

A Review of the ASEAN's MRA on Physician

By: Virginia C. Mappala, MD

Over the past years, several pediatric cardiologists have evolved from the two well-known training institutions in our country, the Philippine General Hospital and the Philippine Heart Center. The fast-paced technology leads to changes in the manner of training of pediatric cardiology fellows, shifting to outcome-based learning and competency-based education to align with international standards. The Philippine Regulation Commission set guidelines for continuing professional development to update and improve the quality of registered professionals and align with the Philippine Qualifications Frameworks for national relevance and global comparability and competitiveness. The Philippine Medical Association, headed by the President – Dr. Ma-

ria Minerva Calimag, initiated the OWL@PMA™ Program for Continuing Professional Development of Physicians. It is an Online Webbed Learning program that will deliver Continuing Education, Training and Development through videos, presentations, articles and other multimedia contents. With the support of our specialty society, the Philippine Society of Pediatric Cardiology, local Pediatric cardiologists has been recognized internationally and maybe eligible to practice in other ASEAN countries.

The following is an Excerpt from the 2009 ASEAN MUTUAL RECOGNITION ARRANGEMENT ON MEDICAL PRACTITIONERS in Thailand.

The ASEAN Vision 2020 on Partnership in Dynamic Development ap-

proved the creation of a stable, prosperous and highly competitive ASEAN Economic Region which would result in free flow of goods, services and investment; equitable economic development and reduced poverty and socio-economic disparities; and enhance political, economic and social stability. The decision of the Bali Concord II adopted at the Ninth ASEAN Summit held in 2003 the call for the completion of the Mutual Recognition Arrangement (MRA) for qualifications in major professional services by 2008 to facilitate free movement of professionals/skilled labour/talents in ASEAN. The MRA for Medical Practitioners was expected to strengthen professional capabilities and best practices suit-

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President's Report

By: Eden D. Latosa, MD

It is almost the end of my two-year term as President of the Philippine Society of Pediatric Cardiology. Before I start my report, let me take this opportunity to express my sincerest appreciation and gratitude to all PSPC members who have been instrumental in making the society's activities successful despite limited resources.

This term's focus was on the PSPC Constitution and By-laws which needed a revisit in order to be in tune with the changing times. It was done in two phases; the first phase was held on August 21, 2014 when the society members partici-

parted in a Strategic Planning activity in Makati. This was made possible through an educational grant from Wyeth Phils. The group actively participated in all the activities and was able to come up with suggestions on how to make our bylaws relevant with the times. Finalization of the output was scheduled in October 2014 where the suggested changes were presented to the group and eventually finalized. The final draft was presented during the 2015 PSPC Annual Meeting. During this meeting, changes were made thus its final form will be presented again during the 2016 Annual Meeting.

It was also deemed important by the PSPC board to develop a learning module on important topics that can be of help for non-pediatric cardiology practitioners in their daily practice. Topics included for module development include heart failure, cyanosis, chest pain for the primary physicians (includes pediatricians, general practitioners) and bedside cardiology for the undergraduates. As of now, bedside cardiology module has been



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Editorial

THE MRA AND HOW IT AFFECTS THE PSPC

The Mutual Recognition Arrangements (MRA) was adopted in 2003 during the 9th ASEAN Summit held in Bali, Indonesia. It is intended to facilitate free movement of professionals/ skilled laborer/ talents in ASEAN. One of the 12 priority sectors identified for integration is the healthcare sector.

This MRA for medical practitioners is expected to strengthen professional capabilities by promoting the flow of relevant information and exchange of expertise, experiences and best practices suited to the specific needs of ASEAN member states.

In order to be recognized as a foreign medical professional and be eligible to practice medicine in another ASEAN country, he/she must possess the following qualifications: (a) recognition by Professional Medical Regulatory Authority (PMRA), (b) possess a valid professional registration and license to practice issued by PMRA of the country of origin, (c) has been in active practice for 5 years, (d) certified as not having violated any professional or ethical standards, both local and international, (e) no investigation or legal proceeding pending against him/her in the country of origin or another country is declared and (f) comply with any other assessment or requirement as may be imposed by the host country.

Applying the requirements for a foreign medical practitioner to the Filipino Pediatric Cardiologist will not be easy even if most of the requirements mentioned are possessed by Filipino medical practitioners where PSPC members belong. One obstacle identified is the absence of a government regulatory body that is in charge in the regulation of continuing professional development (CPD) activities. Presently, CPD courses are provided by private organizations whose membership is composed of private medical practitioners. The signatories include officers of the organization but a government representative is not included, unlike in other ASEAN countries. This will put our practitioners at a disadvantage if they wish to practice in another country.

What is the government doing to attend to this requirement? The Professional Regulations Commission (PRC) has been preparing Filipino professionals by emphasizing the need for continuing professional education (CPE) through seminars, workshops, etc. to upgrade their wsde. The Philippine CPD Council of Medicine is composed of the tripartite representation from the PMA, APMC and PRC. This council encourages all

licensed physician in the Philippines to participate in recognized CPD activities and demonstrate their commitment to continued competent performance in a framework that is fair, relevant, inclusive, transferable and informative. PMA has established a MOOC site called OWL@PMA that will feature learning materials of various format shared by various education partners, yet this still does not answer the question of which branch of government is responsible in recognizing the CPD activities of various subspecialty societies.

Until such time that the PMA, APMC and PRC have issued the implementing rules and regulations related to the requirements of the MRA, the Philippine Society of Pediatric Cardiology may not be ready to implement the ASEAN integration and this may pose a threat to PSPC's opportunity to practice in other ASEAN member countries. Whereas medical practitioners from other ASEAN countries may enjoy this opportunity and practice their specialty here in the country.

PSPC is hoping that the new administration will include MRA in the agenda for further discussion and come up with implementing guidelines to be followed. The Philippine government should strengthen the mandate of PRC in order to meet all the requirements thereby giving everyone equal chance to benefit from this arrangement.

PSPC HYMN

*(Lyrics by: Ma. Rhodora Garcia-de Leon, MD
Music by: Jorge A. Sison, MD)*

Chorus:

**Ang puso ay buhay, ang puso ay pag-ibig;
Ating mga kabataan, sila'y puso ng kinabukasan.**

Ating anak na sa puso'y may kapansanan;
Lalong nangangailangan ng higit na pagmamahal;
Kaming manggagamot sa puso ng kabataan;
Alay ang aming talino at tanging kaalaman. **(chorus)**

Layunin ng PSPC, hirap ay maibsan;
Sa patnubay ng dakilang Maykapal;
Tulong-tulong tayong sila ay malunasan;
Mga sakit sa puso ng ating kabataan. **(chorus)**

Itaguyod natin ang pusong malusog,
Pagka't ang puso ay ating buhay,
Ang puso ay pag-ibig,
Ating mga kabataan,
Sila'y puso ng kinabukasan. **(chorus 2x)**

Sila'y puso ng kinabukasan.

Thoughts to Ponder Upon

A Tribute to the Past President: DR. LUIS M. MABILANGAN

2015 MOST DISTINGUISHED FELLOW —PHILIPPINE HEART ASSOCIATION



Dr. Luis M. Mabilangan, a highly revered pediatric cardiologist, is considered one of the admired icons in the medical community. He is well known for his genuine love for children, scholastic works in the diagnosis and treatment of pediatric heart disease, and published researches. It was just fitting that the **Most Distinguished Fellow award**—the highest and most prestigious of the annual college awards of the Philippine Heart Association—was conferred on him during the association's recently concluded annual convention.

The award is conferred to a Fellow of the college who has received any two of the college awards and is qualified to receive a third award. In lieu of the third award, the Distinguished Fellow Award is given. In 1992, he was cited by PHA as **Distinguished Teacher** and in 1998 as a **Distinguished Scientist**.

The pediatric cardiologist's 50 years of illustrious career has truly carved a niche in the medical pro-

fession and in the academe. He is noted for his strong physician-patient relationship in pediatrics, which often included a 3rd person (the mother) and even a 4th person (the grandmother).

He must be the person-in-command and most knowledgeable of the best treatment options for the patient. According to Dr. Mabilangan, *"There has been a shift in the paradigm. The patient is no longer submissive. He demands to have a say in the treatment plan. The good physician listens."*

He is a prolific researcher having written 54 scientific papers on various landmark studies in pediatric diseases in the Philippines. He is also a recognized authority in Rheumatic Fever and Kawasaki Disease and a most sought-after lecturer in national and international conferences.

In 1991, Dr. Mabilangan co-authored the University of the Philippines-Philippine General Hospital "Handbook of Pediatric Cardiology", which is still being used by medical students and residents in the country.

In 1992, he collaborated with national scientist Dr. Fe Del

Mundo and wrote a chapter on cardiovascular diseases in "Philippine Textbook of Pediatrics and Child Health".

Dr. Mabilangan is known for his infectious dedication and work ethics in his various roles, which elevated the standards of residency and fellowship training at the UP-PGH. He taught the young pediatricians and pediatric cardiologists to be passionate and compassionate doctors.

Of all the virtues that an MD must possess, Dr. Mabilangan lists compassion and empathy as most important. *"A physician without compassion is in the wrong profession,"* said the now retired professor, who still occasionally visits his alma mater, the UP College of Medicine.

By Mylene C. Orillo



Tribute delivered by Dr. Olympia Q. Malanyaon

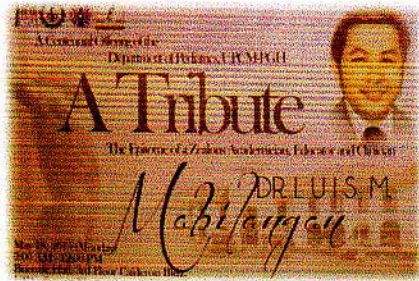
On May 18, 2015 at the Buenafe Auditorium, Calderon Hall of the UP College of Medicine, the Department of Pediatrics of the UP College of Medicine – Philippine General Hospital, in celebration of its centennial offered a tribute commemorating the stellar career of Dr. Luis M. Mabilangan as a pillar of Philippine Pediatrics. The tribute centered on how Dr. Mabilangan

epitomized unwavering excellence in his zealous practice of pediatrics as an academician, educator, and clinician. Notable personalities from the UP College of Medicine, Philippine General Hospital, Philippine Pediatric Society, Philippine Society of Pediatric Cardiology and the Philippine Heart Association graced the event and delivered testimonials on the brilliance of Dr.

Mabilangan, and on how he will always be remembered as a guiding mentor and an inspiring colleague.

All of us here know Dr. Mabilangan very well, but let me just go over some of the highlights of his career to remind really why we are toasting this beloved person today. As you know Dr. Mabilangan, he was

from Sto. Tomas, Batangas. He's a true blue Batangueno where he got the very strong adherence to virtues and invigorating personality.



He started medicine at the UP College of medicine and pursued residency in pediatrics at the Presbyterian St. Luke's College of Medicine at Chicago Illinois. Here he fell in love with cardiology, so he specialized in this field at the Cook County Hospital also in Illinois. Then afterwards, he decided to come back where he joined the UPCM-PGH Department of Pediatrics and together with Dr. Evelyn Singian he setup the cardiology section of the department. In 1970 to 1979 he showed his mettle as a leader by handling the department and during his stewardship, the department was chosen as the best clinical department, a feat we have difficulty duplicating nowadays, so sir, this is really a feather in your pocket. After his stint, he was tapped by the Philippine General Hospital as coordinator in training and research.

As a teacher, he spends a lot of time mentoring students and resident, ever so patiently and diligently. He inspires and stimulates us to study harder and is surely a role model for how to treat patients because they are not just numbers or charts, but really they are to be nurtured like our very own. Also he was instrumental in inspiring me to go into pediatric cardiology.

And it is truly amazing , because of these qualities, that he was chosen as the most outstanding consultant of the UP College of Medicine not

just once, not just twice but 6 straight years, can anybody beat that? I don't know if we have a term for that but hall of famer I think is not enough. The accolades that come his way are many in fact he has a very thick curriculum vitae, but I just chose to highlight some of them, so the awards are not only coming from the campus or the hospital but also from far and wide. So he has been chosen again several times not just once, outstanding pediatrician and alumni by the UP Medical Alumni Society, the Philippine Pediatric Society, the Phi Kappa Mu Fraternity. He was also chosen as the most outstanding of the UP College of Medicine in 1999, outstanding professional award in medicine by the alumni association again in 2000 and a centennial awardee in medical education by the UP College of Medicine in 2005. So they come from different parts and spans a long period of time so that show how good Dr. Mabilangan is. Also he has been awarded outstanding pediatrician of Asia by the Asian Congress of Pediatrics in 1994 and by the Philippine Heart Association, he was given the distinguished teacher award in 1991, distinguished scientist award in 1998 and just a hat off, in a couple of weeks he will be awarded the top honor in Philippine Heart Association as the distinguished fellow award. So these are also some of his awards in other areas given by the National Research Council of the Philippines, achievement award in medical sciences and from the De La Salle University Health Sciences outstanding professional award in medicine.

Not only is he a very good clinician and teacher, he is also an outstanding leader and as such be-

cause of this combination of leadership qualities and amiable personality it's no wonder he has been chosen president of several important organizations like the Philippine Pediatric Society, the Philippine Society of Pediatric Cardiology and the Asian Society of Asian Cardiology. He spends a lot of time teaching and heading organizations but he makes it a point to reach out to the community as well. He did not only goes back to Batangas, but he also volunteers in so many organizations serving the community all over the country.

He is a zealous academician, he has published at least 50 scientific papers, his major interest is rheumatic heart disease and he has many publications about this topic and is the sole authority in this field. Dr. Tomisaku Kawasaki worked closely with Dr. Mabilangan for him to be able to publish his papers on Kawasaki disease. He is a major contributor in several publications, he is an author of the handbook in pediatric cardiology, he contributes to the pediatric cardiology updates, and he contributed a chapter in the textbook of pediatrics and child health edited by Dr. Del Mundo. So to summarize this is just really statements of what he has accomplished during his long service but let me just end by summarizing what to most of us Dr. Mabilangan is, he is the epitome of a serious academician, educator and clinician so from all of us Dr. Mabilangan thank you for being a part of our lives.



PSPC 6TH BIENNIAL CONVENTION 2016

By Dr. Maria Theresa Claudio-Rosqueta

The Philippine Pediatric Society (PSPC) will hold its 6th Biennial Convention on May 23 - 24, 2016 at Novotel with the theme: " Cardiac Connections: The Heart and its Interaction with other Organ Systems."

This year's convention aims to optimize the care of children with heart disease by bringing together the different subspecialties that interact with the heart. The psychosocial, sexual and other issues concerning cardiac patients will be discussed in a plenary lecture. There will be critical issues affecting the neonates, adolescents and pregnant cardiac patients which will be discussed in interactive sessions with our own pediatric cardiologists and other related subspecialists. The program also aims to bring together the pediatric cardiologists to a special session that will discuss Hybrid intervention, Arterial Switch Operation And Arrhythmias in Myocarditis.

Another highlight of this event is the Dr. Evelyn C. Singian Memorial Lecture with **Dr. Asuncion Reloza**, past president of the PSPC giving a lecture entitled "Remembering the Past and Looking Towards the Future of Pediatric Cardiology."

Dr. Eden Latosa, our PSPC president is also the chair of this year's Organizing Committee, assisted by Dr. Maria Dolores B. Victor.

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suited to the specific needs of ASEAN Member States.

The **objectives of this MRA** are to:

- (1) Facilitate mobility of medical practitioners within ASEAN;
- (2) Exchange information and enhance cooperation in respect of mutual recognition of medical practitioners;
- (3) Promote adoption of best practices on standards and qualifications; and
- (4) Provide opportunities for capacity building and training of medical practitioners.

To be **recognized as a foreign medical professional and be eligible to practice medicine in another ASEAN state**, they must have the following qualifications (Article III of MRA):

1. In possession of a medical qualification recognised by the PMRA of the Country of Origin (Professional Regulation Commission and Philippine Medical Association in the case of the Philippines) and Host Country;
2. In possession of a valid professional registration and current practising certificate to practise medicine issued by the PMRA of the Country of Origin (Professional Regulation Commission and Philippine Medical Association in the case of the Philippines);

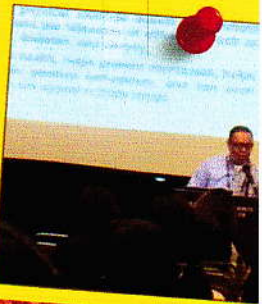
3. Has been in active practice as a general Medical Practitioner or specialist, as the case may be, for not less than five (5) continuous years in the Country of Origin;
4. In compliance with CPD at satisfactory level in accordance with the policy on CPD mandated by the PMRA of the Country of Origin;
5. Has been certified by the PMRA of the Country of Origin of not having violated any professional or ethical standards, local and international, in relation to the practice of medicine in the Country of Origin and in other countries as far as the PMRA is aware;
6. Has declared that there is no investigation or legal proceeding pending against him/her in the Country of Origin or another country; and

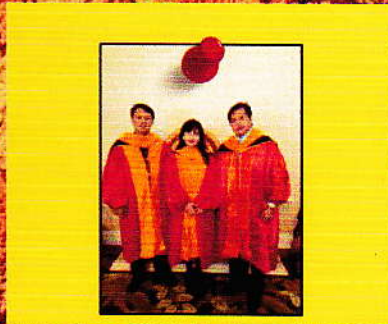
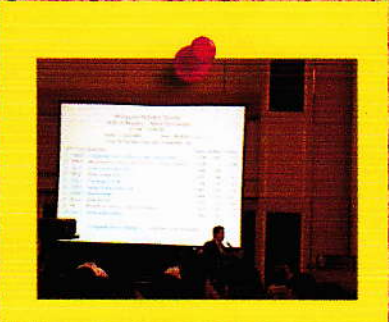
in compliance with any other assessment or requirement as may be imposed on any such applicant for registration as deemed fit by the PMRA or other relevant authorities of the Host Country.

2009 ASEAN MUTUAL RECOGNITION ARRANGEMENT ON MEDICAL PRACTITIONERS Signed by the Economic Ministers at the 14th ASEAN Summit in Cha-am, Thailand on 26 February 2009



People, Place





and Events



Camp Braveheart...

A DECADE OF RESILIENT AND VIBRANT HEARTS

By: Dr. Maria Celia R. Regino
Chair, Council on Congenital Heart Disease



This year's Camp Braveheart was held at the **Manila Ocean Park** last February 28, 2016. Since its conceptualization in February 2007, around 650 kids with Congenital Heart Disease (most of them post-operative) together with their families have joined and benefited from this event. Camp Braveheart aims to encourage these



children and their parents to work, to achieve goals, to be fruitful in their community, to be an inspiration to others and to be able to meet the challenges and ordeals of having a congenital heart disease. This will hopefully enable them to reach their full potentials by interacting and encouraging each other with the help of their doctors and other volunteers.

In this year's Camp, there were 60 patients with CHD coming from PGH, PHC & PCMC accompanied by their parent or guardian and pediatric cardiologists of PGH and PHC. Camp Braveheart is an advocacy project of the PHA - Council on CHD and the Philippine Society of Pediatric Cardiology. PHA board member - **Dr Aurelia Leus**, PHA VP - **Dr. Raul Lapitan**, Pediatric Cardiology consultants and members of the council - **Dr Regente Lapak, Dr. Juliet Balderas, Dr. Bernadette Azcueta, Dr. Virginia Mappala and Dr Martha**

Santiago arrived early to witness the opening of the program. This year's Committee members, who organized the camp were also around, namely, **Dr. Evelyn Hilario, Dr. Mayette Rosqueta, Dr Emily Anupol and Dr. Joy Irorita**. The program started with a prayer led by **Dr. Len Acosta**, followed with welcome remarks by **Dr. Raul Lapitan** and opening remarks from **Dr. Aurelia Leus** and the PSCP President - **Dr. Eden Latosa**. The CHD council Chairman gave an overview of the whole day activity.

The participants were divided into 3 groups to better facilitate their tour around the park. They started at the Oceanarium and appreciated the different sea creatures, then the children trailed along the cold Trails of Antarctica and was later on mesmerized by the performance of the 2 sea lions. After which they went back to the Pacific function room for more interactive activities, including the best heart design poster making. The winner for the best poster was the group of children from PCMC.

While the participants were having lunch, **Dr Connie Sison** gave an interactive lecture on Healthy lifestyle focusing on 5-2-1-0-0, which was very educational and appropriate for the listeners. After a few games and allowing the children some time to rest, they went back to the park for the Jellies exhibit, and they conquer their fear sharks and Ray Dry Encounter. This was followed by intermission numbers from **Dr. Marienella**

Francisco and **Dr. Kim Tolentino**. Everyone was mesmerized by **Dr. Francisco's** rendition of Ariel's Part of your World from the classic Disney's Little Mermaid. Their duet, A Whole New World from the movie Alladin was really awesome and indescribable. **Dr. Kim's** version of Somewhere over the Rainbow, from The Wizard of Oz was also a hit in the audience but the final number by **Dr. Francisco** as Elsa from the movie, Frozen, was the winner and well applauded and appreciated by everyone as she sang her version of 'Let it go'.

There were more games in the afternoon, which was given by our game master, **Ms. Zhendelle Hilario**, Cardiac Rehabilitation Nurse at PHC assisted by **Dr. Rainier Rapal**, PGH pediatric resident. The children were each given certificates of attendance and loot bags, awarded by the Chairman. Afterwards, the Chairman delivered her closing remarks and thanked everyone for their participation. The smiles in their faces were enough to say that it was indeed a day of fun and excitement and reason to look forward to next years' Camp Braveheart. Before leaving Manila Ocean Park, they watched the evening Musical symphony and fountain show which was another wonderful experience. It was a long and hectic day for everyone but definitely a heart-warming experience and a memorable one to treasure...till our next Camp Braveheart.





It

was also deemed important by the PSPC board to develop a learning module on important topics that can be of help for non-pediatric cardiology practitioners in their daily practice. Topics included for module development include heart failure, cyanosis, chest pain for the primary physicians (includes pediatricians, general practitioners) and bedside cardiology for the undergraduates. As of now, bedside cardiology module has been developed. This will be presented to the board for comments and recommendations before it will be implemented. My sincere thanks to Dr. Ninfa Villanueva who was instrumental in making this module possible.

Lay forum and media exposures in order to increase the awareness of lay persons about heart disease in infants and children were done through the close coordination of Dr. Virginia C.Mappala, chair of the Committee on Publicity and Lay



Forum, with UNTV. A five-day TV exposure was allotted to PSPC members who discussed topics involving congenital heart diseases, rheumatic heart disease, obesity, stroke and their management. Responsible for this TV exposures were Drs. Bernee Azcueta, Ghie Mappala, Ina Bunyi, Glenda Tubianosa and Rachel Ninalga. Other lay fora were conducted during the celebration of Heart Month.

Even if pharmaceutical industry assistance is very limited, PSPC was able to hold two Round Table Discussions: one in September 2014 when Dr. Ernerio T. Alboliras generously shared his experiences and expertise in Fetal Echocardiography. The other RTD was held in Davao City upon the invitation of our colleagues practicing in Davao. Discussed was PhilHealth Z Benefit Package for children with VSD and TOF. This was attended by Pediatric Cardiologists, Cardiovascular Surgeons, Anesthesiologists and Pediatricians. The third RTD will be on May 16, 2016. Dengue vaccine will be discussed and it aims to update Pediatric Cardiologists about dengue and the role of dengue vaccine in preventing possible complications in our patients who might be more vulnerable to the complications of dengue fever.

PSPC was able to conduct a Postgraduate Course together with PHA Council on RF/RHD last May 25-26, 2015. This activity, attended by physicians and lay person, was held in EDSA Shangri-La hotel. Another scientific convention is scheduled this coming May 23-24, 2016 at Novotel Hotel in Que-

zon City. This will be a two-day activity and will be the 6th Biennial Convention. The theme is "Cardiac Connections" Its interaction with other Organ Systems. The preparations for the Biennial Convention were made possible through the efforts of the Organizing Committee is headed by Dr. Ma. Dolores Victor and ably assisted by the various committee chairs.

Other activities that were conducted during my term were the celebration of Heart Month held every year, the latest was conducted in Binan, Laguna where free



consultation and wellness advice were done. Some members of PSPC also joined the PHA Council on CHD activity "Camp Braveheart" for post-operative children with heart disease. This was held in the Ocean Park, Manila and attended by many children who had a grand time and enjoyed the different activities lined up for them.

Despite the lack of sponsors for the different PSPC activities, still the plans were successfully implemented because we worked as a team. Everybody cooperated to make the activities successful. If PSPC members work together, PSPC cannot fail. I wish that we all continue to actively participate in the future PSPC programs.

Good Day to all and I wish everyone well.

Agony and Passion of Pediatric Cardiology Training

(By the New Diplomates of PCC-SBPC 2016)



MYLAH P. ALFECHE, MD

My three years of fellowship training in pediatric cardiology was a blend of various emotions and experiences but definitely of God's plan in His perfect timing. It seemed that I was carrying a heavy load during the first few months being a "promdi" and a newbie in a prestigious institution, adapting to a new environment, studying numerous cases, assuming bigger responsibilities and interacting with exemplary consultants. Days, weeks and months passed, new friends were found which made life lighter and easier. It was a roller coaster ride, in which, there were times when you feel the adrenaline rush during toxic duties or managing unstable patients, a gloomy feeling after a morbidity/mortality conference, and feeling of gladness in every successful procedure or correct diagnosis and management. The most rewarding part of fellowship training was seeing our patients recover from their illness especially those being corrected of their congenital anomalies and the acknowledgement we received from our mentors, to include the free food. Seeing my senior fellows eventually graduating scared me for it would mean passing a greater responsibility, at the same time brought excitement, since I would soon be completing my training.

Commencement exercises came which brought momentary joy because I would again be preparing and facing the greatest challenge which was the board exam. Anxiety struck for the nth time. Migraine headache hit me during the practical exam that worsen after the result was announced - that feeling of heaviness/stress persisted and waned for a couple of days. I wouldn't have made it without the limitless teachings of my mentors, them, being excellent role models, of whom I am very much grateful.

All glory and praises to God for the victory!!!



MAE CABRERA DAGOOC, MD



Words of wisdom from some of my pediatric cardiology mentors that I usually heard before I started my training at the Philippine Heart Center:

... "Sus Dyos ko! Passing through the eye of the needle...Di ko na babalikan if I will have a chance again, but it's all worth it...I know 4years of pediatric cardiology fellowship training is not an easy path to take. But I know myself...

-- iM a StRoNg GiRl WhO kEePs HeR sTuFf In LiNe. EvEn WhEn I hAvE tEaRs running dOWN mY fAcE, i AlWaYs MaNaGe To SaY tHeSe TwO wOrDs: I'm FiNe...

-- It's just your Baptism of Fire, as what my mentor said to me on my 1st Case Presentation--

We learn wisdom from failure much more than from success. We often discover what will do, by finding out what will not do. And at the end of the day, I know I'm a little bruised, slightly broken, and permanently scarred but I'm still here. I'm still fighting, I'm still waking up every day to go through it all over again. This life may be hard as hell but it's still a GIFT and I'm going to live every moment of it. And today, that I'm done with my training and passed the board certifying exam, if somebody would ask me where I could get the best pediatric cardiology training? Still I will say -- The Philippine Heart Center ♥

Again, thank you for everything.

-- my Philippine Heart Center family

-- my Family and especially my Nanay, though you're many miles away from us, I realize that you we're simply watching my back. You never really leave us. Thank you.

PSPC VISION STATEMENT

To be the premier society of pediatric cardiologists, recognized locally and internationally, committed to providing excellent healthcare to children with heart disease.

PSPC MISSION STATEMENT

To achieve our Vision, the Philippine Society of Pediatric Cardiology will promote optimum cardiovascular care through professional membership enhancement, continuing medical education and research, advocacy programs and linkages with concerned organizations for the purpose of the prevention of and management of heart diseases, realizing that each FILIPINO CHILD deserves the BEST.

LORIELYN GARCIA-MANDIGMA, MD

I have fought the good fight, I have finished the race, and I have kept the faith. Now there is in store for me the crown of righteousness, which the Lord, the righteous Judge, will award to me on that day - and not only to me, but also to all who have longed for his appearing (2 Timothy 4:7-8).



It has been a long journey, but with God's grace and mercy, we finally made it. There were a lot of sacrifices and trying moments, but it was all worth it. Fellowship training in pediatric cardiology was far beyond being easy. Surviving each day was a struggle, but with the help of my FAMILY who has always been understanding and supportive for my passion for this profession, I was able to get through everything. I owe everything that I am today to my parents who untiringly worked hard to help make my dreams a reality. To my husband who stood by me in my moments of sober and triumph, I couldn't thank you enough for filling in the gaps while I juggle between being a mother and a fellow-in training. To my amazing kids, you never failed to make me smile, and you have kept me sane despite everything that I had to go through in fellowship training. To the PHC Department of Pediatric Cardiology, thank you for inspiring me and pushing me to be better each day in the service of our patients. To my mentors, Dr. Ferrera, Dr. Ballelos, Dr. Rosqueta, and Dr. Azcueta to name a few, thank you for the support during my trying times and for believing in me and my capabilities. To my co-fellows, thank you for the camaraderie. And to the **Board of PSPC**, thank you for the opportunity and fulfillment that you gave us.

To God be the glory!

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Pediatric cardiology fellowship training at PHC is being a medical clerk (Junior Intern), a Senior Intern, a resident and a fellow rolled into one, riding one roller coaster with a caption "**Brave It!**" The ride is initially smooth and flat with just some little jolts of metal sharpening each other; you enjoy and sway with the cart but holding on tight (as in first year). Then, you go for an ascent towards a big drop (as in second year) and head for a triple overhead loop (as in third year)! It gets scary with the ascent and big drop but even scarier and being thought as deadly once at the overhead loop. Nevertheless, you shout "woohoo, hooray!" once the ride is done. It was bracing and exhausting but fun! That was fellowship! It was **just a roller coaster thrill ride**, wherein you have to have a **good heart to survive it**, a **sane mind so you don't jump out of the cart even before it starts rollin'** and a **safety team**. (Safety team - operators won't let you die during the ride, similarly with mentors, co-fellows and hospital staff during fellowship training. They will make sure that you finish the ride safe, sound and happy - meaning rollin' the coaster with your hands up in the air!) Yippee! And the ride came to an end. I loved it but I am not saying I would want to ride it again! *Hehehe* Perhaps another roller coaster such as the subspecialty board exam would do. I am no singer but this was the only exam that made me sing! Sing during review nights to keep me up until the crack of dawn and to calm me down during the exam! - *"I'm afraid to fly, and I don't know why . . . I'm jealous of the people who are not afraid to die"*.

Luckily, my universe conspired and again, I made it through that roller coaster ride!

Thank you, my family and everyone who believed I could brave the ride!



TECHNOLOGY'S AID IN PATIENT CARE

By Dr. Judah Gozar and Dr. Mylah Alfeche



In this modern era of technology in the field of pediatric cardiology, it is becoming increasingly important especially in managing our patients. This is through arriving at an accurate assessment with the aid of telecommunications. We are able to transmit information regarding our patients to consultants and gather different opinions in a group chat or discussion. It eliminates distance barriers between fellows and consultants especially during emergency situations.

We, pediatric cardiology fellows usually use Viber and Dropbox, wherein we can send pictures of patients' pertinent physical examination findings, electrocardiogram strips, chest x-ray, echocardiogram, angiogram and intraoperative findings. Most importantly, creating a group chat enables everyone to willingly give inputs, suggestions or comments for a difficult or interesting case. Sending long updates regarding a patients' case to a group of doctors involved in the case makes our life easier. Articles or journals regarding evidence-based medicine necessary in the management are easily accessible with the use of various websites such as ClinicalKey, UpToDate and PubMed.

Healthcare providers are not the only one who can benefit in telecommunication. It is advantageous also to the families of patients especially those living in rural or remote areas. Those with chronic conditions who need regular monitoring can send information to their physicians without the need of physical visit. However, physicians must always remember that this does not overrule the need for building relationship with the patients. With the help of social media such as Facebook, they are able to solicit funds for the surgical procedure needed by their child.

Thanks to our modern day of communication and network connections, truly it promotes excellence in quality patient care and soothes the life of our physicians.

THE MEANING OF COMING HOME

*There's no greater JOY than
To GO home,
To COME home,
To BE home...*

*Because HOME is where the
HEART is,
Home is where our roots are...
Where we grow and extend
our branches,
Bear fruits and enjoy the fruits
of our being...*

*To COME home is to bring
back childhood memories..
To smile and laugh at old sto-
ries..
To remi-
niscence our past little battles and
big victories,
To cry over what we lost and
what we regained.*

To GO home is to renew family

*ties,
To seek refuge, to search for
light
To find some hope,
To reinforce our strength..*

*To BE home is to share,
To be happy, feel safe and se-
cure
To be home is to be yourself
To be at peace... to dream ... to
love.*

*HOME is where we belong
Home is our family, our first
and forever...
Home is where we begin and go
forth into the world
Home is where we go back to
and find our final place, to
rest....*

Ma. Rhodora Garcia-de Leon, MD

PSPC PAST PRESIDENTS

- 1992 - 1994 Wilberto L. Lopez, MD
- 1994 - 1996 Luis M. Mabilangan, MD
- 1996 - 1998 Asuncion A. Reloza, MD
- 1998 - 2000 Edgardo E. Ortiz, MD
- 2000 - 2002 Teofilo C. Cantre, MD
- 2002 - 2004 Ma. Lourdes SR Casas, MD
- 2004 - 2006 Ma. Rhodora G. de Leon, MD
- 2006 - 2008 Della G. Pelaez, MD
- 2008 - 2010 Aurora S. Gamponia, MD
- 2010 - 2012 Aurelia G. Leus, MD
- 2012 - 2014 Magdalena J. Lagamayo, MD