The President... carrying out the mandate of PMA

The President’s work is never done; his days seem endless. Just to lend credence to that adage, let us take a glimpse as to how our President, Dr. Irineo C. Bernardo III, honors his commitment to the mandate of his office.

Last 22 June 2016, Dr. Bernardo ably represented the PMA at the Fiesta Pavilion of the Manila Hotel as the Professional Regulation Commission recognized the Association as Accredited Professional Organization. At the same gathering, he was witness to the awarding of colleague, past PMA President, Dr. Santiago del Rosario, as Outstanding Professional of the Year. Again, our congratulations!

This was followed by a most important event on 24 June, as the PMA officially became an active partner in the Declaration of Commitment to the health and safety of the healthcare worker. This was part of the proceedings of the Hospital Occupational Health and Safety Congress, where Dr. Bernardo fittingly stood as Guest of Honor. This transpired at the Crimson Hotel, Alabang, and sponsored by the Section of Occupational and Environmental Medicine, Department of Family Medicine of the University of Perpetual Help-Dr. Jose G. Tamayo Medical Center. The Occupational Safety and Health Center was likewise a lead stakeholder in the assembly, along with significant contributions of the DOH, DOLE, and PCOM.

27 June was another red-letter for the President as he delivered a talk highlighting the role of PMA, for the PRC - “How the medical profession can be valued in the international market global value change”. This served as an appropriate backdrop for the Continuing Professional Development workshop of the PRC, where he participated.

As further testament to the strong cooperative relationship of the PMA with the PRC, Dr. Bernardo had his oath-taking as member of the PRC CPD Council last 7 July.

Another oath-taking was held on 8 August, this time as member of the Hospital Accreditation Commission, a position imbued not just with authority, but with much responsibility.

August continued to be a rather busy month for our chief executive as he was part of activities with national government import and nation-building: the Social Development Initiatives Summit, under the Office of the President, held at SMX Convention Center, Davao City; and the Round Table Consultations on five priority areas, under the Office of the Vice President, 17 August and 25 August respectively.

The PMA President engages with other notable agencies, both from within and externally. He was visible in the accreditation meeting with the Philippine Health Insurance Corporation (PhilHealth), held last 14 September; and actively joined the Consultative Meeting of Health Advocates on Sugary food/drink Tax under the auspices of PCP.

11 October saw Dr. Bernardo speak on the Mutual Recognition Agreement at the UP Law Center, Diliman, which formed part of the discussion on ASEAN economic integration. A conference on the Solidarity of Asia had a similar theme. This was held the following day, 12 October, and was hosted by Vice President Leni Robredo.

Another landmark event that required the presence of Dr. Bernardo was the World Medical Association General Assembly held at the Grand Hyatt Taipei, Taiwan, where he served as the official delegate of PMA, last 19-22 October. Not to be missed moreover was the National Zika Summit, 28 October, at the Conrad Hotel Manila, where he delivered his piece as panelist.

Many pundits say that the Presidency is a thankless job. But yes, somebody has to do it. And that currently falls on the lap of Dr. JCB3, as he is known to many. Obviously, the list of activities we mentioned is far from exhaustive. Conspicuously missing are the usual duties and obligations and protocol such as inductions, meetings and customary ceremonials, which happen, by the way, on an almost weekly basis. The calendar is really tight and full, and we are thankful that Dr. Bernardo continues to have the energy, the drive, the mindfulness, and the bravado, to meet the challenges head on, indeed worthy of such an imposing position.

...
ICB3MD is 94th PMA President

Irineo C. Bernardo III, M.D., a graduate of the University of Santo Tomas, is known to his friends as “icb3” or “Bernie”, was inducted last May 21, 2016 as the 94th President of the Philippine Medical Association during the closing ceremonies of the 109th PMA Annual National Convention held at the Waterfront Hotel in Cebu City. He succeeded Dr. Maria Minerva P. Calimag who served the PMA for two consecutive years as president. Dr. Kenneth G. Ronquillo, the Director of the Health Human Resource Development Bureau (HHRDB) of the Department of Health, administered the oath of office of Dr. Bernardo.

In his inaugural speech, Dr. Bernardo recounted the time when he was sworn into the medical profession in 1974 in “the very same place where he now took his oath of office as president of the PMA” which is in Cebu City. He also recounted his humble beginnings as a member of the Cebu Medical Society and a municipal health officer in the town of Talisay which is now a City in the province of Cebu during the middle part of the seventies.

Dr. Bernardo once served as the medical director of Tanay Community Hospital from 1976 up to the time when he reached the age of retirement in 2013. He is known to some of his peers as a “multi-faceted man for his involvement in the various sectors of the healthcare industry namely: as Executive officer of the Philippine Hospital Association (PHIA) 1994 to 2000; 2004-2007; Corporate Secretary of the Private Hospital Association of the Philippines Inc. (PHAPI) 2011-2013; Chairman of the Health Care Industry Training Council Inc. (HCITC), an organization commissioned by TESDA to develop and review the training regulations of the technical skills in the health sector (2010-2016); and in recent years, as a national officer of the Philippine Medical Association (PMA) (2004-2005), (2007-2012) where he rose from the ranks as Secretary General for one of the longest periods of time; then later on as Vice-president (2012-2014). His stint as a member of the Accreditation and Peer Review Committees of Philhealth for eleven (11) years, may also be regarded as one of the longest by any sectoral representative in the Philippine Health Insurance Corporation.

During the PMA-UNILAB Leadership Conference held on June 17-18, 2016 at the Seda Hotel in Iloilo City, Dr. Bernardo laid down the ten point agenda of his administration, which according to him is consistent with the eight organizational objectives of the Philippine Medical Association, as follows:

1. Re-engineering or redesigning the PMA as an organization to make it more responsive to the changing needs of the members by decentralizing or devolving some of its powers to the local component societies;

2. Amending the by-laws to make it responsive to present and future situations;

3. Enhancing collaborative efforts with the government in the pursuit of National Health Objectives;

continued on page 3...
4. Assuring the general membership that we will be cautious in the management of our funds by applying the principles of transparency and accountability;

5. Continuing Professional Development for members that is parallel or aligned to global integration;

6. Enhance participation in environmental and climate change advocacies;

7. Strengthen the non-discriminatory principle that every physician regardless of his field of interest and specialization has his or her place in the practice of medicine.

8. Commitment to constant dialogue with allied health professionals and allied institutional health providers;

9. Increase its strength in constructive but cautious engagement with the regulatory bodies of government and the legislature;

10. Raising public awareness on the role of physicians as leaders and as vanguards of peoples health and well being.

Dr. Bernardo is married to Mrs. Milagros Correa-Bernardo RMT, SFO. The couple is blessed with five (5) children: Maria Aurora C. Bernardo, MBA, a professor at the Catholic University of New Zealand; Atty. Maria Theresa Bernardo-dela Vega, LLB who is married to Atty. Jerome dela Vega, both of whom are in the United States; Iraida Belinda Bernardo, AVP China Trust married to Philip P. Recto; Engineer Irineo Francisco C. Bernardo IV, married to Charmaine Alcantara-

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**IMPORTANT DATES TO REMEMBER**

**MARCH 12, 2017, SUNDAY**
PMA National Election

**MAY 16-19, 2017**
110th PMA Annual Convention and Scientific Meetings

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*Lead from the back — and let others believe they are in front.*

— Nelson Mandela
Editor’s Column
Christine S. Tinio, M.D.

We have been hearing requests for more information about the full scope of PMA activities and the exact actions it undertakes to advance medical education, enable professional development and support sound health policies.

With Dr. Bernardo at the helm, PMA remains committed to becoming more effective, relevant and member-focused. PMA wants to do more to ensure that medical education activities meet the society’s health needs, help practising physicians enhance their competence and give every member physician the feeling that he truly belongs to the largest and oldest medical organization in the country. Continued and sustained efforts to promote and enhance unity among its members bring together the country’s medical disciplines under one umbrella. PMA frequently collaborates with other professional health organizations and government agencies to give the physician workforce a strong voice most especially in the health policy development.

The year 2016 is marked by a series of economic, social and political changes. Despite these, PMA leaders continue to find ways to fulfill its mandates to protect the members as well as the discipline and competency each represents.

Outcome-based education has recently become a hot topic. It represents a paradigm shift (change) on how education, learning, competency and assessment are implemented in many different professional domains. In here, students/learners transform into their life roles both in their work and personal lives. The medical profession itself has become used to so many changes brought about by the burgeoning cost of medical technology and efforts to coax health systems performance towards greater efficiency to make best use of limited healthcare resources. The members look to the day when our leaders rise to those challenges, and infuse dedication into their work at PMA. The members should not just watch on the sidelines and let the leaders do their thing. The members can at least commit to take part in a continuous process of pro-active engagement. It’s best that we revisit PMA’s mission statement, so we may be able to confront present day issues with a renewed sense of vigor and urgency. PMA leaders for their part must see to it that members do not only remain in the fold of the PMA but also be directly involved and seriously engaged in its activities.

Of course, we recognize the importance of having The Physician come out regularly and on time to raise awareness and learn members’ perspectives on PMA initiatives.

The Editorial Board is doing its best to improve on the content of every issue. It plans to infuse more informative items that shall help fulfill its strategic vision of keeping every member informed. But you dear readers have to do your share. Keep sending in your contributions to your newsletter.

The Physician editorial board wishes you, your families and patients a great Christmas and happy 2017.

Leadership
IS LIFTING
A PERSON’S VISION TO
HIGH SIGHTS, THE RAISING
OF A PERSON’S PERFORMANCE
TO A HIGHER STANDARD,
THE BUILDING OF A
PERSONALITY BEYOND
ITS NORMAL LIMITATIONS.

purehappylife.com
I have spent the 1st three months of my term attending Induction Ceremonies alone as Inducting Officer and Guest Speaker or together with the PMA National officers and PMA Governors. I have immersed myself in Regional Assembly Meetings, Board Meetings, committee meetings and other organizational planning activities. I thank the various component societies who have graciously hosted us. It was a rare privilege to experience the hospitality of the component medical societies that I have visited. Many thanks to them for the warm accommodation, and the various gifts and memorabilia handed to me. Below is a summary of my accomplishments for the 1st quarter of the year.

Inductions attended as Guest of Honor and Inducting Officer

- June 10, 2016 - Cebu Medical Society
- June 15, 2016 - San Juan Medical Society
- June 16, 2016 - Palawan Medical Society
- June 23, 2016 - Iloilo Medical Society
- June 24, 2016 - Pasig City Medical Society

On June 26, 2016, my travel was a very challenging one because I took an early morning flight to Butuan City, travelled by land to Gingoog Medina for the morning Induction, then proceeded to Cagayan de Oro by land for the evening Induction.

- June 26, 2016 - Gingoog Medina Medical Society
- June 26, 2016 - Misamis Oriental Medical Society
- June 29, 2016 - Las Pinas Medical Society
- July 1, 2016 - Antique Medical Society
- July 2, 2016 - Makati Medical Society

After the Induction of Pampanga Medical Society, on the evening of July 7, 2016, a van, courtesy of Dr. Mildred Mariano, PMA Governor of Central Luzon, took Dr. Atienza and myself on a 6 hour road trip to Bangued, Abra where we arrived early morning of July 8, 2016 in time for the Induction of Abra Medical Society.

- July 8, 2016 - Abra Medical Society
- July 21, 2016 - Buan Medical Society
- July 23, 2016 - Calamba Medical Society (a Chapter of Laguna Medical Society)
- August 8, 2016 - Cabuyao Medical Society (a Chapter of Laguna Medical Society)
- August 9, 2016 - Western Batangas Medical Society
- August 17, 2016 - Quezon Medical Society

Other Inductions attended:

- May 31, 2016 - San Pablo City Medical Society
- June 2, 2016 - Southern Tagalog Governor’s Night
- June 3, 2016 - Batangas City Medical Society
- July 3, 2016 - Laguna Medical Society
- July 7, 2016 - Pampanga Medical Society
- July 9, 2016 - Taal-Lemery Medical Society
- July 15, 2016 - Sta. Cruz Medical Society (a Chapter of Laguna Medical Society) Delivered an Inspirational Message
- August 11, 2016 - Lipa City Medical Society
- August 13, 2016 - Ilocos Sur Medical Society

I participated in and attended the following coordination meetings:

- May 10, 2016 - Professional Regulatory Board of Medicine Dialogue with Incoming Officers of Accredited Professional Organization
- May 11, 2016 - 70th APMA Annual Convention
- June 2, 2016 - “Borderless Brotherhood in Responsible Healthcare,”
- June 2, 2016 - Meeting with PHA President Jesus M. Jardin to discuss the National Health Plan
- June 18, 2016 - 1st PMA Board Meeting, Hotel Rio, Iloilo
- June 18-19, 2016 - PMA Leadership Conference at Seda Hotel, Iloilo
- June 22, 2016 - 2016 Awards Night for Outstanding Professional Organizations and Nubla Excellence Awardees at the Fiesta Pavilion of the Manila Hotel, where PMA Past President Dr. Santiago del Rosario was awarded.
- June 27, 2016 - “Multidisciplinary CPD
- June 29, 2016 - Workshop/Seminar IV on: “Certification, Monitoring and Credit Transfer”
- July 6, 2016 - 1st Ad Hoc Committee Meeting
- July 9, 2016 - 2nd PMA Board Meeting at the PMA Auditorium
- July 20, 2016 - 2nd Ad Hoc Committee Meeting
- August 13, 2016 - 3rd PMA Board Meeting
- August 14, 2016 - Regional Assembly Meeting of Northwestern Luzon
- August 22, 2016 - 3rd Ad Hoc Committee Meeting
- August 29, 2016 - PMA Annual Convention Meeting

Let me share two of my favorite quotes:

“I can do things, you cannot, You can do things I cannot, But together, we can do great things”

Mother Theresa

“Many great things depend, don’t forget it, whether you and I live our lives as God wants us.”

755 The Way, St. Josemaria Escriva

Let us live with love for God and for one another.
With unity at PMA, we can do great things.
## Money Matters: The National Treasurer’s Report

Oscar T. Cabahug, M.D.

### COMPARATIVE FINANCIAL HIGHLIGHTS

<table>
<thead>
<tr>
<th>Fund</th>
<th>AS OF NOV. 30,2015</th>
<th>AS OF NOV. 30,2016</th>
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<tr>
<td>General Fund</td>
<td>16,784,965.36</td>
<td>32,402,796.00</td>
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<tr>
<td>Physicians’ Mutual Aid Fund</td>
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<td>Physicians’ Trust Fund</td>
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<td>Doctors’ Inn</td>
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<td>Medical Indigency Center</td>
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<td>Anti Cancer</td>
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<td>Legislative Fund</td>
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<tr>
<td>CME Fund</td>
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<td>3,800,747.21</td>
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<td>Annual Convention Fund</td>
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<td></td>
</tr>
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<td><strong>TOTAL CASH AND CASH EQUIVALENTS</strong></td>
<td><strong>130,187,967.97</strong></td>
<td><strong>152,622,736.36</strong></td>
</tr>
</tbody>
</table>

As of November 30, 2016, the total cash and cash equivalents of the Philippine Medical Association amounted to ₱152,622,736 which is ₱22.4 million higher than that of November 30, 2015. The largest portion of the total cash and cash equivalent of the association belong to the Physician’s Mutual Aid Fund and Physician’s Trust Fund, both of which are funds for Death, Disability, and Legal Assistance.
COMPARATIVE FINANCIAL PERFORMANCE

As shown in the graphs, the financial performance of the association has improved as compared to the previous year.

For the Main Activity, the Net Income for the period June to November 2016 was P 940 Thousand higher compared to the same period the previous year. The increase was accounted mainly by an increase in membership dues collected.

With regard to the Doctors’ Inn activity, the net income for the period June to November 2016 decreased as compared to the same months last year. The decrease is attributable to lower room occupancy revenue and a significant increase in expense.

For the Indigency Clinic activity, the net income increased for the period June to November 2016 as compared to the same months of last year. As shown in the graph although the gross revenue of the clinic increased by more than P303,000 as compared to last year, the expenses also increased, resulting to a net income of only about P20,000.

For the months from June to November 2016, the total amount released for Death, Disability, and Legal Benefits was P 5,332,400 of which P 3,599,900, P 1,662,500 and P 70,000 was released for Death, Disability and Legal, respectively.
Foremost, I would like to thank the PMA President, Dr. Irineo Bernardo III and the other National Officers and the Board of Governors for believing in me and for giving me this opportunity to be a part of the editorial board of the PMA Committee on Publication this fiscal year.

As the Contributing Editor of the Committee on Publication for Luzon Region, I am tasked to gather significant events or news from the Northeastern, Northwestern and Central Luzon Regions.

In this 1st issue of the PMA Newsletter, allow me to give you a glimpse of the Governors representing the North and Central Luzon who will be serving the association for this administrative year.

The Northeastern Luzon (NEL) Region is represented by Dr. Melchor C. Dela Cruz, Jr. Dr. Bong as he is fondly called is the compassionate and caring ‘big brother’ to all doctors in their region. He is a graduate of the UST Faculty of Medicine and Surgery and is a practicing OB-Gynecologist. He belongs to the Santiago City Medical Society. As of this writing, most of the governors for NEL Region, he will be representing and serving the following ten component societies headed by their respective presidents:

1. Cagayan Medical Society – Zenaida Tolentino, M.D.
2. Ilocos Norte Medical Society – Ederlina Callangan, M.D.
3. Ilocos Sur Medical Society – Maria Alejandria R’lyn Narcelles, M.D.
4. La Union Medical Society – Arleen Galvan, M.D.
5. Pangasinan Medical Society – Hilarion Maramba, M.D.
6. Bagiuo-Benguet Medical Society – Danilo Flores, M.D.
7. Mountain Province Medical Society – Nenita Lizardo, M.D.
8. Kalinga Medical Society – Bernard Wandaga, M.D.
9. Apayao Medical Society – Jeraldy Garcia, M.D.
10. Batanes Medical Society – Jeffry Anthony Canceran, M.D.

Dr. Esperanza R. Lahoz is our very own energetic, indefatigable and decisive Governor for Northwestern Luzon (NWL) Region. Dr. Panching as she is commonly called is one of the very few female Surgeons in the region. She is a graduate of the UP College of Medicine. She belongs to the Ilocos Sur Medical Society which recently successfully hosted the very 1st PMA-Unilab Regional Assembly for this year last August 13, 2016. She will be serving and representing the following component societies led by their respective presidents:

1. Ilocos Norte Medical Society – Ederlina Callangan, M.D.
2. Ilocos Sur Medical Society – Maria Alejandria R’lyn Narcelles, M.D.
3. Southern Ilocos Sur Medical Society – Haynedina Pascua, M.D.
4. La Union Medical Society – Arleen Galvan, M.D.
5. Pangasinan Medical Society – Hilarion Maramba, M.D.
6. Bagiuo-Benguet Medical Society – Danilo Flores, M.D.
7. Mountain Province Medical Society – Nenita Lizardo, M.D.
8. Bukidnon Medical Society – Joel Bellenko, M.D.
9. Camiguin Medical Society – Jose Antonio Masong, M.D.
10. Lanao del Norte Medical Society – Arriana Avelino, M.D.

Dr. Mildred Mañalac is our very own energetic, indefatigable and decisive Governor for Central Luzon Region. She is a fellow Thomasian and an OB-Gynecologist like Dr. Bong. Her component society is the Pampanga Medical Society. Dr. Mildred will be representing and serving the following component societies headed by their respective presidents:

1. Angeles City Medical Society – Nines Bautista, M.D.
2. Bataan Medical Society – Eric Santos, M.D.
3. Bulacan Medical Society – Amabel Mendoza, M.D.
4. Nueva Ecija Medical Society – Irmina Concepcion Beltran, M.D.
5. Olongapo City Medical Society – Ruth Marie Roldan, M.D.
6. Pampanga Medical Society – Jocelyn Fernando, M.D.
7. Tarlac Medical Society – Wilfredo Jesus Calma, M.D.

These are your governors for the North and Central Luzon Regions mandated to serve the members of our association. Let us thank them for accepting the challenge to represent us, to fight for us and to serve us. Let us support them in every way.

As of this writing, most of the component societies comprising each region have already conducted their own induction and turnover ceremonies and have carried out various social and community projects such as health education and awareness campaigns, health teachings thru radio and television programs, medical missions, visits to the underprivileged and less fortunate, bloodletting activities, and involvement in numerous advocacy programs.

They have also conducted their own general membership and board meetings, CME activities, like RTD’s and post graduate courses to improve and enhance the quality of their membership.

continued on page 9...
Melchor C. Dela Cruz Jr., M.D.
Governor, Northeastern Luzon Region

Following is the speech of the PMA Northeastern Luzon Governor, Dr. Melchor C. Dela Cruz during the induction and turn over ceremonies of the local component societies in his region. In his speech he gave us an overview of “Who is the medical practitioner today?” and reiterated the nobility and dignity of the medical profession.

“Who is the medical practitioner today?”

Is he the richest member of the society charging exorbitant professional fees? The full time businessman making the medical profession his part time job? Or the doctor turned politician who is now very powerful and in control of his jurisdiction? Whoever he is, the medical doctor has become an important figure in the society. But is he really popular? Whatever it is, circumstances have made him as such.

Generally, medical doctors are financially stable, depending on one’s outlook in life. It is by choice that life is made complicated by circumstances, pressuring doctors to maintain their social status, leading to controversial issues in the practice of the medical profession.

Why are Filipino doctors leaving the country? Why are doctors changing career paths even working in non-medical institutions? Why are legal suits for malpractice and other scandalous acts against doctors on the rise? Why is BIR running after a lot of medical doctors? Why are doctors fighting against each other, even in courts? Analyzing the problem, it seems like the focus of our attention is now towards material things. The medical profession has become an opportunity for some doctors to establish financial stability for personal satisfaction.

Medicine is one of the noble professions and we are few of the very fortunate professionals who have been chosen in this field of practice. The mere fact that we have been given the license and privilege to practice medicine, should be enough reason to be grateful and contented with sense of fulfillment. How fast do we forget the famous line “to serve humanity” when we were interviewed prior to entering medical school, just so we would be accepted? And the oath of Hippocrates we recited when we took our oath as licensed physicians? We might have forgotten the purpose why we were made to become medical doctors. Sometimes we recall the difficulties we experienced during the medical school days, and we make those as an excuse to get back what we have lost, making now our lives more bountiful, sometimes at the expense of our patients. At this point, let us do something to preserve the nobility of the medical profession. Let us unite to work for a common goal, for the good of the community. The Philippine Medical Association is the organization that will bind us all together. Regardless of the nature of practice, whether clinical, administrative, non-medical, regardless of specialty or subspecialty; regardless of age, we all belong to one profession, we are all medical doctors.”

●  ●  ●

Esperanza R. Lahoz, M.D.
Governor, Northwestern Luzon Region

The 1st of the long series of PMA-Unilab Regional Assemblies was held in the Heritage City of Vigan, Ilocos Sur on August 14, 2016 attended by almost 300 delegates from the different local component societies of the NWL Region. A day prior to the assembly, aside from the regular Board of Governors’ Meeting that was held, there was a Regional Council Meeting wherein important matters of national issues and local concerns were discussed and tackled together with the PMA President and other National Officers and the Board of Governors. The fellowship night followed later where all the local component societies gladly participated and were all marvelous in their K-Pop dance presentations aside from the many other revelations that night. The night ended with all the participants in high spirits and feeling relaxed and renewed.

●  ●  ●

Mildred M. Mariano, M.D.
Governor, Central Luzon Region

Dr. Mildred M. Manalac-Mariano like the other PMA Governors has been very busy as a bee attending induction ceremonies, launching various advocacy programs for the underprivileged and conducting medical missions. Likewise, she attended several meetings being the Governor-in-Charge of many PMA Ad Hoc Committees.

●  ●  ●
The different regions jump-started the fiscal year with events that involved not only the doctors who are members but their communities as well. Here is a glimpse of all the hard work each has begun. Because “a leader is one who knows the way, goes the way, and shows the way” (John Maxwell)

Alberto J. de Leon, M.D.
Governor, Manila Region

MMS celebrated its 114th foundation day last July 13, 2016 at the Manila Grand Opera Hotel. In attendance was their past president. Dr. James G. Dy, (Chairman Emeritus of the Board & President, Philippine Chinese Charitable Association, Inc.) inducted Dr. Benigno L. Ong as the new MMS President. Dr. Ireneo C. Bernardo III, PMA President graced the event and inducted the rest of the officers. They held a livelihood program for indigents, chaired by Dr. Cho Chiong Tan on how to make insect repellent & room deodorizer. The MMS also participated in a Medical and Dental Mission together with the Bombo Radyo Philippines at Universidad de Manila last July 10, 2016

Luisito L. Ruiz, M.D.
Governor, Rizal Region

All roads led to Acacia Hotel Alabang as the Las Pinas Medical Society celebrated its 45th Turn-over and Induction Ceremony. Sapphire being the color theme, the LPMS officers were “men in blue” led by their President-elect Dr. Jose Edzel V. Tamayo.

TACMS, President Icasiano V. Gernillo Jr. attended the PMA Regional Orientation and Leadership Seminar last June 18-19, 2016, at Seda Hotel, Iloilo City. They also had their turn-over and induction ceremonies at the Eastwood Richmond Hotel last July 22, 2016. The theme “TACMS - United to Build the Community’s Health” was demonstrated when they held a medical mission on August 16, 2016 at West District Coordinating Center, Cainta Rizal per invitation by UNTV.

Eastern Rizal Medical Society led by president, Dr. Ian N. Francisco, held a Scientific Forum entitled Standardized TB Care - Updates & Guidelines 2016 on July 15, 2016 at The Daily Beans Coffee Lounge and Restaurant in Pililla, Rizal and was coordinated with the Philippine Tuberculosis Society, Department of Health and USAID.

Romeo G. Encanto, M.D.
Governor, Central Tagalog Region

Greetings from the Central Tagalog Regional Council. The Component Medical Regional Council. The Component
Society of Central Tagalog regions namely the San Juan Medical Society, Marikina Valley Medical Society, Caloocan Medical Society, Pasay-Paranaque Medical Society, Valenzuela Medical Society and Makati Medical Society had their inductions in June and July 2016 with either President Dr. Irineo C. Bernardo III or Vice President Dr. Jose P. Santiago as inducting officers of the Society Presidents. The rest of the board was inducted by the governor and new members by the president.

The regional council composed of presidents, secretaries & invited members had two meetings last July 13, 2016 at the Valle Verde Country Club and August 20, 2016 at the PMA CME Center. Issues that were raised included: revisiting the proposed amendments of the PMA By-laws and constitution, date of payment should be real-time; CME units for community activities; ethics committee of component society to function as 1st step in mediation; 15% rebate on membership dues in the component societies; PMA integration and ASEAN integration and PHIC issues.

Benjamin M. Alaban, M.D.
Governor, Southern Tagalog Region

STAMP started their activities as early as May 2016 right after the PMA Annual Convention of in Cebu. Governor Dr. Benjamin M. Alaban met the component society Presidents and the group had time to get to know each other. It was followed by a very productive Leadership Workshop held in Ilo-Ilo last June 18-19, 2016. The event was informative, funfilled and full of energy that you can feel the enthusiasm of the delegates who actively participated in various activities. Induction ceremonies were held in each area including: San Pablo (Dr. Danilo Dumayas) in Casa Palmeras Hotel, San Pablo City last May 31, 2016; Batangas City (Dr. Andrew Gonzales) in Batangas Convention Center last June 3, 2016; Palawan (Dr. Emery Demegillo) Asturias Hotel, Puerto Princesa City last June 16, 2016; Tanauan (Dr. Rodel Mayuga) in NDN Hotel, Tanauan City, Batangas last June 24, 2016; Oriental Mindoro (Dr. Cristina Gonzales) Filipiniana Hotel, Calapan City last July 2, 2016; Laguna (Dr. Kerry Phil Bautista) in Los Banos Laguna last July 3, 2016; Taal Lemery (Dr. Amado Caraos) in Florencel's Restaurant, Cuenca Batangas last July 9, 2016; Bauan (Dr. Merlyn Espino) in Bauan Plaza Hotel last July 21, 2016; Western Batangas (Dr. Nixon Bolintiam) in Villa Ibara, Tagaytay City last August 9, 2016; Cavite (Dr. Rustico Junio) in Crimson Hotel, Alabang last August 6, 2016; Lipa City (Dr. Bella Villena) in Lima Hotel last August 11, 2016 and Quezon (Dr. Edwin Pureza) in Queen Margarete Hotel, Lucena last August 17, 2016. Marinduque, Occidental Mindoro and Romblon have scheduled their inductions. The common activities are medical missions for the underprivileged and round table discussions and postgraduate courses to keep everyone up to date. Some have fund raising projects that are held annually such as fun-runs and block screening. Monthly regional meetings are held by Dr. Alaban to cascade the plans and projects of the PMA National Board so that it can be implemented in the areas. activities;

Rafael L. Jocson, M.D.
Governor, Western Visayas Region

On June 23-24, 2016, the Iloilo Medical Society had their 15th Annual Convention with the theme, “Globally Competent Filipino Physician” at the Sarabia Manor Hotel and Convention Center, Iloilo City. This coincided with their 90th Induction of Officers, with Dr. Jose P. Santiago, PMA Vice President as Inducting Officer and Guest of Honor. Dr. Dennis de Guzman, PMA Assistant Secretary General was also present on this special occasion. It was a well-attended affair by AMS members, Officers, Board of Directors, and previous WVC Governors. The CPD activity was on “Cardiovascular Protection in Type 2 DM and the role of Sulfonyl Urea Therapy with Dr. Dexter Dale Briones, a Cardiologist, as speaker.

On July 1, 2016, the Antique Medical Society had their 59th Installation of Officers with Dr. Jose P. Santiago, Vice President as Inducting Officer and Guest of Honor. On July 21, 2016, The Aklan Medical Society proudly presented its 2nd Post Graduate Course at the Gov. Corazon L. Cabagnot Tourism and Training Center, continued on page 12...
Old Buswang, Kalibo, Aklan. Guest of Honor and Inspirational Speaker on this occasion was WVC Governor, Dr. Rafael L. Jocson. The program was from 8am to 5pm, showcasing speakers from various specialty societies towards the theme of “Advanced Medical Strategies.” This was attended not only by physicians but nurses and allied medical personnel as well. Various pharmaceutical companies also sponsored booths that had therapeutic guidelines, promotional materials and samples of their respective products.

In the evening, the Aklan Medical Society held their formal 59th Installation of Officers and Induction of New Members with PMA President, Dr. Irineo C. Bernardo III as Guest of Honor and Inducting Officer.

On July 31, 2016, I the Canlaon Medical Society’s had their 22nd Induction of Officers at the Sampaguita Hall, Sugarland Hotel, Bacolod City, with Dr. Irineo C. Bernardo III, PMA President as Guest of Honor and Inducting Officer.

On August 5, 2016, the Negros Occidental Medical Society’s had their 88th Installation of Officers and Induction of New Members at the Ricardo Hall, L’Fisher Hotel, Bacolod City, with Dr. Irineo C. Bernardo III, PMA President as Guest of Honor and Inducting Officer.

The Negros Occidental Medical Society and the Canlaon Medical Society have pledged their commitment to hold joint medical missions and joint Physician’s Fellowship Night during the PMA Medicine Week. Both component societies truly believe that cooperation among its members would be the key in delivering the Ten Point Agenda of the PMA.

On August 19, 2016, the Capiz Medical Society had their “Red Carpet” Induction Ceremony with the participation of the Association of Municipal Health Officers of the Philippine (AMHOP)
On August 3, 2016, the Philhealth Officers of Region IX conducted an outreach forum at Chandlers Suites, Pagadian City. Participants include doctors and the Philhealth employees of the different hospitals.

Benecio L. Adona, M.D.
Governor, Northcentral Mindanao Region

The Philippine Medical Association North Central Mindanao Regional Assembly has been very supportive to the mother association, the Philippine Medical Association. North Central Mindanao Assembly comprises: Iligan Medical Society under the leadership of Dr. Mary Jane Concepcion; Lanao del Sur Medical Society with Dr. Mohammad Al-Moqtader Abedin as the current president, Lanao del Norte Medical Society under Dr. Demetrio Opamen as their president; Misamis Occidental (Ozamiz) Medical Society under the leadership of an Orthopedic Surgeon Dr. Elbert Ybanez and Dr. Myrna Tan on her second term as president of Misamis Occidental (Oroquieta) Medical Society.

After the Annual Convention held at Waterfront Hotel in Lahug, Cebu City last May 18-20, 2016 the action continues. Induction and Turn-over ceremonies of new sets of Officers for Administrative Year 2016-2017 were held under my watch except Misamis Occidental (Oroquieta City) Medical Society. Wherein their officers has a 2-year term.

Continuing Medical Education activities such as scientific symposiums and round table discussions were conducted in all component societies from June to August 2016. Executive Officers in the different component societies are always on the go in support to the 10-Point Agenda of our current administration under the stewardship of our beloved current National President, Dr. Irineo Bernardo III.

Civic actions were also conducted such as Feeding Program in support to the Nutrition Month last July. Medical Mission, Free Medical Consultation and series of Lay Fora were also done aside from their component society regular monthly meetings and general assembly meetings.

Dr. Mohammad Al-Moqtader Abedin, the President of Lanao del Sur Medical Society has been appointed as one of the members of Marawi City Local Health Board. After Dr. Abedin has been appointed member of the Local Health Board. A noble project “Clean-Up drive in Marawi City” was initiated with the theme: “Limpiyo a Marawi” (Clean Marawi).

Dr. Abedin initiated also the creation of an organization of Medical Representatives, the purpose of which their safety and security in Marawi City is their main concern. In line with this, a meeting with the pharmaceutical companies was also called and their agenda of which was the creation of the Marawi Pharmaceutical Industries Association with an acronym “MAPIA”.

These are some of the silk-stocking activities under PMA North Central Mindanao Regional Assembly.

Nellie S. Redoble, M.D.
Governor, Southeastern Mindanao Region

Davao Medical Society at the onset of the new fiscal year is bustling with activities. The new set of officers were inducted by Dr. Irineo Bernardo III on June 10, 2016 at the Apo View Hotel. On June 16 to 24, the DMS celebrated the 43rd Anniversary of the Philippine Regulation Commission Week. The Regional DRRM Council XI had its 2nd Quarter Meeting on June 17, 2016 at the Grand Regal Hotel, Lanang, Davao City.

For July 2016 activities, the DMS launched the Disaster Awareness month on July 3, 2016 at the Peoples Park, Davao City. They had Fun Run, free diabetes screening and urinalysis, and zumba dancing. Also on the same day was the AMUMA Medical Mission in which there was free medical checkup, dental and surgical procedures and papsmear. On July 9, 2016, the DMS launched the Adopt A Community Project at Matina Pangi, Purok 8 & 9, in which they had feeding of the children as well as tree planting along the river bank.

On August 6, 2016, the Davao Medical Society celebrated its 77th Foundation day at the Matina Pangi Barangay Hall, Davao City, during which the MOA between the DMS, Barangay Matina and the CENRO was signed. The PHINMAA Community Outreach Medical, Dental and Hemoglobin took place in Barangay Ilang, Davao City on August 12, 2016. This was sponsored by the Galvasteel Corporation. A total of 300 patients for the medical and 150 patients for the dental check ups benefited the said activity.

On August 17, 2016, PMA President Dr. Irineo Bernardo III (who was in Davao City for the Social Development initiatives

continued on page 14...
12th Operation-Bukol and Lay Forum on Pangkaraniwang Sakit sa Mata held at PMA Wilfredo S. Tagle, M.D.
Chairman, Committee on Medical Missions

In celebration of its 59th year of Medicine Week, the Philippine Medical Association (PMA) and its Committee on Medical Missions and Committee on Emergency and Disaster in cooperation with the Philippine College of Surgeons (PCS) – Metro Manila Chapter and the Quezon City Medical Society (QCMS) conducted its 12th Operation Bukol and Lay Forum on, Pangkaraniwang Sakit sa Mata, last Tuesday, September 13, 2016, from 8 o’clock in the morning until 3 o’clock in the afternoon at the PMA Auditorium.

A total of 135 patients registered for Operation Bukol. These patients belong to the different barangays in Quezon City. Of the 135 patients, 87 availed of the free surgical procedures; while 25 patients were referred to institutional hospitals. All patients underwent minor surgical procedures.

Beneficiaries of the concluded Operation Bukol were relieved of their conditions and given free home medications. They are grateful to all the volunteer-surgeons who participated in this activity. Volunteer-surgeons and physicians came from the following hospitals, namely: Capitol Medical Center, Quezon City General Hospital, UST Hospital, De Los Santos Medical Center, Ospital ng Makati, Veterans Memorial Medical Center, AFP Medical Center, The Medical City, East Avenue Medical Center, Philippine General Hospital, MGF Clinic, MCU Hospital, Quirino Memorial Medical Center, Rizal Medical Center, Makati Medical Center, Pasay City General Hospital, Amang Rodriguez Memorial Medical Center and Mary Johnston Hospital.

Moreover, Dr. Benito P. Atienza, PMA Secretary-General was Master of Ceremonies for the lay forum entitled, ‘Pangkaraniwang Sakit sa Mata.’ Dr. Ronald A. Yutangco from UST Hospital and President of PCS Metro Manila Chapter was Resource Person-Speaker who made attendees more aware of common eye diseases, its prevention and corresponding treatment. Dr. Norma M. Torregoza, President of Quezon City Medical Society, accompanied by Dr. Angela V. Cruz, and its members including QCMS-APMA headed by Col. Joel Torregoza, took care of the Secretariat and provided volunteer-doctors with hot meals and refreshments for the duration of the medical mission. Dr. Ferdinand Cercenia, former Governor of Quezon City and past-Chairman of the Medical Mission committee actively headed the screening and evaluation of patients prior to surgical treatment; while Dr. Wilfredo Tagle, Chairman of the Medical Mission Committee, Dr. Federico Malubay, Chairman of Emergency and Disaster Committee and Dr. Hector Santos, Jr., Governor of Quezon City district at the same time Governor-in-charge for the medical mission managed the smooth flow of patients and coordination with all concerned doctors during the medical mission. The respective secretaries of PMA, PCS and QCMS tirelessly manned the registration, queuing of patients, preparations of instruments and giving final instructions to all patients.

It was a long, busy and tiring day for all those who participated but felt blessed and contented because all patients who came were served, treated and sent home with a smile.

Highlights from PMA Regions from page 13...

Summit with the theme: “Malasakit at Pagbabago” held at the SMX Convention Center, Lanang, Davao City, August 17-18, 2016.), the Davao Medical Society and the PMA Board of Governors 2015-2016 had its Fellowship Night at the residence of Past SEM Governor Dr. Maria Lourdes G. Monteverde, who together with her husband, Dr Tomas J. Monteverde III hosted the Kadayawan Festival in their home.

South Cotabato Medical Society participated in the recent PMA-UNILAB Leadership Conference on Direction, Setting and Organizational Development in Seda Hotel on June 18-19, 2016. On June 29, 2016, the SCMS joined the 6th Annual Koronadal Tree Growing Festival. With Dr. Irineo Bernardo III and Dr Nellie S. Redoble as Inducting Officers, the SCMS had their Oath taking ceremonies on August 3, 2016 at the Villa Amor Hotel.

Sultan Kudarat Medical Society had its Oath taking Ceremonies on August 2, 2016 with Dr Irineo Bernardo III and Dr Nellie S. Redoble. On August 20, 2016, they had its 1st quarterly meeting with the SEM Governor.
PHILIPPINE MEDICAL ASSOCIATION CELEBRATES ITS
113th FOUNDATION DAY WITH A CHANGE

Dennis S. De Guzman, M.D.
PMA Assistant Secretary General

The Philippine Medical Association celebrated its 113th Foundation Day on September 15, 2016 with the theme “Sama-Samang Saya Tungo sa Masiglang Kalusugan” held at PMA Auditorium. This was graced by the newly elected President, Dr. Irineo C. Bernardo III, with the PMA National Officers and Board of Governors, Presidents and Officers of Component, Specialty and Affiliate Societies. Dr. Dennis S. de Guzman was the Chair of the celebration with Dr. Jose Rabe as his Co-Chair.

Far from the traditional celebrations, President Bernardo constantly takes on new challenges when most would turn a blind eye. He joins President Rodrigo Duterte’s call for CHANGE. Hence, the attendees were dressed in checkered and changes were made in the program.

A thanksgiving Holy Eucharistic Celebration officiated by Fr. Allen S. de Guzman, O.P. started the event. Dr. Christine S. Tinio delivered a heart-warming invocation. Instead of the traditional wreath laying, fireworks, sponsored by Bulacan Medical Society, depicting the initials of PMA were displayed to show the strength of the Association and commemorate the festive mood of the event.

In lieu of the Waltz Dance by the President, a group dance by the PMA National Officers and Board of Governors was rendered which was later participated by the audience. This scenario made everyone more united and felt the sense of belonging to one organization.

Governor Albert J. de Leon spearheaded the traditional Candle Ceremony with his message addressed in the vernacular. The event was further solemnized by the singing of PMA Hymn accompanied by live violin and piano music as PMA members sang with all their heart.

Governor Romeo G. Encanto headed the Cake Ceremony as the former PMA Presidents joined him. The cake was sponsored by Central Tagalog Region.

Governor Hector M. Santos, Jr. led the wine ceremony. As a sign of camaraderie and success, a toast was initiated by President Irineo Bernardo III to the former PMA Presidents and to everyone. Former PMA President Bu C. Castro responded on behalf of the former PMA Presidents.

Unbelievably generous with their time and talents, special numbers were presented by many Component Societies and PMA members that made the occasion lively and exciting.

This 113th foundation day celebration may be considered as one of the most successful in the history of PMA. The stunning success cannot only be attributed to the STAMP Organizing Committee, headed by Dr. Ricardo A. Batac and Dr. Glicerio Cecilio G. Alincastre, but to all PMA members who attended, participated and contributed in their own way in bringing this event to a success. Governor Benjamin M. Alaban and Dr. Samantha Aranilla Obispo-Mortos as Masters of Ceremonies did a superb job. Kudos to everyone!!!

Overwhelming attendees of more than 300 doctors was indeed a record breaker. It was a humbling experience that most of the doctors stayed even until the wee hours enjoying every part of the program as if the joyful night is endless.

But as every story goes, everything comes to an end. A heartening and encouraging Closing Remarks was delivered by Dr. Oscar T. Cabahug.

The celebration made everyone realize a world of never-ending opportunities for a better CHANGE and to chase dreams one never thought would be possible.

● ● ●
2016 - 2017 PMA Officers and Board of Governors

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Vice President

Oscar T. Cabahug, M.D.  
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Governor, Northcentral Mindanao

Bernardo T. Mora Jr., M.D.  
Governor, Caraga

Christine S. Tinio, M.D.  
Executive Assistant to the President
Amendments to the Revised Guidelines on the CPD Program for all registered and licensed professionals.

This is Section 5 of RA # 8981 known as the PRC Modernization Act of 2000 which mandates that the chairperson of the commission and the commission members shall set and act as a body to exercise the general administrative, executive and policy making functions of the commission after a series of consultations and meeting. It has amended some provisions and guidelines in order to strengthen and enhance the implementation effective August 5, 2016. Every professional Regulatory Board (PRB) shall create a continuing Professional Development Council which is subject to approval by the commission. This shall be known as the CPD Council (CPDC), shall be composed of a Chairperson and two members. The chairperson of the CPDC shall be the chairperson of members of the PRB so chosen by the PRB concerned. The 1st member shall be the President or any representative duly authorized by the Accredited Integrated Professional Organization (AIPO)/Accredited Professional Organization (APO) such as the PMA. In the absence of AIPO/APO the PRB shall submit within 10 working days from notification of such absence, a list of 3 recommendees from the National Professional Organization/s (licensed professionals from Scientific Organizations) The commission shall designate the 1st member within 20 working days from receipt of the list. The second member shall be the President or any representative duly authorized by the organization of Deans (APMC) or department head of Schools, Colleges or Universities offering the course requiring licensure examination. The commission shall designate the second member within twenty (20) working days from receipt of the list of the three recommendees from academia. The CPDC’s shall formulate their own operational protocols through a resolution of the PRB concerned for proper implementation of the CPD program in accordance with their respective Professional Regulatory Laws and their CPD guidelines.

The CPD guidelines include but are not limited to the following:

1. Specific date/s of regular monthly meetings
2. Provide a list of additional requirements for accreditation as CPD provider and CPD program which are necessary for the development of their profession but not stated in the CPD guidelines.
3. Provide guidelines for crediting various types of self directed are for lifelong learning activities.

The qualifications for accreditation of CPD provides are as follows:

A. Local CPD Provider
   1. Individual/Sole Proprietor
   2. Firm/Partnership/Corporation

B. Foreign Entity/Firm/Association

I. The local CPD provider under the individual/sale proprietor are as follows:
   1. A registered and licensed professional of good standing
   2. Non conviction of a crime involving moral turpitude

II. Firm/Partnership/Corporation
   1. A duly registered partnership corporation, institution or organization
   2. The articles of incorporation/partnership includes as one of its purposes the training and development of professionals;
   3. Must be duly registered with BIR and SEC and other pertinent government bodies.

III. Government Institutions and Agencies
   1. Any government institution/agency will mandate as program on CPD for professional
   2. As may be required by the CPD council

The foreign CPD provider can be a Foreign Entity/Firm/Association accredited by the CPD provider of the Country of Origin and duly authenticated by the Philippine Embassy/Consulate/Legation in this Country/State of the applicant and accompanied by an official English Translation as may be required of the CPD council.

CPD CREDIT UNITS

Registered and Licensed professionals shall complete the required units every 3 years or as specified by the PRB. For Medicine the number of CPD units for 3 years is 45 credit units or 15 units/year. Any excess of credit units earned shall not be carried over to the next 3-year period except credit units earned for doctorate and master’s degrees or specialty training which shall only be credited once during the compliance period. Credit units may be earned by professionals who
in programs that emanate from the PRB for the development of the profession.

Maximum creditable units for self directed and/or lifelong learning shall be determined by the council as approved by the Board and through their operational protocol. All CPD providers shall be monitored and performance shall be evaluated periodically during the validity of its accreditation.

Then who are the CPD program monitors?
A. CPDC member
B. Any other member of the PRB
C. Duly designated APO Officers, Board members, pertinent committee chairs and members from local chapters where the APO is not the provider of the program monitored.
D. Member of the academe who is not participant in the CPD program
E. A duly designated professionals among the staff of relevant government or non government organization.

There is a list of requirements for applicant as local CPD provider. There is also prescribed fees for accreditation are as follows:

Local CPD provider - P 5,000.00
Foreign CPD provider - P 8,000.00
CPD Program per offering - P 1,000.00
Self directed and/or life long learning per program - P 500.00

This resolution shall take effect within 15 days from its full and complete publication in the official Gazette or major newspaper of general circulation.

There are two instructional design to fulfill CPD outcomes.
I. Horizontal integrated CPD programs. Programs meant for medical practitioners to acquired additional professional proficiencies outside of their original field of expertise such as CPD conducted by the PRC – CPD council PRBOM thru workshops and seminars.

II. Vertical integrated CPD Program - Designed to develop new and advanced proficiencies (Updates and Innovations) in their field of specialization (CPD’S can be conducted by respective societies thru their CPD program as CPD providers – post graduate courses, conventions and RTD.)
CME Commission, from page 19...

The Physician

The PMA is monitoring without credit units by mean/of the following

A. OWL @ PMA
B. Centralized monitoring with PMA RFID card
C. Integration of RFID of specialty societies to track credit units.

PMA TRACK FOR CREDIT UNITS (CME)

- 1 HOUR lecture/workshop = ICU (RES 2013-774)
- Apply to all CU (CME) of doctors
- 45 CU for 3 years
- 15 units from PMA National Convention
- 30 units from either local component society or specialty society

May I use this opportunity to invite you to the 2017 PMA National Convention at Manila Hotel, the topics that we are preparing are the following:

1. Sleep disorder ......... an emerging epidemic
2. Caffeine ........... A growing problem
3. Drug addiction ...... A chronic multi system disorder
4. Smoking ............ A silent hazard
5. Medical paradox on hypertension, high cholesterol longevity, obese
6. Nutrition problems
   - Pros & cons of different diet food supplements
   - Good nutritional practices
   - Nutrition therapy

We have invited all specialty and affiliate societies to participate in the discussion.

Our Theme is “One Topic, Different Viewpoints Towards One Goal”

Members:
Josefina Dizon, MD
Ma. Janeth B. Serrano, MD
Ernesto Batac, MD, FPCP
Alberto De Leon, MD
Glicerio Cecilio Alincastre, MD, FPCP
Some important considerations of ADMINISTRATIVE ORDER No.2015-0053: Implementing Guidelines on the Promotion and Marketing of Prescription Pharmaceutical Products and Medical Devices

One of the most significant and anticipated policies concerning the health care industry recently came out and indeed caused a lot of buzz among the various players. Popularly referred to as the “Mexico Declaration”, this landmark document embodied in DOH Administrative Order No. 2015-0053, detailed the implementing guidelines on the promotion and marketing of prescription drugs and devices. Because of its implications, a wide variation of opinions and reactions, both positive and negative, were generated in numerous medical circles and fora. This piece will not add further to the arguments presented, as we feel that the discussion has been ample and exhaustive. Instead, we will be printing key excerpts of the paper, for the benefit of our readers, who we trust will receive the merits of the guideline with more understanding.

...These principles are specifically contained in two documents, to which the Philippine government is a signatory, namely: (a) The Kuala Lumpur Principles (KLP) Medical Device Sector Codes of Ethics; and (b) The Mexico City Principles (MCP) for Voluntary Codes of Business Ethics in the Biopharmaceutical Sector...

To provide effective, safe and good quality drugs and medical devices, as well as to protect the people’s rights to health, it is essential to maintain professionalism and high ethical standards in the interactions among the stakeholders in the pharmaceutical industry including manufacturers, distributors, traders, health care professionals, health care related institutions and patients’ organizations.

A. General Objective: To ensure that medical decisions are made in the best interest of the patients, and that these are upheld by all stakeholders with the end goal of improving and promoting the rational use of prescription pharmaceutical products and medical devices, and safeguarding patient rights and welfare.

B. Specific Objectives: To prescribe standards, guidelines, and regulations with respect to information dissemination, advertisements, promotion, sponsorship, and other marketing activities and instruments about prescription pharmaceutical products and medical devices with the end goal of improving and promoting their rational use, and safeguarding patient rights and welfare.

IMPLEMENTATION MECHANISM

A. General Guidelines

1. The Department of Health, through the Office of the Secretary and the FDA shall issue appropriate policies, standards, and guidelines to further implement the provisions of this Order.

2. The Food and Drug Administration shall provide objective and consistent information, training and advice to health care professionals and pharmaceutical and medical device industries on their respective obligations in compliance with this Order as they become necessary.

3. Companies are enjoined to formulate their own Code of Ethics aligned with this Order.

B. Specific Guidelines

1. Interactions with Health Care Professionals (HCP)

a. Industry-HCP relationships shall be based on ethics and transparency to assure independence of HCP’s medical decisions and focus on protecting patients’ welfare.

b. Relationships between Company personnel and health care professionals shall encourage the development of a healthcare professional practice committed to patients’ well-being, and based on truthful, accurate, and updated scientific evidence.

c. Prescription Pharmaceutical Products and Medical Devices (PPPMD) companies have the ethical obligation to ensure that their interactions with HCPs are in accordance with all applicable laws and regulations.

2. Promotional Information and Activities

a. Information provided by (PPPMD) manufacturers and distributors to health professionals regarding their products shall be restricted to evidence-based scientific data.

b. Promotional materials provided by industry to any HCP shall ensure the following: 1. Demonstrate the balance between risks and benefits; 2. Comply with exiting FDA and other pertinent regulations; 3. Substantiate claims with up-to-date scientific evidence.

c. Informational and educational materials, whether written, audio, or visual, dealing with the use of PPPMDs, shall include clear information on all the following points: 1. benefits and risks of the drug or device; 2. pharmacodynamics and pharmacokinetics of the drug; 3. indications and contraindications to use of the drug or device; 4. adverse effects and drug interactions.

d. Promotional or marketing materials of PPPMD companies using citations, quotes or statements lifted from medical literature, lectures, presentations, or similar sources of information shall not be changed, distorted or taken out of context.

continued on page 22...
The following claims and/or comments shall be prohibited:

1. One-sided information and any decisive statement based on inadequate or truncated evidence;

2. Superlatives, exaggerations and lines with hanging comparatives, without supporting data. E.g., “This product is better (e.g. Safety, efficacy, quality, and price) because…”

3. Unsupported comments about competitors and their products;

4. Unspecified, unreferenced claims about side effects, safety and efficacy

5. PPPMD company agents, including Medical Representatives shall not communicate directly to patients or their families in the promotion of their prescription pharmaceutical products

6. All advertising, promotional or other marketing materials, whether written, audio or visual, for products within the scope of this Order, may be subjected to a post-audit by the FDA and if any should be found to violate any FDA provisions, a cease and desist order and/or penalties and/or fines shall be issued by the FDA.

7. No government agency/facility shall be used for the purpose of promoting pharmaceutical or medical device products, nor be used for the display of products not within the scope of this Order or for placards or posters concerning such products except during scientific conventions when their facility is used as its venue.

i. Grants, scholarships, subsidies, support, consulting contracts, educational or practice-related items should not be provided or offered to an HCP in exchange for recommending and prescribing medicines, or otherwise in a manner that would interfere with the ethics and the independence of a health care professional’s respective practices.

Symposia and Congresses

Companies may support party conferences provided: seminars, scientific meetings and meals provided are modest; No entertainment that would incur expenses is provided during the entire duration of the activity; Conference Organizers shall make a written request to the PPPMD Company containing relevant information such as scientific content, attendees, duration and cost; The support provided is consistent with relevant guidelines set by this Order; The venue is appropriate and conducive to the scientific/educational objectives of the event. No extravagant venues are allowed, unless there is no other suitable venue in the locality where the event is to be held; All forms of support and activities are well documented; Attendees to such conference are legitimate or authorized; and Speakers shall disclose any potential or actual conflict of interest prior to topic presentation during the event.

Entertainment and Recreation

a. To ensure appropriate focus on education and informational exchange and to avoid the appearance of impropriety, PPPMD companies shall not provide any form of entertainment that would incur expenses for recreational items, such as tickets to the theatre or sporting events, sporting equipment, or leisure or vacation trips, to any health care professional.

b. Entertainment or recreational benefits shall not be offered, regardless of: 1. the value of the items; 2. whether the Company engages the health care professional as a speaker or consultant, or 3. whether the entertainment or recreation is secondary to an educational purpose.

c. No stand-alone entertainment or other leisure or social activities shall be provided or paid for by companies during scientific meetings.

d. PPPMD Companies are prohibited from paying any travel sponsorship, meals, or other expenses of accompanying guests or family members of HCPs.

Educational items and gifts

a. Any item which does not have any direct patient benefit or is not related to the work of the HCP shall not be permitted.

b. Gifts or personal services and benefits unrelated to the work of the HCP shall not be provided by any PPPMD company representative to a health care professional or members of their families.

c. PPPMD companies may provide promotional aids to HCPs, provided these (a) are of modest value; and (b) are relevant to the practice of the health care professions or education of the patients.

d. PPPMD companies may occasionally provide items of medical utility to HCOs and HCPs such as textbooks, subscriptions to medical journals or anatomical models which benefit patients or serve a genuine educational function for the HCO or HCP. Items of medical utility should be modest.

Support for Continuing Professional Development (CPD)

The purpose of any continuing professional development activity shall be to provide additional and updated information to HCPs that can contribute to the improvement of patient care. PPPMD companies shall develop objective criteria for making CPD grants to ensure that programs funded are bona fide and quality educational programs. The financial support provided shall not be an inducement to prescribe to recommend a particular pharmaceutical product or medical device or any course treatment.

continued on page 23...
a. Industry sponsorship of HCPs to events involving foreign/local travel shall be allowed but subject to the following conditions:

1) The purpose of the event is to provide scientific or educational information;

2) The travel is justified because: (a) the event is held outside of the sponsored HCP’s place/country of practice, and/or it makes greater logistical or security sense to hold the event in another location/country; or (b) the relevant resource or expertise that is the object or subject matter of the event is located outside of the sponsored HCP’s place/country of practice.

3) The venue for such event is appropriate and conducive to the educational or scientific objectives of the conference;

4) The selection of the HCPs should be unrelated to prescribing and sale of the PPPMD company’s products.

b. The sponsoring PPPMD company, through its Medical Director, shall submit through the FDA website, events involving local and foreign travel containing the following information (Annex A): 1. The purpose/objectives of the travel, including the name, organizer, description, location and date of event; The scope and estimated value of sponsorship to the event shouldered by the PPPMD company; If the recipient is employed by the government, the sponsored HCP shall make a post travel report to his respective agency, including appropriate recommendations. Travel of government employees shall be in accordance with pertinent rules and regulations regarding such; and the sponsorship for travel of HCPs attending events as legitimate participants shall only be for Economy class unless otherwise justified by health reasons or special needs of the HCP.

c. PPPMD companies shall act responsibly in terms of numbers of HCPs sponsored for international and/or local events and appropriateness of the cost based on prevailing government regulations for local travel or Daily Subsistence Allowance rate for international travel. A PPPMD company may sponsor a maximum of 20 HCPs to each legitimate overseas scientific educational event. The sponsorship to overseas events must consider equitable distribution of training opportunities to HCPs. Family members or guests of the HCPs are not allowed to be sponsored.

d. HCPS sponsored to overseas and local symposia, conventions or CPD events have the obligation to transfer knowledge in the medical community. An agreement to this effect should be made between the sponsoring PPPMD company and the HCP.

e. A PPPMD company may sponsor an HCP as a mere participant or delegate to a medical congress or convention involving international travel only once (1x) in any calendar year. Excluded from the scope of this provision are speakers, presenters, meeting officers (e.g., chairs, rapporteurs, organizers), clinical investigators, consultants or advisory board members; provided that the travel is justified in accordance with this Order and that there is a service agreement between the HCP and company in the case of contracted speakers, consultants, advisory board members, etc.

Consultant and Speaker Arrangements The engagement of consultant/s in medical conferences or scientific studies may be allowed provided there is a written contract which specifies the nature of services rendered and payment for such:

a. Criteria for consultant selection is based on identified need and expertise;

b. Contracting PPPMD company keeps a record of all transactions;

c. Compensation for said services is reasonable and reflects the fair market value for said services;

d. Disclosure of any potential or actual conflict of interest (Annex B) by the consultant or speaker must be made;

e. Information is to be made public, if and when requested for legitimate purposes

THE FUNCTION OF LEADERSHIP IS TO PRODUCE MORE LEADERS, NOT MORE FOLLOWERS.

~ Ralph Nader ~
purehappylife.com
## PMA Commissions and Committees 2016-2017

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### COMMISSION ON ETHICS
- Santiago A. Del Rosario, MD

### COMMISSION ON CONTINUING MEDICAL ASSOCIATION
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### COMMISSION ON MUTUAL AID
- Teresita R. Sanchez, MD

### COMMISSION ON ELECTIONS
- Emmanuel D. Loyola, MD

### COMMISSION ON PROFESSIONAL SPECIALIZATION
- Rey Melchor F. Santos, MD

### COMMISSION ON AUDIT
- Maria Josefa M. Yanga, MD

### COMMITTEE ON FOOD, DRUG AND COSMETICS
- Sonia E. Bongala, MD

### COMMITTEE ON HOSPITALS AND LABORATORIES
- Rustico A. Jimenez, MD

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### COMMITTEE ON MEDICINE WEEK
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### COMMITTEE ON ANNUAL CONVENTION
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### COMMITTEE ON MEDIA AFFAIRS
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### ADHOC COMMITTEE ON ADVOCACY AND SOCIAL RESPONSIBILITY
- Melchor B. Tuquero, MD

### COMMITTEE ON ENVIRONMENTAL HEALTH AND ECOLOGY
- Joseph M. Carabeo, MD

### COMMITTEE ON MEDICAL MISSIONS
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- Cynthia Cuayo-Juico, MD

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### COMMITTEE ON AUDITORIUM
- Miramar D. Bumanglag, MD

### ADHOC COMMITTEE ON PROXY VOTES
- Benito P. Atienza, MD

### COMMITTEE ON INTERNATIONAL RELATIONS
- Irineo C. Bernardo III, MD

### ADHOC COMMITTEE ON PMA INTEGRATION
- Irineo C. Bernardo III, MD
## PMA 8 SPECIALTY DIVISION
### PRESIDENTS

<table>
<thead>
<tr>
<th>Specialty Society</th>
<th>President</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Philippine Academy of Family Physicians</strong></td>
<td>Eva Irene Yu-Maglonzo, MD</td>
</tr>
<tr>
<td><strong>Philippine College of Physicians</strong></td>
<td>Nenita Avena-Collantes, MD</td>
</tr>
<tr>
<td><strong>Philippine College of Radiology</strong></td>
<td>Johanna Patricia A. Cañal, MD</td>
</tr>
<tr>
<td><strong>Philippine College of Surgeons</strong></td>
<td>Gabriel L. Martinez, MD</td>
</tr>
<tr>
<td><strong>Philippine Obstetrical and Gynecological Society</strong></td>
<td>Blanca C. De Guia-Fuerte, MD</td>
</tr>
<tr>
<td><strong>Philippine Pediatric Society</strong></td>
<td>Alexander O. Tuazon, MD</td>
</tr>
<tr>
<td><strong>Philippine Society of Anesthesiologists</strong></td>
<td>Zenaida M. Mariano, MD</td>
</tr>
<tr>
<td><strong>Philippine Society of Pathologists</strong></td>
<td>Januario Antonio D. Veloso Jr., MD</td>
</tr>
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**By:** ARNEL M. ASINO, MD

## SPECIALTY SOCIETIES

### PHILIPPINE ACADEMY OF FAMILY PHYSICIANS

- **Subspecialty Societies**
  - Philippine Society of Hospice and Palliative Medicine
  - Philippine Society of Primary Care Physicians in Tropical Medicine
  - Philippine College of Geriatric Medicine (Family Medicine Track)

- **Specialty Societies**
  - Philippine College of Occupational Medicine, Inc.
  - Philippine College of Emergency Medicine, Inc.

- **Affiliate Societies**
  - Philippine Society of Clinical and Occupational Toxicology
  - Philippine Academy of Physicians in School Health, Inc.

### PHILIPPINE COLLEGE OF PHYSICIANS

- **Component Societies**
  - Philippine College of Chest Physicians
  - Philippine College of Geriatric Medicine
  - Philippine Heart Association, Inc.
  - Philippine Rheumatology Association
  - Philippine Society of Allergy, Asthma, and Immunology, Inc.

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*continued on page 26...*
Philippine Society for Gynecologic Endoscopy Foundation Inc.
Philippine Society for Cervical Pathology and Coloscopy
Society of Gynecologic Oncology of the Philippines
Philippine Society of Urogynecology and Reconstructive Pelvic Surgery
Philippine Society of Climacteric Medicine
Perinatal Association of the Philippines
Pediatric and Adolescent Gynecology Society of the Philippines
Philippine Infectious Diseases Society for Obstetrics and Gynecology
Asia Oceania Genital Infectious and Neoplasia (Research Organization) - Manila

PHILIPPINE OBSTETRICAL AND GYNECOLOGICAL SOCIETY

Subspecialty Societies
- Philippine Society of Maternal and Fetal Medicine
- Philippine Society of Reproductive Medicine
- Philippine Society for Study of Trophoblastic Disease
- Philippine Society of Ultrasound in Obstetrics and Gynecology

PHILIPPINE COLLEGE OF SURGEONS

Component Surgical Societies
- Philippine Society of General Surgeons
- Philippine Orthopaedic Association
- Philippine Urological Association
- Philippine Society of Endocrinology, Diabetes and Metabolism, Inc.
- Philippine Society of Gastroenterology
- Philippine Society of Hematology and Blood Transfusion, Inc.
- Philippine Society of Medical Oncology
- Philippine Society for Microbiology and Infectious Diseases
- Philippine Society of Nephrology, Inc.
- Child Neurology Society of the Philippines
- Computed Tomography and Magnetic and Magnetic Resonance Imaging
- Philippine Radiation Oncology Society
- Philippine Society for Vascular & Interventional Radiology
- Ultrasound Society of the Philippines

PHILIPPINE PEDIATRIC SOCIETY

Subspecialty Societies
- Child Neurology Society of the Philippines
- Philippine Society of Pediatric Surgeons
- Philippine Nephrology Society of the Philippines
- Pediatric Infectious Diseases Society of the Philippines
- Philippine Society of Pediatric Gastroenterology, Hepatology and Nutrition
- Philippine Society of Pediatric Metabolism and Endocrinology
- Philippine Academy of Pediatric Pulmonologists
- Philippine Society of Pediatric Oncology
- Philippine Pediatric Dental Society, Inc.
- Philippine Society of Pediatric Surgeons
- Philippine Society of Newborn Medicine
- Philippine Society for Developmental and Behavioral Pediatrics
- Philippine Society of Pediatric Hematology
- Philippine Society of Adolescent Medicine Specialists

Sections
- Section of Allergy and Immunology
- Section of Ambulatory Pediatrics
- Section of Genetics
- Section of Community Pediatrics
- Society of Pediatric Critical Care Medicine, Philippines

PHILIPPINE SOCIETY OF ANAESTHESIOLOGISTS

Subspecialty Societies
- Society of Obstetric Anesthesia of the Philippines
- Philippine Society of Cardiothoracic Anesthesiologists, Inc.
- Philippine Society of Pediatric Anesthesia
- Society of Neuroanesthesia of the Philippines, Inc.

Affiliate Society
- Pain Society of the Philippines

PHILIPPINE SOCIETY OF PATHOLOGISTS

AFFILIATE SOCIETIES
- Aerospace Medical Association of the Philippines
- Community Pediatrics Society of the Philippines
- Philippine Society of Anatomists
- Philippine Society for Burn Injuries
- Philippine Society for Cosmetic Surgery
- Department of Education and Culture Physicians Association
- Philippine Academy of Cutaneous Surgery
- Philippine Federation of Private Medical Practitioners
- Philippine Society of Insurance Medicine
- Philippine Leprosy Society
- Maternal and Child Health Association of the Philippines
- Philippine Medical Artists Association
- Molecular Oncology Society of the Philippines
- Philippine College of Pharmaceutical Medicine
- Philippine Association of Medical Writers
- Philippine Lipid and Atherosclerosis Society
- Philippine Association of Military Surgeons, Inc
- Philippine Society of Neurological Surgeons
- Philippine Society of Oncologists
- Philippine Society for the study of the Aging Male Foundation, Inc.
- Sports Medicine Association of the Philippines
- Philippine Society of Venereologists, Inc.
- Philippine Thyroid Association
- Osteoporosis Society of the Philippines
- Pain Society of the Philippines
- Philippine Society of Sleep Medicine
- Philippine Society of Hypertension
- Philippine Academy of Lactation Consultants, Inc.
- Philippine Society of Ultrasound and Clinical Medicine, Inc.
- Philippine College of Addiction Medicine
- Fetus as a Patient Institute of the Philippines
- Philippine Society of Critical Care Medicine
- Philippine Association for the study of Overweight and Obesity
- Philippine Association of Academic Biochemists
- Philippine Society of Experimental and Clinical Pharmacology
- Philippine Academy of Clinical and Cosmetic Dermatology, Inc.
- Philippine Academy of Medical Specialists, Inc.
- Philippine Society of Medical Specialists (In Government Service)
- Philippine Academy of Aesthetic and Age Management Medicine, Inc.
- Philippine Ambulatory Pediatric Association, Inc.
- Philippine Academy of Aesthetic Surgery
- Philippine Academy of Dermatologic Surgery Foundation, Inc.
- Pan Pacific Aesthetic Institute Foundation Inc.
- Philippine Association of Primary Skin Health Physicians Inc.
- Philippine College of Hospital Administrators, Inc.
- Association of Municipal Health Officers of the Philippines
- Philippine Association of Medical Journal Editors, Inc.
A latin phrase, “A fructibus cognosci tur arbor”, means that “The tree is known by its fruit.” At the outset, the PMA President, Dr. Irineo C. Bernardo III set forth a temporally organized docket as to the important matters that need to be attended to. This is simply his way of taking a lead towards a more unified objective in achieving its goal for a better PMA. Specialty divisions are encouraged to work in harmony with the aim of preserving the spirit of “oneness”. It is in fact their greatest challenge to live up to the president’s expectation being the pillars of the organization, i.e. “Audere Est Facere”; in order to promote the welfare of its members in all aspects. As Publius Syrus once said, " Where there is unity, there is the victory!" To usher its members, our dear president focused on and set about a 10-point agenda as follows;

1. Re-engineering or redesigning the PMA as an organization to make it more responsive to the changing needs of the members by decentralizing or devolving some of its powers to the local component societies; 
2. Amending the by-laws to make it responsive to present and future situations; 
3. Enhancing collaborative efforts with the government in the pursuit of National Health Objectives; 
4. Assuring the general membership that we will be cautious in the management of its funds by applying the principles of transparency and accountability; 
5. Continuing Professional Development for members that is parallel or aligned to global integration; 
6. Enhance participation in environmental and climate change advocacies; 
7. Strengthen the non-discriminatory principle that every physician regardless of his field of interest and specialization has his or her place on the practice of medicine; 
8. Commitment to constant dialogue with allied health professionals and allied health providers; 
9. Increase its strength in constructive but cautious engagement with the regulatory bodies of government and the legislature; 
10. Raising public awareness on the role of physicians as leaders and vanguards of peoples health and well being.

“The purpose of life is not to be happy. It is to be useful, to be honorable, to be compassionate, to have it make some difference that you have lived and lived well.” - Ralph Waldo Emerson

Specialty Divisions News and Events – Aligning their thrusts with the President’s 10-Point Agenda

Philipppine College Of Physicians’ 63 Years Of Existence as Physicians Caring For The Philippines
by Nenita Avena-Collantes, MD, MHPE, FPCP, FPSN, FACP
President

Report on the PCP’s 5-year thrust plans showing its alignment with most of the 10-point agenda of PMA. To elaborate:

1. Re-engineering the PMA by decentralizing some of its powers to the local societies. To date, PCP has about 9,000 members. In the last 5 years, it has increased its local chapters to 30 in order to address the needs of its members, particularly on maintaining the members’ good standing status and spearheading the advocacies of PCP. The Committee on Pharmacovigilance is planning on: Advocacy vs. Anti-microbial Resistance and Rational Drug Use.

2. Enhancing collaborative efforts with the government in the pursuit of National Health Objectives. PCP is continuously engaged with DOH, Philhealth and other government agencies in medical matters and has often served as resource organization in medical issues that need expert opinion.

3. Applying transparency and accountability in financial matters. PCP has institutionalized its Committee on Finance composed of finance director (PCP treasurer), finance officer, finance consultant, external and internal auditors, accountant/ bookkeeper and a cashier.

4. Continuing Professional Development for members. With the ASEAN MRA in full implementation in 2015, PCP is aligning its CPD and CME programs with the memorandum order from PRC and assuring that its members are updated on many medical issues relevant locally and globally.

5. Enhance participation in environmental and climate change advocacies. The PCP Foundation has a very dynamic Committee on Climate Change that is in the forefront of several advocacies like: conduct climate change awareness and biodiversity protection activities by all PCP chapters, implementation of E.O. November 8, 2016 Day of Rising National Tree Growing activity and pushing for its legislation. The other legislative agenda of PCP is that of providing technical support for health care system reform through primary care.

continued on page 29...
The other strategic thrusts of PCP that are indirectly related with the 10-point agenda of PMA include:

1. Engaging and enabling members. PCP is mapping out the location of all PCP members to help in the identification of the underserved areas and offer DOH better ways to deliver health care services to our people.

2. Building a Culture of Professionalism & Integrity, primarily through the promotion and practice of the PCP Mantra: I am healing and leading with integrity. Hand in hand with this mantra is promoting awareness and practice of the Mexico City principles.

3. Enabling & Supporting Trainees and Examinees to meet Standards. PCP is currently working on the conversion of its training program into outcome-based education as mandated byCHED and PRC in pursuit of the ASEAN MRA. We are continuously improving and maintaining the highest possible standards in our accreditation process and specialty board examination.

4. Branding the PCP Leadership. PCP plays an active role and leadership with the Asian Federation of Internal Medicine (AFIM), American College of Physicians Southeast Asian Chapter (ACP) and the Academy of Medicine of the Philippines (AMP).

5. Engaging in Translational Research. PCP is full blast in research activities such as: Research Mentoring Enhancement Program, Publication Assistance Grant Program, and the different research contests.

6. Develop programs to enhance the teaching capabilities of teachers and trainers through short courses and workshops.

7. Produce a ‘Textbook in Internal Medicine, Philippine Setting’.

“...One's philosophy is not best expressed in words; it is expressed in the choices one makes...and the choices we make are ultimately our responsibility.

--Eleanor Roosevelt ***

**Working For Philippine Obstetrical and Gynecological Society (Foundation), Inc. (POGS)**

*by Dr. Blanca de Guia-Fuerte MD, MSc President*

**PRESIDENTIAL PROJECTS:** Strengthening Maternity Interventions in Manila through a POGS -Coordinated Linked Referral System is a program by the newly created Ad-Hoc Committee on Maternal Mortality Reduction under the POGS President. In this program, the BEMONC facilities (RHUs) in areas with the highest mortality and morbidity in Manila are paired with CEMONC/POGS accredited training and service hospitals, whereby a more structured networking relationship is established with a) assigned point persons from the paired partners b) contact numbers made available c) completed referral document as a requirement d) continuous monitoring and feedback. A two-day lecture/ workshop for the barangay health workers, midwives and municipal health officers in these BEMONC facilities will be done for proper orientation, for review of danger signs of pregnancies and recognition of high risk pregnancies, for re-training on emergency skills needed at their level, and for improvement of their communication and networking skills. The measurable outcomes for this program include the percentage increase in referral rate to their partner hospitals and the percentage decrease in maternal mortality and morbidity.

A Survey on Adherence to Postpartum Hemorrhage Guidelines is a program by the newly created Ad-Hoc Committee on Patient Safety under the POGS President. Patient safety is a discipline in the health science sector that applies safety science methods towards the goal of achieving a trustworthy system of health care delivery. While we have the Clinical Practice Guidelines on Postpartum Hemorrhage, we would like to make recommendations on how to improve the guidelines’ impact on clinical practice and patient outcomes. The survey will 1) obtain the demographic characteristics of admissions 2) characterize the hospital/facility where admissions were made 3) determine the percentage number of patients for which each recommendation was followed 4) collate feedback of facility personnel utilizing the POGS Guidelines. The expected output includes: data on point by point compliance on the guidelines, identification of guidelines with high adherence and possible retention in the future, identification of guidelines with low adherence and possible revision, and improvement of maternal and morbidity attributable to postpartum hemorrhage. We would like to seek the cooperation of the institutions for a timely completion and submission of their survey forms.

A Look at the Top Ten Causes of Maternal Mortality (Hospital-Based) in the Philippines (2012- 2014) is a project mandate of the President to the Committee of Nationwide Statistics. The completed research study will be published as a supplement to the Philippine Journal of Obstetrics and Gynecology this November edition for use as reference by the OB-GYNs. The Committee recommends the following study for next year “2017: Evaluation of Use of Integrated Statistical Information System (ISIS) by POGS Accredited Hospitals.”

Online CME or e-learning at the POGS Website was launched by the Committee on Information Technology last July 5, 2016 during the MIDYEAR Convention. The online CME is open to all POGS members and all you need to do is to login using your username and password (contact the POGS secretariat for login details). The advantages of the POGS online CME are: 1) It is convenient- you just need a comfortable chair. 2) It is self paced- you can start reading and learning at your own time. 3) The course will give you a certificate once you get a perfect score. 4) It is free. The 1st online CME is about pre-eclampsia and the forthcoming topic will be on postpartum hemorrhage. Implementation of Endoscopy Integration to Residency Training Program. With the POGS’ vision of being a premier organization, globally recognized in providing excellent health care, both the PSGE and the CREED with the

---continued on page 30...
approval of the BOT agreed to facilitate and fully implement this program. Out of the 89 Accredited Hospitals for Training, there are only 7 hospitals without laparoscopy equipment and 35 hospitals without hysteroscopy equipment. Most of these Accredited Hospitals for Training have a PSGE Fellow as an active or visiting consultant of their Department. There are only 23 hospitals without a PSGE Fellow as member of their staff. This year, all the Chairs of the different Accredited Hospitals for Training had their free Basic Animal Workshop on Hysteroscopy and Laparoscopy through the courtesy of PSGE. We look forward for full integration of endoscopy to the residency training program.

Structuring of the Research Curriculum into the residency training program and the publishing of a Research Manual are other projects this time being handled by the Committee on Research. This is to make sure the Society is able to respond to the reproductive health needs of the country in terms of clinical and public health researches whether they involve simple database collection, analytical or intervention studies or policy-making projects. As an organization, POGS should always aim high to fully utilize the talents and skills of our members.

Guidelines for Providing Experts Witness for our members who need support from the Society as proposed by the Committee of Ethics and Medical Practice are being studied by our Board Secretary and our Legal Counsel. In the meantime, peer review is encouraged in all our accredited hospitals to be able to give timely advise to our colleagues regarding questionable medical practices before medico-legal problems arise.

OTHER PROPOSED PROJECTS: The Committee on Gender-Based Violence has proposed the incorporation of gender-based violence management in the curriculum of the residency training program. At the end of the Training, the resident must be able to 1) demonstrate sensitivity in approaching issues that have an impact on gender issues 2) demonstrate evidence-based approaches in the screening, diagnosis and management of girl/ women- victims of gender-based violence 3) advocate awareness strategies in the identification and prevention of gender-based violence in the community. The project is under evaluation by CREED.

The Committee on Reproductive Health has proposed lay fora for young women aged 15 to 21 years on teenage pregnancy, sexually transmitted diseases and family planning. The Project PREPARE (Preparatory Reproductive Health Education Priming Adults for Responsible Engagement) committee members will start making modules and training of trainors in the next few months.

Inclusion of ‘Mothers Class’ in the checklist for the accreditation of hospitals for training by CREED and ‘Lectures for Midwives’ in the checklist for the accreditation of hospitals for service are strongly pushed as a part of the commitment of the Society for quality health care delivery to our patients.

Gradual Accreditation as a Hospital for Training of the Amay Pakpak Government Hospital is a pilot project under study by the PBOG. This program is a response of the Society to the shortage of obstetrician-gynecologists in an area where tertiary maternal care is badly needed.

Memorandum of Agreements
1) MOA with SANOFI (Re: Adolescent Health Issues and Perspectives) was renewed.
2) MOA with FONTERRA (Re: Optimal Maternal Nutrition and Health Advocacy Program) was approved by the Board of Trustees and will be launched possibly by September.
3) MOA with Quezon City Health Department and Philippine Pediatric Society (Re: Batang 1000; 1st 1000 Days Program) was approved by the Board of Trustees and will be launched before the year-end. This is a joint project of the three organizations which intends to implement nutrition-specific interventions to mother-infant dryads in marginalized communities in Quezon City.

“Nothing can stop the man with the right mental attitude from achieving his goal; nothing on earth can help the man with the wrong mental attitude.”
Thomas Jefferson (1743-1826)
3rd president of the United States.

The Philippine Pediatric Society in 2016
by Maria Christina H. Ventura, MD, FPPS

The Philippine Pediatric Society has always been at the forefront for the Filipino Child. The change in leadership, under Dr. Alexander O. Tuazon, also brings innovative changes to the society. This began with the creation of a new chapter, the South Western Mindanao Chapter to meet the needs of the growing population of pediatricians in the area. The total number of chapters has increased to thirteen.

The Officers and Board of Trustees have already made a courtesy call on the new Secretary of Health, Dr. Jean Paulyn Ubial last June 2016 and will be collaborating on current and future child-related projects.

The Philippine Pediatric Society also closely works with the POGS (Philippine Obstetrics and Gynecology Society) and IMAP (Integrated Midwives Association of the Philippines) as partners in the Perinatal Association of the Philippines. It addresses issues on Maternal and Child Care in the country. The annual convention will be held on September 25-27, 2016.

Presently, the PPS has 13 subspecialty societies and 4 sections which include: Allergy and Immunology, Ambulatory Pediatrics, Clinical Genetics, and Community Pediatrics. Annual Conventions and regular scientific meetings are being held by the different bodies. The Online Continuing Professional Development (CPD) is also being accessed by members of the society. The website also provides its members information to the latest in paediatric knowledge and other activities happening in the society.

continued on page 31...
Specialty Division News and Events, from page 30...

Publications are also available. It also provides an avenue for members to update their membership information including payments and CPD units earned. An online e-newsletter is also available on the website. www.pps.org.ph.

The PPS AIM Leadership and Management Course is scheduled for its 1st run during the last quarter of this year. Upcoming also will be the launch of the PPS Medical App Tool for our members.

The society also actively participates in the major activities of the PMA that includes the Foundation Day, National Medicine Week and the Annual Convention. This also includes representation in the different committees that have been assigned including the Committee on Professional Specialization.

“Whosoever wishes to know about the world must learn about it in its particular details. Knowledge is not intelligence. In searching for the truth be ready for the unexpected. Change alone is unchanging. The same road goes both up and down. The beginning of a circle is also its end. Not I, but the world says it: all is one. And yet everything comes in season.” - Heraclitios of Ephesus

Pathologists Responding to the Times
by Jocelyn Myra R. Caja, MD, Mirian D. Viterbo, MD and Edith S. Tria, MD

“Change is inevitable. Growth is optional.” – John C. Maxwell

How do we see our society five to ten years from now? Are we ready for the rapid development in the national and international arena? How equipped have we developed ourselves for the changes in the field and practice of medicine?

We support the Philippine Medical Association in its response to the need of the times through collaborative efforts in healthcare delivery. We believe in what Socrates mentioned that “the secret to change is to focus all your energy, not to fighting the old, but on building the new”.

Our organization, the Philippine Society of Pathologists, Inc. (PSP) aims to (1) promote the practice of pathology by stimulating better appreciation and proper evaluation of laboratory services among physicians, hospitals and the public in general, (2) prescribe standards in the laboratory procedures, techniques and management, (3) foster and maintain the highest standards in education, research and practice of pathology in our country. Moreover, we have witnessed the evolving practice of pathology in Laboratory Medicine and Diagnostics.

The changing trends and increasing demand for quality services in these areas warrant the need to further empower and build the knowledge of our colleagues in the clinical, anatomic, and special laboratory diagnostics. With these, we are focusing our efforts to elevate the standards of laboratory practice comparable to regional and global standards. Presently we are in the process of forming the Philippine Pathology Accreditation Board (PPAB) who will be tasked in the setting of policies, guidelines and monitors for quality laboratory function. Continuing education in both anatomic, clinical pathology and molecular biology, proper use of the biosafety cabinet, seminars on issuing a death certificate and blood banking workshop have been conducted. Directions in devolving pertinent powers to local regional chapters within the society for addressing relevant issues in area of practice and reaching out to the members for better support and monitoring are some of the pillars we are strengthening.

We will work with government and private partners to attain a proactive stance on better healthcare through responsive laboratory medicine practice. We will make stronger the partnership with the Philippine Association of Medical Technologists and allied partners in updating laws on laboratory practice. We shall supplement the Department of Health’s need in areas we can be of help and assistance with regards to the laboratory’s Quality Assurance and improvement. We shall continue publishing relevant researches in the field thru the recently resurrected Philippine Journal of Pathology (PJP) and collaborate with research organizations like DOST, PCHRD and other foreign research organizations to continually build its capability in the area of research.

The present Philippine Society of Pathologists, Inc. will play its vital role as forefront in laboratory and pathology practice as envisioned by its umbrella organization, the Philippine Medical Association (PMA).

“A good head and a good heart are always a formidable combination!”
– Nelson Mandela

PCR Supports PMA 10-point Agenda
by Malou Lacanilao, MD

The Philippine College of Radiology (PCR) is a specialty division of the Philippine Medical Association (PMA) which is responsible for training, credentialing and providing continuing medical education in the field of Radiology for both its diagnostic and therapeutic arms. It is composed of 11 Board of Directors who are the chairs of different committees such as the following: Secretariat, Finance and Ways and Means, Accreditation, Residency Training, Research, Annual Convention, External Affairs, Publications and Website, Constitution and By-Laws, Membership and Ethics.

The PMA is the mother society of all medical doctors in the Philippines regardless of specialty who police its ranks as well as provide CME to its members nationally and locally thru its local component societies. The PMA is not alone in devolving its powers to the local component societies as specialty divisions have already placed local chapters in key cities in the Philippines. PCR has recognized that these local chapters are able to connect closely with local members, provide and encourage colleagues to keep themselves updated with the latest technologies and advances in the field of radiology and promote peaceful and harmonious medical practice in their locality.

continued on page 32...
Specialty Division News and Events, from page 31...

PCR has five subspecialty societies namely the CT-MRI Society, Inc.; Ultrasound Society of the Philippines, Inc; Diagnostic Breast Imaging Society of the Philippines, Inc; Philippine Society of Vascular and Interventional Radiology and the Philippine Radiation Oncology Society, Incorporated. Each of these subspecialty societies works hand in hand with government agencies in the pursuit of National Health Objectives. One example is collaborating with the Philippine Health Insurance Corporation, Inc. To provide more benefits for patients who undergo diagnostic and therapeutic radiological procedures. These societies in cooperation with PCR also make sure their members abide by the regulatory bodies of the government and the legislature.

The PCR recognizes the following local chapters: Northern Luzon Chapter, Central Luzon Chapter, Southern Luzon Chapter, Cebu Chapter, Southern Mindanao Chapter, and soon Western Visayas and Northern Mindanao Chapter. These local chapters in cooperation with PCR and the different subspecialty societies provide continuing professional development of their members as well as increase public awareness on the role of diagnostic and therapeutic radiology. They also allow growth of their members to be leaders and vanguards of people’s health and wellbeing in their own cities, provinces and/or regions.

In 2014, the PCR appointed 25 members to be part of the Constitutional Commission with the task to amend the present Constitution and By-Laws to make it appropriate to the present times. Last February 2015, the proposed amended By-Laws and Articles of Incorporation were voted upon by the general membership at the Annual Convention. The By-laws garnered more than majority of 2/3 votes from among the members who voted therefore was ratified. The AOs however required more than 2/3 of ALL members in good standing of the PCR by voting in person or proxies thus was not yet passed.

As of July 2015, PCR has 51 hospitals in the Philippines with accredited training centers in diagnostic radiology and in therapeutic radiology.

The Residency Training Council (RTC) annually provides six scientific meetings for its 400++ residents in Metro Manila. These meetings also provide avenue for trainees to meet, connect and have fellowship with one another. Additionally, RTC gives six in-service exams for members-in-training all over the country. These exams enable them to monitor their knowledge and skills and compare themselves if they are at par with the residents from all over the country on a per year level of training. The committee also reviews research proposals and complete research papers of trainees as part of their requirements for their certifying exams.

The Philippine Board of Radiology is tasked to give the certifying board exams for all aspiring diagnostic radiologists while the Philippine Board of Radiology in Radiation Oncology is responsible for credentialing the therapeutic radiology residents. Annually, we produce an average of 70 certified diagnostic radiologists and about 5 certified radiation oncologists. The subspecialty societies also have their own examinations after additional training to be certified as their subspecialty Fellow.

The Research Committee reviews 50-60 research papers annually from Diplomates who aspire to be “Fellows” of the College. It holds an oral and poster research contest during the PCR annual convention. Annually the College prints a research journal which includes the full paper of oral presenters and the abstracts of the poster presenters.

The PCR, its local chapters and subspecialty societies annually print their financial statements in the PCR Annual Report in the spirit of transparency and accountability.

The activities and goals of the Philippine College of Radiology are in line with the Philippine Medical Association in promoting the 10-point agenda of the PMA President Dr. Irineo C. Bernardo III. We, the members of PCR support the PMA as we provide the needs of our society members and serve the Filipino people with our expertise in diagnostic imaging and therapeutic radiology.

““The man of wisdom is never of two minds; the man of benevolence never worries; the man of courage is never afraid.” – Confucius

Philippine Academy of Family Physicians
by Eva Irene Yu-Maglonzo, M.D.
National President

The Philippine Academy of Family Physicians (PAFP), the specialty organization governing all activities in the field of Family Medicine in the country, will celebrate World Family Doctors’ Day nationwide May 19-22. This is in support of the declaration of the World Organization of Family Doctors (WONCA) and also in keeping with Proclamation 168 of President Benigno Aquino III in 2011.

Family Medicine doctors are primary health care providers with a holistic approach to medical care. They promote wellness of patients, families and their communities, treat the more prevalent medical conditions, while providing emotional support to every member of the family in order to attain optimal recovery. A personal relationship is thus established with the family that even goes beyond the medical.

Family medicine doctors are a prominent workforce in various health settings, be it in the out-patient clinic, the emergency room, or the wards in both government and private facilities. Their services extend beyond the hospital to the home through home care services and to the community, where they play major roles in public health programs.

In the academe, Family Medicine doctors are trainers and mentors of young physicians. They are also involved in the field of research to advance knowledge in order to give quality care to patients, their families and communities.

continued on page 33...
Being 1st-contact physicians, they are integral to the continuum of health care delivery. Because of their training and competencies, they are able to provide the most immediate and salient care while recognizing appropriate and timely referral of cases to other specialist colleagues for those needing subspecialty care.

As we celebrate World Family Doctors’ Day, let us give due recognition to all Family Medicine doctors for their vital and unselfish contribution to comprehensive medical care for every Filipino family!

“In the middle of difficulty lies opportunity.”
Albert Einstein, PhD
(Genius, Physicist, 1879-1955)

“The Philippine College of Surgeons (PCS) is pleased to support the Philippine Medical Association’s celebration of Medicine Week this September 2016. This month is doubly significant for the PCS as the college marks its 80th Foundation Day on September 12. All PCS chapters all over the country will be holding various activities this month of September to celebrate the occasion. Tree planting activities are scheduled by the Northeastern Luzon and Cordillera Chapters; at the Sta Rita, Pampanga Eco Park by the Central Luzon Chapter; in Batangas from the fellows from the Southern Tagalog area; in Nabu, Camarines Norte by the Bicol Chapter; in Talisay City, by the Negros Island Chapter; in Cebu by the Cebu Eastern Visayas Chapter; mangrove planting by the Davao and Northern Mindanao Chapters. This is the PCS’ contribution to environment and climate change awareness.

As part of the college’s objectives of promoting health awareness through public education, various lay forums will be held on topics of cancer by the different chapters. In addition to these, some of our fellows shall be guesting on local TV and radio stations to explain various diseases and enlighten the public on disease prevention and treatment. The chapters have also scheduled various surgical missions in different hospitals all over the country to help our countrymen who have poor access to such. There will also be a nationwide blood donation campaign to be held in different hospitals all over the country; All the aforementioned shall be held during the month of September by the Philippine College of Surgeons.

For details of activities in specific regions, please contact the local PCS Chapter in your area.

“If you want to test a man’s character give him power.” – Abraham Lincoln

continued on page 34...
Drugs education is imperative

By: Floriño A. Francisco, M.D.

IT IS TRULY commendable that our new education secretary, Leonor Briones declared that one of the 1st undertakings of the DepEd under her stewardship to conduct a thorough review the syllabus on drug education with the plan to fortify it. Secretary Briones is also mulling on making drug education as a separate subject instead of just incorporating it into academic subjects as it is being done today. This laudable plan of our new DepEd secretary is in line with the policy of the new leadership to give urgent attention to the drug menace. Starting the teaching of drug literacy in Grade 4 is another noteworthy idea in the war against illicit drugs for drug syndicates today are targeting students as young as 10 years old. And this is not only true in urban centers but even in remote rural areas.

Whatever happened to all those anti-drug abuse measures that the government have been vigorously advocating all these years? Despite the almost daily drug raids and confiscation of hundreds of millions worth of illegal substances reported in the papers, the country is seemingly helpless in stemming the tide of drug addiction in the country. Even the much-touted barangay anti-drug abuse councils established decades ago did not make any dent in curving the incidence of substance abuse in small towns and remote barangays. How come?

It can not be denied that the drug problem in the country today has already reached alarming proportion. One shudders to ponder on what Swedish political scientist Gunnar Myrdal once said that "one of the surest and fastest ways of destroying a nation’s morality and will is through the widespread dissemination of dangerous substances. For drug addiction corrodes not only the body but the very soul itself. It does not affect the victims alone for it has far-reaching effects on the whole community."

The problem of drug abuse calls for many solutions. Experts say one way to solve the problem is to strike at its roots, pinpoint the source of drugs and destroy them, to stop the smuggling of drugs through the airports and backdoor entries and maintain tight control on the sale of substances used by the drug addicts.

These are great measures that may all be used to combat the drug menace. But the reality is that there is no single answer in solving the problem of drug addiction. Those who put forward brilliant suggestions and try them out find that their successes are limited. Which is why the most effective weapon in thwarting this problem in our society is still prevention. And, we can only achieve this by drug education carried out, honest to goodness, on a nation scale and included in the school curricula as a separate subject as suggested by Secretary Briones and started as early as Grade 4. For sure, this will do a great deal in eliminating the continuing demand for illicit substances.

A drug expert from U.S.A. once said, "To talk only of eliminating the illicit drug supply and its pushers is a shortsighted approach in curving drug addiction. What we need is a long-range education program that will eventually eliminate the demand."

About the author: A Cabanatuan-based pediatrician, Dr. Floriño A. Francisco had attended many drug forums in America while a Harvard Fellow in adolescent medicine. He is the 2010 TOPICS (The Outstanding Physician in Community Service) awardee.
September 18, 2016

**WREATH LAYING CEREMONIES** at Luneta Park
Host Society: Pasay-Paranaque Medical Society
President: Ellen May G. Biboso, M.D.

**OPENING CEREMONIES** at New World Manila Bay Hotel
Host Society: Quezon City Medical Society
President: Norma M. Torregoza, M.D.
ACTIVITIES FROM COMPONENT MEDICAL SOCIETIES DURING NATIONAL MEDICINE WEEK CELEBRATION
13th PMA SINGING PHYSICIANS CONTEST
September 20, 2016 - PMA Auditorium
Chair: Ellen May G. Biboso, M.D.

13th PMA SINGING PHYSICIANS CONTESTANTS
September 19, 2016 - PMA-CME Center
Elimination Round

<table>
<thead>
<tr>
<th>NAME</th>
<th>SOCIETY</th>
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<tbody>
<tr>
<td>1  Ronald Ian Cadiz, M.D.</td>
<td>Quezon City Medical Society</td>
</tr>
<tr>
<td>2  Luneta P. Villarin, M.D.</td>
<td>Lipa City Medical Society</td>
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<tr>
<td>3  Carlos Dela Cruz Velchez, M.D.</td>
<td>Olongapo City Medical Society</td>
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<tr>
<td>4  Marian Rose L. Tolentino, M.D.</td>
<td>Ilocos Norte Medical Society</td>
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<tr>
<td>5  Maybell Cacdac, M.D.</td>
<td>San Juan Medical Society</td>
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<tr>
<td>6  Jennifer P. Dungca, M.D.</td>
<td>Cavite Medical Society</td>
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<tr>
<td>7  Anna Aurela Noel, M.D.</td>
<td>Angeles City Medical Society</td>
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<tr>
<td>8  Karen G. Rome, M.D.</td>
<td>Manila Medical Society</td>
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<td>9  John Robinson L. Reyes, M.D.</td>
<td>Nueva Ecija Medical Society</td>
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<tr>
<td>10 Christian C. Masaga, M.D.</td>
<td>Oriental Mindoro Medical Society</td>
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<td>11 Ma. Cristina L. Gonzalez, M.D.</td>
<td>Oriental Mindoro Medical Society</td>
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<tr>
<td>12 John Levi Daluz, M.D.</td>
<td>Pampanga Medical Society</td>
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<tr>
<td>13 Gerardo S. Ramos, M.D.</td>
<td>Caloocan City Medical Society</td>
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<tr>
<td>14 Sigrid Monina I. Marquez, M.D.</td>
<td>Pasig City Medical Society</td>
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<tr>
<td>15 Michael Muñoz, M.D.</td>
<td>Las Pinas City Medical Society</td>
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<tr>
<td>16 Jerlyn Maureen P. Servas, M.D.</td>
<td>Philippine Dermatological Society</td>
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<tr>
<td>17 Allyn Rey Bucagon</td>
<td>Pangasinan Medical Society</td>
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13th PMA Singing Physicians Winner
September 20, 2016 - PMA Auditorium

<table>
<thead>
<tr>
<th>NAME</th>
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<tbody>
<tr>
<td>Michael Muñoz, M.D.</td>
<td>CHAMPION</td>
</tr>
<tr>
<td>Ronald Ian Cadiz, M.D.</td>
<td>1st RUNNER UP</td>
</tr>
<tr>
<td>Jerlyn Maureen P. Servas, M.D.</td>
<td>2nd RUNNER-UP</td>
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LIST OF WINNERS

<table>
<thead>
<tr>
<th>Cheerdance (High School)</th>
<th>Bulilit Group Poem Recitation</th>
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<tbody>
<tr>
<td>1st Place</td>
<td>Zamboanga del Sur Medical Society</td>
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<tr>
<td>2nd Place</td>
<td>Cavite Medical Society</td>
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<tr>
<td>3rd Place</td>
<td>Lipa City Medical Society</td>
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<thead>
<tr>
<th>Cheerdance (Bulilit)</th>
<th>Poster Making (Bulilit)</th>
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<tbody>
<tr>
<td>1st Place</td>
<td>Taal Lemery Medical Society</td>
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<tr>
<td>2nd Place</td>
<td>Tanauan Medical Society</td>
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<tr>
<td>3rd Place</td>
<td>Quezon Medical Society</td>
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<table>
<thead>
<tr>
<th>Quiz Bee (Bulilit)</th>
<th>Bulilit Champion</th>
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<tbody>
<tr>
<td>1st Place</td>
<td>Taal Lemery Medical Society</td>
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<tr>
<td>2nd Place</td>
<td>Pampanga Medical Society</td>
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<tr>
<td>3rd Place</td>
<td>Cavite Medical Society</td>
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<thead>
<tr>
<th>Quiz Bee (Teen)</th>
<th>Overall Champion</th>
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<tbody>
<tr>
<td>1st Place</td>
<td>Cavite Medical Society</td>
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<tr>
<td>2nd Place</td>
<td>Lipa City Medical Society</td>
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<tr>
<td>3rd Place</td>
<td>Misamis Occidental (Oroquieta) Medical Society</td>
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CLOSING CEREMONIES
September 24, 2016 - PMA Auditorium
Host Society: Marikina Valley Medical Society
President: Nimfa R. Baria, M.D.
#LarawanngPaskosaPMA Contest

First Place

Second Place

Third Place

December 10, 2016 - PMA Auditorium, North Avenue, Quezon City
Chair: Mildred M. Mariano, M.D.
Co-Chair: Romeo G. Encanto, M.D.