



## Title: Improvement Program for Computed Axial Tomography (C.A.T.) Studies and Emergency Care at the Children's Hospital in Tamaulipas

### PROJECT DETAILS

#### Project Objective:

The primary objective is to provide the Hospital Infantil de Tamaulipas with complementary equipment for the use of the Computed Axial Tomography (CT) scanner and for the Emergency Department, so that children can receive immediate care to undergo CT studies with contrast media, as well as to receive diagnostic imaging studies using X-rays upon admission to the emergency area.

El objetivo principal es dotar al Hospital Infantil de Tamaulipas con equipo complementario para el uso del aparato para los estudios de Tomografía Axial Computarizada (TAC) y para área de urgencias para que los niños puedan recibir una atención inmediata para realizar los estudios mediante el TAC con medios de contraste, así como atender con estudios de imagenología con rayos X a los niños al ingresar al área de urgencias.

**Country/Location:** México

**Focus Area:** Prevención y Tratamiento de Enfermedades

**Implementation Year:** 2026

**Total Project Budget:** \$59,372.00 USD

**Missing Funds:** \$9,200.00 USD

#### Community Assessment:

We met several times with the Hospital Manager and his team to check the needs and evaluate those. We made other global grants in that Children's Hospital, so we have a very good relationship. In one of our visits our Governor went with us to supervise the operations of the other global grants and she saw all these needs.

To identify the needs, a direct assessment process was carried out at the Children's Hospital of Tamaulipas, which included: Technical visits to the emergency and tomography areas, where the actual condition of existing equipment, operational limitations, and the lack of essential supplies for pediatric emergency care were observed.

Interviews with medical staff, administrators, and radiology technicians, who explained the daily challenges involved in performing contrast-enhanced CT scans and radiological studies in the emergency department, as well as the delays experienced by patients.

Review of patient flow and waiting times, identifying that children must be transferred and wait several days for essential studies due to the lack of appropriate equipment.

Analysis of installed capacity and demand, confirming that the current infrastructure cannot meet the high regional demand for specialized studies, affecting the care of children from across the state and surrounding areas.

Documentary and operational confirmation, verifying that existing stretchers, lighting systems, and complementary equipment are obsolete, lack replacement parts, and do not meet the minimum requirements for pediatric emergency care.

This process made it possible to validate that the lack of complementary equipment for CT scans and emergency care is a critical, high-priority, and unmet need that directly affects the safety, diagnosis, and timely care of thousands of children.

Currently, for children to undergo CT studies with contrast media, they must be transferred to another hospital or laboratory after scheduling an appointment. This process requires the issuance of a service order by the hospital administration, the allocation of the necessary budget for the study, and the subsequent scheduling of an appointment, which may take up to five (5) days depending on availability. Once the appointment is confirmed, the child must be transported by ambulance to the external facility for the CT study with contrast media.

There are very few laboratories in Ciudad Victoria, Tamaulipas, capable of meeting the high demand for CT studies with contrast media.

The two (2) stretchers currently located in the two emergency rooms are not suitable for emergency care, as radiological (X-ray) studies cannot be performed on-site. This is due to the fact that the stretchers are not translucent or radiolucent and do not allow placement of the imaging plate beneath the mattress.

Additionally, these two emergency rooms lack functional ceiling-mounted lighting fixtures necessary for proper illumination during

observation and immediate intervention. The existing lighting fixtures are non-functional and cannot be repaired due to their age, as replacement parts are no longer available.

The Hospital Infantil de Tamaulipas is the only option for medical care and hospitalization for children in the city and in nearby small communities. Furthermore, for certain specialized conditions, the hospital serves children from across the State of Tamaulipas, as well as from the northern regions of the States of Veracruz and San Luis Potosí.

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### **Project Design:**

Pendiente

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### **Direct Beneficiaries:**

Childrens of the Children's Hospital in Tamaulipas  
Doctors of the Children's Hospital in Tamaulipas  
Technicians of the Children's Hospital in Tamaulipas

Monitoring and Evaluation Plan for Global Grants. Measurement criteria with frequency and number of beneficiaries:

Number of trained health professionals: 1 to 19 per year.

Number of people reporting improved quality of health services: 50 to 99 per semester.

Number of beneficiaries receiving preventive treatment: 100 to 499 per semester.

Number of health facilities benefited: 1 to 19 per year.

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### **Sustainability:**

It will provide 50 studies per week, it is more than 2,000 studies per year savings a lot of time for the diagnosis, discomfort for patients and their families and money for transport and pay for the study to other hospitals and/or labs. Minimum cost per test outside de Hospital is \$150 = \$300k savings + the trip costs per year.

A maintenance service contract. The actual C.A.T. already has a maintenance service multiannual contract.

A long-term technological upgrade plan.

Continuous medical staff training, including cascading education for residents and new residents.

The hospital administration commits to maintaining the operational budget for critical supplies and to providing periodic reports on clinical indicators.

The hospital administration commits to buy all the supplies to use properly and all the time the C.A.T. See the letter already signed by the General Hospital Manager attached.

The children's parents will not wait long to know what is the diagnosis.

The "Voluntad against Cancer ONG" (operate some of our projects there) and Parents will pressure to the Hospital to assure the correct equipment operation.

The equipment will be operated and maintained by:

-Certified radiology technicians.

-Medical specialists.

-Trained emergency department staff.

-The supplier will provide initial training and operation manuals. The hospital will assume direct responsibility for preventive and corrective maintenance, following established protocols and scheduled maintenance reviews.

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### **Collaborators:**

Director of the Children's Hospital of Tamaulipas:

Dr. Vicente Plascencia Valadez.

Head of the Radiology and Imaging Department:

Dr. Dulce Yaneth Castillo Reta.

Medical Coordination – Emergency Department:

Dr. María Guadalupe Hernández.

Dr. Tzivia M. Jiménez Barrera

Hospital Education Coordination (Medical Residencies):

Dr. Jorge Alberto Guerrero López De Lara.

Technical Staff Responsible for the CT Scanner (TAC):

Technician Jaime René Zapata Rivera – Morning shift.

Technician Juan Carlos Carrizales Turrubiates – Afternoon shift.

Hospital's Administrative Operator

Horacio Maldonado

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### **Evaluation and Monitoring:**

Horacio Maldonado is a collaborator of the Hospital Infantil who is responsible for the hospital's administrative operations. He maintains records of pediatric patient admissions and all diagnostic studies performed on each patient. He is also in charge of managing equipment maintenance and training programs. If Horacio is not working there in the near future the new responsible for the hospital's administrative operations will be train and perform this job.

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## PROJECT CONTACTS

**Host Club:** Club Rotario Ciudad Victoria (District 4130)

**Contact:** Magid Velez Assad - magid\_velez@hotmail.com

**International Club:** Georgetown (District 5870)

**Contact:** George Lourigan - george@georgelourigan.com

## PROJECT FINANCE SUMMARY

### Finance Calculator

#### Funds Sources (Requested / Committed)

Source	Club (Cash)	District (DDF)	Match + 5% Fee	Total
Club Rotario Ciudad Victoria (Cash)	\$102.00 USD	-	<b>+\$5.10 USD</b>	\$102.00 USD
Distrito 4130 (FDD)	-	\$15,000.00 USD	<b>\$12,000.00 USD</b>	\$27,000.00 USD
Georgetown (Cash)	\$1,470.00 USD	-	<b>+\$73.50 USD</b>	\$1,470.00 USD
Distrito Intl 5870 (FDD)	-	\$12,000.00 USD	<b>\$9,600.00 USD</b>	\$21,600.00 USD
<b>TOTALS</b>	<b>\$1,572.00 USD</b>	<b>\$27,000.00 USD</b>	<b>\$21,600.00 USD</b>	<b>\$50,172.00 USD</b>

**\*\* Required FDD \*\***

**\$21,600.00 USD**

Total Requested Budget	<b>\$59,372.00 USD</b>
Total Obtained Funds	<b>\$50,172.00 USD</b>
<b>** Funding Gap **</b>	<b>\$9,200.00 USD</b>
Total 5% Cash Fee (info only)	<b>\$78.60 USD</b>

## DOCUMENTS, PHOTOS & FILES (CLICK TO OPEN)

### FOLDER: EJECUTIVA

(1 FILES)

[PDF] Plantilla Presentacion Proyectos-v2-FPMTY-2025 GG2686262 5.0 print.pdf

2,156 KB

### FOLDER: FOTO PROMOCION

(1 FILES)

[PDF] Triptico Childrens Hospital 2.0.pdf

615 KB

### FOLDER: FOTO SITIO

(1 FILES)

[JPG] Foto Exterior ok.jpg

238 KB

### FOLDER: OTROS

(10 FILES)

[PDF] ANTMED BROCHURE\_INYECTOR\_IMASTAR-CT-DUAL.pdf

1,058 KB

[PDF]	ANTMED COTMDK-101025-11.pdf	185 KB
[PDF]	ANTMED100107-Jeringas TECH.pdf	370 KB
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[PDF]	Presentacion Proyecto GG2686262 5.0 only Budget.pdf	281 KB