



**(NURSING SERVICES)**

**INTERNAL**



**DELIVERY ROOM PROCESS**

PROCESS: LABOR MONITORING AND DELIVERY

A. SCHEDULE OF SERVICE: Monday-Sunday (24/7)

B. WHO MAY AVAIL OF THE SERVICE: All patients that require Level I maternal and child services.

**List of Level I Delivery**

- Obstetric cases
- Normal Spontaneous Vaginal Delivery
- Postpartum Care
- Newborn Care
- Gynecology Cases
- Dilatation and Curettage
- Manual Extraction of Placenta

<b>Office or Division:</b>		DELIVERY ROOM		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government-to-Citizen		
<b>Who may avail:</b>		All patient that require Level I Maternal and Child Services		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Endorsement/ Verification	1.1 Receives patient in active labor from ER and OB-ward.	none	10 minutes	ER, DR Nurse & Midwife  DR Nurse  Midwife
	1.2 Examine the patient records and other documents.	none	5 minutes	
	1.3 Check the vital signs, abdominal examination, FHT, vaginal examination and record the findings.	none	5 minutes	
2. Assist patient in changing patient's gown.	2.1 Facilitates the changing of patient's clothes to DR gown and cap and instruct patients and significant others to wear indicated slippers. Provide watcher's gown and only one (1) watcher is allowed per patient.	none	5 minutes	DR Staff on duty
3. Assessment	3.1 Properly assess and monitor patient.	none	5 minutes	DR Nurse on duty
	3.2 Labor Room: assist patient in active labor with uncomplicated	none	10 minutes 5 minutes	DR Staff on duty DR Staff on duty



	<p>cases, attend patient with premature rupture of membrane, pre-eclampsia and eclampsia</p> <p>3.3 Monitor vital signs and progress of labor at labor room.</p> <p>3.4 Prepare patient for procedure and transfer patient to delivery room.</p> <p>5.4 Inform Medical Officer/ Medical Specialist on duty.</p>	<p>none</p> <p>none</p>	<p>5 minutes</p> <p>5 minutes</p>	<p>DR Staff on duty</p> <p>Medical Officer/Medical Specialist</p>
4. Inform Medical Officer on duty	<p>4.1 Evaluates patient.</p> <p>4.2 All Doctor' order should be reviewed, carried out and filed it properly.</p>	<p>none</p> <p>none</p>	<p>10 minutes</p> <p>5 minutes</p>	<p>DR staff on duty</p> <p>Medical Officer/Medical Specialist</p>
5. Monitoring	<p>5.1 Monitor patient's vital signs and FHT</p> <p>5.2 For imminent delivery, transfer patient immediately to delivery room safely.</p>	<p>none</p> <p>none</p>	<p>5 minutes</p> <p>5 minutes</p>	<p>DR Staff on duty</p> <p>DR Staff on duty</p>
6. Delivery process	<p>6.1 Transfer patient safely to delivery table.</p> <p>6.2 Do skin prep, drapes patient and position patient comfortably.</p> <p>6.3 Delivers the neonate, observes EINC protocol and notes placenta for completeness.</p> <p>6.4 Do repair of perineal laceration if needed.</p> <p>6.5 Makes post-partum order.</p>	<p>none</p> <p>none</p> <p>none</p> <p>none</p> <p>none</p>	<p>5 minutes</p> <p>5 minutes</p> <p>60-90 minutes</p> <p>10 minutes</p> <p>5 minutes</p>	<p>DR Staff</p> <p>Midwife on duty</p> <p>DR Staff on duty</p> <p>DR Staff on duty</p> <p>Medical Officer/Medical Specialist</p>
7. Post-partum and Newborn Care	<p>7.1 Do newborn care and post-partum care</p>	<p>none</p>	<p>30 minutes</p>	<p>DR Staff on duty</p>



8. Transporting patient to ward	8.1 Transfer stable post-partum patient and room-in well baby  8.2 Admits Pathologic newborn	none  none	5 minutes  30 minutes	DR Staff on duty with IW on duty
9. Endorsement to Ward	9.1 Endorse patient to ward, records to the designated logbook.	none	10 minutes	OB, DR Nurse
	<b>END OF TRANSACTION</b>			



## Transfer In-Patient to Medical/Surgical Ward

This procedure covers activities of patients from ER/other ward to Medical/Surgical Ward

<b>Office/Division</b>		<b>Nursing Service- Medical/Surgical Ward</b>		
<b>Classification:</b>		<b>Simple</b>		
<b>Type of transaction:</b>		<b>Government to Citizen</b>		
<b>Who may avail:</b>		<b>All in-patient</b>		
<b>Checklist of requirements</b>		<b>Where to secure</b>		
1. Trans-in orders		Attending Physician		
2. Complete pertinent documents		Nurse on duty		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
1. Request of transfer	1.Oder to transfer to Medical/Surgical ward	None	10mins.	Nurse on duty
1.1 Receive notice for transfer to Medical/Surgical ward	1.1 Inform patient about transfer	None	5mins.	Nurse on duty
1.2 Prepare patient for transfer	1.2 Facilitate transfer	None	10mins.	Nurse on duty
2. Transfer patient	2.Receive the patient and transfer to bed assignment	None	10mins.	Nurse on duty/ Nursing Attendant
2.1 Endorse patient's brief history, initial care and special care	2.1 Perform primary assessment such and taking initial vital signs	None	20mins.	Nurse on duty
3. Listen to specific rules and regulation of the assigned ward	3.Orient patient and significant others about rule and policies about Medical/Isolation ward, especially safety precautions	None	20mins.	Nurse on duty
	<b>Total</b>	<b>None</b>	<b>1hr and 15 minutes</b>	



## Discharge In- Patient

This procedure covers activities of in-patients discharge from service ward

<b>Office/Division</b>		<b>Nursing Service- Medical/Surgical Ward</b>		
<b>Classification:</b>		<b>Simple</b>		
<b>Type of transaction:</b>		<b>Government to Citizen</b>		
<b>Who may avail:</b>		<b>All in-patient</b>		
<b>Checklist of requirements</b>		<b>Where to secure</b>		
1. Discharge orders		Attending Physician		
2. Complete pertinent documents		Nurse on duty		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
1. Notice of Discharge Order	1. Verify Order of Discharge from care	None	10mins.	Nurse on duty
1.1 Explained notice of discharge	1.1 Inform patient discharge	None	5mins.	Physician
1.2 Prepare pertinent documents	1.2 Facilitate discharge	None	10mins.	Nurse on duty
2. Discharge patient	2. Verify Patients financial capacity	None	10mins.	Nurse on duty
a. PHIC Patient	a. Sent Chart to Billing Department	None	10mins	Nurse on duty/Nursing Attendant
b. Non-PHIC Patient	b. Refer patient to Medical Social Service Department	None	10mins.	Nurse on Duty
2.1 Patient's significant others (SO) proceed to billing section	2.1 Give proper instruction to (SO)	None	10mins	Nurse on Duty
3. Discharge patient	3. Sign discharge slip, properly instruct patient's home medication and terminate IV access (if present)	None	10mins.	Nurse on duty and Nursing Attendant
<b>Total</b>		<b>None</b>	<b>1hr and 15 minutes</b>	



## OPERATING ROOM PROCESS

The operating room is available from Monday to Sunday 24 hours with no noon break. It caters all patients that require Level I surgery.

List of identified type of surgery

OB-Gyne	Surgery
Cesarean Section	Appendectomy
Bilateral Tubal Ligation	Herniorraphy
Dilatation and Curettage (D&C)	Hemorrhoidectomy
Fractional Curettage	Fistulectomy
Hysterotomy	Exploratory Laparotomy
Emergency Hysterectomy	Wound Debridement
Unilateral Salphingo Oophorectomy	Others: Minor Surgeries
Bilateral Salphingo Oophorectomy	
Emergency Total Abdominal Hysterectomy	
Bilateral Oophorectomy	

<b>Office or Division:</b>		OPERATING ROOM		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government-to-Citizen		
<b>Who may avail:</b>		All patient that require Level I Surgery		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>OPATIENTS CHARTS</b>		<b>ER/DR/WARD</b>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
10. Preparation	1. Receives request for surgery from ER nurse, Ward Nurse, DR nurse. 1.1 Coordinate with the surgical team for specific concerns e.g. equipment, supplies and medicines needed 1.2 Set up of operating room for contemplated procedure	none	30 minutes	Perioperative nurse
11. Endorsement	2. Checks all necessary documentation for the operation 2.1 Prepares the patient for surgery	none	15 minutes	Perioperative Nurse



12. Patient after surgical procedure	3. Perform post-operative care 12.1 Ensure timely and accurate documentation 12.2 Transport patient from OR theatre to PACU unit	none	30 minutes	OR team (Surgeon/Anesthesiologist/OR nurse/Nursing Attendant/Administrative Aide)
13. Discharge	4. Referral to Anesthesiology for disposition. 4.1 Trans out patient to specified ward 4.2 Endorsement to receiving nurse on duty	none	30 minutes	Anesthesiologist/ PACU nurse
	<b>TOTAL</b>	none	1 hour and 45 minutes	





## Transfer In-Patient to Pediatric Ward

This procedure covers activities of patients from ER/other ward to Pediatric Ward

<b>Office/Division</b>	<b>Nursing Service Pediatric Ward</b>			
<b>Classification:</b>	<b>Simple</b>			
<b>Type of transaction:</b>	<b>Government to Citizen</b>			
<b>Who may avail:</b>	<b>All in-patient</b>			
<b>Checklist of requirements</b>		<b>Where to secure</b>		
1. Trans-in orders		Attending Physician		
2. Complete pertinent documents		Nurse on duty		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
4. Request of transfer	1. Oder to transfer to Pediatric ward	None	10mins.	Nurse on duty
2.1 Receive notice for transfer to Pediatric ward	4.1 Inform patient about transfer	None	5mins.	Nurse on duty
2.2 Prepare patient for transfer	1.2 Facilitate transfer	None	10mins.	Nurse on duty
5. Transfer patient	2.Receive the patient and transfer to bed assignment	None	10mins.	Nurse on duty/ Nursing Attendant
2.1 Endorse patient's brief history, initial care and special care	2.1 Perform primary assessment such and taking initial vital signs	None	20mins.	Nurse on duty
6. Listen to specific rules and regulation of the assigned ward	3.Orient patient and significant others about rule and policies about Medical/Isolation ward, especially safety precautions	None	20mins.	Nurse on duty
	<b>Total</b>	<b>None</b>	<b>1hr and 15 minutes</b>	



## Discharge In- Patient

This procedure covers activities of in-patients discharge from service ward

<b>Office/Division</b>		<b>Nursing Service- Pediatric Ward</b>		
<b>Classification:</b>		<b>Simple</b>		
<b>Type of transaction:</b>		<b>Government to Citizen</b>		
<b>Who may avail:</b>		<b>All in-patient</b>		
<b>Checklist of requirements</b>		<b>Where to secure</b>		
3. Discharge orders		Attending Physician		
4. Complete pertinent documents		Nurse on duty		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
5. Notice of Discharge Order	1. Verify Order of Discharge from care	None	10mins.	Nurse on duty
5.1 Explained notice of discharge	1.1 Inform patient discharge	None	5mins.	Physician
5.2 Prepare pertinent documents	1.2 Facilitate discharge	None	10mins.	Nurse on duty
6. Discharge patient	2. Verify Patients financial capacity	None	10mins.	Nurse on duty
6.1 PHIC Patient	c. Sent Chart to Billing Department	None	10mins	Nurse on duty/Nursing Attendant
6.2 Non-PHIC Patient	d. Refer patient to Medical Social Service Department	None	10mins.	Nurse on Duty
2.1 Patient's significant others (SO) proceed to billing section	2.1 Give proper instruction to (SO)	None	10mins	Nurse on Duty
3. Discharge patient	3. Sign discharge slip, properly instruct patient's home medication and terminate IV access (if present)	None	10mins.	Nurse on duty and Nursing Attendant
<b>Total</b>		<b>None</b>	<b>1hr and 15 minutes</b>	



## Admission of Surgical Patients

Acceptance of patient to Surgical ward.

<b>Office or Division:</b>	Nursing Service Office – Surgical Ward			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Government			
<b>Who may avail:</b>	Nurses, Nursing Attendant			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Admission Charts		Emergency Room/ER Nurse		
2. Admission/Discharge Logbook		Surgical Ward/NOD		
3. Consent form for Medical/Diagnostics procedures		Surgical Ward/NOD		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Facilitate the admission of patient to ward	1. Accompanying patient to assigned bed with brief orientation of the ward, its policies and procedure.	None	5 minutes	<i>Ward Nurses, Nursing Attendant</i>
	1.2. After entry of patient's data at IHOMIS and Admission and Discharge Logbook ,	None	5 minutes	<i>Ward Nurses</i>
	1.3. Carry-out Doctor's orders at patient's Admission Chart for initial care and treatment.	None	5 minutes	<i>Ward Nurses</i>
	1.4. Receive and check the availability of requested supplies and meds. Administer care and treatment once available.	None	5 minutes for PRN meds and 30 minutes after (-) ANST for Antibiotics	<i>Ward Nurses</i>
2. Provide patient data/information and medical history of patient	2. Perform physical assessment and medical history	None	10 minutes	<i>Ward Nurses, Attending Physician</i>
3. Explain laboratory, diagnostic and therapeutic exam	3. Prepare patient for laboratory diagnostic procedures and transport if needed	None	5 minutes	<i>Ward Nurses, Nursing Attendants/Institutional Worker Ward Nurses</i>
	3.1. Let them sign the consent form before doing any procedure	None	5 minutes	<i>Ward Nurses</i>
	2.1. Encode charges to patient's hospital bill	None	5 minutes	



	<b>Total</b>	<b>None</b>	<b>40 to 60 minutes</b>	
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## Discharge of Surgical Patients

Discharging process of patient at Surgical ward.

<b>Office or Division:</b>	Nursing Service Office – Surgical Ward			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Government			
<b>Who may avail:</b>	Nurses, Nursing Attendant			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. In-Patient Chart		Surgical Ward/NOD		
2. Admission/Discharge Logbook		Surgical Ward/NOD		
3. Statement of Account		Billings and Claims Section		
4. Tagubilin/Discharge Instruction form		Surgical Ward/NOD		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Facilitate the discharge of patient from ward	1. Verify Doctor's order for Discharge	None	5 minutes	<i>Ward Nurses</i>
	1.2. Carry-out Doctor's discharge orders, Fill-up prescription for Home medications and Tagubilin/ Discharge Instructions	None	3 minutes	<i>Ward Nurses</i>
	1.3. After completion of charting and entry of data at patient's chart submit patient's record at Admission section.	None	5 minutes	<i>Ward Nurses</i>
2. Send off Chart to Admitting Section	2. Entry of data for CF4 Philhealth requirements	None	15-20 minutes	<i>CF4 staff</i>
2. Send off of Chart to Billing and Claims Section	2. Evaluation/Review of patient's Laboratory, Diagnostic, Medications, Supplies, etc. Bills			



3. Explain laboratory, diagnostic and therapeutic exam	3. Prepare patient for laboratory diagnostic procedures and transport if needed	None	5 minutes	<i>Ward Nurses</i>
	3.1. Let them sign the consent form before doing any procedure	None	5 minutes	<i>Ward Nurses</i>
	<b>Total</b>	<b>None</b>	<b>50 to 60 minutes</b>	



<b>SURGICAL DEPARTMENT</b>
<b>FRONT LINE SERVICE: ACCEPTANCE OF PATIENT TO SURGICAL DEPARTMENT</b>
<b>CLIENTS: PATIENTS (SURGICAL – ADULT/PEDIA)</b>
<b>REQUIREMENTS: DOCTOR’S ADMITTING ORDERS</b>
<b>AVAILABILITY OF SERVICE: 24 HOURS FOR 7 DAYS PER WEEK</b>
<b>MAXIMUM DURATION PROCESS: 1 -2 HOURS FORM EMERGENCY ROOM TO SURGICAL DEPARTMENT</b>

CLIENT STEP	AGENCY ACTIVITY	PERSON RESPONSIBLE	LOCATION OF OFFICE	DURATION OF ACTIVITY
FACILITATE THE ADMISSION OF PATIENT TO THE HOSPITAL AND TO WARD	ACCOMPANYING THE PATIENT TO THE ASSIGNED WARD/ROOM AND BRIEF ORIENTATION OF THE WARD	NURSE ON DUTY NURSING ATTENDANT ORDERLY/ INSTITUTIONAL WORKER	SURGICAL WARD	10 MINUTES
PROVIDE PATIENT DATAS/INFORMATION AND MEDICAL HISTORY OF PATIENT	PERFORM PHYSICAL ASSESSMENT OF THE PATIENT MEDICAL HISTORY	NURSE ON DUTY ATTENDING PHYSICIAN	SURGICAL WARD	10-15 MINUTES
EXPLAIN THE DIFFERENT DIAGNOSTIC AND THERAPEUTIC EXAM	PREPARE PATIENT FOR DIAGNOSTIC PROCEDURES AND TRANSPORT IF NEEDED	NURSE ON DUTY		TIME VARIES APPLY

<b>FRONT LINE SERVICE: DISCHARGE OF PATIENT AT SURGICAL DEPARTMENT</b>
<b>CLIENTS: PATIENTS (SURGICAL – ADULT/PEDIA)</b>
<b>REQUIREMENTS: DOCTOR’S DISCHARGE ORDERS</b>
<b>AVAILABILITY OF SERVICE: 24 HOURS FOR 7 DAYS PER WEEK</b>
<b>MAXIMUM DURATION PROCESS: 30 MINUTES TO 1 HOUR</b>

CLIENT STEP	AGENCY ACTIVITY	PERSON RESPONSIBLE	LOCATION OF OFFICE	DURATION OF ACTIVITY
1. VERIFY DOCTOR’S WRITTEN ORDER FOR DISCHARGE	<ul style="list-style-type: none"> <li>➤ DISCHARGE PROCESS</li> <li>➤ PROVIDE PRESCRIPTION/ TAGUBILIN FOR HOME MEDICATIONS</li> </ul>	NURSE ON DUTY	SURGICAL WARD	15 MINUTES
2. GET THE DISCHARGE NOTE	<ul style="list-style-type: none"> <li>➤ PROVIDE DISCHARGE SLIP</li> </ul>	NURSE ON DUTY	SURGICAL WARD	3 MINUTES
3. SEND OFF CHART TO BILLING SECTION		NURSE ON DUTY		10 MINUTES



4. REVIEW /GO OVER PTIENT'S BILLING STATEMENT	➤ ISSUANCE OF BILLING STATEMENT	BILLING PERSONNEL		5 – 10 MINUTES
5. SETTLE APPLICABLE PAYMENTS FOR NON-NBB PATIENTS IF NEED TO	➤ ISSUANCE OF OFFICAL RECEIPT IF ANY PAYMENT MADE	CASHIER PERSONNEL		10 – 15 MINUTES
6. PRESENT BILLING STATEMENT PROPERLY ASSESSED AND BILLED WITH O.R.	➤ CHECK O.R. DULY SIGNED AND PROVIDE DISCHARGE SLIP AND HOME MEDICATIONS ➤ TRANSPORT PER WHEELCHAIR	NURSE ON DUTY NURSING AIDE ORDERLY/ INSTITUTIONAL WORKER	FROM WARD OFF TO HOSPITAL PREMISES	5 MINUTES

Please let us know how we served you by doing any of the following:

1. Accomplish our feedback forms (complaints, suggestion/recommendation) available in the PACD (Public Assistance & Complaints Desk).
2. Send your feedback through email: ([basgen7300@yahoo.com](mailto:basgen7300@yahoo.com)) or contact us (092778254336).
3. Talk to our Help Desk Officer (imee Molve) at BGH Administrative Office.

If you are not satisfied with our services, written verbal complaints shall immediately be attended by the Help Desk Officer or at the Public Assistance Complaints Desk.

Thank you or helping us continuously improves our services.





## Medical/Isolation Ward

### Transfer in-Patient to Medical/Isolation Ward

- This procedure covers activities of patients from ER/other ward to Medical/Isolation Ward

<b>Office/Division</b>		<b>Nursing Service- Medical/Isolation Ward</b>		
<b>Classification:</b>		<b>Simple</b>		
<b>Type of transaction:</b>		<b>Government to Citizen</b>		
<b>Who may avail:</b>		<b>All in-patient</b>		
<b>Checklist of requirements</b>		<b>Where to secure</b>		
3. Trans-in orders		Attending Physician		
4. Complete pertinent documents		Nurse on duty		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
7. Request of transfer	7. Oder to transfer to Medical/Isolation ward	None	10mins.	Nurse on duty
6.3 Receive notice for transfer to Medical/Isolation ward	7.1 Inform patient about transfer	None	5mins.	Nurse on duty
6.4 Prepare patient for transfer	1.2 Facilitate transfer	None	10mins.	Nurse on duty
8. Transfer patient	2.Receive the patient and transfer to bed assignment	None	10mins.	Nurse on duty/ Nursing Attendant
2.1 Endorse patient's brief history, initial care and special care	2.1 Perform primary assessment such and take initial vital signs	None	20mins.	Nurse on duty
9. Listen to specific rules and regulation of the assigned ward	3.Orient patient and significant others about rule and policies about Medical/Isolation ward, especially safety precautions	None	20mins.	Nurse on duty
<b>Total</b>		<b>None</b>	<b>1hr and 15 mins.</b>	



## Medical/Isolation Ward

### Discharge in-patient

- This procedure covers activities of in-patients discharge from service ward

<b>Office/Division</b>		<b>Nursing Service- Medical/Isolation Ward</b>		
<b>Classification:</b>		<b>Simple</b>		
<b>Type of transaction:</b>		<b>Government to Citizen</b>		
<b>Who may avail:</b>		<b>All in-patient</b>		
<b>Checklist of requirements</b>		<b>Where to secure</b>		
2. Discharge orders		Attending Physician		
2 Complete pertinent documents		Nurse on duty		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
8. Notice Discharge Order	1. Verify Oder of Discharge from care	None	10mins.	Nurse on duty
8.1 Explained notice of discharge	1.1 Inform patient discharge	None	5mins.	Physician
8.2 Prepare pertinent documents	1.2 Facilitate discharge	None	10mins.	Nurse on duty
9. Discharge patient	2. Verify Patients financial capacity	None	10mins.	Nurse on duty
a. PHIC Patient	e. Sent Chart to Billing Department	None	10mins	Nurse on duty/Nursing Attendant
b. Non-PHIC Patient	f. Refer patient to Medical Social Service Department	None	10mins.	Nurse on Duty
2.1 Patient's significant others (SO) proceed to billing section	2.1 Give proper instruction to (SO)	None	10mins	Nurse on Duty
3. Discharge patient	3. Sign discharge slip, properly instruct patient's home medication and terminate IV access (if present)	None	10mins.	Nurse on duty and Nursing Attendant
	<b>Total</b>	<b>None</b>	<b>1hr and 15 mins.</b>	



## AVAILMENT OF RT-PCR PER REQUEST

The Hospital Epidemiology and Surveillance Unit provides COVID-19 testing by PCR method to outpatients for personal request especially for travel.

<b>Office or Division:</b>	Hospital Epidemiology and Surveillance Unit; Nursing Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	General Public			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Laboratory Request Form		HESU Office		
2. Case Investigation Form, Linelist		HESU Office		
3. Central Supply Request Form		CSR Office		
4. Charge Slip		Laboratory		
5. Logbook		HESU Office, Laboratory		
6. Official Receipt		Cashier Staff		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call BGH Swab Hotline for appointment/inquiries	1.1 Interview client and fill up Case Investigation Form and Linelist	None	10 minutes	<i>Joanne Caberte, RN,MN</i>  <i>Aileen Panay, RN</i>
	2. Proceed to Triage area	2.1 Present completely filled up CSR Request form for needed Personal Protective Equipment & supplies	None	15 minutes
	2.2 Present laboratory request form to laboratory personnel	None	3 minutes	<i>Joanne Caberte, RN,MN</i>  <i>Aileen Panay, RN</i>
	2.3 Dispense requested RT-PCR kit	None	1 minutes	<i>Merissa Buenviaje, RMT</i>
	2.4 Verify patient is in the appointment list	None	2 minutes	<i>Raymond Tan, RN,MN</i>
	2.5 Check vital signs and screen for any signs and symptoms	None	1 minute	<i>Raymond Tan, RN,MN</i>
	2.6 Notify HESU staff/trained swabber	None	1 minute	



	that the client on scheduled appointment has arrived 2.7 Direct the client and his/her companion to the swabbing booth	None	2 minutes	<i>Raymond Tan, RN, MN</i>  <i>Raymond Tan, RN, MN</i>
3. Proceed to the designated swabbing area and wait for your turn	2.1 Prepare the requested supplies	None	2 minutes	<i>Joanne Caberte, RN, MN</i>  <i>Aileen Panay, RN</i>
3. Present valid ID with photo *Senior Citizens & PWD patients may avail 20% discount by presenting their respective Senior Citizen & PWD ID	3.1 Verify client's identity	None	1 minute	<i>Joanne Caberte, RN, MN</i>  <i>Aileen Panay, RN</i>
4. Give payment	4.1 Present payment and charge slip to cashier  4.2 Issue official receipt	5,000.00	5 minutes  5 minutes	<i>Joanne Caberte, RN, MN</i>  <i>Aileen Panay, RN</i>  <i>Raevin Siason</i>
5. Subject patient to a nasopharyngeal and/or oropharyngeal swab collection performed by a trained medical personnel	5. Perform the procedure	None	10 minutes	<i>Joanne Caberte, RN, MN</i>  <i>Aileen Panay, RN</i>
6. Present official receipt, valid ID and claim the result	6. Let them sign the logbook for the released RT-PCR result	None	5 minutes	<i>Joanne Caberte, RN, MN</i>
	<b>Total</b>	<b>None</b>	<b>64 minutes</b>	



## Admission of OB/Gyne to Duration of Stay

Everyday (24/7 Basis)

<b>Office or Division:</b>	OB / Gyne Department; Nursing Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Government			
<b>Who may avail:</b>	OB / Gyne Patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Logbook		OB/Gyne Ward		
		q		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Arrival of patients in OB ward accompanied by S.O, IW and ER Nurse	1. Endorsement of ER Nurse to OB ward Nurse, secure PHIC membership or requirements for NBB	None	10 minutes	<i>Ward Nurses, OB ward Nurse</i>
2. Ushered patient in Labor room	2. Provide bed assignment.	None	10 minutes	<i>OB ward Nurses</i>
	2.1. Do assessment on patient's status.	None	5 minutes	<i>OB ward Nurses</i>
	2.2. Vital signs taking, IE if needed.	None	5 minutes	<i>OB ward Nurses Midwives</i>
	2.3. Secure lab request	None	5 minutes	<i>OB ward Nurses</i>
	2.4. Medicines and Supplies request	None	5 minutes	<i>OB ward Nurses</i>
	2.5 Evaluate patient's capability for normal delivery or referral	None	5 minutes	<i>OB ward Nurses</i>
3. Transfer patient to Delivery Room with 7cm-10cm dilatation	3. Assist patients transfer to DR.	None	Depending on patient's delivery progress	<i>OB ward Nurses</i>
	3.1. Do proper charting.	None		<i>OB and DR Nurses</i>
4. Transfer Patient to OB ward	4. Room-in newborn with stable conditions together with mother	None	10 minutes	<i>OB ward Nurses</i>
5. Patient Hospital Stay	5. Monitor patient's and baby's condition.	None	5 minutes	<i>OB ward Nurses</i>



	5.1. Carry out Doctor's order.	None	5 minutes	<i>OB ward Nurses</i>
	5.2. Do perineal care.	None	5 minutes	<i>Nursing Attendant</i> <i>o</i>
	5.3. Do baby bath.	None	10 minutes	<i>Nursing Attendant</i>
	5.4. Do Family Planning Counselling.	None	15 minutes	<i>Family Planning Councilor</i>
	<b>Total</b>	<b>None</b>	<b>1 hour &amp; 35 minutes</b>	

**Attachment: updated price list**



## Discharge of OB/ Gyne

Everyday (24/7 Basis)

Except Offices 8:00am-5:00pm, Monday To Friday, No Office on Holidays

<b>Office or Division:</b>	OB / Gyne Department; Nursing Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Government			
<b>Who may avail:</b>	OB / Gyne Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Logbook		OB/Gyne Ward		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient for disposition either referral or MGH.	1.Complete patient's chart.	None	5 minutes	<i>OB ward Nurses</i>
	1.2. For referral patients: Communicate hospital, inform transport nurse where patient to be transferred.	None	5 minutes	<i>OB ward Nurses</i>
2. Forward Patient's chart to CF4.	2. Sign at CF4's logbook for endorsed charts.	None	10 minutes	<i>OB ward Nurses</i>
3. S.O to settle accounts at Billing's Office	3. Instruct S.O to visit Billing Office	None	10 minutes	<i>OB ward Nurses</i>
4.S.O to present the statement of account to ward nurse.	4. Secure returned pertinent documents / charts of patient.	None	5 minutes	<i>OB ward Nurses</i>
5. For Discharge	5. Explain Tagubilin, issue discharge slip	None	5 minutes	<i>OB ward Nurses</i>
	<b>Total</b>	<b>None</b>	<b>40 minutes</b>	

**Attachment: updated price list**



**(NURSING SERVICES)**

**EXTERNAL**





## Dispensing of Medical Supplies

The Central Supply Room Services shall provide the requested hospital medical supplies utilizing standardized recording, reporting and monitoring of hospital stocks.

Dispensing of Medical Supplies for patients (admitted and outpatient)

<b>Office or Division:</b>	Central Supply Room; Nursing Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Government			
<b>Who may avail:</b>	Doctors, Nurses, Nursing Attendant/Administrative Aide, Hospital Staff and Outpatients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Prescription for Medical Supplies		Prescribing Doctor or Nurse/ OPD		
2. Logbook		CSR Office		
3. Official Receipt/ Medical Assistance		Cashier Staff, Malasakit Center, Medical Assistance Program		
4. Central Supply Room Request Form		CSR Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit issue slip/ prescription attached to CSR Request Form	1. Receive and check the availability of requested supplies from IHOMIS	None	25 minutes	<i>Ward Nurses, Nursing Attendant, Outpatients/ significant others</i>
	1.2. Check the Availability of supplies *if supplies are available, 1.2.1 prepare and issue charge slip for OPD * for OPD- refer to MSSD for medical assistance of requested supplies either discount or for free per MSSD assessment *if for discount, refer to cashier to settle fees and must secure official receipt to secure requested medical supplies	None		<i>CSR Staff- Nursing attendant</i>
	1.2.2 Encode charges to patient's hospital bill once admitted *if supplies are not available, advise for other available alternative. If not, advise to buy outside.	List of fees ( see table below)		<i>CSR Staff- Nursing attendant</i>
				<i>Cashier Staff/ MSSD</i>



2. Wait for the supply	2. Prepare the available requested supplies	None	20 minutes	CSR Staff-Nursing Attendant
	2.1. Notify requesting department or ward to pick up prescribed medical supplies	None		CSR Staff-Nursing Attendant
	2.2. for OPD patients-check for official receipts and/or check if for free if indicated as per assessment made by the MSSD	None		CSR Staff-Nursing Attendant
3. Get supplies	3. Dispense requested supplies to ward's nursing attendant or ward personnel and/ or outpatients/ significant others	None	10 minutes	CSR Staff-Nursing Attendant
3.1. Sign logbook	3.1. Let them sign the logbook for the released medical supplies	None		CSR Staff-Nursing Attendant
	<b>Total</b>	<b>None</b>	<b>55 minutes</b>	

**Attachment: updated price list**

CENTRAL SUPPLY ROOM  
(2021)

SUPPLIES	PRICE
1. IV cannula <b>G18</b>	<b>130.00</b>
2. IV cannula <b>G20</b>	<b>130.00</b>
3. IV cannula <b>G22</b>	<b>130.00</b>
4. IV cannula <b>G24</b>	<b>130.00</b>
5. IV cannula <b>G26</b>	<b>130.00</b>
6. MACROSET	<b>80.00</b>
7. MICROSET	<b>80.00</b>
8. SOLUSET ( VOLUMETRIC CHAMBER)	<b>300.00</b>
9. BLOOD SET	<b>100.00</b>
10. SYRINGE <b>1cc</b>	<b>20.00</b>
11. SYRINGE <b>3cc</b>	<b>20.00</b>
12. SYRINGE <b>5cc</b>	<b>20.00</b>
13. SYRINGE <b>10cc</b>	<b>20.00</b>
14. SYRINGE <b>50cc</b>	<b>50.00</b>
15. SYRINGE <b>Insulin</b>	<b>20.00</b>
16. GLOVES <b>6.5</b>	<b>50.00</b>
17. GLOVES <b>7.0</b>	<b>50.00</b>
18. GLOVES <b>7.5</b>	<b>50.00</b>
19. ELBOW GLOVES <b>7.5</b>	<b>120.00</b>
20. ELBOW GLOVES <b>8.0</b>	<b>120.00</b>



21. GAUZE 4 X 4	20.00
22. CORD CLAMP	30.00
23. NEBULIZATION KIT	100.00
24. OXYGEN FACE MASK <b>ADULT</b>	100.00
25. OXYGEN FACE MACK <b>PEDIA</b>	100.00
26. OXYGEN NASAL CANNULA <b>ADULT</b>	100.00
27. OXYGEN NASAL CANNULA <b>PEDIA</b>	100.00
28. OXYGEN NASAL CANNULA <b>INFANT</b>	100.00
29. URINE BAG	100.00
30. PEDIA URINE COLLECTOR	50.00
31. IDENTIFICATION TAG <b>INFANT</b>	30.00
32. IDENTIFICATION TAG <b>PEDIA</b>	30.00
33. IDENTIFICATION TAG <b>ADULT</b>	30.00
34. FOLEY CATHETER <b>F 12</b>	100.00
35. FOLEY CATHETER <b>F 14</b>	100.00
36. FOLEY CATHETER <b>F 16</b>	100.00
37. SUCTION TIP <b>F 5</b>	60.00
38. SUCTION TIP <b>F 8</b>	60.00
39. SUCTION TIP <b>F 16</b>	60.00
40. DUODENAL TUBE (NGT) <b>F 5</b>	50.00
41. DUODENAL TUBE (NGT) <b>F 8</b>	50.00
42. DUODENAL TUBE (NGT) <b>F 10</b>	50.00
43. DUODENAL TUBE ( NGT) <b>F 14</b>	50.00
44. DUODENAL TUBE (NGT ) <b>F 16</b>	50.00
45. ENDOTRACHEAL TUBE <b>F 2</b>	150.00
46. ENDOTRACHEAL TUBE <b>F 3</b>	150.00
47. ENDOTRACHEAL TUBE <b>F 7</b>	150.00
48. ENDOTRACHEAL TUBE <b>F 8</b>	150.00
49. SPECIMEN BOTTLE <b>U/A</b>	20.00
50. SPECIMEN BOTTLE <b>S/E</b>	20.00
51. SPLINT ( <b>PEDIA</b> )	100.00
52. SPLINT ( <b>NEONATE</b> )	100.00
53. SPLINT ( <b>ADULT</b> )	100.00
54. TONGUE DEPRESSOR	30.00
55. UNDERPAD ( DELIVERY ROOM)	100.00
56. UNDERPAD ( OPERATING ROOM)	120.00
57. ABDOMINAL TUBE	350.00
58. ABDOMINAL PACK	180.00
59. SPINAL NEEDLE no. 25	150.00
60. SURGICAL BLADE no. 20	30.00
61. PENROSE DRAIN	120.00
62. PROLENE MESH	2,500.00
63. CHROMIC 1-0 ROUND NEEDLE	150.00
64. CHROMIC 1-0 CUTTING NEEDLE	150.00
65. CHROMIC 2-0 ROUND NEEDLE	150.00
66. CHROMIC 2-0 CUTTING NEEDLE	150.00
67. CHROMIC 3-0 ROUND NEEDLE	150.00
68. CHROMIC 3-0 CUTTING NEEDLE	150.00
69. PLAIN 2-0 ROUND NEEDLE	150.00
70. POLYGLACTIN 0 ROUND NEEDLE	350.00
71. POLYGLACTIN 3-0 CUTTING NEEDLE	350.00
72. SILK 0 WITHOUT NEEDLE	150.00
73. SILK 0 ROUND NEEDLE	150.00
74. SILK 0 CUTTING NEEDLE	150.00
75. SILK 2-0 WITHOUT NEEDLE	150.00



76. SILK 2-0 ROUND NEEDLE	<b>150.00</b>
77. SILK 2-0 CUTTING NEEDLE	<b>150.00</b>
78. SILK 3-0 WITHOUT NEEDLE	<b>150.00</b>
79. SILK 3-0 ROUND NEEDLE	<b>150.00</b>
80. SILK 3-0 CUTTING NEEDLE	<b>150.00</b>
81. SILK 4-0 CUTTING NEEDLE	<b>150.00</b>
82. SUTURING FEE	<b>500.00</b>
83. COVERALL SUIT	<b>1196.00</b>
84. WASHABLE COVERALL SUIT	<b>1440.00</b>
85. DISPOSABLE GOWN	<b>350.00</b>
86. KN95	<b>100.00</b>
87. BOUFFANT CAP	<b>5.00</b>
88. SHOE COVERS (PAIRS)	<b>26.00</b>
89. FACESHIELD	<b>80.00</b>
90. HEPARIN LOCK	<b>20.00</b>
91. OTHERS: ( additional charges) - COTTON - BETADINE - PLASTER - ALCOHOL - CHART	<b>500.00</b>

**These supplies are all available in the Central Supply Room. Notice will be given once with no available stocks. Prices may vary from time to time and updates shall be applied immediately once with changes.**



## Emergency Department Ambulatory and Emergency Services

Triaging and Consultation of patients in the Emergency Room from receiving up to disposition of Emergency Severity Index Category patients. The service is in a 24 Hours operation, including weekend and holidays.

<b>Division:</b>	Emergency Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	All patient seeking Emergency Care Service			
<b>Checklist of Requirements</b>	<b>Where to secure</b>			
<b>1. All triaged patient (emergent, urgent, non-urgent)</b>	<b>ER FORM Referral Note from other institution (if any)</b>			
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Proceed to ER				Joveelyn Piamonte,R.N
2.1 Proceed to Triage Area	2.1 Asses and levelling of care (triaging)		5 minutes	Joveelyn Piamonte,R.N
2.2 Answer / Provide Patient's Data	2.1.1 Check Vital Signs		5 minutes	Joveelyn Piamonte,R.N (E. R Nurse Supervisor)
	2.2 Provide Data Form		10 minutes	Edward Nelson A. Jo (Admitting head)
3. Proceed to Emergency Room	Assist patient to clinical department		5minutes	Joveelyn Piamonte,R.N (ER Nurse Supervisor)
4. Consent for treatment	Assess patient and consultation	None	1 hour	John Chris Gabasa,MD (ER Medical Head)
4.1 Follow steps on final disposition of Physician	4.1 Give disposition:	None	1 hour	
	4.1.1 Discharge	None		
	4.1.2 Admission	None		
	4.1.3 Transfer to other hospital	None		
	4.1.4 DAMA	None		
4.1.5 Expired	None			



### Emergency Department Ambulatory and Emergency Services

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<b>Division:</b>	Emergency Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	All patient seeking Emergency Care Service			
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Proceed to ER		None		Joveelyn Piamonte
2.1 Proceed to Triage Area	2.1 Asses and levelling of care (triaging)		2-3 minutes	Joveelyn Piamonte/R.N Triage Nurse
2.2 Answer / Provide Patient's Data	2.1.1 Check Vital Signs		3-5 minutes	Joveelyn Piamonte, R. N Triage Nurse
	2.2 Provide Data Form		5-10 minutes	
				Edward Nelson A. Jo. (Admitting Clerk)
3. Proceed to Emergency Room	Assist patient to clinical department		3-5minutes	Joveelyn Piamonte IW/ Triage Nurse
4. Consent for treatment	Assess patient and consultation	None	1 hour	John Chris Gabasa,M. D Physician on Duty
4.1 Follow steps on final disposition of Physician	4.1 Give disposition:	None	1 hour	
	4.1.1 Discharge	None	1 hour	
	4.1.2 Admission	None		
	4.1.3 Transfer to other hospital	None		
	4.1.4 DAMA	None		
4.1.5 Expired	None			



## OUT-PATIENT DEPARTMENT CONSULTATION

The Out-Patient Department Consultation of Basilan General Hospital is available from Monday to Friday, 8:00 am to 4:00 pm and Saturday 8am to 1 pm except for holidays and Sundays. It caters only non-emergent medical/surgical/Ob-Gyne/pediatric health cases of patients.

New patients are patients without previous OPD visit thus no record available in the OPD.

Old patients are patients with previous OPD visit and with records available, they were also provided with OPD consultation cards from the initial visit.

<b>Office or Division:</b>	Out-Patient Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	All Patients/ Clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>Primary</b> 1. Priority Number 2. New Patient – receipt from cashier/ New OPD consultation card / Charge slip		OPD personnel, Cashier or Medical Social Service		
<b>New Patient/Old patient w/o Hospital Card:</b> 1. Priority number 2. Filled out Patient's Information Sheet/Slip 3. Diagnostic Results, if applicable 4. Referral Form, if applicable		Information Desk/Patient's Assistance & Complaints Desk (PACD)/Pre-Triage Area Different Diagnostic Units Referring physician		
<b>Old Patient:</b> 1. Priority number 2. OPD Consultation Card 3. Follow-up Appointment slip, if applicable 4. Diagnostic Results, if warranted 5. Discharge Instructions, if available		Out Patient Department  Doctor  Radiology, Laboratory & other diagnostic units Doctor, ER, Wards		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Get queue number	1. Issue queue number	None	5 minutes	Maritess Siva/ Raymond Tan
1.1. Submit self to Triage.	1.1. Call patient's number and assess if patient is an "Emergency" or "OPD" case.	None	10 minutes	Raymond Tan
<i>New Patient/Old patient w/o Hospital Card:</i> 2. Fill out Patient's Information Sheet/Slip.  <i>Old patient:</i> 2. Proceed to Step number 3.	2. Assist patient in filling out the sheet/slip.	None	10 minutes	<i>Raymond Tan</i> <i>/Maritess Silva</i>  Maritess Silva
3. Submit Patient's Information Sheet/Slip or Hospital card to	3. Register patient to the system	None	5 minutes	<i>Kenneth Barrientos</i>

IHOMIS personnel.	3.1. Check the vital signs and anthropometric measurement. Takes Patient's Chief Complaint.	None	10 minutes	Ramonsito B. Puntod, RN
3.1. Submit to vital signs and anthropometric measurement	3.1.1 <i>For Teleconsultation:</i> Takes Patients Information and Chief Complaints.	None	10 minutes	Ramonsito B. Puntod, RN
3.1.1. Patient /Patient's SO will call BGH OPD hotline.	3.2. Give charge slip/ OPD consultation card	None	5 minutes	Ramonsito B. Puntod, RN
3.2. Get charge slip/ OPD consultation card				Ramonsito B. Puntod, RN
<i>For paying patient:</i>				
4. Proceed to cashier and present charge slip to cashier for payment	4. Issue official receipt	Php 50.00 new Php 50.00 lost ID For Senior Citizen Php 30.00	15 minutes	<i>Raevin Siason</i>
<i>For non-paying patient:</i>				
4. Proceed to Social Service for assistance	4. Classifies patient and give assistance accordingly.	none	15 minutes	Ana Fe musa
5. Return to OPD and present Official Receipt/ Grant paper/	5. Document record of payment on the computer	None	5 minutes	<i>Ramonsito b. Puntod, RN</i>
6. Wait at consultation area	6. Call patient's name.	None	30 minutes	<i>Ramonsito B. Punto, RN</i>
6.1. Subject self for consultation/ treatment and submit to doctor's instruction.	6.1. Interview and examine patient.	None	20 minutes	<i>Abdugafar P. Salialam, MD</i>
	6.1.1. <i>For teleconsultation:</i> makes callback for interview and explains treatment plan.	None	20 minutes	<i>Abdugafar P. Salialam, MD</i>
	6.1.2. Prepares patient requirements for MAIP/ Get Medicine from pharmacy.			
	6.1.3. Dispense medication/prescription/Lab Request	None	20 minutes	<i>Ramonsito B. Punto, RN</i>



<p>6.2. Explain treatment plan to patient.</p> <p><i>If for treatment and or procedure:</i> Prepare needed equipment/materials for the procedure (eg. for injection of anti-rabies/Anti-tetanus and others, catheterization, wound dressing, minor OR and other procedure performed at OPD).</p> <p><i>If for referral:</i> Prepare referral form and instruct patient accordingly.</p> <p><i>If for admission:</i> Prepare referral form and endorsed patient to nurse for transport to ER.</p> <p><i>If for discharge:</i> Issue/ encode requests for diagnostics, if needed. Issue prescription, if needed. Provide home care or discharge instructions.</p>	None	5 minutes	Ramonsito B. Puntod, RN
	None	10 minutes	Abdugafar Salialam, MD
	Depending on the procedure or Materials needed	45 minutes	Abdugafar Salialam, MD/ Ramonsito B. Puntod, RN
	None	10 minutes	
	None	10 minutes	Abdugafar Salialam, MD
	None	20 minutes	Abdugafar Salialam, MD
	<b>TOTAL</b>	<b>3 hours</b>	
	<p>Php 50.00 new For Senior Citizens Php 30.00 Php 50.00 lost ID</p>		



**(ANCILLIARY)**

**EXTERNAL**



## TRIAGE UNIT TO TRANSFERRED PATIENT FROM OTHER HOSPITAL/RHU/FACILITY

The BGH TRIAGE UNIT OPERATES 24/7 TO ASSESS AND CATEGORIZE PATIENTS/CLIENTS ENTERING HOSPITAL PREMISES

OPERATION TIME: 24/7

<b>Office or Division:</b>	TRIAGE UNIT
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	Government to Citizen, Government to Government, Government to Business.
<b>Who may avail:</b>	ALL CLIENTS/PATIENT ENTERING THE HOSPITAL PREMISES

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. IDENTIFICATION CARD OR MEDICAL REQUEST / COORDINATION FROM POINT OF ORIGIN / REFERRAL FORM		1 FROM POINT OF ORIGIN (RHU/HOSPITAL/FACILITIES)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. COORDINATE TO BGH TRIAGE	1. ASSESS AND VALIDATE INFORMATION VIA PHONE CALL ASK REGARDING DATA, VITAL SIGNS, MEDICAL HISTORY AND REASON FOR TRANSFER.  1.1 REFER TO PHYSICIAN ON DUTY.	None	15 MINUTES	MHENT MAIDEL ALIH, RN  OR TRIAGE NURSE ON DUTY
2. ANSWER THE QUESTIONS BEING ASKED BY THE TRIAGE NURSE	2. GATHER DATA.  2.1 IF <b>YES</b> EXPLAIN THE HOSPITAL PROTOCOL FOR PATIENTS WITH SIGNS AND SYMPTOMS.  2.2 COORDINATE WITH NURSE ON DUTY/PHYSICIAN ON DUTY. REFER THE CASE AND GIVE THE PATIENT CLIENT TRIAGE CHECKLIST.  2.3 IF <b>NO</b> COORDINATE WITH RESPECTIVE	None	10 MINUTES	MHENT MAIDEL ALIH, RN OR TRIAGE NURSE ON DUTY.



	OFFICE OR DEPARTMENT AND GIVE TRIAGE CHECKLIST TO THE PATIENT/CLIENT  2.4 INSTRUCT THE PATIENT/CLIENT TO PROCEED TO THE RESPECTIVE DEPARTMENT OR OFFICE THAT THEY INTEND TO GO.  END OF TRANSACTION			
	TOTAL	NONE	TOTAL : 25 MINUTES	MHENT MAIDEL ALIH, RN OR TRIAGE NURSE ON DUTY.



From the assessment of patient's financial capability for proper classification and provision of appropriate assistance. The service is in a 12-hour operation from 8 am to 8 pm, including weekends and Holidays.

<b>Office/Division</b>		<b>Medical Social Social Service Section</b>		
<b>Classification:</b>		<b>Simple</b>		
<b>Type of transaction:</b>		<b>Government to Citizen</b>		
<b>Who may avail:</b>		<b>All BGH In - patients</b>		
<b>Checklist of requirements</b>		<b>Where to secure</b>		
1. Medical Abstract		1. POD/OPD Medical Social Worker		
2. Certificate of Indigency/Case summary		2. Barangay Hall/OPD Medical Social worker		
3. Drug Prescription with corresponding amount		3. Pharmacy		
4. Laboratory/Radiology/CSR/Med Records charge-slip		4. Laboratory/Radiology Department/CSR/ Medical Records office		
<b>Clients steps</b>	<b>Agency action</b>	<b>Fees to be paid</b>	<b>Processing time</b>	<b>Personnel Responsibility</b>
1. Patient shall answer the question that shall be asked by the MSS-staff, and present available documents that shall validate the data.	1. Assess and classify In-patient using MSS Assessment tool and advise the S.O. and or patient to present documents and or Valid I.D. that will validate the data	None	10 mins.	MSS staff
2. Take note of the advice and instructions from the MSS staff and secure the needed requirements then present as soon as possible.	2. Advise the S.O. and or patient to secure a Certificate of Indigency from the Barangay Hall or from the Local DSWD office as one of the requirement to avail Medical assistance. Also tell them to immediately secure other necessary documents to	None	2 min.	MSS staff
3. Be informed about their present PhilHealth status.	3. Check the PhilHealth status of In-patient in the PhilHealth Portal and POS system to distinguish the patients who are eligible to avail PhilHealth from not.	None	3 mins.	MSS staff
4. Proceed to the Billing section and get instruction for the PhilHealth requirements.	4. All active PhilHealth patients, including senior citizens shall be referred to the Billing and claims section, for the instruction for the PhilHealth requirements	None	2 mins.	MSS staff
5. Accomplish and sign a PMRF.	5. Enroll qualified In-patient to ORE-POS system once PMRF has been accomplished.	None	5 mins.	MSS staff



6. The S.O. or patient shall sign in the corresponding Registry assisted thru available Malasakit funds and be informed on the details of assistance they have availed from BGH.	6. The MSS staff shall accept MGH patients or S.O. referred by the billing staff, along with the Statement of account. Assist thru available Malasakit funds and let them sign in the logbook or Registry, while informing the details of assistance	None	20 Mins.	MSS staff
7. Proceed to the Billing section.	7. Advise the S.O. to proceed to the Billing section for the next discharge process.	None	1 Min.	MSS staff
8. End of client step	8. MSS staff shall check and complete all details in the Registry or logbooks and complete all the requirements	None	2 Min.	MSS staff
	<b>Total</b>	<b>None</b>	<b>45 minutes</b>	



**LABORATORY DEPARTMENT**

**SERVICE OFFERED: LABORATORY DIAGNOSTIC PROCEDURE**

**1. LABORATORY SERVICES FOR OUT PATIENTS**

- **Secondary Hospital-based Laboratory**
- **Availability of Services (Monday to Friday): 8AM to 5PM**

**ROUTINE TESTS INCLUDES:**

- Complete Blood Count
- Urinalysis
- Fecalysis/ Stool Exam
- HbsAg

**Routine Blood Chemistry**

- **FBS/RBS**
- **Na, K**
- **BUN**
- **Creatinine**
- **Lipid Profile**
- **BUA**
- **SGPT**
- **SGOT**

**SPECIAL TESTS INCLUDE:**

- Immunology and Serology
- Sperm Analysis
- Drug Testing
- PBS (Peripheral Blood Smear) Evaluations
- HIV Testing

<b>Office or Division:</b>	Laboratory Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen; G2B – Government to Business; G2G – Government to Govt			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
COMPLETELY FILLED UP LABORATORY REQUEST		Attending Physician / Requesting Agency / OPD		
HOSPITAL I.D.		Admitting Section (if applicable)		
OFFICIAL RECEIPT / MSS CLEARANCE / CLAIM SLIP		Cashier/MSS/Laboratory Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Get priority number	1. Provide priority number	None	5 minutes	<i>Laboratory Staff</i>
2 Presents the Laboratory request	2.1 <b>Receiving and checking of</b>	Refer to fees for the	10 minutes	<i>Laboratory Staff</i>



<p>form from the doctor / ER/OPD</p>	<p><b>Laboratory request for the availability of tests</b></p> <p>*if tests are offered, proceed to <b>step 2.2</b></p> <p>*if other tests are not offered refer to <i>Referral System Guideline of the Laboratory</i></p> <p><b>2.2 Instruct the client for necessary procedure to be done prior to extraction</b></p> <p><b>2.3 Client data entry, the issuing of charge slips or its equivalent to clients</b></p> <p>*if client is unable to pay, advise the client to proceed to MSS (Medical Social Service)</p>	<p>specific procedure</p>		
<p>3 Presents classified-MSS or official receipt together with the laboratory request to the laboratory staff</p>	<p>3.1 Check classified-MSS or official receipt and receive the laboratory request and/or give claim slip for the claiming of results</p> <p>3.2 Verify the client, then proceed to extraction and/or collection of sample</p> <p>3.3 Processing and analysis of specimen according to the procedure requested</p> <p>3.4 Validation of results</p> <p>3.5 Printing of official results</p>	<p>None</p>	<p><b>For Consultation:</b></p> <p><b>Routine:</b> within 6 hours upon receiving of samples</p> <p><b>STAT: 2 hours</b></p> <p><b>Routine Blood Chemistry: 6</b> hours upon receiving of samples</p> <p><b>Special Tests:</b> within 3 DAYS</p> <p><b>For Renewal of License and Pre – Employment:</b> 2 days</p>	<p><i>Medical Technologist/Laboratory Staff</i></p>





	3.6 Recording of all results in its specific logbooks			
4 Presents Client's Claim Slip and sign Releasing Logbook upon claiming of the Laboratory Results	4 Releasing of laboratory results VIA *IHOMIS/HARD COPY/LIS	None	5 minutes	Laboratory Staff
		<b>TOTAL</b> (depends on the underlying conditions)	<b>FOR CONSULTATION:</b>  <b>Routine:</b> within 6 hours and 20 minutes  <b>STAT (Routine Tests)</b> 2 hours  <b>STAT (Special Test):</b> as soon as the test is available.  <b>Routine Blood Chemistry</b> Within 6 hours and 20 minutes  <b>FOR RENEWAL AND PRE-EMPLOYMENT:</b> <b>within 3 days</b>	
<b>END OF TRANSACTION</b>				



## 2. LABORATORY SERVICES FOR IN PATIENTS

- **Secondary Hospital – Based Laboratory**
- **STAT (Short Turn Around Time)**
  - Emergency Cases

### ROUTINE TESTS INCLUDES:

- Complete Blood Count
- Urinalysis
- Fecalalysis/ Stool Exam
- HbsAg

### Routine Blood Chemistry Includes:

- **FBS/RBS**
- **Na, K**
- **BUN**
- **Creatinine**
- **Lipid Profile**
- **BUA**
- **SGPT**
- **SGOT**

### SPECIAL TESTS INCLUDES:

- Immunology and Serology
- Sperm Analysis
- Drug Testing
- PBS (Peripheral Blood Smear) Evaluations
- HIV Testing

<b>Office or Division:</b>		Laboratory Section		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C – Government to Citizen		
<b>Who may avail:</b>		All IN Patients		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Completely Filled up Laboratory Request		WARD/ Requesting Physician		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1 Presenting of a Laboratory request from the doctor/ ER/ WARD by the Healthcare Workers	1.1 Receiving and checking of Laboratory request for the availability of tests  *if tests are offered, proceed to <b>step 1.2</b>  *if other tests are not offered refer to <i>Referral</i>	Refer to fees for the specific procedure	10 minutes	<i>Medical Technologist/Nurse/Doctor</i>



	<p><i>System Guideline of the Laboratory</i></p> <p>1.2 Instruct the client for necessary procedure to be done prior to extraction and/or sample collection</p> <p>1.3 Encoding of client's data and laboratory charges</p>			
2 Provision of personal information required for verification	<p>2.1 Receive and verification of client and blood collection</p> <p>2.2 Processing of specimen depending on the test procedure required</p> <p>2.3 Analysis of specimen</p> <p>2.4 Validation of results</p> <p>2.5 Printing of results</p> <p>2.6 Recording of results to its specific logbooks</p> <p>2.7 Releasing of official results via *IHOMIS/HARD COPY/LIS</p>	None	<p><b>Routine:</b> within 5 hours upon receiving the samples</p> <p><b>Routine Blood Chemistry</b> Within 5 hours upon receiving the samples</p> <p><b>Special Tests:</b> Within 3 DAYS</p> <p><b>STAT (Routine Tests and Blood Chemistry):</b> Within 2 hours upon receiving the samples</p> <p><b>STAT (Special Test):</b> as soon as the test is available</p>	Medical Technologist / Phlebotomist/Chief Medical Technologist/Pathologist/Nurse Services
		<b>TOTAL</b> (depends on the underlying conditions)	Routine tests and Blood Chemistry:	



			<b>5 hours and 10 minutes</b>  STAT (Routine Tests): <b>within 2 hours</b>  Special Tests: <b>within 3 days</b>	
END OF TRANSACTION				



### 3. HOSPITAL LABORATORY BLOOD STATION

This service offers blood storage and crossmatching of type specific blood units.

<b>Office or Division:</b>	Laboratory Section/ Blood Station
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C – Government to Citizen; G2B – Government to Business; G2G – Government to Government
<b>Who may avail:</b>	All Patients that needs blood units

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Completely Filled up Blood request form and crossmatching request	Nurse's station / Requesting Physician

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1 Presents blood request form and crossmatching request from the doctor/ ER/ WARD by the Healthcare Worker(s)	<p>1.1 Check the availability of blood unit requested</p> <p>*if available: proceed to step 2.2</p> <p>*if not available: call other Blood Bank Facilities where the laboratory has existing MOA - <i>Referral System Guideline of the Laboratory</i></p> <p>*if not available, instruct watchers to look for a possible blood donor and proceed to nearest BCU/Blood bank Facility</p> <p>1.2 If unit is available; prepare for pick up</p> <p>1.3 Receiving of blood units.</p> <p>1.4 Check the blood request and the blood unit for verification</p>	Refer to fees for the specific procedure	4 hours upon receiving of blood units and patient's blood samples	<i>Phlebotomist/Medical Technologist/Nurse/Liaison officer</i>



	<p>1.5 Encoding of client's data and laboratory charges</p> <p>1.6 Collection of the patients' blood sample for crossmatching</p> <p>1.7 Perform crossmatching</p> <p>*If Compatible, validate and proceed to step 1.8</p> <p>*If Incompatible, repeat procedure 1.1 to 1.7</p> <p>1.8 Releasing of crossmatching result VIA</p> <p>*IHOMIS/HARD COPY/LIS</p>			
		<p><b>TOTAL</b></p> <p>(depending on the underlying conditions)</p>	<p><b>4 hours</b></p>	
<p>END OF TRANSACTION</p>				



#### 4 Special Laboratory Test (HIV and Drug Testing)

**Description:** This service conducts tests that requires confirmatory test by a certain confirmatory laboratory such as HIV and Drug Testing

<b>Office or Division:</b>	Laboratory Section			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C – Government to Citizen, G2G – Government to Government, G2B - Government to Business			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Completely filled up LABORATORY REQUEST		OPD/ Requesting Agency		
Any Identification Card (for minors: Consent form)		Government Agencies, Parents/Guardians		
OFFICIAL RECEIPT/ MSS CLEARANCE		Cashier/ MSS		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Get priority number	Provide priority number	None	5 minutes	Laboratory Staff Laboratory Section
2 Presents the laboratory request form	<p>2.1 Receiving and checking of the laboratory request and giving of consent forms</p> <p>2.2 Client data entry, the issuing of charge slips or its equivalent to clients</p> <p>*if client is unable to pay, advise the client to proceed to MSS (Medical Social Service)</p>	Refer to fees for specific procedure	10 minutes	Laboratory Staff Laboratory Section
3 Presents classified-MSS or official receipt together with the laboratory request to the laboratory staff	<p>3.1 Check classified-MSS or official receipt and receive the laboratory request</p> <p>3.2 Issue consent forms</p> <p>*if HIV Testing, instruct client to be pre-counsel by an HIV Counselor</p> <p>*if Drug Testing, instruct client to proceed to Specific</p>	None	<p><b>HIV Testing</b></p> <p>*if negative: <b>24 hours</b></p> <p>*if positive: <b>20 days</b> (sample will be send out to confirmatory laboratory)</p> <p><b>Drug Testing Analysis</b></p> <p>*if negative: <b>24 hours</b></p>	<p>HIV Counselor</p> <p>HIV Proficient Medical Technologist</p> <p>Drug Test Analyst</p> <p>Confirmatory Laboratory</p>



	<p>Drug Testing Collection Area</p> <p>3.3 Processing and analyzing of specimens</p> <p>*if negative, validate and proceed to step 3.4</p> <p>*if positive, validate and refer to <i>Laboratory Referral Guidelines for Sending Samples for Confirmatory Testing</i></p> <p>3.4 Printing of the official results VIA *HARD COPY</p> <p>3.5 Logging of official results to its specific logbooks</p>		<p>*if positive: <b>20 days</b> (<i>sample will be send out to confirmatory laboratory</i>)</p>	
<p>4 In Claiming of Official Results</p> <p>*For HIV Testing, client must undergo post-counseling prior to claiming of results</p> <p>*For Drug Testing *if negative, client must present ID prior to claiming of the result, in case of unavailability of client, an authorization letter and valid ID of the claimant *if positive, results will be released to requesting agency</p>	<p>4 Checking and Validation of ID and other claiming documents presented prior to the releasing of results</p> <p>*for HIV, instruct client to undergo post-counseling before claiming official result</p>	<p>None</p>	<p>10 minutes</p>	<p><i>HIV counselor Medical Technologist</i></p>
		<p><b>TOTAL</b></p>	<p><b>HIV Testing: Negative Results:</b></p>	





			24 hours and 25 minutes <b>Positive Results:</b> 20 days and 25 minutes  <b>Drug Testing:</b>  <b>Negative Results</b> 24 hours and 25 minutes <b>Positive Results</b> 20 days and 25 minutes:	
END OF TRANSACTION				



**ISSUANCE OF REQUESTED SUPPLIES, MATERIALS AND EQUIPMENT**

Processing of issuance of requested supplies, materials and equipment

<b>Office or Division:</b>	Materials Management Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	End-users			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Approved RIS		End-users,		
Prepares Property Acknowledgment Receipt (PAR)		MMS Staff		
Inventory Custodian Slip (ICS)		MMS Staff		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit approved Requisition and Issuance Slip (RIS)	1. Receives approved Requisition and Issuance Slip (RIS) and check its availability at the warehouse	None	5 minutes	JAYSON I. DULAP
2. Wait for the requested supplies and materials and equipment	2. Prepares requested supplies/equipment	None	2 hours	CHRIS JOHN B. DIAZ
	FOR EQUIPMENTS: 2.1. Prepares Property Acknowledgment Receipt (PAR) for equipment and Inventory Custodian Slip (ICS) for semi expendable items	None	30 minutes	JAYSON I. DULAP
	2.2. Issues requested supplies/equipment	None	4 hours	CHRIS JOHN B. DIAZ
3. Receives and signs requested supplies/equipment	3. Signs the portion issued and let the end-users sign the received portion for;	None	5 minutes	CHRIS JOHN B. DIAZ End-users
	Requisition and Issuance Slip (RIS) Prepares Property Acknowledgment Receipt (PAR) and Inventory Custodian Slip (ICS)	None	5 minutes	LEONARDO P. NICANOR End-users
	<b>TOTAL</b>		<b>6 hours 40 minutes</b>	



### Dispensing of Drugs and Medicines to Out- Patients

The BGH Pharmacy shall provide safe, effective and good quality drugs in appropriate dosage forms to consulting patients. The service is in a 24-hour operation, including weekends and Holidays.

<b>Office or Division:</b>		Pharmacy Section		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen, Government to Government		
<b>Who may avail:</b>		All Out Patients, Employees		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Valid Prescription 2. BGH Consultation Card (if applicable) 3. Official Receipt 4. MSS Approval/ Acknowledgement		1. Prescribing Doctor 2. OPD 3. Cashier 4. Medical Social Worker		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Presents valid prescription and BGH Consultation card	1. Receives prescription from the patient 1.1 Validates prescription and checks for the availability. 1.2 Price the available drugs and medicines.	None	2 minutes	Pharmacist
	<ul style="list-style-type: none"> <li>If available: Proceed to step 2.</li> <li>If not available:             <ol style="list-style-type: none"> <li>Advise the patient to go back to the physician if there are possible substitution of the out of stock prescribed medicines.</li> <li>Advise the patient to buy outside the hospital if there are no possible substitution of</li> </ol> </li> </ul>			



	the prescribed medicines.			
2. Proceeds to MSS for assistance (for unable to pay clients)	2. MSS assess and interviews the client 2.1 stamps free for indigent and unable to pay patients/clients 2.2 Discounts may be given to patients	None	3 minutes	Medical Social Worker
3. Proceed to pay in the Cashier	3. Accepts payment and issues Official Receipt based on the prices in the prescription	None	3 minutes	Cashier
4. Presents prescription and/or official receipt to the Pharmacy	4. Records OR No. in the prescription 4.1 Prepares and fills the prescription 4.2 Indicate the dispensing time in the prescription 4.3 Label and pack the medicines in orderly manner	None	5 minutes	Pharmacist
5. Claim Drugs and Medicines	5. Educate patients on the proper way of taking the medicines	None	2 minutes	Pharmacist
	<b>TOTAL</b>	None	15 minutes	

Attachment: Updated Price List



## Dispensing of Drugs and Medicines to In- Patients

BGH Pharmacy shall provide adequate supply of safe, effective and good quality drugs in appropriate dosage forms to all admitted patients. The service is in a 24-hour operation, including weekends and Holidays.

<b>Office or Division:</b>		Pharmacy Section		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen		
<b>Who may avail:</b>		All in-patients		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Hospital ID/ Name Tag		1. Nurse		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present patient's ID/ Name Tag	1. Pharmacist on duty receives the ID/Name tag  1.1 Validates the medication order through the iHOMIS.	None	2 minutes	Naim M. Sulaiman, RPh
2. Wait for the Drugs and Medicines	2. Prints the charged slip.	None	2 minutes	Naim M. Sulaiman, RPh
3. Wait for the Drugs and Medicines	3. Fills medication orders through the charged slip.  3.1 Packs and label medicines in orderly manner of individual patients.  3.2 Indicates the dispensing time in the prescription.	None	5 minutes	Naim M. Sulaiman, RPh
4. Sign the logbook	4. Release of Drugs and Medicines to the Nurse, Nursing attendant or Significant other of the patient.  4.1 Let the claimant sign in the logbook for acknowledgement.	None	2 minutes	Naim M. Sulaiman, RPh
	<b>TOTAL</b>	None	10 minutes	

Attachment: Updated Price List



## X-ray In-Patient Services

The X-ray In-Patient services shall provide quality radiographic images and accurate results of the diagnostic services offered ensuring utmost safety of the patient all throughout the performance of the procedure.

This service provides routine diagnostic x-ray imaging for In-patients. Availability of service is 24hours, Monday to Sunday.

<b>Office or Division:</b>	Radiology Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	All In-Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. 1 original X-ray Request Form		Prescribing Doctor		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the x-ray request form	1. Receive patient's x-ray request form	None	1 minute	<i>Ivy Grace G. Carumba, RN, RRT</i>
	1.1. Check for completeness of data	None		<i>Ivy Grace G. Carumba, RN, RRT</i>
	1.2. Indicate the x-ray fee on the charge slip	X-ray Fees Summary (see table below)	2 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
2. Provide data	2. Encode the patient's data on the receiving logbook (in-patient) and on the system.	None	3 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
3. Wait until name is called for the requested x-ray procedure.  3.1. Submit self for x-ray procedure	3. Call patient for x-ray procedure.	None	3 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
	3.1. Perform the requested x-ray procedure	None	15 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>



3.2. Get schedule of x-ray result	3.2. Release unofficial result (x-ray images) to the different wards	None	1 hour	<i>Ivy Grace G. Carumba, RN, RRT</i>
	4.3. Process and interpret the x-ray result.	None	} 2 days	<i>Radiologist</i>
	4.4. Enter the result and its initial reading.	None		<i>Radiologist</i>
	4.5. Do final reading.	None		<i>Radiologist</i>
5. Releasing of x-ray results.	5. Release the x-ray result to the different wards/Philhealth.	None	15 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
5.1. Sign the logbook	5.1. Let the Nurse on duty sign the releasing logbook (in-patient).	None	2 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
	<b>Total</b>	<b>X-ray Fees Summary (see table below)</b>	<b>2 days, 1 hour and 41 minutes</b>	

**X-ray Fees Summary:**

CODE	EXAMINATION	AMOUNT
RAD-EXAM-001	CHEST PA	₱350.00
RAD-EXAM-002	CHEST APL	₱450.00
RAD-EXAM-003	LATERAL DECUBITUS	₱350.00
RAD-EXAM-004	SKULL AP	₱400.00
RAD-EXAM-005	SKULL APL	₱450.00
RAD-EXAM-006	CERVICAL SPINE APL	₱450.00
RAD-EXAM-007	THORACOLUMBAR APL	₱450.00
RAD-EXAM-008	LUMBOSACRAL APL	₱450.00
RAD-EXAM-009	ABDOMEN	₱400.00
<b>UPPER EXTRIMITIES</b>		
RAD-EXAM-010	SHOULDER AP	₱400.00
RAD-EXAM-011	HUMERUS APL	₱400.00
RAD-EXAM-012	FOREARM APL	₱400.00
RAD-EXAM-013	HAND APL	₱400.00
RAD-EXAM-014	WRIST APL	₱400.00
RAD-EXAM-015	ELBOW APL	₱400.00
<b>LOWER EXTRIMITIES</b>		
RAD-EXAM-016	PELVIC AP/HIP AP/LUMBAR	₱400.00
RAD-EXAM-017	THIGH/FEMUR APL	₱500.00
RAD-EXAM-018	KNEE APL	₱400.00
RAD-EXAM-019	LEG APL	₱400.00
RAD-EXAM-020	FOOT APL	₱400.00



## X-ray Out-Patient Services

The X-ray Out-Patient services shall provide quality radiographic images and accurate results of the diagnostic services offered ensuring utmost safety of the patient all throughout the performance of the procedure.

This service provides routine diagnostic x-ray imaging for outpatient department patients. Availability of service is 8:00 am to 5:00 pm, Monday to Friday, 8:00 am to 12:00 noon, Saturday, except Sundays and holidays.

<b>Office or Division:</b>	Radiology Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	All Out-Patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
2. 1 original X-ray Request Form		Prescribing Doctor – OPD		
3. Charge Slip		Radiology Section		
4. 1 original Official Receipt		Cashier Section		
5. MSS Approval/ Acknowledgment (if applicable)		Medical Social Worker		
<i>If by an Authorized Representative</i>				
1. 1 Valid ID photocopy of the patient		Barangay, Postal, Driver's License, School, PRC or any Government ID		
2. Authorization Letter from the patient		Patient		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
2. Present the x-ray request form  <i>If unable to pay, proceed to Medical Social Service for patient classification and financial assistance prior to payment.</i>	2. Receive patient's x-ray request form	None	} 1 minute	<i>Ivy Grace G. Carumba, RN, RRT</i>
	1.3. Check for completeness of data	None		
	1.4. Indicate the x-ray fee on the charge slip and give the necessary instructions for the payment.	X-ray Fees Summary (see table below)	2 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
2. Pay the indicated amount on the charge slip at the Cashier/ show MSS approval/ acknowledgment	2. Ask for the charge slip	None	10 minutes	<i>Cashier Staff</i>
2.1. Get the receipt	2.1. Receive the payment/ MSS Approval/ MSS Acknowledgment. Issue the official receipt.	None	5 minutes	<i>Cashier Staff</i>





3. After Cashier, go back to the Radiology Department and present the official receipt.	3. Ask for the official receipt.	None	1 minute	<i>Ivy Grace G. Carumba, RN, RRT</i>
3.1. Provide data	3.1. Encode the patient's data on the receiving logbook (out-patient) and on the system.	None	3 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
4. Wait until name is called for the requested x-ray procedure.	4. Call patient for x-ray procedure.	None	3 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
4.1. Submit self for x-ray procedure	4.1. Perform the requested x-ray procedure	None	15 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
4.2. Get schedule of x-ray result	4.2. Inform the patient when to return for the official result. Instruct to bring the official receipt upon claiming the result.	None	1 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
	4.3. Process and interpret the x-ray result.	None	} 2 days	<i>Ivy Grace G. Carumba, RN, RRT</i>
	4.4. Enter the result and its initial reading.	None		<i>Radiologist</i>
	4.5. Do final reading.	None		<i>Radiologist</i>
5. Claim the x-ray result present the official receipt.	5. Release the x-ray result to the patient.	None	2 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
5.1. Sign the logbook	5.1. Let the patient sign the releasing logbook (out-patient).	None	1 minutes	<i>Ivy Grace G. Carumba, RN, RRT</i>
	<b>Total</b>	<b>X-ray Fees Summary (see table below)</b>	<b>2 days, 44 minutes</b>	



**X-ray Fees Summary:**

<b>CODE</b>	<b>EXAMINATION</b>	<b>AMOUNT</b>
RAD-EXAM-001	CHEST PA	₱350.00
RAD-EXAM-002	CHEST APL	₱450.00
RAD-EXAM-003	LATERAL DECUBITUS	₱350.00
RAD-EXAM-004	SKULL AP	₱400.00
RAD-EXAM-005	SKULL APL	₱450.00
RAD-EXAM-006	CERVICAL SPINE APL	₱450.00
RAD-EXAM-007	THORACOLUMBAR APL	₱450.00
RAD-EXAM-008	LUMBOSACRAL APL	₱450.00
RAD-EXAM-009	ABDOMEN	₱400.00
<b>UPPER EXTRIMITIES</b>		
RAD-EXAM-010	SHOULDER AP	₱400.00
RAD-EXAM-011	HUMERUS APL	₱400.00
RAD-EXAM-012	FOREARM APL	₱400.00
RAD-EXAM-013	HAND APL	₱400.00
RAD-EXAM-014	WRIST APL	₱400.00
RAD-EXAM-015	ELBOW APL	₱400.00
<b>LOWER EXTRIMITIES</b>		
RAD-EXAM-016	PELVIC AP/HIP AP/LUMBAR	₱400.00
RAD-EXAM-017	THIGH/FEMUR APL	₱500.00
RAD-EXAM-018	KNEE APL	₱400.00
RAD-EXAM-019	LEG APL	₱400.00
RAD-EXAM-020	FOOT APL	₱400.00



## Processing of Payroll/Vouchers for Payments of Claims and Supplies

Accounting Section is responsible in safeguarding government resources against loss or wastage. To ensure that the implementation of accounting practices and as to disbursements of funds is in accordance with COA and DBM rules and regulations, all financial transactions shall be supported with complete supporting documents and shall be maintained and updated in conformity with the Government Accounting Manual. Schedule of processing is every Monday to Friday from 8:00 am to 5:00 pm.

<b>Office or Division:</b>	ACCOUNTING SECTION			
<b>Classification:</b>	SIMPLE			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	ALL SECTIONS			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Disbursement Voucher/Payroll with pertinent supporting documents in accordance with COA Circular 2012-01 (Revised Documentary Requirements for Common Government Transactions)		Section Heads		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Receipt of Payroll or Disbursement Voucher or Purchase Order (PO)	Records receipt of payroll/voucher/PO	NONE	1 minute	Person in Charge Receiving/Accounting Clerk
2. Review Payroll or Disbursement Voucher and Purchase Order (PO)	Evaluates the supporting documents as to completeness and correctness  Prepares journal entries, assign JEV NO and records data in Index of Payments	NONE	Within 3 days from receipt  (depending on the nature and bulk of transactions, and completeness of supporting documents submitted)	Accounting Clerk (for Travel Claims and remittances)  Accounting Head (for bulk transactions)  Administrative Assistant II
2.a Return of Payroll/Voucher/PO to client if:  - it lacks supporting documents  -if computation is erroneous	Returns payroll/voucher/PO to office concerned/client	NONE	10 mins	Person in Charge Releasing



3. Forwarding to Accounting Head Section for final review and signature	Reviews and signs the reviewed payroll/voucher/PO  Retrieves RANCA/RANTA from file and determines availability of NCA, if cash is not yet available returns DV to Designated Staff for safekeeping.	NONE	10 minutes	Accounting Head Section
4. Release the payroll/voucher/PO	Records the payroll/voucher/PO on the logbook  Release the voucher and documents to the office of the Head of Agency for approval of payments and signature of PO	NONE	5 minutes	Person in Charge Releasing
	TOTAL		3 days and 26 minutes	



**CITIZEN'S CHARTER**  
**DENTAL HEALTH SECTION**

<b>Office or Division:</b>	Dental Health Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All patients needed Dental Health Services			
<b>ECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Certificate of Indigence with affix signature of the Barangay Captain for indigent patients to be "FREE" of charge. 2. Official Receipt from the cashier's office. 3. Abstract form should be presented in the dental clinic.				
<b>CLIENT STEPS</b>	<b>Y ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Get a priority no. for all patients including senior citizen and patients with disability (PWD).	Priority no. is hang on the wall.  First come first serve basis except for the PWD and senior citizen which also has their priority number.	N/A	---	Dental Aide and patients
2. Register for client's data and vital signs 3. Get a Pay slip 4. Pay to cashier, for Phil health member go to Phil health office for assessment, for indigent patients proceed to MSSO. 5. Assist/Instruct patient to sit on the dental chair for Oral Health Condition record  6. Proceed to dental services.	Gather patient's data's like Name, Age, Sex, Address B/P, and complains  Dentists will validate the kind of services done with a corresponding fee  Cashiers Office /Medical	N/A N/A N/A   200.00 ( Exo) 500.00 (OP) 500.00 (TP) 500.00 (PF) N/A (Na F I)	15 Min 15 min ----  15 min   30 min/ tooth cavity 30 min/ tooth cavity	Dental Aide Dentists patient   Dentists   Dentists Dentists Dentists Dentists



<p>7..Take the home care medication form</p>	<p>Social Service Office/Phil health Office</p> <p>Dental Check Up. Recording of the patient's oral health condition in the Individual Patients Treatment Record (IPTR) form</p> <p>Dental Procedures:</p> <p>Extraction Oral Prophylaxis Temporary Filling Permanent Filling Na FI Topi. App Pits and Fissures Sealants</p> <p>Advice to fallow strictly the instruction of home care medication form.</p>	<p>N/A (Pits &amp; FS)</p> <p>N/A</p>	<p>30 min tooth cavity 30.min/ tooth cavity 45 min 45 min</p> <p>7 min</p>	<p>Dentists</p> <p>Dentists</p>
<p>8.Fot Dental Health Certificate Pay to cashiers office</p>	<p>Dental Check Up, and recording of IPTR. Prepare and Issue dental certificate</p>	<p>75.00</p>	<p>15 min</p>	<p>Dentists</p>
	<p>TOTAL</p>			



## Nutrition and Diet Counseling

Provides individualized nutritional care for encouraging the modification of eating habits to in-patient and out-patient for proper diet recommendation.

Availability of the Service is from Monday-Friday from 8:00 am – 5:00 pm.

<b>Office or Division:</b>	DIETARY SECTION			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	Admitted and Walk –In Patients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Diet List/Referral Form			Nurse Station	
Meal Plan			Nutritionist Dietitian	
<b>PATIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit the Nutrition Referral form/Diet List to Nutrition and Dietetics Service	a. Secure Diet List /Referral Form from the Nurse station	None	15 minutes	Nurse on Duty/Food Server
	b. List all therapeutic diets/referrals of the day	None	15 minutes	Nutritionist Dietitian on Duty
2. Diet Counseling to Patients	2.1 ND conducts nutrition counselling to patients and significant others /watchers according to its prescribed Diet (ward/Nutrition Clinic)	None	20 mins	Nutritionist Dietitian on Duty
Recording of Patient's Data	3.1 ND secure patients' conforme on the Diet Counselling Logsheets/Logbook .	None	10 mins	Nutritionist Dietitian on Duty
	<b>TOTAL</b>		1 hour	



**(ADMIN SERVICES)**

**INTERNAL**





## Processing of Payroll/Vouchers for Payments of Claims and Supplies

Accounting Section is responsible in safeguarding government resources against loss or wastage. To ensure that the implementation of accounting practices and as to disbursements of funds is in accordance with COA and DBM rules and regulations, all financial transactions shall be supported with complete supporting documents and shall be maintained and updated in conformity with the Government Accounting Manual. Schedule of processing is every Monday to Friday from 8:00 am to 5:00 pm.

<b>Office or Division:</b>	ACCOUNTING SECTION			
<b>Classification:</b>	SIMPLE			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	ALL SECTIONS			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Disbursement Voucher/Payroll with pertinent supporting documents in accordance with COA Circular 2012-01 (Revised Documentary Requirements for Common Government Transactions		Section Heads		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Receipt of Payroll or Disbursement Voucher or Purchase Order (PO)	Records receipt of payroll/voucher/PO	NONE	1 minute	Person in Charge Receiving/Accounting Clerk
2. Review Payroll or Disbursement Voucher and Purchase Order (PO)	Evaluates the supporting documents as to completeness and correctness  Prepares journal entries, assign JEV NO and records data in Index of Payments	NONE	Within 3 days from receipt  (depending on the nature and bulk of transactions, and completeness of supporting documents submitted)	Accounting Clerk (for Travel Claims and remittances)  Accounting Head (for bulk transactions)  Administrative Assistant II
2.a Return of Payroll/Voucher/PO to client if:  - it lacks supporting documents  -if computation is erroneous	Returns payroll/voucher/PO to office concerned/client	NONE	10 mins	Person in Charge Releasing



3. Forwarding to Accounting Head Section for final review and signature	Reviews and signs the reviewed payroll/voucher/PO  Retrieves RANCA/RANTA from file and determines availability of NCA, if cash is not yet available returns DV to Designated Staff for safekeeping.	NONE	10 minutes	Accounting Head Section
4. Release the payroll/voucher/PO	Records the payroll/voucher/PO on the logbook  Release the voucher and documents to the office of the Head of Agency for approval of payments and signature of PO	NONE	5 minutes	Person in Charge Releasing
	TOTAL		3 days and 26 minutes	



**RECEIVING OF PURCHASE ORDER (PO)**

**TO OBLIGATE THE AMOUNT INDICATED IN THE PURCHASE ORDER (PO) FROM MONDAY TO FRIDAY 8:00 AM TO 5:00 PM**

<b>Office or Division:</b>	<b>BUDGET OFFICE</b>			
<b>Classification:</b>	<b>SIMPLE</b>			
<b>Type of Transaction:</b>	<b>G2B</b>			
<b>Who may avail:</b>	<b>All End users</b>			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PURCHASE REQUEST (PR)		END USER		
APPROVED PPMP		PROCUREMENT SECTION		
ORS/BURS		PROCUREMENT SECTION		
DISBURSEMENT VOUCHER				
BAC RESOLUTION		BAC SECRETARIAT		
REQUEST FOR QUOTATION		CANVASSER		
QUOTATIONS		ACCREDITED SUPPLIERS		
ABSTRACT OF QUOTATION		PROCUREMENT SECTION		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
PRESENT PURCHASE ORDER (PO) WITH COMPLETE DOCUMENTS FROM PROCUREMENT SECTION	1.1 RECEIVES PURCHASE ORDER (PO) FROM PROCUREMENT SECTION 1.2 REVIEW THE SUPPORTING DOCUMENTS INDICATED IN THE CHECKLIST 1.3 RECORD REVIEWED PURCHASE ORDER (PO) IN THE LOGBOOK	NONE	30 MINUTE	DESIGNATED BUDGET STAFF
1. OBLIGATION	1.1 OBLIGATE THE AMOUNT INDICATED IN THE PURCHASE ORDER (PO) 1.2 FORWARD TO BUDGET OFFICER FOR SIGNATURE ON ORS/BURS FORM OR FUNDS AVAILABILITY 1.3 RECORD TO THE LOGBOOK 1.4 FORWARD TO ACCOUNTING SECTION WITH	NONE	30 MINUTES	BUDGET OFFICER & DESIGNATED BUDGET STAFF



	COMPLETE SUPPORTING DOCUMENTS			
REGISTRY's	POST THE AMOUNT OBLIGATED IN THE REGISTRY's  SUMMARIZE REGISTRY's	NONE	30 MINUTES	DESIGNATED BUDGET STAFF
	TOTAL		1 HOUR: 30 MINS	

**CERTIFICATION AVAILABILTY OF FUND (CAF)**

**THIS IS TO CERTIFY THE AVAILABILITY OF FUND FROM MONDAY TO FRIDAY 8:00 AM TO 5:00 PM**

<b>Office or Division:</b>	<b>BUDGET OFFICE</b>
<b>Classification:</b>	<b>SIMPLE</b>
<b>Type of Transaction:</b>	<b>G2G</b>
<b>Who may avail:</b>	<b>All End users</b>

<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
(PR) PURCHASE REQUEST CONTROL NUMBER		SUPPLY SECTION		
(PPMP) PROJECT PROCUREMENT MANAGEMENT PLAN		END USER		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
PRESENT PURCHASE REQUEST (PR) WITH PR NUMBER AND WITH ATTACHED PPMP TO BUDGET OFFICE	1 RECEIVES PURCHASE REQUEST (PR) FROM SUPPLY SECTION	NONE	1 MINUTE	DESIGNATED BUDGET STAFF
	2 VERIFIED FROM PPMP	NONE	3 MINUTES	DESIGNATED BUDGET STAFF
	3 FOR CERTIFICATION AVAILABILITY OF FUND (CAF)	NONE	10 MINUTES	DESIGNATED BUDGET STAFF/BUDGET OFFICER/ACCOUNTANT



	4 FORWARD TO MCC-1 FOR APPROVAL OF PURCHASE REQUEST	NONE	3 MINUTES	DESIGNATED BUDGET STAFF
	TOTAL		17 MINUTES	

**RECEIVING OF DISBURSEMENT VOUCHER (DV)**

TO OBLIGATE THE AMOUNT INDICATED IN THE DISBURSEMENT VOUCHER (DV) FROM MONDAY TO FRIDAY 8:00 AM TO 5:00 PM

<b>Office or Division:</b>	BUDGET OFFICE			
<b>Classification:</b>	SIMPLE			
<b>Type of Transaction:</b>	G2G			
<b>Who may avail:</b>	All End users			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
DISBURSEMENT VOUCHER		EMPLOYEE		
ITENIRARY OF TRAVEL		EMPLOYEE		
ORS/BURS		EMPLOYEE		
CERTIFICATION OF TRAVEL COMPLETED		EMPLOYEE		
TICKETS		EMPLOYEE		
NARRATIVE REPORT		EMPLOYEE		
CERTIFICATE OF APPEARANCE		EMPLOYEE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
PRESENT DISBURSEMENT VOUCHER (DV) WITH COMPLETE DOCUMENTS FROM EMPLOYEE WHO TRAVELLED	1.1 RECEIVES DISBURSEMENT VOUCHER (DV) FROM EMPLOYEE WHO TRAVELLED  1.2 REVIEW THE SUPPORTING DOCUMENTS	NONE	25 MINUTE	DESIGNATED BUDGET STAFF
1. OBLIGATION	1.1 OBLIGATE THE AMOUNT INDICATED IN THE PURCHASE ORDER (PO) 1.2 FORWARD TO BUDGET OFFICER FOR	NONE	25 MINUTES	BUDGET OFFICER & DESIGNATED BUDGET STAFF



	SIGNATURE ON ORS/BURS FORM OR FUNDS AVAILABILITY 1.3 RECORD TO THE LOGBOOK 1.4 FORWARD TO ACCOUNTING SECTION WITH COMPLETE SUPPORTING DOCUMENTS			
REGISTRY's	POST THE AMOUNT OBLIGATED IN THE REGISTRY's  SUMMARIZE REGISTRY's	NONE	10 MINUTES	DESIGNATED BUDGET STAFF
	TOTAL		1 HOUR	



## Issuance of Appointment

This service is provided to any qualified applicant who has been appointed or promoted to the vacant position offered by the agency based on the requirement set by the Civil Service Commission and other selection process as stipulated in the Merit Selection Plan.

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	Government to Government (G2G)			
<b>Who may avail:</b>	All Active Human Resources (Plantilla Positions)			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Personal Data Sheet (CSC Form 212) with most recent ID passport size picture to be attached and submitted (3 Original Copies)		Requesting party		
Original copy of Authenticated of the following, if applicable (1 Original Copy and 3 Photocopies) a. Civil Service Eligibility b. Valid Professional Regulation Commission (PRC) ID c. PRC Board Rating d. Any related eligibility granted in the government		Civil Service Commission/Professional Regulatory Commission		
Medical Certificate (CSC Form 211) signed and check-up by the designated Government Physician with complete results of the following: (3 Original Copies) a. Blood Test b. Urinalysis c. Chest X-Ray d. Neuro-Psychiatric Examination		Human Resource Management Section		
Certified True Copy of Diploma and Transcript of Records (TOR) (1 Original Copy and 3 Photocopies)		Requesting party's School/University		
Original latest NBI Clearance (1 Original Copy)		National Bureau Investigation		
Original and Certifies True Copy of Birth Certificate (PSA Form) (1 Original Copy & 3 Photocopies)		Philippine Statistics Authority		
Original and Certified true Copy of Marriage Contract if applicable (1 Original and 3 Photocopies)		Philippine Statistics Authority		
Statement of Assets, Liabilities, and Networth (4 Original Copies back-to-back)		Requesting party		
Tax Identification Number (TIN) (3 Photocopies)		Bureau of Internal Revenue		
Documentary Stamp (2 pcs.)		Requesting party		
Certificate of Successful Completion of Training on non-degree courses, formal in-service training programs, Fellowships, grants and other forms of formal training activities (1 Original & 1 Photocopy)		Requesting party		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Receive the notification on promotion/appointment and checklist of requirements 1.1.Submit all the complete requirements	1. Notify successful applicant who have been appointed/promoted to the position.	None	10 minutes	Administrative Officer II Human Resource Management Section – Rewards and Recognition Section



1.2. Receive the schedule date of issuance of appointment	1.1. Give/Notify the client on the Checklist of Requirements to the appointee.	None	5 minutes	(HRMS-RRS)
	1.2. Receive and check the correctness in filling out forms and completeness of the requirement.	None	30 minutes	Administrative Officer II HRMS-RRS
	1.3. Advise the schedule date of issuance of appointment	None	5 minutes	Administrative Officer II HRMS-RRS
	1.4. Prepare and print the Appointment and other necessary documents (Oath of Office, Certificate of Assumption, Resolution, Position Description Form (PDF)).	None	2 hours	Administrative Officer II HRMS-RRS
	1.5. Check the correctness and completeness of the Appointment and other necessary documents (Oath of Office, Certificate of Assumption, Resolution, and Position Description Form (PDF)).	None	1 hour	Administrative Officer II HRMS-RRS
	1.6. Facilitate signing of Appointments and other necessary documents (Oath of Office, Certificate of Assumption, Resolution, Position Description Form (PDF)) to concern signatories (HRMPSB, HMCC, Appointing Authority, Division Head & Section/Unit Heads).	None	7 days	Administrative Officer II HRMS-RRS
2. Return and sign the appointment.	2. Facilitate signing of the Appointment and other necessary documents (Oath of Office, Certificate of Assumption, Resolution, Position Description Form	None	1 hour	Administrative Officer II HRMS-RRS
		None	1 hour	Administrative Officer II





	<p>(PDF)) to concern appointee.</p> <p>2.1. Prepare and print of report on Appointment Issued (RAI)</p> <p>2.2. Check the Report on Appointment Issued (RAI).</p> <p>2.7 Sign the Report on Appointment Issued (RAI)</p> <p>2.8 Submission of Report on Appointment Issued (RAI) and other necessary attachments ( Appointment, Oath of Office, Certificate of Assumption, Resolution, Position Description Form (PDF)) to the CSC Field Office.</p>	<p>None</p> <p>None</p> <p>None</p>	<p>2 hours</p> <p>30 minutes</p> <p>2 hours</p>	<p>HRMS-RRS</p> <p>HRMS Head</p> <p>HRMS-RRS</p> <p>HRMS Head and Medical Center Chief</p> <p>Administrative Officer II</p> <p>HRMS-RRS</p>
	<b>TOTAL:</b>	<b>None</b>	<b>8 days, 2 hours &amp; 20 minutes</b>	



## Issuance of Breakdown of Terminal Leave

Breakdown of Terminal Leave is a computation of leave credits given to any official/employee of the government, who retires, voluntarily resigns, or is separated from the service.

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Citizen			
<b>Who may avail:</b>	All inactive employees			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Approved Resignation Letter by the head of the agency		Requesting party		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Fill-out the logbook/request form/slip for the request of breakdown of terminal leave	1. Entertain the client's request and advise to Log in the Logbook	None	2 minutes	Administrative Assistant II Human Resource Management Section- Performance Management Time (HRMS-PMT)
1.1 Receive the scheduled date of release of the approved loan application	1.1 Reconcile the leave card balances to HRMIS/ Excel	None	5 days	Administrative Assistant II HRMS-PMT
	1.2 Print the employee's breakdown of terminal leave	None	2 minutes	Administrative Assistant II HRMS-PMT
	1.3 Review and sign the breakdown of terminal leave	None	5 minutes	Supervising Administrative Officer HRMS-PMT
2.Return and claim breakdown of terminal leave	2.Release the breakdown of terminal leave	None	2 minutes	Administrative Assistant II HRMS
2.1 Sign the Released Logbook	2.1 Give the Released Logbook and instruct the client to sign	None	2 minutes	Administrative Assistant II HRMS
	<b>TOTAL:</b>	<b>None</b>	<b>5 days and 13 minutes</b>	



## Issuance of Certificate of Employment

This certificate is issued to a requesting client relative to their services rendered as an employee of (indicate name of your hospital).

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government to Citizen			
<b>Who may avail:</b>	All inactive human resource			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<b>Principal:</b> 1. Proof of Identification 2. Official receipt (if applicable)		Any Government-issued IDs Cashier		
<b>Authorized representative:</b> 1. Proof of Identification of the principal and authorized representative 2. Authorization letter 3. Official receipt (if applicable)		Any Government-issued IDs Requesting party (principal) Cashier		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill-out the logbook/request form/request slip for the request of Certificate of Employment (COE)	1. Entertain client's request and advise to fill-out the COE Logbook/request form/request slip	None	2 minutes	Administrative Assistant II Human Resource Management Section - Performance Management Team
1.1. Submit the filled out logbook/request form/request slip and receive scheduled date of release of the COE	1.1 Receive the filled out logbook/request form/request slip and advise the schedule of release of the COE	None	5 minutes	(HRMS-PMT) Administrative Assistant II HRMS-PMT
	1.2 Prepare, verify and print the COE	None	1 day	Administrative Assistant II HRMS-PMT
	1.3 Review and sign the COE by the designated signing authority	None	3 minutes	Supervising Administrative Officer HRMS-PMT
2. Return on the scheduled date and claim the COE	2. Release the signed COE	None	2 minutes	Administrative Assistant II HRMS-PMT
2.1 Sign the COE Released Logbook	2.1 Give the COE Released Logbook	None	2 minutes	Administrative Assistant II HRMS-PMT
	<b>TOTAL:</b>		<b>1 day and 14 minutes</b>	



## Issuance of Certificate of Employment

This certificate is issued to a requesting client relative to their services rendered as an employee of (indicate name of your hospital).

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government to Government			
<b>Who may avail:</b>	All active human resource			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<b>Principal:</b> 1. Proof of Identification 2. Official receipt (if applicable)		Any Government-issued IDs Cashier		
<b>Authorized representative:</b> 1. Proof of Identification of the principal and authorized representative 2. Authorization letter 3. Official receipt (if applicable)		Any Government-issued IDs Requesting party (principal) Cashier		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
3. Fill-out the logbook/request form/request slip for the request of Certificate of Employment (COE)  1.1. Submit the filled out logbook/request form/request slip and receive scheduled date of release of the COE	1. Entertains client's request and advise to fill-out the COE Logbook/request form/request slip	None	2 minutes	Administrative Assistant II Human Resource Management Section - Performance Management Team (HRMS-PMT) Administrative Assistant II HRMS-PMT  Administrative Assistant II HRMS-PMT Supervising Administrative Officer HRMS-PMT
	1.1 Receive the filled out logbook/request form/request slip and advise the schedule of release of the COE	None	5 minutes	
	1.2 Prepare, verify and print the COE	None	1 day	
	1.3 Review and sign the COE by the designated signing authority	None	3 minutes	
4. Return on the scheduled date and claim the COE  2.1 Sign the COE Released Logbook	2. Release the signed COE	None	2 minutes	Administrative Assistant II HRMS-PMT Administrative Assistant II HRMS-PMT
	2.1 Give the COE Released Logbook	None	2 minutes	
	<b>TOTAL:</b>		<b>1 day and 14 minutes</b>	



## Issuance of Service Record

A service record is issued to clients relative to their services as an employee of the (indicate name of your hospital).

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Citizen			
<b>Who may avail:</b>	All inactive human resource			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>Principal:</b> 1. Proof of Identification		Any Government-issued IDs		
<b>Authorized representative:</b>  1. Proof of Identification of the principal and authorized representative 2. Authorization letter		Any Government-issued IDs  Requesting party (principal)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
5. Fill-out the logbook for the request of Service Record  1.1. Submit the filled out logbook and receive scheduled date of release of service record	1. Entertain client's request and advise to Log in the Service Record Logbook	None	2 minutes	Administrative Assistant II Human Resource Management Section-
	1.1 Receive the filled out logbook for the request of Service Record and advise the schedule of release of the Service Record	None	5 minutes	Performance Management Team (HRMS-PMT)
	1.2 Reconcile Service Records from old files (B.P.W. Form No. 114-A)	None	2 days	Administrative Assistant II
	1.3 Update and encode of Service Record to HRMIS/Excel	None	2 days	HRMS-PMT
	1.4 Print the Service Record	None	2 minutes	Administrative Assistant II
	1.5 Review and sign the Service Record	None	5 minutes	HRMS-PMT Administrative Assistant II Supervising Administrative Officer HRMS-PMT
6. Return on the scheduled date and claim the Service Record  2.1 Sign the Service Record Released Logbook	2. Release the signed Service Record	None	2 minutes	HR Staff HRMS-PMT
	2.1 Give the COE Released Logbook	None	2 minutes	HR Staff HRMS-PMT
	<b>TOTAL:</b>		<b>4 days and 20 minutes</b>	



## Issuance of Service Record

A service record is issued to clients relative to their services as an employee of the (indicate name of your hospital).

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Government			
<b>Who may avail:</b>	All active human resource			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>Principal:</b> 1. Proof of Identification		Any Government-issued IDs		
<b>Authorized representative:</b> 1. Proof of Identification of the principal and authorized representative 2. Authorization letter		Any Government-issued IDs Requesting party (principal)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
7. Fill-out the logbook for the request of Service Record	1. Entertains client's request and advise to Log in the Service Record Logbook	None	2 minutes	Administrative Assistant II Human Resource Management Section-
1.1. Submit the filled out logbook and receive scheduled date of release of service record	1.1 Receive the filled out logbook for the request of Service Record and advise the schedule of release of the Service Record	None	5 minutes	Performance Management Team (HRMS-PMT)
	1.2 Reconcile Service Records from old files (B.P.W. Form No. 114-A)	None	2 days	Administrative Assistant II HRMS-PMT
	1.3 Update and encode of Service Record to HRMIS/Excel	None	2 days	Administrative Assistant II HRMS-PMT
	1.4 Print the Service Record	None	2 minutes	Administrative Assistant II HRMS-PMT
	1.5 Review and sign the Service Record	None	5 minutes	Supervising Administrative Officer HRMS-PMT
8. Return on the scheduled date and claim the Service Record	2. Release the signed Service Record	None	2 minutes	HR Staff HRMS-PMT
2.1 Sign the Service Record Released Logbook	2.1 Give the COE Released Logbook	None	2 minutes	HR Staff HRMS-PMT
	<b>TOTAL:</b>		<b>4 days and 20 minutes</b>	

## Issuance of Temporary ID for Newly Hired Employees



Temporary Identification Card (ID) is being issued for the newly hired employee while Official Identification Card is still on process.

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Government			
<b>Who may avail:</b>	All active employees			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Filled up I.D. Requisition Slip 2. 2 x 2 ID picture ( 1 copy)		Human Resource Management Section Requesting party		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign the ID Requisition Logbook	1. Give the Logbook and have it sign for the specific request	None	2 minutes	Administrative Aide III Human Resource Management Section (HRMS)
2. Fill up the I.D. Requisition Form 2.1. Submit the filled up I.D. Requisition Form and receive the scheduled date of release	2. Provide the I.D. Requisition Form	None	1 minute	Administrative Aide III HRMS
	2.1 Receive the completely filled up I.D. Requisition Form with I.D. picture 2x2 (1 copy) and advise the scheduled date of release	None	2 minutes	Administrative Aide III HRMS
	2.2 Process the request ( lay-outing, scanning, printing, cutting and lamination)	None	3 days	Administrative Aide III HRMS
3. Return and receive the laminated Identification Card with I.D Sling 3.1. Sign the released logbook for ID	3. Release the laminated Identification Card with I.D Sling and instruct to sign the released logbook for ID	None	2 minutes	Administrative Aide III HRMS
	<b>TOTAL:</b>	<b>None</b>	<b>3 days and 7 minutes</b>	



## Leave of Absence Application

Leave of absence is generally defined as a right granted to officials and employees not to report for work with or without pay as may be provided by law and as the rules prescribe in Rule XVI hereof. Leave application refers to the application of an employee to avail leave of absence.

<b>Office or Division:</b>	Human Resource Management Section				
<b>Classification:</b>	Complex				
<b>Type of Transaction:</b>	Government to Government				
<b>Who may avail:</b>	All employees holding plantilla position				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Please refer to Table of Requirements for the Specific Type of Leave Applied		Please refer to Table of Requirements for the Specific Type of Leave Applied			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
9. Fill-up Leave Application Logbook	1. Give the application Logbook	None	2 minutes	Administrative Assistant I Human Resource Management Section (HRMS)	
10. Submit the required documents for the specific type of leave applied	2. Receive and validate the required documents / attachments	None	3 minutes	Administrative Assistant IHRMS	
		None	5 minutes	Administrative Assistant IHRMS	
	None	2 minutes	Administrative Assistant IHRMS		
	2.1. Verify the Leave Balance(s) of the employee	None	2 minutes	Administrative Assistant IHRMS	
		None	2 minutes	Administrative Assistant IHRMS	
	2.1.1 If the employee has no leave balance, inform the employee that he/she cannot avail the desired leave.			1 minute	Administrative Assistant IHRMS
				1 day	Administrative Assistant IHRMS
	2.2. Entry the Leave application				HRM Head IHRMS
<b>For automated:</b> 2.2.1 Print the Leave Application					





	Form (CSC Form NO. 6) <b>For manual:</b> 2.2.1 Receive the duly accomplished leave application form 2.3 Certify the Leave Application Form			
11. Receive the printed Leave Application Form and sign the receiving logbook	3. Give the printed leave application form and instruct to log in the receiving logbook	None	2 minutes	HRM Staff
12. Process the Leave Application Form with complete attachments for the recommending approval of their immediate supervisor	4. Recommend for the Approval / disapproval of Leave application	None	2 days	Immediate supervisor
13. Submit the Leave application form approved by immediate supervisor with complete attachment (if applicable) to HRMS	5. Receive the Leave Application Form signed by the recommending approval	None	2 minutes	HRM Staff
	5.1. Log and submit the Leave application form with complete attachments (if applicable) to designated approving authority	None	10 minutes	Designated approving authority
	5.1. Log and submit the Leave application form with complete attachments (if applicable) to designated approving authority	None	2 days	Designated approving authority
	5.1. Log and submit the Leave application form with complete attachments (if applicable) to designated approving authority	None	10 minutes	Designated approving authority Staff
	5.2. Approve / disapprove the Leave application	None	5 minutes	HRM Staff
	5.3. Transmit the approved/ disapproved leave			



	application form to HRMS 5.4. Segregate and file the Leave application form (HRMS and Employees copy)			
14. Claim the approved/disapproved leave and sign the released logbook for leave application for employee's copy	6. Release the Approved Leave Application Form and give the Released Logbook for Employees copy	None	2 minutes	Administrative Assistant I HRMS
	<b>TOTAL:</b>	<b>None</b>	<b>5 days and 48 minutes</b>	

TYPE OF LEAVE	CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
<b>For Vacation Leave:</b>	CSC form No. 6 -Application for Leave Form (2, Original Copy)	Human Resource Management Section (HRMS)
	For one (1) month and above, additional requirements: <ul style="list-style-type: none"> <li>• Hospital Clearance Form (4, Original Copy)</li> </ul>	Human Resource Management Section (HRMS)
	<i>Additional Documentary Requirements (for Travel Abroad)</i>  Travel Authority Form (1, Original Copy)  Letter of Intent approved by the Head of the Agency (1, Original Copy)	Human Resource Management Section (HRMS)  Requesting party
	For Convention / Seminars (Personal Travel): Nomination form/ Invitation Letter/ Program ( Refer to CSC and DOH guidelines)	Requesting party Organizing Institution
	<b>For Sick Leave:</b>	CSC form No. 6 -Application for Leave Form (2, Original Copy)
<b>For infectious disease:</b> Medical Certificate (Fit to Work status upon returned to work, 1 photocopy)  <i>Additional Documentary Requirements:</i> For five (5) days above attached the ff: <ul style="list-style-type: none"> <li>• Medical Certificate (1, Original Copy)</li> <li>• Medical Certificate (Fit to Work status upon returned to work, 1 photocopy)</li> </ul>		Issued by the Attending Physician  Issued by the Attending Physician
For one (1) month and above <ul style="list-style-type: none"> <li>• Medical Certificate (1,Original Copy)</li> <li>• Medical Certificate (Fit to Work status upon returned to work, 1 photocopy)</li> <li>• Hospital Clearance Form (4, Original Copy)</li> </ul>		Issued by the Attending Physician
<b>TYPE OF LEAVE</b>	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
<b>For Maternity Leave:</b>	Medical Certificate (CSC Form 41, 3 Original copies)	Human Resource Management Section (HRMS)



		Sign by the Attending Physician
	Hospital Clearance (4, Original Copy)	Human Resource Management Section (HRMS)
	CSC form No. 6 -Application for Leave Form (2, Original Copy)	CSC form No. 6 (Application for Leave Form)
<b>For Paternity Leave:</b>	Marriage Contract (1, Photocopy)	Local Civil Registrar
	Birth certificate of the child (1, Photocopy) or Medical Certificate for Miscarriages (1, Photocopy)	Local Civil Registrar
	CSC form No. 6 -Application for Leave Form (2, Original Copy)	Human Resource Management Section (HRMS)
<b>For Solo Parent Leave:</b>	Solo Parent ID or Certificate from DSWD (1, photocopy)	Department of Social Welfare and Development (DSWD)
	CSC form No. 6 -Application for Leave Form (2, Original Copy)	Human Resource Management Section (HRMS)
<b>For Rehabilitation Leave:</b> <i>(for wounds and/or injuries sustained while in the performance of official duties.)</i>	CSC form No. 6 -Application for Leave Form (2, Original Copy) Medical Certificate (2, Original and Photocopy)	Issued by the Attending Physician
	Approved Incident Report or Police Report (2, Original and Photocopy)	Agency or Philippine National Police
	Approved Hospital Order / Department Order / Travel Order for Official Business or Official Time (1, Original Copy)	Human Resource Management Section (HRMS)
<b>For Study Leave Application:</b>	Holds a permanent appointment	Employees concerned
	Holds a Degree that requires passing of bar/board examination	Employees concerned
	Field of study pursued must be relevant to the agency's mandate, or to the duties and responsibilities of the concerned official or employee, as determined by the agency head: School Certification (1, Original copy) to wit: <ul style="list-style-type: none"> <li>• For Bachelors Degree – Qualified for Board/Bar Examination</li> <li>• Completion For Master's Degree</li> <li>• Completion For Doctoral Degree</li> </ul>	School attended
	With at least two (2) years of continuous service in DRMC: Latest Service Record (1, Original copy)	Human Resource Management Section (HRMS)
	Individual Performance Commitment and Review (IPCR) Form for the last 2 rating	Employees concerned



	period with at least Very Satisfactory Rating immediately preceding the application (1 Certified True Copy of each rating period)	
	Letter of Intent (1 Original copy)	Employees concerned
	No Pending administrative and / or criminal case: Court Clearance (1 Original copy)	City Trial Court
	Must not have any current foreign or local scholarship grant: Certificate of No Current Foreign or Local Scholarship Grant (1 Original copy)	Human Resource Management Section (HRMS)
	Clearance (4 Original copies)	Human Resource Management Section (HRMS)
	The employee must have fulfilled the service obligation of any previous training/scholarship/study grant Study Leave Agreement for the Service obligation	



## Payroll Certification for Salary Loan Applications with Lending Institutions

Payroll certification is required for the Approval of Loan Applications. This certifies whether or not the applicable loan amortization for the employee's applied loan can be deducted from his/her salary; and provided that in no case shall the foregoing deductions reduce the employee's monthly net take home pay to an amount lower than Five Thousand Pesos (PHP 5,000).

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Government			
<b>Who may avail:</b>	All employees holding plantilla position			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1.Refer to the checklist of requirements of the choice Lending Institution		Bank or Lending Institutions		
2.Salary Loan Application Form				
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Submit the Filled-up Salary Loan Application Form with complete attachments  1.1 Receive the scheduled date of release of the approved loan application	1.Receive and evaluate the client request as to the eligibility for loan availment and advise the schedule of release of the approved loan application (for qualified)	None	10 minutes	Administrative Assistant II Human Resource Management Section (HRMS)
	<b><i>If qualified:</i></b> 1.1 process payroll certification to be signed by Authorized Officer	None	2 days	Administrative Assistant II HRMS
	<b><i>If not qualified:</i></b> 1.1 inform the concerned employee (End of Transaction)	None	5 minutes	Administrative Assistant II HRMS
2.Return and receive the approved Loan Application Form	2. Release the Approved Loan	None	5 minutes	Administrative Assistant II HRMS
	<b>TOTAL:</b>	<b>None</b>	<b>2 days and 15 minutes</b>	



## Requisition of Payslip

(no service description)

<b>Office or Division:</b>	Human Resource Management Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government to Government (G2G)			
<b>Who may avail:</b>	All human resource and authorized person			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>Principal:</b> Proof of identification (Office ID)		Requesting party		
<b>Authorized person:</b> Authorization form		Human Resource Management Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>Principal:</i> 1. Present Valid ID <i>Authorized person:</i> 1. Submit authorization form	1. Receive and validate ID/ authorization form	None	2 minutes	Payroll in-charge
2. Receive and fill up Logbook	2. Give the Logbook to employee/requesting party	None	2 minutes	Administrative Assistant II Human Resource Management Section-Payroll in-charge
	2.1 Prepare, print and provide the requested payslip	None	5 minutes	Administrative Assistant II Human Resource Management Section-Payroll in-charge
3. Receive Payslip	3. Release Payslip	none	1 minute	Administrative Assistant II Human Resource Management Section-Payroll in-charge
<b>TOTAL:</b>		<b>None</b>	10 minutes	



## Processing of PR for Small Value Procurement

Processing of Purchase Request to Award of Bid for Small Value Procurement

<b>Office or Division:</b>	PROCUREMENT SERVICE			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All End users			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Purchase Request		End User		
Approved PPMP		Procurement Section		
BAC Resolution		BAC Secretariat		
Request for Quotation		Canvasser		
Quotations		Accredited Suppliers		
Abstract of Quotation		Procurement Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit Purchase Request to Procurement Section	1.1 Received PR from End User 1.1.a Verified from PPMP 1.1.b Forward PR to Budget for CAF	None	1 day	Procurement Staff
	1.2 Received approved PR from Head of Procuring Entity (HOPE)	None	10 mins	PS Staff
	1.3 Forward Approved PR to BAC for Mode of Procurement and Resolution		2 days	BAC Secretariat
	1.4 Post item/s to Philgeps (RFQ)		1 hour	PS Staff
	1.4.a Canvassing		7 days	Canvasser
	1.5. Open submitted quotations		4 hour	BAC Chairperson with BAC Secretariat



	1.6 Forward quotation to TWG for evaluation and End User for approval		1 day	BAC Secretariat
	1.7 Prepare Abstract of Quotation & Resolution of award		30 minutes	BAC Secretariat
	1.8 Forward Abstract & Resolution for signing of BAC member		1 day	BAC Secretariat
	1.9 Forward to MCC II for approval		1 day	BAC Secretariat
	1.10 Received approved resolution from MCC II		10 minutes	PS Staff
	1.11 Preparation P.O		1 hour	PS Staff
	1.12 Forward P.O and other supporting documents for BURS/ORS preparation at the Budget Office.  1.12.a Preparation and approval of BURS/ORS by the Budget Officer		15 minutes  1 day	PS Staff  BS Staff
	1.13 Forward P.O and other documents to Accounting Office for Accountant's signature on funds availability		1 hour	Accounting Staff
	1.14 Forward P.O and supporting documents to MCC or designated officer for approval		30 minutes	Accounting Staff
	1.15 Approval of the P.O by the MCC		1 day	MCC
	1.16 Forward approved P.O to procurement for supplier's conforme		30 minutes	MCC Staff

	1.17 Serve approved P.O to Supplier		1 day	PS Staff
	1.18 Forward Conformed P.O to MMS and COA		30 minutes	PS Staff
	<b>TOTAL</b>		18 DAYS: 7 HOURS: 35 MINUTES	

## DIET COUNSELLING

### Process of Diet Counselling for Admitted/ Walk –In Patients

<b>Office or Division:</b>	PROCUREMENT SERVICE			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	Admitted and Walk –In Patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Diet Counselling Form/Referral Form		Nurse Station		
Meal Plan		Nutritionist Dietitian		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
2. Secure Diet Counselling Form/Referral Form	1.1 Download/Secure Diet Counselling Form /Referral Form from the Nurse station	None	15 minutes	Nurse on Duty
	1.2 Fill up Diet Counselling Form / Referral Form	None	30 minutes	Nurse on Duty
	1.3 Consolidate filled – up Forms	None	15 minutes	Nutritionist Dietitian on Duty
2. Diet Counselling to Patients	2.1 ND conducts nutrition counselling to patients and significant others /watchers according to its	None	20 mins	Nutritionist Dietitian on Duty



	prescribed Diet (ward/Nutrition Clinic)			
3. Recording of Patient's Data	3.1 ND secure patients' conformed on the Diet Counselling Logsheet/Logbook .	None	10 mins	Nutritionist Dietitian on Duty
	TOTAL		1 hour and 30 minutes	



**(ADMIN SERVICES)**

**EXTERNAL**



**Billing and Claims**  
**Billing for In/Out Patient**

<b>Office or Division:</b>	<b>Billing and Claims</b>			
<b>Classification:</b>	<b>Simple</b>			
<b>Type of Transaction:</b>				
<b>Who may avail:</b>	<b>Philhealth patient</b>			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>Clinical chart</b>	<b>In Patient</b>	<b>Nursing Service</b>		
<b>Charge Slip (OPD)</b>	<b>Out Patient (with Philhealth)</b>	<b>OPD</b>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Receive clinical chart from CF4 encoders for Philhealth patient and Nursing Service for Non-Philhealth patient	<ul style="list-style-type: none"> <li>&gt; Receive, record and check the completeness of chart such as:               <ul style="list-style-type: none"> <li>• must be readable</li> <li>• with final diagnosis</li> <li>• Philhealth accredited doctor's signature</li> <li>• diagnosis within philhealth package</li> </ul> </li> <li>&gt; ICD 10 coding</li> </ul>	None	15 minutes	Billing Clerk
1.1 Receive charge slip from OPD for Philhealth Out-patient	<ul style="list-style-type: none"> <li>&gt; check if patient is Philhealth eligible, if yes proceed requirements: MDR or Government issued I.D</li> <li>&gt; Mark charge slip as Philhealth</li> <li>&gt; Print Philhealth forms Such as:               <ul style="list-style-type: none"> <li>• CF1, CF2, CF3 CSF</li> <li>• Operative Technique filled and signed by OPD Doctor</li> </ul> </li> <li>&gt; secure copy patient index card for claim purposes.</li> </ul>	None	5 minutes	Billing Clerk
2. Scan	<ul style="list-style-type: none"> <li>&gt; Laboratory results</li> <li>&gt; X-ray result with official reading</li> </ul>	None	15 minutes	Billing Clerk
3. Bill	<ul style="list-style-type: none"> <li>&gt; Bill via IHOMIS</li> <li>&gt; Generate PBEF for Philhealth patient</li> </ul>	None	10 minutes	Billing Clerk
4. Issuance of SOA and clearance	<ul style="list-style-type: none"> <li>&gt; Explaining clients transaction</li> <li>&gt; Client signature</li> <li>&gt; referring non-philhealth patient to MSS</li> <li>&gt; issuing of SOA and clearance slip to be signed by the cashier, nurse on ward duty and billing clerk</li> </ul>	None	10mins	Billing Clerk



	>Furnishing of SOA copy and clearance slip to client			
5. Releasing of clinical chart	> Any nurse on duty must sign in the receive and release chart logbook before releasing	None	5 mins	Nurse
	End of Transaction			



## ISSUANCE OF OFFICIAL RECEIPT

The Cashier is in charged with the collection of hospital fees, sales of pharmacy and central supply items, laboratory and other medical fees charged and billed through charge slips, statement of accounts, order slips, and the like. The Cashier is located at the Cash Operations Section Office and open from 8:00 AM to 5:00 PM during Monday - Friday & Saturday.

<b>Office or Division:</b>	Cash Operations			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen (G2C), Government-to-Business (G2B), Government-to-Government (G2G)			
<b>Who may avail:</b>	Patients or their representatives, employees, government agencies, health maintenance organizations, suppliers (bid documents and performance bonds)			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>Any of the following:</b>				
1. Charge slip or its equivalent		Cost center where service was rendered (eg. Emergency Department, Pharmacy, Central Supply Room, etc.)		
2. If for discharge, 1 copy Clearance Form		Nurses station of ward or area where admitted		
3. Statement of Account or Billing Statement		Billings and Claims Section or Outpatient Department		
4. Order of Payment or its equivalent		Cost center (eg. Accounting section, Billing Section, Nursing Service, Bids and Awards Committee, Human Resource Management Office)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Approach the window and present required document  <i>Note: Special priority for Senior Citizens, Pregnant women and PWDs.</i>	2. Receive document, such as: charge slip / order of payment / statement of account (SOA)/ Order of Payment	None	1 minute	Collecting Officer Cash Operations
3. Give cash/ check payment	3. Receive cash / check from clients / creditors.	None	1 minutes	Collecting Officer Cash Operations
	3.1. Issue official receipt/s (OR) for payment from clients	None	5 minutes	Collecting Officer Cash Operations
4. Receive Official Receipt and clearance	4. Clear hospital bill	None	2 minutes	Collecting Officer
	4.1. Give instruction to the client as needed	None	2 minutes	Collecting Officer
<b>TOTAL</b>		<b>None</b>	<b>11 minutes</b>	



## ISSUANCE OF OFFICIAL RECEIPT FOR COLLECTIONS

The Cash Operation is in-charge of the collection of hospital fees, sales of pharmacy and central supply items, laboratory fees and other hospital service fees, from clients/patients. Including collection of refunds from internal clients, payment of sale of bidding documents from external clients, and financial assistance funding from government & private agencies.

Office Hours: Monday to Sunday (Except Holidays)  
8:00 am to 4:00pm

<b>Office or Division:</b>	Cash Operations			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen (G2C), Government-to-Business (G2B), Government-to-Government (G2G)			
<b>Who may avail:</b>	Patients / their representatives, employees, government agencies, private agencies, external clients, bidders			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Charge slip or its equivalent		Cost center where service was rendered (eg. Emergency Department, Pharmacy, Central Supply Room, etc.)		
Statement of Account or Billing Statement		Billing & Claims Section		
Order of Payment or its equivalent		Accounting Section		
Prescription Slip with charges		Pharmacy Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present applicable document from Checklist of Requirements.	1. Receives the applicable document from Checklist of Requirements.	None	1 minutes	Collecting Officer Cash Operations
2. Give cash/ check payment	2.1 Receive cash/check from clients 2.2 Issue Official Receipts for payment from clients	None	3 minutes	Collecting Officer Cash Operations
3. Receive the Official Receipts Issued	3. Give additional instruction to the client as needed	None	1 minutes	Collecting Officer Cash Operations
	<b>TOTAL</b>		<b>5 MINUTES</b>	





## RELEASE OF CHECKS TO CREDITORS

The Cash Operations is tasked with the releasing of checks to external creditors through issuance of processed and approved checks or through EMDS-LDDAP-ADA, while ensuring that payments are duly acknowledged by mentioned creditors through the issuance of valid official or collection receipts whichever is appropriate, with the corresponding acknowledgment on the approved disbursement or payroll vouchers and withholding tax certificates.

Office Hours: Monday to Friday (Except Holidays)  
8:00 am to 4:00pm

<b>Office or Division:</b>	Cash Operations			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government-to-Citizen (G2C), Government-to-Business (G2B), Government-to-Government (G2G)			
<b>Who may avail:</b>	Patients / their representatives, employees, government agencies, private agencies, external clients, bidders			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
2 valid IDs ( 1 Company ID & 1 other Gov't Issued I)		Government Agencies issuing valid IDs		
Special Power of Attorney (SPA) &/ Authorization Letter to collect or claim check payment		Notary Public		
Official Receipt / Collection Receipt		Bureau of Internal Revenue		
Signatures of Creditors		For the disbursement voucher and withholding tax certificates		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present applicable document from Checklist of Requirements: Valid IDs, SPA &/ Authorization Letter	1.1 Receives the applicable document from Checklist of Requirements. 1.2 Verify the authenticity of documents	None	2 minutes	Disbursing Officer Cash Operations
2. <b>External:</b> Issues Official Receipts / Collection Receipts upon signing pertinent disbursement vouchers and other supporting documents, i.e. BIR Form 2306 & 2307 <b>Internal:</b> Sign "Receipt of Payment" portion of disbursement voucher, or payroll document.	2.1 Retrieve check or ADA 2.2 Receive the Official Receipt or Collection Receipt, check completeness 2.3 Check presence of signatures on necessary documents before release	None	6 minutes	Disbursing Officer Cash Operations



3.1 Return disbursement voucher with affixed signatures 3.2 Receive check &/ ADA 3.3 Sign on Logbook	3. Give additional instruction to the client as needed	None	2 minutes	Disbursing Officer Cash Operations
	<b>TOTAL</b>		<b>10 MINUTES</b>	