

PHILIPPINE BOARD OF OBSTETRICS AND GYNECOLOGY

PART 2 ORAL EXAMINATION REQUIREMENTS FOR APPLICATIONS WITH DEFICIENCIES

Arrangement of documents should follow the sequence below. Compilation should be book bound with soft cover. Prepare two (2) copies, one for PBOG and one receiving copy of the applicant. Use A4-size paper with a 2-inch margin on the left for binding.

NOTE: Applicant should resubmit requirements **WITHIN ONE (1) YEAR** from a disapproved Part 2 application. **ONLY NEW CASES** will be accepted for resubmission. The infractions and the specific case/s and number required is written in the PBOG recommendation letter. Failure to follow these guidelines will result in denial of the application and forfeiture of the application fee.

Cover page	Requirements for Part 2 Exam (Resubmission of Deficiencies) Name of Applicant: Date of Submission:	
General Table of Contents	List the items accordingly Page numbers are required on all the pages.	
PBOG Letter	Copy of the letter stating the infractions and the specific case/s and number required	
Application Form	Photocopy of the previously submitted completely filled out application form- with the most recent photo and signed by (a) Applicant (b) Regional Director EXCEPT NCR Regional Director and (c) three active POGS Fellows endorsing the applicant	
Certificates	Jurat Notarization (CORE requirement)	
	Certificate of Good Standing from PMA or its component society	
	Certificate of POGS Junior Membership (must be within the validity period of 5 years)	
	Photocopy of valid PRC ID (at the time of application)	
	Certification from the Department Chair AND the Hospital/Medical Director, attesting to the authenticity of the cases/procedures submitted and compliance with the data privacy policy of the hospital. The certification should include a tabulation of all cases done and specify that the cases/procedures were admitted and performed by the applicant within 2 years from submission.	
	Certificate of Authenticity of Histopathology Reports	

CASE REQUIREMENTS

Submit the SPECIFIC TYPE AND NUMBER OF CASE/S written in the PBOG recommendation letter

TABULATION OF CASES/PROCEDURES

Font: ARIAL 12 pt, landscape view

Seven columns, with heading as follows:

1. Tally number, Patient's age and OB score, Date admitted, Date discharged, Hospital where procedure was done, Own or Private Case (PC)
2. Admitting Diagnosis
3. Pre-operative Diagnosis
4. Management, Operation/Procedure done, Anesthesia done, Date done
5. Justification for the management
6. Final Diagnosis
7. Patient/Maternal/Fetal Outcome/Histopathology result

SUPPORTING DOCUMENTS

Use Arial font 12, portrait view

Arrange following the sequence in the tabulation. Label correctly with the tally number in the tabulation (OB1, OB2, OB3 ...)

-Operative Record- Must contain the same information as found in the hospital's operative record including the type of anesthesia used and duration of surgery.

-Operative Technique- Must include the intraoperative findings

-Friedman's Curve or Partogram for all dystocia and failed induction cases

-Cardiotocogram tracing for all non-reassuring fetal heart rate pattern cases. Use of NICHD/ACOG Classification is accepted until 2026. Beginning 2027, FIGO Classification should be used.

-Histopathology Report, if applicable- Must contain the same information as found in the hospital's histopathology report (gross and microscopic descriptions). This should be stamped as a Certified True Copy by the Records Section or Pathology Department and signed by the Medical Records Officer or Pathologist.

DATA PRIVACY POLICY

Copies of the operative record and technique, partogram, cardiotocogram tracing and histopathology report SHOULD be anonymized. Submit these documents WITHOUT PATIENT IDENTIFIERS (such as name and case number).