### **Progress Notes**



Dr. Alfaretta **Tan-Reyes** 

The new Dean of the Medical School is Dra Alfaretta Tan-Reyes, replacing Dra. Georgina T.Paredes. Dr. Tan-Reyes was the chairman for many years of the Department of Pharmacology. More details to follow...

Dr. Fernando Sanchez, Chairman of the Committee on

Awards and Recognition of the UERMMMC Golden Jubilee,

announced the Alumni Achiever awards recently. Among the

recipients are our very own Drs Irene Ibanez-Manlapaz, Benjie

Rigor, Randy Puno and Rene Ouerubin (complete list and

details forthcoming). The ceremonies will be held in the ballroom

of the Grand Plaza Hotel at the Ortigas Center this coming June

15. They were chosen from over 20,000 graduates of the colleges

of Medicine, Nursing and Physical Therapy.



Dr. Irene Ibanez-Manlapaz

She keeps piling up the honors! Our President-Elect, Dr. Irene Ibanez-Manlapaz has been elected President of the Association of Philippine Physicians in Louisiana and the Gulf Coast. Get in the Mardi Gras Spirit with the Induction Dinner and Fundraiser scheduled on Friday, June 22 at the JW Marriott, Canal Street in New Orleans. Lunch/CME (your trip may be tax deductible) and golfing on Saturday have been scheduled- everyone is invited. Her term extends till 2009.

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# the Alumni Newsletter

**Pre-Convention Issue** 

Marshfield, Wisconsin

# The Reunion-Convention in DC: A Capital Idea



MARVADC and Foundation Officers pose with Philippine Ambassador Willy C. Gaa, after the Induction Ceremonies, March 3

The University of the East Ramon Magsaysay Memorial Medical Center – Medical Alumni Association of America, Inc. (UERMMMC-MAAA, Inc.). MARVADC Chapter held its Induction Ceremonies and Ball at the JW Marriott on Pennsylvania Avenue on Saturday, March 3, 2007. The Philippine Ambassador to the USA, His Excellency Ambassador Willy C. Gaa, officiated the oath taking for both the UERM alumni MARVADC Chapter officers and the UERM Alumni Foundation, USA (AFUSA) officers. Ambassador Gaa was the Keynote Speaker for the evening. The 2006-2008 MARVADC Chapter officers are: President: Ana Maria Guanlao-Pasatiempo, MD, MPH; Vice President: Myrna Ortega, MD; Secretary: Nathalie Bernabe-Quion, MD, MPH: Treasurer: Albert Coo, MD: PRO: Antolin Trinidad, MD; Business Managers: Bhagwan Moorjani, MD and Elwin Bustos, MD.

Present for the induction of officers of UERM Alumni Foundation, USA (AFUSA) were: Drs. Isabelita Casibang, President; Ruby Reyes, Secretary; Nannette Pasatiempo, Assistant Secretary; Elmer Gilo, Treasurer; Sam Dona, Board of Director; and Bayani Elma, Past Chairman of the Board. Dr. Edgar C. Banez, President of UERMMMC-MAAAI and Dr. Susan Perez-Suntay, National Convention Commissioner were also present.

UERM Alumni from Maryland, Virginia and the District of Columbia were from different classes, ranging from UERM Med Class 1962 to Class 2004. Those present enjoyed the dinner, music, and dancing, as well as the camaraderie of friends, colleagues, and family. We were also entertained late in the night by performances by noted Filipino artist Anthony Castelo, and UPAA-MdDCVa President Dr. Jun A. Quion.

This year, the UERM MARVADC chapter will be co-hosting, along with the UERMMMC-MAAA, Inc., the 19th Annual UERM Alumni Reunion and Convention on August 2-5, 2005 in Washington DC. It

will be held at the JW Marriott on Pennsylvania Avenue, just steps from the White House. A golf outing is on tap. The CME topic this year is "Current Issues in the Health of Baby Boomers" and features a broad range of relevant lectures by distinguished alumni and invited lecturers. Dr. Joven Cuanang is the Dr Jose Cuyegkeng keynote speaker. He will answer the question- "Is the Philippines Ready for Medical Tourism?" Jubilarian Night theme this year will be The Roaring Twenties. Hosting will be Class 72, and also features Classes '62, '67, '72, '77, '82,'87, '92,'97 and '02,

Alumni and guests wishing to get more information can access the chapter's website at www.uermmarvadc.org. The complete schedule of activities is on page 14. Meeting payment/registration, hotel registration, Souvenir Program Ads and Exhibitor forms are also inside.



The Capitol

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# **Second Opinion**

By Senen V. Siasoco, M.D.



The "Mall" has twenty shops, Walmart is considered upscale. There's a slew of steakhouses, versus only a couple of Chinese restaurants-so no *mami* or *siopao* para mi aqui. Marshfield, in the heart of rural

Wisconsin, is my home.

Work is a twelve minute stroll- three segments of NPR's Morning Edition. The hospital/clinic renders tertiary care, the patients vary and continue to pique my interest (*Boss* says I have ADHD- I say it's just a short attention span). Yesterday, for example, I infused remifentanyl IV into a G2P1 leukemic in labor- her clotting factors were through the roof, ruling out your basic epidural. Then, guided by a nerve stimulator, I popped bupivacaine into the *kilekile* of a mechanic with a sliver of metal in his palm. Call is reasonable-one weekend per month, every twelfth weekday, post-call day off. Can't complain about the \$\$\$\$ either.

My bio is not atypical (pardon my patholo*gese*)-I'm sure you guys out there are living a comparable life. In 2005, out of 794,893 registered physicians in this country, 185,234 were International Medical Graduates (AMA Membership Fact Book) – a whopping 23% of the Doctor population. Indians (not the Native American type, but the true *Bombay*) comprise the largest number of migrant docs, outnumbering Filipinos 2:1. There are almost 20,000 of us - concentrated in the larger states: California, NY/NJ, Florida, Texas and Illinois. We are mostly internists, anesthesiologists, psychiatrists and pediatricians (in that order).

These stats were culled from Dr. **Graham T. McMahon's** article on IMGs published in the NEJM, and which I share with you on page 12 of this issue. He objectively summarizes the sentiments of one who's been in the trenches, explains why we all flock here, the obstacles we encounter, how we overcome/cope with them. As a counterpoint, Dr. **Barbara L. Schuster's** article on page 13 approaches IMGs from the supervisory/overseer, albeit, altruistic point of view.

On page 4, a story appeared in the *Philippine Star* newspaper detailing the perils of the "First Gentleman". Most of the names in the final paragraph are familiar to you, and ought to make you proud of the Ol' Alma Mater.

Chuckle at **Benching Tan**'s story on page 8. He posted this on the Class 72 website and elicited some very entertaining replies- once again proving that UERM grads are not only *matatalino*, they're *nakakatawa* too...

Dra Vickie Casibang's account of her Sta Mesa Adventures (page 6) illustrates just how hard your Foundation Officers are working for you.

All work and no play make Juan a dull boy so book your summer vacation now at **Sitio Remedios** in Ilocoslovakia, page 18.

Lastly, **Class 81** and **82** share the spotlight in this edition of your newsletter. You, too, will have your turn, but you must show up at the Reunion to partake of the pleasures of communing with old friends, and crafting fresh memories. *Magkitakita tayo sa* DC!

**Letters** 

Thursday, February 8 2007

Dr Rico-Todd,

The Southern Nevada Immunization Coalition deeply appreciates the generous contribution from the UERMMMC Medical Alumni Association. We value our partners and are dedicated to collaborate to make a difference in the lives of Southern Nevadans every day. Since we started the PINK program in southern Nevada in July 2006, we have distributed over 10,000 education packets to new parents.

The PINK program has been so well received and it is only possible with the support of partners such as your Alumni group. Please share out sincere appreciation with your group. We welcome any of your members to attend a SNIC meeting whenever possible. We meet the first Thursday of each month at 8 am in the Clemens Room at the Shadow Lane office of the Southern Nevada Health District. Thank you once again!

Angela Berg RN, BSN RN Manager, SMA Pediatrics Chair, Southern Nevada Immunization Coalition Sunday, February 18 2007 Irene:

Thank you for the copy of the Alumni Newsletter. I just noticed they wrote that I am from the 1978 graduating class. I am actually in the same class as Susan Perez-Suntay, Class 77.

Randy Puno



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have the option of driving to Vigan (it takes about an hour) to have a turn-of-the-century dinner, an impressive production mounted by Perez in the ancestral Arce home which he is leasing.

On our last night at the Sitio, driving back from dinner in Vigan, we were greeted by the sight of the entire sitio carpeted with lit candles, hundreds and hundreds of them. Against a moonlit sky, the vista was magical. The Sitio has taken on yet another character. Irene Marcos Araneta, a recent guest, called it the "night of 400 candles," which, she told Dr. Cuanang, was the talk among her friends.

To Dr. Cuanang, the sprawl represents a return to his roots and his way of giving back. He pointed at the watch tower that was almost completed in one side of the beachfront—it will be a venue for Ilocos arts and crafts. You wonder what drives someone to recreate the past. "Pride of place," he said. "It's for the future (generation)." That's a rare investment these days.

Sitio Remedios is fully booked for the Holy Week. For reservations, log on to <a href="https://www.sitioremedios.com">www.sitioremedios.com</a>. A tempting three minute video may

be viewed at:

http://www.clipcast.ph/?playtyp=s&shcatid=1&mnshid=&SHWID=161

Editor's Note: This story appeared in the Lifestyle section of the Philippine Inquirer, March 29, 2007.



A typical room in the resort



Capilla, The Chapel

Continued from page 17

slept most of that day. At Fabella, we usually put the baby on top of the abdomen of the Mom, since most of the time, the patient on the next table was about to deliver too. The nursing student would cut the cord while I delivered the baby on the next table. So...when I got back to UERM, we had to follow the "right" procedure, with the left hand holding the legs of the baby, the Intern then would slap the bottom of the baby gently so the Mom would hear the first cry. The baby was bigger than the babies I delivered at Fabella and was very slippery due to excessive amniotic waste and fell from my grasp! It was a good thing my legs were quick and caught the baby before he fell in the pail. It was late in the evening and there was no consultant, just my Senior Intern. Ooops...I almost got an extension for that...

My entire rotation in OB, whenever I was on-call, I never had a good continuous

hour of sleep. even my rotation at Community Medicine in Limay, Bataan had a

wonderful OB story (*Ed. Note: When do we hear/read about that?*). Sooo...when it was time to select the specialty I wanted to pursue, OB-Gyn was at the bottom of the list.

Why did I go to Pathology? That is another long story...

#### **Armand Wiltz** (an Ob-Gyn) wrote:

Hey Bench, your objective and scholarly critical analysis of an Ob-Gyn's life with humor is great! A woman divorced a psychiatrist because all he did was talk about it. She then divorced a gynecologist because all he did was look at it. She is now getting married to a stamp collector. That is the end of the story and joke of the day.

#### Benching concludes:

to all UERM Alumni...

and the magic continues...

from Houston to Las Vegas and now to Washington, DC...and what a great honor for our class '72 to be co-sponsoring and hosting the Jubilarian nights with our Alumni Association and the MarVADC Chapter and especially class '82. 3 months and counting...so many things to do...so little time...the theme will be roaring 20s. and see, do we have to wear like Al Capone and

roaring 20s...and gee, do we have to wear like Al Capone and Bugsy Malone? It will be a joy to see our beautiful alumni girls becoming flappers and everyone doing the Charleston.

Let us start with "Let's Misbehave"...hmmmm sounds

naughty...then, there's "When They Begin the Beguine,." Happy Feet, Happy Feet", those dancing Happy Feet...what about "What Is This Thing Called Love"...and "Ev'ry time we say goodbye", I die a little... ( I really do).."cause my heart belongs to" UERM...da da da da da da! And it simply couldn't be bad...and you will certainly hum this...

"Do you love me...as I love you...

Are you my life to be? My dreams come true...

Or will this dream of mine...fade out of sight"...

...timeless, memorable...beautiful songs of Cole Porter, Gershwin, Irving Berlin...and the great bands of Benny Goodman, Artie Shaw, Irving Aaronson... and yes, we have a great feeling that your "dream"...will not "fade out of sight"...and as Cole Porter will sing..."Anything Goes"...come join us to celebrate a once in a lifetime dinner/dance on August 3, 2007 where there will be a contest for best male/best female dancer of roaring 20s and best pair costumes of that era. and a very great known lively Filipino combo ~ the JM Factor Band.

# A Heritage Resort: Sitio Remedios

By Thelma Sioson-San Juan

wo weeks ago we got our summer break earlier than expected, in a place we had always been fond of -- Ilocos. Through the years Ilocos has provided us rich stories (including ghost stories) and even richer experiences: Irene and Greggy Araneta's wedding in Sarrat; the centuries-old houses of Vigan, now a Unesco World Heritage site; our magazine colleague Joseph Uy finding himself sleeping on the same bed that Tom Cruise had slept on at Villa Angela during the shoot of Oliver Stone's "Born on the Fourth of July"; the mind-boggling

grand architecture of the Ilocos churches, particularly of Sta. Maria Church with its grand steps and the old graveyard behind it; and the Bantay tower on which Angel Aquino, then a budding model, stood in a Ramon Valera kimona, photographed before sunrise by Neal Oshima for what has since become a classic Metro cover, etc.But a new Ilocos attraction is bound to be even more memorable: a manmade sitio by the sea, complete with a plaza, a chapel and old houses.

Sitio Remedios is a 18,000-sq-m sprawl along the South China Sea in Currimao, Ilocos Norte.It recreates a village of mid-20th century Ilocos. As far as we know, there's no place like it in the country. The sitio is a beach-front property of Dr. Joven Cuanang, medical director of St. Luke's Medical Center. Last year he decided to develop it into a mid-century Ilocos Norte village.

#### **Saving memories**

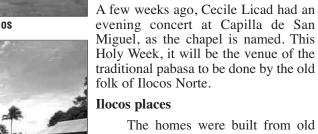
Asked why he did it, he replied, "Because they're taking away my childhood memories." He added: "More and more, traditions are dying, artifacts and antiques are being taken away. I don't like the idea of bringing things out of the country." A graduate

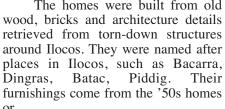
of University of the East-Ramon Magsaysay Memorial school of medicine and Harvard Medical School, Dr. Cuanang has nurtured a passion for art since his youth; in fact, he has leading art galleries.Born in Batac in the neighborhood of Ferdinand Marcos, Dr. Cuanang and his two siblings were orphaned early. His mother, Remedios, was a schoolteacher; she died when he was only 15.

Dr. Cuanang has lovely memories of the beaches along Currimao, where his family would go on weekends and holidays. By building Sitio Remedios late last year, the physician has preserved his memories of a genteel past. The wooded gates of the Sitio, named after his mother and dedicated to Our Lady of Peace and Good Voyage and Nuestra Señora de los Remedios,

open to a grand walkway of old bricks, flanked by pools filled with azucao lotus plants indigenous to Paoay. The 14 Stations of the Cross are engraved on cement plinths lining the path.Going up the steps at the end of the walkway, you get a sweeping view of the sitio—the plaza, the chapel made of rough concrete shaded by centuries-old trees, and the six houses replicating the Ilocos homes of old—each structure a labor of love by Dr. Cuanang and his architect, Rex Hofilena. The chapel, a replica of Paoay church, is the heart of the plaza. Dramatically lit at night, it sets the

romantic mood of the place. Inside are massive wooden benches and side altars honoring St. Anthony de Padua and Our Lady of Peace and Good Voyage. The interiors are as stark and spare as its façade. The only color is in the stained-glass windows designed for the chapel by Antonio Leano. Its lone chandelier once adorned the Quiapo church. Anyone, even a man, would feel the romantic urge to tie the knot in this quaint, romantic setting.





even older. Their artworks are by today's foremost artists.In the Batac home is a wedding portrait of Mariano

and Remedios Cuanang—the doctor's parents—done in the "Larawan" style by National Artist Bencab.In the dining area hangs a Manny Garibay mural of "El Vibora," depicting the bravery of Gen. Artemio Ricarte. In the living room on the second floor hang the portraits of Juan and Antonio Luna, both illustrious sons of the neighboring town of Badoc.

Called a "heritage resort," Sitio Remedios accepts stay-in guests and has its own kitchen serving Ilocano fare. You can feast on the homegrown greens and seaweeds and, of course, bagnet. From day to night, you're lulled by the sound of the waves, and cooled by the sea breeze.

Dr. Cuanang collaborated with fashion designer Lito Perez of Camp Suki fame to give the guests a memorable night. Guests



The beach at Sitio Remedios



The Plaza, facing South China Sea

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he Alumni homecoming and reunion in the Philippines has always been held during

December. It is the Holiday season and the best time to visit our relatives. The kids are not in school, the lanterns and carolers are all over, the midnight masses bring back fond memories. Filipinos rejoice in the longest Christmas season in the world

It also is the busiest time of the year for one and all. It is super difficult to get time off from work, and airfare is most expensive. Two weeks is not enough time to divide between your relatives, friends and classmates. A less hectic February appears to

be a better alternative. It has the best weather, temps are just right and there's no rain in sight. The airfare is cheap, and the only problem is that the kids are still in school. In years past, February reunions were planned, most of you have done it for Class reunions and medical missions. The time is ripe for us to reschedule the Homecoming.

Dr. Andy Borromeo (my counterpart in the Philippines) and I discussed this change, and the celebrating Class 1984 was consulted. This was presented to the Board and is now officialthe 2009 Alumni Homecoming will be held on the first weekend of February. Festivities will be patterned after our August Reunion.

# **President's** Report

By Edgar C. Banez, M.D.



Medical missions of the National Alumni Association are also being planned to coincide either before, or immediately after, the homecoming activities. These medical missions will be under the joint efforts of the US and RP Associations and places other than UERM Hospital are being contemplated, especially those which require no operating room fees.

The August 2007 Washington DC affair is just around the corner. The MARVADC Chapter is all geared up. The stage is set for another grand reunion. Please be reminded that this is our main fundraising event. Our Alma Mater needs all the help we can offer.

We have brought down the fees for our convention functions to the barest minimum. All charges are at cost and the hotel room fees are at their lowest. The main source of funds is the Souvenir Program. This is an appeal to all Alumni- your ads and/or your donations are needed badly. All funds raised will be utilized to improve the quality of education at the Med School, and eventually raise the school's passing rate in the Philippine Medical Board examinations. Our reputation is at stake, our Alma Mater's future is threatened. We Can Make A Difference...

Let us all join together and celebrate our Medical Center's Golden Anniversary this coming August 3-5 in our (adopted) Nation's Capital.



# **Executive Director's** Corner

By Sonia Rico-Todd, M.D.

There have been a lot of changes and activities lately both here in the US, and in the Philippines. The MarVaDC, the North East and the Northern California chapters have elected a new set of officers, and both the MarVaDC and the North East chapters have had their induction ceremonies, which, from all accounts were both successful. Unfortunately, due to family obligations, I was not able to attend either one. Likewise, the Silver Jubilarian Class of '82 held their fundraising gala in California to kick off their activities in preparation for the Washington DC Convention. It was another event I missed for the same reason. Let us hope that everybody will be energized so we can have the best attendance yet in this year's Convention

and Reunion. Please register early, and book your hotel rooms now to avoid any hitch later. We would also like to appeal to your generosity, and send your ads and donations for the Souvenir Journal. You can access the MarVaDC website (http://www.uermmarvadc.org) for information. Individual mailings will be sent out as soon as our energetic Convention Commissioner, Dr. Susan Suntay is all settled. Remember the date: August 2-5, 2007.

On the Philippine side, as some of you already know, we have a new Dean in the person of Dr. Alfaretta Tan-Reyes. The Alumni officers are looking forward to working with Dr. Reyes, as we did with Dr. Paredes. As we welcome Dr. Reyes, we will stand firm on our commitment to the projects we have started, especially the Scholarship program, so we can attract the best students to our Alma Mater. As for the DAP/Indigent we are still working on how best we can disburse the funds in the hope of getting more patients for the students to work with. We are taking small steps, but I'm sure that if we are all united in our endeavors, all our efforts will bear fruit soon. Let us all work together for a better UERMMMC!

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### **Travails of the First Gentleman**

By Juliet Gopez-Cervantes, M.D.



Tirst Gentleman Jose Arroyo **→** Miguel remains in stable but guarded condition two days after undergoing open-heart surgery to repair a tear in his aorta, even as his medical team at St. Luke's Medical Center is doing its best to restore the function of Mr. Arroyo's vital organs. The critical 48-hour period has now passed without any untoward developments but the First Gentleman must remain under intensive care for five to seven days more. He now has about an 80 chance of recovering without any

percent The First Couple, in healthier days complications. The First Gentleman underwent a very high-risk operation, and we are keeping a tight watch for any signs of possible complications in his lungs, kidneys, liver, pancreas, brain and

heart. At present, we have stabilized his condition but we have to

continue supporting the function of his lungs and kidneys

through ventilator support and dialysis, respectively, to help them

cope with the load of fluids and blood products administered to

him during the surgery. The 10-hour operation required the significant lowering of the First Gentleman's body temperature (15°C) to prevent organ damage and the temporary stoppage of the blood circulation to his entire body to make the aneurysmectomy at the level of the arch of the aorta possible—necessary steps that may compromise the function of vital organs, especially the brain. Nevertheless, the medical condition of the First Gentleman remains stable and his medical team is guardedly optimistic about the outcome of Mr. Arroyo's surgery. The First Gentleman was admitted at the St. Louis University's Hospital of the Sacred Heart in Baguio City on April 8, Easter Sunday, after complaining of abdominal and back pain. Finding Mr. Arroyo's heart to be stable, doctors diagnosed him as suffering from chronic gastritis and he was discharged the next day. Doctors at the hospital advised the First

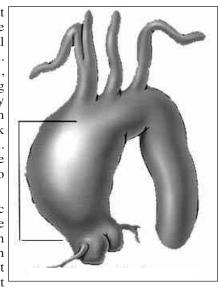
On the afternoon of April 9, Mr. Arroyo was admitted at St. Luke's Medical Center where we diagnosed him as suffering from thoracic aortic aneurysm with acute aortic arch dissection. Aortic dissection especially at the arch is an uncommon but potentially fatal illness caused by a tear in the innermost layer of the aorta, the major artery that carries blood from the heart to the rest of the body. Roughly the diameter of a garden hose, the aorta extends from the heart down through the chest and abdominal region, where it divides into a blood vessel that supplies each leg.

Gentleman to undergo further tests at St. Luke's Medical Center

in Ouezon City.

"Any condition that weakens the layers of the aortic wall puts an individual at risk for aortic dissection. Advanced atherosclerosis (hardening of the arteries due to fatty deposits), and hypertension are the most important risk factors," according to St. Luke's Heart Institute Director Dr. Antonio Sibulo

> Peak incidence of aortic dissection is between the ages of 60 and 70 years, with men affected twice as often as women. The most common complaint is chest or abdominal pain described as tearing, sharp, or



**Ascending Aortic Aneurysm** 

stabbing. The pain may be felt at the front or back or may move as the dissection (tear) extends. Acute aortic dissection is an emergency requiring immediate medical treatment, Sibulo explained.

"Aortic dissection may affect any part of the aorta but the majority of cases involve the segment at the ascending aorta followed by the descending aorta," according to Dr. Rommel Cariño, the thoracic and cardiovascular surgeon who performed the operation on the First Gentleman. The rarest, most difficult form to manage is the one that develops at the level of the aortic arch, type 1, the type suffered by Mr. Arroyo, Cariño explained. "It can compromise blood supply to vital organs such as the brain, gastrointestinal tract, kidneys, etc. Acute aortic arch dissection has a high mortality rate."

According to Cariño, the tear in Mr. Arroyo's aorta was "very extensive," extending from the root of the aorta near the heart to the level of the groin. The tear diverted blood flow from the inner cavity of the aorta to the "false cavity" caused by the tear. As a result, the false cavity ballooned and compressed the blood vessels supplying the First Gentleman's vital organs such as his intestines, heart, and right kidney. The compression of these vessels manifested in Mr. Arroyo as abdominal pain and severe back pain, Cariño explained.

The life-saving aneurysmectomy Cariño and his surgical team performed on the First Gentleman involved replacing the ascending aorta and aortic arch with an artificial graft sewn in place with a permanent suture. After repairing the aortic dissection, Cariño performed triple coronary artery bypass surgery on Mr. Arroyo.

"In the course of the aneurysmectomy, we discovered that three major arteries of the First Gentleman's heart were blocked, so we had to put grafts in those obstructed arteries to prevent a

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My advice to the first time mom? For fun and laughter and

watch the movie NINE MONTHS with Julianne Moore and Hugh Grant, with the hilarious Robin Williams as the Russian Ob-Gyn. Also checkout THE FATHER OF THE BRIDE 2 with Steve Martin.

#### Delay de Leon wrote....

Bench, your story regarding Ob-Gyn tickled me. Remember those daily surprise guizzes that we studied so hard for that we did not have to review Ob-Gyn anymore for the big Board Exam? Remember the greatest teaching institution, Labor Hospital, your first day, your hands trembling? By the end of the day, you delivered 50 babies, swamping the 25 bed Nursery. Remember you had to do morning IEs, so you could discharge the patients? Remember the precious 2 inches absorbable suture, which we had to stretch out for patients who couldn't afford to buy any? Remember the bet with the mother, boy or girl? A case of Coke for the winner. As they marched around the labor room adjoining the delivery suite with your instruction: Yell if you feel you want to urinate - sure enough, the cervix was fully effaced! Remember the light brown liquid we used to anesthetize the episiotomy- I wonder if it really worked, or was the pain of delivering the baby's head so intense, they didn't mind the episiotomy? Remember how useful the paper wrapping of the gloves were? Usually, it was the first clothing the baby wore enroute to the nursery. Did you deliver inside a taxicab, on the hallway as the head of the baby was already dangling out, or only the umbilical cord was left dangling? Remember our pregnant classmate-as she was urging a patient to bear down, she ended up asking the patient to move over

as she, too, went into labor? Remember, while standing in the JD bus going home after duty, you realized you had blood on your elbow? Remember a couple of times, you went home without your underwear, as it was soaking wet from the amniotic fluid shooting out when the baby arrived? Remember when one of our classmates was noticed by a supervising resident, with his hands moving, unusually, up and down and sideways. She asked: "what are you doing?" and almost fainted when she realized our classmate was doing a forceps delivery (only residents were allowed to do that).

I took up internal medicine residency in San Fernando, La Union and when I was on duty, I always had the highest number of deliveries for the week.

I stayed in internal medicine.

#### **Irene Manlapaz.** wrote:

Why do you think I did not become an Ob-Gyn?

I experienced all of those things you mentioned at Labor or Fabella Hospital.

I think we were required to have 50 deliveries from primigravidas for the 2 weeks of our rotation. On just my first day, I was on 24-hours duty, and I reached my quota- this included a twin delivery (both had head presentation, Thank God! I was panicking and looking for my consultant, in case it would be a breech delivery). When I got home the following day, all my muscles were shaking because of exhaustion and fatigue - I



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UERMMMC-MAAA,INC. & AFUSA, INC. 19™ ANNUAL REUNION AND CONVENTION JW MARRIOTT HOTEL ON PENNSYLVANIA AVENUE 1331 PENNSYLVANIA AVE.., N.W. WASHINGTON, DC 20004

1331 PENNSYLVANIA AVE., N.W. WASHINGTON, DC 20004
TEL. (202) 393 - 2000 / (800) 228-9290
AUGUST 2 - 5, 2007
CO-HOSTED BY: UERMMMC-MAAA,INC. - MARVA DC CHAPTER SOUVENIR PROGRAM ORDER FORM Print Name or Company (as you would like it to appear in the program): BACK COVER\_ 1,500.00 FRONT INSIDE COVER
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GOLD SPONSOR PAGE LIST SILVER SPONSOR PAGE LIST BRONZE SPONSOR PAGE LIST 250.00 100.00 ANGEL SPONSOR PAGE LIST FRIEND SPONSOR PAGE LIST UP TO \$49.00 FULL PAGE AD HALF PAGE AD ONE-FOURTH PAGE AD Enclosed is my camera ready AD/message (please enclose business card). Design an AD/message for me (Please add \$25 for art/layout work). In-Kind Donation of: Declared Value \$ CONTACT DR.PENNY MIRANDA — (818) 762-4169 OR MRS.LISA BANEZ — (818) PAYMENT METHOD: (PLEASE MAIL OR FAX THIS FORM WITH PAYMENT). \* VISA MC Card # \*For Check Payment: Make check payable to: <u>UERMMMC-MAAA, INC.</u>
C/O DR. ALBERT COO, TREASURER
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263 S. PICKETT STREET # 401, ALEXANDRIA, VA 22304 Tel. (H) 703-751-4389/(W)703-823-9570 Your donation may be tax deductible (please co The UERMMMC-MAAA, Inc. **Taxpayer ID # is 52 -1745846.**For more info: Dr. Ric Flores, Convention Chairman (410) 518-6683 / Email: <a href="mailto:ricflores@comcast.net">ricflores@comcast.net</a> (Note: Convention Information & Forms also available at: <a href="http://www.uermmarvadc.org">http://www.uermmarvadc.org</a>)
DEADLINE FOR SUBMISSION IS JULY 1, 2007
THANK YOU SO MUCH FOR YOUR SUPPORT!!!

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### UNIVERSITY OF THE EAST RAMON MAGSAYSAY MEMORIAL MEDICAL CENTER MEDICAL ALUMNI ASSOCIATION OF AMERICA. INC.

Incorporated on September 03, 1991 with Taxpayer I.D. Number: 52-1745846

#### UERMMMC-MAAA, Inc. and Alumni Foundation USA, Inc.

19<sup>th</sup> Annual Reunion and Convention JW Marriott Hotel on Pennsylvania Avenue

1331 Pennsylvania Ave., N.W. Washington, DC 20004 Tel: (800) 228-9290 / (202) 393-2000

AUGUST 2 – 5, 2007

Co- Hosted by: The UERMMMC-MAAA, Inc.- MARVA DC CHAPTER

#### **Hotel Reservation:** Group Code – <u>UERM</u> Group Rate: \$169/ night (single/double)

Suites at group rate – Contact Dr. Susan Suntay (312) 523-6824 Group room rates are honored 2 days before and after the event dates. Call: 1-(800) 228-9290 / (202) 393-2000

On-Line: <a href="www.ueruera&app=resvlink">www.ueruera&app=resvlink</a> then click on convention dates. Deadline for Hotel Group Rate: July 09, 2007 (No Extension)

<u>REGISTRATION FEES:</u> FULL PACKAGE FEES Includes: CME, Registration & Membership Fees, Friday & Sat. Continental Breakfast, Dr. Jose Cuyegkeng Luncheon, Thursday, Friday and Saturday Gala (3)Dinner/Dance.

ALL PRICES ARE PER PERSON (CME + Package Rate). <u>OnSite Registration up to Fri.</u> 8/3/07 at 1 pm ONLY. OnSite Registration Fees – ADD \$100 for each event and category.

POSTMARKED BY: (7/1/07)	Tuly 1/07	After July 1//07	On Site	
Lifetime Members	\$ 725	\$ 775	\$ 875	
Regular Members (2007 dues unpaid)	\$ 850	\$ 900	\$ 950	
Retired Alumni (65 years or older)	\$ 475	\$ 500	\$ 600	
Residents/ Fellows / Non-Practicing Physicians	\$ 475	\$ 500	\$ 600	
Philippines Resident Alumni( Passport required	\$350	\$ 350	\$ 350	
*Note – All above Full Package Rates can not	be alter	ed.		
<b>INDIVIDUAL FEES:</b>				
Continental Breakfast per day	\$ 35	\$ 50	\$ 135	
Dr. Jose Cuyegkeng Luncheon	\$ 65	\$ 90	\$ 165	
Thursday or Friday Dinner/Dance	\$ 90	per night \$ 140	\$ 190	
Saturday Gala (Per table of 10 gets \$5 off/person	n)\$ 150 p	er person \$ 200	\$ 300	
CME Certification	\$ 400 p	er person	\$ 500	
Kids Dinners (Under age 11)with Gala + 3 days	= \$ 150	$^{\prime} 2  \text{days} = \$  100  /  1$	Gala=\$55	
<b>ALUMNI MEMBERSHIP FEES:</b>				
LIFETIME - One time fee: \$ 500 per person (	Optional	)		
Annual Membership fee: \$ 50 per person (	Required	1)		
REGISTRATION FEE: \$ 25 per person (	Required	1)		
<b>OPTIONAL FEES:</b>				
<b>GOLF Tournament</b> : Aug. 2/07 GOLF Tourn	ament	(\$170.00)/golfer	X	\$
Contact: Rene' Suntay: (937)631-6923 / Email	: rjsuntay	1@yahoo.com		
		GRAND	TOTAL -	

#### Please return this form with the Registration Form and Payment enclosed.

- Make check payable to: <u>UERMMMC-MAAA, Inc.</u> Mail to: Irene Igual, M.D.
  - P.O. Box 2153, Bedford Park, IL 60499-2153
- For more information call, **Dr.Sonia Rico-Todd**, Executive Director- Tel.(574) 529-1205 Email:<a href="mailtosize:sricotodd77@yahoo.com">sricotodd77@yahoo.com</a> or **Dr. Susan P. Suntay**, National Convention Commissioner Tel: (312) 846-7543 or New Cell# (312) 523-6824 / Email: <a href="mailtosize:spsuntay@yahoo.com">spsuntay@yahoo.com</a> **Dr. Ric Flores**, Convention Chairman -Tel.# (410) 608-4681 Email: <a href="mailtosize:ricflores@comcast.net">ricflores@comcast.net</a>
- \* UERMMMC-MAAA.INC. Taxpayer ID # 52-1745846. Consult with your accountant.
- \* More Convention Information & Forms are available at: http://www.uermmarvadc.org



The JW Marriott Washington DC



Marriott Lobby



larriott Ballroom



Aarrintt Room

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heart attack and improve Mr. Arroyo's heart function as well," treated the First Gentleman. "They have done an excellent job, and there is really no need for my assistance in managing Mr.

The need for a high index of suspicion complemented by state-of-the-art diagnostic imaging equipment available at SLMC enabled the medical team to establish a definitive diagnosis of the First Gentleman's condition and the surgical team to perform the emergency operation. Close monitoring and support of all the First Gentleman's vital organs are very important. The different specialists in Mr. Arroyo's medical team are doing their best to maintain and improve the functions of his vital organs.

"The First Gentleman must adhere strictly to a healthy lifestyle, go for regular medical check-ups, and undergo cardiac rehabilitation as soon as he recovers from his operation," Sibulo stressed.

Aneurysms, particularly aortic dissection, are usually diagnosed too late. Dr. Cesar Recto II, president of the Philippine Heart Association and a cardiologist at St. Luke's Medical Center, described aortic dissection as a "very difficult case." "Cardiovascular disease is the leading cause of death in the Philippines and it can hit anyone at anytime without warning," Recto said. "It can mimic the symptoms of other illnesses like gastrointestinal diseases or can remain asymptomatic and be even more treacherous. The best remedy for cardiovascular disease is still prevention."

Dr. Alex Yap, the Filipino cardiovascular surgeon who arrived from California as a guest doctor of the First Family, commended the excellence of the SLMC medical and surgical teams that

treated the First Gentleman. "They have done an excellent job, and there is really no need for my assistance in managing Mr. Arroyo's condition. In fact, the First Gentleman is recovering faster compared to most patients I have seen that have a similar condition."

We salute the expertise and dedication of the First Gentleman's multidisciplinary medical and surgical teams: Dr. Joven Cuanang (neurologist and St. Luke's medical director), Dr. Rommel Cariño (cardiovascular surgeon), Dr. Antonio Sibulo Jr. (director, St. Luke's Heart Institute), Dr. Romeo Saavedra (cardiologist), Dr. Jose Nicanor Cruz (interventional cardiologist), Dr. Nancy Chio (cardiac intensivist), Dr. Myra Dolor (cardiac intensivist), Dr. Gary Lopez (a relative and personal cardiologist of Mr. Arroyo), Dr. Jonnel Lim (chair, Department of Anesthesiology), Dr. Dahlia Estrera (anesthesiologist), Dr. Ruth Divinagracia (pulmonary intensivist), Dr. Oscar Naidas (nephrologist and chair, Department of Medicine), Dr. Dennis Natino (hematologist), Dr. Michael Villa (endocrinologist), Dr. Adrian Peña (infectious disease specialist), Dr. Manuel Mariano (neurosurgeon and director, International Institute for Neurosciences), Dr. Abdias Aquino (neurologist).

Editor's Note: This article was originally published in the April 13, 2007 issue of the Philippine Star, a Manila daily newspaper. The author is the main attending physician of First Gentleman Jose Miguel Arroyo. She is a regular contributor to the Star's science and health page. Mr. Arroyo was discharged home to Malacanang in 22 days.

### **Young UERM Alumni Travel Grand Award**

The UERMMMC Alumni Association, MARVADC Chapter is awarding \$500 travel grants to two (2) young alumni to attend the 19th Annual UERM Alumni Reunion and convention in Washington DC on August 2-5, 2007. The intention of these travel grants is to encourage young UERM medical alumni and medical school students doing their clinical rotations in the USA to participate in our annual alumni activities and share their clinical/research studies during the CME portion of the convention.

Eligibility criteria:

- He/she must be an alumnus of the University of the East Ramon Magsaysay Memorial Medical Center (UERMMMC). 3rd/4th year medical students doing his/her clinical rotations in the USA may also apply.
- 2. The alumnus must be in training (clinical residency, clinical fellowship, pre-doctoral or postdoctoral research fellowship) in the USA.
- 3. The alumnus is willing to submit an abstract with the application and willing to do a 20 minute oral presentation of his/her clinical or research work during the CME portion of the Convention.

Applications will be reviewed by a committee. Please submit your applications as an attachment to Dr. Nathalie Bernabe-Quion, Chairman, Young Alumni Outreach Committee at <a href="mailto:natharman">natharman</a> (Please submit your applications as an attachment to Dr. Nathalie Bernabe-Quion, Chairman, Young Alumni Outreach Committee at <a href="mailto:natharman">natharman</a> (Please submit your applications as an attachment to Dr. Nathalie Bernabe-Quion, Chairman, Young Alumni Outreach Committee at <a href="mailto:natharman">natharman</a> (Please submit your applications as an attachment to Dr. Nathalie Bernabe-Quion, Chairman, Young Alumni Outreach Committee at <a href="mailto:natharman">natharman</a> (Please submit your applications as an attachment to Dr. Nathalie Bernabe-Quion, Chairman, Young Alumni Outreach Committee at <a href="mailto:natharman">natharman</a> (Please submit your applications as an attachment to Dr. Nathalie Bernabe-Quion, Chairman, Young Alumni Outreach Committee at <a href="mailto:natharman">natharman</a> (Please submit your applications) (Please submi

Travel	<b>Grant Award Application Form</b>
Name:	
Address:	
	nation:
Cell Phone #:	
E-mail addres	s:
Training:	
Specialty:	
Year in	rtraining: Internship PGY2PGY3Clinical Fellow
	Pre-doctoral Research Fellow Post-doctoral Research Fellow
-	presentation topic (20 minute presentation, <b>t abstract</b> with the application):

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## **Dra. Casibang's Diary**



By Dr. Isabelita B. Casibang

#### Wednesday, Nov. 29, 2006

Met with Dean Paredes briefly to hand her the letter of our treasurer, Dr. Gilo, and a check that was not brought by the Chairman when he left for the Philippines. We agreed to meet again the following day after our short niceties, to go through the new formatted Foundation forms for requesting grants, reporting back, etc. Later, I met with Drs. Yanez and Dr. Soto and they brought me to tour the hospital. There were a lot of changes and improvements since our class Jubilee celebration, but I also noted that there is a degree of inadequacy in the maintenance of the building. There is noticeable congestion that needed a lot of management to bring about a good flow of traffic. Later that afternoon, I met with a few more heads of the clinical departments in the cafeteria for an informal and very informative meeting. I was asked about the difference between the Foundation and the National Organization for which I explained the basic differences between the two as per IRS classification and function. I also explained that AFUSA, since it is under US laws, the IRS that granted it the 501(C) 3 designation had become stricter in documentation since 9/11 and the adoption of "Anti-Terrorist Laws of the US. I also explained further that by adhering to these IRS requirements we could be assured that the Foundation can outlast all its officers and overcome any IRS scrutiny in the present and into the distant future. Thus, by doing so, the Foundation will be able to help many more students, teachers', patients, library, and even future needs of their departments for as long as there is a project created or established for such needs. After hearing this explanation, someone commented that this information is 'very eye opening since we not pay particular attention to this thing much. It is good that you explained the whys and wherefores of documentation to us'. There were questions that were asked on different types of donations and also donors, etc, which I have answered to their satisfaction, as representative of the Foundation.

During this informal meeting, a few said that there are not much interest in the DAP project, or that they have 'lukewarm interest' in it. They stated that it might not really afford to generate enough patients to learn from for each clinical department there is in the hospital. In return, after listening to what they have to say or ideas, I told them to form a group and pick a representative to attend the Convention and speak before the alumni on what they have to say, for it is only the general assembly that can decide if changes to the DAP project can be made.

As a member of the host chapter, I extended a 'blanket invitation' to the heads of the clinical departments to attend the next convention in Washington, DC

#### Thursday, Nov. 30, 2006

Went early to the Medical College to meet with Dr. Yanez so that I can also meet student leaders and in preparation to meet Mr. P.O. Domingo, the Chairman of the Board of the Medical School. On the way, I inadvertently met him going to his scheduled Board meeting; I introduced myself and named my position in the Foundation. He said, 'Yes we have a meeting at 1:00 o'clock'. We had cordial niceties, and then later he warmed up when I spoke to him in our dialect. After which he said, 'You do not have to wait for our

scheduled meeting, I want you to come and join us in our Board meeting'. There, I was introduced and met the different members of the Board. During the meeting, I learned about the different planned improvements and rebuilding of two to three buildings that were spearheaded by Mr. Domingo. I also joined in the discussion of the 'tagline' to be used by the school in their 50th Anniversary celebration.

After the meeting, I was asked by Mr. Domingo as regards their meeting for which I said 'very informative and interesting'. I then extended my invitation to the Chairman to attend the 2007 Convention in Washington, D. C. His repartee was, 'Hah, you people want to grill me?' For this I said, 'Mr. Domingo, that was never in my mind. I invited you to come so you can witness how the US alumni work hard to keep the spirit of the school where we got our titles. How we perform on getting different donors and donations to help our Alma Mater. If you will attend and will not want to talk before the assembly, then we will honor your wishes. You are also invited to attend the Foundation's meeting and speak before our group. If you don't want to answer questions, then, we will just listen to what you have done and planned for the school'. With this, Mr. Domingo said, 'send me your invitation and I'll think about coming'.

After the Board meeting, I also sat down with Dr. Sanchez as he asked for some assistance in seeking recommendation from the US alumni for what his committee was assigned for- that is searching for 50 Outstanding Alumni since the inception of the school of medicine. I asked him for some specific criteria, for which he countered that

"Our committee will not state the criteria for the selection of the 50 outstanding alumni, so that recommendations will not be biased". He only asked that "the recommended alumni must come from varied practices, community, business or political achievements". I assured him that I would relay this request to chapter leaders or to the National Organization's leadership as he requested.

After this short meeting with Dr. Sanchez, I proceeded to my scheduled meeting with the Dean and Dr. Divinagracia, the President of the Medical School. Together, we reviewed the revised forms I had given the Dean and reiterated that the forms must be used by all who will ask for grants, awards respond etc. That each party must have to retain their individual copy for record keeping and that a copy of any form they will use must be submitted to the treasurer of the Foundation for recording, attestation and archiving and for completion of the IRS requirements of all charitable organizations in the U.S.

Again, I assured them both that if there is a degree of slowness in the part of a few members of the BOT of AFUSA to release or even approve some proposed projects, that they should not interpret this as anti project or being obstructionist, but just making sure that such procedures follow the set policy in place in the Foundation, and by following proper procedurals it sometimes make such process slow. I also explained that by doing a procedure correctly the first time, would be to the advantage of the Foundation, the school and the recipient in the long haul. I also stated that such correct

continued on page 7

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#### UERMMMC-MAAA, Inc. and Alumni Foundation USA, Inc.

19<sup>th</sup> Annual Reunion and Convention JW Marriott on Pennsylvania Avenue 1331 Pennsylvania Ave., N.W. Wshington, DC 20004 Tel: (800) 228-9290 / (202) 393-2000 AUGUST 2-5, 2007

Co-Hosted by: UERMMMC-MAAA, Inc. –MARVA DC CHAPTER

#### **REGISTRATION & PAYMENT FORM**

#### REGISTRATION - (Early Registration Deadline: July 1, 2007).

ATTENDEE(S) INFORMATION: (Please print with blue or black ink).

Name:			
Last	First Spouse's Year of Graduation:	N	1iddle/Maiden Name
Spouse's Name:	Business	/Profession: _	
Home Address:		Zip (	Code:
Phone: Daytime -	Evening:		
Fax:	Email Address:		
Specialty:	Email Address: Chapter Membership:		
Guest (s) and/or Children's Nar	me(s) (for individual events):		
GOLF Registration:			
Name(s):		Han	dicap:
Note: Irene R. Igual, M.D., Treas	surer - Cell: (562) 569-3250 / Home: (562)	) 941-3153	
Convention Fees Total:	Donation Amount :	= Grand	Total :
Circle: Visa / Mastercard #	Exp	o. Date:	ID Code:
Print Name:	Cardholder's Nai	me :	
Signature:	Date Sign	ned:	
	payer ID # 52-1745846. Check with your A		
	No refunds after July 1, 2007 / (50% refunds		
	lores, Convention Chairman – Tel.# (410) 60 Tel. # (574)529-1205 Email: <u>sricotodd77@y</u>		
	ntion Commissioner - Tel/Fax: (312) 846-7:		
	rms go to: http://www.uermmarvadc.org		

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UERMMMC-MAAA, Inc. and Alumni Foundation USA, Inc 19<sup>th</sup> Annual Reunion and Convention & 50<sup>th</sup> Year Anniversary Celebration of the UERM Medical Center

Co-Hosted by: UERMMMC-MAAA, Inc.-MARVA DC CHAPTER
JW Marriott Hotel – 1331 Pennsylvania Ave. NW Washington DC 20004
Tel. (800) 228 -9290 / (202) 393- 2000

#### **SCHEDULE OF EVENTS**

August 2, 2007	- THURSDAY:
7 am $-4:00$ pn	Golf Tournament(6:00 am –Assembly at Hotel Lobby)
11 am – 5:00 pn	n <b>Registration</b> (Capitol Registration Desk – Ball Room Area)
12 noon − 5 pn	
	*The Foundation Meeting is open to the membership. Lunch tickets required.
10 am − 5:00 pr	m EXHIBITS & Alliance Silent Auction(Salon E)
6 pm - 12:01 am	WELCOME and FELLOWSHIP NIGHT(Salon III & IV Ballroom)
	Dinner/Dance & Fun ( Dinner tickets required) ATTIRE – Nice Casuals
August 3, 2007	- FRIDAY:
7 am - 1:00 pm	LAST DAY OF REGISTRATION( Capitol Registration Desk )
7 am - 4:00 pm	<b>EXHIBITS &amp; Alliance Silent Auction</b> (Ballroom Foyer & Salon E)
7 am - 9:00 am	Continental Breakfast (For CME Attendees – tickets required)(Salon II)
7:30 - 4:30 pm	CME - Category I "Current Issues in the Health of Baby Boomers"(Salon II)
12 noon - 1 pm	
	Keynote Speaker: Dr.Joven Cuanang '62 - "Is the Philippines Ready for Medical Tourism?"
	Moderator: Dr.Benjamin Rigor '62 - Professor Emeritus , University of Louisville, KY
6 pm– 12:01 am	
	(Celebrating Jubilarians : Class '62, '67, '72, '77, '82,'87, '92,'97 & 2002)
	ALL CLASSES WELCOME (Pre-registration / Reservations Required)
	DINNER/DANCE & FUN (Tickets required) ATTIRE: "Roaring 20s"
A 4 2007	* Join the Dance Contest. Music by the JM Factor Band.
7 am- 8:30 am	<u>' - SATURDAY:</u> Continental Breakfast( Salon II )
	EXHIBITS and Alliance Auction(Ballroom Foyer & Salon E)
8 am-12:01 pm 8 am-11:30 am	GENERAL MEETING (Salon II)
8 am-11:30 am	
11 am 12 maan	*ALL Alumni Members are requested to attend.  Medical School Undetes & Open Forum Dean College of Medicine (Scientify)
11 am-12 noon	Medical School Updates & Open Forum - Dean College of Medicine (Salon II)
12 noon - 6 pm	Lunch (on your own) / FREE TIME "Legacy Keepers" Founders Luncheon (Salon I)
!2 : 05–1:30pm	UERMMMC-MAAA, Inc. Executive Council Meeting (Salon F)
2 pm - 4:00 pm	
6 pm -12:01 am	ATTIRE: FORMAL / BARONG/ BLACK TIE (Optional) Tickets required.
August 5, 2007	` <b>!</b>
	Sunday Mass (TBA)(Salon G Ballroom)
	ECK-OUT TIME (THANKS & God bless your trips!)
12 NOOH - CHE	CK-OUT THAT (THAINS & OUR DIESS YOUR HIPS:)

Note: Please plan to attend the <u>20<sup>th</sup> Annual Convention & Reunion (July 3-6, 2008)</u> at The Marriott San Francisco Hotel – 55 Fourth Street, San Francisco, CA 94103(Group Rate - \$139/night).

For more information: Dr.Susan Suntay'77, National Convention Commissioner: <a href="mailto:spsuntaymd@gmail.com">spsuntaymd@gmail.com</a> / (312) 523-6824 or Dr. Ric Flores '79, Convention Chairman: <a href="mailto:ricflores@comcast.net">ricflores@comcast.net</a> / (410) 608 – 4681 For more convention information go to: <a href="mailto:http://www.uermmarvadc.org">http://www.uermmarvadc.org</a>

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procedures would take the Foundation beyond the distant future. One comment that was made was "I guess, we must be really mindful of the Rules and Regulations on this side (the Philippines)". Before I left for another meeting, I requested the Dean to "please endorse the documents to the next Dean and to place an announcements that such documents are available (from the dean's office) for others to use". The Dean then told me that she would set up another meeting with me, for which I said "please do" and thanked Dean Paredes and President, Dr. Divinagracia for meeting with me and for their patience in listening to what I had to say regarding the Foundation's needs and requirements.

I then met Dr. Yanez who arranged my meeting with the treasurer of the Medical School. He also asked that I meet with a few student leaders of some school organization, which I did. He then accompanied me to the office of the school treasurer where we parted ways.

My meeting with the school treasurer was brief but was very enlightening - she answered questions on how the US alumni donations are being accounted for. My question was "how do you do the accounting of the donations coming from the US? Is it admixed with the school general funds? Can you please enlighten our group on the process of how these monies are being accounted for?"

The school treasurer stated -'I would like to tell and assure you and the rest of members of AFUSA and the National Organization that, all donations coming from the US are accounted for separately and not admixed with the monies (or proceeds) of the College of Medicine. From the beginning, upon the receipt of the donations, they are deposited and all requests for disbursements must also be submitted for the release of the grants, monies, etc. All releases are carefully logged and recorded by the assigned personnel and the office of the treasurer keeps such records. The only thing that was not done previously is place it or mention such donations in the school newsletter'. According to her, for 2006, this omission will be corrected and henceforth such reports will be included in the yearly Newsletter. I requested a copy of this Newsletter, which I said I would send to the Foundation's treasurer, Dr. Gilo. She also made a copy of an audited accounting report of US donations that she gave as well as the copy of the Newsletter for 2006. With this I thanked her for her time in meeting with me and in clarifying the question that I asked. Her explanations will be conveyed to members of the Foundation well as to the leadership of the National Organization. In return, she said, "Do call me if you have anymore question as regards our accounting."

#### Wednesday, Dec. 6, 2006

I went to the Medical School to join in the Christmas party of the members of the Basic Sciences instructors on the invitation of Dean Paredes, which was held in the Physiology laboratory. Here, I met several of the instructors who attended plus a few former classmates teaching in the basic sciences. It was during this party that their much awaited salary increase was announced, thus making the occasion a true happy celebration.

I left the party to meet with some leaders and members of a few school organizations in the Center. Inquiries as regards the Foundation were asked and in return answered them to their satisfaction. I informed them that the proper forms could be requested from the Dean's office. As always, I explained to them the Foundation's strict compliance to documentation and proper

procedures in such requests for grants in any projects. I also met a few past scholar grantees of the Foundation.

In the evening I met with the Dean for a dinner out together with Dr. Sanchez and another staffmember. It was a very fruitful 'tete a tete' as regards many topics that were taken discussed but most especially as regards the 50th celebration of the Medical Center. Again Dr. Sanchez reminded me to give him the names of the National Organization's officers of which I promised to e-mail him back and again assured him that I will inform the chapter leaders of his request of outstanding alumni here in the US. It was also here I learned that this would be the last year of Dr.Paredes as the Dean. We called it a night around 10 PM.

#### Tuesday, Dec. 19, 2006

With a previous invitation of the members of the heads of the clinical departments as well as Dean Paredes, I attended the joint Christmas party of the Medical, Nursing and the Physical Therapy graduates/alumni, held at the UERM gymnasium. Here, I met several other instructors and graduates as well as a few residents. I also met other alumni in the Philippines who were present in the affair. I distributed invitations from the host chapter MARVADC for the August Convention to the few alumni present.

Later that night I was invited to attend a joint Fraternity/Sorority Christmas party in a private home. Here I met many more medical students and some Foundation scholars. They showed so much interest in the activities of the US National Organization as well as the Foundation's. Again I explained the basic differences of the two organizations and what it can offer the students. I encouraged them to do well in their studies and apply for scholarships and to apply for scholarship grants whenever qualified. I left information with the group on how to get in touch with both organizations and called it a night.

#### Wednesday, Dec. 20, 2006

Met briefly with the Dean to again review the wording of the scholarship Memorandum of Agreement (MOA) - the Medical College lawyer had some questions. I pointed out where to find the attachments for the MOA. I also reviewed the suggested revision of wordings and requirements of the lawyer, and I agreed with their changes. The Dean said that the school's attorney would again look at it and then finalize the MOA for final signatures. I agreed with the plan and said that she can either fax it to me or mail if for signature. Our meeting ended in mutual understanding as regards the document

#### **Thursday, Dec. 21, 2006**

Attended the EDSA Shangri-La Gala Night of the Philippine Alumni Association, where I met many classmates that I have not seen for years. Dr. Yanez also introduced me to all the members of the Board of Trustees of UE and UERM who attended the affair. When I was re-introduced to Chairman P.O. Domingo, he said "yes, we have met' and started speaking in our native tongue. Later that night I reminded him that I was personally inviting him to attend the August Convention and he said 'send me the invitation and I'll see." With this we shook hands and said goodbyes in our dialect. I stayed around for another hour to be with my classmates then called it a night.

Editor's Note: Dra Isabelita Barnachea Casibang is the President of the Alumni Foundation of the USA (AFUSA).



### Me, an OB-GYN? Oh, No!

By Lamberto Tan, M.D.

Dr Pineda, Dr. Esguerra, Dra. conceived. Alikpala...wonderful Professors all. I fondly remember...their humor, dedication, their influence, their friendship...their beauty in teaching

us, fledgling young future healers and dreamers...the differences between Adam and Eve. I will always treasure in my heart. I think it was Dr Pineda who asked this question surely not to be forgotten...

"What's the definition of Menstruation?"

Everyone gave an appropriate, acceptable definition: the woman's monthly period...oh, that's when they have the up/down moodiness...the Red Sea...but do you remember the correct answer?

"It's the crying of the frustrated uterus!"

Dr Pineda lecturing us on...baby boy? baby girl...how can one predict? Is it the positions during lovemaking? After a heated encounter, the way she arose from the bed? Right side- boy? Left side- girl? Or the way the woman looks during pregnancy? Or how she carries it? Or the size of her tummy? And maybe, a particular craving for certain food? Most women know when they are ovulating. If you want a boy, she will say,

"Tonight, honey!" putting on her best sexy lingerie and the favorite perfume she knows pretty well will make you excited, wild and crazy... and the Professor showed us the electrical plug as the Male, and the socket as the Female...here's why...(I just hope I remember it...otherwise, help and correct me or just make a big *Halakhak!*).

The XY chromosome is male, the XX is female. The Y type runs faster than the X

type...you know...the Y pleasure Principle (Dr Zaguirre's influence)..."I'm coming!" the X type, as usual will take her time, no hurry, honey, "I'll be there!"...and wala! Who arrives first in the ovarian commune? The Y bumps into the eagerly waiting eggs and a boy is conceived. However, if there are no eggs waiting there...the Y utters. "Oh, no!" He dies or maybe fades or melts away due to disappointment and exhaustion. Then, here comes the X type with her sexy walk down the Fallopian Way, the woman ovulated more than 24 hours and surprise, surprise...a girl gets conceived... by statistics, there are more girls than boys...

The moral of this story: there's always more pleasure when you take your time.

Remember this lecture? In the rural areas, there's a higher birth rate, particularly in those who reside by the railroad tracks, because the couples, especially young newlyweds get awakened every now and then...besides, they go to bed early with not much to do and no electricity...and with the candles burning bright, it always becomes



Labor (now Quirino) Hospital

very romantic every night. Have you ever wondered why most women deliver on unholy hours? Say between 2-5 in the morning? My gut feeling tells me that the babies are usually produced

during this time because they want to come out on the exact they are

I will always remember Dr Esguerra as a very fascinating, excellent Ob-Gyn...

he was one of my Wedding Sponsors in 1974, and delivered my first child, Kenny, along with the late Dr Martoni Valera as the anesthesiologist and Dra Ding Yoro as the Pediatrician. He also tried to teach us the magical beauty of hypnosis for delivering babies. Once, he invited us to watch a woman he hypnotized, simulating birth...the woman experiencing the future as if she was pregnant, having labor pains and delivering the baby...the woman who was in deep trance was talking about her being brought to the hospital, the name of the hospital, the room number she was in, the labor pains, contractions and the baby being born...the sex of the baby...Amazing! These were our Professors, stimulating further our interest and curious mind and thirst for knowledge and learning.

So...why did I not become an Ob-Gyn? It's not that I don't like women...no...don't you ever get that impression...the ever popular UERMMMC, God-bless this Great School, trained us very well in the art of delivering babies, and I am very proud of it. We had to deliver maybe 30+ (?) babies at the UERM Hospital and then got assigned outside of the school, or to the rural areas. Well, just my luck, I was assigned to, believe it or not, just the name itself tells you "you're gonna get busy, pal "-Labor Hospital, Quezon City.

On duty...me and a nurse...on the training ground. I always get fascinated by

different women's personalities/behavior while delivering and having contractions.

Of course, I always liked the quiet ones... they were always nice...they were just soooo excited they were having a baby...and later would offer you their favorite homemade food, or live chickens. There were the wild ones: noisy, loud, shouting,

cursing...saying a lot of obscene/bad things but thank God, they were

directed at the poor husband... not at me. There were the sudden deliveries, no warning and the prolonged labor pains...and I was there by myself. The nurse always following my directions/orders...me acting as if I knew everything.

So, there I was...sitting on a stool for around 2-5 unholy hours ,watching maybe 2 expectant mothers on stirrups...my eyes roving, waiting alert to which head would come our first, while another couple or more moms- to-be were walking around in the waiting room having their initial labor pains...thank God, I was trained well and immediately went into action with much gusto and efficiency and became good at it, especially the episiotomy...the suturing, the cutting of the umbilical cord...and holding the precious baby(ies) in my hands (sometimes I do wonder at that time if they would still remember me - first impression or the so-called "imprinting" as they opened their eyes?). I remember the smell of the room, the sound of the baby, be it tiny or a loud cry...me, always making a tender slap in their behinds or butts...because liking psychiatry at that time, I got the feeling that if you slapped the baby hard, they would tend to become grouchy and unsmiling when they grew up.

So, there I was...sitting on the stool, usually around 2-5 in the morning, watching with my roving ever-vigilant eyes saving to myself..."I'm not going to be an Ob-Gyn...I'm not going to be an Ob-Gyn...I'm not going to be an Ob-Gyn"....It's like saying the three Hail Mary's...and an Amen...

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## Strengths and Weaknesses of International Medical Graduates: A Chair's Perspecitve

By Barbara L. Schuster, M.D., MACP

The United States is a country of immigrants. The vitality and spirit brought by new Americans add texture to daily life. The diversity of cultures creates complexity and challenge for those in healthcare. International medical graduates (IMGs) bring a wealth of knowledge of disease not often seen in the United States in addition to knowledge of the belief systems of the cultures from which they come. Belief systems have significant impact on health and disease. Having diversity within the healthcare team allows for improved care delivery within a multicultural environment. The challenges of IMGs in postgraduate programs include: 1) biased perceptions from medical students, staff, attending physicians, and patients; 2) communication skills of the international physician; and 3) professional and social acculturation.

In general, patients are more comfortable with caretakers who are the same gender, race, and culture. In most areas of the United States, the international medical graduate faces an additional hurdle in building the patient-physician relationship because of cultural bias. "Different" is often translated as "inferior." A current guide to residency in the United States clearly warns U.S. medical students to consider the number of international graduates in a program when making their own choices. It implies that a program with significant numbers of international graduates is inferior. Because of this bias, residency programs without IMGs are wary about accepting international graduates, and programs with a majority of IMGs have more difficulty recruiting U.S. graduates. In both cases, perceptions of the quality of the program become more powerful than the reality. These perceptions pervade both academic and community faculty and may obstruct the growth and improvement of residency programs.

The ability to communicate goes beyond the ability to speak and write English. Accents, slang terminology, street language, and idioms all influence the communication between physician and patients as well as hospital staff. Humor differs markedly between cultures, and language is often the medium. Non-verbal communication through body language is a more sophisticated vet powerful medium that obstructs or facilitates patientphysician interaction. The extent to which the international graduate can vary his/her own verbal and non-verbal responses, is accepting of feedback about his/her communication skills, and can accept patient differences, the more likely the international physician will be successful in transitioning to a comfortable working relationship.

The international educational system also differs markedly from that in the United States. In many countries, the hierarchical system of instruction is reflected in less questioning of the professors by learners vs. the more "team" learning system in the United States. Transitioning to different educational expectations requires time, patience, and understanding of both the learners and the teachers. Interacting with medical students is one of the hallmarks of graduate education. Helping international graduates to understand the undergraduate medical education system and how to most appropriately interact with students is an additional challenge. U.S. medical students can facilitate the acculturation of the international graduate, if the international graduate accepts the "give and take" style of education.

Academic physician leadership has the responsibility of setting standards for the education of students and residents and the care of patients. The challenge is to help each young physician to grow in all skill areas necessary to be an excellent physician. Educating international graduates who have chosen to immigrate to the United States or to return home after advanced training to upgrade the healthcare in their respective countries, requires leaders who understand their own biases, accept the responsibility for advancing medical care within the growing multicultural environment of the United States, and find interacting with learners most exhilarating.

Editor's Note: Dr. Barbara L. Schuster is Professor and Chair of the Department of Medicine, Wright State University, Dayton, Ohio. This article was posted on the American College of Physicians website in 2000.

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mention of our dedicated classmates, who in one way or another made the whole celebration a success, US based were: Tess Lev, Nat Bautista, Agnes Montano, Helen Sy-Chu, Sonia Macariola, Ed Baltazar, Emy Co, Manny Tayag, Benjie Lim, Sharon Pascua-Bravo, who have unselfishly shared her thoughts about this event and our true fairy godmother Cynn Lim- Montoya. Philippines based are: Romarico Tongos, Cheli Pacis-Jacoba, Nora Rodriguez-Cortez, Tootchie Joaquin, Rose Patricio-Anastacio and Portia Valles- Lupo. A bond of true friendship has been created among the most active and busiest group email in the whole universe. A friendship that will be cherished and continually nurtured!!!

Congratulations and more power, health and wealth to class '81!! To our Alma Mater, thank you for being there for 50 years, standing strong and full of hope. Thank you for molding us and many more future doctors from you with pride, honor and dignity. Mabuhay UERM Medical Center!! Mabuhay Class '81.

Thank You and God Bless!!

### **Coming to America: International Medical Graduates in the United States**

By Graham T. McMahon, M.B., B.Ch.

hey can't believe that I round at 6:30 a.m., that I am available to my patients 24 hours a day, or that I don't get paid overtime for long hours. My medical school classmates who continue to work in Ireland live a different life from mine — one that I have left behind. But I am not alone. International medical graduates account for a quarter of the 853,187 physicians in the United States, an increase of 160 percent since 1975. Immigrant physicians also account for 27 percent of the country's 96,937 residents and fellows, having migrated in search of training and career opportunities that are unavailable in their home countries.

An examination of the U.S. physician workforce suggests that there is an everincreasing dependence on international medical graduates. Although the number of physicians in the United States has increased at twice the rate of population growth in the past 10 years, many urban and rural communities continue to have shortages of physicians. Recently, the federal Council on Graduate Medical Education, in response to the findings of a study that it commissioned, acknowledged that the country appeared to be on the verge of a serious shortage of physicians and endorsed a recommendation that medical schools and training programs increase their enrollments over the next decade to help offset a future shortfall of doctors.<sup>2</sup> Primary care practices are likely to be the hardest hit; perceived challenges to a high quality of life and decreasing reimbursement rates for office visits have eroded the attractiveness of primary care specialties to graduates of U.S. medical schools. International medical graduates have consistently provided a safety net for such programs, hospitals, and areas of shortage. Some 40 percent of primary care programs in the United States are already dependent on immigrant physicians,<sup>2</sup> and a full two thirds of international graduates serve in hospitals that provide a disproportionate share of care for the poor in this country.<sup>2</sup>

The transition to life in the United States can be fraught with unexpected challenges for doctors who have trained abroad. Professional and doctor-patient relationships can be distinctly different from what they are used to. Physicians who have practiced abroad report that U.S. patients have higher expectations of their doctors' availability and the services to be provided. Patients here almost universally receive their hospital care in the privacy of a one-bed or two-bed room, whereas hospitals in Europe and Asia feature communal wards with their resultant microcommunities of nurses, aides, and doctors. Immigrant physicians can be disoriented by their different role within the health care team. Schooling in the United States strongly emphasizes evidence-based practice and the use of technology over personal style and traditional approaches, and nonphysician health care professionals have more responsibility in the U.S. system than elsewhere. Add in the need to learn hundreds of new brand names and laboratory values and to adjust to differently formatted medical notes, and it is hardly surprising that these adaptive challenges can be overwhelming for the newly immigrated physician.

Both physicians and their patients can find language barriers frustrating. Despite the requirement of the Educational Commission for Foreign Medical Graduates (ECFMG) for the demonstration of competence in English, only physicians with previous immersion among English speakers can reach the level of fluency that is typically required for discussions about medical decisions. When patients report what may be genuine problems with doctor–patient communication, their complaints can be interpreted, rightly or wrongly, as evidence of intolerance or racism and can strike a further blow to the self-esteem of immigrants who are already struggling against suspicion.

International physicians contribute much more than medical manpower and have consistently infused every part of the United States with new ideas and skills that have been critical to the nation's economic, scientific, and cultural growth. In addition to being overrepresented in the groups that care for the country's most isolated and vulnerable citizens, international medical graduates contribute enormously to the country's research endeavors.<sup>4</sup> Many of the world's most talented graduates seek U.S. medical positions out of a desire to engage in constructive medical research, for which few opportunities exist in their home nations. Despite

this ambition, it is more difficult for them than for U.S.-born graduates to eke out a research career, since noncitizens are ineligible for training grants from the National Institutes of Health (NIH) — a particular challenge, since a large proportion of research fellowships are funded by such grants.

For many international medical graduates, gaining access to training in the United States is an enormous challenge. No applicant is spared the stress of the examinations, interviews, and licensing procedures or the tumult of adaptation to a new culture, often undertaken without family and friends. There is no reciprocal recognition of training between the United States and the rest of the world, which means that practitioners who wish to immigrate must complete an internship and a residency in the United States in order to be eligible for board certification for independent practice here. International graduates must demonstrate their readiness to enter U.S. training by passing the steps of the United States Medical Licensing Examination (USMLE) and the clinical-skills examination to fulfill the requirements of the ECFMG. This series of examinations now costs nearly \$3,000, plus the cost of travel to the United States — a net amount approximately equal to one year's salary for a physician from a low-income nation. It is clear that these costs restrict access to the system for candidates from impoverished nations; the introduction of the expensive clinical-skills examination in 1998 halved the number of ECFMG certificates issued in 1999.<sup>4</sup> However, the examinations have made it easier for program directors to compare the knowledge attainment of U.S. and international graduates and have alleviated their qualms about judging the skills of applicants who come from disparate regions.

Multiple attempts to manage the medical workforce through the regulation of the immigration of physicians and concern about siphoning off medical talent from developing nations have resulted in a convoluted visa system involving restrictions that are peculiar to the medical profession. Visas for training purposes (J visas) may be sponsored by the ECFMG but require a return to one's home nation for a minimum of two years after training is completed; H1b "professional worker" visas provide broader opportunities but require the applicant to have passed step 3 of the USMLE, to have secured an offer of a training position, and to have been granted a temporary state medical license.

Since the United States depends on international medical graduates, much can be done to facilitate the integration of the immigrant workforce into the U.S. medical system. Peers and superiors of trainees can ease the process by communicating their understanding of the unique challenges that newly immigrated physicians face and allowing time for adaptation. Program directors can support professional-worker visas for physicians in order to facilitate their pursuit of diverse career paths, and expedited visa-processing procedures can be implemented. English-immersion courses can be extremely useful for some immigrants. And a reevaluation of the eligibility rules for noncitizens that would enable them to receive research training awards from the NIH and other sources may maximize the contribution of international graduates — and perhaps invigorate the national research enterprise in

International medical graduates make an important contribution to the health and well-being of the American people. Initiatives that encourage greater participation of immigrant physicians in our clinical and research workforce may allow us to build a health care system that is equitable not only for these contributing physicians, but for the U.S. public itself.

- Physician characteristics and distribution in the US, 2004-2005. Chicago: AMA Press, 2003.

  Council on Graduate Medical Education. Minutes of meeting. September 17, 2003. (Accessed May 20, 2004, at http://www.cogme.gov/minutes09 03.htm.)
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Editor's Note: This article originally appeared on pages 2435 - 2437 of the New England Journal of Medicine, (350;24) June 10, 2004. Dr McMahon is on staff at the Division of Endocrinology, Diabetes, and Hypertension, of the Brigham and Women's Hospital, Boston.

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### Class '81 Goes Silver, UERM Goes Gold

By Estrella Azurin-Aguinaldo, M.D.

That a great way to celebrate-Silver Anniversary together with the Golden Anniversary of our Alma Mater! We, the Class '81 celebrated our 25th year with a lifetime experience to remember. A mixed feeling of joy and anxiety to meet old classmates in medical school, a nostalgia at the sight of our dedicated teachers, listening to Dr. Joven Cuanang's very inspirational talk "Where do you go after here", "What happens next after celebrating your anniversary?", but most of all, a great camaraderie forged among us, and a great sense of pride that we belong to the family of Class '81.

I and 20 other US based classmates are so fortunate to witness both Silver Jubilee, at the Marriott Spa and Resort, Las Vegas and the homecoming event in EDSA Shangri-la, Manila, Both occasions have touched our lives in one way or another forever.

As an overall chairperson of our Las Vegas Jubilee Night, I am proud

to say it was a big success!! 57 classmates attended the Jubilee night on Friday, August 4, and 49 attended the gala night Saturday, August 5. Our Jubilee Night had no dull moments. Masters of ceremonies, Agnes Montano and Manny Manalo did an excellent job of creating a continued euphoria of the occasion. It was full of laughter and entertainment, mostly performed by our talented kids. This included the operatic voice of Dorothy Rae, daughter of Rey Gonzales and Doreen Tolentino; the sweet voice of Julieann . daughter of Nat Bautista: a Hula dance by Celine, daughter of Rick Carranza and Lucille Chu: and Tinikling dance courageously performed by my son Andrieu' and Julieann. Of course, our 4 Hula ladies, Lucille Chu, Sonia

Macariola, Jackie Cortez and Bessie Luna swaved on the dance floor with their innate gracefulness, and a surprise number from our male version "Manghuhula" dancers, Jobal Sibal, Tito Garrovilla, Rick Carranza, and Nestor Lumicao. We watched our montage with a theme of 'Then and Now" and stared at each other as we compared ourselves then and now. And we thought, hey, not bad at all, if not better to some extent! The gala night was a solemn and

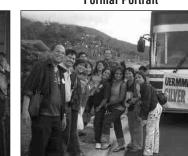
meaningful celebration. We were introduced individually with our family as Dean G. Paredes graciously bestowed our silver medallions and Dr. Ed Banez lighted and handed out candles. It was a touching moment. The most fun time was when we were at Cynn Lim's house at Las Vegas as the LA group hosted a brunch for our classmates. We were able to raise more money for our project.

**Formalities** 

The Philippine Homecoming experience last December 19-23, 2006, was full of warmth and display of hospitality. The convocation ceremony was preceded by a mass attended by 67 Class'81 graduates, and was a heartfelt celebration as Dean G. Paredes, Dr. R. Divinagracia

and Dr. A. Anastacio presented us with our medallions. Dr. Cuanang's inspirational talk was indeed a thought that everyone will remember. The Dr. Baccay commemorative lecturer, Lynn Almazan-Gomez, who was my groupmate, still beautiful, witty and more sophisticated, gave a very comprehensive lecture on Kidney Failure In The Primary Care Setting. Jubilee night followed, at Boy Querol's house, full of warm hugs, sincere "kumustahan". Each of us tried to give a brief narrative of what we had been doing all these 25 years. The 36th Medical Alumni Fellowship night held at EDSA Shangri-la was another success. Masters of ceremonies Ricardo Zotomayor and our two Lantern Queens: Lourdes Marquez and Bessie Luna-Gallardo exhibited their excellence that night. Warm welcome remarks were delivered by the President of UERMMMC-MAA, Inc. Dr. R. Divinagracia. Mr. P.O. Domingo, Chairman and CEO, graciously rendered the congratulatory toast that evening, and addressed the future of the medical center. Dr. Ed Banez gave another inspirational talk





**Formal Portrait** 

Romarico Tongos and the whole executive committee for their hard work, time and dedication for the success of the homecoming event. Our final celebration was an outing to Greenfield, Alabang and was attended by only a few classmates but was still full of fun. My experiences, as most of my US based classmates can also attest too, were full of lessons and memories.

as he strengthened the mission

of the alumni to help our

medical school and the center

as a whole. We were

presented individually while

holding our lighted candles.

About 90 Silver Jubilarians

attended. As a class, we

presented our projects: one

incubator and one ventilator

to Dr. Cardona for the use of

our Pediatric charity ward,

and 5 balikbayan boxes

stuffed with assorted surgical

materials to our operating

room. We have two awardees

in our batch, Leopoldo

Calimlim, for Community

Service and Florecita Padua

for Medical Research. Then

there was a formal turnover

from class '81 to class '82.

Thanks for the leadership of

Seeing our medical school brought enormous happiness, coupled with sadness as

we saw our school building in a rundown state. Because of this, our batch decided to get more involved in helping our alma mater.

As Sharon Pascual- Bravo said, "Putting aside the financial cost and the discomfort of plane rides, I have no regrets whatsoever of attending the homecoming celebration. If there is ever a chance to do it over again, I will do a better job at reconnecting with my classmates, for I will never know when our paths will cross again." Bravo Sharon!!!!

Overall a new family of class '81 is reestablished and a new bond reestablished with our Alma Mater. I would like to make a special

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### **UERM '82:** *Ang Pilak sa Ginto* (Silver and Gold)

By Alexander V. Baldonado, M.D.

Tt just seems like vesterday, we were medical neophytes, fresh from graduation, storming the halls of the UERM edifice to enlist our destiny-Lathat of obtaining a medical career and a suffix to their names (the M.D.

The sequential four years entailed grueling time of consumption of Latin and almost never heard medical terminologies, mind-soaking night outs with voluminous books, and balancing acts on tight ropes with the grading system (pass or fail). The top sacrifice of finishing a medical career, had pushed all other agenda to a halt (family, love life, and social life), just so one can end up wearing the toga on graduation day. Nobody said life would be neither easy nor fair, but destiny calls on everyone who is transfixed on courage and stamina, to carry on with the race to graduate. For some two hundred medical graduates, their endless toiling has reaped the expected medical degree.

Thereafter, everyone scampered to different avenues specialization, and followed the paths to their own destiny.

The succeeding years ushered the era of constant changes batch 82 medical graduates tested the waters of life both locally and abroad, while experiencing the other aspect apart from being a Doctor, that of raising a family. Life went on; everyone proceeded on their respective niche. Surely the the constant winds of change has brought forth enriching experiences everyone and families. probably once in a while, the topic of



**East Coast** 



**Philippines** 

UERM several years before became a slice of the conversation in meetings and parties.

As destiny holds it, some persons gifted for their foresight and keen social abilities, toyed in their minds the idea of reliving the past and bringing everyone closer to home. Why not forge with the UERM alumni association to realize such an idea. It takes selfless intentions, more than anything, to conceptualize, organize, coordinate and arrange for a grand plan. Indeed, batch 82 saw it coming that a core of alumni will bring to fore an experience of a lifetime - that of a homecoming reunion. More than a year in preparation, it would take a gargantuan task to enlist everyone's attention to this single grand endeavor. The plan includes leaving a legacy (put simply, albeit a form of gratitude immortalized in the necessity of the times, through the annals of UERM history). The caveat is imminent in bringing everyone together,

considering the origin and personal circumstances of every alumnus. But the Hippocratic Oath is always alive to hearts of many, if not all. The homecoming shall be realized, concomitant with the all -endearing gift of love, a legacy to our

For as long as the UERM spirit is entrenched in everyone's minds and hearts - nothing is impossible. So then, after twenty five years, everyone is longing to recall, to relive and to a be a part of history in the making. The four years of medical hardship is more than enough to indent a perpetual scar of UERM (skill, trade, profession-call it anything), the calling keeps getting louder, as the days and the advent of the homecoming draws nearer.

As in the past mini reunions, meetings, get-togethers, celebrations- the miniature desires and

plans should now be

capsulized into the

grand endeavor. The

August/December

datelines shall be the

culmination - for

these memorable dates

coincide with the

golden anniversary of

UERM

Center.

founding of

Medical

lifetime

a

participate,

Hence, during this

Likewise,



**Northern California** 



Southern California

batch 82 shall be privileged to commemorate their own twenty- fifth year of celebration, a SILVER ON GOLD, quite lovely coincidences, if you will a unique onceachievement. advent, there is now a call for everyone to pursue, move forward,

coordinate with the organizers who have selflessly dedicated primetime of their lives to make things a reality for everyone. I believe it is as much in everyone's heart and minds, the desire to relive their UERM 82 past in the present. The homecoming is ours, our history, and our very own. Let us bring this SIILVER ON GOLD closer to home - our own, UERM 82.

On behalf of everyone who toiled continuously, in Phil/US- our home

For more information about Class 82 Silver Jubilee activities, contact the following class coordinators:

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### **UERM Med '82 Choir Encores in DC**

By Reynaldo A. Gonzales, M.D. MPH



The UERM-Medicine Class '82 Choir under the baton of Prof. Rey A. ■ Gonzales will encore on August 3 & 4, 2007, Silver Jubilarian & Gala Nights, respectively, of the UERMMMC-MAAA, Inc and Alumni Foundation, USA Inc. 19th Alumni Reunion and Convention in JW

Marriott at Pennsylvania Ave., Washington DC.

With the theme Pilak sa Ginto, it is the 25th year/Silver Jubilee Celebration for Class 82 and also the 50th Year/Golden Anniversary of the University of the East Ramon Magsaysay Memorial Medical Center (UERMMMC) which was founded in 1957. Hence, the *Pilak* (Silver) sa *Ginto* (Gold).

Their repertoire includes Ako ay Pilipino by George Canseco. Original choir arrangement and orchestral/keyboard accompaniments are written, produced/recorded and directed by their maestro, Dr. Rey A. Gonzales.

More than a 100-voice chorale composed of Class 82 and their families from all over the world mostly from USA and Canada, the rendition of this immortal song will dominate the grand ballroom during the Candle Light Ceremony, when the honorees are presented as Silver Jubilarians.

The Class 82 Choir had a well applauded Las Vegas performance at the Salu-salo at Musikahan Sa Las Vegas at Suncoast Hotel and at the Gala Night of the 18th Annual UERM Alumni Reunion & Convention at the JW Marriott, Summerlin on August 4 & 5, 2006, respectively. They sang a 4-voice choir arrangement of a well-loved Filipino Kundiman, "Pakiusap" by Dr. Francisco Santiago.

On April 14, 2007, UERM Med '82. hosted a fundraiser, "A Night of CME, Dinner, and Dance", at the Holiday Inn Buena Park, CA. The event, co-sponsored by UERMMMC-MAAA, Inc., and UERM Alumni Foundation of

America (AFUSA), was well attended by classmates, UERM alumni from Southern California, colleagues, friends and families. A world renowned UCLA professor, Sammy Saab, MD. MPH gave a presentation on "Updates on Hepatitis B Management" for the CME portion of the evening. Consul Geneneral Mary Jo Bernardo-Aragon from the Los Angeles Philippine Consulate gave her Inspirational Address and Dr. Edgar C. Banez, President of UERMMMC-MAAA, Inc., rallied UERM alumni on their role to the alumni association and our alma mater in his Presidential Address. The evening was also graced with musical numbers by two very talented and gifted children of '82 classmates - Dorothy Rae T. Gonzales, the daughter of Drs. Rey A. Gonzales, '82 and Doreen Tolentino, '81; and Anthony Carlo T. Macaraeg, the son of Dr. Annie Tolentino, '82 and Carlos Macaraeg, Class 82 and fellow alumni at the center stage were one voice in singing the UERM Hymn composed by Dr. Eleazar O. Sarmiento, '64.



1st Row, Left to Right - Drs. Rey A. Gonzales, Raymond Abaya, LA Philippine Consul General Mary Jo Bernardo - Aragon, Alex Baldonado, Abner Pasatiempo.

2nd Row - Drs. Annie Tolentino-Macaraeg, Mel Murillo General, Susan David-Cu, Maribel Bonson-Sibulo, Au Barga Kianmajd, Nannette Guanlao-Pasatiempo, Thelma Manalang-Angeles, Cynthia Mayhay-Lopez, Carmel Goyeneche.

3rd Row - Drs. Camilo Cu, Francis Burgos, Raymond Reves, Lily Nicolas and Letty Jacinto