Beloved Patrons,

The “BER” months and serenades of Christmas Season are here again! Thank you for subscribing to the September 2016 issue of Medical Echoes and for patronizing this quarterly newsletter for the benefit of the public.

Last July 22, 2016, we launched our Wellness Assessment Center via cocktail get-together where we offered varied packages from detection to diagnosis. It was a cozy celebration with a good number of friends from both public and private companies who joined us and participated in the Q&A discussions right after some presentations.

It was a good turnout after our Wellness Launch as companies and individuals approached us for different health and wellness programs. At the same time, our Wellness team conducted further presentation to companies within the Metropolitan area as per request. We at UERM Hospital continues to advocate the impression that we do not just diagnose illnesses but we encourage prevention of illnesses through our Wellness programs.

I am also pleased to announce that we are celebrating our 60th Diamond Anniversary on June 15, 2017. This September, we will be having monthly activities as part of our Countdown to 60. This includes the 57th Founding Anniversary of the UERM Hospital on January 10, 2017. Similar to this year’s 56th Anniversary celebration, there will be lay forums, booth exhibitions and contests for the employees but the concepts would be more expressive to highlight our countdown to 60 years in June 2017.

We will also have Scientific Programs through International and Local Symposia which will be facilitated by our top alumni, faculty and staff related to Healthcare services and achievements of UERM. We are extremely proud of our Alumni’s outstanding achievements and I look forward to seeing continuous success of our employees.

The monthly activities are open to our valued employees while some are also open to the public. You may check our Website and Facebook pages for the upcoming events that may interest you.

We will persistently reach out for opportunities to extend our network and to connect with more healthcare professionals in the country who share our common interests. Lastly, I am excited about the opportunity to serve a wider community through the planned renovation and improvement of the UERM Hospital. It would mean better facilities, expansion of quality services, more competitive fees and enhanced convenience to the general public.

I want to express my gratitude to co-members of the Administration and the hard works of all the Diamond Jubilee Executive Committee members, faculty, staff and students who are helping to make our Diamond Anniversary celebration next year, a successful one.

Before then, I wish you more joyful and productive BER months ahead!

Remarks from the VPHS
by Dr. Maribeth T. de los Santos

It’s the “ber” months again and during these times, some people get respiratory tract infections manifested by coughs and colds, sneezing, runny nose, etc. In this issue of the Medical Echoes, the featured article is on “The Causes of Multiple Lung Problems” by Dr. Ricardo Zotomayo. Readers will get a concise discussion on the different causes of lung problems from their manifestations, to treatment and prevention.

The article on Hepatitis B by the renowned expert in hepatology, Dr. Erlinda V. Valdellon, highlighted the global significance of hepatitis B infection, especially in the Philippines, where the disease is considered hyperendemic. The manner of transmission and prevention was clearly discussed and emphasized.

Raising awareness regarding epilepsy thru regular conduction of Epilepsy Lay Forum by the Department of Clinical Neurosciences is indeed commendable. Kudos to the department!

Several events are also featured in this issue: the National Disability Prevention and Rehabilitation Week celebration last July 17, 2016, spearheaded by the College of Allied Rehabilitation Sciences, the Nutrition Month celebration, with its theme “First 1,000 Days ni Baby Pahalagahan Para sa Malusog na Kinabukasan,” underscored the importance of proper nutrition during the first 1,000 days of life, and the launching of the Wellness and Assessment Center. The latter was held last July 22, 2016, which was attended by the middle and top management personnel from some companies around Metro Manila. Different health screening packages that may detect conditions that may cluster in a particular age group were presented, which was followed by a lively question and answer portion.

The D-Dimer Test is a welcome additional diagnostic test in the Central Laboratory. For most clinicians, it is important in determining whether a patient most likely has pulmonary thromboembolism, which is one of the most common causes of preventable in-hospital deaths. Dr. Janet Dy, the Head of the Department of Pathology, gave a brief description of what the D-Dimer assay was all about.

The ever-active Chief Nurse, Mrs. Norie Magsingit, enumerated the different initiatives being conducted by the Nursing Service to foster a culture of Safety, Efficiency and Excellence, especially among the nursing staff in the hospital.

Lastly, I would like to congratulate Dr. Luis Salvador and Dr. Alma Calvera and the residents, staff nurses and nurse aides for making it in the list of most commended staff based on our Patient Satisfaction Survey. Keep up the good work!
Pulmonary conditions remain to be one of the leading causes of death and sickness both in the Philippines and worldwide. These lung diseases demand a huge amount of resources, manpower and loss of income and premature loss of life when they develop.

LOWER RESPIRATORY INFECTIONS
Respiratory tract infections, especially pneumonia and tuberculosis, represent the leading causes of hospital admission and billions of pesos in Philhealth claims.

Early detection of these respiratory infections is the key to effective treatment and prevention of spread. A child or an adult with cough lasting two weeks or more requires investigation for the possibility of pulmonary tuberculosis and we have the DOTS clinic at the P. O. Domingo Out-Patient Clinics to evaluate these patients. Under the NTP DOH program, patients can avail of the diagnostic tests and a guaranteed full 6 months of treatment for those who will need this special assistance.

Sputum Gene Xpert test, a PCR-based rapid test for TB and rifampicin resistance, is available in our laboratory for those who need a test with a fast turn-around time and in patients suspected of drug-resistant infection.

Pneumonia developing in the community remains to be largely due to bacterial infections, one third of which is attributable to S. pneumoniae, which may develop on its own or following a viral infection like influenza.

There are effective vaccines for the prevention of seasonal influenza and pneumonia from Streptococcal infection and are available in the hospital pharmacy. These vaccines are widely recommended with highest level of recommendation and have been shown to be cost effective.

Flu vaccine is highly recommended for risk groups like the elderly and/or with chronic medical conditions and whoever wants protection especially during the two peak Philippine influenza seasons: at onset of rainy season and beginning of the colder “ber” months. The local vaccination guideline also recommends pneumococcal vaccine with preference for PCV 13 (pneumococcal conjugate vaccine 13) for persons 50 years and older, but at any age if they are diagnosed with diabetes mellitus, cancer or any immunocompromising condition. Asthmatics and smokers are two groups of patients who are also at risk of developing pneumococcal infection and should be vaccinated at any age.

ASTHMA AND CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)
Obstructive airways disease is another group of lung conditions that has affected a significant number of Filipinos. The (2007) worldwide study on the prevalence of COPD estimates that 12-14% of the Philippine population have COPD and asthma prevalence is estimated to be 6.2% among Filipinos (Global asthma burden report 2004).

While asthma has a strong underlying genetic risk, COPD is largely avoidable if people shun smoking which is the number one cause for most of those who suffer from this condition. Both the Global Initiative for Asthma (GINA) and GOLD (Global Initiative for Chronic Obstructive Lung Disease) strongly recommend the use of spirometry for the initial diagnosis and follow-up care of asthma and COPD.

A new concern is raised about the presence of a group of persons who have symptoms and features of both asthma and COPD currently labelled ACOS (Asthma COPD Overlap Syndrome). Inhaled corticosteroids is the core management for asthmatic patients with persistent symptoms while maximal bronchodilator therapy is the foundation of COPD management, while patients with ACOS are treated in the same way as asthma.

For both conditions smoking cessation is important and strict avoidance of exposure to triggers like smoke, dust, pollutants, chemicals is recommended. Both groups of patients are likewise advised to receive seasonal flu vaccination and an effective pneumococcal vaccine.

LUNG CANCER
It is most unfortunate that despite strong advocacy programs from the government and private enterprise such as PCCP (Philippine College of Chest Physicians) against smoking, the vice remains highly prevalent among both male and female Filipinos and contributes largely to COPD and (tragically for most who develop them) lung cancer.

Anyone who smokes with prolonged cough, unexplained weight loss and blood in their phlegm needs full evaluation for the possibility of lung tumor. Persons who have stopped smoking remain at risk for lung cancer and are advised to undergo periodic evaluation that may include yearly low-dose chest CT scan for the next three years after quit time.

Lung infection, obstructive lung disorder asthma/COPD and lung cancer are real major problems. So the next time you have a nagging cough, difficulty of breathing and or unexplained weight loss, consult at UERMMMC and your pulmonologist will help you out!

References:
1. Philippine Guideline on CAP 2016
2. GINA at www.gina.com
3. GOLD at www.gold.com
Learning About the D-Dimer Test

by Dr. Janet L. Dy, Head, Department of Pathology

D-Dimers are produced by the action of plasmin on cross-linked fibrin fragments D. This indicates that the coagulation system had been activated and thrombin has been generated.

D-DIMER IS A:
1. DIRECT MARKER OF ACTIVE FIBRINOLYSIS
2. INDIRECT MARKER OF ON GOING COAGULATION.

ELEVATION OF D-DIMER LEVELS CONFIRM THAT THROMBIN GENERATION AND PLASMIN GENERATION OCCURRED.

Normal Range: 0 - 386ng/ml FEU
(the value varies with method and equipment used)

CLINICAL USES INCLUDE EVALUATION FOR:
- Disseminated Intravascular Coagulation (DIC)
- Pulmonary embolisms (PE)
- Ruling out Deep Vein Thrombosis (DVT)
- Myocardial Infarction (MI)
- Monitoring anticoagulant treatment

THERE ARE TWO D-DIMER ASSAYS AVAILABLE IN OUR HOSPITAL LABORATORY.

RAMP® 200
A rapid, precise, and accurate immunochromatographic test for quantification of d-dimer and other cardiac markers

HOW IT WORKS:
Fluorescent dyed particle coated with anti D-Dimer antibody bind to D-Dimer present in the sample

SYSMEX® COAGULATION ANALYZER CA 600
A fully automated laboratory analyzer

HOW IT WORKS: The system uses an immunoturbidimetric, particle-enhanced via the Innovance® D-dimer immunoassay
D-Dimer Test

RAMP® D-DIMER TEST

ADVANTAGES OF THE TEST
- Rapidly and easily assess the D-Dimer levels of patients suspected of having PE/DVT
- Triage patients more accurately and efficiently
- Reduce patient length of hospital stay

COLLECTION AND TRANSPORT
Specimen = whole blood
Container = Lavender top (EDTA)
Collection = Routine venipuncture

TURNAROUND TIME = APPROXIMATELY 15 TO 20 MINUTES

LIMITATIONS OF THE TEST
- False positive result in Renal Failure
- Falsely elevated in all patients after surgery / trauma
- Falsely elevated or decreased in hyperlipidic blood sample

SYSMEX® CA-600 SYSTEMS WITH INNOVANCE® D-DIMER*

In our setting, this fully automated, high throughput system is recommended for large volume testing for clinical research.

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THE DEPARTMENT OF PATHOLOGY AND LABORATORY,
UERM MEMORIAL MEDICAL CENTER, INC

The information is to be used only as a primer by clinicians, laboratory staff, and allied health professionals, and is not meant to replace the primary source of information about the D-Dimer test, RAMP® 200 and D-Dimer Test, and SYSMEX® CA-600 Systems with INNOVANCE® D-Dimer.

References: D-Dimer Testing Indication, Reference Range, Medscape
www.emedicine.medscape.com; RAMP® 200 and D-Dimer Test Product Information; Sysmex® CA-600 Systems with InnoVance® D-Dimer Product Information
How Can You Help Others Become Seizure-Free

by Dr. Erman C. Fandialan, Department of Clinical Neurosciences

“Dok, may epilepsy po sya…”, “Dok, nagsisisors po kasi sya”, “Dok, tumirk po ang mata nya tapos, nagkumbulsyon!” These phrases are all too familiar to any doctor, as they are common reasons given either in the emergency room or in the outpatient clinics. What are these conditions anyway? Epilepsy is a disorder of the brain characterized by an enduring predisposition to generate epileptic seizures, by the neurobiologic, cognitive, psychological, and social consequences of this condition (ILAE, 2014). Seizures, on the other hand, refer to paroxysmal electrical discharges of the brain, which may lead to a wide range of sudden alteration in the central nervous system. The clinical manifestations may be focal, or generalized. Sometimes, they may appear as physical disturbances in motor, and/or sensation, wherein a common example are convulsions, which are intense, fits of involuntary repetitive muscular contractions. At times, seizures may also appear as disturbances of sensorium and consciousness. The sudden electrical disturbances may be due to structural problems in the brain (ex. tumors, stroke, developmental abnormalities, etc), CNS infections (ex. Meningitis, encephalitis), genetic mutations of the different ion channels, or, sometimes, the cause is unknown. How is epilepsy diagnosed? The most important is the history of the condition being investigated: the character of the event, frequency, duration, response to medications (if any), and the preceding factors. The doctor may request some diagnostic tests to help in the diagnosis. An electroencephalogram (EEG) translates the brain waves to visible lines, which may show the sudden electrical discharges coming from a certain portion of the brain. Neuroimaging such as Magnetic Resonance Imaging (MRI), CT Scan, and transcranial ultrasound may help in detecting organic brain lesions. Blood tests to check for electrolytes and blood gas may also be done. Definitive treatment depends on the identified cause, but one of the mainstays of management is giving of anti-epileptic medications to help control the seizures. There are many types of anti-epileptic medications, and the choice of medications will be discussed by the doctor as it will be tailored individually to the patients’ needs.

Every year, the Philippine League Against Epilepsy and the Philippine Neurological Association host activities to promote epilepsy awareness. For more than a decade, the University of the East Ramon Magsaysay Memorial Medical Center Inc. Department of Clinical Neurosciences participates in this endeavor by conducting an Epilepsy Lay Forum. This event aims to raise awareness regarding the condition, recognition, common misconceptions, truths, and course of treatment. This event caters to patients from the seizure clinic from the outpatient clinics of both Adult and Pediatric Neurology, but is also open to anyone who is interested to know more about epilepsy. This year, aside from discussion on the basic knowledge, a speaker from the National Council on Disability Affairs will also talk about the benefits and privileges an epilepsy patient can get when he or she applies for a Person with Disabilities ID. The lay forum is free, and will be held on September 10, 2016, from 1 to 4 pm at JMC Auditorium 1, UERMMMCI campus.
UERM “CARes” for 38th NDPR Week Celebration

As an advocate of empowerment and rights to equal opportunities among differently abled individuals, the University of the East Ramon Magsaysay Memorial Medical Center, Inc.-College of Allied Rehabilitation Sciences (UERMMMCI-CARes) in partnership with the UERM Hospital- Department of Physical Medicine and Rehabilitation, once again stands with the entire nation as they successfully celebrated the 38th National Disability Prevention and Rehabilitation Week with the theme, “Karapatan ng May Kapansanan, Isakatuparan...Now Na!” last July 17-24. This annual event aims to promote the full participation and equality of rights and opportunities for persons with disabilities in Philippine society. Various activities were done all throughout the week to emphasize the role of every individual in recognizing and implementing the rights of our differently abled brothers and sisters.

The institution’s celebration kicked-off last July 17 as the CARes joined the Philippine Academy of Rehabilitation Medicine (PARM) Making Ourselves Vigilant to Exercise (MOVE) by sending delegates in attempting a world record for the biggest human accessibility logo at Greenhills, San Juan City.

It was in the morning of July 18 that the college formally opened the week-long celebration starting with a mass followed by the opening program attended by the university employees, faculty and students. Mr. Abner Manlapaz, President of Life Haven Independent Living and a long-time wheelchair user, inculcated in the minds of the audience that PWDs are not different as he delivered his inspirational message. He emphasized that they should not be treated differently as they are the same with the most of us-motivated, empowered, and independent in their own ways. This was further purported by Ms. Shane Regalado, a patient in the PO clinic, as she serenaded the audience with her magnificent voice during the program. Also on that day, Poster Making contest was done showcasing the artistic interpretation of the contestants of this years’ NDPR week celebration theme. Simultaneous with this event was a lecture about the Community-Based Rehabilitation in the Philippines given by the invited resource speaker from the University of Sydney, Mr. Victor Lee.

With the advent of emphasizing the right to available opportunities among our differently abled brothers and sisters, certain activities in partnership with the different organizations and institutions were also highlighted.

With the efforts of Dr. Josephine Bundoc, in behalf of the Physicians for Peace, 10 students from the Philippine National School for the Blind and 3 patients from the UERM Hospital’s Out-Patient Clinics were able to receive talking watches and assistive devices. The UERMMMCI PT Alumni Association also took part in donating some canes for the elderly patients. Right after the distribution of assistive devices, speakers from the Resources for the Blind, Inc. equipped the CARes students with the basic knowledge and skills on how to train and assist those visually-impaired individuals. Free hearing screening and tests were also conducted by the 2 UERM PT Alumni- Dr. Oliver Glenn Domingo, PTRP, MD, DPBO-HNS and Mr. Vicente Mesina III, PTRP, MCLAud at the UERM Hospital - Department of Physical Medicine and Rehabilitation. Hearing aids may be funded for those who are eligible based on the screening and tests results. In addition to this, the WHO certified wheelchair assessors of the college also conducted Wheelchair Assessment and Mobility Training for those patients who are in need of customized and individualized wheelchair. Latter Day Saints Charities (LDSC) will provide the wheelchair upon the request of the assessors. Lay forum for Amputee Patients on how to take care of their stumps during and in preparation for prosthetic use was also executed at the UERM CARes Clinic and Training Center (CTC).

To make the event more meaningful for the people of the university and of the medical center, the whole week was packed with a bunch of activities that involve the students and employees such as Taebo, Mind Wars, Yoga, Zumba, and Free BMI and Blood Sugar Screening.

The week-long celebration was concluded with the University and the Medical Center partnership during the Medical Mission headed by Dr. Dorothy Dy Ching Bing-Agsaoay at Barangay Malaria, Caloocan City last July 24.
2016 National Disability Prevention and Rehabilitation Week Activities

PARM M.O.V.E

Mass and Opening Program

Lay Forum for Amputee Patients

Free Hearing Test
Community-Based Rehabilitation in the Philippines Lecture

Free BMI and Blood Sugar Screening

Visual Impairment Training Program and Assistive Devices Distribution

Wheelchair Assessment and Mobility Training
Medical Mission

Gait Laboratory Workshop

Taeho

Yoga
Mind Wars

Zumba
Hepatitis B: Prevention and Diagnosis
by Dr. Erlinda V. Valdellon and Dr. Michael Arrosas, GIT Liver Study Unit

Last July 28, 2016, the world celebrated “WORLD HEPATITIS DAY”. The three pronged thrust includes testing, treatment and vaccination with a goal to eradicate Hepatitis B by 2037. Hepatitis B is a contagious liver disease caused by infection of Hepatitis B virus. This illness ranges in severity from a mild illness lasting a few weeks to a serious, lifelong illness, can be either “acute” or “chronic”. Approximately 2 billion people around the world are showing signs of hepatitis B infection and around 300 to 400 million among them already have lifelong hepatitis B. Around the world, the Philippines ranked 5th with the highest prevalence of hepatitis B. As many as 1 in every 10 Filipinos have Chronic Hepatitis B and most of them do not even know that they are infected with hepatitis B virus. Chronic hepatitis B can lead to liver cirrhosis and liver cancer, and Liver cancer is the 2nd leading cause of cancer related deaths among Filipinos. A person can get infected by hepatitis B when there is exposure to blood, semen, or other body fluid infected with the hepatitis B virus. This usually occurs during birth from an infected mother, unprotected sex with an infected partner, sharing needles, syringes, or other drug-injection equipment, sharing items such as razors or toothbrushes with an infected person and direct contact with the blood or open sores of an infected person. Majority of Filipinos are infected during birth; this mode of infection has an 85% chance to result in a Chronic Hepatitis B Infection. These Chronic Hepatitis B individuals show no signs of infection and are themselves carriers of the virus where they can infect other people. Hepatitis B has no curable treatment. The virus has the ability to integrate itself to the infected host. Current medical technology can only control the rate of infection and keep the viral replication at a minimum. The best and most effective treatment so far is prevention. As one of the countries where Hepatitis B is hyperendemic, Filipinos should be screened for Hepatitis B. Most importantly pregnant women, those with sexual partners infected with Hepatitis B, those with multiple sex partners, those men who have sexual contact with other men, those who had history or currently are injecting drugs or share needles, syringes, or other drug equipment, those who live with a person who has chronic hepatitis B, people who are exposed to blood on the job and hemodialysis patients. The most effective prevention method is vaccination. The Hepatitis B vaccine is safe and effective and is usually given in three (3) doses over a 6-month period. It is very important that mothers should be tested for hepatitis B. Those babies born to mothers with chronic hepatitis B can be protected by giving the first dose of the vaccine within 24 hours after birth; consult your doctor now and get yourself tested/vaccinated for hepatitis B. Together, let us join hands in making hepatitis B elimination as the next greatest human achievement.
SONSA (State of the Nursing Service Administration Address)

The Nursing Service Department holds a general assembly twice a year to update all members of the Nursing Service on current projects and the direction of our hospital based on the result of Strategic Planning. Likewise, it is designed to instill common understanding on the changes and issues, and the new policies and procedures of the nursing service, as well as the entire institution/hospital.

CASE PRESENTATION

“The Urinary System”, May 25, 2016; 1300H, AVR Training Hospital

Quarterly, the Nursing Service identifies groups who will present their case studies. The purpose of the case study is to apply nursing process to a patient/family under the nursing staff care. In order to complete a case study, the nursing staff must complete a health history and physical analysis data from assessment, diagnosis problems, action plans to resolve problems, implement the plans and evaluate the progress of the plans.

A nursing case study is an in-depth examination of a situation that a nurse encounters in her daily practice. It offers a safe way for the nurse to apply theoretical and actual knowledge to an actual or potential patient scenario. He/She can employ his/her decision-making skills, use critical thinking to analyze the situation, and develop cognitive reasoning abilities without harming a patient.

In coordination with the Hospital Business Unit (HBU), the Nursing Service conducted an Orientation on Turnaround Time of Patient Services last July 20, 2016.

The general objectives of the orientation are to recognize the importance of recording the turnaround time for patient services by accomplishing the turnaround time form accurately and the timeliness in preparing the patients for the scheduled diagnostic procedure.

The delivery of quality services of the hospital is the core organization goal of the orientation. After the discussion, Engr. Christopher Domingo from the HBU facilitated the Q & A session with the nurses pertaining to the turnaround time on the services of the different diagnostic units.
A customized hand-off tool was developed by Nursing Service to be utilized when endorsing patients to a diagnostic area. The main objective of hand-off tools is “to improve patients safety”.

The Nursing Service staff are oriented on this matter which was also presented during the meeting with the chiefs of different diagnostic clinics.

S = Standardize critical content
  • Give the receiver details of the patient’s history.
  • Emphasize key patient data for the receiver.
  • Synthesize patient data from different sources before sharing it.

H = Hardwire within our system
  • Develop standardized forms, tools, and methods such as checklists.
  • Work in a quiet space that is conducive to sharing patient information.
  • State expectations about conducting a successful transfer.
  • Identify technologies to help make hand-offs successful.

A = Allow opportunities to ask questions
  • Use critical thinking skills when discussing a patient.
  • Share and receive information as an interdisciplinary team.
  • Expect to get all key patient data from the sender.
  • Exchange contact information in case questions arise later.
  • Scrutinize data and question it, if needed.

R = Reinforce quality and measurement
  • Demonstrate leadership commitment to successful hand-offs.
  • Hold staff members accountable for managing the patient’s care.
  • Monitor compliance with standardized hand-offs tools and processes.
  • Use data in a systematic approach to improvement.

E = Educate and coach
  • Teach staff members what makes a successful hand-offs.
  • Standardize training on performing handoffs.
  • Give staff members real-time feedback and just-in-time training.
  • Make successful hand-offs a priority.
Highlights of the Nutrition Month Celebration
by Ms. Cindy G. Chua, Head, Dietary

Nutrition Month 2016 Theme: “First 1,000 days ni Baby Pahalagahan Para Sa Malusog Na Kinabukasan”

Based from the National Nutrition Council, the Nutrition Month is a campaign held every July to create greater awareness among Filipinos on the importance of nutrition while Presidential Decree 491 (1974) or the Nutrition Act of the Philippines mandates the National Nutrition Council (NNC) to lead and coordinate the nationwide campaign. The Dietary Services supported and celebrated the Nutrition Month 2016 with a theme: “First 1,000 days ni Baby Pahalagahan Para Sa Malusog Na Kinabukasan”

For this year’s theme, we highlighted the importance of proper nutrition and early childhood care and development during the First 1,000 days of life - starting from the first day of conception until the 2nd birthday of the child - globally considered as the “golden window of opportunity” for interventions to achieve maximum potential of a child’s growth and development. The said campaign aims to create awareness on the significance of good maternal nutrition and proper infant and young child feeding practices, particularly, exclusive breastfeeding for the first 6 months and giving of appropriate complimentary foods on the 6th month while continuing breastfeeding, and the continuum of services in early childhood care and development.

This year’s Nutrition Month was spearheaded by Mrs. Lorena Saculingan, Nutrition Month 2016 Chairperson and was supported by the following dietitians: Ms. Mary Joy Camerino - Vice chairperson, Mrs Annaliza Jano - Food Committee/Ways and Means in-charge, Mrs. Dale Bacungan - Programme in charge, Mrs. Maritess Ongpauco -Technical and Physical set-up in-charge and Mrs. Catherine Natagoc - Invitation and Documentation in-charge. Together with our Dietary staff, the Nutrition Month 2016 presented a series of health forums. We also coordinated with the Executive Director for Business Development, Corporate & Alumni Affairs Ms. Cherrie D. Fabillaran in the promotion of our Nutrition Month activities.

With our goal in mind, promoting proper nutrition to patients, UERM employees and BS Nutrition and Dietetics students from UST and other schools were this year’s target audience. There were an estimated 250 total number of attendees in our health forum series on the following dates: July 12, 13, 15, and 19, 2016. Together with our dietitians, we also invited Dr. Marth Louie Z. Tarroza, Dr. Danilo Del Rosario, and Dr. Mary Nie Dayanhiran on our health forum series.

During the Nutrition Month Celebration, we were able to provide free vitamins and other freebies every after activity. Additionally, dietary services also provided 50% discount rates for outpatient diet counseling till July 31, 2016.
Outpatients who were present during Nutrition Month Health forum series

Dr. Marth Louie Z. Tarroza’s lecture on July 13, 2016

Dr. Danilo Del Rosario’s lecture on July 15, 2016

Dr. Mary Nie Dayanghirang’s lecture and other dietitians on July 19, 2016
Client Care Updates
by Ms. Joni Mitchele L. Langcay, Client Care Specialist

Most Commended Staff Based on Patient Satisfaction Survey (PSS)

2nd Quarter of 2016

**Doctors**
Dr. Alma Calavera
Dr. Luis Salvador

**Residents**
Dr. Antonio Lorenzo Quiambao
Dr. Antonio Miguel Unabia
Dr. Al Omar Salting
Dr. Christian Emmanuel Lim
Dr. Clive Kevin Ortañez
Dr. Carlos Luis Alfonso Hernandez
Dr. Eliseo George Ave
Dr. France Jo Anne Abella
Dr. Godofredo Gasa
Dr. Joy Cheryl Chua
Dr. Jayme Natasha Paggao
Dr. Kathleen King
Dr. Kamly Anne Yu
Dr. Krizelda Timbang
Dr. Lauren Francesca Chiu
Dr. Leila Marie Bautista
Dr. Milagros Andrea Victoria Lazo
Dr. Marth Louie Tarroza
Dr. Pamela Angulo
Dr. Rey Karlo Antonio
Dr. Raphael Angelo Madarcos
Dr. Vicente Tanseco III

**Staff Nurses**
Anne Lorraine Viray
Araceli Mangabat
Annalyne Antazo
Charisse Moraga
Carlo Angelo Vejano
Dianne Marie Reyes
Danica May Parras
Darrel Villanueva
Jacquelyn Gabito
John Paul Gregorio
John Oliver Ferrer
Joel Aquino
Joy Demeterio
Joy Magdaluyo
Jennelyn Gilo
Janine Alina Alcantara
Laiza Bianca Victoriano
Michelle Anne Susmiran
Pauline Angelica Pagauisan
Ruel Cacayurin
Rowell Padilla

**Staff Nurses**
Ann Jellyn Manalastas
Camille Claire Liaga
Donna Carandang
Imee Jane Agatemp
Jiorella Pauline Bueno
Jemsel Valdez Jr.
Jasmine Camille Santos
Lora Jean Berengonio
Maidene Cayabyab
Mauriel Merlin
Milicent Ragasa
Odette Yvonne Pua
Russel Vincent Rivera
Richard James San Jose
Trixy Crisostomo
Tristan Juris Rivera

**Nurse Aides**
Arthur Gozum
Cristina Silong
Donna Lyn Villegas
Junalyn May Doria
Kyra Hester De Leon
Mark Dela Cruz
Marivic Doria
Natividad Cayabyab
Polly Corpuz
It was a successful launch of the Wellness & Assessment Center in UERM Hospital last July 22, 2016. VIP from the different industry sectors such as Financial, Healthcare, Advertising, Education, and Broadcast Media celebrated with us. Members of the UERM Administration, Physicians, and UERM employees were likewise gathered together for this momentous occasion.

The ceremony kicked-off with a serenade from the invited balladeer followed by the acknowledgement of guests. Dr. Romeo A. Divinagracia, President of UERMMMCI, delivered the welcome remarks. Dr. Maribeth T. Delos Santos, Vice President for Hospital Services presented the various comprehensive packages of the Wellness Assessment Center and it was followed by a Q & A session with interesting queries raised by the guests which were appropriately addressed by Dr. Delos Santos. Raffle prizes were given to four (4) lucky guests who were entitled to avail the Wellness packages for free. Two (2) winners came from the Immaculate Heart of Mary College who received 1 Basic and 1 Bronze packages while 2 winners were from Focus Media Advertising who received both Basic packages. The winners were given the privilege to book their appointments at their timing preferences.

The Medical Director, Dr. Norbert Lingling Uy, shared his closing remarks and opened the floor for networking and serenading among guests as facilitated by the UERM hospital team.

Our Wellness Assessment Center is now ready to serve you at your utmost convenience. Please contact our Wellness Coordinator at 715-08-61 local 264 for appointments and inquiries.
The Business Development Office created a special feature advertisement on Diagnostic Spirometry for the massive information of the public. It will be posted on the marketing board of the hospital lobby. It has also created a flier on Blood Donation Program to engage heroic UERM volunteers in saving and giving lives, in compliance with the recent instruction of the VP for Hospital Services.

Last June 23-24, 2016, the Business Development Office assisted in the creation of advertisement and actual coverage of the 2-day Basic Life Support and Advance Cardiovascular Life Support (BLS-ACLS) course activities for the Physicians. This course, patterned after the American Heart Association’s Heart Saver Course, was initiated by Dr. Maribeth T. Delos Santos, VP for Hospital Services.

In coordination with the I.T. department (programmer) and Hospital Business Unit (adviser), the Business Development Office will lead in the provision of context for the launching of a dedicated UERM hospital website by the 4th quarter of 2016. With the onset of a separate website for the hospital, a more focused, latest updates on the services, diagnostics and state-of-the-art facilities will be highlighted.
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• Dr. Erman C. Fandialan
• Dr. Raquel S. Cabazor
• Dr. Erlinda V. Valdellon
• Dr. Michael Arrosas
• Ms. Cindy G. Chua
• Ms. Joni Mitchele L. Langcay

Lay-out Artist: Evandolf C. Mora
Adviser: Romeo A. Divinagracia, MD, MHSA

The Countdown to 60th Anniversary Celebration
KICK-OFF PROGRAMS

YOGA FOR WELLNESS

Experience yoga to help you calm and balance the mind and body. No intimidating poses, only gentle poses. Open to first-timers in yoga.

Date: September 8 & 15, 2016
Time: 4:00pm to 5:00pm
Venue: Rooms 110, G/F, Administration Building, UERMMMCI
Facilitator: Ms. Diwee Isidro
Attire: Comfortable clothes (t-shirts and leggings/jogging pants)
Maximum Participants: 12 per session
Registration: Graduate School, 3/F, Administration Building
Registration Deadline: September 2, 2016

GUIDELINES:
1. Open to all UERM employees (permanent and contractual).
2. Early registration is encouraged. First-come, first-serve.
3. Bring your own towel, floor mat and other toiletries.

COOKING FOR WELLNESS

Rediscover traditional Filipino food, prepare them in delicious ways and avoid diseases. Open to everyone.

Activity: COOKING DEMONSTRATION
Date: September 29, 2016
Time: 2:00pm to 5:00pm
Venue: Graduate School Lecture Rooms, G/F, Nursing Building, UERMMMCI
Facilitator: Dr. Susan Balingit
Maximum Audience: 30-50 persons
Registration: Graduate School, 3/F, Administration Building
Registration Deadline: September 15, 2016

GUIDELINES:
1. Open to all UERM employees (permanent and contractual) and to the PUBLIC.
2. Seats are limited. Early registration is encouraged.

Wellness Assessment Center
Now Open to Serve You

For Suggestion and Subscriptions:
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