

P R O C E E D I N G S
OF THE
BUSINESS SESSIONS OF THE HOUSE OF DELEGATES,
THE FORTY-SEVENTH ANNUAL MEETING
OF THE
PHILIPPINE MEDICAL ASSOCIATION
HELD IN MANILA, APRIL 26 TO 30, 1954



SUPPLEMENT
THE JOURNAL OF THE PHILIPPINE MEDICAL ASSOCIATION
December, 1954, Volume XXX

PROCEEDINGS

OF THE BUSINESS SESSIONS OF THE HOUSE OF DELEGATES, THE FORTY-SEVENTH ANNUAL MEETING OF THE PHILIPPINE MEDICAL ASSOCIATION
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PROCEEDINGS

47TH ANNUAL MEETING

MINUTES OF THE FIRST MEETING OF THE HOUSE OF DELEGATES HELD
ON APRIL 26, 1954 AT THE PHILIPPINE COLUMBIAN CLUBHOUSE

The meeting was called to order at 1:20 p.m. by the President, Dr. Antonio S. Fernando.

Dr. Peñas, Secretary-Treasurer, read the message of the World Medical Association extending its best wishes to the Philippine Medical Association. He also said that he received similar expression of greetings from the following foreign medical associations:

1. Dr. Dag Knutson
President, Swedish Medical Association
Chairman, Council of the World Medical Association
2. The Ikatan Dokter Indonesia
General Secretary, Indonesian Medical Association
3. Dr. Rafael O. Pedraza
Secretario General Colegio Medico Nacional
Republica de Cuba (Havana)
4. Dr. Pedro C. Rojas Buitrago
Secretario General, Federation Medica Colombiana
Bogota
5. Dr. S. C. Sen
Secretary for Asia, World Medical Association;
President, Indian Medical Association
6. Dr. P. Cibrie
Secretary General, Confederation des Syndicats
Medicaux Francais, Paris
7. Dr. A. H. Tonkin
Secretary, The Medical Association of South Africa
Capetown
8. Dr. J. G. Hunter
General Secretary, Federal Council of the British Medical Association
in Australia, Sydney.
9. Danish Medical Association (a telegram)
10. Dr. Junzo Kurosawa
President, The Japan Medical Association
Kanda, Tokyo
11. Dr. A. Druyan
General Secretary, Medical Association of Israel
12. Dr. P. J. Delaney
Medical Secretary, The Irish Medical Association

Dr. Peñas also announced that delegates who were not able to register at the FEU could register at the entrance, and get their copies of the Agenda.

President Fernando informed the House that the first number is the playing of the "PMA Hymn" and requested the members who may wish to have a copy of the record of the hymn to file their order.

President Fernando then asked Dr. Rodolfo P. Gonzalez, Chairman of the Far Eastern Confederation of Medical Associations to introduce the distinguished members who have kindly consented to grace the occasion with their presence.

Dr. Gonzalez then introduced the following foreign delegates present who stood up as they were introduced:

Dr. Smai Chandavimol
Council Member
Medical Association of Thailand

Dr. Li Hsu-Chu
Secretary General
Chinese Medical Association

Dr. Raden Soeharto
President
Ikatan Docter Indonesia

Dr. Wu Ching
President
China Medical Association

Dr. Kuh Ming-Wei
Free China, Taiwan

Dr. Pyong Tai, Lee
Ministry of Health, Republic of Korea

President Fernando then invited the delegates to attend the inauguration of the PMA House on Taft Avenue at 5:00 o'clock of the same afternoon.

The foreign delegates left the meeting at 1:25 p.m.

Dr. Peñas then introduced Dr. Fernando who delivered his remarks before the meeting as follows:

DISTINGUISHED GUESTS, WORTHY MEMBERS OF THE HOUSE OF DELEGATES:

It is a great privilege and honor to preside over this first session of the House of Delegates during our 47th Annual Meeting. I hope that I shall be able to perform this function to your fullest satisfaction.

This House is the policy-making body of our Association. *Our deliberations, therefore, should at all times be characterized with calmness, earnestness, and profound understanding of all the questions properly presented and discussed.* And I trust that, under the guidance of Divine Providence, our decisions will bring to this House honor and distinction. I assure you that I shall endeavor to be impartial in all decisions that I may be called upon to make.

Before proceeding to our business, allow me to extend to everyone of you my very cordial welcome in behalf of the Association. I am grateful to you for making sacrifices, in money and in time, in order to participate in the great undertaking of building a useful, unified, vigilant group of physicians, laboring to raise the prestige and dignity of our medical profession and to improve medical care for our people.

Our officers and all the committees have done wonderful work, and they deserve our sincerest and everlasting gratitude. Our Secretary-Treasurer has worked hard in the preparation of our agenda and several important reports, and he merits our highest commendation. I am personally grateful to him for his efforts to make our work efficient, and he has always been with me at several of the meetings of the different committees — our common objectives having been to acquaint ourselves with their decisions, and to render them such assistance as we could offer. I am equally grateful to Dr. Pesigan for his wise handling of our funds. With the fullest cooperation of the members of this august body, I am confident we shall be able to accomplish many things worthy of the traditions of our Association.

Before taking up our routine and new business, I suggest that we stand up in silent prayer for those of our colleagues who have passed to the Great Beyond.

I would particularly commend the excellent work of our Committees on Rural Medicine; on Voluntary Health Insurance; and on Medical Education, Hospitals, and Laboratories. Their excellent reports are to be submitted to you for your careful consideration.

In my inaugural address last year I proposed a 12-point program; much of this program, I am satisfied to state, has been completed or on the way to completion.

The last point in the program, but undoubtedly not the least, was the construction of the first story of the P.M.A. Building. The Board of Directors of the Philippine Medical Center, Inc., succeeded in raising enough money for this purpose; and I am happy to announce to you that the building will be inaugurated this afternoon. I should like to propose that it be named the P.M.A. House, as it will give similar service to the members of our Association as that given by the British Medical Association House on Tavistock Square, London.

The Rural Medicine Committee's Chairman has submitted a very detailed and comprehensive rural-health program, which will synchronize our activities with the rural health project of the Department of Health, aided by the FOA-PHILCUSA. To show our interest in these activities, I have suggested that a symposium on rural health be held Wednesday morning. And Dr. C. Gatmaitan, the Chairman, has prepared a program for the purpose.

Our committee on Medical Education had several joint meetings with the Director of Private Schools, the Board of Medical Examiners, and the Committee on Medical Education. In this activity, I was able to obtain the assistance of the A.M.A., which gave us pointers on the inspection of medical schools and on the preparation of a questionnaire to be answered by the deans of the medical schools. Because of that assistance we were able to make, the first ocular inspection of the Manila Central University, the University of Sto. Tomas, and the Far Eastern University Medical Schools 11 March 1954. I can not find adequate words to praise the work of the Chairman, Dr. A. G. Sison, generally considered our topmost leader in medical education.

Our Association had several other achievements during my term, and these will appear in the reports of the various officers and committees as well as in a summary of these accomplishments I have prepared for the House of Delegates.

At its last two annual meetings, the House of Delegates failed to hold its closing session for lack of quorum. For this reason, I should like to enjoin all the delegates to attend all the sessions, so as to give this House the benefit of their valuable opinions and experience; and so that they can submit to their respective societies first-hand reports on all that transpired in the sessions of the House of Delegates. I wish to thank you all for bearing up with me. With your permission, I am now submitting to the House a brief summary of the accomplishments of the Association during my term, which I will not read any more for lack of time.

SUPPLEMENT TO THE ABOVE ADDRESS OF PRESIDENT FERNANDO:

More detailed information about them may be found in some of the annual reports of the House of Delegates.

(1) The first and foremost accomplishment was the completion of the first story of the P.M.A. House, which we will inaugurate this afternoon.

(2) The first meeting of the Council during this administration was held the day after the annual meeting — an innovation. This allowed the Council to start its activities early, and to take advantage of the presence of all its members before some of them went back to their respective provinces. I believe we should continue this practice.

(3) The President-Elect was made a member of the Finance and Auditing Committee, upon my suggestion, to enable him to get acquainted more fully with the finances of the Association, and to give him an opportunity to participate in the discussions and in preparation of the budget for the ensuing year, to be effective during his term.

(4) The Rural Medicine Committee was formed to study the role of the Association and of the individual private physicians, particularly in the implementation of President Magsaysay's pet project. The holding of the first Sym-

posium on Rural Health during this Annual Meeting, with speakers well versed on the subject, was also decided upon.

(5) A serious attempt was made to survey the local medical schools, through questionnaires and ocular inspection, with a view to acquiring accurate data on them — their physical plants, the teaching staffs and student bodies, their laboratory facilities, their methods of teaching, etc. — for the purpose of encouraging them to raise their standards. Also scheduled in connection with the 47th annual meeting is a Symposium on Medical Education and Licensure, to be presided over by Dr. A. G. Sison, chairman of the Committee on Medical Education, Hospitals and Laboratories.

(6) We have succeeded in arousing public opinion on the merits of voluntary health insurance. As a proof of this, I have been invited by the Manila Rotary Club to speak on this subject; the Philippine Federation of Private Medical Practitioners held a symposium on the subject on December 13, 1953, with myself as moderator. Dr. Damaceno J. Ago, Chairman of the Committee, has been asked to speak on the subject before several medical societies; and my humble self had been honored by the *Insurance and Finance Magazine* for "distinction achieved during 1953 for proposing the Institution of health insurance in the Philippines."

Also approved has been the organization of the "Philippine Prepaid Medical Service, Inc.", — a non-stock, non-profit corporation — to carry out this project. And Dr. H. de Lien of the FOA has promised to us that he would try if the FOA could lend us an expert to help us in this pioneering project.

(7) Upon my recommendation, President Quirino issued Proclamation No. 407, on September 2, 1953, declaring the 15th day of September of every year as Philippine Medicine Day — that date marking the foundation of the Philippine Islands Medical Association. And the day was observed for the first time on 15 September 1953.

(8) —a) Upon our recommendation, the Bureau of Posts issued stamps commemorating the Golden Jubilee of our Association. Under the heading "Medical Association is Honored", this event was mentioned in the December 7, 1953 issue of *Stamp News* (Linn's Weekly) — "America's greatest philatelic newspaper." The issue contained the picture of the stamp, its description, and a short write-up of the history of our Association.

—b) The Philippine Historical Committee has approved our request to place a marker on a wall of our P.M.A. House, in commemoration of the 50th Anniversary of the P.M.A.

(9) To help promote the health education of the masses, I have suggested the publication of *Philippine Health*, a lay magazine. It is to be published quarterly, and we expect the first issue to come out just before this annual meeting. It is to be edited by our well-known medical editor, Dr. Carmelo Jacinto.

(10) The Golden Book, which will soon be off the press, will contain articles on different branches of medical science, written by competent members, reviewing the progress of medicine in this country during the last 50 years (1903-1953).

(11) The revised (1953) Constitution and By-Laws of the P.M.A. was published in the August, 1953 issue of our Journal.

(12) The 8th edition of the Philippines Medical Directory (Golden Jubilee Edition, 1953) came out during the year. (The first edition of the Philippine Medical Directory was issued in 1928). This edition is much more detailed and comprehensive than the previous ones.

(13) The Association, conscious of the importance of keeping our medical practitioners more or less up-to-date in their practice for the welfare of the people, held its First Annual Post-Graduate Assembly, in connection with its 47th Annual Meeting, at three hospitals in Manila, without charging any fee. I touched on this subject in the "President's Page" of the August, 1953 issue of the *Journal*, under the subject "Postgraduate Continuation Courses." This Postgraduate Conti-

uation Courses were for general medical practitioners and were given April 19 through 24, 1954. The Manila Medical Society made its Post-Graduate Assembly No. 1, a very important feature of its activities last year, starting on October 16, 1953, and lasted until December 8, 1953. The lectures were given in the evenings and did not, therefore, interfere with the clinic hours of the practitioners.

(14) To secure greater attendance at its opening General Session, the Association will hold it for the first time in the evening, so as not to interfere with the office hours of its members. If found satisfactory, I hope this practice would be incorporated in our By-Laws, as the A.M.A. has done.

(15) I have attended, by invitation, meetings of component societies in Mindanao, the Visayas, and Luzon; and my personal impression is that our component societies are steadily becoming stronger, and that they appreciate it if the officers of the P.M.A. bring the Association closer to their societies and apprise them of its activities as well as develop genuine fellowship among all the members.

(16) The Philippine Medical Students' Association, patterned after the American Student Medical Association, has been in the process of organization. It plans to have a chapter in each medical college in the Philippines. Each chapter is to elect its officers and take charge of its scientific program. The U.P. Chapter was organized on February 26, 1954, with Mr. Leland Villadolid as Chairman, and Miss Perla V. Dizon as Secretary-Treasurer. This is an attempt to revive the Philippine Medical Students' Association, organized during the early days of the U.P. College of Medicine, for the purpose of familiarizing the students with the importance of organized medicine, and of preparing them for membership in the P.M.A.

(17) Two specialty societies — Philippine Society of Dermatologists and the Philippine College of Physicians — were organized during this term and the Council recommended the approval of their affiliation.

(18) In acknowledging our resolution, endorsing the appointment of Dr. Paulino J. Garcia as Secretary of Health, President Magsaysay said among other things: "Thank you very much then for your endorsement of my selection and I earnestly hope that the coming days will see the new administration and the Philippine Medical Association in a give-and-take spirit of harmony and cooperation with each other."

(19) The P.M.A. — with its component societies, affiliated specialty sections, and Women's Auxiliaries — and other medical organizations gave a testimonial banquet, on January 26, 1953, in honor of the new Secretary and the new Undersecretary of Health, the former Secretary and Undersecretary of Health, and the physician-members of Congress.

(20) We have maintained close and cordial relations with foreign national associations. The U.S.T. sent our Secretary-Treasurer, Dr. Peñas, to the First World Conference on Medical Education, in London, August 22 to 29, 1953. He is the Chairman of our Committee on the World Medical Association. Once more, we have decided to invite delegates from the other countries in the Far East to organize the Far Eastern Confederation of Medical Associations (FECMA). We have received letters of cordial greetings on, and best wishes for, the 47th Annual Meeting from the Secretary General, the Secretary for Europe, and the Secretary for Asia of the World Medical Association and from officers of many foreign medical associations. The A.M.A. has also graciously granted all our requests. All these are incontrovertible evidences of the cordial and high esteem in which we are held by important medical associations abroad.

(21) We have attempted to encourage interested members to contribute to our P.M.A. Medical Research Fund. Although the drive was started only recently, we already have ₱350.00.

(22) I am planning to give a gold medal award and citation this year, and every other annual meeting thereafter, to a member who has rendered the most distinguished service to the P.M.A. The manner of selection will be patterned after that of the A.M.A.

(23) The Woman's Auxiliary has donated ₱7,885.00 to the P.M.A. for the installation of steel bookstacks in our Library. Every month we have been receiving, on an exchange basis, issues of about 170 well-known medical journals and periodicals from all over the world. This is another proof of the high regard that foreign associations have for our Association, and for our progress in medical science. The Association now has a full-time Librarian, and a library committee has been appointed.

(24) In the campaign to sell shares of stocks of the Philippine Medical Center, Inc., which started soon after my administration, I have been able to sell ₱16,960 worth of shares of stocks, out of a total collection of ₱28,020.00, or a percentage of 60.57%. I appeal to all those who have not gotten shares yet to do so and help complete our P.M.A. House, in order that we may be able to give our members more efficient service and to add prestige to our Association.

(25) Finally, we have made strong recommendations against the bill entitled "Medical Act of 1954".

(26) The last item, but which I consider important, is the creation by the Council of the Office of Medical Information and Public Relations headed by Director Ramon R. Angeles, whose functions are: "(1) to collect and arrange facts and figures about the medical profession and the practice of medicine in the Philippines; (2) to be repository of other medical informations about the local medical profession and that of abroad and (3) to be as a clearing house for current medical topics of the day for the enlightenment of the profession and the public; and (4) to deal on the relations of the Association with the members and the general public. The maintenance of good public relations is essential if the Association is to enjoy the full confidence of the members and the public. It is the business of 'doing good and telling about it.'

And now we can proceed to the business at hand. Will the Secretary-Treasurer please read the agenda?

The Secretary-Treasurer then informed the House that 103 delegates have registered and there were 56 delegates present, so a quorum was declared present.

He then informed the House of the following reports that he received which were incorporated in the Agenda:

REPORT OF THE COUNCIL:

Appendix "A" — Report of the Editor

"B" — Report of the Special Committee on Technical and Commercial Exhibits

"C" — Report of the Special Committee on Publicity

"D" — Report of the Special Committee on Medical Nomenclature

"E" — Report of the Special Committee on Membership

"F" — Report of the Special Committee on Rural Medicine

"G" — Report of the Special Committee on the World Medical Association

"H" — Report of the Special Committee on Cancer

"I" — Report of the Special Committee on Scientific Exhibits

"J" — Report on Voluntary or Prepaid Health Insurance

"K" — Civilian Medical Emergency Report

"L" — Report of the Special Committee on Medical Publication (Popular)

"M" — Special Committee on Far Eastern Confederation of Medical Associations

REPORT OF THE SECRETARY-TREASURER

APPENDIX "A" REPORT OF THE BUSINESS MANAGER OF THE JOURNAL

REPORT OF THE STANDING COMMITTEES:

- a. Arrangements
- b. Legislation and Public Relations
- c. Medical Education, Hospitals and Laboratories
- d. Private Medical Practice and Medical Economics
- e. Auditing and Finance (including the proposed budget)
- f. Scientific Assembly

PROPOSED AMENDMENTS TO THE CONSTITUTION AND BY-LAWS:

- a. From the Council
- b. From the Standing Committee on Auditing & Finance (1953)
- c. From the Baguio Medical Society (1953)

REPORT OF THE SPECIAL COMMITTEE OF THE HOUSE OF DELEGATES ON MEDICAL ETHICS

Further Remarks of Dr. Peñas:

He also reported that: (a) a supplementary report from the special Committee on Scientific Exhibit has just been received which he said would also be mimeographed and included in the Agenda; (b) that there are still some committees that have not yet submitted in their reports and informed the House that should their reports be submitted they will also be mimeographed and given to the delegates; and (c) that the same Reference Committee on the amendments to the Constitution and By-Laws not acted upon last year has been re-appointed and will present its recommendations on the amendments.

APPOINTMENT OF REFERENCE COMMITTEES:

Dr. Peñas then asked the permission of the House to allow him to read the names of the different Reference Committees, chosen by the President in consultation with him, to study the different reports of the Standing and Special Committees. He then read the names of the following Reference Committees:

REFERENCE COMMITTEE ON THE REPORT OF THE COUNCIL:

1. Dr. Francisco Q. Duque (Pangasinan MS), *Chairman*
2. Dr. Heraldo del Castillo (Manila MS), *Member*
3. Dr. Pedro T. Nery (Quezon City MS), *Member*
4. Dr. Casto Magsaysay (Zambales MS), *Member*
5. Dr. Iderlina F. Manuel (Cagayan MS), *Member*
6. Dr. Pedro P. Villafuerte (Camarines Sur MS), *Member*
7. Dr. Jose Cocjin (Iloilo MS), *Member*
8. Dr. Antonio O. Gisbert (Manila MS), *Member*
9. Dr. Dominador R. Narvaez (Baguio MS), *Member*

REFERENCE COMMITTEE ON THE REPORTS OF THE SECRETARY-TREASURER, OF THE STANDING COMMITTEE ON AUDITING AND FINANCE AND ON THE PROPOSED BUDGET:

1. Dr. Manuel Quisumbing, Sr. (San Pablo MS), *Chairman*
2. Dr. Jose R. Cruz (Manila MS), *Member*
3. Dr. Eligio Yabyabin (Zamboanga City MS), *Member*
4. Dr. Trinidad Esguerra (Tarlac MS), *Member*
5. Dr. Francisco N. Briones (Surigao MS), *Member*
6. Dr. Braulio M. de Venecia (Pangasinan MS), *Member*
7. Dr. Pablo O. Torre (Negros Occidental MS), *Member*
8. Dr. Romualdo del Rosario (Rizal MS), *Member*
9. Dr. Mariano D. Bayani (Pampanga MS), *Member*
10. Dr. Ramon Atienza (Manila MS), *Member*

REFERENCE COMMITTEE ON THE REPORTS OF THE OTHER STANDING COMMITTEES:

1. Dr. Antonio M. Samia (Manila MS), *Chairman*
2. Dr. Juan B. Ruiz, Jr. (Cebu MS), *Member*
3. Dr. Vicente J. Capistrano (Cotabato MS), *Member*
4. Dr. Jose O. Nolasco (Culion MS), *Member*
5. Dr. Cresencio B. Azcueta (Ilocos Sur MS), *Member*
6. Dr. Francisco Infantado (Or. Mindoro MS), *Member*
7. Dr. Virginia B. Raymundo (Cavite MS), *Member*
8. Dr. Gregorio Reyes (Cagayan MS), *Member*
9. Dr. Teodoro Rejano, Jr. (Marinduque MS), *Member*

REFERENCE COMMITTEE ON THE PROPOSED AMENDMENTS:

1. Dr. Alejandro S. Gaerlan (Manila MS), *Chairman*
2. Dr. Daniel Ledesma (Iloilo MS), *Member*
3. Dr. Benigno C. Parayno (Pangasinan MS), *Member*
4. Dr. Leopoldo D. Diaz (Nueva Ecija MS), *Member*
5. Dr. Zosimo Fernandez (Laguna MS), *Member*
6. Dr. Jose A. Villegas (Laguna MS), *Member*
7. Dr. Ramon H. Rabago (Cotabato MS), *Member*
8. Dr. Rufino C. Gutierrez (Sulu MS), *Member*
9. Dr. Romeo Y. Atienza (Manila MS), *Member*
10. Dr. Mariano N. Morales (Camarines Norte MS), *Member*

REFERENCE COMMITTEE ON RESOLUTIONS:

1. Dr. Antonio Ejercito (Manila MS), *Chairman*
2. Dr. Timoteo Alday (Batangas MS), *Member*
3. Dr. Fausto J. Galauran (Rizal MS), *Member*
4. Dr. Jose Purugganan (Abra MS), *Member*
5. Dr. Daniel R. Labrador (Agusan MS), *Member*
6. Dr. Jose Estevez (Albay MS), *Member*
7. Dr. Jaime Mendoza (Bohol MS), *Member*
8. Dr. Tomas Asturias (Capiz MS), *Member*
9. Dr. Ramon R. Angeles (Manila MS), *Member*
10. Dr. Eugenio de Jesus (Davao MS), *Member*

Dr. Peñas informed the meeting that the Reference Committees will pass judgment on the merits of the reports of the Committees and submit their findings and recommendations during the second meeting of the House of Delegates scheduled for April 28, 1954.

Dr. Tranquilino Elicaño then stood up and called the attention of the Secretary-Treasurer on the report of the standing Committee on Private Medical Practice and Medical Economics on Page D.4-1 of the Agenda in which the Board of Medical Examiners is mentioned. He said that the memorandum of the Board regarding the matter was submitted to the Secretary-Treasurer to be included in the Agenda for the information of the members. Dr. Peñas replied that the memorandum of the Board has already been mimeographed and would be furnished the delegates. (See pp. 57-65).

After the reading of the membership of the different Reference Committees, the Chairman asked the approval of the House, and the same was duly granted by the House. Dr. Peñas called the attention of the House particularly on the two committees just created to facilitate the activities of the election of officers on the last day of the Annual Meeting, namely: the Committees on Nomination and Election. The Secretary-Treasurer then read the following names of the composition of these two bodies which the House duly approved:

COMMITTEE ON NOMINATION:

1. Dr. Vicente R. de Ocampo (Manila MS), *Chairman*
2. Dr. Demetrio Belmonte (Manila MS), *Member*
3. Dr. Rodolfo V. Gonzalez (Manila MS), *Member*
4. Dr. Pedro C. Rodriguez (Zamboanga City MS), *Member*
5. Dr. Cipriano Elizaga Que (Isabela MS), *Member*
6. Dr. Francisco Ranada (Ilocos Norte MS), *Member*
7. Dr. Teodoro Rejano, Jr. (Marinduque MS), *Member*
8. Dr. Vicente R. Trinidad (Leyte MS), *Member*
9. Dr. Apolonio Baytion (Zamboanga del Norte MS), *Member*

COMMITTEE ON ELECTION:

1. Dr. Jose L. Santos (Bulacan MS), *Chairman*
2. Dr. Pablo Anzures (Manila MS), *Member*
3. Dr. Alfredo Primero (Lanao MS), *Member*
4. Dr. Oscar Madamba (La Union MS), *Member*

The Secretary-Treasurer also called the attention of the House regarding the recommendation of the Committee on Scientific Assembly relative to the applications for affiliations to the PMA of the following two scientific societies:

1. The Philippine College of Physicians
2. The Philippine Dermatological Society

President Fernando inquired from the House whether the Presidents of these two societies were present, namely: Dr. Gonzalo F. Austria of the Philippine College of Physicians and Dr. Perpetuo Gutierrez of the Philippine Dermatological Society. Both Presidents were not present. In spite of this, the House unanimously approved the affiliations of both societies, and the Secretary-Treasurer announced that the Presidents of these societies would be allowed to represent their respective societies in the House of Delegates.

The Secretary-Treasurer then announced that the next item in the Agenda is the report of the Committee on the Code of Ethics. This Committee was created by the House of Delegates last year to improve the present Code of Ethics adopted by the PMA. Dr. Vicente R. de Ocampo, Chairman of the Committee then took the floor and read the report of his Committee before the House as follows:

REPORT OF THE COMMITTEE ON MEDICAL ETHICS
OF THE HOUSE OF DELEGATES, PHILIPPINE MEDICAL ASSOCIATION

April 21, 1954

TO THE MEMBERS OF THE HOUSE OF DELEGATES
Philippine Medical Association
Manila

Sirs:

I have the honor to submit the report of the Committee on Medical Ethics to the House of Delegates, Philippine Medical Association.

"Since September 1929 the principles of Medical Ethics of the American Medical Association was the one adopted by the Board of Medical Examiners and was approved by the Hon. Secretary of Interior on January 9, 1930."

"Since February 10, 1947 the governing norms of professional conduct of physicians, adopted by the Board of Medical Examiners in the Philippines, were the principles of Medical Ethics of the Medical Profession of the Philippine Medical Association which was approved by the then Secretary of Health and Public Welfare, Sec. Antonio Villarama." This was published in the February issue of the Official Gazette.

The Committee believes that these principles of medical ethics of the Philippine Medical Association have the effect, more or less of a law, quoted from the paper of "Principles of Medical Ethics Concern-

ing the Relation of Physicians to Each Other" of Dr. Cesareo Santa Ana presented and read at the meeting of Marikina Physicians Association on February 28, 1947.

Your Committee suggests the addition of the following insertions in Section 3, Article 5:

Radio advertisement should be inserted as follows: Announcement in newspapers or on sign boards and radio and TV should be restricted to the facts about the location of clinics, office hours and limitation of practice.

Article 6, Section 3: Instead of "patients" it should read "patents" and instead of "prerequisites" it should read "perquisites."

These principles of Medical Ethics of the Medical Profession in the Philippines of the Philippine Medical Association is based on the same principles of the Medical Ethics of the American Medical Association but in spite of these very comprehensive "Principles of Medical Ethics" the violations of medical ethics in our country are still rampant and instead of decreasing are increasing day by day.

The Philippine Medical Association should not give the full responsibility in the enforcement of these principles to the Medical Board. This responsibility should be shouldered by the Association if we want to have a respected medical association and to which the Philippine Medical Association should give its full support.

The enforcement of these principles could be carried out if we have a strong and militant association. Nowadays under the Philippine Medical Association there are different specialty societies. Most of our physicians are aware of the importance of joining an association. It is, therefore, timely and proper that the Mother Association must always be alert and must carry a strong policy in combating any infraction of the Medical Ethics governing the Philippine Medical Profession.

Respectfully,

(Sgd.) V. R. DE OCAMPO, M.D.
Chairman

(Sgd.) CESAREO SANTA ANA, M.D.
Member

TRANQUILINO ELICAÑO, M.D.
Member

After the reading of the report, the Chairman asked the pleasure of the House. Dr. Peñas inquired about the meaning of the words, "strong policy" in the report. Dr. Ocampo explained to him that the medical association carries the name of the members and should always be alert in the enforcement of the principles of the Code of Ethics. He proposed to expel members committing serious violation of the Code of Ethics to uphold the dignity of the Association. Dr. R. P. Gonzalez asked for the proposals to be followed. Dr. Gregorio Reyes said that he did not share with the opinion of the Chairman of the Committee with regards to the responsibility to be shouldered by the Association. He believes that responsibility regarding unethical practice of members should be referred to the Board of Medical Examiners. Dr. Elicaño informed the House that in many cases unethical practice of members referred to the Board, the witnesses do not appear. He informed the House how he asked the various societies during his inspection trips of our country for their opinion on the recommendation mentioned by Dr. Ocampo and asked their support. Dr. Ricardo Jara took the floor and informed the House that common violation of the practitioners are on the advertisements in the newspapers and this is only common in the City where the newspapers abound. He proposed the creation of specialty boards of different specialty societies that will certify to the competence of the specialists regarding their respective lines. Dr. Teresa Cadsawan also informed the House that she supported the remarks of Dr. Gregorio Reyes; she proposed to have the component societies investigate their members and non-members and by the Board of Medical Examiners.

Dr. Pablo Anzures informed the House that the question of medical ethics is an old question and mentioned 3 factors for which the decision should be based: (1) There should be a good medical Code of Ethics; (2) a good medical law, and (3) good work of the Board of Medical Examiners, and a thorough analysis of the factors involved one by one. Then he proposed that the PMA should work towards the amendment of the new Medical Act of 1954 presented by Congressman Tan which he averred

should be pushed through with amendments by the PMA. With regards to the Code of Ethics, this should be revised he said with the provisions more specific, like the Code of Legal Practitioners. If, he said, we will have a good medical law and good medical ethics, then we will have a good Board of Medical Examiners.

Dr. Regino G. Padua informed the House that the contention here is what action or control the PMA has on the private medical practitioners. The Association has no strong control over its members and to non-members. He believes that the society in the province where the members commit the violation should conduct the investigation as to the veracity of the violation of medical ethics, if the doctor who violated would like to submit himself to investigation, and the society will endorse the necessary papers to the Board and submit the evidence and he proposed to accept and approve the report of the Committee.

Dr. Gonzalez amended this proposal of Dr. Padua by extending the life of the Committee for one more year to study the matter, and clarify certain matters that are not clear. Dr. Peñas asked the mover of the motion if in extending the life of the Committee additional members may be appointed by the Council in the future.

Dr. Jose L. de Guzman took the floor and called the attention of the House on paragraph second to the last regarding the shouldering of the responsibility of the Board of Medical Examiners by the PMA, which he proposed to amend as follows: "The PMA should give its full support to the Board of Medical Examiners in the enforcement of this principle."

Dr. Vicente R. de Ocampo declared that the idea of putting the paragraph is for the PMA to have its own personality without which the Association will be powerless. Dr. Padua took the floor and informed the House that Dr. Guzman is not amending the motion. He explained that the PMA is cooperating with the Board by extending its service in the enforcement of good and ethical medical practice.

After further discussion, the amended motion of Dr. Padua was duly seconded and APPROVED.

Dr. Peñas then announced to the House that the reference committees just created will hold their meetings at the FEU the next day and gave the corresponding rooms where they were to be held.

He also announced that the luncheon was offered by President and Mrs. A. S. Fernando. Applause.

Adjournment. — There being no further business on the Agenda, the meeting was adjourned at 3:30 p.m.

APPROVED:

(Sgd.) ANTONIO S. FERNANDO, M.D.
President

ATTESTED:

MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

REPORT OF THE COUNCIL

April 10, 1954

TO THE MEMBERS OF THE HOUSE OF DELEGATES
47th Annual Meeting, Philippine Medical Association,
M a n i l a
Gentlemen:

The Council has the honor to submit this report covering the period from April 1, 1953 to April 10, 1954, part and parcel of which are the Reports of the

Editor

Business Manager and Auditor (incorporated also in the Report of the Secretary-Treasurer)

Special Committee on Technical and Commercial Exhibits

Special Committee on Publicity

Special Committee on Medical Nomenclature
Special Committee on Membership
Special Committee on Rural Medicine
Special Committee on Cancer
Special Committee on World Medical Association
Special Committee on Voluntary or Prepaid Health Insurance
Special Committee on Scientific Exhibits
Special Committee on Medical Publication (Popular)
Special Committee on Civilian Medical Emergency
Special Committee on Far Eastern Confederation of Medical Associations.

I. MEETINGS:

The COUNCIL had a total of eight meetings, the first being held immediately after the 46th (Golden Jubilee Year) Annual Meeting, on April 26th, 1953 and the last on April 10th, 1954, just before the 47th Annual Meeting.

II. THE JOURNAL:

The COUNCIL appointed the Secretary-Treasurer to act as Editor of the Journal for the current year. Dr. Antonio Fernando took the place of Dr. Peñas as Associate Editor. Three special issues were released: on Pediatrics, on Cancer and on Public Health, respectively. For a complete report, please see also the Report of the Editor.

III. WORLD MEDICAL ASSOCIATION:

The Association was represented at the 7th General Assembly of the World Medical Association (August 31 to September 6, 1953 at The Hague, Netherlands) by our Secretary-Treasurer. He also represented the Journal at the 4th Annual Meeting of Medical Editors.

IV. SPECIAL COMMITTEES OF THE COUNCIL:

The COUNCIL retained the following SPECIAL COMMITTEES from the previous administrations:

- Membership
- Technical and Commercial Exhibits
- Scientific Exhibits
- Publicity
- Medical Nomenclature
- World Medical Association
- Cancer

New Special Committees created by the COUNCIL are the following:

- (a) SPECIAL COMMITTEE ON VOLUNTARY OR PREPAID HEALTH INSURANCE:—Because of the ever increasing popularity of the Blue Cross and Blue Shield plans in the United States and believing that it is the duty of the Association to furnish competent low cost medical care to as wide a segment of the population as possible, this committee was appointed to seek ways and means of providing our people with such a plan.
- (b) SPECIAL COMMITTEE ON CIVILIAN MEDICAL EMERGENCY:—Constant vigilance is in order in these uncertain days. It is expected that this committee will furnish realistic plans in keeping with any medical emergency. A sub-committee on Atomic Warfare was also appointed.
- (c) SPECIAL COMMITTEE ON MEDICAL PUBLICATION (POPULAR):—The COUNCIL recognizes the need for a popular vehicle for medical topics. Everybody is health conscious nowadays as can be gleaned from the popularity of articles on health appearing in the newspapers and magazines. This committee was assigned the task of exploring the possibility of turning out such a medical magazine for layman consumption.
- (d) SPECIAL COMMITTEE ON RURAL MEDICINE:—The directive of the House of Delegates to have a panel discussion on Rural Health has been implemented by the creation of this committee. The results of its study can best be evaluated in the report of its chairman and the holding of a special Plenary Session on Rural Health on April 28th.
- (e) SPECIAL COMMITTEE FOR THE FAR EASTERN CONFEDERATION OF MEDICAL ASSOCIATIONS (F E C M A):—To pursue the objectives laid down during the South East Asia Conference (1951), this Committee was organized to further seek their implementation.

- (f) **SPECIAL COMMITTEE ON THE LIBRARY:**—To study ways and means of obtaining and maintaining a first class library service for the benefit of the members of the Association. It is hoped that in the future, a package library service to the component societies may be started. Later, a microfilm service may be added.

V. REPRESENTATIONS:

The COUNCIL appointed the following members of the PMA to represent the Association in different activities:

- (a) 7th General Assembly, World Medical Association, The Hague, Netherlands (Aug. 31 to September 7, 1953)—Delegate: Dr. Manuel D. Peñas.
- (b) 8th Pacific Science Congress, University of the Philippines, Manila. (Nov. 16-28, 1953). Delegates: Dr. Antonio S. Fernando and Dr. Manuel D. Peñas.
- (c) Far Eastern Confederation of Medical Associations (Organizational Meeting), April 29, 1954, Manila. Delegates: Dr. Rodolfo P. Gonzalez and Dr. Antonio S. Fernando. Alternates: Drs. Juan S. Salcedo Jr. and Manuel D. Peñas.
- (d) 8th General Assembly, World Medical Association, Rome (September 26-Oct. 2, 1954). Delegates: Dr. Heraldo del Castillo, Dr. Romeo Y. Atienza and Dr. Antonio M. Samia.
- (e) 2nd International Congress on Cardiology, Washington D.C., U.S.A. (September 12-15, 1954). Representative: Dr. Antonio M. Samia and as alternate, Dr. Jose Barcelona.
- (f) The Secretary-Treasurer also represented the Association as member of the Department of Health Committees on:
 - (i) Fellowship Selection Board
 - (ii) National Committee on the Leon Bernard Foundation.
 - (iii) Fact-finding Committee on some Government Hospitals
 - (iv) Special Committee for the Revision of the list exempt from 17% tax.

VI. SPECIAL ACTIVITIES:

- (a) **PHILIPPINE MEDICAL ASSOCIATION DAY—SEPTEMBER 15.**—The Philippine Medical Association was founded on September 15, 1903. It was thought fitting that upon completion of its fiftieth year, the date should become remembered as a symbol of the existence of organized medicine in our country. President Elpidio Quirino issued Proclamation No. 407 declaring the *fifteenth day of September of every year as PHILIPPINE MEDICINE DAY*. The day was celebrated in Manila with a special radio program and in different cities by the respective component societies.
- (b) **PMA GOLDEN JUBILEE COMMEMORATIVE STAMPS.**—During the 46th Annual Meeting, a special canceller was used marking the completion of our 50th year. The Commemorative Stamps are of two denominations (5-centavo and 6-centavo, respectively). It shows a physician examining a patient lying on a table. It shows to one side a reproduction of the membership to the Philippine Medical Association and on the left lower corner, the seal of the Association. At the bottom it bears the inscription 50th Anniversary and the years 1903 and 1953 respectively. The denominations are on the upper right corner and the entire picture is underscored by PHILIPPINES. The 5c denomination is purple and the 6c denomination is blue. The first day of issue was on December 16, 1953 and a special canceller was used on that day.
- (c) **PUBLICATION OF THE 8th EDITION OF THE PHILIPPINES MEDICAL DIRECTORY OF THE PHILIPPINE MEDICAL ASSOCIATION.** Publication of this edition was made possible with the cooperation of the Medical Advertising Service. Advance subscription by the registrants of last year's annual meeting helped also in financing the project. There are only two hundred and fifty copies left or available at moderate prices.
- (d) **GOLDEN BOOK:**—This is now nearing completion. This contains the reviews of the progress of the Association and those of the different medical specialties in the 1st half of this century.
- (e) **PHILIPPINE STUDENTS MEDICAL ASSOCIATION:** Patterned after the American Students Medical Association, a constitution was tentatively approved, a chapter has been formed in the University of the Philippines, another chapter is in the process of organization in the University of Santo Tomas, and it is hoped that the movement will spread.
- (f) **PHILIPPINE HEALTH MAGAZINE:** This is intended to represent a medical magazine for layman consumption. A promotion group has guaranteed its publication at no cost to the Association and the first issue is already under preparation.
- (g) **DISTINGUISHED SERVICE TO THE P.M.A. AWARD:** The COUNCIL has accepted the offer of the President, Dr. Antonio S. Fernando, to give an award to the member

of the PMA (not a member of the Council, not an official) who has contributed most to the advancement of or to the prestige of the Philippine Medical Association. Final choice to be that of the House of Delegates.

- (h) **RESEARCH FUND:** Some 'seed money' have been deposited with the P.M.A. The COUNCIL has requested the Standing Committee on Scientific Assembly to study under what conditions we can use research funds, to recommend the rules governing the same for approval by the House of Delegates, and to study how research funds may be increased.
- (i) **NOMINATIONS FOR MEMBERSHIP IN THE BOARD OF MEDICAL EXAMINERS:** On two separate occasions the COUNCIL, upon request, has submitted its nominees to the Secretary of Board of Examiners. The Council would like to sponsor a resolution to direct the Standing Committee on Medical Education, Hospitals and Laboratories to establish the criteria for qualification and formulate the manner of selection of the nominees of the Association in the future.
- (j) **SURVEY OF MEDICAL SCHOOLS:** The Council, thru the Standing Committee on Medical Education, Hospitals and Laboratories, and with the cooperation of the Bureau of Private Schools, and the Board of Medical Examiners, explored the feasibility of undertaking a survey of medical schools in the Philippines and a few weeks ago such a survey has been started.
- (k) **LIBRARY:**—The completion of the P.M.A. House and the purchase and installation of the library bookshelves through the kindness of the Woman's Auxiliary to the Philippine Medical Association makes it now possible to transfer the books and journals of the Association from the PGH Library to the new site. From pre-war days to the present date, most of our books and journals have been kept at the PGH Library and in recognition of this the Council approved to extend to the PGH Staff and the student body the library facilities of the PMA. To study ways and means of extending these facilities to the members of the PMA a special committee has been appointed.
- (l) **FIRST POST GRADUATE REFRESHER COURSE:**—Under the management of the Standing Committee on Scientific Assembly, the first post-graduate refresher course has been prepared specially for the benefit of members in localities distant from medical centers. This will take place from April 19th through April 24th. Units participating in the instruction include the staffs of the Philippine General Hospital, Santo Tomas University Hospital and North General Hospital. The program is published in the March, 1954 issue of the JOURNAL.

VII. PARTICIPATION IN CIVIC AFFAIRS:

- (a) Approved to have the PMA become a sustaining member of the Science Foundation of the Philippines. This involves an initial contribution of P500.00 with an additional contribution of P50.00 or more a year.
- (b) Contribution to Philippine National Red Cross
- (c) Contribution to Anti-Tuberculosis Campaign

VIII. SOCIETY ACTIVITIES, COMPONENT MEDICAL SOCIETIES AND AFFILIATED SECTIONS:

- (a) **TESTIMONIAL BANQUET HONORING THE SECRETARY OF HEALTH AND PHYSICIAN CONGRESSMEN:**—The COUNCIL started the organization of a testimonial banquet honoring our distinguished colleagues, Secretary of Health Paulino J. Garcia, former Secretary Juan S. Salcedo Jr., Undersecretary of Health Rafael Tumbokon, former Undersecretary Regino G. Padua, Senator Jose C. Locsin and Congressmen Emilio Cortez, Nicolas G. Escario, Ricardo Gacula, Mateo S. Pecson, Gregorio B. Tan, Pedro G. Trono and Lorenzo P. Ziga. This was held at the Fiesta Pavilion, Manila Hotel in the evening of January 26th, 1954.
- (b) **ORGANIZATION OF THE PHILIPPINE COLLEGE OF PHYSICIANS:**—The COUNCIL appointed a Special Committee on Internal Medicine composed of the following: Dr. Gonzalo Austria, chairman and Drs. Hermogenes A. Santos, Ramon Macasaet, Florentino Herrera Jr., Antonio M. Samia, Conrado B. Icasiano (who acted as secretary for the committee) with Drs. Antonio S. Fernando and Manuel D. Peñas representing the Council. A provisional constitution was ratified at a meeting of the charter members. The officers elected are the following: Dr. Gonzalo Austria, president; Dr. Hermogenes A. Santos, vice-president; Dr. Conrado B. Icasiano, secretary-treasurer. Members of the Board of Directors are Drs. Agerico B. M. Sison, Ramon Macasaet, Agustin Liboro and Mariano M. Alimurung. The application for affiliation with the P.M.A. has been received. This is recommended for ratification by the House.
- (c) **PHILIPPINE DERMATOLOGICAL SOCIETY:**—The application for affiliation with the P.M.A. of the Philippine Dermatological Society has also been received and is hereby recommended also for approval.

- IX. PROPOSED LEGISLATION:—The COUNCIL held a joint meeting with the Standing Committee on Legislation and Public Relations and the Standing Committee on Medical Education, Hospitals and Laboratories and discussed the important pending bills in Congress. It is in agreement with the recommendations given to the House by these two committees as can be read from their separate reports.
- X. THE PHILIPPINE MEDICAL ASSOCIATION, INC. AND THE PHILIPPINE MEDICAL CENTER:—The COUNCIL has been constantly informed of the progress of the PMA building and would like to congratulate the officers of the Philippine Medical Center, Inc. for having finally accomplished its immediate objective—the construction of the P.M.A. House. At the present time, it is a one story affair and for the expansion of its scope and services, the COUNCIL strongly urges the membership to purchase their shares of the P. M. Center, Inc. The COUNCIL also endorses for approval the amendment making giving PMA life membership to those with at least five hundred pesos worth of shares in the P. M. Center, Inc.
- XI. FINANCE:—The finances of the Association is sound as can be seen from the reports of the Secretary Treasurer and checked by the Auditing and Finance Committee.
- XII. MISCELLANEOUS:
- (a) INVITATIONS RECEIVED:
1. 8th General Assembly, World Medical Association (Sept. 26 to Oct. 2, 1954), Rome.
 2. 2nd International Congress on Cardiology (Sept. 12 to Sept. 15, 1954), Washington, D.C., U.S.A.
 3. 2nd International Congress in Clinical Pathology (Sept. 6 to Sept. 10, 1954), Washington, D.C., U.S.A.
 4. 17th International Congress of Ophthalmology (Sept. 12-17, 1953).
 5. Annual Meeting, British Medical Association (July 5 to July 9, 1954), Glasgow.
 6. VI Congreso Medico Dominicano, Dominican Republic.
- (b) INVITATIONS RECEIVED, LOCAL: The members of the COUNCIL, and specially the President, received numerous invitations to speak before medical societies and civic groups. The President of the Association spoke before the Manila Rotary Club on Oct. 8, 1953 and visited Davao, Legaspi, Laguna, Leyte and others.
- (c) The COUNCIL approved many of the recommendations approved at the Conference of Presidents and Secretary-Treasurers of Component and Affiliated Medical Societies held during the last Annual Meeting.
- (d) It also authorized the recording of the P.M.A. Hymn by Major Bernabe S. Galang and Major Antonino Buenaventura.

Respectfully submitted,

THE COUNCIL OF THE PHILIPPINE
MEDICAL ASSOCIATION

(Sgd.) ANTONIO S. FERNANDO, M.D.
President

(Sgd.) MARIANO C. ICASIANO, M.D.
President-Elect

(Sgd.) PEDRO RODRIGUEZ, M.D.
Vice-President for Mindanao

(Sgd.) GUARDALINO MOSQUEDA, M.D.
Vice-President for Visayas

(Sgd.) FERNANDO D. MANALO, M.D.
Vice-President for Luzon

(Sgd.) MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

Councillors:

(Sgd.) TRANQUILINO ELICAÑO, M.D.

(Sgd.) DANIEL LEDESMA, M.D.

(Sgd.) RODOLFO P. GONZALEZ, M.D.

(Sgd.) EUGENIO ALONSO, M.D.

(Sgd.) JUAN S. SALCEDO, JR., M.D.

APPENDIX "A"

REPORT OF THE EDITOR

April 10, 1954

The COUNCIL
Philippine Medical Association
Gentlemen:

I have the honor to submit the following report covering the period from April 1, 1953 to March 31, 1954.

Circulation: The total circulation for the twelve-month period was 29,800 copies with an average monthly issue of 2,483 copies. It was also 2,000 more than last year's total circulation (27,800 copies with a monthly average of 2,317).

Exchanges: To the previous total of 162, there has been added four new exchange agreements. These were with the following Journals:

1. Revista Medica del Hospital General. (Publicacion Mensual de la Sociedad Medica del Hospital General, Mexico, D.F.)
2. Revista del Hospital de San Juan de Dios, Columbia, S.A.)
3. Czechoslovakia Physiology and Czechoslovakia Biology, Czechoslovakia.
4. Journal of the Faculty of Medicine, Shinshu University, Matumoto City, Japan.

Special Features:

1. The Proceedings of the 46th (Golden Jubilee Year) Annual Meeting appeared in the October, 1953 issue.
2. The Constitution of the World Medical Association appeared in the June, 1953 issue.
3. The Constitution and By-Laws (revised) of the Philippine Medical Association appeared in the August, 1953 issue.
4. Three special numbers were dedicated respectively to Pediatrics (October, 1953); Cancer (November, 1953); and Public Health (January, 1954).
5. As previously announced, we have published two selected articles under the heading "Critical Summaries from the U.S.A." These articles were:
 - (a) The Clinical Use of Radioactive Iodine in Thyroid Disease—by Stephen Bennet Yohalem, M.D. (July, 1953).
 - (b) The Chemotherapy of Cancer—Ezra M. Greenspan, M.D. (November, 1953).

Editorials:

Published during the fiscal period reported upon were the following contributions by our Associate Editors, pertinent commentaries on current topics affecting the medical profession:

1. The 46th (Golden Jubilee Year) Annual Meeting.
2. Something Gained But Let us Have Some More.
3. Industrial Medicine.
4. Taking Stock
5. Our President—Elect
6. Scientific Exhibits.
7. Random Thoughts on Trends in Medical Education
8. An Appeal to the Medical Profession.
9. What September 15 Means to Us.
10. Perpetuation of Errors in Pediatric Practice.
11. The First World Conference on Medical Education.
12. Apropos of the Current Crusade for Cancer Consciousness.
13. Right to Health "*Salus populi suprema lex est.*"
14. Service: To the People—To the Profession.
15. The Philippine Veterans Memorial Hospital.
16. Barrio Medical Service Program.

Representation: With your authorization, the undersigned represented the Journal at the 4th Annual Meeting of Medical Editors at The Hague, Netherlands. The Medical Journalism Meeting was held at the Parliament Building on September 7th, 1953. This took place immediately after the 7th General Assembly of the World Medical Association, also at The Hague. At least 31 Journals were represented at this Meeting.

Acknowledgement: I should like to express my gratitude, first to the Council for the confidence it has manifested in me in giving me this temporary assignment. Secondly, to Dr. Fernando, who lent much of his experience to the undersigned, making the total load considerably lighter, and for undertaking the editorial burden during my trip to the conferences above mentioned. Dr. Trinidad P. Pesigan shouldered the business end with the usual dispatch. I also acknowledge my indebtedness to the Associate Editors, the Copy Editor, the Abstractors and the Book Reviewers. Our clerk, Mr. Ruben J. Ponce, has been very helpful, and finally my thanks also to all others with whom I had had official contacts in the performance of my duties as Editor.

(Sgd.) MANUEL D. PEÑAS, M.D.
Editor

APPENDIX "B"

REPORT OF THE SPECIAL COMMITTEE ON TECHNICAL & COMMERCIAL EXHIBITS

March 31, 1954

The Council
Philippine Medical Association
M a n i l a

S i r s :

Your undersigned, Special Committee on Technical & Commercial Exhibits for the 47th Annual Meeting of the Philippine Medical Association, hereby submits the following report:

A merienda-meeting of all prospective exhibitors was held on February 16, 1954 at the Carbungco Restaurant. The sketch of the floor plan of the Far Eastern University Administration Building (facing Morayta street) previously sent to them was presented for discussion. After an exchange of opinion and upon motion duly seconded, it was decided to classify the booths into three classes: first at P400.00, second at P300.00 and third at P200.00 each.

After drawing of lots, thirty (30) booths were disposed to twenty-nine (29) exhibitors as follows:

- | | |
|---|--|
| 1. Modern Pharnacal Products Co. | 15. San Miguel Brewery |
| 2. La Estrella del Norte | 16. Lexal Laboratories |
| 3. The Borden Company | 17. Doctors Pharmaceuticals, Inc. |
| 4. United Drug Company | 18. Winthrop-Stearns, Inc. |
| 5. Inhelder, Inc. | 19. Cu Unjieng Investments Co. |
| 6. E. R. Squibb & Sons | 20. Lederle Laboratories |
| 7. Abbott Laboratories | 21. Schering Corporation |
| 8. Oceanic Commercial, Inc. | 22. Co Taoco & Co. |
| 9. Pfizer Overseas, Inc. | 23. Marsman & Company |
| 10. Macondray & Co. | 24. The Cathay Company |
| 11. F. E. Zuellig, Inc. | 25. Occidental Drug Importer Co. |
| 12. Philippine American Drug Co.
(Botica Boie) | 26. Kuenzle & Streiff, Inc. |
| 13. Sharp & Dohme (Phil.) Inc. | 27. Mead Johnson & Co. |
| 14. Parke, Davis & Co. | 28. Lawyers Cooperative Publishing Co. |
| | 29. Soyalac Bottling Plant |

For these thirty (30) booths that were taken, it is estimated that P9,700.00 can be collected.

Upon unanimous decision of the Committee, it was decided to recommend to the Council that Diplomas be awarded to First, Second and Third prizes and Honorable mention to the rest of the participants.

It was further recommended that a resolution be passed by the Council expressing the thanks of the Association to the exhibitors for their splendid support and cooperation.

Respectfully submitted,

(Sgd.) T. P. PESIGAN, M.D.
Chairman

(Sgd.) GREGORIO GABRIEL, M. D.
Member

(Sgd.) RAJAH SINGH, M.D.
Member

(SGD.) FLORENCIO Z. CRUZ, M.D.
Member

(Sgd.) JESUS J. TAN, M.D.
Member

(Sgd.) JESUS B. NOLASCO, M.D.
Member

APPENDIX "C"

THE PHILIPPINE MEDICAL ASSOCIATION
ANNUAL REPORT OF THE SPECIAL COMMITTEE ON PUBLICITY

April 5, 1954

The Council
Philippine Medical Association
M a n i l a

G e n t l e m e n :

Your Special COMMITTEE ON PUBLICITY has the honor to submit herewith: (1) A Report of its Activities for the period April 7, 1953 to April 5, 1954, inclusive and (2) A List of Recommendations and Suggestions for the ensuing year 1954-1955:—

- (1) Report of Activities covering the period from April 7, 1953 to April 5, 1954:
 1. We made an ample coverage of the 46th Annual Meeting and Golden Jubilee Year celebration of the Association. Press-releases to all leading newspapers, weeklies and journals were sent out. Radio Programs were held.
 2. We called 2 Press Conferences and entertained some members of the Press a few days before the Convention.
 3. A Special Radio Program was aired over Station DZFM commemorating the 50th Anniversary of the Philippine Medical Association, and 1st PHILIPPINE MEDICINE DAY, September 15, 1953.
 4. Press-Releases were sent out on the Pre-Paid Voluntary Insurance Plan and the PMA Building.
 5. Press-Releases on our coming 47th Annual Meeting and Far Eastern Medical Conference from April 26-30, 1954, are presently being made and sent out to the press, weeklies and journals.
 6. We helped in the publication of the 1953 PMA Medical Directory.
- (2) List of Recommendations & Suggestions:—
 1. We wish to reiterate our stand that to be able to push through an adequate and more effective publicity campaign, the Office of Information and Public Relations of the PMA be given an annual outlay of at least P1,000 for advertising purposes, representations, and clerical expenses etc.
 2. We recommend that the Committee on Public Relations which is fused with the Committee on Legislations, be dissociated or detached so that it can be fused with the Special Committee on Publicity and the Office of Information and Public Relations. We see no connection between the Legislative Committee and the Committee on Public Relations. Publicity work is more intimately connected with Public Relations so that the two should come together.

Anticipating that the above recommendations and suggestions will receive favorable consideration, we remain

Very truly yours,

(Sgd.) RAMON R. ANGELES, M.D.
Chairman

For the COMMITTEE ON PUBLICITY

(Sgd.) SOFIA BONA-SANTOS, M.D.—*Member*
(Sgd.) CARMELO P. JACINTO, M.D.—*Member*
(Sgd.) RAMON ATIENZA, JR.—*Member*
(Sgd.) LUIS S. SANTAYANA—*Member*

APPENDIX "D"

SPECIAL COMMITTEE ON MEDICAL NOMENCLATURE*

SECOND REPORT (1953-54)

Dr. Fausto J. Galauran, *Chairman*
Dr. Geminiano de Ocampo, *Member*
Dr. Arturo B. Rotor, *Member*
Dr. Jose Dal Estrella, *Member*
Dr. Domingo Tablan, *Member*

PREFACE TO THE SECOND REPORT

Our first report was submitted over a year ago to the Council of the Philippine Medical Association and was incorporated in the agenda of the Annual Convention held in 1953. It was also published in the November issue of the Journal of the Philippine Medical Association, Vol. XXIX, No. 11. That was a preliminary report and was designed for study, discussion and comment.

But up to the present writing, the Committee on Medical Nomenclature is at a loss as to the kind of reception such report met with our medical population.

We wish to remind our members that our report was not yet final and conclusive, and the committee is waiting for any comment and suggestion on the terms treated. We do not want to entertain any idea that our first preliminary report has met cold

* Approved at the 2nd meeting of the House of Delegates of the P.M.A. during the 47th Annual Meeting held on April 28, 1954, in Manila.

indifference because of the value and import of the subject matter. We do not wish to believe that our invitations to the medical profession to participate in this stupendous task fall on deaf ears. It must be remembered that we are not preparing this work for the present generation of medical men alone but for the succeeding ones. It is therefore discouraging to find that up to the present no word, opinion, comments or suggestions especially from our members is received by your committee.

The Committee on Medical Nomenclature therefore reiterates its previous appeal to all who, in one way or another, can help in clarifying ambiguous terms. All comments and suggestions will be acknowledged and duly credited.

The Committee on Medical Nomenclature devoted the year 1953 to the study of other branches of Medicine which are closely related to medical practice. Careful scrutiny on the various medical terms leads us to conclude that not so many as expected are used for bedside explanations. Only those that are needed to clarify ailments so that patient can at least understand his condition warrant our attention and study. It should be remembered that our work in preparing the medical nomenclature in the Philippine National Language is governed by explicit instructions definitely specified in the resolution as approved by the Council of the Philippine Medical Association. We have therefore, to confine our work in translating common medical terms that can be used in explaining conditions and diseases to the patients. We can not go over these confines.

Isolating common medical terms from a vast volume of medical terminologies is not an easy task. There are terms that convey complex meanings and translating them or coining new ones in the national language may be confusing and difficult. That is why we issue a call to members of our Association who possess knowledge of common medical terms in any locality of the Philippines, whether in Ilocano, Pampango, Visayan or Malay, to come forward and contact the committee. If in the course of your reading you come across terms which have a local or native equivalent in any language spoken in the Philippines, your committee is more than welcome to hear from you.

Dr. Fausto J. Galauran, *Chairman*
Dr. Geminiano de Ocampo, *Member*
Dr. Arturo B. Rotor, *Member*
Dr. Jose Dal Estrella, *Member*
Dr. Domingo Tablan, *Member*

PART THREE

PHYSIOLOGICAL CHEMISTRY

In the terminology of physiological chemistry one finds few words that a physician may need for bedside use. We are therefore glad to incorporate some terms for our study.

absorption (n)	Tag. <i>pásipsip</i>	glucose (n)	Tag. <i>glukosa</i> ; glycosuria, <i>tamis-ihí</i>
absorbed (v)	Tag. <i>sinípsip</i> . absorbed in the intestine, <i>sinípsip sa bitúka</i> .	hemoglobin (n)	Tag. <i>pulagò</i> (coined from <i>pulá ng dugó</i>)
acid (n)	Tag. <i>ásido</i> (cn. from Sp.); <i>asim</i>	hormone (n)	Tag. <i>ormon</i> , (coined)
acidity (n)	Tag. <i>kaasimán</i>	insulin (n)	Tag. <i>insulina</i> (fr. Sp)
albumin (n)	Tag. <i>albémina</i> (from Sp.)	magnesium (n)	Tag. <i>magnesya</i> (from Sp)
alcohol (n)	Tag. <i>alkuhól</i> ; <i>aguardyente</i>	mixture (n)	Tag. <i>halò</i> , <i>lahók</i>
ammonia (n)	Tag. <i>amuniya</i> (coined)	mix (n)	Tag. <i>ihalò</i> , <i>paghaluin</i> , <i>paglahukin</i> , <i>ilahok</i>
analysis (n)	Tag. <i>pagsusuri</i>	oxygen (n)	Tag. <i>oksiheno</i> (from Sp.)
bile (n)	Tag. <i>apdó</i>	pepsin (n)	Tag. <i>pepsina</i> (from Sp.)
broth (n)	Tag. <i>lugaw</i> . liquid broth, <i>ám</i>	percolate (v)	Tag. <i>salain</i>
coagulation (n)	Tag. <i>pamumuó</i> ; coagulation of blood: <i>pamumuong-dugó</i>	percolator (n)	Tag. <i>salaán</i>
		phenol (n)	Tag. <i>pinól</i> (coined)
		precipitate (n)	Tag. <i>latak</i>
		precipitating (adj.)	Tag. <i>lumalatak</i>

precipitation (n)	Tag. <i>paglalatak</i>	sulfur (n)	Tag. <i>asupré</i>
protein (n)	Tag. <i>protayna</i> (coined)	test (n)	Tag. <i>pagsuri</i>
poison (n)	Tag. <i>lason, kamandág</i>	turbid (adj)	Tag. <i>malabò</i>
poisonous (adj)	Tag. <i>nakalalason</i> ; poi- sonous snake, <i>ma- kamandág na ahas</i>	turbidity (n)	Tag. <i>kalabuan</i>
pulverize (v)	Tag. <i>pulbusin</i>	thiamin (n)	Tag. <i>tiyamina</i>
saliva (n)	Tag. <i>laway</i>	thick (adj)	Tag. <i>makapál</i>
salivation (n)	Tag. <i>paglalawáy</i>	urea (n)	Tag. <i>uriá</i> (coined)
salt (n)	Tag. <i>asin, alat</i>	uric (adj)	Tag. <i>úriko</i> ; u r i c acid, <i>asido úriko</i>
salty (adj)	Tag. <i>maalat, maasin</i>	urine (n)	Tag. <i>ihi</i> , urination, <i>pag-ihí</i>
sodium (n)	Tag. <i>soda, sosa</i>	urobilin (n)	Tag. <i>urobilina</i> (fr. Sp.)
solvent (n)	Tag. <i>pantunaw</i> ; <i>pa- nunaw</i>	urinalysis (n)	Tag. <i>suriang-ihí</i>
		vitamin (n)	Tag. <i>bitamina</i>

PART FOUR

PHYSIOLOGY — PISYOLOHIÁ

The word physiology is derived from the Gr. *physis*, meaning nature; and *logos*, — study or science. Fernel (1497-1558) was the first to confine physiology to the problems of the functions of the human body as a separate subject from anatomy and other allied branches of medicine. Altho the study of the human structure is closely related to the study of functions of its various parts, medical terminologists of the past decided to give physiology a distinct and independent school.

achloridya (n)	Tag. <i>kawaláng-asim</i>	coma (n)	Tag. <i>koma</i> (coined) <i>kawaláng malay- tao</i>
achylia	Tag. <i>pa n u n u - y ó n g - s i k - murá</i> (pagkawala ng katas o pang- tunao sa sikmura.	contraction (n)	Tag. <i>pag-igsí</i>
gastrica (n)	Tag. <i>asidosis</i> (coin- ed)	convulsion (n)	Tag. <i>panginginít</i> , or <i>kombulsiyón</i>
acidosis (n)	Tag. <i>akrumigalya</i> (di p a n g k a r a n i - wang laki ng ka- may at paa)	cyanosis (n)	Tag. <i>pangingitim</i> <i>pangangasúl</i>
acromegaly (n)	Tag. <i>kalapít</i>	cyanotic (adj)	Tag. <i>nangingitim</i> , <i>nangangasúl</i>
adjacent (adj)	Tag. <i>naghihinalò</i>	defecation (n)	Tag. <i>pagdumi, pag- tae</i>
agonizing (adj)	Tag. <i>gana sa pagkain</i>	defecating (v)	Tag. <i>dumudumi, tu- matae</i>
appetite (n)	Tag. <i>magkakabit</i>	deglutition (n)	Tag. <i>paglulón, pag- lunók</i>
attached (adj)	Tag. <i>pamamanás</i>	diaphoresis (n)	Tag. <i>pagpupusan</i> , <i>pagpapawis</i>
anasarca (n)	Tag. <i>pa w a w a - lang-damdám</i> ; local a. <i>pa m a m a n - hid</i> ; general a. <i>pampatulog</i>	diarrhea (n)	Tag. <i>pagkukursó</i> , <i>pagtataé ng malab- naw</i>
anesthesia (n)	Tag. <i>di-paghingá</i>	digestion (n)	Tag. <i>págtutunaw</i> ; in- digestion, — <i>hindi natunawan, hindi nalusawan</i>
apnea (n)	Tag. <i>palápamanhiran</i>	digest (v)	Tag. <i>tunawin, luna- win</i>
anesthesiology (n)	Tag. <i>aritmíyá</i> (coin- ed) walang ayos na pagtibok ng puso.	diuresis (n)	Tag. <i>pag-ihí</i>
arrythmia (n)	Tag. <i>aspiksyá</i> (coin- ed) pagka-inis da- hil sa kawalang- hangin.	dyspnea (n)	Tag. <i>kahirapang hu- mingá</i>
asphyxia (n).	Tag. <i>astinya</i> (coined) <i>panghihiná</i> .	ectopic (adj)	Tag. <i>nasa labás</i> ; <i>wala sa lugar. i.e. ectopic pregnancy, — pag- bubuntis na labás sa matris.</i>
asthenia (n)	Tag. <i>atáksya</i> (coin- ed) <i>mabuwáy na paglakad</i>	energy (n)	Tag. <i>iwing-lakás</i>
ataxia (n)	Tag. <i>madalang na tibók-pusò</i> .	exhale (v)	Tag. <i>humingáng pa- labás</i> ; inhale: <i>hu- mingáng papasók</i> or <i>paloób</i> .
bradycardia (n)	Tag. <i>kaloriya</i> ; <i>kaila- ngang init-katawán</i>		
calory (n)			

expire (v)	Tag. <i>lumipas, napasó, lipás.</i>	organ (n)	at <i>pandamdám</i>
expired (v)	Tag. <i>namatáy, nalagután ng hiningá</i>	orgasm (n)	Tag. <i>sangkáp</i>
feces (n)	Tag. <i>dumi</i> , in common parlance, <i>tae</i>	paralysis (n)	Tag. <i>kayamuan, kalibugan</i>
fever (n)	Tag. <i>lagnát.</i>	paralysis (n)	Tag. <i>paralisis</i> : pagkawalá ng lakás sa pagkilos o paggalaw.
feverish (adj)	Tag. <i>sinisinat</i>	peristalsis (n)	Tag. <i>galaw-bituka: kilos-bituka</i>
hemophilia (n)	Tag. <i>emopiliya</i> (coined). Follow with this explanation; isang sakit na lumalabnaw ang dugô at hindi mamuomuô. Namamatáy ang maysakit sa pagdanak ng dugô sa loob at labás ng katawán dahil sa hindi maampat-ampat.	perspiration (n)	Tag. <i>pawis</i>
heart beat (n)	Tag. <i>tibók-pusò</i>	plasma (n)	Tag. <i>tubigò</i> ; bahaging waláng kulay ng dugò, <i>tubig ng dugò.</i> (coined)
hyperchloridia (n)	Tag. <i>iperkloridiya</i> (coined) kalagayang labis ng ásidò o asim sa sikmurà. malabis na pangangasim.	polyuria (n)	Tag. <i>pag-ihi ng marami.</i>
hyperesthesia (n)	Tag. <i>labis na damdám</i>	pulse (n)	Tag. <i>pulsò, tibók-ugát</i>
hypoglycemia (n)	Tag. <i>katabangán ng dugò; pagkukulang ng matamis sa dugò</i>	respiration (n)	Tag. <i>paghingá</i>
inhale (v)	Tag. <i>humingáng malalim or humingang paloób.</i>	Saliva (n)	Tag. <i>laway</i>
myasthenia (n)	Tag. <i>panghihinà ng lamán; kawalang-lakás</i>	salivation (n)	Tag. <i>paglalawáy</i>
narcolepsy (n)	Tag. <i>kawalang-malay</i>	tachycardia (n)	Tag. <i>mabilis na tibók-pusò</i> ; To coin; <i>bilis-puso.</i> palpitation: <i>kabá, sikdò, andáp.</i>
		tactile (adj)	Ta. <i>hipò, salát, damá, kapá</i>
		temperature (n)	Tag. <i>init</i>
		thermometer (n)	Tag. <i>panukat-init</i>
		tic (n)	Tag. <i>tik</i> (coined) <i>kirát-kirát</i>
		tremor (n)	Tag. <i>panginging</i>
		vasoconstrictor (n)	Tag. <i>tagá-ikom ng daluyang dugò.</i>
		vasodilator (n)	Tag. <i>tagaluwáng ng daluyang dugò.</i>
		viscosity (n)	Tag. <i>kalaputan, viscid: malapot, sticky: madikit, malagkit.</i>

PART FIVE

PATHOLOGY — PALASAKITAN

Pathology is the subject which introduces the student to the abnormal conditions of the body. Its terminology is closely interrelated with terms in anatomy. English terminologies have common suffixes that denote abnormal processes, such as *itis* for inflammation, *oma* for tumor. In the Philippine National Language under study, we still have to find appropriate suffixes to make a general rule for all inflammations and tumorations. This study will be found in part six of our present report. We will therefore, confine ourselves to the common usages which have been used by present practitioners and incorporate them here.

abnormal (adj)	Ta. <i>ditaál; di-likás</i> ; coined from <i>hindi taál, hindi likás.</i>	antracosis (n)	<i>rism; pagluwang ng aorta.</i>
abscess (n)	Tag. <i>pigsá</i>	antracosis (n)	Tag. <i>antrakosis</i> (coined); pagkakaroon ng pulbos o abo ng karbon sa baga.
adenitis (n)	Tag. <i>adenitis</i> (adapted); <i>pamamagá ng glandulá.</i>	antrax (n)	Tag. <i>antráks</i>
adipose (n)	Tag. <i>tabá</i>	arterioscleros (n)	Tag. <i>tigasteriya</i> (coined from: <i>paninigas ng arterya</i>)
amoeba (n)	Tag. <i>amiba</i> (coined)	atrophy (n)	Tag. <i>pagliit</i>
anemia (n)	Tag. <i>animiya, pamumutlá</i>	autopsy (n)	Tag. <i>autopsiya</i>
aneurism (n)	Tag. <i>anyorismo</i> (coined); aortic aneu-		

calculus (n)	Tag. <i>bató</i> ; urinary calculus: <i>bató sa pantog</i>	inflamed (adj)	Tag. <i>namamagá</i>
cancer (n)	Tag. <i>kanser</i> (coined) and most common)	influenza (n)	Tag. <i>trankaso</i>
caries (n)	Tag. <i>bukbók</i> ; dental caries: <i>bukbók sa ngipin</i> . carious teeth: <i>bukbuking ngipin</i> or <i>ngiping bukbukin</i> .	jaundice (n)	Tag. <i>paniniláw</i>
catarrh (n)	Tag. <i>sipón</i> ; nasal catarrh: <i>sipón sa ilong</i> . intestinal catarrh: <i>sipón sa bituka</i> .	lymph (n)	Tag. <i>dugó-dugúan</i> (coined) or <i>putigo</i> coined from <i>dugong puti</i> .
chlecystitis (n)	Tag. <i>magángda-anang-apidó</i>	meningitis (n)	Tag. <i>meninghitis</i> (very common)
cholecystitis (n)	Tag. <i>m a g a n g da-anang-apidó</i> .	myocarditis (n)	Tag. <i>magánglamáng-pusò</i>
cholelethiasis (n)	Tag. <i>bató sa daang-apidó</i> .	myositis (n)	Tag. <i>magáng-lamán</i>
consolidation (n)	Tag. <i>pamumuó</i>	necrosis (n)	Tag. <i>lamáng-patáy</i>
consolidate (v)	Tag. <i>buuín</i>	nephritis (n)	Tag. <i>nipritis</i> (common) <i>magambató</i> (coined)
cyst (n)	Tag. <i>kiste</i> (coined)	osteitis (n)	Tag. <i>magambutó</i>
dermoid (adj)	Tag. <i>sa balát</i> ; dermoid cyst: <i>kiste sa balát</i> .	osteoarthritis (n)	Tag. <i>magambutóng-kasúkasuan</i>
diabetes (n)	Tag. <i>dyabetis</i> (coined)	periarteritis (n)	Tag. <i>magámpaligid-arterya</i>
diphtheria (n)	Tag. <i>dipteriya</i>	pericarditis (n)	Tag. <i>magámbamban-pusò</i>
dysentery (n)	Tag. <i>iti</i> , <i>disenteriya</i> (coined) <i>pagdudu-mi ng dugo</i> at <i>uhog</i> .	perihepatitis (n)	Tag. <i>magámpaligid-atáy</i>
edema (n)	Tag. <i>manás</i>	periostitis (n)	Tag. <i>magámpaligid-butó</i>
emphysema (n)	Tag. <i>pagkakahangin</i>	perisplenitis (n)	Tag. <i>magámpaligid-atáy</i>
empyema (n)	Tag. <i>págnananá</i>	peritonitis (n)	Tag. <i>magámbamban-tiyan</i>
endocarditis (n)	Tag. <i>m a g á n g -loób-pusò</i>	phlebitis (n)	Tag. <i>magámbena</i>
enteritis (n)	Tag. <i>magámbituka</i>	pleuritis (n)	Tag. <i>magámbamban-bagá</i>
epithelioma (n)	Tag. <i>epitilyoma</i> (coined) <i>tumór</i>	pneumonia (n)	Tag. <i>pulmonyá</i> (common) <i>magambagá</i> (coined)
fistula (n)	Tag. <i>pistula</i>	postmortem (n)	Tag. <i>pagkamatáy</i>
gangrene (n)	Tag. <i>kangrena</i> ; gangrenous: <i>n a n g a -ngangrena</i> .	pus (n)	Tag. <i>naná</i>
goiter (n)	Tag. <i>bukláw</i> , <i>bosyo</i>	putrefaction (n)	Tag. <i>pagkabalók</i>
hematoma (n)	Tag. <i>pamumuóng-dugó</i>	putrid (adj)	Tag. <i>bulók</i>
hemorrhage (n)	Tag. <i>pagdugó</i> , <i>pagdurugó</i> , <i>pagdanak ng dugó</i> .	putrefying (adj)	Tag. <i>nabubulók</i>
hepatitis (n)	Tag. <i>magáng-atáy</i>	pyelitis (n)	Tag. <i>nagnanang-bató</i>
hepatomegaly (n)	Tag. <i>paglaking-atáy</i>	pyothorax (n)	Tag. <i>nagnanang-dib-dib</i>
hyperemia (n)	Tag. <i>pamumulá</i>	regeneration (n)	Tag. <i>muling-tubó</i>
hypertension (n)	Tag. <i>taasprisióñ</i> ; hypotension: <i>babamprisiyon</i> .	rheumatism (n)	Tag. <i>rayuma</i>
icterus (n)	Tag. <i>paniniláw</i>	rubor (n)	Tag. <i>pamumulá</i>
icteric (adj)	Tag. <i>naniniláw</i>	sclerosis (n)	Tag. <i>paglutóng . . . pagtigás</i>
induration (n)	Tag. <i>paninigás</i>	serum (n)	Tag. <i>katasdugó</i>
indurated (adj)	Tag. <i>naninigás</i>	splenomegaly (n)	Tag. <i>paglaking-lapáy</i>
inflammation (n)	Tag. <i>pamamagá</i>	scaly (adj)	Tag. <i>makalikis</i>
		stenosis (n)	Tag. <i>pagkipot</i>
		striature (n)	Tag. <i>pagsará</i>
		suppuration (n)	Tag. <i>pagnananá</i>
		thrombosis (n)	Tag. <i>trumbosis</i> (coined) <i>paghalang</i> , <i>paghadlang</i> , <i>pagbabara</i> .
		tumescene (n)	Tag. <i>pamumukol</i>
		ulcer (n)	Tag. <i>ulserá</i> (from Sp.)

PART SIX

SYMPTOMATOLOGY — PALADAMDAMANG-SAKIT

As previously explained, English terminologies have common suffixes to denote abnormal processes and conditions. Prominently among them are:

- *ache*
- *itis*
- *algia*
- *oma*
- *osis*
- *rhagia*
- *ity*

Ache denotes the feeling of pain. By adding this suffix to numerous medical terms, it describes the symptomatology of conditions. For example, stomach-ache (pain in the stomach), headache, pain in the head, etc. *Itis* denotes inflammation as in appendicitis, bronchitis, etc. *Algia* denotes pain on movements as in myalgia, neuralgia, etc. *Oma* is the suffix for all tumors, as in myoma, sarcoma, fibroma, carcinoma, etc. *Osis* signifies condition as in hyperhidrosis, leucocytosis, sclerosis, etc. *Rhagia* is the suffix for anything that breaks causing discharges, as in blenorrhagia, metro-rhagia, etc. *Ity* denotes quality of condition as in acidity, rigidity, frigidity, etc.

These English medical suffixes have no equivalents in the Philippine National Language. The committee, up to the present study can not come to an agreement as to the proper suffixes which may come closer to the English suffixes. Common local usages for all aches and algias may be well translated into words: *sakit*, *kirot*, *hupdi*, *anták*.

Example:

headache (n)	Tag. <i>sakit ng ulo</i>
myalgia (n)	Tag. <i>kirot ng laman</i>
breastache (n)	Tag. <i>sakit ng dibdib</i>

By the addition of the words *sakit ng* before any organ of the body you can very well describe all aches and algias as in the English terminologies.

Likewise, the Committee approves the use of the word *maga* from *pamamaga* which denotes inflammation as a prefix to translate *itis*. Using *maga*, therefore, before any part or organ of the body, we will be able to translate all conditions with suffixes *itis*.

Example:

tonsilitis (n)	Tag. <i>magángtonsil</i>
myositis (n)	Tag. <i>magánglamán</i>
hepatitis (n)	Tag. <i>magáng-atáy</i>

The use of *magang* follows words which begin with all letters of the alphabet with exception of *p* and *b*. Terms which begin with *p* or *b* changes *magáng* to *magam* for their prefixes.

Example:

carditis, (n)	Tag. <i>magámpusò</i> and not <i>magángpusò</i>
nephritis (n)	Tag. <i>magambató</i> , not <i>magangbató</i>
cystitis (n)	Tag. <i>magampantóg</i>
stomatitis (n)	Tag. <i>magambibig</i>

With the approval of *magang* or *magam* as prefix to take the place of English suffix *itis* we can translate a long line of ailments in the national language. Exceptions however to this rule will be forthcoming in our next report.

The suffix *oma* which denotes tumorations has no literal equivalent in Tagalog. Any mass or tumoration whether inside or outside of the body is generally called "*bukol*", *pamumukol*, *bumubukol*.

We call tumor of the breast as *bukol sa bibdib*. Any palpable mass is called *bukol* in Tagalog. Our next report will deal with the study of this subject.

Likewise there is no term to differentiate malignant and benign tumors. In some regions of the Philippines which speak the National Language the word *bukol* or tumor is generally understood as benign growth. At present, due to the campaign on cancer, all malignant tumors without considering the pathology are readily called cancer.

From the foregoing explanations, one will readily admit the existing difficulties in coining Tagalog words to conform with these suffixes and their meaning. To translate all the various forms of suffixes will only becloud the issue. Suffixes therefore, that express condition, like "osis" and iasis can not be translated in one word-term in the National language. They need longer explanations at the bedside.

To facilitate explanations we compile here-under the compounding elements which in themselves denote conditions.

COMPOUNDING ELEMENTS

ELEMENT	ORIGIN	ENG. EQUIV.	TAGALOG EQUIV.
algia	Gr. algos	pain	<i>kirót, anták, hapdi</i>
antero-	L. anterior	in front of	<i>haráp ng</i>
auto-	Gr. autos	self	<i>sarili</i>
bio-	Gr. bios	life	<i>buhay</i>
brachy-	Gr. brachys	short	<i>maigsi, maiksi</i>
brady-	Gr. bradys	slow	<i>madalang, mabagal</i>
-ectomy	Gr. ektome	cutting out	<i>pag-alis, pagputol</i>
iso-	Gr. isos	equal	<i>kasing</i>
macro-	Gr. makros	big	<i>malaki</i>
meso-	Gr. mesos	middle	<i>gitná, pagitan</i>
mikro-	Gr. mikros	small	<i>maliit</i>
neo-	Gr. neos	new	<i>bago</i>
-oid	Gr. eidos	resemblance	<i>kamukhá, katulad</i>
oligo-	Gr. ligos	few, scanty	<i>kakaunti, katiting</i>
ortho-	Gr. ortos	straight	<i>tuwid</i>
-ostomy	Gr. stoma	mouth	<i>bibig, bungangà</i>
-otomy	Gr. tome	cutting	<i>hiwà, biyák, baák</i>
pan-	Gr. pan	all	<i>panlahát, lahát</i>
poly-	Gr. polys	many	<i>marami</i>
postero-	L. posterus	behind	<i>likurán, likód</i>
pseudo-	Gr. pseudos	false	<i>huwád</i>
-rhagia	Gr. rhegnynai	to break thru	<i>baság, danak</i>
-rhoea	Gr. rhoia	flow	<i>daloy, agos, agas</i>
tachy-	Gr. tachys	fast	<i>bilis, dalás, tulín</i>

APPENDIX "E"

REPORT OF THE SPECIAL COMMITTEE ON MEMBERSHIP
Philippine Medical Association

March 23, 1954

The Committee on Membership of which the undersigned is the Chairman, consists of the following members

- Dr. Pedro A. Rodriguez — *Member*
- Dr. Guardalino C. Mosqueda — *Member*
- Dr. Fernando D. Manalo — *Member*
- Dr. Juvenal Almendras — *Member*
- Dr. Dionisio Parulan — *Member*

The only meeting held by the committee was immediately after its organization in which it has been decided that each one will work in his respective region for the enhancement of the membership of the physicians in their respective medical societies. As the members reside in different places at great distances from each other, it was very difficult for the members to meet again.

The undersigned has endeavored to encourage the affiliation of physicians to medical societies whenever he had a chance to participate in provincial and regional medical society meetings which have been several during the past year. Whenever new physicians who have just passed the examination given by the Board of Medical Examiners take their oath, efforts have also been made so that during those occasions, the new doctors are given a chance to affiliate to the medical society of their respective provinces.

It is hoped that the efforts exerted individually by the members of the committee on membership will be manifested in a greater membership of the various daughter societies of the Philippine Medical Association.

Respectfully submitted

(Sgd.) T. ELICAÑO

Chairman

Committee on Membership

APPENDIX "F"

REPORT OF THE SPECIAL COMMITTEE ON RURAL HEALTH

March 29, 1954

The Council
Philippine Medical Association
Manila

My dear Dr. Fernando:

In compliance with your instructions contained in a letter of the Secretary-Treasurer dated March 22, 1954, I have the pleasure to submit herewith a report of the Committee on Rural Medicine for the year 1953-54.

Immediately after receiving my designation as Chairman of the Committee on Rural Medicine, I at once set to work on a plan whereby my Committee can fit in our government's rural health program so as to consider the interest of the members of the Philippine Medical Association most of whom were private practitioners. At that time my counterpart in the FOA and myself, were in the process of preparing a draft of a 6-year Philippine-American Program on rural health intended to correctly solve the manifold health and sanitation problems obtaining in the rural areas. Upon assuming my new responsibility, I immediately inserted in said program several guiding principles which had to be religiously followed by the Medical Heads of Rural Health Units in order that their relationship with the medical practitioners may be harmonious and in order that the interest of the medical practitioners may be duly and amply protected. These guiding principles appear on Page 35 of the Preliminary Document on Philippine-American Program for Rural Health, a copy of which is herewith submitted as part of the accomplishments of our Committee.

I had the opportunity to present the draft of this preliminary document in our first meeting sometime in July of last year which was attended by the President, the three Vice-Presidents and the Presidents of the Laguna Medical Society, Cavite Medical Society, Pampanga Medical Society and others. I would like to mention that as expected, the main theme of the discussion centered on the fear that government operated rural health units may compete with and ultimately kill the practice of the private practitioners in the rural areas. Those present took turns in reminding the Chairman on the possible adverse effects of the Program on the interest of private practitioners who have to depend upon private patients for the successful practice of their profession. It was generally bruited during that first meeting that health unit medical heads would offer stiff competition to private practitioners in rural areas as a result of which the private practitioners would have to lose their patients. The Chairman had to explain in detail the working policies and principles that have been adopted by those who drafted the Philippine-American Program in Rural Health so as to insure the protection of the interest of private practitioners. After a lengthy discussion, the Vice-Chairman and members present were convinced that if the program is rightfully implemented, there need not be any fear along that line.

The undersigned also had the opportunity to talk before members of the Baguio Medical Society, the Cavite Medical Society and the Bulacan Medical Society in order to explain the objectives, operations and goals of the rural health program and again, during all his talks the same fear that private practitioners may be adversely affected in the operation of this program was broached up and successfully defended. It was always reiterated that during the one-month pre-service training of rural health unit personnel prior to their leaving for their field assignments, said health personnel, particularly the Medical Heads, were reminded that they were not allowed to engage in private practice, that they were not allowed even to sell their own medicines because by doing so they may be suspected of selling the medicines of the unit, that they should limit their medical services only to those who are medically indigent; that they should cultivate the best working relationship with private practitioners and that they should allow private practitioners to avail of the facilities of the units in the practice of their profession.

In this connection, the undersigned is submitting a self-explanatory certificate of an ex-President of a provincial medical society, one of those who participated in the 1st meeting of the committee as aforementioned and who was very vocal in his fear that the health units would offer effective and successful competition to private practitioners. This certificate clearly showed that after six-months of observation and working relation with the personnel of the unit involved, he has come to the conclusion that health units did not only not compete with the private practitioners but also helped them in the practice of their profession by making people more health-minded and receptive to modern medical methods, by encouraging those who can afford to pay to seek their (private practitioners) services and lastly, by inviting private practitioners to share in the medical facilities of the health units.

In the second meeting of our Committee which was held in the Philippine General Hospital two months ago with the President of the Philippine Medical Association and the Presidents of the Manila Medical Society, Bulacan Medical Society, Rizal Medical Society and Camarines Norte Medical Society, and others attending, the undersigned submitted a finished document on Philippine-American Program of Rural Health and also a Manual for the Barrio Medical Kits containing definite instructions to the barrio health committee which will be in-charge of simple medicines for first aid and emergency treatment in the barrigs included in the program. During that meeting, the undersigned also presented the draft of a symposium on Rural Health which will take place during the forthcoming convention of the Philippine Medical Association next month.

The draft was approved by the Committee with slight modifications. The speakers and participants of the symposium were already contacted and all of them expressed willingness to participate in said symposium at the stated time and place.

The undersigned would also like to report that he has been designated by the Secretary of Health as Chairman of a Sub-Committee on Rural Health, composed of the technical personnel from the Department of Health, FOA, WHO, UNICEF, PHILCUSA, Institute of Hygiene, with a panel of expert advisers like the President of the Philippine Medical Association and the Chairman of the Committee on Health of both Chambers of Congress. This Committee held three meetings during the year. The minutes of said meetings are duly filed. It may be pertinent to mention in this connection that one of the most important accomplishments of the Committee on Rural Health was the submission of a number of recommendations concerning the Rural Health Bill which is at present under discussion in Congress. The recommendations which were approved unanimously during the meeting are also herewith attached.

RECOMMENDATIONS:

1. That the Philippine-American Rural Health Program and also the Manual for the operation of the Barrio Medical Kits be approved.
2. That the guiding principles contained on page 35 of said Preliminary Document be properly and religiously implemented so as to protect fully the interest of the private practitioners during the operation of said program.
3. That in the operation of said program, the Presidents of the provincial medical societies be considered as advisers to the Provincial Medical Officers so that the latter can always see to it that the interest of the private practitioners are not ignored.
4. That private practitioners be urged to avail of the facilities existing in the health units.
5. That provincial medical societies be encouraged to report to the Director of Health any violations of the said guiding principles by any of the members of the health units.
6. That, as much as possible, representations be made such that the health units shall be established in places where there are none or relatively few private practitioners.

Respectfully submitted,

For the Committee:

(Sgd.) CLEMENTE S. GATMAITAN
Chairman

APPENDIX "G"

REPORT OF THE SPECIAL COMMITTEE ON THE WORLD MEDICAL ASSOCIATION

April 10, 1954

The Council
Philippine Medical Association
Manila

Gentlemen:

On behalf of the Special Committee on the World Medical Association, I have the honor to submit the following Report on the World Medical Association.

REPORT OF THE SPECIAL COMMITTEE ON THE WORLD MEDICAL ASSOCIATION

On the fundamental principle that "SOCIETY MUST GUARANTEE THE PHYSICIAN INDEPENDENCE IN HIS OWN FIELD," the World Medical Association was founded in Paris in 1947. The Philippine Medical Association has been a member of the World Medical Association since March 4, 1948, upon invitation through its Honorary Secretary, Dr. Charles Hill. The General Assemblies have been held as follows with the Philippine delegates in parenthesis:

- 1st — 1947 Paris
- 2nd — 1948 Geneva
- 3rd — 1949 London
- 4th — New York (Drs. Mariano Icasiano, Saturnino Ador Dionisio, Jose R. Reyes and Daniel Ledesma)
- 5th — 1951 Stockholm (Dr. Agerico B. M. Sison and Dr. George F. Lull of the A.M.A.)
- 6th — 1952 Athens (Dr. George F. Lull of the A.M.A. represented the P.M.A. upon our request and authority.)
- 7th — 1953 (Dr. Manuel D. Peñas)

There are 43 member-national organizations and to the general assemblies each country may send two official delegates, two alternate delegates and official observers.

The executive officers include a President, a President-Elect, the Treasurer, the Chairman of the Council, the Consultant General, the Secretary General and 4 regional Secretaries, the Editor of the Bulletin and a Liaison Officer. There are 10 members of the Council.

There are seven Standing Committees: Social Security, Medical Education, Medical Care & Allied Subjects, International Pharmacopoeia, Medical Ethics, Planning and Finance and Miscellaneous Business.

A temporary division into regions is as follows:

REGIONS	REGIONES
<u>Europe</u> Austria Belgium Denmark Egypt Ethiopia Finland France Germany, Western Great Britain Greece Iceland Israel Italy Liechtenstein Luxembourg Netherlands Norway Portugal Spain Sweden Switzerland Turkey Yugoslavia	<u>Americas</u> Brazil Canada Chile Columbia Cuba Dominican Republic Ecuador Guatemala Haiti Panama Peru El Salvador U. S. A.
	<u>Australasia</u> Australia India Indonesia Japan Korea, South Pakistan Philippines South Africa Thailand

The 7th GENERAL ASSEMBLY—The Hague (August 31—September 5, 1953)

THE SETTING: Beautiful Holland, with its even countryside, placid canals, flower markets and the bustling harbors of Amsterdam and Rotterdam can easily be imagined. Historic The Hague, the seat of Parliament and the famous Peace Palace is a thrilling site for the 7th General Assembly. The registration, exhibits and meetings were held in the "Binnenhof" Castle. The meetings were held in the Ridderzaal" (Knight's Hall) where legend tells us that any Knight may speak his piece and remain immune from arrest or disfavour. Dr. Hulst, President of the Assembly, urged that everybody speak freely. To this day, parliament meets at this Hall.

THE SOCIAL EVENTS, RECEPTIONS: The Royal Netherlands Medical Associations was most gracious in its reception of the delegates and guests at this Assembly. There was a formal dinner given by the Association at the Hotel Kurhaus at Schveringen, a visit to the Aalsmeer Flower market and a reception given by the Mayor of Amsterdam. A visit to Rotterdam was sponsored by the Rotterdam Medical Society. A separate program was prepared for the ladies.

THE BUSINESS MEETING: The Assembly received greetings from international organizations, adopted the manner by which member associations may be represented in the General Assembly by other member associations, rejected German as a 4th official language (too costly), approved the admission of Indonesia, Brazil and Liechtenstein forthwith seating the delegates of these countries, approved the auditor's report, urged cooperation with the International Union of Medical Press, instructed the Council to assume publication of "World Medical Periodicals," received the reports of the Regional Secretaries, the Editor and the Committee Chairman, confirmed Rome as the site for the 8th General Assembly, received invitations for the 9th and 10th General Assembly, elected Professor Dr. A. Espinelli as President-Elect. While Medical Education got plenty of attention during the discussion, by far it was Social Security of the Physicians that occupied most of the discussors.

FINAL COMMENTS: We must continue with our membership in the World Medical Association.

Respectfully submitted

(Sgd.) MANUEL D. PEÑAS, M.D.
Chairman
Committee on World Medical Assn.

APPENDIX "H"

REPORT OF THE SPECIAL COMMITTEE ON CANCER

April 10, 1954

THE COUNCIL
 Philippine Medical Association
 Manila

Gentlemen:

Your Committee on Cancer for 1954 hereby reports the following activities and recommendations:

1. The intensive educational campaign directed to the laity has been carried out with the help

of other civic organizations, private institutions, and the personnel of the Department of Health throughout the year all over the country. All the media of information available were utilized and demonstrations whenever possible were done.

2. A bill creating the Division of Cancer Control in the Department of Health and endorsed by this Committee was introduced in the last Congress, but was tabled by the Committee on Health due to lack of time.

3. It was also observed by your Committee that provincial medical societies and other specialty societies have put more emphasis on cancer subjects for their monthly scientific meetings. At times, local as well as foreign authorities on Cancer were invited in some of these scientific meetings.

In view of these movements with regards to our educational campaign on Cancer, your Committee recommends the following:

1. To petition the President of the Republic to proclaim a Cancer Week in the Philippines.
2. To campaign for the formal organization of a Philippine Cancer Society.
3. To create a subcommittee of the Cancer Committee who shall study and report a Cancer Survey of the Philippines. A modest sum should be set aside for such a study.
4. To work or lobby for the creation or reopening of The Cancer Institute.
5. To prepare for the publication of pamphlets for distribution to the lay public, with such titles as "Cancer and You, You Can Outwit Cancer, Cancer is curable," etc., such pamphlets to be available or be published by such entity as the Health Education Division, of the Department of Health.
6. To prepare similar pamphlets for the use of the general practitioner.

Respectfully submitted,

For the Cancer Committee:

(Sgd.) JANUARIO ESTRADA
Chairman

APPENDIX "I"

REPORT OF THE SPECIAL COMMITTEE ON SCIENTIFIC EXHIBITS

April 20, 1954

The Council,
Philippine Medical Association,
Manila

Gentlemen:

I am submitting for the Committee on Scientific Exhibits the following exhibitors with their corresponding exhibits for this year's annual meeting of the Association:

Scientific Exhibits (Titles-authors)

1. The USTH Well-Baby Clinic: Its Organization and Functions. By Consolacion Atienza-Sembrano, M.D., Carmelita R. Belmente, M.D., and Agnes de Leon, M.D.
2. The Incidence of Heart Disease in the Santo Tomas University Hospital: A Post-War Statistical Study. By Mariano M. Alimurung, M.D. and Maria Z. Grajo, M.D.
3. Oral Protoveratrine in the Treatment of Hypertension. By Mariano M. Alimurung, M.D. and Maria Z. Grajo, M.D.
4. Problems and Recent Developments in the Management of Congestive Heart Failure. By Mariano M. Alimurung, M.D.
5. Philippine National Red Cross Blood Program. By R. Y. Atienza, M.D., Director of the Medical Service.
6. Misconceptions About Senile Cataract. (By specimen, statistics, charts and statements of current practices from the Eye Clinic, the different misconceptions about senile cataract still prevalent among the medical profession and laity in the Philippines are shown. These refer mainly to immature cataracts, hypertension, diabetes, old age, cough, visual results and ambulation. A summary leaflet will be distributed.) By De Ocampo Eye Clinic.
7. Scientific Exhibits on Schistosomiasis:
 - I. Relief Map of Leyte showing (a) Topography of the Pilot Area; (b) Location of Endemic municipalities; (c) Headquarters of the Schistosomiasis Control Pilot Project at Palo.
 - II. The Office and Laboratory Building of the Pilot Project at Palo in three Dimensions.
 - III. Transparencies showing various aspects of and information about the Schistosomiasis problem.
 - IV. Map of endemic areas in various parts of the Philippines (in Zip-a-tone).
 - V. Various charts, posters, tabulated data, etc.
 - VI. Demonstration of fresh and preserved laboratory materials.
8. Exhibits by Dr. J. Tamesis on Corneal Transplantation.
9. Heart Disease—A Public Health Problem—Philippine Heart Association.
10. Eye Bank Exhibit—Philippine Eye Bank for Sight Restoration.
11. Photographs of fundus of the eye. By Jose N. Cruz, M.D., Emmanuel Almeda, M.D., and Antonio S. Fernando, M.D.

In order to give every member of the Association a better view of the exhibits the corridor on the 4th floor adjoining the Social Hall of the FEU administration building will be utilized.

The Committee still expects some more applicants before the annual meeting begins. It is therefore requested that the same number of movable stands used last year be made available.

A meeting of the Committee is being called for next Saturday by the Chairman to decide on matters like prizes and the appointment of the Board of Judges. Dr. Alimurung and the chairman have agreed, pending the approval of the rest of the members, that the same judges be named again this year; namely, Drs. Antonio G. Sison and Basilio J. Valdes with the Chairman of the Committee to select the first, second and third prizes from the participants of the Scientific Exhibits.

Respectfully submitted,

(Sgd.) ALBERTO V. TUPAS, M.D.
Chairman

APPENDIX "J"

REPORT OF THE SPECIAL COMMITTEE ON MEDICAL ETHICS (See pages 10-11)

REPORT OF THE SECRETARY-TREASURER

April 10, 1954

To the Members of the House of Delegates
47th Annual Meeting, Philippine Medical Association
Manila:

Dear Sirs:

I have the honor to submit this annual report of the Secretary-Treasurer for the period from April 1, 1953 to March 31, 1954. As suggested by the members of the Auditing and Finance Committee and of the House of Delegates of the 46th Annual Meeting, I have divided the report into several sections.

I. MEMBERSHIP OF THE ASSOCIATION:

The registered members as of December 31, 1953 is shown in Table No. 1. Compared with the figures as of December 31, 1952 there has been an increase in the total membership.

TABLE No. 1
REGISTERED MEMBERS OF THE PHILIPPINE MEDICAL ASSOCIATION
(As of December 31, 1953)

	<i>In Good Standing</i>	<i>Not In Good Standing</i>	<i>Total</i>
1. Abra Medical Society	10	8	18
2. Agusan Medical Society	27	10	37
3. Albay Medical Society	19	29	48
4. Antique Medical Society	1	2	3
5. Baguio Medical Society	22	37	59
6. Bataan Medical Society	16	16	32
7. Batangas Medical Society	40	35	75
8. Bohol Medical Society	26	12	38
9. Bulacan Medical Society	102	31	133
10. Cagayan Medical Society	32	5	37
11. Camarines Norte Medical Society	20	8	28
12. Camarines Sur Medical Society	29	20	49
13. Capiz Medical Society	25	27	52
14. Catanduanes Medical Society	1	6	7
15. Cavite Medical Society	30	29	59
16. Cebu Medical Society	53	100	153
17. Cotabato Medical Society	32	34	66
18. Culion Medical Society	13	2	15
19. Davao Medical Society	47	44	91
20. Ilocos Norte Medical Society	22	18	40
21. Ilocos Sur Medical Society	19	24	43
22. Iloilo Medical Society	20	111	131
23. Isabela Medical Society	41	9	50
24. Laguna Medical Society	26	72	98
25. Lanao Medical Society	16	17	33
26. La Union Medical Society	33	9	42
27. Leyte Medical Society	31	30	61
28. Manila Medical Society	556	704	1,260
29. Marinduque Medical Society	7	3	10
30. Masbate Medical Society	3	—	3
31. Mindoro Medical Society	32	7	39
32. Misamis Occidental Medical Society	24	13	37
33. Misamis Oriental Medical Society	36	18	54
34. Negros Occidental Medical Society	46	87	133
35. Negros Oriental Medical Society	12	25	37
36. Nueva Ecija Medical Society	54	38	92

37. Nueva Vizcaya Medical Society	16	7	23
38. Pampanga Medical Society	71	56	127
39. Pangasinan Medical Society	181	79	260
40. Quezon Medical Society	4	63	67
41. Quezon City Medical Society	50	25	75
42. Rizal Medical Society	81	37	118
43. Rizalian Medical Society	—	27	27
44. Romblon Medical Society	2	6	8
45. Samar Medical Society	4	20	24
46. San Pablo City Medical Society	20	14	34
47. Sorsogon Medical Society	10	18	28
48. Sulu Medical Society	1	14	15
49. Surigao Medical Society	14	14	28
50. Tarlac Medical Society	61	52	113
51. Zambales Medical Society	25	24	49
52. Zamboanga City Medical Society	19	14	33
53. Zamboanga del Sur Medical Society	3	22	25
TOTALS	<u>2,085</u>	<u>2,132</u>	<u>4,217</u>
Figures as of December 31, 1952	(1,965)	(1,798)	(3,754)

II. COMPONENT SOCIETIES:

The office of the Secretary-Treasurer is in constant communication with the component medical societies. We have tried to encourage them to send in items of interest for publication in the Journal. Several newsletters have been sent out containing informative data regarding the transactions of the Council and other agencies of the Association. Pending legislation affecting health were mimeographed and sent for comment and suggestions by the component medical associations. The minutes of the meeting of the presidents and secretary-treasurers held during the 46th annual meeting was also distributed. At least 1800 membership certificates and 210 past-president certificates have been issued. Members who do not have these yet should make their requests thru their secretary-treasurer.

III. AFFILIATED SPECIALTY SOCIETIES:

Informative data sent to the component medical societies were also sent to the affiliated specialty societies in charge of the specialty sections of the Association. Pertinent problems were referred to the specialty sections for recommendations.

IV. MEDICAL DIRECTORY:

The material for the 8th Edition of the Philippines Medical Directory of the Philippine Medical Association has been collected for more than two years. However, in spite of repeated requests, there were many members who failed to submit their data on time to make the deadline. Also, in spite of our efforts to make it accurate as possible, many mistakes were discovered after printing. We beg the indulgence of the members concerned and hope that they will send in their corrections so that the next edition will be much more accurate. There are about two hundred and fifty copies left of this edition, available at our office.

V. THE GOLDEN BOOK:

This compilation of reviews of the progress in the different medical specialties is nearing completion and when the printing cost is estimated, we shall invite the members to secure pre-publication reservations.

VI. FINANCES:

As part and parcel of this report, I invite you to read:

Appendix A—Report of the Business Manager of the Journal.

Appendix B—Report of the Auditor

These reports have been examined by the Standing Committee on Auditing and Finance, not only in its final form, but in quarterly summaries sent to each member of the Standing Committee. The report of this body is therefore also recommended for perusal.

One important recommendation which we intend to implement immediately is the breakdown of the income and expenditures. (See No. 7 of the Report of the Standing Committee on Auditing and Finance).

PHILIPPINE MEDICAL ASSOCIATION, INC.

The Philippine Medical Association, Inc., which has been in the process of dissolution since 1952 had all its assets and liabilities transferred to the Philippine Medical Center, Inc. as of May 1951.

VII. REPRESENTATIONS:

The undersigned had the good fortune and rare privilege of having been asked to represent the Faculty of Medicine of the University of Santo Tomas at the First World Conference on Medical Education. He has been authorized by the Council to represent the Philippine Medical Association at the 7th General Assembly of the WORLD MEDICAL ASSOCIATION held at The Hague, Netherlands from August 31 to September 5. At the General Assembly, he conveyed the greetings of the PMA to the other medical associations and described local conditions.

The undersigned, with the President of the Association, also represented the Philippine Medical Association at the 8th Pacific Science Congress.

VIII. ACKNOWLEDGEMENT:

The undersigned is very grateful for the patience, understanding and cooperation of the members of the Council, the very valuable help of Dr. Pesigan, and the industry of the clerical staff.

The financial status of the Association for which the undersigned is accountable is contained in the Report of the Business of Manager, and which the undersigned fully approves, appears below as Appendices "A" and "B" together with Exhibits "A" and "B".

Respectfully submitted,

(Sgd.) MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

APPENDIX "A"

REPORT OF THE BUSINESS MANAGER OF THE JOURNAL

March 31, 1954

The Council
(Thru the Secretary-Treasurer)
Philippine Medical Association

Sirs:

I have the honor to submit the following annual report of the Business Manager covering a period of twelve (12) months from April 1, 1953 to March 31, 1954. As in previous years, we have closed our books of account on March 31, in order to be able to prepare our annual report on time.

Advertisements: During the 12-month period under review, twelve (12) monthly issues were published (March 1953 to February 1954, inclusive) and a total of P28,985.48 was collected from advertisements or 41.2% of the gross income. This amount is less than last year's collection which was P32,563.00. This decrease can be explained by the fact that this year several regular advertisers decreased the number of their advertisements due to poor business. There was also a number of new other medical journals this year which necessarily took some of the advertisers for our Journal because the same advertisers had the same appropriations as before.

Subscriptions: During this year, the Manila Medical Society contributed to the Journal the amount of P2,498.00 while the other component societies contributed P8,921.00 or a total of P11,419.00 with an increase as compared to P9,768.00 of last year.

Disbursements: The biggest expenditure for the period was the printing cost amounting to P21,072.46 compared to P20,232.42 of last year. It may be pointed out, however, that there was an increase of circulation from 27,800 to 29,800 this year.

Circulation: During the 12-month period under review, a total of 29,800 copies were published as compared to 27,800 copies of last year. This shows an increase in the average of monthly circulation from 2,317 to 2,483 for the current year.

Respectfully submitted,

(Sgd.) T. P. PESIGAN, M.D.
Business Manager

Manila, Philippines
April 3, 1954

EXHIBIT "A"

The Council (Thru the Secretary-Treasurer)
Philippine Medical Association
Manila, Philippines

Gentlemen:

I have examined the Balance Sheet of the PHILIPPINE MEDICAL ASSOCIATION as of March 31, 1954, and the statement of Income and Surplus for the fiscal year then ended, have reviewed the system of internal control and the accounting procedure of the association and, made a detailed audit of the cash transactions and other supporting evidence.

Auditing of accounts and records concerning accounts receivable and inventories have been made, but I have not applied the generally accepted auditing procedure of direct communication with debtors.

In my opinion, subject to the exception stated in the foregoing paragraph relating to the limitation of the scope of my examination, the accompanying balance sheet and related statement of income and surplus present fairly the position of the PHILIPPINE MEDICAL ASSOCIATION on March 31, 1954, and the results of its operations for the fiscal year, in conformity with generally accepted principles.

Respectfully submitted,

(Sgd.) FRANCISCO SANTIAGO
Certified Public Accountant

Exhibit "A"

PHILIPPINE MEDICAL ASSOCIATION
BALANCE SHEET AS OF MARCH 31, 1954

ASSETS

CURRENT ASSETS:

Petty Cash	P 300.00
Bank of America—Savings Account	7,181.82
Philippine National Bank—Current Account	18,979.04
Philippine National Bank—Savings Account	10,747.25
Accounts Receivable	17,185.63
Auto Emblems	16.00
Lapel Pins	1,377.00
Auto Stickers	404.90
Supplies—Postage Stamps in stock	200.40
Philippine Medical Center, Inc.—Loan	30,000.00

P86,392.04

FIXED ASSETS:

Books and Equipment	4,022.05
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DEFERRED CHARGES:

Prepaid Expenses—47th Annual Convention	671.75
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Total Assets

P91,085.84

LIABILITIES AND NET WORTH

CURRENT LIABILITIES:

Medico-Pharmaceutical Printing Press	P 955.00
SEA Conference—Contribution	3,679.45
Women's Auxiliary	9,222.50
Medical Research Fund	450.00
Fernando Gold Medal Award Fund	150.00

P14,456.95

DEFERRED CREDITS:

Unearned Income—47th Annual Convention	10,000.00
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NET WORTH:

Surplus—March 31, 1953	P65,087.77
Less—Adjustments	661.00
.....	P64,426.77
Add—Net Income—Per Exhibit B	2,202.12

Net Worth

66,628.89

TOTAL LIABILITIES AND NET WORTH

P91,085.84

Exhibit "B"

PHILIPPINE MEDICAL ASSOCIATION

STATEMENT OF INCOME AND EXPENSES FROM APRIL 1, 1953 TO MARCH 31, 1954

INCOME:

Advertisements	P28,985.48
Dues—Manila Medical Society	2,498.00
Dues—Provincial Medical Society	8,921.00
Subscriptions	256.59
Income—46th Annual Convention	18,424.00
Income from Ball	1,628.00
Income from Directory	2,030.50
Administration Fees	7,432.00
Miscellaneous Income	45.20
Interest Income	331.24

Total Income

P70,552.01

LESS—EXPENSES:

Salaries	P18,480.00
Office Supplies	1,431.95
Postage and Telegraph	1,013.63
Printing	21,072.46
Transportation	792.75

Miscellaneous Expenses	5,542.73
Expenses—46th Annual Convention	15,393.67
Auditing Fees	720.00
Subsidy to Golden Jubilee Volume	360.00
Directory Expenses	3,080.70
Binding of Journals	462.00
Total Expenses	<u>P68,349.89</u>
NET INCOME—To Exhibit "A"	<u>P 2,202.12</u>

REPORTS OF THE STANDING COMMITTEES

REPORT OF THE STANDING COMMITTEE ON ARRANGEMENTS

April 8, 1954

The Council
Philippine Medical Association
Thru the Secretary-Treasurer

Sirs:

As Chairman of the Committee on Arrangements for the 47th Annual Meeting of the Philippine Medical Association, I am submitting for your consideration the report of the various subcommittees which have been created specifically for the purpose of making this affair a success.

Sub-Committee on Convention Facilities

Dr. Ricardo Alfonso, Chairman; Dr. Domingo Ampil, Dr. Enrique Araneta and Dr. Jesus Nolasco, members.

This sub-committee will take charge of the convention site, its electrical installations, sound systems, decorations, illuminations, etc. The three floors of the Administration Building, the air-conditioned auditorium and the Social Hall of the Far Eastern University are all available. The corridors will be utilized for commercial exhibits.

Sub-Committee on Finance

Dr. Ruben Apelo, chairman; Drs. Heraldo del Castillo, Gloria T. Yambao and Jose Villanueva, members, are taking care of all finances involved during the celebration. Major expenses will include the orchestras and refreshments in the Reception and Ball offered by the Manila Medical Society at the Main Social Hall of Malacañang Park. The amount for this purpose shall be derived from the convention fee of P10.00 to be collected from each member in good standing.

Sub-Committee on Registration

Dr. Hermogenes A. Santos, chairman; Dr. Ruben Apelo and Dr. Jose R. Cruz, members.

The sub-committee shall see to it that registration is carried out systematically and without the least inconvenience to the members attending the meeting.

Sub-Committee on Accommodation and Transportation

Dr. Jose R. Cruz, Chairman; Drs. Victorino de Dios and Ramon Atienza, Jr., members.

The subcommittee has already made representations with the various transportation companies including air, land and sea for special rates granted to the conventionists. Land transportation during the convention shall be looked into by Dr. Victorino de Dios.

Sub-Committee on Souvenir Program

Dr. Sixto Maceda, Jr., chairman; Drs. Manuel D. Peñas, Ramon R. Angeles and Jose Villanueva, members.

The souvenir program is presently being handled by Mr. Sergio Aguirre of the MD Journal. All activities of the PMA meeting shall be incorporated in this program which we expect to be out two weeks before the convention. A separate program for scientific papers is also being prepared.

Sub-Committee on Publicity

Dr. Carmelo P. Jacinto, chairman; Drs. Antonio Gisbert, Saturnino Ador Dionisio, Enrique Garcia and Fe del Mundo, members.

The subcommittee shall issue a press release from time to time regarding matters pertinent to the convention.

Sub-Committee on Social Activities and Entertainment

Dr. Antonio M. Samia, chairman; Drs. Ramon Angeles, Rodolfo Gonzalez, Adela Planas Paterno and Francisco J. Roman, members.

This sub-committee is in charge of all the social activities and entertainment throughout the convention. Through their efforts four luncheons during the convention will be offered by the Squibbs and Company on April 27 at the Fiesta Pavillion of the Manila Hotel, the Phil-American Insurance Company on April 28 at the Phil-American Housing Project in Quezon City, the Specialty Societies affiliated with the Philippine Medical Association on April 30 at the Far Eastern University Social Hall and the Philippine Pharmaceutical Manufacturers' Association on April 30 at the Far Eastern University Social Hall. In addition, the sub-committee also was able to arrange for the following: a cocktail party to be given by the F.E.U. Institute of Medicine following the laying of the cornerstone of the F.E.U.

Hospital in the afternoon of April 27; the mass in the morning of April 28 which is to be sponsored by the Catholic Physicians' Guild of the Philippines and the "merienda" in the afternoon of the same day also offered by the Catholic Physicians' Guild of the Philippines; and the visit to Malacañang with tea party to be offered by President and Mrs. Magsaysay in the afternoon of April 29.

The sub-committee is taking full charge of the preparations and the program of the Reception and Ball which the host Society is giving in honor of the delegates and members attending the 47th Annual Meeting.

Sub-Committee on Invitation and Reception

Dr. Heraldo del Castillo, chairman; Mrs. Quintina Elicaño, co-chairman; Drs: Jose R. Cruz, Luis Martinez, Antonio Nubla, Antonio Samia, Benvenuto Diño, Mrs. Angela Fores and Mrs. Antonio P. Gabriel, members.

The sub-committee shall take charge of issuing invitations to special guests during the Reception and Ball on April 29 and the other social activities of the convention. It shall also make arrangements for the appropriate reception of those guests and foreign delegates at every social function especially at the Reception and Ball.

Respectfully submitted

(Sgd.) ROMEO Y. ATIENZA, M.D.
Chairman

ATTESTED:

(Sgd.) RUBEN APELO, M.D.
Secretary-Treasurer

REPORT OF THE STANDING COMMITTEE ON LEGISLATION AND PUBLIC RELATIONS

April 10, 1954

To the Members of the House of Delegates
47th Annual Meeting, Philippine Medical Association
Manila

Dear Sirs:

Your Committee takes cognizance of the large number of bills presented before Congress at the present time. As in the past, most of the bills are appropriating bills, some of general import and others of local interest. We still remember the admonition of our distinguished colleague, the Chairman of the Committee on Health of the Senate, to consider as well the source of the amounts involved. For this reason, while recognizing the valid reasons for each proposed appropriating legislation, we can not in justice endorse them all. So your Committee has chosen what, in its judgement, merits the more careful deliberation of the Association.

The Committee also noted that on at least three occasions, the component and affiliated societies have been informed of the proposed bills. The Committee acknowledges the contributions from the component societies but would prefer a still wider response. Some have been very helpful in sending the reasons regarding their respective actions and it is hoped that this practice would spread.

It is possible that some bills will be presented after this report, or that other bills may have been altered — we believe that the joint effort of the members of the House of Delegates and of the Standing Committee will be able to cope with the situation.

Immediately following is a list of proposed legislations which the Committee endorsed for approval:

1. S. No. 31 and/or H. No. 385. An Act Strengthening Health and Dental Services in the Rural Areas, and providing funds therefor.
2. H. No. 406. An Act to Provide Funds for the Establishment of Two Psychopathic Hospitals, one in Cebu City, which shall be called "Dr. Gregorio Singian Memorial Psychopathic Hospital," and another in Iloilo City, which shall be called "Dr. Luis Guerrero Memorial Psychopathic Hospital," and for other purposes.
3. H. No. 774. An Act to Amend Section Four of Commonwealth Act Numbered Seven Hundred Four as Amended. (To increase the salary of puericulture nurses.)
4. H. No. 794. An Act to Further Amend Act Numbered Three Thousand One Hundred and Fourteen as Amended by Act numbered Three Thousand one Hundred and Sixty Eight. (Designed to improve the financing of provincial hospitals in municipalities and provincial capitals.)
5. H. No. 202. An Act Transferring the Medical and Dental Services in the Public Schools to the Bureau of Health.
6. H. No. 1970. An Act Regulating the Practice of Medicine and Allied Professions by Aliens in the Philippines.
7. H. No. 1973. An Act to Amend Sections 754 and 775 of the Administrative Code. (re: Board examination for the practice of medicine, surgery and midwifery — limiting the number of Board examinations from four times a year to twice a year.)
8. H. No. 2080. An Act Providing for an Expansion Program on the Activities and Organization of the Institute of Nutrition and Authorizing the Appropriation of Funds Therefor.

We should like to call the attention of the members of House of Delegates to the existence of several bills which vitally affect the future of medical practice in the Philippines. The objectives behind these bills are very laudable and carries our enthusiastic support. However, because of the far-reaching significance of these proposals, we strongly urge the utmost caution and dedication in their deliberation.

House Bill No. 2001 entitled "An Act to Convert the Quirino Labor Hospital in Quezon City into a Community Hospital for Pre-paid Medical Care and Hospitalization of the Lower Income Group of People" proposes to establish a system of pre-paid health insurance similar to the well known Blue Cross and Blue Shield plans.

House Bill No. 1378 entitled "An Act Giving Subsidies to Physicians, Dentists and Registered Nurses Practicing in the Barrios" is an effort to encourage private practitioners to establish themselves in the rural areas.

It is generally agreed that one of the most significant bills in Congress today is House Bill No. 1610 entitled "The Medical Act of 1954." There is a two-fold objective in the introduction of this bill (a) to modify the system of giving medical board examinations and (b) to introduce what is called the 'rural internship' or 'rural service' of the medical graduate. Your Committee, in joint session with the Standing Committee on Medical Education, Hospitals and Laboratories, after an intensive study of the bill, has decided to propose to the Committees on Health of the Senate and House of Representatives, respectively, that the bill in its present form be not acted upon. If desired, your Committee, again, with the Standing Committee on Medical Education, Hospitals and Laboratories, is ready to propose the removal of the features of the bill with which it is not in accord, and to secure the implementation of the administration's avowed policy of obtaining modern medical care to the rural areas.

Similarly, your Committee is not also in accord with House Bill No. 1252 entitled "An Act to Require Every Medical Graduate Who Completed One-Year Medical Internship either to undergo One-Year institutional or Rural Practice Before Given a Physician's License."

Your Committee is similarly against House Bill No. 976 entitled "An Act Providing for the Abolition of Government Medical Board Examinations, and Requiring Internship in the Rural Areas as Prerequisite to Graduation and For Other Purposes."

We have also been informed of several proposed bills which we have studied but, to our best knowledge, to the time of this writing have not yet been introduced. If the following are introduced, we have agreed to endorse them:

- (1) An Act to Amend Sec. 11 of Republic Act No. 875 commonly known as the Magna Carta of Labor. (Employees in government hospitals may not strike — the purpose of the bill is to extend this clause to private hospitals, sanatoria, maternities, medical clinics)
- (2) An Act appropriating funds for the Construction and Equipment of Buildings for the National Orthopedic Hospital.
- (3) An Act appropriating Funds for the Construction, Equipment and Maintenance of a Leprosy Research Laboratory and Training Center in the City of Manila.

Respectfully submitted,

(Sgd.) ANTONIO S. FERNANDO, M.D., *chairman*
 (Sgd.) REGINO G. PADUA, M.D., *member*
 (Sgd.) VICENTE R. DE OCAMPO, M.D., *member*
 (Sgd.) FERNANDO D. MANALO, M.D., *member*
 (Sgd.) MANUEL D. PEÑAS, M.D., *secretary*

REPORT OF THE STANDING COMMITTEE ON MEDICAL EDUCATION, HOSPITALS AND LABORATORIES

PHILIPPINE MEDICAL ASSOCIATION

April 1, 1954

To The House of Delegates
 Philippine Medical Association:

Aside from individual and group studies made by the members of the Committee on Medical Education, Hospitals and Laboratories, your Committee has held during the year a number of meetings in which the pressing problems of medical education were discussed either among the members of the Committee themselves alone; jointly with the members of the Board of Medical Examiners: and/or together with the said Body and the representatives of the Bureau of Private Schools.

During the beginning of the term just ended, the President of the Philippine Medical Association who has whole-heartedly cooperated with your Committee, on the recommendations of your Committee, obtained from the American Medical Association certain forms employed by the said Association for the survey of the teaching facilities of medical schools in the United States and the areas under the influence of the said Association. The forms had been studied very carefully by your Committee and the representatives of the Board of Medical Examiners and the Bureau of Private Schools for local adoption after pertinent modification to suit Philippine conditions. Our survey forms having been carefully prepared, several medical schools of the country were furnished copies of the same in order that the respective local medical educational authorities could undertake a self appraisal of the conditions under which their system of medical instruction operates with a view to securing improvement thereon. The complete returns of this special study are being compiled in the Bureau of Private Schools. The report of this survey will be made available to the Association as soon as the compilation is completed.

As part of the above mentioned activity, your Committee conducted an ocular inspection of the several medical schools in Manila, accompanied by members of the Board of Medical Examiners and the representatives of the Bureau of Private Schools in order to acquaint themselves personally of the condition of the teaching facilities of these schools.

It may be stated in this connection that the responsible authorities of these private medical schools have extended to your Committee their cooperation because they realize the importance of such studies as the Committee is undertaking more particularly as regards the "content," "organization" and integration of medical curriculum" in this country and the improvement of the teaching tools and methods in medicine; and increasing full-time faculties in size for better balanced activities in teaching and research in the interest of our science and art as well as institution and maintenance of a high standard of medical service for the good of our profession and the public that we serve.

More rigid selection and limitation of enrollment in these medical schools appeared to your Committee to be called for if we are to expect immediate improvement in our medical instruction. It is realized by your Committee that the greatest stumbling block in the improvement of medical education in this country is financial because the privately owned medical schools here depend only on student fees for maintenance and operation of these schools. In the United States after which our medical educational system is patterned, the approved medical schools, which are highly endowed and do not depend on student fees alone for maintenance, the median size of the student body is 390 and the tuition fees charged range from \$100 to \$900 with a median of \$700. It would seem, therefore, logical to your Committee that our private medical schools not being endowed, if these have to maintain an acceptable degree of approved medical instruction, there would not be strong reasons against their raising the student fees provided that if enrollment be limited to the degree commensurate with teaching facilities thru careful selection of students in the interest of the public good.

Your Committee is gratified over the interest and enthusiasm shown by Congress and the present administration in solving the present lack of medical service in the rural districts of the Philippines. Your Committee, however, believes that in addition to the plan of subsidizing the rural medical practice of new graduates, more form of contract scholarship in medical school might be considered by the government. Such scholarship should involve tuition and living expenses for qualified candidates.

Your Committee wishes to reiterate the several recommendations which this Body previously submitted as regards medical education, hospitals and laboratories. Such recommendations are on record in the files of the Philippine Medical Association.

With regard to House Bill No. 1610 (Introduced by Congressman Tan) G. B.), Trono, Cruz (I. S.), Pecson, Ladrado, Gonzales and Congresswoman Consing), in a meeting held with the Council of the Association, the prevailing opinion of the members present was that many of the provisions of the Bill were not acceptable to the Committee because such provisions will affect adversely the interest of medical education and the standard of medical practice in this country. Your Committee, therefore, recommends that an alternate proposal be prepared by a joint Body of the Association composed of members of the Council, the Committee on Legislation, the Committee on Medical Education, Hospitals and Laboratories, and representatives of other Committees of the Association concerned.

Respectfully submitted,

(Sgd.) A. G. SISON, *Chairman*
(Sgd.) M. M. ALIMURUNG, *Member*
(Sgd.) C. P. MANAHAN, *Member*
(Sgd.) H. LARA, *Member*
(Sgd.) J. B. NOLASCO, *Member*

REPORT OF THE STANDING COMMITTEE ON PRIVATE MEDICAL PRACTICE AND MEDICAL ECONOMICS

March 30, 1954

THE HOUSE OF DELEGATES
Philippine Medical Association

Gentlemen:

Your Standing Committee on PRIVATE MEDICAL PRACTICE & MEDICAL ECONOMICS, whose members are designated by the Philippine Federation of Private Medical Practitioners, by virtue of this organization's special affiliation to the Philippine Medical Association, respectfully submits herewith an Annual Report covering the period from March 1, 1953 to March 1, 1954, inclusive, as follows:

(A) RESOLUTIONS adopted by your Committee (as originally adopted by the Philippine Federation of Private Medical Practitioners) —

1. Resolution requesting the corresponding authorities to re-examine the problem of Private Practice of Government Physicians in the charity wards of government hospitals. (Appendix A)
2. Resolution for the formation of a Special Committee to study Ways and Means for the Solution of the Maldistribution of Physicians in the Philippines. (Appendix B).
3. Resolution on "A Family Physician for Every Filipino Family". (Appendix C)

(B) The following MEDICAL LEGISLATIONS dealing on Private Medical Practice & Medical Economics as proposed by the Philippine Federation of Private Medical Practitioners are recommended/ or referred by your Committee to the corresponding Standing Committees of the Philippine Medical Association, for consideration and approval:—

1. An Act amending Republic Act No. 546 — to limit the tenure of office of members of the Board of Medical Examiners, wherein there will be no reappointments; to require that members of the Board should have practiced *actively* for not less than 10 years; that they should not occupy government positions while acting as Board Members. (Appendix D). — To the Committee on Medical Education and the Committee on Legislations & Public Relations.
 2. An Act eliminating completely all Pay-Bed Services in Government Hospitals with adequate facilities and in localities where private hospitals with adequate facilities are in operation. (Appendix E) — To the Committee on Hospitals and Laboratories and the Committee on Legislations and Public Relations.
 3. An Act to repeal Republic Act No. 465 wherein a Registration Fee of P2.00 is levied each physician (and other professionals) by the Board of Examiners (Appendix F) — To the Committee on Legislations & Public Relations.
 4. An Act Regulating the Practice of Alien Physicians in the Philippines. (Appendix G (and G')) — To the Committee on Legislations and Public Relations.
 5. An Act amending certain provisions of the existing Labor Laws regarding the employment of physicians in industrial establishments and offices. The ratio of the laborers to be served by each physician should be reduced from 200 to 50 only per physician. (Appendix H) — To the Committee on Medical Legislations and Public Relations.
 6. Proposed amendment to the Excise Law on Surgical Equipment and Supplies. (Appendix I, with List) — To the Committee on Legislations & Public Relations.
- (C) Your Special Committee took deep interest in the Case of the PFPMP Vs. the "faith Healer", Rev. Clifton O. Erickson. Your Committee expresses herewith its full accord with the report and action taken by the PFPMP on the Case. (Appendix J).
- (D) SUGGESTIONS & RECOMMENDATIONS: (to the House of Delegates)
1. That the House of Delegates pass a RESOLUTION recognizing the need of a Pre-Paid Voluntary Health Insurance Plan in the Philippines (similar to the Blue Cross & Blue Shield Plans in existence in the U.S.).
 2. To foster a better cooperation and understanding between the government health personnel and the private medical practitioners, the unfair practice offered by government physicians in engaging in private practice and using the facilities of government hospitals be stopped right away by the proper authorities, thru a rigid screening of truly indigent patients and by instituting administrative action on the erring government physicians.
 3. That the House of Delegates, thru a Resolution, invite the attention of the Board of Medical Examiners to be always alert, fearless and prompt in the discharge of its duties in the maintenance of a high standard of medical practice in this country. The apparent indifference, inaction (or ineptitude?) of the Board of Medical Examiners in the Erickson Case warrants this recommendation.

Respectfully submitted,

For the STANDING COMMITTEE ON PRIVATE

MEDICAL PRACTICE AND MEDICAL ECONOMICS

(Sgd.) Ramon R. Angeles, M.D.
Chairman

Members

(Sgd.) Pablo Anzures, Ll.B., M.D.
(Sgd.) Vicente R. de Ocampo, M.D.
(Sgd.) Pedro T. Nery, M.D.
(Sgd.) Ramon Atienza, Jr., M.D.

APPENDIX "A"

THE PHILIPPINE FEDERATION OF PRIVATE MEDICAL PRACTITIONERS
RESOLUTION REQUESTING THE CORRESPONDING AUTHORITIES TO
REEXAMINE THE PROBLEM OF PRIVATE PRACTICE OF GOVERN-
MENT PHYSICIANS IN THE CHARITY WARDS OF GOVERNMENT
HOSPITALS.

WHEREAS, there is inadequate and limited hospital facilities for the really indigent in this country;

WHEREAS, complaints are still being heard about the pernicious practice of some government physicians of admitting private pay patients in the charity wards or charging indigent patients in the free wards.

WHEREAS, attempts not wholly successful were sponsored by the P.F.P.M.P. in the past to curb this private medical practice.

WHEREFORE, BE IT RESOLVED AS IT HEREBY RESOLVES that the P.F.P.M.P. reiterate and request the corresponding authorities of the incoming Administration to look into and reexamine this problem;

BE IT FURTHER RESOLVED that the Committee on Ethics and Publicity make attempts to inform the public that this practice is improper and unlawful for both the patients and the physicians.

RESOLVED FURTHER that copies of this resolution be sent to the press and the corresponding authorities of the incoming administration.

(Sgd.) Ramon R. Angeles, M.D.
President

Attest:

(Sgd.) Ramon Atienza, Jr., M.D.
Secretary-Treasurer

APPENDIX "B"

RESOLUTION FOR THE FORMATION OF A SPECIAL COMMITTEE TO STUDY WAYS AND MEANS FOR THE SOLUTION OF THE MALDISTRIBUTION OF PHYSICIANS IN THE PHILIPPINES.

Whereas, it has been pointed out repeatedly in medical confabs now and in the past that one of the medical problems in this country is the maldistribution of physicians;

Whereas, this problem affects directly and indirectly private medical practice and medical service in the Philippines;

Whereas, we are all aware of this problem but no successful and practical steps have so far been taken by both the government and medical organizations in this country;

Whereas, the problem needs not only fact-finding information about the condition of medical practice prevailing in the rural areas, but also a survey of the motives, desires, difficulties, rewards of why our physicians are reluctant to practice in these places;

Whereas, all these considerations should be known and studied before a realistic attempt at solving the problem can be proposed;

Wherefore be it resolved by the P.F.P.M.P. in its 1953 Annual Conference that a special Committee be formed, to gather facts and formulate workable plans in cooperation with Government Health Agencies and civic organizations for this particular problem: — The Maldistribution of Physicians in the Philippines.

Be it further resolved that this Committee submit a report as soon as feasible to one of the Regular Business Meetings on the P.F.P.M.P. for the coming year or at the Annual Conference in 1954.

(Sgd.) Ramon R. Angeles, M.D.
President

Attest:

(Sgd.) Ramon Atienza, Jr., M.D.
Secretary-Treasurer

APPENDIX "C"

RESOLUTION ON "A FAMILY PHYSICIAN FOR EVERY FILIPINO FAMILY."

Whereas, at present, majority of Filipinos have no reliable source of information regarding personal health and diseases;

Whereas, in these times of advancing medical specialization, and radio and newspaper advertisements, often a patient is confronted by the problem of whom or where to consult for his ailment or that of any member of his family;

Whereas, on general matters pertaining to diseases and health a family physician acting as a family health counsel is the logical person to be first consulted and not another layman or specialist;

Whereas, a family physician is the best and most reliable and available source of information on questions of health and disease that confront any citizen or family;

Wherefore, be it resolved as it hereby resolves that the Philippine Federation of Private Medical Practitioner on this its 1953 Annual Conference urge each and every "Filipino Family" to have a "Family Physician" and to consult him first on matters regarding health and disease.

APPENDIX "D"

Third Congress of the Republic)
of the Philippines)
First Session)

HOUSE OF REPRESENTATIVES H. No. _____

Introduced by

EXPLANATORY NOTE

There are four main objections to Republic Act No. 546.

1. Under Republic Act numbered 546, any member of the 16 examining boards may be re-appointed any number of times, thus perpetuating said member in the board. Actually one member of the existing boards has held his office for several years from the time of his appointment up to date.

2. Under the same Republic Act numbered 546, any fulltime Government or public official may be appointed to hold office either as chairman or member of any of the Board of Examiners. Actually, some of the members of the existing Board of Examiners are full-time Government officials, consequently diminishing and adversely affecting his efficiency in the performance of his official functions.

3. Under the same Republic Act numbered 546, it requires that one of the qualification of the member is that he should have practiced actively for not less than 10 years. The better legal qualification is that a member to better qualify for the position is that he should have been in active private practice for at least ten years.

4. Under the same Republic Act number 546, the Chief Executive is given an unlimited power to re-appoint any of the 16 members of the Board of Examiners. Hence, he may abuse such powers by keeping political favorites and proteges in office at the pleasure of said Executive to the exclusion of more deserving and more qualified members of the profession. The repeated re-appointment of certain members of the Board give rise to two presumptions, namely: (a) That there is no other professional who could perform the duties of the member of the Board, which is an insult to the intelligence and integrity of the different professional organizations, and (b) That the member so re-appointed may be sticking to the position he is holding for some ulterior and unlawful motive.

Besides, board examinations are given to determine whether the candidate is qualified to enter into the private practice of any profession and there is no better qualified professional to determine this other than a private practitioner of each and every profession concerned.

It is therefore respectfully recommended that the necessary amendments to Republic Act numbered 546 be approved.

Third Congress of the Republic)
of the Philippines)
First Session)

HOUSE OF REPRESENTATIVES
H. No. _____

.....
Introduced by

.....
AN ACT AMENDING SECTION TEN OF ACT NUMBERED FOUR THOUSAND AND SEVEN, KNOWN AS THE "RE-ORGANIZATION LAW OF NINETEEN HUNDRED AND THIRTY-TWO", AS AMENDED BY REPUBLIC ACT NUMBERED FIVE HUNDRED AND FORTY-SIX.

(Full text of this Bill and subsequent Bills are available at the Secretariat)

APPENDIX "E"

Third Congress of the Republic)
of the Philippines)
First Session)

HOUSE OF REPRESENTATIVES
H. B. No. _____

.....
Introduced by

EXPLANATORY NOTE

In view of the increase in the number of hospitals supported and financed by private individuals or corporations in the Philippines, it is believed that it is high time that Government public hospitals be devoted entirely and exclusively to the service of our indigent population free of charge. At present, personnel of Government hospitals with pay wards or private rooms are devoting more of their time to private pay-patients thus diminishing their attention and the quality of their services to the charity patients. At the same time Government public hospitals with pay accommodations are unfairly competing with privately run hospitals, especially with respect to government employees who are given certain deductions.

It is therefore recommended that all Government public hospitals be devoted to purely charity work except in cities, provinces or towns where no private hospitals exist.

Third Congress of the Republic)
of the Philippines)
First Session)

HOUSE OF REPRESENTATIVES
H. No. _____

.....
Introduced by

.....
AN ACT CONVERTING ALL GOVERNMENT PUBLIC HOSPITALS INTO CHARITY HOSPITALS

APPENDIX "F"

Third Congress of the Republic)
of the Philippines)
First Session)

HOUSE OF REPRESENTATIVES
H. No. _____

.....
Introduced by

EXPLANATORY NOTE

Section 3 of Republic Act No. 465 provides for the payment of an annual Registration Fee of P2.00 by every practicing physician, pharmacist, dentist, optometrist, certified public accountant, master mariner, chief mate, major patron, chief and second mate, motor engineer, architect, chemical engineer, civil engineer, professional and associate electrical engineer, mechanical engineer, mechanical plant engineer, mining engineer and veterinarian. It further provides for the payment of an annual Registration Fee of P1.00 for every nurse, second and third and fourth steam and motor engineers, junior mechanical engineer, master electrician, certified plant mechanic and surveyor. The said section further provides that this annual Registration Fee shall be paid in advance not later than the fifteenth of November of every year.

It is believed that this provision constitutes practically a double taxation of the above named professionals. Each of the foregoing professional is required to pay their corresponding privileges taxes in addition to the payment of income tax and of the Class-B Residence Certificate. Furthermore, Republic Act No. 465 classified this fee as Registration Fee. It is likewise believed that the moment that each of the foregoing professional has passed the Board Examination and pay the corresponding Registration Fee in accordance with law, the said registration entitles the professional to practice his respective profession anywhere in the Philippines and throughout his life unless suspended or revoked after due investigation.

It is therefore proposed that Section 3 of Republic Act No. 465 be repealed.

APPENDIX "G"

AN ACT REGULATING THE PRACTICE OF ALIEN PHYSICIANS
IN THE PHILIPPINES

BE IT ENACTED BY THE HOUSE OF REPRESENTATIVES AND BY THE
SENATE IN CONGRESS ASSEMBLED

Section 1. All alien physicians who are graduates of recognized Colleges of Medicine, shall before being admitted to practice the profession in the Philippines, have at least one year of rotating internship in the University Training Hospitals.

Section 2. All alien physicians who are graduates of recognized Colleges of Medicine, shall have resided three successive years in the Philippines before admission to the Medical Board of Examination provided that their countries of origin have reciprocity treaties with the Philippines regarding taking Medical Board Examinations before entering in practice of medicine.

Section 3. All aliens referred to in Sec. 1 and 2 hereof shall specify their lines of practice or specialty before practicing in the Philippines or before accepting positions as retainers of industrial or business concerns.

Section 4. All alien physicians and allied professions who are entitled to practice their profession shall be required to exercise their profession for a period of eight (8) months continuously every year, otherwise, they shall forfeit such right to practice.

Section 5. All laws, executive orders, proclamations or regulations or parts thereof inconsistent with the provisions of the Act are hereby repealed, or amended accordingly.

Section 6. This Act shall take effect upon approval.

(The above is a proposed Act approved by the members of the Philippine Federation of Private Medical Practitioners at its Annual Meeting held February 9, 1954 to be presented to Congress).

A Special Committee has been created to study the above Act seriously and its details, so that it can be presented as a House Bill in the House of Representatives, 3rd Congress of the Philippines.

EXHIBIT G' (Report of the Committee on Private Medical Practice
and Medical Economics)

HOUSE OF REPRESENTATIVES
H. B. No. 1970

.....
Introduced by Congressman MANUEL S. ENVERGA
.....

EXPLANATORY NOTE

This bill seeks to regulate the practice of medicine and allied professions by aliens in the Philippines. Under this bill, an alien physician must have resided in the Philippines continuously for at least five years before he can be admitted to the Board examination for the practice of medicine in this country. He must also have undergone at least one year of rotating internship in government and private hospitals authorized to train interns. After passing the examination, he must file with the Board of Medical Examiners a sworn statement of his line of practice or specialty before he can engage in the actual practice of medicine or accept a position as retainer in any industrial, commercial or agricultural enterprise, and shall limit his practice to such line or specialty, except in cases of emergency. The bill also provides that all aliens authorized in the Philippines to practice medicine, and allied professions to be determined by the Secretary of Health, shall devote every year at least 8 months to the continuous practice of their respective professions. Failure to do so or to limit their practice to their respective lines or specialties shall be sufficient cause for the revocation of their registration certificates or licenses to practice their profession in the Philippines.

One purpose of the bill is to prevent alien physicians from practicing medicine in the Philippines before they are acquainted, through internship in our hospitals, with the treatment of tropical diseases and other maladies peculiar to the Philippines. In many cases, aliens who do not have a good practice in their own countries come to the Philippines to practice their profession. These physicians do not know anything about tropical medicine. Another purpose is to prevent alien physicians from advertising or presenting themselves as specialists in any branch of medicine, even if they are not. A foreigner who has studied and/or practiced medicine for a short time in America or Europe, for instance, can convincingly pose as a specialist and easily overshadow Filipino physicians who are graduates of local medical schools. By requiring him to declare under oath his line of practice or specialty and to limit his practice to such line or specialty, his chances of fooling the public will be greatly reduced and a sort of protection will be given to Filipino physicians.

As regards the requirement that aliens who may be authorized to practice medicine and allied professions in the Philippines shall have to devote every year not less than 8 months to the continuous practice of their respective professions, the idea is to discourage their coming to the Philippines unless their main purpose is protection of health in this country.

(Sgd.) MANUEL S. ENVERGA
Congressman
First District, Quezon

APPENDIX "H"

RESOLUTION OF THE JOINT COMMITTEE OF THE PHILIPPINE ASSOCIATION OF OCCUPATIONAL MEDICINE AND THE PHILIPPINE FEDERATION OF PRIVATE MEDICAL PRACTITIONERS.

WHEREAS, Congressman Miguel Cuenco of the 5th District of Cebu presented House Bill No. 3583 in the House of Representatives in the Second Congress of the Republic of the Philippines in its FOURTH SESSION entitled "AN ACT TO REVISE AND CONSOLIDATE THE PROVISIONS OF ACT NUMBERED THREE THOUSAND NINE HUNDRED SIXTY-ONE, AS AMENDED, RELATIVE TO FREE EMERGENCY MEDICAL TREATMENT, and REPUBLIC ACT NUMBERED TWO HUNDRED THIRTY-NINE, RELATIVE TO FREE EMERGENCY DENTAL TREATMENT, FOR EMPLOYEES AND LABORERS OF COMMERCIAL, INDUSTRIAL AND AGRICULTURAL ESTABLISHMENTS, AND TO INCLUDE THE MEMBERS OF STEVEDORING UNIONS AMONG THOSE TO BE FURNISHED FREE EMERGENCY MEDICAL AND DENTAL TREATMENT";

Whereas, the purpose of the bill, according to the explanatory note, is to "remove inadequacies and extend the benefits of free emergency medical and dental treatment to a larger number of our working population," which includes the medical profession;

WHEREAS, in order to extend better the medical service to laborers, the number of laborers stated on page 2, line 11 of the bill should be reduced to FIFTY instead of "TWO HUNDRED";

WHEREAS, by so reducing the number of workers so that the management shall be required obligatorily to employ a physician, it gives benefit to more laborers as contemplated in the bill and also will increase the number of physician employed in industry.

BE IT RESOLVED that the PHILIPPINE ASSOCIATION OF OCCUPATIONAL MEDICINE and THE PHILIPPINE FEDERATION OF PRIVATE MEDICAL PRACTITIONERS express their thanks and appreciation to Representative Miguel Cuenco for the humanitarian spirit and object of his bill;

BE IT RESOLVED THAT Congressman Miguel Cuenco be respectfully requested, as he is herein requested, to change the third and fourth words in line 11 of page 2 of his bill H. No. 3592, to read "FIFTY" instead of "Two hundred."

(Sgd.) VICTORINO DE DIOS, M.D.
President

Philippine Association of Occupational
Medicine

(Sgd.) RAMON R. ANGELES, M.D.
President

Philippine Federation of Private Medical
Practitioners

APPENDIX "I"

EXCISE TAX ON MEDICAL AND SURGICAL EQUIPMENT AND
SUPPLIES AMENDED

Republic Act No. 601, as amended by Republic Acts Nos. 814 and 871, otherwise known as the Exchange Tax Law, is soon to expire. The financial advisers of the Government have recommended the extension of this law in order to preserve the financial stability of the country. Congressman Godofredo Ramos, Chairman of the Committee on Ways and Means in the House of Representatives, is sponsoring as amended Exchange Tax Law. Congressman Ramos had requested the Secretary of Health to give his suggestions for amendment of this law, especially with reference to Section 2 and the Appendices attached thereto. This Section deals with medical, surgical, and pharmaceutical supplies and equipment. The Secretary of Health then appointed a Special Committee with Dr. J. A. Nolasco as Chairman and the following as members: Dr. Ramon R. Angeles, representing the Philippine Federation of Private Medical Practitioners; Dr. Manuel D. Peñas, of the Philippine Medical Association; Dr. Domingo Antonio of the Philippine Hospital Association; the Director of Hospitals; Dr. Dalmacio Suaco, representing the Philippine Pharmaceutical Manufacturer's Association; and Dr. Pedro Katigbak, representing the Drug Association of the Philippines. The Special Committee held a series of meetings and unanimously recommended to Secretary Paulino Garcia the amendment of Section 2 of the Exchange Tax Law as follows:

"Sec. 2. * * *; anaesthetics, antibiotics, vitamins, hormones, AND OTHER DRUGS AND MEDICINES LISTED IN THE ATTACHED APPENDIX; X-Ray APPARATUS, films, ACCESSORIES, FIXERS AND DEVELOPERS, laboratory SUPPLIES, APPARATUS, reagents, biologicals, INSTRUMENTS, SUPPLIES, EQUIPMENT, TOOLS, FURNITURE AND MEDICINES FOR THE USE OF THE DENTAL, VETERINARY AND OPTOMETRIC PROFESSIONS, (dental supplies) and pharmaceutical drugs, CONTAINERS AND OTHER PACKING MATERIALS necessary for compounding AND MANUFACTURING OF (Medicines) MEDICINAL PREPARATIONS; MACHINERIES, SPARE PARTS, ACCESSORIES TO BE CERTIFIED FROM TIME TO TIME BY THE DIRECTOR OF THE PUBLIC HEALTH RESEARCH LABORATORIES AS ACTUALLY NEEDED FOR THE MANUFACTURE OF PHARMACEUTICAL PREPARATIONS; medical and hospital supplies listed in the appendix to this Act, LABORATORY SUPPLIES, APPARATUS, REAGENTS, BIOLOGICALS, AND SUCH OTHER MEDICAL AND HOSPITAL SUPPLIES, INSTRUMENTS, APPARATUS, TOOLS, EQUIPMENT, FURNITURE AND MEDICINES in quantities to be certified FROM TIME TO TIME by the Director of Hospitals as actually needed (by the Hospitals, applying therefore) FOR THE CARE AND TREATMENT OF PATIENTS IN HOSPITALS, CLINICS, DISPENSARIES AND MEDICAL LABORATORIES; (drugs and medicines listed in the said appendix) and such other drugs and medicines as may be certified by the Secretary of Health from time to time to promote and protect the health of the people of the Philippines; * * *"

At this time of writing, we understand Congressman Ramos has already reported on the amended provisions of the Exchange Tax Law. It is expected to become a law.

The Special Committee was guided by the following principles in recommending the proposed amendment:

1. Public health and welfare
2. Protection of local industries
3. Protection of established foreign investments.

The proposed amendment is a happy solution to various interests which at times were conflicting. However, the urgent and critical requirements of the medical and surgical professions were thoroughly considered and well taken care of.

APPENDIX

DRUGS, MEDICINES, MEDICAL AND HOSPITAL SUPPLIES AND EQUIPMENT

1. Adrenalin (Epinephrine) Chloride and preparations
2. Aluminum Hydroxide preparations
3. Amebacides except emetine preparations
4. Amino Acid preparations, solutions, parenteral
5. Antihelmin preparations except calomel, santonin
6. Antihistaminic preparations
7. Antihypertension and vasodilator agents
8. Anti-leprosy preparations
9. Antimalarials except quinine preparations
10. Antipyretics not manufactured locally
11. Antisiphylitic preparations
12. Antitetanic serum
13. Aureomycin preparations
14. B-Complex Capsules
15. Barbiturates and their preparations
16. Blood testing serums and solutions
17. Cardiac stimulants except aminophylline preparations
18. Castor Oil
19. Cathartic Pills Compound
20. Chenopodium Oil
21. Chlorazene Tablets and similar preparations
22. Chloromycetin preparations
23. Coagulants
24. Cortisone Acetate preparations
25. Curare products and similar preparations
26. Diagnostic Reagents
27. Digitalin and other digitalis preparations
28. Diphtheria Antitoxin and other immunological preparations
29. Diphtheria Toxoid
30. Discoids of Hydrocyanic Acid (HCN) for fumigation work
31. Drugs (crude or otherwise), chemicals (simple or compound for pharmaceutical manufacture.)
32. Drugs and medicines for the use of the dental and veterinary profession
33. Ferrous Sulphate preparations
34. Ergot preparations and derivatives
35. Gas Gangrene Antitoxin
36. Gland products and synthetic substitutes
37. Heparin derivatives
38. Homogenized Baby Foods (vegetables, fruits and meats)
39. Hormone preparations
40. Hydrogen Peroxide preparations
41. HTH — Commercial
42. Insulin preparations, all forms
43. Laboratory Stains
44. Liquor Cresolis Compositus and other disinfectants
45. Liver Extract preparations
46. Magnesium Hydroxide preparations
47. Magnesium Trisilicate compounds
48. Mercurial Diuretics
49. Mercurochrome, crystals
50. Merthiolate preparations
51. Multivitamin Capsules
52. Neomycin and preparations

53. Novocain and other anaesthetics for general, spinal, intravenous, local or dental use
54. Opium, its alkaloids and their salts, its derivatives, their preparations and synthetic substitutes
55. Pancreatic extracts preparations
56. Plasma
57. Pregnenolon Acetate and preparations
58. Protein Solutions, powders and compounds
59. Quarternary Ammonium compounds and other fungicidal agents
60. Saccharine preparations and substitutes
61. Salt substitutes
62. Similac, Klim, Lactogen and other dehydrated powdered milk
63. Sulphur
64. Terramycin and preparations
65. Tuberculin Tablets PPD, 1st and 2nd Tests
66. Vitamin preparations not manufactured locally in sufficient quantities

1. Applicators, wood
2. Bandage, gauze
3. Bandage, specialists, Plaster of Paris
4. Cotton, Absorbent
5. Dental instruments and supplies
6. Diagnostic instruments
7. Droppers, medicine
8. Electro Medical equipment
9. Gauze, plain
10. Gauze, sponges
11. Jelly, lubricating, plain or anaesthetics
12. Major Operating Table (not examining table)
13. Optometric instruments and supplies
14. Operating lights
15. Optometric instruments and supplies
16. Pads, obstetrical
17. Plasters, adhesive, all sizes
18. Sterilizers, autoclaves
19. Surgical, instruments
20. Surgical, crinoline
21. Sutures, all kinds and sizes
22. Syringes, hypo, all sizes
23. X-Ray films, developers and fixers
24. X-Ray equipment and supplies

APPENDIX "J"

REPORTS ON THE ERICKSON CASE TO THE BOARD OF DIRECTORS PHILIPPINE FEDERATION OF PRIVATE MEDICAL PRACTITIONERS

The undersigned, acting by authority of the Board of Directors of the PFPMP, respectfully submits the following report on the Erickson Case:

CAUSE OF ACTION — In view of the failure on the part of the Board of Medical Examiners to institute any criminal action against the Rev. CLIFTON O. ERICKSON, the President of the Federation, Dr. RAMON R. ANGELES, thru the undersigned, filed a complaint for illegal practice of medicine against the aforementioned Rev. Erickson before the Office of the City Fiscal on the morning of Saturday, 20 Feb. 1954 (I. S. 5789). The complaint was based on the second paragraph of Sec. 770 of the revised administrative code, to wit:

"A person shall be considered to practice medicine within the meaning of this section, who shall, for compensation or reward or even without the same, diagnose, treat, operate, prescribe remedies for any human disease, injury, deformity, physical or mental condition or any ailment, real or supposed, regardless of the nature of the remedy or treatment used or recommended, or who shall, by means of signs, cards, advertisements, or in any other way either offer or undertake by any means or methods to diagnose, treat, manipulate, adjust, operate, or prescribe for any human disease, pain, injury, deformity, physical or mental condition."

THE PRELIMINARY INVESTIGATION—Immediately after the filing of the complaint, Assistant City Fiscal JOSE B. JIMENEZ sent the following letter to the Commissioner of Immigration:

"I have the honor to advise you that the Philippine Federation of Private Medical Practitioners have this day filed a case against Rev. Clifton O. Erickson, who has been holding nightly meetings in the City of Manila in which he claims to perform miracles of healing, for the crime of illegal practice of medicine. The preliminary investigation of the case has been scheduled for February 22nd, 1954, at 2:00 o'clock in the afternoon before the undersigned at his office at the City of Manila.

Pending the result of the said investigation, the cooperation of your Office is earnestly requested with a view to preventing, — should the eventuality occur— Dr. Erickson's departure from the Philippine shores in order to avoid a possible miscarriage of justice."

At 2:00 p.m. on Monday, 22 Feb. 1954, the preliminary investigation was commenced with the testimony of Dr. Ramon R. Angeles who stated that he has read the advertisements appearing in the Manila Times of 23 Jan. 1954, Daily Mirror of 21 Jan. 1954, two news pictures of the Evening News of 25 Jan. 1954 and a news item of the Daily Mirror of 30 Jan. 1954, all marked as Exhibits A, A-1, A-2, A-3 and A-4. He continued by alleging that he went to the Sunken Gardens a few days before the filing of the complaint and witnessed the respondent preaching and calling for all those who were afflicted by disease.

The following shows one of the advertisements (Exh. A-1):

"BEGINNING SUNDAY NIGHT AND EVERY NIGHT AT 7:00 P.M.
CLIFTON O. ERICKSON
SALVATION AND HEALING REVIVAL.
BRING YOUR SICK:
BLIND, DEAF AND DUMB, CRIPPLED AND AFFLICTED—
MIRACLES OF HEALING BEFORE YOUR EYES.
FOR ALL PEOPLE — FOR ALL CHURCHES.
ROXAS PARK ON TAFT AVE. OPPOSITE CITY HALL —
EVERY EVENING AT 7:00 P.M.
REV. LESTER F. SUMRALL
PASTOR, BETHEL TEMPLE — GEN. LUNA, ISAAC PERAL ST."

After his testimony, an American acquaintance talked to us and transmitted the apologies and the willingness of the respondent to sign any statement to the satisfaction of the complainant so that the case may be ultimately dropped.

The next day, 23 Feb. 1954, the Advertising Managers were about to be presented as witnesses but the undersigned discovered that the Rev. Clifton O. Erickson was not the one who ordered the publication of the said advertisements. However, two other witnesses were about to be presented to testify on the procedure followed by the respondent in the alleged healing miracles, but at this juncture, the respondent and his American companion, assisted by his attorneys, submitted the following signed statement which is an express denial of the claims published in the advertisements and practically an apology for the unintentional violation of our medical law. Without any

objection on the part of the Assistant City Fiscal, the case was finally dropped. Here are the contents of the said statement:

"REV. CLIFTON O. ERICKSON HEREBY INFORMS THE MEMBERS OF THE PHILIPPINE FEDERATION OF PRIVATE MEDICAL PRACTITIONERS THAT HE DOES NOT CLAIM TO POSSESS THE ABILITY NOR THE POWER TO CURE ANY HUMAN DISEASE.

REV. LESTER SUMRALL, BETHEL TEMPLE, WAS IN CHARGE OF ALL PUBLICITY, ADVERTISEMENTS PERTAINING TO THE SALVATION AND DIVINE HEALING HELD AT THE ROXAS PARK, SUNKEN GARDEN, MANILA, P. I. ON JANUARY 24 TO FEBRUARY 21, 1954."

(SGD.) CLIFTON O. ERICKSON

COMMENTS—Thruout the entire proceedings, the respondent and his companions exhibited no evidences of antagonism nor arrogance. On the contrary, they expressed regrets for all that transpired. Evidently they recognized that the advertisement were in violation of our medical law, but as further developments showed that the respondent had no intervention whatsoever with their publication, he cannot be pinned down on that count. As to the procedure of the supposed treatment, nothing has been presented in view of the turn of events already narrated above. Under the circumstances, the undersigned believed that it was but fair and gentlemanly that the case be finally dropped to the satisfaction of all concerned. It was merely our purpose to show that the acts committed by the respondent could establish a prima facie case against him. It was never our intention to harass anybody not to place obstacles to the freedom of any person. We are conscious of our legal duty to cease firing at any person whose hands are already up in the act of surrender.

Manila, March 4, 1954

Respectfully submitted,

(Sgd.) PABLO ANZURES

REPORT OF THE STANDING COMMITTEE ON AUDITING AND FINANCE

April 8, 1954

To the House of Delegates
Philippine Medical Association
47th Annual Meeting
Manila

Gentlemen:

Your Committee met several times during the year, received periodic reports from the Secretary-Treasurer and from the Business Manager of the Journal, was frequently consulted by the Council, recommended governing policies affecting the personnel of the Association and scrutinized the financial statements and the budget for the coming fiscal year.

Committee Actions:

- (1) Approved unanimously a resolution to limit the giving of bonus to the employees of the Association, the amount depending on the condition of business every year and based on the net profit.
- (2) Approved to reward the extra effort of the business manager in the form of a commission and not in the form of a bonus.
- (3) Approved the supplementary allocation of P1,200.00 for an additional clerk-typist to implement the recommendation of the House of Delegates of the 46th Annual Meeting regarding transmittal of information and other purposes; approved an additional P600.00 for stationary and office supplies for the same purpose; noted the designation of the secretary-treasurer as editor of the Journal, the latter asking to receive only fifty percent of the approved budget allowance.
- (4) Approved a further supplementary allocation of P1,300.00 for miscellaneous expenses such as donations, contributions to the Science Foundation of the Philippines, etc.
- (5) Instructed the Business Manager to make a survey of the drug companies and other business houses, of foreign and local capital, who have not yet advertised in our Journal, with the end in view to raise the income of the Journal, and to make a report on the results of this survey.
- (6) Recommends the deletion of the titles 'cashier' and 'advertising manager' from the Business Manager of the Journal.

- (7) Recommends a breakdown of the actual income and expenditures of the Association into the following categories: INCOME—to include (a) Dues (b) Subscriptions (c) Advertising (d) Technical Exhibits of the Annual Meeting (e) Miscellaneous Income; EXPENDITURES—(a) Journal Publication (b) Other Scientific Activities (c) Public Information and Public Relation (d) Administrative (e) Miscellaneous. Your Committee is of the opinion that the Association does business as a whole and does not encourage the comparison of one activity with that of another.
- (8) Recommends the proposed budget, as amended by the Committee.
- (9) Recommends as a general principle to observe the utmost economy in all fields, but this observance must not be inconsistent with a proper regard to the stature and prestige of the Association.

THE COMMITTEE ON AUDITING AND FINANCE

(Sgd.) RODOLFO P. GONZALEZ, *Chairman*PROPOSED BUDGET FOR THE FISCAL PERIOD APRIL 1, 1954 — MARCH 31, 1955
(As Recommended by the Auditing and Finance Committee)*Budget Items*

	Fiscal Period Apr. 1, '53— Mar. 31, '54	Fiscal Period Apr. 1, '54— Mar. 31, '55
1. Salaries:		
Abstractors and Editorials	P 300.00	P 300.00
Secretary-Treasurer	1,800.00 (actually	1,800.00
Editor	1,200.00 2,400)	2,400.00
Business Manager	2,400.00	2,400.00
Copy Editor	1,680.00	1,680.00
Clerk-Steno. for the Sec.-Treasurer	2,340.00	2,340.00
Clerk-Steno. for the Business Manager	2,220.00	2,220.00
Clerk-Steno. for the Editor	2,100.00	2,100.00
Accountant (Part time)	960.00	960.00
Messenger-Collector	1,980.00	1,980.00
Clerk-Typist for the Sec.-Treasurer	1,200.00 [†]	1,440.00
Librarian (Part time)	360.00*	1,440.00**
Messenger (Part time)	720.00	720.00
Janitor-Watchman		1,440.00***
	P19,200.00	P22,020.30
2. Printing of Journal and proceedings based on 60 text pages; 24 advertising pages, 2,200 copies a month ..	20,000.00	20,000.00
3. Postal, telegraph and radio service	1,200.00	1,200.00
4. Office supplies and materials	1,600.00	1,600.00
5. Travel expenses of clerks and messengers	750.00	800.00
6. Binding of Journals	600.00	600.00
7. Auditing Service	720.00	720.00
8. 47th Annual Meeting, all expenses, mailing, supplies, postage, travel expenses, salaries, etc.	4,500.00	3,500.00
9. Contributions (Red Cross, Anti TB Drive, Etc.)	1,300.00	1,000.00
10. Miscellaneous (Past presidents, and membership certificates, membership fee WMA, legal service, etc.)	2,500.00	1,500.00
	P52,370	P52,940.00

Estimated Receipts for one year.

Item 1. Advertisement — 20 pages per issue	P26,000.00	P26,000.00
2. Annual dues & subscriptions, 1,800 members at P10.00	18,000.00	18,000.00
3. 47th Annual Meeting (Booths & Registration fees) ..	12,000.00	11,000.00
4. Miscellaneous	300.00	300.00
	P56,300.00	P55,300.00

S U M M A R Y

Total estimate available for 1954-1955	P55,300.00
Total estimate proposed budget for 1954-1955	52,940.00
Estimated Surplus before Capital Outlay	P 2,360.00
Capital Outlay (For furniture & Equipments)	900.00
Estimated Surplus after Capital Outlay	P 1,460.00

* Supplementary Budget approved by the Council.

** Librarian to work full-time after completion of building and transfer of the library thereto.

*** To work in the PMA Building after transfer of library and office thereto.

REPORT OF THE STANDING COMMITTEE ON SCIENTIFIC ASSEMBLY

April 17, 1954

To the House of Delegates,
Philippine Medical Association
47th Annual Meeting,
M a n i l a

S i r s :

Your Chairman of the Committee on Scientific Assembly takes pleasure in submitting its report on its activities during the year and the decisions arrived at during the last meeting held by your Committee on April 14th, 1954.

1. There are 83 papers so far scheduled to be presented in the plenary sessions and sectional scientific meetings.
2. Three plenary sessions have been prepared by your Committee. The first Plenary Session will be a symposium on Medical Education. Dr. Antonio G. Sison, former Dean of the College of Medicine of the University of the Philippines, will act as moderator. The Second Plenary Session will be devoted to Rural Health. Dr. Clemente Gatmaitan, Chairman of the Committee on Rural Medicine will act as moderator. Dr. Horace De Lien has been invited as Guest Speaker.

The Third Plenary Session is a symposium on "Bangungut." Dr. Walfrido de Leon will be the moderator. Other topics of general interest complete this program.

3. The Committee also studied the promotion of and the disposition of the P.M.A. Medical Research Fund. A Subcommittee was assigned to study this problem in detail and to make its report and recommendations subsequently.

Composition of subcommittee: Dr. Conrado Dayrit, chairman

Dr. Jose Villanueva, member
Dr. Manuel D. Peñas, member
Dr. Antonio Ejercito, member
Dr. Rogelio Relova, member

4. The Committee has also prepared a six-day postgraduate refresher course to be given by the Association from April 19-24, 1954. Three large hospitals in Manila, the Philippine General Hospital, the Santo Tomas University Hospital and the North General Hospital are participating. The lectures start from 8:30 a.m. to 12:00 noon and from 2:00-4:00 p.m. The evening sessions start at 7:30 p.m. and will be held at the P.G.H. Science Hall. The complete program was published in the March, 1954 issue of the Journal. Attendance to these courses is given free of charge to members of the Philippine Medical Association in good standing.
5. The Committee recommends the acceptance of the applications for affiliation to the Association by the Philippine College of Physicians and the Philippine Society of Dermatologists. In case of approval these Societies will take charge of the Association's Section on Internal Medicine and Dermatology respectively.

Respectfully submitted,

(SGD.) JOSE VILLANUEVA, M.D.
Chairman
Committee on Scientific Assembly

PROPOSED AMENDMENTS TO THE CONSTITUTION AND BY-LAWS

I. FROM THE COUNCIL

TO THE HOUSE OF DELEGATES

47th Annual Meeting
Philippine Medical Association
Manila

Gentlemen:

The Council respectfully submits the following proposed amendments:

PROPOSED AMENDMENTS TO THE CONSTITUTION

ARTICLE IV

Members and Guests

SECTION 1. — Reads: "Members. The members of this Association shall be the members of its component societies (or affiliated sections) who have been certified to the headquarters of this Association, and whose dues and assessments for the current year have been received by the Secretary-Treasurer."

AMENDMENT to the above section: DELETE "or affiliated sections". To conform with amendments of last year which defines that membership shall be thru component societies only.

PROPOSED AMENDMENTS TO THE BY-LAWS

CHAPTER I

Membership

Proposed New Section 4. "Life membership to the Association shall be granted those possessing at least five hundred pesos worth of shares of the Philippine Medical Center, Inc."

Explanatory note: At the present time "life membership" to the Association is held by those who have contributed five hundred pesos to the PMA Building Campaign. When the Philippine Medical Center was organized and the "contributions" became shares it was felt that their willingness to sacrifice entitled them to retain this life membership. The new section gives an opportunity for members to attain life membership and at the same time promote contributions or purchase of shares from the PM Center, Inc. All these are designed to promote an early realization of all our dreams — the construction of the PMA Building.

CHAPTER III

House of Delegates

New Section 11. — On returning from the Annual Meeting of the Association, the delegates should choose one from among themselves to report to their respective societies on the proceedings of the meeting.

CHAPTER VI

Council

New Section 7. — The Council shall have power to fill casual vacancies among its members until the next annual meeting by "ad interim" appointment.

Distinguished Service Award Committee

New Section 11. —

Sub-Section 1. — Council to establish Award. — The Council shall arrange for the presentation of the Distinguished Service Award of the Philippine Medical Association at the Closing General Session to a member of the Association selected as prescribed hereinafter and shall have a suitable gold medal and citation prepared each year.

Sub-Section 2. — Committee on Distinguished Service Award. — The Committee on Distinguished Award of the Philippine Medical Association shall perform the functions hereinafter stated. It shall consist of 12 Members of the Association, appointed by the Council to serve for a term of 3 years, so arranged that four members shall be appointed each year for a full term. The Committee, subject to the approval of the Council, shall make its own rules of procedure not in conflict with these By-Laws with respect to the performance of its duties.

Sub-Section 3. — Selection of a Recipient. — Any Member of the Association may submit to the Committee on Distinguished Service Award not less than two months in advance of the next annual session the name of any Member except members of the Council or of the Committee on Distinguished Service Award for consideration for the award. The Committee shall consider, on the basis of meritorious services in the science and art of medicine, the eligibility of nominees so submitted, and shall submit findings and recommendations to the Council annually within a time limit fixed by the Council. If more than five nominations are received, the Committee shall select therefrom a list of five names and submit same to the Council together with a brief statement of its findings with respect to each Member so named.

The Council then shall consider the merits of the five nominees for the award recommended by the Committee on Distinguished Service Award and shall select from the list three Members by secret balloting, submitting their names, together with a brief statement of the findings of the Committee with respect to its nominee, to the House of Delegates, keeping the names of the nominees strictly confidential. The House then shall select the recipient of the Award from the list of nominees so submitted, the selection to be made by secret balloting. If none obtains a majority vote then the one obtaining the lowest number of votes shall be eliminated from the list and another balloting is made. The vote shall be taken immediately after the nominees are placed before the House by the Council.

CHAPTER VIII

Component Societies

New Section 13. — Each component society shall keep the Council informed of any events or developments in its locality of interest to the Association.

New Section 14. — Each member shall do all in his power to promote a knowledge of, and an active interest in the objects and work of the Association.

Endorsed by the Council by majority vote.

For the COUNCIL

(Sgd.) MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

II. FROM THE STANDING COMMITTEE ON AUDITING & FINANCE.

PROPOSED AMENDMENT TO SEC. 3 CHAPTER VI OF THE BY-LAWS ADOPTED BY THE AUDITING AND FINANCE COMMITTEE DURING ITS MEETING HELD IN THE HOME OF DR. RODOLFO GONZALEZ ON MARCH 12, 1953.

Delete the following statements of Sec. 3:

"The necessary traveling expenses incurred by such councilors in the line of the duties herein imposed may be allowed by the House of Delegates upon presentation of the properly itemized statement, but this shall not be construed to include his expenses in attending the annual meeting of the Association."

Amendment, to replace the above deleted statement,

"No official of the Association shall be provided with traveling expenses by the Association in visiting different component societies, when he is invited by the same or when he is attending the meeting of the Council of the Association."

(Sgd.) Dr. Rodolfo P. Gonzalez
Chairman

(Sgd.) Dr. Alejandro Gaerlan

(Sgd.) Dr. Leopoldo Diaz

(Sgd.) Dr. Walfrido de Leon

(Sgd.) Dr. Victorino de Dios

MINUTES OF THE SECOND MEETING OF THE HOUSE OF DELEGATES
HELD ON APRIL 28, 1954 AT THE SOCIAL HALL, FAR EASTERN UNIVERSITY

1. *Call to order.* — The meeting was called to order at 8:15 p.m. by the President, Dr. Antonio S. Fernando.

2. *Remarks by the President.* — The President gave a brief remark informing the meeting that the House of Delegates, being the policy-making body of the Association, should exercise calmness and complete understanding in their deliberations and to try their best to give the best solution to whatever problems that may be presented in order to give honor and dignity to the House.

3. *Roll Call.* — The President then asked the Secretary-Treasurer, Dr. Manuel D. Peñas, to call the roll. The Secretary-Treasurer informed the House that a sheet of paper is being passed around for the signatures of the delegates and asked them to sign their names thereon for purposes of record and to be reported to all the component societies in the future. He also announced before the House that before proceeding to the reports of the different Reference Committees, the Chairman of the special Committee on Voluntary Health Insurance, Dr. Damaceno J. Ago, would render the belated brief report of his Committee.

4. *REPORT OF THE SPECIAL COMMITTEE ON VOLUNTARY HEALTH INSURANCE.* — Dr. Ago, then verbally rendered his report. Firstly, he asked the indulgence of the House for not having submitted his report on time. He announced that the Committee has been working hard since two weeks after the closing of the last Convention and he was glad to report that prepaid medical service plan has been introduced in the Philippines. After several meetings, they had the chance of getting several leading medical men, both in Manila and in some parts of the country, to be interested in this movement. The last Annual Convention of the PFPMP approved to recommend a prepaid Medical Service Plan to be established in the Philippines.

Secondly, that there is a new Bill, No. 2002, filed in Congress with a provision to convert the Quirino Hospital in Quezon City into a Prepaid Medical Care or Health Insurance for the low income groups.

Thirdly, that there are already a few established prepaid medical care plans that exist in Manila. One is being handled by Dr. Vicente R. de Ocampo, another one is a city specialist hospital, and some more groups are planning to establish also. The first 5 months was a period of information talks to the different component societies, and they endorsed the plan. The last and ultimate work of the Committee was the first formation of the Philippine Prepaid Medical Service, Inc.

In the name of the Committee, he said, he would like to recommend to the House for its approval, a set of rules for this new movement. The Prepaid Medical Service should be established under certain rules and regulations that will be approved by the PMA like in the United States. This, he said, is the recommendation of the Committee. He also informed the House that a Committee to formulate these rules and regulations may be formed for the guidance of those who would like to establish this plan in the different localities.

The Secretary-Treasurer announced that the report of Dr. Ago will be mimeographed and given to the corresponding Reference Committee that will report during the last meeting of the House of Delegates.

5. *REPORT OF THE REFERENCE COMMITTEE ON THE REPORT OF THE COUNCIL.* — The Chairman of this Committee, Dr. Francisco G. Duque (Pangasinan MS), read the report of the Committee before the House as follows:

April 28, 1954

To the House of Delegates
47th Annual Meeting:

S i r s :

The Reference Committee on the Report of the Council has the honor to express its views and recommendations on the different reports of the Council for your consideration and approval. After a meeting called to order by the Chairman, and after exchange of views among its members, we are extremely happy to inform you that in general this Reference Committee is in complete accord with the report submitted by the Council, except on a few items, on which we would like to express our views and recommendations.

- I. Report of the President of the P.M.A., 1953-'54.
 - a. We recommend that the P.M.A. will publish the results of the survey of all the local medical schools so that they will not only be encouraged to raise their standards but also take immediate positive steps to raise their standards.
- II. Report of the Editor:
 - a. In order to be able to accommodate more local scientific articles, we should add more pages to our monthly medical journal, because after all the Journal is making profit every year from advertisements, etc., as shown by the report of the Business Manager.
- III. Report on Medical Nomenclature:

Suggestions: Foreign terminologies on medical terms already known to the laity in the Philippines should be adopted in the absence of available local nomenclature, e.g., appendicitis, tonsillitis, bursitis, etc. It is also recommended that the same membership of the Committee be appointed to work on the problem.

IV. Report of the Committee on Membership:

Suggestion: In order to generate and promote enthusiasm for increased membership, closer relations must be encouraged between the mother society on one hand and component societies on the other, and among component societies themselves especially those that are neighbors. It is suggested that more implementation of the already approved problems such as visits by the President and/or officers of the Council to the component societies must be undertaken; more regional meetings, and more activities of the component societies such as meetings in rural areas, the grass roots of cordial practice and thereby give importance to the barrio doctor and people.

Respectfully submitted:

FRANCISCO Q. DUQUE, M.D., (Pangasinan MS), Chairman
HERALDO DEL CASTILLO, M.D., (Manila MS), Member
AGRIPINO OCA, M.D., (Laguna MS), Member
PEDRO T. NERY, M.D., (Quezon City MS), Member
CASTO MAGSAYSAY, (Zambales MS), Member
IDERLINA F. MANUEL, (Cagayan MS), Member
PEDRO P. VILLAFUERTE, (Camarines Sur MS), Member
JOSE COCJIN, (Iloilo MS), Member
ANTONIO O. GISBERT, (Manila MS), Member
DOMINADOR R. NARVAEZ, (Baguio MS), Member

After the reading of the report, Dr. Padua moved, duly seconded, that the report be approved. APPROVED.

Dr. Timoteo Alday asked if in the report of the Editor there is a definite policy regarding the fixed number of pages of the Journal. Dr. Peñas answered him that the more income in advertisements the more pages in the Journal. Dr. Alday suggested to adjust the number of pages to balance the budget. Dr. Peñas explained that expenses in the Journal can be minimized by making the types smaller, less illustrations, getting more ads, etc. After further discussion, Dr. Nery moved for the approval of this part of the report. Seconded by Dr. Atienza, the motion was APPROVED.

REPORT OF THE COMMITTEE ON NOMENCLATURE.—The House, on motion which was duly seconded, APPROVED this part of the report.

REPORT OF THE COMMITTEE ON MEMBERSHIP.—Dr. Padua suggested that this part of the report be adopted. APPROVED.

With regards to this report, Dr. Fernando D. Manalo suggested the visiting of the Vice-President of component societies in his regions and to furnish him of the dates and place of the meetings of component societies, for his information and guidance, or to publish this in the Journal. He also suggested to have a definite date for the meetings of component societies. Dr. Ledesma suggested also to furnish the Vice-Presidents in advance of the dates of meetings so that they can prepare. After further deliberation, on motion duly seconded, the House APPROVED to publish in the Journal for the information of the members and others concerned, the dates and places of monthly and regional meetings of component societies.

Dr. Ago also suggested that the Vice-President prepare a program of his visits to component societies and for him to work this out with the component societies and to report during the Convention of the PMA the highlights that happened during his visits to component societies. Dr. Agripino Oca promised to do this and communicate with the Vice-Presidents. He also explained the difficulty of getting speakers which accounts for the difficulty of setting definite date for the meetings. Dr. Jose O. Nolasco (Culion MS) suggested that the Vice-President communicate with the Society regarding his visit and date of arrival so that the Society may have time to prepare the program.

6. *REPORT OF THE REFERENCE COMMITTEE ON THE REPORT OF THE SECRETARY-TREASURER.* — Dr. Manuel Quisumbing was not present so the Secretary-Treasurer informed the House that deliberations on the report of this Committee will be taken up at the next meeting of the House.

7. *REPORT OF THE REFERENCE COMMITTEE ON THE REPORTS OF THE OTHER STANDING COMMITTEES.* — Dr. Antonio M. Samia, Chairman of the Reference Committee read the following report of his Committee:

April 27, 1954

The House of Delegates
47th Annual Meeting
Philippine Medical Association

Gentlemen:

Your Reference Committee on the reports of Standing Committees, other than the Committee on Auditing and Finance, of the Philippine Medical Association has the honor to present for your consideration the following report:

1. On the report of the Standing Committee on Arrangements.

Your Reference Committee recommends the approval of this report in toto.

2. On the report of the Standing Committee on Legislation and Public Relations.

Your Reference Committee desires to present to the floor of the House of Delegates through one of its members, Dr. Gregorio Reyes of Cagayan, some clarification of the proposed legislation H. No. 902. AN ACT TRANSFERRING THE MEDICAL AND DENTAL SERVICES IN THE PUBLIC SCHOOLS TO THE BUREAU OF HEALTH, which has been endorsed for approval by the Standing Committee on Legislation and Public Relations. Your Reference Committee, therefore, leaves to the House of Delegates the final decision on this particular legislation after the explanations to be given by Dr. Gregorio Reyes.

Your Reference Committee recommends the approval of the rest of the report of the Standing Committee on Legislation and Public Relations.

3. *REPORT OF THE STANDING COMMITTEE ON MEDICAL EDUCATION, HOSPITALS AND LABORATORIES.* — Your Reference Committee recommends the approval of this report in toto with the recommendation that the House of Delegates instruct the Council of the Philippine Medical Association to implement the recommendations of the Standing Committee regarding House Bill No. 1610 to the effect "that an alternate proposal be prepared by a joint Body of the Association composed of members of the Council, the Committee on Legislation, the Committee on Medical Education, Hospitals and Laboratories, and representatives of other Committees of the Association concerned."

4. *REPORT OF THE STANDING COMMITTEE ON PRIVATE MEDICAL PRACTICE AND MEDICAL ECONOMICS.* — Your Reference Committee recommends the approval of this report except the last sentence of (D) SUGGESTIONS & RECOMMENDATIONS, No. 3 (p. D. 4-2), namely, "The apparent indifference, inaction (or ineptitude?) of the Board of Medical Examiners in the Erickson Case warrants this recommendation", which your Committee recommends to be deleted.

Your Reference Committee received also from the Chairman of this Standing Committee on Private Medical Practice and Medical Economics, Dr. Ramon R. Angeles, through the Secretary-Treasurer of the P.M.A., the amendments to this report introduced by Dr. Pedro T. Nery, a member of the Standing Committee, but which was subsequently disapproved by the other members of the Standing Committee. Your Reference Committee feels that the report of the Standing Committee as presented, without the disapproved amendments introduced by Dr. Nery, is in order, without any prejudice however to Dr. Nery to present his amendments to the floor of the House of Delegates for consideration.

Your Reference Committee also recommends the incorporation to this report of the memoranda submitted by the Board of Medical Examiners to the Philippine Medical Association concerning the Erickson Case.

5. On the report of the Standing Committee on Scientific Assembly.

Your Reference Committee recommends the approval of this report in toto.

Respectfully submitted,

REFERENCE COMMITTEE ON THE REPORTS
OF THE OTHER STANDING COMMITTEES:

(Sgd.) ANTONIO M. SAMIA, M.D., (Manila MS)
Chairman

(Sgd.) JOSE O. NOLASCO, M.D. (Culion MS)
Member

- (Sgd.) JUAN B. RUIZ, M.D. (Cebu MS), Member
(Sgd.) GREGORIO REYES, M.D. (Cagayan MS), Member
(Sgd.) VICENTE J. CAPISTRANO, M.D. (Cotabato MS), Member
(Sgd.) FRANCISCO INFANTADO, M.D. (Oriental Mindoro MS), Member
(Sgd.) TEODORO REJANO, JR., M.D. (Marinduque MS), Member
(Sgd.) CRESENCIO B. AZCUETA, M.D. (Ilocos Sur MS), Member
(Sgd.) VIRGINIA B. RAYMUNDO, M.D. (Cavite MS), Member
(Sgd.) SIXTO MACEDA, JR., M.D. (Manila MS), Member

ADDENDUM TO THE REPORT OF THE REFERENCE COMMITTEE ON THE REPORTS OF THE OTHER STANDING COMMITTEES

Your Reference Committee also received a copy of the proposed Bill entitled "PHILIPPINE PHYSIOTHERAPY LAW" as prepared and submitted by the Philippine Orthopedic Association for study by the Standing Committee on Medical Legislation and Public Relations of the Philippine Medical Association. Your Reference Committee recommends the submission of this proposed Bill to the coming Standing Committee on Medical Legislation for proper study and recommendations.

(Sgd.) ANTONIO M. SAMIA, M.D. (Manila MS)
Chairman

Exhibit A. Re Proposed Amendments of Dr. Pedro T. Nery to the report of the Standing Committee on Private Medical Practice and Medical Economics.

Exhibit "A"

March 29, 1954

Amendments introduced by Dr. PEDRO T. NERY to the Report of the Committee on Private Practice and Medical Economics—Philippine Medical Association—1954.

Under Suggestion and Recommendations after paragraph (5) and as paragraph (6) and (7) and paragraph (6) be changed to paragraph (8).

(6) For an efficient public service, social and economic justice for all, the House of Delegates requests proper authorities concerned such as the Secretaries of Health, Defense, Education, Labor and the President of the University of the Philippines for the prompt and effective implementation of a recent Cabinet ruling of the present administration that full time government officials shall not be allowed to engage in gainful occupation during or outside office hours; that full time government officials allowed to teach must teach only 1 hour a day and that it be outside office hours. Furthermore a resolution be sent to the Cabinet stating that part-time government appointments; or those with limited private practice as ₱1.00 a year, be discouraged and if it must still tolerate this unnecessary evil, a specified time of work must be enforced.

(7) That the House of Delegates direct this Committee to check and audit all commercial and industrial establishments and schools and colleges whether the law or regulation about the employment of legitimate physician is not being sabotaged.

(Sgd.) PEDRO T. NERY

(Printed) PEDRO T. NERY

Member, Committee on Private Practice and Medical Economics—Philippine Medical Association.

Exhibit B. Memoranda of the Board of Medical Examiners re Erickson Case.

Exhibit "B"

Note: This memorandum has been submitted by the Board of Medical Examiners and should be considered with Appendix "J" of the Report of the Standing Committee on Medical Economics and Private Practice.

REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF HEALTH
BUREAU OF HOSPITALS
Manila

March 31, 1954

Dr. Antonio S. Fernando
President, Philippine Medical Association
Sto. Tomas University Hospital
Manila

Dear Dr. Fernando:

In connection with the item in the agenda of the meeting of the Philippine Medical Association Council held lately regarding a letter sent by Dr. Ramon R. Angeles, President of the Philippine Federation of Private Medical Practitioners, and the February issue of his medical publication containing an editorial branding me with ineptitude, I am enclosing herewith copies of all communications related to the letter and editorial of Dr. Angeles, for your perusal and judgment and for transmittal to the Council so that this body can also judge as to whether I, as a member of the Philippine Medical Association Council, deserve such condemnation from one who is representing another Association of physicians.

In case that you believe that I have done the proper thing, I would like to ask the Council that appropriate steps be taken to counteract the publication made in the journal edited by Dr. Ramon R. Angeles by either asking him to publish my side in his journal or in some other form.

With appreciation of whatever you can do for me on this matter, I remain

Yours sincerely,

(Sgd.) T. ELICAÑO
(Director of Hospitals)

REPUBLIC OF THE PHILIPPINES
City of Manila
OFFICE OF THE CITY FISCAL

March 2, 1954

Dr. T. Elicaño
Board of Medical Examiners
Bureau of Civil Service
Manila

Sir:

We wish to thank you, most profoundly, for your kind words in your letter of February 26, 1954. With the withdrawal, however, by the Philippine Federation of Private Medical Practitioners of the case for illegal practice against Rev. Erickson, it becomes, as we have previously stated, unnecessary for this Office to render further opinion on the case, — including the detail discovered during the partial investigation thereof that it was Rev. Sumrall who had charge of all publicity and advertisements pertaining to the salvation and divine healing. However, by way of comment, we would like to state that, from a reading and examination of the context of Section 770 of the Revised Administrative Code which defines the acts constituting illegal practice of medicine, it would seem that the person who treats, diagnoses, operates, or, prescribes, mentioned in the first part thereof, should be the same person who offers, or undertakes to cure, etc., human ailments, by means of advertisements. It is therefore believed that even in the event that Rev. Sumrall would make the admission above imputed to him, still, there would be no case against him unless further evidence is discovered, or presented.

(Sgd.) EUGENIO ANGELES
City Fiscal

By: (Sgd.) JOSE B. JIMENEZ
Assistant Fiscal

REPUBLIC OF THE PHILIPPINES
BUKEAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

February 27, 1954

Mr. Gonzalo S. Robles
Secretary, Boards of Examiners
Bureau of Civil Service
Manila

My dear Mr. Robles:

In connection with my letter to the City Fiscal dated February 2, 1954 copy of which your Office has been furnished, I would like to furnish you also copy of the letter of Atty. Jose B. Jimenez, Assistant Fiscal, together with a copy of my answer to the said letter, for your information and official record of the Board of Medical Examiners.

I wish to call your attention to the first line of the Fiscal's letter in which he mentions that he was replying to my letter of the 23rd instant. To put matters clearly, I wish to state that the letter referred to is the 2nd tracer which I have sent to the City Fiscal's Office. I am enclosing herewith for record purposes also copies of both tracer letters.

In looking over my papers regarding the Erickson case, I must have over looked to furnish you copy of my memorandum to the members of the Board, Dr. Conrado Lorenzo and Dr. Nicanor Padilla. In order that your file on this case can be complete, I am enclosing copy of the said memorandum.

Sincerely yours,

(Sgd.) T. ELICAÑO
Chairman

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

February 26, 1954

The Editor
The Evening News
Republic Super Market Building
Manila

Dear Sir:

This is just to tell you two things.

Firstly — my gratitude for publishing my side in the Erickson case which you have given due prominence with an eye-catching heading which is vividly descriptive.

Secondly — to inform you that I received yesterday afternoon, a letter from the City Fiscal's Office, copy of which I am enclosing herewith, together with a copy of my answer to it. The matter being directly connected with the release which you have kindly made, I thought that you may be interested to publish it in substance, which I will appreciate highly.

Sincerely yours,

(Sgd.) T. ELICAÑO
Chairman

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

February 26, 1954

Hon. Jose B. Jimenez
Office of the City Fiscal
Manila

Dear Assistant Fiscal Jimenez:

I received this afternoon your letter of February 25, 1954 in answer to my query about the preaching of Rev. Clifton O. Erickson.

I appreciate the time that you have spent in the study of the case which I have brought up for opinion and I hope that the parties concerned as you stated in your letter are already satisfied. However, I noticed that in the answer of Rev. Erickson, he said that Rev. Sumrall is the one in charge of all publicity and advertisements pertaining to the salvation and divine healing and therefore, there is still a point left open for an opinion as to whether the type of advertisement used may be construed as violation of the medical law, with this doubt in mind, I hope that you will do the Board of Medical Examiners the favor of enlightening its members on this point. We wish to assure you that we will highly appreciate the legal opinion which you may hand down to us on this matter.

Again, thanking you for your efforts in helping the Board of Medical Examiners in this case, I remain

Yours sincerely,

(Sgd.) T. ELICAÑO
Chairman

REPUBLIC OF THE PHILIPPINES
CITY OF MANILA
OFFICE OF THE CITY FISCAL

February 25, 1954

Dr. T. Elicaño
Director of Hospitals
Bureau of Hospitals
Manila

Sir:

In reply to your letter of the 23rd instant requesting for our opinion in the matter of Rev. Erickson, on whether, or not he may be proceeded against for illegal practice of medicine, I beg to inform you that after your departure during the last time you came to our Office, Dr. Ramon Angeles, President of the Philippine Federation of Private Medical Practitioners, arrived and after conference with, and upon suggestion and advice of the undersigned, decided to file the case in our Office instead of waiting for our opinion considering, according to reliable sources, that Rev. Erickson was supposed to be leaving shortly for abroad and filling the case directly with our Office was thought more speedy and expedient in the termination of the same. Consequently, the following day, the preliminary investigation of Rev. Erickson was started by the undersigned but after one witness testified, respondent Rev. Erickson made a statement wherein among other things he disclaimed any ability to cure any human disease, copy of which statement is hereto attached for your information. Apparently satisfied with the statement, Dr. Pablo Anzures, counsel for the Philippine Federation of Medical Practitioners withdrew the charges against the respondent.

In view of the foregoing developments in the case, it would seem therefore, to be unnecessary for this Office to render an opinion on the matter.

Very respectfully

(Sgd.) EUGENIO ANGELES
*City Fiscal*By: (Sgd.) JOSE B. JIMENEZ
Assistant Fiscal

Rev. Clifton O. Erickson hereby informs the Members of the Philippine Federation of Private Medical Practitioners that he does not claim to possess the ability nor the power to cure any human disease.

Rev. Lester Sumrall, Bethel Temple, was in charge of all publicity, advertisements pertaining to the salvation and divine healing held at the Roxas Park, Sunken Garden, Manila, P.I. on January 24 to February 21, 1954.

(Sgd.) CLIFTON O. ERICKSON

February 25, 1954

The Editor
The Evening News
Republic Super Market Bldg.
Manila

Dear Editor:

With reference to the article which appeared in your February 24 issue entitled "Doctors After Faith Healer's Scalp Hit Medical Board for Indifference", please publish the following comment:

In my humble opinion, there is absolutely no ground for any one to say that the Board of Medical Examiners is indifferent to the Erickson case. A perusal of the copies of documents which I am sending you regarding the various steps taken by the Board in this case will show that the Board has diligently taken all measures that are necessary.

When I received a letter from Dr. Angeles calling my attention to the meetings of Rev. Erickson and his companions, I answered him that the Board already took steps by calling the people concerned in a conference.

The conference took place and I have a record of its proceedings. I attended one of their meetings and the very next day, I sent a communication to the City Fiscal describing in detail what I saw and requested his opinion as to whether or not the actuations on those conducting the meeting constitute a violation of the medical law.

I have followed conscientiously this query sent to the City Fiscal with two tracer letters and a personal call at the office of the Fiscal. The Assistant Fiscal assigned to study the case asked for an extension of few days because, according to him, the matter requires research as it deals on very delicate matter.

I had invited Dr. Angeles to be present during my personal call at the City Fiscal's Office but, unfortunately, he did not arrive on time and we did not meet. However, he called me up on the night of the same day, that was, February 17, asking me to file the complaint. I told him, pending the Fiscal's opinion, it is premature to go to Court. After all, it is the fiscal who will handle the case for the Board of Medical Examiners should this reach the Court.

On the same night, I consulted a member of the Supreme Court as to whether the procedure I have taken was correct. He answered me: "How can you bring a case to Court when the person whom you are going to utilize to handle case has not yet arrived at a decision?"

In view of the opinion, I believe that any premature move may place the Board in an embarrassing position.

I leave it to you and to your readers to judge whether by taking the steps described, the Board may be charged with ineptitude and indifference.

I will appreciate it very highly if you can publish this comment with the same prominence as you have given to the article aforementioned. For the verification of my statement, I hope that you will have time to peruse the statement which I am enclosing.

Sincerely yours,

(Sgd.) T. ELICAÑO
Chairman

PRESS RELEASE WHICH APPEARED IN THE EVENING NEWS DATED February 24, 1954
DOCTORS AFTER FAITH HEALER'S SCALP HIT MEDICAL BOARD FOR INDIFFERENCE

The Philippine Federation of Private Medical Practitioners today bitterly assailed what it called the "ineptitude and indifference" of the Board of Medical Examiners toward the illegal practice of medicine by impostors and quacks.

Dr. Ramon R. Angeles, president of the Federation, said the board chairmaned by Hospitals Director Tranquilino Elicaño showed "lukewarmness" when the federation called the board's attention to "a faith healer" who held nightly religious meetings in downtown Manila.

The federation president in an interview with the Evening News stressed that he has nothing personal against the board or its members, saying he wanted only to defend the dignity of the federation and private medical practitioners.

Dr. Angeles said matters affecting the health of the public should have the attention of the authorities concerned but the board instead, he said, was lukewarm and indifferent to this matter.

Most objectionable in the holding of the religious meetings, according to the federation president, were the advertisements used in attracting people to the meetings and in the manner of assemblage in which the sick, some of whom were afflicted with contagious ailments, mingled with the healthy.

Because the board failed to act on the case, Dr. Angeles said the federation Saturday filed charges against the evangelist alleging "illegal practice of Medicine."

The board was said not to have acted promptly on the case, pending the opinion of the city fiscal on whether faith healing is prohibited by law.

February 23, 1954

Hon. Jose Jimenez
Assistant City Fiscal
City Hall, Manila

My dear Assistant Fiscal Jimenez:

This is to thank you for the promise you gave me when I went to your Office last Thursday, February 18th, that you will render an opinion on my query on the case of Rev. Erickson, details of which were embodied in a letter delivered to your office on February 2, 1954.

For our future guidance in the Board of Medical Examiners, it will be appreciated if the opinion requested can be rendered at the earliest time possible.

Sincerely yours,

(Sgd.) T. ELICAÑO
Director of Hospitals

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

February, 13, 1954

The City Fiscal
Manila

Sir:

With reference to my letter dated February 2, 1954, requesting an opinion on the meetings of Rev. Clifton O. Erickson, it will be highly appreciated if the Board of Medical Examiners will be favored with an early reply in view of the verbal complaints that are being filed from several quarters,

particularly from some private practitioners and even from the Board of Directors of the Philippine Federation of Private Medical Practitioners. The Board feels that, until we can secure the opinion of your Office, it will not be able to take any definite step on the case. So far, we have advised the persons interested in the matter that as soon as we hear from your Office, we will give them a reply.

Respectfully,

(Sgd.) T. ELICAÑO
Chairman

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

February 5, 1954

Dr. Ramon R. Angeles
President, The Philippine Federation of Private Medical Practitioners
300 Maria Clara, Sampaloc
Manila

Dear Dr. Angeles:

In my last letter, I promised that I will inform you and thru you, the members of the Federation, about the steps taken by the Board of the Medical Examiners with regard to the subject matter of your letter to which you have kindly called our attention.

As I have stated, before we received your letter, we have taken notice of the meetings of the preachers mentioned in your letter and have already taken some steps towards the clarifications of their preachings and work.

The first step taken was a conference held between the preachers and myself in my Office in which I had asked for any written guide of their work and preachings and some explanation about the press releases which you had enclosed in your letter. The result of my conference is embodied in a memorandum which I made for the members of the Board, copy of which is enclosed.

The members of the Board have deliberated and have decided that a query be sent to the City Fiscal in order that, should the Board decide to take action against the preachers in question including court action; our case would be strengthened by the opinion of the City Fiscal thru whom, necessarily, we will have to institute court action. Copy of the query to the City Fiscal is herewith enclosed also for your information. To this date, we have not received any answer from the City Fiscal, but we will follow it closely for an early reply.

Again, in the name of the Board of Medical Examiners, I wish to assure you of our cooperation with the Federation of which you are the worthy President, in the matter which you have brought before us.

Sincerely yours,

(Sgd.) T. ELICAÑO
Chairman

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

February 2, 1954

The City Fiscal
Manila

Sir:

I have the honor to request an opinion as to whether in the light of Section 770 of the Revised Administrative Code, Rev. Clifton O. Erickson and his companion preachers who are advertising and holding nightly meetings in the City of Manila in which they claim to perform miracles of healing, are violating the medical law with regard to practice of medicine.

I have attended their meeting last night at the Roxas Park on P. Burgos Street and observed that Mr Erickson employs the following procedure:

After explaining that disease is the work of Satan, he asked those suffering from tuberculosis to raise their hands. He then exhorted them to have faith in the power of Christ to heal and to drive away from their bodies tuberculosis which is the personification of the devil. After a long exhortation and shouting as if to scare away the devil, he asked the people as to who among them felt relieved of chest pain or can breathe with more ease. To my surprise, many hands went up, including that of a man near me who was practically skin and bone.

Mr. Erickson repeated the same performance after asking those suffering from goiter, cancer or tumor to raise their hands. He even invited an old woman to the stage to ask her if her goiter had disappeared and after examining her, he announced that the bulging of the neck had become very much smaller, leaving in its place, only loose skin to which the old woman agreed. It may be mentioned that there was no physician or any one who testified that those who alleged to be sick had been so diagnosed by a physician.

It is the consensus that science concedes possible relief or even cures by faith healers of some cases of hysteria, neurasthenia, and similar nervous diseases but it does not admit the possibility that tuberculosis, cancerous growths, blindness due to organic lesions, etc., can disappear in thirty minutes which is about the length of time spent by the preacher in his exhortation.

From the enclosed clipping which has been taken from an issue of a Manila daily, it may be seen that there is a request to the reader to "bring your sick, blind, deaf, dumb, crippled and afflicted." It adds "miracles of healing before your eyes" and it also says "free appointment cards and instructions given away every day."

If the method employed and the instructions given can be considered spiritual in nature, I would like to request your opinion as to whether the procedure as described and as advertised can constitute a violation of the medical law. Allow me to quote Sec. 770, 2nd paragraph, and to invite your attention to the words which I have underlined.

"A person shall be considered to practice medicine within the meaning of this section, who shall, for compensation or reward or even without the same, diagnose, treat, operate, prescribe remedies for any human disease, injury, deformity, physical or mental condition or any ailment, real or supposed, regardless of the nature of the remedy or treatment used or recommended, or who shall by means of signs cards, advertisements, or in any other way either offer or undertake by any means or methods to diagnose, treat, manipulate, operate, or prescribe for any human disease, pain, injury, deformity, physical or mental condition."

The purpose of this query is that in case the opinion of that Office is that the preachers mentioned are violating the law, the Board of Medical Examiners will take steps to stop the practice of the said preachers, including bringing them before a Court of Justice, if necessary, and at the same time, advise the authorities of the City of Manila to request the cancellation of the permit given them to hold their meetings.

Taking into account the big crowd that is being attracted by the said preachers, including sick people who sacrifice to make a long trip from the provinces, on the one hand, and of the other, the request of the medical group for an urgent action on the matter, I will highly appreciate it if the requested opinion can be given at your very earliest convenience.

Respectfully,

(Sgd.) T. ELICAÑO
Chairman

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

January 27, 1954

MEMORANDUM for
Dr. Conrado E. Lorenzo and
Dr. Nicanor Padilla
Members, Board of Medical Examiners
Bureau of Civil Service, Manila

I received from Dr. Angeles a letter, copy of which is attached, enclosing the clippings which are also attached and copy of my answer to Dr. Angeles, for your information.

As a preliminary step preparatory to a joint hearing with you, I have called for a conference Rev. Erickson thru Rev. Sumrall who, according to the newspapers, has been instrumental in bringing him here. The latter, accompanied by Rev. Ruben Candelaria and an American press relations officer, came to my Office this morning to explain how they conduct their meetings, but Rev. Erickson did not appear. After a lengthy questioning, I gathered that they do not use any material, not even water, to administer to anyone or employ any mechanical or physical method of treatment and much less, diagnose any ailment, but simply invite the people to pray for deliverance from sin and for peace. They added also that in their belief, an individual cannot have peace if he has a physical anomaly or abnormality and they only pray and invite the people to pray with them so that the people suffering from such anomaly can have peace.

It seems to me that the simple action of praying for deliverance from such physical defects does not fall within the definition of what constitutes medical practice as given in Section 770 of the Administrative Code.

As the persons who came to see me stated that they do not have any printed matter from which we may see the basis of their preachings, the only way to learn more about their action would be to attend one of the meetings which is being held, I understand, every evening at 7:00 o'clock in front of the City Hall.

With reference to their meetings, I have been informed that they have a license to hold them after the City authorities have been appraised of what they are going to do and what they are going to say. They also said that Dr. Ortiz, the Assistant Dean of the M.C.U. who has attended one of their meetings, thinks that their preaching does not have any bearing with the provisions of our medical law with regard to the practice of medicine.

I would like to request your opinion on this matter after reading the attached newspaper clippings and, if possible, after attending one of their meetings. As you may notice, in my answer to Dr. Angeles, I have promised to inform him of the result of our action and our opinion on the matter in due time.

(Sgd.) T. ELICAÑO
Chairman

Republic of the Philippines
Bureau of Civil Service
BOARD OF MEDICAL EXAMINERS
Manila

January 26, 1954

Dr. Ramon R. Angeles
President, Philippine Federation of
Private Medical Practitioners
300 Maria Clara, Sampaloc

Dear Dr. Angeles:

I have just received your letter which you have signed on behalf of the Philippine Federation of Private Medical Practitioners as President of the Association.

Allow me to congratulate you for your alertness in bringing to the attention of the Board of Medical Examiners the press releases regarding Rev. Clifton O. Erickson. However, I must tell you that the members of the Board are already aware of such articles and the undersigned has already taken steps to look into the matter. Rev. Erickson has been called for a conference thru Rev. Sumrall as it is the proper procedure anywhere to give a chance to all parties concerned to give their side. The Board is with you in the desire to have this matter thoroughly investigated and we wish to assure you that the provisions of the Administrative Code, Section 770, of the Medical Law will be applied strictly. You will hear from the Board in due time about this matter.

As this incident has not passed the Board of Examiners unnoticed, I believe that your remarks about distinction between foreigners and natives are unnecessary.

Respectfully yours,

(Sgd.) T. ELICAÑO
Chairman

PHILIPPINE FEDERATION OF PRIVATE MEDICAL PRACTITIONERS
300 Maria Clara, Sampaloc, Tel. 3-34-98
ATTENTION: DR. T. ELICAÑO

January 26, 1954

Dr. Tranquilino Elicaño
Chairman, Board of Medical Examiners
Manila

Dear Dr. Elicaño:

Recent issues of the metropolitan newspapers carry news of the operation of certain "miracle and faith healers", (1) Rev. Fr. Clifton Erickson, who invites all the blind, deaf and dumb, crippled and afflicted and promise to heal them of their ailments at Roxas Park on Taft Ave., Manila and (2) Rev. Diamond A. Noble in Tayug, Pangasinan, who before some 1,000 people enjoins his hearers to thank God. He had sent a "brown man" to relieve the sick. For your information and guidance I am enclosing herewith "clippings" of the same news.

The members of the Philippine Federation of Private Medical Practitioners, an association one of whose main objectives is "to protect the public from impostors, quacks and charlatans", we wish to bring to your attention the cases mentioned above, if same have escaped the attention of the Board of Medical Examiners and the corresponding health authorities concerned.

Don't you think that the said "miracles and faith healers" are worth investigating and looked into as illegal practitioners of medicine? Don't you think that it is our duty as medical men, to bring out the truth in science and protect not only the people from the ravages of quacks and charlatans but also the good name of the medical profession? Unlike a similar case of a Filipino "miracle and faith healer" who operated in Geronimo St., Sampaloc, many months ago and was prosecuted by the authorities, why

do the faith healers we have mentioned above go unnoticed? Is it because they are foreigners and as such enjoy special privileges granted by our laws?

Trusting that your good office will do something about these matters, we remain

Very truly yours,

THE PHILIPPINE FEDERATION OF PRIVATE
MEDICAL PRACTITIONERS

BY:

(Sgd.) RAMON R. ANGELES

REPUBLIC OF THE PHILIPPINES
BUREAU OF CIVIL SERVICE
BOARD OF MEDICAL EXAMINERS
Manila

January 25, 1954

Rev. Lester F. Sumrall
Pastor, Bethel Temple
Gen. Luna, Isaac Peral St.
Manila

Dear Rev. Sumrall:

I have noticed the prominent news release made regarding the activities of Reverend Clifton O. Erickson. As according to the newspapers you have been instrumental in his coming to the Philippines, I have addressed this letter to you to request you to ask Reverend Erickson to do me the favor of coming to the Bureau of Hospitals, San Lazaro Hospital Compound, for a conference on Wednesday, January 27, between 8:00 and 12:00 in the morning.

This conference is vital in connection with the enforcement of our medical law and therefore your coming to see me is highly appreciated.

Sincerely yours,

(Sgd.) T. ELICAÑO
Chairman

Exhibit C. Proposed Bill submitted by the Philippine Orthopedic Association.

THIRD CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
FIRST SESSION)

HOUSE OF REPRESENTATIVES

H. B. No. _____

Introduced by Congressmen

EXPLANATORY NOTE

The attached bill seeks to regulate the practice of physiotherapy in the Philippines.

Physiotherapy is the scientific application of physical therapy methods to the alleviation of human suffering. These methods or modalities consist of massage, diathermy, infrared, hydrotherapy, exercises, etc. The physiotherapist is a technician who has been trained in the practice of physiotherapy. He can practice physiotherapy only with the prescription of a duly qualified physician. Since the massage work is only a part of physiotherapy, a masseur is not a physiotherapist.

This bill will raise the category of physiotherapy into a profession and will eventually result in the betterment of its professional and ethical standards. Physical therapy is a recognized branch of the medical profession in much the same way as midwifery and nursing. It has enough good points to raise it to the category of a profession.

THIRD CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
FIRST SESSION)

HOUSE OF REPRESENTATIVES

H. B. No. _____

Introduced by Congressmen

AN ACT

TO REGULATE THE PRACTICE OF PHYSIOTHERAPY IN THE PHILIPPINES
AND FOR OTHER PURPOSES

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

ARTICLE I. — Title of Act

SECTION 1. Title of Act. — This Act shall be known as the "PHILIPPINE PHYSIOTHERAPY LAW."

ARTICLE II. — Organization of the Board of examiners for Physiotherapists

SECTION 2. Name and composition of the Board. — The Board shall be known as the Board of Examiners for Physiotherapists and shall be composed of a chairman and two members who shall be appointed by the President of the Philippines upon the recommendation of the Philippine Orthopaedic Association from among registered Physiotherapists and Orthopaedic surgeons and possessing the qualifications prescribed in SECTION 4 of this Act. The Chairman of the Board shall always be a qualified Orthopaedic surgeon, preferably a Fellow of the Philippine Orthopaedic Association.

SECTION 3. Powers and Duties of the Board. The Board of examiners for Physiotherapists is vested with authority conformably with the provisions of this Act, to issue, suspend, revoke, or reissue certificate of registration of the practice of Physiotherapy. The Board shall study the conditions affecting Physiotherapy education and the practice of Physiotherapy in the Philippines, and shall exercise the powers conferred upon it by this Act with a view to the maintenance of an efficient, ethical, technical, moral and professional standard in the practice of Physiotherapy. The Board shall likewise study and examine facilities of schools or other institutions seeking permission to offer courses in physiotherapy so as to see if the essential requirement therefor including qualified faculty and adequate budget are properly complied with. The authorization to open schools for physiotherapists shall be based upon the written recommendation of the Board and the representative of the Government entity concerned with the granting of school permits or authorization.

The Board shall have the power to investigate violations of this Act and for this purpose, it may, under the hand of its chairman and seal of the Board, issue summons, *Subpoena duces tecum* to violators of this Act and witnesses, thereof, and to compel their attendance. The Board shall from time to time look into the conditions affecting the practice of physiotherapy in the Philippines and whenever necessary, recommend or adopt such measures as may be deemed proper for the advancement of the profession and for the vigorous enforcement of this Act.

SECTION 4. Qualifications of Board Members. — The members of the Board shall each, at the time of appointment:

- (a) Be a citizen of the Philippines;
- (b) Be a reputable physiotherapist practicing in the Philippines for at least five years prior to his appointment;
- (c) Be a graduate of a two-year college course and holder of a certificate or diploma from a reputable school or college of physiotherapy.
- (d) The first Board Member shall be composed of three Orthopaedic Surgeons, preferably Fellows of the Philippine Orthopaedic Association and they shall hold office for a term of office as prescribed in SECTION 5 of this Act. The members of the Board shall be qualified Orthopaedic Surgeons for at least a period of six years, subsequently one or two members of the Board may be qualified Physiotherapists.

SECTION 5. Term of Office. — The members of the Board shall hold office for a term of three years or until their successors shall have been appointed and duly qualified provided, That the members of the first Board appointed under this Act shall hold office for the following terms: One member for one year, one member for two years, and one member for three years. Any vacancy occurring within the term of a member shall be filled for the unexpired portion of the term only. Each member of the Board shall qualify by taking the proper oath of office prior to entering upon the performance of his or her duties.

SECTION 6. Executive Office and Secretary of the Board. — The Commissioner of Civil Service shall be the Executive Officer of the Board. The Secretary of the Board of Examiners appointed under Republic Act Numbered Five Hundred and Forty Six shall also be the Secretary of the Board of Examiners for Physiotherapists. All records and minutes of the deliberations of the Board, including examination papers, shall be kept by the Bureau of Civil Service under direct custody of the Secretary.

SECTION 7. Compensation of the Board Members. — The members of the Board shall each receive as compensation a fee not exceeding five pesos per capita of the candidates examined.

SECTION 8. Removal of Board member. — The President of the Philippines may, upon the recommendation of the Commissioner of Civil Service, remove any member of the Board for continued neglect of duty or incompetency, for commission or toleration or irregularities in the examination, or for unprofessional or dishonorable conduct, after having been the member concerned an opportunity to defend himself or herself in a proper administrative investigation.

SECTION 9. Rules and Regulations. — The Board may, subject to approval of the Secretary of Health and the President of the Philippines, promulgate such rules and regulations as may be necessary to carry out the provisions of this Act.

SECTION 10. Annual Report. — The Board shall submit an annual report to the President of the Philippines, through the Secretary of Health, after the close of each fiscal year, giving a detailed account of the proceedings of the Board during the year and embodying such recommendations as the Board may desire to make.

ARTICLE III. Examination and Registration of Physiotherapists

SECTION 11. *Inhibition against practice of Physiotherapy.* — No person shall practice or offer to practice physiotherapy in the Philippines as defined in this Act, without, holding a valid certificate of registration as physiotherapist issued by the Board of examiners for Physiotherapists. Members of the medical profession are exempted from the provisions of this section.

SECTION 12. *Scope of Practice of Physiotherapy.* — A person shall be deemed to be practicing professional physiotherapy, within the meaning and intent of this Act, who shall, for a fee, salary, or other reward, or compensation perform professional service requiring an understanding of the principles and applications of the procedures and techniques of physiotherapy.

SECTION 13. *Limitation to the Practice of Physiotherapy.* — A physiotherapist shall not practice his profession on any sick individual except upon the recommendation or prescription of a duly registered physician.

SECTION 14. *Holding of Examination.* — Examination for candidates desiring to practice physiotherapy in the Philippines shall be given by the Board on the first Saturday of June and December of each year in Manila or at such other place as may be deemed necessary or expedient by the Board subject to the approval of the Commissioner of Civil Service and the President of the Philippines.

SECTION 15. *Examination required.* — Except or otherwise permitted under the provisions of this Act, all applicants for registration for the practice of physiotherapy shall be required to undergo an examination as provided for in this Act.

SECTION 16. *Qualifications of applicants.* — In order to be admitted to the physiotherapists' examination, an applicant must, at the time of filing his or her application therefor, establish to the satisfaction of the Board that:

(a) He or she is a citizen of the Philippines, or a foreigner; provided, That the Country of which he or she is a subject or a citizen permits Filipino physiotherapists to practice within its territorial limits on the same basis as the subject or citizen of such country.

(b) He or she is at least 21 years of age.

(c) He or she is of good health and is of good moral character.

(d) He or she had finished a standard academic high school course or its equivalent in a school, institute, college or university legally established and duly recognized by the Government.

(e) He or she has received a certificate or diploma of physical therapy or other title of equivalent standard from a reputable school of physiotherapy which gives a two-year course in physiotherapy; Provided, however, That such school or college is not conducting its classes through correspondence courses; and Provided, further, That such educational institution offers at least the following subjects in its physiotherapy, namely Anatomy, Physiology, Kinesiology, Elementary Studies in Pathology, Abnormal Psychology, Theory and Practice of Heat Application and Radiation, Theory and Practice of Hydrotherapy, General Survey of Orthopaedics, Therapeutic Exercise, Theory and Practice of Massage, Theory and Practice of Electrotherapy, Elementary Psychiatry, Physics Applied to Physical Medicine, Ethics and Institutional Aspects of Physical Therapy, Applied Anatomy and Kinesiology, Introduction to Record and Case Work, Anatomy of the Nervous System. Theory and Practice of Relaxation, Elementary Neurology, Elementary Swimming, Recreation Techniques for the Disabled, Physical Therapy Techniques for the Disabled, Bandaging and Dressing, Psychosomatic Aspect of Physical Medicine, Applied Physiology, Practical Application of Physical Therapy, Advance Massage, Orientation to Occupational Therapy, Rehabilitation and Acceptance of Handicaps, Principles and Practice of Speech Science and Clinical Practice and Clerkship.

SECTION 17. *Scope of Examination.* — The examination for the practice of physiotherapy in the Philippines shall consist of a written and practical examination the scope of which shall be determined and prescribed by the Board taking into consideration the teaching plan of the school legally constituted in the Philippines. It shall be the duty of the Board to prepare the schedule of subjects mentioned in Section 16-e of this Act, as well as a practical and clinical examination of all candidates, and to submit the same to the President of the Philippines for approval through the Secretary of Health and the Commissioner of Civil Service and to publish the same as approved at least two months before the date of the examination wherein they are to be used. Any alteration or amendment that may be made in said schedule shall likewise be approved by the President.

SECTION 18. *Ratings in the Examination.* — In order to pass the first examination, a candidate must obtain a general rating of not below seventy-five per cent in the written test, with no rating of below sixty per cent, and in the practical or clinical examination must obtain a rating of not below seventy-five per cent. An applicant who failed in the first examination but obtained seventy-five per cent in each of at least five of the subjects may be permitted to take the second examination within one year from the date of the first. In order to pass in the second examination the examinee must obtain not below seventy-five per cent in each of the repeated subjects; Provided, That an applicant who failed again in the set of subjects repeated in the second examination must take re-examination on all subjects within one year from the date of the second re-examination Provided, further, That should he or she still fail in this second re-examination, the applicant shall be required to pursue a prescribed course of study and to show proof of the completion of such course before he or she will be admitted to a fourth examination.

SECTION 19. *Report of Results of Examination.* — The Board of Examiners for Physiotherapists shall, within one hundred and twenty days after the examination, report the ratings obtained by each candidate to the Commissioner of Civil Service, who shall with his recommendation, submit such ratings to the President for his approval.

SECTION 20. *Issuance of Certificates.* — Certificates of registration as physiotherapist shall be issued to any applicant who passes the examination after approval of his or her ratings by the President of the Philippines and upon payment of the required fees. Every certificate of registration shall show the full name of the registrant, have a serial number, bear the signature of the members of the Board, attested by the Secretary of the Board and duly authenticated by the seal of the Board of Examiners for Physiotherapists.

The issuance of a certificate of registration by the Board to the registrant shall be evidence that the person named therein is entitled to all the rights and privileges of a registered physiotherapist until said certificate, for just cause, is revoked temporarily or cancelled.

SECTION 21. *Registration by Reciprocity.* — Certificate registered under the laws of any foreign state or country may be used without examination for physiotherapist; Provided, That the requirements for the registration or licensing of physiotherapists in said foreign state or country are substantially the same as those required and contemplated by this Act; and Provided, further, That the laws of such state or country grant the same privileges to registered physiotherapists in the Philippines on the same basis as the subjects or citizens of such foreign state or country.

SECTION 22. *Fees of Examination and Registration.* — Applicants for examination for the profession of physiotherapy shall pay an examination fee of twenty-five pesos. Successful applicants shall pay a registration fee of ten pesos.

SECTION 23. *Refusal to Issue Certificates in Certain Cases.* — The Board of Examiners for Physiotherapists shall refuse to issue a certificate of registration to any person convicted by a court of competent jurisdiction of any criminal offense involving moral turpitude, and to any person guilty of immoral or dishonorable conduct. The Board shall give the applicant a written statement setting forth the reason or reasons for its action, which statement shall be incorporated in the records of the Board.

SECTION 24. *Re-issue of Revoked Certificate and Replacement of Lost Certificates.* — The Board may, for reasons of equity and justice, and upon proper application therefor, issue another copy of the certificate, original or duplicate, upon payment of ten pesos. A new certificate of registration to replace any lost, destroyed or mutilated certificate may be issued subject to the rules of the Board and upon payment of ten pesos.

ARTICLE IV. Sundry Provisions Relative to the Practice of Physiotherapy

SECTION 25. *Professional License.* — A registered physiotherapist shall pay a professional license fee of fifty pesos per annum, payable either annually or semi-annually.

SECTION 26. *Prohibition in the Practice of Physiotherapy Penal Provisions.* — Any person who shall practice physiotherapy in the Philippines within the meaning of this Act, without a certificate of registration issued in accordance with the provisions of this Act, or any person presenting or using as his or her own the certificate of registration of another, or any person giving any false or forged evidence to the Board in order to obtain a certificate of registration or admission to an examination, or any person assuming, using or advertising as a registered physiotherapist, or any person violating any provisions of this Act, shall be guilty of a misdemeanor and shall upon conviction, be sentenced to pay a fine of not less than one thousand pesos nor more than five thousand pesos or to suffer imprisonment for a period of not less than one year nor more than five years, or both such fine and imprisonment, in the discretion of the Court.

SECTION 27. *Enforcement of this Act by Officer of the Law.* — It shall be the duty of all duly constituted officers of the Law of the National Government or any provincial, city or municipal government particularly health officers, to enforce the provisions of this Act and to prosecute any person violating the same.

SECTION 28. *Exemption from Examination.* — Persons who have been practicing physiotherapy at least five years before the passage of this Act, who are in good standing in the profession and who can show proof of their competency to the Board of examiners for Physiotherapists, may be exempted from taking the Board Examination for Physiotherapists as a pre-requisite to registration.

SECTION 29. All laws, part of laws, orders, ordinances or regulations in conflict with the provisions of this Act pertaining to physiotherapeutic duty and practice shall be, and are hereby, repealed.

SECTION 30. This Act shall take effect upon its approval.

APPROVED,

Dr. Gregorio Reyes (Cagayan MS) took the floor and moved for the approval in toto of the report of the Standing Committee on Arrangements. The motion was duly seconded and APPROVED.

REPORT OF THE COMMITTEE ON LEGISLATION AND PUBLIC RELATIONS. — Dr. Gregorio Reyes informed the House that Bill No. 902, transferring the Medical and Dental Services in the Public Schools to the Bureau of Health envisions to transfer the control and supervision of the dental-medical service from the Department of Education to the Department of Health, the Chairmanship also is changed from the Superintendent of City Schools to the DHO, when the transfer was made. He also reported how this change had been made time and again in the past whenever there was a decrease in the collection of dental and medical fees among school children. In 1950 when the dental and medical service was transferred from the Department of Education to the Department of Health, he experienced that there was a drastic decrease in the collection of dental and medical service fees from public school children. He predicts the same thing to happen again because teachers will lose interest once the transfer is effected from the Department of Education to the Department of Health. He said further that the proponent of the Bill wanted to transfer the supervision to the Department of Health in the belief that medical man is more favored to supervise the dental and medical service. But actually it is just the reverse because it can not be claimed that the service is proper when it was in the Division of Schools or in the Department of Health. Further discussion ensued in which Drs. Jara, Lupo D. Carlota and others took part. Dr. Jara proposed to put in the Bill mandatory or obligatory provisions. After further discussion, Dr. Jara moved postponement of any action on this matter and to table and submit this to the Committee on Legislation for study of the Bill before the PMA may commit itself. Seconded by Dr. Icasiano, the motion was APPROVED. Dr. Victorino de Dios also suggested to introduce some amendments in the sense that the collection of fees be like the Red Cross in which leaders in the community will do the collection and to make the collection compulsory. Dr. Jara also proposed to assign dentists in accordance with the collection so that if the division superintendent wants to have more dentists more efforts should be exerted in the collection of fees.

With regards to making the collection of fees mandatory, the Chairman called on Congressman Trono to explain further his views on the matter. Congressman Trono then took the floor and informed the House that there is already a bill regarding the transfer of control of this dental and medical service from the Bureau of Education to the Department of Health. The idea of the bill is to consolidate all the allied provisions under the Department of Health. The Chairman asked Dr. Trono if it can be made mandatory, which Dr. Trono replied that he did not know the legal aspect of the bill. Further discussion followed in which Dr. Icasiano and others took part. The Chairman declared that this could be studied thoroughly to find out whether it is proper to make it mandatory. Dr. Trono promised to bring this matter to the Committee on Health. Applause. He also reported, for the information of the members, that the Committee on Health has considered on second reading a bill regarding payment of 25% overtime to laborers working on Sundays and holidays and the Committee was able to exclude personnel of hospitals. Applause. He also informed the House that the Committee was forced to accept the 17% tax on drugs and medical supplies. After further discussion, the motion of Dr. Jara was, on motion duly seconded, APPROVED by the House.

REPORT OF THE COMMITTEE ON MEDICAL EDUCATION, HOSPITALS AND LABORATORIES. — Dr. Peñas read the portion of the report of the Reference Committee, regarding the report of the Committee on Medical Education, Hospitals and Laboratories.

After the reading of the report, Dr. Padua moved for its approval. Seconded by Dr. Romeo Y. Atienza, the motion was APPROVED.

REPORT OF THE COMMITTEE ON PRIVATE MEDICAL PRACTICE AND MEDICAL ECONOMICS. — Dr. Ago moved for the approval of the report. Seconded by Dr. Ramos. With regards to this report, Dr. Peñas informed the House about the amendments to the report by Dr. Nery. Dr. Nery then took the floor and informed the House that his amendments to the report was not accepted by the Chairman of the Committee, Dr. Ramon R. Angeles, and deliberated at length on the amendments which he said should be included in the report. Dr. Angeles also spoke and said that the amendments of Dr. Nery were submitted late and rejected by two members of the Committee. Dr. Angeles further said that Dr. Nery had been invited to the meetings of the Committee but he did not attend. Dr. Nery then requested that it be put on record that he was not invited. Dr. Nery read his amendment to the report. After the reading of the amendment, the House on motion duly seconded, APPROVED the amendment.

REPORT OF THE COMMITTEE ON SCIENTIFIC ASSEMBLY. — Dr. Fernando D. Manalo moved, seconded by Dr. Pesigan, that the report be approved. CARRIED.

REPORT OF THE REFERENCE COMMITTEE ON THE CONSTITUTION AND BY-LAWS. — Dr. Alejandro S. Gaerlan, Chairman, read the report of the Reference Committee as follows:

To the House of Delegates
47th Annual Meeting
Philippine Medical Association
Manila

Gentlemen:

Your Committee has the honor to submit the following report of its action and recommendations on the different proposed Amendments to the Constitution and By-Laws of the Philippine Medical Association:

- I. *From the Council:* (Page E — 1, 2, & 3 of the Agenda)
 Proposed Amendment to the Constitution
 Chapter IV — Section 1 — Members and Guests — Approval recommended.
 Proposed Amendment to the By-Laws
 Chapter I — Membership
 Proposed New Section 4 — Approval recommended
 Chapter III — House of Delegates
 Proposed New Section 11 — Approval recommended.
 Chapter VI — Council
 Proposed New Section 7 — Approval recommended.
 Chapter VII — Committees
 Proposed New Section 11 — Distinguished Service Award Committee
 Sub-Sections 1, 2, and 3 — Approval recommended
 Chapter VIII—Component societies
 Proposed New Sections 13 and 14 — Approval recommended
 The above proposed amendments were duly approved and endorsed by the Council.
- II. *From the Standing Committee on Auditing and Finance:*
 Proposed Amendment to the By-Laws
 Chapter VI, Section 3 — Approval recommended.
- III. *From the Baguio Medical Society* (Pages E—4-31 of the Agenda)
 Proposed Amendments to the Constitution
1. Amendment to Article II—Purpose of the Association
 2. " " " III — Composition of the Association
 3. " " " VI — The Council
 4. " " " VII — Sections and District Societies
 5. " " " VIII — Annual and Special Meetings
 6. " " " IX — Officers
 7. " " " XII — The Seal
- Proposed Amendments to the By-Laws
1. Amendment to Chapter V — Duties of Officers
 2. " " " VI — Council
 3. " " " VII — Committees
 4. " " " VIII — Component societies
 5. " " " X — Miscellaneous

The Committee reiterates its action and recommendations as of last year which was unanimously approved by all its members and submitted to the House of Delegates but not acted upon due to lack of time. Copies of Committee action and recommendations on the Baguio Medical Society proposals are herewith attached. (Exhibit "A")

Respectfully submitted:

(Sgd.) ALEJANDRO S. GAERLAN, M.D.
Chairman

Special Committee on Amendments to the
 Constitution and By-Laws

EXHIBIT "A"

REPORT OF THE SPECIAL REFERENCE COMMITTEE ON AMENDMENTS TO THE CONSTITUTION AND BY-LAWS OF THE PHILIPPINE MEDICAL ASSOCIATION.

To the House of Delegates,
 Philippine Medical Association:

The Committee divided for expeditious and thorough study and deliberation the proposed amendments into two parts: First, the amendments proposed by the Council of the PMA and by the standing Committee on Auditing and Finance; and second, the amendments proposed by the Baguio Medical Society. The following are the Committee's findings and recommendations:

Part I—Amendments proposed by the Council and the standing Committee on Auditing and Finance

A. Proposed amendments from the Council —

1. To the Constitution:
 - a. Article IV—Members and Guests. Approval is recommended.
2. To the By-Laws:
 - a. Chapter I — Approval is recommended.
 - b. Chapter III — Approval is recommended.
 - c. Chapter VI — Approval is recommended.
 - d. Chapter VII — Committees — Section 7. — recommended for approval that the President-Elect be made ex-officio member of the Committee on Auditing and Finance.
 New Section 11 — on Distinguished Service Award Committee; Approval is highly recommended.
 - e. Chapter VIII—New Section 13 and 14. Approval is recommended.
- B. Proposed amendment from the Standing Committee on Auditing and Finance to replace the deleted statement of Sec. 3, Chapter VI of the By-Laws. Approval is recommended.

Part II—Amendments proposed by the Baguio Medical Society.

- A. In view of the greatness of the responsibility and the far-reaching effect of any action that may be taken on these amendments proposed by the Baguio Medical Society, the Committee wishes to bring to and call the attention of the Delegates to the following observations, findings and procedures before the Committee finally came to a decision:
1. The amendments proposed by the Baguio Medical Society were first presented at the 45th Annual Convention of the Philippine Medical Association held in Baguio in May 1952. The House of Delegates finding that the amendment were very voluminous and requiring more time for study, voted to postpone action on them for the future. The Baguio Medical Society has resubmitted the same amendments for consideration of the House of Delegates in this Convention.
 2. The Council of the PMA included in the membership of this Committee, the 3 incumbent vice-presidents and one past president.
 3. Before deliberating on the proposed amendments, individual members of the Committee decided, for the interest of the Association, to study them seriously without regard to the official or unofficial stand of their respective medical societies on these proposed amendments.
 4. A series of three meeting following the first session of the House of Delegates had to be conducted by the Committee to consider these proposed amendments. A quorum was always established in each meeting of the Committee.
 5. In order to get more clarification on these proposed amendments, President Fernando D. Manalo of the Baguio Medical Society was given a hearing by the Committee for solid hours, answering interrogations propounded by the Committee members.
 6. The Committee also gave a hearing to as many members of the PMA as possible who were interested and who had divergent views on these proposed amendments, among whom were Dr. Antonio S. Fernando and Dr. Rodolfo P. Gonzalez.
 7. The Committee sought the legal advice of Drs. Carmelo Reyes and Pablo Anzures both of whom are at the same time well-known lawyers and are, therefore, in a better position to interpret laws of nature of man.
 8. The Committee sought the legal advice of Dr. Jovito Salonga, who majored in Constitutional Law at Harvard University and a holder of Doctor of Jurisprudence degree from Yale University. His advice was especially sought on how constitution should be framed and amended, quoting that: 'a constitution should be brief, comprehensive (broad and not to go to the details) and clear. It must contain only the basic principles which the details for the implementation may be expressed in the resolutions or laws adopted by the governing body.
 9. Some members of the Committee have made a comparative study of the current constitution and by-laws of the American Medical Association and the British Medical Association. The same members also referred to the preamble of the Philippine Constitution and American Constitution for guidance.
 10. The Committee members are unanimous in reporting that these proposed amendments have been promoted by very good intentions on the part of the Baguio Medical Society.
 11. The Committee finds that the majority of the proposed amendments are only elaborating and emphasizing the present provisions of the Constitution and By-Laws by expressing them in more words than are necessary, examples of which are:
 - a. To the original clause in Article II of the Purposes of the Association "to promote friendly intercourse among physicians" the proposed amendment is "to promote unity among physicians through friendship, thoughtfulness of others, fellowship and brotherly relationship."
 - b. To the clause "protect them against the imposition," the proposed amendment is "to protect them from unjust impositions,"
 - c. To the purposes of the Association the proponents would like to add the following: "to encourage, promote, extend and supervise all component societies in the Philippines; to promote close ties and relationships with other medical and scientific societies throughout the world."

All of these are actually being exercised by the members and officers of the Association at present.
 12. That while the intentions of the proposed amendments are good, they are confusing and all the new ideas being introduced are impractical and will render the constitution and by-laws unworkable, and, therefore, subject to flagrant violations. Examples of these are:
 - a. The proposition to divide the Philippines into nine districts in addition to the three regions now in existence. This idea, while intended to bring closer fellowship among the physicians, is not workable because the proposition expects in addition to the national convention, regional conventions, district conventions or conferences on top of the regular component society meetings. It will take out the physicians, especially the cases elected as officers, of their own places of practice many more times than at present.

- b. One of the functions of the President proposed by these amendments, in addition to the present functions, is that "official visits to component societies, sections and affiliates are made a must." At present there are 53 component societies, excluding sections and affiliates. With 52 weeks in a year, the PMA president, therefore, will be expected to be out at least once a week during the whole year to visit the component societies alone. While the intention again is good so that the president can study the problems of each local component society, it is not practical because it will be impossible for the President to be out as often as that.

B. RECOMMENDATIONS:

In view of the above observations and findings, the Committee cannot recommend the proposed amendments of the Baguio Medical Society for approval in toto, BUT it recommends the approval of one of the proposals, that to create a Permanent Standing Committee on Amendments to the Constitution and By-Laws which will, from time to time, study and recommend to the House of Delegates such amendments as are necessary to make our present Constitution and By-Laws functional and meet the demands of the ever progressing science of medicine.

- (Sgd.) ALEJANDRO S. GAERLAN, M.D. (Cebu), *Chairman*
 (Sgd.) DANIEL LEDESMA, M.D. (Iloilo), *Member*
 (Sgd.) ZOSIMO FERNANDEZ, M.D. (Laguna), *Member*
 (Sgd.) ROMEO Y. ATIENZA, M.D. (Manila), *Member*
 (Sgd.) LEOPOLDO D. DIAZ, M.D. (Nueva Ecija) *Member*
 (Sgd.) BENIGNO C. PARAYNO, M.D. (Pangasinan), *Member*
 (Sgd.) RAMON H. RABAGO, M.D. (Cotabato), *Member*
 (Sgd.) JOSE R. VILLEGAS, M.D. (Negros Oriental), *Member*
 (Sgd.) RUFINO C. GUTIERREZ, M.D. (Sulu), *Member*

Dr. Manalo inquired whether the fiscal year of the Association has already been decided. Dr. Peñas said that the fiscal year begins from July 1 to June 30, although this has not yet been decided. Dr. Peñas declared that April 1 to March 31 coincides with the yearly Convention of the Association and believes it should be adopted. The amendment of the special Committee is from July 1 to June 30, the fiscal year recommended under "Miscellaneous." Dr. Manalo also suggested to appoint six (6) members instead of only three (3) on the Committee on Constitution and By-Laws, and a fixed fiscal year. Dr. Pesigan requested for further clarification about the implementation of fiscal year. Dr. Manalo suggested inclusion of two (2) months preceding year and the budget to be effective July 1st. Dr. Peñas explained further that the fiscal year April 1 to March 31 is not changed every year and the officers elected immediately become responsible upon assuming office and the budget comes into effect, and no difficulty is encountered in the present system. Further discussion followed in which Drs. Duque, Atienza, Pesigan and Manalo took part.

Then, Dr. Carlota moved, that the fiscal year of the Association be fixed from April 1st to March 31st.. The motion was duly seconded by Dr. Duque and APPROVED by the House.

The Secretary-Treasurer read the amendment on Page E-1 (A) of the Agenda and explained the amendment. Dr. Manalo asked whether members of affiliated sections are also members of the PMA. Dr. Peñas answered him that membership is through component societies. The amendment was, on motion duly seconded, APPROVED by the House.

On the proposed new Section, Chapter I, Dr. Ago moved for its approval, seconded by Dr. Atienza, the motion was ADOPTED.

On Chapter III — Dr. Padua moved for its approval, seconded by Dr. Gregorio Reyes, motion was APPROVED.

On Chapter VI — 7, "Number" should be "Member". Moved for approval by Dr. Atienza, seconded by Dr. Manalo. APPROVED. The new section 7 was then duly approved.

On Chapter VII, New Section 11 — Dr. Padua moved for approval, seconded by Dr. Rufino Gutierrez. Motion APPROVED.

On Chapter VIII, New Section 13 — The House on motion duly seconded, APPROVED it.

On Section 14 — the House on motion duly seconded, APPROVED it.

On Chapter VI, Section 3, the proposed amendment of the Committee on Auditing and Finance was approved.

The report of the Reference Committee on the proposed Amendments by the Baguio Medical Society was also approved.

REPORT OF THE COMMITTEE ON RESOLUTIONS. — The Secretary-Treasurer announced that the next item to be taken up is the report of the Committee on Resolutions. He then called upon Dr. Antonio Ejercito, Chairman of the Committee to render his report.

Dr. Ejercito: The Committee on Resolutions has the honor to submit to you the following resolutions:

(The President suggested that the resolutions be acted on by one)

RESOLUTION NO. I. — RESOLUTION OF PROFOUND GRATITUDE TO ALL OF THOSE CONCERNED IN THE PHILIPPINE MEDICAL ASSOCIATION, WHO SUCCESSFULLY BROUGHT ABOUT THE FIRST POSTGRADUATE REFRESHER COURSE, FREE OF CHARGE, AND WHO HAVE BENEFITED QUITE A NUMBER OF MEMBERS OF THE SAID ASSOCIATION.

Moved for approval by Dr. Alvarado and seconded by Dr. Gregorio Reyes. APPROVED.

RESOLUTION NO. II — RECOMMENDING THE ESTABLISHMENT OF A GRADUATE SCHOOL OF MEDICINE IN THE UNIVERSITY OF THE PHILIPPINES

WHEREAS, extensive advances in Medical Science demand specialized practice of medicine;

WHEREAS, it has been and being keenly felt the need of specialized courses in medicine after graduation in the College of Medicine in this country;

WHEREAS, because of these imperative needs, physicians, shortly after graduations from the regular medical colleges, have to go to the United States and other countries for specialization studies;

WHEREAS, it is only those physicians of sufficient financial means who could afford to study abroad, and those who could not do so, altho bright and have the ambition to be specialists, generally turn out to be general practitioners;

WHEREAS, we have already quite a number of specialists along different medical lines, who have graduated abroad in highly recognized postgraduate schools, that could be competent members of the faculty of this proposed Graduate School of Medicine; now, THEREFORE,

BE IT RESOLVED, as it is hereby resolved, by the Philippine Medical Association, in its 47th Annual Convention to request the proper authorities for the establishment of a Graduate School of Medicine to be under and operated by the University of the Philippines.

BE IT FURTHER RESOLVED that copies of this resolution be furnished His Excellency, the President of the Philippines, the Chairman, Board of Regents, University of the Philippines, the President, University of the Philippines; the Dean, College of Medicine, University of the Philippines; and the Press.

(Sgd.) ANTONIO EJERCITO, M.D.

Chairman

Committee on Resolutions

ATTESTED:

(Sgd.) MANUEL D. PEÑAS, M.D.

Secretary-Treasurer

APPROVED:

(Sgd.) ANTONIO S. FERNANDO, M.D.

President

APPROVED.

RESOLUTION NO. III. — EXPRESSING THE PROFOUND GRATITUDE OF THE PHILIPPINE MEDICAL ASSOCIATION, TO HIS EXCELLENCY, RAMON MAGSAYSAY, PRESIDENT OF THE PHILIPPINES, FOR HIS INSPIRING ADDRESS TO THE ASSOCIATION IN ITS OPENING GENERAL SESSION, MONDAY, APRIL 26, 1954; FOR THE PARTY AND INSPIRING TALK HE OFFERED AT MALACAÑANG TO THE MEMBERS OF THE ASSOCIATION IN THE MORNING OF TUESDAY, APRIL 27, AND FOR HIS FRIENDSHIP AND SUPPORT TO THE ASSOCIATION.

APPROVED.

RESOLUTION NO. IV. — RESOLUTION EXPRESSING THE WHOLE-HEARTED SUPPORT OF THE PHILIPPINE MEDICAL ASSOCIATION TO THE ADMINISTRATION OF PRESIDENT RAMON MAGSAYSAY OF THE REPUBLIC OF THE PHILIPPINES, IN HIS EFFORTS TO UPLIFT THE HEALTH AND WELFARE OF THE PEOPLE, PARTICULARLY AS REGARDS THE BETTERMENT OF THE LIVING CONDITIONS IN THE RURAL AREAS.

APPROVED.

RESOLUTION NO. V. — RESOLUTION RECOMMENDING TO THE PROPER AUTHORITIES THE CREATION OF A COMMISSION ON MEDICAL EDUCATION PRESCRIBING ITS FUNCTIONS AND POWERS, AND PROVIDING THAT THE DIRECTOR OF PRIVATE SCHOOLS SHALL BE THE EXECUTIVE SECRETARY THEREOF. APPROVED.

RESOLUTION NO. VI. — RESOLUTION RECOMMENDING TO THE PROPER AUTHORITIES AN APPROPRIATE LEGISLATION CREATING (1) A NATIONAL BOARD OF HEALTH TO BE COMPOSED OF FIVE (5) MEMBERS TO BE ELECTED BY THE PHILIPPINE MEDICAL ASSOCIATION IN REGULAR CONVENTION; AND (2) PROVINCIAL BOARDS OF HEALTH, EACH COMPOSING OF THREE (3) MEMBERS TO BE ELECTED BY THE RESPECTIVE PROVINCIAL MEDICAL SOCIETY (COMPONENT SOCIETY OF THE PHILIPPINE MEDICAL ASSOCIATION). THE MAIN FUNCTIONS OF THIS NATIONAL BOARD OF HEALTH AND PROVINCIAL BOARDS OF HEALTH ARE ADVISORY AND CONSULTATIVE FOR THE SECRETARY OF HEALTH AND FOR THE DISTRICT HEALTH OFFICERS, RESPECTIVELY.

Dr. Icasiano informed the House that the above resolution is very controversial and moved that it be referred to the Committee on Legislation and Public Relations for further study. Seconded by Dr. Padua, motion APPROVED.

Dr. Ejercito invited the attention of the delegates regarding the powers given to the medical society in the U.S.A. with regards to health matters of the people. He said that the DHO is selected by the members of the State Medical Society and the Government formally appointing him. Dr. Peñas suggested that the proponent of the resolution submit a background of the resolution in writing for study by the Committee on Legislation and Public Relations.

RESOLUTION NO. VII. — RESOLUTION EXPRESSING PROFOUND THANKS TO THE AUTHORITIES OF THE FAR EASTERN UNIVERSITY, FOR THE FACILITIES GRANTED TO THE ASSOCIATION FOR ITS 47TH ANNUAL MEETING. APPROVED.

RESOLUTION NO. VIII. — RESOLUTION EXPRESSING THE GRATITUDE OF THE ASSOCIATION FOR THE KIND CONTRIBUTIONS OF THE DIFFERENT DRUG HOUSES AND OTHER AGENCIES FOR THE SUCCESSFUL HOLDING OF THE SAID ANNUAL MEETING. APPROVED.

RESOLUTION NO. IX. — RESOLUTION REQUESTING THAT ALL THE RESOLUTIONS FILED IN THE PRESENT ANNUAL CONVENTION MUST BE PROPERLY IMPLEMENTED BY THE COUNCIL OF THE PHILIPPINE MEDICAL ASSOCIATION IN DUE TIME AND THEIR ACTIONS SHOULD BE REPORTED TO ALL THE COMPONENT SOCIETIES AND TO BE PRESENTED IN TOTO NEXT ANNUAL CONVENTION IN THE MEETING OF THE HOUSE OF DELEGATES. THIS IS TO INSURE THAT ALL THE RESOLUTIONS FILED WILL BE PROPERLY ATTENDED, GIVEN DUE COURSE, AND THE DISPOSITIONS ARE MADE KNOWN TO THOSE CONCERNED. APPROVED.

RESOLUTION NO. X. — RESOLUTION TO CHARGE THE STANDING COMMITTEE ON MEDICAL EDUCATION, HOSPITALS AND LABORATORIES TO DRAFT THE RULES AND REGULATIONS GOVERNING THE CHOICE OF NOMINEES TO THE BOARD OF MEDICAL EXAMINERS. APPROVED.

RESOLUTION NO. XI

WHEREAS, it has been the practice of past administrations of keeping certain members of the different Boards of Examiners in their respective positions by the repeated reappointments to membership therein;

WHEREAS, even full-time physicians are appointed to the different Boards of Examiners, thereby limiting the time they are devoting to their official functions as such officers and adversely affecting their efficiency in the performance thereof;

WHEREAS, the appointment of full-time public officers to any Board of Examiners is a flagrant violation of the Constitution provision prohibiting double compensation;

WHEREAS, Republic Act No. 546 specifically provides that the tenure of office of each member of every Board of Examiners shall be three years, thereby implying the evident intention of the legislature to make each examiner hold office only for the period therein specified;

WHEREAS, in view of the absence of any definite and express prohibition in the law of reappointing members of the said boards thereby allowing the right of appointment to be abused and utilized in favoring certain political proteges;

BE IT THEREFORE RESOLVED By the Philippine Medical Association as it is hereby resolved that a Special Committee be created to draft an amendment to Republic Act No. 546 to the effect that no board member shall be reappointed after the expiration of his tenure of office nor at any subsequent date and that no full-time physicians in public or private office shall be eligible for appointment as Chairman or member of Board of Examiners.

AND BE IT FURTHER RESOLVED that this Special Committee be required to submit the proposed amendment to the Board of Directors of the Philippine Medical Association within twenty days from notice of its creation for its approval and implementation. Copies of this resolution be served the Congress of the Philippines, President of the Philippines, the Hon. Sec. of Health, and the lay press.

Adopted the 30th day of April, the 5th day of the 47th Annual Meeting of the Philippine Medical Association, at Manila, Philippines.

(Sgd.) R. ATIENZA, M.D.

(Sgd.) RAMON R. ANGELES, M.D.

Dr. Padua moved that the resolution be referred to the Committee on Legislation and Public Relations for further study. Dr. Jara suggested discussion of the resolution. He also proposed inclusion in the curriculum of medical schools rural medicine for general practitioners and proposed likewise that the appointing power should pick from candidates suggested by the medical association. Dr. Anzures proposed the creation of a special Committee to draft amendments to Republic Act No. 546 and to include

tenure of office, subsequent date, etc. He said that when a law provides for a tenure of office without a definite length of time the intention of the legislator is for the appointee to hold office indefinitely, until replaced. The resolution is intended to amend Republic Act 546 which is now enforced. A long discussion participated in by Drs. Jara, Nery, Alday, Anzures, Icasiano, Oca and Reyes followed after which the Chairman raised the point of quorum. The Secretary-Treasurer counted 50 delegates. He said that there should be 56 to have a quorum.

Dr. Pesigan moved for adjournment of the meeting. The motion was duly seconded and CARRIED.

The meeting was adjourned at 11:30 p.m.

APPROVED:

(Sgd.) ANTONIO S. FERNANDO, M.D.
President

ATTESTED:

(Sgd.) MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

MINUTES OF THE MEETING OF THE PRESIDENTS AND SECRETARY-TREASURERS OF COMPONENT SOCIETIES HELD ON APRIL 28, 1954 AT THE PRACTICE HOUSE, FAR EASTERN UNIVERSITY

The meeting was called to order at 2:20 p.m. by the President, Dr. Antonio S. Fernando. He expressed his cordial greetings to the officers of the component societies and his hope that their deliberations would be fruitful.

Dr. Manuel D. Peñas, as Chairman of this special group, informed the meeting that while the deliberations do not fall part of the Proceedings of the Philippine Medical Association, he would consider the gathering as very important. In fact the Council had occasion to approve in principle the deliberations during meetings of the Presidents and Secretary-Treasurers of component societies. He cited that matters taken up in Baguio had been carried into effect. The main purpose of the meeting is a give and take affair on matters that affect the Association. Many problems are caused by lack of understanding. Several complaints have been followed up and solved during the year. He asked the members to present their problems and enjoined others to give suggestions to solve these problems.

Dr. M. N. Morales, President of Camarines Norte Medical Society declared that one of the important problems according to his experience is how to increase the membership in order that the Association may be militant and strong. So long as the members of the Association, he said, belong to the minority of the whole medical profession, this will not be effective. He suggested that Presidents of component societies should be active in practice and to take active parts in the affairs of the locality. They should also be given a position of recognition by the Department of Health so that when questions involving health arise he could be asked.

Dr. Icasiano, President-Elect, remarked that he believed that the PMA and the component societies will not be given due recognition by the public and other organizations unless a positive approach to this objective is undertaken by the President and other leaders of each medical society. He suggested that an intensive public relation program taking advantage of every opportunity or even existing opportunities to be useful to the public and to be recognized as an important factor in the life of the community. For example, the President should try to be a member of important Committees in the locality which deal with the people's health and welfare. We will make them feel that in this country the medical society plays an important role in these undertakings. The present tendency of public health is a cooperative work between the community and the government, and we should insist on that with the Medical Society taking a leading front.

Dr. Pedro T. Nery of Quezon City related how meetings of the Quezon City MS were conducted. They were held in restaurants with the members of the Council as host; the wives of members are included. He said that attendance was good although rather expensive.

Dr. Icasiano asked for definite matters to be taken up.

Dr. Morales suggested to take up how to increase the membership and proposed the solution by giving recognition for the society.

Dr. Pedro P. Villafuerte, President of the Camarines Sur MS said that he believed that the medical society should do something tangible to the community like the Rotary Club and the Lion's Club whose works are appreciated by the community. He suggested to give free consultations, so that the people will recognize the society. The members should discuss problems affecting not only the physicians but the public as well and demonstrate tangible results.

Dr. Jose P. Cocjin, President of Iloilo MS, related that there was not one public health problem that arose in Iloilo in which the Iloilo MS was not consulted. The City Health Officer; the DHO; the Director of Provincial Hospital were all members of the Iloilo MS and were given choice committee membership, so that they could consult the society in matters of health. He believed that medical societies in the provinces must be considered not only as scientific societies but also as civic societies like the Rotary, Jaycees, Lions, etc. It will not depend only on the PMA, but in the power and force of the provincial chapter.

Dr. Pedro N. Mayuga, President of the Bohol MS suggested to advise the governor that in all civic movements to be undertaken in a province, the medical society be given recognition.

A member suggested to bring the physician closer to the people by holding meetings in different sections of the province. A member from Ilocos Sur said that in his province they informed the DHO and the head of the Charity physicians in case of meetings, and those require all their subordinates to attend the meeting. The same is true of Presidents of Sanitary Divisions.

Dr. Iderlina F. Manuel, President of the Cagayan MS informed the meeting that the DHO and the chiefs of Hospitals are good members of the Society. They asked their subordinates to attend the meetings, and in fact they attend the meetings more regularly than the private practitioners. The meeting of their society is held once every 4 months and usually coincides with the town fiesta.

Dr. Demetrio Lacuna, Secretary-Treasurer of Quezon City MS suggested to reduce the dues, because this is the complaint of their members.

Dr. Peñas said that the dues of ₱10.00 represent the maximum because of the expenses of the Journal. He said that this is in the constitution. He suggested to study the matter.

Dr. Dominador Narvaez, President of the Baguio MS said that in order to bring more members, they have adopted one monthly meeting on the first Monday of the month in one place. The hospital group is taken care of by the Chief of the Hospital; the chief in the Department of Health brings his companions and the physicians of the industrial establishments are taken care of by Dr. Manalo. Good speakers are invited. He inquired if they could invite speakers thru the PMA. Dr. Peñas replied that this is possible if sufficient time is given to invite speakers. Dr. Peñas expressed further the belief that such arrangement would result in closer cooperation between the PMA and the component societies.

One Secretary-Treasurer said that attendance depends upon the amount of attraction made; if the contribution is big many members will not attend; if reasonable, they will attend. If the scientific papers are good they will also attend. To have good speakers, however, entails big expenses on the part of the society to cover transportation and lodging allowances of the guest speaker. Specialists from Manila are good because they attract more members as well as patients. He cited Dr. Alimurung who had 54 patients in 48 hours, when he visited their society. He also suggested that drug companies offer luncheon. Dr. Bayani C. Fontanilla, Vice-President of Albay MS declared that it would be alright for drug companies to sponsor once, but if many times, it would be unfair and may cause professional jealousies.

Dr. Rufino Gutierrez, President of the Sulu MS said that some government doctors are not members of the medical societies and asked whether the administration of the PMA could do something to make membership in the medical societies mandatory to government physicians.

Dr. Peñas promised to refer this to authorities concerned. He said also he is in favor of making every government doctor a member. He cited the fact that in Holland 86% of doctors are members of medical societies.

Dr. Fernando congratulated the group for their interest in the welfare of the PMA. He said that in the U.S. membership in the society fluctuates depending upon the leadership of the key men in the Society. He noticed that there are times when the society has less members when the President does not show interest. He suggested that the President exert all his energy and see how he can improve the activities of the society and arouse enthusiasm of the physicians. There are many ways, and these ways will depend on local conditions. He reminded the members how in the past the Colegio Medico-Farmacéutico de Filipinas could influence the legislators pass bills improving health matters. When the question of leprosy was being discussed he said, he remembers how the late Dr. Albert said that if leprosy can not be isolated in Culion, the people will not be able to control it; and because of this 1/3 of the budget of the Bureau of Health during that time was spent for the Culion Leper Colony. He also touched on the Tala Leprosarium; the reorganization of the Department of Health by the late President Roxas; the creation of the Advisory Health Council in which the President of the Association was a member; and the controversy over the Alabang Serum Laboratory, which used to be under the Institute of Hygiene. He also said that he asked Dr. Ejercito, Chairman of the Committee on Resolutions, if he could present to the House a resolution for the establishment of a Graduate School of Medicine and another one creating an Advisory Council on Health to be of assistance to the Department of Health as well as to the Congress. He also reported how the Committee on Medical Education, Hospitals and Laboratories of the PMA, the Director of Private Schools, and the Board of Medical Examiners made a survey of the different medical schools patterned after that of the AMA. By means of this survey they found out that there were many things lacking in the medical schools they visited. He also emphasized recognition of medical schools by the PMA. He suggested that the President's duty is to seek the cooperation of government health entities. As a matter of fact, he said, he had seen medical societies that became dormant because the DHO had trouble with the President of a component society.

Dr. Icasiano expressed his desire to visit every component society of the PMA, during his incumbency. As it is not materially possible to visit the 52 individual Societies he requested that several societies group together into a regional convention and he promised that he will attend such conventions. Dr. Fernando cited the successful regional conventions held in Mindanao and the Visayas in the past.

Dr. Icasiano declared that in order to improve attendance he plans to have a sort of monthly report of every component society to the mother Association stating increase or decrease in membership, attendance, activities, income, etc. This is a way, he said, to find out the most active society. He also revealed that he is planning to donate a trophy to the most active society during the year.

Dr. Romeo Y. Atienza, President of the Manila MS remarked that he concurred with the idea of Dr. Fernando in electing officers capable of the job. He also expressed the difficulty of holding regional conventions and brought up the proposed amendments to the Constitution and By-Laws presented by Dr. Fernando D. Manalo which, he said, up to the present had not yet been decided.

Dr. Icasiano suggested that even a group meeting to thresh out problems would do in lieu of a convention.

Dr. Francisco Duque, President of the Pangasinan Medical Society proposed to have only 3 days for annual meeting instead of 5 days and more days for the regional meetings.

Dr. Atienza proposed to have more vice-presidents for Luzon: one in the North and one in the South.

Dr. Peñas suggested to have a planning Committee in the future with all districts represented; and to mobilize force. Dr. Agripino R. Oca, Secretary-Treasurer of the Laguna MS aired his views regarding lack of quorum in the House of Delegates during the last Convention and the overlooking of payment of membership dues of members

to the Society. He declared that if the period of the Convention is shortened many items in the Agenda may not be taken up. He proposed to give more time to transaction of business in the Agenda.

Dr. Peñas declared that the next subject to be discussed is about the Journal and asked Dr. Pesigan if any problem had arisen regarding the Journal.

Dr. Atienza inquired how much a member pays to the Journal. Dr. Peñas replied that the dues of ₱10.00 is divided into ₱6.00 for the Journal and ₱4.00 for the administration. He asked Dr. Pesigan to look the data regarding the matter.

Dr. Pedro P. Villafuerte, President of the Camarines Sur MS reported that some members of their Society pay their dues and do not receive the Journal. Dr. Peñas informed the meeting that a strong letter has been written by Dr. Villafuerte regarding the matter, but found out in the records that some of the complaining members had not paid their dues, although some had paid. He further informed that no copy of the Journal is returned to the office of the PMA denoting that they have not been missed because of wrong addresses and that the presumption is that they have been received.

Dr. Pesigan requested that collections be forwarded during November and December, because if payment is received in March and the dues were due in December it is possible that the January and February issues of the Journal may not be received by the member. Dr. Peñas said that all component societies will be sent the status of all their membership.

Dr. Pesigan informed the meeting that in order to compute the cost of the copy of the journal, the cost of the printing should particularly be considered; also office supplies, postage, salaries of personnel, transportation of messenger, etc. After further explanation he declared that the cost per copy of the Journal is about ₱3.00.

Dr. Fernando informed the meeting that although the present printer of the Journal charges a little higher than others the Association is satisfied because of its efficient work and seldom makes typographical error while others commit plenty of typographical errors. If the printer is changed the Journal might lose the high reputation that it already enjoys. He also cited the many free exchanges that the Journal has abroad, which is another reason why we should maintain the good quality of the Journal at all cost.

A member suggested to write to different component societies to invest some amount to purchase a linotype for the PMA for the printing of programs, Journal, etc. Dr. Peñas declared that this matter had been conceived, but met with disastrous results, because of non-enthusiasm among the members.

Dr. Pesigan reported less complaints received during the year about the Journal, and also intimated the good results derived from the meeting of the Presidents and Secretary-Treasurers. He likewise reminded the Secretary-Treasurers not to keep for a long time the money they receive. If the Secretary-Treasurer wants to send the money all at a time, he may write in advance to the Secretary-Treasurer of the PMA the names of members who had already paid to him and then send the money at the end of the month. He said that such sum will be recorded as paid locally, but not yet received by the P.M.A. APPROVED.

Some one suggested that in case a member should pay direct to the Business Manager or to the Secretary-Treasurer of the PMA the latter officials should satisfy themselves that the member in question has already paid his dues to the local society, otherwise they should also collect the dues for the corresponding branch Society and send the same to the Secretary-Treasurer of the said Society.

Dr. Pesigan also asked the members to forget the stamp of "This is your last copy" in the envelope if they had already paid their dues. Slips are also sent to members, aside from the stamp just mentioned which contains notice of expiration of membership dues. If the slip is found in May it means the June issue will be stopped. He requested the recipient of this slip to answer on the detachable portion of the same when he will pay or when he had already paid. If he does not pay, the sending of the Journal will be stopped. He suggested to encourage members to send complaints to the office of the PMA and promised that they will be promptly acted upon.

Dr. Severo Senen, President of the Ilocos Norte MS suggested that no one may be admitted member of the provincial societies, unless he is a member in good standing of the PMA, because he said some are utilizing the component societies for political reasons. Dr. Peñas replied that membership to the PMA is through component societies only.

Dr. Ago suggested that before a member can be allowed to vote in the PMA he should be in good standing in the local society. He also suggested that the amount of ₱1.00 be collected from each member to help the host society during convention.

Dr. Senen further stressed that some members pay their dues just to attend the Convention and will not pay their dues if they do not attend. He proposed to make it a rule also that if one is a member of the mother society, the Secretary-Treasurer of the PMA should collect also the dues for the local society.

Dr. Oca cited his experience in which some members pay the PMA only but not the local society. This is one reason why the funds of the local society become drained. He agreed to a previous suggestion that if a member pays direct to the mother society, to collect also the dues for the local society and remit this to said society. He also proposed that only those in the membership roll of component societies may be allowed to register under that society. He also agreed to a previous suggestion to have two vice-presidents in Luzon, one for the North and another for the South to have better supervision of problems confronting the societies.

Dr. Peñas suggested to take time with regards to the resolution concerning the two vice-presidents and requested to have this resolution transmitted to the Committee on the Constitution and By-Laws for next year. Regarding the arrangement for the collection of dues by the mother society and the provincial society, he promised to see that this is implemented.

Dr. Oca also proposed to present a resolution to the effect that an advisory committee to the Secretary of Health, to the DHO and chiefs of hospitals be created. Dr. Peñas asked him to transmit this to the Committee on Resolutions headed by Dr. Ejercito for study and discussion at the business meeting.

Dr. Atienza suggested that the host society be helped in its finances by the Association, to be taken from the registration fees. He cited that in Bacolod ₱5.00 extra was charged during the registration. Dr. Peñas said that according to the Constitution the host society can claim for reasonable expenses and this may be paid by the mother society.

Dr. Icasiano gave a brief remark expressing his satisfaction on matters taken up in the meeting and the cordial atmosphere prevailing during the discussion of the different problems presented and informed the Presidents and Secretary-Treasurers that he would try to communicate with them from time to time. He said that the strength of the Association depends on the strength of the local societies and expressed the hope that he would have less routine work and would be able to devote his time to more fundamental objectives of the Association. He expected to visit the Presidents and Secretary-Treasurers in their respective regions in the future, at least the majority, if not all the provinces, within one year.

President Fernando reported that he was glad that the first story of the PMA House was now completed, with our library, and the office housed in it. This is provided with a phone so that the chief clerk can transmit messages even overseas by long distance. He said he was happy that the office personnel would be concentrated in one office unlike before when the offices of the Association were scattered far apart. Lastly, he appealed to the members to buy more shares of stock for the construction of the second story of the PMA House. Applause.

The meeting was adjourned at 5:10 p.m., followed by a picture taking.

APPROVED:

(Sgd.) A. S. FERNANDO, M.D.
President

ATTESTED:

(Sgd.) MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

Signatures collected during this meeting are the following: Dr. Antonio S. Fernando, outgoing President, PMA; Dr. Mariano C. Icasiano, Incoming President, PMA; Dr. Manuel D. Peñas, Secretary-Treasurer, PMA; Dr. T. P. Pesigan, Business Manager of the Journal, PMA; Dr. Damaceno J. Ago, Albay MS; Dr. Eriberto F. Aguilar, San Pablo City MS; Dr. Ramon Atienza, Jr., Secretary-Treasurer, PFPMP. Dr. Romeo Y. Atienza, President, Manila MS; Dr. Gabino V. Balbin, President, Nueva Vizcaya MS; Dr. Virginia Borrromeo, Secretary-Treasurer, Cavite MS; Dr. Maxima C. Brillantes, Secretary-Treasurer, Lanao MS; Dr. A. P. Brion, President, Laguna MS; Dr. Godofredo Caluen, President Lanao MS; Dr. Jose P. Cocjin, President, Iloilo MS; Dr. Caridad del Fierro-Ortega, Secretary-Treasurer, Zambales MS; Dr. Romualdo del Rosario, President, Rizal MS; Dr. Francisco Q. Duque, President, Pangasinan MS; Dr. Tomas Esguerra, President, Tarlac MS; Dr. Florencio Firme, Sr., Secretary-Treasurer, Rizal MS; Dr. Bayani A. Fontanilla, Albay MS; Dr. Candido Garcia, Secretary-Treasurer, Albay MS; Dr. Rufino Gutierrez, President, Sulu MS; Dr. Esteban F. Hidalgo, Secretary-Treasurer, Camarines Sur MS; Dr. Demetrio Lacuna, Secretary-Treasurer, Quezon City MS; Dr. Pedro N. Mayuga, President, Bohol MS; Dr. A. C. Montellano, Secretary-Treasurer, Or. Mindoro MS; Dr. M. N. Morales, President, Camarines Norte MS; Dr. Dominador Narvaez, President, Baguio MS; Dr. Pedro T. Nery; President, Quezon City MS; Dr. Agripino R. Oca, Secretary-Treasurer, Laguna MS; Dr. A. C. Ocampo, Secretary-Treasurer, La Union MS; Dr. Tercial U. Ramirez, President, Isabela MS; Dr. O. P. Madamba, La Union MS; Dr. Iderlina F. Manuel, President, Cagayan MS; Dr. Pablo N. Marquez, Secretary-Treasurer, Marinduque MS; Dr. G. S. Reyes, President, Ilocos Sur MS; Dr. Gregorio Reyes, President, Cagayan MS; Dr. Pedro A. Rodriguez, President, Zamboanga MS; (Vice-President for Mindanao and Sulu, PMA); Dr. Oscar Y. Romero, Secretary-Treasurer, Cagayan MS; Dr. Juan B. Ruiz, Jr., President, Cebu MS; Dr. Jose L. Santos, President, Bulacan, MS; Dr. Jesus Tamesis, Secretary-Treasurer, POOS; Dr. V. R. Trinidad, President, Leyte MS; and Dr. Pedro P. Villafuerte, President, Camarines Sur MS.

MINUTES OF THE GENERAL BUSINESS MEETING OF THE HOUSE OF DELEGATES HELD ON APRIL 30, 1954 AT THE SOCIAL HALL, FAR EASTERN UNIVERSITY

Call to order. — The meeting was called to order at 2:00 p.m. by the new President, Dr. Mariano C. Icasiano. The Secretary-Treasurer Dr. Manuel D. Peñas, read the names of the Committee on Nomination requesting them to come forward as follows:

- Dr. Vicente R. de Ocampo (Manila), *Chairman*
- Dr. Demetrio Belmonte (Manila), *Member*
- Dr. Rodolfo P. Gonzalez (Manila), *Member*
- Dr. Pedro Rodriguez (Zamboanga City), *Member*
- Dr. Cipriano Elizaga-Que (Isabela), *Member*
- Dr. Francisco Ranada (Ilocos Norte), *Member*
- Dr. Teodoro Rejano, Jr. (Marinduque), *Member*
- Dr. Vicente R. Trinidad (Leyte), *Member*
- Dr. Apolonio Baytion (Zamboanga del Norte), *Member*

Dr. de Ocampo reported the following names received by the Committee:

- | | |
|--|--------------------------|
| For President | Dr. Heraldo del Castillo |
| | Dr. Fe V. del Mundo |
| For Vice-President for Luzon | Dr. Antonio Agcaoil |
| | Dr. Damaceno J. Ago |
| | Dr. Jose L. de Guzman |
| For Vice-President for Visayas | Dr. Pedro N. Mayuga |
| | Dr. Pablo N. Torres |
| For Vice-President for Mindanao & Sulu | Dr. Gregorio B. Huerto |
| For Councilor | Dr. Victorino de Dios |
| | Dr. Antonio S. Fernando |

Dr. Ago took the floor and requested that his name be withdrawn from the list saying that he has not done yet any service to the Philippine Medical Association to merit the nomination for Vice-President. The request was granted by the Chairman. A member moved for the closing of all the nominations. It was not seconded. The

Chairman then called the different positions one by one and as he called them he asked for further nominations.

Dr. Icasiano, the presiding officer, declared that there being no other nominee the election of Dr. Huerto as Vice-President for Mindanao & Sulu be considered unanimous. APPROVED

Upon motion which was duly seconded, the House likewise APPROVED that all candidates be called to the rostrum. Dr. Ocampo then called the candidates one by one to the rostrum. Applause.

Dr. Peñas then called the following members of the Committee on Election to come forward and proceed with the election:

- Dr. Jose L. Santos (Bulacan), *Chairman*
- Dr. Pablo Anzures (Manila), *Member*
- Dr. Alfredo Primero (Lanao), *Member*
- Dr. Oscar Madamba (La Union), *Member*
- Dr. Rufino C. Gutierrez (Sulu), *Member*
- Dr. Romeo Y. Atienza (Manila), *Member*
- Dr. Mariano N. Morales (Camarines Norte), *Member*

Dr. Santos reported that there were 3 precincts each to be supervised by the following:

- Precinct No. 1. — Dr. Pablo Anzures, *Chairman*
Dr. Oscar Madamba, *Member*
- 2. — Dr. Gregorio Reyes, *Chairman*
Dr. Alfredo Primero, *Member*
- 3. — Dr. Francisco Casanova, *Chairman*
Dr. Laureano Gregorio, *Member*

Dr. Jose L. Santos took the floor and explained the procedure to be followed and the requirement needed in the election. The issuing of the ballots then started and the Chairman announced that voting will be closed at 4:00 p.m.

Dr. Peñas announced before the House that the closing meeting of the House of Delegates will take place immediately after the election and requested the delegates to stay. At 4:05 p.m. the counting of the ballots started and ended at 4:55. Dr. Peñas then asked the Chairman of the election Committee to submit the results of the election which he did as follows:

	Precinct No.			Total
	1	2	3	votes
<i>For President</i>				
Dr. Heraldo del Castillo	120	111	119	350
Dr. Fe. V. del Mundo	45	38	35	118
<i>For Vice-President for Luzon:</i>				
Dr. Antonio Agcaoil	44	43	43	130
Dr. Jose L. de Guzman	119	96	100	315
<i>For Vice-President for Visayas:</i>				
Dr. Pedro N. Mayuga	79	82	81	242
Dr. Pablo Torre	83	63	67	203
<i>For Councilor for 5 years:</i>				
Dr. Victorino de Dios	102	88	84	274
Dr. Antonio S. Fernando	64	52	67	183

Dr. Santos then declared the following newly-elected officers:

President-Elect	Dr. Heraldo del Castillo
Vice-President for Mindanao and Sulu (Unanimous)	Dr. Gregorio B. Huerto
Vice-President for Luzon	Dr. Jose L. de Guzman
Vice-President for Visayas	Dr. Pablo N. Mayuga
Councilor for 5 years	Dr. Victorino de Dios

Dr. Peñas announced before the House that after the business meeting everybody would proceed to the House of the new President-Elect, Dr. Heraldo del Castillo.

At 5:05 p.m. the newly-elected officers took their oath of office before President Icasiano. Applause. After the taking of oath President Icasiano called each elected officer to say a few words before the House.

Dr. De Dios when called upon declared that his election was rather a surprising one. He said he had already served the Association for many years as President and then as Councilor and now he has been prevailed upon by some colleagues to launch his candidacy for the position of Councilor and accepted the position not for any personal purpose but for the purpose of serving the members of the Association, and expressed his heartfelt thanks and appreciation to everybody. Applause.

Dr. Gregorio B. Huerto's remark was as follows:

"Officers of the PMA and my fellow doctors:

I feel highly honored by the trust you have bestowed upon me to represent Mindanao and Sulu. I am aware of the responsibility that go with this trust. It warms my heart to know that even the least of the rural doctors are given the chance to serve.

I can assure you, that I shall carry on and implement to the best of my ability the good work that has been started by those before me. In my own humble way I shall uphold the fine traditions of this organization.

I am thanking everyone of you from the bottom of my heart for the trust you have given me. I thank you." Applause.

Dr. Mayuga gave the following remarks when called upon to speak: "I am extremely grateful to you who have chosen me as Vice-President for Visayas of the Philippine Medical Association and I pledge to give my utmost to the service of our organization. I consider my election to this high office in our Association as a recognition of those who, like my humble self, work in the rural areas. It is encouraging to note that the PMA has started to take concrete steps to implement the rural health development program of the present administration by giving impetus to our physicians to work in those areas. I am confident that under the leadership of the PMA, this year will be another milestone leading to the complete realization of our desire to extend the benefit of medical care to every Filipino. I thank you." Applause

Dr. de Guzman when called upon to speak said that he was very happy for having been given the opportunity to serve the Association in a humble way. He told the members that when Dr. Duque of the Pangasinan MS launched his candidacy for the position of Vice-President for Luzon, he was reluctant to accept the nomination because he might lose in the election. But now that he was elected he was happy to be a humble officer of the Association and to be of help to it. He knows that to be an officer of the Association is to sacrifice. His experience as a Congressman shows that very few have approached members of Congress regarding passage of health measures. He suggested lobbying in Congress as one way of helping in the passage of health bills. Lastly, he welcomed his colleagues who are going to Pangasinan or Baguio to his residence, and thanked those who supported him in his candidacy. Applause.

Dr. Icasiano then introduced the new-President-Elect of the Association whom he dubbed as the most popular man in the room.

Dr. del Castillo expressed himself as follows: Distinguished officers, my friends: I want to dedicate a few words to a great man, a man with a big heart, a man with a very understanding nature. He could have been the President-elect of the Philippine Medical Association and could have added honor and glory to our Association. But, because of his magnanimity, he voluntarily withdrew his candidacy from this election and graciously gave way to a less deserving man. I want to make public my sincere thanks to this great man who is no other than Dr. Tranquilino Elicaño. I would like to thank also each and everyone of you for explicitly showing your trust and confidence by electing me to the position of President-Elect of the Philippine Medical Association.

Truly, in all candidness, I do not fully deserve this signal honor. However, I will not be human if I do not express publicly my happiness regarding the result of this election, because I know that one year from now I will be able to represent the voice of no less than 4,000 physicians of this country. And I fully believe that with the judicious use of the collective power of this group of physicians, I would venture to say that success is almost assured and that the health and welfare of our people and ourselves are equally assured.

I humbly accept therefore, this trust and confidence that you have so generously given to me and I hope that you will give me your full-hearted cooperation and that I would be expecting suggestions and advices from each and everyone of you, so that we can insure the success of our medical association. Thank you." Applause. Mabuhay!

Adjournment. — There being no further business on the table, President Icasiano declared the meeting adjourned at 5:20 p.m.

APPROVED:

(Sgd.) MARIANO C. ICASIANO, M.D.
President

ATTESTED:

(Sgd.) MANUEL D. PEÑAS
Secretary-Treasurer

MINUTES OF THE CLOSING MEETING OF THE HOUSE OF DELEGATES
HELD ON APRIL 30, 1954 AT THE SOCIAL HALL, FAR EASTERN UNIVER-
SITY.

Call to order. — The meeting was convoked by the President, Dr. Mariano C. Icasiano, at 5:21 p.m.

The Secretary-Treasurer, Dr. Manuel D. Peñas announced that the first order of business of the meeting is about the report of the Reference Committee on the Report of the Auditing and Finance Committee, Secretary-Treasurer and on the Proposed Budget. He then called on Dr. Manuel Quisumbing, Chairman of the Reference Committee, to render his report before the House. Dr. Quisumbing then read the report of his Committee as follows:

April 30, 1954

The Council
Philippine Medical Association
Manila
(Thru the Secretary-Treasurer)

Gentlemen:

This Committee has the honor to endorse favorably the reports of the Secretary-Treasurer and the Auditing and Finance Committee with the following recommendation:

A careful investigation of the members reported to be "not in good standing" (See Table I of the report of the Secretary-Treasurer) so as to verify whether their being so is because of change of residence or change of assignment, or that some members have died, or other possible causes, which will justify their being stricken of the list. Also an intensification in the drive to make these members "in good standing."

The Reference Committee also recommends the approval of the prepared budget for the fiscal period from April 1, 1954 to March 31, 1955.

Respectfully yours,

(Sgd.) MANUEL QUISUMBING, M.D., *Chairman*
(Sgd.) JOSE R. CRUZ, *Member*
(Sgd.) TRINIDAD ESGUERRA, M.D., *Member*
(Sgd.) ROMUALDO DEL ROSARIO, M.D., *Member*
(Sgd.) PABLO O. TORRE, M.D., *Member*

After the reading of the report, Dr. Icasiano asked for the pleasure of the House. Dr. Padua moved, duly seconded by Dr. Vicente R. de Ocampo, that the report be approved. APPROVED

Place of next Annual Meeting. — Dr. Peñas again informed the House that the next item to be taken up is about the determination of the place of the next Annual Meeting, and reported that he has just received a letter from the Baguio Medical Society, Pangasinan Medical Society and others, inviting the Association to hold its next Annual Meeting in Baguio. He called upon Dr. Dominador Narvaez, President of the Baguio Medical Society, to come forward and read the letter before the House. Dr. Narvaez then read the letter as follows:

April 30, 1954

To the House of Delegates
47th Annual Convention
Philippine Medical Association
Manila, Philippines

Gentlemen:

We, of the Pangasinan, Baguio, La Union, and Ilocos Sur Medical Societies extend our invitation for the next Annual Convention of the Philippine Medical Association to take place at Baguio City, Philippines.

Very respectfully,

(Sgd.) FRANCISCO Q. DUQUE, *President, P.M.S.*

(Sgd.) DOMINADOR R. NARVAEZ, *President, B.M.S.*

(Sgd.) MARCELINO T. VIDUYA, *President, L.M.S.*

(Sgd.) GODOFREDO S. REYES, *President, I.S.M.S.*

Dr. Jesus Valdes moved that further invitations be closed. The motion was duly seconded and carried. Dr. Romeo Y. Atienza moved that the invitation just read be accepted by the House. The motion was duly seconded and ACCEPTED by the House. Dr. Peñas announced that further communications with the Baguio Medical Society regarding the coming Annual Meeting will be made in the future.

Appointment of Standing Committees. — The Secretary-Treasurer then announced that the next item in the Agenda to be taken up is about the appointment of the standing Committees of the House of Delegates for the ensuing year. He reported the standing committees which membership will be appointed and read the names of the Committees one by one, as follows:

COMMITTEE ON SCIENTIFIC ASSEMBLY

COMMITTEE ON LEGISLATION AND PUBLIC RELATIONS

COMMITTEE ON PRIVATE MEDICAL PRACTICE AND MEDICAL ECONOMICS

COMMITTEE ON MEDICAL EDUCATION, HOSPITALS AND LABORATORIES

COMMITTEE ON AUDITING AND FINANCE

COMMITTEE ON CONSTITUTION AND BY-LAWS

Dr. Romeo Y. Atienza moved that due to lack of time, the House give full confidence to the Council in appointing the members of the different Committees and to advise the House later on such choices. The motion was duly seconded and CARRIED.

Report of the Committee on Resolutions. — The Secretary-Treasurer announced that the next business to be taken up is about the continuation of the report of the Committee on Resolutions. Dr. Ejercito, Chairman, then took the floor and informed the meeting about the resolution presented by Dr. Ramon R. Angeles and others, regarding the creation of a special Committee amending Republic Act No. 546.

A member from the Leyte MS moved, which was duly seconded, that in view of lack of time the resolution be read by titles by the Chairman, Dr. Ejercito. The motion was duly seconded and carried. Dr. Ejercito explained that the resolution debarb physicians working full time in government as well as private offices from holding membership in the Board of Medical Examiners, and suggested that this be

brought to the attention of the Council. Dr. Lupo D. Carlota declared that in view of the seriousness of the resolution, he moved that it be laid on the table for further study. The motion was duly seconded. Dr. Anzures took the floor and further explained the contents of the resolution citing that time element is very important to the members of the Board in the correction of papers that is why the resolution proposed to limit the members of the Board to physicians not working on full time basis and asked the House to decide the matter whether to approve it or not. Dr. Alday informed the House that the resolution has already been presented to the House during its second meeting but was not discussed thoroughly. The resolution he said is presented in order to hear the views of the House whether they favor it or not and to decide once and for all the resolution. He maintained that government physicians working full time can not leave their position while the private practitioner like him can leave his position any time because he has assistants to attend to his patients. He also cited that he attends annual meetings every year without any prejudice to his practice.

Dr. Carlota declared that he is not in favor or against government physician or any physician. He remarked that in view of the seriousness of the resolution it was important to raise the point of quorum. Further discussion followed in which Dr. Nery spoke urging the members of the House to decide the resolution inasmuch as they are the leaders of the chapters of the Association. Dr. Gregorio Reyes also spoke and urged action on the resolution. Dr. Padua reminded the House that the motion calls for the laying of the resolution on the table but the House is discussing the resolution which should not be the case. A member declared that to lay the resolution on the table would be a delaying tactic. After further discussion a member moved for the division of the House. President Icasiano then declared that it has been moved and seconded that in order to give further study to the proposed resolution presented by the Chairman of the Committee on resolution, said resolution be tabled. The motion was duly seconded and a division of the House was called for the purpose, as follows:

In favor to table the resolution 34 votes
Against putting the resolution on the table 40 votes

The House then resumed the deliberations on the resolution.

Dr. Ejercito informed the House that the resolution calls for two points. One point is against the re-appointment of members of the Board. Upon motion which was duly seconded, the House APPROVED this point.

Another point, he declared, is that no full time government physician will be appointed member of the Board. This was further explained to include full time physicians in private institutions.

Dr. Anzures took the floor and explained further that the resolution has the intention of prohibiting the appointment of physicians working in any institution on full time basis whether government or private. Dr. Jose O. Nolasco remarked that talking of full time he is a pathologist of the Culion Leper Colony and full time and his assistant is doing his work there and he is still on government time. So, he believes, he said, that this full time basis can not be considered seriously. Dr. Anzures declared that the work of the physicians whether government or private is heavy and he believes that they should not be given additional burden. Dr. Ejercito maintained that government physicians are given vacation and sick leave and they can ask when their services are needed in the board and enjoined the members not to have any distinction in the board membership. Dr. Lacuna remarked that from time immemorial it has been the policy of the government to appoint full time not only those with intellectual capacity but also those with integrity and honesty. He said now-a-days it is not easy to select or to find them and cited the examining boards like the dentists, pharmacists, optometrists and others whose members also include those working full time, the passage of the resolution might gather criticisms from

the brothers in the profession, because it will affect also others. In case, he said, there is no other remedy but to pass the resolution, he suggested that it take effect after the term of the office of the present members of the Board in 1956. Dr. Angeles clarified the remark of Dr. Ejercito regarding the vacation and sick leave given to government physicians which he said are given only once a year while the board examinations are given 4 times a year. Another member declared that passage of the resolution would be bad beginning and destroy the good relation between private practitioners and government physicians. Dr. Atienza remarked that the same resolution was presented during the second meeting of the House of Delegates and again the same resolution is presented for discussion. He therefore, suggested for the division of the House. Dr. Peñas asked Dr. Anzures to explain further the resolution which he did by citing amendments to Republic Act No. 546.

Dr. de Guzman called the attention of the House regarding the creation of a special Committee to make amendments to Republic Act 546. So, he said, what should be approved is the creation of a special Committee to propose amendments to Republic Act No. 546, and read that portion of the resolution. He cited that when he was in Congress and approved this act the medical and dental groups were not represented. This he said was approved because of the lobbying of the dental group. The resolution he said is asking appointment of a special Committee and will submit recommendations after 30 days. He therefore proposed to approve this and see what amendments can be presented. The proposition of Dr. de Guzman when put to votation was APPROVED by the House.

Dr. Ejercito informed the House that the next resolution is the one concerning the Business Manager of the Journal which reads as follows:

RESOLUTION

WHEREAS, it has been noted that since 1952 there is a continuous decrease in the number of advertisements in the Journal of the Philippine Medical Association.

WHEREAS, due to the decrease in the number of ads, the income from advertisements was markedly reduced every year and the printing of the journal is mainly made possible thru the fees of the members and the income from the convention.

WHEREAS, the other medical journals are self-supporting, and therefore there is no reason why the journal of the Philippine Medical Association cannot be also self-supporting;

WHEREAS, if the Business Manager is a full time employee of the government or any private firm there is no more time for him to go out and contact personally the different advertisers;

THEREFORE, BE IT RESOLVED, as it is resolved, that the Business Manager of the Journal should be under contract on part time basis and should devote at least four hours a day for the Journal;

BE IT FURTHER RESOLVED, that in order that the Journal be self-supporting, the Business Manager should be required to spend more time in going out and contacting the managers of different establishments;

BE IT FURTHER RESOLVED, that this resolution be presented in the meeting of the House of Delegates during the 47th Annual Convention of the Philippine Medical Association for approval.

(Sgd.) CASTO J. PINEDA, M.D. (Manila MS)

(Sgd.) DOLORES G. ADEVA (Manila MS)

SIGNATURE ILLEGIBLE

SIGNATURE ILLEGIBLE

After the reading of the resolution, Dr. Padua moved, that the resolution be approved. Dr. Alday took the floor and informed the House that in justice to the present Business Manager, the chair should ask him to explain whether he could do the work before giving decision on the matter. After some discussion, Dr. Atienza moved that the resolution be referred to the Council to decide on the matter. The motion was duly seconded and APPROVED.

Dr. Ejercito then announced that the next resolution filed by some members calls for the donation of 50% or no less than ₱1,000 from the registration of members during the Convention to the host Society. The resolution reads as follows:

RESOLUTION

WHEREAS, it is a good policy to rotate the site of the Annual Meeting of the Philippine Medical Association so that the members may be able to see and visit different places in our beautiful country;

WHEREAS, many of the provincial chapters are willing to play host to their mother society but are deterred by financial stringency;

WHEREAS, a component medical society, in playing host to an annual meeting of the Philippine Medical Association, has to incur much expenses;

WHEREAS, the Philippine Medical Association nets a good amount of income from registration fees and from exhibits in holding its annual meeting;

BE IT THEREFORE RESOLVED as it is hereby resolved by the Delegates here assembled at the 47th Annual Meeting of the Philippine Medical Association to approve the grant of 50% of the registration fee at every annual meeting to the host society to help defray expenses incurred by the host society in connection with the annual meeting of the Philippine Medical Association but in no case shall the amount be less than P1,000.

IT IS FURTHER RESOLVED that this resolution, if approved, takes effect this 47th Annual Meeting of the Philippine Medical Association.

Adopted the 30th day of April 1954, the 5th day of the 47th Annual Meeting of the Philippine Medical Association at Manila, Philippines.

(Sgd.) ROMEO Y. ATIENZA, M.D.

(Sgd.) DAMACENO J. AGO, M.D.

(Sgd.) JOSE N. ROSAL, M.D.

(Sgd.) ANTONIO M. SAMIA, M.D.

(Sgd.) GREGORIO M. REYES, M.D.

(Sgd.) EMILIO L. ALVARADO, M.D.

(Sgd.) R. U. ZALAMEA, M.D.

(Sgd.) J. R. CRUZ, M.D.

(Sgd.) SIXTO MACEDA, JR., M.D.

(Sgd.) RUFINO GUTIERREZ, M.D.

(Sgd.) RAMON R. ANGELES, M.D.

(Sgd.) P. G. GARCIA, M.D.

(Sgd.) P. B. VILLAFUERTE, M.D.

(Sgd.) F. Q. DUQUE, M.D.

Dr. Peñas suggested that the resolution be referred to the Auditing and Finance Committee of the Association to study the matter. Dr. Atienza suggested to pass judgment on the resolution. Dr. de Dios when asked about the resolution declared that he favors 50% of the registration fee. Dr. Padua inquired about the average amount of the registration which the Secretary-Treasurer estimated to be around P700.00. Dr. Padua then moved that the resolution be adopted. Dr. Peñas asked Dr. Padua to include in his motion just stated that the budget be corrected in the future. The amendment was accepted by Dr. Padua.

Dr. Icasiano suggested that the office of the Secretary-Treasurer be authorized to send the resolutions to all concerned. This was ACCEPTED by the House.

Dr. Padua suggested that all past officers of the Association from the President down be sent resolution of congratulations and appreciation, as follows: RESOLUTION THANKING THE OUTGOING OFFICERS OF THE PHILIPPINE MEDICAL ASSOCIATION FOR SERVICES RENDERED TO THE ASSOCIATION. APPROVED.

Dr. Ledesma announced to the House that the first floor of the PMA House is already completed, and the second floor has to be constructed. He appealed to the members to buy more shares so that construction of the second story may be started.

Adjournment. — There being no further business on the table, the meeting was adjourned at 6:40 p.m.

APPROVED:

(Sgd.) MARIANO C. ICASIANO, M.D.
President

ATTESTED:

MANUEL D. PEÑAS, M.D.
Secretary-Treasurer

MINUTES OF THE MEETING OF THE FAR EASTERN CONFEDERATION OF MEDICAL ASSOCIATIONS HELD ON APRIL 29, 1954 AT THE LIBRARY, PHILIPPINE COLUMBIAN CLUBHOUSE, TAFT AVENUE, MANILA, PHILIPPINES.

DELEGATES PRESENT:

1. Dr. Smai Chandavimol, delegate from Thailand
2. Dr. Pyong Tai Lee, delegate from Korea
3. Dr. Wu, Ching, delegate from Nationalist China
4. Dr. Li Hsu-Chu, delegate from Nationalist China
5. Dr. Raden Soeharto, delegate from Indonesia
6. Dr. Rodolfo P. Gonzalez, delegate from the Philippines
7. Dr. Antonio S. Fernando, delegate from the Philippines
8. Dr. Manuel D. Peñas, alternate delegate from the Philippines.

OBSERVERS PRESENT:

1. Dr. Mariano C. Icasiano
2. Dr. Pedro Rodriguez
3. Dr. Fernando D. Manalo
4. Dr. Daniel Ledesma
5. Dr. Tranquilino Elicaño
6. Dr. Romeo Atienza
7. Dr. Victorino de Dios

The meeting was called to order by the Temporary Chairman, Dr. Rodolfo P. Gonzalez, Chairman of the Organizing Committee of the FECMA. What ensued next was the introduction of the delegates and observers by the Temporary Chairman. A tentative agenda was approved. Temporary rules of procedure to guide the meeting based on Robert's Rules of Procedure were then considered by the body and was subsequently adopted. Dr. Rodolfo P. Gonzalez was elected unanimously as Interim Chairman while Dr. Manuel D. Peñas Acting Secretary. After thanking the delegates for according him the distinct honor, Dr. Gonzalez stressed the manifold advantages and benefits that a Far Eastern Confederation of Medical Associations will bring to the individual members. A Committee on Organization was then formed composed of all the delegates present. The draft of the Constitution (Exhibit "A") was then read by Dr. Gonzalez and was extensively discussed point by point by the delegates. A motion was made by Dr. Raden Soeharto of Indonesia before the body to consider the advisability of changing the name of the association from that of Far Eastern Confederation of Medical Associations to Asian Confederation of Medical Associations. After a careful study of the matter, the motion was approved.

The delegates recessed for luncheon at noon at the Philippine Columbian Clubhouse, with the Philippine Delegation as host.

The meeting was then resumed at 2:00 P.M. After having finished discussing the proposed draft of the constitution and by-laws and with its concomitant changes, the body proceeded to take up the appointment of Standing, Special or Interim Committees. The body, however, agreed to defer the appointment of the different committees in the meantime.

Dr. Soeharto proposed that the next meeting be held in Djakarta, Indonesia. He also lauded the hospitality and efforts of the Officers and Members of the PMA and expressed high hopes for the success of the ACMA.

Dr. Gonzalez responded in the name of the PMA, thanking all the delegates present for the unstinted cooperation and efforts that they all exerted in making the meeting a fruitful one.

Adjournment.

APPROVED:

(Sgd.) RODOLFO P. GONZALEZ, M.D.
Chairman

ATTESTED:

(Sgd.) MANUEL D. PEÑAS, M.D.
Executive Secretary

EXHIBIT "A"

"ASIAN CONFEDERATION OF MEDICAL ASSOCIATIONS"
DRAFT CONSTITUTION AND BY-LAW

(Approved by Organization Committee April 29, 1954)

- I. **NAME** — The Association shall be known as the Asian Confederation of Medical Associations. (ACMA)
- II. **OBJECTIVES** —
- (a) To promote closer ties among the national medical organizations and among physicians in countries of Asia in particular and of the world in general by personal contact and all other means available.
 - (b) To organize an exchange of information on matters of interest to the medical profession in Asia.
 - (c) To maintain the honor and protect the interest of the medical profession.
 - (d) To study and report on the professional problems which confront the medical profession in Asia.
 - (e) To assist all peoples in Asia to attain the highest possible level of health.
 - (f) To establish relations with and to present the views of the medical profession in the Far East to the World Health Organization, World Medical Association, UNESCO, and other appropriate bodies.
- III. **MEMBERSHIPS** — The unit of membership shall be the national medical association of any country or medical association in any territory located in Asia which can be recognized by the General Assembly as the representative of the Medical profession of that country or territory.
- IV. **TERMINATION** — A member-association shall cease to be a member in any of the following ways;
- (a) By resignation, subject to the conditions prescribed by the By-Laws.
 - (b) By default of payment of fees for membership as may be prescribed by the By-Laws.
- V. **FEES** — Each member-association shall pay to the ACMA an annual membership fee, the amount of which shall be prescribed by the General Assembly.
- VI. **GENERAL ASSEMBLY, ITS POWERS** — It shall be composed of the officers of the ACMA, ex-officio, the members of the Council, and delegates from the Member-associations. It shall exercise general control and direction of the policy and affairs of the association.
- VII. **DELEGATES AND ALTERNATES** — Each Member-association shall be entitled to appoint two delegates who shall *ipso facto* be members of the General Assembly. Each Member-association shall also be entitled to appoint Alternate Delegates, who may attend meetings of the General Assembly and may also act as Delegates, provided that a Member-association is not represented in the Assembly at any time by more than two speaking and voting delegates.
- VIII. **MEETING**. — The General Assembly shall meet at least once in two years.
- IX. **THE MODE OF CONVENING** meetings of the General Assembly and the proceedings thereat and relating thereto shall be such as may from time to time be prescribed by the By-Laws.
- X. **DECISIONS** — Resolutions carried in accordance with the following provisions shall be deemed to be decisions of the ACMA:
- (a) Notice to submit to the General Assembly a resolution relating to any amendment of or addition to the Articles shall be given to the Secretariat not less than six months before the meeting at which it is to be considered. Such resolution shall be deemed a decision of the ACMA if it is carried by a majority of not less than two-thirds of the votes given thereon in the manner prescribed by the By-Laws.
 - (b) Notice to submit to the General Assembly a resolution relating to any amendment of or addition to the By-Laws shall be given to the Secretariat not less than one day before the meeting or session at which it is to be considered. Such a resolution shall be deemed a decision of the Association if carried by a simple majority of the votes given thereon in the manner prescribed by the By-Laws.
- XI. **OFFICERS** — There shall be the following officers of the Association: A President, a President-Elect, a Chairman of Council, and a Treasurer. The officers shall be elected in such manner and shall hold office for such term and shall have and enjoy such duties, powers, and privileges as may be determined from time to time by the By-Laws.
- XII. **OFFICIALS** — There shall be a Secretariat and such officials as may be determined by the General Assembly.
- XIII. **COUNCIL** — The General Assembly shall appoint at each regular meeting a Council which shall be composed of the President, the President-Elect, and the Treasurer, all ex-officio and 4 members of the General Assembly elected in the manner and for the period prescribed in the By-Laws.
- XIV. It shall be the duty of the Council to carry into execution the resolutions passed by the General Assembly and to administer the affairs of the Association in accordance with the Articles and By-Laws.
- XV. **COMMITTEES** — Committees may be appointed in such manner and have such powers as may be prescribed by the By-Laws or as the General Assembly or the Council may think proper.
- XVI. **LANGUAGE** — The English language shall be the official language of the Confederation.

- XVII. JOURNAL** — A Journal (or Bulletin) under the title of the Journal (or Bulletin) of the ACMA may be published periodically.
- XVIII. ANNUAL AND FINANCIAL REPORTS** — The Council shall publish and submit to the General Assembly when this body meets, for adoption and approval a report on the general state and proceedings of the Association for the interim period between meetings, a balance sheet and financial statement for the past year audited by a professional accountant, and an estimate of the probable income and expenditure of the Association for the coming year.
- XIX. DISSOLUTION** — A decision to dissolve the Association shall require the consent of at least two-thirds of the Member-associations. It shall be taken at a meeting of the General Assembly specially called for the purpose. If two-thirds of the Member-associations are not represented at that meeting a referendum of Member-association shall be taken on the question of dissolution and on the method of dealing with the funds of the Association in the event of dissolution.

BY-LAWS

MEMBERSHIP

1. **MEMBERSHIP APPLICATION** — An association desiring to become a constituent member of the ACMA shall apply for election in writing to the Council which, after appropriate inquiry, shall make recommendations for the admission or rejection of the application to the next meeting of the General Assembly.
2. Only one national medical association shall be recognized in each country or territory.
3. **REGISTER** — A register of Member-association shall be maintained by the Council at the Association's Office.
4. **OBLIGATIONS** — Each Member-association shall:
 - (a) do all in its power to promote a knowledge of, and an active interest in, the objectives and work of the ACMA.
 - (b) reply to all inquiries and questionnaires from the Council as quickly as possible or within the time limit specified by the Council.
 - (c) keep the Council informed of any events or developments in its country of interest to the ACMA.
5. **DUES** — Dues shall be due in advance on the first day of January in each year, or, in the case of members joining during the year, from the date of joining. They shall be paid promptly by all Member-association to the Treasurer in the currency to be determined by the General Assembly.
6. **ARREARS** — If the dues of a Member-association for any year shall not have been paid on or before 31st December of that year, it shall ipso facto, but without prejudice to its liability to the Association, cease to be a member as from the date, provided that upon payment before the 31st March in the succeeding year of all subscription due from it, it shall, if eligible, be restored to membership without re-election.
7. **TERMINATION OF MEMBERSHIP** — No Member-association shall except in the case of default in payment of dues, cease to be a member without having given six months' previous notice in writing of its intention to the Council and without having paid all arrears of subscription, if any, due from it.

GENERAL ASSEMBLY

8. **GENERAL ASSEMBLY** — The General Assembly shall determine the place and time for each succeeding meeting. The annual meeting shall as far as possible be held in a different country each year.
9. **SPECIAL MEETINGS** — A special meeting of the General Assembly shall be convened at any time by the President on the request of the Council or on the request of not less than 4 Member-associations or as subsequently determined by the General Assembly.
10. At least three months' notice of special meetings shall be given to the members of the General Assembly. The notice shall state the place and purpose of the meeting.
11. No business shall be dealt with by a special meeting of the General Assembly other than that for which it is specially convened.
12. **OBSERVERS** — Member-Association shall have the right to send observers, without privileges of speaking or voting, to meetings of the General Assembly. The Council shall have power to invite, at its discretion, other organizations interested in the practice of medicine in Asia to send observers.
13. **BUSINESS** — The Business of the regular meeting of the General Assembly shall be:
 - (a) To elect or install a President of the Association;
 - (b) To elect a President-Elect, a Treasurer, and such other officers as by the Articles or the By-Laws may require to be so elected;
 - (c) To appoint, when necessary, such officials of the Association as may be determined under Article XII of the Constitution and fix their remuneration;
 - (d) To elect members of the Council as required by By-Laws 29 and in accordance with procedure laid down in Standing Orders;
 - (e) To appoint a place and time at which the next regular meeting shall be held;
 - (f) To consider and determine applications for membership;
 - (g) To fix the annual dues;
 - (h) To consider the Annual Financial Statement and the Balance Sheet presented by the Council and to arrange for such action to be taken thereon as may seem appropriate;

- (i) To instruct the Council concerning investigations to be taken in the pursuit of the objects of the Association;
 - (j) To consider such resolutions as can be properly considered by the General Assembly having regard to the objectives of the Association and as have been submitted by Member-associations with the appropriate period of notice as laid down in Article 10;
 - (k) To appoint an auditor and to fix his remuneration.
14. **AGENDA** — The Agenda for the General Assembly shall be prepared by the Council, which shall have power to decide whether or not a resolution submitted by a Member-association falls within the objective of the ACMA.
 15. **NOTICE OF MOTIONS** — Resolutions requiring a period of notice as laid down in Article 12 (a) and (b) shall be circulated by the Council before the meeting to all Member-associations for their consideration.
 16. **PRESIDING OFFICER** — The president of the Association shall preside at meetings of the General Assembly. In the absence of the President the meeting shall appoint a presiding officer from its own number.
 17. **VOTING** — All members of the General Assembly shall be entitled to vote at meetings of the Assembly provided that, except in the election of officers, a member of the Council shall not be entitled to vote in the Assembly unless he is a Delegate. Each Delegate shall have one vote, provided that if a Member-association is represented in a meeting of the General Assembly by only one Delegate that the Delegate shall have two votes.
 18. Voting shall be by show of hands, unless, before the vote, is taken, 4 members present request that the vote be taken by secret ballot.
 19. In speaking and voting upon any matter, the Delegate of a Member-association shall have regard to the preponderance of opinion of the association he represents.
 20. The presiding officer shall in the case of equality of voting have a vote, but shall not otherwise be entitled to vote.
 21. **REFERENDUM** — If one-third of the Member-associations, whether represented or not at the meeting, request within two months of the date of the meeting that a decision of meeting of the General Assembly which was carried by a simple majority and less than two-thirds of the Member-associations shall be submitted to a referendum of all Member-associations, the Council shall take steps to obtain by correspondence the votes of each Member-association.
 22. A decision which is the subject of a referendum shall have no operation unless and until it shall have been approved on the referendum by at least three-quarters of the Member-associations who have answered the referendum, provided that in no case shall the operation of the decision be delayed for more than eight months from the date of the meeting.
 23. **LANGUAGE** — The discussions at the meetings of the General Assembly shall be conducted in English and if a Delegate wishes to speak in the Assembly in any other language he shall be permitted to do so provided that he arranges for its immediate translation into English.
 24. **MINUTES** — The Secretariat shall keep Minutes of each meeting of the General Assembly, which shall, after confirmation by the presiding officer, be transmitted to the Council.
 25. **ADJOURNMENT** — The presiding officer shall have power to adjourn the meeting from time to time and from place to place.

— THE COUNCIL —

26. **COUNCIL** — Each elected member of the Council appointed by the General Assembly shall hold office for four years and at the end of that term shall be eligible for re-election. Members shall retire in rotation. At the first annual meeting two members shall be elected for four years and two for two years.
27. Each term of office shall be calculated from the close of the annual meeting of the General Assembly at which the election is made.
28. **CHAIRMAN AND VICE-CHAIRMAN** — The Council shall elect a Chairman and a Vice-Chairman from its own number. The Chairman, or in his absence the Vice-Chairman shall preside over meetings of the Council. If the Chairman and Vice-Chairman are both absent the members of the Council shall elect one of their number to preside over the meeting.
29. **MEETINGS** — The Council shall meet at least once a year and at such other times as it may deem necessary. Meetings shall be held at such place and upon such notice as the Chairman may appoint.
30. **QUORUM** — No business shall be transacted at any meeting of the Council unless at least four members be present or as may be subsequently directed by the General Assembly.
31. **BUSINESS BY CORRESPONDENCE** — The Chairman shall have the power to decide what business may be conducted by correspondence and what by meetings of the Council.
32. **SPECIAL MEETINGS** — The Chairman of the Council may if he thinks fit and shall upon receiving a request signed by not less than four members of the Council and specifying the business for which a special meeting is required call together a special meeting of the Council. The place at which the special meeting shall be held and its purpose shall be specified in the notice calling the meeting. At least two months notice of such meetings shall be given to the members of the Council.
33. No business shall be transacted at a special meeting other than that for which such meeting is called.

34. **VACANCIES** — The Council shall have power to fill casual vacancies among its number until the next election of members of the Council.
35. **VOTING** — Voting shall be by show of hands, and a simple majority shall be sufficient to carry a resolution.
36. **MINUTES** — The Secretariat shall keep Minutes of the proceedings of each meeting of the Council.

DELEGATES

37. **DELEGATES** — Each Member-association shall notify the Secretariat of the names and addresses of its delegates and alternate delegates appointed in accordance with Article 9, and shall also notify any subsequent changes.
38. **QUALIFICATIONS** — A Delegate shall be a person who is medically qualified and a member of the association he represents.
39. **DUTIES** — On returning from a meeting of the General Assembly, Delegates shall report to their respective associations on the proceedings of the meeting. The Council may from time to time issue instructions to Delegates.
40. **EXPENSES** — The expenses of Delegates attending meetings of the General Assembly shall not be charged upon the funds of the ACMA.
41. **FINANCE** — The Treasurer shall receive all moneys payable to the Association, discharge all accounts which have been ordered by the Council to be paid and keep accounts and submit them to the Council at each of its meetings.
42. The accounts of the Association shall be kept at the Office of the Treasurer. Any Member-association, through its Delegates, may inspect the accounts.
43. The financial year of the Association shall be the calendar year.

— SECRETARIAT —

44. **SECRETARIAT** — The expenses of the Secretariat shall be defrayed out of the general funds of the Association on the periodical production to the Treasurer of vouchers stating the expenses incurred.
45. **OFFICERS** — President, President-Elect, — The President of the Association shall be elected at the regular meeting of the general assembly and shall enter upon the duties of his office at the next regular meeting, and until then shall bear title of President-Elect.
46. **CHAIRMAN OF COUNCIL** — The Chairman of the Council elected under By-Laws 13 shall be eligible for re-election from year to year. For one year after the end of his period of office he shall be a member of the Council ex-officio.
47. **TREASURER** — The Treasurer shall be elected at the regular meeting of the General Assembly. He shall hold office for 4 years and be eligible for re-election. During his term of office he shall be member of the Council ex-officio.
48. **VACANCIES** — In the event of the death or resignation of an officer during his term of office the Council shall make such appointment or other provision as it may deem expedient for the discharge of the duties of the office concerned until the next regular meeting of the General Assembly.
49. **OFFICIALS** — Officials of the Association appointed by the General Assembly under Article 12 of the Constitution shall be medically qualified. They shall hold office for such periods and receive such remuneration as the General Assembly may from time to time determine and may be dismissed by the General Assembly.

LIST OF OFFICERS AND DELEGATES OF THE 47TH ANNUAL MEETING
(Attendance gathered during the meeting)

OFFICERS of the House of Delegates
(The Council of the Philippine Medical Association)

PRESIDENT	1st Meeting	2nd Meeting	3rd Meeting
Dr. Antonio S. Fernando	PRESENT	PRESENT	PRESENT (As member)
PRESIDENT-ELECT			
Dr. Mariano C. Icasiano	PRESENT	PRESENT	PRESENT (As President)
VICE-PRESIDENT, Mindanao & Sulu			
Dr. Pedro Rodriguez	PRESENT	ABSENT	ABSENT (As member)

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
VICE-PRESIDENT, Visayas Dr. Guardalino Mosqueda	PRESENT	PRESENT	PRESENT (As member)
VICE-PRESIDENT, Luzon Dr. Fernando D. Manalo	ABSENT	PRESENT	PRESENT (As member)
SECRETARY-TREASURER Dr. Manuel D. Peñas	PRESENT	PRESENT	PRESENT
COUNCILORS: Dr. Tranquilino Elicaño	PRESENT	ABSENT	ABSENT (As member)
Dr. Daniel Ledesma	PRESENT	PRESENT	PRESENT
Dr. Rodolfo P. Gonzalez	PRESENT	PRESENT	PRESENT
Dr. Eugenio Alonso	ABSENT	ABSENT	PRESENT
Dr. Juan Salcedo, Jr.	PRESENT	PRESENT	PRESENT
EX-OFFICIO MEMBERS (Past Presidents of the PMA)			
Dr. Rufino Abriol	ABSENT	ABSENT	PRESENT
Dr. Miguel Cañizares	ABSENT	ABSENT	ABSENT
Dr. Victorino de Dios	PRESENT	PRESENT	PRESENT (As Councilor)
Dr. Liborio Gomez	ABSENT	ABSENT	PRESENT
Dr. Jose C. Locsin	ABSENT	ABSENT	ABSENT
Dr. Carmelo Reyes	ABSENT	ABSENT	ABSENT
Dr. Guillermo Rustia	ABSENT	ABSENT	PRESENT
Dr. Antonio G. Sison	ABSENT	ABSENT	PRESENT
Dr. Herminio Velarde, Sr.	PRESENT	ABSENT	PRESENT
CHAIRMAN of Standing Com- mittees			
Committee on Scientific Assembly Dr. Jose Villanueva	ABSENT	ABSENT	ABSENT
Committee on Private Medical Practice and Medical Economics			
Dr. Ramon R. Angeles	PRESENT	PRESENT	PRESENT
DELEGATES:			
ABRA MEDICAL SOCIETY			
Paterno Millare	PRESENT	ABSENT	ABSENT
Jose Purugganan	PRESENT	ABSENT	ABSENT
Genoveva B. Barras	ABSENT	PRESENT	PRESENT
AGUSAN MEDICAL SOCIETY			
Benjamin Zapanta	ABSENT	PRESENT	PRESENT
Daniel Labrador	ABSENT	ABSENT	ABSENT
Jose C. Resurreccion	ABSENT	ABSENT	ABSENT
ALBAY MEDICAL SOCIETY			
Bayani C. Fontanilla	PRESENT	PRESENT	PRESENT
Candido Garcia	PRESENT	ABSENT	ABSENT
ANTIQUÉ MEDICAL SOCIETY			
BAGUIO MEDICAL SOCIETY			
Dominador Narvaez	PRESENT	PRESENT	PRESENT
Justo Rosales	ABSENT	ABSENT	ABSENT
BATAAN MEDICAL SOCIETY			
BATANGAS MEDICAL SOCIETY			
Timoteo Alday	PRESENT	PRESENT	PRESENT
Jose P. Caedo, Sr.	ABSENT	PRESENT	PRESENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
Leonardo H. Ona	ABSENT	PRESENT	PRESENT
Salvador Ramos	ABSENT	ABSENT	ABSENT
Clemente K. Silva	ABSENT	ABSENT	ABSENT
BOHOL MEDICAL SOCIETY			
Jaime Mendoza	PRESENT	ABSENT	PRESENT
Jesus Ceballos	ABSENT	PRESENT	PRESENT
Cipriano Garcia	ABSENT	PRESENT	PRESENT
Pedro N. Mayuga	PRESENT	PRESENT	PRESENT (As Vice-President for Visayas)
BULACAN MEDICAL SOCIETY			
Martin Santiago	ABSENT	PRESENT	PRESENT
Juliana M. Flaviano	PRESENT	PRESENT	PRESENT
Constancia P. Baltazar	PRESENT	PRESENT	PRESENT
Salvador Santiago	ABSENT	PRESENT	PRESENT
Mario Valenzuela	ABSENT	PRESENT	PRESENT
Jose L. Santos	PRESENT	PRESENT	PRESENT
Peregrino Saucó	ABSENT	PRESENT	PRESENT
Felino Ch. Fernando	ABSENT	PRESENT	PRESENT
Clemente Hizón	ABSENT	PRESENT	PRESENT
CAGAYAN MEDICAL SOCIETY			
Gregorio M. Reyes	PRESENT	PRESENT	PRESENT
Pio Lauengco	PRESENT	ABSENT	PRESENT
Iderlina F. Manuel	PRESENT	PRESENT	PRESENT
Oscar Y. Romero	PRESENT	PRESENT	PRESENT
Briccio Pobre	PRESENT	PRESENT	PRESENT
Emilio L. Alvarado	ABSENT	PRESENT	PRESENT
Emilio Perez	ABSENT	ABSENT	ABSENT
CAMARINES NORTE			
Mariano N. Morales	ABSENT	PRESENT	ABSENT
Jose Atencio	ABSENT	ABSENT	ABSENT
Jose Liza	ABSENT	ABSENT	ABSENT
CAMARINES SUR MEDICAL SOCIETY			
Pedro P. Villafuerte	PRESENT	PRESENT	ABSENT
Damaceno Ago	ABSENT	PRESENT	PRESENT
Remedios F. Samson	ABSENT	PRESENT	PRESENT
CAPIZ MEDICAL SOCIETY			
Tomas J. Asturias	ABSENT	PRESENT	PRESENT
Jesus Ortiz	ABSENT	ABSENT	ABSENT
CATANDUANES MEDICAL SOCIETY			
CAVITE MEDICAL SOCIETY			
Jesus C. Tranquilino	PRESENT	ABSENT	ABSENT
Virginia Borromeo	ABSENT	PRESENT	PRESENT
CEBU MEDICAL SOCIETY			
Manuel Bernardo	PRESENT	PRESENT	PRESENT
Juan B. Ruiz, Jr.	ABSENT	PRESENT	PRESENT
Ignacio Cortez	ABSENT	PRESENT	PRESENT
Nicomedes Laborte	ABSENT	PRESENT	PRESENT
Lorenzo Dimataga	ABSENT	ABSENT	ABSENT
Artemio Anselmo	ABSENT	ABSENT	ABSENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
COTABATO MEDICAL SOCIETY			
Ramon H. Rabago	ABSENT	PRESENT	PRESENT
Leonardo C. de Guzman	ABSENT	ABSENT	PRESENT
Vicente Capistrano	ABSENT	ABSENT	PRESENT
Bernabe de la Fuente	ABSENT	ABSENT	ABSENT
CULION MEDICAL SOCIETY			
Tomas de Mayuga	PRESENT	ABSENT	ABSENT
Jose Nolasco	PRESENT	PRESENT	PRESENT
DAVAO MEDICAL SOCIETY			
Federico Lacsamana	PRESENT	ABSENT	PRESENT
Eugenio de Dios	ABSENT	PRESENT	PRESENT
ILOCOS NORTE MEDICAL SOCIETY			
Agustin R. Rubio	PRESENT	ABSENT	ABSENT
Roman de la Cuesta	PRESENT	PRESENT	ABSENT
Severo P. Senen	PRESENT	PRESENT	PRESENT
Jesus C. Valdez	ABSENT	PRESENT	PRESENT
Francisco Ranada	ABSENT	ABSENT	ABSENT
ILOCOS SUR MEDICAL SOCIETY			
Cresencio Azcueta	PRESENT	PRESENT	PRESENT
Jose Florendo	ABSENT	ABSENT	ABSENT
ILOILO MEDICAL SOCIETY			
Ma. Teresa Cadsawan y Martinez	PRESENT	PRESENT	PRESENT
Jose Cocjin	PRESENT	PRESENT	ABSENT
Jose V. Valero	ABSENT	PRESENT	PRESENT
Carlos Guadarrama	ABSENT	PRESENT	PRESENT
Lourdes S. Trono	ABSENT	PRESENT	PRESENT
Jose M. Facultad	ABSENT	PRESENT	PRESENT
Virgilio Mauricio	ABSENT	ABSENT	ABSENT
ISABELA MEDICAL SOCIETY			
Tercial Ramirez	ABSENT	PRESENT	PRESENT
LAGUNA MEDICAL SOCIETY			
Fernando Manas	PRESENT	ABSENT	ABSENT
Agripino R. Oca	PRESENT	PRESENT	PRESENT
Jose T. Kamatoy	PRESENT	ABSENT	PRESENT
Jose A. Villegas	PRESENT	PRESENT	ABSENT
Zosimo Fernandez	PRESENT	ABSENT	PRESENT
LANAO MEDICAL SOCIETY			
Alfredo Primero	ABSENT	PRESENT	ABSENT
Leonida Cueto-Buendia	PRESENT	PRESENT	PRESENT
Jose C. Cueto	ABSENT	PRESENT	PRESENT
Rodolfo B. Santos	ABSENT	PRESENT	PRESENT
LA UNION MEDICAL SOCIETY			
Rodolfo Pinzon	ABSENT	PRESENT	PRESENT
Fidel Lopez	PRESENT	ABSENT	ABSENT
Oscar P. Madamba	PRESENT	ABSENT	ABSENT
Asuncion Ocampo	ABSENT	PRESENT	PRESENT
LEYTE MEDICAL SOCIETY			
Vicente Trinidad	PRESENT	PRESENT	PRESENT
Carlos V. Matriano	ABSENT	PRESENT	ABSENT
Mariano Legaspi	ABSENT	PRESENT	PRESENT
Reginaldo Pascual	ABSENT	ABSENT	ABSENT
Arcadio Ortiz	ABSENT	ABSENT	ABSENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
MANILA MEDICAL SOCIETY			
Ricardo Alfonso	PRESENT	PRESENT	PRESENT
Mariano Alimurung	PRESENT	ABSENT	ABSENT
Domingo Antonio, Jr.	PRESENT	ABSENT	PRESENT
Ruben Apelo	PRESENT	PRESENT	PRESENT
Gloria Aragon	ABSENT	ABSENT	ABSENT
Romeo Y. Atienza	PRESENT	PRESENT	PRESENT
Jose Barcelona	PRESENT	ABSENT	ABSENT
Demetrio Belmonte	PRESENT	ABSENT	ABSENT
Heraldo del Castillo	PRESENT	ABSENT	PRESENT
Jose R. Celis	ABSENT	PRESENT	PRESENT
Paterno Chikiamco	PRESENT	PRESENT	ABSENT
Manuel Chua Chiaco	ABSENT	PRESENT	ABSENT
Florencio Z. Cruz	PRESENT	ABSENT	ABSENT
Jose R. Cruz	PRESENT	PRESENT	PRESENT
Conrado Dayrit	ABSENT	ABSENT	ABSENT
Benvenuto Diño	ABSENT	ABSENT	ABSENT
Saturnino Ador Dionisio	ABSENT	PRESENT	PRESENT
Fernando Duran	ABSENT	PRESENT	PRESENT
Antonio Ejercito	PRESENT	PRESENT	PRESENT
Jose A. Fernandez	ABSENT	PRESENT	PRESENT
Felisa Nicolas Fernando	PRESENT	PRESENT	PRESENT
Jose Fores	ABSENT	PRESENT	PRESENT
Gregorio Gabriel	ABSENT	PRESENT	PRESENT
Alejandro Gaerlan	PRESENT	ABSENT	PRESENT
Elpidio Gamboa	ABSENT	ABSENT	ABSENT
Enrique Garcia	ABSENT	PRESENT	PRESENT
Antonio Gisbert	ABSENT	ABSENT	ABSENT
Fortunato Guerrero	ABSENT	PRESENT	PRESENT
Renato Ma. Guerrero	PRESENT	PRESENT	PRESENT
Francisco C. Guzman	ABSENT	PRESENT	ABSENT
Florentino Herrera	ABSENT	ABSENT	ABSENT
Nelly Herrera	ABSENT	PRESENT	PRESENT
Conrado Icasiano	ABSENT	ABSENT	ABSENT
Carmelo Jacinto	ABSENT	PRESENT	PRESENT
Sixto Maceda, Jr.	PRESENT	PRESENT	PRESENT
Fe V. del Mundo	ABSENT	PRESENT	PRESENT
Jesus B. Nolasco	PRESENT	PRESENT	PRESENT
Antonio Nubla	ABSENT	ABSENT	ABSENT
Alfredo L. Ortiz	ABSENT	PRESENT	PRESENT
Nicanor Padilla	ABSENT	ABSENT	ABSENT
Regino G. Padua	PRESENT	PRESENT	PRESENT
Ramon Paterno	ABSENT	ABSENT	ABSENT
Trinidad P. Pesigan	PRESENT	PRESENT	PRESENT
Ramon Quesada	PRESENT	PRESENT	PRESENT
Pedro Ramirez	ABSENT	ABSENT	ABSENT
Augusto Ramos	ABSENT	PRESENT	PRESENT
Virgilio Ramos	ABSENT	ABSENT	ABSENT
Jose M. Reyes, Jr.	ABSENT	PRESENT	PRESENT
Jose R. Reyes	ABSENT	ABSENT	ABSENT
Victor A. Reyes	ABSENT	ABSENT	ABSENT
Francisco J. Roman	PRESENT	PRESENT	ABSENT
Hector de los Santos	ABSENT	ABSENT	ABSENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
Hermogenes A. Santos	ABSENT	ABSENT	ABSENT
Sofia Bona Santos	ABSENT	ABSENT	ABSENT
Juan Z. Sta. Cruz	ABSENT	PRESENT	PRESENT
Dalmacio M. Suaco	PRESENT	PRESENT	ABSENT
Luis F. Torres, Jr.	ABSENT	PRESENT	PRESENT
MARINDUQUE			
Teodoro Rejano, Jr.	ABSENT	PRESENT	PRESENT
MASBATE MEDICAL SOCIETY			
Vicente Gahol	ABSENT	PRESENT	PRESENT
Artemio M. Cabrera	ABSENT	PRESENT	PRESENT
MINDORO MEDICAL SOCIETY			
Francisco S. Infantado	PRESENT	ABSENT	ABSENT
Alberto C. Montellano	PRESENT	PRESENT	PRESENT
Jacinto Leviste	ABSENT	PRESENT	PRESENT
MISAMIS OCCIDENTAL MEDICAL SOCIETY			
Illuminado A. Almonte	PRESENT	PRESENT	PRESENT
Silvino Clarete	ABSENT	PRESENT	PRESENT
Francisco Luansing	ABSENT	PRESENT	PRESENT
MISAMIS ORIENTAL MEDICAL SOCIETY			
Gregorio B. Huerto	PRESENT	PRESENT	PRESENT (As Vice- President for Mindanao and Sulu)
NEGROS OCCIDENTAL			
Pablo O. Torre	PRESENT	ABSENT	PRESENT
Ramon D. Misa	PRESENT	ABSENT	PRESENT
Ricardo Jara	PRESENT	PRESENT	PRESENT
Ramon Hinojales	ABSENT	PRESENT	PRESENT
Marcial M. Galeon	ABSENT	PRESENT	PRESENT
Alfredo Hermano	ABSENT	PRESENT	PRESENT
NEGROS ORIENTAL MEDICAL SOCIETY			
Onesimo de Mira	ABSENT	PRESENT	PRESENT
NUEVA ECIJA MEDICAL SOCIETY			
Potenciano Garcia	PRESENT	ABSENT	PRESENT
Teresa Camena	PRESENT	ABSENT	ABSENT
Guillermo P. Ortiz	ABSENT	PRESENT	PRESENT
NUEVA VIZCAYA MEDICAL SOCIETY			
Gabino Balbin	PRESENT	ABSENT	ABSENT
Honorato Mendoza	PRESENT	PRESENT	PRESENT
Gaudencio Valiño	ABSENT	ABSENT	ABSENT
PAMPANGA MEDICAL SOCIETY			
Angel del Corro	PRESENT	PRESENT	PRESENT
Primitivo Pineda	ABSENT	PRESENT	PRESENT
Mariano D. Bayani	ABSENT	PRESENT	PRESENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
PANGASINAN MEDICAL SOCIETY			
Gerardo Sison	ABSENT	ABSENT	ABSENT
Juan L. Itchon	PRESENT	ABSENT	ABSENT
Eriberto Corpuz Ulep	PRESENT	PRESENT	ABSENT
Braulio M. de Venecia	ABSENT	ABSENT	PRESENT
Francisco Duque	PRESENT	PRESENT	PRESENT
Arturo Reyes	PRESENT	ABSENT	PRESENT
Pedro E. Sevidal	PRESENT	ABSENT	PRESENT
Angel Domagas	PRESENT	ABSENT	ABSENT
Melquiades Bravo	PRESENT	ABSENT	ABSENT
Ignacio de Guzman	PRESENT	ABSENT	ABSENT
Jose L. de Guzman	PRESENT	PRESENT	PRESENT
Jose Tandoc	ABSENT	ABSENT	ABSENT
Vivencio Villaflor	ABSENT	PRESENT	PRESENT
Rodolfo V. Guiang	ABSENT	PRESENT	PRESENT
Vicente Samson	ABSENT	ABSENT	ABSENT
Jose Villamil	ABSENT	ABSENT	ABSENT
Luis R. Acosta	ABSENT	ABSENT	ABSENT
Jeremias Vinluan	ABSENT	PRESENT	PRESENT
Guillermo Tuazon	ABSENT	ABSENT	PRESENT
Benigno Parayno	ABSENT	PRESENT	PRESENT
QUEZON CITY MEDICAL SOCIETY			
Pedro Nery	PRESENT	PRESENT	PRESENT
Demetrio Lacuna	PRESENT	ABSENT	PRESENT
Pedro Ramirez	PRESENT	PRESENT	PRESENT
Homero Angelo	PRESENT	PRESENT	PRESENT
QUEZON MEDICAL SOCIETY			
Teodoro Nadres	ABSENT	PRESENT	PRESENT
RIZAL MEDICAL SOCIETY			
Romualdo del Rosario	PRESENT	PRESENT	PRESENT
Antonio C. de Santos	PRESENT	ABSENT	PRESENT
Salvador Sampedro	PRESENT	PRESENT	PRESENT
Florencio Firme, Sr.	PRESENT	PRESENT	PRESENT
Fausto J. Galauran	ABSENT	PRESENT	PRESENT
Ricardo Sanchez	PRESENT	ABSENT	ABSENT
Isaac Eustaquio	PRESENT	PRESENT	PRESENT
Bernabe Villapando	PRESENT	ABSENT	ABSENT
Antonio G. de Santos	ABSENT	ABSENT	ABSENT
Ricardo Sanchez	ABSENT	ABSENT	ABSENT
Benjamin Antonio	ABSENT	ABSENT	ABSENT
ROMBLON MEDICAL SOCIETY			
SAMAR MEDICAL SOCIETY			
Jose D. Meñez	PRESENT	PRESENT	PRESENT
SAN PABLO CITY MEDICAL SOCIETY			
Manuel Quisumbing, Sr.	ABSENT	PRESENT	PRESENT
Archimedes Brion	ABSENT	PRESENT	PRESENT
Recaredo Aguilar	PRESENT	PRESENT	PRESENT
Cesar Reyes	ABSENT	ABSENT	ABSENT
SORSOGON MEDICAL SOCIETY			
Patricio Rigonan	PRESENT	ABSENT	PRESENT
Juan Amanse	ABSENT	PRESENT	PRESENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
SULU MEDICAL SOCIETY			
Rufino Gutierrez	ABSENT	PRESENT	PRESENT
Jose Salazar	ABSENT	PRESENT	PRESENT
SURIGAO MEDICAL SOCIETY			
Lupo D. Carlota	PRESENT	PRESENT	PRESENT
Francisco N. Briones	ABSENT	ABSENT	ABSENT
TARLAC MEDICAL SOCIETY			
Trinidad Esguerra	PRESENT	PRESENT	ABSENT
Juan Talon	ABSENT	ABSENT	ABSENT
Constante Quirino	ABSENT	ABSENT	ABSENT
Fausto Pineda	ABSENT	PRESENT	PRESENT
ZAMBALES MEDICAL SOCIETY			
Aquilino Edaño	ABSENT	PRESENT	PRESENT
Avelino Villamor	ABSENT	PRESENT	ABSENT
Caridad del Fierro-Ortega	PRESENT	ABSENT	ABSENT
Casto Magsaysay	ABSENT	ABSENT	ABSENT
Pedro Guerrero	ABSENT	ABSENT	ABSENT
ZAMBOANGA CITY MEDICAL SOCIETY			
Ricardo Climaco	ABSENT	ABSENT	ABSENT
Eligio Yabyabin	ABSENT	PRESENT	PRESENT
ZAMBOANGA DEL NORTE MEDICAL SOCIETY			
Virgilio Molina	PRESENT	PRESENT	PRESENT
Apolonio Baytion	ABSENT	PRESENT	PRESENT
Casiano Frias	ABSENT	ABSENT	ABSENT
AFFILIATED SCIENTIFIC SOCIETIES:			
PHIL. OPHTHALMOLOGICAL & OTOLARYNGOLOGICAL SOCIETY			
Dr. Carlos P. Yambao	ABSENT	PRESENT	PRESENT
PHIL. OBSTETRICAL & GYNECOLOGICAL SOCIETY			
Dr. Alfonso Ayesa	ABSENT	PRESENT	PRESENT
PHIL. SOCIETY OF PSYCHIATRY AND NEUROLOGY			
Dr. Romeo Gustilo	ABSENT	PRESENT	ABSENT
PHIL. RADIOLOGICAL SOCIETY			
Dr. Daniel Ledesma	PRESENT	PRESENT	PRESENT
AERO MEDICAL SOCIETY			
Dr. Pelagio G. Potenciano	PRESENT	PRESENT	ABSENT
PHIL. SOCIETY OF VENEREOLOGISTS			
Dr. Leonilo Flores	ABSENT	PRESENT	PRESENT
PHIL. SOCIETY OF PATHOLOGISTS			
Dr. Walfrido de Leon	ABSENT	PRESENT	PRESENT
PHILIPPINE HEART ASSOCIATION			
Dr. Antonio M. Samia	PRESENT	PRESENT	PRESENT

	<i>1st Meeting</i>	<i>2nd Meeting</i>	<i>3rd Meeting</i>
PHILIPPINE LEPROSY SOCIETY			
Dr. Casimiro B. Lara	ABSENT	ABSENT	ABSENT
PHIL. SOCIETY OF ANESTHESIOLOGISTS			
Dr. Quintin Gomez	ABSENT	PRESENT	PRESENT
PHIL. ORTHOPAEDIC ASSOCIATION			
Dr. Augusto S. Besa	ABSENT	ABSENT	ABSENT
PHIL. FED. OF PRIVATE MEDICAL PRACTITIONERS			
Dr. Ramon R. Angeles	PRESENT	PRESENT	PRESENT
Dr. Pablo Anzures	PRESENT	PRESENT	PRESENT
Dr. Ramon Atienza	PRESENT	PRESENT	PRESENT
Dr. Geminiano de Ocampo	ABSENT	PRESENT	PRESENT
Dr. Vicente R. de Ocampo	PRESENT	ABSENT	PRESENT



LIST OF MEMBERS WHO HAVE REGISTERED AT THE 47TH ANNUAL MEETING OF THE PHILIPPINE MEDICAL ASSOCIATION HELD IN MANILA, APRIL 26-30, 1954

- | | |
|-----------------------------|-----------------------------------|
| 1. Abacan, Jacinto | 31. Aralas, Pedro |
| 2. Abad, Moises | 32. Arcigal, Felipe M. |
| 3. Abella, Carlos A. | 33. Arenas, Gregoria |
| 4. Abes, Francisco | 34. Arzadon, Justiniano |
| 5. Abragan, Ramon R. | 35. Aseron, Felipe |
| 6. Adeva, Dolores | 36. Asuncion, Cesar L. |
| 7. Afable, Miguel | 37. Atendido, Segundo, F. |
| 8. Afable, Pilar | 38. Balangue, Lorenzo D. |
| 9. Agatep-Reyes, Dedicacion | 39. Balaoing, Eduardo F. |
| 10. Agbulos, Lourdes D. | 40. Balaoing, Soledad |
| 11. Agcaoli, Antonio | 41. Bansil, Andres M. |
| 12. Aguilar, Ricardo | 42. Bañez, Guillermo |
| 13. Alano, Amado | 43. Baquiran, Corazon |
| 14. Alaras, Emilia | 44. Baquiran, Tomas S. |
| 15. Alava, Teodoro | 45. Barbosa, Victor |
| 16. Albano, Antonio | 46. Barcelon-Guevara, Aniceta |
| 17. Albano, Cesareo F. | 47. Barrios, Jesusa |
| 18. Albano, Paulino E. | 48. Barrios, Pablo M. |
| 19. Albano, Pilar Valdes | 49. Basa, Generoso |
| 20. Alcantara, Eladio | 50. Basa, Gregorio |
| 21. Alda, Crisostomo | 51. Battad, Demosthenes |
| 22. Almario, Ricardo | 52. Bautista, Conсорcia G. |
| 23. Almeda, Emmanuel | 53. Bautista, Elisea |
| 24. Altarejos, Francisco C. | 54. Bautista, Perfecta |
| 25. Andaya, Luisa | 55. Baviera, Adolfo |
| 26. Andres, Gregorio | 56. Bernardino, Anselmo D. |
| 27. Anolin, Hermelinda | 57. Bernardino, Jaime |
| 28. Apostol, Cenon | 58. Bognot-Galang, Marciana |
| 29. Aquino, Donato I. | 59. Bordador, Fortunata de Guzman |
| 30. Aquino, Mariano | 60. Borja, Crisanto de |

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|------------------------------|----------------------------------|
| 61. Brillantes, Primo | 118. Degala, Jesus A. |
| 62. Brillantes, Maxima C. | 119. Delgado, Rafael E. |
| 63. Brion, Ernesto | 120. Denoga, Jose |
| 64. Bulanlang, Emmanuel | 121. Diapo, Bernardo |
| 65. Busuego, Salvador | 122. Diaz Leus, Corazon |
| 66. Butalid, Victor B. | 123. Dilag, Norberto L. |
| 67. Cabebe, Castor C. | 124. Dimalanta, Emiliano |
| 68. Cabatu, Moises | 125. Dimanlig, Jose A. |
| 69. Caces, Ma. Luz | 126. Dimanlig, Leonor |
| 70. Calangi, Felixberto | 127. Dimataga, Lorenzo |
| 71. Calma, Clemente R. | 128. Dioso, Daniel V. |
| 72. Caluen, Godofredo | 129. Dizon-Gonzalez, Luz |
| 73. Camacho San Agustin, B. | 130. Dominguez, Victorio |
| 74. Campomanes, Guillermo | 131. Duran, Fernando |
| 75. Camomot, Constantino | 132. Duque, Juanito |
| 76. Camus, Manrique | 133. Edades, Zacarias |
| 77. Canlas, Bienvenido R. | 134. Encarnacion, Antonio L. |
| 78. Cañicosa, Librado | 135. Engracia, Gregorio |
| 79. Cañiza, Antonio P. | 136. Enrile, Rafael |
| 80. Carreon, Marciano | 137. Esguerra, Emiliano |
| 81. Casals, Leon V. | 138. Esguerra, Pablo |
| 82. Casanova, Francisco | 139. Estacio, Francisco |
| 83. Castañeda, Jaime | 140. Estacio, Juanita Santos |
| 84. Castelo, Perfecto | 141. Estanislao, Angel |
| 85. Castillo, Antonio del | 142. Esteban David |
| 86. Castillo, Jones | 143. Estella, Faustino |
| 87. Castillo, Pedro | 144. Estrada, Juan |
| 88. Castro, Esperanza de | 145. Eusebio, Jesus |
| 89. Catubay, Benjamin S. | 146. Favis, Rodolfo L. |
| 90. Cava, Antonio | 147. Felices, Bello, Eduarda |
| 91. Centeno, Teodoro B. | 148. Feliciano, Angel |
| 92. Cereno, Juan | 149. Felipe-Angelo, Priscilla M. |
| 93. Chan, Jose O. | 150. Fernandez, Crispulo |
| 94. Cillan, Moises | 151. Fernandez, Elisa |
| 95. Cipriaso, Cipriano J. | 152. Fernandez, Juan |
| 96. Calingo, Primo | 153. Fernandez, Luciano |
| 97. Clarin, Jose M. | 154. Fernandez-Tengsico, Rosario |
| 98. Clavecilla, Sigberto | 155. Fernando, Hipolito |
| 99. Clutario, Lillian | 156. Fernando, Juan |
| 100. Concepcion, Felix Ira | 157. Ferrer, Nathaniel |
| 101. Conde, Montano P. | 158. Ferrer, Ramon V. |
| 102. Cornejo, Jr., Miguel | 159. Ferrer-Franco, Isabel |
| 103. Coronel, Tirso | 160. Figueroa, Ramon |
| 104. Cortez, Jr., Ramon | 161. Firme, Jr., Florencio |
| 105. Costa, Francisco R. | 162. Florentino, Jose |
| 106. Cruz, Cesar | 163. Flores, Rodolfo |
| 107. Cruz, Cirilo | 164. Flores, Sergio |
| 108. Cruz, Felisa | 165. Francia, Arturo |
| 109. Cruz, Gorgonio | 166. Frauendorff, Ramon |
| 110. Cruz, Jose N. | 167. Fronda, Rodrigo |
| 111. Cruz, Serafin | 168. Fuente, Victorino de la |
| 112. Cuerpo Cruz, Macario | 169. Fulgencio, Cristeta V. |
| 113. Cueva, Manuel D. | 170. Galang, Pedro G. |
| 114. Cunanan, Rafael | 171. Galvez, Jr., Francisco |
| 115. Dario, Herminio | 172. Galvez, Jr., Jose |
| 116. Delfin, Vicente | 173. Galvez, Valentin |
| 117. Delfin-Mariano, Leonida | 174. Gamboa, Elpidio |

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|------|--------------------------|------|--------------------------------|
| 175. | Garcia, Augusto T. | 232. | Jaranillo, Jovita |
| 176. | Garcia, Carlos | 233. | Jardiolin, Juan |
| 177. | Garcia, Delfin | 234. | Javier, Melchor |
| 178. | Garcia, Faustino | 235. | Jesus, Ismael de |
| 179. | Garcia, Jr., Rafael A. | 236. | Jesus, Juan T. de |
| 180. | Garcia, Rafael E. | 237. | Joson, Toribio |
| 181. | Garcia, Santiago Ga. | 238. | Jovellanos, Antonio |
| 182. | Garduño, Dominador | 239. | Juico, Ricardo |
| 183. | Gatchalian, Emmanuel | 240. | Justo, Manuel |
| 184. | Gatmaitan, Alejandro | 241. | Kamatoy, Roman |
| 185. | Gatmaitan, Clemente S. | 242. | Katigbak, Pedro L. |
| 186. | Genato, Vicente | 243. | Katigbak, Raymundo |
| 187. | German, Oscar | 244. | Lacdao, Santiago D. |
| 188. | Geronimo, Soledad | 245. | Lacson-Yusay, Trinidad |
| 189. | Gestuvo, Arsenio | 246. | Lapitan, Romulo |
| 190. | Gochingco, Paulino | 247. | Lara, Francisco S. de |
| 191. | Goduco-Aguilar, Cesaria | 248. | Lara, Irineo |
| 192. | Gongon, Benedicto | 249. | Laserna, Raymundo |
| 193. | Gonzaga, Julio | 250. | Laureano, Gregorio |
| 194. | Gonzales, Antonio R. | 251. | Laureola-Lopez, Purita |
| 195. | Gonzales, Basilia | 252. | Lavadia, Jr., Pedro |
| 196. | Gonzales, Cirilo | 253. | Lee, Pedro |
| 197. | Gonzales, Francisco | 254. | Legarda, Alejandro |
| 198. | Gorospe, Alfredo | 255. | Legaspi, Alfredo |
| 199. | Guanco, Maximiano R. | 256. | Legaspi, Brigido |
| 200. | Guardiano, Concepcion E. | 257. | Lejano, Panfilo |
| 201. | Guerra, Benjamin | 258. | Leon, Esteban de |
| 202. | Guerrero, Felisa A. | 259. | Leon, Juan de |
| 203. | Guevara, Romulo | 260. | Lerma, Luis |
| 204. | Guevarra, Rosa | 261. | Libongco, Carlos |
| 205. | Guia, Jose Y. de | 262. | Liborio, Angel |
| 206. | Guia, Porfirio D. de | 263. | Lim, Gregorio |
| 207. | Gustilo, Felix | 264. | Lim, Lino Ed. |
| 208. | Gustilo, Nestor Ma. | 265. | Lim, Nicolas G. |
| 209. | Gutierrez, Alvaro | 266. | Lim, Rizalina Z. Trinidad |
| 210. | Gutierrez, Aureo | 267. | Limjoco, Constantino |
| 211. | Guzman, Concepcion N. de | 268. | Lino, Nicanor E. |
| 212. | Halili, Tomasa | 269. | Llamas, Rosendo |
| 213. | Harn, Charles | 270. | Lobrin, Lauro M. |
| 214. | Hebron, Desiderio | 271. | Locsin, Jose |
| 215. | Hernandez, Lourdes D. | 272. | Lopez, Leon R. |
| 216. | Hernando, Hilario | 273. | Lopez, Jr., Saturnino |
| 217. | Hidalgo, Esteban | 274. | Lopez, Severino |
| 218. | Hidalgo, Hermenegilda R. | 275. | Lopez, Virgilio |
| 219. | Hipolito, Florentino | 276. | Lorenzo, Conrado |
| 220. | Hiquiana, Adoracion M. | 277. | Lucindo, Antonieta M. |
| 221. | Hiquiana, Jesus | 278. | Mabanta, Fausto |
| 222. | Horilleno, Fe | 279. | Mabutas, Juan |
| 223. | Huerto, Gregorio | 280. | Macasaet, Ramon |
| 224. | Ibañez, Salvador | 281. | Macatangay, Galicano |
| 225. | Icasiano, Conrado | 282. | Macatangay, Jose |
| 226. | Ignacio, Vicente | 283. | Magat, Francisca |
| 227. | Infantado, Angelica | 284. | Magboo, Manuel |
| 228. | Jacinto, Dominador | 285. | Manalang, Juan |
| 229. | Jalandoni, Cesar | 286. | Manansala, Rafael |
| 230. | Jao, Segundino G. | 287. | Mandap, Cresenciano |
| 231. | Japson, Vicente | 288. | Mangibin-Tolentino, Visitacion |

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|------|-------------------------|------|--------------------------|
| 289. | Marella, Mariano | 346. | Pintakasi, Guadalupe M. |
| 290. | Marquez, Pablo | 347. | Prospero, Jr., Dulcisimo |
| 291. | Mariano, Cesar M. | 348. | Punsalan, Bonifacio |
| 292. | Martinez, Lilia M. | 349. | Quesada, Ernesto |
| 293. | Mata, Socorro | 350. | Quintos, Florencio N. |
| 294. | Mayuga, Pedro | 351. | Quintos, Jose |
| 295. | Medina Cue, Ernesto | 352. | Ramos, Leopoldo H. |
| 296. | Mejia, Mariano | 353. | Ramos, Manuel Merced |
| 297. | Mendiola, Jose | 354. | Ramoso, Jose B. |
| 298. | Mendoza, Emilio | 355. | Ranoy, Orisonia |
| 299. | Mendoza, Justiniano | 356. | Realica, Buenaventura |
| 300. | Mendoza, Perfecto | 357. | Recio, Porfirio |
| 301. | Mendoza, Renato | 358. | Relova, Rogelio |
| 302. | Mercado, Amparo | 359. | Reyes, Amalia L. |
| 303. | Mercado, Jesus | 360. | Reyes, Aurora |
| 304. | Mercado, Jr., Jose | 361. | Reyes, Avelino |
| 305. | Mirasol, Estrella | 362. | Reyes, Bonifacio |
| 306. | Misoles, Vicente | 363. | Reyes, Godofredo |
| 307. | Modales, Domingo | 364. | Reyes, Juan L. |
| 308. | Monsod, Petronio | 365. | Reyes, Lorenzo C. |
| 309. | Montalbo, Soledad | 366. | Reyes, Luciana |
| 310. | Montano, Andres | 367. | Reyes, Mario M. |
| 311. | Montano, Consolacion | 368. | Reyes, Ponciano S. |
| 312. | Morales, Arsenio | 369. | Reyes, Priscilla |
| 313. | Morales, Mauricio | 370. | Reyes, Procopio |
| 314. | Nacu, Pilar | 371. | Reyes, Reynaldo |
| 315. | Najera, Manuel Pl. | 372. | Reyes, Rodolfo |
| 316. | Nazareno, Natividad | 373. | Reyes Jara, Alicia |
| 317. | Nazario, Tomas | 374. | Rivera, Angel |
| 318. | Obando, Vicente | 375. | Rivera, Antonio Lopez |
| 319. | Oca, Mario S. | 376. | Rivera, Cenon |
| 320. | Ochoa, Enrique | 377. | Rivera, Jaime |
| 321. | Olaco, Julio | 378. | Rivera-Ramirez, Rosita |
| 322. | Olivares, Florentino | 379. | Rivera, Francisco M. |
| 323. | Olympia, Avelina B. | 380. | Roa, Nilo |
| 324. | Ona, Sebastian O. | 381. | Rodriguez, Antonio M. |
| 325. | Ong, Vicente L. | 382. | Rodriguez, Jose |
| 326. | Ordoña-Guevarra, Amparo | 383. | Roldan, Erlinda |
| 327. | Ordoñez, Delfin | 384. | Romero, Petra |
| 328. | Orosa, Sixto Y. | 385. | Roque, Jr., Rufino |
| 329. | Ortañez, Jovencio | 386. | Rosal, Jose |
| 330. | Pablo, Mario | 387. | Rosario, Celestino del |
| 331. | Padua, Rodolfo | 388. | Rosario, Tirso del |
| 332. | Pagua, Leonides | 389. | Roxas, Benjamin |
| 333. | Palinao, Severo | 390. | Roy, Catalina L. |
| 334. | Paman-Gonzalez, Lourdes | 391. | Ruiz, Juan Ortiz |
| 335. | Pangilinan, Florencio | 392. | Rumbawa, Faustino |
| 336. | Pascua, Filoteo | 393. | Ruñez, Artemio F. |
| 337. | Pasetes, Emmanuel | 394. | Salcedo, Arturo |
| 338. | Paulino, Peregrino H. | 395. | Salgado-Ora, Carmen |
| 339. | Paz-Garcia, Alejandra | 396. | Salvador, Guillermo |
| 340. | Paz, Gonzalo C. de la | 397. | Salvo, Atilano |
| 341. | Paz, Perfecto C. de la | 398. | Samia, Rogelio M. |
| 342. | Peña, Isaac R. | 399. | San Miguel, Paz T. |
| 343. | Perez, Alfredo | 400. | San Agustina, Macaraeg |
| 344. | Pilar, Jose del | 401. | San Juan, Sergio |
| 345. | Pineda, Casto | 402. | Santiago, Ciriaco |

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|----------------------------------|-------------------------------------|
| 403. Santiago, Cristobal | 445. Tiongson, Agapito |
| 404. Santiago, Gavino | 446. Tiongson, Gregorio |
| 405. Santiago Ibausosa, Herminia | 447. Tizon, Benjamin C. |
| 406. Santiago, Nestor M. | 448. Tolentino, Juliana |
| 407. Santillan, Jose S. | 449. Tomaneng, Roman |
| 408. Santos, Apolinar A. | 450. Tongco, Jose |
| 409. Santos, Aurelio R. | 451. Torrechante, Vicente |
| 410. Santos, Cirilo | 452. Torres, Petronilo |
| 411. Santos, Florentino | 453. Trinidad, Romulo S. |
| 412. Santos, Jose Antonio G. | 454. Trono, Pedro |
| 413. Santos-Roque, Elena | 455. Tupas, Alberto |
| 414. Saqui, Peregrino | 456. Udasco, Lazaro |
| 415. Sembrano, Caridad | 457. Umadhay, Manuel |
| 416. Sena, Carmen T. | 458. Urgena, Lydia |
| 417. Serapio, Mariano | 459. Valencia, Paul |
| 418. Serapio, Vicente B. | 460. Valenzuela, Francisco |
| 419. Siasoco, Severo | 461. Valera, Julio P. |
| 420. Simpliciano, Genoveva C. | 462. Valmonte, Eliseo |
| 421. Singh, Rajah | 463. Velarde, Jr., Herminio |
| 422. Singian, Evelyn B. | 464. Veloso, Virgilio |
| 423. Sison, Buenaventura | 465. Velasquez, Isidro |
| 424. Sison, Manuel | 466. Ventanilla, Elias |
| 425. Smith, Floyd O. | 467. Ventura, Francisco |
| 426. Solomon, Jaime | 468. Ventura, Sabas P. |
| 427. Soriano, Augusto M. | 469. Venturanza, Gregorio |
| 428. Soriano, Corazon | 470. Vergara, Clemente |
| 429. Soriano, Filomeno | 471. Vicente, Carlos |
| 430. Soriano, Jose | 472. Villacorta-Agoncillo, Anacleto |
| 431. Sta. Ana, Jr., Cesareo | 473. Villafuerte, Cesar |
| 432. Sta. Ana, Sr., Cesareo | 474. Villafuerte, Orlino |
| 433. Sta. Ana, Desiderio | 475. Villanueva, Guillermo |
| 434. Suanico, Hernando | 476. Villarica, Ismael |
| 435. Sunga, Eriberto G. | 477. Villarin, Alfredo |
| 436. Surla, Magno | 478. Villaroman, Felipe R. |
| 437. Sytamco, Jose Reyes | 479. Villegas, Pedro |
| 438. Tamayo, Luis R. | 480. Villena, Pedro |
| 439. Tamesis, Jesus | 481. Vitug, Wenceslao |
| 440. Tan, Francisco | 482. Yago, Restituto |
| 441. Tan, Gregorio B. | 483. Yusi, Honesto |
| 442. Tan Jesus | 484. Zalamea, Alberto |
| 443. Tengsico, Conrado | 485. Zaragoza, Eduardo |
| 444. Tinio, Joaquin | |



REGISTERED GUESTS

1. Dr. Pyong Tai, Lee—Korea
2. Dr. Prof. Wu, Ching—Free China
3. Dr. Li Hsu-chu—Free China
4. Dr. Ku Ming-Wei—Free China
5. Dr. R. Soeharto—Indonesia
6. Dr. Smai Chandavimol—Thailand
7. Dr. M. G. Zarraga—OTSG, AFP