



Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
Manila

Chief of Medical Professional Staff Office

MEDICAL SERVICE

ANNUAL ACCOMPLISHMENT REPORT CY 2021

A glance at last year's medical accomplishments, developments and innovations, it has been proven that 2021 has continued to be a very challenging year for the Medical Service and our institution as a whole, mainly due to the on-going COVID-19 pandemic. Despite the constraints, the Medical Service pushed on with its different programs in service, training and research throughout the year.

With the institution's priority, service to patients remains the first consideration of the Medical Service. There is a slight decrease of 15.66% on the **total number of patients served with 256,655** as compared from last year's 296,854 due to the surge of the Delta variant. For this year, 58.13% came from OPD (including teleconsultations), 38.64% from emergency consultations, and 3.23% as admitted cases. We only had **5,502 total operations** with 36.24% as minor surgeries, 63.29% as major surgeries and 0.47% ambulatory.

At present, in addition to the supplies of personal protective equipment, we were still able to acquire donations of PPEs and alcohol for the use of different departments. These included masks, hazmat suits, face shields, gloves, gowns, caps and booties. These supplies are being used in order to provide self-protection, especially for our frontliners, while catering to our patients.

Since the onset of the pandemic, face-to-face interactions and engagements are strongly discouraged and the virtual/online continues to be the platform of choice, like Tele-consultations, Zoom meetings, conferences and webinars.

Constant growth and development in the training of our staff also took the forefront on this year's activities as many participated in several seminars, workshops, postgraduate courses and skills enhancement programs via online platform, such as PGS Orientation, Infection Control Practices Awareness Seminar, Gender Sensitivity Training, ARTA, etc. This is in addition to the regular monthly Mortality and Morbidity Conferences, Tumor Board, Specialty Case/CPC Conferences, and various orientations.

In our commitment to strengthen our training program, the hospital had a total of 329 residents and fellows trained. All 16 Clinical Departments have maintained their accreditation status from their respective specialty boards.

We had a total of 389 trainees for the year with 20 affiliate residents for the year, 290 postgraduate interns, and 0 affiliate Medical Clerks rotating in different areas. In the paramedical affiliate training, 47 Medical Technology Interns, 0 Radiological Interns, 32 Physical Therapy/Occupational Therapy Interns, and 0 Psychiatry Interns rotated in our institution through virtual platform.

Last December 17, 2021, our institution has tapped the Institute for Solidarity in Asia (ISA) to facilitate the cascading of the Strategy Map and Enterprise Scorecard, which are essential elements of the Performance Governance System (PGS). Through the untiring support of our Medical Center Chief, and in collaboration with the different Departments and Services, we were able to receive the Silver Trailblazer Award during the Initiation Stage Public Revalida of the PGS. The goal of the institution is to be a Multispecialty Cancer Center for Luzon by 2025 and the National Cancer Center by 2028.

In research, the different clinical departments also produced relevant researches published in local journals and winning prizes from the different research fora both here and abroad. For this year, we have 164 research papers approved by the IRB, 213 proposed, 12 accomplished researches, and 164 on-going researches.

Both the Medical and Paramedical staff also continue to upgrade their professional skills and competencies through continuing education and various learning and development activities.

Continuous upgrading of facilities, wards/department renovations, repainting of some areas and procurement of several equipment were also done for improvement of facilities and for better delivery of services. Continuous hiring and promotion of medical staff were also done to augment manpower.

The **JRRMMC Annex II – Hospital Extension or known as the DOH – QI Modular Facility**, which starts to operate last March 27, 2021 is now on its 8th month of operation, with License to Operate until April 8, 2022. The said facility is situated at Quezon Insitute Compound Brgy. Doña Imeda, Quezon City.

The Medical Center Chief together with the Chief of Medical Professional Staff, oversees the whole operation. Census reveals a total of 460 admitted patients from March – Dec 31, 2021. The said facility is the commencement of admission for Covid Confirmed patients from JRRMMC Main, OHCC, and community. We resort to various means to be recognized by the different sectors.

Guided by the DOH calendar of health events, the **Public Health, Emerging Disease and Wellness Unit (PHEDWU)** and the wellness programs of the different departments continued to provide activities/lectures/information dissemination programs for patients. However, due to the pandemic, no surgical missions were conducted such as Tuli, Breast, Thyroid, Hernia, Cataract, TURP and PCNL Missions and BTL, Gynecology, Oncology and REI Missions among others. Other wellness programs were conducted via online platform such as lay fora and awareness lectures.

Continuous linkage with DOH, Health Promotion Bureau (HPB), DOH NCR Metro Manila Center for Health Development (MMCHD) HEPO links, to keep abreast with the pandemic and other DOH Health event as a guide in the conduct of health information /dissemination activities, as follows:

- Continuously requested IEC materials from DOH Health Promotion Bureau (HPB) and DOH NCR Media Relation Unit and reproduced same for advocacy activities, COVID 19 awareness, prevention and control. Reproduced IEC were distributed to targeted /designated clinical units/offices/entrance gate and at OPD waiting area depending on the scheduled health event
- Continuous utilization of TV monitors with videos at different strategic site as strategy in disseminating health information to the public especially on Covid-19 pandemic at the following areas:
 - OPD - Emergency Service Complex
 - Hospital lobby - Patient’s Waiting Area
 - Finger scanning area
- Utilization of created social media page <https://www.facebook.com/publichealthJRRMMC> for information on COVID-19 and other health events for public awareness

The Vaccination Core Team together with PHEDWU also advocated in the nationwide campaign of Resbakuna Covid-19 Vaccination Program aimed at motivating the public to practice minimum health standard protocol and the acceptance of Covid-19 vaccine as an additional measure for the prevention and control of COVID 19 through:

- Series of orientation via face to face, pocket lecture and Zoom platform among hospital staff and employees including contractual
- Posted tarpaulin/poster of RESBAKUNA at different strategic sites of the hospital for public awareness
- Continuous airing of RESBAKUNA Covid-19 vaccine awareness videos At TV monitors installed at visible areas of the hospital
- Participated as health educators in the scheduled Vaccination Program roll out done at OPD for employees/relatives

Total of vaccinated employees as of December 8, 2021:

SERVICE	Permanent (A1+B1+C1) = 1,767				Part Time/ Contractual/ JO (A2+B2+C2) = 454			
	Partially Vaccinated (One Dose any brand except Janssen) (A1)	Fully Vaccinated (Two Doses any brand) *Include ONE Dose of those who received Janssen Brand (B1) (D1+D2)		Unvaccinated (C1)	Partially Vaccinated (One Dose any brand except Janssen) (A2)	Fully Vaccinated (Two Doses any brand) *Include ONE Dose of those who received Janssen Brand (B2) (D3+D4)		Unvaccinated (C2)
		Without Booster (D1)	With Booster (D2)			Without Booster (D3)	With Booster (D4)	
Medical	3	262	200	0	3	242	148	
Paramedical	7	445	159	28	0	0	0	0
Nursing	1	281	223	13	0	0	12	0

HOPSS	1	281	223	13	0	0	12	0
Finance	1	67	33	8	0	7	0	1
QI	0	12	17	6	0	2	13	0
GGHS	0	0	0	1	1	13	12	0
TOTAL:	12	1067	632	56	4	264	185	1

On the other hand, the **Gender and Development Focal Point System** is pleased to report that in spite of the constraints, with the full support of the administration and the different clinical departments and services, the JRRMMC have met the requirement of allocating at least 5 % of our GAA to GAD related activities.

Utilization of Gender and Development (GAD) Activities	Allotment	Amount Utilized	Percent Utilization
PS	67,066,259.56	30,830,243.76	45.96%
MOOE	7,000,900.00	83,488,172.84	1,192.53%
CO	500,000.00	-	-
TOTAL	74,567,159.56	114,318,416.60	153.31%

For the Organization-focused programs and activities, the GAD Focal Point System was able to offer its Gender and Development capacity buildings online, despite the existence of Covid-19, given the challenges and limitations brought about by the pandemic, and was able to harness the use of communication technology and adapt to the birth of the digital transformation. As duty bearers of Gender and Development, our passion to fulfill our mandate to empower our stakeholders, we were able to run webinars on Gender Sensitivity Training and HIV & AIDS Awareness and Prevention through the help and support of the HIV & AIDS Core Team and our very own GST resource person.

Also, through the efforts of the **Mother Baby Friendly Health Initiative (MBFHI) Committee**, the hospital has been re-accredited as “Baby Friendly Hospital” by the DOH.

Also worth mentioning are some of the innovations and best practices such as the improvement of Pharmacy Inventory and Warehousing by application of Medicine and Management System including the D-Track System for Document Monitoring, improvement in the implementation of Claim Form 4, and continuous provision of free services, including outsourced services and referrals.

COVID-19 pandemic continued to be a health concern with the National Capital Region (NCR) including neighboring place having placed on different quarantine status from enhanced community quarantine to the present alert level 2. Though there was lowering of confirmed cases before the celebration of holiday season, the quarantine status during the year has continued to impose adherence to minimum public health standards and motivation to submission to vaccination. Our hospital still observes limitation in the delivery of health care services like decrease in number of catered patients, the limitations of face to face communication, observance of the practice of minimum health standards protocol wherein facial mask and shield, hand washing were a must. Along is the practice of at least 1 meter distance. Hence amidst the limitations, we continue to innovate and provide quality services despite the pandemic and the limited resources available.

There are still many things to be done for the coming year which includes continuous improvement of our services with acquisition of new equipment, specialty services and infrastructure developments. We also need to improve our quality assurance programs in providing better care to our patients. This is in line with our vision that JRRMMC will be a one-stop, world class, state-of-the-art institution providing high-quality, safe and cost-effective care to our patients and the leading center for education and training.

ANESTHESIOLOGY

Highlight of Accomplishments:

The top accomplishment of the department for the year 2021 involves delivery quality patient care, by providing not only anesthetic care for surgical patients, but also acted as the airway team for the whole hospital during the time of the pandemic. We were able to deliver anesthetic care not only for our regular patients, but also for Covid suspect and positive patients as well.

1. Granted full three-year accreditation by the Philippine Board of Anesthesiology effective January 1, 2020 to December 31, 2023
2. Twenty seven (27) anesthesiology residents with the supervision of our fellow and consultant staff, service the needs of the following: ENT, Ophthalmology, Orthopedics, Neurosurgery, CT scan, MRI, General Surgery, Thoracic and Cardiovascular, Surgery, Pediatric Surgery, Obstetrics and Gynecology, Urology, Cystoscopy, Endoscopy, Delivery Room, Ambulatory OR, Recovery Room, Brachytherapy, Plastic Surgery, Minimal Invasive Surgery and OPD Pain Clinic

3. Intubations

The department was tapped to act as the primary airway team when the pandemic started, following both international and national recommendations. Being anesthesiologists, we were considered as airway experts, and most experienced in securing the airway, thus all patients for intubation were performed by our department. Listed below is the total number of intubations we were able to perform from the months of January to December of 2021

Month	Number of intubations
January	39
February	31
March	36
April	57
May	41
June	49
July	29
August	33
September	18
October	33
November	30
December	10
Total	396

4. Covid suspect or positive OR cases

Although not designated as a Covid center, our institution also had to cater to surgical patients who are suspected or positive with Covid-19. As such, the operating room

complex was able to provide a designated operating room for such cases. Our department was able to formulate a protocol for the proper airway management and donning and doffing for such cases. We were still able to deliver the appropriate anesthetic care for suspected or infected patients needing emergent surgery.

Month	Number of PUI/ Positive OR cases
January	5
February	2
March	0
April	29
May	17
June	23
July	11
August	19
September	12
October	17
November	6
December	15
Total	156

5. During the start of the pandemic, there was noted surge of patients in the emergency room. Aside from this the protocols in ER triage were revised, previously only one resident manned the triage for 24 hours which was revised to 2 residents every 12 hour shift. Due to the nature of the pandemic, many residents were being quarantined. Although our department’s residents are not included in the rotation of ER triage, we were occasionally pulled out to man the ER triage to cover for other services
6. Conduction of lectures
7. Accomplished case report paper presentations
8. Attendance to online lectures/meetings/webinars

Issues and Concerns:

1. Drugs and Supplies
 - a. Supply of emergency drugs is scanty to none, therefore affecting management of our patients.
 - b. Some novelty drugs and supplies needed for the delivery of quality anesthesia care as recommended by the Philippine Board of Anesthesiology (PBA) either have no bidders or are not replenished on time, which is a hindrance in optimal management of our patients.
2. Equipment
 - a. Since the Engineering Department has outsourced the preventive maintenance of our Anesthesia Machines, reported problems are not being resolved immediately. The Engineering Department promptly responds, but some outsourced agents do not respond right away to the said reports.
 - b. Scarcity of equipment optimal to delivery of quality anesthesia such as: Forced air warmer. There is only 1 forced air warmer currently available for use and we have a total of 10 Operating Rooms (ORs).

- c. Once all ORs open, there will not enough patient monitors and anesthesia machines to be used.
 - d. Most morbidities happen during patient transport. In line with this, we do not have a separate monitor being used for patient transport from the OR to the Post Anesthesia Care Unit (PACU).
 - e. Optimal equipment to protect residents from radiation is not available such as Lead apron with neck coverage.
3. Training
- a. There is still a decreased number of cases and case mix for different subspecialties as compared to the pre-pandemic cases catered by our department.
 - b. Internet connection within the hospital is unstable, making the residents have a hard time to participate in online conferences, which is now the new norm of acquiring new knowledge and skills.
 - c. There is no protected time for residents whenever online discussions are held especially in preparation for the residents’ in-service training examinations (RITE).
 - d. The department library currently serves as a stock room for unused PPEs, so there is no optimal place for the residents to study at.
 - e. Inadequate number of peripheral nerve blocks and pain management techniques due to lack of required equipment like local anesthetics, PNB needles, PCA pump, and PCA pump syringes. With this, the case mix of the residents is also affected which delays their completion of the residency program.
 - f. Since the pandemic began, there is limited interaction between the consultants and residents.

BEHAVIORAL MEDICINE

Highlight of Accomplishments:

1. The Department of Behavioral Medicine successfully accomplished delivery of the quality health care in the pandemic by educating their patients and relatives thru e-prescription and telephone inquiry. Likewise, we have extended our services to accommodate more of our employees and residents needing counselling, clearances and treatment. We provided continuous distribution of available and free medication to the patient of the department thru the allotted budget by the Department of Health under the Medicine Access Program – Mental Health.

2. Patient Care

New	
Walk-in	59
OPD Referrals	0
Referral from Other Agency	0

Old/Follow-ups	795
Ward Referrals	42
Referral to Other Agency	0
Referral to other Department	0
TOTAL	583

3. Conduction of Preventive and Promotive Program
4. Conduction of online lectures/lay fora
5. Attendance to online lectures/meetings/webinars

Issues and Concerns:

1. Need for additional staff – 3 Psychologists
2. Additional budget for procurement of office supplies, equipment and psychotropic medicines

DENTAL

Highlight of Accomplishments:

1. Conduction of Wellness Program:
 - National Dental Health Month February 1 to 28, 2021
2. Attendance to webinars/online lectures/meetings

Issues and Concerns:

1. Inability to resume with face-to face consultation and treatment of patients relative to the new normal
2. Procurement of equipment necessary for the COVID 19 dental health protocol in treating patients

DERMATOLOGY

Highlight of Accomplishments:

1. Passing rate of 100% (6/6) in the specialty board exam of the Philippine Dermatological Society (PDS), earning 3rd and 7th place
2. Passing rate of 100% (1/1) the specialty board exam of the Dermatopathology Society of the Philippines (DSP)
3. Awards in research presentations and academic excellence
4. Conducted medical mission, patient’s assistance fund, and outreach programs in cooperation with Skin Research Foundation of the Philippines, Inc.

5. The department was officially awarded the name “National Specialty Center for Dermatology”. Mr. Learsy Afable and members of the Department of Health (DOH) conducted an online conference with the representatives of the different DOH specialty centers to finalize the costing for the Specialty Development Plan
6. Continuous upgrade of facilities and equipment
7. Created virtual modules and demonstration videos of dermatologic surgery procedures to compensate for the lack of hands-on learning
8. Conduction of virtual workshops/lectures
9. Attendance to online lectures/meetings/webinars/conferences

Issues and Concerns:

1. Decrease in the number of consults and procedures due to the pandemic.
2. Instances of lack of hospital supplies (i.e. cover slips, glass slides, paraffin wax, absolute alcohol, and carbol fuchsin powder for Dermatopathology use) wherein the department has to shoulder the expenses
3. Unavailability of special stains and immunohistochemical stains in Dermatopathology. Specimen sent out to outside laboratories.
4. Limited supply of patch test kits
5. Unavailability of most dermatological medications in the DOH Botika/ Pharmacy

EMERGENCY SERVICE COMPLEX

Highlight of Accomplishments:

- A. Monthly Initial Response Time (Time From Triage To Time Seen By ROD)

MONTH	Total Number of Patient Seen	Seen Within 30 Minutes	Seen Beyond 30 Minutes	Accomplishment
JANUARY	1873	1873	0	100%
FEBRUARY	1933	1905	0	100%
MARCH	1744	1744	0	100%
APRIL	928	928	0	100%
MAY	1675	1675	0	100%
JUNE	1697	1697	0	100%
JULY	2243	2243	0	100%
AUGUST	2023	2023	0	100%
SEPTEMBER	1456	1456	0	100%
OCTOBER	1,579	1,579	0	100%
NOVEMBER	1,737	1,737	0	100%
DECEMBER	1,836	1,836	0	100%
TOTAL	20,724	20,696	28	100%

B. Monthly Patients Turn Around Time (Within 4 Hours)

MONTH	Total Patients Seen	Seen Less Than 4 Hours	Seen More Than 4 Hours	Accomplishment
JANUARY	1873	1870	3	99.83%
FEBRUARY	1933	1905	16	98.55%
MARCH	1736	1744	8	99.61%
APRIL	1130	1128	2	99.82%
MAY	1675	1665	10	99.40%
JUNE	1697	1694	3	99.82%
JULY	2243	2240	3	99.87%
AUGUST	2023	2021	2	99.90%
SEPTEMBER	1456	1455	1	99.93%
OCTOBER	1,579	1,568	11	99.30%
NOVEMBER	1,737	1,726	11	99.36%
DECEMBER	1,836	1822	14	99.23%
TOTAL	20,918	20,834	84	99.59%

C. Catered to common infectious diseases

Month	Measles	Ptb	Dengue	Diphtheria	Rabies	Covid-19	Leptospirosis
JANUARY	0	0	10	0	0	170	0
FERUARY	0	0	11	0	0	210	1
MARCH	0	0	12	0	0	384	0
APRIL	0	0	1	0	0	452	0
MAY	0	0	1	0	0	200	0
JUNE	0	4	1	0	0	245	0
JULY	0	0	10	0	0	170	0
AUGUST	0	10	5	0	0	307	3
SEPTEMBER	0	7	9	0	0	518	0
OCTOBER	0	13	8	0	0	203	0
NOVEMBER	0	12	7	0	0	164	0
DECEMBER	0	6	2	0	0	141	0
TOTAL	0	52	77	0	0	3,164	0

All managed appropriately

D. Monthly Census of Procedures Done

Month	Wound Suturing	IJ Cath Insertion	Debt.	CTT Insertion	Cutdown	Thoracentesis	Direct OR
JANUARY	95	2	8	4	0	0	30
FEBRUARY	81	0	10	4	0	0	24
MARCH	80	1	17	2	0	0	32
APRIL	10	1	17	6	0	0	6
MAY	71	0	15	4	0	0	15
JUNE	20	5	8	4	4	0	26
JULY	97	8	47	4	0	0	14
AUGUST	101	6	26	2	2	1	11
SEPT.	92	5	38	3	0	0	32
OCTOBER	0	2	7	3	0	0	19
NOVEMBER	0	2	10	4	0	0	33
DECEMBER	95	9	5	1	0	0	9
TOTAL	742	41	208	41	6	1	251

- E. Strict compliance to screening checklist for Covid19 through orientation of Triage Officers in utilization of Covid19 screening checklist for clearance of all patients entering Emergency Room
- F. Adherence to infection control policies through:
 - Proper donning and doffing technique of PPE
 - Maintenance of approved number of PPE for staff
 - Proper hand washing and proper hygiene
 - Observance of proper distancing
- G. Improvement of Patient Flow and Procedure through:
 - a. Creation of ESC Improvement Proposal by the ESC Task Force
 - b. Identified key areas of concerns and gaps in the delay in the disposition, overstay of patients, and documentations.
 - c. Formulated corresponding effective solutions to the gaps identified.
 - d. Enhanced Patient Traffic/Flow from Patient Arrival to Disposition (i.e. Discharge/Transfer to Area/Other Institutions)
 - e. Integration of Patient Navigator Care Role to monitor progress on patient status of disposition; identified delays coordinated to Nurse in Charge.
- H. Developed improvement strategies to minimize and eliminate negative client feedbacks and enhance time-bound interventions.
 - Developed/Improved standardized flow of priority patients
 - i. Critical Cases/ Bay
 - ii. EMS Lane

- iii. Dengue Fast Lane
- iv. Trauma
- v. VAWC/Senior Lane
- vi. Infectious Cases
- vii. COVID
- viii. Non-COVID Infectious
- I. Strengthened links to Patient Referral Systems (i.e. Interdepartmental network, inter-agency) through introduction of Nurse Coordinator Role for Covid and Non-Covid Area
- J. Projects in progress:
 - Designation of an exclusive area for Basic ER Procedures including:
 - i. Minor Surgical Procedure
 - a. CTT Insertion
 - b. IJ Cath Insertion
 - c. Wound Suturing
 - d. Peritoneal Drains
 - e. CVP line Insertions
 - f. IV Cutdown
 - ii. Delivery
 - a. Imminent NSD
 - b. Perimortem CS
 - Establishment of a procedure for surge threshold for ESC patients to address overstaying and prolonged exposure.
 - Identification of “spill-over area” for both non-infectious and infectious patients in surge cases.
 - Provision of standardized staffing requirement for surge capacity activation:
 - a. 50% partial surge
 - b. 75% partial surge
 - c. 100-150% surge
 - d. < 150% surge
- K. Established monitoring strategies for compliance. Conducted reorientations regularly.
- L. Conversion of TENT1 to Fireworks-Related Injury Area for the annual preparation for New Year

Issues and Concerns:

1. Revisit policies on medicine and supplies inventory and availability of some laboratory examinations
2. Shortage of emergency medication and medical supplies
3. Unavailability of some laboratory tests
4. Overflowing of patients at designated areas for COVID -19patients (Tents 1,2,3,RESU)
5. Displacement of ESC Minor OR. Procedures done at Minor OR like IJ Cath Insertion, CTT Insertion, Debridement, Wound Cleaning, and Wound Suturing were coordinated to Main OR. However, only those admitted patients were accepted at Main OR due to charging issues
6. Frequent sickness notification and leave of absences because of contact tracing and quarantine leave
7. Waiting time on interdepartmental referrals, disposition coming from consultant/senior residents/ fellows

8. Leading Causes/Reasons for Overstaying:
 - 8.1. Prolonged time in releasing/ issuance of lab results/ OPS/NPS done at SLH.
 - 8.2. Unavailability of some essential laboratory test.
 - 8.3. Vacancy in the ward due to conversion of some ward to Covid area and practice of physical distancing thus decreasing / limiting the bed capacity of clinical areas.
 - 8.4 Prolonged waiting time on interdepartmental referrals, disposition coming from consultant/ senior residents/ fellows.

ENT-HNS

Highlight of Accomplishments:

1. Granted full accreditation by the Philippine Board of Otolaryngology-Head and Neck Surgery
2. The ENT-HNS Center which was recently renovated and opened for use last January 2021, has catered to 171 patients up until the closure of OPD complex due to the pandemic with pure tone audiometry as the most common procedure done.
3. A total of 1,341 patients seen and treated from January to December 2021 including both OPD and teleconsultation
4. A total of 210 patients in the subspecialty clinics including those patients that were referred virtually to the service consultants. POLBE clinic and referrals has the highest patients seen.
5. There was significant decline of ER patients seen since April due to COVID19. A total of 1,353 patients in the ER, most of which are otology cases from January to December 2021
6. Some of the patients seen at the Emergency Room needed to be managed surgically. A total of 33 emergency surgical procedures were done from January to December 2020, majority of which were cases of foreign body ingestion.
7. Temporary closure of Elective OR started April and resumed last October having 1 OR day/week allotted per department. A total of 108 patients were operated on from January to December 2021, with most cases coming from the Tumor/ Reconstructive Surgery service. Elective surgeries are done by the resident staff of the department, with the assistance of consultants or fellows during complicated cases. There were no minor surgeries done since the closure of Minor OR
8. In accordance with the government's programs emphasizing health care and maintenance catering to the senior citizens, Jose R. Reyes Memorial Medical administers the National Center for Geriatric Health. Department of ENT-HNS continues to provide consultations in this center every Monday from 9am to 12pm until March 2020 due to the pandemic. Even though we weren't able to do the geriatric consultations at this center, we had our teleconsultation to address their ENT problems
9. Under the Republic Act (R.A.) No. 9709 otherwise known as the Universal Newborn Hearing Screening Act of 2009, the Newborn Hearing Screening/OAE has already been included and approved as part of the Newborn Screening Protocol covered by PHILHEALTH. All newborns are required to undergo newborn hearing screening at the nursery at a specified time following the hearing screening protocol

10. During the Goiter Awareness Week, *Thyroid Layman Forum* on early detection, prevention, and cure was held at the DOH Convention Center last September 2021. This was posted online via our teleconsultation page.
11. In its commitment to constantly strengthen its residency training program, the Department held 3 in-house courses: Basic Plastic Surgery (*PATA course*), Maxilomandibular, Fixation Workshop, Online Temporal Bone Course and Dissection Workshop with the presence of our very own specialists to facilitate such events
12. Finalist in research presentation
13. Conduction of online lectures
14. Attendance to online lectures/meetings/webinars

Issues and concerns:

1. Utilization of certain areas like the 4th floor solarium and the ENT-HNS Ward, may be put into good use by our Department, as we also plan to create a Prosthesis and Skills Laboratory that would cater to patients with cleft deformities and facial tumors in need of reconstruction
2. Granting of 4-year accreditation entails compliance to the rules set by the Board, like the provision of 2-3 beds (2-3 patients) per resident of the Department, and the provision of working equipment to be used
3. Additional OR days from 1x/week to 5x/week just like before the pandemic to maximize resident’s learnings, enhance surgical skills and to meet their OR requirements
4. Procurement of new equipment and instruments

FAMILY MEDICINE

Highlight of Accomplishments:

1. Granted 3-year accreditation by the Philippine Academy of Family Physicians (PAFP)
2. Participated in international research presentation
3. Participated in the various DOH campaign and programs, especially the One Hospital Command Center (OHCC)
4. Conduction of online lectures
5. Attendance to online lectures/meetings/webinars
6. Census:

Total Number of Patients served at Family and Community Medicine:.....	4447
Medical Assistance and other walk-in patients:.....	382
Employee Consultation:.....	21
Employment Physical Examination:.....	649
Annual physical exam for employees:.....	0
Sick leave validation:.....	1,806
Out-patient Consultation:.....	1,301
Ambulatory Fast-Track Unit:.....	288

HEALTH INFORMATION MANAGEMENT

Highlight of Accomplishments:

1. Prepared/Issued Medical Certificates, Medical (MC), Medico Legal (ML), SSS/GSIS and other Insurance claims for in Patient and Emergency/Out-Patient 3,914 prepared/ 3,154 issued
2. Certificate of Confinement released to patient/relatives While still admitted..... 137
3. Late Registration of Birth Certificates processed..... 44
4. Birth Certificates registered 1,217
5. Death Certificates prepared and released 1,399
6. In-patient Charts monitored and processed for CF-4 4,964
7. Accessibility and Easy Retrieval System of medical Charts maintained 8,441
8. Patient Charts processed 9,173
(This served as one of the vital source of data collated and needed by the Statistics Units for the preparation of their reports)
9. Help in improving healthcare delivery by giving assistance to Medical Doctors for their Research to be used in Accreditation, Mortality Report, Case Presentation, etc. (Charts retrieval and filed)..... 1,750
10. Provided ICD-10 codes to Charts which is needed in processing of PHIC claims(Out-Patient, Oncology, cobalt, ER)..... 11,944
11. In-Patients charts forwarded for processing og PHIC Claims (w/ Philhealth, Rebilling & RTH) 9,741
12. Court Summons processed and attended..... 174 Summons/ 15 attended
13. Birth Certificates Transmittal prepared 117 for current/ 47 for delayed
14. ESC Blotters received , groomed and scanned 3299 blotters/ 69500 pgs
15. In-patients charts groomed 12,467 charts/ 1,022,368 pgs
16. In-patient Charts scanned 16,670 charts/ 929,010 pgs
17. Charts certified for PHIC purposes 425 charts / 36,305 pgs

INTERNAL MEDICINE

Highlight of Accomplishments:

1. Establishment and continuous operation of the Hemodialysis Unit at Main JRRMMC and at the GGHS
2. Medical residents are regularly evaluated on their performance bi-annually which includes attitude, clinical performance and patient quality care using a standardized rubrics provided by the Philippines College of Physicians as well as this institution. Lectures and patient rounds with the different consultants are regularly conducted either via virtual platform or physical rounds

3. Conducted regular department activities such as Monthly Mortality and Morbidity Conference and Medical Grand Rounds
4. The department remains active in the different outreach programs mostly sponsored by the hospital
5. The Department of Internal Medicine - Section of Nephrology was granted another 1 year of Recognized Status by the Philippine Society of Nephrology for Nephrology Fellowship Training last February 2021
6. The department strategic planning was held last January 9, 2021, via online platform
7. Procurement of various equipment for the different units like CVU, Medical Oncology and Pulmonary Unit
8. Medical Oncology Census:
PATIENT LOAD
2021 (as of December 31, 2021) = 11,164
 - i. Admissions = 20
 - ii. Out-Patients = 11,144
 - iii. New Patients = 670
 - iv. Old Patients = 10,474
 - v. Cancer Sites
 1. Breast = 7,751
 2. Lung = 159
 3. Head and Neck= 890
 4. Colon-Rectum = 1,318
 5. Lymphoma = 316
 6. Others = 794
9. Conducted the Annual Post Graduate Course entitled "ID on Board: Frontline Handling of Infections" held via online platform last November 7, 14 and 21, 2020
10. Attendance to online lectures/meetings/webinars/conferences

Issues and concerns:

1. Lack of medical residents to man the COVID areas especially when a surge arises, and number of residents are being quarantined
2. Increased number of residents placed on quarantine due to the COVID pandemic
3. No available CoVID RT PCR in the institution during weekends
4. Intermittent unavailability of necessary ancillaries such as Blood CS, Creatinine, Na, K, trop I etc.
5. Lack of emergency medications at the Emergency Room (the following medications are most commonly run out of stock):
 - Nicardipine
 - Clonidine
 - Furosemide
 - NahCO3 solution
 - D5050 vial
 - Ipratropium + Salbutamol neb
 - ISDN
 - ISMN

6. Lack of sustainability of Antibiotics and other medications at the ward:
 - There were multiple instances that antibiotics are not available. This can contribute in developing antibiotic resistance due to switching to another class of antibiotics or using inappropriate class of antibiotics due to its limited supply
 - Other unavailable medications at the ward: Sodium Bicarbonate, Calcium Gluconate, d5050

MEDICAL SOCIAL WORKS

Highlight of Accomplishments:

A. STATISTICAL AND CASEWORK SERVICES

1. Total Caseload

New - 14,295
 Old - 41,598
 TOTAL 55,993

2. Total Caseload According to Clinical Areas

In Patients - 35,222
 ER Patients - 6,703
 Out -Patients - 14,068
 TOTAL 55,993

3. Total Number of New And Old Patients according to MSWD Classification

MSWD CLASSIFICATION		PHILHEALTH	NON-PHILHEALTH	TOTAL
DOH A.O. 2015-31	DOH A.O. 51 S. 2001			
INDIGENT OR POOR	CLASS D	12,878	3,758	16,636
	CLASS C3	11,242	3,445	14,687
PARTIAL PAY	CLASS C2	10,008	2,299	12,307
	CLASS C1	6,297	1,357	7,654
FULL PAY	B SERVICE	3,893	816	4709
	PAY	-	-	-
TOTAL		44,318	11,675	55,993

4. Total Number of Patients enrolled to Point of Service (POS) Program of PhilHealth

Financially Incapable – 2,272

5. Total Number of Patients served under the Medical Assistance for Indigent Patients (MAIP) Program --- 20,697

6. Total Number of Patients according to Sectoral Group

SECTORAL GROUPING	Number of Patients
Senior Citizen	8622
Persons with Disability (PWDs)	3958
Indigenous People	-
Barangay Health Workers (BHW)	1
Barangay Officials	12
Veterans	-
Public Health Worker	175
Government Workers	1005
Custodial	192
VAWC	153
TOTAL	14,118

B. CASE MANAGEMENT SERVICES

1. Pre-Admission Counselling - 5107
2. Orientation of Policies - 33,216
3. Psychosocial Counselling (Individual and Family) -9907
4. Ward Rounds – 1395
5. Home Visitation - 4
6. Patients/watcher Education –8957
7. Consultation /Advisory Service-6993
8. Crisis Intervention - 1744
9. Grief Work – 195
10. Behavioral Modification -100
11. Family Life Education - 3013
12. Coordination with Multidisciplinary Team
 - a. Physicians- 3154
 - b. Nurses – 4940
 - c. Pharmacist- 430
 - d. Nutritionist- 12
 - e. Administrative Service- 2020
 - f. Chaplain – 3
 - g. Management -28
 - h. Other Staff- 10,236
13. Number of Patients without relatives given Pauper’s Burial- 25

C. DOCUMENTATION

1. Assessment Tool – 14,295
2. Social Profile – 4581
3. Progress Note- 9751

4. Group Work Recording- 3
5. Social Case Study Report- 1906
6. Social Case Summary-20,829
7. Home Visit Report- 3
8. Feedback Report- 71

D. CONCRETE SERVICES

1. Facilitation/Provision of Medicines
And Procedures – 13,075
2. Transportation Assistance – 8
3. Material Assistance (food/clothing) -163
4. Financial Assistance (donors) – 1258

E. FACILITATING REFERRALS

1. Number of Incoming Referrals - 4191
2. Number of Outgoing Referrals - 1420

F. DISCHARGE SERVICES

1. Discharge Planning- 404
2. Facilitation of Discharge- 6497
3. Post Discharge Services- 1285
4. Pre-termination Counselling- 202
5. Home Conduction – 1

G. FOLLOW-UP SERVICES

1. Home Visit – 5
2. Letter Sent – 139
3. Text/Phone Calls – 1920
4. Contact of Relatives by Telephone/Cellphone – 1936
5. Contact of Relatives through Mass Media – 91
6. Follow Up of Treatment Plans – 7396
7. Follow Up of Rehabilitation Plans- 52
8. Linkages with Donors - 152

H. RESOURCES GENERATED

SOURCES	PARTICULARS	AMOUNT
Non-Government Organizations/Private Donors/Philanthropists	Medicines	Php 216,797.98
	Procedure	127,019.00
	Supplies	168,926.37
	Transportations	1,300.00
	Groceries	41,476.00
	Blood	129,450.00
	Burial Assistance	8,000.00
	Milk Supplement	56,270.50
	TOTAL	Php 749,239.85

NEUROLOGY

Highlight of Accomplishments:

1. Conducted Department *Annual Strategic Planning* via Zoom last January
2. The Department of Behavioral Medicine in partnership with the Department of Neurology launched the Assessment and Management of Psychiatric Emergencies. This was launched due to the alarming rise of suicidal rates in the institution
3. Review and revision of the admission policy guidelines for Neurology Ward, Acute Stroke Unit and Neurology ICU
4. Created a transition ward due to rising COVID-19 cases. This ward aims to isolate patients with COVID-19 symptoms from those who are asymptomatic
5. Use of Telemedicine for OPD consultation
6. Conduction of wellness lectures/lay forums through online platform
7. Attendance and participation in local and international conventions and seminars approved/endorsed by the PNA
8. Attendance to online lectures/meetings/webinars/conferences

Issues and concerns:

1. Construction of a Neurophysiology Laboratory Complex to house machines including EEG for routine and long term monitoring, TCD, CDS, EMG-NCV
2. Hastening the assistance given by social service to patients for discharge to avoid patient congestion at ER level

NUCLEAR MEDICINE

Highlight of Accomplishments:

1. Granted full accreditation by the Philippine Specialty Board of Nuclear Medicine effective October 1, 2018 - December 31, 2021 and has been renewed for another period from January 1, 2022 – December 31, 2024
2. Newly acquired equipment:

BERTHOLD Multi Crystal Gamma Counter LB2111	Increased capacity for radioactive immunoassay tests
ATOMLAB 960 Thyroid Uptake System and Well Counter	Thyroid uptake study
EUROPROBE 3 Gamma Probe	Sentinel Lymph Node Scintigraphy and Gamma Probe Guided Surgical Procedures

3. Attendance and participation in conventions and trainings
4. Attendance to online lectures/meetings/webinars/ conferences

Issues and concerns:

1. Need for additional imaging equipment (SPECT-CT, PET-CT) needed to accommodate large volume of patients necessitating referral to other institutions for other Nuclear Medicine procedures not available in our department. The current SPECT Gamma Camera also only has one functioning detector causing slower imaging time
2. Faulty plumbing at the area of DXA Machine causing flooding and possible water damage to the computer
3. Lack of Cardiology fellows/rotators to oversee Nuclear Cardiac procedures

NUTRITION & DIETETICS MANAGEMENT

Highlight of Accomplishments:

1. Approved Annual Procurement Plan amounting to ₱13,296,436.21 with supplemental request of ₱8,905,884.72 while Quezon Institute supplemental request amounting to ₱3,779,632.14 with overall total of ₱25,981,953.07
 - Perishable items consumed:

JRRMMC	₱7,002,081.40
Quezon Institute	₱ 458,686.96
 - Non-perishables:

JRRMMC	₱2,524,870.82
Quezon Institute	₱ 324,726.83
 - Tube feeding:

JRRMMC	₱ 959,400.75
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 - Liquid diet:

JRRMMC	₱ 7,394.87
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 - Meals served to frontliners
 - Meals served to vaccinators
 - Meals served to JRRMMC employees
 - Meals served to QI employees
2. Clinical patients given diet counselling:

In Patient	520
Out Patient	64
Telenutrisyon	55
Home instruction	154
3. New equipment acquired:

Medical Grade Air purifier	3 units
Screen door	2 lot
4. Attendance to online lectures/meetings/webinars/conferences

Issues and concerns:

1. Menu were not followed due to delay in processing of documents for the 2nd semester consumption
2. Unstable internet connection

OB-GYNECOLOGY

Highlight of Accomplishments:

1. Attended to referrals from different parts of Metro Manila, primarily the 1st district of Manila, and patients from Cavite, Laguna, and Batangas
2. Continued to reach out patient's needs through online telehealth at our Facebook Page jrrmmcobgyntelekonsulta. The department implements a thoroughly thought out and planned process flow by the residents and consultants in-charge in the OPD
3. Online platform was also utilized by the department for information dissemination. Information about father's role in breastfeeding and delivery, importance of a facility-based delivery, benefits of breastfeeding, common gynecologic problems and 10 danger signs of pregnancy
4. With the continued COVID-19 pandemic, a transition room was constructed at the OB-GYN ward to cater patients that are asymptomatic but with no valid swab result yet. This aims to lessen the possible exposure of patients to each other due to the unknown COVID-19 status
5. Provided webinars for the employees of JRRMMC regarding their roles in promoting family planning and teenage pregnancy and was aired through Facebook Live to reach more people
6. The Section of Reproductive Medicine hosted its Annual Menopause Day last October. The activity involved JRRMMC employees and viewers from the Facebook Live who were enlightened about the different facts and fiction about menopause
7. In celebration of the Cervical Cancer Awareness Month the Section of Gynecologic Oncology was invited by the JRRMMC Public Health Unit to deliver a virtual lecture on cervical cancer awareness last May 21, 2021 with 219 participants. The section also conducted a free Visual Inspection using Acetic Acid at the out-patient for our employees on May 28 and May 31 at the Out Patient Department. Thirty-three (33) employees were screened for cervical cancer wherein three patients tested positive for via and were offered colposcopy and one patient was found to have a cervical mass and underwent punch biopsy
8. The Section of Reproductive Medicine conducted the yearly lay forum together with its honored guests. Employees from JRRMMC were included in the zoom webinar and was aired through Facebook Live to reach more people. The participants were the hospital employees, patients and other people that was able to be invited through our telehealth. A total of 300 participants from zoom and 106 from Facebook were able to attend. More than 80% of the attendees were employees of our institution. The objective of the webinar is to educate women on the different family planning methods so that they can choose the proper contraception armed with the appropriate knowledge

9. Last June 9-11, 2021, the department conducted the first Virtual Post-Graduate Course (15th Post Graduate Course) entitled SMART- Simplified Management Approach, Recognition and Treatment. This was held for 3 days with interesting topics discussed by various speakers from the department and other institutions
10. The Section of Reproductive Medicine hosted its Annual Menopause Day last October 27. The activity involved JRRMMC employees and viewers from the Facebook Live who were enlightened about the different facts and fiction on menopause. A total of 238 ZOOM participants and 54 from facebook were able to attend the webinar. This was joined by different guest speakers from different specialties to address different concerns and symptoms related with menopause
11. For this year the section of Gynecologic Oncology was chosen to be a part of the SUCCESS Study. This is a collaboration with John Hopkins Program for International Education in Gynecology and Obstetrics (JHPIEGO) for the Scale Up Cervical Cancer Elimination by Systematic Screening (SUCCESS) Study. The aim of the study is to promote health seeking behavior, develop a habit to do screening and lessen the burden of disease in our patients
12. Three (3) consultants were voted as officers of POGS. Dr. D Leilani Chavez – Coloma as re-elected Board Secretary, Dr. Ronaldo Santos and Dr. Anna Belen Ignacio-Alensuela as members of the Board of Trustees
13. The department conducted the first Virtual Practical Obstetric Multi-Professional Training (PROMPT) on November 28, 2021. A total of 20 participants attended the virtual training and was composed of the OB-GYN residents, representatives from the Anesthesia service and OB-GYN ward staff
14. The Christmas Party this year was held on December 17, 2021, with the theme, Vitamin C-Infused Christmas Party which aims to energize the members of department as the COVID-19 pandemic continuous. A mass was first held as a thanksgiving for a successful year followed by the main celebration. As was done last year in lieu of the exchange gift a cash donation was opted to be given to the victims of the typhoon Odette
15. Annually, the department has a gift giving activity for the OB-GYN Patients and Staff and this year was no different. With the second-year residents leading the project for this year's gift giving, a simple but well thought of gift was given to all our patients as gratitude for their continued trust in us and, also to the staff for their continued support
16. Awards in research presentations and academic excellence
17. Acquisition of various equipment such as one eight (8) cardiotocogram (1) cardiac monitor with gas module, (3) cardiac monitors that will be used to provide quality and affordable health care services to our patients especially our high risk pregnant women. Also received one (1) examination table for use during tru cut biopsy or other specialized procedure
18. Stronger and more systematic Service Delivery Network (SDN)
19. Awards in research presentations and academic excellence
20. Attendance to online lectures/meetings/webinars/conferences

Issues and concerns:

1. Admissions were limited to half the total bed capacity per room to maintain physical distancing
2. Services at the Out Patient Department were temporarily put on hold during the surge
3. Elective surgeries were put on hold and only emergency cases were catered
4. The number of admissions compared from the previous years is noted to be decreased. There was a 23.27% decrease from the previous year was seen on the number of admissions
5. Need for additional equipment
6. Expedite procurement of supplies and equipment

OPHTHALMOLOGY

Highlight of Accomplishments:

1. The teleconsultation service was officially set-up by April 2020 and catered to 719 patients in 2021.
2. Provided daily ophthalmic services at the Geriatric General Health Services
3. The department also offered various ancillary diagnostic procedures, as well as laser procedures to JRRMMC patients at a reasonable cost. A total of 859 eye surgeries were performed at both the Minor and Main Operating rooms, mainly composed of emergency ORs and elective ORs from January to December
4. In support of the *Kalusugan Pangkalahatan* program, the department made sure the utilization of Philhealth benefits in order to provide cataract surgical services in compliance to the “No Balance Billing” policy of Philhealth
5. PHIC Claim Form completely filled out and signed immediately after operative procedure before submission to Philhealth, which undoubtedly facilitated collection of PHIC reimbursements of the hospital
6. The department is currently an accredited Philippine Board of Ophthalmology
7. Extensive training activities which included the regular clinical conferences, and both written and oral exams, continued albeit virtually, once distancing restrictions were in place
8. To make up for the decrease in patient interaction, each subspecialties had scheduled weekly conferences among the consultants and residents
9. The department was able to procure a new Multimodal Imaging Machine, Corneal Tophography machine and a desktop unit.
10. Other accomplishments include the repair and preventive maintenance of our various equipment (Phacoemulsification machine, Leica operating microscope, Humphrey Visual Field Analyzer, Lumera 700 Operating Microscope, OMS 90 Microscope, Fluorescein Angiography, Optical Coherence Tomography machines and indirect ophthalmoscopes)
11. The department also presented in the Hospital’s in-house activities like the Mortality and Morbidity conference and Subspecialty Conference
12. Participation to various local and international conferences
13. Awards in research presentations

14. Attendance to online lectures/meetings/webinars/conferences

ORTHOPAEDICS

Highlight of Accomplishments:

1. Granted full accreditation by the Philippine Board of Orthopedics covering the period from February 2021 to February 2022
2. Three graduates passed the Philippine Board of Orthopedics Diplomate Examination last March 2021 and two graduates passed the Philippine Board of Orthopaedics Qualifying Examination last September 2021
3. A total of 826 major operations and 826 OPD/minor operations with Trauma surgery comprising majority of the cases.
4. Participated in the various DOH campaign and programs, especially, against firecracker-related injury by actively handling *Aksyon Paputok Injury Reduction (APIR)* patients at the emergency room
5. Stressed the importance of Staff Development by hosting or attending various symposiums, workshops and conventions
6. Strengthened the Departments' Research Program as evidenced by several research posters selected for presentation both in local and international conventions
7. Infrastructure:
 - Completion of Orthopedic Conference Room and Residents' Learning Center
 - Completion of Orthopedic Office and Residents' Quarters
 - Conversion of Spine Ward to negative pressure isolation ward
 - Installation of plastic barriers between beds in all wards
8. Acquisition of various equipment such as C-Arm, Lead Gown and Lead Goggles
9. Key members of consultant staff holding positions in National Organizations

OUT PATIENT DEPARTMENT

Highlight of Accomplishments:

1. Digi-board videoplay following DOH based Health Event at the OPD and finger scanning area for public view and awareness.
2. Continuous play of video clips on COVID-19 prevention and control for public awareness to TV Monitors situated on strategic area(s).
3. Continuous distribution of IEC materials illustrating COVID-19 awareness, prevention and control for awareness of public about Health.
4. Relocation of Alfresco OPD Complex consultation to previous EYE Center clinic, OPD Ophthalmology, Eye Center, OPD ENT and Ent Center to 5th Floor Main Building in coordination with the Engineering Department for the continuous renovation works at OPD
5. Facilitation of Flu Vaccine Rollout

6. Acquired eight (8) Units of wheelchair
7. Maintained cleanliness and orderliness of the outpatient department

Issues and concerns:

1. OPD is still on a limited face to face consultation mainly because of the pandemic and ongoing renovation of OPD
2. Bizbox not fully operational due to lack of internet connectivity and the ongoing renovation of OPD
3. Untimely reporting of Medical Resident on Duty to their designated post.
4. Lack of queuing system resulting to long hour/s waiting of patients
5. Lack of waiting area for patients resulting to breach in social distancing
6. Provision of X-ray and ECG facilities for OPD use only
7. Installation of queuing board machine in every clinic in the OPD
8. Provision of Supervisor and Chairpersons' Office

PATHOLOGY & LABORATORIES

Highlight of Accomplishments:

1. Continuous operation of Covid-19 RT-PCR Molecular Laboratory for COVID Testing
2. Establishment of the Laboratory at JRRMMC Covid-19 Annex at Quezon Institute
3. Created a Contingency Plan to be implemented by the Department of Pathology and Laboratories during an Outbreak
4. Promotion and hiring of new staff
5. Acquisition of various new equipment such as (1) Microscope, (1) GeneXpert Machine, (2) Biosafety Cabinets, etc.
6. Availability of petty cash fund for laboratory tests which are not available in the hospital
7. Attendance to online lectures/meetings/webinars/conferences

Issues and concerns:

1. Protracted scheduling and processing of hiring and promotion of MT staff due to strict rules of Civil Service Commission hence to request that a shorter IPCR period be implemented by the hospital's HR department.
2. Need for renovation of the entire department to meet demands of service and regulatory requirements
3. Expansion of Morgue area
4. Need for procurement of additional new equipment such as Ultra Low Freezer for Drug Testing Laboratory, cryostat machine and new morgue freezer
5. Need for additional tests like hepatitis profile and tumor markers (PSA, CEA, CA-125, etc.)
6. Problems in procurement of supplies resulting in unavailability of laboratory services
7. Limited space and facilities
8. Slow process in requests for replacement of needed machines/equipment

9. Need to have a Memorandum of Agreement with funeral services for proper disposal of the increasing numbers of unclaimed infant cadavers and body parts
10. Need to have Memorandum of Agreement with regards to laboratory outsourcing
11. Incompatibility of Hospital Information System with Laboratory Information System creating problem in Collection and Billing

PEDIATRICS

Highlight of Accomplishments:

1. The 3-year residency training program is fully accredited by the Philippine Pediatric Society
2. Total renovation of PICU (negative pressure and 1 isolation room)
3. Conduction of interactive session via Facebook Live titled Family Planning Services and Teenage Pregnancy last August as well as Lactation Management Training to all employees last September in cooperation with the Department of OB-Gynecology
4. Z benefit package for premature and small infants
5. Kangaroo Mother Care Unit at OB Extension catering to low birth weight infants
6. The annual activity of the department to promote well child care was held in compliance to the new normal. The Batang Malusog Contest was done last December 2020 via Facebook
7. Established Childhood Cancer Medicine Program (together with DOH) which enable onco patients to procure chemo medicines for free
8. Continued to identify and address the needs of the adopted families and community
9. Participation in various hospital, DOH and GAD activities
10. Conduction of Wellness programs/lay fora
11. Attendance to online lectures/meetings/webinars

Issues and concerns:

1. Increasing number of non-Covid cases but limited number of bed capacity
2. Unavailability of chemo drugs
3. Significant reduction in case load and procedures, as well as subjects for research
4. Noted less consults but patients are more toxic upon arrival at the institution
5. There is still significant lack of equipment such as, portable and wall mount cardiac monitor, defibrillators, portable ECG machine, and laryngoscope set especially at the NICU, PICU, Ward, and ER
6. There is still no adolescent ward (separate male & female ward) for patients' ages 13 to 18 years
7. Need for increased community involvement appropriate for a level III community

PHARMACY

Highlight of Accomplishments:

1. Upon the creation of the **Central Pharmacy**, six (6) Senior Pharmacists were chosen to the following:
 - Purchase Request for both DOH-Botika and Welfare Pharmacy
 - Regular reporting
 - Receive all the deliveries
 - Issue medicines and supplies to both DOH- Botika and Welfare Pharmacy the needed supplies for the week.
 - Monitor the stocks
 - Inventory / Monitor Issuances
 - Monitoring of Purchase Request
 - Monitoring of Expiry Medicines
2. The use of **Medicines Inventory Management System (MIMS)**
 - Easy access on the lists of available medicines
 - Stocking and dispensing is recorded real time
 - Stock level is monitored
3. Total Amount of Medicines/Supplies Issued to:

MAFP

January – March -----	1,193,697.41
April – June -----	1,543,053.41
July – September -----	1,216,795.49
October – December -----	971,856.23
Total-----	4,925,402.54

PHIC

January – March -----	9,058,117.25
April – June -----	1,868,889.43
July – September -----	7,836,826.59
October – December -----	8,120,396.82
Total-----	26,884,230.09

SALES

January – March -----	1,730,273.09
April – June -----	1,228,495.43
July – September -----	1,498,449.31
October – December -----	943,307.72
Total-----	5,400,525.55

GRAND TOTAL ----- 37,210,158.18

1. Number of Prescription Filled

Indigent -----	434
Donated Drugs -----	7,351

Dangerous Drugs ----- 10,517
 EMS ----- 610
 ER ----- 97,586
 NBB ----- 127,243

Partial Pay ----- 109,601
 OR ----- 54,721
 Sales/MAFP/Petty Cash ----- 8,237
 PHIC ----- 61,239
 Antibiotics ----- 11,474
Total ----- 489,103

2. Unfilled Prescriptions----- 3,446
 Total Prescriptions received----- 486,686
 % Unfilled prescriptions----- 0.71%
 % Filled prescriptions----- 99.29%
 Number of charge slips prepared----- 85,039

3. Cash Advance----- 687,109.30
 Emergency purchase for NBB patient----- 6,280,453.56
 Emergency purchase for Covid19 Patients----- 598,154.10
Total -----7,656,716.96

4. Medicines received from CSPMAP

Quantity	Unit	Medicines	Ending Balance as of Dec. 31, 2021	Expiration Date
199	vial	Trastuzumab 150 mg (Hertraz)	0	03/2025
200	vial	Doxorubicin 50mg vial (Doxonish-50)	0	07/2022
200	vial	Doxorubicin 50mg vial (Doxonish-50)	0	07/2022
300	vial	Trastuzumab 150 mg (Hertraz)	0	06/2025
4900	tablet	Imatinib mesilate 100mg tab (Glivec)	4120	12/2022
64	vial	Leuproreline acetate 3.75mg (Endrolin)	27	05/2023
735	pfs	Filgrastim 300mcg/0.5ml (Ambigrast)	15	04/2023
140	ampule	Mesna 100mg/ml, 4ml (Oncomes)	97	01/2023
36	vial	Carboplatin 150mg vial (Womacarb)	36	03/2023
334	vial	Carboplatin 150mg vial (Womacarb)	334	04/2023
36	vial	Carboplatin 450mg vial (Womacarb)	0	04/2023
334	vial	Carboplatin 450mg vial (Womacarb)	154	04/2023
245	vial	Irinotecan HCl 40mg/2ml vial (Irnother)	153	04/2023
990	tablet	Methotrexate 2.5mg tablet (Emthex)	990	04/2023
1260	ampule	Ondansetron 2mg/ml, 4ml ampule (Emitron)	550	03/2023
1300	ampule	Diphenhydramine 50mg/ml (Bexil)	1163	06/2023
280	vial	Cyclophosphamide 500mg vial (Cytoace)	0	06/2023

75	vial	Ifosfamide 1g vial (Fosfa)	75	03/2023
200	vial	Doxorubicin 50mg (Doxonish-50)	0	07/2022
3000	tablet	Letrozole 2.5mg (Letrocord)	0	01/2022
60	tablet	Bicalutamide 50mg (Bicatero)	105	03/2023
1400	tablet	Capecitabine 500mg (Capetero)	0	03/2023
195	vial	Gemcitabine 200mg (Gemtero)	195/387	04/2023
293	vial	Gemcitabine 1mg (Gemtero)	293/482	04/2023
960	tablet	Imatinib mesilate 400mg (Cytonib)	960/1800	03/2023
315	vial	Paclitaxel 6mg/ml,16.7ml (Paclitero)	315/71	04/2023
300	vial	Trastuzumab 150 mg (Hertraz)	0	06/2025

250	tablet	Sertraline HCl 50mg (Deperin)	TRANSFERRED TO BEHAVIORAL MED	04/2023
1000	tablet	Sodium Valpoate + Valproic acid 500 mg (Valparin XR 500)		04/2023
1200	tablet	Valproic Acid 250mg ER (Depamax)		10/2022
700	tablet	Lithium Carbonate 450mg SR (Litcab)		06/2023
100	tablet	Escitalopram Oxalate 10mg (Feliz S 10)		05/2023
1000	ampule	Haloperidol 5mg/ml soln. for inj. (Psyqure)		10/2022
28	vial	Leuprorelin Acetate 3.75mg powder single dose with syringe (IM/SC) (Endrolin)	28	05/2023
294	vial	Paclitaxel 6mg/ml,25ml (Anzatax)	214	04/2023
60	ampule	Mesna 100mg/ml, 4ml (Oncomes)	60	01/2023
2100	tablet	Imatinib mesilate 100mg (Glivec)	2100	12/2022
99	vial	Trastuzumab 600mg (Herceptin)	108	01/2023
42	vial	Vincristine sulfate 1mg/ml, 2ml (DBL- Hospira)	38	12/2022
294	vial	Paclitaxel 6mg/ml,25ml (Anzatax)	294	04/2023
367	vial	Paclitaxel 6mg/ml, 25ml (Anzatax)	367	04/2023
98	vial	Vincristine sulfate 1mg/ml, 2ml (DBL- Hospira)	98	12/2022
699	vial	Fluorouracil 50mg/ml, 10ml (Raciwel)	605	06/2023
300	vial	Trastuzumab 150 mg (Hertraz)	0	06/2025
39	vial	Bleomycin 15iu (Bleocel)	39	08/2023
45	vial	L-asparaginase Lyophilized powder 10,000 iu (Celginase)	45	08/2023
105	vial	Epirubicin HCl 50mg (Rubilon)	105	08/2023
47	vial	Cisplatin 1mg/mL, 10mL (Celplat)	0	08/2023
2	vial	Cisplatin 1mg/mL, 50mL (Celplat)	0	08/2023
259	capsule	Hydroxyurea 500mg (Leukocel)	259	07/2023
21	vial	Vincristine sulfate 1mg/ml, 1ml (Vinlon)	19	08/2023
259	vial	Doxorubicin HCl 10mg (Doxilyd-10)	259	08/2023

1319	vial	Docetaxel 20mg/ml, 1ml (Doceted)	1175	08/2023
3139	vial	Docetaxel 40mg/2ml, 2ml (Doceted)	3046	08/2023
104	vial	Carboplatin 150mg (Womacarb)	35	04/2023
94	vial	Carboplatin 450mg vial (Womacarb)	94	04/2023
103	vial	Irinotecan HCl 40mg/2ml	103	04/2023
420	tablet	Methotrexate 2.5mg tablet (Emthex)	420	04/2023
565	vial	Docetaxel 20mg/ml, 1ml (Doceted)	565	08/2023
1345	vial	Docetaxel 40mg/2ml, 2ml (Doceted)	1345	08/2023
98	vial	Bleomycin 15iu (Bleocel)	98	08/2023
245	vial	L-asparaginase Lyophilized powder 10,000 iu (Celginase)	245	08/2023
245	vial	Epirubicin HCl 50mg (Rubilon)	245	08/2023
123	vial	Cisplatin 1mg/mL, 10mL (Celplat)	0	08/2023
219	vial	Cisplatin 1mg/mL, 50mL (Celplat)	152	08/2023
2280	tablet	Tamoxifen citrate 20mg (Tamoxilon)	0	07/2023
1140	tablet	Hydroxyurea 500mg (Leukocel)	1140	07/2023
49	vial	Vincristine sulfate 1mg/ml, 1ml (Vinlon)	49	08/2023
4	vial	Doxorubicin HCl 10mg (Doxilyd-10)	4	07/2023
626	vial	Doxorubicin HCl 10mg (Doxilyd-10)	426	08/2023
609	vial	Doxorubicin HCl 50m (Doxilyd-50)	451	07/2023
119	vial	Trastuzumab 150 mg (Hertraz)	0	06/2025
210	vial	Etoposide 20mg/ml, 5ml	207	09/2023
490	vial	Etoposide 20mg/ml, 5ml	490	09/2023

5. Medicines Received form DOH

Quantity	Unit	Medicines	Ending Balance as of Dec. 31, 2021	Expiration Date
11	vial	Covid-19 Vaccine 4 MI (Astrazeneca)	0	11/2021
342	vial	BioNTech/Pfizer (Cominarty)	0	01/2022
605	pfs	Quadrivalent Influenza Vaccine (Surface Antigen, Inactivated) (Influvac Tetra)	0	12/2021

6. Medicines received form NKTl

Quantity	Unit	Medicines	Ending Balance as of Dec. 31, 2021	Expiration Date
11	vial	Covid-19 Vaccine 4 MI (Astrazeneca)	0	11/2021
342	vial	BioNTech/Pfizer (Cominarty)	0	01/2022
605	pfs	Quadrivalent Influenza Vaccine (Surface Antigen, Inactivated) (Influvac Tetra)	0	12/2021

PHYSICAL MEDICINE AND REHABILITATION

Highlight of Accomplishments:

1. The department contributed a total of Php 554,316.25 generated from PT/OT/ Geriatrics out-patient and PT/OT in-patient treatment
2. Partnership with Latter-Day Saints Charities and UP-PGH
3. Provided daily rehabilitation services at the Geriatric General Health Services Income- Geriatric General Health Services from Jan to Dec 2020:

Month	Income
January	14325
February	10755
March	7545
April-Dec	-
Total	32,625

4. The total affiliation fees generated was Php 50,000.00 from 6 PT schools and 3 OT schools
5. There was 93 % of the PT treatment is from face to face approach while only 7% is via teletherapy approach. Furthermore, OT face to face treatment comprises of 78% and only 22% thru virtual approach. There was no teletherapy services availed by senior citizens from Geriatric Health Care –JR annex
6. No valid complaint was reported or written based from Public Assistance and Complaints Desk and Customer Satisfaction Survey Form
7. There were six (6) PT schools and three (2) OT schools made a contract with us for their 5th year (interns) level
8. Partnership with the Latter-Day Saints Charities & UP-PGH. Physical Therapy Section has been able to donate wheelchairs to the qualified recipients whom were assessed by PT Wheelchair assessor for 2020

9. Attendance to online lectures/meetings/webinars/workshops

Issues and concerns:

1. Ward exercises has been temporary shut since April 2020 due to COVID-19 pandemic
2. Need for expansion for Rehabilitation Center to accommodate increasing number of patients
3. Procurement of new machines and equipment

Q.I. – Offsite Modular Facility

Highlight of Accomplishments:

Capacity:

- A. 88 Regular Isolation Rooms with Negative Pressure

(4 Modular Units)

Each Room has its own

1. Mechanical Bed
2. Air-conditioning Unit
3. Overbed Table
4. Bed Side Table
5. Patient Monitor
6. CCTV Monitoring Camera
7. Toilet and Bath (Hot and Cold Water Supply)
8. Chair
9. IV Poles
10. Heavy Duty Suction Machines

- B. 10 Critical Isolation Rooms with Negative Pressure

Each Room has its own

1. Mechanical Bed
2. Air-conditioning Unit
3. Overbed Table
4. Bed Side Table
5. Patient Monitor
6. CCTV Monitoring Camera
7. Toilet and Bath (Hot and Cold Water Supply)
8. Chair
9. Emergency Cart
10. Heavy Duty Suction Machines
11. Mechanical Ventilators
12. High Flow Oxygen Device
13. IV Infusion Pumps
14. Syringe Infusion Pumps

- C. Each Regular Model Unit has its own:
 1. ECG Machine
 2. Defibrillator Machine
 3. UV Cabinet Box
 4. Whole Body Mirror for Donning and Doffing
 5. Patient Transport Stretcher
 6. Wheelchairs
 7. UV Lamp for disinfection
 8. Portable X-ray Unit
 9. Non-Contact Thermometer
 10. Bio-Refrigerator
 11. CBG Machines
 12. Portable Pulse Oximeter
 13. Weighing Scale
- D. Critical Modular Unit is equipped with:
 1. ECG Machines
 2. Defibrillator Machines
 3. UV Cabinet Boxes
 4. Whole Body Mirror for Donning and Doffing
 5. Patient Transport Stretcher
 6. Wheelchairs
 7. UV Lamp for disinfection
 8. Video Laryngoscopy
 9. 2D Echo Machine
 10. Portable X-ray Unit
 11. CBG Machines
 12. Bio-Refrigerator
 13. Non-Contact Thermometer
 14. Weighing Scale
- E. Other Available Equipment:
 1. Infant Incubator
 2. Point of Care Testing – For Satellite Laboratory
 3. Hematology, Chemistry, and ABG Machine – For Satellite Laboratory
- F. Office Equipment – Desktop Computer, Photocopier Machine, Portable Wifi Device
- G. Total Patient Census: from April 9 – December 31, 2021

SEVERITY	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
<i>MILD</i>	17	33	19	30	51	54	2	5	5
<i>MODERATE</i>	36	12	4	27	40	41	10	1	2
<i>SEVERE</i>	13	3	3	6	9	20	7	1	0
<i>CRITICAL</i>	1	0	0	0	0	1	0	0	0
TOTAL:	67	48	26	63	100	116	25	7	7
OVERALL TOTAL ADMISSION							459		
Total Recovered/Discharged:							440		
Total Mortality:							3		
Absconded:							1		
Total Transferred to other Hospital							15		

RADIOLOGY

Highlight of Accomplishments:

1. Updated Certificate of Compliance from DOH-CDRRHR in all modalities valid for 5 years
2. A total of 32,407 patients were seen (routine and special X-ray procedures combined), 55.09% are males and 44.91% are females. January recorded the highest number of patients (4,113) while September was the lowest (3,248)
3. Started operation of mammogram last October with 1 to 2 patients per week. A total of 14 procedures were seen, primarily from the OPD
4. Acquisition of new equipment such as Mammogram, portable X-ray and C-arm
5. Participation to various hospital activities and DOH programs
6. Attendance to online lectures/meetings/webinars/workshops/conferences

Issues and concerns:

1. Proposal for catheter laboratory
2. Additional consultants per section or modality

RADIOTHERAPY

Highlight of Accomplishments:

1. Granted full accreditation for the period January 1, 2022 to December 31, 2025.
2. The Department of Radiotherapy continued its operations and provided safe and quality services to the Filipino cancer patients amidst the pandemic. The Department continued to adapt the COVID-19 safety protocol, with an assigned Covid-19 Safety Officer.
3. Minimum health protocols are continually observed together with the use of PPEs, infrared thermometers, automatic alcohol dispensers, UV-C light, and HEPA filter Air Purifier. Strict implementation of regular Covid-19 swabbing as well as accomplishing health declaration forms for both staffs and patient is being done
4. Acquisition/Installation and training of the new Siemens Somatom CT Simulator located at the Radiotherapy department
5. Installation, commissioning, acceptance testing and start of the clinical utilization of the newly acquired Linear Accelerator with Intensity Modulated Radiotherapy (IMRT)
6. Successfully passed the Philippine Radiation Oncology Society (PROS) Re-accreditation last November 12, 2021 and the Food and Drug Administration (FDA) inspection for our newly acquired dedicated CT simulator

7. The department has been a training hub/center for medical physicist and radiologic technology therapists of other DOH hospitals in the provinces that are acquiring LINAC machines and brachytherapy facilities
8. Participation in local and international conferences
9. Awards in research presentations and academic excellence
10. Attendance to online lectures/meetings/webinars/workshops/conferences

Issues and concerns:

1. Procurement of additional equipment
2. Additional personnel

SURGERY

Highlight of Accomplishments:

1. Conduction of wellness lectures/lay fora and workshops
2. Conduction of virtual workshops/lectures
3. Participation to hospital activities
4. Attendance to lectures/seminars/workshops/conferences
5. Operations done by regular GS residents:
 - a. Private cases: 0
 - b. Service cases: 2447
6. Operations done by straight rotators in the institution: 71
7. Operations done by residents in outside rotation/ or residents rotating from another institution: 5
8. Operations done in outreach surgical missions: 0
9. Mortality rate: $(92/2518) \times 100 = 3.65\%$
10. Morbidity rate: $(66/2518) \times 100 = 2.62\%$

UROLOGY

Highlight of Accomplishments:

1. 100% passing rate in Philippine Board of Urology Diplomate Examination 2021
2. Good quality research outputs
 - a. Presented in local and international conferences
 - b. Winners during research contests
 - c. Published in local and international journals
3. 100% passing rate during the Online Philippine Board of Urology Resident In-Service Examination (both Basic and Clinical exams)
4. Simulation skills training as adaptive strategy to hone residents' surgical skills amidst the significantly decreased exposure to surgical cases during the quarantine

- period with combined face-to-face skills lab as allowed by existing infection control protocols
5. Acquisition of new nephroscopes, flexible cystoscope and various mini-PCNL one step dilators
 6. Improvement of existing Urology Telemedicine, adapting strategies to cope with the new normal to continuously serve the patients and offer quality urologic care online
 7. Attendance to lectures/seminars/workshops/conferences

Issues and concerns:

1. Concern on resident's surgical training and completion of case requirements during this pandemic where there is significant decrease in surgical census and exposure
2. Acquisition of a morcelator machine, pediatric cystoscope set, mini-PCNL set, flexible cystoscope, and urodynamics machine to maximize patient care and residents' training

RECOMMENDATIONS:**1. MANPOWER**

- Hiring of additional staff due to increase in subspecialties and in the number of patients being catered by our institution and in preparation for the 500-bed Advanced Comprehensive Multi-Disciplinary Cancer Center

2. SUPPLIES & EQUIPMENT

- Regular monitoring of supplies and update
- Tie-up with companies
- Investigation and monitoring of procurement process
- Innovate alternative modes to facilitate procurement process
- Regular preventive maintenance of existing equipment
- Upgrading and procurement of machines

3. STAFF DEVELOPMENT

- Allocation of budget for various multidisciplinary/interdepartmental lectures/orientation/ trainings/seminars/workshops
- Regular work load analysis of employees to maximize equal distribution of assigned tasks in order to ensure quality of service.
- More spacious working areas in order for the staff to work without restraint and to adapt to the new normal

4. INFRASTRUCTURE

- Improvement/Renovation of certain areas to meet the demands of service and regulatory requirements in accordance to the new normal and to continuously serve the patients and offer quality care

5. OTHERS

Provision of the following:

- Centralized computer information system for a more organized, efficient, and hassle-free data management, communication, and record-keeping system
- Uninterrupted internet access
- Subscription to a centralized online platform
- CCTV cameras, especially at the OPD
- Adequate parking area

CENSUS:

I. PATIENT CARE SERVICES

A. Total Patients Served

In-Patient/service days	-	117,424
Admitted	-	9,152
Discharged	-	9,173
Outpatient Consultation/ Treatment	-	107,449
Emergency Consultation/ Treatment	-	22,630
Average Length of Stay	-	8.14%
Bed Occupancy Rate	-	71.49%
Infection Rate	-	1.02%
Mortality Rate	-	4.75%
Discharge Planning Completion Rate	-	100.00%
Total No. of referrals from other Hospital	-	0
Total No. of referrals to other Hospital	-	0

B. Total Operations

Major OR	-	3482
Minor OR in-patient	-	209
Minor OR ER	-	1558
Minor OPD	-	227
Ambulatory	-	26
Ancillary Services		
Radiological Procedures & Ultrasound	-	48257
C.T. Scan	-	2777
Laboratory Services		
Clinical Microscopy	-	9972
Hematology	-	39,852
Clinical Chemistry	-	92,477

Blood Banking:	-	38,744
ABO Typing Tube Method	-	9539
RH Typing Tube Method	-	9539
Total Crossmatched	-	11817
Blood Transfused	-	7521
Networking	-	230
ABO Typing Slide Method	-	49
RH Typing Slide Method	-	49
Drug Testing	-	0
 Total number of donors		
ABO/RH Typing (Donors)	-	2,589
Hemoglobin and Hematocrit	-	2,589
Voluntary Donors	-	4,358
Replacement Donors	-	11
Mobile Blood Donations	-	56
Total Blood Collected	-	2,431
Immunology/Serology	-	3,779
Microbiology	-	14,489
General Pathology	-	3,961
 Nuclear Medicine Imaging Procedure	-	
 Other Special Services		
2D Echo	-	550
Brachytherapy	-	479
ECG/EEG	-	2,280 / 56
Physical Therapy	-	690
Occupational Therapy	-	533
Holter Monitor	-	70
Treadmill Stress Test	-	0
 Welfare Pharmacy/DOH Botika Services		
Prescriptions Filled	-	281016 / 209313
Unfilled	-	1654 / 1688
 Dental Section	-	0
 Psychological Services		
Industrial	-	284
Clinical	-	12
Other Referrals	-	0
Neuro-Psychiatric Exam/ Mental Clearance	-	97
 Medical Social Services	-	55,993
Eligibility Studies (Casework; Patients with sponsored PHIC Referral to and from other agency)		