



Official Publication of the FAR EASTERN UNIVERSITY
Dr Nicanor Reyes Jr School of Medicine Alumni Foundation

ECTOPIC MURMURS

Volume 29

Number 10

April 2017

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

FEUMAANI stuns at the PMAC!



The Far Eastern University Medical Alumni Association in Northern Illinois, led by Richard Mon MD⁷⁰, performs a glorious rendition of *Singkil* a traditional exotic dance of Lanao Island derivation during the 56th Philippine Medical Association in Chicago and 50th Philippine Medical Association in Chicago Auxiliary (led by Nida Blankas-Hernaez MD⁸⁴) and Foundation anniversary interuniversity musical variety show held recently at the Hyatt Regency Hotel O'Hare in Rosemont Illinois. Among the dancers/ participants were Queen Leilanie Mon MD⁷²; King Rhey Adriano; Princess N Blankas-Hernaez MD⁸⁴; Ladies in waiting Clarito Distor RN and Evan Suan MD; Damas Pauline Abadilla RN, Noemi Fogata MD⁶⁹, Glenora Frayna, Rose Hipona, Bessie Lecaroz RN, Violeta Magsino RN, Lin Rejano RN, Anita Rosa, and Remedios Sales MD⁶⁵; Props Man Arturo Fogata MD⁶⁷, Virgilio Magsino MD⁶², R Mon MD⁷⁰, Pascual Sales MD⁶⁵, Manuel Malicay MD⁸⁴, and Ed Rallos; Bamboo holders Robert Chavez, Ben Geronimo, Chris Lecaroz and Joey Rejano; Goger Medardo Abadilla; and Music director Bong Hipona.

The morning continuing medical education seminar on endocrine update featured Nunio G Rubio MD as the 11th professorial lecturer on *prediabetes*, supported by an equally elegant talk on *short stature: is it important?* by a pediatric endocrinologist Susan B Nunez MD⁸³ of the University of Texas at Austin.

The CME program was organized by Cesar V Reyes MD⁶⁸ and N Blankas-Hernaez MD⁸⁴. *continue to page 7*

PRESIDENT'S Message

A blessed belated Easter to you and your family and may Our Dear Lord grant us wisdom, patience and perseverance to withstand and meet all the challenges in life. Peace to you. The Lenten season, Easter celebration are important events in our lives that transforms us to what we are as we spread love and peace to our fellowmen.

The Winter board trustees meeting was just concluded in Las Vegas with updates, new ideas, improvements, calculated risks and important preparations for our 38th annual reunion. Everything that was discussed had an ultimate goal in mind; work together for the common good. Through the years, it has been wildly noticed that quorum was always in question. Being a board trustee is such a privilege that entails the duty to uphold what our constitution demands of us. Such mandate includes the two very important events namely, the Winter and Summer board meetings which are held in July and March, respectively, of the same year. I pray that all trustees must bear in their hearts those significant events. I treasure the support and sacrifices of everyone however the current situation is likened to a root in an arid ground which need droplets of attendance to enliven the withered plain. Our organization demands the very best from us. In the same token, I

continue to page 19

From your CHAIRMAN

The March 25, 2017 Winter b trustees meeting went through all right. At first there was some question about quorum. On checking the Monte Carlo room registration there were less than 10 who registered. Some members decided to stay with their relatives and some had stayed with the casinos that offered specials that weekend. There about 24 and we definitely had a quorum to transact important business that concerns the Foundation.

Minutes of July 8, 2016 Summer meeting was read by Nida Blankas-Hernaez MD, secretary, and I cannot discuss the corrections, etc, until we see the final minutes. The Chairman's report and the President's report followed. Amethyst Cureg MD, new Treasurer, read the Treasurer's report and apologized for being new in this job. She did well and of course with help from our outgoing treasurer, Grace Budy Rabadam MD, and making sure our approval as non-profit corporation is carried out by our President Jun Castro who did all the leg work to keep our Alumni Foundation going notwithstanding all the legal ramifications involved in the process. Pete Florescio MD gave the executive director's report. The prices are not quite final yet but it will be. The item also of combining the welcome reception and Filipiniana was

continue to page 18



NOLI C
GUINIGUNDO MD

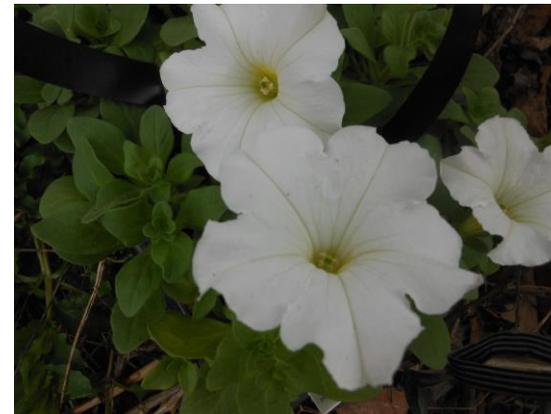
BENZON Endowed Professorial Fund in Anesthesiology

HONORIO T BENZON MD⁷¹
Honorio T. Benzon and Julieta P. Benzon Endowed Professor in



HONORIO T
BENZON MD

Anesthesiology is recently established. Or, if there is already an endowed professor in anesthesiology, the alternative is Honorio T. Benzon and Julieta P. Benzon Endowed Professor in Medicine (Hematology-Coagulation) as I have published studies on coagulation and co-wrote the American Society of Regional Anesthesia guidelines on regional anesthesia (and also on pain interventional procedures) in patients in anticoagulants.



WHITE PETUNIA

FAITH CORNER

REVEREND MELVIN ANTONIO MD⁶⁵
Year after year, we observe Holy Week with the utmost reverence. The Season of Lent prepares us for the climactic week that is ushered in by the triumphal entry of Jesus into Jerusalem on Palm Sunday. In quick succession, the theme of triumph fades into arrest, trial, torture, death by a most cruel method devised by man. Good Friday is upon us all. It is inevitable that even after 2000 years, we dare to ask, *Why did Jesus have to die?*

For the answer, we go back another thousand years to hear the words of the Prophet Isaiah: *He was despised, and we held him of no account. Surely he has borne our infirmities, and carried our diseases; yet we accounted him stricken, struck down by God and afflicted. But he was wounded for our transgressions, crushed for our iniquities; upon him was the punishment that made us whole; and by his bruises we are healed... Yet it was the will of the Lord to crush him with pain... Out of his anguish we will see light... because he poured out himself to death and was numbered with the transgressors; yet he bore the sins of many, and made intercessions for the transgressors. Isaiah 52:13-15; 53:1-12*

The words of the prophet leave no doubt

continue to page 17



REV MELVIN
ANTONIO MD

OUR AGING LIFE

CESAR D CANDARI MD⁶¹
FCAP Emeritus

When we start thinking about life and living, it is all connected with leaving a legacy. From a purely practical standpoint, if you don't pass on your life experience by leaving a legacy, the wisdom you've gained through decades of difficult learning will disappear as your physical body wears out.

As we go through life, we learn from the past, living in the present, and building for the future. With varying levels of awareness, individuals also inevitably reflect on the people, work, ideas, commitments, and social institutions that have given their lives shape and meaning.

We all need time to restore our bodies and minds, and having time to relax can be one of the most valuable gifts in this busy world. As long as we have life, we can learn to be grateful for it and uncover our unique human blessings despite hardships.

Every New Year, we go through life, we get older and realize we are continually waging war against time. We have no choice but to feel reluctant that another year is added to our official age, and, with acceptance, simply rationalize that indeed, all of us are a year wiser, but not aged. As we inevitably all get old, as we've aged,

continue to page 15

IS PATIENT DEATH RATE IN USA LOWER AMONG NON- USA SCHOOLED MDS?

PHILIP S CHUA MD⁶¹, FACS, FPCS

About 25% of physicians practicing in the United States graduated from foreign medical schools who had their internship/ medical/ surgical residency training in the USA, more than 22,000 of them from the Philippines.



PHILIP S
CHUA MD

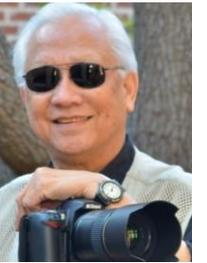
For an objective evidence-based reply to that question, I am reprinting below, verbatim, the Tugawa Harvard study published in the British Medical Journal on February 2, 2017:

Graduates of international medical schools are an important part of the healthcare system in many Western countries, and the authors of the current study provide a review of the role of international medical graduates. They note that one-quarter of practicing physicians in the United States, United Kingdom, Canada, and Australia are international medical graduates. In the United Kingdom, most international medical graduates trained in India, the Republic of Ireland, or Pakistan, whereas in the United States, IMGs from India, Pakistan, and the Philippines are fairly common.

The United States requires that international medical graduates pass both
continue to page 13

APRIL IMAGE

ROLANDO M SOLIS MD⁶³



ROLANDO
M SOLIS MD



True Parrot

FEUMAANI stuns at the PMAC!

continued from page 1



Susan B Nunez MD⁸³ lectures *on Short Stature: Is It Important?* In the second picture, the 11th PMAC professorial lecturer on *prediabetes* Nunilo G Rubio MD⁶⁷ is flanked, from left, PMAC Auxiliary president Nida Blankas-Hernaez MD⁸⁴, Jose Manaligod MD and PMAC president Dionisio Yorro.



The FEUMAANI Choir sings the national anthems. The middle picture shows some of the Class⁶⁷ alumni. At right, FEUMAANI president Ricahard Mon MD receives a trophy of appreciation from Drs Yorro and Blankas-Hernaez.

AN INVITATION TO CLASS⁷²

On behalf of Class⁷², I extend a warm invitation to all my classmates to join in celebration of the Class 45th anniversary (Sapphire Jubilee) on July 19-22, 2017, at Hyatt Regency Hotel Long Beach, 200 South Pine Avenue, Long Beach, CA 90802.



MANUEL A
MALICAY MD

The FEUDRNSM Alumni Foundation officers and board trustees will honor our Class '72 during the Annual Filipiniana Night on Thursday, July 20th. During this Class recognition, our Class will present a group dance and song. Due to the time constraint for all of us to be together to prepare and rehearse our presentation, please arrive on Wednesday, July 19th.

Our 45th anniversary is another milestone of our Class history. Many of us had not seen each other since our Silver Jubilee anniversary in 1997. This is an opportune time to rekindle our friendship and strengthen our ties, and together to reminisce the memories of the medical school.

Our Class will be pleased if you came to share this milestone. Kindly make your reservation early at Hyatt Regency Hotel Long Beach, telephone #(562) 491-1234 or 844-225-0052. The room rate for single and double occupancy is \$179.

If you have questions, please e-mail me at mmaligaymd@hotmail.com or call me at (630) 640-9827.

**MANUEL A MALIGAY MD, FACP,
FASH**

ATTENTION — ATTENTION

I was advised recently by Hyatt Regency Hotel Long Beach management that the hotel rooms are being booked on the dates that we want and they want me to notify everyone who are coming to California to get on board before all the rooms are gone. Once they are filled, they are gone. So please book your rooms ASAP.



LICERIO V
CASTRO JR MD

<https://resweb.passkey.com/go/FarEasternUniversity>

July 19 - 22 room rates	per night
Single occupancy	\$179
Double occupancy	\$179
Triple occupancy	\$204
Quadruple occupancy	\$229

Several alumni from the Philippines and here in the USA had been asking me for a more affordable room rate at Hyatt Hotel in Long Beach California before and after the July 19-22 National reunion. Therefore I renegotiated the prevailing rates for those dates from more than \$300 per night to the new rates.

Pre event July 16 & 17 \$229 per night
Post event July 23 & 24 \$209 per night

If you want the rates, please reserve now. Do not wait for tomorrow or next because they will be gone.

I was given these rates as a goodwill gesture from the hotel but rest assured they

will not last long. Plenty of tourists are booking every hour per hotel management.

This is our last chance to avail of these rates. I will never be able to renegotiate again. Sp please reserve ASAP if you want it.

Rremember, I cannot reserve for you.

Kindly pass this on to the Golden Jubilarians, Silver Jubilarians. Emerald Jubilarians, and all alumni.

Thank you for your cooperation.

LICERIO V CASTRO JR MD

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 May 2017 issue
May 24, 2017**

**Please address submission to
acvrear@gmail.com**

OBITUARY

PAULO E AMPIL MD⁶⁶

July 24, 1940 - April 8, 2017

Middletown, NY

Dr Ampil, longtime resident of Middletown died peacefully, surrounded



PAULO E AMPIL MD

by his loving family in his beautiful home, after a courageous 12-year battle with cancer.

The son of Hilarie Emiliano and Domingo Ampil MD (Biochemistry Chairman at FEU-NRMF Institute of Medicine), he completed his medical degree at the FEU-NRMD Institute of Medicine in 1966.

He was a consistent scholar in medical school.

He had an internal medicine residency at St. Elizabeth Hospital in New Jersey and fellowship in edocrinology at Martland Medical Center in Newark NJ. Dr Ampil was an attending physician at

Arden Hill Hospital in 1972 and Horton Hospital from 1973 to 2000.

He was also a physician at Middletown Community Health Center since 2000.

He will be greatly missed by his fellow staff and his many patients who loved and respected him.

He previously had a private practice in Pine Bush, NY, and later joined the staff at Middletown Medical for several years.

Dr Ampil married his sweetheart, Zenaida Claustro MD⁶⁸ on December 1968 in the Philipines; and they shared 48 years in a loving and adoring marriage.

He was also survived by his son, Domingo of Middletown, and two daughters, Maria Ampil MD and her spouse, Carl Silverio MD of Hopewell Junction NY, and Christina Ampil and her husband, Michael Manza of Massapequa NY.

His life's purpose was to care for others. He loved his profession as a physician and caring for his patients gave him great joy.

He was a humble, soft spoken, generous, kind-hearted soul.

He enjoyed spending time with family and friends.

His hobbies included playing Mahjong with his barkada, Karaoke, fishing, traveling to Ocean City, Maryland with his family, cruising and traveling abroad with Zenaida and writing love letters to his beloved sweetheart.

OBITUARY

GODOFREDO TORRES MD⁵⁷

Dr Torres, 84, died on March 31, 2017 in Kaiser Hospital in Redwood City CA.



GODOFREDO TORRES MD

He was predeceased by his wife, Fe Nori Ganibi MD who passed away in 2015. He left behind a daughter, Evelyn Torres; and a son, Roland Torres and his wife, Victoria Torres; his grandson, Nathan Torres; many nieces, nephews, cousins, godchildren, and close friends.

Born in Indang Cavite, Philippines, he was the son of Isidora and Francisco

Torres. He and his six siblings then completed their high school and college educations while residing in Quezon City.. After completing his undergraduate degree at the University of the Philippines, he pursued his medical degree at Far Eastern University Institute of Medicine. It was there where he met his wife of 56 years, Dr Ganibi.

In 1957, Dr Torres was an outstanding medical graduate of the FEU Institute of Medicine. He went on to complete his residency in general surgery at the FEU Hospital where he served as a clinical instructor, then assistant clinical professor of Surgery.

Dr Torres and wife had thriving private medical practices in Manila; he in Surgery, she in Pediatrics.

During this time, they lived fun and busy lives with their numerous friends, colleagues, and family members.

In 1967, the family immigrated to the United States. As a foreign medical graduate, he passed the ECFMG and completed his rotating internship at St Luke's Hospital in San Francisco.

He became an active staff member of St Luke's Hospital in 1970 and was appointed chairman of family practice in 1982. He opened his first medical office in San Francisco's Mission District.

He was a dedicated family practitioner, committed to providing the best care and maintaining the health and well-being of all his patients.

He opened a second medical office in South San Francisco in 1983 and after two

years, moved full time to his South San Francisco office. Many of his patients from San Francisco followed him to the Peninsula. He was an active staff member at Seton Medical Center in Daly City CA while retaining staff privileges St Luke's Hospital.

Fred was a staunch advocate of promoting fellow foreign medical graduates in the Bay Area.

As a member and former president of the Philippine Medical Society of Northern California, he fostered unity and support of the medical practices of all foreign medical graduates, regardless of country of origin.

His loyalty and dedication to his alma mater, FEU Institute of Medicine, was boundless. He helped organize a medical Alumni Foundation in the United States which raised and donated funds to improve the medical school facilities, to donate new medical equipment to the hospital, and provide full scholarships to needy medical students.

For his efforts, he was recognized by the medical school as well as the City of Manila.

In addition to his medical accomplishments, Dr Torres was the Alumni Foundation first president and had a major role in establishing the Indang Cavite Association of Northern California—an organization that, for over 35 years, has been instrumental in providing scholarships for students pursuing degrees at Cavite State University in Indang.

This organization has provided a means of aid towards academic achievement, social networking, and a foundation in which individuals can make lasting memories celebrating Pilipino heritage here in the United States.

Above all, he was a devoted husband, father, and friend. He enjoyed travelling the globe with his loving wife and his children.

He took pleasure in eating at various restaurants in the Bay Area, but his favorite cuisine was Pilipino food. After retiring from medical practice, his daily routine consisted of reading a San Francisco Chronicle while having breakfast at McDonalds or a favorite corner café.

Being a kind and social man, he looked forward to running into friends, colleagues, and former patients at Serramonte Center in Daly City and taking the occasional trip to the casino.

His ready smile, quick wit, and generosity to all will be missed.

OBITUARY

RODHORA M LO MD⁷³

Dr Lo had practiced in Davao Del Sur

IS PATIENT DEATH RATE IN USA LOWER AMONG NON- USA SCHOOLED MDS?



PHILIS
CHUA MD

continued from page 5

United States Medical Licensing Examination (USMLE) clinical knowledge tests plus the USMLE clinical skills test before being permitted to practice medicine.

Moreover, the United States Educational Commission for Foreign Medical Graduates has stated a goal to accredit all foreign medical schools by 2023. In the United Kingdom, United States Medical Licensing have to pass an examination of English proficiency and professionalism, but not examinations evaluating medical knowledge.

There is concern among stakeholders, including patients, that the care provided by IMGs is inferior to that of physicians trained in their country of practice.

However, little data are available to validate this belief. In fact, some research has found that United States Medical Licensing outperform US medical graduates on medical knowledge testing. The current study by Tsugawa and colleagues fills a gap in research by evaluating outcomes of inpatients cared for by US-trained

physicians and United States Medical Licensing in the United States. Study Synopsis and Perspective Medicare patients admitted to the hospital and treated by internists who graduated from medical schools outside the United States had lower 30-day mortality rates than matched patients cared for by graduates of US schools, according to results of a study published online in the British Medical Journal.

To practice in the United States, international medical school graduates must pass two examinations on medical knowledge and one assessment of clinical skills, and complete accredited residency training here. However, medical schools outside the United States are not accredited by any domestic agency.

In response to concerns about quality of care from internationally trained physicians, the Educational Commission for Foreign Medical Graduates will require accreditation of medical schools outside the United States by 2023.

Studies comparing the quality of care provided by internationally trained physicians with that by domestically trained physicians are few and small in scope.

Yet, physicians trained outside the United States may be perceived by some as not as competent as physicians who attended medical school in the United States.

To compare the two, Yusuke Tsugawa, MD PhD from the Harvard TH Chan School of Public Health, Boston MA, and

colleagues conducted a large observational study of hospitalized Medicare beneficiaries to assess whether outcomes differ depending on whether their general internists were trained domestically or abroad.

The study excluded graduates from Central America and the Caribbean to minimize inclusion of US citizens trained outside the country. The countries that contributed the most internists to US hospitals were China, Egypt, India, Mexico, Nigeria, Pakistan, the Philippines, and Syria.

The researchers assessed 30-day mortality rate (the primary outcome), readmission rate, and costs of care (total part B spending), and whether clinical condition influences differences in patient outcomes and care costs between the 2 groups of patients.

In addition, they adjusted their models for patient characteristics (age, sex, race or ethnic group, diagnosis, and income), physician characteristics (age, sex, and patient volume), and hospital fixed effects (characteristics of hospitals).

Results indicated that 19,589 (44.3%) of 44,227 general internists in the United States graduated from medical schools outside the country. They were slightly younger than US graduates (age 46.1 vs 47.9 years; $P < .001$) and were more likely to work in medium-sized, nonteaching, for-profit hospitals without intensive care units.

In addition, their patients were more likely to be nonwhite, have Medicaid, have a lower median household income, and have more chronic comorbidities (congestive heart failure, chronic obstructive pulmonary disease, and diabetes).

The mortality analysis included 1,215,490 patients admitted to the hospital under the care of 44,227 general internists between 2011 and 2014. Patients treated by international graduates had lower mortality rates (adjusted mortality rate, 11.2% vs 11.6%; adjusted odds ratio, 0.95; 95% confidence interval, 0.93-0.96; $P < .001$).

Based on the risk difference of 0.4 percentage points, for every 250 patients treated by US medical graduates, one patient's life would be saved if the quality of care were equivalent between the international graduates and US graduates, the authors write.

The cost analysis included 1,276,559 patients treated by 44,680 physicians during the same study period. Overall, patients of internationally trained internists had slightly higher adjusted costs of care per admission (\$1145 vs \$1098; adjusted difference, \$47; 95% CI, \$39-\$55; $P < .001$).

Meanwhile, adjusted readmission rates among 1,182,268 patients who were treated by 44,201 physicians did not differ between the 2 patient groups. Patients receiving care from international graduates had lower mortality rates than did patients of US

graduates for pneumonia and congestive heart failure.

Taken together, our findings should reassure policymakers and the public that our current approach to licensing international medical graduates in the US is sufficiently rigorous to ensure high quality care, the researchers conclude.

They suggest that the testing process may select for the top international medical school graduates. The fact that some internationally trained internists may have completed two residencies (one in the home country and one here) might also contribute to the slightly better mortality outcomes of their patients.

The current study should help dispel the notion that IMGs provide worse medical care compared with US medical graduates. The study results may be used by hospitals and health systems to create awareness about IMGs and their qualifications as clinicians.

OUR AGING LIFE

continued from page 4

we become kinder and less critical of ourselves. We made a number of friends, new friends during our retirement. We have grown older but we have not grown old. Age is only a number. What is more important is at our older age our vitality and vigor are intact with a young heart, mind and soul.



CESAR D
CANDARI MD

As we get older, it is easier to be positive. We must care less about what other people think. As long as we have life, we can learn to be grateful for it and uncover our unique human blessings despite hardships. The most interesting and significant fact is the opportunity to experience and enjoy a wonderful and fulfilling life that is not just for the gifted few. It is for anyone of us ...all of us.

Be thankful to God Almighty for His guidance and protection for your life.

The meaning of life becomes clear when we consider what it means when something good or bad happened. For every life event, there is a corresponding purpose. If you do not want the way you live today to be permanent, then change it. There is nothing constant in this world except change.

Make it a habit to be compassionate, for this costs nothing but is worth everything. Many of you have demonstrated your altruistic compassion to the poor people of our homeland, the Philippines. You have the fulfillment in your life's journey!

A query by a friend: Notwithstanding of becoming older, at the point of our life today, no matter our age or circumstances, what is really of great importance is to answer this universal question that is no stranger to all of us: What would be one's legacy after leaving this earth?

Legacy is defined as something that someone has achieved that continues to exist after they stop working or die. The

concept^[1] of legacy is a powerful life tool for all ages and a catalyst for social change. No matter what our age or state of health, we take stock – of our possessions, and also of our accomplishments and disappointments. We take stock of what we've learned from what we've done in the past, what we're doing now, and what we still hope to do, albeit as we go through life, we receive countless memories in this journey. We learn from our misadventures as much as from our successes. Sometimes we want to expunge a moment in our past that we revile and berate. However, never think hard about the past ...live this moment with a smile.

Legacy is about life and living. We are talking about valuable, more lasting and more powerful than material things we could leave behind. It is a summation of our entire life, on earth what we did and what we did not do and their profound impact in our family and friends and humanity as a whole. The giving and receiving of legacies can evoke, all at once, the entire spectrum of basic human emotions: hope, longing, regret, anxiety, fear, dread, jealousy, bitterness, rage, a sense of failure, a sense of accomplishment, pride, contentment, joy, gratitude, humility, love.

An enthralling statement related to legacy coming from my Google search engine: Leaving a legacy is a human need. It is in part selfish – we want to feel immortal. The idea of leaving something behind that will *live forever* is appealing. We also want to feel like we matter in the

vast sea of humanity. By connecting with those at the beginning of their lives, we do complete a full circle in life's journey and leave some of our *selves* – our experiences, ideas, values, and personal example – in the minds and hearts of others. But leaving a legacy also has an altruistic component. If we don't leave a positive legacy, what kind of society are we building? What kind of world are we leaving behind? What are we passing on to our children and grandchildren?

How life can change from one moment to another is no mystery. We must play that important string in life-attitude - surpassing physical infirmities. A few of us are survivors. It is God's will that we are not going to die. "Our body is a machine for living. It is organized for that, it is its nature. Let life go on in it unhindered and let it defend itself, it will do more than if you paralyze it by encumbering it with remedies." - Leo Tolstoy.

It is only when we truly know and understand we have a limited time on earth - and that we have no way of knowing when our time is up - that we will begin to live each day to the fullest.

The idea of legacy may remind us of death, but it's not about death. Being reminded of death is actually a good thing, because death informs life. It gives you a perspective on what's important.

But legacy is really about life and living. It helps us decide the kind of life we want to live and the kind of legacy we want to leave in this earth.

FAITH CORNER

continued from page 4

as to whom he is talking about. His words point us towards the cross as God



REV MELVIN
ANTONIO MD

introduces us to the reality of His Suffering Servant.

It is at the cross that we are made aware of the role of humanity in the final insult to God's Suffering Servant

From its very beginning, the Christian Church has found this account in Isaiah to be the

clue to interpreting the self-sacrifice of Jesus Christ. The poetic verses affirm that the suffering of One can heal all others. No other words are necessary.

Yet we must contemplate that simple wooden cross not only on Good Friday but every day as it confronts us with our sinful nature.

The answer to the question, *why did Jesus have to die?* is really quite simple: Jesus died because of who He was and what humanity thought of Him.

To properly unpack this statement, we must say further that Jesus died because of what He preached, His commitment to His own teachings about the reign of God, and because of His total obedience to the Father.

The hidden God is revealed to us on the cross. On the cross, God is in solidarity with us, a reminder that He has not forgotten His people.

It is unfortunate that our human nature has led us to distort the meaning of the cross.

We so easily forget that at any time from the moment of his arrest to His last breath, Jesus could have stopped himself from being killed, knowing all along that as He was human, He was also God.

It is priceless and significant that He adopts instead a forgiving attitude towards those brutalizing Him.

The crucifixion of Christ is hardly a story of powerlessness against the evil that men do. Neither is it a story of God pouring out His wrath on Jesus.

In the resurrection of Jesus on Easter Sunday, God breaks all the vicious cycles of self-inflicted death and destruction that the world has come to experience.

On Good Friday, it is imperative for us to contemplate, to meditate in the simple wooden cross that represents the one on which a Suffering Servant of God bore all our iniquities so that we may be made whole again.

We look at the cross not as a symbol of defeat, but as a symbol of God's victory over sin and death. We see Good Friday as a time of reflection and intercession, as well as of the adoration of Jesus Christ, the sacrificial Lamb of God.

The final theme of Good Friday therefore is not one of lament but one of triumph. We must also bear in mind that we cannot rightfully celebrate the joy of Easter without going through the pain of Good Friday.

From your CHAIRMAN

continued from page 3

discussed and a committee to study the same has been appointed and will come up with a recommendation. The bottom line is trying to save money during the two major celebrations, with decreasing attendance.



NOLI C
GUINIGUNDO MD

The item also of getting involved with the *Balik-FEU* feu was discussed. This year, the grand ball was moved to Friday, although it was traditionally Saturday. It was most relaxing and not too taxing on the old schedule but the traffic in Quezon City makes it quite difficult to move from the medical school to Novotel the same afternoon. We hope we get to participate in the *Balik-FEU* planning.

The Golden celebrants Class ⁶⁷ donated at least \$ 60,000 to the Alumni Foundation. A separate account will be opened for the scholarship awards, to be carried out by Drs Castro and Cureg. Memorial lectures hopefully had been cleared re: membership. Medical missions have been discussed by President Castro and the important attendance to the meeting with the Honorable Pauly Ubial, Secretary of the Department of Health. The DOH encourages medical-surgical, dental missions but emphasized communications with the DOH to determine places that need missions. A list have been forwarded to those who

attended the FAITH-led joint meeting held in San Lazaro, Manila.

Dr Cureg’s project on the member outreach, engagement, recruitment and retention action plan had been approved and preliminary brochures have been distributed for comments and critiques. Hopefully this would help.

Please don’t forget the 38th annual homecoming July 19-22, 2017, in Hyatt Regency Hotel, Long Beach CA.

God bless us all.

NOLI C GUINIGUNDO MD

of our organization. They will be distributed also at the 38th annual reunion in Long beach CA on July 19 to 22, 2017.

I wish you all love and peace and let us remember our brothers who just passed away, they are in the obituary: Rhodora Lo MD⁷³, Paulo Ampil MD⁶⁵, Godofredo Torres MD⁵⁷ (who was previous President of FEUDNRSMAF).

Don’t forget to hug your love ones every morning. You’ll be glad you did.

LICERIO V CASTRO JR MD

PRESIDENT’S *Message*

continued from page 3

encourage the new generations to come and joins us, share with us your vim, vigor and vitality which could further enrich the

needs of our organization.

Our alumni are filled with great talents, futuristic ideas, magnanimous character and humble values. These are just a few of the many traits that we possess and must be shared with our organization that would enable us to soar like an eagle.



**LICERIO V
CASTRO JR MD**

My dear fellow alumni, with Dr. Amethyst Cureg’s initiative and creativity, we were able to produce a brochure defining what we are, what is our mission, our goals, etc. It will come in two parts; the brochure and a flyer. We hope that you will read them for a better understanding

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 May 2017 issue
May 3, 2017

Please address submission to
acvrear@gmail.com

FEUDNRSM Alumni Foundation

MEMBERSHIP REGISTRATION

Yes, I would like to invest in the future of the FEUDNRSM Alumni Foundation. Herewith below is my membership registration/ renewal for 2016-2017

Name _____

Address _____

Email _____ **Telephone** _____

Membership dues is \$70 (physician in training, \$25). Please make you check payable to “**FEUDNRSMAF**” and mail the same with this registration to:

FEUDNRSM Alumni Foundation, 6530 Dunham Road, Downers Grove, IL 60516

Telephone (630) 971-1356

Email acvrear@gmail.com



**FAR EASTERN UNIVERSITY
DR NICANOR REYES SCHOOL OF MEDICINE
ALUMNI FOUNDATION**

**38th ANNUAL REUNION
& SCIENTIFIC CONVENTION**

HONOREES

- Class⁵⁷ (Diamond Jubilee)
- Class⁶² (Emerald Jubilee)
- Class⁶⁷ (Golden Jubilee)
- Class⁹² (Silver Jubilee)
- Class⁷² (Sapphire Jubilee)
- Class⁷⁷ (Ruby Jubilee)
- Class⁸² (Coral Jubilee)
- Class⁸⁷ (Pearl Jubilee)
- Class⁹⁷ (20th Anniversary)
- Class²⁰⁰² (15th Anniversary)
- Class²⁰⁰⁷ (10th Anniversary)



CLINICAL PRACTICE ADVANCES 2017

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

July 19 - 22, 2017

**Hyatt Regency Hotel Long Beach
200 South Pine Avenue, Long Beach CA
Telephone 562-491-1234**

REUNION VENUE

Hyatt Regency Hotel Long Beach

200 South Pine Avenue, Long Beach CA

RESERVATION Telephone 562-491-1234

Room rates: Single occupancy \$179

Double occupancy \$179

Triple occupancy \$204

Quadruple occupancy \$229

Regency club +\$60

Cut-off date Wednesday, June 28, 2017

SCHEDULE of EVENTS

Wednesday, July 19, 2017

1:00 pm - 5:00 pm Registration

6:30 pm - 12:00 am *Hollywood* Welcome Reception (WR)

Licerio V Castro Jr MD⁷³ FEUDNRSMAF President

Noli Guinigundo MD⁶² FEUDNRSMAF Chairman of the Board

Thursday, July 20, 2017

7:30 am - 8:00 am Registration, continental breakfast

8:00 am - 12:10 pm Scientific sessions

8:00 am - 4:00 pm Arts, posters, exhibits and product displays

11:10 am - 12:10 noon **11th Annual Jesus B Nolasco MD Memorial Lecture**

12:30 pm - 5:00 pm Hollywood shows and tours, or free time for everyone

Friday, July 21, 2017

7:30 am - 8:00 am Registration, continental breakfast

8:00 am - 12:30 pm Scientific sessions

8:00 am - 4:00 pm Arts, posters, exhibits and product displays

11:00 am - 12:00 noon **Third Annual Ricardo L Alfonso MD Memorial Lecture**

12:00 pm - 5:00 pm **Annual Summer Board of Trustees meeting**

12:30 pm - 2:00 pm Annual General Membership Luncheon Meeting (L)

2:00 pm - 3:00 pm **Class⁶⁷ and Class⁹² Jubilarians' Business meetings**

2:00 pm - 3:00 pm Other Classes Luncheon Business meeting

6:30 pm - 1:00 am **Alumni Filipiniana Night Honoring Class⁷², Class⁷⁷, ' Class⁸²,
Class⁸⁷, Class⁹⁷, Class²⁰⁰², and Class²⁰⁰⁷**

Saturday, July 22, 2015

7:30 am - 8:00 am Registration, Continental breakfast

8:00 am - 12:10 pm Scientific sessions

8:00 am - 4:00 pm Arts, posters, exhibits and product displays

11:10 am - 12:10 pm **22nd Annual Dr Nicanor Reyes Memorial Lecture**

5:30 pm - 6:30 pm Photo sessions: Silver Jubilarians and other Classes

6:30 pm - 1:00 am **38th Annual Grand Reunion Dinner Dance Honoring Class⁶²,
Class⁶⁷ and Class⁹²**

Sunday, July 23, 2015

REGISTRATION

Please write legibly.

Name _____ Spouse _____

Address _____

Telephone _____ Email _____ Class _____

Please check the event(s) you want to attend.

Annual membership fee [required to attend any event] \$ 70

(Lifetime Members excluded)

CME \$250/person ___ # of persons x fee _____ total

Retired \$150 ___ # of persons x fee _____ total

Piesta Naman Sa Piyo Welcome Night Reception* (Wednesday, July 19, 2017) ... free

For registrants and spouse only ___ #of attending guests: 1 2

Filipiniana Night (Thursday, July 20, 2017) \$200/per peson

On/before June 19th June 20- July 3 July 4-10 July 11 and on-site

\$200 \$220 \$240 \$260

General Membership Luncheon (Friday, July 21, 2017, 12:00 noon) \$50 per person

Grand Reunion Night (Saturday July 22, 2017) \$200/per person

On/before June 19th June 20- July 3 July 4-10 July 11and on-site

\$200 \$220 \$240 \$260

TOTAL \$ _____

Early registration is encouraged. Please send your registration early on or before July 17, 2017, to get the discounted fee.

On-site registration is only is on Wednesday, July 19th from 1:00 pm to 4:00 pm, and Thursday, July 20th, and Friday, July 21st, only from 9:00 am through 1:00 pm.

Make check payable to **FEUDNRSMAF** and mail to **Pedro Florescio Jr MD, Executive Director, 337 Elmhurst Place, Fullerton, CA 92835.**

Your cancelled check is your receipt. It will be acknowledged its receipt with your registration and check, with legible email address. Self- addressed and stamped envelope is also acceptable for those without email address.

For further question or information, please send your questions to my email at pflorescioofla@sbcglobal.net. DO NOT send your registration via certified mail with return card, which will not be retrieved from the post office.

Refund is available upon request 30 days before the event minus \$100 for processing fee. Annual membership fee is not required for those who are Lifetime member.

Due to strict hotel policy on banquet events it is advised to register on time. Late registrants may be served with different meal.