



Philippine College of Surgeons

POSITION STATEMENT OF THE PHILIPPINE COLLEGE OF SURGEONS ON THE PROPOSED IMPLEMENTING RULES AND REGULATIONS (IRR) OF THE PROFESSIONAL REGULATORY BOARD OF MEDICINE (PRBOM) FOR PRC RESOLUTION NO. 25 (S 2015), ENTITLED “RECOGNITION OF SPECIALTY SOCIETIES AND SPECIALTY BOARDS, AND CERTIFICATION OF SPECIALISTS”

Introduction

The Philippine College of Surgeons (PCS, College) welcomes the formulation of the IRR for PRBOM Resolution no. 25 (S 2015) that, though overdue, will settle questions on specialists in the medical profession. The College likewise appreciates the opportunity given by the PRBOM of the Professional Regulation Commission (PRC) to give its inputs and hopes that the PRBOM would approvingly consider these suggestions. The officers of the College would be happy to meet with the Board if further clarification is necessary.

The College, established in 1936, is the national organization of surgeons (referred to as “Fellows”) of all surgical specialties and subspecialties who have been certified by their particular professional specialty board and who maintain continuously their professional competence and personal integrity. Its members are also members of their own specific subspecialty surgical societies with their own qualifications.

The College is recognized as the leading surgical specialty society in the Philippines, known within the ASEAN region and likewise recognized by the American College of Surgeons of North America and Canada and the Royal College of Surgeons of the United Kingdom.

Suggestions

1. Sec 3 no. 3.11 Specialty Society...

“...organization of accredited licensed specialist physicians which has a PRC recognized training program and a specialty board which certifies its individual members...”;

The College suggests:

“...organization of accredited licensed specialist physicians who have completed a PRC recognized training program and passed the specialty board examinations conducted by their corresponding PRC recognized specialty board which certifies its individual members...”;

Rationale:

The reason passing the recognized specialty board should be included is because we would like to emphasize that the certifying exam must come from the board that is specifically recognized by the specialty society and which has a proven track record for this purpose.

2. Sec 3 no. 3.13 Specialty/subspecialty board...

“...and confers the title Diplomate/Fellow to those who have passed the same. They also accredit the training program for the different specialty fields.”

The College suggests:

“...and confers the title Diplomate to those who have passed the same. They may also accredit the training program for the different specialty fields as agreed upon by the subspecialty society and its recognized subspecialty board.”

Rationale:

"Diplomate" is a title officially conferred on those who successfully pass their respective specialty board examination. "Fellow" is a title conferred on Diplomates who meet further criteria to be full-fledged active and publicly recognized members of the specialty society.

3. Sec 3 no. 3.14 Accredited Training Institution/Hospital for Specialization...
"...accredited by the specialty/subspecialty boards..."

The College suggests:

"...accredited by the specialty/subspecialty society or the recognized specialty/subspecialty board..."

Rationale:

Training programs are accredited by either the specialty society or their specialty board. Different specialty societies have different arrangements with their specialty boards.

4. Sec 3 no. 3.16 Certificate of Recognition as Specialty/Subspecialty Societies or Specialty/Subspecialty Boards...
"...document issued to specialty/subspecialty societies or specialty/subspecialty boards..."

The College suggests:

"Sec 3 no. 3.16 Certificate of Recognition as Specialty/Subspecialty Societies with their corresponding recognized Specialty/Subspecialty Boards..."

"...document issued to specialty/subspecialty societies with their corresponding recognized specialty/subspecialty boards..."

Rationale:

To make it more specific and clear, it may be necessary to use the words "recognized", "corresponding," or "appropriate." Some specialty and subspecialty societies have separate certifying boards, independent from the specialty/subspecialty society.

5. Sec 3 no. 3.17 Certificate of Recognition as Specialist/Subspecialist...
"...after having passed the certifying examinations and awarded the title Diplomate or Fellow by the app specialty/subspecialty board;

The College suggests:

"...after having passed the certifying examinations conducted by the corresponding specialty/subspecialty board and conferred the title Diplomate or after having been conferred the title Fellow by the corresponding lead specialty society;

Rationale:

Among specialty societies, "Diplomate" refers to a physician who has passed a certifying board. It is not universal that all Diplomates are automatic Fellows of a particular specialty/subspecialty society. Some specialty societies confer the title "Fellow" only after the candidate pass a certifying exam, meet a particular set of criteria particularly regarding ethical professional practice and after a prescribed period of time.

6. Sec 4. Applicability...
"4.4 Diplomates and Fellows of recognized specialty/subspecialty societies and specialty/subspecialty boards."

The College suggests:

"4.4 Diplomates of recognized specialty/subspecialty boards and Fellows of recognized specialty/subspecialty societies."

Rationale:

As per #4 and #5 above, the title of Diplomate and Fellow is not interchangeable. Hence, the need for specificity.

7. Sec 5. Requirements and Procedure for Recognition

"5.1 Recognition of Specialty/Subspecialty Societies. The Board and the Commission shall confer recognition to specialty/subspecialty societies and specialty/subspecialty boards in a particular specialty area of practice in medicine."

The College suggests:

"5.1 Recognition of Specialty/Subspecialty Societies. The Board and the Commission shall confer recognition to specialty and their subspecialty societies with their corresponding specialty/subspecialty boards in a particular field of practice in medicine."

And to **retain** the following as **originally** stated in PRBOM Resolution no. 25 (S 2015):

"To maintain high competency and professional standards in the practice of the specialty, only one (1) specialty society in an area or field of practice will be conferred recognition."

Rationale:

The statement is to retain the PRBOM Resolution No. 25 (S 2015) as was previously passed by the Board. Maintaining the status quo is best, with recognition of the specialty societies which have been managing the concerns and practice of that particular field of medicine in the country for decades. Proliferation of overlap or worse, multiple societies in a single field of medicine will result in a chaotic environment each with different standards.

The College understands that the Commission prefers inclusivity rather than exclusivity; however, it cannot be overemphasized that this is a matter of setting standards and not simply to include a particular group in a select class. Any individual or group who cannot meet the set standard for "specialist" is not qualified to be called such, most especially in the field of surgery. It is the Commission's responsibility to determine the standard to be used.

As an analogy, the Commission has set the grade of "75" as the passing grade for individuals taking licensure examinations whether the person would be practicing in the remotest and most archaic barangay or the most advanced urban city. Simply stated, there cannot be more than one standard.

8. Sec 5. Requirements and Procedure for Recognition

"5.2 Requirements for Recognition...

General Requirements:"

The College suggests to **retain** the following under *General Requirements* as stated in an earlier version of this draft IRR:

"Certificate from the APO Commission on Specialization endorsing the application of the specialty society:

Rationale:

The importance of the APO (currently the Philippine Medical Association PMA) is emphasized as it is crucial in the monitoring of specialty societies. Lead specialty societies (as recognized by PMA) have been shown to historically settle differences among overlap subspecialties and prevent unnecessary or even spurious subspecialty societies. The counsel of years of experience and leadership by the lead specialty society gives it the wisdom to decide legitimacy of new subspecialty societies and their boards.

If there is no endorsement from the lead society, it is not far-fetched to imagine that any aggragation of doctors may request recognition from PRC resulting to a chaotic situation and ultimately causing the loss of standardization.

9. Sec 5. Requirements and Procedure for Recognition
"5.3 Procedure in the Filing, Processing and Approval of Applications for Recognition: ..."
"The Certificate of Recognition shall bear the following annotations:
"Specialty Society authorized by the Professional Regulation Commission to conduct
residency/subspecialty training in the field of (_____)"

"Specialist/subspecialist recognized by the Professional Regulation Commission to
practice in the field of (_____)"

The College suggests:


"Specialty Society authorized by the Professional Regulation Commission to conduct
residency/fellowship training in the field of (lead specialty - subspecialty)"

"Specialist/Subspecialist recognized by the Professional Regulation Commission to practice in
the field of (lead specialty - subspecialty)"

Rationale:

The Professional Regulation Commission is the agency that regulates the practice of
medicine in the country. Giving the government's seal of approval for training and
certification of specialists/subspecialists in the country facilitates recognition of our trained
doctors by foreign governments and agencies.

For: The PHILIPPINE COLLEGE OF SURGEONS, INC.

By: 
GEORGE G. LIM, MD, FPCS
President

Date: June 6, 2019