

AMRF NEWS



American Medical Resources Foundation, Inc. Volume 18, No. 1, Winter 2007

Ambulance and Equipment to Cameroon

Tata Agwo Accomplishes Step 1 of His Mission

Tata Agwo is a Senior Systems Integration Engineer at Beth Israel Medical Center in Boston, MA and an author of three books dealing with African Culture. He is originally from Cameroon, a poor African country of 16.5 million people, mainly rural tribes people. He recently experienced the death of his mother there as a result of inadequate medical facilities and care. In response to his mother's passing Tata vowed to help to improve medical care in his native country. Joining forces with AMRF and Harvard Medical International, Inc. and two hundred fifty other contributors the first shipment of "Tata's Promise" was dispatched from the AMRF warehouse



Tata Agwo spearheaded the project to improve healthcare in Cameroon.

in Brockton, MA on September 16, 2006 headed for the Acha-Tugi Presbyterian General Hospital in Mbengwi-Momo Cameroon.

This hospital is a 150-bed facility expandable to 200-beds, and includes inpatient wards, outpatient facilities, neonatology and maternity wards, operating rooms, tuberculosis wards, emergency rooms, radiology rooms, laboratory, examinations and consultation rooms, optical section and pharmacy. Administrative, maintenance, housekeeping and conference rooms are also included. The physical description of this facility belies the reality that the medical equipment dates back to 1964 and much of it is not functioning. Medications are in short supply or non-existent. The American, Swiss and German missionaries who previously



The Acha-Tugi Presbyterian Hospital in Mbengwi-Momo Cameroon.

operated the facility departed in that year and turned the operation over to the Presbyterian Church of Cameroon which does not have the resources to staff it, maintain equipment or stock medications.

This shipment represents the initial component of Tata's strategy to strengthen healthcare in his ancestral country. Included in the shipment was an ambulance, donated by Stewart's Ambulance Service of Meredith, NH. The ambulance will be used as a mobile medical clinic in Cameroon. The medical focus of the equipment shipped was on pediatrics, natal and infectious diseases such as malaria and HIV. The medical equipment sent to the Acha-Tugi Hospital included endoscopes, a C-arm x-ray, patient monitors, operating room table, oxygen tent for infants, incubators, defibrillators, microscopes and lab equipment, exam table, colonoscopes, and a dental suite. The hospital

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AMRF Helps Tanzanian Hospital

Tanzania, an African country of thirty-seven million people, is one of the poorest countries in the world depending on subsistence farming for its economy. Coffee, sisal, tea, cotton, cashew nuts, cloves, fruits and vegetables are among the major crops grown. Most people are living on \$1.50 per day or less.

In October 2006, AMRF shipped a 40-foot container of

medical equipment and supplies to the Mwananchi Hospital in Mwanza, a city of almost three million persons. The city is located on the shores of Lake Victoria, which is shared with the African countries of Kenya and Uganda. This thirty-bed hospital is the largest private hospital in the region and charges

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Assisting our less fortunate neighbors by donating medical equipment and supplies to hospitals and clinics in developing nations.

Tanzanian Hospital *Continued from page 1*

patients based on their economic capability; charging little or nothing to the poor and modest fees to the more economically able. The government hospitals in the region are overwhelmed by the patient load that is placed on them.

The Mwananchi Hospital, which is headed by Dr. Invocavit Mushi, will help to provide healthcare to a needy population that is impacted by malaria, enteric fever, tuberculosis and HIV/AIDS. Lina Invocavit, the daughter of Dr. Invocavit, is a minister in Columbus, OH and helped coordinate the needs of the hospital and the shipment dispatched by AMRF. Lina participated in the container loading and facilitated some last minute modifications of the loads' contents to further strengthen the strategic value of the donated equipment.



Lina Invocavit, daughter of the administrator of the Mwananchi Hospital in Mwanza, Tanzania looks over medical equipment at the AMRF warehouse.



Lina and AMRF Vice President, Victor Solo readying the container for shipment.

Equipment included in the shipment were ultrasounds, surgical tables, an autoclave, patient monitors, a mammography unit, a dialysis machine, endoscopes, a gastrointestinal probe kit, a dental suite including dental x-ray and dental cameras, a coagulation analyzer, a colonoscope, a C-arm x-ray, a blood gas analyzer, an anesthesia system and twenty mechanical beds. As the equipment was being loaded in the container Lina stated "This equipment will help improve the lives of the so many people in Tanzania. If not for AMRF this equipment would be unattainable."

AMRF

The American Medical Resources Foundation donates used, but totally functional medical equipment to hospitals serving the needy worldwide. AMRF also develops and provides training programs for medical equipment repair technicians and hospital managers responsible for the maintenance, repair, and calibration of medical equipment.

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AMRF Advises Clinton Foundation on Ethiopia

In May 2006, AMRF was asked by the Clinton Foundation to advise them on medical equipment status and needs for the Ethiopian healthcare system in order to mount a major campaign against HIV/AIDS.

AMRF has had in-depth experience in Ethiopia over the past ten years; donating equipment to several hospitals and clinics and providing training for medical equipment technicians on medical equipment maintenance, repair and management. One of the primary objectives of the AMRF training program was to help restore to service a large inventory of equipment which was not functioning, thereby significantly impairing the healthcare system.

In July 2006, AMRF President, Tom Magliocchetti and Vice President, Victor Solo visited the hospitals, clinics and health posts in Ethiopia and assessed the equipment status and needs of these facilities during a two-week period. The findings, conclusions and recommendations of their assessments were as follows:

1) Medical equipment operational effectiveness in surveyed Ethiopian Government hospitals and health clinics is currently at critically low levels, approximately 40% operational effectiveness level. Furthermore, operational effectiveness rates have significantly declined when compared to the findings of a similar survey that was conducted in Ethiopia by the AMRF in calendar year 2000 for the Orbis International Foundation.

2) Current medical equipment operational effectiveness issues have resulted in a loss of essential medical and surgical services in multiple government hospitals and clinics.

3) The root cause of declining medical equipment operational effectiveness levels in Ethiopian government hospitals is due to the lack of available qualified biomedical equipment technicians, the lack of essential training programs for biomedical

equipment technicians and medical equipment end-users, the lack of basic spare replacement part acquisition systems and the lack of functional and comprehensive medical equipment maintenance management and oversight programs.

4) Medical equipment operational effectiveness issues can negatively impact ongoing Clinton Foundation, HIV/AIDS healthcare improvement initiatives. Recommendations by AMRF, to respond to the identified critical issues with medical equipment operational effectiveness in Ethiopian government healthcare institutions are based on, A) implementing a medical equipment service recovery acquisition plan to restore essential medical and surgical services in identified hospitals and clinics as soon as possible, B) the recruitment of additional biomedical equipment technicians at basic skill levels within government hospitals, and C) the development of comprehensive medical equipment management and oversight programs, that includes a newly created spare and replacement parts acquisition and logistics system.

5) All recommendations are based on building in-country Clinical Engineering and Medical Equipment Support Capacity to transition to a significantly greater emphasis on proactive, preventive versus corrective medical equipment maintenance capabilities and the creation of an effective and sustainable medical equipment management and oversight program.

6) AMRF has identified projected timetables for implementing recommendations in phases and the related estimated cost impacts.

7) AMRF has identified specific ways in which it can provide support to implement the identified recommendation.

AMRF will be cooperating with the Clinton Foundation, moving forward, to implement the recommendations of the report.

Equipment to Cameroon *Continued from page 1*

provides medical assistance for the Metta region of Cameroon, which is adjacent to the national border with Nigeria. Life expectancy in that region is approximately fifty-one years. The people served live in tribal villages and are mainly subsistence

farmers. Unemployment exceeds fifty percent and the average man in the region earns about \$40 per year. HIV/AIDS, malaria and tuberculosis engender major public health mortalities. A bright light in the region is the primary school system that the population envisions as their booster from the poverty of subsistence farming.

Tata emphasizes that education and prevention will be the center for creating a sustainable basic medical care system for the Metta Region of Cameroon. He also would like to help improve care at

health posts in villages so that if there is a medical emergency the patient does not have to travel for several hours on bad roads reaching the nearest hospital. Tata is hopeful that within five years progress will be measurable. He stated "... if this works, we can use the system not only for one tribe, but for others around Africa. And perhaps we can use this as a model for helping other Third World Countries."

For more information on Tata's Acha-Tugi project and his books visit www.whitson.us and www.tkedi.com.



The ambulance being sent to Cameroon has been specially lettered in memory of Tata's mother.

AMRF Monetary Donors

July 31, 2006 – December 31, 2006

AMRF is deeply grateful to the following list of contributors who have graciously provided the financial resources, which allowed AMRF to implement programs for improving medical care for the less fortunate of the globe. Many Thanks.

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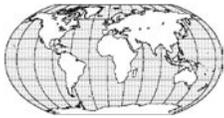
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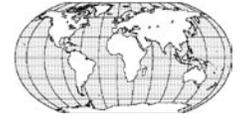
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During 2006 (to November 30)



Recipient of Containers of Equipment (quantity & length)	
Banda Aceh, Indonesia	1- 40 ft
Antonio Lenin Fonseca Hospital, Nicaragua	1- 40ft
Bissau Clinic, Guinea-Bissau, West Africa	1- 40ft
Bissau Clinic, Guinea-Bissau, West Africa	1- 20ft
KPC Medical College and Hospital, Kolkata, India	2 - 40 ft
Angkor Hospital for Children, Cambodia	1-40 ft
Acha-Tugi Health Care System, Cameroon	1-40 ft
Mwananchi Hospital, Tanzania	1-40 ft

Approved and in Process

Abdirahman Medical Center, Somaliland	1-40 ft
KPC Medical College and Hospital, Kolkata, India	4-40 ft

Training Programs

Central American Center of Training and Maintenance,
San Salvador, El Salvador (in development stage)

Medical Equipment Consultancy

National Survey of Medical Facilities of Ethiopia

Thanks from Angkor Hospital for Children In Cambodia

Dear Victor [AMRF VP for Operations]:

Thank you very much for the donations. I would like to acknowledge that we have received the container of donations, much of which is already being put to use. Your kind donations are very important to our children at Angkor Hospital.

Did you know . . . ?

- Angkor Hospital sees an average of 250 patients a day
- Since 1999, over 384,000 children have been treated at AHC
- 85% of the 13 million people live in rural areas and 50% of these are children
- Nearly 50% of all Cambodian children are malnourished
- One in seven will die before their 5th birthday due to preventable causes
- The average per capita income is \$300 per year

Again, on behalf of Angkor Hospital for Children, I would like to thank you for your strong support and generosity. With



AMRF donated equipment being received at Angkor Childrens Hospital

your kind donation, you are helping us help our patients. Your support will enable us to continue in our goal of providing better health care for children of Cambodia.

Yours truly,
Nheak Sam N Reach SEY
Logistics Manager

YOU Can Take the Lead in Sponsoring International Goodwill

Over the years, AMRF has shipped worldwide donated medical equipment and supplies to hundreds of hospitals and clinics serving the poor in less developed countries; thereby, improving the availability and quality of health care and saving lives in many parts of the world.

AMRF has had numerous sponsors and cooperators who have helped to support these medical equipment shipments. These sponsors have been Lions clubs, Rotary clubs, Kiwanis clubs, charitable foundations based

in America and foreign countries, churches and church groups, hospitals, cultural associations and clubs and professional associations.

If you are a member of a group or organization that would like to sponsor a shipment, please contact AMRF by phone, email or fax using the information on the front of this newsletter. Our staff will be pleased to assist you and guide you through any questions or issues you may have.

PLEASE DONATE TO AMRF

**I would like to discuss a
Planned Giving
Program.**

Please contact me at:

Tel. _____

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As a person who desires to relieve suffering and assist hospitals and clinics serving the poor in developing nations, please enroll me as a contributor to the *American Medical Resources Foundation*. Enclosed is my contribution of:

\$5,000 () \$2,500 () \$1,000 () \$500 ()

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Please do not send cash

Can You Help Us With Equipment or Supplies From Your Hospital or Company?

Donations of used, functioning or repairable medical equipment or supplies are urgently needed for shipment to hospitals and clinics serving the poor in developing countries around the world.

We will arrange pickup and/or shipping from anywhere in the U.S.

Equipment donations from for-profit organizations are exempt from Federal Income Tax. Donors should check with their tax advisors to

establish the value of the charitable deduction.

We are in need of any equipment and supplies used in patient care.

All the equipment is checked and repaired as needed in our own facility before being donated to hospitals overseas.

All donations will be greatly appreciated by the recipient.

Please call 508.580.3301 or fax 508.580.3306 with a list of equipment to donate. Or you may contact us by e-mail: amrf@amrf.com

AMRF

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