



PHILIPPINE BOARD OF THORACIC, CARDIAC AND VASCULAR SURGERY, INC. (PBTCVS)

Room 514, 5th Floor, Medical Arts Building, Philippine Heart Center, East Avenue, Quezon City
Telephone Numbers: (632) 925-2401 loc. 3534 / Telefax: (632) 929-3826
Email: pbtcvs@phc.gov.ph / pbtcvs@yahoo.com

ANNOUNCEMENT

Certifying Examination for Diplomate in TCVS

DATE OF EXAMINATION:

Part I: **WRITTEN** : **04 June 2017 (Sunday)**
Part II: **ORAL** : **25 June 2017 (Sunday)**

REQUIREMENTS:

1. A completed PBTCVS application form with recent 2 x 2 pictures.
2. A copy of medical school diploma
3. A copy of license to practice medicine in the Philippines.
4. A copy of General Surgery diploma or original certificate of completion of 3 years training in a PCS accredited training program.
5. A copy of Thoracic and Cardiovascular Surgery diploma or original certificate of completion from head of TCVS training program.
6. Letter of recommendation from the head of the TCVS training program and from one consultant of the same program.
7. List of patients and operations done during training, as Surgeon, required based on thoracic, cardiac and vascular index cases. (Use prescribed PBTCVS template: Form 2)
8. Complete logs of operations done from 1st year to 3rd year in TCVS.
9. Summary of all operations done as Surgeon or First assistant and according to specialty (Use prescribed PBTCVS template: Form 3)
10. Other documents that the Board may deem necessary to validate credentials.
11. Payment of examination fees:
 - 11.1. Fee for written exam = P 12, 000.00
 - 11.2. Fee for oral exam = P 12, 000.00
 - 11.3. Certification Fee = P 6, 000.00

DEADLINE OF SUBMISSION OF REQUIREMENTS: **21 APRIL 2017 (FRIDAY)**

For inquiries please call 929-3826 or 925-2401 local 3534 or write to:

Philippine Board of Thoracic, Cardiac and Vascular Surgery, Inc.
c/o PATACSI Office, Room 514, 5th floor, MAB
Philippine Heart Center, East Avenue, Quezon City
e-mail address: pbtcvs@yahoo.com