2020 As Envisioned

“When life gives you lemons, make lemonade.” – Anonymous

“25 years of my life and still I’m trying to get up that great big hill of hope For a destination I realized quickly when I knew I should That the world was made up of this brotherhood of man For whatever that means”

– 4 Non Blondes –

After 25 years being a Fellow of the Philippine Orthopaedic Association, my destination was reached. Last year, I emphasized that POA will be handling the preparation for the next three (3) International Conventions. But the task given to me changed this 2020 because of the CoViD 19 Pandemic. Your POA Board of Trustees immediately changed the game plan with the unfortunate cancellation of the Butuan Midyear Convention and the ASEAN Society for Sports Medicine and Arthroscopy Congress.

Instead, a more dynamic POA Board of Trustees came up with a better strategy to overcome the threat of the pandemic and a better way to communicate and reached out to their fellows. Through the help of all the local chapters and the subspecialty societies, gave the meaning of this brotherhood within the POA, as ONE POA.

A strong organization will continue and shed this ‘great big hill of hope’ for the association in working for 2021 AOA Congress and 2022 APOA Convention. For whatever the medium to be used, the POA can easily handle a purely online congress or a blended meeting.

I am still optimistic that the Orthopaedic Research Society can be convened in 2021. The Orthopaedic Education Council

A Call to Action: The Physicians’ Act of 2020

HOUSE BILL 1103, authored by Congresswoman Angelina D.L. Tan, M.D, entitled “AN ACT REGULATING MEDICAL EDUCATION, LICENSURE, RESIDENCY, AND PRACTICE IN THE PHILIPPINES, REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 2382 OR THE MEDICAL ACT OF 1959, AS AMENDED, AND FOR OTHER PURPOSES,” was passed by the lower house in September 2020.

How is a law made?

The Philippine Congress is a bicameral legislature composed of two co-equal houses: The House of Representatives and the Senate. Therefore, the bill passed by Congresswoman Tan from the lower house cannot become a law unless there is a counterpart bill coming from the Senate.

The bill, once it is ready, is included in the order of business for First Reading in the plenary session of the Senate. The Senate President directs the bill to the appropriate committee and in this case, to the Committee on Health. The committee then decides whether they will hold public consultations. This is where we, as the POA, can submit our stand and opinion for consideration of the legislators.

After the committee hearing, the chairman of the Committee on Health (Senator Bong Go) reads the sponsorship speech for the bill. There will be interpellations in the session hall wherein the sponsor defends the merit of the proposed bill. After the amendments, the bill’s approval for Second Reading will be voted by all legislators.

The Third Reading is a formality, and no amendments are allowed at this point.

If there is no concurrence between the Senate bill and the House bill, there will be a conference committee where they thresh out their differences. Once they adopt a common bill, it will be transmitted to the President for signature. Once signed by the President the Physicians Act of 2020 becomes a law of the land which we all must follow and adapt to.
The Council for Orthopaedic Education (COrE) with the support of the Philippine Board of Orthopaedics conducted a four-week online workshop for Orthopaedic Surgeon Educators last October 2020, “Orthopaedic Education in CoVid Times: Shifting to Online Learning and Evaluation Methods.” The program was geared and directed towards empowering the training faculty of the different Orthopaedic Training Programs with the purpose of modifying and implementing a more appropriate system of teaching and evaluation of our resident physician trainees. This will aid the programs with the transition from the conventional (and now no longer untenable) live face-to-face teaching and assessment of their progress, to the online and remote strategies and techniques for monitoring and validating learning.

This course aims to introduce the orthopaedic educators to e-learning as well as the broad categories of adult education such as curriculum planning and instructional design, teaching and learning strategies, relevant performance and workplace-based assessment tools, educational management and research in Orthopaedic Surgery. This online course is the initial step towards the path of lifelong learning and will serve as a requisite for more advanced education courses that will be developed by the PBO / POA-OEC.

Jean Pierre F. Leung, MD, FPOA is committed to iron out the need of PBO in the Residency Curriculum and the next step is to initiate each Subspecialty Society to come up with their own Specialty Curriculum. The POA-COrE will be the accrediting and certifying body of the association of all Orthopaedic Specialists to be endorsed to the Philippine Regulatory Commission (PRC) (currently) through PMA and PCS.

The ASEAN and PBO orthopaedic curricula were further expounded on by Drs. Arturo C. Cañete, Jean Pierre F. Leung, and William T. Lavadia, and now ready for this 71st POA Annual Convention - Online.

The October 2020 course involved an orientation to the latest edition of the PBO’s Residency Education Training Manual in Orthopaedic Surgery, the design of relevant Program Plans and Rotations per institution, and the adaptation of both face to face vis-à-vis internet-based teaching and evaluation tools for each program to attend and participate actively.

RESIDENTS AND ORTHOPODS LOCKDOWN ENCOUNTER (R.O.L.E.)

The pandemic gave birth to a new Baby, conceived by the Philippine Hip and Knee Society (PHKS) and delivered by our Trustee Anne Kathleen 'Pebbles' Ganal-Antonio (Chairperson of the Committee on Public Relations, Marketing and Social Media). Relieving the boredom and stresses brought about by the COVID 19 Community Quarantine, Fellows of the associating through the different Subspecialty Societies shared their expertise on “How They Did It” during the time where surgeries are scarier than before.

For a short period of preparation, Fellows shared their knowledge on how to do Orthopaedic tele-consultation, virtual physical examination, virtual referrals, and the protections in doing surgeries today.

An average of 8 Webinars per month, adding to around 2-3 zoom meetings a day, captured all the members to participate even during dinner time or before going to sleep. Having this Zoom Meetings and Webinars a part of our daily life, this will be the so called New Normal in terms of Meet and Eat Scientific Discussions removing the everyday traffic and lesser food consumption, not to mention the decrease in the drinking habits of orthopods.

71ST POA ANNUAL CONVENTION – ONLINE

At the end of my viral term, I welcome you to this ‘First’ Virtual Annual Convention of 2020. I will be known as the CoViD President, where visions made for years only to be erased by a virus. However, an anti-virus was created to come up with a better POA.

For this year’s theme: “The NEW NORMAL: An Orthopaedic Challenge” – Adaptive Changes in Surgical Practice – it is timely to review and develop the evolution of Orthopaedic Shield to this threat. The adrenaline of the officers of the association rose to a degree of fighting all the issues concerning our members. We reached out for you, we heard issues from you, we joined to strengthen our brotherhood as ‘ONE POA.’

The Board of Trustees has learned to adapt and become fruitful to create a new goal for 2020 and beyond.

Disasters open doors for more opportunities. Unfortunate events happen but can also lead to brighter options. Strategies evolve...
2020 as Envisioned…

with the hope to create better opportunities to serve our constituents.

“I no longer have to worry about what happens tomorrow, because I’m happy with what I’ve done today” – Snowden –

THANK YOU FOR ALL THE OPPORTUNITIES TO SERVE YOU.

MABUHAY ANG POA!!! STAY SAFE and STAY NEGATIVE!!!

PAUL RUEL C. CAMIÑA, MD, FPOA, FPCS
President – 2020
Philippine Orthopaedic Association, Inc.

A Call to Action…

Let us look at house bill 1103 and let me point out some of the items that might affect us as Orthopaedic Surgeons. I encourage everyone to read the entire bill and give us your opinion. I will highlight just three important issues that we have to talk about. They are seen in Article II section 5 under the following lists:

1) Medical Specialty refers to a major branch or discipline of medicine under which a physician has special knowledge and skill acquired after residency or specialized training by an accredited specialty training institution.

2) The Physician’s Act did not specifically ponder upon and gain perspective for.

3) Resident/Fellow Trainee refers to a licensed physician undergoing postgraduate medical education/training in a particular specialty/subspecialty of medicine in a DOH Retained Hospital or PRBM and Integrated National Professional Organization of Physicians (INPOP) accredited training institution.

These are just some of the issues and I am sure that the reader of the bill will find some more things that matter to us as orthopedic surgeons. Please do let the board of trustees know what you think. You may contact us directly or thru the secretariat.

In the article sent to the PCS our hard working POA President, Dr. Paul Camiña, wrote “The Physicians Act of 2020 may be a good law in regulating medical practice in the country only if it recognizes a competent organization (private or government) to support the accreditation and certification of Specialty and Subspecialty doctors, free from all political motivations.” I think this is the bottom-line, we all agree that we don’t want our practice to be “politicized.” Now is the time for action. We cannot just wait for the law to be passed and then react.

- J.A.C. PIMENTEL IV, MD, FPOA
POA Trustee
Comments & Suggestions please email to: jacpim@yahoo.com

President Views on the Physicians’ Act

Dear Fellows, in light of the many facts and insinuations regarding the recently proposed Physicians’ Act, allow me to share my thoughts and observations, hopefully to give a personal perspective which you may ponder upon and gain perspective for.

The Physician's Act did not specifically identify an Integrated National Professional Organization for Physicians (INPOP). The PMA however has been trying to stand in place of this proposed INPOP for the past five years, pursuing an adjusted persona as the Integrated Philippine Medical Association. This allows the current PMA to simply adopt the newer identity and the new responsibilities, although hampered by its current status of being an NGO.

The law provides that the accreditation of specialists will be under the jurisdiction of the Department of Health, PRC and the INPOP. These same people will constitute the PGMEC (Post-Graduate Medical Education Council). The DOH however, has instructed all their DOH-accredited Regional Medical Centers nationwide to have orthopaedic training programs. This move was meant to strengthen and increase trained specialists in order to augment the numbers from POC, PGH, EAMC, JRRMMC, ITRMC, NMHC, WVSUMC,

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Presidential Views...

From Page 3

Body for ORTHOPAEDIC TRAINING PROGRAMS from PMA, PRC and ultimately the Department of Health (DOH).

As long as the POA is considered a private organization, we have no role in the Physician's Act, if enacted. There was even no mention of a "PPP" (Public and Private Partnership) for this endeavor, which could have bridged and solved this looming dilemma.

Interestingly, the PRC Board of Medicine Chairman has just been 'politically' replaced, and the new chairman is coincidentally a good friend of a POA Fellow, who happens to also be one of the movers of the Philippine Association of Medical Specialist, Inc and Philippine Association of Medical Specialist in Government Service (PAMSI and PAMSGS).

I hope that the POA with the PBO, will continue its appeal for recognition as the ONLY Accrediting and Certifying programs of the DOH, PRC and PMA, not to mention supportive of the PCS also.

Food for thought, in Malaysia, more orthopaedic surgeons join the national Royal College of Surgeons-Malaysia, because it is recognized by their Ministry of Health, setting aside membership in their own Malaysian Orthopaedic Association.

My continuing vision is that ONLY the POA will remain as the recognized national organization of qualified, competent and compassionate orthopaedic surgeons dedicated to the advancement of research, training, and service to the highest standards. ONLY the POA can certify a physician to be specialized in Orthopaedic Surgery.

PAUL RUEL C. CAMIÑA, MD, FPOA, FPCS
President – 2020
Philippine Orthopaedic Association, Inc.

POA COrE Develop PBO COTAM

“A New Curriculum for the New Normal”

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

The New PBO Curriculum, Online Teaching and Assessment Methods (COTAM) was developed by the Council for Orthopaedic Education (COrE) of the Philippine Orthopaedic Association. This is a 4-week online course initiated for orthopedic residency educators. The POA Council of Education started their Face to Face meeting early this year to start training POA Fellows on how to teach residents and younger fellows using Outcome Based Education.

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

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

The Philippine Board of Orthopaedics (PBO) set up the 1st Task Force OBE Meeting on May 13, 2016 attended by Dr. Jean Pierre F. Leung, Dr. Daniel D. Caro, Dr. Arturo C. Cañete, Dr. Paul Ruel C. Camiña, Dr. William T. Lavadia, Dr. Emmanuel P. Estrella and Dr. John Andrew Michael A. Bengzon. The group discussed the scope and structure of Task Force OBE, the curriculum shift, development of the orthopaedic curriculum via its competencies, milestones and assessment methods. On January 18, 2020, the POA Board of Trustees instituted the Orthopaedic Education Council and, together with the Philippine Board of Orthopaedics, organized “Training the Trainers” with the goal of providing learning tools for the benefit of Fellows and Residents in training.

The educational outcome we want for our orthopaedic residents in training is based on what we can offer to them. This improved curriculum will not directly give them the knowledge and skills of the trade, but instead, enable them to behave and acquire

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Called to a Noble Task (From the POA Hymn)

After almost a decade in the POA, I have observed the proverbial “changing of the guard” for several times now. It has been a subject of criticism that becoming the President of the national association for all Orthopedic surgeons deserves more than a mere twelve-month span of time in which to effect lasting and relevant changes for the good of all Fellows. Meaningful projects with far-reaching objectives need ample time to be conceived, optimized and enacted, avoiding the feared “ningas-cogon” or “flash in the pan” thinking, resulting in good ideas quickly fading in each twilight of a president’s term.

This year proves to be the most trying of years in which a President’s mettle has been tested. Starting 2020 full of energy, vigor and vision, Paul Camiña took hold of the POA’s reins, armed with many a plan, to bring our beloved Association to greater heights and reach significant achievements. This enthusiasm was matched by nature’s own bravado, easing Paul into his office with the eruption of Taal Volcano, as if to call attention to the potential volcanic performance from Paul in the months to come. Naturally, the POA rose to the challenge, coming to the assistance of Fellows affected along with their respective communities.

Everyone knows what happened next. We are still entrenched in what turned out to be President Paul’s ultimate legacy—the POA’s response to the global pandemic. What was to be a twelve-month plan for a sitting President, metamorphosed into a twelve-month plan for preparing the POA for a post-pandemic world, reaching far and beyond the 365 days given to him.

Creativity was exercised in devising means to remain in touch and on point with the Fellows. From virtual meetings, online webinars and activated apps on smart phones to the old reliable courier service, masked with all forms of protection & shielding, Paul has found ways and means to exercise his office, albeit from a virtual throne. It is in this light that I have observed a limited view of what makes our sitting President, truly presidential.

Paul has been a steady and calm force behind the tumultuous year so far. Ofentimes relegated to exchanges within Viber groups, many a question or a dispute has been settled amicably with Paul’s input & insight, although the occasional delays in his responses have left us scratching our heads at times. We have become accustomed to his familiarity with parliamentary procedures when conducting our meetings and when dealing with issues affecting legislation, budget and petitions. I have personally witnessed and appreciated how order is maintained during potentially controversial discussions, via Paul’s adherence to proper parliamentary procedure, allowing us to focus on one item at a time, recognizing all views, protecting all rights, allowing for equal opportunity and access for all opinions.

I have yet to see him visibly angered. Slightly flustered perhaps, sometimes irked & somewhat irritated, Paul has yet to show more negative emotion, beyond the occasional rustling of his always well-kept excess facial hair. He is ready to share a joke or a humorous anecdote at some inopportune time, breaking any amount of tension that may have accumulated in the course of a meeting, online or otherwise. His decisions may not always be popular, but the conviction behind them often tells us whether debate or argument is still possible; and we all rely on his humility to readily accept when a more appropriate response is merited or deserved. I am sure many Fellows can attest to this.

Beyond the functions of his position, I have seen glimpses of his kindness and gentleness. Aside from always being ready to sit down for a serious & not so serious talk over coffee or some form of alcohol, Paul’s insights are unique and helpful, offering a different point of view for whatever bothers you. In the recent months, the many hours spent online have seen Paul in what could be his most precious role, as a proud lolo, as many of us have seen his apo sharing the screen during more relaxed moments, after a long and tedious meeting or lecture. I believe strength and perseverance are healthily derived from the love and devotion of family at any time. Paul is a clear manifestation of this.

The POA Presidency is no easy task. As a Trustee, we spend 9-10 years in the Board to prepare for this position. Within this period, we grow and mature and learn many things via a myriad of learning opportunities. A big chunk of this knowledge cannot be learned from books or guides, and one’s personal ability to absorb and imbibe translates to the efficiency & results of one’s Presidency. In 2020, the POA Presidency was challenged with perhaps the greatest amount of unique trials & obstacles. As an Association, we are fortunate to have a President who as of yet, has not fallen behind.

Kampai Paul!

FREDERIC JOSEPH F. DIYCO, MD, FPOA, FPCS
Secretary – 2020
Philippine Orthopaedic Association, Inc.

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

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

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

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

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

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

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

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

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

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

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

PAUL RUEL C. CAMIÑA, MD, FPOA, FPCS
President – 2020
Philippine Orthopaedic Association, Inc.
The PBO has gone through a lot of unexpected challenges and unprecedented opportunities this 2020. However, the Board is pleased to report to your good office its achievements to date.

Please allow me to enumerate:

1. The annual workshop last January 18 was initially challenged by the eruption of the Taal Volcano causing some initial doubts but, nevertheless, the faculty development blended course pushed through as it dealt with the educational challenges of the millennial learner and the strategies of e-learning focusing on Technological, Pedagogical and Cognitive Knowledge (TPACK) with faculty guests from UP National Teacher Training Center for the Health Professions and the Medical Informatics Unit. Matters on the new ASEAN and PBO curriculum were also discussed in the afternoon.

2. The Board was able to conduct its annual accreditation visits to some programs in MMla, specifically, UST and JRRMMC last February 15th and subsequently the WV programs, specifically WVMC and CLMMRH, last February 29th.

3. The Diplomate Exams Part 3 (practicals) were also held for the eligible candidates from these institutes, including the WVSUMC on the days prior to the formal accreditation visit.

4. Accreditation visits and practical examinations for North Luzon – BGHMC and ITRMC - were immediately suspended March 10th as the prevailing pandemic was now becoming a major threat. The national ECQ was official declaring last March 16th proving that the decision to hold the activities for that weekend was indeed providential.

5. The Board on the last week of March started to meet virtually to discuss the implications of the COVID-19 pandemic and by the third week of April 2020, the following decisions have been made and an open letter has been sent to all the twenty two (22) accredited training programs and the two provisional programs stating the stand of the Board. To wit:

a) All accreditation visits have been reprogrammed as follows:
   i. All programs of good standing will be exempt from further visits and will just receive a report based on the 2019 performance based on the Annual report using the same criteria previously used.
   ii. Programs with a Conditional status as well as those deemed with a “weak” or “contentious” status will undergo a virtual visit following the standard face-to-face visit

b) The In-Service Training Exams for the First to Third Year Residents were cancelled.

c) The Diplomate Written and Oral Exams set for July was all rescheduled and pushed to October and the Qualifying exam also set for October was deemed to proceed as scheduled.

d) The Diplomate Practical Exams were postponed indefinitely.

6. The Board conducted virtual accreditation visits via Zoom in the last two (2) Saturdays of May and all the subsequent Saturdays of June, including additional online appeals for reconsideration of status.

7. The Board continued to conduct its Board Meetings planning for the orthopaedic residency education as well as its nearly daily Viber discussions among the Officers and the entire Board of Trustees on developments as it unfolds „ including video calls and online polls;

8. The Board held its first ever virtual Town Hall meeting last July 29th and has expressed its stand on the following matters:
   a) Plans for accreditation for 2020 which will continue virtually by 2021 but will be highly considerate of a program’s census and overall academic performance still adhering to the MPLs of Surgical Skills, Theoretical Knowledge and Departmental research output;
   b) The 2020 Qualifying exams and the Diplomate Written exams were rescheduled for the last week of January or the first week of February 2021 while the 2021 examinations were set for the third week of October 2021;
   c) The 2021 ITE will be scheduled July 2021;
   d) The 2020 and 2021 Diplomate Practicals will be held when the quarantine measures have been lifted;
   e) The eventual promotion or retention of a resident and even the acceptance of new applicants for 2021 has been left to the discretion of the institution;
   f) The requirements for the credentialing of a candidate for the Diplomate Exam will remain as is, fulfilling the specified case log and research requirements;
   g) Outlines for changes in program evaluation and resident assessment, including collaboration and clustering of programs were also discussed.

9. Another faculty development course was set for October which includes:
   a) a joint workshop with the Council for Orthopaedic Education (COrE) of the POA to train the program directors on fundamentals of teaching and workplace assessment including the transition to web-based online activities; this will be a one month online course. The January blended course was restructured to convert to purely online activities;

   b) Conduction of a voluntary pilot testing for the online computerized examination in preparation for the high stakes Diplomate and Qualifying Exams set for late January 2021.

10. The Board has also finalized its new curriculum slated to be have its soft launch next month in the online workshop and its formal release this November in the Annual Congress.

To date, the Board has been fluid in its activities but is honored to report that its functions for program evaluation have been completed. The PBO together with the POA-COrE is rapidly helping all the institutions get on the same page for online teaching and learning and use of these new online assessment tools as well as the transition towards online computerized examinations.

Likewise, the Board has already eyed activities for the PBOs 50th Anniversary for 2022 which includes a review and ratification of its constitution as well as its Greenbook or Manual of Policies and Procedures.

WILLIAM T. LAVADIA, MD, FPOA
2020 PBO Chairman

NATHANIEL S. ORILLAZA, MD, FPOA
2020 PBO Secretary
AOA Council Meeting Updates

The AOA Executive Council Meeting was held virtual online using ZOOM last October 31-2020. The meeting was presided over by Dr. Ellewellyn G. Pasion, AOA Secretary General and was attended by the national presidents and council members from the different ASEAN member countries.

The highlights of the council meeting were:

1. The virtual transfer of the AOA Presidency from Dr Zairin Noor of Indonesia to the incoming AOA President Dr. Chye Ping Ching from Malaysia. The complete list of the Council members elected were:

   **President:** Prof. Chye Ping Ching [Malaysia]
   **Senior Vice President:** Dr. Peter B. Bernardo [Philippines]
   **Vice Presidents**
   - OSBD: Dr. Ketan Pande [Brunei]
   - CSOT: Prof. Yin Sinath [Cambodia]
   - IOA: Dr. Edi Mustamsir [Indonesia]
   - MOA: Prof. Sharifah Roohi Syed Waseem Ahmad [Malaysia]
   - MOS: Khin Maung Myint [Myanmar]
   - RCOST: Thanainit Chootanaputhi [Thailand]
   - SOA: Prof. Denny Lie [Singapore]
   - VOA: Prof. Nguyen Van Thach [Vietnam]
   **Secretary General:** Prof. Ellewellyn G. Pasion [Philippines]
   **Ex-Officio:** Prof. Zairin Noor [Indonesia]

2. The 50th Malaysian Orthopedic Association [MOA] mtg combined with the 40th AOA meeting was rescheduled next year on June 22-26-2021, online and the last day will be a hybrid type to be held in KL, Malaysia.

3. The 72nd Philippine Orthopaedic Association [POA] mtg will combine with 41st AOA congress next year, about 5 months after the AOA 40th, to be held in Manila on the 3rd week of November 2021, either online or hybrid, depending on the pandemic situation. The POA-AOA Meeting will be in conjunction with ASEAN Society for Sports and Arthroscopy [ASSA].

4. The ASEAN Junior, Senior and AusOA/NZOA travelling fellowship programs were cancelled for next year due to the Covid-19 pandemic.

5. The Education Committee chaired by Prof Lee Eng Hin suggested holding future webinars and educational activities for the member countries to advance and elevate orthopedic care and practice.

6. The next AOA journal issue will be online, but will be printing a few hard copies for journal registration purposes. This was done to defray publishing costs. Because of the numerous submission of articles for possible publication, it was agreed that each paper will be charged US$ 60. Individuals who wish to get a hold of the hard copies can contact the MOA Journal Secretariat.

7. The Council also agreed to invite Laos to become the 10th member of the AOA. The Executive council will work hard to recruit Laos into the fold.

- PETER B. BERNARDO, MD, FPOA
  2020 AOA Senior Vice President
For the Love of Pete...

Who is Peter Bernardo?…. “He’s the quiet, decisive leader, who was the first chairman of the joint replacement section” (-gmsa) …. just one of the answers you get from his colleagues at the Philippine General Hospital. Coming from the other side of the Pasig River, I really didn't know much about the man. For years, I've known him only as the joint specialist from whom I frequently encounter in the hallways during annual conventions. He seemed ALLOOF, SERIOUS, maybe a SNOB?… it didn't bother me.. our interests and workplaces were different. But since joining the POA, I’ve had a better glimpse of his person. Now, as a member of the executive committee, I have understood the man better, and have unlocked the mystery behind the image.

Peter Bernardo is the quiet and unassuming guy whose depth of thinking is aptly described in the saying “still water runs deep.” He quietly listens and observes everyone during the long hours of POA meetings. But when he speaks, he projects authority and credibility. He can be silly and a chatterbox as well during unguarded moments. As one insider friend from his hospital said, “he projects an image of being the strong and silent type, but scratch the surface and you will quickly discover that he is a guy who is always ready with an amusing story or an anecdote, all delivered with a ready laugh” (-tdr).

A comment from another DPA is that “he was always practical in his approaches” (-nso). That I can attest to, particularly during discussion stand-offs on contentious issues. He calls a spade a spade, and rarely minces words to get to a point. He also has a penchant to prepare for even the remotest possibility that can happen to a seemingly ordinary situation. And this is surprisingly supported with "intel" information only him among the group has access to.

Banking and money market are topics you don't want to pick an argument with him. He is well- informed and updated, that one would think he is more of a broker than a surgeon. He can be exceedingly frugal as well, especially with the use of the POA fund, to the detriment of our contracting partners, but to the benefit of the association.

First lady? All I know is that he's one of the most eligible bachelors in town. He can easily disable the guards of the most reserved maidens with his alluring smile. No wonder rumors has it, that a lot of our female colleagues have a secret admiration for him. He doesn't say much about where he's been, and I don't ask much as well. But all I know is that when he comes in for a meeting, he's all set, refreshed, and raring to go through all the issues of the day.

So you ask me who Peter B is?... I don't see him now as aloof, I see him as a DEEP THINKER… You say he is serious-looking, maybe…but he is a CLOWN INSIDE…He is really not a snob, he is just CAREFUL… He is “Peter, the ROCK”! His presence is enough for you to be calm and assured. Be comforted knowing that the leadership of POA will remain stable and on course under his helm. That is why I expect a smooth sailing and astounding year ahead of us!

DAVID L. ALAGAR, MD, FPOA, FPCS
POA Treasurer – 2020
Philippine Orthopaedic Association, Inc.

POA North Luzon Chapter

We are bound to continue with our duties of attending to our patients, face the risks of getting infected inspite of all the health protocols. We salute to all our frontliners who have sacrificed their lives and all the frontliners who continue to serve their communities during this time of pandemic.

Aside from the previous duties and activities stated in the previous issue of this newsletter, we had a Zoom meeting last July 25, 2020 with the theme “Telemedicine: Overcoming Barriers to Patient-Physician Consultations during the COVID 19 Pandemic”. To provide enlightenment on this topic we had Dr. Leonardo Ona III, Dr. Noel Lantin and Dr. Edsel F. Arandia. The webinar gave us another option to make virtual consultations thereby limiting exposures of physician and patients to other people and away from the hospital environment which may harbor the disease, as well as save time from travels. There are advantages especially to urban centers where internet connections may not be a problem, but like any other new technologies, these are not without limitations and potential risks and legal impediments. If these impediments are checked and set aside, then Telemedicine may well become the new standard in the medical profession in the years to come.

On July 26, 2020, another Zoom conference was done when the PPE's have arrived and are to be distributed to the other provinces.

On August 11, 2020, there was a Zoom conference with POA for mock elections in preparation for the election of new officers of POA for year 2021 during the POA Annual Convention Online on November 27-28, 2020. The low turnout of voters prompted the group to set another meeting on August 15, 2020. The reasons for the low turnout are, the members do not have PhilOrtho Apps or are not updated, and again, due to poor connections or communications, incomplete data, not updated telephone numbers and incomplete data, not updated telephone numbers.

Continued to Page 10
POA North Mindanao Chapter

Starting January 2020, the chapter has continually planned and liaised all the needed reparations for the POA Midyear Convention for April 2020. Pocket meetings with the organizing committee and the sponsors have occurred throughout the month. Coordination for the preparation of the Pre-convention Cadaver workshop has also been done with the Department of Anatomy of the UP-PGH. The Local Government Unit of Butuan City has also agreed to sponsor parts of the planned convention.

Coordination with Ford Butuan for the Ford Raptor prize for the convention’s raffle was also done to include the BIR requirements for such an event. In the same month, the officers have started to arrange the requirements for the chapter’s SEC registration. An accountant has been contacted for the arrangement of the application process.

On the early weeks of March 2020, Covid 19 has started to wreak havoc across the country. The organizing committee and the chapter officers were, initially, optimistic on the scenario at hand up until Metro Manila and the rest of the country has been placed in Enhanced Community Quarantine. An emergency meeting was held among the officers and the organizing committee. In that meeting, it was foreseen that the overall condition would not be favourable for the holding of the convention even for the next few months. To which, it was then formally asked to the POA Board that the Midyear convention for the year 2020 be cancelled. It was also formally requested for the chapter to still be able to host the 2021 Midyear convention. We truly appreciate that the board has agreed with our requests. The raffle draw was also agreed upon to be postponed.

Due to the Pandemic Condition, the chapters’ application for SEC registration hit a pause.

April 2020, the members of the POA-NM chapter were already among the frontliners for Covid 19 in their respective areas. The fellows in Cagayan de Oro, especially those practicing in Northern Mindanao Medical Centre (NMMC), were really affected as their hospital was designated as the COVID 19 Referral Hospital for Region 10. At this time, we also received the info that the POA Board will be extending financial assistance to its chapters. In response to the immediate need in the ground, the officers of the chapter decided to initially release P50,000.00 (the equivalent sum to be given by the POA) from its own money. This was used to buy the much needed KN95 masks given to the NMMC- Department of Orthopaedics and to the rest of the staff of NMMC who are combatting COVID 19 for the rest of the region. A few weeks later, the money was received from the POA.

POA North Luzon Chapter...

By June 2020, the chapter met once more to discuss the details of the 2021 convention platform. It was decided to investigate and research on the possible platforms (in-venue or virtual). It was also noted and discussed during the meeting that some sponsors have asked for their money to be refunded. The money was eventually refunded to the sponsors. It was also asked upon the sponsors to pledge for sponsorship for the 2021 Midyear Convention.

Last August 2020, it was finally decided that the 2021 Midyear Convention will be done virtually. The scientific session previously prepared will be overhauled for changes that will adapt to the current pandemic. The virtual platform is still yet to be identified to seek for the most cost-effective provider or platform. Chapter members are still continually selling raffle tickets. It was also by this month that the POA has requested for nominees for the PBO Chapter Representatives to which the chapter has decided to nominate Dr Alexis Gutoc for the position.

As of now, we continue to scour possibilities during this period of uncertainty with a vision and goal in mind to uphold camaraderie service to our patients and our colleagues.

- PAUL JULIUS A. MEDINA, MD, FPOA
2020 POANMC President

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For the Fourth Quarter, the POANL is in for another webinar. This time, topics include Return to Clinics in Times of COVID and Maximizing Operative Treatment in Orthopedic Trauma in Times of COVID. The group is also planning to include in the said meeting, the election of new set of officers for 2021 and maybe even an Annual Christmas Party.

POA North Mindanao Chapter

POA North Luzon Chapter...

numbers etc. The group decided to revive the roles of the Provincial Coordinators, encourage the younger members with technical expertise to encourage other members to be more proactive in our duties as members of Philippine Orthopedic Association.

For the Fourth Quarter, the POANL is in for another webinar. This time, topics include Return to Clinics in Times of COVID and Maximizing Operative Treatment in Orthopedic Trauma in Times of COVID. The group is also planning to include in the said meeting, the election of new set of officers for 2021 and maybe even an Annual Christmas Party.

Hopefully, there will be a silver lining as the year comes to an end, and with great hopes and expectations, for a brighter and COVID Free 2021.

- ERWIN V. GUZMAN, MD, FPOA
2020 POANLC President

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The first half of the year 2020 has been a difficult time for everyone especially for the people in southern parts of Luzon. Taal Volcano eruption happened last January and its aftermath can still be felt until the early weeks of March.

This resulted to a huge number of displaced individuals and families fleeing their homes due to the danger that may occur anytime. Then the pandemic brought about by CoVID-19 suddenly took place affecting all healthcare workers including the Philippine Orthopaedic Association – South Luzon (POA-SL) members. Until today, everyone is coping with the new normal weather it be with their practice or attaining new knowledge through webinars.

AMIDST OUR TRYING TIMES: The officers of POA-SL held a relief operation for the residents of Taal Island who were relocated at Ibaan, Batangas last February 1, 2020. This project was headed by Dr. Ernesto Tenorio and Dr. Ramon Anatalio III, our president and vice-president, respectively.

The association was able to donate hygiene kits, food packs, blankets, and mosquito nets to almost 100 families living in the temporary shelters.

Volunteers from the ACC Physical Therapy Clinics which was led by the past president of POASL, Dr. Abundo Celera, also joined in this endeavor. They donated clothes and other basic necessities for the evacuees. This mission would not have been successful without the generous contributions from the members of the POA-SL, Philippine Orthopaedic Association (POA) National, industry partners and other kind-hearted individuals.

THE NEW NORMAL: Now that we are restarting from the effects of this pandemic, most of our knowledge comes from distance learning through webinars. “Orthopedic Clinical Guidelines During COVID-19”
POA WV Chapter

The chapter started the year 2020 on a high note as we inducted our new set of officers the day after Valentine’s day. It was a fun filled activity as we registered an all-time high attendance of approximately 50 orthopods with thirty (30) of them fellows of the association and the rest are residents coming from the 3 Orthopedic training hospitals of the region.

The activities included are lectures for the training residents, business meeting for fellows only, the actual induction ceremonies, and finally a fellowship night for all attendees. Dr. Christian Casamayor was the host of the lecture.

Focus on our business discussions were on our future hosting of our POA Midyear Convention and we are happy to say that our fellows are enthusiastic and are fully behind our association in hosting said event. Our induction ceremonies capped with the fellowship night was both solemn and a happy occasion as we celebrated at the rooftop of the Seda Hotel overlooking Iloilo city. Dr. Peter Bernardo Vice-President of our Philippine Orthopedic Association was recently held last September 11, 2020 in Malvar, Batangas last March 6-7, 2020.

On March 7, 2020, a hands-on workshop on basic wound care was given by the POA-Western Visayas Chapter working together with the Phil. Wound Care and Diabetic Limb Society at Bethel House Hotel, Dumaguete city.

This was a whole day affair and attended by more than 30 participants consisting of surgeons, physicians, nurses, and other paramedical personnel. The activities included lectures by Dr. Lucille Detoyato representing the POA-WV and Dr. Jay Asuncion for the PWCDLS and a hands-on workshop with Dr. Daryl Apla-on.

As Covid-19 ravaged the country on the 2nd quarter of this year, the chapter decided to postpone all chapter face to face meetings and resident’s activities which we usually do quarterly. Instead, we focused our campaign on distance learning by encouraging our fellows to attend the webinars hosted by the POA national and the various sub-specialty societies under the POA banner. We are forever grateful to them for the knowledge shared.

The chapter also focused on the health and safety of our fellows. With the donation coming from the POA-National, the chapter distributed personalized PPEs for all our active fellows. Logistics was a challenge but the PPEs eventually reached them. We are happy that as of the last update all of our fellows are Covid free.

The Chapter, represented by the President Dr. Raymund Quimpo, was also part of and attended the meeting last September 10, 2020 with the Department of Health Center for Health Development for Western Visayas (DOH CHD WV) in formulating the Health Interim Guidelines on Expanded Testing for Covid-19 which seeks to harmonize testing guidelines for the whole Western Visayas region.

- RAYMUND R. QUIMPO, MD, FPOA
  2020 POAWV Chapter President

POA CEVC Chapter

This year has been a very difficult year for everyone due to the COVID-19 crisis. Most of the chapter’s plans did not push thru. The following are the activities done this year:

July 29, 2020:
1st POA CEV chapter online gathering and journal presentation (in cooperation with GETZ Pharma)
- Lecture Title: Getting Into My Nerves
- Attendees: 42 POA members
- Other topics discussed:
  o October 2020 Elections
  o Appropriation of the 50,000 Php donation of POA national
  o Plans for 2020 and 2021
  o Revisiting the SEC documents of POA CEV chapter

We, from POA CEV chapter, would like to express our sincere gratitude for the cash aid and online lectures moderated and spear-headed by POA. This really helped us improve our knowledge while maintaining safety during the entire duration of the pandemic.

We hope to see everyone soon in the coming online POA annual meeting.

- PIERRE M. MELLA, MD, FPOA
  2020 POA – CEV Chapter President

POA South Luzon Chapter

was recently held last September 11, 2020 which was aimed to aid the members of POASL during their return to the new normal.

Induction of POASL Officers 2020

Prior to the spread of the corona virus and the eventual lockdown of the cities, the POASL were able to conduct their Annual Induction of Officers and their First Quarter Meeting in Lima Park Hotel in Malvar, Batangas last March 6-7, 2020. The event was attended by 52 out of the 113 active members from Laguna, Cavite, Batangas, Quezon, Bicol, Palawan and as far as Isabela. Dr. Paul Ruel Camina, President of POA, inducted the following officers:

President: Ernesto Tenorio Jr., MD
Vice President: Ramon Anatalio III, MD
Secretary: Roberto Gabriel Lopez, MD
Treasurer: Ariel Sandoval, MD
PRO: Marcelino Cadag, MD
Trustee: Michael Munoz, MD
Scientific Officer: Lendell John Gatchallian, MD
Ex-Officio: Joaquin Pandanan, MD
Advisers: Abundio Celera Jr., MD; Albert Faller Jr., MD

ROBERTO G. L. LOPEZ, MD, FPOA
2020 POASLC Secretary

From Page 11
AHSP Boosts H.A.W.A.K. Kamay for 2020

Last year’s Handog ang Wastong Alaga at Kaalaman sa (H.A.W.A.K) Kamay program of the Association of Hand Surgeons of the Philippines to reach out to the public came almost serendipitously to prepare the society to be present in a mostly online world. Early in the pandemic, the AHSP social media accounts were activated to announce its public service offerings to help lessen the anxiety of patients who need care for varying hand conditions. It has, since, provided relevant and well-appreciated advice to a good number of patients, most of whom were triaged to appropriate institutions or advised to wait things out.

Posts promoting hand health also reached a wide audience to prevent injuries and the adverse effects of staying at home.

Internally, the society was able to arrange a network to efficiently direct patients requiring subspecialty care to assists institutions who were getting overwhelmed with COVID cases.

The association also supported the brilliant effort of the Philippine Orthopedic Association to hold a series of webinars to help the residents and fellows learn and have fellowships from the comforts of their homes. Holding three well-attended sessions, the well-picked local and international faculty talked about evaluation of hand conditions using alternative platforms, performing common to complex surgeries under local anesthetics and dealing with difficult injuries during a pandemic.

To cap the year’s campaign, the society launched its official website (https://handsurgeons.ph) to help patients and colleagues to find hand surgeons anywhere in the country and connect with vetted specialists for their concerns.

As the country navigates these uncertain times, the society continues to find ways to reach more and help educate the public for a healthier and better-informed population.

- NATHANIEL S. ORILLAZA, MD, FPOA
  2019 and 2020 AHSP President

Managing Distress in Health Care Workers During COVID-19: Article on Page 21
PHKS: 2019-2020

Two years have come and gone full of challenges and unexpected events that have changed our lives.

Getting elected as president of the Philippine Hip and Knee Society (PHKS) last November 2018 was a challenge that I accepted with hesitation but with much resolve. Resolve to give the best to build on the gains of past officers for the growth of the society. Challenge to be able to deliver the expectations and the aspirations of the current Board.

My objective for the 2 years under my presidency was to strengthen PHKS activities such as quarterly meetings, postgraduate courses, roadshows and research forum. Templates that can be continued to be built and improved on by future officers of the society. The challenge is to make it worthwhile of our members’ time for learning and at the same time build the rapport and camaraderie.

Strengthening of social media presence to promote the society, members and activities to create public awareness of specialty doctors of the hip and knee as well as the field of arthroplasty was another goal that was aimed for and reached.

The lockdown that had been enforced during the past 7-8 months resulted to a gap in learning of the residents. PHKS responded with R.O.L.E. (Residents and Orthopods Lockdown Encounters) with the objective of bridging the learning gap of residents and consultants alike.

ROLE was conceptualized as a series of webinar lectures covering basic and highly specialized topics in hip reconstruction. Subsequently, this activity was adopted by POA and the other subspecialties.

I have been fortunate enough to have the support of my co-officers, members and of course my family to achieve the goals set despite the setback of the pandemic that affected the world.

Our time in this world is but borrowed. Effort and hope are not enough if not coupled with results and action. I hope that I have done justice to the 2 years that I have spent as President of PHKS.

Heartfelt thanks!

EDSEL F. ARANDIA, MD, FPOA
2019 and 2020 PHKS President

Pediatric Orthopaedic Society of the Philippines (POSP)

On behalf of the Pediatric Orthopaedic Society of the Philippines (POSP), I would like to congratulate the POA on this initiative to hold our Annual Convention under the New Normal in the face of this pandemic situation. For eight months, our very essential specialty has been held back by measures to control the disease much to the detriment of many of our patients. In the field of Pediatrics, since there are severe restrictions on children leaving their homes, we can only imagine the number of babies with clubfeet, DDH and the like that have gone undiagnosed and could not benefit from early intervention. There are also fractures that are neglected, osteomyelitis that is untreated and more seriously, pediatric tumors that are now in advanced stages. Our duty to our patients lies ahead of us.

But an important part of the mission of our society is the continuing training of our residents and the sharing of new knowledge and information with our peers. It is difficult to teach the feel of Ponsetti casting or the nuances of hip surgery over the internet and the rules against elective surgeries have made it hard for our trainees to learn the hands on skills that are a big part of Pediatric Orthopedics, but our Society has done its best with our webinars and zoom conferences to share as much as we can with the limitations. In this light, I would like to thank and recognize the different officers of the POSP: Drs. Dalo Sumpaico, Danny Dungca, Rotti Flores, Al Legaspi and Candice Lim as well as our members Julyn Aguilar, Aning Javier, Rey-An Garcia, Nesti Panopio, Giselle Gabriel and the rest of the membership across the country who have worked tirelessly to teach our colleagues as much as we can of our field of interest.

POSP will continue to support the POA most especially during these trying times.

- VICENTE GOMEZ, MD, FPOA, FPCS, POSNA
2020 POSP President
Tough Times for Tumors: Challenges in Orthopedic Oncologic Management during the CoViD Era

In the early months of The World’s Longest Lockdown, many Filipino patients found themselves in a conundrum: do they seek consult for their ailments, or do they avoid venturing out, even for hospital visits?

Among those with non-urgent orthopedic conditions, this was not a difficult choice to make. Elective orthopedic procedures are closely tied to economic status, and with local unemployment rates reaching a peak of 17.7% in April 2020, health-related spending was often shelved in favor of basic necessities.1 For cancer patients caught in the midst of the pandemic however, this decision could often mean the difference between long-term survival or an early death.

The direct impact of CoViD-19 on cancer care has been immense. Sudden disruptions in the global supply chain led to 26 oncology medications being put on the U.S. FDA’s drug shortage list in March 2020. In China, the case fatality rate for cancer patients was twice as high as overall reports, while in Italy as many as 20.3% of coronavirus-related deaths as high as overall reports, while in Italy as case fatality rate for cancer patients was twice as high as overall reports. For cancer patients caught in the midst of the pandemic however, this decision could often mean the difference between long-term survival or an early death.

PMTS members from over 15 different institutions had plenty of interesting experiences to share. East Avenue Medical Center, Jose Reyes Memorial Medical Center, and Philippine General Hospital were among the government institutions in Metro Manila hit hard and early by CoViD-19, having been identified as referral centers at the height of the pandemic. St. Luke’s Medical Center, Makati Medical Center and The Medical City were likewise caught up in the whirlwind, booked full-capacity as early as March due to the surge in private patients. While hospitals outside of Metro Manila had time to anticipate the arrival of CoViD cases, orthopedic oncologists based in Jose B. Lingad Memorial Regional Hospital, Baguio General Hospital, Vicente Sotto Memorial Medical Center, Chong Hua Hospital, Northern Mindanao Medical Center and Southern Philippines Medical Center still encountered their fair share of logistical - and at times political - issues. A significant decrease in tumor cases and difficulties in facilitating adjunctive While varied and unique, each institution’s case set of experiences could be summarized into two over-arching, inter-related issues: Misinformation and Logistics.

Social stigma, sub-optimal care - both received by the patients as well as provided by healthcare workers - and poor health-seeking behavior were reported by all centers. All of these stemmed from misinformation regarding the specifics of coronavirus disease pathophysiology and transmission, which in turn contributed to diagnostic and treatment delays. These led to convoluted admission/discharge protocols, complicated (but sometimes unnecessary, and more often costly) surgical preparations and decreased outpatient follow-up visits across the board. The end result for most of the centers were delayed surgeries, an increased conversion of limb-saving to ablative surgeries, and longer hospital stay.

In light of this current situation, the Philippine Orthopedic Center’s Musculoskeletal Tumor Unit (POC MTU) set up a virtual meeting together with the Philippine Musculoskeletal Tumor Society (PMTS), focused on discussing challenges in musculoskeletal (MSK) tumor management throughout the past eight months. The objectives were to identify barriers in the treatment of MSK tumor patients, increase awareness about new and existing limitations for health service delivery in cancer care, and discuss ways by which the society can address key issues raised.

One of several POC MTU patients received during Enhanced Community Quarantine. This patient was a 19yo male previously biopsied and due for chemotherapy at another institution in March 2020, but initiation was delayed for 3 months due to ECQ. The admitting diagnosis was osteosarcoma, left distal femur, St. III (multiple lung metastases). He was admitted as a CoViD suspect, underwent emergency hip disarticulation for tumor bleed on day 7 of admission, and expired due to complications from lung metastases by the 11th hospital day. Negative swab results were received day 3 post-demise, or what would have been the 14th hospital day.

The hard lockdowns in March and April brought with them a sudden halt in transportation, a spike in unemployment, and an unexpected shortage in specialty care facilities, with most resources being reallocated for CoViD response measures. For hospitals this meant a disruption in the supply chain, particularly for consumables and personal protective equipment. For patients, the quarantine series added further strain on their already-limited financial capacities. When combined, this translated to a near-collapse in health service delivery: in areas where availability of primary-level healthcare was lacking well before the lockdown, the logistic limitations resulting from the CoViD lockdowns made access to specialty cancer care and ancillary procedures virtually impossible. All of these issues taking place in the context of a nationwide blood shortage contributed further to delays in diagnosis and treatment, suboptimal care, and increased morbidity as well as mortality rates.
A Message from the PMTS President

The mountain glow ascends
Like hope’s first glimmer
Strength exists in trusting
That rebirth will soon arrive

The COVID-19 pandemic affected health care systems locally and globally as well which resulted in the interruption of usual care in almost all health facilities, exposing vulnerable patients with malignant tumors to significant risks. Unlike other usual orthopaedic problems, the musculoskeletal tumors do not have the luxury of time and there is some form of urgency in its treatment. Maintaining the level of care became a problem because of this pandemic. There were notable delays in both the diagnosis and treatment. The exact magnitude of what hit us should be determined with time and future systematic studies because there are different risks of harm, including issues related to cancer management and noncancer-related management of other medical conditions that affect patients with malignant tumors. The spectrum of cancer-related harm is wide and includes halting screening and prevention efforts, delaying timely diagnosis and staging of new patients, delaying initiation of therapy, delaying surgery, interrupting ongoing treatment, delivering suboptimal palliative care, and disrupting clinical research.

Lessons learned from this pandemic should be become an integral part of the new normal of health care. The integration of cancer care as a part of the institutional emergency preparedness plan will improve patient outcomes in similar crises. The cancer care continuum should have a major component of effectively managing patients during pandemics or major crises. Thus, we not only avoid harms in any future pandemic but also use the momentum gained from the current one to improve overall health care delivery for our patients and enhance the quality of care across borders by large-scale collaborations among cancer care stakeholders.

That rebirth will soon arrive……

- RAYMOND SILVERIO S. BARBA, MD, FPOA
2020 PMTS President

Tough Times for Tumors...

With all of this said, the society chose to focus on the most important goal for our subspecialty in the CoViD-era, which is to minimize setbacks and interruptions in cancer patient care. Given the inherent vulnerability of our oncologic patients, the body concluded that even in the absence of infection, special attention must be given to ensure access to treatment while reducing the risk of transmission.

With guidance from international governing bodies, the society came up with a set of recommendations during the first quarter of 2020 regarding surgical decision-making and chemotherapeutics. Updates are being considered, but these are among the most relevant to mention:

- Primary sarcomas without metastases should be prioritized for surgery
- If indicated, neoadjuvant chemotherapy and radiation therapy are to be used as bridging therapies to defer surgical intervention, if a patient is CoViD positive
- Immunotherapy should be paused if a patient is infected
- Virtual meetings should be held in place of physical / face-to-face meetings whenever possible
- Robust infection control, early identification and isolation of patients AND staff with symptoms/ exposure is a must
- Active referral system among PMTS members and Orthopedic Oncology units is essential for continuity of care

As restrictions ease and the economy restarts, the number of cancer patients arriving at palliative stage or with unsalvageable tumors continues to rise. This is of particular significance in a developing country such as ours, where the underprivileged and marginalized are often forced to choose between healthcare spending and putting food on the table. But from a larger perspective, cancer is one among many diseases with a heavy burden, that cannot be managed solely by an individual. Government measures to ensure that each individual has the capacity to access healthcare are key to making this happen, especially in a country wherein roughly 60% of the population falls below the poverty line.

The histories of most patients presented by each institution had many things in common with those of typical Filipinos. Many still ascribe to folk remedies. Most cannot afford regular trips to the doctor. Majority have problems completing timely diagnostic imaging. A lot of them arrive when it is too late. Hospital infrastructure and health service delivery have always been and continue to remain problematic. All of these however, were exacerbated by the pandemic. Things might be improving superficially, but we will never go back to “normal”.

From Page 15

The local public health system is flawed and it has to be fixed, but it will take a long while. When individuals come together with a common goal for good however, accomplishing challenging tasks becomes easier. As a society, this was perhaps the most important aspect of our approach to caring for our patients over the past 7 months: the existence of an encouraging, reliable, and evidence-driven group of subspecialists that allowed for inter-institution referrals across Orthopedic Oncology units nationwide. This relationship continues to be an indispensable part of continuity of care, and is a boon for musculoskeletal tumor patients in the country.

ABIGAIL R. TUD, MD-MBA, FPOA
PMTS Member

The year 2020 will be mainly remembered for the countless miseries, heartaches, sufferings and even death brought about by the COVID-19 pandemic. Our daily routine has been turned upside down and we are right now, still trying to cope with the “new normal”. The Philippine Orthopedic Trauma Society (POTS) was also not spared by the pandemic. Our annual convention and collaborations with other societies and organizations which required face to face gatherings had to be cancelled. In spite of these, one can not mistake the fact that the pandemic has also brought mankind some good. It has taught us to appreciate and care for mother earth more; to value our health above everything else; and also, to be practical and resilient in these trying times.

Due to the lockdowns at the start of the pandemic, our economy screeched to a halt, which may have resulted in fewer incidences of traumatic injuries during this period. However, the problem of fragility hip fractures plaguing the elderly population remained and this was recognized by the Philippine Orthopedic Trauma Society (POTS) early during the pandemic. As such, by April 2020, a few weeks after the pandemic was declared, POTS together with the Philippine Hip and Knee Society (PHKS) and the Philippine Orthopaedic Association (POA), gathered its members and came up with “Guidelines on Surgery for Fragility Hip Fractures During the COVID-19 Pandemic”. These guidelines were meant to help Orthopedic surgeons all over the Philippines properly manage geriatric fragility hip fractures based on current evidence and hopefully attain acceptable outcomes notwithstanding the chaos brought about by the pandemic on our healthcare system.

Still on the topic of Fragility Hip Fractures, last September 19, 2020, using the online platform provided by the POA Residents and Orthopods Lockdown Encounters (ROLE), POTS together with Fragility Fracture Network - Philippines (FFN-Phil) sponsored a webinar entitled: “Orthogeriatrics and the Acute Multidisciplinary Management of Fragility Hip Fractures”. The target audience for this webinar were not only Orthopedic surgeons, but also MD’s of other specialties, nurses, and other allied medical professionals who all are involved in the management of geriatrics patients with fragility hip fractures. An anesthesiologist (Dr. Lon Mangubat), a cardiologist (Dr Jose Magno) and a foreign Orthopedic surgeon (Prof. Matt Costa) who is the immediate past president of FFN-Global, were invited to share their expertise in the multidisciplinary care of fragility hip fracture. A pioneer in Philippine Geriatric Medicine, Dr. Shelley dela Vega, was also invited to react to the three speakers and at the same time, to give insights on the role of geriatricians in the care of elderly patients with fragility hip fractures. Even though the pandemic has suspended face to face gatherings like conventions, symposia and seminars, the POA provided a virtual platform that made continuing medical
POTS during the 2020...

As we near the year’s end with the pandemic still raging, the previous restrictions imposed by the government are slowly being loosened. Orthopedic traumatic cases are slowly on the rise once again, and we, the members of POTS, together with all the other Orthopedic surgeons in the country should be ready to provide appropriate and timely evidence-based care to these patients. I am confident that 2021 would still be a year of hope and promise. We went through a very difficult ordeal, learnt our lessons well, and survived 2020.

Since we are now more equipped to tackle the challenges of the time, we should face the coming year with renewed vigor and enthusiasm. Rest assured, POTS and its members will continue to support the POA and its constituents, and will also provide quality service its fellow countrymen as always.

- JOSEPH GARVY L. LAI, MD, FPOA
2019 and 2020 POTS President

Tsunami of Fragility Fractures

Taking up the Challenge: The Philippines needs to address the “tsunami of fragility fractures” that will go with rising osteoporosis prevalence amidst the pandemic.

Amidst the current health crisis that we are facing, the ONE-POA Orthogeriatric and Osteoporosis working group sees no reason why our country cannot bring solutions to the projected rapid growth of osteoporosis prevalence, and the resulting fragility fractures that it will bring.

At present, our country is not yet prepared to deal with the probable future increase in osteoporosis prevalence. This is partly due to the fact, that the understanding about osteoporosis is still very superficial in our country and our health system has yet to fully address the disease burden which it causes. To compound this problem, there is no quality data on osteoporosis and fragility fractures in our country.

With no clear indication that the new Universal Health Care system will cover fragility fracture management or include osteoporosis treatments in the national formulary, efforts are being made to address these challenges. During the second half of the year, ONE-POA has supported the efforts of other societies in promoting awareness about osteoporosis and fragility fractures namely:

1. The Philippine Orthopedic Trauma Society (POTS) and Fragility Fracture Network -Philippines webinar entitled “Orthogeriatrics and the Acute Multidisciplinary Management of Fragility Hip Fractures” held last 19th of September.
2. The Osteoporosis Society of the Philippines Inc. (OSPFI) 22nd Annual Convention four-part webinar series entitled “Virtual Vignettes in Osteoporosis” held last 5th, 12th, 19th and 25th of October.
3. The University of the Philippines-Philippine General Hospital’s 2020 World Osteoporosis Day Celebration webinar entitled “Pushing Forward the Fracture Liaison Service (FLS) Programs during the Pandemic” held last 20th of October, which was also endorsed by the International Osteoporosis Foundation (IOF).
4. The Fragility Fracture Network (FFN) Asia-Pacific Virtual Regional Experts Meeting held last 24th-25th October.
5. The on-going multidisciplinary research project about Orthogeriatrics entitled “Improving the Multidisciplinary Orthogeriatric Care of Fragility Hip Fracture Patients During the COVID-19 Pandemic: A Multi-center Experience from a Country with an Emerging Economy” initiated by the UP-PGH Orthogeriatric and Fracture Liaison Service, and joined by 12 hospitals/ institutions to the date of this writing.

In general, the interest of various societies in the Philippines in the FLS program, including the concept of orthogeriatrics, has been ignited. Slowly, professional associations and organizations are starting to realize the importance of addressing the problems of osteoporosis and fragility fractures. The bigger challenge, however, is how to improve and sustain this interest, given that no formal funding has been allocated for such programs in our country to date.

At present, there are six FLS programs in our country that are registered in the IOF’s Global “Capture the Fracture” Map. Out of the six, only two have been assessed with a Best Practice Framework badge of excellence, with the Philippine Orthopedic Center being awarded with a silver star, and the UP-PGH Orthogeriatric-FLS with a bronze star.

Moving forward, the next step in improving osteoporosis care in general should be to engage law and policy makers, and convince them of the benefits of the FLS programs and Orthogeriatric services in terms of delivering efficient care to patients with osteoporosis and fragility fractures. And with the help of international colleagues from the FFN and the IOF, we are on the brink of making a major leap in terms of advancing our country's osteoporosis programs.

Looking ahead, we are hoping to start a globally aligned expanded multi-center research project that will not only increase Orthogeriatric services and FLS programs in our country, but will also create a fragility hip fracture and osteoporosis registry. When it comes to osteoporosis and fragility fractures, there is nowhere to go but up for the Philippines.

- IREWIN A. TABU MD, FPOA
Head, ONE POA Orthogeriatric and Osteoporosis Working Group
In these trying times, it is worth sharing this quote from Thomas Jefferson:

“The most fortunate of us all in our journey through life frequently meet with calamities and misfortunes which greatly afflicts us. To fortify our minds against the attacks of these calamities and misfortunes should be one of the principal studies and endeavors of our lives.”

The Philippine Spine Society has done exactly this—fortifying the principles and bonds among its members. It is no wonder then that after 25 years, the Society has stood the test of time, and emerge ready to meet these challenges.

Since its inception on 17 November 1995, when 15 pioneering orthopaedic surgeons and neurosurgeons founded the Society, the group has stayed true to its passion and actively cultivated its commitment to quality spine care and accessible service, allowing it not only to hurdle every obstacle but also to grow into a robust and active membership currently 108- strong. Through the membership's continuous hard work, the Society's common beliefs and shared principles of transparency, responsibility, accountability, inclusiveness, teamwork, and service (TRAITS) continue to live on and attract new talent to the fold. And with its new talented surgeons that has joined the Society has been able to live up to its commitment, to evolve and innovate in order to address whatever challenge is brought to the fore.

Thanks to its active, unassuming and hardworking members, the Society has been well equipped to meet the challenges posed by the COVID-19 pandemic, as seen in the following highlights of the Society's activities before, during and beyond the Covid 19 crisis.

To end, let me quote George Kell, who enumerates four lessons we should learn from this pandemic:

1. Human history and natural history can no longer be separated.
2. Prevention is better than cure—we must learn to listen to science
3. Global threats need global collaboration
4. The pivotal role of the private sector

The pandemic teaches us that human health, economic wellbeing, and natural environment are deeply connected. Let us seize this opportunity to rediscover our common humanity and the values that bond us with mother nature and with each other. Guided by this respect for our common future, we can rest assured that Philippine Spine Society will continue to actively participate in whatever manner we can, to fight and defeat this pandemic crisis. We will hold our line together as we face more complex challenges during these modern times, enriched by the wisdom and time-tested traditions of the past while we welcome the future with great hope as we embrace the creative ideas of the younger generation.

Let us also never forget our comrades in the white coat, those who were afflicted and who have perished as well as our health care workers and front liners who remain unyielding in the face of adversity. It is for their heroism that Aristotle spoke when he said: “The wise man does not expose...
Lockdown was never a hindrance for the new society as they continued to acquire new knowledge through webinars. Monthly webinars were scheduled starting May 2020 with international and local speakers giving lectures about their field of expertise. Almost 100-150 participants registered and listened during the 2-hour sessions.

-ROBERTO GABRIEL L. LOPEZ, MD, FPOA
2020 POWCDLS Treasurer
ASAMI Philippines
The Association for the Study and Application of the Methods of Ilizarov in the Philippines (ASAMI Philippines) has been in the forefront of promoting the principles of bone regeneration, external fixation and limb reconstruction since it was formally recognized by the POA in 2002. Every year, without fail since its inception, it has conducted an annual Basic Course and Hands-on Workshop on the Ilizarov Method in partnership with the Department of Orthopaedics of the UP-PGH. For the past 17 years, under the leadership of its founding president, Dr. Juanito Javier, the recognition of the subspecialty has been recognized in its ability to provide a viable option for numerous, very difficult, orthopedic cases.

In November 2019, during the POA Annual convention, the leadership of the ASAMI Philippines was passed to Dr. Daniel Dungca. An organizational meeting was done during the first quarter of the year with the new set of officers. Among the initiatives that were pushed was the formalization and continuation of the partnership with the UP-PGH Department of Orthopaedics for the conduct of the Annual course. A more active approach to case reporting and research was also pushed, with the goal of having local papers presented and published internationally. An ASAMI Fellowship Program was also initially discussed.

Then the pandemic struck.

With the suspension of elective surgeries implemented in the country, there was an initial drastic drop in the number of Ilizarov surgeries performed by all the members. The education initiatives of the organization were also initially put on hold. As everybody started to figure out the proper responses to the situation, so too did to our group. We actively participated in the ROLE Webinar series of the POA with three well-attended sessions. Anticipating that there would be a lot of orthopedic cases that will be neglected because of the current situation, the first webinar focused on the options for nonunion of fractures. The second webinar focused on cases performed around the country that showcased the different applications as well as the latest innovations for the subspecialty. The third webinar emphasized the need for proper post-operative care, emphasizing that Ilizarov surgery does not end once the patient leaves the operating room.

As the pandemic situation became more manageable, several ASAMI members have started to perform elective Ilizarov surgeries in their centers, observing proper precautions such as pre-operative screening for SARS Cov 2, as well as the use of PPEs. Most cases being performed at this time would be, as anticipated, those who were affected by the suspension of elective surgeries. Hence, majority of cases are those of non-union, limb deformities and infection and its sequelae. Hence, these will be the topics that will be covered by our subspecialty session during the POA Annual Convention this year.

The pandemic has taught us how to adapt to a difficult situation. The officers and members of the ASAMI Philippines have always been called upon when difficult orthopaedic cases are encountered. We shall continue to adapt and face these challenging situations whenever and wherever our subspecialty is needed by our countrymen.

- DANIEL V. DUNGCA, MD, FPOA
2020 ASAMI Philippines President

Managing Distress in Health Care Workers During COVID-19:
Lessons From a Disaster Trauma Lens
October 19, 2020
Gertie Quitangon, MD
Volume 37
PSYCHIATRIC TIMES

We have learned that in order to provide much-needed social support during difficult times, organizations should prepare to take certain steps.

Coronavirus disease 2019 (COVID-19) blindsided the world. It exposed gaps in public health emergency planning at every level, including in the strategic planning to support mental health and wellness. Studies of the SARS and Ebola epidemics as well as natural disasters have taught us lessons about the importance of planning for and responding to the mental health needs of health care and frontline workers.

Thus, this is a pivotal moment, a chance to implement systems and structures for staff support in every organization and advance staff wellness and resilience initiatives.

Disaster literature

The literature on disasters and public health emergencies describes pervasive emotional distress, feelings of extreme vulnerability, uncertainty, and threats to life, particularly during the rapid spread of an outbreak. A recent COVID-19 web-based survey supports this finding. More than 40% of respondents reported symptoms of depression, anxiety, traumatic stress, substance use, and suicidal ideation. Symptoms were notably elevated in black and Hispanic individuals, essential workers, unpaid adult caregivers, and those...
Managing Distress...

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with psychiatric conditions. Fortunately, evidence from disaster trauma research has shown that, ultimately, most people are resilient even after the most severe traumatic event. In the immediate aftermath of large-scale catastrophes, a majority of negative mental health symptoms are recognized as distress reactions to intense and overwhelming events. They are not pathologized or labeled psychiatric disorders. The disaster literature emphasizes the importance of acknowledging the normality of distress reactions, identifying high-risk populations, promoting effective coping and adaptation strategies, and encouraging overall wellness and resilience. Disaster mental health assistance during the acute phase is often more practical than psychological in nature. In this case, such assistance includes Centers for Disease Control information and updates, access to food and cleaning supplies, access to COVID-19 testing, protective equipment, financial assistance, and links to community resources.

After the acute phase of the disaster, long-term stress responses can emerge. Lancee et al. found that 2 years after the SARS outbreak, health care workers who treated these patients had elevated rates of smoking and drinking, absenteeism due to stress or illness, decreased face-to-face contact with patients, and decreased work hours. Yet rates of depression, posttraumatic stress disorder, and other mental illness were not elevated. This is consistent with existing research, which has found that the long-term impact of massive disasters is predominantly in the range of subsyndromal stress responses rather than an increase in psychiatric morbidity. Limited long-term studies suggest that post-disaster symptomatology peaks in the first year and then declines, but the course of recovery is variable. The challenge for mental health clinicians is to distinguish normal distress reactions to catastrophes from exacerbation of existing mental health susceptibilities or new-onset disaster-related pathology.

Disaster trauma is characterized by exposure to personal loss and community disruption. Cultural, political, and socioeconomic factors all influence the shared experience of major disasters. Looking through a disaster trauma lens, a better understanding of the emotional stages of public reaction can help anticipate community responses.
2020 looked like a good year as POSSM started preparing for our combined meeting of POA/ASSA/POSSM on November 18-21, 2020, wherein Orthopedic Sports Medicine and Traumatology will be the main theme. We decided to cancel our annual POSSM meeting which happens every year on the 2nd Saturday of August, to concentrate on this big event. We were able to get the commitment of Prof. Freddie Fu, as our Keynote Speaker, and the following notable international speakers:

- John Bartlett (ASSA Godfather, Australia)
- Ryosuke Kuroda, MD (Japan)
- Karl Erricson, MD (Sweden)
- Sachin Tapasvi, MD (India)
- Alan Getgood, MD (Canada)
- ASSA FACULTY (Chanakarn Phornphutkul, Bancha Chern Denny Lie, Dave Lee, Lingaraj Krishna, Andrew Dutton, Andi Lubis, Andre Pontoh, Febry Siswanto, Bobby Nelan, Charanjeet Singh, Asri Ghapar, Hisham Masdar, Tang Nam Anh)
- PShS FACULTY (Joo Han Oh, MD)

During the process of our preparation, the POA Board was also considering on getting Medical Conference Partners, an events/scientific program organizer based in Kuala Lumpur to handle the event. This organization has been working with ASSA (ASEAN Society for Sports Medicine) since 2012 and has been covering international meetings, not only in the field of Orthopedics, but in other specialties. Getting them on board would make it easier for the organizing committee with their work as they would guide them every step of the way and would make the meeting world class with 5-star quality.

Everything was going well, until the Covid-19 pandemic happened. Everything was put on hold for a couple of months because of uncertainty, until the ASSA Board had a general meeting on April 28, 2020 and decided to postpone the big event to next year together still with POA. God willing, everything would be normal by then.

POSSM started the year with our usual 1st quarter meeting (January 16, 2020) with the sponsorship of Menarini. It was held at their Head Office. We had a good turnout with 75 attendees (consultants, residents, and few fellows) despite the weekday rush hour. Three institutions, namely SLMC, MMC, and DLSMMC presented their respective special topics/cases.

Our 2nd quarter meeting was delayed and was quite different since we were already going on the 3rd month of the pandemic. We had our 1st Zoom meeting on May 11, 2020. We had very good attendance at 100. We were limited to this number because our zoom account was just basic so we could have had more. The institutions that presented their special topics/cases were TMC, PGH, and JRMMC.

POSSM also had a POA Webinar last June 13, 2020 and was sponsored by Mylan. Dr. Ruffy Jurilla and Dr. Tony San Juan had very good lectures on how to cope with the present pandemic times. Around 230 people joined our meeting from different institutions and consultants from all over from different specialties, not just sports. This was a fun night and was quite interactive. Chong Hua Hospital presented their special topic at the end. It was another successful night for POSSM.

Our 3rd quarterly meeting was held last July 15, 2020. This time it was a Webinar type of session c/o the POA and was sponsored by Menarini again. Attendance was also at the 200+ mark. We had different special topics from POC, UST, and EAMC. It wasn’t as interactive this time since people had to type their questions and we had a bit of technical problems. Nevertheless, the session still ended well and went overtime like all the other times.

- POSSM was also supposed to have a series on Sports Injuries but we opted to postpone it for now since we all feel that we are getting overwhelmed with the numerous webinars left and right from the international and local societies and associations.

To sum up our year in POSSM, despite the pandemic happening everywhere, life still goes on and we are still here to help our patients get better, teach our residents the best way we can to make them the best that they can possible be, to make them learn from our experiences and not to make the same mistakes, and to help one another especially in this time of crisis. This is the best time to unwind and appreciate everything what we have, set our priorities right and know what the important things in our lives are. Stay safe everyone and see you all at the Annual POA this November.

- ENRIQUE LEONARDO C. PASION, MD, FPOA 2019 and 2020 POSSM President

Managing Distress...

To large-scale catastrophic events (Figure 1), identify the changing goals of recovery at different phases (Figure 2), and inform mitigation strategies. It is important to note that the timing of the phases is fluid. They do not occur in an exact sequence. Phases can overlap and move forward or back across a timeline, depending on the type of disaster. Figure 1 depicts the stages of public reactions to natural disasters like 2012’s Hurricane Sandy and even the 9/11 terrorist attacks in 2001, but the community response to a pandemic seems more unpredictable. The immediate COVID-19 experience in New York was quite different from the events that followed the September 11th terrorist attacks in 2001. The COVID-19 pandemic was worst among people of all ages, in all parts of the country, and in all economic circumstances. It was a big challenge for everyone, and the pandemic is still not over.

Figure 1. Psychological Phases of Disaster

- Pre-disaster
- Warning
- Impact
- Rebound
- Rebuilding

Managing Distress...

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The year 2020 started with a bang... literally! As the clouds barely cleared over our heads, especially to our fellow orthopods down South, another - more sinister event was about to take place. One that stops the whole world and will change the way everyone lives.

The Philippine Shoulder Society kicked off the year with our first quarter meeting in January, hosted by the De La Salle University Orthopaedic Department. Special cases and journal reports were Presented by Orthopaedic residents from DLSU-MC, Makati Medical Center, and St. Luke’s Medical Center; and plans on creating a Shoulder Fellowship Program was also suggested and discussed. Things went on, never knowing that the succeeding quarterly meetings were to be held online.

The looming uncertainty dragged on, until strict lockdown measures were implemented in mid-March, putting our daily activities to a halt. Instead of being idle, the Society shouldered on! Regular activities were continued such as our quarterly meetings, and an ambitious webinar series, albeit onerous, was enthusiastically being drawn up.

Online activities, with the help of the Philippine Orthopaedic Association’s (POA) platform, made quarterly meetings on-schedule. The second quarterly meeting was held on June 10, 2020 with Chong Hua Hospital, University of Sto. Tomas, and University of the Philippines, presenting journals and cases. And our third quarterly meeting presented two different ways of operatively managing acromioclavicular injuries by the Philippine Orthopaedic Center and from Jose R. Reyes Memorial Medical Center, while V Luna Medical Center presented an interesting case of a high velocity injury on the shoulder and upper extremity.

The Philippine Shoulder Society delivered to our local colleagues and international colleagues, a world-class “Shoulder Series Webinar” during the month of August. Renowned speakers, with thousands of journals, prints and presentations under their names, were gathered together in these series of lectures. These are the authors of shoulder topics, that somehow, affected the way shoulder specialty is being practiced. Not to be outdone, we also featured 2 local lecturers during our “trauma day” which had the most number of local attendees.

Dr. Neal Millar from Glasgow, Scotland, began the series, sharing his years of research on tendinopathies. On day 2, Prof. George AC Murrell, MD, PhD of Australia, presented 2 lectures on how to help rotator cuff repairs heal, and presented outcomes of adhesive capsulitis surgery. The webinar with local speakers dealing with trauma delivered the most attendance during this series. Dr. Angelo Apalisoc proposed her “ESIN it amazing” way of managing clavicle fractures, and Dr. Jay Asuncion showed his methods of minimally invasive surgery for proximal humerus fractures, on the third day of the series. The 4th of the series brought us Prof Hiroyuki Sugaya from Japan, who granted us his practice decisions when dealing with shoulder instability complicated by bone loss, and from USA, Dr. Andrew Neviaser dealt with the controversies of the proximal biceps. Last but not the least, Prof. Alessandro Cartagena of Italy afforded us some time during his vacation in his yacht in Greece, to show his invention for implantless rotator cuff repair, and his experience to approach shoulder instability not based on the results of diagnostic tests, but to manage them as clinical entities.

We are proud to declare that the Shoulder Series Webinar had the seal of approval from the International Society of Arthroscopy, Knee Surgery, and Orthopaedics Sports Medicine (ISAKOS).

The Philippine Shoulder Society is devoted to the advancement of the science of diagnosis and management of shoulder conditions and disorders. The society continues to be the forum for presentation, discussion and sharing of ideas relating to shoulder maladies. Studies and research will be at the forefront. Accordingly, we plan to launch a shoulder registry for all shoulder procedures in the country, and soon, a formal, recognized shoulder fellowship program overseen by POA shoulder fellows.
Managing Distress...

York state in the spring of 2020 was marked by safety concerns, deaths in the thousands, food and job insecurity, financial hardships, and anger at government response. We do, however, see a heroic phase exemplified by the emergence of heroes, such as Anthony Fauci, MD, on the national level and Governor Andrew Cuomo in New York state. We then witnessed community cohesion typical of the honeymoon phase as New Yorkers connected with each other from stoops, windows, terraces, and rooftops, all cheering for frontline workers at 7:00 PM each night to show gratitude and appreciation.

New York successfully flattened the curve by the summer. The number of daily deaths fell dramatically, from a high of nearly 800 per day across the state down to none in New York City by June. Now the focus is shifting to economic recovery, while keeping community viral transmission low and bracing for a potential second wave. This could be the beginning of the reconstruction phase: figuring out a new normal and how to live with a persisting virus. Disillusionment is certainly felt when other states are unable to control the virus, in spite of the availability of immense resources and clear and concrete directions from world-class health experts to wear masks, avoid crowds, maintain social distance, and wash hands.

Supporting staff

Studies indicate that during an infectious disease outbreak, the operational response of an organization is likely the single most important factor influencing staff perception of both stress and safety. Traumatic events can disrupt feelings of safety, trust, control, esteem, and intimacy. As a result, staff can exhibit maladaptive behaviors or experience traumatic stress symptoms. Best practices to mitigate the disruptions and support staff during a pandemic involve 4 key elements: leadership, communication, education, and social support.

LEADERSHIP. Strong leadership and supportive teams influenced the resilience of health care workers during the SARS and Ebola outbreaks. Capable and effective leadership over the course of a major disaster makes staff feel safe and supported by the organization. Best practices include:

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Figure 2. Changing Goals of Recovery at Different Phases of Disaster**

<table>
<thead>
<tr>
<th>PREDISASTER</th>
<th>HEROIC</th>
<th>HONEYMOON COMMUNITY RECOVERY</th>
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<tr>
<td>DISILLUSIONMENT</td>
<td>RECONSTRUCTION</td>
<td>A NEW BEGINNING</td>
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**Trigger events and anniversary reactions

1 TO 3 DAYS

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<th>ACUTE PHASE</th>
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<td>on-ground evacuation</td>
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1 TO 3 YEARS

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**Note: The above figure is a visual representation of the different phases of disaster recovery and the corresponding goals of recovery. It illustrates how goals may change over time and how different phases of disaster recovery may require different types of support and resources. The figure includes trigger events and anniversary reactions that can occur during these phases, highlighting the importance of ongoing support and awareness of potential challenges.**

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MANAGING DISTRESS...

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- Visible and prepared leaders at organizational, departmental, and team levels.
- Setting the tone for a positive and supportive organizational culture.
- Skilled assessment of team strengths and weaknesses.
- Proactive outreach and crisis support from all levels of leadership.
- Creativity and innovation in increasing staff resilience and reducing stress.
- Role modeling infection control and safety practices—wear masks, practice physical distancing, and wash your hands.

COMMUNICATION. The cornerstone of infectious disease management is communication, coordination, and collaboration.14 Delivery of clear, transparent, timely, trustworthy information in a rapidly evolving situation is essential.

Organizations should be prepared to:
- Acknowledge and normalize feelings of anxiety related to the pandemic.
- Communicate efforts to address the negative impacts of the pandemic, including financial concerns.
- Communicate supportive organizational practices (e.g., working from home, flexible work schedule, reduced hours, job rotation, location rotation, availability of PPE, testing).
- Widely disseminate available self-care and wellness information and resources.

EDUCATION. Training and education on the issues of infection control, disaster mental health, and the disaster response system increases confidence and moderates the risk of stress. Just as Federal Emergency Management Agency (FEMA) provides appropriate resources and training for disaster responders before deployment, organizations have a responsibility to provide education and training to better prepare for and respond to a pandemic. Organizations should be prepared to offer staff:
- General information on disasters and pandemics.
- Education on infection control and universal precautions.
- Overview of disaster mental health.
- Targeted education on key sources of distress from COVID-19 (e.g., quarantine-related distress, fear of contagion, concern for family, job stress, financial concerns, interpersonal isolation, stigma).

SOCIAL SUPPORT. Studies indicate that social support, both personal and professional, is a consistent protective factor and a strong mitigator of emotional distress in the wake of a massive disaster.15,16 Unfortunately, the battle against COVID-19 calls for decreased interpersonal contact. Quarantine, physical distancing, and remote and virtual work have all increased social isolation. This unprecedented public health crisis requires creativity and innovation to restore a sense of community and connectedness. In order to provide much-needed social support during difficult times, organizations should prepare to:
- Hold virtual meetings and virtual lunch/coffee breaks/happy hours to improve team cohesion and morale.
- Build in formal time during work hours for peer consultation to reduce feelings of isolation and increase feelings of efficacy.
- Use in-person or virtual service meetings and huddles to build relationships and improve responsiveness.
- Establish buddy system to check and balance each other’s stress level.
- Widely disseminate available self-care, stress management, and mental health resources.
- Develop and offer virtual programs to provide ongoing support and connection.
- Encourage and facilitate social connection through virtual and remote activities.
- Foster a culture of support, collaboration, and resilience.

The scarcity of existing research on staff support and mitigation strategies during pandemics presents an opportunity to develop new programs that can be tailored to specific organizational contexts and cultures. Evaluation of best practices and robust analysis of the impact and sustainability of staff support plans during COVID-19 can inform future strategic planning and policy recommendations for staff wellness and resilience.

Dr. Quitangon is clinical assistant professor of psychiatry, New York University School of Medicine and psychiatrist at the Department of Veterans Affairs New York Harbor. Dr. Quitangon discloses that she receives royalties from Routledge for her book Vicarious Trauma and Disaster Mental Health: Understanding Risks and Promoting Resilience.

She graduated from the University of The East Ramon Magsaysay Memorial Medical Center College of Med in 1992. She works in New York and specializes in Psychiatry and has been practicing for more than 20 years.

Acknowledgement — The author wishes to acknowledge Mary Docherty, MA, MBBS (Hons), MRCP, MRCPsych, for her work in planning and development of the COVID-19 staff support response at St Thomas’ Hospital and King’s College Hospital in London, England.

References

Featured PBO Accredited Training Institution

UP- PGH Department of ORTHOPEDICS Celebrates its GOLDEN YEAR!!!!

The Department of Orthopedics UP-PGH will celebrate its Golden Year next year 2021 with the theme “From Rocks to Pillars- 50 Years of Unity, Pioneering, Professionalism for the Glory and Honor in Orthopedics [UP-PGH]”. Despite the pandemic, the organizing committee has planned several activities to commemorate this momentous occasion. This includes Orthorocks 8, Acta Medica Journal Orthopedic Issue, Grand Ball or reunion [online], launching of a coffee table book, and a Manual of Orthopedic Emergencies.

Brief History:
On June 22, 1971, the Department of Orthopedics was created by virtue of a resolution passed by the UP Board of Regents during its 810th meeting. Before this date, Orthopedics was just a section under the Department of Surgery, with Dr. Ambrosio F. Tangco serving as the section head. When Dr. Tangco was appointed as a member of the UP Board of Regents, Dr. Manuel T. Rivera took over as section head. The appointment of Dr. Tangco to the Board of Regents would prove providential for it was through his efforts that the creation of Department of Orthopedics was approved unanimously.

Dr. Ambrosio F. Tangco
The department started its formal organization as a separate unit of the Philippine General Hospital and the UP College of Medicine on October 12, 1971. The physical plant consisted of 33 beds in Ward 19, 8 beds in Ward 8 for female orthopedic patients and 2 beds in the Pediatric ward. There were 2 operating rooms at the OR complex given for the exclusive use of orthopedic patients. There was a makeshift outpatient clinic at the Cancer Institute and emergency cases were managed in Wards 7 and 9.

Dr. Jose V. Silao, Jr., was named as the first department chairman, with Dr. Manuel T. Rivera, Dr. Rafael S. Recto, Jr. and Dr. Richard Ow-Abayang as consultant...
members of the staff. In 1972, Dr. Napoleon M. Apolinario was recruited to join the staff and became the Executive Officer. The first batch of orthopedic residents included Dr. Ellewellyn G. Pasion, who became the first chief resident, Dr. Antonio M. Montalban, Dr. Arturo Quiazon, and Dr. Emilio B. Cadayona.

With Dr. Silao at the helm, the basic foundation of the department was established and fast-tracked. A 5-year development plan was aimed at 1) developing the physical facilities, 2) forming a teaching and training program, 3) improving patient care and services and 4) faculty development. By the end of the second year, half of these goals were already achieved.

In July 1972, through the benevolence of the Philippine Charity Sweepstakes Office (PCSO), construction began for an orthopedic outpatient services building which was completed in November of the same year. The building housed an outpatient clinic, a 12-bed pediatric orthopedic ward, a cast room, an x-ray and dark room and a medical records room. Later, a Brace and Prosthetic Shop was incorporated.

Through Dr. Silao’s visionary spirit, faculty development was fast tracked, too. Graduates of the 4-year residency program were sent for various fellowships in the United Kingdom, West Germany, France, Denmark, Hongkong, Singapore and Japan. This was instrumental in establishing the different orthopedic subspecialties in the department. Resident graduates were also sent to Minnesota, USA, through its esteemed Chairman, Dr Ramon B. Gustilo at Hennepin County Medical Center for arthroplasty training.

The Spine Unit and Orthopedic Learning Center, which was completed in 2003 is a 4-storey building where a spine ward, a conference room, the department offices, a tissue and bone bank, a biomechanical laboratory, a library, and a microsurgical laboratory are all housed. All the offices of the different sections and services are also located here.

From its modest and humble beginnings, the Department of Orthopedics has seen tremendous growth and development in the last 49 years and has participated actively in the orthopedic education and training and research on a national and international scale. It has produced 196 graduates of the residency training program, with a sizable number of graduates becoming leaders and educators in their respective places of practice. The alumni have also been actively participating in the POA, and PBO nationally, and various associations/societies like the AOA, APOA, AAA, ASSA, among others internationally. The department has currently 5 divisions (Adult Orthopedics, Trauma, Spine, Pediatric Orthopedics and Hand) and 5 services (Musculoskeletal Tumor Service, Ilizarov and Limb Deformity, Microvascular and Replantation Service, Sports Medicine Service and Arthroplasty Service). Fellowship programs have also been offered in Arthroplasty, Hand, Ilizarov, and Musculoskeletal Tumor.


- PETER B. BERNARDO, MD, FPOA & CESAR L. DIMAYUGA, MD, FPOA
## Residents and Orthopods Lockdown Encounters (ROLE)

<table>
<thead>
<tr>
<th>Date/ Time</th>
<th>Title</th>
<th>Topic/s</th>
<th>Lecturer/s</th>
<th>Host Subspecialty Society/ Chapter</th>
</tr>
</thead>
<tbody>
<tr>
<td>May 7</td>
<td>POFAS Quarterly Meeting</td>
<td>Ankle and Hindfoot Trauma</td>
<td>CLMM Regional Hospital</td>
<td>POFAS</td>
</tr>
<tr>
<td>May 11</td>
<td>POSSM 2nd Quarterly Meeting</td>
<td>Interesting Cases on Sports Medicine or Arthroscopy</td>
<td>PGH/TMC/JRMMC</td>
<td>POSSM</td>
</tr>
<tr>
<td>May 20, 8-9pm</td>
<td>PHKS ROLE Online #1</td>
<td>Perioperative Management in THA</td>
<td>Villamin/Syquia/Cadag</td>
<td>PHKS/POA</td>
</tr>
<tr>
<td>May 23, 8-9pm</td>
<td>PHKS ROLE Online #2</td>
<td>Overview of Surgical Approaches in THA</td>
<td>Arandia/Tabberrah/San Juan</td>
<td>PHKS/POA</td>
</tr>
<tr>
<td>May 26, 8-9pm</td>
<td>PHKS ROLE Online #3</td>
<td>Performing THA</td>
<td>Lim/Valenzuela/Kokseng</td>
<td>PHKS/POA</td>
</tr>
<tr>
<td>May 29, 10am-12nn</td>
<td>POWCDLS Webinar</td>
<td>Advanced Wound Care in Times of Covid/Quarantine; PPE Related Injuries: Skin at Risk</td>
<td>Dr. Roberto Lopez/Dr. Divya Panicker</td>
<td>POWCDLS</td>
</tr>
<tr>
<td>May 29, 8-9pm</td>
<td>PHKS ROLE Online #4</td>
<td>Avoidance and Treatment of Complications</td>
<td>San Juan/Guloy/Paner</td>
<td>PHKS/POA</td>
</tr>
<tr>
<td>May 29, 10-12pm</td>
<td>POWCDLS Webinar</td>
<td>Advanced Wound Care in Times of Covid/Quarantine; PPE Related Injuries: Skin at Risk</td>
<td>Lopez/ Panicker</td>
<td>POWCDLS</td>
</tr>
<tr>
<td>June 2, 8-9pm</td>
<td>PHKS ROLE Online #5</td>
<td>Complex THA</td>
<td>Tanchuling/Taba/Monicit</td>
<td>PHKS/POA</td>
</tr>
<tr>
<td>June 10, 7pm-9pm</td>
<td>PSHS 2nd Quarter Meeting</td>
<td>Journals/Interesting cases</td>
<td>Chong Hua Hospital/UP/UST</td>
<td>PSHS</td>
</tr>
<tr>
<td>June 13, 8-9pm</td>
<td>POSSM Webinar</td>
<td>How to cope with Covid-19 in our practice (Resuming clinic, Telemedicine, EMR)</td>
<td>Jurilla, San Juan, special topic by Chong Hua</td>
<td>POSSM</td>
</tr>
<tr>
<td>June 18, 7pm-8pm</td>
<td>ASAMI Webinar</td>
<td>Options for Management for Nonunion</td>
<td>Cosette Atutubo/ Cielo Balce</td>
<td>ASAMI</td>
</tr>
<tr>
<td>June 19, 7-8pm</td>
<td>PSOWOSI</td>
<td>Recommendations &amp; Practical Application of covid-19 Guidelines to Ensure Clinic Safety for you and your patients</td>
<td>Dr. Cristobal C. Dumo</td>
<td>PSOWOSI</td>
</tr>
<tr>
<td>June 24, 7-9 pm</td>
<td>POWCDLS</td>
<td>Pressure ulcer in times of COVID-is it any different? Updates and Practice</td>
<td>Dr. Adisaputra Ramadhinara, Divya Panicker, Jonathan Ronquillo</td>
<td>POWCDLS</td>
</tr>
<tr>
<td>July 2, 8-9pm</td>
<td>1st quarterly PMTS meeting</td>
<td>Challenges in Managing Musculoskeletal Tumors in COVID pandemic</td>
<td>PGH, POC, Jose B. Lingad Memorial MC, Southern Philippines MC</td>
<td>PMTS</td>
</tr>
<tr>
<td>July 9-9pm</td>
<td>PSS Webinar</td>
<td>Metastatic Spinal Tumours</td>
<td>Rosario, Mella, Pasion</td>
<td>PSS</td>
</tr>
<tr>
<td>7/15/2020,8pm</td>
<td>POSSM 3rd QTR Meeting</td>
<td>Interesting Cases on Sports Medicine or Arthroscopy</td>
<td>POC/UST/EAMC</td>
<td>POSSM</td>
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<tr>
<td>July 18</td>
<td>POA BOARD MEETING</td>
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<tr>
<td>7/22/2020,8pm</td>
<td>Hand</td>
<td>Teleconsultation strategies in evaluating hand stiffness</td>
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<td>AHSP</td>
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<tr>
<td>7/29/2020,8pm</td>
<td>Hand</td>
<td>WALANT and blocks for ORIF</td>
<td></td>
<td>AHSP</td>
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<tr>
<td>7/31/2020, 8pm</td>
<td>POWCDLS</td>
<td>Ultrasonic assisted wound debriedment: the biofilm slayer</td>
<td>Dr. Jay Asuncion</td>
<td>POWCDLS</td>
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<tr>
<td>8/5/2020,7pm</td>
<td>Phil. Shoulder Society Webinar</td>
<td>Tendinopathies - research findings, pathology, and most effective treatments</td>
<td>Neal L. Millar</td>
<td>PSSh</td>
</tr>
</tbody>
</table>
# Residents and Orthopods Lockdown Encounters (ROLE)

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Topic</th>
<th>Organizer</th>
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<tbody>
<tr>
<td>8/6/2020, 8pm</td>
<td>POFAS Quarterly Meeting</td>
<td>Mid- and Forefoot Trauma</td>
<td>POC</td>
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<tr>
<td>8/7/2020, 7pm</td>
<td>Phil. Shoulder Society Webinar</td>
<td>Cuff Healing and Adhesive Capsulitis</td>
<td>PShS</td>
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<tr>
<td>8/12/2020, 7-8pm</td>
<td>Phil. Shoulder Society Webinar</td>
<td>Clavicle Fracture and proximal humerus fracture</td>
<td>PShS</td>
</tr>
<tr>
<td>8/13/2020, 8PM</td>
<td>POSP webinar</td>
<td>Office Paediatric Orthopaedics</td>
<td>POSP</td>
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<tr>
<td>8/14/2020, 7-8pm</td>
<td>Phil. Shoulder Society Webinar</td>
<td>Instability with Bone Loss</td>
<td>PShS</td>
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<tr>
<td>Aug 15</td>
<td>POA BOT MEETING</td>
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<tr>
<td>8/19/2020, 7pm</td>
<td>Phil. Shoulder Society Webinar</td>
<td>Approach to Non-Healing Wounds of the Lower Extremities: A Vascular Specialist’s Point of View</td>
<td>PShS</td>
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<td>26/08/2020, 8-m</td>
<td>POWC</td>
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<td>POWCDLS</td>
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<tr>
<td>8/27/2020, 730pm</td>
<td>PHKS Quarterly Meeting</td>
<td>Interesting Cases on THA and TKA</td>
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<td>8/29/2020, 0900H</td>
<td>PSS webinar</td>
<td>anterior approach to tumours</td>
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<tr>
<td>9/1/2020, 8pm</td>
<td>POFAS Webinar series</td>
<td>ANKLE TRAUMA</td>
<td>POFAS</td>
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<tr>
<td>9/3/2020, 7pm</td>
<td>ASAMI Webinar</td>
<td>Interesting Ilizarov Case</td>
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<tr>
<td>9/8/2020, 8pm</td>
<td>POFAS Webinar series</td>
<td>FOREFOOT AND MIDFOOT TRAUMA</td>
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<td>9/9/2020, 8pm</td>
<td>Hand</td>
<td>Mutilating injuries of the Upper Limb</td>
<td>AHSP</td>
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<tr>
<td>September 15, 8pm</td>
<td>POFAS Webinar series</td>
<td>ANKLE SPORTS TRAUMA</td>
<td>POFAS</td>
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<tr>
<td>September 17</td>
<td>PSOWOSI</td>
<td>Shoulder injuries in women, THR in women, back pain in pregnancy</td>
<td>PSOWOSI</td>
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<tr>
<td>September 19</td>
<td>POA BOT MEETING</td>
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<tr>
<td>September 19, 2000H</td>
<td>Orthogeriatrics during the COVID-19 Pandemic</td>
<td>Orthogeriatrics during the COVID-19 Pandemic</td>
<td>POTS/FFN-Phil</td>
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<tr>
<td>September 23, 1900H</td>
<td>PShS quarterly meeting</td>
<td>3rd quarterly meeting</td>
<td>POTS/FFN-Phil</td>
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<td>September 24, 2020 7:00 PM</td>
<td>ASAMI Webinar</td>
<td>Ilizarov Surgery Post-op Woes: Surgery does not end at the Operating Room</td>
<td>ASAMI</td>
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<tr>
<td>September 25, 2000H</td>
<td>POSP</td>
<td>Femoral shaft fractures in children</td>
<td>POSP</td>
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<tr>
<td>9/26/2020, 0900H</td>
<td>PSS webinar</td>
<td>Navigation in Spine Surgery</td>
<td>PSS</td>
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<tr>
<td>October 7, 7pm</td>
<td>POWCDLS</td>
<td>Quarterly meeting</td>
<td>EAMC</td>
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<td>Oct 15</td>
<td>POSSM 4th QTR Meeting</td>
<td>Interesting Cases on Sports Medicine or Arthroscopy</td>
<td>POSSMM</td>
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<td>Oct 22</td>
<td>PHKS Quarterly Meeting</td>
<td>Interesting Cases on THA and TKA</td>
<td>PHKS</td>
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<td>10/24/2020, 0900H</td>
<td>PSS webinar</td>
<td>OLIF and XLIF</td>
<td>PSS</td>
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<td>Nov 5</td>
<td>POFAS Quarterly Meeting</td>
<td>DM Foot</td>
<td>POFAS</td>
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<tr>
<td>Nov 19</td>
<td>POSP</td>
<td>The Limping Child</td>
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PHILIPPINE ORTHOPAEDIC ASSOCIATION

71st ANNUAL CONGRESS [ONLINE]
NOVEMBER 26 - 28, 2020

“THE NEW NORMAL: AN ORTHOPAEDIC CHALLENGE”
- Adaptive Changes in Surgical Practice -
POA 71ST ANNUAL CONGRESS [ONLINE]
THE NEW NORMAL: AN ORTHOPAEDIC CHALLENGE
– Adaptive Changes in Surgical Practice -
26-28 November 2020
EDSA Shangri-la Hotel, Mandaluyong City, Philippines

PRE-CONGRESS: NOVEMBER 26, 2020 [THURSDAY]

8:00 – 9:00 ORIENTATION OF NEW POA FELLOWS
Frederic Joseph F. Diyco, MD, FPOA

Meeting ID: 864 0848 7376
Passcode: 907911
https://us02web.zoom.us/meeting/register/tZIpd-GspjwpHdJrDaABSR6PQOx9tO-oD6_C

9:00 – 11:00 PBO MEETING WITH TRAINING INSTITUTIONS [William T. Lavadia, MD, FPOA]

LUNCH LECTURE (Megalife Sciences)

12:00 – 1:00 A Potent Therapy in Osteoporosis and Osteoporotic Fractures [Vikas Madhav Agashe, MD]

Meeting ID: 892 5068 0007
Passcode: 959371
https://us02web.zoom.us/meeting/register/tZ0vcumupjsqGtN27UnWZK2xLk05nkAEguEy

1:00 – 3:00 RESIDENT RESEARCH FORUM
Welcome Remarks [Dr. Paul Ruel C. Camiña]
Criteria for Judging [Dr. Melito Antonio P. Ramos]
Introduction to Judges [Dr. Marcelino T. Cadag]
1. A Comparative Study on the Functional Outcome Of Patients Who Underwent Spinal Fusion Surgery Up To L5 And S1 Vertebra Based On The Oswestry Disability Index
2. Using the Cast Index to Predict Maintenance of Reduction in Pediatric Femoral Shaft Fractures
3. Correlation if Radial Bow and Post Reduction Angulation to the Functional Outcome in Non-Operatively Treated Diaphyseal Forearm Fractures in Children
4. Hip Geometry and Proximal Femoral Fractures among Elderly Filipino Women: A Prospective Single Center Cross-Sectional Study
5. Analysis on Outcome of Open Anterior Cruciate Ligament Reconstruction (Bone-Patellar Tendon-Bone Graft) Versus Arthroscopic Anterior Cruciate Ligament Reconstruction (Hamstring Graft) in Anterior Cruciate Ligament Tear among Active Military Personnel
6. Change at the Speed of Light: The Effectiveness of Percutaneous Laser Disc Decompression (PLDD) alone vs PLDD plus Transformational Epidural Low Back Pain (LBP) secondary to Lumbar Disc Herniation
7. Determination of Radiographic Healing using the RUST score and the Modified RUST in Femoral Shaft Fractures Treated with Intramedullary Nailing
8. Thumb Opposition Strength Using the Jamar Handheld Manual Dynamometer in Healthy Adult Filipinos: A Baseline Study
9. A Comparison of Percutaneous Interlaminar Endoscopic and Open lumbar discectomy: A 3-year Multicenter retrospective study
10. Economic burden and the effects of early vs. delayed hospitalization on the treatment cost of patients with acute fragility hip fractures under the Orthogeriatric Multidisciplinary Fracture Management Model and Fracture Liaison Service

SNACK LECTURE (Zuellig Amgen)

3:05 – 3:35 Fragility Fracture Prevention and the Role of Denosumab
[Jose Antonio G. San Juan, MD, FPOA]
3:35 – 5:00 RESEARCH PAPER PRESENTATION

[Melito Antonio P. Ramos, MD, FPOA/ Marcelino T. Cadag, MD, FPOA]

1. Comparison of Outcomes for Infections after Fracture Fixation (IAFF) Treated with or without Intramedullary Antibiotic Rod: A prospective Observational Study
2. Motion Recovery Outcome after Manipulation under Anesthesia of a Stiff Knee Secondary to Delayed Femoral Nailing
3. Correlation of Knee Range of Motion and Patellar Height Using the Modified Caton-Deschamp index in Patients Post Total Knee Arthroplasty
4. Intra-observer reliability of Tip apex distance estimation technique using picture archiving and communication system (PACS) in Dynamic Hip Screw Fixation for Intertrochanteric Fractures
5. Smartphone and Standard Goniometer for Measurement of Knee Range of Motion: A Comparative Study
6. The Correlation between Patellar Plica and Degeneration of the Femoral Condyle among Military Personnel
7. Assessment of Anterior Tibial Translation on Lateral Knee Radiographs of ACL-Deficient Military Personnel
8. The Role of Spaced Repetition System as an Adjunctive Learning Technique in Orthopedic Training Center: A Pilot Study
10. Patterns of Acromial Morphology among Different Age Groups in Filipinos
11. Influence of Early versus Late Stoma-Preserving Anterior Cruciate Ligament (ACL) Reconstruction on Proprioception and Return to Sports: A Retrospective Cohort
12. The Experience and Perceptions of Philippine Orthopaedic Trainees on the Effect of the COVID-19 Pandemic on Residency Training: A Nationwide Survey
14. The Accuracy of Hard Signs as Predictor of Major Limb Traumatic Vascular Injuries Requiring Critical Revascularization: A 3-Year Prospective Cohort Study
15. Clindamycin as an Adjunct to Cefuroxime versus Cefuroxime Alone, in Decreasing Surgical Site Infection Rate in Elective Orthopedic Cases in a Tertiary-Level Government Hospital
16. A Cross-Sectional Study of Immediate Functional Outcomes in Elderly Patients with Intertrochanteric Fractures Treated with Primary Arthroplasty versus Open Reduction and Internal Fixation in a Tertiary-Level Government Hospital
17. Outcomes of Unstable Intertrochanteric Fractures Following Delayed Fixation by Proximal Femoral Locked Plating Versus Nailing with Minimum 1-year Follow-up: Experience on 34 Patients by a Low-Resource Trauma Facility
18. Perioperative Complications of Lumbar Microdecompression under Wide Awake Progressive Local Anesthesia
19. Correlation of Clinical and Electrodiagnostic Studies of Adult Filipinos with Moderate Carpal Tunnel Syndrome
20. A Limb Salvage Surgery option for Low to Middle Income Countries: A Comparison of Outcomes for Single-stage and Two-stage Endoprosthetic Reconstructions for Primary Aggressive and Malignant Bone Tumors of the Distal Femur
21. Use of WALANT (Wide Awake Local Anesthesia No Tourniquet) in Hand Surgeries During the COVID-19 Pandemic

Meeting ID: 892 1601 2223
Passcode: 681300
https://us02web.zoom.us/meeting/register/tZ0vdu-orzkoGNdbuxMjfRavl5oE9gUKBXSy

8:30 – 9:00 OPENING CEREMONY

Invocation [Dr. Frederic Joseph F. Diyco]

Philippine National Anthem
POA Hymn [Dr. Michael Muñoz]
Welcome Remarks [Dr. Peter B. Bernardo]
Message from PMA President [Dr. Benito P. Atienza]
Message from PRC Commissioner [Hon. Jose Y. Cueto, Jr.]
Opening of the Convention and Online Election [Dr. Paul Ruel C. Camiña]
Presentation of House Rules [Dr. Frederic Joseph F. Diyco]

Meeting ID: 845 7069 3580
Passcode: 737294
https://us02web.zoom.us/meeting/register/tZAocOmupzgvEtSIldt2qMysy437fprljsFxG
DAY 1: NOVEMBER 27, 2020 [FRIDAY]

SYMPO 1: AHSP (Upjohn – Pfizer)
_W Moderator: David L. Alagar, MD, FPOA_

9:00 – 9:20 Strategies on Reducing & Fixing Nascent & Established Malunion of Distal Radius [Peter Charles Rhee, DO, MSc]
9:25 – 9:45 Distal Radio Ulnar Joint (DRUJ) Injuries [David Tan Meng Kiat, MD]
9:45 – 9:55 Q & A

SYMPO 2: POFAS (J & J)
_W Moderator: Peter S. Quiarioit, MD, FPOA_

9:55 – 10:15 Challenge in Orthopaedic Practice During Lockdown in Cebu [Kirby O. Lim, MD, FPOA]
10:20 – 10:40 Educational Strands for Lower Extremity Care [Juan Agustin D. Coruña IV, MD, FPOA]
10:40 – 10:50 Q & A

Meeting ID: 845 7069 3580
Passcode: 737294
https://us02web.zoom.us/meeting/register/tZAocOmupzgvEtSldi2qMysy437frpljsFxG

SNACK LECTURE (J & J)
_W Johnson & Johnson SOUTHEAST ASIA_

10:50 – 11:20 Consideration in Pain Management: Value of Multimodal Analgesia [Edward HM Wang, MD, FPOA]

SYMPO 3: ASAMI (GE Phils.)
_W Moderator: Justiniano Aquilino Cyril IV Ll. Pimentel, MD, FPOA_

11:20 – 11:40 Malunion and Deformity Planning [Rosalyn P. Flores, MD, FPOA]
11:45 – 12:05 Hip Reconstruction with Ilizarov [Juanito S. Javier, MD, FPOA]
12:05 – 12:15 Q & A

LUNCH LECTURE: Upjohn-Pfizer

12:15 – 13:15 Holistic Approach to the Management of Neuropathic Pain [Elton Ong, MD]

Meeting ID: 854 6593 0331
Passcode: 907145
https://us02web.zoom.us/meeting/register/tZEpceyhrTspGdUcFGXg3OVBeYbokWWIPlcQ
DAY 1: NOVEMBER 27, 2020 [FRIDAY]

SYMPO 4: PMTS (Sandoz Phils)
Moderator: Melito Antonio P. Ramos, MD, FPOA

1:15 – 1:35 Treatment of Musculoskeletal Tumors during CoViD 19 Pandemic: A Philippine Musculoskeletal Tumor Society (PMTS) Multicenter Collaboration [Mamer S. Rosario, MD, FPOA]
1:40 – 2:00 Treatment of Musculoskeletal Tumors in Thailand during CoViD 19 Pandemic [Apichat Asavamongkolkul, MD]
2:00 – 2:10 Q & A

SYMPO 5: PShS (Taisho Pharma)
Moderator: Peter B. Bernardo, MD, FPOA

2:10 – 2:30 Keeping our Head on Our Shoulders: The Philippine Shoulder Society Report [Jonathan C. Ronquillo, MD, FPOA]
2:35 – 2:55 Shouldering the Pandemic: Telemedicine during the Time of CoViD [Jeremy James C. Munji, MD, FPOA]
2:55 – 3:00 Q & A

Meeting ID: 845 7069 3580
Passcode: 737294
https://us02web.zoom.us/meeting/register/tZAocOmupzgvEtSIldi2qMysy437frpljsFxG

SNACK LECTURE: Biofemme

3:00 – 3:15 The New Normal: Challenges in the Management of Osteoporosis - Adaptive Changes in the Use of Biphosphonates [Leo Daniel D. Caro, MD, FPOA]

SYMPO 6: POTS (Megalife Sciences)
Moderator: Frederic Joseph F. Diyco, MD, FPOA

3:15 – 3:35 Orthogeriatrics in the New Normal [David Russel Marsh, MD]
3:35 – 3:55 Acute Fixation of Fragility Fracture: To Allow Immediate Weight Bearing [Takeshi Sawaguchi, MD]
3:55 – 4:15 How I Fix Fractures in the Elderly [Rodrigo Fernando Pesantez Hoyos, MD]
4:15 – 4:25 Q & A

SYMPO 7: POSP (Tobie Pharma)
Moderator: Frederic Joseph F. Diyco, MD, FPOA

4:30 – 4:50 Virtual is Reality: Pediatric Orthopaedic: Training in a Pandemic & Beyond [Julyn A. Aguilar, MD, FPOA]
4:55 – 5:15 P.O.P. in the Time of CoViD: This is How I Do It….For Now [Jesse James F. Exaltacion, MD, FPOA]
5:15 – 5:25 Q & A

Meeting ID: 824 8374 7902
Passcode: 315952
https://us02web.zoom.us/meeting/register/tZYpf-qvqjwjGtZyP-GtFsZ_5hiPKejyMxHd
**DAY 2: NOVEMBER 28, 2020 [SATURDAY]**

**SYMPO 8: POSSM (Mylan Phils)**
*Moderator: John Andrew Michael A. Bengzon, MD, FPOA*

- 8:30 – 8:50  Return to Sports After CoViD 19 [Randolph M. Molo, MD, FPOA]
- 8:50 – 9:10  Telerehab in Sports [Enrico Lorenzo M. Barin, PTRP]
- 9:10 – 9:20  Q & A

**SNACK LECTURE: Mylan Phils**

- 9:25 – 9:55  Osteoarthritis Pain Management During the CoViD Pandemic: Optimizing Non-Surgical Options [Jose Antonio G. San Juan, MD, FPOA]

Meeting ID: 817 7599 4344
Passcode: 203108
https://us02web.zoom.us/meeting/register/tZUqcOyhpz8pHtCtpiSYminYotea4BiPo5Ai5

**SYMPO 9: PHKS (Upjohn Pfizer)**
*Moderator: Marcelino T. Cadag, MD, FPOA*

- 11:15 - 11:35  Changes in Practice and Protocols in TJR During CoViD [Genaro Wilfred Francisco C. Asis, MD, FPOA]
- 11:35 - 11:55  Rapid Recovery Pathway for TJR During CoViD [Angelo R. Leaño, MD, FPOA]
- 11:55 - 12:00  Q & A

Meeting ID: 881 0570 6785
Passcode: 484928
https://us02web.zoom.us/meeting/register/tZwsd-yvrj0tEtHae-CTFkmzyWI94CIWgsasj
DAY 2: NOVEMBER 28, 2020 [SATURDAY]

LUNCH LECTURE: GE Phils

12:00-1:00  OEC C-Arm Ortho & Spine Surgeries [Prem Kumar, MD]

SYMPO 10: PSS (Pfizer Phils)
Moderator: Anne Kathleen Ganal-Antonio, MD, FPOA

1:00-1:20  The Challenges in Telemedicine: Diagnosing, Treating Spine Disorders [Paul Julius A. Medina, MD, FPOA]
1:20-1:40  Emergency Decompression in Spinal Metastasis in Relation to CoViD [Mamer S. Rosario, MD, FPOA]
1:40-1:45  Q & A

SYMPO 11 POWCDLS (A Menarini Phils)
Moderator: Paul Ruel C. Camiña, MD, FPOA

1:45 – 2:05 Spotlight on Adjuvant Therapy – Firstline Solutions in the New Normal [Major Divya Panicker, MD]
2:05 – 2:25 Chronic Wound Management and the CoViD 19 Pandemic Experience from Daily [Adisaputra Ramadhinara, MD]
2:25 – 2:35  Q & A

Meeting ID: 864 3119 4906
Passcode: 633500
https://us02web.zoom.us/meeting/register/tZlpdOippz8jGtLpKO02RRtV-m2aWDrCJpg

2:35 – 4:00  POA AND PBO BUSINESS MEETING

Meeting ID: 895 3536 0350
Passcode: TBA
https://us02web.zoom.us/meeting/register/tZ0odOyrqDspH9QmIMMYDq1fsAasDfWdWfQz

SNACK LECTURE: JCS Pharma

4:00 – 4:15  Use of HA Injections in Patients with Ankle Cartilage Injuries [Carlo Angelo V. Borbon, MD, FPOA]

4:15 – 5:15  CLOSING CEREMONIES
Presentation of 2020 Inductees [Dr. Frederic Joseph F. Diyco]
Confirmation of POA Fellow [Dr. Paul Ruel C. Camiña]
Presentation of 2021 PBO Board of Trustees [Dr. Antonio B. Sison]
Induction of 2021 PBO Board of Trustees [Dr. Paul Ruel C. Camiña]
Turnover Ceremony of PBO Office
Valedictory Address [Dr. Paul Ruel C. Camiña]
Presentation of 2021 POA Board of Trustees [Dr. Antonio B. Sison]
Induction of 2021 [Dr. Antonio B. Sison]
Turnover of POA Office
Inaugural Address [Incoming President]
Closing of 71st Annual Congress

Meeting ID: 889 4813 7147
Passcode: 364360
https://us02web.zoom.us/meeting/register/tZwkc-GprTwrHtN4QgYK2AXyg2FUtgUaon1k
PHILIPPINE ORTHOPAEDIC ASSOCIATION, INC.

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ELECTION DATES

NOV 27
START @ 8 AM

NOV 28
ENDS @ 12 NN

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