



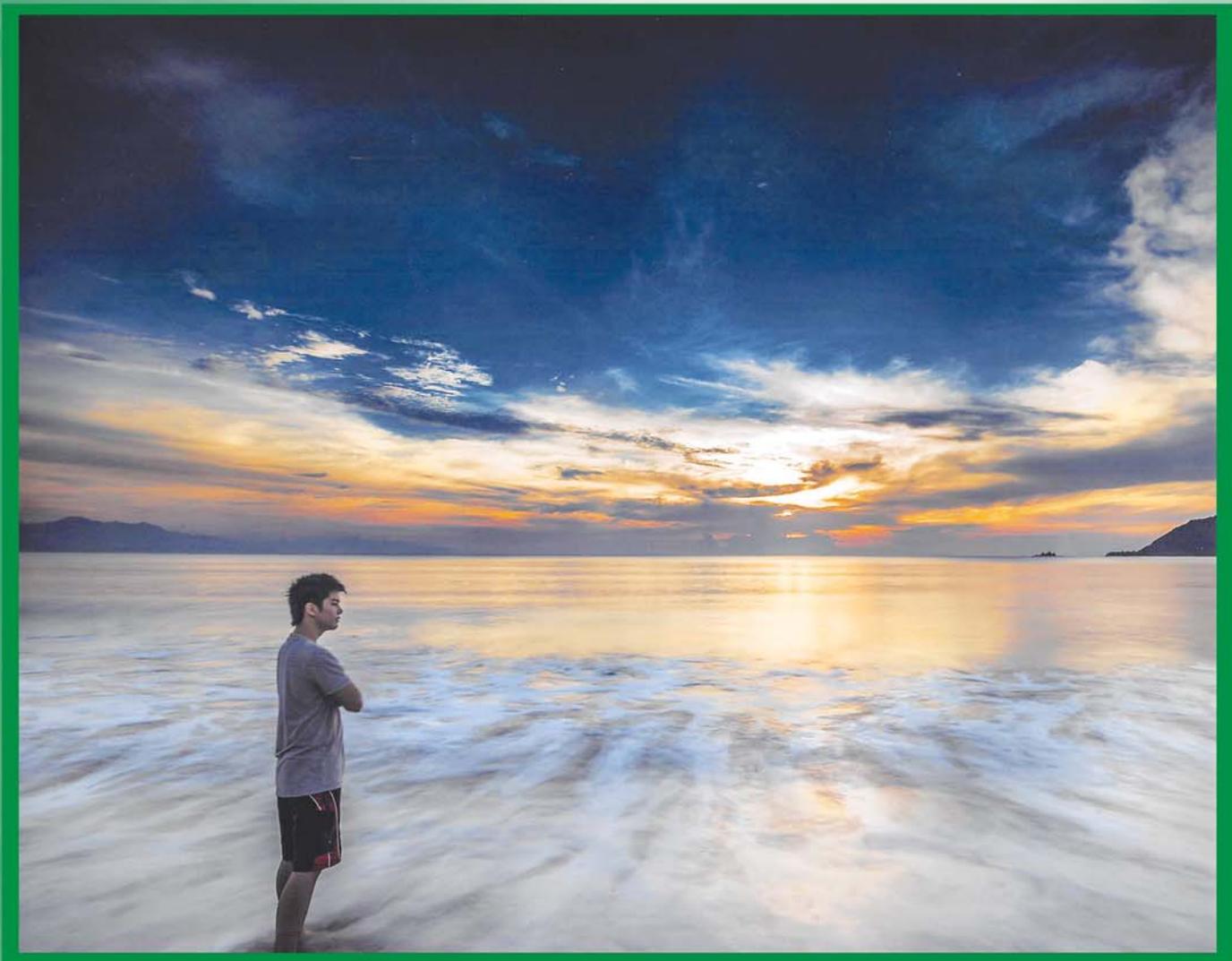
Incisions

The Newsletter of the Philippine College of Surgeons

Volume 34 Number 3

pcs_1936@yahoo.com/[ph/www.pcs.org.ph](http://www.pcs.org.ph)

October - December 2014



Maria Concepcion C. Vesagas, MD, FPCS
Editor-in-Chief

George G. Lim, MD, FPCS
Regent-in-Charge

Marwin Emerson V. Matic, MD, FPCS
Jose S. Pujalte Jr., MD, FPCS
Marcus Jose B. Brillantes, MD, FPCS
Editorial Staff

Jemme O. Dioquito
Nelson P. Cayno
Production Staff

Incisions, the PCS newsletter, is a triannual publication of the Philippine College of Surgeons, 992 EDSA, Quezon City 1005, Tel. No. 928-1083. Comments and feedback indicating the writer's full name, address, contact numbers and e-address are welcome. Letters to the editor may be edited for reasons of clarity and space. E-mail to pcs_1936@yahoo.com.ph



Our Cover

PEACEFUL RESPONSE by
Dr. Raymond Rodol P. Marquez.
Finalist in the 9th Photo Contest
2013 with the theme "Serenity"

In This Issue

- 11 Lagdameo is This Year's G.T. Singian Lecturer
- 13 Legends of the Knife
- 16 Biking as a Healthy Option for Aging Surgeons
- 25 PCS, ACS, Boats in Tacloban
- 26 78th Foundation Day Activities
- 28 2014 PCS Board of Regents: Candidates

Regulars

- 2 EDITORIAL
- 3 FROM THE PRESIDENT
- 5 ACROSS THE BOARD
- 17 LEGACY
- 19 ASSOCIATION NEWS
- 21 CHAPTER NEWS

EDITORIAL

Lists



Maria Concepcion C. Vesagas, MD, FPCS

In 2007, a movie "added" a term to the dictionary. Edward and Carter are two strangers of entirely different worlds who are brought together by a medical condition. They are both dying and fate lands them sharing a hospital room. Throwing their luck to the wind, they leave medical care and go on an adventure even if their personalities are poles apart. One by one, they tick off items in their to-do list, their "bucket list" and enrich their lives along the way.¹

Surgeons, too, have their lists. While in training as residents, they keep track of operations they have finished and dutifully write them down. They watch out for procedures that they have not yet accomplished and seek the cases to complete these. Later in their career as the number of operations pile up, they collate their data and write papers. And as papers pile up, they present papers they have written and lecture, too. There is absolutely nothing wrong with this but there are other items we should not forget.

Be a student. Even when training has ended, learning should not. Techniques surgeons learn during residency are the basis of whatever future surgeries they do. But it does not stop there. There are procedures that are being conceived and developed by innovators that approach surgical disease just as effectively, or even more efficiently. Concepts in science change and constantly intrude into the surgical world. Surgeons should keep abreast of these developments.

Be a teacher. Surgeons take the role of teaching the younger generation theories, concepts, the proficiencies needed in an operation. Teaching should also go beyond the operating room and classroom. Surgeons should also take the role of teacher to patients and their families. The internet provides information that can be easily misunderstood and it is the surgeon's job to interpret concepts that befuddle. No greater compliment and sense of fulfillment shall surgeons give to their teachers if they become teachers themselves.

Be a mentor. Mentoring goes beyond teaching. This is a two way process that goes beyond the teacher student relationship. Although the teacher has more knowledge than the student, the mentor brings perspective into the equation. Learning should not be limited to taking in facts, the student should be able to develop his own critical thinking and carve a path that he wants to pursue.

Be a healer. One should never forget that surgeons, above all, are physicians. We have committed to abide by one of the oldest professional oaths in history. It is a career that many are eager to pursue but only a select few eventually attain. You might not recall the full text of the Hippocratic Oath, but it behooves you to remember of how it ends, "May I always act so as to preserve the finest traditions of my calling and may I long experience the joy of healing those who seek my help."²

References

¹ The Bucket List (2007), Warner Bros, directed by Rob Reiner

² Hippocratic Oath version by Louis Lasagna, Dean of the School of Medicine at Tufts University, 1964

As the current year draws to a close, it is perhaps proper to look back and revisit what the incumbent PCS Board of Regents has done well, missed to do and how things can be done better in the future. As a point of reference, in my inaugural address as President of the PCS last December 2013, I presented the platform upon which the incumbent Board of Regents shall structure its programs. I zeroed in on 5 main cornerstones that would serve as the foundation of my yearlong governance - professionalism, patient safety, social responsibility, globalization and effective and sound governance and fiscal management. A more detailed accounting of accomplishments around these areas will be forthcoming in the President's Annual Report but allow me to summarize some key achievements in these vital areas.

Enlightened PROFESSIONALISM in the practice of surgery has always been one of the topmost priorities of the PCS as a collegial organization. The PCS through its various committees notably those on Surgical Education, Conventions and Surgical Training have undertaken a myriad of activities to champion the cause of professionalism and professionalization. Activities like the "endorsement of the curriculum on professionalism" prepared by the 2008 Committee on Surgical Training and launched during the 72nd PCS Foundation Day were intended to streamline the art and science of surgical practice. Other noteworthy events like conventions, conferences, post-graduate courses were carried out to promote the aspirational value of life-long commitment to excellence and competence in the science of surgery. Cognizant of the fact that role-modeling and experiential learning are two of the best ways to teach and make an indelible mark in the minds and hearts of learners, the Board of Regents "walked the talk" this year by conducting its meetings in the past ten (10) months anchored on "discussion and dissection of pressing issues" without singling persons and personalities. The "healthy environment" of mature persuasion, disagreeing without being disagreeable, agreeing to disagree and disagreeing with pronouncements and not with people have clearly demonstrated our maturity and mutual respect for each other's opinion.

The PCS has reinforced the core value of patient safety. Aware of the fact that as surgeons it is our primordial duty and responsibility to ensure that patients experience the benefits of our rational

FROM THE PRESIDENT



Jesus V. Valencia, MD, MHPEd, FPCS

decisions, the PCS has scored concrete accomplishments along this end. The Committee on Quality Assurance and Patient Safety is presently in the process of encoding the "surgical safety checklist report of 2013" of the accredited training programs, working actively with the Joint Coordinating Council on Accreditation and Certification (JCCAC). This will include, as a requirement for all accredited training institutions, the assignment or appointment of an "independent or non-bias safety and quality officer" who will gather data, measure compliance and report outcomes to the PCS. The concepts of quality assurance and patient safety have been included in the general surgical residency training curriculum cascaded to the different training institutions. A research proposal on the "PCS Pilot Study on Surgical Safety and Quality Assurance" was presented October 4, 2014. A symposium on "patient safety and quality assurance initiative" will be conducted during the PCS' 70th Annual Clinical Conference on November 30, 2014.

The concern on globalization and internationalization was also vigorously addressed. Close coordination with concerned institutional stakeholders including the Commission on Higher Education (CHED) and the Professional Regulations Commission (PRC) yielded revisions and updating of the general surgery residency training curriculum. The Committee on Surgical Training took the lead in this area. Several meetings and workshops were held in coordination with both the CHED and PRC to effect a smooth transition to and implementation of the ASEAN Integration and Mutual Recognition Agreement (MRA). To provide constancy and focus in this emerging trend in regional surgical practice, the PCS appointed a "permanent representative" to the Committee on International Relations, in the person of a distinguished surgeon and immediate PCS Past President, Dr. Alfred H. Belmonte, to monitor ongoing efforts towards internationalization and

globalization. The PCS President, Vice-President and/or the Chair of the PCS Committee on International Relations attended the Annual Scientific Congresses of our neighboring ASEAN countries like Singapore, Malaysia, Thailand and Hong Kong. Likewise, a similar representation was present during the American College of Surgeons (ACS) Convention where international concerns, solutions and opinions were exchanged and appreciated. Similarly, the PCS President and/or his representative also had the opportunity to be invited as guests and/or speakers in the surgical gatherings of these regional countries.

The PCS actively involved itself in relief and rehabilitation efforts to victims of super typhoon "Yolanda" through the galvanized action of its fellows in PCS Chapters surrounding the heavily damaged areas of Cebu-Eastern Visayas, Negros Occidental and the island of Panay. A donation of cash was extended to some of the PCS Chapters affected including sixteen (16) PCS fellows badly hit by the typhoon. The PCS also donated sixteen (16) motorized boats to selected but deserving parolee inhabitants in Tacloban Leyte to assure them of a steady source of livelihood and hasten their return to mainstream living. The PCS conducted nationwide simultaneous socio-civic action through blood-letting, medico-surgical missions and environmental protection.

Sound and effective governance coupled with fiscal management is the final cornerstone of my leadership. The "management information system" (MIS) started last year is currently almost 100% operational allowing the more efficient generation of reports for accounting purposes as well as more efficient handling and updating of members' data. Job descriptions of the Secretariat Staff were reviewed and revised based on new committee assignments to allow 3 neatly weaved work flow towards enhanced administrative functioning. "Policy Statement Guidelines" on the conduct of local and foreign surgical missions and the "chapter code" intended to guide the different PCS Chapters in administrative operations including maintaining the good standing status of PCS members were formulated. The Committee on Internal Audit initiated timely changes in setting up

policies on financial transactions for cash, receivables, property, equipment, income and expenses. Internal control on cash management was strongly observed. Operational expenses were revisited with careful and deliberate placement of long term investments embarked upon.

In behalf of the PCS Board of Regents, allow me to eternally thank and congratulate the chairs and members of the different committees, as well as the officers, and members of the twelve (12) PCS Chapters for their incomparable dedication and hard work for making the year 2014 truly productive and memorable.

Mabuhay ang PCS! Mabuhay ang Siruhanong Pilipino!

Philippine College of Surgeons

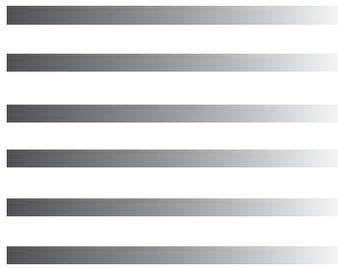
41st midyear CONVENTION

EMERGING TRENDS IN EMERGENT EVENTS

Host: Southern Tagalog Chapter

MAY 8-9, 2015
TAAL VISTA HOTEL
TAGAYTAY CITY

For Inquiries:
Please call the PCS Secretariat
Tel. Nos.: 927-4973 • 927-4974 • 928-1083
Fax No.: (632) 929-2297
E-mail: pcs_1936@yahoo.com.ph
Website: <http://www.pcs.org.ph>



ACROSS THE BOARD

George G. Lim, MD, FPCS, FPSGS, FPSCRS, FPALES



Greetings to all our Fellows!

The Board of Regents met monthly in the last three months and I would like to report to the membership the highlights of each of those. As in last issue's report, these meetings were held in the G T Singian Board Room and lasted on the average from 1200NN to past 600PM.

7th BOARD OF REGENTS MEETING

July 26, 2014 (Saturday)

Union of Local Authorities of the Philippines (ULAP)

The Board approved to incorporate the College's existing guidelines for local and foreign surgical missions into a single policy and incorporated this into the draft Memorandum of Agreement with ULAP, which is subject to their response.

Treasurer's Report

Summary of Cash Transactions

Beginning Balance	Php 103,159,869.06
Add: Receipts	1,518,439.49
TOTAL	104,678,308.55

Disbursements:	902,539.25
Plus: Outstanding Checks	881,742.34
TOTAL CASH FLOW	Php 1,784,281.59

BALANCE	102,894,026.96
----------------	-----------------------

Less:	
Unrealized Loss on Investment	(177,204.82)
Travel Allowance (US\$525)	(22,903.13)
Loss on Forex	(48,996.35)

CASH BALANCE—June 30, 2014	Php 102,644,922.66
-----------------------------------	---------------------------

Guidelines of Reimbursements for Travel Expenses

With the increasing reimbursements requested for travel expenses of committee members from out of town, the Board asked the Committee on Finance to formulate draft guidelines regarding this.

Investments

The Board approved investing the amount of USD50K with the AXA Premium Bond Fund and Php 5M with PhilamLife Fund. Said amount will be withdrawn from existing slow-moving accounts.

PCS Building

A burglary occurred at the PCS Secretariat office last July 1, 2014 where cash and valuables worth Php153,700.00 were stolen.

The contract security agency reimbursed the College this amount and proposed additional security measures. The Board approved purchasing additional CCTV cameras and a new safety vault, along with additional structural improvements.

The Board approved engaging the services of a professional group to appraise the current value of the PCS lot and building.

Fellows Assistance Plan (FAP)

The Board approved revising the FAP Implementing Guidelines to include Fellows who develop Total Permanent Disability.

Internal Audit

Upon the recommendation of the Committee on Finance, the Board approved the implementation of new policies regarding financial transactions and inventory method.

70th Annual Clinical Congress

The Board discussed and approved the proposed preliminary scientific program, speakers, and session chairs for the 70th Annual Clinical Congress on November 30-December 3, 2014 at the Edsa Shangri-La Hotel with the theme: Technology and the Changing Practice of Surgery.

Trauma

The Board discussed creating a Trauma Registry through the Committee on Trauma in coordination with concerned government agencies and likewise asked the Committee to rationalize the various PCS trauma courses.

Surgical Research

The committee updated the Board regarding developments on the EBCPG on Acute & Chronic Wound Care. With the withdrawal of the sponsor, the Board approved spending for its formulation.

Surgical Training

The Board approved seeking the assistance of Unilab's IT office to create a Surgical Manpower Database.

Quality Assurance and Patient Safety

The Board approved a more meticulous approach to reporting of outcomes such as the appointment of a Safety and Quality Officer and the use of the PCS-WHO Surgical Safety Checklist template.

Membership

The Board approved to increase the Induction Fee to Php5,000.00 plus Php3,000 for the convention registration. Included are 2 photographs for new Fellows in their togas: one while receiving their certificates onstage with the President and another one with the PCS photowall as backdrop.

By-Laws and Amendments

The Board discussed the rationale for the proposals and the timeline for the ratification.

Foundation Day Celebration

The Board discussed and approved the simultaneous College and Chapter activities and the budget for this.

Internal Audit

The Board approved the re-assignment of office employee responsibilities according to the business flow of College transactions.

70th Annual Clinical Congress (ACC) – November 30-December 3, 2014

The Board discussed the Opening Ceremony program, sessions, invited speakers, and Fellowship Night. This year's Dr. Gregorio T. Singian Memorial Lecturer shall be Dr. Willie N. Lagdameo, PCS President, 1991.

The Board approved sponsoring the snacks for the first 50 registrants for each of the 5 Kapihan sa PCS sessions.

Continuing Professional Development

The Board approved the initial scientific program for the ACC and assigned the Session Chairs and Moderators.

Trauma

The Board discussed the formulation of a PCS Disaster Plan in cooperation with other stakeholders. The Board also approved purchasing a year's supply of books for the 2015 ATLS Courses in order to save on shipment costs.

Cancer

The Board approved the committee's draft position statement on Alternative non-FDA approved Cancer Treatments and would invite other surgical and medical organizations for additional support.

The Board also approved a proposed budget of Php 120,000 for the purchase of t-shirts, posters, tarpaulins, and brochures for distribution to the Chapters as part of the preparations for the 2015 National Cancer Consciousness Week scheduled on the 3rd week of January.

The Board decided to cancel the proposed Fun Run for cancer consciousness due to excessive risks.

Surgical Infection

The Board discussed the final draft of the PCS-ORNAP collaborative publication on Guidelines for Operating Rooms in the Philippines.

Surgical Training

The Board approved the Surgical Manpower Database software for use by the College.

Quality Assurance & Patient Safety

The Board approved to consolidate the 2013 Surgical Safety Checklist reports in a database format for future use.

By-Laws and Amendments

The Board reviewed the proposed amendments to the Articles of Incorporation and By-Laws and the timeline for its ratification. After a long discussion, the Board decided to again seek legal advice on several items.

External Affairs and Public Relations

The Board finalized and approved the 78th PCS Foundation Day activities.

9thBOARD OF REGENTS MEETING

September 27, 2014 (Saturday); 12:00 Noon

Management Information System (MIS)

The Board approved retaining Hostgator as the commercial host web server for the PCS website.

Treasurer's Report

Summary of Transactions

Beginning Balance	Php102,090,299.85
Add: Receipts	<u>1,650,550.16</u>
TOTAL	103,740,850.01

Disbursements:	1,275,160.56
Plus: Outstanding Checks	<u>214,219.25</u>
TOTAL CASH FLOW	Php 1,489,379.81

BALANCE	102,251,470.20
---------	----------------

Less:

Unrealized Gain on Investment	(185,360.72)
Unrealized Gain on Dollar Rate	<u>(1,019.28)</u>
	102,437,850.20

Less: ATLS Student Manual	<u>82,069.84</u>
CASH BALANCE-August 31, 2014	Php102,355,780.36

Long Term Investment (66.62%)	68,192,053.00
Short Term Investment (2.58%)	2,640,127.28
Dollar Account (9.43%)	9,650,969.12
Cash in Bank	<u>21,872,630.96</u>
	Php102,355,780.36

Finance

The Board approved consolidating several dormant savings accounts amounting to Php4.5M and investing this with Balanced Funds.

Conventions

The Board discussed the final preparations for the 70th Annual Clinical Congress and the initial arrangements for the 41st Midyear Convention on May 8-9, 2015 at Taal Vista Hotel, Tagaytay City.

Continuing Professional Development

The Board discussed the final changes in the scientific program for the 2014 ACC.

Trauma

The Board approved the conduct of a workshop to formulate a PCS Disaster Plan.

Surgical Infection

The Board approved the committee's proposed "Back to Basics: OR 101" education module for surgical residents and operating room nurses for 2015.

Surgical Research

The Board approved the committee's recommendation of updating some of the existing PCS Evidence-based Clinical Practice Guidelines for 2015.

Surgical Training

The Board approved hiring a data encoder to digitize the existing manpower statistics and discussed its ACC session on surgical resident working hours.

Membership

The Board approved the program during the ACC for initiates including applications for Fellowship that were deferred and a lone request for reinstatement.

COMELEC

The Board approved the list of candidates for the 2015 Board of Regents.

By-Laws and Amendments

The Board reviewed the proposed amendments to the Articles of Incorporation and By-Laws as formatted by Atty. JJ Disini.

SURE & Outreach Services

The Board approved purchasing of various surgical instruments to be used during its planned 2015 activities.



PCS FOUNDATION, INC.

**JOIN THE
GT SINGIAN LEADERSHIP SOCIETY TODAY!**

Donate-for-a-Cause

For further details, contact:

Phone : 02-454-29-21; 9274973 to 74; 928-10-83
E-mail : pcs_foundation@yahoo.com.ph

Please send your Donation to:

Philippine College of Surgeons Foundation, Inc.
4/F PCS Building, 992 EDSA Quezon City 1005, Philippines
Phone: 02-454-2921/927-4973 to 74
Fax: 02-929-22-97

Or

Philippine College of Surgeons Foundation, Inc.
Banco De Oro Savings Account No.: 00- 40-500-258-79
SM City North EDSA Branch, Quezon City, Philippines

Or

Philippine College of Surgeons Foundation, Inc.
Metrobank Savings Account No.: 198-7-19855071-6
West Avenue Branch, Quezon City, Philippines

“Your donation is tax-deductible”.

Dr. Lagdameo is this year's GT Singian Lecturer



Dr. Willie N. Lagdameo
*2014 G.T. Singian
Memorial Lecturer*

Willie N. Lagdameo, MD, FPCS, FPSPS, FACS, our GT Singian Lecturer is one of the luminaries in the field of Pediatric Surgery in the Philippines. The preponderance of his accomplishments exhibited immanent altruism for the last 40 years. His determination in making a difference in the lives of others is still practiced in top-tiered Metro Manila hospitals.

As a graduate of the University of Santo Tomas Faculty of Medicine and Surgery, his sublime knowledge and abilities in Pediatric Surgery were honed making him an educator, who rose from the ranks. From a Supervisor in Surgery (1975-85) to eventually attaining Full Professorship in 1990, becoming the Director for Continuing Medical Education (1989-99) and member of the Dean's Faculty Council (2002-06). Moreover, he served as Section Chief of Pediatric Surgery (1975-99) and Chairman in the Department of Surgery (1996-2002) at the UST Hospital.

A natural born leader, he transcended as a prime mover in Philippine as well as International Surgery spearheading innovations and instituting reforms. He served as President of the Philippine College of Surgeons (1991) and Asian Surgical Association (1993-95), Philippine Society of Pediatric Surgeons (1995-96), American College of Surgeons (Phil Chapter 1998-99) and Chairman Board of Governors PCS (1995)

He is the author of numerous award winning research papers majority of which deals with Hirschsprung's Disease and pioneered the One Stage Transanal Endorectal Pullthrough which is still being practiced today.

Furthermore, he is also a recipient of various awards in the academe and the private sector most notably TOYM Awardee by the Jaycees (1980), Special Achievement for Humanitarian Service by the UST High School (1982), "Legends of the Knife Award" PCS (2004), Most Outstanding Professor by the UST (2005), Dr. Jose Rizal Outstanding Medallion by the Philippine Medical Association (2006), Most Outstanding Jubilarian by the UST Medical Alumni Association in America (2007). He delivered the 226th Dr. Luis E. Guerrero Memorial Lecture at the UST Faculty of Medicine & Surgery (1992) and the 30th Dr. Castor T. Surla Memorial Lecture also at the UST Faculty of Medicine and Surgery in 2011.

To this day, Dr. Willie N. Lagdameo's tenacity fueled him to earn his place in the world of Pediatric Surgery allowing him to outstretch this edge by getting certified as Dr. Sears L.E.A.N & Prime-Time Health Coach in 2011. And with a more health conscious society, he helps people shape their behavior that affects their lifestyle, exercise, attitude, nutrition. Hence, gearing them up towards better living by creating effective health and wellness solutions.



The Honoree
Dr. Gregorio T. Singian
PCS Founding President



IN MEMORIAM

The PCS remembers the fellows who have departed from the operating theaters in 2014. They shall be missed.

Francisco Y. Yan
Fausto F. Mabanta
Enrique C. Lim
Nicanor. D. Montoya
Teresita L. Tongson
Cesar A. Millar
Conrado C. Yap
Leoncio Noche
Demetrio Famorca
Ramon Celo, Jr.
Manuel Jarbadan
Ma. Dolores D. De Leon
Bienvenido Aldanese
Alexis L. Uy
Serafin C. Hilvano
Ruben S. Añonuevo
Flordeliza M. Baltazar

Legends of the Knife 2014

The Philippine College of Surgeons through the Committee on Awards is pleased to announce the recipients of the Legends of the Knife Award for the year 2014. The honor is bestowed on fellows of the PCS who are at least 60 years old, have been involved in teaching and training of surgeons, must have made significant contributions to surgery, and should be alive at the time of selection. The following will be honored during the Annual Dinner and Induction of the 2015 Board of Regents on December 2, 2014 at the Isla Ballroom, Edsa Shangri-la Hotel.

Ramon A. Pastor, MD

Dr. Ramon Pastor of Batangas City is the most senior of this year's crop. Born in 1929, Dr. Pastor completed his medical schooling at the University of Santo Tomas in 1955 and took his internship at Yonkers General Hospital in New York. He finished his general surgery at the New York Polyclinic Medicine School and Hospital and served as Chief Resident during his last year of training. (He can claim to have been closely acquainted with Marilyn Monroe, having operated on her gallbladder in June 1961.) In 1964, he became a diplomate of the American Board of Surgery but chose to come back to his hometown in Batangas City the following year. In his words, "There are enough trained surgeons in Manila, it is here where I am needed most - in Batangas."

Dr. Pastor was one of the pioneers of the Philippine Board of Surgery in 1969 and sat as examiner for more than ten years. He organized surgery training at the Batangas Provincial Hospital and was instrumental in its recognition as an accredited program for surgical training. He was a member of

the PCS Board of Regents for 5 consecutive years (1985-1990). He holds the chairmanship at the Department of Surgery of the Saint Patrick's Hospital Medical Center at Batangas City, a position he has had for the past 41 years. To this very day, Dr. Pastor continues to see patients and conducts surgical procedures at 83 years old.



DR. PASTOR

Dr. Pastor shares his expertise in the field of surgery in the Southern Tagalog region, with his practice encompassing the provinces of Batangas, Quezon, Laguna, Cavite, Marinduque, Mindoro and Romblon. He was given the Most Outstanding Physician for Batangas by the Philippine Medical Association in 1972 and 1973 and was given the "Dangal ng Batangas", the highest provincial award for excellence in the field of Medicine in 1978. He was the first recipient of the Master of the Knife by the PCS Southern Tagalog Chapter. In 2008, he was given the Presidential Award and the following year, the Dr. Jose Rizal Memorial Award, both by the PMA. He was given the Dr. AB Perez Memorial Award and a Plaque of Distinction by the Jesus of Nazareth Health Center in 2009. Dr. Pastor was given a Presidential Award by the PCS in 2012 and on the same year, he was given a Lifetime Achievement Award by the Batangas Medical Society.

Dr. Pastor is married to the former Cynthia Borbon and is father to Ramon Juan and Gabriel. He resides in Batangas City and holds clinics at St. Patrick's Hospital Medical Center, also in the same city.



The ever-ebullient Dr. Pastor with Hollywood icon Marilyn Monroe.



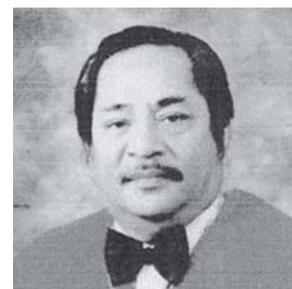
Florentino C. Doble, MD

Dr. Florentino Carpio Doble, born in 1944, is a native of Botolan, Zambales. Dr. Doble describes himself as a father, and together with his wife, Marilou, is a parent to his 5 sons Leo Angelo, Marlo Thomas, Adrian Dennis, Jon Derek, Paul Henri and daughter, Maripaz Corazon.

Dr. Doble served as president of the Botolan Jaycees (1983), the Rotary Club of San Francisco del Monte North (1989-1990), Founding Chairman of the Philippine Foundation for Breast Cancer, Inc. (2000 till present), among others. At the Philippine College of Surgeons he sat as Chairman of SURE (Surgery in Under Served Regions for Education), a position he held from 1984-1990. He has given back to his alma mater, The University of Santo Tomas, having led missions in various provinces and cities all over the country, and was president of the University of Santo Tomas Medical Alumni Association in 2000.

Dr. Doble served as president of the Philippine College of Surgeons in 1997; two years prior, he was the president of the Philippine College of Surgeons Metro Manila Chapter (1995). He became the president of the Philippine Society for the Surgery of Trauma in 1999-2000. He has lent a hand to the Department of Health, being adviser to the Inter Sectoral Networking for Emergency Management and Vice Chair for the DOH Accreditation of Paramedic Schools in 1984. Dr. Doble shared his time with the Philippine Medical Association, particularly in the CME Commission (1997-2000). Dr. Doble was stationed at the East Avenue Medical Center, serving

as Chair of the Department of Surgery from 1994-2002. Later, he functioned as Chief of Staff (1999-2001), Chief of Clinics (2001-2002), Medical Director (2004) and Chief of the Medical Professional Staff (2002-2009) also at the East Avenue Medical Center. He was the Philippine Representative to the ASEAN Mutual Recognition Agreement on Health in 2009.



DR. DOBLE

Dr. Florentino Doble likes to keep his eye on the academic world and was a Full Professor at the Faculty of Medicine and Surgery of the University of Santo Tomas till 2004. He has authored and co-authored more than 50 scientific papers and has presented such at the American College of Surgeons and at the Asian Surgical Association meetings. He has written the chapter on Acute Abdomen in the Handbook of Medical and Surgical Emergencies (4th Edition) published by the UST Faculty of Medicine & Surgery. He was an Examiner for the Philippine Board of Surgery, Inc for the years 1980-1990. He was Chair of the Board of Medicine in 2008 and was a member of the Board of Medicine of the Professional Regulation Commission (2004-2013). He has given various lectures, among which are the Dr. Alfredo Ramirez Memorial Lecture in the Philippine Society for the Surgery of Trauma meeting and the GT Singian Memorial Lecture during the PCS Annual Clinical Congress in 2012.



Dr. Doble delivers the GT Singian Memorial Lecture during the opening program of the 68th PCS Annual Clinical Congress in 2012.

Serafin C. Hilvano, MD[†]*

Dr. Serafin C. Hilvano, born in 1944, was from Mandaluyong. He was a graduate of the University of the Philippines, having taken his pre-medicine and medicine degrees in the institution. He had his internship and residency training at the UP-Philippine General Hospital. He devoted 38 years to the UP system, being a member of the surgical consultant staff starting in 1981, later as division chief of the Gastrointestinal Surgery (1988-2000), Endoscopy Unit (2001-2005), and chair of the Department of Surgery from 2007 till his retirement in May 2010.

Dr. Hilvano believed that endoscopes were essential tools for the surgeon and following his training in Japan, Germany, Taiwan and Hongkong, he shared his expertise with surgeons and surgeons-in-training at the PGH. He was a member of the team which performed the first laparoscopic cholecystectomy in the Philippines (PGH, 1990), ushering the laparoscopic era in the country. Dr. Hilvano went on to organize the Philippine Association of Endoscopic Surgeons in 1991. He was the first Filipino who served as Governor in the newly formed Endoscopic and Laparoscopic Surgeons of Asia (ELSA), a position he held from 1991 till 2003; he later served as its president in 2001-2002.

Dr. Hilvano was a member of the PCS Board of Regents (1991-1994, 1997-1999), president of the PSGS Metro Manila Chapter (1999-2000) and president of the Philippine Society of General Surgeons (2000-2001). He had given various lectures

and presented numerous papers he had authored, both locally and internationally. He received multiple awards for his contributions to surgery in the Philippines, among which are the Outstanding Consultant (1984, 1985, 1986; UP-PGH) and Outstanding Teacher in the Clinical Sciences (2003; UP College of Medicine) and Professor Emeritus in 2012 (Department of Surgery, College of Medicine, UP Manila). He was awarded the Enrique Garcia Professorial Chair for 2001-2002; UP Medicine Class 1940 Professorial Chair for 2007-2009; Jose P. Rizal Memorial Award, Distinguished Filipino Physician for Clinical Practice (PMA 2005); Oblation Award, Pillar of Excellence In Leadership and Management (UP Manila Alumni Association 2008); Most Distinguished Bedan Award (San Beda College Alumni Association, 2008). In 2009, during the 129th meeting of the American Surgical Association, Dr. Hilvano was awarded Honorary Membership, the only Filipino surgeon to be given such due to his role in introducing endoscopic and laparoscopic surgery in the Philippines and being a leader of the innovation in South Asia.

Dr. Serafin Hilvano was also consultant staff at the former Polymedic Hospital, now known as the Victor R Potenciano Medical Center and was a member of its Board of Directors (1998 till 2014). He chaired the Department of Surgery (2001-2005) and served as its Deputy Medical Director (2008 till 2014).

An avid sportsman, Dr. Hilvano was a member of the UP Varsity Basketball Team (1963-1965) and UP Varsity Volleyball Team (1963). He has participated in various tennis and golf tournaments and has emerged as champion in many of these.

** Dr. Hilvano succumbed to illness on October 17, 2014 before the award could be presented.*



DR. HILVANO



Dr. Hilvano shows what it takes to be 'legend of the knife.'

BIKING...a HEALTHY OPTION for AGING SURGEONS

Emmanuel A. Baes, MD, FPCS
President, PCS Southern Tagalog Chapter

Aging is inevitable and demand for healthy lifestyle increases as we age. Despite our aging bodies we need to EXERCISE!

Before I was seriously hooked into biking, I had tried several sports. Running is fun but knee pain is the excruciating truth that you have to bear. Swimming is really fulfilling but you cannot right away enjoy it without the pool to swim. Practical shooting, on the other hand, will give you a big belly and empty your pockets.

Let me tell you my story of how I got into biking.

My wife introduced me to badminton, currently my second love in sports. At first, I was hesitant to try it but eventually got addicted to it, playing three times a week for two years. I was able also to influence my "gruppo" (fellow surgeons that eventually became our barkada) to join me in this bonding activity. Even with several knee and elbow injuries and back pains, we continued. Unfortunately, last 2010, I underwent an exploratory laparotomy, sigmoidectomy, end to end anastomosis secondary to acute diverticulitis. I gained weight from 145 lbs to 158 lbs in just one month due to inactivity after the procedure. My gruppo lost interest in badminton. I tried running again but my knees hurt. I was advised to try biking.

One Sunday morning, I cleaned my old bike and went out of our subdivision. To my surprise, I saw people of different ages, male and female, either going solo, with their loved ones, or even with a big group of friends, from all walks of life in complete gear, biking! As I pedaled further, everyone greeted me, "Good morning!" I became interested and eventually met a biker who invited me to join him in a trail.

I can describe that experience in one word... WOW!!!

Going to trail is like being with nature, far from our busy world. The smell of fresh air... sun-kissed grass and leaves of the trees... chirping birds, and at times bathed with sweat or rain showers. And that's the best part! For some of you who are adventurous, you will love being chased by a group of dogs, racing with the Shimanongs, encountering a snake across your path, sliding in the mud

with your bike. You will reach places that you cannot go to with your luxury cars. On the down side, you will have to know how to repair a flat tire and a broken chain!

In three months, my weight went down from 158 lbs to 130 lbs. with this stress releasing activity. Biking improved my stamina, built my self confidence and challenged my patience and perseverance. I biked solo and reached places as far as Tagaytay, Talisay, Bagiuo etc. and even had the chance to bike in San Francisco, California!

Biking became more significant as it played an important role in most of my projects as president of the PCS-STC this year. BIKECADE is the answer to a healthy, practical and inexpensive way of information dissemination, health advocacy and even boosted camaraderie among us. It was very fulfilling as many of my friends, colleagues, and my family supported me in this endeavor especially in one of our big project " We Can Beat CANCER" bikecade.

For some who have not seen me for a long time they would frequently ask, "Doc, bakit ka pumayat?" "Bakit ka lalong umitim?" And I would reply proudly with a smiling face... "BIKING!"

So come and join me now in my advocacy. Aging is not a hindrance to exercise.

Be a biking enthusiast!



The Surgeon as Teacher

**Armando C. Crisostomo, MD, MHPEd, FPCS, FPSCRS, FPSGS*
PCS President, 2008**



The role of the surgeon as teacher is a time-honored tradition. In the words of the Hippocratic Oath, 'I swear by Apollo the doctor, by Aesculapius, Hygieia and Panacea... to teach them the art, if they should desire to learn it, without fee or bond; to impart by precept, lecture, and every other mode of instruction a knowledge of the art...'. The surgeon then must be a teacher.

Even for surgeons not affiliated with the academe or a teaching institution, opportunities abound to practice the art of teaching - to explain to our patients the pathophysiology of their disease, the indications and complexities for their planned surgical procedures, alternative methods of treatment and even possible complications. Practicing surgeons will necessarily work with multidisciplinary teams in the care of patients. Nowhere does this experience come to life more vibrantly than in the operating room, where the whole team is in the same room at the same time interacting for the benefit of our patients. Thus, there is no such thing as a non-teaching hospital or surgical unit.

These teaching responsibilities are further amplified for those of us who participate in undergraduate and postgraduate education. The tedious complexities of taking a history and physical examination, requesting and interpreting diagnostic tests and explaining these to patients, undertaking the logical steps in preparing patients for surgery, presenting these conditions in conferences with peers and other health professionals, performing the essential steps in various operative procedures and carefully monitoring our patients' postoperative recovery - all of these and more, provide much fertile ground to train not only the next generation of surgical practitioners but also physicians with a deep understanding of the role of surgical intervention in improving our patients' quality of life.

Unfortunately, the responsibility of teaching surgery rests primarily on busy clinical surgeons who possess little or no formal training on educational methods and principles. We often just resort to teaching others based on how we were taught. Many patients complain about being dismissed as too persistent or "makulit" whenever they pondered questions on their illness to their surgeons. Many surgeons are observed to focus their teaching mainly on the technical and procedural

aspects of individual operations. This leads to the perception of surgeons performing the role of mere "technicians" in the overall care of our patients. In addition, many students describe their already limited exposure to the operating theater as intimidating with a lack of a defined role within the surgical team. They often receive little feedback which are in lacking in detail and not constructive to the students' development.

These observations and experiences frequently lead to a stereotyped perception of surgeons as cold, uncaring technicians, merely interested in flaunting their skill in the operating room while constantly haranguing their students and trainees during the limited time they spend in conferences. This distorted form of role modeling at times prevents us from attracting the truly "best and brightest" from among the ranks of our undergraduate students and invariably, and may cause many of the difficulties we encounter in the quality of residents of our training programs.

As surgeons, we need to reform and get more involved in the education of our next generation of practitioners. Surgical teaching should not be restricted to the operating theater. We also see patients in our clinics, where an accompanying student can learn the generic skills of taking a history, doing a clinical examination and ordering appropriate investigations. It is also in this setting where students will have the opportunity to build on their interviewing and communications skills as they learn how to explain complex surgical procedures and prognoses as well as gaining consent, and breaking bad news in a way that an anxious or depressed patient can understand. When properly utilized, the operating theater can provide the most exciting and unique educational experience for our students. The OR environment allows integration and consolidation of knowledge learned in the basic and clinical sciences and as I mentioned earlier, where the full dynamics of multidisciplinary interaction and teamwork for patient benefit can be observed. Upon conclusion of the operation, students should be given opportunities to learn about postoperative complications and the need for continuous careful, regular observation and contingency planning. The complex nature of surgical patients can also provide our students meaningful opportunities to discuss and reflect upon

TURN TO NEXT PAGE

the ethical, moral, legal and psycho-social issues related to surgery aside from the cost-benefit analysis which tend to be particularly acute in surgical practice.

In addition, our trainees may learn team management and organizational skills as most surgical units are organized into teams that work closely with other health professionals. Aside from enriching the curricular experiences of students, as teachers we must not neglect the importance of role modeling and effects of the "hidden curriculum". Our deeds are as important as our words and our juniors often remember more from what his chief does than from what he says. Teaching is more strongly reinforced by example - we ultimately have the responsibility to impress our teaching by our temperament, personality and philosophy in life.

Many changes however, are occurring around us and require us to adapt our teaching philosophies, content and methodology. If the surgeon's role as teacher is to be maintained, we need to adapt to these changes and be prepared to take on new roles and responsibilities. These changes include:

1. Learners now have greater access to and are more adept in the use of technology to learn and gain information. Even patients frequently now come to our clinics, armed with volumes of downloaded information, much of which is rarely peer-reviewed. Medical students and residents are learning and obtaining information (using digital tools) much more differently and rapidly compared to the time when we were learners ourselves. Thus, we can no longer continue to teach based on how we were taught. As educators, we can harness this technological ability as we attempt to impart knowledge and technical skills to our students. Traditional educational approaches of providing information in lecture format (passive learning) can be creatively replaced with methods encouraging student interaction with the learning environment (active learning). Learners should be encouraged to begin taking some degree of control over their own learning by meeting personal objectives and choosing individual learning styles (self-directed learning). In the face of the tremendous increase in medical knowledge, surgical technology and intricate operative procedures, surgeons must demonstrate and initiate the process of, desire for and skills required for life-long learning.
2. The rapid pace of technological innovation both in the surgical and non-surgical specialties resulting in the blurring of the traditionally perceived differences between the cutting and non-cutting specialties. Surgeons are now performing less invasive procedures while internists and radiologists are now engaged in interventional procedures both for

diagnosis and cure. As educators, we are challenged to guide our students and trainees in facing the dilemma of whether to adopt these new ideas or techniques. ACS Regent Gerry Fried, MD, FACS, FRCS(C), suggests that, when faced with the dilemma of whether to adopt a new idea or technique, the surgeon should consider four basic questions:

- Does this innovation fulfill a clinical need?
- Does it add value to the existing options?
- Is it financially viable?
- Can it be adopted by the average surgeon with relative ease?

Dr. Carlos Pelegrini, in his inaugural address as ACS President, propounded that the surgeon of the future will be "someone who embraces the management of diseases, not just the use of techniques, and will also be someone who becomes knowledgeable of, and masters all, diagnostic and therapeutic aspects of his or her specialty beyond traditional boundaries".

3. The increasing complexity of operative procedures, reduction in work hours and overriding concern for patient safety have interplayed to promote the increasing utilization of simulation in medical and surgical education. Simulation-based training is an effective modality to teach both technical skills and nontechnical skills in a safe, nonthreatening environment. As an educational tool, simulation can increase the learner's knowledge base, improve decision making, teach teamwork, and develop psychomotor skills. As an evaluation tool, simulation seeks to ensure some degree of competency in the learner. Ultimately, elevated competence translates into decreased medical errors, improved patient safety, and reduced health care costs.
4. The changing environment and paradigms of surgical practice have mandated the development of a whole new set of competencies in non-technical aspects of care to include professionalism, systems-based practice, health care quality and patient safety. Again, ACS President Carlos Pelegrini has predicted that "the smart surgeon of the future will devote a substantial portion of his or her time to the study of qualities of effective leaders, to the development of emotional intelligence, and to the improvement of so-called non-technical skills".

Surgeons have long been recognized for our leading role in medical education. If we are to preserve that leadership role and more importantly, ensure that future generations of patients will be provided care that is competent, compassionate and safe, we need to enhance our teaching skills and adapt them to the changing context and environment of surgical practice. Ultimately, we are all responsible for ensuring that future because we are all teachers!

Association of Women Surgeons of the Philippines "Women Empowerment and Social Responsibility"

Maria Cheryl L. Cucueco, MD, FPCS, FPSGS

The Association of Women Surgeons of the Philippines (AWSP) was founded in December 2005 by a group of accomplished surgeons under the leadership of Dr. Josefina Almonte. The main thrust of the organization was focused on the primary concerns of the female surgeons in the country, including gender sensitive issues in the workplace and the community. From the original membership of about 30 female surgeons, the organization has been growing exponentially as there is an increasing number of female residents and fellows graduating from the different training institutions in various specialties in surgery all over the country. The AWSP started regular participation in the Philippine College of Surgeons Annual Clinical Congress with gender related sessions beyond the academic concerns of female surgeons. Topics included sexual harassment in the workplace, family issues, power dressing, managing finances, stem cell treatment advantages and disadvantages and more. Projects lined up included regular lectures on breast cancer awareness, conducting lay fora and breast cancer screening programs amongst colleges, convents, employees and to the less fortunate communities. Other than these regular activities, the AWSP extended its services by giving lectures on income generating projects such as soap making and hair cutting sessions.

This year, true to the organization's mission on increasing breast cancer awareness, the AWSP participated in this year's Philippine Society of General Surgeons Annual PINK RUN D' Feeting Breast Cancer 2014 held at Venice Plaza McKinley Hill, Taguig City. The association performed free clinical breast screening examinations for the runners and participants with no less than our president Dr. Luisa D. Aquino, Dr. Ida Lim and myself, together with our UST-FSU residents, Dr. Wilma Baltazar, from UP-PGH with her fellows and female residents, Dr. Hilda Sagayaga from UERMMC, and Dr. Evangelina Sison. Eighty nine runners had their breast examination at our AWSP breast screening booth.

The organization's culminating activity this year was the most fulfilling amongst the numerous projects we have conducted. With the help of Zonta Club of Mandaluyong, headed by Dr. Evangelina Sison, we scheduled a clinical breast examination at the Correctional Institute for Women, in partnership with the Philippine Society of General Surgeons Metro Manila Chapter headed by its president Dr. Napoleon Alcedo, with the support of its current board of trustees. The whole team comprised of 10 consultants which included our president Dr. Luisa D. Aquino, our past presidents Dr. Asuncion Abaya-Morido and Dr. Rose Marie R. Liqueste and officers Dr. Joan Tagorda and Dr. Rica

D. Mirasol Lumague. The clinical breast examination was held last October 12, 2014. Seventy six female surgery residents from the different accredited training institutions all over Metro Manila participated. The following hospitals sent their female residents: UPPGH, UST, AFPMC, Ospital ng Maynila, QMMC, Mary Chiles General Hospital, Medical Center Manila, QCGH, Makati Medical Center, UERMMC, EAMC, NKTU, FEU-NRME, SLMC, The Medical City, MDH, JRMMC, Cardinal Santos Medical Center, Delos Santos Medical Center, Rizal Medical Center, VMMC and Amang Rodriguez





Memorial Medical Center. Thanks to their respective department chairs and training officers who excused them from their hospital duties.

Our group was welcomed by Superintendent Atty. Rachel D. Ruelo and Dr. Evangelina Sison of Zonta Club Mandaluyong. Our initial apprehensions as to the security and safety of our residents and staff during the initial meeting and planning stages were immediately erased once we entered the Correctional Institute for Women. We were all welcomed with smiles and greetings of "good morning", "magandang umaga po" by all the inmates who were waiting along the pathway towards the examination building. It was drizzling when we arrived at the institute and umbrellas were prepared by the inmates who were assigned to guide our way, even insisting on holding them even if we told them not to do so.

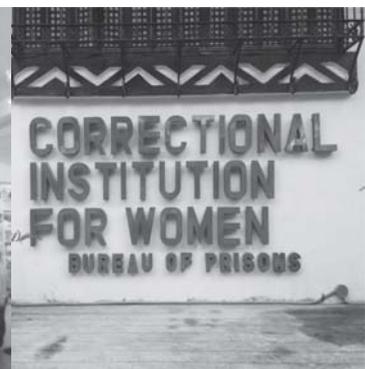
There was an on going mass when we arrived and I noticed a lot of inmates praying solemnly at their Chapel. I felt their eagerness to be seen and examined when asked to queue. We were likewise invited to watch their dancers perform. Their excitement during their performance of an "ati-atihan" dance was priceless, more so when the doctors joined their dance troupe. During the actual examinations, one could not help but ask questions. Why



were they there? What were the crimes committed? Are they really guilty?

Inmates examined included those from the minimum, medium and maximum security. We were able to see 2,151 inmates out of the 2,320 inmates. One hundred thirty-one patients needed a breast biopsy for suspicious breast lesions. The patients names were endorsed to the Zonta Club president, Dr. Sison for appropriate management since they have tied up with institutions who can perform further diagnostic procedures and subsequent management. The inmates never failed to say "thank you", "maraming salamat po sa pagtulong niyo". They were given giveaways by Coca Cola, Unilab and Zonta Club after they were examined.

After we finished examining all the inmates we were ushered to view their handicraft products like beaded wallets, bags, pendants and small fruit stands. Before we left the Correctional Institute, we were surprised with their CIW band and dancers who performed like professional singers and dancers. Indeed their gestures and words of encouragement touched our hearts and gave us a different sense of fulfillment. We will not hesitate to continue assisting them should they need or request for another visit to serve them.



Central Luzon

The PCS-Central Luzon Chapter had 2 Inter-hospital Case Presentations for the last few months of the year. The first was on September 13, 2014 at the Ichiban Restaurant, in San Fernando, Pampanga. Various cases were presented by different residents from various hospitals: "Thyroid Cancer", Duane P. Cordero, MD of Jose B. Lingad Memorial Regional Hospital; "Breast Cancer", Maria Glenda D. Zilmar, MD of Bulacan Medical Center; "Sigmoid Colon Cancer", Marygrace Loverez, MD of Tarlac Provincial Hospital; "Gastroesophageal Cancer", Vincent Rasalan, MD of James L. Gordon Hospital; "Rectal Adenocarcinoma", Gian Carlo Cruz, MD of Paulino J. Garcia Hospital. Reactors were Doctors Romarico Azores, Neresito T. Espiritu, and Raymond Joseph Manzo.

The second case presentation was held on November 8, 2014, at Malolos, Bulacan. The cases presented were: "Synchronous Bilateral Breast Cancer", Rebeson R. Faustino, MD of Tarlac Provincial Hospital; "Breast Cancer Presenting Solitary Long Bone Metastasis", Kristine Joyce N. Sumabat-Plazo, MD of Bulacan Medical Center; "Rectal Gastrointestinal Stromal Tumor", Geronimo R. Trojillo III, MD of Jose B. Lingad Hospital; "Adrenal Carcinoma: A Case Report", Alvin Ang, MD of Paulino J. Garcia Hospital; "Omphalocoele in Pregnancy", Giovanni Marcos MD of James Gordon Hospital. The chapter also had their elections for new officers on the same afternoon.

In celebration of the 78th anniversary of the Philippine College of Surgeons, the Bulacan Medical Center, Department

of Surgery held a mini lecture and surgical mission last September 11-12, 2014. The PCS-Central Luzon Chapter lent a hand in organizing the lecture and mission. The activity started with a brief background of the PCS 78th Anniversary and its advocacy given by the Department Chairman Dr. Bethoven J. Go. About 70 people attended the mini-lecture and surgical consultation. Fourteen patients underwent minor surgical procedures, mainly excisions and disarticulations. Two surgery residents, Dr. Julius Estacio and Dr. Vernon Aldaba delivered the mini lecture about "Cholelithiasis". PCS Fellows Doctors Hjordis Marushka Celis, Protacio Bajao, Ravelo Bartolome and Jose Emiliano Gatchalian were on hand to support the activity.



Northern Luzon

In 2012, the Philippine College of Surgeon-Northern Luzon Chapter adapted a Breast Cancer and Advocacy Program, together with a group of local breast advocate volunteers and in cooperation with the Philippine Breast Care Foundation. This alliance paved the way for the creation of a mobile mammography van to complete a "breast cancer care on wheels" project.

The Philippine Breast Cancer Imperative, Inc., (BRCAI) was incorporated during the early part of 2014. The non-stock, non-profit organization composed of organized breast advocate groups started doing breast cancer early detection campaigns through educational seminars, teaching local barangay health workers in different areas in Northern Luzon. It continues to serve primarily the provinces of Ilocos Norte and Ilocos Sur. The project, with the support of the PCS-NLC and other volunteer groups conduct breast cancer seminars which include lectures on statistics, incidence, contributing factors, sign and symptoms, diagnosis, treatment and management. Clinical breast examinations are performed by health care professionals supplemented with teaching of the importance of monthly breast self-examination to the population.

The Mammovan was formally inaugurated last May 6, 2014 by the assistant Secretary of Health Dr. Geraldo Bayugo together with Laoag City Mayor Chevylle Farinas and BRCAI President Delia C. Baquiran.



The production of the van was made possible through a generous gift by the TOYOTA Foundation who donated the van (chassis) and retrofitted its interior. Other than taking mammographies, the Mammovan has the potential for screening for other cancers like, for example, hemocult test for colon cancer, Paps smear for cervical cancer and diagnostics for cardiac diseases and diabetes. Its clinical utility and adaptability has been tried in many settings in the USA.

The Mammovan is currently being used for on-site mammographies for high-risk populations. Free mammographies are given to marginalized members of the community and for those who can afford, a mammogram at a discounted rate. The project is non-prejudicial and unbiased and serves the whole spectrum of the population, regardless of economic status. Currently, the breast awareness program has trained almost 5,000 barangay health workers. A considerable number of women in almost all of the 100 barangays of Laoag City alone have been recipients of the program in cooperation with the city government initiative "Agserbi 24/7". About 80% of municipalities in Ilocos Norte have been covered. In Ilocos Sur, the City of Vigan and other municipalities through their district hospitals, have also embraced and recreated this health prevention program. The provincial government has committed full support to the program.

The BRCAI with its major partners, the PCS-NLC, key hospitals, volunteer groups, together with the Philippine Breast Care Foundation has created a pathway to breast cancer management a growing health menace that continues to drain both health and economic resources.

Cebu Eastern Visayas

It was in early 2014 when the Presidents of the Cebu Eastern Visayas Chapter, Dr. Axel L. Elises; Negros Occidental Chapter, Dr. Benjamin S. Souribio and the Panay Chapter, Dr. Venerio G. Gasataya Jr. agreed to resurrect the Tripartite Conference. This used to be the venue for sports events to enhance camaraderie among fellows and a venue for the search for the research paper which will represent the Visayas in the Annual Clinical Congress. In 2005, it became the PCS Southern Conference because the PCS Northern Mindanao and PCS Southern Mindanao Chapters joined the 3 Visayas chapters. Unfortunately, this conference was stopped in 2010 up to 2013 for unknown reasons.

This year, the conference was revived like a phoenix that rose from the ashes. Last October 3, 2014, Friday, was the golf tournament at the Cebu Country Club sponsored by B. Braun with Dr. Peter Y. Mancao as coordinator. The winners were 1st- Dr. Carlitos E. Magno from Negros Occidental chapter, 2nd- Dr. O. Lim from Cebu EVC, 3rd- Dr. Peter Y. Mancao from Cebu EVC.

The basketball and badminton tournaments were sponsored by Getz Pharma at the Metrosports, Lahug, Cebu City. Dr. Sander G. Ugalino was the coordinator for basketball while Dr. Andrei Ignacio T. Yu was the coordinator for badminton. The championship game of Cebu vs Bacolod resulted into a 91-66 score making Cebu the 9-time consecutive basketball champion!!!! (Except during the times when tripartite was dissolved). For badminton, Drs. W. and C. Yu bested Dr. Mario Manuelito B. Coronel and partner in the doubles badminton tournament. Lunch was served at Metrosports, Lahug sponsored by Getz.



Dr. Chan Cheng Wan (leftmost) with the panelists- Drs. Charita Uy, Ellie Mae Villegas and Stephen Sixto Siguan at the Waterfront Hotel, Lahug, Cebu City.



The PCS Negros Occidental Basketball team recites the Oath of Sportsmanship prior to the start of its championship match with Cebu. Activity sponsor was Getz Pharma.

The billiards and bowling tournaments were held in the afternoon and was sponsored by Pharex Pharma at the Casino Espanol. Dr. Steve Rama was the coordinator for bowling. The Bacolod team bested the Cebu team in bowling. Dr. Axel L. Elises was the coordinator for billiards where Dr. Marben C. Solon of Panay Chapter won 1st place, Dr. David C. Hermosisima of Cebu got 2nd place and Dr. Axel L. Elises of Cebu got 3rd place. The Fellowship night at the Waterfront Hotel, Lahug was sponsored by Cathay Drug with Dr. Marilou Viray as coordinator. It was special with entertainment numbers like Dr. Joven Mabalatan on saxophone, Dr. Nestor Amante performed with a Bacolod band presenting a 60's medley, Dr. Manuel Villamor on saxophone, etc. Dr. Maribel Du, Dr. Jose Rizalito Catipay and Dr. Zoe Lim also gave their song numbers with Dr. Ron del Mar as master of ceremonies. The awarding of winners was done followed by a raffle. The Cebu team emerged as the overall champion, via point system.

A Surgical Olympics, where residents tested their surgical skills, was held the following day, October 4, Saturday at the Waterfront Hotel Lahug. Dr. Ted Gallo was the coordinator with B. Braun as the sponsor. The Cebu Chapter won with Dr. Joshua Tuazon, Dr. Deaver Merin, Dr. Lloyd Pagaran, Dr. Mark Daroy, Dr. Theo Genesis Tagaytay as members. The Bacolod team placed second. The scientific program followed with Dr. Chan Cheng Wan, FRCS giving a lecture on "Sentinel node biopsy: Is axillary clearance necessary?" and "Oncoplastic Techniques for the Asian Breast". The panelists who gave their reactions were Doctors Stephen S. Siguan, MD, FPCS; Mae Belarmino Villegas, MD, FPCP; and Charito Uy, MD, FPCP. Dr. Frances dela Serna acted as the moderator of the session. The post graduate activity was sponsored by Sannovex.



The Surgical Olympics also included a laparotomy simulator where eventually the Cebu team won.



The PCS Negros Occidental Chapter won in the bowling tournament. One of its players scored the highest pinfalls. The event was sponsored by Pharex. PCS Panay Chapter won the billiards tournament top prize.

Negros Occidental

My Second Job-Yolanda's Aftermath

Andrea Joanne Alerta-Torre, MD, FPCS

The road to my hometown leads through seven towns from the pier, each one with its own distinct character and landmark. Approaching my hometown, one town away, as you make this certain turn in the highway, you see the majestic Mount Manaphag, with its distinct cone-shaped peak out in the horizon, after which you see Mount Apitong on the right. On every trip I have made to my town since childhood, seeing these two mountains gave me a sense of anticipation, a sense of excitement, a sense of longing and impatience to get there. I always looked forward to the green of the rice fields, and also to the blue seas and the white sand beaches of the islands that are part of my town. I have since moved to a different province, but still, each infrequent trip I make stirs the same emotions.

On November 8, 2013, Yolanda, the strongest typhoon in a century, hit our country, and her fifth landfall was in my hometown. I knew my family was safe, since after 4 days without communication, I was able to talk to them. They had to travel 6 kilometers to a certain spot where they could get a signal. What I did not know was how bad the devastation was. What was needed? And what could I do? My husband and I decided we had to go and bring whatever we could to help out. During the week that followed, family, friends, and clinic staff prepared food, rice, water, medicine, blankets, mosquito nets and clothes to bring. While planning to decide where to go specifically in the town and who to help, I looked at the map of the town, and noticed that there was one small island on the periphery of the town's territory. I had never been there before, maybe because in

my childhood, we always had to be safe, thus could only go to the islands near the mainland. I called my niece and asked her how far it was. The answer "two hours by boat". Outright I told her, "I bet you no one has gone there yet to bring help. We're coming on the week-end, that's where we're going."

As I drove the turn in the road on November 15, 2013 my emotions were in haywire. All along the way destruction was widespread. Trees were toppled onto the road, still uncleared, while the ones left standing had lost all their leaves. The hills and roadsides were all brown. Bamboos were bent like matchsticks. Houses were without walls and roofs. And these were in towns where the typhoon had just passed by. I dreaded to see what it had done as it had made landfall. When I got to my town, the scene was worse. Roofs trusses were literally bent off houses. Century-old trees were lying on their sides. An entire stretch of community along the seashore was a tangle of washed out houses, wires, leaning electric posts, with personal effects strewn all over. It was like Yolanda was a hammer that pulverized houses to the ground. The whole town had a damp stench that is hard to describe. Tent camps were set up in the central school and the municipal plaza and were teeming with displaced families. Other families had set up shelter made of tarpaulins, displaced GI sheets, and coconut leaves.

Coordinating with an NGO and the local municipal health officer, we set off for the island on November 16, 2013. Initially at the municipal hall, we were advised to go to another location, but we stood firm and took off.

TURN TO NEXT PAGE



The island is only 7 hectares wide, flat, mostly sandy, the highest point in the island being the top of its lighthouse. Yolanda hit it first from the east, with storm surges as high as 3-4 meters, then from the west, again with storm surges. Fortunately there was not a single casualty among the residents. As we reached the island, as expected, it was a picture of devastation. Of the almost 150 houses in the community, only around 10 remained standing. Boats were strewn around, some crushed, some torn in half. More were nowhere to be found. A total of almost 100 fishing boats were lost or totally damaged. From the inhabitants' account, I imagined Yolanda as a giant running around, playing from one end to the other, stomping on houses and throwing around boats. That's how it looked like.

Getting busy with work, distributing the goods and clothes and checking on the residents, we also found that although they had been stressed by the super typhoon, health-wise, they were fine. The worst case we saw was cellulitis. But we knew that this was just the start. We were just giving them a piece of candy when what they needed was a full meal. Nevertheless, the residents were very thankful that a group had made the effort to come to them, despite the distance we had to travel. We left with the promise that we would come back and do more.

By the time the first relief trip was over, my husband and my family had resolved to help more, not only for the short term but to restore lost livelihood. After we got back home, social media frenzy within my family and friends started. We made 4 more trips back to the island, 4 trips to other island barangays, and started conceptualizing livelihood restoration. Since most NGOs involved in the relief effort were replacing motorboats lost during the typhoon, I asked, "What about the small fishermen who only had paddle boats, precisely because they could not afford motor boats? The money needed to replace these boats may be a small amount to some but to these poor survivors, it is 2 or 3 months income. If they have income. Who will help them?" Thus, the decision to help this group was made. We were fortunate

to find boat carpenters, who themselves were survivors of the typhoon, who needed jobs and could ensure quality production of the needed boats.

A nephew relocated temporarily to oversee the work. A niece in Sweden appealed for donations, going in front of her City Council and was able to raise enough funds for 10 boats and subsidize 4 medical and relief missions. My children gave their Christmas money for 20 boats. One classmate from high school asked her husband's company in Australia to help, and they donated 8 boats. Two schoolmates from high school raised enough for 5 motorboats, which went to the first island we visited. Our friends, the nurses and employees in the hospital, whole units, nurses and friends abroad and our Lions friends all joined in to donate what they could. Some friends volunteered their services, and at times we had to make unplanned relief runs as the donated clothes and food piled up. I also had to divide my time between my first job (surgery) and what was now my second job (relief efforts). My residents never knew where I would be so they would ask whether I would be in Iloilo or in Bacolod on a given day. It was exhausting but rewarding at the same time.

We started building our boats on December 16, 2013, exactly 6 weeks after Yolanda. Within two months 40 boats had been distributed. Families started to go back to the sea, back to their fishing. Children went back to school with school supplies donated by colleagues and friends. Slowly, income was restored, and houses were rebuilt.

As of September 30, 2014 a total of 220 boats have been distributed. Almost 11 months after losing their homes and their livelihood, a small community of fisher folks is on their way to recovery. Yolanda has also brought me back to my roots. My more frequent trips have made me decide to take another look at the other possibilities to help. Which means I will be driving that bend in the road more often and see the mountains and feel the satisfaction of knowing you can help.



PCS, ACS boats in Tacloban



Dr. Axel Elises, President of PCS-Cebu Eastern Visayas Chapter and Dr. Robert C. Sy, Trustee of PCS Foundation, Inc. at the McArthur Landing Site Palo, Leyte.



The motorized boats with fishnets.



The boats have the seals of the ACS and the PCS.

About a year ago, typhoon Haiyan, locally known as Yolanda, wrought havoc to the Visayas region with its furious winds and ensuing storm surge. Many of our countrymen lost their lives and for those who survived, livelihoods were lost. Our colleagues from the American College of Surgeons who were our guests during the PCS Annual Clinical Congress in 2013 donated a sizable amount earmarked specifically for the region.

On October 22, 2014, the PCS through the PCS-Cebu Eastern Visayas Chapter turned over motorized bancas with fishnets at the Bulwagan ng Lalawigan at Tacloban City, Leyte. A total of 16 bancas were given. Four were funded by the donation of the ACS. An additional 12 boats were donated through the PCS Foundation, Inc. The boats had the seals of the ACS and the PCS. Recipients were returning parolees of Tacloban in order for them to have a source of livelihood upon their return to society.

The PCS would like to thank the PCS-Cebu Eastern Visayas Chapter President Doctor Axel L. Elises and fellows Doctors Paolo F. Estorninos, Juan Mari P. Isiderio, Arnold D. Abril, Sherlito T. Siao, Brian Blas, Samantha Ruth C. Baillo, and Earl Courtney A. Viernes for their presence during the ceremonies. Dr. Robert Sy, a trustee of the PCS Foundation, facilitated the manufacture, painting and labeling of the boats. He was on hand to witness the ceremony.



Tacloban PCS Fellows: Drs. Arnold Abril, Paolo Estorninos, Samantha Ruth Cainghug-Baillo, and Brian Blas.



(right to left): Drs. Axel Elises and Arnold Abril, Robert C. Sy, Trustee, Samantha Ruth Cainghug-Baillo, Brian Blas, and Paolo Estorninos



The new owners were each given a certificate of donation.



PHILIPPINE COLLEGE OF SURGEONS-CEBU EASTERN VISAYAS CHAPTER

Standing from left to right: Drs. Paolo F. Estorninos, Juan Mari P. Isiderio, Arnold D. Abril, Axel L. Elises (chapter president) Robert C. Sy, (Trustee, PCS Foundation) Sherlito T. Siao, Brian Blas, Samantha Ruth C. Baillo, and Earl Courtney A. Viernes

78th Foundation Day Activities

The Philippine College of Surgeons marked its 78th year with a campaign that extended throughout the nation. The twelve chapters conducted surgical missions, blood donation drives, lectures, tree planting activities and sports tournaments, among others, during the month of September to mark the occasion. In Manila, the Opening Ceremonies were held on September 7th at the PCS building. A mass was celebrated at the GT Singian Room with officers, fellows and members of the secretariat of the PCS in attendance. Also on that same morning, Dr. Arturo Mendoza, Jr., PCS vice-president, was a guest at DZRH, answering questions on surgical diseases and other concerns.

On September 9, 2014 (Tuesday), a simultaneous blood-letting drive was held in 15 hospitals in Metro Manila. Participating were Amang Rodriguez Memorial Medical Center, Chinese General Hospital

and Medical Center, East Avenue Medical Center, FEU-NRMF Hospital, Jose R. Reyes Memorial Medical Center, Makati Medical Center, MCU-FDTMF Hospital, Our Lady of Lourdes Hospital, Quezon City General Hospital, Rizal Medical Center, St. Luke's Medical Center, The Medical City, University of Sto. Tomas Hospital, UP-PGH, Veterans Memorial Medical Center. No less than 400 bags of blood were collected during the activity.

The 13th Inter-Specialty Golf Tournament was held last September 10, 2014 (Wednesday) at Forest Hills Golf and Country Club. A total of 21 individual golf players, fellows and friends from pharmaceutical companies joined the tournament. Four groups registered during the event. The team of the Philippine Association of Laparoscopic and Endoscopic Surgeons (PALES) composed of Drs. Alan Edgardo Alegre, Virgilio Sioson,



Noel Evangelista, Alex Erasmo, George Cheu and Dennis Littau brought home the championship.

The tenth offering of the PCSMMC-PMA Lay Forum & Operation Bukol held last September 11, 2014 at Philippine Medical Association, North Avenue, Quezon City was a success. The speaker was Dr. Anthony Perez who talked about "Bato sa Apdo". A total of 99 patients were operated on by 50 resident doctors that came from different training hospitals namely: AFP Medical Center, Amang Rodriguez Medical Center, Capitol Medical Center, Chinese General Hospital, Delos Santos Medical Center, Jose R. Reyes Memorial Medical Center, Manila Med, Ospital ng Maynila, Protacio Hospital,

Quezon City General Hospital, Rizal Medical Center, St. Luke's Medical Center, University of Santo Tomas Hospital, UERMMMMC, UP-PGH and the Veterans Memorial Medical Center.

The week ended with the 78th PCS Foundation Day Dinner at the EDSA Shangri-la Hotel, Mandaluyong City on September 12. A Loyalty Award was given to Eduardo Cincua for his 5 years of service to the PCS. The pharmaceutical companies who have given their unwavering support to the PCS, namely Pharex Health Corp, Unilab, Pfizer Philippines, Inc., Johnson & Johnson (Philippines), Inc. , Westmont Pharmaceuticals, Inc. and Biomedis, Inc. were likewise honored.



21 Candidates vie for BOR seats

Who will comprise the 2015 Board of Regents of the Philippine College of Surgeons?

The answer will be known only after the general elections slated December 1, 2014 (Monday) at Batanes 1, EDSA Shangrila Hotel, Mandaluyong City.

The candidates to the 2015 PCS Board of Regents are:



Antonio S. Say, MD



Edgar A. Baltazar, MD



Jose S. Pujalte Jr., MD



Dures Fe E.
Tagayuna, MD



Manuel Francisco
T. Roxas, MD



Alejandro C. Dizon, MD



Ma. Concepcion C.
Vesagas, MD



Carlitos E. Magno, MD



Rodolfo C. Ursua, MD



Peter Y. Mancao, MD



Beda R. Espineda, MD



Enrico P. Ragaza, MD



Ramon S. Inso, MD



Rose Marie R.
Lique, MD



Asis S. Encarnacion, MD



George G. Lim, MD



Gabriel L.
Martinez, MD



Fernando A.
Melendres, MD



Arturo E.
Mendoza, Jr., MD



Jose Antonio M.
Salud, MD



Vivencio Jose P.
Villaflor, III, MD