



ECTOPIC MURMURS

Volume 27

Number 4

October 2014

Opinions and articles published herein are those of the authors and do not necessarily reflect that of the FEUDNSM Alumni Foundation

FEUMAANI 2014 top alumni award shared

NIDA BLANKAS
HERNAEZ MD⁸⁴ and JOSE B



NIDA BLANKAS
HERNAEZ MD JOSE B
DELFIN MD

DELFIN MD⁶⁸ were recently honored as the outstanding alumni by the FEUMAANI during its 22nd biennial anniversary induction dinner dance, held at the Hyatt Regency Hotel O'Hare in Rosemont IL.

Dr Hernaez is a pediatrician, brain, beauty, and recently led FEUMAANI and the Philippine Medical Association in Chicago; while Dr Delfin is a general surgeon and also past FEUMAANI president, and wrote the FEUMAANI constitution.

Our congratulations!

PRESIDENT'S MESSAGE

The FEUDNRSM Alumni Foundation 36th annual reunion and scientific convention will be held on Wednesday – Saturday, July 8 - 11, 2015 at the Caesars Palace, Las Vegas NV.



MANUEL M
MALICAY MD

The room rate is, as follows: \$109 for Wednesday and Thursday, July 8 and 9, 2015, and \$169 for Friday and Saturday, July 10 and 11, 2015.

This rate is for single and double occupancy.

The FEUDNRSMAF group's cut-off date is Sunday June 7, 2015.

All guestrooms not reserved at the cut-off date will revert back to Hotel for re-sale.

continue to page 22

CHAIRMAN'S MESSAGE

Over the past few months, the Board Trustees have diligently begun planning for the upcoming term. Our committee members are already hard at work in preparing for the events over the next two years. I am pleased to introduce you to your 2014-2016 Committees and Committee members:



OSCAR C
TUAZON MD

Constitution and Bylaws - Edgar Borda MD, Noli Guiniguindo MD, and Cesar Candari MD;

Financial and Investment - Renato Ramos MD and Grace Rabadam MD;

Professorial Awards and Faculty Development - Edgar Altares MD;

Jubilarian Awards - Avila Arcala MD, Daisy Ramos MD, Luzviminda Santangelo MD,

continue to page 22



FEUDNRSMAF president Manuel Malicay MD⁷², extreme left, inducted the 2014-2016 FEUMAANI officers.

continue to page 23

OBITUARY



COL LESTER LEGASPI MD⁶⁴
Retired USAF

He was a good and true friend.

In between his internship and pathology residency at Northwestern University Medical School Hospitals in Chicago, he was drafted and served in Vietnam.

He was diplomate in anatomic and clinical pathology (1974) and cytopathology (1986) and, almost unheard of, recertification in 1989.

First time he attended the FEU reunion, his Golden Jubilee, last January in West Fairview, he suffered stroke/ heart attack from which he never recovered. He went home to our Lord on October 17, 2014, after an extended stay at a rehabilitation center.

He will be truly missed.

A mass and memorial celebration will be held at the Holy Faith Catholic Church in Gainesville FL on Saturday, November 1, 2014, at 12 noon.

A perpetual **LESTER M LEGASPI MD Student Achievement Award in Pathology**, is being organized, the first award to be handed on Thursday, January 22, 2015, Student Recognition ceremonies, during the 40th *Balik-FEU* homecoming in West Fairview, Quezon City.

Your tax-deductible share will be very much appreciated.

Please make your check, in any amount, payable to **FEUDNRSMAF**, and postally mail your contribution to:
CESAR V REYES MD
6530 Dunham Road
Downers Grove, IL 60516. - cvr

EBOLA TRANSMISSION from leaky defective hospital gloves?

The Spanish nursing aide is said to have touched her face with dirty glove and contracted Ebola. Likewise, despite wearing protective gear, two nurses at the Texas Health Presbyterian Hospital in Dallas who helped treat the first US Ebola patient has tested positive for the virus.

It marked the first and second time in a short span, patient(s) in Spain and the United States, respectively, have contracted the Ebola virus, which continues its rampage through West Africa.

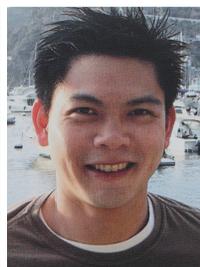
Unfortunately, the CDC (US Centers for Disease Control and Prevention) keeps asserting that the infection of the two Texas nurses as a **breach in protocol**, which has resulted in this infection.

How about a more simple reason: defective or leaky hospital gloves?

The following is a masterful paper by a fellow alumnus,



**BIENVENIDO G
YANGCO MD**



**NATHANIEL AF
YANGCO MD**

BIENVENIDO YANGCO MD⁷¹ and his late virtuoso-pianist-ophthalmologist son, Nathaniel Amadeus F Yangco MD, way back in 1989.

The abstract of their paper

continue to page 21

CHOCOLATE LOVERS FIGHT EBOLA SPREAD

NOEMI B FOGATA MD⁶⁹

Growing up as a chubby teenager, my elders had made me believe that chocolate is not good for one's health and well – being.



**NOEMI B
FOGATA MD**

Recent studies though have revealed that dark chocolate with high cocoa content contains flavonoids which act as antioxidants. It is beneficial to the skin and can potentially reduce blood pressure since nitric oxide is generated.

Stress levels are reduced since serotonin and endorphins are released. It can trigger reactions which can have a relaxing effect on the body.

Studies have also shown that the compounds restore the flexibility of the arteries, prevent white blood cells from sticking to the endothelial lining of blood vessels. Arterial stiffness and white blood cell adhesion leads to atherosclerosis.

The uplifting effect on the psyche reduces stress and leads to overall well being of the brain as an organ.

Of course consumption should be in moderation. An inch dark chocolate nugget have been my daily routine to get rid of the after dinner taste.

So what is the relation between Ebola spread in West Africa and chocolate production and increasing prices?

continue to page 20

FROM THE HOME FRONT

LINDA D TAMESIS MD⁸⁵

Dean, FEU-NRMF IM

I present to you my

analysis of the August 2014 Physician Licensure Examination. A FEUDNRSMAF scholar, Ann Norizal Lopez MD, brought great honor to the school by placing 8th

with a score of 88.5%.

There are currently 38 medical schools in the Philippines but only 13 were recognized by PRC (Philippine Regulation Commission) for having at least 50 examinees and a passing rate over 80%.

FEU-NRMF ranked 12.

I did the following analysis to help all understand the challenge before us, the challenge of gaining back our status of being one of the top five medical schools.

First, I ranked the board subjects by average score attained and number of scores less than 75 (Table 1). Microbiology and Legal Medicine were the easiest subjects while Surgery was the most difficult. This pattern is seen by most medical schools and is therefore more an indication of the examination difficulty than reflection of the school's preparation.

Next I profiled the 19 graduates who were not able to pass the PLE. I retrieved their academic records and counted the number of subjects,

continue to page 19

FAITH CORNER

REV MELVIN ANTONIO MD⁶⁵

A student in my confirmation class recently

asked whether it was OK to question God. The question is quite valid especially for a devout Christian because we are taught that it is simply unfaithful to express



REV MELVIN ANTONIO MD

disappointment with God, as if there is no more certain mark of a lack of faith than to do so. To question God is unheard of. To express disappointment with God is unthinkable. To be angry at God is unforgivable.

The opening verses of Psalm 13 go like this: *How long, O Lord? Will you forget me forever? How long will you hide your face from me? How long must I bear pain in my soul, and have sorrow in my heart all day long? How long shall my enemy be exalted over me?* **Psalm 13:1-2** The psalmist is none other than King David who expresses his anguish by questioning God. **Psalm 74** is a prayer for help from a community after a national defeat at the hands of their enemy: *O God, why do you cast us off forever? Why does your anger smoke against the sheep of your pasture?* And then there's Moses, that great prophet of the Old Testament openly questioning and expressing his disappointment at the Lord as he leads the Israelites through the wilderness not just once but many times. Abraham, God's

continue to page 15

REFLECTIONS ON PHILIPPINE MATTERS

NAPOLEON ABANDO MD⁶⁸

Graft and Corruption.

News of governmental anomalies are reported daily in almost all newspapers or broadcasts in television, like a phantasmagoria. There are a few heartwarming reports or projects unencumbered by corruption. But in general it is disheartening.

What is going on in our country?

Even the hallowed ground of Philippine Congress and Senate, a few alleged corrupt politicians transact business for the government. Gone are the statesmen, the intellectuals the political luminaries, the likes of Salonga, Sumulong, Tanada, Recto and etc. Pre-colonial writers opined that foreign traders, Chinese, Japanese and Arabs regarded the people of our islands as honorable and honest partners.

Why then are we in moral decadence?

Let us examine our history, behavior and geography for possible explanations or background but definitely not excuses for our propensity for graft and corruption.

Do we have a right to write about it in the **ECTOPIC MURMURS**?

Yes, of course, if one cares about our country and the welfare of our compatriots.

continue to page 18



NAPOLEON ABANDO MD

MY FRIEND MY ACCENT AND ME

FERNANDO LAGRIMAS MD⁷²

As you all know by now, Dr Manuel A Malicay is the new president of the FEUDNRSM Alumni Foundation. To those who have not known him, the logical question is: who is Dr



FERNANDO C
LAGRIMAS MD

Malicay? As his close friend for decades, 43 years to be exact, I am one among the reliable sources who can articulate a candid perspective who Dr Malicay is as a friend.

My acquaintance with Manny, as he is fondly known to us, started when Manny and I were elected president and vice president, respectively, of the St Luke's Hospital interns Class⁷² organization. During this period we had the opportunity to know more about each other.

Eventually, friendship between us blossomed out of mutual respect and admiration. I was impressed by his uncanny talent in problem solving, his remarkable leadership, and his genuine concern toward his fellow interns and patients alike.

On the other hand, I believed my willingness to be a team player and my sincere desire to always elevate the common good over and above my self-interest, made a lasting impression on him. After our St Luke's internship, Manny

continue to page 14

EARLY DIRECTIONS, CHALLENGES IN MY LIFE

NIDA BLANKAS
HERNAEZ MD⁸⁴

When I receive a great



honor, it makes me think to look back of my experiences of a lifetime and the people who have shared, helped and encouraged me.

On this special occasion, I would like to thank the award committee of the FEUMAANI for having selected me as the recipients of the outstanding alumnus award, 2014. I am greatly honored, grateful and proud of this recognition. Thank you very much everyone who may have been involved in this selection.

I also would like to thank my incredible husband, Edward, and my young adult children Frederick and Margaret, and family relatives and friends. They gave my life purpose, meaning and joy.

At 10 years old my daughter said, *Can I give my gift money to the Katrina victims? I have the basic things and I have you and dad?*

I was touched and did not
continue to page 12

PRESIDENT AQUINO'S BLUNDER

CESAR D CANDARI MD⁶¹

FCAP *Emeritus*, Henderson NV

Despite of the claims by the President to lead a *daan matuwid*, he is in the center of being questioned on his standards of integrity, morality and performance.

There seemed to be failure to meet those standards. It is now in media coverage that the President's net satisfaction rating dropped from 64% in June of this year to 49%. This is the steepest 15% point dip in four months on a recent survey by the Social Weather Stations (SWS) at the height of the Zamboanga siege and *pork barrel*.

Politicians linked with the pork scam of Napoles created this negative reflection on the current massive stealing of peoples' money.

It was a year ago when Napoles, the queen of scammer and The Priority Development Assistance Fund (PDAF) – a pork barrel scandal came out in the open.

Ten billion pesos of people's money were lost to Napoles the allege pork barrel mastermind.

Annually, an estimated P250 Billion were plundered by political leaders - funds that are for the millions of poor people in our country. Then, the Disbursement Accelerated Program (DAP) issue surfaced

continue to page 16



CESAR D
CANDARI MD

Morris Hospital Honors ED RELUCIO MD⁶⁴

Members of Morris Hospital Foundation's Legacy Society gathered as they have since the Society was created ten years



Marizon and Ed Relucio ago. This year's reception drew the largest crowd to date for the annual event, with over 70 members in attendance.

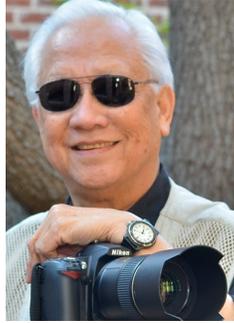
The Legacy Society was created to acknowledge those who have made a commitment to provide for some type of gift to the Hospital Foundation through their estate planning.

Some donors provide for this gift through their will, others create trusts, and some simply name the Foundation as a beneficiary on their retirement or bank accounts. In other words, these members feel very strongly about Morris Hospital and its importance in our community.

The highlight of the evening always includes stories from members about why they feel so committed to Morris Hospital and choose to make gifts through estate planning. This portion of the evening focused on retired surgeon Dr Edmundo Relucio and his wife Marizon, who recently completed a

continue to page 15

BUTTERFLY IMAGES



ROLANDO M SOLIS MD

One morning while I was watering our plants in a small backyard garden, I noticed four caterpillars busily chomping on the leaves of a potted parsley plant. I collected all of them then placed them in a plastic box with parsley stems dipped in a vase with water. Aeration was of course provided.

In the ensuing days, the caterpillars started to deepen their colors and one by one they evolved into pupae. I had the privilege of observing up close how the critters expelled a string-like substance from its mouth, if we may call it that, then wiggled its head to loop it around.

It was also fascinating to observe how one of these actually shed its colorful skin to evolve into a pupa right in front of my eyes. The neck string was sturdy enough that it held the pupae in place in spite of the experimental shaking that I did.

After couple of weeks, these creatures evolved into beautiful black Swallowtail Butterflies, which I released in our yard.

Unfortunately one of them had a defective wing so I presume it eventually perished as it could not fly away.

It was fascinating to have observed and photograph the stages of this incredible metamorphosis - one of nature's gifts!



TENDERLY YOURS

NOLI C GUINIGUNDO MD

The story about dam is long overdue. The other day, FX showed a movie about the Tennessee Valley Authority (TVA) where a dam was built in the Tennessee Valley to control the river and what kind of power can be obtained from it.



NOLI
GUINIGUNDO MD

Actually, the TVA is a Federal Corporation organized in 1933 to provide cheap electric power, flood control, irrigation, etc, by developing the entire basin of the Tennessee River, especially by building dams and reservoirs.

Going back to the movie in which Montgomery Cliff was the agent designated to enforce the TVA and as such met with resistance from all kind of people particularly Jo Van Fleet who has lived in the valley all her life. Cliff's life was also complicated by the life of Lee Remick who has two children. At the end, everybody left and finally the area was flooded.

The same situation happened in Brookville IN. Some of you might remember that we used to live in Brookville in the Hidden Valley Area. The area involved several small towns north of the town of Brookville, the county seat of Franklin County. Prior to our arrival in Brookville, houses and lands were bought cheap by the government because these lands are slotted to be flooded in order to build

continue to page 11

OCTOBER IMAGES



The FEUMAANI 22nd biennial anniversary reception line shows, from left, seated, Carlota Sanchez RN, Marylyn Lopez RN, Elenita Rubio MD, Erlinda Lopez MD, and Lourdes Malicay MD, with a registered guest, Normal Arias MD (left).



FEUDNRSMAF president Manuel Malicay MD (right) congratulates the newly inducted prexy Richard Mon MD, other officers and board governors at the 22nd biennial FEUMAANI anniversary, held recently at the Hyatt Regency Hotel O'Hare in Rosemont IL.

I AM PROUD TO BE A PILIPINO- AMERICAN

JOSE M T ANTONIO MD ⁶²

Part III

This is a great privileged,
and I am very proud to be

Pilipino-
American. I am
one of the
inheritors of the
colonial mentality
with the Malay-
Polynesian
language (a branch
of Austronesian
language family),

and pioneers of the glorious
past. We have beautiful 7,107
islands with 90% Christians that
are traditionally social
conservative with one national
language as Tagalog (wich is
the fifth most-spoken language
in the United States) and
multiple dialects for each
regions and localities.

In this great country we are
one of the 10 largest immigrant
groups. Pilipino Americans
have the highest rate of
assimilation in this land of the
free and opportunity. Now with
all your kind indulgence, please
allow me to impart to all of you
my *identity*.

All of us must have the
knowledge what *identity* means
for if we do not know your own
individualities then it will be
hard for any of us to know the
meaning of *identity*. I fully
respect, and honor each and
every one's own *identity* for I
am very cognizant that all of us
are unique with flaws in our
own character and virtues in our
individualities beginning from
the influx of Pilipino

continue to page 9



JMT ANTONIO MD

LETTER TO THE EDITOR

I belong to Class²⁰⁰⁴ and
currently helping Dr Hernani
Tansuche with the scholarship
program which the late Tito Sen
Martin MD started. I was
wondering if you are the
moderator for the alumni
website? I wanted to update the
list of topnotchers from FEU-
NRMF, which has not been
updated since 2011. There are
seven topnotchers due for
addition. This is very useful for
prospective scholarship
applicants for them to see that
we have a long and current
tradition of placing topnotchers
in our program. Not to mention
a formal site where we could
place our scholarship flyer.

Another issue would be the
scholarship program itself. Dr
Tansuche and I have been
working closely regarding the
new set of scholars and the
current ones. We did a total
revamp of the admissions and
retention policies.

The current scholarship
program that we have is geared
more to the academically
inclined scholars, in the hope
that they can raise the bar in
their respective batches and
place in the Philippine medical
board examination which is
very crucial for school
promotion and recognition.

The currently scholars that
we have are mostly middle class
or lower, but none is truly
indigent. I do get some inquiries
from students who do not fall in
the category of the academically
elite but rather in the indigent
sector.

Our retention and academic
policies for the current scholars

will automatically disqualify
them, and their needs are larger
than the usual tuition and
minimal allowances that we
provide. To make it short, is
there a possibility of a different
class of scholarship for the
indigent and geographically
disadvantaged applicant?

Of course they still have to
have some degree of academic
prowess as they obviously need
to graduate from medical
school.

I read about the Dr Martin
legacy scholarship, what is the
status of that?

It is my hope that I get an
applicant that is both
academically superior and
economically challenged, but
the support will be much larger
from what we usually give. I
guess the main difference will
be more funding and less
stringent retention policy. If that
is the case the said recipient will
have to be very special and
deserving of this support.

Currently, I have good
prospects for our academic
scholars, but I also have a
handful of indigent applicants.
Thank you very much.

ROBERT ARIAS MD²⁰⁰⁹

LETTER TO THE EDITOR

Indeed, your article about
the Holy League
and the *Battle of
Lepanto* was
historically
informative and
invigorating.

**NOEMI B
FOGATA MD⁶⁹**



NOEMI B
FOGATA MD

CLINICAL IMAGES

SULFUR GRANULES-ASSOCIATED ACUTE ABCESSIVE LOBULAR PNEUMONIA

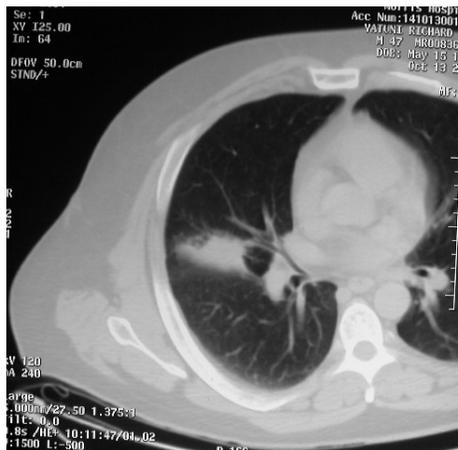


Figure 1 – CT scan shows a fissural, midzonal, right middle lung mass or infiltrates (arrow).

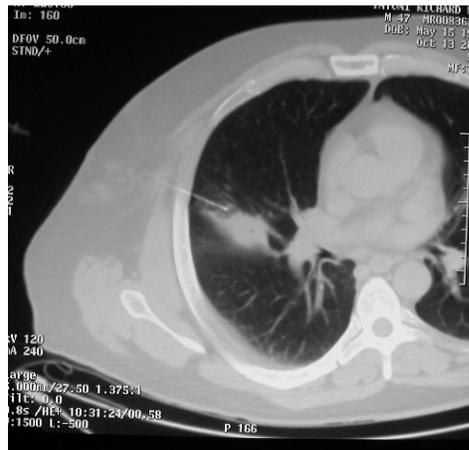


Figure 2 – The CT scan-guided aspiration fine-needle is on target.

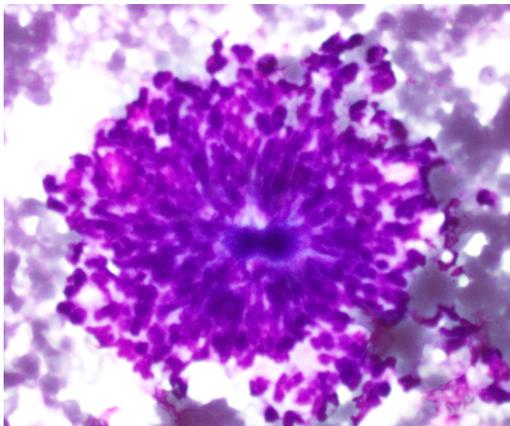


Figure 3 - A radial palisade of polymorphonuclear leukocytes around a central sulfur granule (arrow), Diff Quik stain, X400

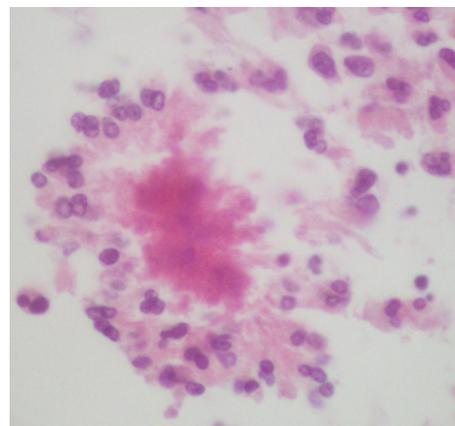


Figure 4 – A sulfur granule, surrounded by polymorphonuclear leukocytes, hematoxylin eosin stain, x400

These images are from a 47-year old, smoker, alcohol binge drinker, male patient who presents with the complaint of upper respiratory symptoms of mostly persistent and productive cough. On chest radiograph and computer tomographic (CT) scan a fairly demarcated and circumscribed, irregular, right middle, midzonal and fissural lung mass or infiltrates of 4.2 x 2.1-cm dimension was observed

(**Figure 1**). The clinical and radiographic impression is either cancer or pneumonia.

A CT scan-guided fine-needle aspiration biopsy (**Figure 2**) of the said lesion is performed with high degree of difficulty; and therefore only one guided needle pass was performed. A scanty yellow thick purulent liquid was

aspirated. A drop of the aspirated was also placed each in aerobic and anaerobic media.

On-site immediate and eventual evaluation of the Diff Quik-stained, and later Papanicolaou-stained, Gram-stained and periodic acid Schiff-stained smears, and subsequent cell block histological sections, revealed radial, multilayered and palisade of polymorphonuclear leukocytes around a central sulfur granule (**Figure 3** and **Figure 4**).

The later is an amorphous and hyperchromatic colonies, composed of coccobacilli and occasional filamentous bacilli, consistent with *Actinomyces israelii* and *Actinobacillus actinomycetemcomitans*.

Also a Splendore-Hoeppli phenomenon was noted.

The organisms were later confirmed on microbial culture.

The final diagnosis was acute abscessive lobular fissural pneumonia, associated with sulfur granules of mixed colonies of *A israelii* and *A actinomycetemcomitans*.

Prompt administration of intravenous ampicillin, and continued as oral penicillin for six weeks, was followed with timely gradual improvement of signs and symptoms.

The follow-up also displayed clearing of the lung infiltrates cleared; and there was no recurrence of the symptoms.

COMMENTS and LITERATURE REVIEW.

The etiology of coexisting *A israelii* and *A actinomycetemcomitans* was cytologically suggested by sulfur granules in a purulent exudate. The sulfur granule core is composed of filamentous gram-positive bacilli, admixed gram-negative coccobacilli, and irregular golden brown crystals in an exudative background. The microbial speciation was confirmed on culture, respectively.

Intravenous penicillin treatment for six weeks resulted to cure of the infection.

Rupture into the pleural cavity, for untreated infection, may lead into empyema, or even *empyema necessitatis* which is an extension of the inflammatory exudate from the

pleural cavity to any area of the thoracic wall, or chest, breast, or pelvis to form a mass in the extrapleural soft tissue.

In our index patient, the diagnosis is made early enough to have prevented such pleural involvement and the development of *empyema necessitatis*.

In actinomycosis, the organism is usually due to *Actinomyces israelii*, a gram-positive, anaerobic bacterium, frequently originating from a diseased gingiva, poorly kept teeth, and infected tonsillar crypts. *Actinomyces* is often cultured with other bacteria, such as *Bacteroides*, *Actinobacillus*, and anaerobic *Streptococcus*.

Clinically, patients with isolated pleural empyema are frequently asymptomatic. In *empyema necessitatis*, patients can have pleuritic chest pain worsening with deep inspiration and rarely a nonproductive cough. Mostly, they have an enlarging, painful mass in the chest wall.

In **CONCLUSION**, this paper is one of the very few describing the unique diagnosis of an acute abscessive pneumonia and its etiology based on the findings of sulfur granules, with almost specific identification of the causative microorganisms via fine-needle aspiration cytology.

As suggested in the index patient and confirmed on subsequent microbial culture, the usual microorganisms in sulfur granules are a combination of *Actinomyces israelii* and *Actinobacillus actinomycetemcomitans*.

Prompt suspicion for these bacteria leads to prompt

administration of appropriate treatment, and of course eradication of the same with great benefit to the patients.

A list of **REFERENCES** is available upon request.

- Cesar V Reyes MD⁶⁸

I AM PROUD

continued from page 7

professionals' immigration in 1950's.

I am very proud of my *identity* starting from my roots. Briefly, I was born in Barrio San Jose, Bulacan, Bulacan, under American

Colonizers (1898-1946) as the *black sheep* of the 11th siblings youngest of the boys out of the ten living professional siblings, since the three died when they were so young. My mother delivered all of 13 siblings at home by a quack midwife.

With all my inner fiber of humility please allow me to confess that I was late in so-called adult maturation to know the realities of real life. I blossom intellectually early on up to undergraduate studies, but too late to know the day to day realities, and practical things in life not until I had four children when I graduated from our medical school.

My beloved father was a lawyer-politician and fishpond/land entrepreneur. He was elected three consecutive terms as councilor of my hometown. Unfortunately he died within a year before I graduated.



JMT ANTONIO MD

My loving mother graduated valedictorian at 7th grade during the first American educational system equivalent to bachelor of science in education today. She was a teacher before she got married to my father. My mother placed the tassel from left to right on my graduation.

Hence, this was my personal *identity* and I did not know anything about work. All the ten living siblings when I was growing up were not permitted by my parents to work with the pre-requisite that all of us must finish the highest education with passion that we would be able to attain with the caveat that is the end of their material support.

All of us were able to become professionals in different field of endeavors, that would be time to start seeking for a job, start working, or got married, and then be on your own. The only thing that I knew then was that I was very passionate with my medical degree providing medical services as a general practitioner in Bulacan and Manila that I did for almost two years being paid by chicken and eggs, with *sample living* at FEU Hospital, and *salamat po*.

Majorities of my friends left the Philippines when the American government opens the door for professionals. In 1950 and 1960s the door became wide open, especially for physicians, lawyers, engineers, etc, but the number one in demand were mostly physicians to render medical services for their own people.

One by one my friends left, and they made an adventurous life to further their studies and skills. I followed their footsteps,

and I landed in 1965 at Louisville KY for my rotating internship. I am very privileged and proud of my own *identity* without asking my mother or any of my elder brothers/ sisters for pocket money. My mother with tears asked me to come back, and I said yes after five years of training since my visa was J1. She gave me \$100 as a pocket money that I mailed it back to her since we have free meals and accommodations with my meager salary of \$125 a month after the sponsoring hospital deducted my air fare.

I am very grateful, and thankful to Mrs N Galang for the arrangements she made of my rotating internship with fly-now-pay later plan for I realized that I have to stand alone in order for me to be a man by establishing my own *identity* and maturity in my late twenties.

I was ashamed to ask my mother every day for pocket money besides she was already spending money and baby sitter taking care of my four sons (when I left she was pregnant). Something electrical sparks inside my skull that I have to stand alone to face the challenges and the realities of life, and with courage, perseverance with persistence to shoulder, and carry my own family responsibilities.

I have to confess that responsibilities and facing the reality of life were not in my vocabulary and unknown in time and space to me until in my late twenties.

When I was growing up I just playing *patintero*, tops (*trumpo*), *yoyo*, *tanching*, head and tail, played basketball, boxed, and gamble and smoke

with elderly people, starting in my hometown then my family move to Tondo, Manila, in 1946 because our town mayor (good friend of my father) was ambushed by the Huks.

My *tatay*'s younger brother had been living in that area. During my time if ddid not gamble, smoke and drink, I would have been an outcast, like homosexuals (for they were in the closet then). I started gambling and smoking when I was six. I gambled to win, but steadfast with my tenacity to study hard, and get my own family, and return back after five years of my training. my mother died less a year when I arrived in Louisville, thus my plan changed dramatically to stay in this promise land of the free and opportunity.

That was the beginning of my assimilation. That was the period in my life of what hard work meant. At the same time I studied very hard for the first time in my life. *Amazing grace*. To earn more I moonlight like Drs Johnny Racal and Tomas Flores working 24 hours every other day.

I made it and my family now five with a baby-sitter joining me two months before I finished my rotating internship. I remember vividly that my monthly pay-check was \$125, but I have also moonlighting with additional income of at least \$45 once week. I mailed all my income to my first wife so they were able to join me within two months before I finished my rotating internship.

I was able to provide renting an apartment, put food in the table, and buy my children their necessary need. I did not know

that I was monetarily very poor because I was very pre-occupied enjoying learning more, and working.

For the first in my life, the light bulbs were dim for I did not know that I was working hard like the first pioneers of this great land of opportunity and the free, except I was using my brain cells whereas the first pioneers usually used mostly their hands and feet.

The Europeans from different countries killed each other, or by the Natives, in addition to communicable diseases survival of the fittest prevailed.

The first settlers of Caucasians were looking and searching were for opportunity and freedom from the shackles of tyranny of their churches or religion, and in addition to the exorbitant taxes by their own government that they bravely rejected.

Those above-mentioned facts I rest in order for others to write their own personal *identity* to be proud as Pilipino American in order for your next generations, and generations to come to know their roots.

As a *dreamer* you will have all the time to think about your own personal adventures pleasant or unpleasant, good or bad, success or failures, etc.

Socrates stated if you did not have any knowledge what *identity* means (including virtues) then how are we all going to know with certainty what identity is or who we are, and where did you came from?

Part IV to be continued.

TENDERLY YOURS

continued from page 6



NOLI
GUINIGUNDO MD

the Brookville Dam.

Along the same vein, this is to control flood and to harness energy and for irrigation purposes. Our medical office

was located at, of all places, the foot of the dam. But the medical office has already been built even prior to the inception of the dam. My classmates who had visited me in Brookville in the past was of course worried if the dam breaks and advise me to buy a boat in case something drastic happen.

But the dam made things beautiful to look at. Brookille Dam is the second largest recreational facilities in Indiana. The women who had worked for me in Brookville had so many souvenirs from the now flooded town. The most common were pieces of driftwoods which were later on varnished after thorough cleaning.

Some had painted the same with still life, others with views of the old place. My favorite patient had given me her most precious painting of the last covered bridge in Franklin County and I treasure the same by displaying at our office in Brookville, and later on at our bedroom in Monroe, Louisiana.

There were so many psychological impact on people when leaving their place of residence when they have lived

in the same place for so long a time.

We have visited the dam and its recreational areas every now and then while we were still living in Brookville. There was more traffic more than anything else. There was no increase in crime, thank God.

That movie Wild River with Cliff and Remick made me think about our stint in Brookille for more than 17 years a most fruitful one. I passed all my specialty board during that stay, I got my fellowship in Family Medicine,

I have held responsible positions in the State Medical Association in Indiana as Franklin County delegate, responsible positions in the FEUDNRSM Alumni Foundation, Pilipino medical associations, first Pilipino to become president of the medical staff of our hospital, and first Pilipino to sit on the board of trustees of the hospital.

Most of all, Cincinnati which is a few miles away from Brookville was the site of my practicing again my fencing prowess which started in the University of the Philippines and carried on wherever there is a good group of fencers, particularly the Foil.

Until next time.

God bless you all.

OCTOBER QUOTE

... I will now allure her, and bring her into the wilderness, and speak tenderly to her.

Hosea 2:14

EARLY DIRECTIONS,

continued from page 4

hesitate to support her wishes.



*Mar,
why are
you not
eating
your
sandwich?
I inquired?
I am
not hungry
mom, but I
will take it*

with me., she replied.

Then, she suddenly disappeared. But my eyes followed her to where she was going. I was taken aback, when she was giving her sandwich to a beggar, we had come across the day before.

We experienced similar situations with Fred, when we lost track of him at the middle of a crowded place in Rome. We followed him through the crowd and we were on the brink of panicking and disappointment, when we found him giving money to a beggar.

I guess it was something that they presumably want me to do, something great such as medical missions, relief giving, gift giving, and other valuable services in the community that we normally do in our daily life.

I was lost and God sent somebody to direct me, this was way back when the concept of a GPS was non-existent. We find ourselves at the Death Valley, but God showed us the way out and saved our families.

My brothers got sick in LA, but God extended His healing Hands and made them survived.

God has showed me things that I cannot comprehend. Whatever we do, we do it for God. The love we share makes life colorful.

The missions at times would pierce my heart:

Laoag City mission, a day after a cataract surgery, a 38-year old woman came to me in tears and said, *Thank you, now for the first time, I can see the light.* She was flabbergasted and thankful for what I did, but I had explained to her that it was the specialist, who operated on her and not me.

She replied, *No, I have heard you are the leader. So I appreciated what you've done to me.*

Her words were so empowering that reverberated into my ears and constantly reminding me that I am a visionary leader, someone whose dynamism never dulls; a leader that introduces new ideas and inspires others.

My first inkling was to accept that I am a leader and that my mission and vision to run a successful organization was complex, labor-intensive challenge that was expensive and needed continued support and collaboration among colleagues and members.

I have given my best and hopefully the experiences I have gained will serve as an example for the future leaders to follow, to articulate and to promote the work they do.

I still remember vividly how I was able to manage and establish routine for an effective flow of scheduling time:

I donated the clothes that we were supposed to wear in the Philippines. I donated

Halloween costumes that were on sale.

I remember when I was pushing a cart at Target Center, the trolley was so heavily packed with clothes that by forcing to push it, it tipped over to one side and luckily I managed to escape from falling over the cart. I came out smiling still, but *whoa* breathing heavily, because I had to pick up everything that were scattered on the floor.

It was a sheer luck that one of my patient's mom was there to help me. She uttered, *Those clothes are probably for your mission again, because those clothes don't fit your kids.*

I smiled as I nodded my head to confirm that it was true. The next time I saw her, she attempted to come to the office, bringing boxes of candies for the mission.

It is apparent that leadership for successful visioning is daunting. It is the leader who is ultimately responsible and needs to be actively involved. These experiences indicated that as a leader I needed to be enlivening, motivating, passionate-generating, data-driven, accountable, creative and of course demanding.

It should not only be a one man's job. It can be best achieved when everyone is supportive, participative and cooperative. Catering for individual needs and by knowing your patients was inspirational.

During one of the missions at a remote community, a father had a son who was in serious condition. He needed to bring his son to the hospital in order to save his life. He came back, to the office and told me that he

has no money to pay the hospital. Without hesitation, we gave him the money that he needed to pay for the hospital.

A pale and malnourished looking mother was breastfeeding her equally two malnourished children of nearly about two to three years old. I advised her not to breastfeed them anymore, because of their ages. They are too old for breastfeeding. The mother answered, *What will I feed my children?*

Yes, giving Halloween gifts to the hospitalized children that cannot go trick a trick or treating, donating candies in the Philippines, and encouraging my children to play Christmas songs on their violins to the hospitalized children who would not be able to go home.

These were little things, but to me it meant a lot for us to develop trust and personal connections to people and influence others to make a difference.

I had seen, I had experienced, I had wondered... Seeing typhoon victims homeless, hungry and alone, seeing all the misery in Syria, seeing how living can be so violent in this world, seeing parents crying, because their children are dying or undergoing surgery, and seeing the less fortunate, when we were in missions, the blue children with heart defects who cannot afford surgery or cannot even afford to eat.

I found these aspects of life very confronting and heart breaking. My unwavering commitment to help people has spanned more than twenty-seven years at various settings including my medical career,

organizations including FEUMAANI and the PMAC.

How I wish I could ground myself from shopping or could get away from all the luxuries of life, but I am only human tempted to buy things.

However, we can make a difference by continuing to walk together, to smile and touch the hearts and minds of the little children and the crying parents, to share your time to listen, and to stop for a moment and just enjoy our gifts of nature.

Experience being poor and being with the poor are a real thing. It can transform us into a better person. I strongly agree with St Teresa when she said, the poor people are great, they make us beautiful.

For all the years, I have been so lucky. God has been walking with me and showing me the miracles of life. We are a reflection of His goodwill. The more we give, the more we are blessed. We give till it hurts, because giving is the way He has taught us, that is in itself, an underrated luxury more filling than a sandwich or a trip to the mall.

So why do I still teach? Does teaching hinder my ability to attend to my patients? I can not offer a cogent defense as to why. So much of what I am trying to achieve in the realm of medical Institution is my greatest legacy, to share my expertise and astute leadership to provide help and to enhance medical practices for future doctors in order to work smarter, not arrogant, but professional, more competent and skilful.

Why do I go to missions?

To help the less fortunate, but really it hurts me more. If only I can win the lottery... If only I can do more... If only what I am wishing will someday become a reality.

There are times I pondered upon why I am here. What is my role? What is the reason? I am bound to believe that there is only one reason... to make a difference and to leave our world better than it was before.

Perhaps we can take some time to reflect our own vision and check upon others perception.

So together, we can make a bigger difference, even if we cannot see through things, He can and He will walk with us and guide us.

Lastly and above all, I thank God for all the blessings and all the miracles. I still remember the famous quote of Oprah: *Cherish your yesterdays, dream your tomorrows and live yours today. Life is what we make it, always has been, always will be*, which has guided me in my adventure to helping people.

Throughout life, people will make you bad and make you mad, but leave it all to God to deal with the things they do.

For *love...does not brood over injury, it does not rejoice over wrongdoing, but rejoices with the truth.* **1 Corinthians**

13:5-6

**NIDA BLANKAS HERNAEZ
MD⁸⁴ FAAP**

OCTOBER QUOTE

Heal me, O Lord, and I shall be healed; save me, and I shall be saved; for you are my praise.

Jeremiah 17:14

MY FRIEND

continued from page 4

pursued a career in academia as

an instructor in pharmacology at FEU-NRFM Institute of Medicine before immigrating to the United States for a post-graduate training.

In preparation for a rural

practice, I spent one year of residency in surgery at St Luke's before going to Sagada, a remote town in Mountain Province, as a volunteer.

From Sagada I practiced as a staff at Samar Provincial Hospital. With a stagnant salary of P470 a month, clearly not enough to support a family, I also immigrated to United States after my wedding in 1974.

Through the **ECTOPIC MURMURS**, I re-established contact with my former classmates. With Manny's encouragement I began attending regularly the annual FEUDNRSMAF reunion and continuing medical education meetings.

I attended my first reunion in Toronto, Canada. After a dinner there, I told Manny that I would pay for the bill. When the waitress came over, I asked her: *Where shall I pay?* But because of my hard Waray accent, I pronounced the word pay so hard that it sounded to her as *pee*. Naturally, she replied: *Sir, the restroom is over there to the right*. As usual Manny had a blast of unrestrained laughter.

A parallel incident happened about two years later. While

spending the Christmas holiday with the Malicays at a former fellow intern's (Dr Boy Punzalan) home in Pennsylvania, we had lots of fun reminiscing the past. Before we realized it, it was time to hear mass. When we get to the church it was jampacked with parishioners. We ended up scattered in small groups since there was no one vacant pew that would accommodate us all. At the moment of consecration in the mass, the guy next to me keeled over and dropped to the floor. Instinctively, I yelled for Manny who was situated five rows in front of us.

Again because of my curt Waray accent, I made the name Manny sounds as *money*. So, when people heard me screaming *money money* (instead of Manny) one guy- perhaps under the impression that a miracle was going on, leaped from his seat asking, *Where?* at the same time turning his head on all direction. Needless to say I almost died from humiliation. About the guy who keeled over, he did not need a CPR after all: he simply fell asleep and dropped to the floor.

The real Manny as a friend comes in times of difficulties, hopelessness and in need. Sometime late in 1990's the stock market collapsed. I was one among the hardest hit investors. To pay off my debts, I dipped into my retirement fund. With hefty penalty due to early distribution, I was practically broke in every sense of the word.

I spent most of my time sulking in my bedroom. One day the phone rang; it was Manny calling. I told him what

happened. He tried to console me but to no avail. Finally in a firm voice he said *Lan, (for Lando my nickname) I am calling you because I plan to buy four plane tickets to Vegas for a week's vacation. I want you and Fe, my wife, to come with us (Lou, his wife).*

He was so adamant that rejecting his offer was an exercise in futility. Reluctantly, I accepted the invitation. One day after our arrival in Vegas, while waiting for lunch, I went to the restroom. On my way back somehow I got lost along the way. I ended up passing by the Keno counter.

Unconsciously, I grabbed a ticket, marked around twenty numbers then paid a dollar for it. We were in the midst of our lunch when I happened to glance at the blinking numbers on the TV monitor. A lot of them looked familiar to me and I began to feel somewhat uneasy. I excused myself and proceeded to the keno counter to speak with the cashier there.

Sir, I think I have a winning ticket. After looking at the ticket, he turned to me and said:

Yesss Sir, you do! may I have your social security number.

What for?

Well, it's the regulation that any winnings over \$2000, must be reported to the IRS.

How much did I win?

About \$10,000.

Shocked in disbelief, I almost passed out. I ran back to our table screaming along the way: *Money, Money (instead of Manny) I win big.*

This time I did not create an ugly uproar among the diners as it is so common for players to



FERNANDO C
LAGRIMAS MD

become hysterical when they hit it really big. Believe me, we wined and dined as if there was no tomorrow. I was back with my usual self again, enjoying life to the hilt. Thanks to Manny

One of Manny's enviable qualities is his intolerance toward mediocrity. I remember Manny, Dr Olivo Leopando and I, discussing about members of FEU-NRMF faculty who pride themselves as *the Terror*. The fact is their teaching ability is stale at best. With the intention to motivate the faculty members in general and these *academic terrorists* in particular to transform themselves into meaningful educators, we launched the most outstanding faculty award, with the awardee to be voted for by the medical students.

When I dropped out as sponsor after the untimely demise of the other sponsor (Dr Leopando), Manny, being the sole sponsor left, had every reason to terminate this financially burdensome merit award. He chose not; in fact, he single-handedly kept this monetary award going since then.

This is Manny's secret as a successful person: his passion to share his God-given wealth with his fellowmen. For this reason, I am sure Manny will ride out into the sunset in a Lincoln Continental limousine complete with pomp and circumstance.

Me, coming from the boondocks I have no illusion that I will ride out into the sunset in a shaky old pick-up, then vanish in obscurity and oblivion. But one thing is certain: in the event that my clunker conks out, I can always

count on Manny to pick me up along the way.

This is the man I know as a friend. He is always there to give a helping hand. His sense of humor makes no dull moment when he is around; his generosity makes St Claus green with envy; his hospitality makes his guests feel like royalty.

I do have a lot more to say about the man, but since time and space will not allow me, I must say that I am a better person today because of my friendship with Manny, and notwithstanding my having a *Waray* accent.

Manny shows me charity in action and my *Waray* accent makes me cognizant of my inherent human frailty. Consequently, I learn the value of being humble in life and above all the realization that laughter undeniably, is the best medicine!

At my age, I am well aware that I am on the last leg of what has been my challenging spiritual journey in life, As I see the finish line of this journey inexorably moving closer, the inevitable and lingering question before me is: is it eternal life in heaven for me or eternal loss in hell?

As I ponder this question, I begin to realize that my friendship with Manny is the best ticket I have to attain eternal life in heaven. Hence, when that momentous day of final reckoning comes, and face to face with St Peter before the pearly gate in heaven, he asks me: give me one good reason why I should let you enter into the kingdom of heaven; I have my answer ready.

With the proverb in mind which says: tell me who your friends are and I will tell you who you are.

I will proudly reply: *Sir, I deserve the reward of eternal life in heaven because one of my fabulous friends is Money - I mean Manny Malicay.*

Morris Hospital

continued from page 5

\$50,000 endowed scholarship to the Morris Hospital Foundation in their family name.

In addition, the Relucio's recently gifted a piece of real estate valued at \$363,000 to the Morris Hospital Foundation.

Dr Relucio will be honored at the Morris Hospital Auxiliary's upcoming Gala for his contributions to medicine and his family's philanthropic endeavors.

FAITH CORNER

continued from page 3

personal choice to be the father of many nations openly haggles with God over the fate of Sodom and Gomorrah.

Reading these various psalms of lament and bible stories, we come to realize that naming our disappointments and doubts is really an integral part of a life of faith, a necessary part of being renewed in faith. Jesus himself borrows the words of



REV MELVIN ANTONIO MD

one of those powerful psalms while hanging on the cross to express his own great despair as he says, *My God, my God, why have you forsaken me?* **Psalm 22**

I think a lot of people feel that it is wrong to voice your disappointment with God. Many of us have been brought up to believe that it is blasphemous to do such a thing. I submit that it is not wrong to wonder where God is when we lose a child, when we learn that our beautiful child is autistic, when we learn that our beloved spouse is sick and dying, when our prized relationship has crumbled, when our dream job has just been eliminated. The people who suffer from natural disasters would not be wrong to ask where God is as they pick up the pieces of their lives. The parents of three young people senselessly shot to death in a cafeteria would not be wrong to ask, *Dear God, why did it have to be my child?* When I lost my daughter six years ago, I asked the same question over and over again.

Everything in our faith teaches us that these things are not what God wants, or desires, or wills for us. And yet these things do happen and so we see God in a different way. What we learn from this is that God who reveals himself in Jesus Christ always shows up in the broken places of our lives and our world. We are disappointed when we do not get the God that we want, the God we have been taught to worship, the God we expect. But in Jesus and his cross and his resurrection, we discover, not the God we want but the

God that we desperately need: the God who sheds all glory to join us in our shame and sorrow, the God who comes down from heaven to enter our hell-on-earth world, the God who abandons strength so he can join us, embrace us, hold us, love us and redeem us at our places of weakness. This God understands our giving voice to our disappointments. The only caveat is that we must first establish a relationship with the Lord our God, a relationship that begins with our baptism and continues to be nurtured through our study of his Word, worship and prayer. God can take our anger, our disappointment, our questions. Not only can God take them but he has promised through Jesus Christ to meet us and stay with us until we come out on the other side of our disappointment to renewed and resurrected faith.

PRESIDENT AQUINO'S

continued from page 4

when Senator Jinggoy Estrada delivered a privilege speech on the Senate floor exposing a series of *payoffs* to senators to



CESAR D
CANDARI MD

influence how they voted on bills or issues pending before the Senate; P50 million in discretionary funds from DAP were disbursed to each of the 20 senators who voted to convict former Supreme Court Chief Justice

Renato Corona. It was alleged as a bribe. Because of these, there are both friends and enemies against Aquino that have been building up for some time now. He is in the center of being questioned on his standards of integrity, morality and performance.

As acknowledged by Malacanang, there is massive stealing of peoples' money.

Coming from the Budget Secretary Florencio Abad, he does not regret proposing and implementing the P141 billion Disburse Acceleration Program (DAP). It was done to manage and to increase our investments in social protection ... cash transfers (to the poor), education, infrastructure, health housing, you name it. As a result the economy has grown.

The 2014 General Appropriations Act (GAA), as signed by President Benigno S Aquino III last December 20, already stands as the government's primary budget release document. This means that all the disaggregated budget items in the GAA are already considered released to their respective agencies, with the exception of lump-sum funds that have yet to be itemized, and which will require prior approval before their release, Secretary Abad said. Abad is the brain in the DAP, and the advisor of President Aquino. Special Allotment Release Orders (SAROs) from the budget process facilitates the swift and efficient implementation of the Administration's expenditure program which Secretary Abad prepares to be signed by the President. These are money allotted for the poor, for the

poor farmers, for decaying roads and schools, and for starving, shelterless victims of disasters such as floods and typhoons.

Critics of President Aquino will never stop. However, let us go on with what has been started putting corrupt politicians in jail. His unwavering conviction in anti-corruption, and political reform campaign that aims to move the Philippine forward and uplift the quality of life of the people is profoundly admirable. This was mentioned in his SONA.

President Aquino has still two years of his term. On November 19, 2013, the Supreme Court by a unanimous vote of 14-0, declared the PDAF unconstitutional. President Aquino accepted the ruling, but seven months later, on July 1, 2014, SC ruled that three parts of DAP are unconstitutional. The president did not agree and still fighting for it.

Will the DAP come to an end? I don't think so. He has allies in congress. The president does not really care of losing his popularity in order to fight for the reforms he believes in. If there is a looming crisis between the Executive branch and the Judiciary that may trigger a constitutional crisis, let us hope nothing worst happens. However, Disbursement of the DAP by the President is considered malversation and he can easily be indicted after his term and be in prison. There will be big penalties and he will surely become bankrupt. Because of this problem to happen after his term, it is being concluded by his critics that President Aquino is entertaining

run for another term. Aquino, who has two years left in his term, is barred from running again by the constitution.

It was Interior Secretary Manuel Roxas who first broached the idea of Aquino running again for another term, saying that it is only Aquino who can keep the country's economic gains under his *daang matuwid* or *straight path* mantra of governance.

A number of people are saying that to be able to continue the straight path, there's no better way to do it but to have a second term for the president for him to continue his leadership, Roxas said.

Roxas has insinuated that if the country will be again led by the opposition, rampant corruption, which has characterized previous administrations, will return.

Meanwhile, President Aquino's main resolve is to put those thieves, liars, and plunderers to rot in prison. So be it. Period. The President said he is tackling the problem of graft and corruption and it is with this principle in mind that he wanted the funds from the *savings* to alleviate extreme poverty and are concentrating on providing more opportunities for employment.

The discussions for DAP meanwhile, will stay for sometime. It is a stimulus program started since 2011 wherein funds that were unspent, allocations that have not been released or obligated and therefore considered as *savings* were used by President Aquino to spend on projects that he believes would benefit the people. Since its inception, *more than P150 billion were*

transferred to DAP. But what was anomalous was that DAP funds were spent without congressional authorization. The Supreme Court (SC) declared only certain acts and practices as unconstitutional. The misunderstanding in these acts and practices is in the definition of *savings* and other terms used. This is why President Aquino has asked for a clearer definition by Congress so that the legislative intent would not be misinterpreted.

This SC ruling was a big hit to President Aquino. His political opponents *e-blast* the media to drumbeat for his impeachment and resignation. Will he be impeached before the end of his term? Political pundits said no, and he will never resign. He maybe perceived as a political lame duck but his legitimacy of his administration is unquestionably stable.

In President Aquino's list of priority measures for the next two years is the promise of a Freedom of Information Law. People can demand information, demand documents, and make the government accountable for its actions. This will be a legacy he will be remembered as a history – defining landmark of his Presidency. In this day and age, in the Philippines, a Machiavellian President gets easily elected and he/she can always sing to the tune of the old sonata *what are we in power for?* It will not happen with the FOI in place. This is considered to be a much delayed measure. It has been in the Public Information Committee for a year now. We hope President Aquino will regard it as an urgent matter for its passage.

REFLECTIONS ON PHILIPPINE

continued from page 3
Some traits and habits.

Hypocrisy and cowardice.

One of our trait is *pakikisama*. It is hypocrisy on our part to still cavort and be a *compadre* or elect an abusive politicians. Our

cowardice or confrontational avoidance prevents us from confronting the offender because of fear of retaliation, or someday you may need his assistance.

We elect the likes of the Marcoses, Estradas, Binays, Aquinos, Singsons and other families to become political dynasties.

Utang na loob, our sense of indebtedness is so strong that Pilipinos lay their life for it no matter what. Rampant vote buying and influence peddling proliferate because of this trait.

Such monetary or job consideration must be repaid. This trait was responsible for the once onerous Parity Act giving Americans same privileges as if they were native Pilipinos. Cancellation of the Base Agreement ended that provision.

Victimization to natural disasters - The frequent occurrence of volcano eruptions, earthquakes, floods and typhoons overwhelm us that we could never recover from one to the next disaster.

We could not see or discern what was good or bad amidst these calamities. So we cling to

whatever we can to survive by hook or by crook.

Economic history - During the galleon trade, *boletas* (tickets) were required. It was issued by the Governor General. This was the beginning of our feudal economy favoring sugar, coconut and alcoholic beverages.

Businessmen resorted to bribery to gain a spot on the galleon. It was a lucrative business but fraught with corruption. These entrepreneurs fell victims to corrupt officials from the governor general to the *alcalde mayores*.

Encomienda - The Spanish king encouraged the *peninsulares* to settle in the Philippines by initiating the *Encomienda*. This was the beginning of oligarchy.

Encomienderos were given large tract of lands to develop with the obligation to take care of the welfare of the farmers and workers. Instead they abused the farmers and workers.

The farmers paid tribute or tax but received no benefits which led to multiple revolts and protests. Their abuses were brought to the Spanish authorities by the Friars so that this privilege was rescinded.

Frailocracy - when the *Encomienderos* lost their power, the clergy became the sole powerful man in the province. They exercised absolute power over spiritual, economical as well as political lives of the people. Religious Orders owned large tract of land alike the *Encomienderos*.

No one stood on their way. Worst of all some of them begot so many bastard children. Initially the women of these friars were reticent but slowly

became influential and conspicuous. These few friars supposedly guardian of morality were bereft of it.

Historical fictions

The *Maragtas (Madya-as)* a confederation of *Barangays* under the leadership of Datu Sumakwel was a creation by a Visayan poet from Negros Occidental, Mr Pedro Monticlaro.

The famous Code of Kalantiaw was a fabrication by one Mr Jose Marco a self proclaimed historian and entrepreneur.

Both were hoaxes and now expurgated from our history books.

How about the late president Marcos?

He was the most decorated Pilipino hero during World War II. Movies were made of his war exploits as well as his group the *Maharlika*. At the end all were found to be bogus. He was brilliant in so many ways. He was the only re-elected president and ruled the country for more than two decades by martial law. He managed to destroy the second richest country of Southeast Asia to utter mendicancy.

Yet even to these days those who worked for him managed to morph into political big wigs. Their wealth kept them in powerful and influential positions that some are the present architect of graft and corruption.

Collaborators - We achieved independence by ourselves for a brief period. For a short time we claimed Independence and declared Aguinaldo as president for eight provinces while Admiral Dewey was occupying Manila.



NAPOLEON
ABANDO MD

When we exerted our independence we were squashed by the Americans. Unfortunately the Americans did not know what to do with us since they never have a colony. So they processed us to be a commonwealth prior to become Independent. Our transition was interrupted by World War II and the Japanese ruled us savagely for three years.

The Japanese occupation was brutal and destructive to our country. Many were killed but some survived as collaborators.

In Europe they hunted and imprisoned or killed their collaborators but in our country they became powerful elected officials as president, representatives, senators, governors and mayors. Post-war, these quislings managed to get hold of reparation and economic aids by conniving with crooked public officials and became some of our nouveau riche. Other collaborators ingratiated themselves to the conquering Americans avoiding prosecution.

Martial Law - the initial effect was good but the real intention showed its ugliness thru killings, oppression, wealth grabbing and excessive conspicuous consumption that crippled our country. He was ruthless and excellent wealth multiplier. A commission was created by President Cory Aquino to go after his ill-gotten wealth with great difficulties and minimal success. His wife Imelda exceeded everyone in extravagance and waste.

Our country sunk deep into economic and political slump. The wealthy became richer and

the poor became worst. Some of these Marcos cronies nowadays escaped prosecution and enjoyed lavishly their ill gotten wealth for everybody to see.

Aquino Assassination - The killing of Benigno Aquino Jr shocked the world. Yet the ordinary soldiers went to prison but the mastermind went scot-free. This numbing traumatic event that someone can get away with murder in a broad daylight publicly confabulated the country even to these days.

These unkind history, man-made traumas, natural disasters and personal habits tangled a web of catastrophic influences contributing to our downward spiral into moral decadence. We became cynical, powerless, accepting and resigned that these are the norm. Even our Christian faith failed to rescue us from abysmal damnation.

Can we regain our moral compass?

Or do we have strength and courage to achieve national sense of morality where we can find solace and support?

Can we change?

We must or we are doomed!

Where do we begin?

We can see a glimmer of reformation by this present president Aquino. But this tarnished culture is pervasive that permeated almost every aspect of our lives. Now is the time but eternity maybe needed.

As a person and a nation we have to change for these reforms to happen. Again we must ask fervently the Almighty for guidance to succeed. We are resilient, adaptable and intelligent people. All must come together

to make our country among the *shining city on the hill*.

FROM THE HOME FRONT

continued from page 3

not units, failed while they were enrolled at FEU-NRMF and noted their length of stay. Only 2 of the unsuccessful candidates were *regular* students; the one that graduated in 2013 was pregnant and thus did up with the not prioritize her review, and the one that graduated in 2003 probably was not able to keep rapidly expanding new information. All the rest were irregular students with one graduating after having accumulated 29 failures in almost eight years of stay at our institution!

With this data, we resolve to: review and revise the



LINDA D TAMESIS MD

SUBJECTS	AVERAGE	#	RANKING
		75	
Biochem	84.6	1	3
Anat	77.2	33	9
Micro	84.7	1	1
Physio	78.3	33	8
Legal	85.8	2	1
Patho	77.6	34	10
Pharma	84.7	4	4
Surg	72.1	73	12
Med	81.1	16	6
OB	82.4	8	5
Ped	77.0	37	11
CFM	80.5	14	7

TABLE 1

curriculum and instructional design of the subjects to: reflect the coverage in the PLE; improve our instruction techniques; effectively evaluate the students by reviewing item analyses, examination blueprints and grade distribution patterns; adhere strictly to promotion board rules, even in the 3rd year, and; welcome suggestions from fellow alumni in the *academe*.

CHOCOLATE LOVERS FIGHT EBOLA SPREAD

continued from page 2

It was by chance that I joined and traveled with



NOEMI B FOGATA MD

a pharmacist/businesswoman and a humanitarian United Nation aid worker friend in West Africa in the year

2010 and 2012. Colonization with the British, French and Portuguese early settlers, wide variety of religious beliefs (Islamist, Old African voodoo religion, Paganism and Christianity) and difficulties/ deprivation in acquiring higher education have made the average West Africans mind a medicant. African trade slavery museums exist in French-speaking Benin and Togo.

Cote D’voire and Ghana together produce 60-70% of the world’s cocoa supply. Both countries are next door to Ebola-affected Liberia, Guinea and Sierra Leone.

More than 4,000 people have died from Ebola in Guinea, Liberia, and Sierra Leone according to latest figures from the World Health Organization. Ivory Coast has closed the land border in August 2014, allowing almost no human traffic from Ebola-affected countries.

Cocoa beans will remain unpicked in months of October from farmers who are mostly

migrants workers from Liberia and Guinea.

Ecobank researchers predict that farms will procure pod-pickers from elsewhere. October is the month where chocolate companies like Nestle, Hershey’s, Mars (M&M) send swarms of agronomist into West Africa to count trees and pods to predict the world’s supply of cocoa.

Because of Ebola, many of these pod-counters never boarded the planes going even to Cote D’voire and Ghana.

Major chocolate companies have responded to a call from the World Cocoa Foundation, a non-profit that helps small cocoa farmers raise funds to fight the Ebola spread to other non-affected neighboring countries of Ghana and Ivory Coast.

The United States and other governments have pledged millions of dollars to pay for everything from medicine, protective clothing for aid workers, to safe burials for the deceased.

The Bill and Melinda Gates Foundation have announced a donation of \$50 million to help fight the Ebola outbreak.

As of this writing, Mark Zuckerberg of Facebook fame has pledged \$25 million to this end.

Chocolate anyone? Grab a bar before the prices starts soaring again.

OCTOBER QUOTE

The spirit of the Lord shall rest on him, the spirit of wisdom and understanding, the spirit of counsel and might, the spirit of knowledge and the fear of the Lord. **Isaiah 11:2**

	YEAR OF GRAD	# OF 5	YEARS IN MED
1	4/13	19	7
2	4/13	11	6
3	4/13	16	7
4	4/13	3	5.5
5	4/13	0	4
6	4/13	24	8
7	10/12	29	7.5
8	10/12	15	6.5
9	10/12	8	5.5
10	10/12	13	6.5
11	10/12	10	6.5
12	10/12	11	5.5
13	4/12	17	7
14	4/12	3	5
15	4/11	17	7
16	10/10	21	7.5
17	10/03	8	6.5
18	4/03	0	4
19	4/03	7	6

TABLE 2

EBOLA TRANSMISSION from leaky hospital gloves?

continued from page 2

which appeared in Yangco BG, Yangco NF. *What is leaky can be risky: a study of the integrity of hospital gloves.* **Infect Control Hosp Epidemiol**

1989;10:553-556, is, as follows:

Some 1618 medical gloves were tested to determine whether, with current increased demands, these gloves are of high quality, ie, free of leaks. The risk of exposure to potentially infected fluids when using leaky gloves is also estimated.

Using a four-stage leak test, no significant difference is found between 64 of 790 (8.1%, range 0% to 44.4%) unsterile latex gloves and 11 of 210 (5.2%, range 1.7% to 21.7%) unsterile vinyl gloves ($p = .21$).

Sterile surgical gloves (7 of 618, 1.13% [range 0% to 3%]) have fewer leaks compared to unsterile latex and vinyl gloves combined (p less than .0001). The safranin test is positive in 27 of 28 (96.4%) leaky gloves tested, indicating a high risk of exposure to potentially infected fluids when leaky gloves are used.

Because of these findings, elements of *universal precautions* such as changing gloves after each patient contact and good hand washing after using gloves should be carefully observed. There is a need for the Food and Drug Administration to establish more stringent guidelines for manufacturing gloves and to

verify compliance with these guidelines.

The last publication on this topic by Crippa M et al. **Med Lav** 2008;99:387-99, from the Università degli Studi di Brescia, Brescia, is a consensus statement from the Italian healthcare setting in 2008; and it is summarized, as follows:

An Italian working group including occupational health professionals involved for many years in the management of glove- and latex-related problems in health care settings addresses the most significant technical, epidemiological, clinical, environmental and prevention problems related to the use of gloves and latex. The group's recommendations are based on scientific evidence and practical experience but they cannot be considered as final.

These topics need to be periodically revised. The following points should be taken into account: glove quality seems to have improved considerably but the information on glove features provided by the manufacturers is often still inaccurate or incomplete; the regulations in force provide that the manufacturers perform tests to supply evidence for the quality of the products but they do not indicate which analytical method should be used and they do not require that the results be reported in the technical data sheets.

Thus the manufacturers have only to declare that their products are *in accordance with the rules*; therefore, purchasers should require the manufac-

turing companies to supply detailed information and verify their reliability. Moreover, the rules should be adapted to higher quality standards; occupational physicians must be involved for the correct choice and purchase of protective gloves; the use of gloves (in particular latex gloves) and latex devices in health care settings should be based on specific criteria: procedures must be available stating which kind of gloves are suitable for specific tasks.

When exposure to latex cannot be avoided it is necessary to choose products that have good biocompatibility (eg, powder free-gloves with low allergen content); once and for all latex powdered gloves should no longer be commercially available labels for latex devices (including gloves) should report the extractable latex allergen content.

Limit values for extractable



Nurses garb for caring Ebola patients may not be as protective as it is wanted them to be, starting the latex gloves in double or triple layers.

latex allergens should be established; the use of synthetic rubber gloves should be encouraged since some materials (eg, neoprene and nitrile rubber) appear to have physical properties and protective efficacy similar to latex, plus good biocompatibility; more studies should be promoted to verify the protective efficacy of new synthetic materials; health care workers should be informed about the advisability and usefulness of using materials other than latex; health care services should not cause additional risks but rather highlight the advantages for workers and patients if the use of latex gloves and devices is minimized.

Sadly, there is no further pronouncements from the United States government, FDA, CDC, infectious organizations, commercial producers of hospital and surgical gloves, etc, regarding the glove integrity, safety and protection from infection such Ebola to date.

There also has been no report of disease transmission through leaky and defective hospital gloves, perhaps, until now --- the era of Ebola.

Cesar V Reyes MD⁶⁸

OCTOBER QUOTE

He has told you, O mortal,
what is good; and what does the
Lord require of you but to do
justice, and to love kindness,
and to walk humbly with your
God? **Micah 6:8**

BOARD CHAIRMAN'S MESSAGE

continued from page 1

and Nida Blankas Hernaez MD;

Continuing

Medical

Education - Cesar V Reyes MD and Celso del Mundo MD;

ECTOPIC MURMURS and Annual Memorial Lectures – CV



OSCAR C
TUAZON MD

Reyes MD;

Medical Missions - Jun Castro MD and Roger Cave MD;

Preceptorship and Membership - Renato Estrella MD and Oscar Tuazon MD;

Donations and Fundraising - D Ramos MD;

Website - Philip Chua MD;
Medical School, Post-graduate Medical Education and Scholarships - Hernani Tansuche MD;

Balik-FEU Homecoming - Pepito Rivera MD and Minerva Rivera MD, and

Nomination - Delfin Dano MD.

The Committees will be convening during the annual Board Trustees Winter meeting on March 28, 2015, in Los Angeles CA.

More details about the Winter Board Meeting will be made available shortly.

In order to take advantage of the success of last year's efforts, early preparations are underway in planning the 36th Annual Scientific Reunion and Convention.

We are excited to announce that next year's event will be

held at Caesar's Palace in Las Vegas NV on Wednesday – Sunday, from July 8 through July 11, 2015.

I look forward to working with the Las Vegas Chapter to plan the 2015 Scientific Reunion and Convention, especially co-chairman, Daniel Fabito MD.

We are very excited to return to Las Vegas next year, and hope that you mark your calendars and join us for what will surely be another memorable event!

We hope to have a record turnout next year, especially from the celebrants, Class⁶⁵; Class⁹⁰; Class⁷⁰; Class⁷⁵; Class⁸⁰; Class⁸⁵; Class⁹⁵; Class²⁰⁰⁰ and Class²⁰⁰⁵!

As I mentioned in my last message, our Board of Trustees is committed to growing our Alumni Foundation and ensuring its continued success.

We hope you will join us in our efforts to reach out to both new and old alumni and encourage them to attend events and participate in the planning and execution of our many events throughout the year.

OSCAR C TUAZON MD⁷⁴

PRESIDENT'S MESSAGE

continued from page 1

All our functions such as the Wednesday's Welcome reception, Thursday's *Filipiniana* Night and the Saturday's Grand Reunion Dinner Dance will be held all at Caesars Palace. Tentatively the



MANUEL M
MALICAY MD

Welcome Reception will be at Florentine III-IV and the Filipiniana Night and the Grand Dinner Dance will be at Roman III-IV.

The registration will be at Office 2 and the continuing medical education meetings will be held in Florentine I-II.

The honorees for the 36th annual reunion are the following:

- Class⁶⁰ (Emerald Jubilee);
- Class⁶⁵ (Golden Jubilee);
- Class⁹⁰ (Silver Jubilee);
- Class⁷⁰ (Sapphire Jubilee);
- Class⁷⁵ (Ruby Jubilee);
- Class⁸⁰ (Coral Jubilee);
- Class⁸⁵ (Pearl Jubilee);
- Class⁹⁵ (20th anniversary)

This is a great deal with Caesars Palace.

Please save these dates and make your reservations before the cut-off date Sunday, June 7, 2015.

As your president, I am inviting and rallying all alumni to join the 2015 annual reunion. Your presence in this annual reunion will help our Alumni Foundation raise our revenue so we can continue to finance our major programs with the medical school.

We will maintain civility and fair accommodation to all. I am deeply grateful to Danny Fabito MD, the overall convention chairman, for his expertise and hard work in helping close this deal with Caesars Palace.

Lastly, the 40th Balik-FEU annual homecoming and scientific convention will be held on Wednesday through Saturday, January 21-24, 2014 at Dr Ricardo Alfonso Hall, 5th Floor, FEU-NRMF Medical Center, Regalado Avenue and

Dahlia, West Fairview in Quezon City.

The grand alumni Golden Jubilee and Silver Jubilee will be held on Saturday, January 24, 2015, at the Crown Plaza Galleria, Ortigas Avenue, Quezon City.

MANUEL M MALICAY MD⁷²

FEUDNRSMAF president

continued from page 1

Inducted FEUMAANI new officers for 2014-2016 include

Richard L Mon MD,
president;

Remedios S Sales MD,
president-elect;

Melinda S Tolentino MD,
vice president;

Virgilio Magsino MD,
secretary;

Heidi Montenegro MD,
treasurer;

Arturo Fogata MD,
auditor;

Cesar V Reyes MD,
editor; and

Brenda N Banez MD,
Angelito Fernandez MD,

Lourdes Hilao MD,
Hermes Ayuste MD,

Ofelia Ayuste MD,
Ernest Lardizabal MD,

Erlinda Lopez MD,
Cecilia Lopez MD,

Lourdes Malicay MD,
Leilanie N Mon MD; and

Ligaya Marasigan MD,
board governors.

Past presidents form the advisory board; and they are

Franklin Montellano MD,
Nida Blankas Hernaez

MD,

Noemi B Fogata MD,
Manuel Sanchez MD,

Gerardo Guzman MD,

Celso Del Mundo MD,
Pascual Sales MD,
Virgilio Jonson MD,
Manuel Malicay MD,
Antonio Noriega MD,
Roger Cave MD,
Nunilo G Rubio MD,
Jose B Delfin MD, and
Nicolas Sanz MD.

FEUMAANI BOWLING

It is planned to be monthly and a fund raising to benefit future medical surgical missions.

Venue **LISLE LANES**,
4920 Lincoln Avenue (Route 53),
Lisle IL 60532
Telephone 847-338-9299
(Cesar Canonigo)

Everyone, friends, families and colleagues are all invited for fun and physical fitness.

Sunday, November 23, 2014
registration 11:00 - 11:45 am
practice 11:45 am - 12:00 noon
bowling 12:00 noon – 3:00 pm

Donation \$50 per couple includes, bowling shoes, foods and beverages

Contacts:

Lito/ Elvie Fernandez
815-674-6643

litoeagle18@gmail.com

Gerry/ Gigi Guzman
630-677-1289

guzman21@aol.com

Richard/ Leilani Mon
708-275-3168

torite@hotmail.com

lnarcelles-mon-md@sbcglobal.net

Future activities

Sunday, February 16, 2015
Monthly thereafter

Preliminary List of volunteers

Over-all coordinators: Ramon G Lopez MD, Naty Bernardino MD, and Atty Percival Claridad

Tacloban

Internal Medicine/ Family Practice - Cesar Cumba MD, Remedios Escalona MD, Malou Laya MD, Laarni Moreno MD, Simeon Sevandal MD, Cornelio Casaclang MD

Pediatrics - Anita Avila MD, Gloria Reyes

Outpatient surgery - Meneleo Avila MD, C Cumba MD, Manuel Escalona MD, Ed Relucio MD

Optometry - Narcing Cruz, Leo Cruz

Critical Support - Lilia Cumba, Marylyn Lopez RN, Marizon Relucio RPh, Lourdes Sevandal DDM, Engr Fred Tsai, Nora Tsai RN, Erlinda Casaclang, Corazon Reyes, Cora Moreno

Gynecology & Obstetrics - Susan Tan MD, Leticia Claridad MD, Likang Chao MD, Mario Reyes MD, M Escalona MD, Ligaya Marasigan MD.

Internal medicine - N Bernardino MD, Juanito Baladad MD, Rogelio Cave MD, Jose Delfin MD, Lito Fernandez MD, Malou Laya MD, Leilani Mon MD, Richard Mon MD, L

Moreno, MD, S Sevandal MD, Dionisio Yorro MD, Virgilio Lopez MD, and Judy Wu MD.

Family practice - Aurora Atienza MD, R Escalona MD, Jose Guevara MD, Rogelio

Liboon MD, Alfredo Sy MD, Zita Yorro MD, C Casaclang MD Israel Labao MD.

Pediatrics - Anita Avila MD, Nida Blankas-Hernaez MD, Rina Galvez MD, Gloria Reyes MD, Susan Nunez MD (1/26-28/15), Lynn Lopez MD

Psychiatry - Luz Cuaresma MD and R Escalona MD

Pharmacy - Marizon Relucio RPh, Mia Kim PhD

Nutritionist dietitian - Espie Vasallo

Optometry - N Cruz, L Cruz, Letty Tuazon

Medical technologists - Evelyn Fajardo MT ASCP, Elena L Wijangco MT ASCP

Dental - Lt Col. Abraham Bayan MD, six Armed Forces of the Philippines dentists, L Sevandal DDM

Laguna medical mission

Surgical leaders - Luis Mangubat MD, Leo Avila MD, Eugene Salazar MD

Anesthesia - Emma Salazar MD, Delilah Tapia MD, Yoly de la Cruz MD, Lito Fajardo MD, Nap Cuaresma MD, Manny Sanchez MD, Madhaviah Singa MD.

General surgery - C Cumba MD, E Relucio MD, Reynaldo Sarmiento MD, Barry Summers MD, Luis Mangubat MD, Francis Tapia MD, Richard Zhou MD.

Plastic surgery - Jesse Corres MD, and Jim Sanchez MD (1/29/2015)

Ophthalmology - Eric Lohse MD

PMAC medical mission, January 2015 Tacloban, Leyte medical mission

Wednesday, January 21, 2015, to Thursday, January 22, 2015

Air PAL, leaves Manila Wednesday, January 21, 2015, 4:45 am, be at the airport 3:30 am

Fare P3,473 (\$80)

Hospital Bethany Hospital of Tacloban

Billeting Z pad Residencies

Mini Pad \$30 **Single Pad** \$33

Queen Pad \$51 **Twin Pad** \$51 **Suite** (sleeps 3 – 5) \$150

Return Air PAL, departs Tacloban Thursday, January 22, 2015 at 4:30 pm arrives in Manila 5:45 pm

Calamba, Bay, Los Baños, Laguna medical, surgical, dental mission

Bus Trip from designated Manila/ Makati meeting place to Laguna (bus provided by Laguna Governor)

Monday, January 26, 2015, arrives in Calamba (Solemar Homes and Campus)

Tuesday, January 27, 2015, Calamba

Wednesday, January 28, 2015, Bay

Thursday, January 29, 2015, Los Baños

Dr Jose Rizal Provincial Memorial Hospital

Friday, January 30, 2015, - Saturday, January 31, 2015, R&R

Visit Calamba Rizal Family home

Visit at the IRRI UP Los Banos campus, Villa Escudero, Tiaong, Quezon, Waterfall luncheon and Filipiniana stage presentation

Dapitan participants

Cornelio Casaclang, Erlinda Casaclang, C Cumba, L Cumba, Rey Elazegui, R Escalona, M Escalona, E Fernandez, L Fernandez, I Labao, L Marasigan, Cora Moreno, L Moreno, M Relucio, E Relucio, Ester Azurin, E Wijangco, J Wijangco, M Lopez, and R Lopez.

Nurses - Pauline Abadilla RN (OR), Dr Puring Baladad RN, Marilyn Baltazar RN, Estela Cave RN, Mrs Amy Delfin, Clarita Distor RN (OR), Elvie Fernandez RN, Linda Guevara RN, Cora Guzon RN, Rosalie Lim RN (OR), Marylyn Lopez RN, Fatima Maglaya RN, Faye Mendiola RN (OR),

Hilda Sy RN, Nora Tsai RN, Carlota Sanchez RN
Critical support - Representative from the Laguna Association of the Midwest USA, Calamba Chicagoan Edna Pavel, Atty P Claridad, Engr Fred Tsai, Andy Abadilla, Jose Wijangco, Ester L. Azurin as local Calamba Bay and Los Banos liaison, Virgilio Villarruz of the Pugad Lawin Club of Calamba, Honor Cesar, Paring Cesar Dan Nantes, Lydia Nantes Pepito Tiangco, Paula Tiangco, Cora Moreno, azon Reyes, Erlinda Casaclang, medical student Joel Rosiene, and Alexander Frehse.

Dapitan, Zamboanga del Norte

**A historical shrine/ tourist destination
Sunday-Tuesday, February 1-3, 2015**

PAL air express, departs Manila, Sunday, February 1, 2015, 10:10 am

Arrive Dipolog 11:35 am

3D2N Dakak De Luxe Full Package

P13,264 per person (\$294)

Roundtrip airfare and taxes
deluxe rooms

two days buffet breakfast

River cruise lunch

Tour of Dr Rizal shrine and other sites,

One buffet dinner

Dinner at Inato Lang

Dampa

Aqua Marine Park

Fantasyland rides, and

Gloria de Dapitan leisure complex

Dapart Dipolog, Tuesday, February 3, 2015 12:15 pm

Arrive Manila 1:45 pm

Please make your own reservation
(Frontline & Travel Inc, agent Tess Q Ege, 8514631 to 33,
mobile 092285514633, tessege.frontline@yahoo.com)

MISSION UPDATE

October 22, 2014

Laguna (Calamba, Bay and Los Banos)

accommodations at Solemar del Pansol Compound in Pansol, Calamba.

1. The accommodations are resort-type houses. There is no traditional hotel lodging. It is anticipated that all missionaries can be accommodated in several houses at the Solemar. Late registrants may not be able to get their choice houses and companions. Couples and akin arrangements will be given preferences.

2. The resort houses are rented at P30,000 per day/ per house (to dollar exchange 1:50). Each house has six rooms; each room can accommodate two to four persons. The rental is P5,000 per room per day. Example at one day/ one night stay, at two persons per room times six rooms. 12 persons per house times per day, at \$50 per person per day equals \$600 per day per house, \$2,400 total for four days/ four night stay, and \$3,600 for a six-day/ six-night stay.

Please understand that the houses are rented for the whole stay of four nights. Payments will be the collective responsibility of all the people staying in the house.

There will no discount for those staying less than four nights. However, we will try to find accommodation for those who will stay for less than four nights.

3. Most of the rooms are on the second floor. There are only a few first floor rooms; they have their own bathrooms.

Some bathrooms are shared by two adjoining rooms. Some rooms are dormitory-style for six people, with communal bathrooms.

All rooms are air-conditioned. Please specify your preference: own, shared, or no preference for bathrooms.

Each house has its own swimming pool with hot or warm water, jacuzzi, karaoke, and pool table.

4. Beddings are provided. Please bring your own towels and toiletries. Daily breakfast have been sponsored, and will be free.

5. The resorts require a deposit equal to one day's rent of the assigned house. Therefore, the PMAC requires a non-refundable deposit of \$50 from each occupant/ participant and is due no later than November 14, 2014.

6. Full payment for the five-day/ four-night stay will be collected on or before December 31, 2014; otherwise, accommodation cannot be guaranteed.

Require pre-mission reservation remittances.

Please know that in early November 2014, our accommodation liaison, Dr Emma Yee Salazar will leave for the Philippines to finalize accommodation arrangements, and to make the required housing deposits.

Appropriate deposits should be made as soon as possible. Please make the checks payable to

Emma Yee Salazar MD

4141 Rutgers Lane
Northbrook IL 60062-2911.



You are Invited!

The Auxiliary to the Philippine Medical Association, the Philippine Medical Association and the PMAC and Auxiliary Medical Foundation Invite you to our Annual Thanksgiving Celebration for Fil-Am Seniors and Veterans

ANNUAL THANKSGIVING CELEBRATION

Saturday, November 22, 2014
10:30am - 3:30pm

At Rizal Center

1332 W. Irving Park Road
Chicago, IL. 60613

For Fil-Am Seniors and Veterans

- 10:30am - Catholic Mass
- 12:00pm - Luncheon
- 12:45pm - Gift Giving
- Entertainment

DANCE

DANCE

DANCE

Fil-Am Seniors and Veterans and Members of the PMAC and Auxiliary and Medical Foundation. Come and join us on this joyous Thanksgiving Celebration.

PERCIVAL CLARIDAD, ESQ.
President PMAC Auxiliary

DR. RAMON LOPEZ
President PMAC



Committee Members: All Auxiliary Officers
Dely Villalon
Thanksgiving Coordinator



Marylyn Lopez, Fe Lumicao, Leticia Claridad, Clarita Mangubat

NEW DELHI/ DUBAI TOUR

January 31- February 8, 2015

Six nights/ seven days
Delhi, Jaipur, Fatehpur Sikri,
Agra, Delhi; Tour to India-
Dubai-Abudabi. \$700 land tour/
hotel for India; \$470 land tour/
hotel Feb6-8 Dubai-Abudabi.

For details: call Nida
Hernaes MD 847-668-7385.

ITINERARY

Day 1 January 31, 2015

Arrive Delhi, as per your flight
schedule pick up from New
Delhi airport and transfer to
hotel, take rest, evening free.
Overnight stay at hotel.

Depending on our arrival time,
we can also go for some short
tour on this day.

Day 2 February 1, 2015

New Delhi is the capital of
India. Perhaps one of the most
interesting capitals in the world,
with its mix of old and new.
Delhi's place in the Indian
history is depicted in its
architectural heritage. Even
today you can see the glimpses
of history in its various
monuments (or what's left of it)
present around the city. Delhi
has a long and fascinating
history and there are plenty of
things to see. There are
structures in every nook and
corner that speak of Delhi's
heritage. There are cultural
happenings all over the town
that shout out for its deep-
seated root.

After breakfast, day city tour
to visit the historical and
cultural marvels of Old Delhi.
Today your tour will include the
visit to Red Fort, Jama Masjid
(India Largest Mosque),
Additionally you can take a
walk or Rickshaw ride through

the silver street of Chandni
Chowk, visit Rajghat (memorial
to Mahatma Gandhi). Return
back to hotel, take rest, evening
free to take walk tour around
the popular streets markets
called Janpath. Overnight stay
at hotel.

Day 3 February 2, 2015

Delhi To Jaipur. After
breakfast, day city tour to visit
the historical and cultural
marvels of New Delhi, today
your tour will include the visit
to India Gate, a memorial raised
in honor of the Indian soldiers
martyred during the war,
Rashtrapati Bhawan, one-time
imperial residence of the British
viceroys, Humayun's Tomb (a
World Heritage site), lotus
shaped Bhai's Temple and
Qutub Minar, built by Qutub-
ud-din Aibek of the Slave
Dynasty,

Later after lunch, transfer to
Jaipur [265 Km, 5 hrs.], arrive
Jaipur and check in hotel, take
rest, evening free, Overnight at
Hotel.

Day 4 February 3, 2015

Jaipur is one of the finest
planned cities of India, located
in the semi-desert lands of
Rajasthan. The city which once
had been the capital of the
royalty now is the capital city of
Rajasthan. The very structure of
Jaipur resembles the taste of the
Rajputs and the Royal families.
Shopping, Culinary Delights,
History and Culture, Forts and
Palaces, it has it all.

After breakfast, day city tour
starting with an excursion to
Amber Fort with an elephant

ride, a visit to City Palace,
Jantar Mantar (a virtual
museum about the astronomical
observatories built in 1700's),
Hawa Mahal (Palace of Winds
built of red and pink sandstone
in 1799, a unique five-storey
exterior with its 953 small
windows called Jharokhas,
evening free to relax or explore
the old pink city markets.
Overnight stay at hotel.

Day 5 February 4, 2015

Jaipur To Agra. After breakfast,
transfer from Jaipur to Agra
[250 Km, 5 Hrs.], on the way
stop to visit Fatehpur Sikri, a
World heritage site. This red
sandstone city was built by the
Mughal Emperor Akbar in AD
1564 in honour of the Muslim
saint Sheikh Salim Chisthi.
Fatehpur Sikri was intended to
be the capital city but the
shortage of water and unrest in
the north-west made Akbar
abandon it after 14 years. One of
the major attractions of this city
is the marble tomb of Sheikh
Salim Chisthi, continue your
drive to Agra, arrive and check
in hotel, take rest, evening free,
Overnight at the hotel.

Day 06 February 5, 2015

Agra is not only the erstwhile
capital of Hindustan it is also
the present tourism capital of
the country. The city situated
on the banks of the river
Yamuna in the northern state of
Uttar Pradesh, India, is located
about 200 kilometers south of
the national capital New Delhi.
It achieved fame as the capital
of the Mughal emperors from
1526 to 1658 and remains a
major tourist destination
because of its many splendid
Mughal-era buildings, most

notably the Taj Mahal, Agra Fort and Fatehpur Sikri, all three of which are UNESCO World Heritage Sites.

Early morning if interested you can visit the Taj Mahal at sunrise, (it opens at 6:00 A.M.) later after breakfast, day city tour to visit Red Fort (red sandstone Fort built by emperor Akbar in 1565), Itmad-ud-daulah (a mughal mausoleum also known as Baby Taj), Later in the evening transfer from Agra to Delhi [200Km, 3-4 hrs.], arrive Delhi and check in hotel, take rest, evening free, Overnight stay at hotel.

Day 7 February 6, 2015

Delhi Departure. Morning at your leisure, later after breakfast, as per your flight schedule transfer to New Delhi Airport to take your flight for your onward journey.

Package Cost Includes (1) Accommodation in 05A/c Room in the above mentioned hotels for 10 pax, (2) Daily breakfast in all the hotels, (3) Rickshaw ride in Delhi & Elephant ride in Jaipur, (4) All pick up, drop, transfers and sightseeing as per itinerary by private Air Conditioned Chauffer driven Tempo Traveller (mini -bus) , including all toll tax, fuel, parking and driver charges, (5) Personal English speaking Tour, guide in each city during sightseeing, (6) All Monument entrance fee. (7) All applicable tax.

Day 8 February 7, 2015

Half day Dubai City Tour without Lunch

Evening pick up for Desert Safari with BBQ Dinner via Land Cruiser

Duration: 3 ½ – 4 hours – Day tour

Dress code: Casuals

Foot wear: Covered sports / flat shoes

To carry: Handy cams, cameras, Sun blocks, sun shades

Includes: Return transfers

We will take you through the heart of Dubai and explore a fascinating morning tour. The most modern and most desired tourist destination, which has a lot to surprise any tourists who arrives to Dubai.

We will have a start with a photo stop at the *Jumeirah Mosque* which is the most

captured building in Dubai and then drive towards the open beach, where you will have a stunning view of *Burj Al Arab*.

We will proceed towards the *Madinat Jumeirah* (a replica of old city of Arabia) for a photo stop and then to the wonderful palm island where we will have a chance to look at the billion dollar hotel project, *Atlantis, the Palm*. Before we proceed to our next to stop we will pass by the *Knowledge village, Dubai Internet city* and *Media city*.

We will be having a photo



Taj Mahal in New Delhi



Dubai City Bay Boat-like High Rise apartment

stop next at the *Burj Khalifa* (the world's tallest building) which is attached to the Dubai Mall (one of the largest shopping mall in the world) and then we will head to the *Al Fahidi Fort* (oldest building later converted into a Museum) and then after a photo stop at the creek we will stroll to our final stop Gold Souq, through the tiny lines of the Spice Souq with sacks of dried lemon, ginger root, nuts, traditional medicine and much more. Dubai is a bustling city with its own individual charm. So come and join our tour and you will discover more of the hidden secrets of this town.

Day 8 February 9, 2015

Two-hour cruising time
 Pickup time– 19:00 -19:30 (in winter)
 19:30-20:00 (in summer)

Enjoy a memorable evening, cruising along Dubai's Creek onboard our traditional wooden dhow. Cruise by Dubai's illuminated skyline, offering sights of traditional and modern architecture. *Abras* (water taxis), old trading dhows, luxury yachts and modern architecture like the National Bank of Dubai, Chamber of Commerce & Industry building, Sheikh Saeed's House, and the Heritage Village are some of the impressive sights to enjoy.

As a good blend of Arabic and International music soothes your ears, a sumptuous buffet dinner with a wide array of continental and oriental dishes, along with an excellent selection of beverages is available.

For further details: call **Nida Blankas Hernaez MD** 847-668-7385.

How about an **Ice Bucket-like Challenge** for **FEU-NRMF Institute of Medicine?** And for the **FEUDNRSM Alumni Foundation?**



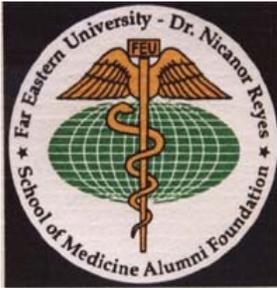
Make a donation... and make a difference.

Student Achievement Award \$50
FEU-NRMF Professorial Chair \$15,000
Tree of Life FEU-NRMF medical center building sponsorship
Indigent patients fund
Arsenio Martin MD
Scholarship Legacy Fund

Interested?
 Please inquire with **Cesar V Reyes MD**
acvrear@gmail.com **630-971-1356**

COMMENTS
Editorials, news releases, letters to the editor, column proposal and manuscripts are invited.
Email submission, including figures or pictures, is preferred.
PMAC News
Deadline for November 2014 issue
November 5, 2014
Please address submission to
acvrear@gmail.com

COMMENTS
 Editorials, news releases, letters to the editor, column proposal and manuscripts are invited. Email submission, including figures or pictures, is preferred.
ECTOPIC MURMURS
 Deadline for the November 2014 issue
November 19, 2014
 Please address submissions to
acvrear@gmail.com



FAR EASTERN UNIVERSITY DR NICANOR REYES SCHOOL OF MEDICINE ALUMNI FOUNDATION

36th ANNUAL REUNION & SCIENTIFIC CONVENTION

HONOREES

- Class⁶⁰ (Emerald Jubilee)
- Class⁶⁵ (Golden Jubilee)
- Class⁹⁰ (Silver Jubilee)
- Class⁷⁰ (Sapphire Jubilee)
- Class⁷⁵ (Ruby Jubilee)
- Class⁸⁰ (Coral Jubilee)
- Class⁸⁵ (Pearl Jubilee)
- Class⁹⁵ (20th Anniversary)
- Class²⁰⁰⁰ (15th Anniversary)
- Class²⁰⁰⁵ (10th Anniversary)



CLINICAL PRACTICE ADVANCES 2015

ACCME accreditation provided by
the **PHILIPPINE MEDICAL ASSOCIATION in CHICAGO**

July 8 - 11, 2015

Caesar's Palace Las Vegas

3555 Las Vegas Boulevard South, Las Vegas, NV 89109
(866) 227-5944 or (855) 901-0002

FEU- NRMF School of Medicine group code **SCFEU5**

or via Caesar's Palace hotel website <https://resweb.passkey.com/go/SCFEU5>

Room rates **\$109** for Wednesday and Thursday, July 8 and 9, 2015, and
\$169 for Friday and Saturday, July 10 and 11, 2015.

Cut-off date **Sunday June 7, 2015**