Chancellor’s Message

The past few weeks have been difficult and challenging as the university was hurled into a whirlwind of activities all directed to combat COVID-19. With inspired leadership starting from the UP President all the way down to project and team leaders and the magnanimous help from several quarters, we have put in place an unprecedented movement.

The Philippine General Hospital (PGH) has been retrofitted and is now filled with selfless medical personnel caring for the very sick COVID-19 patients.

The Bayanihan Na! Operations Center is manned by dedicated volunteers, most of whom are interns, students, faculty, and alumni of the University, who answer queries regarding disease and donations. Dashboards have been developed to track the money and all forms of contributions.

The NIH and PGH COVID Testing Centers are in full swing to contribute 2000 tests to the national goal of 10,000 a day.

Significantly, these very trying times have challenged the minds of our constituents and a multitude of exciting ideas have become landmark discoveries, starting with the locally developed COVID-19 testing kits. At least 24 researches are in the pipeline: development of locally designed ventilators; design and development of locally-manufactured and reusable Powered Air-Purifying Respirator; design and development of Disinfection-SaniPod, a self-contained disinfecting cubicle; the CleanIntubate-laryngoscope blade disinfecting device; telepresence and telemetry; and several treatment protocols to hasten the resolution of symptoms. These projects brought researchers from different institutions, planning and working together on shortened timelines. The Department of Science and Technology challenged our researchers to think fast, act quickly, and deliver tomorrow.

Additionally, this upheaval put a stop to the usual academic activities in the campus with the Enhanced Community Quarantine. We now have a shortened semester, appealing to a tempered response to a chaotic norm. The Deans and their teams worked on several alternatives for learning in crisis opportunities. We have to face this semester and probably the next year as a modified year.
To its role as a leading research university responding to the health problems and needs of Filipinos, UP Manila’s early response to the Covid 19 pandemic was the development of the first RT PCR local testing kit for the Covid-19 virus. The kit was developed by Dr. Raul Destura, an infectious disease specialist who is UP Manila NIH Director of National Training Center for Biosafety and Biosecurity and the Deputy Director of Philippine Genome Center in collaboration with a team of young scientists from the Research and Biotechnology Division of Manila HealthTek, Inc. The development of the testing kit has proven that even in a resource-limited setting such as the Philippines, an appropriate technology can be done in a few weeks in response to a health emergency, providing a concrete example of the capabilities of the local science and technology environment.

The testing kits are now being rolled out as part of the national government efforts to curb the further spread of the virus through expanded testing. The Food and Drug Administration (FDA) officially announced its approval of the testing kit, GenAmplify™ Corona Virus Disease-2019 (COVID-19) rRT-PCR Detection Kit on 3 April 2020 after three weeks of field validation. The testing kits are manufactured by the Manila HealthTek, Inc, the first university spin-off company that was established after the development of the Biotek M Aqua, a cheaper and faster dengue local testing kit, in 2017 by the same team of researchers. The approval and eventual roll out of the testing kits were encouraging and welcome developments as the country at that time was about to commence expanded testing starting on April 14. The expanded testing prioritizes Covid 19 probable cases (Persons Under Investigation under the old DOH classification and Covid-19 suspects (Persons under Monitoring), according to the Department of Health.

The Manila Health Tek, Inc., reported that the first batch of reagents that arrived soon after enabled them to start the manufacturing process to create testing kits that can accommodate up to 120,000 tests. Testing kits that can do up to 26,000 tests were prioritized by the Department of Science and Technology for field implementation and distribution to the Philippine General Hospital, Makati Medical Center, The Medical City, Vicente Sotto Memorial Medical Center, Southern Philippines Medical Center, and Baguio General Hospital.

The remaining testing kits that are good for around 94,000 tests will be sold commercially by Manila HealthTek at around P1,320 per test (inclusive of the cost of RNA extraction) which is cheaper than the units currently being used in hospitals which cost about P6,000 to P8,000. The Manila HealthTek said it has enough orders from the private sector which then intend to donate them to the DOH and other DOH-accredited testing centers. With reports from GoodNewsPilipinas and PGC.

BY CYNTHIA VILLAMOR
On March 30, 2020, the Philippine General Hospital started operating as one of three COVID-19 Referral Hospitals designated by the DOH in the National Capital Region.

But if this were a chronology of events, the story should have started in February 2020 when there was a growing sense of panic enveloping the country as various hospitals both here and abroad reported paralyzing numbers of admissions and mortalities of COVID-19 patients and more alarmingly of its death toll among their doctors and healthcare staff. By March 11, the WHO declared COVID-19 as a pandemic. It was WWIII.

Being the National University Hospital (and the only hospital that remained open during WWIII), it was only a matter of time before PGH once again stepped onto the plate - although this was, to quote PGH Director Gerardo Legaspi, one of the most difficult decisions he had to make as it will “affect the more than 4,000 people who have made PGH their home, and the alumni that support it”. He knew, and the entire PGH community knew, that it was a war, and there was little time to prepare.

The Director asked for a week to prepare, and like a well-oiled machinery, PGH went full-blast to fortify our beloved hospital and arm its staff. Commitment to a unified goal was obtained from the DAB (the body comprising the Heads of PGH’s various units). Non-COVID services of the hospital were put on hold. The wards were cleared of as many patients as was permissible, and zoning of COVID and non-COVID areas was mapped out.

Re-engineering in the wards was instituted to ensure an efficient and natural unidirectional air exchange; in addition, air-purifying units were distributed around the work areas to further increase the safety measures for our personnel. A transition into 3 teams of “1-week-on-2-weeks-off” tours of duty was planned. Assignments of dedicated personnel for COVID wards from all the departments was devised and multiple training sessions in strict infection control measures were started for everyone. A massive donation campaign for essential PPEs, equipment, back-of-house operational needs - even food - was launched. A Logistics Team was put in-charge for acquisition and appropriation of necessary “artillery.”

A Crisis Management Team was created to ensure operational efficiency. An
COVID Hotline off to a good start

THE UP-PGH Bayanihan Na! COVID Hotline (155-200) was launched last March 30, 2020 after only less than two weeks of planning. The short preparation time was inevitable because of the urgent need to reach out to patients and donors but that period proved sufficient because of the presence of talented leadership, effective partnerships, and tremendous volunteerism.

What has always been feared about the COVID-19 pandemic was the idea that it will overwhelm the healthcare delivery system based on local data and experience from other countries. This was the premise which created the Hotline Patient Query arm towards COVID concerns. The platform can efficiently refer patients who need hospitalization and COVID testing thereby freeing the emergency room from unnecessary consultations. By telling patients to call first about their symptoms before heading to the hospital, this will hopefully greatly lessen transmission of the virus between infected and Covid-free patients. While there is an abundance of social media posts about COVID-19, phone consults can provide reassurance and emphasize accurate prevention advice for patients and their families. Lastly, this Hotline Patient Query arm provides healthcare workers who have not been allowed to respond directly to the COVID-19 frontlines due to age, medical issues, or being put under quarantine, an opportunity to help by being remote consultants who our onsite agents can refer to for questions or concerns about their disposition of patient inquiries. Certainly, this pandemic will need “all hands on deck” from its healthcare workers, especially those from UP-PGH.

The first few weeks of operations revealed the gaps that the hotline can potentially fill based on the profile of calls coming in. Our call analytics and feedback from colleagues prompted us to add algorithms for potential patient transfers to PGH, create phone scripts regarding COVID test kits, and provide more details on available health facilities and resources for patients. In the ensuing days, more and more patients were calling regarding concerns outside of COVID. It was time for us to integrate the non-COVID branch that we have prepared since the inception of the Patient Query arm itself. Providing a means for patients (old and new to PGH) to inquire about other medical concerns such as continuing maintenance medications, scheduling of their clinic visits, and other non-

serious complaints over the phone became the substitute for services we would have otherwise given at the now-closed PGH OPD.

Phone consults have limitations because we can only advise based on the information the patient gives that may be hard to verify. Using this hotline also entails privacy risks, the protection of which is part of the commitment of our volunteers. Despite these constraints, our callers have given us a satisfaction rating of 4.6 (on a scale of 1 to 5), as of this writing. We will keep evolving, informed by data and caller feedback, to better respond to the health needs of our people in these very difficult times.

BY DR. DIANA LACHICA

Supply and inventory dashboard for better COVID-19 response

The supply and inventory dashboard (https://pghinvdashboard.herokuapp.com) informs the donors, bayanihan center tele-agents, and PGH service units about what the institution still lacks and the availability of supplies in its fight against COVID-19 in real time. To date, the Bayanihan Na! Operations Center’s donations arm has generated donations of almost P100M in cash, including the USD1M pledged by Tiktok, and P12M worth of donations.
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that will include several bridging programs, a catch-up in the clinics and self-paced studies as the primary mode of learning.

During World War II, the College of Medicine and what was then the School of Nursing remained open and provided the needed manpower for PGH. This was described in history as being immersed in the greatest trial of their existence. All doctors know that Quisumbing Hall was named after Intern Rety Quisumbing who was shot dead, mistaken for an enemy, while bringing medical supplies to the operating room.

There is a palpable feeling that we are in the midst of another war, albeit a different kind of war, with an unseen adversary. In the 1940s, students were sent home; but some stayed and served. The busiest unit was the ER filled with casualties of bombings and air raids. Indeed, in times of war, everybody must adjust, and help contribute in whatever way they can. During this COVID war, students were also sent home. Residents and Fellows are the frontliners at the busiest unit - the COVID ward. PGH is functioning because of the dedication of its frontliners: doctors, nurses, nursing aids, allied medical professionals, medical technologists, support staff, security guards, janitors, and volunteers. The University reiterates its commitment to ensure safety for all these modern-day heroes.

We all have to realize that in times of war, life is different and that there will be compromises. Our reality will not be the same after this pandemic. This war demands maximum understanding and patience. Each member of our community has answered the call and contributed in unique ways. No part is too small or too big in this crisis and we thank each and everyone for your noble service. It is through this unity and with God’s grace that we will be able to emerge from this epic struggle with as little damage as possible.

The enemy is proving inscrutable but let not fear consume us. While these are formidable times, and as the future is filled with uncertainties, we march on and continue to commit ourselves, now more than ever, to what our University has always stood for: to be a beacon of hope and a bastion dedicated to selfless service, especially to the underserved. Together like one family, we have shown leadership, intelligence, ingenuity, generosity, and compassion. Like the phoenix, we will arise from this battle more resolute and even stronger!

Information, Education, and Communication Team was formed to unify flow of relevant communications and infographics. A Manpower Team was designated to oversee provisions for accommodations, food, transportation, and other personal needs of our frontliners. The UP-PGH Bayanihan Na! Covid 19 Operations Center was put up at the historic Nurses’ Home by President Danilo Concepcion and UP Manila Chancellor Carmencita Padilla to streamline communications and donations. And a Memorandum of Agreement that guaranteed full government financial support as well as a metro-wide hospital support in terms of manpower, technical, and technological assistance was solicited.

ALL these in a period of 7 days. And on March 30, the PGH operated as a COVID-19 Referral Center. The PGH, again, was at war. And she WAS READY to face this invisible enemy.

BY DR. ERIC BERBERABE