



Hermosillo Sonora, october 2019

LIC. REINER JAHN COORDINADOR DEL PROYECTO 100 años, 100 acciones por México

LIC. ROGER SIMS COORDINADOR DEL PROYECTO H2H 100 años, 100 acciones por México

PRESENTES:

We will thank the consideration for this grant proposal to be considered in the intention the Project 100 years, 100 actions for Mexico.

1) APPLICANT INFORMATION.

Rotary Club Hermosillo del Desierto

Name: ALAN CADENA RAMIREZ (President)

Address: Fiesta Americana Hotel, Bvld. Eusebio Kino # 369, Colonia Lomas Pitic, CP83150

District and Club Number: D4100-53946

2) NAME OF THE GRANT

ORTHOPEDIC SURGERIES OF TENOTOMIES

3) OBJECTIVE OF THE PROJECT

Improve the alignment of the lower limbs for 8 patients, originating in municipalities of the State of Sonora, with cerebral palsy through pediatric orthopedic surgery. These operations will provide independence of mobility in these patients.

4) DESCRIPTION OF THE PROJECT, SHORT AND LONG TERM DEGLOZED

At CRIT Sonora, we serve children and adolescents with physical disabilities. Currently our universe of patients covers a total of 673 active families, of which many of them belong to vulnerable sectors of society.

Of the 673 families 466 have an income of less than \$ 6,500.00 pesos (325 dlls), and our graph of income distribution by family is reflected as follows.7



PROYECTO 100 años, 100 acciones por México



Ingresos Familiares		
Paciente Activos CRIT Sonora		
Hasta \$2,000	92	14%
De \$2,001- \$4,500	197	29%
De \$4,501- \$6,500	177	26%
De \$6,501- \$10,000	110	16%
De \$10,001- \$17,000	66	10%
De \$17,001 - \$25,000	20	3%
Más de \$25,000	11	2%
	673	100%

Of the 466 families indicated in the previous graph who earn less than \$ 6,500.00 a month, many of them live in vulnerable conditions (at the poverty level) and do not have access to these surgery services to improve their quality of life.

The list of active patients to be considered for this grant, requires enrollment in our waiting list and be previously assessed by our Rehabilitation doctors with a specific diagnosis of a neuromusculoskeletal disability.

Of our universe of patients, 398 have a diagnosis of cerebral palsy, represented as the following graph shows in 59.14% of the total. 7

Pacientes con Paralisis Cerebral			
Grupo de Interés	Sexo	Pacientes	Porcentaje
Lesión Cerebral Leve y Moderada	FEMENINO	88	13,08%
Lesión Cerebral Leve y Moderada	MASCULINO	116	17,24%
Lesión Cerebral Severa	FEMENINO	89	13,22%
Lesión Cerebral Severa	MASCULINO	105	15,60%
	Totales	398	59,14%

The patients with Cerebral Palsy, they will be programmed by our doctor in rehabilitation, which takes the clinical case of each one of them, who will form the list of patients that require surgery. Then, after medical diagnosis and case study, the patients will be selected to receive the benefit of accessing pediatric orthopedic surgery which will help to improve the alignment of lower extremities in each of them and generate conditions to favor the independence of mobility.

The selected patient goes through social integration assessment to determine their current economic situation through a socioeconomic study that indicates their real ability to pay and resulting in low possibility of payment, for belonging to a vulnerable sector or sector of the population that requires support or that lacks access to health service, its acceptance is determined in the list of candidates for surgery.







Once on that list, patients are routinely assessed by the orthopedic service, to determine in them the surgical process to follow or if each patient requires a procedure to improve their rehabilitation, such as, for example, the start of standing and / or walking.

Within the day-to-day operations of the CRIT, a meeting procedure called the SURGICAL COMMITTEE is established, where each case indicated in the list of surgical patients is analyzed, where rehabilitation doctors, director and medical subdirector of the center are involved, as well as social integrators who analyzed each case according to their aforementioned study, and it is determined in that committee, if the surgery is approved for each patient, surgery date is given, according to the list and the family is informed.

Before the surgery, the family is asked for laboratory studies for pre-surgical analysis and prior indications are scheduled for intervention in the hospital where the surgery will be performed.

After the surgery, the recovery of each patient is monitored, by giving prescriptions for medications, they are also given indications of post-surgical care and they are cited in the Sonora CRIT for evaluation and / or removal of plasters and stitches.

The nursing area is in charge of carrying out this last procedure, where stitches and plasters are removed through a specialized tool such as the saw to remove plasters and healing material.

The consultation is scheduled to continue with a physical therapy plan after surgery.

Target population:

Our age range in patients treated behaves as follows:

Rangos de Edades	Número de Pacientes	Porcentaje
0 a 2	42	6,24%
3 a 4	147	21,84%
5 a 10	295	43,83%
11 a 15	115	17,09%
16 a 18	50	7,43%
19 en adelante	24	3,57%
Totales	673	100%

Edad Promedio: 8.1 años.

Of the Universe of patients treated in sound CRIT, 284 are women and 389 men, as shown in the following table7:





Estadística General por Sexos		
Sexo	Pacientes	Porcentaje
MASCULINO	389	58%
FEMENINO	284	42%
Totales:	673	100%

Of the 673 families 614 belong to the State of Sonora and only 9% belong to other states7:

Población Atendida por Estados		
Estado	Pacientes	Porcentaje
Sonora	614	91%
Otros Estados	59	9%
Totales	673	100%

Originarios de Otro Estado de la República		
Estado	Pacientes	Porcentaje
Arizona	6	0,89%
Baja California	1	0,15%
California	1	0,15%
Sinaloa	51	7,58%
Totales	59	9%

5) EXPLANATION OF THE SUSTAINABILITY OF THE PROJECT IF YOU HAVE IT

It is intended that the population indicates as a surgical patient to find out through a social integration statement and the signature of consent granted for existing surgical procedures in CRIT procedures, and through the medical consultation of the pediatric orthopedic surgeon that is generated prior to surgery; Through these mechanisms, they will be informed that the financial resource to pay for the entire surgical intervention comes from the use of a Rotary Foundation project program, and from the in-kind contribution that the foundation we represent provides, clarifying that the contributions are 50% and 50%, respectively.

6).- DIRECT AND INDIRECT BENEFICIARIES BREAKDOWN YOUR VULNERABLE SITUATION ATTACHING IMAGES.

The project will generate as a result of the alignment of lower limbs in scheduled surgical patients, an improvement in their standing and / or gait, improving in them the independence of mobility.





The form of measurement to be used is the percentage of scheduled vs performed surgeries, also giving an impact indicator such as the percentage of beneficiaries who improved their alignment after surgery, showing as evidence the radiological studies that show this improvement, as well as a Descriptive photographic memory of each surgical procedure.

Performing pediatric orthopedic surgeries in surgical candidates determined according to their situation of diagnosis of cerebral palsy, with the aim of aligning lower limbs to promote mobility independence:

It will generate an impact on the possibility of improving the quality of life They will get support as a family that lacks access to health service.

They will help those families that have little chance of covering high-cost pediatric orthopedic surgery.

The patient undergoing surgery will be a future candidate for school inclusion more easily.

7).- PROJECT LOCATION

Av. Real del Arco s/n, colonias Las Quintas, cp. 83240. Hermosillo, Sonora.

8).- AREA OF INTEREST:

Promoting Peace, Conflict Prevention and Resolution____X____ Prevention and Treatment of Diseases _____X____ Water supply and sanitation______ Child maternal health_____X____ Literacy and basic education______ Economic and integral development to the community_____ Other (examples: wheelchairs, energy-return savings projects, safety and protection of hospitals and schools)

9).- PROJECT BUDGET

The project budget is \$12,000.00 dlls, broken down as follows:

Contribution	Amount
Coming from the requesting club	\$ 1,000.00 Dollars
Resources from other sources in Mexico: FURMEX or other	\$ 500.00
Requested to Heart 2 Heart	\$10,000.00
Sum	\$
TOTAL	\$11,500 US Dollars







NOTE: Minimum commitments for applicant clubs are as follows: Size of project (Dollars) Minimum commitment from applicant (USD) Rotary C. applicant USD 500-USD 5,000 20% of the total project budget C Rotario USD 5,000 – USD 10,000 USD 1,000 Rotaract C USD500 - USD10,000 10% of the total project budget

10).- INVESTMENT TO BE MADE IN THE PROJECT

Required

Goals	Evidence Material
1. Perform 8 pediatric orthopedic surgeries	Descriptive photographic memory
during the months of April to November 2019	Clinical studies or analyzes

Cobertura y área geográfica de su proyecto:

County: Hermosillo City: Hermosillo Priority Care Areas: Municipios del Estado de Sonora.

Metas	Costo	Fecha de inicio	Fecha de término
1. Perform 8 pediatric orthopedic surgeries during the months of August to December 2020	\$11,500 dlls	August 1, 2020	December 1, 2020

CONCEPT	AMOUNT (8 childrens)	TOTAL
Hospitalization	\$ 8000.00	
Anesthesia	\$ 2000.00	
Child Support	\$ 1500.00	
TOTAL		\$ 11,500.00

* Fees of the pediatric orthopedic surgeon will be covered by CRIT Sonora.







Signatures

APPLICANT NAME: Club Rotario de Hermosillo del Desierto

CLUB PRESIDENT 2019 - 2020, Alan Cadena Ramirez <u>alankadena@gmail.com</u> cel 662 1152181

PRESIDENT 2020 - 2021, Luis Octavio Thomson Vázquez <u>thomson460@hotmail.com</u> cel 662 2562999

LEADERS RESPONSIBLE FOR THE PROJECT,

Lider 1

Lider 2

Alan Cadena Ramírez

NinOthen

Luis Octavio Thomson Vázquez