

PEDIATRIC RESIDENCY PROGRAM IN THE PHILIPPINES

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The Pediatric Residency Program in the Philippines is run by the Philippine Pediatric Society (PPS), which was founded in 1947 and is comprised of 4,732 pediatricians as of April 2013. The vision of the PPS is to promote standards of excellence in continuing pediatric education, training, research, and community outreach programs. It advocates an environment for child survival, development, safety, and protection.

The objectives of the 3-year residency program are to train residents to be skilled not only with cognitive knowledge, but also with psychomotor skills, attitudes, and values, which will prepare them for the practice of a general pediatrician. It also aims to prepare residents for post-residency subspecialization, if that is something they wish to pursue, in addition to preparing them to launch careers in research, teaching, and other postgraduate studies, such as masters and doctoral courses. The program tries to reaffirm the profound importance of the vital role of the pediatrician in promoting the health and well being of all children in families and communities. In addition, it tries to promote the habit of lifelong learning.

Requirements for application to become a Pediatric Resident in the Philippines are to be a graduate of a recognized medical school, which takes approximately four years, followed by one year of intern-

ship. Following this they need to have passed the government licensure board examination, and to have good moral and professional conduct.

The Pediatric Residency Training Program is competency based. Each hospital with a residency training program should have a formal written training program, which contains terminal as well as intermediate competencies, the curriculum content, the instructional activities, the evaluation instruments, as well as the duties of residents per year level.

In the first year of residency trainees will spend six months on the ward, four months in the OPD and ER, and two months in NICU. In the second year, a resident undergoes one month of community pediatrics, which is either in the form of community visits, or a total immersion program, where the residents will live in the community for one month. During the second year they will also spend four months on the ward, three months in OPD/ER, two months in subspecialties, and two months in NICU.

In the third year there are more subspecialty rotations which take up four months of the year, which also includes the intensive care unit, in addition to spending two months in NICU, three months on the wards, two months of OPD/ER and one month of community pediatrics.

Learning activities include admission rounds, morbidity/mortality audits, CPC,

Table 1
Training hospitals in Philippines (*n*) by Level and graduates (*n*).

Level	Hospitals (<i>n</i>)	Graduates (<i>n</i>)
Level 4	3	46
Level 3	4	22
Level 2	12	36
Level 1	82	164
Deferred Status	4	-

clinical radiology conference, didactic sessions, supervised patient care, and case discussions. There are basic common procedures that are the residents are expected to master, and each resident must have attended courses on basic life support (BLS), pediatric advanced life support (PALS), the neonatal resuscitation program (NRP), a TB DOTS training program, and a breast feeding instructional module.

Following graduation, the program aims for a pediatrician to be able to assume any or all of the following five roles: 1. pediatric health provider, 2. health educator, 3. researcher/research advocate, 4. pediatric health manager, and 5. social mobilizer.

After three years of training, residents must undergo a certification examination, which is given by the Specialty Board (SB) of the Philippine Pediatric Society. The assessment has written and oral components. Before trainees are permitted to take the written examination, they must submit the results of research that has been approved by the research forum society.

Pediatric Residency training programs in the Philippines are offered by private, government, and university hospitals, of which there are 46, 47, and 12 respectively, totaling 105 hospitals nationwide offering pediatric residency training posts (Table 1).

The pediatric residency-training program is accredited by the Hospital Accreditation Board (HAB), and also the Philippine Pediatric Society. In addition to accrediting the pediatric residency-training program, they also approve the recommendations of the subspecialty societies in the accreditation of a fellowship-training program (Table 2). The accreditation program is broken down into three stages. Firstly, the department itself carries out a self-assessment of its residency training program which is then submitted to the hospital accreditation board. In the second step, accreditors from the hospital accreditation board visit them to validate what has been placed in the self-assessment document. Finally, the two accreditors will report to the HAB, who then decide whether to award accreditation to that hospital.

The 105 training hospitals in the Philippines are accredited according to levels: Levels 1 to 4, with Level 4 being the highest level (Table 2).

At present there are four hospitals on deferred status, which means that they were not able to come up with the standards set forth by the hospital accreditation board, and therefore are visited by the HAB after 6 months to assess for correction of previous deficiencies. If they are not able to

Table 2
Affiliated societies accredited by the Philippine Pediatric Society.

Philippine Society of Newborn Medicine
Philippine Society of Pediatric Metabolism & Endocrinology
Philippine Society of Adolescent Medicine Specialty
Pediatric Nephrology Society of the Philippines
Philippine Academy of Pediatric Pulmonologists
Pediatric Infectious Diseases Society of the Philippines
Society of Pediatric Cardiology
Society of Pediatric Critical Care Medicine
Philippine Society of Pediatric Gastroenterology, Hepatology and Nutrition
Child Neurology Society of the Philippines
Philippines Society of Hematology
Philippines Society of Oncology
Philippines Society of Developmental and Behavioral Pediatrics

Table 3
Numbers of hospitals offering Fellowship Training.

Fellowship	<i>n</i>
Pediatric Neurology	4
Developmental and Behavioral Pediatrics	2
Pediatric Cardiology	2
Pediatric Pulmonology	6
Pediatric Nephrology	4
Pediatric Infectious Diseases	3
Neonatology	4
Pediatric Endocrinology and Metabolism	1
Pediatric Hematology/Oncology	2

achieve these corrections, their accreditation status will be further deferred.

Presently, there are various fellowship programs at different training hospitals, all of these being accredited training programs (Table 3).

Once trainees graduate, there are four main paths they may take. One option would be to practice as general pediatricians, either in hospitals, or government clinics, or private clinics. They may also alternatively choose to become subspecialists, academicians, or researchers.

Q&A

In your lecture you mentioned that it is possible to train in three types of hospitals – private hospitals, university hospitals, and government hospitals. Is there any difference in the curricula between these three training centers? Which one is the most popular choice for residents?

All training centers are allowed leeway as long as they follow the basic requirements needed by the hospital accreditation board. As of now, for Level 4 hospitals,

there are two government hospitals and one private hospital available. Based on the number of cases a resident will see, they will tend to choose to practice in government hospitals. However, if a trainee prefers a good balance between consultants/trainers and patient load, they will tend to apply to a private hospital or university hospital institution. Trainees who are serious about their program will tend to try and enter Level 4 accredited hospitals. Government hospitals offer a higher honorarium to trainees compared to private hospitals; so these are the hospitals of choice for a trainee if that is what they give importance to.

What defines a Level 1 or Level 4 accreditation? What happens to the hospitals or the trainees if they lose accreditation? Does that mean that the trainee's training is not recognized/that they cannot take certifying examinations?

A Level 1 accredited hospital would

have just the basic requirements of what the HAB requires. Level 2 accredited hospitals are able to accommodate, in addition to the basic requirements, community rotations for residents. The main factor that separates the various levels is the size of the community pediatrics component and the level of consultant training. The Philippines is a developing country, and it needs its residents to be exposed not just to subspecialties, but also to general pediatrics, so there is great emphasis based on the community rotation. Level 4 is immersion, which means residents are sent to live in the community whilst training in community pediatrics. In addition, Level 4 hospitals are expected to perform high quality research and have highly trained consultants.

In the case that the hospital loses its accreditation, the Philippines Pediatric Society will help the trainee look for an alternate accredited training center to enter via what is called lateral entry.