

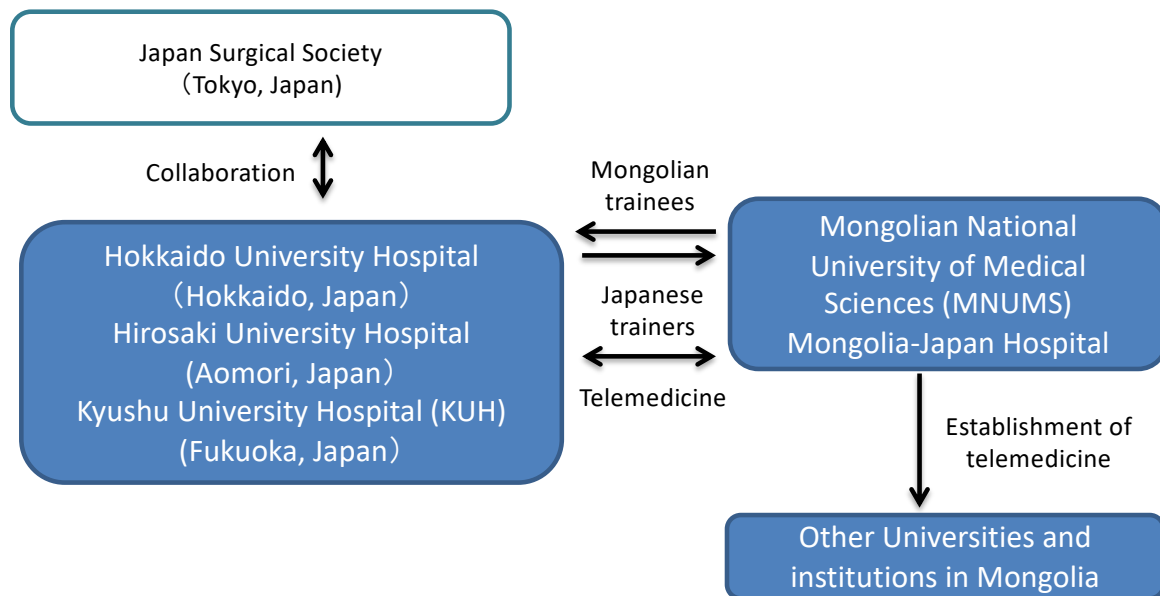
Establishment of Tele-surgical anotation and telesurgery between Mongolia and Japan.

【Background on local conditions and needs】 Mongolia has one of the highest incidence and mortality rates for gastrointestinal cancers. However, the country faces several healthcare challenges, including a shortage of medical specialists, inadequate postgraduate medical education systems, and significant disparities in healthcare quality between urban and rural areas.

【Purpose】 This project aims to develop human resources in the field of gastrointestinal diseases in Mongolia. By implementing a remote surgical training system accessible throughout the country, the project seeks to address regional disparities in healthcare education and improve the overall quality of surgical care.

【Method】 We will dispatch a multidisciplinary team from KUH etc—including gastrointestinal surgeons, endoscopists, radiologists, pathologists, and telemedicine engineers—to the Mongolian MNUMS and affiliated institutions. Mongolian doctors in various fields will be invited to KUH to learn basic to advanced diagnosis and treatment of GI diseases in Japan. Additionally, a sustainable telemedicine-based educational platform will be established to enable continuous remote training and mentoring.

【Expected results and ripple effects】 Through practical and high-impact hands-on training conducted in both Mongolia and Japan, participating doctors will significantly deepen their understanding of gastrointestinal diseases. The use of remote medical education will help disseminate this knowledge across Mongolia, enhancing national clinical capacity. Ultimately, the project aims to establish a robust remote surgical education system between Japan and Mongolia. This system will be centered at MNUMS and will form the foundation for implementing remote surgery practices in Mongolia, thereby improving the quality and accessibility of surgical care across the country.



< Training Schedule >

Jul - Sep: Online training

- Lectures and Case Discussions by Medical Staff on Diagnosis and Treatment
- Demonstration of Remote Surgical Mentoring (Measure international latency using recorded surgical videos and assess the feasibility of real-time remote surgery.)

Aug: Japanese trainers despatch (9 staff)

- On-site clinical training by medical staff, including lectures and guidance on the proper use and management of medical equipment
- On-site assessment and technical guidance by engineers, including live demonstration streaming
- Seminar on remote surgical mentoring

Sep: Onsite training in Japan (12 staff)

- Hands-on surgical training
- Training on the current state of remote surgery in Japan