

Republic of the Philippines

HOUSE OF REPRESENTATIVES

Quezon City, Metro Manila

FIFTEENTH CONGRESS

FIRST REGULAR SESSION

HOUSE BILL NO. 100

Introduced by **Honorables Janette L. Garin, M.D. (Iloilo, District 1)
and Walden F. Bello (Akbayan Party List)**

EXPLANATORY NOTE

The Philippines has produced the world's best surgeons and medical practitioners preferred by most nations and the international medical community. Fact is, serving as 'living' proofs are the hundreds of thousands in trusted and trustworthy Filipino men and women in the illustrious and highly-competitive world of medicine.

In a growing economy and community such as ours, diversity brings forth issues and concerns already global in nature. And the same is especially true in the world of medicine – Philippine scenario.

Thus the dilemma faced by the government and private sector triggered by the evolving needs of the citizenry. At least five decades after the passage of a then comprehensive Medical Act, sadly provisions on the law and of the law has now become unresponsive to the latest evolution of medical practice in the Philippines.

The State guarantees and recognizes the vital role of physicians in the preservation, maintenance, safeguard, cure and enhancement of life, health and general welfare of the citizenry.

In fact, "Do no harm," is foremost of the spoken and unspoken rule.

As such, the introduction of this House Bill aimed at further strengthening that rule as it lays down precise regulations on precise medical actions. The House Bill identifies the acceptable medical works in today's Philippine scenario as it gives the law the teeth to prosecute and go after violators.

Everybody has the right to proper medical care just as nobody has the right to play doctor to achieve that care. And the government mandated to oversee it all with regulations that should be responsive and attuned to the ever-changing, ever-growing and ever-challenging needs of the populace.

Needs and problems on medical care in the Philippines have evolved. Physicians Act of 2010 is designed to address it.


JANETTE L. GARIN, M.D.


WALDEN F. BELLO

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Introduced by **Honorable Janette L. Garin, M.D. and Walden F. Bello**

AN ACT REGULATING THE EDUCATION AND LICENSURE OF PHYSICIANS AND THE PRACTICE OF MEDICINE IN THE PHILIPPINES, REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 2382, AS AMENDED, AND FOR OTHER PURPOSES

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

ARTICLE I

GENERAL PROVISION

SECTION 1. *Title.* – This Act shall be known as the “Physicians Act of 2010”.

SEC. 2. *Declaration of Policy.* – The State recognizes the vital role of physicians in the preservation, maintenance, safeguard, cure and enhancement of life, health and general welfare of the citizenry. Physicians' professional services shall, therefore, be promoted as a regular component of the total health care system.

SEC. 3. *Objectives.* – This Act provides for and shall govern the:

(a) Standardization, upgrading and regulation of the medical education including internship training;

(b) Administration of the medical licensure examination, licensure and registration of the physicians;

(c) Supervision, control and regulation of the practice of medicine;

(d) Integration of the profession into one Philippine Medical Association (PMA); and

(e) Promotion of competence, moral values and professional attitude of physicians through an integrated PMA.

SEC. 4. *Enforcement.* – For the purpose of implementing the provisions of this Act, there shall be created the following: Council of Medical Education, hereinafter referred to as the Council, and the Professional Regulatory Board of Medicine, hereinafter referred to as the Board, under the Professional Regulation Commission (PRC), hereinafter referred to as the Commission.

1 ARTICLE II

2 THE COUNCIL OF MEDICAL EDUCATION

3 SEC. 5. *Composition of the Council of Medical Education.* - The Council of Medical
4 Education shall be composed of the following:

5 (a) The Chairperson of the Commission on Higher Education (CHED) or his duly
6 authorized representative as chairperson;

7 (b) The Secretary of the Department of Health (DOH) or his duly authorized
8 representative as member;

9 (c) The Chairperson of the Professional Regulatory Board of Medicine or his duly
10 authorized representative as member;

11 (d) The President of the Philippine Medical Association (PMA) or his duly authorized
12 representative as member;

13 (e) The President of the Association of the Philippine Medical Schools (APMS) or his
14 duly authorized representative as member; and

15 (f) The President of the Philippine Hospital Association (PHA) or his duly authorized
16 representative as member.

17 The Chairperson and members of the Council shall hold office during their
18 incumbency in the respective institutions that they represent.

19 The Council, within sixty (60) days after the effectivity of this Act, shall appoint a
20 technical panel composed of seven (7) outstanding members of the academe and/or the
21 profession whose responsibility is to assist the Council in carrying out its functions and
22 powers.

23 SEC. 6. *Functions and Duties.* - The Council shall have the following functions and
24 duties:

25 (a) To determine the requirements for admission into a recognized college of
26 medicine;

27 (b) To determine the minimum requirements for physical facilities of colleges of
28 medicine, to wit: buildings including hospitals, equipment and supplies, apparatus,
29 instruments, appliances, laboratories and bed capacity for instruction purposes, operating
30 and delivery rooms, facilities for out-patient services and others used for didactic and
31 practical instruction in accordance with modern trends;

32 (c) To determine the minimum number and the standard qualifications of teaching
33 personnel including student-teacher ratio;

34 (d) To determine the minimum required curriculum including internship leading to
35 the degree of Doctor of Medicine;

36 (e) To authorize the implementation of an acceptable innovative medical
37 curriculum/strategy in a medical school that has exceptional faculty and equipment
38 facilities. Such an innovative curriculum may prescribe admission and graduation
39 requirements other than those prescribed in this Act: *Provided, That only exceptional*

1 students shall be enrolled in the innovative curriculum;

2 (f) To accept applications and issue certificates of admission to a medical school and
3 keep a registry of those issued with said certificate; and to collect from said applicants
4 reasonable fees as may be determined by the Council which shall accrue to the operating
5 funds of the Board of Medical Education;

6 (g) To recommend to the CHED the closure or suspension of the degree of Doctor of
7 Medicine program of a college of medicine when called for based on the evaluation of the
8 statistical information on the performance of the said college in the Physician Licensure
9 Examination as furnished by the Board of Medicine and the Commission and upon
10 inspection of the college of medicine by the Council, for various deficiencies and/or
11 violations;

12 (h) To select and approve hospitals or some departments of hospitals for training
13 which comply with the minimum specific physical facilities as provided in subparagraph (b)
14 hereof; and

15 (i) To promulgate, prescribe and enforce the necessary rules and regulations for the
16 proper implementation of the foregoing functions.

17 SEC. 7. *Minimum Required Course.* – The medical course leading to the degree of Doctor
18 of Medicine shall be five (5) years inclusive of clinical clerkship and internship and shall
19 consist of the following subjects:

20 (a) Anatomy and Histology;

21 (b) Physiology;

22 (c) Biochemistry and Molecular Biology;

23 (d) Pharmacology and Therapeutics;

24 (e) Microbiology and Parasitology;

25 (f) Internal Medicine, Radiology;

26 (g) General and Clinical Pathology and Oncology;

27 (h) Obstetrics and Gynecology;

28 (i) Pediatrics and Nutrition;

29 (j) Surgery, Preventive Medicine and Public Health;

30 (k) Otorhinolaryngology, Ophthalmology, Neurology, Psychiatry;

31 (l) Family Medicine, Preventive Medicine and Public Health; and

32 (m) Legal Medicine, Medical Jurisprudence, Medical Ethics and Economics.

33 *Provided,* That the Council may recommend to the CHED to rearrange, recluster or
34 integrate and revise the abovementioned subjects.

35 SEC. 8. *Admission Requirements.* – (a) A medical college may admit any student who
36 has not been finally convicted by a court of competent jurisdiction of any criminal offense
37 involving moral turpitude and who presents all of the following:

38 (1) Record showing completion of a Bachelor's Degree in Science or Arts;

1 (2) Certificate of eligibility for entrance to a school of medicine from the Board of
2 Medical Education;

3 (3) Certificate of good moral character issued by two (2) former professors in the
4 college offering the pre-medical course(s);

5 (4) Birth certificate duly authenticated by the National Statistics Office (NSO); and

6 (5) Proof of successfully passing the National Medical Admission Test.

7 Nothing in this Act shall be construed to inhibit any college of medicine from
8 establishing, in addition to the requirements set forth in this section, any other reasonable
9 entrance requirements relevant to the degree.

10 For the purpose of this Act, the term "College of Medicine" shall mean to include
11 faculty of medicine, institute of medicine, school of medicine and other similar institution
12 which has complied with the standards and requirements set forth by the Board, offering a
13 complete medical course leading to the degree of Doctor of Medicine.

14 (b) Every college of medicine shall keep complete records of enrollment, grades,
15 graduates and must publish each year a catalogue giving the following information:

16 (1) Date of publication;

17 (2) Calendar of academic year;

18 (3) Roll of faculty members indicating whether on full-time or part-time basis and
19 their curriculum vitae;

20 (4) Requirements for admission;

21 (5) Grading system;

22 (6) Requirements for promotion;

23 (7) Requirements for graduation;

24 (8) Curriculum and description of course by department; and

25 (9) Number of students enrolled in each class in the preceding year.

26 27 **ARTICLE III**

28 **THE PROFESSIONAL REGULATORY BOARD OF MEDICINE**

29 *SEC. 9. Composition of the Board.* – There is hereby created a Professional Regulatory
30 Board of Medicine, hereinafter referred to as the Board, under the administrative control
31 and supervision of the Professional Regulation Commission, hereinafter referred to as the
32 Commission, composed of a Chairperson, a Vice Chairperson and five (5) members to be
33 appointed by the President of the Philippines from among three (3) recommendees for each
34 position, chosen and ranked by the Commission from a list of five (5) nominees for each
35 position submitted by the integrated and accredited professional organization. The Board
36 shall be organized not later than six (6) months from the effectivity of this Act.

37 *SEC. 10. Powers and Duties.* – The Board shall be vested with the following specific
38 powers, functions, duties and responsibilities:

39 (a) Supervise and regulate the practice of medicine in the Philippines;

1 (b) Determine and evaluate qualifications of the applicants for registration with
2 physician licensure examinations and for special permits;

3 (c) Prepare the questions in physicians' licensure examinations in accordance with
4 recognized principles of evaluation and of pertinent provisions of Section 23, Article IV of
5 this Act; prescribe the syllabi of the subjects and their relative weights for the licensure
6 examinations; formulate or adopt test questions and deposit them in a test question bank;
7 draw the test questions at random through the process of computerization; conduct the
8 examination; correct and rate the examination papers; and submit the examination results
9 to the Commission within the period provided for by the rules of the Commission. The
10 above test questions should be in congruence with the syllabi and the table of specifications
11 of the Association of Philippine Medical Colleges (APMC);

12 (d) In the formulation of test questions, the Board shall see to it that the questions
13 shall have relevant distributions as to the knowledge, skill and attitude of the examinees;

14 (e) Determine, amend or revise the requirements for the subjects in the physician
15 licensure examinations and their relative weights and the manner of giving the examination,
16 subject to the approval of the Commission;

17 (f) Register successful examinees in the physician licensure examinations in the rolls
18 of physicians and issue the corresponding certificates of registration;

19 (g) Issue special/temporary permits to foreign physicians to practice medicine for
20 specific projects and for a specific duration of time, in coordination with the integrated
21 PMA;

22 (h) Administer the qualifying examinations given to physicians who wish to train in
23 the Philippines for a specialty field, in coordination with the integrated PMA;

24 (i) In coordination with the integrated PMA, look into the conditions affecting the
25 practice of medicine, adopt measures for the enhancement of the profession and the
26 maintenance of high professional, technical and ethical standards, in coordination with the
27 Council and conduct ocular inspections of places where physicians practice their profession;

28 (j) Monitor the performance of medical schools and their compliance with the rules
29 and regulations of the Board of Medical Education;

30 (k) In coordination with the integrated PMA, promulgate rules and regulations
31 including a Code of Ethics for Physicians, administrative policies, orders and issuances to
32 carry out the provisions of this Act;

33 (l) Investigate violations of this Act and the rules and regulations, Code of Ethics,
34 administrative policies, orders and issuances promulgated by the Board. The rule on
35 administrative investigation promulgated by the Commission shall govern in such
36 investigation;

37 (m) Issue *subpoena ad testificandum* or *subpoena duces tecum* to secure attendance of
38 respondents or witnesses as well as the production of documents relative to the
39 investigation conducted by the Board: *Provided*, That failure of the party to whom a

1 subpoena has been issued to comply therewith shall be punishable by way of indirect
2 contempt of the Board. For this purpose, the Board is hereby vested the power to cite
3 any party for contempt which may be exercised pursuant to the applicable provisions of
4 Rule 71 of the Rules of Court;

5 (n) At the Board's discretion, delegate to the Chairperson, Vice chairperson or
6 any member of the Board, or a Commission attorney (PRC attorney) the hearing of an
7 administrative case. If the case concerns strictly the practice of medicine as defined in
8 Section 27 hereof, the investigation shall be presided over by a member of the Board with
9 the assistance of a PRC attorney: *Provided*, That the power to cite a party in contempt shall
10 be issued exclusively by the Board, upon recommendation of the member charged with such
11 investigation;

12 (o) After due notice and hearing, cancel examination papers and/or bar any examinee
13 from future examination; refuse or defer his/her registration; reprimand the registrant with
14 stern warning; suspend him/her from the practice of his/her profession; revoke his/her
15 certificate of registration; cancel special/temporary permit; remove his/her name from the
16 roll of physicians for continuous nonpayment of annual registration fees and
17 noncompliance with the CME requirement; reinstate or reenroll his/her name in the said
18 roll; and reissue or return his/her certificate of registration and professional identification
19 card. A decision of suspension, revocation of the certificate of registration or removal from
20 the roll by the Board as provided herein may be appealed initially to the Commission within
21 fifteen (15) days from receipt thereof;

22 (p) Administer the physician's oath pursuant to Section. 26 herein;

23 (q) Institute and prosecute or cause to be instituted and prosecuted any and all
24 criminal action against any violation of this Act and/or the rules and regulations of the
25 Board, subject to the provisions of Section 5, Rule 110 of the Rules of Criminal Procedure, as
26 amended;

27 (r) Adopt an official seal;

28 (s) Coordinate with the Board of Medical Education and the integrated PMA in
29 prescribing, amending and/or revising the courses in a medical program;

30 (t) Assist the Commission in the implementation of its prescribed guidelines and
31 criteria on the Continuing Professional Education (CPE) for registered/licensed physicians;

32 (u) Set the standards and guidelines for the issuance and re-issuance of certificates of
33 registration; and

34 (v) Perform such other functions and duties as may be necessary to efficiently and
35 effectively implement the provisions of this Act.

36 The policies, resolutions, rules and regulations, orders or decisions issued or
37 promulgated by the Board shall be subject to the review, revision and approval by the
38 Commission. However, the Board's final decisions, resolutions or orders rendered in an
39 administrative case shall be immediately executory.

1 SEC. 11. *Qualifications of the Board Members.* – Each Board member must, at the time
2 of his/her appointment:

3 (a) Be a natural born Filipino citizen and has been a resident of the Philippines for at
4 least ten (10) consecutive years;

5 (b) Be at least forty (40) years old;

6 (c) Be a holder of a valid certificate of registration and a valid professional
7 identification card as a physician;

8 (d) Has been a practitioner for at least ten (10) years;

9 (e) Be a *bona fide* member of the integrated Philippine Medical Association;

10 (f) Has not been convicted by final judgment by a competent court of a criminal
11 offense involving moral turpitude;

12 (g) Has an experience of at least two (2) years as a faculty member of a college of
13 medicine;

14 (h) Not be a current member of the faculty of an institute, school or college of
15 medicine nor have any pecuniary interest in any institution which offers and operates the
16 course or degree of Doctor of Medicine; and

17 (i) Not be connected with a review center/school/group or association offering
18 classes or lectures in preparation for the physician licensure examination.

19 SEC. 12. *Term of Office.* – The members of the Board shall hold office from the date of
20 their appointment for a term of three (3) years or until their successors shall have been
21 appointed and qualified. They may, however, be reappointed for another term but not for a
22 third (3rd) term. Appointments to fill up positions created by causes other than through
23 expiration of regular terms shall be for the unexpired period only. Each member shall
24 qualify by taking an oath of office before the performance of his/her duties. The
25 incumbents whose terms have not yet expired or who are merely holding over, at the
26 effectivity of this Act, shall be allowed to serve the unexpired portion of their terms or may
27 be appointed under this Act.

28 SEC. 13. *Compensation of the Board Members.* – The Chairperson, Vice Chairperson and
29 members of the Board shall receive compensation and allowances or other benefits
30 pursuant to the provisions of the "PRC Modernization Act of 2000" and other pertinent laws
31 and comparable to the compensation and allowances received by the Chairperson and
32 members of existing professional regulatory boards.

33 SEC. 14. *Suspension or Removal of Board Member.* – The President, upon
34 recommendation of the Commission after giving the member concerned an opportunity to
35 be heard by himself or counsel in a proper administrative investigation to be conducted by
36 the Commission, may suspend or remove any member of the Board on any the following
37 grounds:

38 (a) Neglect of duty or incompetence;

39 (b) Unprofessional, unethical or dishonorable conduct;

1 (c) Manipulation or rigging of results of any physician licensure examination,
2 divulging of secret information or disclosure of the said examination, or tampering of the
3 grades therein; and

4 (d) Final conviction by the court of any criminal offense involving moral turpitude.

5 SEC. 15. *Administrative Management, Custody of Records, Secretariat and Support*
6 *Services.* – The Board shall be under the administrative and executive management of the
7 Commission, with the Commission chairperson as the chief executive officer thereof. All
8 records of the Board shall be under the custody of the Commission.

9 The Commission shall designate the Secretary of the Board and shall provide the
10 Secretariat and other support services to implement the provisions of this Act.

11 SEC. 16. *Implementing Rules and Regulations.* – The Board, with the approval of the
12 Commission, shall prescribe, issue and promulgate rules and regulations implementing and
13 carrying out the provisions of this Act, which shall take effect after fifteen (15) days
14 following the completion of their publication in the *Official Gazette* or in a major daily
15 newspaper of general circulation in the Philippines.

16 SEC. 17. *Annual Report.* – The Board shall, on or before the end of January of the
17 following year, submit to the Commission its annual report of accomplishments on
18 programs, projects and activities for the calendar year together with its appropriate
19 recommendations on issues or problems affecting the practice of medicine.

21 ARTICLE IV

22 PHYSICIAN LICENSURE EXAMINATION

23 SEC. 18. *Prerequisites to the Practice of Medicine.* – No person shall engage in the
24 practice of medicine in the Philippines unless he/she:

25 (a) Holds a valid certificate of registration and a valid professional identification card
26 issued by the Commission;

27 (b) Holds a valid special/temporary permit issued by the Board of Medicine subject to
28 approval by the Commission, and upon coordination with the Integrated PMA, or unless
29 he/she is exempted by this Act from holding any of the foregoing certificates of registration;
30 and

31 (c) Is a member of the integrated PMA and its component society in good standing.

32 Any foreign doctor who intends to undergo specialty training in the practice of
33 medicine must pass the qualifying examination given by the Board of Medicine and
34 concurred by the integrated PMA.

35 SEC. 19. *Examination Required.* – All applicants for registration, before they can be
36 issued a certificate of registration and a professional identification card as a physician shall
37 be required to pass a written licensure examination for physician as provided for in this Act,
38 subject to the payment of the fees prescribed by the Commission.

1 SEC. 20. *Qualifications of Applicants for the Physician Licensure Examination.* – All
2 applicants for the physician licensure examination must possess all qualifications and none
3 of the disqualifications hereunder set forth, as follows:

4 (a) He/she is a citizen and resident of the Philippines or a citizen of a foreign
5 country/state which observes reciprocity in the practice of medicine with the Philippines or
6 who has been a permanent resident of the Philippines for at least one (1) year prior to the
7 examination;

8 (b) He/she is mentally, emotionally and physically sound;

9 (c) He/she has not been convicted in a final judgment by a court of any criminal
10 offense involving moral turpitude;

11 (d) He/she is a holder of the degree of Doctor of Medicine conferred by a College of
12 Medicine established in the Philippines and duly recognized by the CHED or a degree
13 conferred by a college of medicine abroad and accredited by the CHED as substantially
14 equivalent to the degree of Doctor of Medicine offered by a Philippine College of Medicine.

15 SEC. 21. *Venues and Schedule of Examinations.* – The Board shall give examinations for
16 the registration of physicians at least twice a year in such places as the Commission may
17 designate in accordance with the provisions of Republic Act No. 8981, otherwise known as
18 the "PRC Modernization Act of 2000".

19 SEC. 22. *Registration, Issuance of Certificate of Registration and Professional*
20 *Identification Card; PMA Membership Card; Non-registration; Grounds Therefor.* – All
21 successful examinees, upon compliance with all legal requirements and payment of fees
22 prescribed by the Commission, shall be registered and issued certificates of registration and
23 professional identification cards. They shall likewise be deemed members of the duly
24 recognized integrated PMA upon compliance with all requirements and payment of
25 compulsory dues, and shall be issued the necessary identification cards proving such
26 membership therein, upon presentation of their certificates of registration and professional
27 identification card.

28 The certificate of registration of a physician shall bear the registration number and
29 the date of issuance and the signatures of the chairperson of the Commission and the
30 members of the Board stamped with the seals of the Commission and the Board, certifying
31 that the name of the person stated therein appears in the Registry/Roster/Roll of
32 Physicians under the custody of the Commission; that the person has met or complied with
33 all the legal requirements for registration as a physician; and that the person is entitled to
34 exercise all the privileges appurtenant to the practice of his/her profession; *Provided, That*
35 *his/her or she does not violate this Act, the rules and regulations, Code of Ethics for*
36 *Physicians, and other regulatory policies of the Commission and the Board.*

37 The professional identification card shall bear the name of the registered/licensed
38 physician, the registration number and the date of issuance, and its date of expiry and,

1 together with the membership Identification card issued by the integrated PMA, shall be
2 sufficient evidence that the physician can lawfully practice his/her profession.

3 A successful examinee who has been finally convicted by a competent court of a
4 criminal offense involving moral turpitude, or found guilty by the Board of dishonorable or
5 immoral conduct, or declared by the court to be of unsound mind shall not be registered.
6 The decision of the Board, finding the examinee guilty of dishonorable or immoral conduct,
7 may be appealed by the examinee to the Commission within fifteen (15) days from receipt
8 of the Board's decision or resolution, and to the Court of Appeals within the same period
9 from the receipt of the decision or resolution of the Commission. The facts and the reasons
10 for refusal to register shall be clearly stated in writing, communicated to the examinee and
11 duly incorporated in the records of the Commission.

12 SEC. 23. *Scope of Examination.* – The physician licensure examination shall cover the
13 following thirteen (13) individual or combined/clustered subjects with relative weights for
14 each one final examination after completion of internship:

- 15 (a) Anatomy and Histology;
- 16 (b) Physiology;
- 17 (c) Biochemistry and Molecular Biology;
- 18 (d) Pharmacology and Therapeutics;
- 19 (e) Microbiology and Parasitology;
- 20 (f) Internal Medicine, Radiology;
- 21 (g) General and Clinical Pathology and Oncology;
- 22 (h) Obstetrics and Gynecology;
- 23 (i) Pediatrics and Nutrition;
- 24 (j) Surgery, Preventive Medicine and Public Health;
- 25 (k) Otorhinolaryngology, Ophthalmology, Neurology, Psychiatry;
- 26 (l) Family Medicine, Preventive Medicine and Public Health; and
- 27 (m) Legal Medicine, Medical Jurisprudence, Medical Ethics and Economics.

28 When an urgent and important need arises in order to conform to technological
29 advancements and other changes, the Board, in coordination with the integrated PMA and
30 the Council, may revise the substance and the conduct of such examinations.

31 Each of the thirteen (13) subjects shall have its syllabus or table of specifications. The
32 Board shall apply each syllabus after a lapse of three (3) months reckoned from the
33 concurrence of all the following requisites:

- 34 (a) Consultation with the concerned academe;
- 35 (b) Approval by the Commission;
- 36 (c) Publication of the Board resolution in a newspaper of general circulation; and
- 37 (c) Dissemination to all Colleges of Medicine.

1 fee or free:

2 (i) If they are internationally well-known specialists or publicly acknowledged as
3 experts in any area of medical specialization; and

4 (ii) If their services are urgently necessary, owing to the lack of available local
5 specialists/experts, or for the promotion or advancement of the practice of medicine
6 including, but not limited to, the conduct of formal classes, acting as resource persons in
7 medical seminars, fora, symposia and the like;

8 (2) Physicians licensed in foreign countries/states who intend to render services for
9 free and limited only to indigent patients in a particular hospital, center or clinic: *Provided,*
10 *however,* That they render such services under the direct supervision and control of a duly
11 registered/licensed physician; and

12 (3) Physicians licensed in foreign countries/states employed as exchange professors in
13 any area of medical specialization.

14 (c) The permit shall, among others, provide for such limitations, specifications and
15 conditions hereunder cited, as follows:

16 (1) A period of not more than one (1) year subject to renewal or extension: *Provided,*
17 That such renewal or extension shall be under the same process and requirements
18 hereinabove provided;

19 (2) The specific area of medical specialization; and

20 (3) The specific place of practice, such as clinic, hospital, center, college of medicine.

21 (d) The Board, subject to approval by the Commission and the DOLE, shall prescribe
22 rules and regulations for the implementation of this particular section.

23 SEC. 28. *Disciplinary Sanctions.* – The Board shall have the power, upon proper notice
24 and hearing, to suspend from the practice of profession or revoke the certificate of
25 registration of a physician, or issue a reprimand or cancel the special/temporary permit
26 issued to a foreign physician for any of the following grounds/causes:

27 (a) Final conviction by a court of competent jurisdiction of any criminal offense
28 involving moral turpitude;

29 (b) Immoral or dishonorable conduct;

30 (c) Insanity;

31 (d) Fraud in the acquisition of the certificate of registration and the professional
32 identification card or special/temporary permit;

33 (e) Gross negligence, ignorance or incompetence in the practice of his/her profession,
34 resulting in an injury to or death of the patient;

35 (f) Addiction to alcoholic beverages, to any habit forming drug or to any form of
36 illegal gambling, rendering him incompetent to practice his/her profession;

37 (g) Making or causing to be made false, misleading, extravagant or unethical
38 advertisements wherein things other than his name, profession, limitation of practice, clinic
39 hours, office and home address are mentioned;

1 (h) Issuance of any false statement or spreading any false news or rumor which is
2 derogatory to the character and reputation of another physician without justifiable motive;

3 (i) Knowingly issuing any false medical certificates and/or findings, or making any
4 fraudulent claims with government or private health insurance;

5 (j) Performance of, or aiding in, any criminal abortion;

6 (k) Performing any act constituting the practice of an area of medical specialization
7 without fulfilling the specialization requirements prescribed by the integrated PMA and the
8 Board;

9 (l) Knowingly aiding or subjecting one's self to be a patient of any person who is
10 unqualified or unregistered to practice medicine or an area of medical specialization, except
11 in aid of training of a medical student, or performing any act constituting the practice of
12 medicine or an area of medical specialization in behalf of any such unlicensed or
13 unregistered person: *Provided, however,* That this provision shall not apply when an act
14 constituting the practice of medicine or an area of medical specialization is performed in a
15 hospital, clinic or medical center as an accredited practitioner of such hospital, clinic or
16 medical center. For this purpose, all hospitals, clinics and medical centers are hereby
17 required to furnish the appropriate regional office of the DOH a list of all medical
18 practitioners duly accredited to practice within their respective institutions every three (3)
19 months;

20 (m) Violation of any provision of the Code of Ethics for Physicians as prescribed by
21 the integrated PMA and adopted and promulgated by the Board, subject to approval by the
22 Commission;

23 (n) Practice of profession during the period of his suspension; and

24 (o) Willful failure or refusal to be a member of the integrated PMA or expulsion or
25 termination of membership therefrom.

26 SEC. 29. *Rights of the Parties.* – The private complainant and the respondent physician
27 shall be entitled to counsel and to be heard in person, to have a speedy and public hearing,
28 to confront and to cross-examine witnesses, and to all other rights guaranteed by the
29 Constitution and the Rules of Court. All cases filed or pending under this Act shall not be
30 discussed or taken in any forum until after the same shall have been decided with finality.

31 SEC. 30. *Appeal from Judgment.* – The decision of the Board shall become final fifteen
32 (15) days from the date of receipt of such decision by the parties or their counsel. Within
33 the same period, the aggrieved party may ask for a reconsideration of the decision for being
34 contrary to law or for insufficiency of evidence. When such motion for reconsideration is
35 denied, the aggrieved party may appeal to the Court of Appeals under Rule 43 of the Rules
36 of Court. No second motion for reconsideration to the Board shall be allowed.

37 A decision rendered by the Commission against the respondent shall be executory.

38 SEC. 31. *Re-issuance of Revoked Certificate of Registration and Professional*
39 *Identification Card and Replacement of Lost Certificate of Registration and Identification*

1 *Card.* – After two (2) years and after due consultation with the integrated PMA and the
2 accredited national organization of physicians, the Board may order the reinstatement of
3 any physician whose certificate of registration has been revoked, if the respondent has
4 acted in an exemplary manner in the community.

5 A new certificate of registration or professional identification card that has been lost,
6 destroyed or mutilated may be issued, subject to the rules of the Commission.

7 *SEC. 32. Mandatory Use of Certificate of Registration, Professional and PMA*
8 *Identification Cards and Professional Tax Receipt Number.* – A registered physician shall
9 indicate his/her certificate of registration number, the number and the expiry date of the
10 professional identification card and the PMA membership card, and the professional tax
11 receipt number on the prescription and other documents he/she signs, uses or issues in
12 connection with the practice of his/her profession.

13 *SEC. 33. Vested Rights.* – All physicians registered at the time this law takes effect shall
14 be automatically registered under the provisions hereof, without prejudice to the other
15 requirements herein set forth.

16 *SEC. 34. Exceptions.* – For purposes of this Act, any medical student duly enrolled in an
17 accredited medical college or school, or any graduate of medicine undergoing post graduate
18 training, serving without any professional fee in any government or private hospital, shall
19 not be considered as engaging in the practice of medicine: *Provided,* That he/she renders
20 such service under the direct supervision and control of a duly registered/licensed
21 physician.

22 *SEC. 35. Integration of the Profession.* – The profession shall be integrated into one (1)
23 organization, the Philippine Medical Association, to be duly recognized and accredited by
24 the Board and the Commission. A physician duly registered and licensed by the Board and
25 the Commission shall automatically become a member of the said organization and shall
26 receive the benefits and privileges appurtenant thereto upon payment of required fees and
27 dues. Membership in the integrated organization shall not be a bar to membership in any
28 other association of physicians.

29 *SEC. 36. Mandatory Continuing Medical Education.* – The Board shall implement
30 through the integrated PMA a mandatory continuing medical education among practicing
31 physicians in consonance with the guidelines of the CPE as shall hereafter be promulgated
32 by the Commission.

33 *SEC. 37. Automatic Registration of Physicians.* – All physicians whose names appear at
34 the Registry/Roll/Roster of Physicians at the time of the effectivity of this Act shall
35 automatically be registered by the Board and the Commission as physicians and, thereafter,
36 by the integrated PMA and the accredited national organization of registered and licensed
37 physicians as its *bona fide* members, pursuant to Section 22 of this Act.

38 *SEC. 38. Foreign Reciprocity.* – Unless the country of which he/she is a subject or
39 citizen specifically permits Filipino physicians to practice within its territorial limits on the

1 same basis as the subject or citizen of the said foreign state or country under reciprocity
2 and under international agreements, no foreigner shall be admitted to licensure
3 examinations, given a certificate of registration to practice as a physician nor be entitled to
4 any of the privileges under this Act.

5
6 **ARTICLE VI**
7 **PENAL PROVISIONS**

8 SEC. 39. *Penalties.* – (a) The penalty of imprisonment of not less than one (1) year but
9 not exceeding five (5) years or a fine of not less than Two hundred thousand pesos
10 (P200,000.00) but not exceeding Five hundred thousand pesos (P500,000.00), or both,
11 upon the discretion of the court, shall be suffered by:

12 (1) Any person who practices or offers to practice medicine in the Philippines without
13 a valid certificate of registration and a valid professional identification card, or a valid
14 temporary/special permit in accordance with the provisions of this Act;

15 (2) Any person using or attempting to use as his/her own the certificate of
16 registration or professional identification card or temporary/special permit duly issued to
17 another;

18 (3) Any person who shall give any false or forged documents, credentials and any
19 other proof of any kind to the Board or Commission in order to obtain a certificate of
20 registration or professional identification card or temporary/special permit;

21 (4) Any person who shall falsely impersonate any *bona fide* registrant with like or
22 different name;

23 (5) Any registered and licensed physician or medical specialist who shall abet or
24 assist in the illegal practice by a person who is not lawfully qualified to practice medicine or
25 any area of medical specialization;

26 (6) Any person who actually engages in the practice of medicine as defined in
27 paragraphs (a)(1) and (a)(2) of Section 27 of this Act without any certificate of registration;

28 (7) Any person who shall attempt to use a revoked or suspended certificate of
29 registration or a cancelled temporary/special permit;

30 (8) Any person who shall use or advertise any title or description tending to convey
31 the impression to the general public that he/she is a registered and licensed physician when
32 in fact he/she is not;

33 (9) Any registered and licensed physician or medical specialist who shall use or
34 advertise any title or description tending to convey the impression to the general public
35 that he/she is a specialist in an area of medical specialization when in fact he/she is not; and

36 (10) Any registered physician who shall commit any of the prohibited acts as
37 enumerated in paragraphs (i), (j), (k) and (l) of Section 28 hereof.

38 (b) When any of the acts defined in paragraphs 5 and 6 of this section is committed by
39 a person against three (3) or more persons, or when any of such acts is committed by at

1 least three (3) persons who shall cooperate and confederate with one another, or when
2 death occurs as a result of the commission of the prohibited act mentioned in paragraph (k)
3 of Section 28 of this Act, the offense shall be considered as a qualified violation of this Act
4 and shall be punishable by life imprisonment and a fine of not less than Five hundred
5 thousand pesos (P500,000.00) but not more than Two million pesos (P2,000,000.00).

6 Prosecution of offenses under this Act shall be without prejudice to a separate
7 prosecution under the provisions of the Revised Penal Code and other laws.

8 SEC. 40. *Injunctions.* – Upon written motion by any interested party and after notice
9 and hearing, the Board may issue an order enjoining any person illegally practicing
10 medicine from performing any act constituting the practice of medicine until the necessary
11 certificate therefor is secured. However, if it is shown in the affidavits attached to the
12 motion that the movant or the general public will suffer grave injustice or irreparable
13 injury, the chairperson of the Board, or, in his/her absence, any Board member holding
14 office may issue a temporary restraining order effective for seventy-two (72) hours. The
15 applicable provisions of Rule 58 of the Rules of Court shall govern the issuance of the writ of
16 injunction and lifting thereof, except that where after hearing it is shown that the movant is
17 entitled to the injunction prayed for, such writ of injunction shall be effective until there is
18 clear showing that the respondent is authorized to practice medicine in the Philippines.

19 Any such person who, after having been so enjoined, continues on the illegal practice
20 of medicine shall be punished for contempt of court. The issuance of the said injunction
21 shall not relieve the person from criminal prosecution and punishment as provided in the
22 preceding section.

23 24 ARTICLE VII 25 FINAL PROVISIONS

26 SEC. 41. *Enforcement.* – The Commission shall be the enforcement agency of the
27 Board. As such, the Commission shall implement the provisions of this Act, enforce its
28 implementing rules and regulations as adopted by the Board, assist the Board in the
29 investigation of complaints against violators of this Act, its rules and regulations, the Code
30 of Ethics for Physicians and other policies of the Board.

31 The Commission or the Board shall call upon or request any department,
32 instrumentality, office, bureau, institution or agency of the government including local
33 government units (LGUs) to render such assistance as it may require, or to coordinate or
34 cooperate in order to carry out, enforce or implement the professional regulatory policies of
35 the government or any program or activity it may undertake.

36 SEC. 42. *Appropriations.* – The Chairpersons of the Commission on Higher Education
37 and the Professional Regulation Commission shall immediately include in their programs
38 the implementation of this Act, the funding of which shall be charged against their current
39 years' appropriations and thereafter in the annual General Appropriations Act.

1 SEC. 43. *Implementing Rules and Regulations.* – Within ninety (90) days after the
2 approval of this Act, the PRC, together with the Board, the PMA and the Council of Medical
3 Education of the CHED shall prepare and promulgate the implementing rules and
4 regulations (IRRs) to carry out the provisions of this Act and adopt the integrated PMA Code
5 of Ethics. The IRRs shall take effect after fifteen (15) days following their publication in a
6 major daily newspaper of general circulation.

7 SEC. 44. *Transitory Provisions.* – The incumbent Board shall continue to function in the
8 interior until such time as the new Board shall have been constituted pursuant to this Act.

9 SEC. 45. *Separability Clause.* – If any clause, provision, paragraph or part hereof be
10 declared unconstitutional or invalid, such judgment shall not affect, invalidate or impair any
11 other part hereof, but such judgment shall be merely confined to the clause, provision,
12 paragraph or part directly involved in the controversy in which such judgment has been
13 rendered.

14 SEC. 46. *Repealing Clause.* – Republic Act No. 2382 also known as “The Medical Act of
15 1959”, as amended by Republic Act Nos. 4224 and 5946; all laws amending the said Act, all
16 other laws, decrees, executive orders and other administrative issuances and parts thereof
17 which are inconsistent with the provisions of this Act are hereby modified, amended,
18 superseded or repealed accordingly.

19 SEC. 47. *Effectivity Clause.* – This Act shall take effect after fifteen (15) days following
20 its publication in the *Official Gazette* or in at least two (2) newspapers of general circulation
21 in the Philippines.

Approved,