QUARTER 4 : LEARNING TO DO
Week 9 : Presenting and Sharing Results

I. OBJECTIVES:

A. Listening

Listening to the text and reproduce the instructions in making a periscope

B. Reading

1. Organize and extract information by completing a diagram
2. Sketch the earth's shape through one's imagination
3. Enumerate details to support a main idea

C. Writing

Write a summary of a selection

D. Grammar

1. Report alternative and yes-no questions
2. Extract and report opinions
3. Use the colon, semi-colon, comma, and the dash correctly

E. Literature

Express one's feelings through other people's experiences.

II. SUBJECT MATTER

Listening: How to Make an Improvised Periscope
Ref.: *The Science Library,* pp. 8-9
Grammar: Reporting Yes-No Questions, Alternative Questions It and Whether
Ref.: *Meeting My Needs for English,* pp. 286-287
Reading: "Discovering the Earth"
Ref.: *English II, SEDP,* pp. 375-378 Writing:
From General Ideas to Specific
Ref.: *English II, SEDP,* pp. 352-354
Literature: "The Men Who Play God" Ref.: *English II,* pp. 381-387

III. PROCEDURE

Day 1

A. Pre-listening

Motivation: Have you seen a submarine? Imagine that you are in a submarine and you are to attack an enemy. What instrument will you use to monitor your enemy?

B. Listening Proper

The students listen to the instructions to be read by the teacher and may take down notes:

Cut off the tops of both milk cartons. Insert the open end of one carton into the open end of the other, so that they form 16-inch tube.

One inch from the bottom of one of the cartons, cut out a window in 1½ inc high.
Cut a slit in the same side, ½ inch from the bottom.

Insert a mirror, face up, in the slit until one end rests along the back of the carton. Secure the mirror with tape at the angle shown in the illustration.

Do the same thing with the opposite side of the other carton.

The reflecting sides of the mirrors should be facing each other. You have made a periscope. Periscopes are used by submarines to see ships on the surface of the sea while the submarines are under the sea.

Try reading through a periscope. Let someone hold a newspaper and see if you can read the headlines. Is it mirror writing? Can you explain it?

The reason you were able to read the headlines in the periscope is because mirror A made mirror writing which mirror B reversed to normal writing.

Answering Comprehension Questions

1. What is a periscope? What is its function?
2. What are the materials needed in making an improvised periscope?

Second reading of the listening text Discussion
of the answer

C. Post-listening

Group Work. Each group tries to come up with the steps in making an improvised periscope using their notes. Each group writes the complete set of instructions in manila paper and present it to the class.

Evaluation of the group work.

D. Assignment

Think of an interesting instrument that you could possible make out of scrap materials, write the steps on a ¼ cartolina and share to the class next meeting.

Day 2

A. Recapitulation: Yesterday's lesson gave you ideas on how to make an improvised periscope. With your group mates, you were able to reproduce the set of instructions on how to make one. Today, through oral communication, you will learn when it is proper to use direct and reported yes-no and alternative questions.

B. Task 1 – Tuning in

A game on asking yes-no questions

Teacher thinks of a person who is popular. Students ask questions that are answerable by yes-no only to guess who the person is.

Example of students' questions:

1. Is he a politician?
2. Is he a singer?

Task 2 – Presentation of the Lesson

Read the following dialog and note how the questions are changed to reported speech.

Tina: Hello, my name is Tina Zoleta. I spoke to you on the phone about a job.

Mrs. Reyes: Come in and sit down please. Do you have any job experience?

Tina: Yes, I have, I have worked in a bakeshop for ten months.

Mrs. Reyes: Good! Would you like to work for me? Is P114.00 all right with you?

Tina: That's fine with me Ma'am. Thank you!

Study the following questions taken from the dialog.

1. She asked Tina if she had any experience.
2. She asked her is she would like to work for her.
3. She inquired if P114.00 a day was all right for her salary.

Key Point: This pattern is used when reporting yes-no questions.

Speaker + wanted to know + if + subject + verb?
Inquired
Asked

Study the following alternative questions. What words are used to introduce these questions in reported speech?

Direct Speech	Reported Speech
1. Will you have coffee or tea?	1. The host wanted to know whether I would have coffee or tea.
2. How would like your steak, medium, rare or well done?	2. The waiter inquired whether I wanted my steak medium, rare, or well done?
3. Do you have large or extra large of this style?	3. The customer wanted to know if the store had large or extra large sizes of that style.

Key Points: Alternative questions are introduced by if or whether. The pattern used is as follows:

Speaker + asked + if + (one alternative + or)
wanted to know + whether + (other alternative)
inquired

Task 3 – Practice

Change the following yes-no questions to reported speech.

1. Mrs. Reyes asked, "Have you worked before?"
2. "Do your parents know of your application?" she inquired.
3. "Do you have references?" she wanted to know.
4. She asked, "Are you studying?"
5. She also asked, "Can you work overtime if needed?"

Change the following questions from direct to reported speech.

1. "Would you like to work on Saturday or Sunday?" Mrs. Reyes asked.
2. "Do you like to work in the morning or in the afternoon?" she also asked.
3. "Can you work overtime or not?" she wanted to know.
4. Mrs. Reyes inquired, "Are you fifteen or sixteen?"
5. "Are you enrolled this semester?" asked the lady.

Task 4 – Oral Interaction

Work with a pair/buddy. Do Activity 3B, p. 287 and Activity 4B, p. 288 *(Meeting My Needs, Book II)*.

C. Assignment

Interview one of your classmates on any one of the following topics. Then present to the class the outcome of your interview.

1. Would he want to be a nurse or a teacher?
2. Does he want chocolate bars or ice cream?
   Give reasons for the choice.

Day 3

A. Recapitulation: The lesson yesterday taught you how to report yes-no questions and alternative questions.

B. Task 1 – Pre-reading

Vocabulary: see attached sheets for the activity and reading test

Motivation:

What do you know about our planet? What's the real shape of the earth? Do you have any idea?

Task 2 - Reading Proper

1. Scan the selection. Figure out the two major topics discussed. Then, read the selection silently.
2. Discussion of the reading text – "Discovering the Earth"
3. Labeling the diagram and completing the table
   Pls. Refer to the attached sheet.

Task 3 – Group Work

Group 1 - Sketch the shape of the earth.

2 - The earth is in trouble because of so many problems such as pollution, destruction of the ozone layer, wars and many more brought about by modernization. Write a slogan on how to solve these problems.

3 - Write a poem showing your concern for mother earth.

4 - Compose a jingle on how to save mother earth.

Evaluation of the group work.

C. Assignment

Write a short paragraph about the parts of the earth. Use the diagram and the table as your guide.

Day 4

A. Recapitulation: The lesson in reading helped you determine the root work which will provide you with the clues to the meaning of the work. It also taught you how to organize and extract information using a diagram.

B. Task 1 - Pre-writing Activities

Motivation:

Do you love plants? What is your favorite plant? Do you know how to classify plants?

Reading of the selection

Comprehension questions:

1. What information is given in the first paragraph?
2. What information is given in each of the last three paragraph?
3. What paragraph states the main idea?
4. What paragraphs support the main idea?

Vocabulary

The following words are taken from the reading selection. Determine the rootword of each term. The rootword will provide you with the clues to guess the meaning of each term. The first one has been done for you.

WORD	ROOTWORD	MEANING
Granitic Basaltic Spherical Scientific rocky fiery mysterious mountainous	granite	made of granite

Task 2 – Reading the Selection

Scan the selection. Figure out the two major topics discussed. Write them down on your paper. Then read the selection silently.

Discovering the Earth

1. The world is too much concerned with space invasion – the moon landing, the attempts to land in Mars, and just recently the near-conquest of Neptune which even included the possible communication between man on Earth and the inhabitants of Neptune. Yet, the planet Earth is still unknown, a mystery to be explored!
2. There is a lot about the earth to be learned. Is the Earth really round? How was it formed? What is found at the center of the earth?

3. As your scientists, we must first study our very own planet. At first we believed that the earth is a vast, flat and endless space and that if ships sailed too far, they would reach its edge and fall off into an unknown abyss where mysterious monsters lived. But recent photographs of earth satellites proved that the earth is a sphere. It is a spherical globe, flattened at the poles and bulging slightly around the equator.

4. In its early days, the Earth was believed to be a ball of fiery mass that whirled in its orbit. Then, very slowly, it cooled, contracted, and flattened. The heaviest mass sank to the center of the earth which is the innermost layer of the planet with two parts – the outer core and the inner core.

5. As we view the earth's surface, the earth is formed into three major zones – the solid central zone known as *lithosphere* (rock sphere) which covers about 21 percent of the earth's surface and where the seven continents and major island groups are located. The second zone is the hydrosphere (water sphere) which is in the form of ocean basins, seas, lakes, gulfs, and running streams. The third zone is the *atmosphere* (envelope of air). It extends to a height of several hundred kilometers from the earth's surface. These are the things that form the earth and we can observe and see it with our naked eyes as we view it from its surface.
6. How about if we longitudinally dissect the earth into two halves? What would be the composition of the earth?
7. The earth is composed of three major layers – the innermost layer or the core; the middle layer or the mantle; and the outermost layer or the crust. This innermost layer known as the center of the earth consists of two parts – the inner core and the outer core. Made of iron and other metals, the outer core is about 2,000 kilometers thick. It is of unusual density. Consisting of iron and nickel the inner core, likewise, is about 1,400 kilometers thick. It could either be solid or crystalline. The outer core is believed to be liquid and the inner core is solid.
8. The exact nature of the core is impossible to determine. Scientists have found it impossible to reach since the mantle, the middle layer of the earth, cannot be penetrated.

9. The mantle is estimated to be 2,880 kilometers thick. There are two accepted concepts as to what substance makes up the mantle. First, it is made of plastic out of a rigid mass of material. Second, it is of magma or molten rock. The solid mantle, however, is composed of the mineral olivine. The mantle, like the core, is also impenetrable. As we go up higher to the outermost layer of the earth, one passes through the Moho zone (named after Mohorovici, the seismologist who discovered it) which separates the mantle and the crust, the outermost and rocky layer of the earth.
10. The crust, like the core, has two layers. The upper layer is the *sial* which makes up the continental crust of the continental base. It is made of the granitic rock. On the other hand, the lower layer is the *sima* which is of basaltic rock. It forms the base of the ocean floors. Sial is lighter in weight than the sima. Thisexplains why the continents can float on oceans of sima.
11. The earth's crust below the continent is about 32 kilometers thick while beneath the sea, it is only about 11 kilometers.
12. These are the mysteries and wonders of the earth as we journey towards the center. From deep within its core to its surface, we come to know its general parts – the crust, the mantle, and the core.
13. What is the possibility of a deeper study on the interior parts of the earth's composition?
14. The phenomenon of earthquakes gives way to geologist to venture and to explore the inner parts of the earth. But earthquakes are destructive and before one could go beyond the earth's crust, he must have been in his grave.
15. Indeed, Mother Earth is a mystery.

Comprehending the Selection

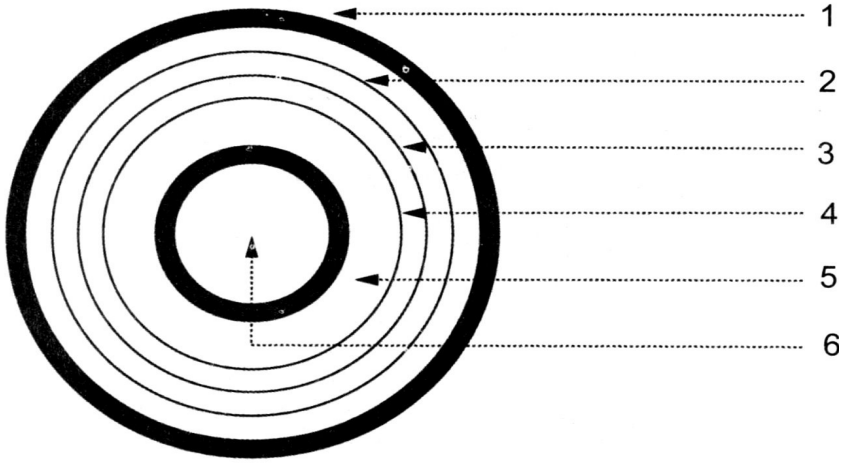
Answer the following questions based on the reading selection.

1. What is the true shape of the earth?
2. How did the earth come into being?
3. Why are some portions of the earth elevated?
4. What are the earth's three major zones?
5. The earth consists of three major parts. What are these parts?
6. What is sima? How does it differ from sial?
7. What is the Moho zone?
8. Of the three major parts, which is the thickest?
9. How did man come to know the different layers of the earth?

Extracting the Organizing Information

Post-reading Activity

The diagram below shows the parts of the earth. Label the diagram and then complete the table based on the reading selection.



PARTS OF THE EARTH	DEPTH	COMPOSITION	CHARACTERISTICS
A. _____ 1. _____ 2. _____ B. _____ C. _____ 1. _____ 2. _____			

Write a summary of the selection based on the diagram in Activity 6.

Task 1 – Pre-writing Activities

Activity 1

Read the following selection. Note how the paragraphs are arranged.

Depending on how long the root lives, plants may be classified as annuals, biennials, or perennials.

Annuals are plants that die at the end of the growing season. Many garden vegetables such as beans, peas, and tomatoes are annuals.

Biennials take two years to live. During the first year, only the stem and leaves appear above the ground. These parts die at the end of the season, but the root lives over the dry season. Carrots, potatoes, and turnips *(singkamas)* are biennials.

Perennials live for years and years. Some examples of perennials are guava santol, and mango trees.

Activity 2

A. Read the following sentences. Note the punctuation marks used.
   1. Depending on how long the root lives, plants may be classified as follows: a) annuals, which die at the end of the growing season; b) biennials, which require two years to complete their life; and c) perennials, which live for years and years.
   2. The biennials – carrots, potatoes, and turnips – are mostly not crops.
   3. Some examples of perennials are guava, santol, and mango trees.
   4. Many garden vegetables such as beans, peas, and tomatoes are annuals

B. Now answer these questions.
   1. What punctuation marks may be used to introduce examples?
   2. What punctuation marks separates one example from another in as series?
   3. When do you use the semi-colon? The dash?
   4. How are the ideas organized? From the general idea to specific examples or the other way around?

Reading sentences on Activity 1 then students answer Activity 2

Task 2 – Writing Proper

Write the summary of the selection. Use the correct punctuation marks.

Task 3 – Post-writing

Evaluation of the Students' summary

C. Assignment

Things around us may be greatly appreciated if we write about them in logically arranged compositions. Think of things in the environment: Flowers, birds, children animals, etc. Try to classify one group. Follow the format of our sample composition.

Day 5

A. Recapitulation: You learned that one way of developing a composition is to arrange the ideas from general to specific. In writing compositions you also have to observe proper punctuation marks.

B. Task 1 – Getting ready

Vocabulary

Choose the meaning of the underlined words through context.

1. The circadian rhythm of human activity rises like a quotidian fever during the day and returns to normal in the peace and quiet of the night.
   a. use with numerals
   b. repeating or performing in a 24-hour cycle.
   c. to move around and return to the starting point.

2. At peak travel hours, which is before nine in the morning to sunset, the combined cacophony of thousands of motors accelerating, horns blasting, tires screeching, reaches the one-hundred-twenty-decibel level.
   a. harsh discord or jarring combination of sounds
   b. a fall or modulation of the voice, the rhythmic flow of sound
   c. a passage for solo voice or instrument
3. There was unpolluted, invigorating air to fill the lungs, cool tranquil nights to encourage sound sleep, restful, uneventful days for strolling. In such environment, convalescence was pleasant and speedy.
   a a partial responsibility of an injured persons for his injury
   b. a private medical service approximating a hospital emergency room
   c. a gradual recovering from illness.
4. The din and confusion are indescribable.
   a. a clamor of discordant, deafening noises
   b. drive home by constant repetition
   c. indistinct not clearly visible

Task 2 – Comprehension Check

Task 3 – Oral interaction/Group Discussion

Group 1 – In what way can young people play God? Consolidate your opinions a-: ideas and the leader shares them to the class.

Group 2 & 3 – Debate on the issue: Should doctors be severely punished if the. commit error in treating a patient?

Group 4 – Panel Discussion

Since many scientists play like God, give your stand on this topic: A-e you in favor of human cloning?

Group 5 – Act out lessons from the story. Evaluation

of the group work.

Literature

This is the story of doctors at the Philippine General Hospital. Find out why these people can be aptly called "the men who play God."

The Men Who Play God

Arturo B. Rotor

The new hospital is situated in the center of a tract of land bounded by Calle Padre Faura on the north, Taft Avenue on the east, Calle Herran on the south and the weather observatory on the west. This tract contains nearly 11 hectares (27 acres) and is known as "Medical Center: on account of the Bureau of Science and the College of Medicine and Surgery being located on the same lot It is most conveniently located being well within the city limits.

There are no more trolley lines on Taft Avenue today, and the Weather Observatory had moved out long ago. Calle Herran is now Pedro Gil Street, but Taft Avenue is still named after the first American civil governor. The place and scene described by Doctor Snodgrass are still remembered by a few white-haired and wrinkled senior citizens They tell you that in their time it

was a short stroll down acacia-lines, tranquil, well-dept streets to the seashore, where you joined the old-time residents of Ermita and Malate to wait for the sunset on Manila Bay. Or, for ten centavos, you cold take a horse-drawn *caruaje* for a leisurely ride to the Luneta and Intramuros. Ermita was the exclusive residential section of Manila: this was where the remaining dons, doñas and their Spanish-Filipino progeny elected to stay; here they mourned the end of the Spanish Empire and waited for what the future would bring. With a reminiscent smile and a faraway look in their eyes, the oldtimers describe to you the Spanish-styled chalets that clustered around Ermita Church, the lovely senoritas that once in a while could be glimpsed sitting in the trellised balconies and, above all, the heavenly peace and quiet that permitted you to hear the sharp screech of the bats coming out of their belfry at twilight, and to detect the unmistakable tang of the evening breeze, long before you saw the surf breaking against the moored fishing boats off Pasay beach. In such an environment, convalescence was pleasant and speedy. There was upolluted, invigorating air to fill the lungs, cool tranquil nights to encourage sound sleep, restful, uneventful days for strolling in the hospital grounds or sitting dow and dozing under great spreading acacia trees.

Not any more. Completely changed in character and purpose is the district once considered the ideal hospital environment. Taft Avenue is the main traffic artery connecting old Manila to the burgeoning new towns and cities south; through Padre Faura and Herran the discos, beer houses and motels of the Tourist Belt link up with the slums, tenements and estero shanties of Paco. Taft Avenue, as a national road, must carry the traffic that is built up by the thousands of students spewing out of the schools, colleges, universities, boarding houses that line it on both sides, the hundreds of merchants and peddlers who buy and sell their tomatoes and *kangkong* at San Andres and Paco markets, and the uncounted mob of employees who must get to and depart from their desks and cubicles at City Hall, Foreign Affairs, and other offices.

There is only one contrivance that can move this mass of humanity, the internal combustion engine. If you stand long enough in front of the Philippine General Hospital, you will see every model, make and variant of this wondrous invention, from scooters to ten-ton trucks, from World War II jeeps to seventy-passenger buses. At peak travel hours, which is before nine in the morning, to sunset, the combined cacophony of thousand of motors accelerating, horns blasting, tires screeching, reaches the one-hundred-twenty-decibel level. Above this basic din, a few more decibels are added by boy-peddlers shouting cigarettes or sweepstakes tickets, and by bus conductors announcing their routes: "Siga-ril-yo! San Andres Bukid! Crossing! Vito Cruz!" The din and confusion are indescribable. This must be what a mortally ill patient in delirium must go through; this must be the amorphous, unremitting jumble of hubbub, boom and barrage, without pattern or purpose or direction ,that finally pushes the mind over the brink of sanity.

But this is the pulse beat of trade and commerce. This is the circulatory flow of men an ideas, reaching all levels, nurturing the organism, determining growth. This circadian rhythm of human activity rises like a quotidian fever during the day and returns to normal in the peace and quiet of the night. If you are a passenger in one of
the buses or jeepneys, you have your moments of doubt that you could get past the hospital, for the line of vehicles in front of you seems solid. But it does move, even if only at the speed of a few feet every so often. Once in a while, however, all movement does stop, as when a fire engine from the nearby Paco station answers a call from somewhere in Pasay, or a police squad car, its sirens screaming and its turret lights flashing, comes shooting out of its headquarters in

the Central Police Station at Isaac Peral. Then everything does stop, for that is the only way these emergency vehicles can get through the bumper-to-bumper traffic on both sides of the road – taking the middle lane, and weaving in and out of either lane.

All along the avenue facing the hospital are the shops and stores that cater to the needs and requirements of patients, particularly the indigent. Here are the drug stores, flower and gift shops, lunch counters; most are one-door, shoe-string operations, small and utilitarian, geared to the modest needs of the charity patients and the humble folk who visit them. Here you can purchase a spray of five daisies, or six tablets of penicillin, or one apple or mango. The sidewalk peddlers will sell you cigarettes by the stick, peanuts by the tablespoonful, ball pens, shoe-laces. If you wish to bring to your sick relative in Ward 6 a year-old issue of *Popular Komiks,* you will find somebody along the sidewalks selling a pile of them. Or you can buy her a necklace of sampaguita.

You enter the hospital grounds from Taft Avenue, that is, if your car or taxi can detach itself from the traffic stream. It is easy if you are going south, but if you come from the opposite direction, then you have to cross Taft Avenue an that can be a problem. Once you enter driveway, you begin to wonder whether you are lost. For, what used to be a lawn and garden is one vast parking lot, chock-full of the same vehicles that run outside. The grass is gone, and the white santans that line she driveways and the few narra trees left are yellow and shriveled, unable to exist in an environment rich with carbon monoxide, sulfur dioxide and plain street dust. To the left is the garage, housing the ambulance and service cars and almost obscuring the narrow back entrance to the Out-patient Department. To the right is the Nurses' Home which has managed to maintain its individuality and dignity against all odds. And in front of you is a gently inkling ramp up which you go to the main door. At last you are in the Philippine General Hospital, the temple of the men who play God.

The hospital was officially opened on September 1, 1910. . . On the following day, the patients were transferred from Old Civil Hospital to the new structure. . . On June 30, 1911, the nursing staff consisted of 18 American females, 5 American males, 69 female and 38 male pupil nurses and 3 graduate Filipina nurses. . .

The Filipina nurses as a whole are a grand success. They are quiet, gentle, patients and are making rapid progress along the line of proficiency. One very frequently hears patients make the statement that they would as soon have a good Filipino nurse care for them as an American.

Inside the temple, the atmosphere is somewhat subdued, if only in contrast to the bedlam outside. The guardians and keepers in their gowns or jackets go about their tasks and offices silently as befit their solemn work. Here they tell time differently. The day does not begin at sunrise and end at twilight; the day is a never-ending period of time conveniently divided into three shifts, seven to three, three to eleven, and eleven to seven. There is no beginning and no end Mss Martinez comes in to take over Ward 6 from Miss dela Cruz, who just seven hours ago singed in as head nurse for the ward. It matters not whether it is Monday or Sunday, whether it is noon or midnight, the unvarying routine must

go on . Fifty or sixty patients mush have their pulse counted, their temperature taken, their breathing timed. Medicines must be given every two hours, or four, or continuously. Whether the patient ate his meal or not, whether he slept or tossed about is vital information and has to be recorded. For the nurse with her tray of pills and little lasses of liquid, stop watch, blood pressure apparatus, the day is long or short depending on how many new patients are admitted, how many need to have venoclysis or oxygen, how many have to be checked for vital signs every hour. In this manner, daylight dies into the twilight, and night breaks into dawn – and the seven o'clock shift arrives to take over.

The hospital will be named the Philippine General Hospital because it will be destined principally for the use of the Filipino people. It will have the following department: Administrative, Surgical Operating Rooms, Kitchen, Dispensary, Nurses' Home, Pavilion No. 1 (private rooms), Pavilion No. 2 (surgical cases), Pavilion No. 3 (medicine), Pavilion No. 4 (children, medicine, or orthopedics), Pavilion No. 5 (obstetrics).

"Does the patient understand English?" the professor asked.

"Yes, sir," the intern answered.

"Him. . . Hm. . . Nurse, will you take the patient back to the ward?"

The wheelchair creaked softly, its hardened rubber wheels sliding with some difficulty on the concrete floor. The patient was a little puzzled; he looked expectantly at the circle of white-jacketed doctors, awaiting their advice or instructions. But nobody spoke; the silence hung like a heavy weight. And as he passed the last intern, the patient looked at him directly, and seemed to understand. He leaned back in his wheelchair, his head bowed.

As soon as he was out of sight, the group resumed the discussion.

"Well, let us summarize our findings in this case. Doctor Garcia, maybe you could start off."

"The patient was admitted about three weeks ago complaining of a mass in the abdomen, first noticed about two months ago. The mass is located in the right hypochondrium, roughly globular, minimally tender, not attached to surrounding tissue and as hard as stone. The patient has lost about eight pounds since admission."

"Dr. Mendoza?"

"The important laboratory examinations are concerned with liver functions. The enzyme tests indicate both obstruction and destruction of liver cells. Icterus index is 120."

"Doctor Alonzo?"

"On September 23, a liver biopsy was done under local anesthesia. The pathologist reported hepatoma."

The professor looked around. "Is there any dissenting opinion? Can't we arouse some debate on this complicated case? What does the surgeon say? Dr. Perez?"

"I have gone over your data and double-checked a few tests. We observed that the jaundice is deepening. Bleeding time is now twelve minutes. Yesterday, in preparation for this conference I examined the patient again, and noticed a small gland in the left inguinal region. It is my opinion that this patient is not suitable for surgery."

"Can't we commute this death sentence? How about radiation? Cytotoxic drugs" Doctor Zamora, you have done some work on this? What do you think?"

Without medicines, the patient has maybe three to five months left. With some of the newer anti-neoplastics, maybe eight to nine months. But I have gone over the locally available preparations and calculated that it would cost the patient between two hundred to four hundred pesos a day. This we must explain to the family before we
start anything, if we decide to."

"And radiation?"

'Our cobalt machine is out of order and will require from four to six weeks to be put in operation again. Anyhow, I do not consider the patient a suitable subject. The side effects might be worse than the expected palliation."

The professor paused for a moment and appeared to be thinking deeply. Finally, he spoke, "Well, I guess that winds up our discussion of this interesting case. Doctor Mendoza, you can discharge the patient t his afternoon."

The Philippine General Hospital will fulfill four distinct needs:

It will offer to the general public exceptionally good facilities for the healing of injuries and the curing of diseases.

It will assure to officers and employees of the Government who are entitled to have medical or surgical care free of charge, a quality of attention seldom equaled. . . and
never excelled. . .

It will offer the medical students exceptional facilities for practical instruction.

Finally, it will accomplish another very important work in the training of your Filipino men and women as nurses.

The ambulance surgeon checked a pile of papers on his desk. Vacancies, medical, let's see, lets see. . . ah, one vacancy. One vacancy against three patients needing tertiary care, three patients who had already been screened from a group of twenty-three by the health center, the provincial hospital, the dispensary physician, a resident. Selected among all the others because their illness could not be handled satisfactorily except with the facilities of the Philippine General Hospital. But he had only one vacant bed. To whom should he give it? The department's policy with regards to admission seemed to be clear-cut on paper. Admit the patient who is in most urgent need of hospitalization. Admit the patient whose clinical condition furnishes interesting material for study, investigation and research, on a lower priority. Do not admit the hopeless, for whom nothing can be done, no terminal cancer, advanced liver disease or contagious disease. Do not admit patients who can be treated at home. In the dispensary or in another hospital.

Now he had these three patients. One who was awaiting kidney transplantation; for him a kidney donor had been found. A young man with a rare blood disease for whom extensive studies and tests would have to be performed before blood transfusion with a hard-to-get blood type. A cardiac patient in whom all signs pointed to an impending crisis. Which one? He had checked each of the three personally and verified the diagnoses – all of them needed immediate hospitalization. Maybe he should check again and look more closely for a finding or symptom that would make one more serious than the other, more of an emergency case. But he had no time; there were other patients to be attended to in the other departments, and it was close to nightfall. Those who could not be admitted would have to be sent home soon.

He decided to call for help, ask the physician on duty to make the decision.

But the physician on duty was not of much help. He merely mentioned the fact that they already had three other cardiac cases in the ward. He suggested calling the senior resident for advice. The senior resident was quite busy at that time with an artificial resuscitation in the ward and sent a message through the head nurse: Tell the ambulance surgeon to use his best judgment.

Back in Admission, the ambulance surgeon shuffled the three admission slips on his desk like playing cards as he thought deeply. He tried to recall each patient, the deathly pallor of the blood-disease patient, the drowsy face of the kidney patient, the tense, desperate look of the cardiac case. Suddenly he made up his mind and wrote something on one of the admission slips. Then, calling an orderly, he instructed him to take the patient to Ward 6.

As a result of ten years of hard work and persistent effort on the part of government officials and laity, Manila possesses a hospital which compares favorably with the best hospitals of the world and which is already proving a veritable godsend to the people of the Islands.

The chairman of the Committee on Corneal Transplantation called the meeting to order.

"The agenda for today makes note that a fresh cornea is available for transplantation and that this committee is to decide on the recipient. By the way, how many do we have on the waiting list as of today?"

"Sir, we have one hundred sixty-five."

The chairman appeared stupefied. "We are not going through the qualifications of one hundred sixty-five patients this morning, are we?"

"No, sir, we have done some preliminary screening and we have narrowed the choice to three."

"Fine. Will you summarize your criteria and findings?"

"We first tried to determine which of the patients will most likely accept a corneal transplant. We eliminated right away those with negative light perception, those with shrunken eyeball and those with evidences of optic atrophy or accompanying disease like glaucoma, diabetes, and focal infection. Thus we came to these three patients: M.N., female, 19 years old; B.F., male, 27 years old and L.S., male, 47 years old. The three are in good health. Aside from the impaired vision, their corneal capacities are more or less similar, and all have received clearances from the endocrinologist, cardiologist, and psychologist. Insofar as registration on the waiting list is concerned, all were registered within two weeks of one another. We have arrived at the stage where it will be necessary to use criteria not included in the standard policy adopted by this committee several years ago."

"Well, let's hear some opinions. I understand some of you have investigated these cases carefully and have arrived at positive decisions."

"Sir, I believe that the young girl should be the recipients. She is intelligent, has just finished college and her whole life is before her."

"But her parents are still alive, and she has two brothers who are gainfully employed. On the other hand, patient B.F. is the sole support of a family of five."

"And the third patient?"

"He is a hospital attendant referred to us by a provincial hospital. It seems to me that somebody who has spent seventeen years of his life caring for patients has earned his priority to be attended to now."

The Chairman was silent for a long time. Idly he flicked the pages of the clinical charts in front of him, as if searching for words. At last he faced his staff squarely.

"Which one of you would like to play God today?"

C. Assignment

Considering the good works of doctors in PGIH especially in admitting patients wherein sometimes they play God, suggest some criteria to their existing policy in admitting patients.