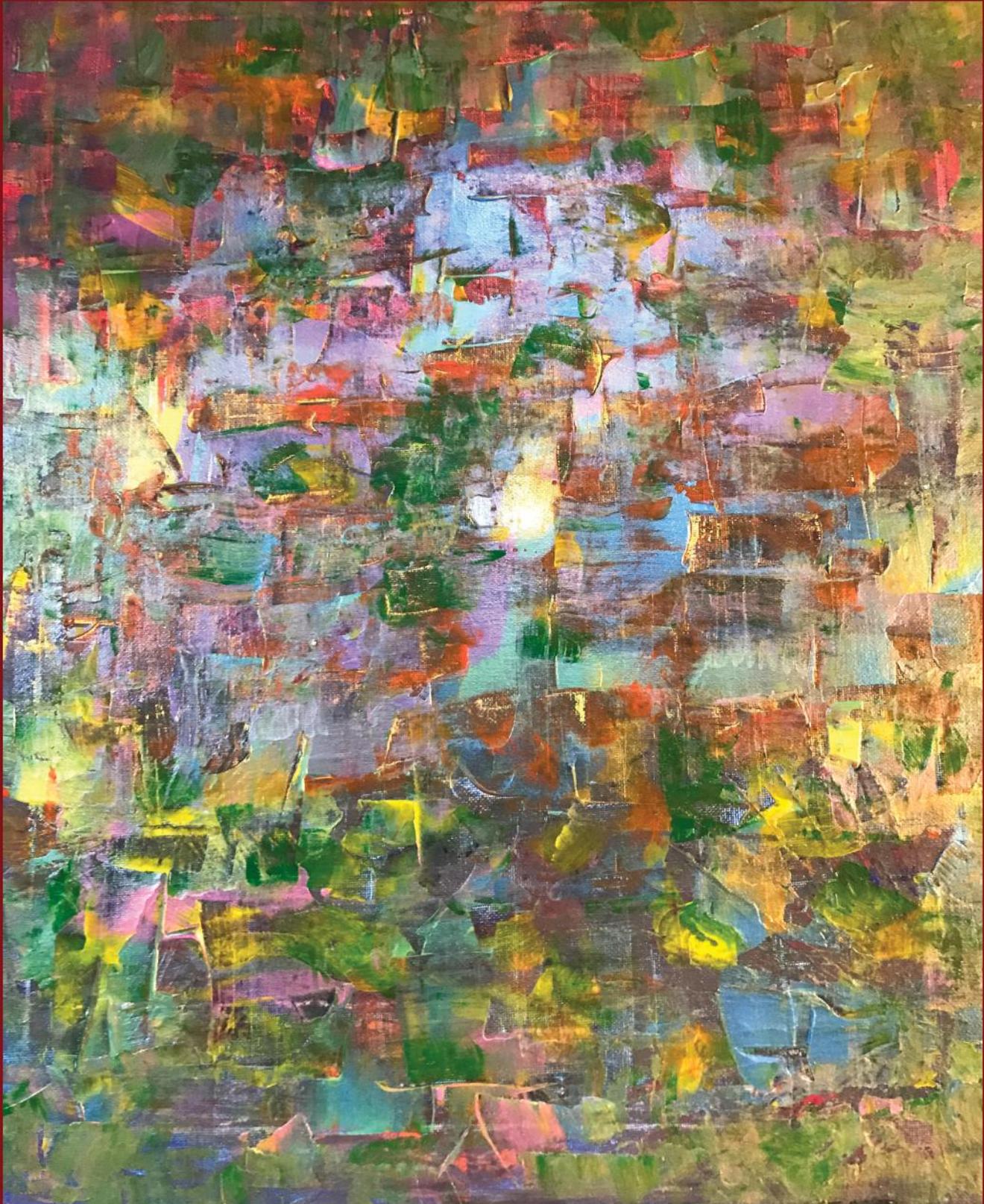




Incisions

The Newsletter of the Philippine College of Surgeons

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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

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On the Cover



Dr. Ricky Riego de Dios or R2D2 as he is called by friends, is a General and Laparoscopic Surgeon from Mariveles, Bataan and currently practicing at La Consolacion University Hospital, ACE Medical Center Baliuag, Castro Maternity Hospital and Medical Center and Our Lady of Mercy General Hospital in Bulacan.

He is a visiting consultant at Bulacan Medical Center, a Diplomate of Philippine Board of Surgery, a Fellow of Philippine Society of General Surgeons, Philippine College of Surgeons as well as the American College of Surgeons.

He was a past President of PCS-Central Luzon Chapter. He is a member Board of Governors of PCS and is also in the Board of Directors of PSGS.

He is into abstract acrylic, watercolor and oil paintings which, according to him, he started as a hobby during the COVID pandemic lockdown. Title of painting: **CHRISTMAS**.

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FROM THE EDITOR'S DESK

Marcus Jose B. Brillantes, MD, FPCS



Annus Horribilis

“But in those days, after that tribulation, the sun shall be darkened, and the moon shall not give her light,

And the stars of heaven shall fall, and the powers that are in heaven shall be shaken.”
(Mark 13:24-25)

This was the year we hardly saw smiles. Almost everyone we physically encountered wore masks. And at the very rare instance, we did manage to witness a fleeting smile, their smiles were empty. It was in their eyes - eyes in their depths which bore untold sadness, horrors and pity of what has transpired in this Annus Horribilis.

The isolation moves us on the stark contrast to the growing seclusion of our lives and the increasing necessity of the importance to connect and support one another in this profound crisis. And although the past three quarters of the year have been a grave period of challenges - they have been a time worthy of the emulation of small and enormous victories witnessing within our ranks the death of heroes who have sacrificed their lives courageously in the service of others during the COVID pandemic.

The term Annus Horribilis is a Latin phrase meaning “horrible year”. It has been said that the earliest printed format of this phrase has appeared in The Guardian, an English newspaper, in its March 1985 publication. However, other sources state the phrase was first used in an Anglican publication in 1891 in reference to the year 1870, the year in which the Roman Catholic Church at the First Vatican Council issued the solemn declaration of the Dogma of Papal Infallibility.

The expression was brought to modern prominence in Great Britain in a year-end speech by Queen Elizabeth II when her Highness enumerated the series of tragic events which befell the Royal family in the year 1992.

Each of us, in retrospect of our brief lifespan thus far, undoubtedly may have determined a year we deemed to be

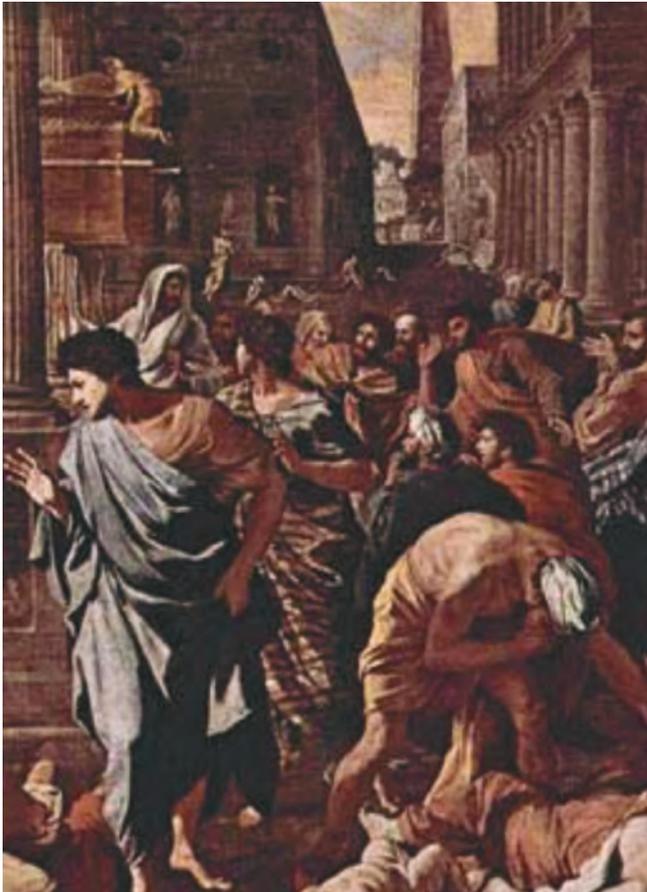
our personal annus horribilis. For a number of us, the year 2020 may very well qualify to be that new designated year.

In order to gain a much broader perspective and sober assessment, there is however a year generally agreed by historians, scientists, archeologists and paleoclimatologists to be, on the basis of global scope and historical impact, the “Worst Year to be Alive”.

“It was the beginning of one of the worst periods to be alive, if not the worst year,” says Michael McCormick, a medieval historian who chairs the Harvard University Initiative for the Science of the Human Past. McCormick was not referring to the Year 1348 when the Black Death with its 40-60% death rate wiped out one-third of the population in Europe. Neither was he alluding to the year 1918 when the flu killed 50 million to 100 million people.

The calamitous year designated by experts as the worst year to be alive is 536 A.D.

During that selected cataclysmic year, a mysterious fog plunged most of Europe, the Middle East and some parts of Asia with darkened skies for 18 months. Byzantine historian Procopius of Caesarea wrote, “For the sun gave forth its light without brightness, like the moon, during the whole year.” Roman chronicles recorded that they “marveled to see no shadows of our bodies at noon” and that the “moon had lost its luster”. The seasons seemed confused and woefully lost its cycle. In the summer of that year, temperatures fell precipitously from 1.5°C to 2.5°C, initiating the coldest decade in the past 2300 years. In China of that extraordinary year, it was recorded by chronologists that snow fell astonishingly in the summertime causing massive crop failure. Widespread starvation ensued. Irish chronicles mention “a failure of bread” from that specific period lasting 3 years. Five years later in 541, the bubonic plague struck the Roman port of Pelusium, in Egypt. What came to be called the Plague of Justinian spread rapidly, killing 35 – 55% of the population of the eastern Roman Empire and hastened its collapse.



The Justinian Plague

Historians have long known that the middle of the sixth century was a dark epoch in what used to be called the Dark Ages. But the source of the mysterious clouds has long been largely unsolved. That is until an ultraprecise analysis of ice from a Swiss glacier by a team led by McCormick and glaciologist Paul Mayewski at the Climate Change Institute of the University of Maine (UM) in Orono were able to uncover the culprit. At a workshop at Harvard, the team reported that a catastrophic volcano eruption in Iceland spewed large amounts of sulfate and

ash across the Northern Hemisphere early in that year dimming the atmosphere by March 536. Scientists had long suspected that the cause of all this cataclysm may also have been a volcanic eruption, probably from Olapongo located in present day El Salvador. But now researchers say there were indeed two eruptions—one in 535 or 536 in the northern hemisphere and another in 539 or 540 in the tropics—that kept temperatures in the north cool until 550. Two other massive eruptions followed, in 540 and 547. In the wake of the cloud's appearance, local climate cooled for more than a decade. The revelation comes from a new analysis that combines ice cores collected in Antarctica and Greenland with data from tree rings. It shows that the sixth-century tragedy is just one chapter in a long history of volcanic interference. According to the data, nearly all extreme summer cooling events in the northern hemisphere in the past 2,500 years can be traced to volcanoes.

The researchers detected 238 eruptions from the past 2,500 years. About half were in the mid- to high-latitudes in the northern hemisphere, while 81 were in the tropics. (Because of the rotation of the Earth, material from tropical volcanoes ends up in both Greenland and Antarctica, while material from northern volcanoes tends to stay in the north.) The analysis not only reinforces evidence that volcanoes can have long-lasting global effects, but it also reinforces historical accounts, including to what happened in the sixth-century Roman Empire. The repeated calamities followed by a plague plunged Europe into an economic stagnation that lasted until 640.

The volcanic eruption of Taal as an un auspicious start of the year 2020 served as a foreboding of fateful events that were to unfold a dark phase that was to cloud our country's history shortly after.

It has been nine months. The viral pandemic continues to rage on.

Happy Christmas 2020.

And may the new year 2021 be the year of our Lord of Annus Mirabilis.



The drilling site (under the dome tent) at a glacier in the Swiss Alps and a detailed view of a section of the core that revealed details of the year 536 AD.

FROM THE PRESIDENT

Jose Antonio M. Salud, MD, FPCS



The year 2020 is close to being in the past. This year, we spent more time in front of a computer than in front of other human beings, more on-line meetings and conferences than warm-bodied assemblies or huddles. Travel was limited to going from one room at home to the other or probably from home to work and back without any detours in between. Many gained weight due to lack of exercise; some lost weight due to a lack of food on the table. Indeed 2020 will be a year we'd rather forget but it is also a year we can never ever forget. The first line of A Tale of Two Cities by Charles Dickens comes to mind – “it was the best of times, it was the worst of times, ...it was the season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair ...” 2020, the year of clear vision, clarity and lucidity became one of confusion, indecision and turbulence.

Yet we continue to forge on as Pinoys are known as a resilient bunch, turning the negative to a positive spin, finding comfort, even humor in the most arduous or distressing situations. Likewise, the PCS will continue to seek what is best for its members and the patients we serve despite the limitations. We are busily preparing for the end of the year virtual Annual Clinical Congress which would include interesting and educational topics from the different surgical specialties, our annual business meeting, an on-line election for the next set of leaders of the College followed by the smooth turnover of the College's leadership. This last few months, we have been having frequent meetings with the PMA as regards the Physicians Act, discussions with the different specialty

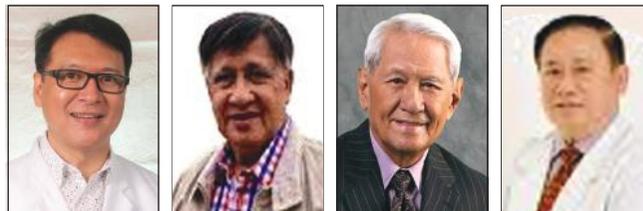
divisions regarding the status of their training programs and the conduct of their accrediting and credentialing examinations, whether on-line or face-to-face. Our 3 commissions, the Cancer, SURE and Trauma, Injury & Burn Care commissions have been busy collaborating with government and NGO agencies in pushing for their programs to be implemented. The other committees of the College have also been meeting regularly despite the prevailing conditions so as to ensure that the work of the College is carried out as best as possible.

As the numbers of critical COVID cases appear to be decreasing around the country, the BOR once again requested from the DOH the possibility of creating a One Hospital Command System for non-COVID cases especially for cancer patients needing oncologic procedures considering that patients that require hospitalization for such have had their treatments delayed due to the prevailing sense of fear of getting exposed to the virus in the hospital environment. However, the DOH has guidelines in place that allows for patients to be accommodated in the various hospitals that also manage COVID cases so the need to create guidelines in setting up centers to manage purely COVID-free patients was not recommended. Nevertheless, we continue to spread our recommendations to hospitals of creating functional ORs or COVID-free surgical pathways so elective cases can be done safely without risk of patients contracting the virus.

2020 was supposed to be a year I would have happily celebrated as the pinnacle of my

professional surgical career but instead we spent much in the past months mourning for surgeons close to myself who have passed away as a result of this virus. The pandemic has hit close to home for many of us. Surgeons like Leandro “Jun” Resurreccion III, my co-director in the BOD of Philippine Association of Laparoscopic and Endoscopic Surgeons (PALES), Romeo “Romy” Encanto, my professor in med school and senior faculty member at the UERMMMCC College of Medicine, Augusto “Tico” Sarmiento, my mentor and long-time boss at The Medical City and president of the PCS in 1975 and Menandro “Jing” Siozon, my co-director in the Philippine Board of Surgery and the Philippine Association of Hepatopancreatic & Biliary Surgeons, Inc. (PAHPBSI). This year has indeed created so much melancholy, heartbreak and despair. But we continue to pray for these legendary surgeons

and their families and celebrate the memories they have left behind and the legacy of their influence in all of our lives.



RESURRECCION ENCANTO SARMIENTO SIOZON

Hopefully, we are close to finally reaching an evolving normal state. I hope and pray that we have seen the worst that this pandemic has wrought on us all. May the remaining days of 2020 and onwards to 2021 transform for us and be the best of times, an epoch of belief, a season of Light and a spring of hope.

In Memoriam

Ernesto G. Acosta, MD
November 6, 2020

Lorenzo Rommel G. Cariño, MD
November 4, 2020

Josefino S. Catangui, MD
May 16, 2020

Melanio G. Cruz, Jr., MD
May 9, 2020

Romeo G. Encanto, MD
May 3, 2020

Gloria G. Habalo, MD
February 25, 2020

Marcelito S. Insilay, MD
July 25, 2020

Antonio R. Lahoz, MD
May 4, 2020

Victoria R. Laspiñas, MD
October 18, 2020

Angelo H. Manalo, MD
March 25, 2020

Miguel P. Mancao, MD
December 2019

Primo N. Pichay, Jr., MD
January 11, 2020

Caesar Ma. Raymund B. Rana, MD
April 2020

Leandro L. Resurreccion III, MD
March 31, 2020

Augusto P. Sarmiento, MD
September 12, 2020

Menandro V. Siozon, MD
October 12, 2020

Lourdes M. Solis, MD
November 18, 2019

Felipe T. Tablada, MD
August 25, 2020

ACROSS THE BOARD

Esperanza R. Lahoz, MD, FPCS



9th Board of Regents Meeting (via Zoom Telecon) September 12, 2020 (Saturday); 9:00 AM-

- Presentation of Dr. Catherine SC Teh, Chair, Sub-com. on Information Communication & Technology
 - o Dr. Teh presented the SICT's recommendation on the systems upgrade. First is to subscribe to Google Suites and Google Drive to save files in the cloud, documents, Forms, etc.
 - o Her second presentation was on the mobile application (app) designed for the College.

Board Action: To endorse to the PCS Foundation to fund the project of the PCS application amounting to Php950K and annual maintenance of Php95K.

- President's Update
 - o PMA-CPS Meeting – September 1, 2020 – Re: Physicians Act
The main agenda were the issues particularly the inclusion of the section on Council on Specialization as authored by Cong. Angelina Tan.

A copy of the specialty divisions' version of the Physicians Act had been sent earlier to the office of Sen. Bong Go and Cong. Angelina Tan.
 - o Meeting with Presidents, Affiliate Societies held last September 4, 2020
- New Matters
 - o Non-COVID recommendations
Usec. Leopoldo J. Vega has acknowledged in a letter his reply to the College's recommendation for the Recognition of Non-COVID hospitals. He has then requested the College to submit the criteria for this.

Upon review of existing DOH guidelines, Dr. Lahoz presented the following:

- a) To repeal the DOH A.O. No. 2020-016 V. Implementing Guidelines B.1.d. "At least 30% of all current public and private hospital beds must have the capacity to accommodate and service COVID-19 patients, or corresponding to the peak day critical care capacity in updated projections from a DOH-recognized epidemiologic projection model for COVID-19."

Not all hospitals have the capacity to assign a COVID from a NON-COVID. This will give the opportunity for private hospitals to focus on Non-COVID patients requiring urgent care and for patients to have the courage to consult early with their physicians. Instead, to help the government hospitals, institutions who will be recognized as a Non-COVID hospital must allot a higher percentage of PHIC beds for indigents. These private institutions can partner with a COVID-referral center where they can refer their COVID patients.

- b) DOH Department Memorandum No. 2020-0334 – Strategies in Health Facility Coordination in line with the Department Memorandum No 2020-0178 entitled "Interim Guidelines on Health Care Provider Network during the COVID-10 Pandemic"

The network should include identification of non-COVID hospitals in order for non-COVID patients to know which hospital to go to.

- c) Non-COVID hospitals must ensure that they maintain an environment that is free from the corona virus. Guidelines have been set by the DOH.

Strict triage of patients at the entrance of the hospital.

DOH Department Memorandum No. 2020-0208 – Interim guidelines on enhancing the infection prevention control measure through engineering and environmental controls in all health facilities and temporary treatment and monitoring facilities during the COVID-19 pandemic.

Must assign an isolation room or an area for patient who need urgent care but the status is unknown. Once test results are available, if positive, must immediately transfer the patient to a COVID-referral center assuming that the patient is stable.

- d) For hospitals with the capacity to treat both COVID and non-COVID PATIENTS
 - > Capability to separate the services by having separate building or wing in the hospital without mixing the COVID

> 8

and non-COVID patients. Example: dedicated operating room complex for COVID and non-COVID]

- > Must ensure that their non-COVID areas are COVID-safe by following protocols in the prevention of transmission of the virus.

All points have been taken and the final output will be submitted to Usec Vega by September 21, 2020.

- Treasurer's Report
Dr. De Leon will present next meeting the list of investments expiring by November 2020.
- COMELEC
 - o Nominations Committee – submitted the list of 2021 nominees for Regent to COMELEC
 - o COMELEC – was provided BOR Resolution No. 2020-005 regarding the on-line elections.
 - o Voters Instructions
 - o The mock elections will be scheduled November 28 and 29, 2020 [two (2) weeks before December 6], the purpose of which is to check on possible glitches and create awareness. Mock up names will be used as candidates.
 - o List of the 2021 Candidates who will run for Regent (COMELEC conducted lottery on the sequence of names, via on-line). Based on the Nominating Procedure, the Committee on Nominations submitted the list of names which included five (5) alternates (ranked accordingly) should there be candidate/s who might decline/back out from the nomination.
- Finance
 - o P/E Capital Investment is a SEC registered Investment Advisory Firm in the state of Illinois, USA. Established in 2010, this boutique investment firm has been employing a dynamic strategy in its portfolio management system incorporating options.

Board Action: The Board concurs with the Committee's recommendation of not investing in high risk investments because of the nature of our organization and the difficulty of monitoring this because of the change in its leadership annually.

Hence, the Board would like to request the Committee to:

- > Pursue purchasing real estate property
- > Consider setting up a cooperative

- o 76th Annual Clinical Congress – Revised CME Grants

The Board APPROVED the Committee's revised recommendations as follows:

Platinum	from Php400,000 to Php1M
Gold	from Php300,000 to Php750,000
Silver	Php500,000 (New Category)

Sponsorship of a Luncheon Symposium From 150K to Php200K
Virtual Booth from Php50,000 to Php75,000

- o PCS Kapit Bisig 2020 Fund Drive
The Board APPROVED the proposed categories and corresponding donations as follows:

CATEGORY OF DONORS:

- KAKAPIT BISIG DONORS - donation of 100k or more
- KAAGAPAY DONORS - donation of 50k up to 99k
- KASAMA DONORS - donation of 20k to 49k
- KABUKLOD DONORS - donation from 10k up to 19k pesos
- KAIBIGAN DONORS - donation of any amount less than 10k

Board Action: APPROVED. This fund drive will be under the auspices of the PCS Foundation since all donations is received by the foundation.

- o Webinar scheduled on September 22, 2020 at 6pm sponsored by ADP Pharma. Topic: Cutting Through Opportunities in Times of Trouble by Mr. Chinky Tan, top Filipino motivational speaker, wellness and life coach.

- PCS Building
 - o PSGS and Talampas Law Office have accepted the contracts and have started transferring to their respective offices (PSGS to the former PUA office; Talampas Law Office to the former PSGS office/renovations (for a period of one month – September, rent is free)
 - o Blessing of the renovated GT Singian Board Room; has individual barriers for purposes of social distancing
- FAP
 - o Dr. RR Montenegro informed the Board that a letter has been sent to Dr. Amado Pacio that his request for financial assistance cannot be given as provided in the FAP Guidelines.
- HMO/RVS
 - o As of this meeting, no response has been received from PAHMOC and AHMOPI regarding revisions for the Memorandum of Agreement. Meanwhile, the PCS will draft the MOA and include the following revisions:
 - A permanent increase of Php600.00 for the face to face consultation (even after pandemic)

- Adoption of the 2019 RVS with a Php100.00 multiplier regardless of room category (ward to private rooms)
- To extend to PCS the same fees for daily rounds given to PCP for non-operative surgical consultations (~1,000/day)
- Trauma – Trauma Commission
 - o Participation 76th Annual Clinical Congress (Virtual) - December 6, 2020; Sunday 1:30 PM to 3:30 PM
 - o Project Details for the Bicycle Safety Project as the lead program instead of home safety due to the pandemic.
- Cancer – Cancer Commission
 - o Participation – 76th Annual Clinical Congress on Sunday, December 6, 2020 at 1:30 pm, Room B, session on “Year End PCS Commission Reports” and on Monday, December 7, 2020 at 2:30 p.m., Room C, session of the PCS-Committee on Cancer on “Annual National Tumor Board Summit”

In addition, the Board has discussed the following:

1. *As the Commissions are still in its infancy stage, the Board mentioned allowing the Commissions to focus particularly on its branding.*
2. *Since the PCS Board of Regents has a better grasp of the activities/developments of the Commissions than the PCSF Board of Trustees, the BOR will appoint the composition of the 2021 Commissions’ Directors by the end of 2020.*
3. *The BOR is studying the possibility of extending the terms of office for non-PCS Fellows for another 2-3 years as the Commissions are in transition.*

- SURE – SURE Commission
 - o Participation – 76th Annual Clinical Congress - December 06, 2020; 2:10 pm-2:50 pm
 - o Commission’s Executive Committee was approached by ASSIST International and Project HOPE for a collaborative project. A meeting was held last August 19, 2020 to further discuss the partnership and details of the project.

- Conventions
 - o 76th Annual Clinical Congress - – December 6-9, 2020;
Theme: ACC 20/20: Surgery Through the Looking Glass
 - Congress Platform
 - > Congress on-line platform including the virtual exhibit hall - Docquity
 - > Business Meeting - TNP
 - > Fellowship Night – TNP
 - > Induction of BOR 2021 – TNP
 - Socials – Fellowship Night
 - o Program Content:
 - o Budget: Php75K.

- o 47th Midyear Convention – May 5-7, 2021;
Host: PCS Cebu-EVC
Theme: Classic Surgery in the Present Era
- o 77th Annual Clinical Congress – December 5-8, 2021; Edsa Shangri-La Hotel
Theme: Enveloped Ideas – Intricacies in Decision Making
- o 48th Midyear Convention 2022
- CSE
 - o 76th Annual Clinical Congress-December 6-9, 2020;
Theme: ACC 20/20: Surgery Through the Looking Glass
Objective: To Evaluate Current Concepts in Surgery and its Evolution and Future Direction
 - Honorarium to be given to invited foreign speakers will be based on the number of lecture/s and time spent delivering the lecture/s.
 - Updates on the program
 - o 77th Annual Clinical Congress -December 5-8, 2021; Edsa Shangri-la Hotel, Mandaluyong City
Theme: “Enveloped Ideas” – Intricacies in Decision Making
 - Proposed Topics: were discussed
 - Hybrid Online sessions
 - o 47th Midyear Convention- May 5-7, 2021; Radisson Blu Cebu, Cebu City
Theme: CLASSIC SURGERY IN THE PRESENT ERA
 - o 77th Annual Clinical Congress-December 5-8, 2021; Edsa Shangri-la Hotel, Mandaluyong City
 - o Postgraduate Courses and Scientific Meetings
PRC-CPD applications received since August to present

List of applications with corresponding approved PRC-CPD Units

Event	Remarks
PSPS August 27, 2020	1.5 PRC-CPD Units
PSIS August 29, 2020	1 PRC-CPD Units
PSPS September 10, 2020	1.5 PRC-CPD Units
PSGSMMC September 11, 2020	1.5 PRC-CPD Units
PSGS September 19 & 21, 2020	1.5 PRC-CPD Units each day
PCSMC September 12, 19, 26 October 3	Requirements submitted
ATLS September 25-27	Sept 25 – 6.5 PRC-CPD Units Sept 26 – 6.5 PRC-CPD Units Sept 27 – 4 PRC-CPD Units

- o Primary Care Surgery
 - Primary care surgery webinar lectures for PAFP Chapters will start by October. Details are being coordinated with the national PAFP. The sponsor for the platform is Biomedis.
 - The Sub-Committee is currently working on the revision of the Primary Care Surgery handbook.
- o CSE Webinar
 - AWSP webinar entitled “Exercise the COVID Blues Away” September 10, 2020, Thursday, 10:00 A.M. Platform is TNP
 - PCS-Committee on Finance will host the webinar entitled “CUTTING THROUGH OPPORTUNITIES IN TIMES OF TROUBLE” on September 22, 2020 (Tuesday) from 6:00 PM – 8:30 PM. The invited speaker is Mr. Chinkee Tan, Top Filipino Motivational Speaker, Wealth, and Life Coach. This webinar is in partnership with the ADP Pharma Corp.
- Surgical Research
 - 76th Annual Clinical Congress sessions
 - o 12th PCS Surgical Research Contest and Paper Presentation - Champion of Champions
 - o Manpower Study and Recommendations
 - o Creation of a PCS Research Unit under the auspices of the Research Committee in principle was APPROVED, functions are:
 - Repository of Proposals and Ongoing Researches of the College
 - Clearinghouse for Multicenter Researches
 - Germinate Research protocols for the college that are multicenter in nature in the future, provide Technical and Ethical review
 - o The Board reiterated the need to review/update the Guideline on PPE for Surgery as earlier requested by the Board of Governors.
- Surgical Training
 - o The Board noted the update on the New or Adjusted/Modified Residency Training Program Guidelines during the Pandemic and the subspecialty societies who have submitted and the status of those who have yet to submit, to wit:
 - o The Committee was reminded to finalize the date and the program for the approved Summit.
- Membership
 - o Status of Fellowship Application – Board Action: On behalf of the BOR, the Board Secretary will send a communication to PATACSI requesting endorsement of to be signed by the President.
- o Activities for the Orientation on Inductees - October 24, 2020 (Saturday); 10:00am
- o Induction ceremonies
- Administrative Concerns
 - o Salary Loan – Ms. Eden Grace A. Paule
 - o Work Schedule
 - o 2021 Annual Dues – clarification for the secretariat
 - Fellows who paid their 2020 annual dues in advance will be credited to their 2021 dues. Only Fellows who have settled their annual dues until 2019 are qualified to vote on-line, those who have not updated their annual dues are given until December 5, 2020 (Saturday) to settle this.
 - o Retirement of Mr. Eduardo Cincua by the end of December 2020
 - o The following were noted:
 - Hiring of New Secretary to be held in abeyance.
 - Roster of Members - Updating of the Fellows’ database – password, username, PCS No.-c/o Ms. Eden
 - PCNC accreditation of the PCSF - No update until this time.
 - Loyalty Awardees for 2020 – to be recognized during the Foundation Day Dinner event tonight.
 - * Ms. Annette – 40 years of service
 - * Ms. Angie – 5 years of service
 - * Ms. Connie – 5 years of service
- External Affairs & P.R.
 - o To request the Committee to upload the PCS video, Torch Relay video and Kapit Bisig Fund Drive video in the College’s social media. This will be in coordination with the Subcommittee on Information and Communication Technology (SICT).
 - o To consolidate a report from the Chapters on the Foundation celebration activities
 - o To formalize the proposed revisions to the Philhealth Rules on Administrative Cases (PROAC) Against Health Care Providers, Members and Philhealth Employees
- Publications
 - o The design for the 76th Annual Clinical Congress has been BOR approved.
 - o Newsletter – the August 2020 issue of Incisions has been posted in the website. Cover design was executed by Dr. Ronan Inso
- Quality Assurance & Patient Safety
 - o Participation – 76th Annual Clinical Congress -December 7, 2020 (Tuesday);10-am-12 Noon

10th Board of Regents Meeting (Hybrid) October 17-18, 2020 (Saturday)

- Matters arising from the minutes
 - o PCS Mobile App Provider
The SICT has provided the Board three (3) proposals for the PCS mobile application.

QUATRO CANTOS was APPROVED for endorsement to the PCSF to be College's provider for its mobile application for a contract price of Php560,000 (inclusive of VAT), monthly hosting fee of Php5,000 (inclusive of VAT) and updates if needed at 50,000/year.

Furthermore, the Board also approved hiring an employee exclusively for ICT functions of the College with a monthly salary equivalent that of an Accounting Clerk
 - o Letter of Reply from Usec. Leopoldo J. Vega

The College is in receipt of the letter of reply from Usec. Vega informing the College of the existing provision in the Bayanihan Act that requires 30% of hospital cases are dedicated to COVID cases hence the request of the College to identify non-COVID hospitals cannot be considered.

Dra. Lahoz, however, reported that in the meeting with HPAAC, the Bayanihan Act will take effect only up to December. The HPAAC will consider our recommendation for non-COVID centers.
 - o 84th Foundation Day celebration – September 12, 2020

The on-line celebration was a successful event which included the Torch Relay video and PCS AVP prepared by the Committee on Publications. Some Chapters also conducted their activities during the week. This was highlighted by the message delivered by Dr. Gerardo D. Legaspi, PGH Medical Director.

The celebration also included the successful conduct of the 84@84 bike ride participated by biker-Fellows of the different Chapters.

The Board extended its congratulations to the Committee on External Affairs through their Regent-in-charge, Dr. Julyn A. Aguilar.
- President's Update
PMA-CPS Meetings September 15, 2020- Re: Implementation of Social Distancing in Public Transportation
 - o Decrease in social distancing
 - o IATF recommendation 1-meter distance in public transportation
- o Task Force T3 met with PMA – where they presented evidences allowing the opening up of public transpo-i.e. LRT, jeeps, taxis and motorcycles
- o IATF released an increase from 13% to 30% occupancy in MRT; social distancing will be narrowed down starting October 19
- Treasurer's Report
 - o The Board noted some investments maturing by November 7 and November 24, which will be "parked" for the meantime. This also includes the USD Savings Account amounting to USD82,586.85.
 - o The Committee on Finance was tasked to study prevailing investments, interest rates of Treasury Bills and other instruments offering higher interest rates and submit recommendations to the BOR which can be approved through a special meeting in the viber group.
- COMELEC
Dr. Salud updated the Board on the following:
 - o The electronic copy of the Candidates Brochure will be sent individually to the Fellows emails and viber account (if available)
 - o Pictures and names of the candidates will be posted in the College's facebook and website
 - o The subspecialties/Chapters were earlier requested to announce during their webinars/meetings of the on-line elections and the mock elections scheduled on November 28-29, 2020 from 9am-5pm.
- Finance
 - o Proposed 2021 Budget- The Board of Regents APPROVED the proposed 2021 budget with a net Income of Php200,711.00 for final approval during the business meeting.
 - o Since some of these Committees' budgets will be provided by the PCSF the proposed 2021 budget will be presented to the Board of Trustees for approval
 - o Real Estate Property
 - Dr. De Leon showed the building property sent by Dr. Luisito Co, President, CEVC located at Manalili St., Cebu City (old Colon St.), which was forwarded to him by Dr. Jose Tan, Jr.; price is Php65M.
- PCS Building
 - o Letter of Appeal from Infinitegrafix
 - o Pre-termination of the 1-year lease contract of Macalino, Benitez & Nalupta Law Office (MBN Law office) with the College for the 33sqm office space at the 3rd floor; May 16, 2020-May 15, 2021; Monthly net rent: Php19,745.71 @ 598.35/sqm

- o PCS-Metro Manila through the Committee on Surgical Training - Stapling Workshop at the 3rd floor PCS meeting rooms from 12noon to 4pm on October 17, 24 and November 7 with only 8 participants and 2 instructors. Safety precautions will be observed for the duration of the workshop.
- Internal Audit
The Board reminded the Committee the immediate hiring of an internal auditor.
- Hospital Standardization & Accreditation
To update the Board for any developments on the following:
 - 1) Core competencies and privileges of surgeons
 - 2) Minimum hospital surgical standards
 - 3) 2021 Action Plans
- Surgical Infections
 - o PCS-ORNAP MANUAL
Inclusion of the following guidelines in the ORNAP Manual (formulated by PCS Committee on Surgical Research and PALES):
 - Position Statement on Laparoscopic Surgery in COVID-19 Pandemic
 - Algorithm of COVID-19 Guidelines in Triaging Emergency / Urgent Endoscopy Cases
 - Algorithm for COVID-19 Guidelines
 - PCS Guideline on Personal Protective Equipment (PPE) For Surgery

The manual will be available online during the PCS Annual Convention. The Committee would like to request to use the Committee budget amounting to Php200,000 for printing of one hundred (100) copies of the manual to be disseminated to the following:

 - o Participation-76th Annual Clinical Congress; December 8, 2020 (Tuesday); 9am-11am
Topic: MANAGEMENT OF INFECTION IN THE OPERATING ROOM (SYMPOSIUM TYPE- THREE SPEAKERS WITH OPEN FORUM
- Conventions
 - o 76th Annual Clinical Congress -- December 6-9, 2020;
Theme: ACC 20/20: Surgery Through the Looking Glass
 - Docquity - Update & Discounts from Docquity
Virtual Exhibit Hall – FREE. (Click link below to see sample)
Scientific Program
 - Opening Ceremony – December 6, 2020; 9am
Platform: Docquity
 - Induction Ceremony – December 8, 2020 (Tuesday); 7pm
Format – Hybrid
- Virtual Exhibit Booths
- Socials – Fellowship Night; December 6, 2020 (Sunday) via Zoom using TNP platform – for 500 pax
Theme: Original Pilipino Pandemic Music (to insert the word - Pandemic)
- o 47th Midyear Convention – May 5-7, 2021; Host: PCS Cebu-EV Chapter; Theme: Classic Surgery in the Present Era
- o 77th Annual Clinical Congress – December 5-8, 2021; Edsa Shangri-La Hotel; Theme: Enveloped Ideas – Intricacies in Decision Making
- o 48th Midyear Convention 2022 Letters will be sent to the Chapters for the submission of bids to host the 2022 MYC.
- CSE
 - o 76th Annual Clinical Congress; December 6-9, 2020; Theme: ACC 20/20: Surgery Through the Looking Glass
Objective: To Evaluate Current Concepts in Surgery and its Evolution and Future Direction
 - Certificate of Attendance - To issue the certificate on a per session basis. This will be issued right after the session attended provided that the attendee has completed answering the post-tests and filled up the evaluation form
 - The Committee will make a letter of request to PRC to consider giving CPD units per session
Rationale: Since the congress is online webinar and all the lectures will be posted in the app for a minimum of 6 months, other colleagues who will not be able to access the event during the actual schedule can still earn CPD units.
 - o 77th Annual Clinical Congress
December 5-8, 2021; Edsa Shangri-la Hotel, Mandaluyong City
Theme: “Enveloped Ideas” – Intricacies in Decision Making
- Surgical Research
 - o Updates on Manpower Study
 - The Single Joint Research Ethics Board (SJREB) gave its approval for the Manpower Study thru a Certificate of Exemption (Review was expedited).
 - Finalizing the questionnaire (ecopy/google form). This will be disseminated to all PCS Fellows through the Chapters.
 - o Champion of Champions
 - o Updating of the PPE recommendations which will be included in the PCS-ORNAP Manual.

- Surgical Training
 - Update on New OR Adjusted/Modified Residency Training Program Guidelines During This Pandemic
 - Participation – 76th Annual Clinical Congress- December 7, 2020 (Monday)-1:30-2:30pm on December 7, 2020 (Monday).
- Ethics & Judicial Matters
 - A case was filed with the Cebu Eastern Visayas Chapter to which both Fellows belong.
- Membership
 - List of applicants for Fellowship 2020 (73 candidates)
 - Special Accommodation Program for Fellows of PCS Component Specialty Societies (17 applicants)

Board Action: APPROVED. The Board expressed that these applicants who availed of the Special Accommodation Program for Fellows of PCS Component Specialty Societies was a result of the dialogue conducted by the Board of Regents with the Officers and Directors of the Subspecialty Societies.

- Applicants for Resident Membership
- The schedule of the Orientation of Inductees will be moved from October 24, 2020 to November 7, 2020 (Saturday), 10:00am.
- Induction of New Fellows – December 6, 2020 during the Opening Ceremonies on December 6, 2020 will be recorded using the Docquity facilities.
- Awards – approval of awardees for the following categories:
 - PCS Fellow Lifetime Achievement Award for 2020.
 - PCS Community Service Award for 2020
 - PCS Legends of the Knife for 2020
 - PCS Most Outstanding Resident for 2020
- Administrative Concerns
 - Formal letter from Mr. Eduardo Cincua informing the Board of Regents, through Dr. Say, that he is filing for his retirement by December 31, 2020.
 - Letter of Appeal from Ms. Eden Grace A. Paule – Re: Deferment of Salary Loan to January 2021.
- Publications - In conjunction with our forthcoming 76th Annual Clinical Congress scheduled December 6-9, 2020 (virtual platform); the Board decided not to subscribe to a newspaper supplement. Instead, the intended content of the supplement will be posted in the PCS website and different social media platform of the PCS.

- Patient Safety
 - Participation – 76th Annual Clinical Congress – December 7, 2020 (Monday); 10am to 12noon
 - Modified WHO Surgical Safety Checklist – ongoing
 - WHO Surgical Safety Checklist Mobile Application
- Other Matters
 - PROAC
Dr. JA Aguilar reminded the Board that the College should stand pat on its stand Re: Philhealth Rules on Administrative Cases (PROAC) Against Health Care Providers, Members and Philhealth Employees.

The College's feedback was submitted to PMA since it was PMA who requested our feedback on said document.

Special Meetings (Decisions approved)

- 10/24/2020 Template for the ACC Powerpoint Background
- 10/27/2020 PSGS Car Raffle in the amount of Php20,000 from the BOR budget
- 11/03/2020 Assistance to Bicol Chapter in relation to Typhoon Rolly – 50,000
- 11/07/2020 Approval of the final draft of the updates on the guidelines for PPE

11th Board of Regents Meeting (Hybrid) November 14, 2020

- Matters arising from the minutes – review of the contract for the mobile application by the legal counsel is ongoing.
- President's update:
 - With the IATF on board examination – no need for RT-PCR except for oral/physical examination
- Treasurer's Report
 - Paper loss is lower than previous month
- Finance Committee
 - Amend the budget to incorporate the hiring of an internal auditor
 - Approval of the 2021 Budget
- Board of Governors – appeal for assistance to the Northeastern Luzon Chapter – approved
- COMELEC
 - Outcome of the mock elections will be monitored and addressed
- Building
 - COVID safe
 - Minimal damage from Typhoon Rolly

- o PSGS to use meeting room for the raffle
 - must coordinate because of the ongoing recording for the annual clinical congress
 - o Future Plan: upgrade the audio-visual capability for online sessions – to fast track for the business meeting in December 2020
 - o Use of QR code in the entry to the building was suggested
 - FAP – rename the assistance to lessen misunderstanding on the benefits
 - HMO and RVS
 - o PAHMOC has accepted the use of the 2020 RVS. Multiplier for negotiation
 - o 2020 RVS for posting at the PCS website
 - o Plan: to negotiate with AHMOPI as well on the use of the 2020 RVS
 - Trauma
 - o Conduct of BEST and Critical care workshops
 - Cancer
 - o Tumor boards
 - o Delineate functions between Committee and Commission
 - SURE
 - o Suggestion – to invite legal counsel in the PCSF meetings as there are legal issues that must be addressed regarding the commissions
 - Surgical Infection
 - o Layout for the Manual was approved
 - o PSIS will apply for affiliation with the PCS
 - Conventions
 - o Finalization of the 2020 Annual Clinical Congress
 - o For the May 2021 – format will depend on the outcome of the Sinulog Festival in January 2021 but the Committee is working for a face-to-face convention.
 - Surgical Research
 - o Manpower study – questionnaire used google docs and will start data gathering by December.
 - o Pathways, algorithm – finalized with the inclusion of the modified WHO Surgical Safety Checklist. This is for submission to the DOH.
 - CSE
 - o Issuance of certificate per session
 - o 3 post-test questions (upon query with the PRC)
 - o Online mass – Officiating Priest: Rev. Fr. Jerry M. Orbos, SVD; Homily-A Celebration of Life: By a Surgical Patient
 - o Final program for the 2020 Annual Clinical Congress will be released next week
 - Socials
 - o Run through for the Fellowship Night will be on November 30
 - Surgical Training
 - o Participation in the ACC
 - Ethics
 - o Issue with PAPRAS and PUA tackled – PCS cannot dictate the subspecialty societies policies as long as there is no conflict with that of the PCS.
 - Membership
 - o To push for the special program for subspecialty Fellows
 - Awards
 - o Approved awardees for 2020
 - Most Outstanding Chapter
 - Most Outstanding Surgical Specialty Society
 - o For 2021, the inclusion of affiliate societies
 - Surgical Subspecialty Society Award and Surgical Affiliate Society Award
 - Both will receive a cash award of Php25k
 - Nominations
 - o The Search Subcommittee must be formed by February 2021.
 - Admin Concern
 - o 13th month bonus for release
 - o Cash bonus (same as 2019) was approved for the employees
 - External Affairs
 - o Plan – visibility in congress (both upper and lower house) as well as with PHIC
 - Publications
 - o “Newspaper” supplement for the 2020 ACC was presented
 - o Incisions – deadline for the articles is next week
 - PJSS – continue with the workshop
 - SICT – mobile application for launching
 - Patient Safety
 - o Modified WHO Surgical Safety Checklist (PCS, 2020) was approved – final layout as one pager was approved via viber
 - o Checklist for dissemination with partners – ORNAP
- Final Message from the 2020 PCS President Dr. Jose Antonio Salud to the 2020 BOR (as this was the last regular meeting of the BOR)

76th Annual Clinical Congress

The Philippine College of Surgeons will be holding its 76th Annual Clinical Congress from December 6 – 9, 2020 ONLINE. Join fellow surgeons in peering through the looking glass into the world of the New Normal. The registration for this Congress is free.

The Philippine College of Surgeons is the premier surgical society of the country. It was established on September 12, 1936 by thirty-five leading Filipino surgeons with the aim of promoting the highest quality of surgical care for our country. With over 2,700 Fellow-members, the PCS is the recognized mother society which governs its eleven surgical subspecialty and eleven affiliated societies. The PCS is committed to the pursuit of excellence through continuous surgical education and updates.

The theme for this year's Congress is "Surgery Through the Looking Glass" with the objectives to evaluate the current concepts in Surgery delving into its evolution and future direction and to evaluate current techniques. Because of the COVID-19 pandemic, surgical approaches have been drastically altered with the need to know the new guidelines set, grasp the latest updates and know

the newest surgical techniques. Distinguished guest speakers, Presidents, faculty members and representatives of the College of Surgeons from the ASEAN countries and the American College of Surgeons will lecture and share their knowledge and foremost expertise in

the field of surgery. The Congress will hold a tumor board summit, a research paper contest and a number of symposia and panel discussions. The various surgical sub-specialties will likewise hold simultaneous webinar sessions and cine-clinics during the four-day congress.

The ONLINE Annual Congress will also serve as a venue to induct the PCS' 73 new members and elect the new set of the Board of Regents and other officers. Despite the pandemic, the PCS will hold its annual Fellowship Night celebrations in virtual mode in the spirit of camaraderie. ■ MJBB



Dr. Leopoldo J. Vega is G. T. Singian Memorial Lecturer

Dr. Vega is a Fellow of the Philippine College of Surgeons and the Philippine Association of Thoracic and Cardiovascular Surgeons. He is currently the Undersecretary of Health, DOH. He is also the Medical Center Chief of Southern Philippines Medical Center (SPMC). He was the former Medical Director of the Davao Medical School Foundation (DMSF) Hospital from 2003 - 2008.

Dr. Vega was the recipient member of the Kabuhayan Awards, for Medical Mission Hospital and Health Services Cooperative (MMHHSCP), Malacanan Palace under President Fidel V. Ramos, 1997; recipient member, Civil Service Awards, Malacanan Palace, for Surgical Networking as a project of the Davao Regional Hospital, Apokon, Tagum under President FVR, 1997. He is likewise the recipient of the Leaders and Achievers of Davao (LEAD DAVAO) Awards by the Davao Jaycee's Senate last December 2015. ■ MJBB



PCS @84: A Beacon of Hope Amidst the COVID Pandemic

The PCS 84th Foundation Celebration

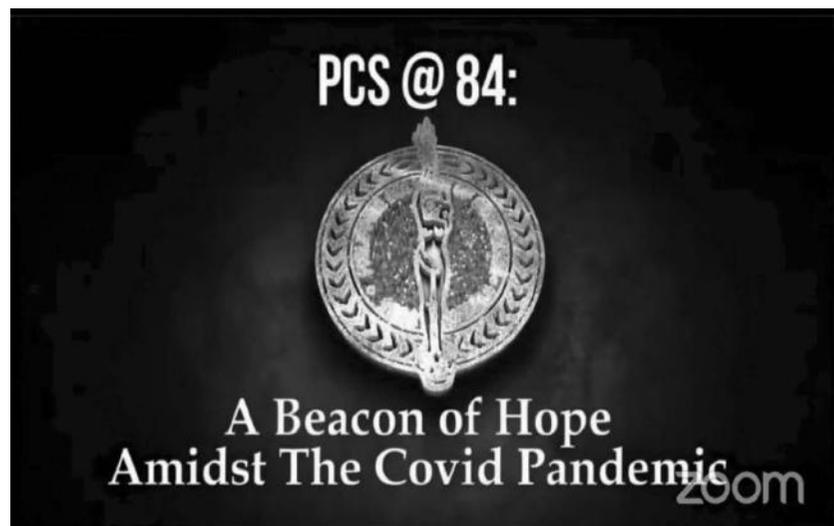
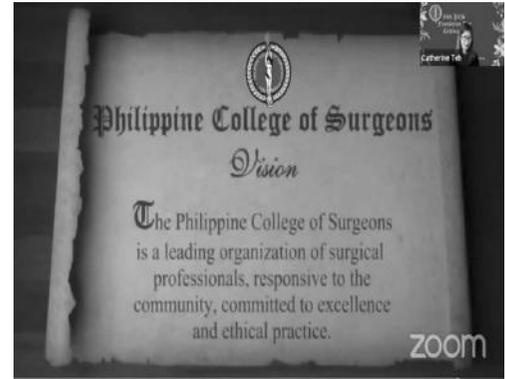
• Marcus Jose B. Brillantes, MD, FPCS, FPSGS •

The Philippine College of Surgeons, the country's foremost and only premier surgical college and umbrella organization composed of the different accredited surgical specialties, celebrated its 84th Foundation Anniversary this year in an altogether unique manner compared to previous years. Bearing the theme of "PCS @84: A Beacon of Hope Amidst the COVID Pandemic", the month-long celebrations were conducted by the organization's 12 chapters nationwide but in stringent observance of the safety protocols set by government due to the viral contagion.

The PCS Foundation celebrations rightfully kicked off with a Thanksgiving Online Mass on September 6, Sunday held at the Boardroom of the PCS Building, marking the start of the commemorative occasion.

The different chapters conducted various activities. As early as September 5th, one chapter organized the "Plant a Tree in Your Own Backyard, Part II" via Zoom with both video and photo documentation of the sapling planting by the chapter Fellows. Also on that date, other chapters started the Torch Relay with the passing of the PCS torch led by Fellow members to all the COVID-19 referral medical centers in the regions as they issued the battle cry, "We Heal as One!" In a simultaneous nationwide campaign for Safety in Cycling, PCS Fellows from all the chapters encouraged other cycling enthusiasts in their respective areas to join them in completing an 84-kilometer bike run - each kilometer signifying and dedicated in solidarity with the PCS for every year of its 84 years.

To reach a wider audience for information campaign, a number of Fellows were invited for guest appearances in the various media platforms. For the training institutions across the country, virtual inter-hospital



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interesting case presentations were organized. Due to the COVID pandemic which disallows the gathering of persons in meetings such as round table discussions, several lay webinars were likewise scheduled featuring lectures on various topics in surgery via the Zoom platform. Other chapters held blood letting activities, minor surgical missions and cancer screening clinics at their locality but under strict compliance with the necessary protective protocols.

The Annual PCS Foundation Day Dinner celebrations have been held in the past recent years at the EDSA-Shangri-la Hotel on September 12th in dignified elegance. However, due to the on-going health crisis and keeping the general safety in mind, such practice was rescinded and the PCS was constrained to celebrate this annual commemorative affair in virtual mode. This circumstance however didn't dampen the spirits of this auspicious affair. Guests, though comfortably ensconced in their own homes or office clinics, were appropriately dressed in formal attire.

PCS President Dr. Jose Antonio M. Salud gave his Welcome Remarks. After the traditional audio-visual presentation of the PCS' history, the Keynote Speech was delivered by Dr. Gerardo D. Legaspi, Director and Chief of Neurosurgery, Philippine General Hospital.

For her invaluable and dedicated service to the College for 40 years, PCS Executive Secretary, Ms. Annette D. Tolentino was given the PCS Loyalty Award, which was also one of the evening's highlights. Other PCS staffers who were given awards for service were Angelita Fampulme (5 years) and Concepcion David (5 years) of the Accounting Department.

Upon the conclusion of the virtual festivities and after giving his Closing Remarks, PCS Vice-President Dr. Antonio S. Say raised his silverware goblet for the Ceremonial Toast. All other guests, safely behind the screens of their devices, collectively raised their wineglasses in unison to toast the Philippine College of Surgeons on its 84th year.

Mabuhay ang PCS! We Heal as One!



84 FOR 84: A Cycling Tribute to the PCS

• Jose Rhoel C. de Leon, MD, FPCS •
Treasurer, 2020

It was just an idea that sparked and became a wildfire - seeing hundreds of fellows of the College all over the different chapters riding together on a specific day for 84 kilometres (at least). Each kilometer is meant to commemorate the 84th founding year of the College.

Cycling as a sport and as a hobby has been here with us for the longest time but because of the pandemic, it experienced a worldwide resurgence. In fact, there are reports of an increase in the number of cyclists to almost 200%! Even the biggest manufacturer of bicycles in Taiwan cannot keep up with the worldwide demand, that if you go to bicycle shops nowadays chances are they are out of stock and you have to wait in line for the bicycle of your desire - specially the good brands.

As I was on my usual morning ride after our August Board of Regents meeting, the idea came up. I immediately called the chairman of the Sports Committee of the College - who happens to be a cyclist as well - and expressed the idea to Dr. Ferdie Syfu. He immediately agreed and just barely two weeks before the foundation day, after getting the nod from President Chito Salud, we informed the fellow cyclists we know in the different chapters. We also communicated it to all the chapter officers and to our surprise there are more fellow cyclists in the chapters beyond those we know. There's also a viber group of fellow cycling enthusiasts, most of them are surgeons led by no less than Dr. Alex Erasmo, a past president of the College called PadyakMD who helped in the dissemination of the project.

So, the mechanics were laid down by Dr. Syfu, 84 km one time ride or cumulative, preferably on September 11 or within that week if cumulative, record your ride on any cycling app and post it on social media with a hashtag of #pcs84@84.

The response was beyond what we expected. Almost all chapters participated, some chapters did it as a group! Fellows from Baguio and the Ilocandia all the way to Mindanao pedalled through 84 kilometers to give tribute to the College. It was so encouraging that the committee is planning on other advocacy rides for the College for the coming year. Indeed, it was just a spark of an idea that became like a wildfire that brought up more ideas for us. Watch out for the PCS cyclists in the coming years. We can indeed use this sports/hobby to further the ideals of the College.

But there's more! As this was all going on, the PCS Commission on Trauma is embarking on an advocacy on cyclists safety. This is a project that will truly have a great impact both for the increasing number of cyclists on the road and the motorists in general. Cycling as a means of transportation came to the forefront as well with this pandemic.

It is a healthy option, it is environment friendly and it will cause less accident and death if the safety standards will be applied by the cyclists and the motorists as well. Watch out for this. Indeed, there are positive things this pandemic has brought out.



CUTTING: The Surgeon Warrior

(Speech delivered at the 84th Foundation Dinner, September, 12, 2020)

• Gerardo D. Legaspi, MD, FAFN, FPCS •

Director and Chief of Neurosurgery, Philippine General Hospital



The distinction of being chosen as tonight's speaker during this most unique 84th PCS Foundation night, given the long history of the society and distinguished surgeons who make it up, humbles me. Illustrious neurosurgeons of the early days have themselves served as beacon for us in the PCS, serving as past presidents, Dr. Renato Sibayan, Dr. Faustino Domingo, and Dr. Romeo H. Gustilo. Dr. Gustilo together with Dr. Victor Reyes pioneered formal Neurosurgery in our country in 1951. It was the former, however who became more involved in the PCS and other societies as well leading to the formation of our Philippine Society of Neurological Surgery in 1961. In his inaugural speech as PCS president on December 22, 1965, Dr. Gustilo talked about the Intangibles of Surgery. Prerequisites and traits that make for a compleat surgeon otherwise, according to him, "the specialist becomes necessarily narrow, the whole man is forgotten." He listed these down in what he called the Surgeon's Decalogue, espousing on the virtues and values of

Dedication
Devotion
Companionship
Seniority
Professionalism
Gratitude
Respect
Honesty
Integrity and
Honor

Add to this our endless hours of training and specialization and eventually further refinement of technique with countless surgeries. Eventually, another dimension of ourselves springs forth, so ingrained in us that it slides unnoticed into our subconscious. Without knowing it our "surgeon being" permeates into our persona and becomes a driving force from within. Somehow, the principles that guide our surgeries spill over to our everyday lives as well. I recall a time in my earlier years as neurosurgeon when my wife reminded that I was starting to treat people around me like my residents! She was most probably right. If we do some introspection I think everyone will agree that at the very least the surgeon inside wants the people around us to know exactly what we want without telling them. Even more so to anticipate what we need and deliver it! I may be stretching this a bit already but if one gives

it some deep thought, almost any significant event in our lives can be approached with the surgical steps of positioning, prepping, draping, cutting and closing.

As I look back to the last 5 ½ months of PGH being a COVID Referral Center, I have come to realize that one of the biggest factors why we were somehow able to weather the difficulties is that the COVID Team is practically made up of surgeons who subconsciously ran the events like it was an operation.

Before I proceed, please allow me to take this opportunity to recognize and thank them. I have not had a chance to thank in public and what better time to do this than in this special event of our Mother Society.

Dr. Bok Ocampo, Chief of Trauma

(Coordinator for Operations)

Dr. Dennis Serrano, Chief of Urology

(Coordinator for Logistics)

Dr. Rodney Dofitas, Chief of Surgical Oncology

(Coordinator for Manpower)

Dr. Eric Berberabe, Chief of Gastrointestinal and Hepatobiliary Surgery

(Coordinator for Communications)

Dr. Noneng Monroy, Chief of Colorectal Surgery

Dr. Tony Perez

Dr. Kathy Co, Dr. Mico Perez, Dr. Mac Onglao,

Dr. Ancoy Lopez, Dr. Emy Cua

Drs. Kenny Seng and Ronnie Baticulon

(Neurosurgeons)

People who exactly knew what PGH needed and delivered it when the circumstance demanded for it. Just like warriors in a battle who have learned how to protect themselves by ensuring the safety and welfare of others.

PGH was declared as COVID Referral Center by DOH on March 19, 2020. Thereafter, the COVID Team met on March 22, 2020 and had one week to convert PGH to one.

The Team **POSITIONED** the hospital to be the best Covid Referral Center that it could possibly be. Setting the right expectations to enable it to endure the long haul and at a comfortable vantage point, with a direct view to the "field". Only promises that were achievable were made.

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It was **PREPPED** to sanitize infrastructure and manpower imperfections, which there were a lot of. In weeks time, the century old wards of PGH underwent engineering upgrade to ensure safety of patients and healthworkers by improving ventilation and isolation protocols. Complementary to this, the realignment of staffing pattern and roles were done to make for a smoother workflow

Later on, PGH was **DRAPED** with a huge “war chest” of resource to shield it from any conceivable eventuality. The Team identified all weak points and covered all of these accordingly. The draping came in multiple layers, PPEs, equipment, gadgets even everyday necessities of the staff, making it sturdy and impermeable.

And then it came, on March 30, 2020, we declared **CUTTING** and opened 240 beds in PGH dedicated to COVID patients . Everyone held their breath.

In surgery, there is probably no other word more deliberate and forceful than “Cutting”. Two syllables that open the surgeon’s role to a multitude of possibilities, demanding from him the utmost of skill, method and diligence. Whether it’s a small keyhole cut or a long laparotomy incision, the commitment is never less unwavering. Just like in any emergency surgery, you don’t know what you’ll see after opening. It is the surgeon’s innate ability to inspect, dissect, mobilize, ligate and control and anticipate a problem that allows him to weather any crisis. Buti na lang hindi takot sa dugo ang mga taong ito.

As no one has written the handbook for a COVID crisis, these surgeons continue to calculate their moves responding accordingly to every situation. Sabi nga nila “cut ng cut para sikat”. Going through this

experience, they have validated to themselves that it really takes a team to fight this battle. What they have done is to allow the Internists to carry out their clinical responsibilities without having to worry about any logistical or manpower need. As we go through this what is really obvious is it’s impossible to do it all alone. The Navy Seals motto of “Two is one, one is none” is more true now than ever. It is probably what Dr. Gustilo was referring to as “companionship” 55 years ago.

We are approaching the 6th month of this pandemic and it is quite evident that none of the surgeons can really declare when **CLOSING** will be. However as good operators, we continue to trudge on and do what needs to be done.

In this pandemic, the Surgeon has been extracted from his comfort zone. The sanctity of the operating room was replaced by the daily life and death battles in the ICU. However, although their new role in the COVID operations is taking much of their attention, we know that one eye is already surveying the landscape for the resumption of life-saving operations. Inherently, the challenge has grown two-fold. Fortunately, the commitment has risen more than that.

And so the saga of the surgeon warrior continues, shining bright to be a beacon of Hope.

In closing, let me leave you with one of my favorite quotes, from the Philosopher Georg Santayana, that I keep close to my heart in challenging moments like these:

“The difficult we do immediately. The impossible will take a little longer.”

Thank you and good night. Again, congratulations on your anniversary!



AWSP in 2020: The Year That Was

• Joy Grace G. Jerusalem, MD, FPCS, FPSGS •

The Association of Women Surgeons of the Philippines (AWSP), under the able leadership of its President, Dr Anita C. Tarectecan, flung itself headfirst onto a flurry of sociocivic activities at the beginning of the year 2020. The tragedy that befell the towns of Batangas with the phreatomagmatic eruption of the Taal Volcano caused great economic losses to affected provinces. Donations in kind were made by the AWSP to the Philippine College of Surgeons- Southern Tagalog Chapter for the victims of the eruption in January. The following month, the AWSP collaborated with the Philippine College of Surgeons' Cancer Awareness activity, "Alliance for Life: A Cancer Summit" held last February 4, 2020 at the PMA Auditorium in Quezon City. Dr. Tarectecan gave a lecture on breast cancer awareness followed by a breast screening activity with the help of general surgery residents from various training institutions. March ushered in the national community quarantine brought about by the pandemic caused by the SARS COV2 virus, a global phenomena that would literally put the entire world to a halt. The planned Women's Month Activities and fundraising activities were postponed as strict home quarantine and social distancing measures were put into place. Among these fundraisers was the much anticipated "Strut-For-A-Cause: Surgeons in Couture V2" and block screening of "Wonder Woman 1984", now slated for release in 2021.

The subsequent months would witness the change to the new normal due to restrictions in face-to-face meetings. All societies shifted to teleconferencing and webinars for its professional education and development activities, pioneered by the Philippine College of Surgeons with the successful run of its 46th Midyear Convention in May. Similarly, the AWSP would host three consecutive webinars engaging fellows and friends to fight off the forced inertia brought upon by the extended community quarantine. The first was held in June 19, entitled "Dance Away The COVID Blues: Physical and Mental Health Benefits of Dancing" with Ms. Anna Kathrina Halili Cruz- Bueno, the Associate Artistic Director of the Halili Cruz School of Dance, introducing the concept of Distance Dance Education and the importance of physical fitness. The webinar featured instructors and students of the renowned school of dance in interactive sessions in the different genres of Ballet, Jazz and HipHop. In September, we invited Coach Marc De Guia, Head Trainer of Active Central for "Exercise the COVID Blues Away", to highlight how important maintaining a regular exercise regimen for general wellbeing. A nurse by profession, Coach De Guia and Trustee Dr Maria Concepcion C. Vesagas ably demonstrated an easy to follow but nonetheless challenging exercise routine including how to properly warm up and cool down after the vigorous

exercise program. The last webinar, held in October, sought to combine the themes of the first two, dance and exercise, in "ZOOM-BA the COVID Blues Away", the title a clever play on the popular fitness craze Zumba and the common online platform ZOOM, suggested no less by the PCS President, Dr Jose Antonio M. Salud. Coach Estherlyn "Ellen" Geronimo-Labuca was the guest fitness instructor, demonstrating different sets designed for general fitness (Zumba Fitness), muscle tone (Zumba Toning), high impact training (Zumba Strong) and yoga (Nirvana Fitness). The last in the series was partly sponsored by ADP Pharma.

For Breast Cancer Awareness Month, the AWSP collaborated with the Philippine Society of General Surgeons- Metro Manila Chapter in a series of breast cancer awareness lay fora entitled "MaDIBDIBang Usapan Ukol Sa Sakit ng Suso". They were held for two consecutive Saturdays, October 17 and 24, with the following topics:

- Demystifying breast Disease: Common Misconceptions Surrounding Breast Disease by Dr. Christine Joyce M. Santicruz
- Breast Conditions in The Pediatric and Adolescent Age groups: When Should We Worry? by Dr. Esther A. Saguil
- Breast Reconstruction and Body Image Concerns after Breast Cancer Treatment by Dr. Reden Bukid-Abella
- Support after Breast Cancer Treatment: How to Mitigate Psychological and Financial Burden of Disease by Ms Imelda Pedrosa

The Scientific Session for the PCS 76th Annual Congress in December focused on the current craze in plants entitled "Urban Gardening 101". The session featured two lectures from AWSP trustees:

- Bernice C. Navarro, MD, FPSGS, FPCS Lecture: "Urban Gardening 101" It's the new Quaran-thing: How to be a certified plantito and plantita"
- Ma. Celine Isobel A. Villegas, MD, FPSGS, FPCS Lecture: "Laparoscopic Gardening"

The AWSP Board of Trustees 2020 are Anita C. Tarectecan, MD, President; Esther A. Saguil, MD, Vice President; Wilma A. Baltazar, MD, Immediate Past President; Maria Cheryl L. Cucueco, MD, Past President; Joy Grace G. Jerusalem, MD, Board Secretary; Bernice C. Navarro, MD, Treasurer; Joan S. Tagorda, MD, Trustee; Ma. Concepcion C. Vesagas, MD, Trustee; Ida Marie T. Lim, MD, Trustee; Maria Rica M. Lumague, MD, Trustee; Hilda Sagayaga, MD, Trustee.



A



B



C

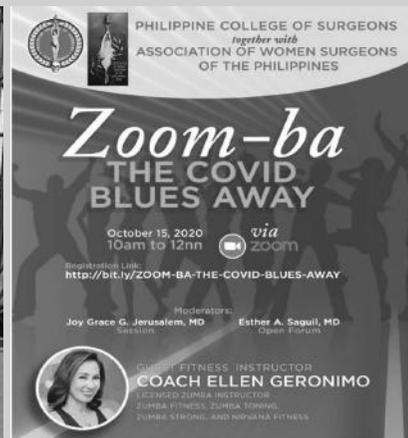
- A. January 16, 2020, AWSP donated various supplies to the PCS-Southern Tagalog Chapter for the Taal Volcano victims.
- B. AWSP president, Dr. Anita C. Tarectecan gives lecture on “Breast Cancer Awareness”
- C. After the lecture: Free breast screening with the help of the General Surgery Residents from various institutions
- D. Dr. Tarectecan thanked the Residents who attended the breast screening activity from the following institutions: UP-PGH, USTH & Perpetual Help Medical Center - Las Piñas
- E. Marc De Guia coaching Dr. Connie Vesagas
- F. October 15, 2020, Thursday, 10:00 AM – 12 NN: *Zoom-ba: The Covid Blues Away* with Coach Estherlyn “Ellen” Geronimo-Labuca



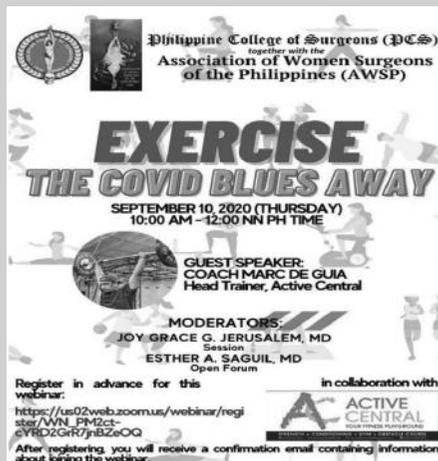
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E



F



Habitus Intertwines Horology

• Benjamin Herbosa, MD, FPCS, FPAPRAS •



It seems far fetched and uncorrelated, but habitus is defined in sociology as “socially ingrained skills, habits and dispositions”. It embodies how individuals perceive the social world and react to it physically, emotionally and mentally, with the presumption that they belong to the same societal cluster. As surgeons, we have issues on the so-called body habitus, especially during hours-long procedures.

Habitus is a conglomeration of 4 assumptions and they are the following: the dimension of the psyche or unconscious; the dimension of incorporation or social, which precludes ego; the assumption on strategy or dimensions of objects; and the last as being the dimension of time or stability. These assumptions in one’s life, intersected by career, family and even profits, need to be balanced and counterbalanced, whether knowingly or not. This scheme might appear like a clock’s face with the assumption of time, or dimension of Stability, being the second hand. It is, to me, the most important “hand” of the wristwatch as it dictates the tempo, in musical parlance, and even, chimes, the proper pace in sounds of timekeeping. Thus, the intersection of time, as by its own entity and as a concept of habitus are vividly interconnected; the juxtapositioning of Habitus and Horology.

Horology is the study and measurement of time. It is the art of making gadgets that can state or dictate time. Through the years, I have been fascinated by all these contraptions called watches, clocks, atomic clocks, marine chronometers, sundials, clepsydras, hour glasses, time recorders, pocket watches etc. Not to demean its artistry with the word contraption, which connotes badly made or unsafe, they are to me the best items we can ever have possibly attached to ourselves reminding us of every minute, every hour of everyday that we exist and that the “clock is ticking”. But of all the discoveries that these artisans of time have made, novelty aside, it is the Tourbillon that is best. Translated from French as “whirlwind”, it portends and embodies the perpetual quest for exactitude of time keeping. The spring of the balance is like the beating heart that works all watches. But timepieces work to a certain fault. As the center of gravity takes direct effect on the spring’s center of balance, there are constant changes each time the portable watch is moved with

the sway of the arm. The so-called geometric middle is altered, affecting the regularity of the oscillations of the portable watch. With the persistent gravitational pull of mother earth, it causes the mechanisms to be no longer in its restricted horizontal position. The answer as provided by Patek Philippe is “to suspend the balance -wheel and balance-spring in a cage that turns about on its own axis once every so many seconds or so”. Thus, the “lopsided” springs are moved around and returned back to its true geometric center every so often. Therefore, maintaining the regularity and precision of time keeping even to the millisecond!

As surgeons seek the best instruments and machines (e.g Laparoscopy and Robotics) in terms of handling tissues and results relative to spatial considerations, the best horologists search for the best performing, on-the-dot accuracy of time delivery (and as stated, to the millisecond precision) without even mentioning coupling the complications. Those technological add-ons that sync the day date and power reserve albeit for quality mechanical accuracy and advances have come of age. Imagine the compelling parallels between Horology and Habitus, with the latter being an important aspect of our lives as a person in this world. Though less mechanical as these “pieces that keep time”, that as we are set to work or now to rest, it serves as the reminder that as surgeons, we are one and on schedule with the world. That we run the clock like everyone else, trying to be limitless in our capability and resources. We recognize those limits though even with our imbued skills. Although acceptably, sometimes there exists an incoherence due to a medical dilemma at “that particular time” or instance, we will not be forestalled by a distracting occurrence but actually be inspired to resolve the issue and rise to the occasion. Let us accordingly, make every effort to improve our Habitus, reset or reboot, recalling at least that one dimension, that of time, which I find most important and mentioned in detail, provides that spring, or stabilizing screw for us. Let us try to adapt and think of the “Tourbillon” effect or mechanism so that our lives and the lives around us may be able to adjust to all causes of dysfunction and insanity, emotionally, physically and mentally disturbing effects this finite living has brought us. So every time you look at your watch or clock, remember your habitus and readjust it as well.

The Next Level of Thinking: The Philippine Board of Spine Surgery

• Ronald P. Tangente, MD, MBA, FPOA •

Vice-President

Philippine Spine Society

John Maxwell once stated, “The road to the next level is always uphill, and if a team isn’t intentionally fighting to move up, then it inevitably slides down.”

In 1995, Dr. Antonio Sison, a brilliant Orthopaedic Spine Surgeon, envisioned to uplift the standards of managing spine conditions by providing avenues for professional cooperation among its members. He has successfully turned the Philippine Spine Society into where it is now, a coherent, academically-oriented, and forward-thinking 108-member fellowship. The baton has been passed this year to Dr. Francisco Altarejos, another visionary leader who will propel us to the next stage.

Inherently, we aspire to practice at the top of our chosen profession and provide the best quality of care. Surgeons are expected to be experts, learned, and have met the highest standards among peers. However, it is difficult to assess the level of skills and competency. With these expectations, a collegial body will be in the best position to do the evaluation process. To reach full potential, surgeons should be committed to participating in a process of assessment and continuous quality improvement.

According to the American College of Physicians, the most frequent reasons for physicians to seek certification are for professional image and quality of care. Despite the tedious process, professional growth has been the primary motivator of doctors. This growth mindset heightens our intrinsic desire to be better.

A comprehensive meta-analysis finding has shown that a significant decline in the knowledge and compliance of standards of care happens

throughout the career of a surgeon. Unfortunately, motivation per se is never enough to elicit change. In certain circumstances, the motivation is drained the moment we learn to accept the status quo. Therefore, a catalyst is needed to keep us moving forward. In the realm of spine surgeons in the country, it justifies the need to establish the Philippine Board of Spine Surgery.

The depth of spine surgery in the Philippines has been evolving dramatically. The Philippines has started to leave a mark in the region. The demand and expectation for better quality spine care are growing.

The Board of Trustees created an ADHOC Committee headed by Dr. Adrian Catbagan to study the Philippine Board of Spine Surgery. It is tasked to assess the needs of the country and create strategies. A paradigm shift is going to happen. It will encourage spine surgery fellowship programs in the country rather than trainees going abroad. In so doing, the programs will have to scale up. The PBSS will set the bar for the training requirements, create a common curriculum for fellowship programs, and prepare the certification process.

Let us accept that progress is not going to happen without change. The Philippine Spine Society is given the noble responsibility of leading the fulfillment of the vision. This step ladder approach requires a lot of creativity and patience along the way. Collectively, we strive to be better each day until we reach the next level.

POA CORe Develops PBO COTAM “A New Curriculum for the New Normal”

Paul Ruel C. Camiña, MD, MPH, FPOA, FPCS



The positive thing about having the Covid-19 Virus in our country is realizing that all changes are welcome with open arms. Perspectives can be improved, resulting in dynamism in thought and deed.

The New PBO Curriculum, Online Teaching and Assessment Methods (COTAM) was developed by the Council for Orthopaedic Education (CORe) of the Philippine Orthopaedic Association. This is a 4-week



online course initiated for orthopedic residency educators. The POA Council of Education started their Face to Face meeting early this year to start training POA Fellows on how to teach residents and younger fellows using Outcome Based Education.

In October 2013, during the Second Philippine Professional Summit, the Philippine Regulatory Commission included Medicine as one of the seven (7) professions to be covered by ASEAN Mutual Recognition Agreement / Arrangements. The summit emphasized lifting Filipino professions to a higher level.

In the same year, the ASEAN Orthopaedic Council formed an Orthopaedic Education Council chaired by Prof. Lee Eng Hin (Singapore Orthopaedic Association). A series of meetings led to the collaboration of all National Training Programs resulting in the 2019 ASEAN Orthopaedic Association (AOA) Orthopaedic Curriculum for Residency Training.

The Philippine Board of Orthopaedics (PBO) set up the 1st Task Force OBE Meeting on May 13, 2016 attended by Dr. Jean Pierre F. Leung, Dr. Daniel D. Caro, Dr. Arturo C. Cañete, Dr. Paul Ruel C. Camiña, Dr. William T. Lavadia, Dr. Emmanuel P. Estrella and Dr. John Andrew Michael A. Bengzon. The group discussed the scope and structure of Task Force OBE, the curriculum shift, development of the orthopaedic curriculum via its competencies, milestones and assessment methods.

On January 18, 2020, the POA Board of Trustees instituted the Orthopaedic Education Council and, together with the Philippine Board of Orthopaedics, organized “Training the Trainers” with the goal of providing learning tools for the benefit of Fellows and Residents in training.

The educational outcome we want for our orthopaedic residents in training is based on what



we can offer to them. This improved curriculum will not directly give them the knowledge and skills of the trade, but instead, enable them to behave and acquire the proper attitude in the performance of their sworn profession.

Creating a 5-star physician among our residents will not be enough, it is our responsibility to mold them to be professionals with a deep sense of social accountability and high ethical standards.

In October 2020, the CORe and PBO will jointly conduct a one-month course on Orthopedic Education in Covid Times: Shifting to Online Learning and Evaluation Methods. This is a 4-week course with 4 weekly modules consisting of asynchronous work (self-directed learning readings and videos), synchronous weekly zoom lectures and feedback sessions, and with expected output of preparing plans for online teaching and evaluation for orthopedic residents.

The 18th Congress House of Representatives in its Second Regular Session approved the bill regulating doctors last 03 September 2020. The bill was primarily authored by Representative Doctor Angelina Tan of 4th District of Quezon City and was unanimously passed by the House Committee on Civil Service and Profession Regulation. This is known as the Physicians' Act repealing the outdated Medical Act of 1959.

The bill covers the regulation of Medical Practice in the Philippines as well as the medical education and training of doctors. This law will also seek to establish an Integrated Professional Organization of Physicians (INPOP) and a Post-Graduate Medical Education Council (PGMEC). In my opinion, these will replace the Philippine Medical Association as it currently overlooks all the Specialty Divisions, Specialty Societies, Affiliate Societies and other groups of Non-Government Organizations (NGOs) of Doctors.

The bill includes governance of Medical Residency Training programs, and through the PGMEC, will authorize an Accrediting and Certifying Body that will comply with the country's obligations to the ASEAN Integration. Currently, only private organizations of physicians are accrediting doctors as diplomates or certified specialists for the purpose of membership to their organizations. Until the Philippine Regulatory Commission (PRC) Professional Regulatory Board of Medicine issued a Resolution No.25 Series of 2015, "Recognition of Specialty Societies and Specialty Boards, and Certification of Specialists". In this resolution, the PRC recognizes the eight (8) Divisions of the PMA as their Accrediting and Certifying Bodies (PCS, PSA, PCP, POGS, PPS, PSP, PCR, and PAFP). Through this Specialty Divisions, all recognized Specialty Societies will have their own Boards to recommend Specialists for the recognition of PRC.

Complying with the ASEAN Integration (ASEAN MRA), the PRC-BM Resolution and the POA CORe in the Continuous Professional Development of all Orthopaedic Doctors have been participating. The Philippine Board of Orthopaedics developed "The Curriculum for Resident Education and Training in Orthopaedic Surgery 2020."



As Dr. William T. Lavadia, FPOA, Chairman of the PBO, says, "A curriculum is a 'living document' and will always be a work in progress." Already, prior to its release, there are a lot of changes in the teaching and learning strategies and assessment methods that need to be made as a result of this pandemic. The Taskforce trusts that this will serve as the foundation and backbone for further revisions and for developing additional instructional designs in orthopaedics that are readily applicable in our own context; a curriculum that we will always be referring back to and call our very own as we continue to journey into the 21st Century.

Truly 2020 is the beginning of a 'New Normal' for which the men and women of the Philippine Orthopaedic Association and the Philippine Board of Orthopaedics are accepting the challenges.

The Philippine Orthopaedic Association remains relevant even at this time of the Covid 19 Pandemic. An immediate shift to virtual education for Residency Training in its new curriculum highlights the resiliency of our Fellows and their accompanying compassion to improve the quality of Orthopaedic Healthcare in the country.

The Physicians Act of 2020 may be a good law in regulating medical practice in the country only if it recognizes a competent organization (private or government) to support the accreditation and certification of Specialty and Subspecialty doctors, free from all political motivations.

Adaptive Changes will continually guide our Fellows to better serve our patients with Compassion, Affection, sense of Responsibility and a high standard of Ethically bound treatment.



PHILIPPINE UROLOGICAL ASSOCIATION

Annual Report of the President

• Harry G. Longno, MD, FPCS, PUA •

The year 2020 will never be forgotten in the history of the PUA, and I will live with the title of being the “Covid President”.

When we started the year, strategic planning was conducted early to prepare for another fruitful term. And although we planned ahead, nothing could have prepared us for a global pandemic. Despite this, we still met with our pharmaceutical partners to discuss the logistics on accomplishing the remaining programs of the year. The Executive Council met with the different chapters and organizations to review important matters such as the “ONE PUA” Memorandum of Agreement and the ratification of amendments in our constitution. I sincerely thank the different chapters for accommodating the Council during our visits with a warm welcome.

Meetings were also held pre-quarantine between the committee chairs and top executives of pharmaceutical companies to discuss the remaining preparations of our society’s activities.

The Outreach Committee, headed by Dr. Ronan Cuaresma proceeded with the surgical mission at the Quezon Memorial Medical Center, in Lucena City just before the nationwide lockdown.

We also purchased a property for the future PUA office. Several discussions were made prior to the decision’s approval by the Executive

Council. Several factors were considered such as accessibility, future developments, and the need for an adequate parking area. Our new home will help us in providing members with activities like conferences, seminars, and skills and training workshops.

On March 2020, the start of the lockdown halted all physical activities. And in the interest of the safety and health of our members, the Executive Council decided to cancel the midyear convention along with other events. Your PUA Executive Council immediately changed their game plan. The PUA execom came up with better strategies to overcome the challenges of the pandemic. This could not have been achieved had it not been for the help of local chapters and subspecialty societies, this is truly a testament to “Fellowship” within the PUA.

I would still like to thank the mid year committee chairs headed by Dr Aries Roque and the scientific chair Dr Apol Lasala for their effort in making the program. It was at this time that we shifted to virtual operations. Conducting several tele conferences with key committees and seeking counsel with senior urologists.

The Committee on Practice Guidelines headed by Dr Art Castro produced the recommendations on dealing with the practice of urology in the time of Covid-19.

The PUA website was given more attention and funding, headed by Dr. Karl Tan, and this played a crucial role in boosting our current operations. It has been instrumental in connecting with members in both local and international levels during these times of social distancing. This will serve as a catalyst to fast pace our goal of an independent and well-known organization, not only in our country but throughout the world. Additional funding for the organization has also been one of the achievements of our website. It was observed that we are mostly dependent on the income generated from our conventions to address our operational needs. But now, the PUA website will buffer our financial requirements during this time of crises wherein physical conventions are unadvisable. Several major pharmaceutical companies have shown great interest in advertising their products through our new platform. In line with this, the PUA App was also developed and launched last September to provide members easy access to the PUA website. Congratulations to all those involved for a job well done. Through the leadership of Dr. Patrick Tuliao, an online version of the Philippine Journal of Urology was also made possible.

The Men's Health Committee headed by Dr Raymond Cablitas, conducted a successful teleconsultation last June despite challenges. A larger, grander event was held last September catering to more attendees across Luzon, Visayas, and Mindanao. The recently concluded Bladder Awareness Month was also a huge success through their innovations in promoting the event. Congratulations to all those involved.

The Review Course was a great success as well despite the quarantine with their program held virtually last August 5-7. They painstakingly ensured that the program and preparations were worthwhile to the participants. Congratulations to the committee, headed by Dr. Martin Reyeg.

Several subspecialties adapted by using webinars to continue educational courses. For this, I would like to thank Dr. JV Prodigalidad, Dr. Godofredo Gasa and Immediate past president, Dr. Sam Yrastorza.

Amidst these national issues, our relations with other societies such as the Philippine College of Surgeons have strengthened. The Executive Council strongly recommends that we update our membership with PCS to have a more influential voice in the national arena. As the adage goes, there is strength in numbers.

By now, you have witnessed the fruits of labor done by several committees. Dr Arcinas headed the Research Committee that successfully held the Research contest. I know the task at hand was difficult but the group certainly went above and beyond expectations.

Our biggest and most-awaited event has always been our annual convention. The Scientific Committee headed by Dr Patrick Tuliao and his committee members went the extra mile to make this event a success. I deeply appreciate your patience and understanding with all the different requests from the subspecialties. The overall chair Dr Gerial created an antivirus to come up with a better and bigger PUA Annual Convention. However, all preparations would be futile if there were no participants. Hence, let me take this opportunity to thank all the members and attendees, both local and international, who supported our first virtual PUA convention.

I would also like to make an appeal to all present, let us continue to patronize the future webinars, especially the PUA sanctioned webinars, for the next year. We need everyone's support and involvement. This will be a test of how, we, as an organization can hold up. Collaboration of all subspecialties, chapters, and organizations is imperative now more than ever.

I used to dislike the title "Covid President". But now, it is a permanent reminder of how we as an organization, as One PUA overcame one of the darkest times in recent history. It is a title that bears witness to how every single one of us stepped up to the challenge, and how we continue to do so. Let us keep the fire of fellowship burning.

Stay safe and stay negative, Mabuhay ang PUA. May God bless us all!

PAHPBS 2020: A Play in Three Acts

• Karen Latorre, MD, FPCS, FPSGS, FPAHPBS and Catherine Teh, MD, FPCS, FPSGS, FPAHPBS •

ACT ONE: FACING TRAGEDY

The first half of 2020 seemed to be Act One of a tragedy... Where there were once grand plans and even greater prospects, then came the perfect storm of a global pandemic, economic downturns, and even natural disasters. It was wild, daresay, human, for many to feel overwhelmed and hesitant. Yet, it is in the face of adversity and in times of uncertainty, we see the triumph of the human spirit shining through. Because even in the great stories of old, and as history has repeatedly taught us... while forces beyond our control may threaten to overwhelm us and plunge us into periods of darkness, it is the spark of hope within each of us that always makes us all capable of a Renaissance. PAHPBS stood firm in its resolve, taking inspiration from its mandate to deliver quality HPB care to the nation and advance HPB surgical education and training.



1st PAHPBS Board Meeting in January 2020. Due to the onslaught of the COVID-19 Pandemic, subsequent regular monthly board meeting were conducted ONLINE via ZOOM.

The first half of the year saw PAHPBS hit the ground running with Covid-19 related response by paving the way for numerous patient and clinician-related Covid-19 publications and webinars. We then realized the need to immediately plan towards the next phase: to re-establish our dedication to innovation and advancement in HPB Surgery.

ACT TWO: BUILDING RESILIENCE

Serving as a testament to the organization's resilience, creativity, and passion for blazing new trails; and after hurdling the challenge of initial cancellation, the PAHPBS rendered an online "scientific concerto" unlike anything seen before for an Online Scientific Congress, through the exhaustive collaborative efforts of the PAHPBS Board and the ASEAN LHC 2020 Working Committee headed by Dr. Viva Velasquez, and the Committee on Surgical Education headed by Dr. Amornetta Jordan-Casupang.



After an initial cancellation, the ASEAN LHC was conducted ONLINE in a format unlike any other

The 3rd ASEAN Laparoscopic HPB Conference and 2nd PAHPBS International Symposium were held Online last August 1- 15, 2020, in a unique format. Conducted by the President of the PAHPBS, Dr. Catherine Teh, this online opus in Three Acts kickstarted on August 1 with a glorious allegro featuring IHPBA President, Prof Martin Smith, as Keynote Speaker. It was then followed by daily On-Demand videos of lectures by no less than the ASEAN Maestros of Laparoscopic HPB Surgery.



Keynote address during the Opening "Allegro" of the ASEAN LHC: Online with Prof. Catherine Teh and Prof. Martin Smith

Our goals: 1. To bring together current trends and innovations by giving talks that are idea-focused and on a complete range application and adaptation for a safe minimal access approach to HPB surgery; 2. To foster learning, serve as inspiration, and 3. To stimulate discussions that matter through an online platform in what can be called a blended learning feast in several movements, similar to the harmonious interlude of a symphony.

Week 1 served as Liver Week, while Week 2 served as Pancreas Week. The unique interface enabled participants to view the videos On-Demand, at their convenience, over the Congress' entire span. It was also interactive, made possible by daily moderators who facilitated virtual Q &A between participants and speakers, even days after the lecture had aired. Each week was capped off with a Live Online Plenary Session throughout 2 weekends.

It all culminated in a meaningful closing ceremony followed an Online Party unlike any other... trailblazing not only in setting a New Standard for Online Congresses in this New Normal... but also in unique ways to relax and party with the best in HPB! At the #ASEANLHC2020

> 30

Online Party was DJ Ace Aventura spinning the beats, with our distinguished faculty unwinding to some Online Karaoke with international colleagues from all over the Asia Pacific.

With the #ASEANLHC2020, PAHPBS successfully set a new standard in hosting virtual congresses. Other societies, locally and internationally, have subsequently approached us for tips and made our Congress, a model for their own upcoming virtual events.

PAHPBS continued its regular participation in the International LiverTx Seminars starting from July 2020. Held every 1st and 3rd Wednesday of the month, it is a recurring series of webinars featuring core topics in liver transplantation, with the admirable purpose of bringing together HPB and liver transplant surgeons from all over the world to exchange insights and ideas.

Last September 23 saw the launch of C.O.M.E.T.S.: Communications and Opportunities for Members to Enhance Training and Service. Being the official PAPHBS Online newsletter, it serves as an avenue for official communications from the Board to the members, and as a way to update members about the activities of this dynamic organization. It also serves as a creative outlet for the writers and visual artists, with columns and pages dedicated to news and human-interest feature stories and digital art pieces.



Maiden issue of C.O.M.E.T.S.: the PAHPBS Newsletter and the Editorial Board

The Editorial Board wishes to thank its contributors to Volume 1: Dr. Jose Macario Faylona, Dr. Raymond Joseph Romero, Dr. Leandro Torre, and Ms. Joie Emelline Teh. The publication may be accessed online at the PAHPBS Facebook page. Stay tuned as we prepare to launch Volume 2 in December 2020!

In keeping with the ongoing surgical training initiatives of PAHPBS, The 12th, 13th, and 14th Fellows' Forum were held online last 22 July, 30 September and 26 November which were sequentially hosted by St Luke's Medical Center, The Medical City, and Jose Reyes Memorial Medical Center HPB fellowship training programs. Furthermore, the PAHPBS Board

established the Committee on FITE (Fellows In-Training Examination). The committee immediately got to work by conducting online workshops last October 24, 31, Nov. 7 & 14, 2020, with the valuable experience of Dr. Armand Crisostomo, facilitating the workshops. The goal is to standardize the HPB Fellows' Examinations across all the PAHPBS accredited training institutions and to subsequently prepare for the PAHPBS Certifying Examination in the first quarter of 2022.

As a welcome respite from all things HPB, as well as a look into surgery on a global perspective, PAHPBS hosted the webinar "Cutting through Global Health: Looking Through the Journey of an MSF Volunteer" last 28 October featuring a team of 3 courageous and extremely dedicated MSF volunteers: Anne Jimenez, RN, Karina Aguilar, MD, and Lynette Dominguez, MD. It was an illuminating and inspiring evening well-spent with the excellent panelists. They generously shared their insights and experiences at the frontlines in the service of humanity in some of the world's most austere and often dangerous health care environments. Their bravery and passion truly embodies the mission of the organization.

An important advocacy of PAHPBS has been patient education and raising awareness on HPB cancers. In line with the celebration of October as Liver Cancer Awareness Month, PAHPBS in partnership with Sunlife hosted a free Health and Wellness Lay Forum webinar entitled "Understanding Liver Cancer: A Silent and Rising Threat" last 31 October via Zoom. The guest speaker was our President Dr. Catherine Teh. More projects to further advance the patient education advocacies of PAHPBS particularly centered on HPB cancers are underway.



More patient education activities on the horizon for PAHPBS

ACT THREE: SOARING HIGH

True to its goal of increasing international partnerships and broadening the horizons for world-class HPB care and education in the country, PAHPBS will actively participate in the IHPBA 2020 Virtual Congress on 27-29 November 2020. Originally slated as a Congress hosted in Melbourne, Australia, it has since then migrated to a completely online format due to the Covid-19 pandemic after seeing ASEAN LHC's incredible success. This year, it gives us great honor and pride to know our President Dr. Catherine SC Teh was invited to deliver a Keynote Address, not only as

DIRECT Connection to ONE Central Luzon Chapter in 2020

• Karen B Latorre, MD, FPCS, FPSGS and Raymund Noel C Mallari, MD, FPCS, FPSGS •

The unexpected and enormous shifts brought about by the tempest of changes worldwide left us all reeling in disbelief. Many plans were cancelled, if not forfeited entirely. Lost at sea, and with a seemingly rudderless vessel, initially we collectively grappled with how to best cope and to regain direction in the storm. Fortunately, with true grit and resilience, our Central Luzon Chapter learned to weather the storm, and found its True North; with the efforts of its leadership, its members, and the needs of the chapter serving as compass.

Recognizing the need for connection in order to truly become ONE CLC, the Chapter set out to fulfill its renewed sense of purpose by having a Vision for 2020 with a DIRECT approach: that of Dynamism, Inclusion, Resilience, Excellence, Compassion, and Teamwork. The needs of its Fellows and Residents in Training were placed at the forefront, and projects were drafted with careful consideration of Training, Continuing Surgical Education, Socio-Civic Responsibilities and Socialization. In order to achieve these goals, PCS and PSGS CLC linked with each other, in a unified goal. With youthful vigor and a renewed fervor, the Chapter forged ahead with its plans while remaining cognizant of the Covid-19 pandemic and adapted to it.

The first project was a logo-making contest among our PCS and PSGS Fellows held last August. The contest was open to all Fellows of the Chapter who are artistically inclined. The purpose was to have a redesign of the Chapter Logo with refreshing concepts. Our winner for the PCS CLC was Dr. Dindo Cajucom of Nueva Ecija. The winner for PSGS CLC was Dr. Jason Rafael Maddumba of Pampanga.

True to its Vision of Inclusion, and in keeping up with the times, CLC also established its Social Media platforms on Facebook and Instagram. This serves as a means of enhancing interconnectedness among the members and to provide members with more detailed and illustrated updates on current chapter projects and future directions.



The PCS and PSGS CLC Social Media platforms

In order to enhance the surgical training of the GS residents in the Chapter, and in order to fulfill its mandate of striving for Excellence by providing its Fellows with relevant continuing surgical education activities, CLC established its very own Committee on Surgical Training and Education; with Dr. Sir



Winner: Dr. Dindo Cajucom



Winner: Dr. Jason Rafael Maddumba

Emmanuel Astudillo as the Head of the Committee on Surgical Training and Dr. Dindo Cajucom as the Head of the Committee on Surgical Education. Committee members include Dr. Raymund Noel Mallari, Dr. Raymond Joseph Manzo, Dr. Karen Latorre and Dr. Jason Rafael Maddumba. The committee immediately set to work and continues to strive towards delivering quality and high-impact learning activities for Fellows and trainees alike.

The first project of the CLC while still navigating this “New Normal” was the Surgical Skills Learning Continuum: Comprehensive Learning and Virtual Skills for Residents Pilot Run in partnership with Ethicon-J&J Institute. Launched last 25 September 2020, it made use of a hybrid online course and a virtual-guided approach, which resulted in a unique blended learning format for both surgical trainees and faculty alike. The CLC was happy to partner with Ethicon to be the First nationwide to conduct the Pilot Run of this virtual learning platform. Virtual Workshops on Basic Surgical Skills were conducted last 10 October with the 1st batch composed of junior residents of Jose B. Lingad Memorial Hospital and Tarlac Provincial Hospital. The 2nd batch had their Workshop last 07 November with residents from Bataan General Hospital, AUF Medical Center and James L. Gordon Memorial Hospital. The 3rd batch of residents from Bulacan Medical Center and Dr. Paulino J. Garcia Memorial Research and Medical Center had their Workshop last 14 November. Surgical residents from Cagayan Valley Medical Center have their workshop slated in the 1st quarter of 2021. Aside from Basic Surgical Skills, CLC has plans of having an Energy and Stapling Module for Senior Residents. CLC would like to thank its dedicated Faculty for the Course: Dr. Raymond Joseph Manzo, Dr. Vermie Garcia, Dr. Kathryn Cecille Umali-Gomez, and Dr. Karen Latorre.

Hot off the heels of that launch, the Chapter hosted the 1st Joint Webinar of the PCS and PSGS CLC. As a break from the academic and Covid-19 related topics, CLC focused on a practical matter of great importance with a webinar last 29 September entitled “Maintaining Financial Well-Being in Times of Crisis: What to Do Before, During, and After” featuring Dr. John Francis Lee Hok, MBA, DPBO; a practicing ophthalmologist and a financial expert, with Dr. Karen Latorre as moderator. With over 350 attendees and a lively and engaging Q&A session, the webinar was a success.

To further augment the surgical residents’ theoretical learning in the midst of the pandemic, the CLC formally instituted regular Chapter Grand Rounds featuring Clinical Case Vignettes in General Surgery. The objective is to reinforce Core Topics in the Surgical Curriculum and at the same time help develop inter-

hospital communication among the training programs in CLC. The 1st Chapter Grand Rounds held last 14 October featured a Trauma case presented by host hospital Dr. Paulino J. Garcia Memorial Research and Medical Center. We had the honor of having as Guest Speaker and Reactor Dr. Eric Talens who delivered his lecture “Improving Survival in Trauma-TXA 2020”, with Dr. Andrew Jay Pusung moderating the discussion to keep the 220 attendees engaged.

Apart from academic activities, CLC recognizes the need for a holistic approach to address the needs of the Chapter. In this regard CLC established the Socials Committee headed by Dr. Noelito Lacsamana, with Dr. Ricky Riego De Dios as special adviser.

The first project of the Socials Committee was the participation of the Chapter in the PSGS Virtual Pink Run, in order to have a sense of camaraderie and unity. While still observing physical distancing, wearing masks and abiding by standard health protocols, the Chapter held small group runs per province with a Virtual Take-Off via Zoom last 24 October. The Chapter fellows and trainees were all Together...Apart as runs commenced in Pampanga, Tarlac, Bataan, Cagayan, Nueva Ecija, and Bulacan. Other projects of the Socials Committee are in the pipeline, and will remain in tune with the pulse of the Chapter.

The CLC is pleased to present the Joint Symposium of the PCS-PSGS-PALES CLC on 29 November entitled “Unmasking: A Webinar for General Surgeons of Common but Uncommon Laparoscopic Procedures. Featuring entirely local faculty, this webinar aims to highlight the MIS capability of experts within the Region.

Featuring entirely local faculty, this project aims to highlight the MIS capabilities in the Region

In response to the unprecedented devastation to Cagayan Valley brought about by Typhoon Ulysses last 11 November, the Central Luzon Chapter set up a Fund Drive for donations to be given to our fellow countrymen affected by the typhoon. All donations shall be turned over to our PSGS Chapter representative in Cagayan Valley.

The onset of the pandemic may have forced us apart for a brief period; fortunately, CLC adapted and found its voice. With a renewed spirit and a DIRECT approach, CLC will continue to deliver projects that are exciting, responsive and relevant to the needs of its Fellows and trainees. Physically distanced as we may be in current times... never has CLC been more connected than NOW.

This Little Light of Mine

• Jennifer A. Winter, MD •

Cordillera Consortium General Surgery Training Program

Usually when you are at the beginning the end is too distant to discern. Sometimes though the beginning may feel like the end. In the 1920s Harry Dixon Loes wrote a gospel song for children that went: “This little light of mine, I’m going to let it shine, Let it shine, all the time, let it shine.”

There once lived a beaming light of energy within us. It had the passion to cut with that tingling thrill to hold a scalpel. It had the power to be fearless. It had the enthusiasm to immerse our minds in the immense pool of surgical knowledge. That once beaming light has sized down to a small flickering one. The mere passing of a weak draft may put it out. Its a daily day in and day out struggle to be a surgical resident. They never said it would be easy. Who ever assumed it would be has set themselves for pure and utter distress. Along with that inevitable combat of residency itself we have come to face a pandemic which made matters even more catastrophic.

Residents Can Be Broken

We are not indestructible. Though at times we forget that we are regular human beings and let our guard down. You are rushing. You are tired. You forget to gear up. The moment you fail to hold up that shield the nemesis is given a golden opportunity to get to you.

This pandemic has taken a lot from us. We cannot do as we please or go where we please. Our outlets to drown our stresses from our taxing duties have been downright limited. We are also haunted with that constant fear that despite all the precautions that uninvited visitor may hitch a ride home with us. Not only has it plundered us from the simple leasures in life, it has also stripped us of surgical



time and compromised our training. Despite all this, we can still make do. Take the positive out of the negative situation. Catch up on all those tabs we placed in our surgical books and start reading. There are piles of paperwork stacked in one corner that need to be accomplished. We have researches and case reports that have been longing for our attention. There is always something that needs to be done. Residency is never boring.

Hail of Heavy Fire

In this great battlefield amidst the hale of bullets we do not stand alone at the front line. You may feel like it, but you are not. There are those who had to dodge heavy fire and the bellows of commanders. There are those who too wanted to become invisible and disappear into the trenches. There are those who know exactly what you are going through. Take a good look around and you will see that your best allies are none other than your co-residents. Ask yourself and ask them, “are you ok?” Probably you are but chances are you’re not. This is a sick sorrowful cycle and one of you may be plummeting unnoticed. Look out for one other and protect each other from the crossfire.

The greatest enemy is not out there. The greatest enemy is you. Asking for help is a humbling



This Little Light of Mine... from page 33

experience as knowing that you need it is a step towards self-awareness. We tend to be perfectionists and at times be cut throat competitive. It is good to want to achieve, but setting unattainable goals is a recipe for failure. We can't get everything done. We will not make everyone happy. We may even be a disappointment to others and eventually even to ourselves. Accept that now. We will not always know what to do and we will not always have the answers. Residency is a continuous learning process. We are here to gain knowledge. We have strengths and we



have weaknesses. Hang onto your strengths and hone your weaknesses. We can be behind. That's ok. Just know that we are all riding the same train on the same track heading to the same destination.

At The End Of The Beginning

Ask yourself again, "Why am I here?" Hours upon hours on your feet with your eyes bogging down, knees buckling, stomach churning and emotions flaring. We have asked ourselves this at one point or another "Why am I doing this?" The age old question why. Why with no means. Why to no end. Why. The answer to this is simple, "Why not?" Why shouldn't you be here? Why shouldn't you be doing this? This is what we chose to do and will be able to continue to do after all of this chaos.

We are still here. In the same place. Right where they left us. Right where we started. Things just got messier and we just had to level up. We will drudge on as the battle still continues. Because at the beginning and at the end, we are still doctors. We are surgeons. Keep feeding the fire and it will not die out. For this little light of mine, I'm going to let it shine, let it shine, all the time, let it shine.

To Change, and Its Impermanence... from page 35

The surgical team has easily adapted the recommended protocols for the safety of its members, staff and patients. The use of personal protective equipment has already become a norm, including the observance of safe social distancing and frequent hand hygiene. Moreover, the strict compliance to recommendations for patient screening and surveillance has been very much observed.

In as much as everybody is already weary of the current health situation, the department maintains to



The hospital is a battlefield, the scalpel a weapon, and the bearer a soldier.

be vigilant and cautious in its mission to provide safe and continual services to the people of this locale and of neighboring communities. This COVID-19 pandemic has reminded us of our vulnerability as a human race, but has also re-taught us of the values of altruism, compassion and unity in overcoming these kinds of situations.

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To Change, and Its Impermanence

• Al Bryndon Castillo, MD •
Senior Resident
Department of Surgery
Baguio General Hospital and Medical Center

The world has been riddled with numerous plagues countless times in the past, and the resiliency of the human spirit and its capability to adapt to the challenges of the time, is truly remarkable.

As early as the hunter-gatherers age, the spread of communicable diseases has been documented and has taken its toll on countless lives. And, as civilizations grew and improved, human living conditions provided fertile breeding grounds for pathogenic organisms to spread and evolve into what they are today; rapid urbanization and modernization of overseas routes for travel have allowed the inevitable spread of these novel infections far and wide.

Consequently, the medical field has been dynamic in its adaptation to these challenges. Research and its breakthroughs have allowed us to curb the spread of these communicable diseases and achieve a more suitable management system—from Dr. Alexander Fleming’s humble discovery of penicillin, Dr.

Edward Jenner’s work on immunization and Dr. Joseph Lister’s postulation of antisepsis in surgery, to this day’s more advanced therapies for new and emerging infectious diseases.

Truly, the practice of medicine is an evolving arena, dictated by the ever-changing needs of mankind and by the even-more-dynamic pathogenicity of illness-causing organisms

around us. What might have been true a century ago may be completely

obsolete these days, and we all have no choice but to bend over backwards and fulfill our oaths to serve humanity.

Meanwhile, in the Summer Capital

At the heat of this current COVID-19 pandemic, Baguio General Hospital and Medical Center, like all other hospitals all over the world, took different measures to continually address the needs of those seeking general and specialized health care—including modifications in its infrastructure and internal processes. As the community quarantine restrictions have been gradually lifted, its Surgery Department has likewise begun to cater elective procedures for patients who seek safe and affordable surgical care.

This, in turn, raised a relevant question of whether it is already safe to undergo an elective surgery at this time. The anxiety encountered by many people over acquiring the COVID-19 infection is expected and completely understandable. The surgical department, in line with the hospital’s initiative to bring medical professional consultation to the community through a variety of platforms over the internet, has offered online teleconsultation; thus, limiting the unnecessary need to go out.

For many patients, their fears and worries were diminished upon learning the precautions being taken by this institution to provide a safe environment before finally coming in for face-to-face consultation.

Indeed, elective procedures have been resumed, especially cancer surgeries that would greatly benefit the survival of those afflicted. Other procedures that address entities causing discomfort to the patients such as gallstones, hemorrhoids, hernias have also been scheduled. However, it has also been emphasized that consultation for conditions requiring immediate medical care or those causing significant ailment, should not be further delayed.



Healthcare workers had to assume the jobs of other members of the team... all in the name of service to the Filipino people.

Survival Kits In A Bag

....preparedness in times of unexpected or looming calamities!

• Emmanuel D. Loyola, MD, FPCS •

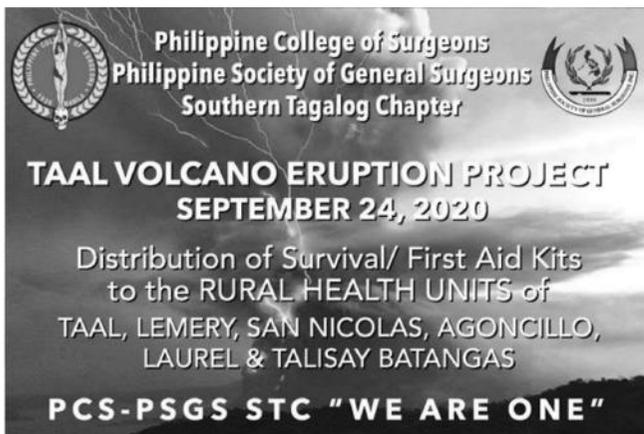
The thick dusts or ashfall spewed by Taal Volcano in its phreatic eruption on January 12, 2020 have not fully settled yet, when another calamity of indescribable proportion beset not only the country but the whole world as well, the pandemic which was later termed as COVID-19. The aftermath of Taal Volcano eruption was beyond description, yet due to the resilient nature of Filipinos, life went on and the affected people continued to thrive. Relief efforts were done by people from near and afar.

The Philippine College of Surgeons – Southern Tagalog Chapter (PCS-STC), under whose jurisdiction the victims fall under, received a sizable amount of donations in cash and in goods. The initial salvo of the relief operations was well-executed and well-appreciated by the beneficiaries.

With the declaration by the World Health Organization that the novel coronavirus infection has gone to a pandemic proportion, and the eventual placing of the country under different levels of quarantine, with some areas being placed on lockdown, the flow of the aids to the victims has also been affected immensely and the activities of the members were put to a sudden halt. The PCS-STC did not take it sitting down or slept on it. Cognizant of the fact that donations received were earmarked for the aforesaid victims, the PCS-STC continued to communicate and laid down plans on how to provide further aid to the former. With the utility of the internet and teleconferencing, a consensus to come up with a project utilizing the collected funds from generous donors was arrived

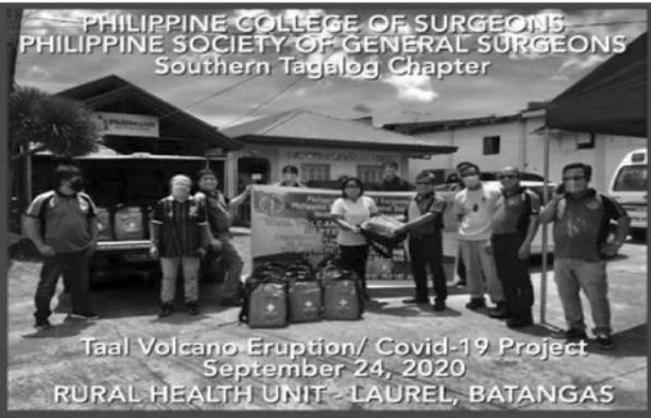
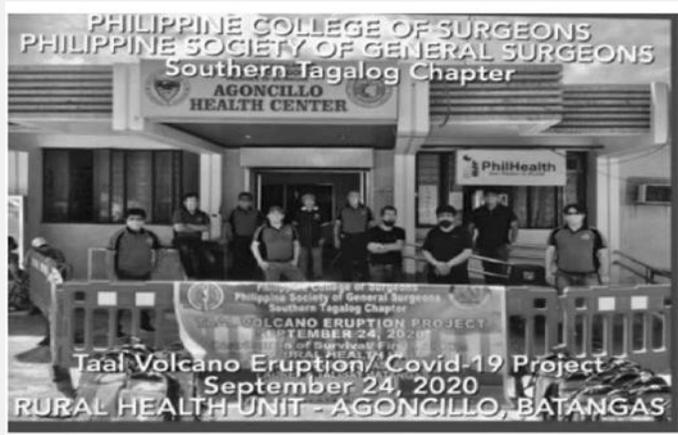
at. Considering the unpredictable nature of such a natural disaster or catastrophe, the idea of providing the residents who may become potential victims a survival/first-aid kit in a bag was born. A bag that is handy and can carry important items on survival and first aid in it. Dr. Amando Caraos and Dr. Aldrin Cuasay took the lead. They formed a committee to see through the completion of the task.

On September 24, 2020, when the quarantine has been slackened by the national and local authorities, the officers and some members of the PCS-STC trooped to the affected towns in the province of Batangas to distribute the bags to certain beneficiaries through the municipalities' rural health units. Thus, before daybreak, the PCS-STC trooped to the designated meet-up place which is the residence of Dr. Amando Caraos in Taal, Batangas where breakfast was served. Thereafter, the team proceeded to the Rural Health Unit in the said town and handed over the bags assigned to it. A side-tour to the historic Basilica of Taal to pay respect and pray was done. En route to the next destination in the itinerary, the team was treated to a history-lecture on how Taal Lake became how it looked today. This was done by Dr. Ernesto Tenorio, an orthopedic surgeon and Fellow of the PCS. He walked us down memory lane when we stopped over at the ruins of the original Taal Cathedral near the lakeshore. History had it that the Taal Lake was once a part of the Balayan Bay where cargo ships of the Galleon Trade used to ply the route for trading purposes, until a devastating cataclysmic eruption occurred when a land mass was created causing the connection from the sea to be left with but a small stream. This land mass



Edloyola

> 37



From the funds generated in response to the call to aid the victims of Taal Volcano Eruption, the chapter came up with providing the Rural Health Units of the Municipalities of Taal, Lemery, Agoncillo, San Nicolas, Laurel and Talisay, all in Batangas Province which were badly hit, and still suffer the impact of the eruption, worse though is the thought of when will another eruption occur. This is an ordinary relief but nonetheless coming from the heart of the PCS-STC . edloyola

was said to become later as Lemery town. The walls of the ruins of the original cathedral stand as the testimony that the lake was once a part of the sea, with the corals forming parts of the walls. The body of water, in time became what is now the Taal Lake, with an island crater to be known as the Taal Volcano. It was said that a certain breed of fish which used to thrive in salt water adapted to the new environment of brackish water and became popular and well sought for by culinary enthusiasts for their gourmet dish. This fish is now known as Maliputo. Another fish variety, the Tawilis is said to have the same history as the Maliputo and it is only found in Taal Lake. In time, Taal Lake, with its catchment of rain water and continues supply by tributaries of fresh-water rivers and streams became a fresh-water lake. Only the portion near the outlet in San Nicolas town remains brackish, with the constant supply from the salt-sea of Balayan Bay.

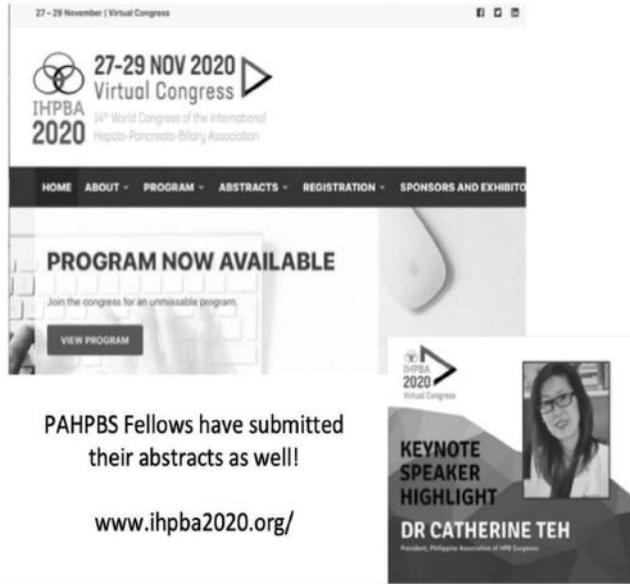
Painstakingly, the team proceeded to the towns of Lemery and San Nicolas. In San Nicolas, the hometown of Dr. Ernesto Tenorio, the team was

met by the municipal mayor Hon. Lester de Sagun and his wife. Dr. Tenorio's house which sits near the lakeshore of Taal was badly destroyed and was showed to the team. The scenic spot of Taal Lake with a closer view of the main island crater of Taal Volcano tempted the team to stay longer and satiate themselves with selfies and group photos. The popular crater island, known as Binintiang Malaki has been the icon of Taal Volcano but locals, and now the PhilVolcs itself say that the real Taal Volcano is the entire conglomerate of many crater-lakes like Binintiang Maliit at Pira-piraso.

The beneficiaries of the project purportedly are the people living along or near the shoreline of Taal Lake who got the biggest chunks of miseries brought by the eruption of Taal Volcano. The bags reached the RHUs of the municipalities of Agoncillo, Laurel and Talisay, Batangas. The team treated itself with a sumptuous native lunch in Talisay where, you guessed it right, Maliputo and Tawilis were served. Despite the pandemic PCS-STC is still on the move, to reach out to people in need.

> PAHPBS... from page 30

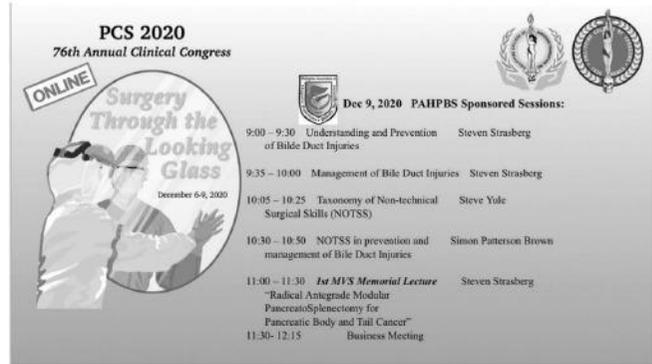
an essential milestone for PAHPBS, but a FIRST for a female surgeon and for an Asian Surgeon. A Triple Treat indeed, as she also has an online debate, a symposium, and an abstract up for presentation. PAHPBS Fellows and Trainees have likewise submitted abstracts, and being a recognized international chapter of the IHPBA, the PAHPBS is slowly but surely securing its place in this worldwide organization.



The PAHPBS is proud to actively participate in the IHPBA 2020 Virtual Congress, with its President being the 1st Female and Asian Surgeon invited to deliver a Keynote Address

Other exciting projects of PAHPBS are down the pipeline and ready to launch! This December 2020, the PAHPBS is proud to Sponsor Sessions during the PCS Annual Congress (December 9, 2020) by inviting world-renowned International Speakers, in the persons of: Prof. Steven Strasberg, the iconic HPB surgeon who popularized the critical view of safety for Lap cholecystectomy, Prof. Steve Yule, and Prof. Simon Patterson Brown who are experts of patient safety and human factors will deliver a synergistic session on technical and non-technical skills in the context of Bile duct injury. This year, with profound sadness as we lost a legend in HPB surgery, the PAHPBS will honor Dr. Menandro Siozon with a tribute followed by a lecture on RAMPS for pancreatic cancer by no less than Prof Steven Strasberg himself, making this the 1st Dr. Menandro V. Siozon Memorial Lecture.

As part of the advocacy programs of PAHPBS, we have partnered with the Philippine Society of Medical Oncology and the Hepatology Society of the Philippines for The Liver Run in January 2021. It will be a virtual race intended to raise awareness for Liver Cancer and Viral Hepatitis Awareness Month in January. More details will be released across our social media platforms.



The PAHPBS proudly presents world-renowned experts in HPB Surgery: Prof. Steven Strasberg, Prof. Steve Yule, and Prof. Simon Patterson Brown.

What may have seemed as setbacks in the early part of the year fueled an even greater drive to rise above challenges. It has enabled our organization to be innovative, resilient, and even more creative than before. It has even allowed us to be busier, fostering even greater international partnerships, and has allowed us to communicate even faster with the rapid adaptation to the technology at hand. And now, a new season of hope and faith sustains us into the next, fervently believing that the best is yet to come, indeed.



Upcoming activity in January 2-29, 2021: The Liver Run

Please visit and like our Facebook page, Philippine Association of HPB Surgeons or IG and Twitter page @pahpbi for more information, relevant advocacy programs, updates, and the dynamic facets of this very young yet promising organization, the PAHPBS. Finally, we set our digital footprints with a more robust platform as we Launch the PAHPBS Official Website this December 2020. Please do visit www.pahpbs.org for the information that you need and know more about us!

Mirror'd

• Vietrez David Abella, MD, FPCS, FPSGS •



The Author

“For now we see in a mirror, dimly, but then we will see face to face.” – 1 Corinthians 13:12

I was wondering how to cap off the year 2020, which by all measures is at least one that would be hard to forget. Despite the deaths, the lockdowns, the quarantines, I was looking at the silver lining of once-separated families locked down together, the renewed emphasis on established health protocols such as handwashing, sanitizing, and cough etiquette, and the realization that despite all the scientific advances of the past two centuries, ultimately we were in God’s mercy...

And then typhoon struck. Not just any other typhoon, but the strongest one ever measured to make landfall. “Known in the Philippines as Super Typhoon Rolly, it made landfall in Catanduanes as a category-5 equivalent, and became the strongest landfalling tropical cyclone on record by 1-minute winds, eclipsing the previous record held by Haiyan and Meranti, with 1-minute sustained winds of 315 km/h and 10-minute sustained winds of 220 km/h” (Typhoon Goni, wikipedia, accessed Nov. 19, 2020).

The sheer intensity and the chilling sounds during that four-hour ordeal when the eye passed through Virac affirm why our island has been called “Land of the Howling Winds.” In recent years, we have been rebranding Catanduanes as the “Happy Island;” but post-STY Rolly it seems as happy as the Jollibee branch in the town center that is now closed and boarded up, after its big glass panes were shattered, and presumably all the equipment and supplies damaged, during the height of the storm.

*“Where are you Christmas
Why can’t I find you
Why have you gone away
Where is the laughter
You used to bring me
Why can’t I hear music play...”*

(Where Are You Christmas by Faith Hill)

I had been counting down to the end of 2020 beginning with the ‘Ber months in the hope that the end of the year would also end the tragedy and comedy that Covid-19 had brought upon mankind. Tragic for Health Care Workers who frontlined the response; for the affected who went through the suspect-probable-confirmed route, resulting in death, disability, both physical and financial, discrimination. Blackly comic for once more dividing an already divided world into maskers/antimaskers, pro/anti-lockdown, faxxers/hoaxers. And then typhoon struck...

*“My world is changing
I’m rearranging
Does that mean Christmas changes too”*

We started typhoon-watching with Typhoon Quinta which effectively canceled the weekend of October 24 to 25, as well as the island’s 75th anniversary of provincehood, which we celebrate on October 26. It was a good thing we decided to keep the typhoon guards on, as Super Typhoon Rolly made a Halloween appearance. Although we braced for it, the typhoon trackers never put the island in the typhoon’s eye, thus we only realized it when the fierce North-West winds calmed down for an hour, and resumed from the South-East with such ferocity that our concrete house was shaking by its very foundations. Waterfalls gushed from our third floor, and we had to give muscle support to our South-facing French doors. And just like a B-horror flick, typhoons taunted us in succession afterward: Siony grazed us five days after, followed by Tonyo, then Ulysses. The winds and rains, though not so intense, threatened about 26,000 totally or partially-damaged houses, some of which were still exposed or flimsily-covered with tarpaulin sacks.

All this rage, however, did not dampen the Catandungan spirit. This was a people who for generations have chosen this “Isle of the Eastern Seas” to be their home, come storm or fine clime. I had experienced and witnessed the destruction

of Typhoon Loleng in 1998, in my second year in Catanduanes. We did not have electricity for one and a half months; piped-in water was restored after ten months. And yet, leaving was not an option. Typhoon Reming came in 2006, the strongest one at that time, and still, we stayed. As my good friend Daisy (a fellow transplantee, who has seen more storms than me) eloquently declared in her social media post a week after STY Rolly:

“Every time a big typhoon slams our isla, some burning nagging questions keep running through my mind...Why am I here? Why do I insist on staying here...on a small island facing the mighty Pacific Ocean, right smack along the Typhoon Highway?”

“...And when the winds leave and the waters recede and you see your fellow islanders scrambling back on their feet and managing to smile amidst the misery and the desolation, you get infected by the Catandungan spirit of resilience and fortitude! And you join them to pick up the pieces of your life...trying to rebuild what can be rebuilt, replanting or replacing the plants viciously uprooted or blown away... and then suddenly get the answers to your nagging questions.

“You are here because God planted you here, because Catanduanes, the Isle of the Eastern Seas is...HOME! Tindog Catanduanes!”

As soon as the winds subsided around 10:00 am last November 1, 2020, residents started coming out of their homes to inspect the damage wrought on our town: power lines toppled or broken in half, windows smashed, whole roofs torn off, signboards asunder. The hills surrounding Virac, once lush and verdant, were now all brown, the trees left standing skeletal and forlorn, some decades-old ones uprooted. Needless to say, there was no telecommunication signal, no electricity, no water. Our full 10,000-liter water tank was torn from its base, bouncing on the roof of our heritage home (and my home office), tearing it, before landing on the street. Roof sheets were stacked half-a-meter high in front of our house, which took several hours for the clearing team to cut through.

In the next five days that we had no water from the faucet, I realized that the several communal handpumps dotting the town serve as emergency water source. Our piped-in surface water source is several kilometers away, and after a heavy rainfall, rocks and debris clog up the intake box upstream. Water district workers have to climb up to the source to do the clearing before water service can be restored.

Mobile phone signal was also restored after five days of being incommunicado, though it would still take more than a week before regular service returned. Calls started coming in, from concerned family and friends. Our high school batch president was my second caller (after my sister), who immediately relayed my batchmates' concern and that a fundraiser was underway. Since then, many people quietly sent assistance my way, with offers to help in whatever form.

As I write this, day 17 post-disaster, electricity is slowly being restored in the town proper and vital establishments, thanks to the many electric cooperatives that sent teams to the island to help replace fallen posts and reconnect service lines. The main thoroughfares have been cleared through communal effort of people, local government units, and civic groups like Philippine Red Cross that sent clearing teams (though waste and debris still accumulate by the roadsides as houses and establishments clear out wet and damaged things).

Relief goods have come in through as many channels as there are organized groups, and distribution has been underway: rice, canned goods, hygiene and sanitation supplies, tarps, etc. Many more have contacted me by social media to offer their help to the hospital and to the community.

“I feel you Christmas
I know I've found you
You never fade away
The joy of Christmas
Stays here inside us
Fills each and every heart with love”

“And now faith, hope, and love abide, these three; and the greatest of these is love.” – 1Cor13:13

To Be Or Not To Be? That Is The Surgeon's Question

• Tamarah P. Cristobal, MD, DPBS •



We are nearing the end of the year and yet still far from totally defeating this pandemic. We have lost comrades, relatives, and patients to this devastating disease and I have seen fellow doctors hold on to their positions inside the hospital for as long as they can. We are far from over but we are slowly getting there and these past few months have been a battle ground for everyone and I have seen different faces and forms of bravery throughout this ordeal. My previous articles have been about faith and hope and if I were to write about how I am feeling right now, it would still have a fraction of those two. It is definitely hard for me to write about something that has been plaguing the world for almost a year only to reach another issue still with the topic of this pandemic with nowhere near its complete dissolution. As of writing, two typhoons already ravaged our country further adding to much of our worries. My comfort stems from the fact that I am still alive and still able to perform my duties as a doctor and that my family has been blessed enough to not be afflicted with any type of sickness. Everyone is dealing with their own personal demons and the fact that we are placed in a cocoon of solitude away from friends and family adds fuel to our depressed and tired personas.

As a single parent, my worse fear is for my child's future rather than my own. For I already fulfilled my dream of finishing my studies and reaching my goal to become a doctor. And my additional goal is to be able to hone my craft and establish my practice the best way possible leaving behind a life worth dedicated to the job I love so much and giving my patients the care and compassion that they truly deserve. We have lost a lot of lives with COVID-19 and the numbers are not solely made up of the older group and we have lost young lives as well. There are young people who were very unfortunate enough to not even feel a grasp of what they dreamed of becoming as an adult. Too many ill-fated young dreamers who lost their lives not only to this disease but to also to the effects of what this pandemic had brought us. The constant pressure of being able to perform well in new circumstances and the solitude that this pandemic has forced us to go into is too much to bear for some young individuals. And my worse fear is for my own child to not be able to live up to her prime and achieve her goals. And I know I am not the only livid parent right now. I am constantly thinking about her future and how the world will treat her if something untimely and unfortunate happens to me. But more than my fear for how the world will treat her is my constant trepidation of how she will treat the world when I am no longer there to remind her to always be kind and to always check her privilege before doing or saying something. The world may treat her nicely and give her the respect she deserves but will she continue to treat others with the same decency and respect that is afforded to her? To say that the kids nowadays are a lot different from when we were the same age as they is an understatement. Though I love their confidence, it is not a silent problem how privileged

most of them are. From ranting about online modules, to being secluded from their friends, and how their boredom is slowly killing them, there is no bigger challenge other than the pandemic than being stuck at home 24/7 with a teenager. And I just have one. And to those who have more than one, you have my greatest respects and I salute you.

The apprehension that we have with our children not contracting the virus and at the same time how this generation molds them into future adults is beyond words. I have always had utmost respect and gratitude to teachers and I myself had my share of teaching medical students but somehow I could not fathom the horror and stress that online classes have on our teachers and children. I remembered telling her that complaining without first understanding the situation will give her a hard time in life when she decides to get a job. And that she cannot just complain all the time. She knew where our conversation was going and it was then when I was answered with, "I am not going to be a doctor, mom." Complete with an eye roll that could compete with the kid from *The Exorcist*.

I asked her why and she asked me again, "What's so great about being a surgeon? It's hard. You're always working even at night and you don't get to sleep a lot and you stand for a long time and during the pandemic people are even getting mad at you for being tired and sometimes you don't get paid for doing your job".

Given that those statements are not far from the actual truth, the fact that the pandemic even made things worse for us opened up my eyes as to why do I even want my child to go through the same hardships as me. Is it because I wanted her to continue my practice or is it because it's more of MY dream for her? Let's face it, most doctors are stage parents hoping that their children will follow in their footsteps leaving behind a legacy that could then be passed on to their grandchildren. I started to question my reasons and if it's even worth it to see her go through all the things that I went through only to be chastised by the people that doctors are really not that special and that it's part of the job to be extraordinary. It made me reflect back on my reasons why I wanted to be a doctor in the first place and take up surgery as a specialty. In a sea of male predominance, what made me decide that this was the thing or the calling for me?

I decided that if I wanted to show her the justifications for my decision, the selling point would need to come from how I really feel as a woman in a male predominated specialty. To say that I can justify with tangible reasons is difficult because even up to now, I have episodes when my expectations as a surgeon is far from the reality.

As a woman, I tend to lean towards my emotional side when rationalizing things but with it comes a strong

conviction when I set my mind and heart into doing something. My reasons were very personal and at the same time at the brink of being a feminist because in this day and age, female empowerment is not unheard of. Sometimes too much for my own taste that people mistake feminism for being given a special treatment when the odds are not in our favor. But what I learned as a surgeon is that gender is not the basis of doing something remarkable. Inside the operating room, men and women are equals. I learned that in this specialty, the faint of heart has no place and would easily find themselves shedding a tear or two. I was treated not as girl, but as a colleague, able to do the same things that men can do and not spared when my feminine problems are in play. I take that not as an insult or as an inhumane act but I treat it as a sign of a silent respect from my male counterparts that I am expected to be able to function not because I wanted to belong in a specialty dominated by men but because they know that I can do it the same way that they can. To be able to perform not because “ginusto mo yan e” but because “kaya mo yan”. Some may disagree but I bet most women surgeons are so strong that they treat it as a normal thing for the love of being in front of a human body with a midline incision exposing all the goodies that they can touch and repair.

I remember a time during my residency when a senior resident of mine was in her third trimester of pregnancy still going on duty and doing major operations while the male residents treat her as if her big belly is just a big meal that settled inside her body. It was not like they were walking on eggshells around her but they treated her just like how they treated everyone else ... like an equal. While most people see her as a delicate flower because of her condition, seeing her perform surgery while a baby was kicking simultaneously inside her belly, she was transformed into a strong and fierce lioness in front of my own eyes and I instantly thought, “Wow, she’s so badass!” And me seeing that made me feel so powerful and validated as a girl with big dreams that can do anything that I set my mind to. Though I never got pregnant during my residency days, I had the opportunity to operate while wearing heels because I forgot my OR slippers and the back pain and the taunting jokes after the procedure was worth it because for me, it was another hard albeit funny hurdle that I was able to experience and get through with as a girl.

The entire journey from being a med student to a resident is a very laborious task and apart from what I wanted my child to learn about how awesome and inspiring women can be, I wanted her to see the world through my eyes when I was hurdling through my excursion. I have been telling her numerous times that she always needs to be kind to everyone and be compassionate with other people’s status. To always check her privilege and that before complaining and ranting about something, make sure that she can prove her worth so she can practice humility when needed. What our profession taught me was that I am not the only one who can do great things and that there will be more people who will know more than me and that if I pay attention close enough and step back from my pedestal once in a while, I’ll see that I may still be lacking a lot of knowledge and skills and that I have a lot of room for improvement. There are days when not everything works out great for you and even if you do try your best, certain things are bound to happen not to discourage you but to push you to do your best. That failure is part of being a doctor and that it molds us to be stronger and be more cautious and be more modest about the things around us. That medicine is such a humbling profession that from time

to time, it will remind you that you need to keep up with the times and that there are new things to learn every single day and that each failure is not because things didn’t go your way or that you had bad luck but because you have to admit and accept that somewhere down the line, you may have missed a few things and that you have to be reminded to do better in the future and that it’s okay, because accepting defeat from time to time is a true mark of a fighter. That not all people are given the same privilege as you and that you have to find ways to provide the same care for every individual regardless if they are able to pay for your services and that sometimes, it feels much better to have done something for free for someone who really needed your help and that any amount could not measure the satisfaction and the joy that you feel from knowing that your job has served its purpose. That the years of hardships and the journey is worth it because it feels good to do something that you are passionate about. That when you choose a job that makes you really fulfilled and happy, you don’t have to work for a single day in your life. That the mind needs to be accompanied with a good heart for you to function at your best and give the best care possible. That you have to be able to communicate and be a good listener to all types of people no matter what their status in life is and learn from their stories and make it an inspiration to do better every single day.

The things that I have learned as a doctor most specifically the values that I incurred are the very reasons why I wanted her to follow my footsteps. It’s not just about the prestige and the feeling of accomplishment that comes with the MD at the end of the name, but it’s more about the lessons that comes along with the journey. But then again looking back at all those pretexts, I wondered if she is worthy enough to be a physician as well. I may want her to be one but is she up to the challenge and is she even worthy to be one? Would I want to unleash an uncaring and unbothered physician only to wreak havoc instead of cure?

Oftentimes we want our children to inherit our practice for different reasons and most of us are hoping that they will also find the joy in what we do. I can only hope and pray that she considers it for the very reasons that I just stated but what matters to me more than my dream for her is for her to reach her own dream for herself and be happy with the path that she decides to take. And whatever that is, I can only pray that she learns the same values and insights that I learned in my own profession and that she will always remember that in any job, kindness should never be forgotten even when you’re having a bad day.

My monologue ended with her going to her own room obviously tired from all the things that I’ve said and after a few hours, she knocked on my door and said,

“I can be a doctor for babies or maybe an Anesthesiologist”.

“Why are you saying that? I thought you don’t want to be a doctor?”

“I thought about what you said and also, I need to have options and I’m thinking about it.”

“Oh, ok then. It’s up to you. Whatever you want.”

She closed the door and deep inside, I swear my heart just exploded into tiny rays of sunshine.

2020 Inductees

General Surgery

1. Abellon III, Ruperto L.
2. Amo, Helen B.
3. Astillero II, Carlito B.
4. Avendaño, Mark Joseph C.
5. Bacus, Jim Edward D.
6. Baldivinos, Von Michael T.
7. Delos Santos-Belen, Krista Angeli P.
8. Bengwayan, Phyllis T.
9. Bueno, Michael Pol U.
10. Bulatao III, Jose P.
11. Caillan, Madeline May C.
12. Celzo, Ariel T.
13. Certeza, Juliene L.
14. Clarit, Elfrank P.
15. Dofitas, Anthony L.
16. Estanislao, Ernest Solomon L.
17. Flores, Ivan Clark E.
18. Fontanilla, Jeff J.
19. Galvez, Mark Gabriel E.
20. Ganas, Erickson E.
21. Gascon, Cressida Y.
22. Geniales, Christian Ross A.
23. Hiwatig, Manuel P.
24. Lalas, Tyrone C.
25. Landayan, Hamilton John R.
26. Lao, Jonathan T.
27. Lim, Jayne Michelley A.
28. Macaraeg, Raul O.
29. Madrid, Airen Patricia M.
30. Marañon, Gilmyr Jude G.
31. Navarro, Jonathan G.
32. Perez, Michael June C.
33. Pilpa, Pompe M.
34. Presto, Roland-Joseph B.
35. Prudente, Jet C.
36. Ramas, Jessica Marishiel M.
37. Saep, Julius Bryan G.
38. Salinas, Mark Anthony T.
39. Segundo, Ronald B.
40. Suboc, Harvey Glenn G.
41. Sumayo, Brian Chester Edmundo L.
42. Tongcos, Frances Jeannifer R.
43. Valencia, Sheryl E.
44. Yaneza, Aldwin A.

Colon and Rectal Surgery

1. Cruz, Jan Paolo M.
2. Fuentes, Joseph Roy F.
3. Hernandez, Joseph Lester A.
4. Imboy, Kristel S.

ENT-Head and Neck Surgery

1. Bascos, Ma. Candie Pearl O.
2. Catedral, Luzsil M.
3. Dela Cruz, Rhodieleen Anne R.
4. Fernando, Adrian F.
5. Magno, Jenelyn J.
6. Uy, Melita Jesusa T.

Ophthalmology

1. Alegre, Elenor Reina A.
2. Alegre, Jan Carlo Y.
3. Lopez, Juan S.
4. Palisoc, Erwin D.
5. Tirol, Maria Angelina P.
6. Uy, Christopher Sebastian J.

Orthopedic Surgery

1. Alonto, Joe Bair J.
2. Cuenca, Jr., Cesar S.
3. Flores, Rosalyn P.

Pediatric Surgery

1. Guzman, Johann Paolo S.
2. Lopez, Dorothy Anne D.
3. Moreno, Amabelle A.

Plastic Surgery

1. Capellan, Karlo Marco C.
2. Nazareno, Hector Bobby Z.
3. Tan-Gayos, Alexandra Monica L.

Thoracic, Cardiac and Vascular Surgery

1. Hilado, Rafael Martin D.

Transplant and Vascular

1. Benavidez, Joel B.
2. Duque, Arlene A.

Urology

1. Diwa, Ly-Ann T.

Candidates for the 2021 PCS Board of Regents



Esperanza R.
Lahoz, MD



Vivencio Jose P.
Villaflor III, MD



Rex A. Madrigal, MD



Rodney B. Dofitas, MD



Domingo S.
Bongala Jr., MD



Ramon S. Inso, MD



Josefino I. Sanchez, MD



Glenn Angelo S.
Genuino, MD, MSc



Marilou S. Viray, MD



Dexter S. Aison, MD



Alberto P. Paulino Jr., MD



Manuel Francisco T.
Roxas, MD, MSc



Renato R.
Montenegro, MD



Maria Antonette
Aguilera-Cases, MD



Rhoderick M. Casis, MD



Julyn A. Aguilar, MD



Joselito M. Mendoza, MD



Antonio S. Say, MD



Maria Luisa D.
Aquino, MD



Maria Concepcion C.
Vesagas, MD