SPECIALTY SOCIETY/BOARD) CERTIFYING EXAMINATION

DATE:

TIME:

VENUE OPTIONS:

NUMBER OF EXAMINEES:

NUMBER OF PROCTORS:

NUMBER OF ADMINISTRATIVE STAFF:

TOTAL NUMBER OF PEOPLE:

PMA HEALTH PROTOCOLS AND GUIDELINES FOR FACE-TO-FACE SPECIALTY CERTIFYING EXAMINATIONS (WRITTEN, ORAL AND PRACTICAL)

HEALTH STANDARDS FOR EXAMINEES, PROCTORS AND ADMINISTRATIVE PERSONNEL

1. All examinees are required to wear face mask (at least a 3-ply surgical mask, preferably an N-95 mask) and a face shield. Face mask with an exhalation valve as well as cloth mask shall not be allowed. It is advisable to bring an extra face mask.
2. All proctors and personnel are required to wear face mask and face shield with the same specifications as the examinees.

3. All examinees are required to bring 70% ethyl alcohol for hand disinfection. Prior to the distribution of the test questionnaires and answer sheet, examinees shall again be required to sanitize their hands using their alcohol or hand sanitizers.

4. Physical distancing of at least two(2) meters between examinees and proctors during the examination and entire stay in the testing venue shall be strictly enforced. No handshakes will be allowed.

5. Loitering, congregating or gathering within the examination rooms or any area in the testing venue shall be strictly prohibited.

6. Duly accomplished and signed Health Declaration (attachment 1), Informed Consent (Attachment 2) and Declaration and Data Privacy Consent forms (attachment 3) will be submitted to the proctor before the start of the examination.

7. Examinees should bring their own meals (pre-packed meal, snacks and drinks) to be eaten anytime while in their assigned seats. Face masks and face shields will only be removed briefly when taking meals and drinks.

8. The (Specialty Society/Board) may provide all examinees with UV treated pencils or they may bring their own pens, pencils and erasers. Borrowing will not be allowed to prevent cross contamination.

ADDITIONAL REQUIREMENTS FOR ORAL EXAMINATIONS

1. In the case of oral examinations where the examiner and the examinee will be in front of each other:
   a. A minimum of 2 meters distance shall always be observed, with both the examiner and examinee wearing face mask and face shield.
   b. A transparent barrier made of acrylic plastic or any other similar material shall be placed in between the examiner and examinee

HEALTH STANDARDS AT THE TESTING VENUE PROVIDED AT THE ENTRANCE POINT

1. Foot bath with 10% chlorine solution shall be provided at the venue's building entrance.

2. Temperature scan will be mandatory
   a. Only Examinees, proctors or administrative personnel with temperature of less than or equal to 37.5 degrees Celsius (≤37.5°C) will be allowed entrance into the testing venue.
   b. Examinee, proctor or administrative personnel with temperature of more than 37.5 degrees Celsius (>37.5°C) will be referred to the “supervisor”, who shall refer the concerned examinee to an onsite medical doctor for assessment. Examinee will not be allowed to take the examination if temperature persists to be above 37.5°C with or without symptoms.
3. Physical distancing of at least 2 meters while queueing at the entrance and while inside the venue shall be observed at all times.

4. During breaks, examinees will be restricted to their assigned seat.

5. Appropriate air exchanges will be ensured in the testing sites. Engineering controls will be maximized to improve ventilation in the testing venues (i.e. use of open spaces, opening windows/doors throughout the test proper and using manual ventilation controls like exhaust fans, ensuring the proper use of HEPA filters and/or maintenance checks on existing HVAC systems).

6. When windows are available, they shall be opened for proper ventilation. If the room is fully enclosed, air filters or purifiers must be provided.

7. Provision of hand washing stations / hand sanitizers /70% isopropyl or ethyl alcohol in strategic areas such as high traffic areas, entrances/exits, commonly used corridors, etc. will be ensured.

8. High-touch areas, including but not limited to door handles, chairs and tables, will be sanitized as necessary.

9. Tissues and alcohol hand rub in communal areas and amenities will be provided by test venue administration.

10. All toilet facilities should have adequate water and soap for hand washing. Examinees are advised to follow recommendations to close the toilet seat lid while flushing to minimize the release of droplets into air flows after flushing.

11. The queuing time at the venue shall be kept to a minimum.:
   a. Queuing will be staggered.
   b. Examinees will be given time slot to queue in front of the entrance door.
   c. Examinees will be instructed to immediately proceed to their assigned seat.
   d. Examinees will immediately leave through the exit door after the examinations.

GENERAL GUIDELINES FOR THE CONDUCT OF PRACTICAL EXAMINATIONS

1. Practical examinations can be carried out following the general health standards and protocol for the Written and Oral face to face certifying examinations outlined above.

2. Practical examinations can also be carried out using diagnostic and therapeutic learning materials like ekg, pictures of imaging studies, histopathology slides etc, and not directly involving the patients. Since it will however involve a face to face interaction between examiner and examinee, then the additional guidelines for the conduct of oral examination should be followed.

3. It can also be carried out using actual patients particularly in the operating room for the various surgical specialties including anesthesiology. This type of examination however should follow the following guidelines:
   a. Subject Patients during the practical examinations in the operating room should have a negative RT-PCR test for COVID 19 virus 3-5 days before the surgery.
b. The procedure should be an elective case with the patient thoroughly assessed to be a good medical risk for the operative procedure and anesthesia, with the proper informed consent obtained.

c. The procedure should be done in the clean operating room and not in the COVID operating suite

d. All members of the operating and support team in the operating room like the surgeons, anesthesiologists, nurses and nursing aides should also be RTPCR negative for COVID 19 virus, or subject to the health protocol operating room requirements of the hospital where the surgery is being carried out.

e. All members of the operating and support team must also follow all the usual guidelines or protocol in the conduct of the surgery as required by the medical institution where the surgery is carried out. Particular emphasis will be placed on proper sanitation, infection control practices, and observance of sterility.

f. Proper operating room attire and PPEs (Usually Level III for non COVID cases) as required by the institution should always be worn.

g. Examiners who are not part of the operating team may designate a consultant in the operating team to serve as their examiner designee or they can monitor the giving of anesthesia or surgery performed by the examinee online via the internet.

BUILDING REQUIREMENT OR A UNIDIRECTIONAL FLOW OF PEOPLE  
( ONE ENTRANCE – ONE EXIT )

1. The map of the building or venue showing the layout of the entrance and exit points and restrooms will be available on the official (Specialty Society/Board) website

2. Location of restrooms will be indicated in the map

4. Examinees, proctors and administrative personnel will be appraised regarding the designated specific entrance and exit to be used. Signages indicating "entrance" and "exit" will be put up.

4. Administrative personnel will be assigned in designated areas to marshal the examinees and make sure social distancing is maintained.

5. A seat plan will be devised such that all participants will be facing the same direction (e.g. classroom layout). Only 1 person will be assigned per chair or table. Seat plans will be emailed to the examinees ahead of time.

6. An area shall be designated to be used to isolate any examinee or proctor who becomes ill during the examination.

DETECTION AND ISOLATION OF SYMPTOMATIC INDIVIDUALS

1. The Health Declaration Form and medical assessment will be made the basis to immediately isolate symptomatic individuals and/or close contacts.
2. Individuals detected in the entrances will be brought to an isolation area equipped with appropriate PPE for both the individual and the on-site physician. A designated entrance/exit will be made available for symptomatic individuals as well.

3. The test facility shall then provide isolation, referral, transport and contact tracing protocols for each testing facility in the event that symptomatic individuals are identified in the testing premises.

MEASURES TO INCREASE PHYSICAL AND MENTAL RESILIENCE

1. Respiratory etiquette must be practiced at all times. Use tissue or the inner portion of the elbow to cover the nose and mouth when sneezing/coughing, and dispose of tissue properly after use.

2. Proctors and administrative personnel belonging to the vulnerable individuals are advised to minimize unnecessary exposure and are assigned alternative work arrangements.

3. Smoking/vaping and spitting are not allowed within the premises.

MONITORING

1. Examinees, proctors and administrative personnel are advised to monitor themselves for the development of any symptoms such as cough, fever, difficulty of breathing, and diarrhea for the next 14 days after the examination.

2. Examinees, proctors and administrative personnel are required to inform the Specialty Society/Board immediately for proper contact tracing, if they develop such symptoms.

3. You may send an email to ____________ or call or send a text/viber message to the specialty society/Board at ____________ through their designated representative.

4. A monitor shall be assigned in the examination venue to be responsible for reporting of cases that may be identified as COVID infected, probable or suspect for the viral infection.

OTHER CONSIDERATIONS

1. For examinees, proctors and administrative personnel coming from regions outside the National Capital Region (NCR) – all concerned shall abide by LGU implemented protocols and the directives issued by the Inter-Agency Task Force on Emerging Infectious Diseases (IATF-EID) with regard to the interzonal and intrazonal movement of persons (i.e. RT-PCR test, Rapid test, 14-day quarantine, IATF pass, Travel pass etc.)

2. Quarantine procedure for administrative personnel transporting test materials will be established.
3. If an examinee fails to take the examination, he/she shall be allowed to take it in the immediately succeeding scheduled Specialty Board Examinations. As determined by the Board, provided that he/she has the following valid reason/s:
   a. Health Reason
      1). The examinee shall submit his/her letter to the Specialty Society or the Board together with a notarized medical certificate.
   b. Travel Restriction
      1). The examinee shall submit his/her letter to be accompanied by the official letter of restriction from the local government unit (LGU) concerned.

4. In case an examinee, proctor or administrative personnel develops symptoms during the event, the Specialty Society/Board shall coordinate with the LGU and DOH. This will ensure that a system is in place to detect and trace cases arising in the local population as a consequence of the event. Individuals who develops symptoms during or after the event are advised to contact the LGU or other health authorities.

5. The PMA and the Specialty/Subspecialty Society/ Board, shall designate a representative/s to monitor the conduct of the examination to see to it that the necessary health protocols and consolidated guidelines are strictly followed. They shall also be responsible for reporting any violations committed during the conduct of the examinations, as well as inform the PMA, who shall in turn investigate the matter and make the necessary sanctions or disciplinary actions after due process.