在兩所國小教英文,求神使我與那些孩子們的關係與日俱增. 我希望幫助這些孩子知道自己在神眼中的價值是何等寶貴,這樣他們才可以勇敢地站起來,面對美好的將來.未來的一個月,我會忙著幫忙教一年級到六年級的英文,但神已經為我預備好了,非常興奮要開始神給我的這份工作.

請為我禱告,與這些孩子有更多個人的關係與關懷. 特別是五六年級的孩子們,他們比較不願與人接觸. 我知道神正在村中預備了一群年輕的基督精兵要將神的光照耀台坂村和鄰近的部落, 因為我看到神已經在他們的父母生命中行了奇妙的轉變. 感謝神從未放棄祂的每一個子民,不斷地用祂的愛召喚他們回轉歸向祂.

在好事上富足 - 感謝,代禱

北美路加總幹事 鄭博仁醫師



Free clinic at Thai-Burma border village

在神的恩典和帶領及同工的努力下,北美路加醫療傳道會的事工漸有增長。感謝一直在支持我們的主內弟兄姊妹以及和我們配搭的教會, 您們的禱告,

奉獻和各方面的參與, 是支撐我們繼續向前奔跑不可缺的動力。

從今年二月我們開始做每月定期的社區醫學講座,在Fremont基督之家舉辦,期盼藉著這樣固定的活動能把更多人帶到教會來。幾次下來,參加的人逐漸增加。六月份的活動將和Stanford醫學中心的Asian-LiverCenter合作,在社區做B型肝炎的免費篩檢及演講。我們也將繼續在華人教會中推廣醫學倫理的教育和相關的關懷事工,本年度的灣區華人生命倫理研討會將在十月中舉辦,主題是“尊重生命與重病末期的全人關懷”。

我們要特別感謝許多人支持我們對退休醫護宣教士的關懷事工,目前共有14位是我們在關心的。很高興這次有Irvine臺灣長老教會和洛杉磯台福教會協助我們舉辦“杏林愛,故鄉情”音樂見證會,把這些醫護宣教士為我們的故鄉臺灣犧牲奉獻感人的故事,讓更多人知道。我們也繼續出版第二期的“theCalling”季刊,更多報導他們的故事和近況。更盼望他們的故事能激起我們願意跟隨他們的佳美腳蹤,回饋故鄉,或到更有需要的地方服侍弱勢,傳達神的大愛。

在回饋故鄉的部分,我們主要是希望透過臺灣的基督

教醫院來做我們能力所能及的。目前所選定的地方是台東，參與台東基督教醫院在推動的部落星光計劃，服務原住民族群。很高興有我們的第二代年輕人 Florence Hsiao, 如此愛神愛臺灣，願意住進部落兩個月和這些弱勢同胞生活在一起，教導他們，關心他們，以便能“陪他一段，贏回一生”。

在到更有需要的地方的部分，目前我們的重點是在泰國西部，緬甸交接的地區做醫療和傳福音的工作，主要對象是當地的少數民族，緬甸難民和泰籍貧民。我們和臺灣及泰國相關的宣教機構合作，定期派醫療短宣隊，並設立特別的基金來支助願意中，長期到當地服務的醫生或護士，提供需要的藥品。我們也有機會認識在當地的一位宣教士 Dr. Scott Murray, 是一位蘇格蘭籍的外科醫生，目前擔任小桂河基督教醫院院長。他和他父親兩代在泰國服務的經歷，很讓我們感動，特別邀請他來擔任北美路加今年宣教年會的講員，可以有機會向他學習，也同得神的激勵。

北美路加2014年宣教年會已定於8月29到31日，在San Jose的迦南臺灣教會（合辦單位）舉行，主題是“當做在那最小的身上”。講員除了 Dr. Murray 以外，還邀請到迦南教會主任牧師蘇惠智牧師，台東基督教醫院家立基金會的呂吳方芳執行長，臺灣豐盛生命發展協會總幹事戴珣珣牧師等。期待會是一個宣教的屬靈盛會，讓參加者都能更清楚神的心意和呼召，同心擺上我們最好的，更多讓神來使用。

最後要提的是第二代的事工，我們在台灣馬偕醫學院舉辦的台美醫護學生文化交流營，今年已進入第四年，營會時間是從7月12日到20日。目前已從北美各地甄選了14位優秀又有宣教熱忱的學生擔任助教，和50位左右的台灣學生一起學習，希望能建立長久的關係，在學醫及行醫的過程一起成長。從21日到26日，將安排美國學生到台東，學習基督教醫院在社區的服務及福音的事工。我們長遠的目標是希望台灣的學生，也是台灣醫界未來的精英，能有機會從美國學生身上認識神。美國學生也能藉著這個特殊的活動來更認識台灣，愛台灣，學習醫療宣教，願意將來在他們醫護的專業上來讓神使用。

盼望北美路加的事工能繼續得到大家的支持和鼓勵，一起藉著醫療宣教來興旺福音，也一起學習如何“在好事上富足，甘心施捨，樂意供給人，為自己積成美好的根基，預備將來，持定那真正的生命。”
(提前6: 17-19)

To Be Rich in Good Deeds – Thanksgiving and Prayer

Paul Cheng, MD

Through God's grace and the collective efforts of its workers, the North America Luke Christian Medical Mission (LCMM) continues to grow steadily. I thank all of our long-time supporters, including several churches partnering with us. Your prayers, donations, and involvement have proved to be invaluable in keeping us moving forward.

In February, we started holding monthly community health talks at the Fremont Home of Christ Church in the hopes that it would bring more people to the church. After several months, the number of participants has gradually grown. In June, we will collaborate with the Asian Liver Center from Stanford's medical center to have them give a talk and offer free screenings for hepatitis B to the community. In addition, we shall continue to promote and teach medical ethics, education, and related care ministry at the Chinese Church. This year's bioethics conference for the Chinese churches will be held in mid-October, with the theme of "Respecting life and caring of the terminally ill."

We especially want to thank those who have lent their support to our care ministry for retired medical missionaries, of which there currently 14 have been connected. I am glad to have acquired help from the Irvine Taiwanese Presbyterian Church and Los Angeles Evangelical Formosan Church in hosting two concerts to honor these retired missionaries. This concert gives these medical missionaries an opportunity to share their heartwarming stories to more people. We will also be publishing the second edition of "The Calling", our biannual journal, which covers more of their stories and recent activities. I hope that their stories will inspire us to follow in their footsteps in giving back to Taiwan or servicing other places in greater need.

As far as "Giving Back to Taiwan" goes, we are working with the Christian Hospitals in Taiwan to offer whatever help we can to those who need it. Currently, we are focused on helping the Taitung Christian Hospital promote the Tribal Starlight Program, which serves the aborigines. I am glad to have Florence Hsiao offer to live with the aborigines for two months to teach and care for them.

As for "Service to the needed", we are currently focused on doing medical and evangelistic work with the financial dis-

advantaged, the refugees, and the local ethnic minorities in the region connecting western Thailand to Myanmar. We are collaborating with the missionary organization of Taiwan and Thailand to regularly send out medical mission teams and to establish a special fund to allow volunteer doctors and nurses to obtain and provide needed medicine. We also had the opportunity to get to know a local missionary, Dr. Scott Murray, a Scottish surgeon currently serving as the superintendent of the Little Kwai River Christian Hospital. Altogether, his father and he have two generations' worth of experience in serving in Thailand. As such, we have invited him to be the speaker for this year's North American Luke Missionary Annual Meeting, so that we may have a chance to learn from him as well.

The 2014 LCMM Retreat has been scheduled to be held at San Jose's Canaan Taiwanese Christian Church (co-organizer) from August 29 - 31, with the theme of "Do It Unto The Least". Besides Dr. Murray, we have also invited Senior Pastor Ralph Su from Canaan Church, Pastor Fang-Fang Wu from Taitung Christian Hospital Foundation, Pastor Susan Tai from Taiwan Abundant Life Development Association, and other speakers. One can expect the event to be a missionary's spiritual banquet, allowing participants to better understand God's will and calling.

The last topic I need to address is in regards to the second generation ministry. Our 4th Taiwan-US Cultural Exchange Camp that we organize for medical students at the Taiwan Mackay School of Medicine will be held from this year's July 12 - 20. Currently, we have already selected 14 outstanding and zealous American students as teaching assistants to learn alongside 50 or so Taiwanese students. I hope that they will be able to grow together and build long-lasting relationships in the process of studying and practicing medicine. From the 21st to the 26th, the American students will visit Taitung to observe and help out in Taitung Christian Hospital's community service and evangelistic work. Our long-term goal is to give the Taiwanese students, the future elites of Taiwan's medical community, the opportunity to get to know God from the American students. The American students, on the other hand, can make use of this special event to better understand Taiwan and learn more about medical missions.

I hope that LCMM's missionary work can continue to receive support and encouragement from everybody. Let us continue to spread the gospel through our medical missions, and let us learn how to "to be rich in good deeds, and to be generous and willing to share. In this way they will lay up treasure for themselves as a firm foundation for the coming age, so that they may take hold of the life that is truly life."

(1 Timothy 6:17-19).



特別感謝

陳語柔 RoRo Chen, 陳力安 Jason Chen,
陳德明 Tim Chen, 陳穎瑞 Veronica Chen, JMHO,
戴芹 Helen Dai, 鄭純慧 Phyllis Cheng,
林鴻志醫師 Dr. Bruce Lin, 寧可人 Clin Ning,
邵陽博士 Dr. Yang Shao, 王華影醫師 Dr. Clair
Wang 以及楊春霖 Eileen Yeo 協助本刊中英文編輯
譯, 本刊離不開他們孜孜不倦的奉獻。北美路加
傳道會也在尋求中文翻譯及編輯的同工,
如果您對此有感動並有翻譯經驗, 我們歡迎您的
參。有關退休醫療宣教士, 本刊物和LCMM的詳
細信息, 請參閱LCMM新設立的Facebook
www.facebook.com/lcmmusa.org
或瀏覽我們的網站 www.lcmmusa.org,
也可以給我們發電子郵件 thecallinglcmm@gmail.com 或致電LCMM在加州聖荷西的辦公室。

Special thanks

LCMM has recently started a new Facebook page www.Facebook.org/lcmmusa.org and would like to encourage all of you to browse and post on it. We welcome your feedback, suggestions, ideas and prayers. Please "like" the page to stay updated. Recommend it to your friends and families. We especially encourage the next generation to post and comment in English or Chinese. Let's use this tool to continue

God's missions for us globally.

LCMM is grateful for your support.

一起來關顧退休醫護宣教士

除了今天大家所聽到的這些醫療宣教士感人的故事以外，還有許許多多同樣從歐美遠渡重洋，在中國內地、臺灣的山邊海角，默默的將一生奉獻給華人。他們寫下了華人歷史中不為人知的重要一頁，他們在醫療、教育及宣教的成果和影響，持續到今天，讓千萬人受惠，如今正是我們可以回應回饋的時刻。

北美路加竭誠邀請您，一起來關心一些退休回到北美的醫護宣教士，他（她）們多數年紀老邁，在健康照顧與經濟上有很大的需要，以下是我們目前連絡上的宣教士，希望有更多的人力和資源，可以去照顧更多的退休宣教士。除了在經濟上微薄的幫助，以報答他們為我們所做的犧牲奉獻以外，我們也希望藉著這樣關係的建立，可以更多吸取他們的經驗，追隨他們的佳美腳蹤，藉醫療來服務弱勢，傳揚愛的福音。



薄柔纜醫師 (Dr. Brown)

老少兩代的薄醫師為了中國人付出了80年歲月他們以生命和血淚服務著一代又一代的中國人父親薄清潔牧師經歷了中國近代史上戰禍最頻仍的40年，兒子薄柔纜醫師戰後到荒蕪貧困的台灣落腳在最乏人問津的「後山」(花蓮)。創辦花蓮門諾醫院，為貧民與原住民奉獻41年。



譚維義醫師 (Dr. Frank & Mrs. Sally Dennis)

譚維義醫師完成外科訓練後身為護理師的愛妻莎莉選擇到亞利桑那州的貧民院為印地安病患服務。他在1961年來到台灣後山，在物資極度缺乏之下，譚醫師從小診療站開始，翻山越嶺在山區做巡迴醫療，1968年創辦台東基督教醫院，33年來，從未向醫院支取分文薪水，只靠美國教會奉獻所得微薄收入，過簡樸清貧的生活。



德樂詩護理師 (Ms. Dirks)

終身未婚，將34年的青春都奉獻給台東人。1963年在台東鄉下設立診療站，一切都非常簡陋，每當要消毒針筒等醫療器具時，她得練習在土灶裡升火用鍋子將水煮開，權充消毒鍋。在台東基督教醫院服務時，德樂詩親自為病人擦澡、導尿管、指甲、通便盆翻身，這種「全人護理」的觀念，在今日的醫院裡已經不多見了。



華德安護理師 (Ms. Lucy Waterman)

1964年底與德樂詩護理師一同加入譚維義醫生率領的醫療隊，使巡迴醫療服務範圍由屏東至台東成功等海岸線沿線，擴大至成功長濱沿海地區，為原住民提供免費巡迴服務。為台東基督教醫院創始人員之一，來台服務38年。



艾可諾醫師 (Dr. Epp)

1973年舉家由加拿大來到台灣花蓮，當時東台灣醫療資源貧瘠，他深入山區從根本解決原住民公共衛生與嚴重的寄生蟲問題；在貧病交迫山區，照顧畸形兒與早產兒，並為東台灣建立內科體系。艾可諾為台灣後山奉獻20年黃金歲月。



耿喜音 麻醉護士 (Ms. Carol Gunzel)

耿喜音最喜歡自稱是「蒙古人」，父母在1931即自美國前往中國大漠之南傳教，耿喜音十六歲到加拿大唸高中，再到美國進修麻醉護理，1970來到台灣，一肩扛下了東基全部的麻醉工作。成立東基居家護理所。



馬素珊 護理師 (Ms. Kehler)

1957年加拿大籍的馬素珊經由美國門諾會的派遣，來到台灣設立門諾護校，抒解台灣東部的護理人力需求。馬護理師培育許多當地的原住民少女，傾心教導她們護理的專業，更常常用愛心與耐心來引導她們認識上帝。她在台灣36年的歲月，照顧病人，視病猶親，是位愛的實踐者。



龍樂德 醫師 (Dr. Long)

越戰期間在越南做小兒科醫院的醫療宣教工作。1977龍醫師夫婦帶著四名兒女，舉家來到台東定居，將自己24年的歲月奉獻給台東基督教醫院。龍樂德被稱為「台東小兒科之父」，對早產兒及病重兒從不放棄，始終執著於「對生命尊重」的理念，奮力地救治每一個孩子。台東人形容他是一位「以行為傳播基督教義」的宣教士醫師。



羅瑟夫 醫師 (Dr. Noordhoff)

1959年，32歲的羅醫師蒙神呼召，舉家來台行醫宣教44年，自稱是「永遠的台灣人」。他創辦了台灣第一所小兒麻痺重建中心，第一間加護病房，第一個自殺防治中心生命線，以及第一個燙傷復健中心。他窮盡一生心力，巧手修補了無數唇顎裂及顱顱患者的缺陷，幫助他們重拾人性尊嚴。羅醫師醫療服事的原則，「不只要治療患者生理的疤痕，同時也治療他們的心理疤痕」。



藍瑪烈 護理師 (Ms. Randall)

1969年加拿大籍的藍瑪烈護理師，蒙神差派來到台灣彰化基督教醫院服務，從學閩南語開始，奉獻她30年的歲月給彰基。許許多多小兒麻痺或被寄生蟲感染的孩子們都得到她特別的照顧與疼惜。藍護理師同時引進國外先進臨床護理技術，建立護理管理，並協助彰基與國外各大醫院建立交流管道，提升台灣護理水準。



唐瑪理安 宣教士 (Mrs. Marilyn Tank)

出生成長於台灣，是前台灣神學院院長孫雅各牧師 (Rev. James L. Dickson) 與芥菜種會孫理蓮牧師娘的女兒，與宣教士唐華南牧師 (Rev. Vernon Tank) 結婚，致力協助芥菜種會開拓各式的醫療、兒童、婦女事工，包括殘障孤兒院、盲人重建院、肺病療養所、育嬰所、未婚媽媽之家等等。她於1990年退休後，回到美國定居芝加哥，但因為心連台灣，數次回台灣協助各項事工。



蘇輔道 醫師 (Dr. & Mrs. George Timothy Stafford)

蘇輔道 (Tim Stafford) 醫師1972年到台東基督教醫院服事，一待就是二十六年，與東基創院院長譚維義 (Frank Dennis) 醫師一同巧手縫補後山醫療的缺口。有「繡補大夫」之譽的蘇醫師，於1993年獲頒第三屆醫療奉獻獎。



北美路加醫療傳道會

LUKE CHRISTIAN MEDICAL MISSION

4413 Fortran Court
San Jose, CA 95134, U.S.A.
e-mail: thecallinglcm@gmail.com
www.lcmmusa.org



2014 北美路加 醫療傳道會宣教年會

時間: August 29 to 31, 2014

地點: 迦南台灣基督教會

地址: 4405 Fortran Court,
San Jose, CA 95134

報名或詢問請致電於
(408) 408-893-1881

或到我們的網站上直接報名
www.lcmmusa.org

講員: Dr. Scott Murray

泰國小桂河基督教醫院院長

蘇惠智牧師

迦南教會主任牧師

呂吳方芳女士

台東基督教醫院家立基金會執行長

戴珣珣牧師

台灣豐盛生命發展協會 (TALIDA) 總幹事

~ 歡迎大家參加 ~

董事會:

董事長: 廖俊惠醫師
財務董事: 許博榮先生
祕書: 陳保川先生
董事: 鄭博仁醫師, 林鴻志醫師
王華影牙醫師, 陳宏炫先生

執委:

陳芳玲牙醫師, 方禎鋒醫師
甯可人先生, 陶美霞護士, 吳秋芳護士
吳蕙欣醫師, 王慧靜會計師
總幹事: 鄭博仁醫師
行政秘書: 陳慧娟

Board of Directors:

Chairman: Dr. Chin Liao
Treasurer: Mr. Po-Jung Hsu
Secretary: Mr. Paul Chen
Dr. Paul Cheng, Dr. Bruce Lin,
Dr. Claire Wang, Mr. Andy Chen

Executive Committee Members:

Dr. Grace Chen, Dr. Jim Fang, Mr. Colin Ning,
Ms. Mei-shia Soong, Ms. Chiu Wu
Dr. Faith Wu, Ms. Jennifer Wang
Executive Director: Dr. Paul Cheng
Administrative assistant: Sharon Chen



www.facebook.com/lcmmusa.org

