MEMORANDUM CIRCULAR NO. 2019-08-02-012

TO : PMA NATIONAL OFFICERS AND BOARD OF GOVERNORS, COMPONENT SOCIETY PRESIDENTS
SUBJECT : REMINDER ON SUBMISSION OF PMA MEDICINE WEEK ACTIVITIES FOR PRC CPD UNITS APPLICATION
DATE : AUGUST 02, 2019

Dear Doctors,

Warmest greetings and peace!

This is to inform you that our 62nd PMA Medicine Week Celebration will be on September 22 – 28, 2019. In line with this, your events/activities during that time can be applied for corresponding CPD units. Attached herewith is the PRC form on applying for accreditation of CPD Program. The deadline for the submission of the said application is on or before August 23, 2019. For any assistance you may call at (02) 929-7361 local 108 or 0915 132 1638 and look for Mr. Jep Paguio.

Please be guided accordingly.

Thank you!

Very truly yours,

Ricardo A. Batac, MD
Secretary-General

Noted:

Jose P. Santiago Jr., MD
President
Guidelines for Application of Accreditation of PRC-CPD Program
for PMA Component Medical Societies

1. Please download the Application of Accreditation of CPD Program Form on the PRC Website (www.prc.gov.ph).

2. Kindly Supply the following information in the Form:
   - **CPD Council for:** Medicine
   - **Name of Provider:** Philippine Medical Association
   - **Accreditation Number:** 2012-001
   - **Expiration Date:** February 13, 2021
   - **Contact Person:** Rebecca W. Deduyo, MD
   - **Designation:** PMA-CME Commission Chair
   - **Contact Number:** 929 7361

3. In the **Title of the Program**, please follow this format:
   
   Name of Component Medical Society’s Title
   
   For example: Manila Medical Society’s Lecture on Asthma

4. In the Part II Acknowledgement Part of the Form (Left Side), The President, CME Chair or the Chair of the Activity may sign the form.

5. In the Part II Acknowledgement part of the Form (Right Side), this is where the form should be notarized. Please have it notarized before submitting to PMA.

6. Please attached the following documents upon submitting the application:
   - a. Specific Course Objectives Stating Competencies to be gained from Program
   - b. Evaluation Tool Specific to Course Objectives Set (Evaluation Forms)
   - c. Program of Activities showing Time/Duration of Topics/Workshop (Program of Activities must be detailed, with a breakdown of Time and Topics)
   - d. Resume of Speakers for Program Applied for, Showing Expertise in the topics/s; show certificates or citations (Curriculum Vitae)
   - e. Current Professional ID of Speaker if registered professional; if foreigner, Current Special Temporary Permit
   - f. Breakdown of Expenses for the Conduct of the Program

7. Please provide 3 sets of Hardcopies per Application in Folder with Fastener Each Copy
   - 1 Set of Original Copy – PRC Copy
   - 2 Sets of Photocopies – 1 Receiving Copy For PMA and 1 Receiving Copy for the Component Society

8. Please include a Soft Copy of the all the Application/Requirements in PDF Format saved in USB or CD

9. Please include One piece of Short Brown Envelope

10. Pay prescribed fee of :
    - Php 1,000.00 for the Application of CPD Program
    - Php 100.00 for 4pcs of Documentary Stamps
    - Php 3.00 for the Photocopy of receipt

Please take note of the following:

a. Please take note that ALL Speakers, Moderators, Panelists, Facilitators, etc. that is in the Program of Activities must have a Curriculum Vitae and an Unexpired PRC ID License.
b. Please submit the following requirements to PMA 30 DAYS prior to the activity for us to review the documents prior submission to PRC’s deadline of 15 Days before the conduct of activity.

c. Please take note that PRC will not accept incomplete Requirements and Late Submissions.

d. Please take note that when the society release a Certificate for the Attendees of the activity, The Title of the Program, PRC Approved Units and the PRC Program Accreditation Number must be on the Certificate.

e. Please make sure that when printing the form the small text on the lower right must be included.

Please take note that when issuing a certificate to your attendees, don’t forget to include the following in the certificate:

1. The Logo and the name of Philippine Medical Association
2. The PRC Program Accreditation Number which I will be sending to you once the PRC approved your Activity
3. The Approved PRC CPD Units
Guidelines for Submission of the Completion Report on PRC-CPD Program for PMA Component Medical Societies

1. Please download the Completion Report on CPD Program Form on the PRC Website (www.prc.gov.ph).

2. Kindly Supply the following information in the Form:
   - **CPD Council for:** Medicine
   - **Name of Provider:** Philippine Medical Association
   - **Accreditation Number:** 2012-001
   - **Expiration Date:** February 13, 2021
   - **Contact Person:** Rebecca W. Deduyo, MD
   - **Designation:** PMA-CME Commission Chair
   - **Contact Number:** 929 7361

3. In the Part II Acknowledgement Part of the Form (Left Side), The President or CME Chair may sign the form.

4. In the Part II Acknowledgement part of the Form (Right Side), this is where the form should be notarized. Please have it notarized before submitting to PMA.

5. Please attached the following documents upon submitting the completion report:
   a. List of Participants (Name and PRC Number)
   b. List of Lecturers, Resource Speakers, etc. (Name and PRC Number)
   c. Actual Program of Activities
   d. Summary of the Evaluation of Speakers in Tabular Form
   e. Others (please specify if any)

6. Please provide 3 sets of Hardcopies per Application in Folder with Fastener Each Copy
   - 1 Set of Original Copy – PRC Copy
   - 2 Sets of Photocopies – 1 Receiving Copy For PMA and 1 Receiving Copy for the Component Society

7. Pay the prescribed fee of **Php 50.00** for 2pcs. of Documentary Stamps

8. Please include a Soft Copy of the all the Documents submitted for the Completion Report in PDF Format saved in USB or CD
# Professional Regulation Commission

## APPLICATION FOR ACCREDITATION OF CPD PROGRAM

**CPD Council of/for __________________**

### Part I. General Information

<table>
<thead>
<tr>
<th>Name of Provider:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation No.:</td>
<td>Expiration Date:</td>
</tr>
<tr>
<td>Contact Person:</td>
<td>Designation:</td>
</tr>
<tr>
<td>Contact No.:</td>
<td>Date of Application:</td>
</tr>
</tbody>
</table>

**Proposed Program:**  
- [ ] Seminar  
- [ ] Seminar/Workshop  
- [ ] Residency Training  
- [ ] Tours & Visits  
- [ ] Others __________

**Title of the Program:**  

**Date to be offered:**  
**Time / Duration:**  
**Place / Venue:**  
**No. of times program to be conducted:**  

**Course Description:**  
**Objectives:**  
**Target Participants / No.:**  
**Registration / Seminar Fee to be collected:**

### Part II. Acknowledgment and Conforme

I HEREBY CERTIFY that the above information written by me are true and correct to the best of my knowledge and belief. I further authorize PRC and other agencies to investigate the authenticity of all the documents presented.

I agree to the PRC Privacy Notice and give my consent to the collection and processing of my personal data in accordance thereto.

_____________________________  
Signature Over Printed Name  
_____________________________  
Position  
_____________________________  
Date

### Part III. Action Taken

**Regulation Division:**  
**Processed by:**_______________  
**Date:**_______________

**Cash Division:**  
**Amount** :______________  
**O.R.No./Date** :______________  
**Issued by** :______________

Reviewed by:

_____________________________  
Chief, Regulation Division

**ACTION TAKEN BY THE CPD COUNCIL**

- [ ] Approved for _____ Credit Units  
- [ ] Disapproved  
- [ ] Deferred pending compliance

_____________________________  
Chairperson

_____________________________  
Member  
_____________________________  
Date____________________  
_____________________________  
Member  
_____________________________  
Member
**PROCEDURE FOR ACCREDITATION OF CPD PROGRAM**

1. Secure Application Form at Regulation Division of any of the PRC Regional Offices, or download at PRC website (www.prc.gov.ph).
2. Fill-out Application Form and comply the required documents. (Please provide one (1) set for receiving copy)
3. Proceed to Regulation Division of any of the PRC Regional Offices for evaluation and assessment.
4. Pay prescribed fee (in cash, Postal Money Order, Manager’s Check, Bank Draft payable to Professional Regulation Commission) of One Thousand Pesos (P 1,000.00).
5. Submit Application Form with attached supporting documents and photocopy of official receipt to Regulation Division of any of the PRC Regional Offices.
6. Verify your application after 45 days from time of submission at CPD Division by calling telephone numbers 810-84-15 (PRC-PICC), or email at prc.cpdsecretariat@gmail.com

**CHECKLIST OF REQUIREMENTS**

### SUPPORTING DOCUMENTS

- [ ] Specific course Objectives stating competencies to be gained from program
- [ ] Evaluation tool specific to course objectives set
- [ ] Program of Activities showing time/duration of topics/workshop
- [ ] Resume of Speakers for program applied for, showing expertise in the topic/s; show certificates or citations (if any)
- [ ] Current Prof. ID of speaker if registered professional; if foreigner, current Special Temporary Permit (if applicable)
- [ ] Breakdown of expenses for the conduct of the program

**Additional Requirements:**

- [ ] Short brown envelope for the Certificate of Accreditation
- [ ] Two (2) sets of metered documentary stamps worth Twenty-Five Pesos (P25.00) each to be affixed to the Certificate of Accreditation. (Available at PRC Customer Service and PRC Regional Offices)
- [ ] Soft copy of the Application including supporting attachments in PDF format saved in CD.
- [ ] Pre-paid pouch (preferably from Philpost) for applications filed in Regional Offices only.

**Note:**

1. Application for accreditation should be filed 45 days before the offering of the program/training.
2. Representative/s filing application/s for accreditation and claiming the Certificate of Accreditation in behalf of the applicant must present a letter of authorization and valid identification cards of both the authorized signatory and the representative.
3. The period for processing the application is 45 days.
4. If additional requirement/s is/are needed, a period of 15 days is given to submit the same. Failure to comply within the period shall be construed as abandonment of application and the prescribed fee shall be forfeited in favor of the government.