

# PMA – CME CODE

(PMA Code for Continuing Medical Education)

PMA Commission on Continuing Medical Education  
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## PMA CME CODE

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## PMA CODE FOR CONTINUING MEDICAL EDUCATION

The Commission on Continuing Medical Education of the Philippine Medical Association by virtue of the authority vested in the Commission under Section 3 of Article XI of the By-Laws of the Association, hereby ordains the PMA Code for Continuing Medical Education as follows:

### CHAPTER I GENERAL PROVISIONS

Section 1. Title - This Code shall be known and cited as the PMA Code for Continuing Medical Education, or simply, PMA CME Code.

Section 2. Contents – As prescribed in Section 3 of Article XI of the PMA By-Laws, this Code shall contain the following:

- (a) Rule, regulations and all pertinent policies in the implementation of Continuing Medical Education (CME) as a requirement for all members of the Association; and

Also included in this Code are items that, in the judgment of the Commission on Continuing Medical Education, are appropriate for the success of the PMA CME Program.

Section 3. CME Concepts and Underlying Principles – On the principle that Medicine is a lifelong study, the physician owes it to himself and to his patients to continue studying Medicine during his entire professional life.

In Article III, Section 8 of the Code of Ethics of the Medical Profession entitled “Duties towards Patients”, of the Code of Ethics of the Medical Profession states: “Recognizing that medicine is a changing science, the physician has the obligation to update his knowledge and practice so that he can provide medical service and care current to the times and consonant with the type of practice (he has) and the community he serves.”

CME includes such group activities as scientific session or assemblies, postgraduate courses, workshops, symposia, panel discussions, poster sessions, scientific film showings, medico-legal presentations, wet clinics, symposia and others as may be determined by the Commission.

CME also includes (such) individual learning efforts as distant study courses, reading of medical journals, research reports and other scientific literature with accomplishment of required questionnaire, taped audio or audio-visual lectures and other as may accredited by the commission.

The Commission grants individual accreditation to lecturers and researchers and others who have taken part in the delivery of CME services, as provided for in this Code.

Section 4. PMA Responsibility - It is the inherent responsibility of the Philippine Medical Association as a national professional organization of physicians to make continuing medical education available to its members of the medical profession. The Association has assumed this responsibility. Through the years, the PMA evolved a CME Program encouraging all its members to avail. The attainment of a required number of CME credit units has become a condition for PMA membership in good standing. The importance of this responsibility has led the Association to establish its Commission on Continuing Medical Education in 1989 for the efficient and effective administration of the CME Program.

Section 5. Cooperation with the Government and with Local and Foreign Organization - The Commission may grant CME accreditation to any scientific activity with CME value. The accreditation may be granted upon the initiative of the Commission or upon the application of the sponsoring organization or the PMA component society in the place where the CME activity is held.

## CHAPTER II THE PMA COMMISSION ON CONTINUING MEDICAL EDUCATION

Section 6. Organization – The policy-making, planning and administration of the Continuing Medical Education program of the PMA is vested in a Commission on Continuing Medical Education consisting of six (6) members, composed of a Chairman and five (5) members appointed by the President with the concurrence of the Board of Governors. In the Commission first constituted, two were appointed for a term of three years, two for two years, and two for one year. (Sec. 1, Art. XI, PMA By-Laws).

The PMA Commission on Continuing Medical Education shall hereinafter be called as CME Commission (or simply, Commission), and Members of the Commission, as Commissioners.

Section 7. Functions and Duties – The CME Commission has the exclusive duty of enforcing and administering all provisions, rules and regulations and policies relative to the CME Program of the PMA.

The duties of the Commission are:

1. To promulgate, enforce and implement the PMA CME Code and rules, regulations and guidelines on CME;
2. To receive, investigate and mediate complaints regarding CME units within the PMA area of responsibility;
3. To monitor and maintain an adequate record of the CME units earned by the members of the Association;

4. To supervise and coordinate with the component society and affiliate societies and all other providers of CME in the implementation of scientific programs or activities;
5. To supervise and administer a well equipped Secretariat in the performance of its records keeping;
6. To coordinate with the Committee on Archives and Library in the updating of journals and other CME materials for the PMA Library and centralize and coordinate all library matters within the scope of the CME Library;
7. To manage and operate the PMA Center for Continuing Medical Education. (Sec. 1.1., Art XI PMA By-Laws).
8. To undertake all such other functions and duties as may be prescribed in the By-Laws, (or) as it may deem necessary and proper for the attainment of the goals and objectives of the CME Program of the PMA.

The Commission or any of its Sub-Commissions, as affirmed by the PMA By-Laws, is vested with autonomy as in the Commission on Audit and the Commission on Elections, (so that its actions or decisions or matters within its mission or jurisdiction) as defined in the By-Laws are entitled to due deference by other committees of the Association. Copies of its programs, statement of semi policies, guidelines, rules and regulations and other issuances shall be furnished the Board of Governors for its information, comment and where necessary, promulgation.

Section 8. Functions Relating to CME Center – The Commission, as manager and operator of the PMA CME Center has the following functions;

1. To establish a trust fund out of donations, contributions, proceeds of fund campaigns, proceeds of paid services rendered by the Center, and budgetary allocations to be exclusively used to support the maintenance and operation of the Center; and
2. To provide for the Secretariat of the Commission on CME, the main PMA Library, audio-visual library, conference rooms and auditorium, and CME materials program development.

Section 9. Functions and Duties of the Chairman – The Chairman shall have the following functions and duties;

- a) Presiding over meetings of the Commission;
- b) Exercise general supervision over the business of the Commission and its personnel;
- c) Appoint, with the concurrence of the Commission, consultants, technical help and other resource persons needed for CME planning and operations;

- d) Recommend to the Board of Governors, with the concurrence of the Commission, the appointment of Commissioners to fill vacancies in the Commission, and of Commission Secretariat employees;
- e) Carry out all instructions, orders and resolutions of the Commission, and sign all contracts, agreements relating hereto;
- f) Perform all duties pertinent to the office of the chief executive officer of the Commission and such other duties as may be assigned by the Commission;
- g) Represent or act as spokesman of the Commission, unless he assigns this function to a Commissioner on specific occasions;
- h) Submit to the Board of Governors an annual report on the accomplishments of the Commission.
- i) Consult the Commission on all matters not covered or clearly defined in this section.

Section 10. Functions and Duties of a Commissioner – The Commissioner shall have the following functions and duties;

- a) Attend and take part in all meetings and activities of the Commission, and in public hearings, as well as conferences, proceedings or functions of the PMA or of the government where his presence or that of the entire Commission is required;
- b) Take part in the Commission's compliance with its functions prescribed in this Code;
- c) Assume and perform the duties and responsibilities assigned to him by the Commission as head of Sub-Commission and such other tasks as the Commission may entrust to him.

Section 11. The Commission Secretariat – The Commission shall have an adequate Secretariat to undertake the following instructions given by the Commission;

- a) Keep and preserve all the minutes of meeting of the Commission and documents relating thereto, according to policies and instructions given by the Commission;
- b) Receive and route all mail, and prepare and file all correspondence and other papers of the Commission;
- c) Prepare and disseminate schedules and listings of all CME activities accredited by the Commission;

- d) Receive and refer for the Commission's action all applications for accreditation of CME activities and promptly notify the parties of such action;
- e) Maintain a recording system for all CME credits earned by every PMA member, and issue the corresponding certifications therein in accordance with the instructions of the Commission;
- f) Computerize CME records in accordance with the instructions of the Commission;
- g) Make arrangements needed for the official travel of the Chairman and/or Commissioners, or see to it that such arrangements are made;
- h) See to the cleanliness, orderliness, and security of the Commission's offices and the preservation and maintenance of its properties;
- i) Undertake such tasks and assume such responsibilities as are normally borne by secretariats, and perform such other CME related functions as directed by the Commission.

The Commission has exclusive control over its Secretariat personnel to assure proper performance of the foregoing functions and duties.

Section 12. Divisions of the Commission – The Commission shall be divided into five administrative divisions, each to handle a category of continuing medical education, as follows;

Sub-Commission on Component Society CME,  
 Sub-Commission on Affiliate Society and Medical School CME,  
 Sub-Commission on PMA-Sponsored CME,  
 Sub-Commission on Government and Private Hospital CME  
 Sub-Commission on Individual CME, and  
 Sub-Commission on CME Center

The Chairman will take charge of one of these Sub-Commissions, and so will each of the Commissioners the individual assignments to be made by mutual agreement.

The word, "Sub-Commission" shall hereinafter be abbreviated as, "SC".

Section 13. SC on Component Society CME – The SC on Component Society CME is in charge of continuing medical education activities that take place in PMA component societies or chapters.

The Commissioner for Component Society CME makes the decisions regarding the accreditation of CME activities at the local level and the credit units



earned therein. He shall provide guidance to all component societies and chapters with regard to their CME activities and facilitate their compliance with rules, regulations and policies governing the same. The SC on Component Society CME shall render an annual report of component society or chapter CME, all of these should be included in the annual report of the Commission, and render such other reports as requested by the Commission.

Section 14. Policies on Component Society CME – The SC on Component society CME shall endeavor to bring CME to all component societies of the PMA so that its benefits shall be made available to as many PMA members as possible. The SC on component Society CME therefore shall give priority attention in assisting those component societies that have CME activities infrequently or have none at all. The objective is for every component society to have at least one CME activity every four months. In order to facilitate such objective, the Commissioner for Component Society CME shall collaborate with the Commissioner for Affiliate Society and Medical School CME is establishing a panel of speakers with whom component societies or chapters can get in touch.

Section 15. SC on Affiliate Society and Medical School CME – The SC on Affiliate Society and Medical School CME is the division of the Commission in charge of continuing medical education activities that take place in PMA affiliate societies and in medical schools.

The Commissioner for Affiliate Society and Medical School CME makes the decisions regarding the accreditation of CME activities undertaken by affiliate societies and medical schools. He shall gather advance information on these CME activities and coordinate with the affiliate societies or medical schools conducting them in order to facilitate PMA members' attendance therein. He shall render an annual report on Affiliate Society and Medical School CME to be included in the annual report of the Commission, and such other reports as requested by the Commission.

Section 16. Policies on Affiliate Society and Medical School CME – The Commissioner on Affiliate Society and Medical School CME shall encourage PMA members to attend the accredited CME activities of these societies or schools to achieve the dissemination of knowledge in specialty field relevant to the urgent needs of our people.

A pool of speakers on topics in the specialty fields shall composed of experts.

The Commissioner on Affiliate Society and Medical School CME shall advise affiliate societies and medical school against duplication in CME activities. However, societies and schools may hold joint CME activities. The use of the same speaker by a component society every year should be discourage. Instead the same subject matter should be rotated to various speakers knowledgeable on the same subject so that PMA members may be exposed to the most liberal coverage of a topic possible.

The Commissioner for Affiliate Society and Medical School CME shall endeavor to develop a working relationship with the Chairman of the Affiliate Societies in the pursuit of improvements in the PMA's CME Program.

Section 17. SC on PMA-Sponsored CME – The SC on PMA-Sponsored CME is (the division of the Commission) in charge of the accreditation of continuing medical education activities that take place in annual conventions and other meetings of nationwide or regionwide attendance of the Association. The SC on PMA-Sponsored CME shall render an annual report on such CME activities to be included in the annual report of the Commission, and such other reports as requested by the Commission.

Section 18. Policies on PMA-Sponsored CME – The Commissioner on PMA-Sponsored CME shall act in an advisory capacity in relation to the scientific committees conducting CME activities in PMA annual conventions and other meetings of nationwide or regional attendance. He shall provide guidance to this committee in order that the CME activities will be in line with the aims and objectives of the PMA-CME Program as determined in this Code. The scientific committees take charge of the preparatory and administrative aspects of these CME activities.

During functions and ceremonies in connection with PMA-Sponsored CME, the Commissioner for PMA-Sponsored CME shall assume the protocol ranking of the Commission Chairman only in the latter's absence, In cases wherein the Commission Chairman or the Commissioner for PMA sponsored CME will not be able to attend such function the host component society CME coordinator will represent the Commission.

The Commissioner for PMA-Sponsored CME shall take part in the formulation of agreements between the PMA and supporting firms or entities.

Section 19. SC on Government and Private Hospital CME – The SC on Government and Private Hospital CME is in charge of continuing medical education activities that are conducted by hospitals, should be available not only to its personnel but also to all PMA members.

The Commissioner for Government and Private Hospital CME makes the decisions regarding the accreditation of such CME activities. He shall gather advance information on these CME activities and coordinate with the hospitals conducting them in order to facilitate PMA member's attendance therein. The SC on Government and Private Hospital CME shall render an annual report on Government and Private Hospital CME to be included in the annual report of the Commission and such other reports as requested by the Commission.

Section 20. Policies on Government and Private Hospital CME – The Commissioner for Government and Private Hospital CME shall encourage PMA members to attend the accredited CME activities conducted in government or private hospitals from which they may obtain knowledge or develop skills applicable to their practice. The Commissioner shall likewise encourage the

physicians working in these hospitals to attend PMA CME activities. Experts in these hospitals will be invited to join the PMA CME pool of Speakers.

Section 21. SC on Individual CME – The SC on Individual CME is in charge of accredited CME activities undertaken individually by PMA members as prescribed in this Code.

The Commissioner for Individual CME makes the decisions regarding the accreditation of such activities. He shall render an annual report on individual CME to be included in the annual report of the Commission, and such other reports as requested by the Commission.

The Commissioner for Individual CME shall take the initiative in planning for developing and updating literature and other materials for individual CME for production and distribution by the Commission. These include self-study courses, books, pamphlets, monographs, reproduction of medical articles televised instruction, graded quizzes in medical journals, audio-visual taped, computer assisted programs and transcripts of accredited lectures.

Section 22. Policies on Individual CME – The objective of Individual CME is to enable a physician to obtain CME credits on his own individual initiative. The SC on Individual CME shall constantly endeavor to reach all PMA members wherever they may be and enable them to earn the required level of CME credits.

Section 23. SC on the CME Center – The SC on the CME Center is the in charge of the implementation of the mandate of the (by) By-Laws that one of the duties of the Commission stating that (is): “To manage and operate the PMA Center for Continuing Medical Education” (sec. 1.1 Art. XI, PMA By-Laws). This SC undertakes the functions of the Commission prescribed in Section of this Code.

The Commissioner for the CME Center (makes the decisions regarding) oversees the management and operation of the PMA CME Center and has the authority, in the name of the Commission, to issue rules and regulations governing the utilization of the Center, its lecture and function rooms, library, audio-visual equipment, learning materials and other facilities thereof. He shall render (annual) report on the management and operation of the Center to be included in the annual report of the Commission, and render such other reports as requested by the Commission.

Section 24. Policies on the CME Center – The Commissioner for the CME Center shall endeavor to achieve the maximum possible utilization of the Center so that it may bring the greatest good to the greatest number of PMA members in terms of CME and professional growth and development. Information about the Center shall be continually disseminated to all component and affiliate societies.

The Commission, in consultation with the PMA National Treasurer shall formally establish the CME Trust fund mentioned in Section 8, No.1 of this Code and prescribe guidelines on the utilization and disposition of the Fund in line with

the requirement that the Fund shall be used exclusively for the support and operation of the Center. Upon that approval of the guidelines, the Commissioner for the CME Center shall administer the fund in accordance with the guidelines.

It is the responsibility of the SC Commission for the CME Center to look for and pursue ways and means for the increase or amplification of the Fund to attain at least a level sufficient for the operation and support of the Center. The Commission's annual budgetary proposals to be submitted to the Board of Governors through the Committee on Budget and Finance shall contain the proposed budget for the CME Center drawn by the Commissioner for the said Center. Proposed Commission's budget should be submitted in the month of February.

Section 25. Assignment of Multi-Category and Other CME Activities – The Commission will meet to decide on which Commissioner to undertake the responsibility for the following:

1. CME activities undertaken by two or more societies, organizations, medical schools, hospitals or other entities belonging to different categories, like those jointly conducted by a component society and an affiliate society, a hospital and an affiliate society, etc., and,
2. CME activities not yet covered in this Code.

In the event that immediate action is necessary and the Commission is unable to meet, the Chairman shall handle the situation until the Commission had taken action.

Section 26. Meeting of the Commission – The Commission shall hold its regular sessions at least once a month at the Center for CME, unless another venue had been previously agreed upon by majority of the Commissioners, and in either event, proper notices of meeting had been given. Three members of the Commission shall constitute a quorum.

A special meeting to deal with business that required urgent attention may be held upon call by the Chairman or by three Commissioners, or at least three days' notice, the date, time and place to be specified in the notice. An earlier date and time may be agreed upon by the entire Commission, in which case formal notices are waived.

Three votes shall constitute the majority vote of the Commission, Provided That, in any matter affecting the special functions and the responsibilities of a Commissioner as head of Sub-Commission, the affirmative vote of the Commissioner is required for valid act or decision of the Commission, with regard to the Sub-Commission and the Commissioner in charge.

Section 27. Removal from Office – The Chairman or any Commissioner may be removed from office by the President, with the concurrence of the Board of Governors, for neglect of duty, lack of confidence and similar causes adversely

affecting the interests of the PMA, on the basis of a verified complaint filed with the Board, which is found, after due hearing with the respondent given a fair chance to defend himself, to constitute a just cause for removal of the Chairman or any Commissioner.

Section 28. Vacancies in the Commission – Where the Chairman or a Commissioner vacates his office, his successor, appointed by the President with the concurrence of the Board of Governors, shall serve only for the duration of the unexpired term of his predecessor.

The Commission shall immediately inform the Board of Governors in writing of any vacancy that occurs in its membership.

In order to avert a disruption in the services of the Commission, its members remaining after a vacancy, may designate by majority vote, one of their member to fill the vacancy temporarily until such time as it is properly filled and the appointee has assumed the duties of the office.

In the event that the term of a member of the Commission had expired, it shall be his duty to remain in office until his successor has been duly appointed and has assumed his duties. Should the outgoing member be unable to carry on after the expiration of his term, the vacancy shall be temporarily filled as in the preceding paragraph.

### CHAPTER III CME ACCREDITATION

Section 29. Aspects of CME Accreditation – There are two aspects of CME accreditation that are to be considered in the implementation of the CME Program of the PMA.

First, is the accreditation by the Commission of the educational activity and the assignment of CME credit units thereto.

Second, is the accreditation or award by the Commission of CME credit units earned by participants in the educational activity.

In either aspect, there should be an official or officials, or committees or groups, in charge of compliance with the requirements of this Code in the component or affiliate society chapter, sub-specialty society, medical school or hospital applying for accreditation whose interaction with the Commission will bring the benefits of the PMA-CME Program to individual physicians.

Section 30. Accreditation of CME Activity – The application for the accreditation of a CME activity undertaken by a PMA component or affiliate society shall be made in writing and submitted to the Commission by the President of the applicant society or by the CME Committee of the society in accordance with the By-Laws or internal regulations of the society.

The application for accreditation of CME activities in a PMA annual convention shall be submitted by the Scientific Committee of the convention. With regard to CME activities in regional assemblies, the application shall be submitted by the Governor from the region, or the President of the host component society, or the CME Committee of the society.

In case a CME activity is a joint endeavor of two or more component or affiliate societies, hospitals and medical schools, the application shall be submitted by the presidents or heads of the applicants or by a CME Committee constituted by them. The same rule applies in the case where one or more parties presenting the joint endeavor is a foreign organization, in which event the head or representative of that organization will be included as applicant.

With regard to the application for individual CME accreditation, this shall be submitted by the physicians concerned, to the Commissioner for Individual CME.

Situations not covered by this Section shall be acted upon by the Commission on a case-to-case basis.

Section 31. Form and Contents of Application – Examples of prescribed application forms for the accreditation of CME activities are found in Annex “A” of this Code. They may be obtained at the Commission Secretariat. The applicant

may improvise forms substantially identical to those here prescribed, containing the name and address of the applicant society, organization, medical school, hospital or individual physician' title or nature of the CME activity and its scheduled date, time and venue the topic/s and the corresponding speaker/s with their individual PMA membership numbers signed by the President, Dean, Director, CME Committee Chairman or Official in charge of such CME activity.

With regard to individual CME, the provision concerning the application is found in Section 30.

The application is a commitment on the part of the applicant to pursue the aims and objectives of the PMA CME Program through the CME activity for which accreditation is sought, abide by the requirements of this Code and submit to the ruling of the Commission.

Section 32. Individual CME Accreditation and Award of CME Credit – The application for the accreditation of individual CME material should enclose any of the following which the applicant has studied:

- a) For self-study programs, the complete name of the program and answered self-assessment form;
- b) For publication: Copy of complete publication and name and address of publisher;
- c) For unpublished reports: Copy of complete report and information on the date, time and place of reading;
- d) For other material, a narrative describing the objective of the activity, method of learning, amount of time spent, the learning achieved and assessment of the learning.

The application is sent to the Commissioner for Individual CME who accredits the material, awards CME credit to the applicant and transmits the application to the Commission Secretariat to record and then inform the applicant accordingly.

Section 33. Report of CME Activity and Award Credit Units Earned – The applicant, organization, medical school or hospital undertakes to render a report on the CME activity to the Commission within 30 days of the event, to include a list of those who attended the CME activity, the lecturers, or speakers, and those who took part in the management of the activity, which shall bear their individual signatures and PMA membership numbers. The list shall be certified by a person designated by the applicant as CME Coordinator. Where the activity consists a number of lectures, presentations or sessions, each of which has an assigned weight in CME units, the Coordinator shall record the credit units earned by each individual listed on the basis of actual attendance at a particular lecture, presentation or session.

The Commissioner in charge of the CME activity covered by the report, after due consideration, awards the CME credits earned by each of the individuals listed therein and sends the report to the Commission Secretariat for recording. The Secretariat then informs the component or affiliate society, chapter, sub-specialty society, medical school or hospital concerned of the action taken.

A certification of CME credit units earned by a PMA member as recorded at the Commission Secretariat may be obtained through accomplishment of a request form. (and sending) the request should be accompanied with a stamped self addressed envelope; (to the said Secretariat). Access by the PMA member to his CME records at the Secretariat shall be governed by rules issued by the Commission.

Section 34. Guidelines for Evaluation of Credit Units in a CME Activity – As a general rule, 5 CME credit units per hour are attached to an accredited lecture. Thus, for attendance of a three-hour lecture, the PMA member would earn 15 CME credit units, provided he was present in the entire duration of the lecture.

With respect to individual CME, the PMA member is granted 20 CME credit units per hour of study.

Section 35. Guidelines Applicable to CME in Medical Schools and Affiliate Societies – The following values, in CME credit units, are generally assigned to accredited CME activities in medical schools and affiliate societies (including sub-specialty societies):

a)	Participants in lectures and conferences	5 units/hour
b)	Participants in workshops, demonstrations, Wet clinics	10 units/hour
d)	Senior residents under training	50 units/year
e)	Speaker (30 minutes – 1 hour)	10 units/SESSION
f)	Discussor, reactor or panelist	10 units/SESSION
g)	Moderator	10 units/SESSION
h)	Professors (full)	100 units/year
i)	Medical school faculty other than Professor	80 units/year
j)	(Residency program )OTHER CME ACTIVITIES(approved Training), CPC, Grand rounds	Must be approved by corresponding body of society to merit CME units
k)	Postgraduate/Masteral/DOCTORATE	100 UNITS/YEAR

Section 36. Guidelines Applicable to CME in Hospitals – The following values, in CME credit units, are generally assigned to accredited CME activities in government and private hospitals:



- |     |   |                |
|-----|---|----------------|
| a)  | Courses with wet clinics                | 10 units/ hour |
| b)  | Lectures, panel discussions, CPCS, etc. | 5 units/hour   |
| c)  | Special lectures                        | 5 units/hour   |
| d)  | Staff conferences                       | 5 units/hour   |
| E.) | POST-GRADUATE COURSES (REFER TO SEC.34) |                |

The rate of credit units given above are for those attending the CME activity. Those for lectures, discussers and moderators are stated in Section 35.

Section 37. Guidelines Applicable to PMA-Sponsored CME – the scientific program of an annual convention of the PMA should be designed so as to provide PMA members attending scientific activities therein the opportunity of earning a total of 100 CME units during the convention. In cases wherein PMA Members cannot attend to PMA Schedule activity convention due to attendance in General Assembly shall be given 5 Units per hour.

The desired total of credits with regard to CME activities in regional assemblies is 50 CME units. The chance for earning more CME units may be accorded through pre-convention scientific sessions.

The CME coordinator in a PMA annual convention should devise a system whereby individual CME unit earnings are properly recorded and the corresponding certificates promptly issued to the individual PMA members concerned. Where a scientific session is conducted by a component or affiliate society, medical school, hospital or other entity, the CME coordinator should coordinate with the authorities of those groups. The Commissioner for PMA-Sponsored CME should be accessible during the convention so that his guidance will always be available. See also section 18 for addendum.

Section 38. Required CME Credit Units –

Among the duties of a PMA member is to “comply with the requirement of the Continuing Medical Education Program” (Sec. 1(b) Article III, PMA By-Laws). Compliance is required for enjoyment of the status of membership in good standing.

The Code of Ethics of the Medical Profession also lays it down as a duty of the physician to pursue CME. Section 8 of Article of the Code states: “Recognizing that Medicine is a changing science, the physician has the obligation to update his knowledge and practice so that he can provide medical service and care current to the times and consonant with the type of practice he has and the community he serves.” Compliance is required in the interest of service to the patient.

A minimum of 30 units of which should be earned from their local component activities, like round table discussion, scientific symposia and other scientific activities initiated by the local component society. Every PMA member is required to earn his credit a minimum of 100 CME Units per fiscal year.

The reason behind the 100 units annual requirement is that will enable the PMA member to maintain membership in good standing.

Section 39. CME Requirement for Rural Physicians – As exceptions to the rule laid down in Section 38, the following minimum CME Credit earnings are prescribed for PMA members practicing in rural areas:

- a) Physicians practicing in rural areas which are more than 50 kilometers but not more than 100 kilometers from the component society secretariat, general hospital or medical school should earn a minimum of 120 CME units within a 3- year period; Group A
- b) Physicians practicing in rural areas which are more than 100 kilometers from the component society secretariat, general hospital or medical school should earn a minimum of 60 CME units within a 3-year period. Group B

For purposes of this Code, the physicians mentioned in Paragraph (a) above will be referred to as group A Rural Physicians, and those in Paragraph (b), as group B Rural Physicians.

For purposes of maintenance of PMA membership in good standing, Group A Rural Physicians are required to earn a minimum of 40 CME units within a one-year period while those in Group B, 20 CME units within a one-year period;

Rural Physicians who are neither in Group A nor Group B shall fulfill the CME credit requirements laid down in Section 36.

The exceptions herein made are in effect as of September 22, 1990 (Board of Medicine Resolution No. 15, January 26, 1988). These exceptions will be modified by the PMA CME Commission in line with any amendments that will be made to the aforesaid Board of Medicine Resolution.

Section 40. Registration of Group A and group B Rural Physicians – PMA members practicing in rural areas who belong to the category of Group A Rural Physicians and those who belong to Group B are required to register with the Secretariat of their respective component societies in order to avail of the exceptions provided for in Section 37. The exception will apply to a registrant only upon approval by the governing board of the component society concerned. The component society Secretariat shall thereupon inform the Commission of such action.

#### CHAPTER IV GOVERNMENT REQUIREMENTS ON CONTINUING PROFESSIONAL EDUCATION (CPE) FOR PHYSICIANS

Section 41. Adoption of Government Regulations – Government policies, rules and regulations issued by the Professional Regulation Commission and the Board of Medicine governing Continuing Professional Education (CPE) for Physicians (the PMA counterpart which is Continuing Medical Education or CME) require licensed physicians to earn a minimum number of CPE units within a period of three years so as to be eligible to renew of their certificates of registration.

In order to enable PMA member to fulfill their obligations under the PMA CME Programs and at the same time comply with the requirements of the Government CPE Program for physicians, the PMA CME Commission hereby adopts the valuation of CPE units given each of the CPE activities and the valuation of individual CPE credit earnings mentioned in Board of Medicine Resolution No. 197, dated June 26, 1987 and Board of Medicine Resolution No. 15, January, 1988, as PMA CME units accredited and earned under this Code.

In order to put into effect this rule of parity between CPE and CME units, enforcement of the valuations mentioned in Section 32, 33, 32 and 35 are hereby suspended until such time as all these valuations are adopted by the PRC and Board of Medicine.

The 100 CME units per year required under this Code will enable the PMA member to earn 300 CME units, equivalent to 300 CPE units which surpasses the PRC requirement of 250 CPE units required to be earned in three years for

purposes of licensure renewal. Thus, it will be easier for the PMA member to comply with the PRC requirement.

The PMA-CME Commission shall work, through the PMA representation in the CPE Executive Committee, to have such changes made in the PRC Board of Medicine policies, rules and regulations governing CPE for physicians such that the interest of PMA members may best be served and the aims and objective of the PMA CME Program attained.

Section 42. Text of adopted Issuances – The text of current issuances of the PRC Board of Medicine governing Continuing Professional Education for Physicians, which are adopted as part of this Code, are as follows:

## BOARD OF MEDICINE

Board Resolution No. 197 June 26, 1987

Pursuant to Section 6, par. (a) of Presidential Decree No. 223, creating the Professional Regulation Commission and Prescribing its Powers and Functions, and Section 22 of R.A. No. 2382, as amended, and subject to approval by the Professional Regulation Commission, the board hereby institutes a “CONTINUING PROFESSIONAL EDUCATION for Physicians and adopts the following GUIDELINES for Accreditation thereof.

### I. FOREWORD

It shall be the obligation of every physician practicing in the Philippines to comply with the requirements for accreditation of Continuing Professional Education by the Board of Medicine, Professional Regulation Commission before one can qualify for renewal of his or her registration.

### II. OBJECTIVES

To maintain, update, and improve the scientific knowledge technical skill, competence, and patient relationship of every physician practicing in the Philippines; thereby upgrading the profession, with the purpose of better health care delivery to our people.

### III CPE EXECUTIVE COMMITTEE

An Executive committee is hereby created for the purpose of carrying out its directives towards the supervision and enforcement of guidelines for accreditation of the continuing professional education for all practicing physicians.

#### i. COMPOSITION

1. Chairman: Chairman, Board of Medicine
2. Members: (1) All members, Board of Medicine  
(2) President, PMA or his representative  
(3) Secretary General, PMA

B. FUNCTIONS

1. To formulate, amend and adopt rules governing accreditation of CPE.
2. To initiate programs of activities in the various disciplines of medicine, that will provide opportunities for practicing physicians in the various localities in the country, to earn units for accreditation to the CPE.
3. To disseminate to all practicing physicians information, directives, policies or amendments thereof regarding continuing professional education or its accreditation.

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C: MEETINGS

Regular – First Monday of January, April, July and October of each year of such hour and place to be determined by the Chairman, Executive Committee.

Special - May be called by the Chairman or upon the recommendation of any three (3) of the members.

IV ACCREDITED SCIENTIFIC ACTIVITIES AND CORRESPONDING UNIT VALUES

- A. Officially registered in Internationally recognized scientific congress of any nation which is recognized in the Philippines – 100 CPE units;
- B. Officially registered in national scientific congress – 50 CPE units;
- C. Officially registered in PMA Annual Convention – 50 CPE units;
- D. Officially registered in PMA district and regional scientific assemblies – 50 CPE units;

- E. Attendance in Medical Scientific Activities – 5 CPE units per subject hour:
  - 1. Scientific Meetings
  - 2. Scientific Conferences, Lectures, Discussions
  - 3. Postgraduate courses
  
- F. Participants in Individual Scientific Activities – 50 CPE units per subject hour;
  - 1. Discussant
  - 2. Lecturer
  - 3. Speaker
  - 4. Moderator
  
- G. Author of scientific and research papers, audio and video tapes.
  - 1. Unpublished – 50 CPE units
  - 2. Published - 200 CPE units

#### V. MINIMUM CPE UNITS

- A. Every physician engaged in active practice shall be required to submit a minimum of two hundred fifty (250) CPE units over a three (3) year period to be eligible to renew his certificate of registration.
  - 1. Sample package for a physician to earn the required CPE units in a three (3) year period. This is purely a series of attendance in local scientific meetings and PMA sponsored conventions.
    - a. Scientific meeting – 3-4 meeting per Year or a total of 10 –50 CPE units.
    - b. National, regional or district Scientific assemblies – 1-2 per year or a total of 4 – 200 CPE units.

#### B. EXEMPTIONS

Physicians practicing in rural areas which are more than fifty (50) km. From the nearest component medical society secretariat, general hospital, or medical school, shall be required to submit one hundred twenty (120) CPE units in a three (3) year period.

1. Sample package for a rural physicians to earn the required CPE units in a three (3) year period. This is purely a series of attendance in local scientific meeting and PMA sponsored conventions.
  - a. Scientific meeting – 4 in 3 years 20 CPE units
  - b. National regional or district assemblies 2 in 3 years – 100 CPE units
  
- C. Physicians practicing in rural areas which are more than one hundred (100) km. From the nearest component medical society secretariat, general hospital or medical school, shall be required to submit sixty (60) CPE units in a three (3) year period.
  1. Sample package for rural physicians to earn the required CPE units in a three (3) year period. This is purely a series of attendance in local scientific meetings and PMA sponsored conventions.
    - a. Scientific meeting – 2 in 3 years – 10 CPE units
    - b. National, regional or district assemblies – 1 in 3 years – 50 CPE units
  
- D. Physician practicing in very remote rural areas are not covered by the aforementioned classifications and shall submit a minimum number of CPE units which shall be determined by the Executive Committee on a case to case basis.

## VI. PROCEDURE FOR ACCREDITATION

- A. Certificate of attendance (which shall include in print the accredited CPE units earned) are to be obtained from the SECRETARIAT of the organizing body for the following activities:
  1. International scientific congress
  2. National scientific congress
  3. PMA Annual convention
  4. PMA District and Regional Assemblies
  
- B. Certificates of attendance for participation (which shall include in print the accredited CPE units earned) are to be obtained from the Secretariat of the organizing body; medical society, hospital, or medical school for the following activities:

1. Attendance in Medical Scientific activities such as:
  - a. Meetings
  - b. Conferences, Lecturers, Discussions
  - c. Postgraduate courses
  
2. Participant in individual scientific activities such as:
  - a. Discussant
  - b. Lecturer
  - c. Speaker
  - d. Moderator

C. Certificate of authorship

1. Unpublished – are to be obtained from the secretary of the specialty society , association, hospital or medical school who sponsored or accepted such paper.
  
2. Published – in addition to the above requirement, a certificate from the publisher shall be necessary.

VII. COMPILATION AND RECORDING OF THE EARNED CPE UNITS

- A. All practicing physicians shall submit their certificate to the Registration Division, Professional Regulation Commission for proper crediting of corresponding CPE units earned. These certificates shall remain on file with said division from one (1) year and shall be disposed of after the expiration of that period.
  
- B. Corresponding CPE units earned shall be recorded in favor of the physician.
  
- C. The CPE units earned shall be the basis for renewal of registration of the physician.

VIII. EFFECTIVITY

This guidelines shall take effect upon approval by the Professional Regulation Commission and after fifteen (15) days following its publication in the Official Gazette or newspapers of general circulation, and shall be disseminated through the Philippine Medical Association.



(Sgd.)  
JESUS G. BUSTOS, M.D.  
Chairman

(Sgd.)  
TEODORA R. OCAMPO, M.D.  
Member

(Sgd.)  
VIRGILIO G. BASILIO, M.D.  
Member

(Sgd.)  
CESR F. VILLAFUERTE, M.D.

(Sgd.)  
ARTEMIO T. ORDINARIO, M.D.

(Sgd.)  
VICTOR V. BUENCAMINO, M.D.  
Member

Attested:

(Sgd.)  
SALUD M. SAHAGUN  
Secretary

Approved as part of the Rules and Regulations of the Board  
of Medicine, This 18<sup>th</sup> day of July 1988 in the City of Manila.

(Sgd.)  
Hon. JULIO B. FRANCIA JR.  
Commissioner

(Sgd.)  
Hon. DOMICIANO C. NATIVIDAD  
Associate Commissioner

(Sgd.)  
Hon. LUIS S. TOMACRUZ  
Associate Commissioner

## BOARD OF MEDICINE

### Board Resolution No. 15 Series of 1988

WHEREAS, pursuant to Board Resolution No. 197 dated June 26, 1987, the guidelines for Continuing Professional Education Program for Physicians, was approved by the Commission, published in the Official Gazette in Volume 83 No. 36 dated September 7, 1987;

WHEREAS, the Board of Medicine promulgated Resolution No. 197 dated June 26, 1987 providing for a Continuing Professional Education Program, in order to maintain, update and improve the scientific knowledge, technical skill, competence, and patient relationship of every physician practicing in the Philippines which was approved by the Commission;

WHEREAS, the program for accredited scientific activities and corresponding unit values shall take effect fifteen days following its publication in the Official Gazette or newspaper of general circulation;

#### Credit Units –

- A. Every Physician in active practice – 250 CME
- B. Physicians practicing in rural area which are more than 50 kms. But less than 100 kms. From the nearest component medical society secretariat; general hospital; medical school – 120 CPE units
- C. Physicians practicing – rural areas which are more than 100 kms. From the nearest component medical society secretariat; general hospital; or medical school – 60 CPE units

Done in the City of Manila, this 26<sup>th</sup> day of January, 1988.

(Sgd.)  
JESUS G. BUSTOS, M.D.  
Chairman

(Sgd.)  
TEODORA R. OCAMPO, M.D.  
Member

(Sgd.)  
VIRGILIO G. BASILIO, M.D.  
Member

(Sgd.)  
CESR F. VILLAFUERTE, M.D.

(Sgd.)  
ARTEMIO T. ORDINARIO, M.D.

(Sgd.)  
VICTOR V. BUENCAMINO, M.D.  
Member

Attested:

(Sgd.)  
SALUD M. SAHAGUN  
Secretary

Approved as part of the Rules and Regulations of the Board of Medicine, this 27<sup>th</sup> day of January 1988 in the City of Manila.

(Sgd.)  
Hon. JULIO B. FRANCIA JR.  
Commissioner

(Sgd.)  
Hon. DOMICIANO C. NATIVIDAD  
Associate Commissioner

(Sgd.)  
Hon. LUIS S. TOMACRUZ  
Associate Commissioner

## CHAPTER V EFFECTIVITY, AMENDMENTS

Section 43. AMENDMENTS – This Code may be amended by a majority vote of all the members of the PMA Commission on Continuing Medical Education.

Section 44. EFFECTIVITY – This Code shall take effect upon its approval by the PMA Commission on Continuing Medical Education and its promulgation by the PMA Board of Governors.

APPROVED,

PROMULGATED, JANUARY 26, 2002

The above PMA Code for Continuing Medical Education (PMA-CME Code) was approved by the PMA Commission on Continuing Medical Education on February 1-2, 2003 **AT ITS MEETING HELD AT Tagaytay, Cavite City.**

**VICENTE V. TANSECO, M.D.**  
**CHAIRMAN**

**JOSEPHINE A. CHIKIAMCO-DIZON, M.D.**  
**COMMISSIONER**

**LOURDES M.B. BELARMINO, M.D.**  
**COMMISSIONER**

**FLORENTINO C. DOBLE, M.D.**  
**COMMISSIONER**

**NICASIO T. SALANG, JR., M.D.**  
**COMMISSIONER**

**EDWARD C. TORDESILLAS, M.D.**  
**COMMISSIONER**

**Annex A**

FORM #1-A

INDIVIDUAL APPLICATION FOR CME UNITS

PRINT/TYPE FULL NAME: \_\_\_\_\_ PMA Number: \_\_\_\_\_

CLINIC: \_\_\_\_\_ TEL. NO: \_\_\_\_\_

RESIDENCE: \_\_\_\_\_ TEL. NO: \_\_\_\_\_

COMPONENT/AFFILIATE MEDICAL ORGANIZATION: \_\_\_\_\_

I hereby apply for the corresponding CME units for the activity specified as follows:

ACTIVITY: \_\_\_\_\_

TOPIC: \_\_\_\_\_

SPEAKER: \_\_\_\_\_

DATE HELD: \_\_\_\_\_ INCLUSIVE TIME: \_\_\_\_\_ TO: \_\_\_\_\_

VENUE: \_\_\_\_\_

\_\_\_\_\_  
Member's Signature

CME UNITS EARNED: \_\_\_\_\_

\_\_\_\_\_  
PMA-CME Chairman

Form #1-B

Philippine Medical Association  
COMMISSION ON CONTINUING MEDICAL EDUCATION

GROUP APPLICATION FOR CME UNITS

COMPONENT/AFFILIATE  
SOC./ORGANIZATION: \_\_\_\_\_

ACTIVITY: \_\_\_\_\_ DATE: \_\_\_\_\_

VENUE: \_\_\_\_\_ TIME: \_\_\_\_\_

	<u>TOPICS</u>	<u>SPEAKERS</u>	<u>PMANO</u>	<u>PRCNO</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

LIST OF PARTICIPANTS/ATTENDEES

NO.: PRINT FULL NAME : PMANO: PRCNO: SIGNATURE

1. : \_\_\_\_\_
2. : \_\_\_\_\_
3. : \_\_\_\_\_
4. : \_\_\_\_\_
5. : \_\_\_\_\_

(Use as many pages as needed)

TOTAL NO. OF PARTICIPANTS/ATTENDEES: \_\_\_\_\_

SIGNATURE OF CME COORDINATOR: \_\_\_\_\_

PLEASE DO NOT WRITE BELOW:

CME UNIT GRANTED: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF COMMISSIONER IN CHARGE

\_\_\_\_\_  
SIGNATURE OF PMA-CME CHAIRMAN

FORM #2

Philippine Medical Association  
COMMISSION ON CONTINUING MEDICAL EDUCATION

REQUEST FOR ADVANCED ACCREDITATION

Date:

The Chairman  
PMA-CME Commission

Gentlemen:

May we hereby request for advanced accreditation of the scientific activity specified below:

ACTIVITY: \_\_\_\_\_

SPONSOR: \_\_\_\_\_

TOPIC/S: \_\_\_\_\_

SPEAKER/S: \_\_\_\_\_

DATE: \_\_\_\_\_ INCL. TIME: \_\_\_\_ TO: \_\_\_\_

VENUE: \_\_\_\_\_

We fully understand that we shall duly submit the names of participants immediately after the scheduled activity (using CME form #1-B) so that each member will be duly accredited with the corresponding units.

\_\_\_\_\_  
President

\_\_\_\_\_  
CME Coordinator

---

PLEASE DO NOT WRITE BELOW

CME UNITS GRANTED: \_\_\_\_\_

\_\_\_\_\_  
COMMISSIONER IN CHARGE

\_\_\_\_\_  
PMA-CME CHAIRMAN

FORM #3

Philippine Medical Association  
COMMISSION ON CONTINUING MEDICAL EDUCATION

Date: \_\_\_\_\_

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address)

Dear Doctor:

Regarding your application for CME units dated \_\_\_\_\_  
Please be informed that:

\_\_\_\_\_ : The data you submitted lacked the following

\_\_\_\_\_ : The following signature are lacking  
(Write the signature lacking)

\_\_\_\_\_ : Other reasons (specify)

You are therefore requested to complete the data so that you may be credited with the corresponding CME units.

Should you require further information regarding the PMA Continuing Medical Education Program, please feel free to communicate with us.

Sincerely yours,

Chairman  
PMA-CME Commission

FORM #4

Philippine Medical Association  
COMMISSION ON CONTINUING MEDICAL ASSOCIATION

NOTICE OF CME UNITS EARNED

\_\_\_\_\_  
(Name of Doctor)

\_\_\_\_\_  
(Address)

Dear Doctor:

This is to officially inform you that you have been granted

\_\_\_\_\_ PMA-CME UNITS

for participating in the Scientific Activity held on \_\_\_\_\_  
(Date)

as sponsored by \_\_\_\_\_.

Please be reminded that you need to earn at least One Hundred (100) PMA CME units per annum in order to be a member in good standing of the Philippine Medical Association. 30 Units of which should come from the local component society.

Sincerely yours,

Chairman  
PMA-CME Commission



FORM #5

Philippine Medical Association  
COMMISSION ON CONTINUING MEDICAL EDUCATION

Date: \_\_\_\_\_

The Professional Regulation Commission  
P. Paredes St., Sampaloc  
Manila

Gentlemen:

This is to certify that Dr. \_\_\_\_\_ of the  
\_\_\_\_\_ Medical Society with PMA No. \_\_\_\_\_  
Has earned a total of \_\_\_\_\_ Units in Continuing Medical Education covering  
from \_\_\_\_\_ up to \_\_\_\_\_ and this is therefore duly qualified to  
renew his/her license to practice

Respectfully yours,

Chairman  
PMA-CME Commission

FORM #6

Philippine Medical Association  
PMA-CME COMMISSION

INDIVIDUAL MEMBERS' PERMANENT CME FILE

NAME: \_\_\_\_\_ PMANO \_\_\_\_\_  
(Family Name) (Given Name) (M.I.)

Component Society: \_\_\_\_\_

Address: Office/Clinic \_\_\_\_\_ Tel. No. \_\_\_\_\_

Residence \_\_\_\_\_ Tel. No. \_\_\_\_\_

\_\_\_\_\_

DATE

CME UNITS EARNED

_____	_____
_____	_____
_____	_____
_____	_____

