



# **PROVINCIAL GOVERNMENT OF ORIENTAL MINDORO**

**CITIZEN'S CHARTER**  
2023 (3<sup>rd</sup> Edition)

**PART 1**



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**PROVINCIAL PUBLIC EMPLOYMENT SERVICE  
OFFICE (PPESO)  
External Services**





## 1. OFW ASSISTANCE PROGRAM

The granting of financial assistance to Overseas Filipino Workers (OFW) is a program of PGOM for repatriated/displaced and/or distressed Overseas Filipinos who have medical or psycho-social problems requiring treatment, hospitalization, counseling; or problems like labor, immigration and other issues requiring legal representation. This service is available from Monday to Friday (Monday 7:30 Am to 4:00 PM, Tuesday to Friday. 8:00 AM to 5:00 PM.)

<b>Division/Section</b>		Manpower Support/Migrant Welfare Services				
<b>Classification</b>		Highly Technical				
<b>Type of Transaction</b>		G2C				
<b>Who may avail</b>		Repatriated/displaced/distressed OFW				
<b>CHECKLIST OF REQUIREMENTS</b>				<b>WHERE TO SECURE</b>		
1	Request Letter addressed to the Governor - 1 original copy		Requesting party			
2	Filled out Application Form- 1 original copy		PPESO			
3	Certificate of Residency - 1 original copy		Barangay			
4	Passport - 1 photocopy		Requesting party			
5	Employment Contract - 1 photocopy		Previous/Current employer			
<b>CLIENT STEPS</b>		<b>AGENCY ACTION</b>		<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	Submit requirements	1.1	Receive and assess requirements	None	3 minutes	Labor and Employment Officer III - PPESO
		1.2	Prepare documentary requirements for the release of the FA	None	30 minutes	Labor and Employment Officer III - PPESO
		1.3	Approve payroll	None	1 day	Executive Assistant- Management Staff Support Division
		1.4	Check availability budget and affix signature	None	30 minutes	Budget Officer I, Provincial Budget Officer - Provincial Budget Office



		1.5	Record transaction	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
		1.6	Audit payroll	None	10 days	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
		1.7	Approve payment/release	None	4 hours	Executive Assistant-Management Staff Support Division
		1.8	Prepare cheque	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
		1.9	Approve/sign cheque	None	30 minutes	Provincial Administrator - Provincial Administrator's Office
		1.10	Prepare advice	None	15 minutes	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
		1.11	Notify requesting party of availability of financial assistance	None	2 minutes	Labor and Employment Officer III-PPESO
2	Claim financial assistance	2	Release assistance	None	5 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
<b>TOTAL</b>				<b>None</b>	<b>11 days, 6 hours, 55 minutes</b>	



## 2. RECRUITMENT

Recruitment activities refer to the meeting of employers and jobseekers in one venue for the convenience of both parties. Recruitment activities facilitated by PPESO usually take place at the PPESO Conference Room or other venues agreed upon by the requesting party and PPESO. Special Recruitment Activities (SRA) are for those who will recruit workers overseas, while Local Recruitment Activities (LRA) are for those who will recruit workers in companies within the country. Applicants may be hired on the spot (HOTS) or be asked to proceed to the next steps before they can be hired. This service is available from Monday to Friday. (Monday 7:30 Am to 4:00 PM, Tuesday to Friday, 8:00 AM to 5:00 PM.)

<b>Division/Section</b>		Employment Facilitation/Referral and Placement				
<b>Classification</b>		Complex				
<b>Type of Transaction</b>		G2C				
<b>Who may avail</b>		Companies/Employers hiring/recruiting local/overseas workers				
<b>CHECKLIST OF REQUIREMENTS</b>				<b>WHERE TO SECURE</b>		
1	Letter of Intent addressed to the PPESO Manager - Requesting party 1 original copy	Requesting party				
2	Company profile with Job Order balance (for SRA) or job vacancies (for LRA) - 1 original copy					
3	List of Qualifications and Requirements - 1 original copy					
4	Certificate of No Objection - 1 original copy (For SRA only)	PPESO				
5	Special Recruitment Authority - 1 original copy (For SRA only)	Department of Migrants Workers (DMW), Calapan City Satellite Office, Lumangbayan, Calapan City				
<b>CLIENT STEPS</b>		<b>AGENCY ACTION</b>		<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	Submit Letter of Intent with other	1.1	Receive Letter of Intent and check requirements submitted	None	3 minutes	Labor and Employment Officer III-PPESO
		1.2	Issue Certificate of No Objection (CNO) (For SRA only)	None	14 minutes	Supervising Labor and Employment Officer - PPESO
2	Submit CNO to and secure	2.1	Receive CNO	None	2 minutes	Admin Officer I-DMW



	Special Recruitment Authority from DMW (For SRA only)	2.2	Submit request for Special Recruitment Authority from DMW Central Office and issue the same to requesting party	None	4 days	Regional Coordinator - DMW
3	Submit Special Recruitment Authority to PPESO (For SRA only)	3	Receive and check details of Special Recruitment Authority		2 minutes	Labor and Employment Officer III - PPESO
4	Discuss details of activity with PPESO	4.1	Discuss details of activity with requesting party	None	30 minutes	Supervising Labor and Employment Officer - PPESO
		4.2	Disseminate information through social media	None	2 days	Labor and Employment Officer III - PPESO
	<b>TOTAL</b>				<b>6 days and 51 minutes</b>	
	Conduct SRA/LRA		Assist in the conduct of SRA/LRA	None		Labor and Employment Officer III - PPESO

### 3. SCHOLARSHIP FOR INCOMING FRESHMEN

Provincial Educational Assistance Program (PEAP) is a system of grants, subsidies and other incentives to deserving constituents. It is often referred to as Provincial Scholarship. It has four (4) categories, namely: Bachelor's Degree Scholarship, Scholarship for the Indigenous Peoples, Technical/Vocational/Literacy Assistance Scholarship and Special Financial Educational Assistance which incoming freshmen may avail of. This service is available from Monday to Friday (Monday 7:30 AM to 4:00 PM, Tuesday to Friday, 8:00 AM to 5:00 PM) three (3) months before the start of the schoolyear until the opening of classes.

<b>Division/Section</b>	Education Support/Scholarship Section.
<b>Classification</b>	Highly Technical
<b>Type of Transaction</b>	G2C
<b>Who may avail</b>	All incoming college students:



		1. who are graduates of any recognized public/private Senior High School in the province 2. who are bona fide residents of Oriental Mindoro 3. with general average of not lower than 90 (for Bachelor's degree) or passing average (for Pang-alalay sa Edukasyon) in Grade 12				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE				
1	1 Birth Certificate - 1 photocopy	Local Civil Registrar's Office or Philippine Statistics Authority, Camilmil, Calapan City				
2	Certificate of Indigency-1 original copy	City/Municipal Social and Welfare Development Office (C/MSWDO)				
3	Report Card in Grade 12-1 photocopy	Previous school (Senior High School)				
4	Certificate of Moral Character - 1 original copy	Previous school (Senior High School)				
5	Certificate of Residency - 1 original copy	Barangay				
6	ID pictures-3 1x1	Any photo studio				
7	Certificate proving legitimacy as Mangyan (for IPs only)-1 original copy	Tribal leader or National Commission on Indigenous Peoples (NCIP) Office, Camilmil, Calapan City				
<i>For qualifiers</i>						
8	Certificate of Enrolment – 1 original copy	Current school (College)				
9	Billing Statement or Receipt (if already paid) – 1 original copy	Current school (College)				
CLIENT STEPS		AGENCY ACTION		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1	Submit requirements	1.1	Receive requirements pre-screen applicants based on requirements submitted, and advice those eligible to return for the qualifying examination	None	5 minutes	Admin Aide V-PPESO
2	If eligible, take qualifying examination	2.1	Check qualifying examination	None	2 hours	Admin Aide V-PPESO
		2.2	Notify qualifiers (those None who ranked 1 to 16 per municipality)	None	1 day	Admin Aide V-PPESO
<i>For qualifiers</i>						
3	Undergo interview	3.1	Conduct interview	None	1 day	Admin Aide V-PPESO



		3.2	Deliberate on the results of the interview	None	1 day	Supervising Labor and Employment Officer, Admin Aide V-PPESO
		3.3	Rank the qualifiers	None	1 day	Admin Aide V-PPESO
		3.4	Notify interviewees of the results of the ranking	None	5 minutes	Admin Aide V-PPESO
4	Submit additional requirements	4.1	Receive additional requirements	None	2 minutes	Admin Aide V-PPESO
		4.2	Prepare documentary requirements for the release of the scholarship grant	None	30 minutes	Admin Aide V-PPESO
		4.3	Check transaction	None	4 hours	Executive Assistant-Management Staff Support Division
				None	30 minutes	Provincial Administrator - Provincial Administrator's Office
		4.4	Approve payroll/Voucher	None	5 days	Provincial Governor
		4.5	Audit payroll/voucher	None	2 days	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
		4.6	Record transaction	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office



		4.7	Approve payment/release	None	3 days	Provincial Governor
		4.8	Prepare cheque	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
		4.9	Approve/sign cheque	None	30 minutes	Provincial Administrator - Provincial Administrator's Office
		4.10	Prepare advice	None	15 minutes	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
		4.11	Notify requesting party of availability of scholarship grant	None	2 minutes	Labor and Employment Officer III-PPESO
5	Claim financial assistance	5	Release grant	None	5 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
<b>TOTAL</b>				<b>None</b>	<b>15 days, 1 hour and 4 minutes</b>	

#### 4. SPECIAL FINANCIAL EDUCATIONAL ASSISTANCE

The Special Financial Educational Assistance is one of the components of the Provincial Educational Assistance Program (PEAP) to deserving constituents in pursuit of their chosen course. It covers financial assistance to students to cover their tuition/allowance as well as expenses in curricular and co-curricular activities. This service is available from Monday to Friday (Monday 7:30 AM to 4:00 PM, Tuesday to Friday, 8:00 AM to 5:00 PM).



<b>Division/Section</b>		Educational Support/Scholarship Section				
<b>Classification</b>		Highly technical				
<b>Type of Transaction</b>		G2C				
<b>Who may avail</b>		1. Scholars - Review Assistance 2. Persons with Disability - Tulong Aral Walang Sagabal (TAWAG) 3. Students taking up Agriculture and allied courses - Research Assistance 4. Public School Teachers taking up post graduate studies in the fields of Science or Agriculture - Financial Assistance 5. Bona fide pupils/students of any private or public elementary, high school, or college in Oriental Mindoro who will take part in regional, national, or international scholastic, sports, cultural or artistic competitions - Incentives				
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>			
1	Request letter addressed to the Governor – 1 original copy		Requesting party			
2	Billing Statement/ Receipt (if already paid) - 1 original copy		School/College			
3	Certificate of Enrolment - 1 original copy		School/College			
4	School ID-1 photocopy		School/College			
5	PWD ID (for TAWAG only) - 1 photocopy		City/Municipal Social Welfare and Development Office			
6	Thesis proposal signed by adviser (for research assistance only)-1 original copy		Requesting party			
7	Invitation/Official Notice or Certificate of Recognition (for incentives only) - 1 photocopy		Contest organizers			
<b>CLIENT STEPS</b>		<b>AGENCY ACTION</b>		<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	Submit requirements	1.1	Receive and assess requirements	None	5 minutes	Admin Aide V-PPESO
		1.2	Prepare documentary requirements for the release of the financial assistance	None	1 hour	Admin Aide V-PPESO
		1.3	Check transaction	None	4 hours	Executive Assistant-Management Staff Support Division





			None	30 minutes	Provincial Administrator - Provincial Administrator's Office
	1.4	Approve Payroll/voucher	None	8 days	Provincial Governor
	1.5	Audit payroll/voucher	None	3 days	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
	1.6	Record transaction	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
	1.7	Approve payment/release	None	3 days	Provincial Governor
	1.8	Prepare cheque	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
	1.9	Approve/sign cheque	None	30 minutes	Provincial Administrator - Provincial Administrator's Office
	1.10	Prepare advice	None	15 minutes	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
	1.11	Notify requesting party of availability of financial assistance	None	2 minutes	Labor and Employment Officer III -PPESO



2	Claim financial assistance	2	Release grant	None	5 minutes	Local Treasury Operations Office I/All, Provincial Treasurer - Provincial Treasurer's Office
<b>TOTAL</b>					<b>11 days, 7 hours, 27 minutes</b>	

## 5. SPECIAL PROGRAM FOR EMPLOYMENT OF STUDENTS

The Special Program for Employment of Students (SPES) is DOLE's youth employment-bridging program being implemented by PPESO. It aims to provide temporary employment to poor and deserving students, out- of-school youth, and dependents of displaced or would-be displaced workers during summer to augment the family's income to help ensure that beneficiaries are able to pursue their education. This service is available from Monday to Friday (Monday 7:30 AM to 4:00 PM, Tuesday to Friday, 8:00 AM to 5:00 PM) one and a half (1 1/2%) months before the end of the schoolyear until the start of midyear break/summer vacation.

<b>Division/Section</b>		Employment Facilitation/Referral and Placement				
<b>Classification</b>		Complex				
<b>Type of Transaction</b>		G2C				
<b>Who may avail</b>		Students or out-of-school youth aged 15-30				
<b>CHECKLIST OF REQUIREMENTS</b>				<b>WHERE TO SECURE</b>		
1	1 Biodata 1 original		PPESO			
2	SPES Form 3 original copies		PPESO			
3	Birth Certificate - 3 photocopies		Local Civil Registrar's Office or Philippine Statistics Authority, Camilmil, Calapan City			
4	Copy of Grades in the Previous Semester-3 photocopies		School/College			
5	Certification that the applicant is an out-of-school youth - 1 original and 2 photocopies		Barangay			
6	Certificate of Indigency/Income Tax Return (ITR) – 1 original and 2 photocopies		Barangay/Bureau of Internal Revenue, Tawiran, Calapan City			
<b>CLIENT STEPS</b>		<b>AGENCY ACTION</b>		<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	Submit biodata	1	Receive biodata and assess qualifications	None	5 minutes	Labor and Employment Officer III-PPESO



2	If qualified, fill out DOLE-SPES pre-employment forms and submit other requirements	2.1	Assist applicant in filling out forms	None	5 minutes	Labor and Employment Officer III-PPESO
		2.2	Accept, check and file requirements	None	3 minutes	Labor and Employment Officer III-PPESO
3	Undergo interview	3.1	Interview applicant	None	10 minutes	Labor and Employment Officer III-PPESO
		3.2	Rank applicants and submit ranking to DOLE	None	4 hours	Supervising Labor and Employment Officer - PPESO
		3.3	Evaluate applicants' eligibility and present list of approved applicants to DOLE Oriental Mindoro Field Office	None	5 days	Labor and Employment Officer II, 001, DOLE Ormin Field Office
		3.4	Notify those who made it to the final list of SPES beneficiaries	None	2 minutes	Labor and Employment Officer III-PPESO
4	Report for orientation	4	Orient beneficiaries	None	3 hours	Labor and Employment Officer III-PPESO
<b>TOTAL</b>					<b>5 days, 7 hours and 25 minutes</b>	



**PROVINCIAL PUBLIC EMPLOYMENT SERVICE  
OFFICE (PPESO)  
Internal Services**



## 1. DISBURSEMENT OF REMUNERATION OF CONTRACTUAL EMPLOYEES

Non-permanent employees are given their remuneration/salaries every month (day 1 to 30) for Programang Pang-edukasyon sa Kalibliban (PPska) teachers twice a month (15th and 30th day) for those detailed at PPESO. This service is available on the first to working day after the 15th day or end of the month (Monday 7:30 AM to 4:00 PM, Tuesday to Friday, 8:00 AM to 5:00 PM).

<b>Division/Section</b>		Educational Support/ Special Programs and Administrative Section				
<b>Classification</b>		Simple				
<b>Type of Transaction</b>		G2C				
<b>Who may avail</b>		Non-permanent employees under PPESO				
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>			
1	Daily time record - 3 original copies		PPESO			
2	Accomplishment report - 3 original copies		PPESO			
3	Travel Order (if needed) - 3 PHRMO-authenticated photocopies		Employee			
4	Assumption of Duty (for first salary only) - 2 original copies, 1 photocopy		PPESO			
5	Notarized contract (for first salary only) - 1 original, 2 authenticated copies		PGOM			
6	Logbook (for PPsKa only) -3 certified true copies		School where the teacher is assigned			
7	PhilHealth Certificate - 1 original, 2 photocopies		Philhealth Office, Masipit, Calapan City			
8	BIR Receipt (Annual Registration - PhP500.00) – 3 photocopies		Bureau of Internal Revenue, Calapan District, Calapan City			
<b>CLIENT STEPS</b>		<b>AGENCY ACTION</b>		<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	Submit requirements	1.1	Collate requirements and prepare documentary requirements for the release of salaries	None	30 minutes	Administrative Assistant II - PPESO
		1.2	Check payroll/deductions	None	1 hour	Administrative Officer II - PHRMO
		1.3	Check availability of budget	None	15 minutes	Budget Officer I, Provincial



						Budget Officer - Provincial Budget Office
		1.4	Record transaction	None	30 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
		1.5	Audit payroll	None	1 day	Accountant I/II, Provincial Accountant - Office of the Provincial Accountant
		1.6	Approve payment/ release	None	4 hours	Provincial Administrator – Provincial Administrator's Office
		1.7	Prepare cash advance (for non- permanent employees deployed at PPESO)	None	2 hours	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
		1.8	Debit transactions (for PPsKa only)	None	2 hours	Admin Aide V- PPESO
2	Receive salary from PTO	2	Release salary	None	15 minutes	Local Treasury Operations Office I/II, Provincial Treasurer - Provincial Treasurer's Office
	Withdraw salary from ATM (for PPsKa)					
<b>TOTAL</b>				<b>None</b>	<b>2 days, 2 hours, and 30 minutes</b>	



## **GO – Special Concerns Division External Services**



## 1. Request for Capability Building for Youth/Sports Clinic and Conduct of or Participation in Sports Competition

To provide capability trainings to requesting youth and youth/sports organizations and the conduct of or facilitate participation in sports competition in the province. This service is available every Monday to Friday, 8:00am-5:00pm.

*Upang magbigay ng mga pagsasanay sa mga humihiling ng mga organisasyon ng kabataan at kabataan/isports at ang pagsasagawa o pagpapadali ng pakikilahok samga pampalakasang paligsahan sa lalawigan. Bukas ang serbisyong ito tuwing Lunes hanggang Biyernes, 8:00ng umaga -5:00 ng hapon.*

<b>Office or Division:</b>	Special Concerns Division
<b>Classification:</b>	Complex
<b>Type of Transaction:</b>	G2C, G2G
<b>Who may avail:</b>	<ul style="list-style-type: none"> <li>• Sports and Youth Organizations/Club/Associations</li> <li>• Oriental Mindoro LGUs</li> <li>• All Oriental Mindoro athletes</li> </ul>
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
<p><b>For conduct of trainings –</b> Approved Letter Request (1 original copy)</p> <p><i>Para sa pagsasagawa ng mga pagsasanay – Aprubadong liham (1 orihinal na kopya)</i></p> <p><b>2. For conduct of /or participation in Sports Competition –</b> Medical Certificate of athletes, Waiver/Consent of Parents to compete, Letter of invitation for participation in sports Competitions (1 original copy)</p> <p>Para sa pagsasagawa ng/ o paglahok sa Kompetisyong Pampalakan – Sertipikong medical ng mga atleta, Pagwawaksi/ Pahintulot ng mga Magulang na makipag-kumpetensya, Liham ng imbitasyon para sa pakikilahok sa mga Kumpetisyon sa palakan. (1 orihinal na kopya)</p>	Requesting client





CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Sign in the client log book in the office <i>Magpatala sa listahan ng kliyente sa opisina</i>	1. Give the log book to the client <i>Patalain ang kliyente</i>	None  Wala	1 min	Community Affairs Assistant (CAA) I
2. Submit letter request <i>Isumite ang liham kahilingan</i>	2. Receive the request & interview for the details <i>Tumanggap ng kahilingan at panayamin ang mga detalye</i>	None  Wala	1 min  10 mins	Community Affairs Assistant I (CAA I) Youth Development Officer (YDO) II /  Sports and Games Regulation Officer (SGRO) II
3. Wait for further instructions or notification about the status of the request <i>Maghintay para sa karagdagang mga tagubilin o abiso tungkol sa estado ng kahilingan)</i>	3. Prepare Activity/ Training Design and submit to Provincial Governor for approval <i>Ihandang Activity/Training Design at isumite sa gobernador para maaprubahan</i>  3.1. Notify requesting party on the status of the request <i>Ipaalam sa kliyente ang katayuan ng kahilingan</i>  3.2. Facilitate the request	None  Wala	3 days	Youth Development Officer II (YDO II) / Sports & Games Regulations Officer II (SGRO II)  Community Affairs Assistant I (CAA I)



	<i>Mapadali ang kahilingan</i>			
4. Conduct of or Participation in Sports Competition <i>Pagsasagawa ng / o paglahok sa Kumpetitsyong Pampalakasan</i>				
<b>TOTAL:</b>		None	3 days and 12 mins	

## 2. Request for Logistical Assistance for Sports

This procedure covers the steps to be undertaken in providing logistic (sports materials/equipments for the barangay sports benefits and cash incentives for those bemedalled athletes and coaches competing national, regional and international sports competition) to requesting parties from the province of Oriental Mindoro. This service is available every Monday to Friday, 8:00am-5:00pm.

*(Sinasaklaw ng serbisyong ito ang pagbibigay ng mga materyales/kagamitang pang-sports para sa mga benepisyo sa palakasan ng barangay at mga pinansyal na insintibo para sa mga atleta at tagapagsanay sa palarong pambansa, rehiyonal at internasyonal na kompetisyon sa mga humihiling ng mga partido mula sa lalawigan ng Oriental Mindoro. Bukas ang serbisyong ito tuwing Lunes hanggang Biyernes sa ganap na 8:00 ng umaga hanggang 5:00 ng hapon.*

<b>Office or Division:</b>	Special Concerns Division
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C, G2G
<b>Who may avail:</b>	For provision of sports equipment: barangays of Oriental Mindoro For cash incentives: students and out-of-school youth and Oriental Mindoro athletes
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
<b>For requesting sports materials/ equipments</b> – Approved Letter Request addressed to the Governor or	Requesting client <i>Humihiling na kliyente</i>



<p>Resolution (1 original copy) <i>Para sa paghiling ng mga materyales/ kagamitang pang-sports – Naaprubahan na Kahilingan na naka-address sa Gobernador o Resolusyon (1 orihinal na kopya)</i></p> <p><b>For cash incentives</b> – Certification from PESS Supervisor that he/she is a MIMAROPARAA, Palarong Pambansa, Phil. National Game &amp; Batang Pinoy athletes and the authenticated Final Events Result ( 1 original copy each)  <i>Para sa pinansyal na insintibo – Sertipikasyon galing sa PESS Supervisor na siya ay atleta sa gaganaping kumpetisyon tulad ng MIMAROPARAA, Palarong Pambansa, Phil. National Games, Palarong Pambansa at Batang Pinoy at kasama ditto ang Napatunayang Pinal na Resulta ng naturang palakasan ( 1 orihinal na kopya bawat isa)</i></p>				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Sign in the client log book in the office <i>(Magpatala sa listahan ng opisina)</i>	1. Give the log book to the client <i>Patalain ang kliyente</i>	None <i>Wala</i>	1 min	CAA I
2. Submit Letter Request <i>(Isumite ang liham kahilingan)</i>	2. Receive the approved request <i>Tumanggap ng aprubadong kahilingan</i>  2.1. Interview requesting party <i>Kapanayamin ang kliyente</i>	None <i>Wala</i>	3 mins  5 mins  3 hours	CAA I  CAA I/ SGRO II  SGRO II / CAA I



	2.2. Prepare documents <i>Ihanda ang mga dokumento</i> 2.3. Release of logistical assistance or provision of technical assistance <i>Ibigay ang kahilingan</i>			
3. Receive requested assistance Tumanggap ng hiniling na tulong	Notify the clients regarding the provision of requested assistance <i>Ipaalam sa mga kliyente ang tungkol sa pagkakaloob ng hiniling na tulong</i>	None	5 minutes after the competition	
<b>TOTAL:</b>		None	3 hours and 14 minutes	

### 3. Request for Technical Assistance for Youth

This procedure covers the steps to be undertaken in providing technical assistance such as requesting resource person & other youth concerns) to requesting parties from the province of Oriental Mindoro. For Technical assistance desk, traditionally done through on the phone, conducted also online or chat and or face to face method. This service is available every Monday to Friday, 8:00am-5:00pm.

*Saklaw nito ang mga hakbang kaugnay sa pagbibigay ng teknikal na tulong tulad ng paghiling ng resource person at iba pang alalahanin ng kabataan) sa mga humihiling ng mga partido mula sa lalawigan ng Oriental Mindoro. Para sa Technical assistance desk, isinasagawa din online o chat at face to face na paraan. Bukas ang serbisyong ito tuwing Lunes hanggang Biyernes, 8:00 ng umaga hanggang 5:00 ng hapon.*



<b>Office or Division:</b>	Special Concerns Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	For youth technical assistance: out-of-school youth, students from age 15-30 years old and youth organizations.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Letter Request addressed to the Governor (1 original copy)		Requesting client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the client log book in the office <i>.Magpatala sa listahan ng opisina</i>	1. Give the log book to the client <i>Patalain ang kliyente</i>	None	1 min	YDA 1
2. Submit Letter Request <i>Isumite ang liham kahilingan</i>	2. Interview requesting party <i>Panayamin ang kliyente</i> 2.1 Provision of technical assistance <i>Ibigay ang kahilingan</i>	None	3 minutes	YDA 1 YDO II / YDO I  YDO II / YDO I
3. Receive requested assistance <i>Tumanggap ng hiniling na tulong</i>	3. Notify the clients regarding the provision of requested assistance <i>Ipaalam sa mga kliyente ang tungkol sa pagkakaloob ng hiniling na tulong</i>	None	5 minutes/ after the competition	
TOTAL		None	4 minutes and 5 minutes after	



## **GO – Special Concerns Division Internal Services**



## 1. Disbursement of Remuneration of Contractual Employees

This procedure covers the steps to be undertaken in providing money paid for their services as non-permanent employees of the office.

*Sinasaklaw nito ang mga hakbang sa pagbibigay ng perang binayaran para sa kanilang mga serbisyo bilang hindi permanenteng empleyado ng opisina .*

<b>Office or Division:</b>	Special Concerns Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G			
<b>Who may avail:</b>	Non-permanent employees under SCD			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Daily time record – 3 original copies			SCD	
2. Accomplishment report – 3 original copies			SCD	
3. Travel Order/ Locator Slip – 3 copies with PHRMO Authenticated photocopies			Employee	
4. Assumption of Duty (for first salary only) – 2 original copies, 1 photocopy			SCD	
5. Notarized Contract ( for first salary only) - 1 original copy, 2 authenticated copies			PGOM	
6. BIR Receipt (Annual Registration – P500.00 – 3 original copies			Bureau of Internal Revenue, Calapan	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit requirements	1. Collate requirements and prepare documentary requirements for the release of salaries	None	30 mins	CAA I - SCD
	1.1 Check payroll/ deductions	None	1 hour	CAA I - SCD



	1.2 Check availability of budget	None	15 mins	Budget Officer I - PBO
	1.3 Record transaction	None	30 mins	Local Treasury Operations Officer I/II - PTO
	1.4 Audit Payroll	None	1 day	Accountant I/II - OPA
	1.5 Approve payment/ release	None	4 hours	Provincial Administrator - PA
	1.6 Prepare cash advance	None	2 hours	Local Treasury Operations Officer I/II - PTO
2. Receive salary from PTO	Release salary	None	15 mins	Local Treasury Operations Officer I/II - PTO
TOTAL		NONE	2 days & 30 minutes	





# **Provincial Detention Center Management Services External Service**



## 1. Issuance of Certificate of Detention and Good Conduct Time Allowance (GCTA)

The Certificate of Detention is a document that confirms that a person is, or was, committed to the detention center and contains case-related, and some personal, information of a PDL and is issued only upon request in connection to a legal purpose during Monday to Friday, 8:00am to 5:00 pm.

<b>Office or Division:</b>	Provincial Detention Center Management Division	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2G – Government to Government	
<b>Type of Transaction:</b>	G2C – Government to Citizen	
<b>Who may avail:</b>	All	
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
	1. Office or Company ID (1 original)	Employer
	2. School ID (1 original)	School where one is a bonafide student
	3. GSIS UMID Card (1 original)	Government Service Insurance System
	4. SSS UMID card (1 original)	Social Security System
	5. Postal ID (1 original)	Philippine Postal Corporation
	6. TIN Card (1 original)	Bureau of Internal Revenue
	7. Driver's License (1 original)	Land Transportation Office
	8. Voter's ID (1 original)	Commission on Elections
	9. Passport (1 original)	Department of Foreign Affairs
	10. Licensed Professional ID (1 original)	Professional Regulation Commission
	11. OFW ID (1 original)	Department of Labor and Employment
	12. Philhealth ID (1 original)	Philippine Health Insurance Corporation
	13. Senior Citizen's ID (1 original)	Local Office of the Senior Citizen's Affair
	14. Solo Parent's ID (1 original)	Local Social Welfare and Development Office
	15. Barangay Certification with visitor's picture (1 original)	Office of the Barangay Chairman where one is a resident
	16. Letter Request (2 original copies)	Requesting Office or Personally-written
	17. Letter Request for GCTA (1 original)	Requesting Office (BUCOR & BJMP)



<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Wear face mask properly (covering nose and mouth)	1. Ensure that face mask is being worn properly	None	None	Security Desk 1  Prison Guard, PDCMD
2. Observe minimum of one-meter physical distancing when waiting in line	2. Ensure that the minimum one-meter physical distancing is being observed	None	None	Security Desk 1  Prison Guard, PDCMD
3. Register name, address, contact number purpose of visit and affix signature	3. Direct the visitor to the Visitor's Registry	None	1 minute	Security Desk 1  Prison Guard, PDCMD
4. Present ID and letter request	4. Check ID and receive letter request	None	1 minute	Security Desk 1  Prison Guard, PDCMD
5. Accomplish request slip	5. Give request slip	None	1 minute	Security Desk 1  Prison Guard, PDCMD
6. Enter and sit in the client's waiting area (within the first and second gates.	6. Advice client to wait in the client's waiting area, and forward the letter with request slip attached to the Administrative Section	None	1 minute	Security Desk 1  Prison Guard, PDCMD



7. Receive advice that request is granted but if not, will be given the reason for the denial	7. Give advice that request is granted but if not, will give the reason for the denial	None	1 minute	Prison Guard, PDCMD
8. Wait for the issuance of document, if request is granted but if denied, exit the waiting area after receiving reason for the denial	8. Advice client to wait for the issuance of document, if request is granted	None	20 minutes	Prison Guard, PDCMD
9. Receive document by acknowledging receipt thereof on the receiving copy and exit the waiting area	9. Give requested document and have the client acknowledge receipt thereof on the receiving copy	None	1 minute	Prison Guard, PDCMD
Total		None	26 minutes	



## 2. Issuance of Certificate of Discharge of Persons Deprived of Liberty

The Certificate of Discharge is a document given to a PDL to prove that he/she was legally released from our custody and is sign by a releasing officer during Monday-Friday.

<b>Office or Division:</b>	Provincial Detention Center Management Division	
<b>Classification:</b>	Complex	
<b>Type of Transaction:</b>	G2C – Government to Citizen	
<b>Who may avail:</b>	Person Deprived of Liberty (PDL)	
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>	
Decision/Resolution of the Judge (Original Copy and with Zeal	Respective Trial Court	
Certificate of No Pending Case Original Copy	Office of the Clerk of the Court	

<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Secure an original copy of Decision/Resolution of the Judge from Courts	1. Receive an original copy of Decision/Resolution from Courts	None	3 Days	Prison Guard, PDCMD
2. Bring an original copy of Decision/Resolution of the Judge from Courts to the office of PDCMD	2. Prepare and issue a Request for issuance of Certificate of No Pending Case.	None	10 minutes	Prison Guard, PDCMD



3. Receive a request for an issuance of Certificate of No Pending Case from PDCMD.	3. Receive an original copy of Certificate of No Pending Case from the Office of the Clerk of Court.	None	1 minute	Prison Guard, PDCMD
4. Bring an original copy of Certificate of No Pending Case from the Office of the Clerk of Court to PDCMD	4. Prepared a Released Order and took fingerprints of PDL	None	1 minute	Prison Guard, PDCMD
	4.1 Released Order Would be signed by an authorized Person	None	1 minute	OIC, PDCMD
5. Proceed to Client's waiting area and receive copy of Release Order.	5. Released Order and other documents will be given to PDL	None	1 minute	Prison Guard, PDCMD
6. PDL released.	6. Released Persons Deprived of Liberty (PDL) from our custody	None	1 minute	Prison Guard, PDCMD
Total	6	None	3 days and 15 minutes	



### 3. Issuance of Certificate of Detention and Good Conduct Time Allowance (GCTA)

The Certificate of Detention is a document that confirms that a person is, or was, committed to the detention center and contains case-related, and some personal, information of a PDL and is issued only upon request in connection to a legal purpose during Monday to Friday, 8:00am to 5:00 pm.

<b>Office or Division:</b>	Provincial Detention Center Management Division	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2G – Government to Government	
<b>Type of Transaction:</b>	G2C – Government to Citizen	
<b>Who may avail:</b>	All	
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
	18. Office or Company ID (1 original)	Employer
	19. School ID (1 original)	School where one is a bonafide student
	20. GSIS UMID Card (1 original)	Government Service Insurance System
	21. SSS UMID card (1 original)	Social Security System
	22. Postal ID (1 original)	Philippine Postal Corporation
	23. TIN Card (1 original)	Bureau of Internal Revenue
	24. Driver's License (1 original)	Land Transportation Office
	25. Voter's ID (1 original)	Commission on Elections
	26. Passport (1 original)	Department of Foreign Affairs
	27. Licensed Professional ID (1 original)	Professional Regulation Commission
	28. OFW ID (1 original)	Department of Labor and Employment
	29. Philhealth ID (1 original)	Philippine Health Insurance Corporation
	30. Senior Citizen's ID (1 original)	Local Office of the Senior Citizen's Affair
	31. Solo Parent's ID (1 original)	Local Social Welfare and Development Office
	32. Barangay Certification with visitor's picture (1 original)	Office of the Barangay Chairman where one is a resident
	33. Letter Request (2 original copies)	Requesting Office or Personally-written



34. Letter Request for GCTA (1 original)	Requesting Office (BUCOR & BJMP)
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CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Wear face mask properly (covering nose and mouth)	1. Ensure that face mask is being worn properly	None	None	Security Desk 1 Prison Guard, PDCMD
2. Observe minimum of one-meter physical distancing when waiting in line	2. Ensure that the minimum one-meter physical distancing is being observed	None	None	Security Desk 1 Prison Guard, PDCMD
3. Register name, address, contact number purpose of visit and affix signature	3. Direct the visitor to the Visitor's Registry	None	1 minute	Security Desk 1 Prison Guard, PDCMD
4. Present ID and letter request	4. Check ID and receive letter request	None	1 minute	Security Desk 1 Prison Guard, PDCMD
5. Accomplish request slip	5. Give request slip	None	1 minute	Security Desk 1 Prison Guard, PDCMD
6. Enter and sit in the client's waiting area (within the first and second gates).	6. Advise client to wait in the client's waiting area, and forward the letter with request slip attached to the Administrative Section	None	1 minute	Security Desk 1 Prison Guard, PDCMD





7. Receive advice that request is granted but if not, will be given the reason for the denial	7. Give advice that request is granted but if not, will give the reason for the denial	None	1 minute	Prison Guard, PDCMD
8. Wait for the issuance of document, if request is granted but if denied, exit the waiting area after receiving reason for the denial	8. Advice client to wait for the issuance of document, if request is granted	None	20 minutes	Prison Guard, PDCMD
9. Receive document by acknowledging receipt thereof on the receiving copy and exit the waiting area	9. Give requested document and have the client acknowledge receipt thereof on the receiving copy	None	1 minute	Prison Guard, PDCMD
Total		None	26 minutes	



**GOVERNOR'S OFFICE**  
**GSMAC**  
**(Galing at Serbisyo para sa Mindoreño Action  
Center)**  
**External Services**



## 1. AMBULANCE ASSISTANCE

PGOM through GSMAC provides Ambulance Assistance to citizens of Oriental Mindoro. Ambulance assistance is extended to clients within and outside the province. **Emergency cases are prioritized while less serious cases are usually scheduled, subject to availability of the ambulance.**

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1 Requests for Ambulance Assistance can be done either by: (1) calling the GSMAC Nurse hotline <b>09178022596</b> (Globe) or (2) through personal appearance at the GSMAC Office in the Provincial Capitol.	1. Accomplish a Request Slip by filling out the following basic information: Name of Patient, Name of Relative, Companion, Contact Number, Case, Pick-up Point, Drop off Point, Date and Time, name and contact numbers of the driver and other particulars,	None	5 minutes	Administrative Officer IV GSMAC-Head
		None	2 minutes	Administrative Officer IV GSMAC-Head
		None	1 minute	Administrative Officer IV GSMAC-Head



	<p>signed by GSMAC Head, Furnish a photocopy of the Request Slip to the relative/informant, in order to give communication access to the driver.</p> <p>1.1 Brief the client about the standard operating procedures and protocols in relation to the transfer, such as referrals, coordination and acceptance of hospitals, endorsement, stipulations in the MOA, which was signed by and between the Provincial Government and stakeholder</p>			
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	s, among others. 1.2 Give another photocopy of Request Slip to the driver for his reference and perusal with an attached Fuel Request Slip required to secure a Trip Ticket from the Governor's Office, while the last copy is kept for filing.			
	<b>Total:</b>	None	8 minutes	



## 2. ANTI-RABIES VACCINE ASSISTANCE

PGOM through GSMAC provides Anti-rabies Vaccine Assistance to citizens of Oriental Mindoro, in line with PSWDO's program that provides eligible clients financial or material assistance.

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription and Schedule of Injection		Hospital/Clinic		
1 Photocopy of Prescription and Schedule of Injection		Client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Give the Prescription and Schedule of Injection to the Information Desk which contain client's name, age, sex and address of the patient, including the date, name and signature & license/PTR number of the doctor.	1. Check if the schedule is either 3rd or 4th dose and call if the vaccine is available in partner pharmacy, after checking Information Sheet, with vital information about the client and patient such as name, age, sex, address, control number and contact number, date & time of arrival.	None	2 minutes	Administrative Officer IV GSMAC-Head
	1.1 After accomplishing the information sheet, the	None	2 minutes	Administrative Officer IV GSMAC-Head



	client will be endorsed to PSWDO representative for interview.			
2. Proceed to PSWDO desk for interview	2. PSWDO associate will interview the client and encode information into the PSWDO database, then will issue Certificate of Eligibility	None	5 minutes	PSWDO Officer
2. Proceed to waiting area.	3. Prepare Guarantee Letter (GL), to be signed by GSMAC Head. For authenticity, stamp GSMAC24/7 logo on all pages of the documents.	None	2 minutes	Administrative Officer IV GSMAC-Head
3. Receive the Guarantee Letter together with their Original Copy of Prescription and Schedule of Injection	4. Check the completeness and correctness of the documents then release original copies of GL and Prescription and Schedule of Injection to the client and instruct them from which affiliated pharmacy to claim the vaccine.	None	1 minute	Administrative Officer IV GSMAC-Head
4. Answer a Digital Satisfaction Survey Form. The	5. Through Digital encoding, GSMAC will	None	3 minutes	Administrative Officer IV GSMAC-Head



clients will rate the service rendered by GSMAC to them and state their remarks, complaints or suggestion on this form.	receive the accomplished Satisfaction Survey Form from the client and consolidate the same.			
	<b>Total:</b>	None	15 minutes	





### 3. BLOOD SCREENING ASSISTANCE

PGOM provides assistance through blood screening to citizens of Oriental Mindoro, in cooperation with the Oriental Mindoro Blood Council (OMBC) and Oriental Mindoro Blood Bank (OMBB).

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Blood Request Form (original copy)		Hospital		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present to the Information Desk the Blood Request Form from the hospital. Including one photocopy of the same. (Clients from outside the province may also avail blood assistance. Their relative may present a printed copy of the picture of the Blood Request Form from the hospital.)	1. Accomplish Information Sheet, with vital information about the client and patient such as name, age, sex, address, control number and contact number, date & time of arrival.	None	2 minutes	Administrative Officer IV GSMAC-Head
	1.1 Check and evaluate the eligibility of the client for Blood Screening Assistance. Each client/patient is entitled for only one (1) assistance within one month, and can only acquire the next assistance after 30 days.	None	2 minutes	Administrative Officer IV GSMAC-Head



	After verifying, the client will be endorsed to PSWDO representative for interview			
2. Proceed to PSWDO desk for interview	2. PSWDO associate will interview the client and encode information into the PSWDO database, then will issue Certificate of Eligibility	None	5 minutes	PSWDO Officer
3. Proceed to waiting area.	3. Prepare Guarantee Letter (GL), to be signed by GSMAC Head. For authenticity, stamp GSMAC24/7 logo on all pages of the documents.	None	3 minutes	Administrative Officer IV GSMAC-Head
3. Receive the Guarantee Letter	4. Check the completeness and correctness of the documents then release original copies of GL and Blood Request Form to the client.	None	1 minute	Administrative Officer IV GSMAC-Head
4. Answer a Digital Satisfaction Survey Form. The clients will rate the service rendered by GSMAC to them and state their remarks, complaints or suggestion on this form.	5. Through Digital encoding, GSMAC will receive the accomplished Satisfaction Survey Form from the client and consolidate the same.	None	3 minutes	Administrative Officer IV GSMAC-Head
	<b>Total:</b>	None	16 minutes	



## 4. BURIAL ASSISTANCE

PGOM through GSMAC provides burial assistance to the immediate family member/s of the deceased within one month after death.

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Certificate of Death (1 Photocopy)		Municipal / City Registrar		
Funeral Contract (1 Photocopy)		Funeral Home/Service		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present to the Information Desk the Death Certificate and Funeral Contract)	1. Accomplish Information Sheet, with vital information about the client and patient such as name, age, sex, address, control number and contact number, date & time of arrival.	None	2 minutes	Administrative Officer IV GSMAC-Head
	1.1 The client will be endorsed to PSWDO representative for interview	None	1 minute	Administrative Officer IV GSMAC-Head
2. Proceed to PSWDO desk for interview	2. PSWDO associate will interview the client and encode	None	5 minutes	PSWDO Officer



	information into the PSWDO database, then will issue Certificate of Eligibility			
3. Proceed to waiting area.	3. Prepare Guarantee Letter (GL), to be signed by GSMAC Head. For authenticity, stamp GSMAC24/7 logo on all pages of the documents.	None	3 minutes	Administrative Officer IV GSMAC-Head
4. Receive the Guarantee Letter	4. Check the completeness and correctness of the documents then release original copies of GL and Blood Request Form to the client.	None	1 minute	Administrative Officer IV GSMAC-Head
5. Answer a Digital Satisfaction Survey Form. The clients will rate the service rendered by GSMAC to them and state their remarks, complaints or suggestion on this form.	5. Through Digital encoding, GSMAC will receive the accomplished Satisfaction Survey Form from the client and consolidate the same.	None	3 minutes	Administrative Officer IV GSMAC-Head
	<b>Total:</b>	None	15 minutes	



## 5. HOSPITAL BILL ASSISTANCE

PGOM through GSMAC provides Hospital Bill Assistance to citizens of Oriental Mindoro, in line with PSWDO's program that provides eligible clients financial or material assistance.

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Bill (1 original copy)		Hospital		
Medical Certificate (1 original copy)		Hospital		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Give the hospital bill and medical certificate to the Information Desk.	1. Accomplish Information Sheet, with vital information about the client and patient such as name, age, sex, address, control number and contact number, date & time of arrival.	None	2 minutes	Administrative Officer IV GSMAC-Head
	1.1 Check and evaluate	None	2 minute	Administrative Officer IV GSMAC-Head



	<p>the eligibility of the client for Hospital Bill Assistance. Each client/patient is entitled for only one (1) assistance within one month, and can only acquire the next assistance after 30 days. After verifying, the client will be endorsed to PSWDO representative for interview</p>			
2.Proceed to PSWDO desk for interview	2. PSWDO associate will interview the client and encode information into the PSWDO database, then will	None	5 minutes	PSWDO Officer



	issue Certificate of Eligibility			
3. Proceed to waiting area.	3. If the hospital bill is considerably big, the client is given an Endorsement Letter to PCSO, DSWD, and Office of Representative to augment funds to settle the bill. 3.1 Prepare Guarantee Letter (GL), to be signed by GSMAC Head. For authenticity, stamp GSMAC24 /7 logo on all pages of the documents.	None  None	3 minutes  3 minutes	Administrative Officer IV GSMAC-Head  Administrative Officer IV GSMAC-Head
4. Receive the Guarantee Letter	4. Check the completeness and correctness of the	None	1 minute	Administrative Officer IV GSMAC-Head



	documents then release original copies of GL to the client. The client must present the GL to the specified hospital.			
5. Answer a Digital Satisfaction Survey Form. The clients will rate the service rendered by GSMAC to them and state their remarks, complaints or suggestion on this form.	5. Through Digital encoding, GSMAC will receive the accomplished Satisfaction Survey Form from the client and consolidate the same.	None	3 minutes	Administrative Officer IV GSMAC-Head
	<b>Total:</b>	None	19 minutes	





## 6. LABORATORY EXAMINATION AND DIAGNOSTIC PROCEDURE

**ASSISTANCE** PGOM through GSMAC provides Laboratory Examination and Diagnostic Procedure Assistance to citizens of Oriental Mindoro, in line with PSWDO's program that provides eligible clients financial or material assistance.

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Laboratory Request Form (original copy)		Hospital/Clinic		
2 Photocopies of Laboratory Request Form		Client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present to the Information Desk the Laboratory Request Form from the attending physician, which contains specific procedure or examination to be performed	1. Accomplish Information Sheet, with vital information about the client and patient such as name, age, sex, address, control number and contact number, date & time of arrival.	None	2 minutes	Administrative Officer IV GSMAC-Head
	1.1 Check and evaluate the eligibility of the client for Laboratory Examination and Diagnostic Procedure Assistance. Each client/patient is entitled for only one (1)	None	2 minutes	Administrative Officer IV GSMAC-Head



	<p>assistance within one month, and can only acquire the next assistance after 30 days. After verifying, the client will be endorsed to PSWDO representative for interview</p>			
2. Proceed to PSWDO desk for interview	<p>2. PSWDO associate will interview the client and encode information into the PSWDO database, then will issue Certificate of Eligibility</p>	None	5 minutes	PSWDO Officer
3. Proceed to waiting area.	<p>3. Prepare Guarantee Letter (GL), to be signed by GSMAC Head. For authenticity, stamp GSMAC24/7 logo on all pages of the documents.</p>	None	3 minutes	Administrative Officer IV GSMAC-Head
4. Receive the Guarantee Letter	<p>4. Check the completeness and correctness of the documents then release original copies of GL and Laboratory Request Form to the client.</p>	None	1 minute	Administrative Officer IV GSMAC-Head
5. Answer a Digital Satisfaction Survey Form. The clients will rate the service rendered by GSMAC to them and state	<p>5. Through Digital encoding, GSMAC will receive the accomplished Satisfaction Survey Form from the client and consolidate the same.</p>	None	3 minutes	Administrative Officer IV GSMAC-Head



their remarks, complaints or suggestion on this form.				
	<b>Total:</b>	None	16 minutes	



## 7. MEDICINE ASSISTANCE

PGOM through GSMAC provides Medicine Assistance to citizens of Oriental Mindoro, in line with PSWDO's program that provides eligible clients financial or material assistance.

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription of Medicines (latest original copy)		Hospital/Clinic		
2 Photocopies of prescription		Client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Give the Prescription of Medicines to the Information Desk which contains client's name, age, sex and address of the patient, including the date, name and signature & license/PTR number of the doctor	1. Accomplish Information Sheet, with vital information about the client and patient such as name, age, sex, address, control number and contact number, date & time of arrival.	None	2minutes	Administrative Officer IV GSMAC-Head
	1.1 Check and evaluate the eligibility of the client for	None	2 minute	Administrative Officer IV GSMAC-Head
		None	2 minute	Administrative Officer IV GSMAC-Head



	<p>medicine assistance. Each client/patient is entitled for only one (1) assistance within one month, and can only acquire the next assistance after 30 days. After verifying, the client will be endorsed to PSWDO representative for interview.</p> <p>1.2 Call partner pharmacies as to the availability of the prescribed medicines.</p>			
2. Proceed to PSWDO desk for interview	2. PSWDO associate will interview the client and encode information into the PSWDO database, then will issue Certificate of Eligibility	None	5 minutes	PSWDO Officer



<p>3. Proceed to waiting area.</p>	<p>3. Check the price of prescribed medicines from the list of medicines, provided by affiliated pharmacies. Compute the amount of assistance to be given</p> <p>1.1 Prepare Guarantee Letter (GL), to be signed GSMAC Head. For authenticity, stamp GSMAC24/7 logo on all pages of the documents.</p>	<p>None</p> <p>None</p>	<p>3 minutes</p> <p>2 minutes</p>	<p>Administrative Officer IV GSMAC-Head</p> <p>Administrative Officer IV GSMAC-Head</p>
<p>4. Receive the Guarantee letter together with the original and 1 photocopy of prescription</p>	<p>4. Check the completeness and correctness of the documents then release original copies of GL and Prescription of Medicines to the client and instruct them from</p>	<p>None</p>	<p>1 minute</p>	<p>Administrative Officer IV GSMAC-Head</p>



	which affiliated pharmacy to claim the medicines.			
5. Answer a Digital Satisfaction Survey Form. The clients will rate the service rendered by GSMAC to them and state their remarks, complaints or suggestion on this form.	5. Through Digital encoding, GSMAC will receive the accomplished Satisfaction Survey Form from the client and consolidate the same.	None	3 minutes	Administrative Officer IV GSMAC-Head
	<b>Total:</b>	None	20 minutes	



## 8. TRANSFER OF CADAVER ASSISTANCE

PGOM through GSMAC provides Transfer of Cadaver Assistance to citizens of Oriental Mindoro, Cadavers from mainland Luzon are picked up at Calapan Port. Cadavers within the province are transferred from point to point.

<b>Office or Division:</b>	G.O - GSMAC			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Requests for Transfer of Cadaver can be done either by: (1) calling the GSMAC Cadaver service Driver 09483784010 (SMART) or (2) through personal appearance at the GSMAC Office in the Provincial Capitol.	1. Check availability of the vehicle then prepare a Transfer of Cadaver Form, indicating the date, name of the deceased, name of relative, contact number, pick-up and drop-off points, cause	None	4 minutes	Administrative Officer IV GSMAC-Head
		None	1 minute	Administrative Officer IV GSMAC-Head





	of death, and name of the driver, signed by GSMAC Head and PSAC Head. 1.1 Brief the driver on the details of the cadaver to be picked up.			
	<b>Total:</b>	None	5 minutes	



# **PROVINCIAL HEALTH OFFICE**

## **External Services**



## 1. Adolescent Health Development Program

Provides instructional, educational and communication materials.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office and High Schools with trained Peer Educators			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request Slip form (1 original copy)		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the accomplished request form	1. Receive request form for recording and proper filing	none	5 minutes	Midwife II  AO III Supply Officer
	1.1. Review requested IEC materials and prepare Requisition and Issue Slip (RIS)		5 minutes	
	1.2. Prepare requested IEC materials		15 minutes	
2. Review, check and receive IEC materials and signs the RIS	2. Issue requested IEC materials and give original copy of RIS	none	5 minutes	AO III Supply Officer
	2.1. Keep the duplicate copy of RIS for filing		2 minutes	
<b>TOTAL:</b>		None	32 minutes	



## 2. Disease Surveillance Program / Emerging and Re-emerging Diseases

Ensuring the availability and provision of timely health service of outbreaks of emerging and re-emerging diseases.

Availability of the service: Monday to Sunday (24/7)

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office and hospital facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<ol style="list-style-type: none"> <li>1. Case investigation form (1 original copy)</li> <li>2. Laboratory Test Request Form (1 original copy)</li> <li>3. Line List Form (1 original copy)</li> </ol>		PHO Program Coordinator		
<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 accomplished Case Investigation Form (CIF)	<ol style="list-style-type: none"> <li>1. Check submitted CIF for reported cases from each Disease Surveillance Unit               <ol style="list-style-type: none"> <li>1.1. Compare cases from previous and present cases / Analysis of data</li> <li>1.2. Inform concerned MHO/MESU re: increasing amount of cases / increase of new cases</li> </ol> </li> </ol>	none	10 min  1 hour  15 mins	Nurse II



2. Submit CIF and Line List together with specimen collected	<b>2. Receive specimens</b> <b>2.1. Check CIF if properly filled out</b> <b>2.2. Check specimens if properly labeled and stored in transport box</b> <b>2.3. Transport specimen for RT-PCR</b>	none	15 mins  Daily before 2:00 pm	RadTech II OMPH
<b>TOTAL:</b>		None	1 hour and 40 inutes	

### 3. Drug Abuse Program

Provides drug rehabilitation and recovery services.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm)

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Invitation Letter for drug abuse awareness services such as symposium (1 original copy)		PHO Officer		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the invitation letter	<b>1. Receive invitation letter</b> <b>1.1. Prepare Travel Order</b> <b>1.2. Prepare requested IEC materials</b> <b>1.3. Conduct symposium</b>	none	5 minutes  5 minutes  3 hours  2 hours	RN Program Coordinator/PD O II - PDOHO
<b>TOTAL:</b>		None	5 hours and 10 minutes	



<i>Other drug abuse services:</i>				
<b>1. Inquire about the program via phone calls, social media page message, personal messages and/or walk ins</b>	<b>1. Receive queries either thru phone calls, text or personal messages on messenger with noted time and date.</b> <b>1.1. Provide guidance and assistance on the particular inquiry to the Persons Who Uses Drugs (PWUDs)</b> <b>1.2. Ensure that the client understand with satisfaction achieved.</b>	none	10 minutes	RN Program Coordinator/PD O II - PDOHO
			10 minutes	RPm Psychometrician
			10 minutes	RPm Psychometrician  RSW Social Welfare Officer I  Social Welfare Aide  Social Welfare Aide
<b>2. Attend Initial Intake Interview for Persons Who Uses Drugs (PWUDs)</b>	<b>2. Provides Consent Form and explain the provision of the service</b> <b>2.1. Conduct Screening and Assessment of Substance Use</b>	none	15 minutes	RN Program Coordinator/PD O II - PDOHO  RPm Psychometrician  RPm Psychometrician  RSW Social Welfare Officer I
			45 minutes	Social Welfare Aide  Social Welfare Aide
<b>3. Attend the orientation of the program</b>	<b>3. Delivers and facilitate the orientation of the program</b>	none		RN Program Coordinator/PD O II - PDOHO



			2 hours (by schedule)	RPm Psychometrician  RPm RSW Social Welfare Officer I  Social Welfare Aide  Social Welfare Aide
4. Attend the lectures/sessions in their assigned schedule day	<b>4.</b> Provides and deliver lectures in classified program to the clients based on their risk level: - Katatagan, Kalusugan at Damayan ng Komunidad (KKDK) <i>for moderate risk clients</i> - General Intervention on Health and Wellbeing Awareness <i>for low-risk clients</i>  <b>4.1.</b> Provides and deliver Family Education with client's family members	none	3 hours (by schedule)         3 hours   (by schedule)	RN Program Coordinator/PD O II - PDOHO  RPm Psychometrician  RPm Psychometrician  RSW Social Welfare Officer I  Social Welfare Aide  Social Welfare Aide
	<b>TOTAL:</b>	None	1 day, 1 hour and 30 mins	
<i>Other drug abuse services:</i>				



<p><b>1. Attend Drug Dependency Examination for court mandated clients</b></p>	<p><b>1. Provides and explain the drug dependency examination form</b>  <b>1.1. Conduct Interview and Assessment of Drug Dependency</b></p>	<p>none</p> <p>none</p>	<p>10 minutes</p> <p>1 hour</p>	<p>RN Program Coordinator/PD O II - PDOHO</p> <p>RPm Psychometrician</p> <p>RPm Psychometrician</p> <p>RSW Social Welfare Officer I</p> <p>Social Welfare Aide</p> <p>Social Welfare Aide</p> <p>MD, FPPA Psychiatrist</p>
<p><b>2. Attend the scheduled orientation of the program</b></p>	<p><b>2. Delivers and facilitate the orientation program</b></p>	<p>none</p>	<p>2 hours (by schedule)</p>	<p>RN Program Coordinator/PD O II - PDOHO</p> <p>RPm Psychometrician</p> <p>RPm Psychometrician</p> <p>RSW Social Welfare Officer I</p> <p>Social Welfare Aide</p> <p>Social Welfare Aide</p>





<p><b>3.</b> Attend the lectures/sessions in their assigned schedule day</p>	<p><b>3.</b> Provides and deliver lectures in Matrix Intensive Outpatient Program (MIOP)</p>	<p>none</p>	<p>3 hours (by schedule)</p>	<p>RN Program Coordinator/PD O II - PDOHO</p> <p>RPm Psychometrician</p> <p>RPm Psychometrician</p> <p>RSW Social Welfare Officer I</p> <p>Social Welfare Aide</p> <p>Social Welfare Aide</p>
<p><b>4.</b> Attend Individual/Group Counseling</p>	<p><b>4.</b> Conducts and provides Individual/Group Counseling</p>	<p>none</p>	<p>1 hour</p>	<p>RPm Psychometrician</p> <p>RPm Psychometrician</p> <p>RSW Social Welfare Officer I</p> <p>Social Welfare Aide</p> <p>Social Welfare Aide</p>
<p><b>TOTAL:</b></p>		<p>None</p>	<p>7 hours and 10 mins</p>	



#### 4. Environmental Health and Sanitation Program

Ensuring all households have access to potable water and approved type of toilet for every house including community toilet and provide technical assistance.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office, program managers and barangays			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Colilert Test Kits 1. Requisition Slip (1 original copy) 2. Inventory Form (1 original copy)		PHO Program Coordinator		
For toilet bowls: 1. Request letter (1 original copy) 2. Barangay resolution (1 original copy) 3. List of beneficiaries signed by RSI & MHO (1 original copy)		Barangay Hall		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>For Provision of PHC bottles:</i>				
1. Present the accomplished/ approved request form and inventory form	1. Receive the request form and inventory form 1.1. Prepare and allocate colilert test kits needed	none	5 minutes  5 minutes	Inspector I  Sanitary Inspector IV  MedTech II  MedTech II
Review, check and receive supplies	Issue/release requested colilert test kits and have it signed	none	5 minutes	Sanitary Inspector I
<b>TOTAL:</b>		None	15 minutes	



<i>Submit the approved request letter barangay resolution and list of beneficiaries</i>				
1. Submit the request letter, barangay resolution and list of beneficiaries	1. Receive all the necessary requirements	none	5 mins	Sanitary Inspector I
	1.1. Prepare and allocate number of toilet bowls needed per barangay		20 mins	
2. Sign Requisition and Issuance Slip, Certificate of Compliance and MOA of compliance	2. Issue/release the requested toilet bowls and file all signed documents	none	45 mins	Sanitary Inspector IV
<b>TOTAL:</b>		None	1 hour and 10 minutes	

## 5. Expanded Program on Immunization (EPI)

Provides vaccines and advocacy materials for expanded immunization program.  
Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm)

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office and hospital facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Request form, Inventory Form (1 original copy each) 2. Transport box/carrier and cold dogs		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the accomplished request form	1. Receive/review request form slip and inventory form	none	10 minutes	Midwife IV



and inventory form	<b>1.1.</b> Prepare requisition and issuance slip together with requested vaccines and advocacy materials. <b>1.2.</b> Check the appropriate transport box for the vaccine 3		30 mins	Midwife II Pharmacy Aide
2. Review, check and receive supplies and commodities	<b>2.</b> Issue/release requested vaccine and give original copy of RIS	none	5 minutes	AO III Supply Officer I
3. Submit letter request for technical assistance	<b>3.</b> Receive letter request and prepare travel order <b>3.1.</b> Provide needed technical assistance	none	5 minutes 10 minutes	Midwife IV Midwife II
<b>TOTAL:</b>		None	1 hour	

## 6. Family Planning Program

Provide family planning commodities and supplies and technical assistance for responsible parenthood and population management.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2C, G2G	
<b>Who may avail:</b>	All Municipal Health Office and hospital facilities	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
1.Requisition Slip 2. Inventory form 3.Request for technical assistance (1 original copy each)		Program Coordinator assigned at the PHO.



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the accomplished request form	1. Receive requisition slip	none	5 mins	Nurse
2. Present Inventory Form	2. Prepare requested/allocated supplies and commodities	none	15 mins	Nurse
3. Review, check and receive supplies and commodities	3. Issue/release requested/allocated commodities and supplies and give original copy of RIS	none	10 mins	Nurse
4. Submit letter request for technical assistance	4. Receive letter request and prepare travel order 4.1. Provide needed technical assistance	none	5 mins 30 mins	Nurse
<b>TOTAL:</b>		None	1 hour and 5 minutes	

## 7. Food and Water-Borne Diseases-Prevention & Control Program

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2C, G2G	
<b>Who may avail:</b>	All	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Allocation of commodities and supplies Request Form		PHO Officer



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the accomplished request form	1. Receive requisition slip	none	5 min	MedTech II
2. Present inventory form	2. Prepare requested/allocated supplies and commodities	none	15 min	MedTech II
3. Review, check and receive supplies and commodities	3. Issue/release requested/allocated commodities and supplies. 3.1. Give original copy of RIS to the client	none	10 mins	MedTech II
	<b>TOTAL:</b>	None	30 minutes	

## 8. Health and Education Promotion

Provides instructional, educational and communication materials.

Availability of the service: Monday to Friday (except holidays), 8am to 5pm.

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All Municipal Health Office and hospital facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request Slip form (1 original copy)		PHO Program Coordinator		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



1. Present the accomplished request form	1.1 Receive request form for recording and proper filing	None	5 minutes	Nutritionist Dietitian II
	1.2 Review requested IEC materials and prepare Requisition and Issue Slip (RIS)		5 minutes	AO III Supply Officer
	1.3 Prepare requested IEC materials		30 minutes	
2. Review, check and receive IEC materials and signs the RIS	2.1 Issue requested/allocated IEC materials and give original copy of RIS	None	5 minutes	AO III Supply Officer
	2.2 Keep duplicate copy of RIS for filing		2 minutes	
<b>TOTAL:</b>		None	47 mins	

## 9. Leprosy Control Program

Early and accurate diagnosis, case management with prevention, management of disability and public education to dispel the stigma of leprosy.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office and leprosy patients referred by doctors			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Doctor's referral/request for SSS and Doctor's prescription (1 original copy)		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



<p><b>1. Submit Doctor's Referral/Request for Slit-Skin Smear (SSS) &amp; Doctor's prescription</b></p>	<p><b>1. Receive request and doctor's prescription from client.</b>  <b>1.1. Interview patient and fills up the National Leprosy Control Program Patient Record Card.</b>  <b>1.2. Does Nerve Function Assessment, Voluntary Muscle Testing, Counts the skin patches &amp; does body charting of skin areas with patches and lesions.</b>  <b>1.3. Choose areas for Slit-Skin Smear (SSS) with at least 3 smears per patient</b>  <b>1.4. Counselling of patients on management &amp; self-care.</b>  <b>1.5. Provision of Leprosy Combi-MDT medicine, sulfur soap, Sodium Ascorbate, Vitamin B Complex, Ferrous Sulfate and other drugs and ointments to the patient.</b>  <b>1.6. Proper endorsement the new Leprosy patient to their Rural Health Unit</b></p>	<p>none</p>	<p>1 hour</p>	<p>MedTech II</p>
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	through calls and message			
<b>2. Client 2. Family contact tracing</b> (Depend on number of accompanying family members).	<b>2.</b> Inspects the skin per family member present at the PHO. For family members with NO skin patches or lesion; skip step no.7 <b>2.1.</b> For family members with skin patches/ lesion; performs steps no. 1.2 – 1.6	none  none	10 minutes  1 hour/ Suspected patient	MedTech II
For allocation of commodities and supplies				
<b>1. Present the accomplished request form</b>	<b>1.</b> Receive requisition slip	none	5 minutes	MedTech II
<b>2. Present inventory form</b>	<b>2.</b> Prepare requested/allocated supplies and commodities	none	15 minutes	MedTech II
<b>3. Review, check and receive supplies and commodities</b>	<b>3.</b> Issue/release requested/allocated commodities and supplies. <b>3.1.</b> Give original copy of RIS to the client	none	10 minutes	MedTech II
<b>TOTAL:</b>		None	2 hours and 40 minutes	



## 10. Mental Health Program

Provides mental health services.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Invitation Letter for mental health services such as symposium (1 original copy)		PHO Officer		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the invitation letter	1. Receive invitation letter	none	5 minutes	RN Program Coordinator/PD O II - PDOHO
	1.1. Prepare Travel Order		5 minutes	
	1.2. Prepare requested IEC materials		3 hours	
	1.3. Conduct symposium		2 hours	
<b>TOTAL:</b>		None	5 hours and 10 minutes	
<i>Other mental health services:</i>				
1. Inquire about the program via phone calls, social media page message, personal messages and/or walk ins	1. Receive queries either thru phone calls, text or personal messages on messenger with noted time and date. 1.1. Provide guidance and assistance on the particular inquiry to the Mental Health	none	10 minutes	RPm Psychometrician
			10 minutes	RPm Psychometrician
			10 minutes	RPm Psychometrician
			10 minutes	RPm Psychometrician
				RSW Social Welfare Officer I



	<b>1.2.</b> Ensure that the client understand with satisfaction achieved.			Social Welfare Aide
<b>2.</b> Attend the Initial Intake Interview	<b>2.</b> Provides Consent Form and explain the provision of the mental health services <b>2.1.</b> Conduct Mental Health Intake Interview	none	15 minutes  45 minutes	Psychometrician  Social Welfare Officer I  Social Welfare Aide
<b>3.</b> Consult with the Psychiatrist	<b>3.</b> Conduct Initial check-up/Follow-up check up with Psychiatrist <b>3.1.</b> Issuance of Medication Prescription and distribution of medications ( <i>if available</i> )	none	3 hours (by schedule)  15 minutes	Psychiatrist
<b>TOTAL:</b>		None	4 hours and 45 minutes	



## 11. Non-Communicable Disease Program

Management of non-communicable diseases

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office and hospital facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Invitation Letter for technical assistance (1 original copy)		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the invitation letter	1. Receive invitation letter 1.1. Prepare Travel Order and the IECs 1.2. Conduct Technical Assistance by group and individual mentoring	none	10 minutes 5 minutes 2 hours	Rudeline U. Almeda Dietitian II
<b>TOTAL:</b>		None	2 hours and 15 minutes	

## 12. Nutrition Program

Provision of Nutrition Micronutrient Powder (MNP) and other supplies

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES
<b>Classification:</b>	Highly Technical
<b>Type of Transaction:</b>	G2C, G2G



<b>Who may avail:</b>	All Municipal Health Office and hospital facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request form (1 original copy)		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the accomplished request form	1. Receive request form	none	3 mins	Mylene T. Lastimoza Nutritionist Dietician II
2. Sign RIS and receive supplies and commodities requested	2. Allocate MNP based on OPT result and deworming medicines	none	20 mins	Ana Lualhati M. Hernandez Nutritionist Dietician II
	2.1. Issue micronutrients and deworming medicines		20 mins	
<b>TOTAL:</b>		None	43 minutes	

### 13. Oral Health Program

Provision of guidance and assistance for oral health care  
 Availability of the service: Monday to Friday (except holidays),  
 8:00am-5:00pm (Saturday – if requested)

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2C, G2G	
<b>Who may avail:</b>	All	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
1. Patient Information form (1 original copy)		Dentist detailed at different municipalities



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<i>For dental procedures:</i>				
1. Proceed to triage and accomplish the patient's information form	1. Provide alcohol and logbook to the client. Check the vital signs of the patients. 1.1. Priority number will be issued by the Dental Aide. 1.2. Wait until the number is called 1.3. When the number is called, proceed to the Dental Clinic for the actual and necessary procedures 1.4. Dentist will give prescription on the proper intake of medicines and instructions	none	60 minutes	Dentist II (Baco)  Dentist II (Baco)  Dentist II (Socorro)  Dentist II (Bansud)  Dentist II (PHO-Dental Clinic)  Dentist II (Bahay Kalinga)
<i>Request for Technical Assistance</i>				
1. Present the request letter	1. Receive letter request 1.1. Prepare travel order 1.2. Provide technical assistance needed	none	30 minutes	Dentist III
<i>For provision of supplies:</i>				
1. Present the accomplished request form	1. Review and prepare dental supplies as per allocation 1.1. Issue and provide dental supplies to all Public Health dentist as per allocation	none	30 mins.	Dentist III  AO III Supply Officer



2. Signed RIS and receive supplies and commodities requested	2. Prepare requisition and issue slip (RIS) 2.1. Issue original copy of RIS to the client	none	10 mins.	AO III Supply Officer
<b>TOTAL:</b>		None	2 hours and 10 minutes	

## 14. Rabies Control Program

Setting-up of Animal Bite Centers in strategic health facilities and the provision Anti-Rabies Vaccine/RIG Vaccine

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Animal Bite Treatment Centers (ABTC)			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
For request for vaccines: 1. Request Form (1 original copy) For setting-up of Animal Bite Center: Letter of Intent (1 original copy) 2. Self-Assessment Form (1 original copy)		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>For request for vaccines: From PHO to Local Health Facilitators</i>				



1. Present the accomplished Request Form	<b>1. Receive Requisition Slip form</b> <b>1.1. Prepare and pack requested vaccines</b> Prepare Requisition and Issuance Slip (RIS) <b>1.2. File and enter to stock ledger card for inventory</b>	none	30 minutes	Pharmacist III
2. Receive the vaccine and sign the RIS	<b>2. Prepare and pack in cold transport box vaccine carrier</b> <b>2.1. Release the vaccine to the client or deliver too health facilities</b>	none	30 mins	Pharmacist III
<b>TOTAL:</b>		none	1 hour	
<i>For setting-up of Animal Bite Center:</i>				
1. Present the accomplished Letter of Intent (LOI) and Self-Assessment Form (SAF)	<b>1. Receive LOI and SAF</b> <b>1.1. Conduct Technical Assistance through site inspection of compliance to DOH standards</b> <b>1.2. Submit Assessment Form with the LOI and SAF to CHD IV-B by email or courier</b>	none	30 minutes  2 hours (by schedule)  10 mins	Pharmacist III
<b>TOTAL:</b>		None	2 hours and 40 minutes	





## 15. Supply Office Management

To render fast and accurate services to all clientele.

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	Municipal Health Officer			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
For drugs, medicines and medical supplies		Municipal Health Officer		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Authorization Letter or copy of approval request conversations	1. Prepare request and issue slip per allocation; per program coordinator	none	15 min per program	AO III Supply Officer
	1.1. Prepare 1 pack items/ commodities according to allocation	none	20 min per MHO	
2. Receive allocated request drugs and medicines	2. Issue/release allocated/requested drugs and medicines; Medical Supplies to MHO's and walk in clients	None	30 min per MHO	AO III Supply Officer
	2.1. Enter in client's logbook upon issuances of commodities	none	20 min per MHO	
3. Receive RIS	3. Issue original copy of RIS to recipient	none	35 min per program	AO III Supply Officer
<b>TOTAL:</b>			2 hours and 20 minutes	



## 16. TB Program

Prevention and control of tuberculosis, sexually transmitted diseases and HIV/AIDS infections

Availability of the service: Monday to Friday (except holidays), 8:00am-5:00pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office and hospital facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
For application for TB Program: 1. Letter of Intent (1 original copy) 2. Checklist/Assessment Form (1 original copy) For provision of drugs and medicines and other commodities: 1. Request Form slip (1 original copy) Transport box		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>Provision of Technical Assistant for renewal of TB DOTS Facilities:</i>				
1. Present the accomplished Letter of Intent (LOI) form	1. Receive request from client 1.1. Review LOI	none	5 minutes 10 minutes	MedTech II
2. Provision of TB Medicines and other laboratory supplies.	2. Review and Prepare allocation of supplies	none	15 minutes	MedTech II AO III Supply Officer
3. Review, check and receive supplies and commodities	3. Issue/ release requested and supplies. 3.1 Give original copy of RIS to the client.	none	10 minutes	AO III Supply Officer
<b>TOTAL:</b>		None	40 minutes	



## 17. Vector Borne Diseases (VBD) Control Program

Prevention and integrated management of vector-borne diseases

Availability of the service: Monday to Friday (except holidays), 8am to 5pm

<b>Office or Division:</b>	PROVINCIAL HEALTH OFFICE-PUBLIC HEALTH SERVICES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	All Municipal Health Office			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Requisition Slip (1 original copy) 2. Inventory Form (1 original copy)		PHO Program Coordinator		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the accomplished requisition slip and inventory form	1. Receive the requisition slip and inventory form	none	5 minutes	Sanitary Inspector I
	1.1. Prepare and allocate number of supplies per VBD area		10 minutes	MedTech II Sanitary Inspector IV
2. Review, check and receive supplies	2. Issue/release requested/ allocated supplies per VBD area	none	5 minutes	Sanitary Inspector I MedTech II Sanitary Inspector IV
<b>TOTAL:</b>		None	20 minutes	



# **BULALACAO COMMUNITY HOSPITAL**

## **External Services**



## 1. AVAILING OF BIRTH CERTIFICATE

Birth certificate is given to serve as major proof of identity of an individual. It also serves as an attachment for PHIC claims and other purposes.

Service Availability: Monday – Friday; 08:00 am – 05:00 pm

<b>Office/Division:</b>	<b>ADMINISTRATIVE SECTION</b>
<b>Classification:</b>	SIMPLE
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government
<b>Who may avail:</b>	Parents of Newborn delivered at facility

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1. Report of Live Birth ( <i>1 original copy</i> )	Administrative Section, Bulalacao Community Hospital
2. OPD Record of Newborn ( <i>1 original copy</i> )	Record Section, Bulalacao Community Hospital
3. Certificate of Live Birth ( <i>4 original copies</i> )	Municipal Civil Registry Office, Local Government Unit of Bulalacao
4. Marriage Contract of Parents of Newborn ( <i>1 photocopy</i> )	Parents of Newborn
5. Birth Certificate of Parents of Newborn ( <i>1 photocopy</i> )	Parents of Newborn

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present required documents; supply necessary information	1. Accept request, required documents, and interview parents	None	5 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
	1.1 Retrieve OPD record of newborn	None	15 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital
	1.2 Accomplish Live Birth Form	None	15 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital



2. Receive Live Birth Form and proceed to the Municipal Civil Registry Office	2. Issue Live Birth Form and instruct parents to proceed to Municipal Civil Registry Office	None	5 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
3. Present the report of live birth and wait for the release of the Municipal Form No. 102 (Certificate of Live Birth)	3. Receive and check the given form; accomplish Certificate of Live Birth	None	30 minutes	Municipal Civil Registrar LGU-Bulalacao Municipal Civil Registry Office
4. Present duly accomplished Certificate of Live Birth to BCH Administrative Service for signing of Attending Physician	4. Receive and review Certificate of Live Birth	None	10 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
	4.1. Review and Sign Certificate of Live Birth	None	5 minutes	Attending Physician Bulalacao Community Hospital
5. Receive Certificate of Live Birth	5. Release duly signed Certificate of Live Birth and instruct client to go back to the Municipal Civil Registry Office for the issuance of the final copy of Certificate of Live Birth	None	5 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
<b>TOTAL:</b>		<b>None</b>	<b>1 hour, 30 minutes</b>	



## 2. AVAILING OF DEATH CERTIFICATE

Being used as an attachment for PhilHealth claims and other purposes, death certificate is issued after the decease of a patient.

Service Availability: Monday – Friday; 08:00 am – 05:00 pm

<b>Office/Division:</b>	<b>ADMINISTRATIVE SECTION</b>
<b>Classification:</b>	SIMPLE
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government
<b>Who may avail:</b>	Relatives of the deceased who died in the facility

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Medical Certificate <i>(For DOA with previous consultation and record at BCH) (1 original copy)</i>		Records Section, Bulalacao Community Hospital		
2. OPD Record and Admission <i>(1 original copy)</i>		Records Section, Bulalacao Community Hospital		
3. Death Certificate Form <i>(4 original copies)</i>		Municipal Civil Registry Office, Local Government Unit of Bulalacao		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
FOR DEAD ON ARRIVAL PATIENT				
1. Verbal request for the issuance of Medical Certificate for patients with existing hospital records  <b>Note:</b> Issuance of Death Certificate to DOA patients is administered by the RHU. A medical certificate is one of the prerequisites they ask from the requesting party.	1. Retrieve OPD and Admitting Records	None	15 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital
	1.1. Prepare Medical Certificate	None	10 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
	1.2. Review and sign Medical Certificate	None	5 minutes	Physician-on-Duty Bulalacao Community



				Hospital
2. Pay for the certification fee	2. Receive payment and issue official receipt	PHP 80.00	5 minutes	Cash Clerk I Billing Unit Bulalacao Community Hospital
3. Claim Medical Certificate	3. Release Medical Certificate and instruct client to proceed to the Rural Health Unit and present the issued medical certificate	None	5 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
<b>FOR EMERGENCY ROOM DEATH AND ADMISSION</b>				
1. Proceed to the Municipal Civil Registry Office and ask for Death Certificate Form	1. Instruct client to proceed to the Municipal Civil Registry Office for the issuance of Death Certificate Form	None	3 minutes	Nurse-on-Duty Bulalacao Community Hospital
2. Bring Death Certificate to BCH	2. Retrieve OPD and Admitting Records	None	10 minutes	Administrative Aide IV Records Section Bulalacao Community Hospital
	2.1. Review and affix signature to the Death Certificate	None	10 minutes	Attending Physician Bulalacao Community Hospital
	2.2. Release duly signed Death Certificate and instruct client to proceed to the Municipal Civil Registry Office for the final processing of Death Certificate	None	5 minutes	Administrative Assistant II Administrative Section Bulalacao Community Hospital
<b>TOTAL:</b>		<b>P80.00</b>	<b>40 minutes</b>	





		<p><b>(for DOA with hospital records)</b></p> <p><b>28 minutes (for ERD&amp;A)</b></p>	
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### 3. AVAILING OF MEDICAL CERTIFICATE

Medical certificate is being issued most commonly to serve as prerequisite for enrolment, employment, and other legal purposes.

Service Availability: Monday – Friday; 08:00 am – 05:00 pm

<b>Office/Division:</b>	<b>ADMINISTRATIVE SECTION</b>
<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>	Requesting Party required by Schools, Employers, Other Government Agencies, and Insurance Companies

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Letter of Request for Medical Certificate (1 original copy)		Schools, Companies, Government Agencies, and Insurance Companies requiring the Medical Certificate		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Letter of Request for Medical Certification and follow OPD procedure when diagnostic is needed	1. Receive letter of request	None	1 minute	Administrative Assistant II Administrative Section Bulalacao Community Hospital
	1.1 Retrieve OPD and admitting records	None	15 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital



	1.2 Conduct consultation	None	15 minutes	Attending Physician Bulalacao Community Hospital
	1.3 If needed, instruct requesting party to proceed to Laboratory for diagnostic examination	None	8 hours* (if with possible laboratory test)	Attending Physician Bulalacao Community Hospital
	1.4 Interpret diagnostic examination results	None	5 minutes	Attending Physician Bulalacao Community Hospital
	1.5 Prepare Medical Certificate	None	15 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital
	1.6 Review and Signing of Medical Certificate	None	5 minutes	Attending Physician Bulalacao Community Hospital
2. Pay the Certificate Fee	2. Accept payment and issue official receipt and instruct to present O.R.	PHP 80.00	5 minutes	Cash Clerk I Billing Unit Bulalacao Community Hospital
3. Claim Medical Certificate	3. Check Official Receipt	None	1 minute	Administrative Aide IV Records Unit Bulalacao Community Hospital
	3.1. Instruct requesting party to sign in log book for issued	None	5 minutes	Administrative Aide IV Records Unit Bulalacao



	documents and secure a copy for filing purposes			Community Hospital
	3.2. Release Medical Certificate	None	5 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital
<b>TOTAL:</b>		<b>P80.00</b>	<b>1 hour, 12 minutes + 8 hours if with laboratory test</b>	

*\*Waiting time included*

#### 4. AVAILING OF PHILHEALTH BENEFITS

This service is being provided to PhilHealth members in order for them to avail benefits for membership such as No Balance Billing Policy for indigent members.

Service Availability: Monday – Friday; 08:00 am – 05:00 pm

<b>Office/Division:</b>	<b>ADMINISTRATIVE SECTION/ PHILHEALTH UNIT</b>			
<b>Classification:</b>	SIMPLE			
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government			
<b>Who may avail:</b>	All PhilHealth Members and Qualified Dependents All 4Ps Members and Qualified Dependents All IP Constituents and Qualified Dependents All Senior Citizens and Qualified Dependents			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1.CF1, CF2, CF3, CF4, PMRF, CEWS, PBEF (1 original copy each)		PhilHealth Unit, Bulalacao Community Hospital		
2.Birth Certificate (for dependent) (1 original copy) Marriage Contract (for dependent)(1 original copy)		Municipal Civil Registry Office, Local Government Unit of Bulalacao		
3.Billing Statement or Statement of Account (1 original copy)		Cashier / Billing Unit, Bulalacao Community Hospital		
4.Operative Record (Surgery) or Laboratory Record (1 original copy)		Administrative Service (Record Unit), Bulalacao Community Hospital		
<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 PhilHealth Section	1.Receive documents and	None	10 minutes	Administrative Assistant II



and present requirements	check for validity			Administrative Services  Clerks of PhilHealth Unit Bulalacao Community Hospital
2. Provide factual information	2. Intervene if there is discrepancy and counsel	None	5 minutes	
	2.1. Accomplish PBEF	None	10 minutes	
3. Affix signature to PhilHealth forms	3. Instruct member to sign documents	None	2 minutes	
<b>TOTAL:</b>		<b>None</b>	<b>27 minutes</b>	

## 5. MINOR SURGERY

This is done to provide surgical management to emergency cases like vehicular accidents and perennal repair after normal spontaneous delivery.

Service Availability: 24/7

<b>Office/Division:</b>	<b>MEDICAL AND NURSING SECTIONS</b>
<b>Classification:</b>	SIMPLE
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government
<b>Who may avail:</b>	All
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
1. OPD Card (Hospital Number) <i>(1 original copy)</i>	Administrative Section (Record Unit), Bulalacao Community Hospital
2. OPD Record <i>(1 original copy)</i>	Administrative Section (Record Unit), Bulalacao Community Hospital
3. Prescription <i>(1 original copy)</i>	Physician, Bulalacao Community Hospital

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For "revisiting" patient present OPD Card. For "new" patient, ask for new hospital card.	1. Receive OPD Card	None	2 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	1.1 Forward to Record Section for retrieval	None	2 minutes	



2. Provide information during data collection	2. Collect data and accomplish OPD Record	None	5 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	2.1 Take and record vital signs		5 minutes	
	2.2 Perform independent nursing functions		5 minutes	
3. Sign consent form for the surgical procedure to be done	3. Explain surgical procedure	None	2 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	3.1 Secure consent		2 minutes	
	3.2 Refer to Physician		1 minute	

4. Submit the consent form to the Attending Physician	4. Perform surgical procedure	None	Depending on the extent of injuries	Attending Physician Bulalacao Community Hospital
5. Receive prescription and provide instruction for home medication and follow-up checkup	5. Issue prescription and instruction	None	5 minutes	Attending Physician Bulalacao Community Hospital
6. Settle hospital bill	6.1. Submit requisition slip to Cashier/Billing Unit	None	5 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	6.2. Usher patient's companion to PhilHealth Section			
7. If PhilHealth member or dependent, proceed to PhilHealth Section. For Non-PhilHealth members, proceed to the Social Worker's Office.	7. Explain and collect required document	None	10 minutes	Administrative Assistant II Admin Office PhilHealth Clerks Medical Social Worker Bulalacao Community Hospital



<b>TOTAL:</b>	<b>None</b>	<b>44 minutes + Duration of the Surgical Procedure</b>	
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## 6. OUT-PATIENT CONSULTATION

This serves as preventive measure to pre-empt admission and provide early medical management.

Service Availability: Monday – Friday; 09:00 am – 12:00 noon

<b>Office/Division:</b>	<b>MEDICAL AND NURSING SECTIONS</b>
<b>Classification:</b>	SIMPLE
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government
<b>Who may avail:</b>	All

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1. OPD Card (Hospital Number) <i>(1 original copy)</i>	Record Section, Bulalacao Community Hospital
2. OPD Record <i>(1 original copy)</i>	Record Section, Bulalacao Community Hospital
3. Laboratory Request <i>(1 original copy)</i>	Nursing Section; Medical Section (Physician), Bulalacao Community Hospital
4. Prescription <i>(depends on the number of medicines) (1 original copy)</i>	Medical Section (Physician), Bulalacao Community Hospital

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For “revisiting” patient, present OPD Card.  For “new” patient, ask for new hospital card.	1. Receive and check OPD Card	None	3 minutes	Nurse/Nursing Aide/OPD Clerk Bulalacao Community Hospital
	1.1 Forward to Record Section for retrieval	None	5 minutes	
2. Provide information during data collection	2. Collect data and accomplish OPD Record	None	10 minutes	Nurse/Nursing Aide/OPD Clerk Bulalacao Community Hospital
	2.1 Take and record vital signs	None	10 minutes	



	2.2 Perform independent nursing function if needed	None	5 minutes	
3. Proceed to Physician for consultation	3. Receive hospital records	None	5 minutes	Physician-on-Duty Bulalacao Community Hospital
	3.1 Do consultation	None	10 minutes	
	3.2 Explain management processes	None	5 minutes	
	3.3 Accomplish laboratory report (if needed)	None	5 minutes	
	3.4 Issue and explain prescription	None	5 minutes	
	3.5 Do documentation	None	5 minutes	
4.If there is prescription, present to Pharmacy Section.	4. Accept and verify prescription for completeness of data and instruct to pay at the Billing Section/Cashier	None	5 minutes	Pharmacist I Pharmacy Bulalacao Community Hospital
4.1. Proceed to Billing Section for payment	4.1 Accept payment and issue official receipt	<i>Depends on the cost of medicines dispensed</i>	5 minutes	Cash Clerk I Billing Section/Cashier Bulalacao Community Hospital
	4.2. Present Official Receipt to Pharmacy and claim medicine	4.2 Dispense medicine with instruction	None	5 minutes
5. If there is laboratory report, proceed to Billing Section/Cashier for payment.	5. Accept payment and issue official receipt	<i>See table of lab tests costs on page 23</i>	2 minutes	Cash Clerk I Billing Section/Cashier Bulalacao Community Hospital
6. Submit official receipt to	6. Accept Laboratory	None	1 minute	Medical Technologist I



Laboratory Section; wait for instruction; submit specimen; and receive official laboratory results	Report with O.R.			Laboratory Aide Laboratory Section Bulalacao Community Hospital
	6.1 Explain diagnostic procedure	None	2 minutes	
	6.2 Perform procedure	None	<i>See turnaround time table of every laboratory test on page 24</i>	
	6.3 Issue Laboratory Result	None	3 minutes	
7. Submit Laboratory Result to Physician	7. Interpret and explain Laboratory Results	None	3 minutes	Physician-on-Duty Bulalacao Community Hospital
	7.1 Issue prescription	None	3 minutes	
<b>TOTAL:</b>		<b>Cost of Medicine + Cost of Lab Test</b>	<b>1 hour &amp; 37 minutes + Turnaround Time of Lab Test</b>	





## 7. PRE-NATAL/POST-PARTUM CONSULTATION

This service is significant in order to monitor the progress of pregnant women and to ensure facility-based delivery as well as to evaluate adherence to Status Post Normal Spontaneous Delivery care and doctor's instruction for post-partum cases.

Service Availability: Friday; 09:00 am – 12:00 noon

<b>Office/Division:</b>	<b>MEDICAL AND NURSING SECTIONS</b>
<b>Classification:</b>	SIMPLE
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government
<b>Who may avail:</b>	ALL PREGNANT WOMEN WHO ARE EXPECTED TO DELIVER AND MOTHERS WHO GAVE BIRTH AT THE FACILITY

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1. OPD Card (Hospital Number) <i>(1 original copy)</i>	Administrative Section (Record Unit), Bulalacao Community Hospital
2. Laboratory Request <i>(1 original copy)</i>	Nursing Aide/ OPD Clerk, Bulalacao Community Hospital
3. Prescription <i>(1 original copy)</i>	Physician, Bulalacao Community Hospital



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For “revisiting” patient present OPD Card. For “new” patient, ask for new hospital card and log the name on the attendance log book.	1. Receive OPD Card	None	2 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	1.1 Forward to Record Section for retrieval of OPD Card	None	2 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital
	1.2 Present attendance log book	None	2 minutes	Administrative Aide IV Records Unit Bulalacao Community Hospital
2. Provide information during data collection	2. Collect data and accomplish OPD Card	None	5 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	2.1 Take and Record vital signs	None	5 minutes	
	2.2 Perform independent nursing function as needed	None	5 minutes	
3. For pre-natal consultation, proceed to the designated room for internal examination or Leopold’s Maneuvers.	3. Receive OPD Record	None	2 minutes	Nurse/Nursing Aide Bulalacao Community Hospital
	3.1 Do Leopold’s Maneuvers/ I.E	None	10 minutes	
	3.2 Do health education	None	5 minutes	
4. For Post-Partum consultation - proceed to physician for consultation. If with order of internal examination, proceed to delivery room.	4. Do consultation	None	10 minutes	Attending Physician Bulalacao Community Hospital
	4.1 Do internal examination	None	10 minutes	Attending Physician Bulalacao Community Hospital



				Hospital
5. For those with laboratory test, receive Laboratory Request and	5. Issue Laboratory Request and instruct patient to settle charges at Billing Section	None	5 minutes	Attending Physician Bulalacao Community Hospital
6. Proceed to Billing Section/Cashier and settle charges	6. Accept request as reference for charges	<i>See Cost of Lab Exams on page 23</i>	2 minutes	Cash Clerk I Billing Unit Bulalacao Community Hospital
	6.1 Issue official receipt	None	3 minutes	
7. Proceed to Laboratory Section and present Laboratory Request together with O.R.	7. Accept Laboratory Request, explain diagnostic procedure, proper specimen collection	None	<i>See Turnaround Time Table of Lab Exams on page 24</i>	Medical Technologist I Laboratory Aide Laboratory Section Bulalacao Community Hospital
	7.1 Perform diagnostic procedure			
	7.2 Issue Laboratory Result			
8. Submit Laboratory Result to Physician	8. Interpret laboratory result	None	5 minutes	Attending Physician Bulalacao Community Hospital
	8.1 Issue prescription		3 minutes	
	8.2 Instruct patient on follow-up check up		2 minute	
9. For those with prescription, proceed to the pharmacy.	9. Accept and verify prescription for completeness of data	None	3 minutes	Pharmacist I Pharmacy Aide Pharmacy Bulalacao Community Hospital
	9.1 Instruct to pay corresponding charges for medicine and		2 minute	



	supplies			
10. Pay the necessary charges	10. Accept payment and issue official receipt	<i>Depends on the cost of medicines dispensed</i>	3 minutes	Cash Clerk I Billing Unit Bulalacao Community Hospital
11. Proceed to pharmacy and present prescription with O.R	11. Issue prescription and dispense medicine and supplies with instruction	None	5 minutes	Pharmacist I Pharmacy Aide Pharmacy Bulalacao Community Hospital
<b>TOTAL:</b>		<b>Cost of Lab Exam + Cost of Medicine</b>	<b>1 hour &amp; 31 minutes + Turnaround Time for Lab Exams</b>	

## 8. PROVISION OF DIAGNOSTIC/ LABORATORY SERVICES

Laboratory services are done in order to have accurate diagnostic evaluation of cases will serve as guide for medical intervention.

Service Availability:

Monday – Friday; 08:00 am – 05:00 pm

*(For inpatients, outpatients, and Emergency Room patients)*

Saturday; 07:00 am – 03:00 pm

*(For inpatients and Emergency Room patients)*

<b>Office/Division:</b>	<b>LABORATORY SECTION</b>
<b>Classification:</b>	Simple/Complex
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2B-Government to Business; G2G-Government to Government
<b>Who may avail:</b>	All with laboratory request

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
1. Laboratory Request <i>(1 original copy)</i>	Medical/Nursing Sections, Bulalacao Community Hospital
2. Official Receipt <i>(1 original copy)</i>	Cashier/ Billing Unit, Bulalacao Community Hospital
3. Charge slip <i>(1 original copy)</i>	Laboratory Section, Bulalacao Community Hospital
4. Laboratory Result <i>(1 original copy)</i>	Laboratory Section, Bulalacao Community Hospital



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>FOR OUTPATIENTS</b>				
1. Secure Laboratory Request	1. Issue Laboratory Request and instruct patient to proceed to laboratory	None	5 minutes	Attending Physician Bulalacao Community Hospital
2. Present Laboratory Request	2. Receive and verify request for completeness of data and availability of tests  2.1 Make charge slip and instruct patient to proceed to Billing Section/ Cashier for payment	None	5 minutes	Medical Technologist I Laboratory Section Bulalacao Community Hospital
3. Receive Charge Slip and Laboratory Request and pay at the Billing Section/ Cashier	3. Accept laboratory request and issue official receipt  3.1 Instruct patient to go back to Laboratory	<i>See Cost of Lab Exams Table on page 23</i>	5 minutes	Cash Clerk I Billing Unit Bulalacao Community Hospital
4. Return to Laboratory Section for specimen collection/ submission	4. Validate O.R., provide instruction for proper specimen collection and containers for sample  4.1 Prepare Patient for specimen collection/ extraction	None	5 minutes  3 minutes	Medical Technologist I or Laboratory Aide Laboratory Section Bulalacao Community Hospital
5. Proceed to extraction area	5. Do extraction  5.1 Inform patient	None	10 minutes  2 minutes	Medical Technologist I or Laboratory Aide



	on waiting time and usher to waiting area			Laboratory Section Bulalacao Community Hospital
6. Proceed to waiting area	6. Process specimen/perform tests	None	See <i>Turnaround Time Table for Lab Exams on page 24</i>	Medical Technologist I or Laboratory Aide Laboratory Section Bulalacao Community Hospital
	6.1 Encode and record of results to log book		15 minutes	
7. Wait for name to be called and sign on the receiving logbook once the result is ready for release.	7. Release Laboratory Results and give lab results to patient	None	5 minutes	Medical Technologist I or Laboratory Aide Laboratory Section Bulalacao Community Hospital
8. Submit laboratory result to Physician	8. Accept and interpret laboratory result	None	15 minutes	Attending Physician Bulalacao Community Hospital
<b>FOR INPATIENTS/EMERGENCY ROOM PATIENTS</b>				
1. Provide specimen (blood, feces, urine, and other body fluids) for examination	1. Receive Laboratory Request from the Nurse's station / ER	None	5 minutes	Medical Technologist I or Laboratory Aide Laboratory Section Bulalacao Community Hospital
	1.1 Validate Data		5 minutes	
	1.2 Provide instruction and containers for specimen collection		5 minutes	
	1.3 Identify Patient		3 minute	
	1.4 Collect specimen /		10 minutes	



	extraction			
	1.5 Process specimen/ Run tests		See <i>Turnaround Time Table for Lab Exams on page 24</i>	
	1.6 Encode and record laboratory examination results to logbooks	<b>10</b>	15 minutes	
	1.7 Release Laboratory Result		5 minutes	
	1.8 Accomplish charge slip and forward to billing section		5 minutes	
	<b>TOTAL</b>	<b>COST OF LAB EXAMS (Refer to the Cost of Laboratory Examination on page 23)</b>	<b>1 hour &amp; 10 minutes + Turnaround Time for Lab Exams (for outpatients)</b>  <b>53 minutes + Turnaround Time for Lab Exams (for inpatients and Emergency Room patients)</b>	



## 9. TRIAGE SCREENING & CONSULTATION FOR COVID-19 AND OTHER EMERGING AND RE-EMERGING DISEASES

This is done in order to detect signs and symptoms of COVID-19 and other emerging and re-emerging diseases manifested by patients so that necessary isolation can be performed for those who will be proven positive to be infected by the virus.

Service Availability: 24/7

<b>Office/Division:</b>	<b>MEDICAL AND NURSING SECTIONS</b>			
<b>Classification:</b>	SIMPLE			
<b>Type of Transaction:</b>	G2C-Government to Citizen; G2G-Government to Government			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.OPD Card (Hospital Number) <i>(1 receiving copy)</i>			Record Section, Bulalacao Community Hospital	
2.OPD Record <i>(1 original copy)</i>			Record Section, Bulalacao Community Hospital	
3.Laboratory Request <i>(1 receiving copy)</i>			Nursing Section, Medical (Physician), Bulalacao Community Hospital	
Prescription (Home Isolation) <i>(1 original copy)</i> Admission (If Warranted) <i>(1 original copy)</i> Referral slip (If transferrable) <i>(1 original copy)</i>			Medical Section (Physician), Bulalacao Community Hospital	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. For re-visiting patient, present OPD Card  For new patient, ask for new hospital card	1. For revisiting patient, receive, check OPD Card, and forward to Record Section; for new patient, issue hospital card	None	5 minutes	Nurse/Nursing Aide/OPD Clerk Bulalacao Community Hospital
	1.1 Retrieve patient's records for revisiting patient	None	15 minutes	Administrative Aide IV Records Section Bulalacao Community Hospital





2. Provide details for daily patient data collection	2. Collect data & accomplish OPD record	None	5 minutes	Nurse/Nursing Aide/OPD Clerk Bulalacao Community Hospital
	2.1 Take and record vital signs	None	10 minutes	
	2.2 Perform independent function if needed	None	5 minutes	
	2.3 Refer patient to attending physician "ASAP" if necessary	None	3 minutes	
3. Proceed to physician for consultation/admission/referral	3. Receive hospital records	None	2 minutes	Physician-on-Duty Bulalacao Community Hospital
	3.1 Do assessment and consultation	None	10 minutes	
	3.2 Explain management process	None	5 minutes	
	3.3 Accomplish Laboratory Request like RAT (Rapid Antigen Test) if for admission	None	10 minutes	
	3.4 Explain and issue prescription/referral if home isolation/ transfer to higher facility	None	5 minutes	
	3.5 Coordinate with the receiving facility of patient transfer	None	5 minutes	



	3.6 Accomplish admitting chart for admissible patient	None	10 minutes	
	3.7 Coordinate with the Disease Surveillance Coordinator and report the case for reporting purposes.	None	5 minutes	
4. For home isolation, present prescription to Pharmacy Section.	4. Accept and verify prescription for completeness of data and instruct client to pay at the Billing Section	None	5 minutes	Pharmacist I & Pharmacy Aide Pharmacy Bulalacao Community Hospital
4.1. Proceed to Billing Section for payment	4.1 Accept payment and issue Official Receipt	Depends on the amount of corresponding charges.	5 minutes	Cash Clerk I Billing Unit Bulalacao Community Hospital
4.2. Present Official Receipt to Pharmacy and claim medicine	4.2 Dispense medicine with instruction	None	5 minutes	Pharmacist I & Pharmacy Aide Pharmacy Bulalacao Community Hospital
5. If there is laboratory request, present it to the Laboratory for verification and to determine the availability of tests	5. Accept and verify laboratory request and instruct client to pay at the Billing Section/Cashier	None	5 minutes	Medical Technologist I Laboratory Section Bulalacao Community Hospital
5.1. Proceed to the Billing	5.1 Accept payment and issue Official Receipt	See table of lab test	5 minutes	Cash Clerk I Billing Unit



<p>Section/Cashier for payment</p> <p>5.2. Present Official Receipt and Laboratory Request to the Laboratory Section</p>	<p>5.2 Verify Official Receipt and explain diagnostic procedure</p> <p>5.3 Extract/receive samples for testing</p> <p>5.4 Run laboratory test</p> <p>5.5 Issue laboratory results</p>	<p>cost on page 23</p> <p>None</p> <p>None</p> <p>None</p> <p>None</p>	<p>5 minutes</p> <p>10 minutes</p> <p>See turnaround time table of every laboratory test on page 24</p> <p>5 minutes</p>	<p>Bulalacao Community Hospital</p> <p>Medical Technologist I Laboratory Section Bulalacao Community Hospital</p> <p>Medical Technologist I Bulalacao Community Hospital</p>
<p>6 Submit laboratory result to physician</p>	<p>6. Interpret and explain laboratory result</p> <p>6.1 Issue prescription for the isolation case and issue referral form</p> <p>6.2 Coordinate with RHU for the home isolation referral</p> <p>6.3 Coordinate referral to the receiving facility if for referral to higher facility</p> <p>6.4 Accomplish admitting form chart if patient is for admission</p>	<p>None</p> <p>None</p> <p>None</p> <p>None</p> <p>None</p>	<p>3 minutes</p> <p>5 minutes</p> <p>5 minutes</p> <p>10 minutes</p> <p>5 minutes</p>	<p>Physician-on-Duty Bulalacao Community Hospital</p>



	6.5 Coordinate with the Disease Surveillance Coordinator and report the case for reporting purposes.	None	5 minutes	
<b>TOTAL:</b>		<b>Cost of Medicine + Cost of Lab Test</b>	<b>2 hours and 53 minutes + Turnaround Time of Lab Test</b>	

<b>COST OF LABORATORY EXAMINATIONS</b>	
Name of Laboratory Exam	Cost
<b><i>HEMATOLOGY</i></b>	
Complete Blood Count with Plate Count (CBC w/ PC)	P180.00
Clotting Time & Bleeding Time	60.00
Blood Typing	200.00
Malarial Smear	150.00
<b><i>CLINICAL MICROSCOPY</i></b>	
Urinalysis	50.00
Fecalysis	50.00
Fecal Occult Blood	150.00
Pregnancy Test	150.00
<b><i>SEROLOGY</i></b>	
Hepatitis B Surface Antigen (HBsAg) Screening	150.00
Salmonella Typing (IgM/IgG) Screening Test	900.00
Syphilis Screening Test	250.00
Dengue Duo (NS1Ag/ IgM/ IgG) Testing	1,200.00
COVID-19 Rapid Antigen Test	660.00
<b><i>MICROBIOLOGY</i></b>	
Gram Staining	150.00
KOH Smear	100.00
<b><i>CLINICAL CHEMISTRY</i></b>	
Fasting Blood Sugar (FBS) / Random Blood Sugar (RBS)	100.00
Cholesterol	100.00
Triglyceride	100.00
SGPT/ALT	120.00
SGOT/AST	120.00
Creatinine	100.00
Blood Uric Acid (BUA)	100.00



Blood Urea Nitrogen (BUN)	100.00
HDL	150.00
LDL	150.00
Oral Glucose Tolerance Test (OGTT)	600.00
<b><i>SPECIAL TEST</i></b>	
Expanded Newborn Screening (ENBS)	1,750.00



<b>TURNAROUND TIME OF LABORATORY EXAMINATIONS</b>					
<b>LABORATORY TEST</b>	<b>CATEGORY</b>	<b>PROCESSING TIME</b>	<b>RELEASING TIME</b>	<b>TURNAROUND TIME</b>	
				<b>ROUTINE (OPD, IN-PATIENT)</b>	<b>STAT and ER</b>
<b>HEMATOLOGY</b>					
Complete Blood Count with Plate Count (CBC w/ PC)	Simple	2 hours	5 minutes	4 hours	1 hour
Clotting Time & Bleeding Time (CTBT)	Simple	1 hour	5 minutes	4 hours	1 hour
ABO/ RH Typing	Simple	2 hours	5 minutes	4 hours	1 hour
Malarial Smear	Simple	2 hours	5 minutes	4 hours	2 hours
<b>CLINICAL MICROSCOPY</b>					
Urinalysis	Simple	2 hour	5 minutes	4 hours	1 hour
Fecalysis	Simple	2 hour	5 minutes	4 hours	1 hour
Fecal Occult Blood	Simple	2 hour	5 minutes	4 hours	1 hour
Pregnancy Test	Simple	1 hour	5 minutes	2 hours	30 minutes
<b>SEROLOGY</b>					
Hepatitis B Surface Antigen (HBsAg) Screening	Simple	2 hours	5 minutes	4 hours	1 hour
Salmonella Typhi (IgM/IgG) Screening Test	Simple	2 hours	5 minutes	4 hours	1 hour
Syphilis Screening Test	Simple	2 hours	5 minutes	4 hours	1 hour
COVID-19 Rapid Antigen Test	Simple	1 hour	5 minutes	4 hours	1 hour



Dengue duo	Simple	2 hours	5 minutes	4 hours	1 hour
<b>MICROBIOLOGY</b>					
Gram Staining	Simple	3 hours	5 minutes	8 hours	2 hours
KOH Smear	Simple	3 hours	5 minutes	8 hours	2 hours
<b>CLINICAL CHEMISTRY</b>					
Fasting Blood					
Sugar (FBS) / Random Blood Sugar (RBS) using glucometer	Simple	30 minutes	5 minutes	1 hour	30 minutes
Fasting blood sugar (FBS) Using machine	Simple	4 hours	5 minutes	8 hours	1 hour
Cholesterol	Simple	4 hours	5 minutes	8 hours	1 hour
Triglyceride	Simple	4 hours	5 minutes	8 hours	1 hour
SGPT/ALT	Simple	4 hours	5 minutes	8 hours	1 hour
SGOT/AST	Simple	4 hours	5 minutes	8 hours	1 hour
Creatinine	Simple	4 hours	5 minutes	8 hours	1 hour
Blood Uric Acid (BUA)	Simple	4 hours	5 minutes	8 hours	1 hour
Blood Urea Nitrogen (BUN)	Simple	4 hours	5 minutes	8 hours	1 hour
HDL	Simple	4 hours	5 minutes	8 hours	1 hour
LDL	Simple	4 hours	5 minutes	8 hours	1 hour
Oral Glucose Tolerance Test (OGTT)	Simple	4 hours	5 minutes	8 hours	3 hours
2HPP (Glucose test) glucometer	Simple	1 hours	5 minutes	4 hours	30 minutes
<b>SPECIAL TEST</b>					



# **NAUJAN COMMUNITY HOSPITAL**

## **External Services**





## 1. ADMITTING SECTION

This service is provided to patients that require nursing care, receive medications, and undergo tests and/or surgery that can only be performed in the hospital setting (24 hours daily)

<b>Office/Division:</b>	Admitting Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patients requiring admission			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Clinical Chart (Original, 1 copy)		ER Department within the hospital		
2. Patient Information form (Original, 1 copy)		Admitting section within the hospital		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign consent for admission	1. Explain admission process to the patient	None	1 minute	Nurse on Duty Nursing Attendant Midwife
2. Answer all the information required by the officer	2. Interview / accomplish admission sheet and other related admission requirements	None	1 minute	Nurse on Duty Nursing Attendant Midwife
3. Present PhilHealth Identification Number	3.1 Inquire PhilHealth Clerk if patient is an eligible PhilHealth member  If PhilHealth member, 3.2 check the validity of PhilHealth membership in the IHCP portal	None	3 minutes	Nurse on Duty Nursing Attendant Midwife
4. Proceed to the Social Service Office for assessment	4. If Non-PhilHealth member, instruct the patient to proceed to the Social Service Office for assessment	None	3 minutes	Social Worker Officer



5. Cooperate in interventions needed	5. Make orders for treatment 5.1 Carry out treatment ordered	None	5 minutes	Physician on Duty
6. Cooperate with admitting personnel for escort to the respective room/ward	6. Transport patient to the respective room/ward	None	1 minute	Nurse on Duty Nursing Attendant Midwife
	<b>Total</b>	None	14 minutes	

## 2. Billing Services Section

Provide proper billing to patients. (daily 8:00am to 5:00pm)

<b>Office/Division:</b>	Hospital Billing Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patients for discharge / ER patients / patients transferred to other health care facility / OBS patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. One (1) Original copy of Statement of Account		Hospital Billing Section		
2. One (1) original copy of Claim Form 1		Hospital Billing Section		
3. One (1) original of Claim Form 2		Hospital Billing Section		
4. One (1) original copy of Claim Signature Form (CSF)		Hospital Billing Section		
5. Two (2) original copy of PhilHealth Benefit Eligibility Form (PBEF)		Hospital Billing Section		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<b>❖ For Admitted Patients (ordered for discharge)</b>				
1. Ensure that all billing documents	1. Prepare all the necessary	No	5 minutes	Administrative Aide II



are ready prior to discharge	hospital billing documents	ne		Administrative Aide I
2. Sign all the documents requiring client signature	2. Assist in signing the documents	No ne	1 minute	Administrative Aide II Administrative Aide I
3. Receive clearance slip	3. Issue clearance slip	No ne	1 minute	Administrative Aide II Administrative Aide I

❖ For ER, OBS, and Patients for transfer to other health care facility				
1. Proceed to the hospital billing section for discharge/transfer of patient	1. Prepare all the necessary hospital billing documents	None	5 minutes	Administrative Aide II Administrative Aide I
2. Receive Statement of Account (SOA)	2. Prepare and issue Statement of Account (SOA) * Refer for medical assistance (if applicable)	None	5 minutes	Administrative Aide II Administrative Aide I
3. Pay hospital charges to the Cashier	3. Receive payment and issue corresponding official receipt	As indicated in the SOA	3 minutes	Cash Clerk
4. Present proof of payment to the Nurse on duty	4. Issue gate pass	None	1 minute	Nurse on Duty
<b>TOTAL</b>		As indicated in the SOA	21 minutes	



### 3. Birthing/Delivery services

Provide 24 hours of services to pregnant women giving birth and provide consultation, counselling and prenatal care.

<b>Office/Division:</b>	OPD – Delivery Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All pregnant mothers due for delivery of baby			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Baby oil (20ml of more)		Client		
2. Bulak (big)		Client		
3. Alcohol 70% solution 500ml		Client		
4. Baby diaper (5 pieces)		Client		
5. Adult diaper (5 pieces)		Client		
6. Lampin (6 pieces)		Client		
7. Manuso (1 piece)		Client		
8. Daster (2 pieces)		Client		
9. Damit o pajama ng baby (2 pieces)		Client		
10. Medyas at gloves ng baby (2 pairs)		Client		
11. Bigkis para sa baby (2 pieces)		Client		
12. Sombrero ng baby (1 piece)		Client		
13. Unan (2 pieces)		Client		
14. Kumot (1 piece)		Client		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



<p>1. Approach the triage staff</p>	<p>1. Assess patient, conduct history taking and admission orders            1.1 Carry out doctor's order            1.2 Usher to the labor room and monitor progress of labor</p>	<p>None</p>	<p>10 minutes</p>	<p>Nurse I            Midwife I</p>
<p>2. Cooperate with the Midwife during delivery of the baby</p>	<p>3.1 Manage the delivery of the baby (repair laceration if needed)            3.2 Monitor the patient during recovery</p>	<p>None</p>	<p>1 hour            20 hours</p>	<p>Midwife I            Nurse I            NA I</p>
	<p>Total:</p>	<p>None</p>	<p>21 hours 10 minutes</p>	



## 4. Cashiering Services

Accepts payment from clients in the form of cash. Issue the customer's receipt of payment and return the correct change due as necessary for cash payments. (daily 8:00am – 5:00pm)

<b>Office/Division:</b>	Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who May Avail:</b>	All paying clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) original copy of Prescription with item cost ( <i>if payment is for medicines/medical supplies</i> )		1. Pharmacy Section with the hospital		
2. One (1) original copy of Laboratory charge slip ( <i>if payment is for laboratory test</i> )		2. Hospital Laboratory Section		
3. One (1) original copy of Statement of Account or SOA		3. Hospital Billing section		
CLIENT STEPS	AGENCY STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present to Cashier the prescription with item cost, laboratory charge slip, and/or SOA	1.1 Review the prescription with item cost, laboratory charge 1.2 Carefully calculate the account slip, and/or SOA	None	2 minutes	Cash Clerk
3. Pay the required amount	3. Receive the payment	As indicated in the prescription, laboratory charge slip, or SOA	1 minute	Cash Clerk



4. Get the official receipt	4. Issue corresponding official receipt	None	1 minute	Cash Clerk
<b>TOTAL</b>		As indicated in the prescription, laboratory charge slip, or SOA	4 minutes	

## 5. Dietary Services

Responsible for providing meals and nutritional care and counselling among in-patients (daily)

<b>Office/Division:</b>	Dietary			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All In-Patients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. One (1) original copy of Diet list			1. Nurse Station	
2. One original (1) Food history and preference of in-patient			2. Nurse Station	
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Prepare for the conduct of dietary service intervention	1. Study the diet list of patients	None	1 minute	Nutritionist Dietician I / Dietary Services Section
2. Cooperate in the measurement process	2. Measure height and weight of patient 2.1. Compute nutritional requirement * Secure	None	10 minutes	Nutritionist Dietician I / Dietary Services Section



	laboratory result/s if any 2.2 Create a meal plan for the patient			
3. Receives Dietary Instructions	3. Provide dietary instruction and diet plan	None	15 minutes	Nutritionist Dietician I / Dietary Services Section
<b>TOTAL</b>		None	26 minutes	

## 6. DISCHARGE OF PATIENTS

The hospital will discharge patient when the patient no longer needs to receive inpatient care and can go home; or to send to another health care facility

<b>Office/Division:</b>	Nursing Service			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who May Avail:</b>	All attended patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. One (1) original copy of Discharge clearance		Nurse Station within the hospital		
2. One original copy of Billing Statement		Billing Section within the hospital		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Secure Notice for Discharge	1. Verify doctor's order for discharge 1.1. Issue request for clearance form and forward to Billing Section	None	2 minutes	Nurse II Nurse I
2. Request/re	2. Issue Billing Statement	None	10 minutes	Administrative Aide II





view the Billing Statement				Administrative Aide I
3. Pay applicable fee	3. Receive payment and issue corresponding official receipt	No Balance Billing (NBB) for PhilHealth patient (Sponsored, SC, <i>Kasambahay</i> and Point of Service (POS) member	1 minute	Cash Clerk
4. Accomplish and present the clearance form	4. Sign respectively on the clearance form and assist the patient/patient's relative to have it Accomplished 4.1 Check clearance and instruct on home medication and follow up consultation	None	4 minutes	Nurse II Nurse I
				Security Guard
4. Secure the gate pass from the Nurse Station and present to the guard on duty	5. Issue Gate Pass 5.1. Receive and verify the gate pass	None	1 minute 1 minute	



<b>TOTAL</b>	None	19 minutes	
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## 7. EMERGENCY ROOM SERVICES

Emergency Room service provides medical and surgical care to patients arriving at the hospital in need of immediate care (24 hours daily)

<b>Office/Division:</b>	Emergency Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patients seeking Emergency Care Services			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Patient Data Form (1 original copy)		1. Nurse Triage Officer		
2. Referral form if applicable (1 original copy)		2. Referring Facility		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Approach/ Proceed to the ER frontline staff	1. Direct patient/ companion to Triage Area	None	5 minutes	Security Guard I
2. Proceed to Triage area for assessment	2. Assessment and leveling of care (triaging)	None	2 minutes	Nurse II Nurse I
	2.1 Check vital signs and Anthropometric measurement		5 minutes	
	2.2 Filling up of patients Data Forms,		5 minutes	
	2.3 Proceed to the doctors on duty and give the properly filled up patient data form		1 minute	



3. Proceed/ transfer to treatment area	3. Transport patient to the physician on duty	None	2 minutes	Nurse II Nurse I Administrative Aide I
4. Consent for treatment	4. Assess patient admission and/or consultation	None	15 minutes	Medical Officer IV Medical Officer III

5. Final Disposition	5.1 Give Disposition 5.2 Discharge 5.3 Admission 5.4 Transfer to other hospital 5.5 HAMA 5.6 Expired	None None None None None None	2 hours	Medical Officer IV Medical Officer III
<b>TOTAL</b>		None	2 hours & 35 minutes	

❖ **Discharge of ER Patient**

6. Secure charge slip form from Nurse Station	6. Provide charge slip for ER fee and other medications and procedures	None	1 minute	Nurse II Nurse, I Nursing Attendant I
7. Pay corresponding amount to the Cashier	7.1 Receive payment 7.2 issue corresponding official receipt	See table of laboratory services price / MDRP index	1 minute	Cash Clerk
8. Listen and follow instructions	8. Give instruction on take home medicines	None	1 minute	Nurse II Nurse, I Nursing Attendant I
<b>TOTAL</b>		None	3 minutes	



<b>❖ Patient to be admitted</b>				
9. Cooperate with Physician and Nurse	9.1 Explain the need for admission 9.2 Accomplish the patient's admission chart	None	3 minutes	Medical Officer IV Medical Officer III
10. Secure the admission notice from the physician on duty	10. Provide admission notice	None	1 minute	Medical Officer IV Medical Officer III
<b>TOTAL</b>		None	4 minutes	
<b>❖ For transfer of ER patient</b>				
11. Cooperate with Physician and Nurse	11. Coordinate transfer to appropriate specialty hospital 11.1 Provide referral documents	None	5 minutes	Nurse II Nurse I
<b>TOTAL</b>		None	5 minutes	

## 8. Family Planning Services

Family planning services is designed for couple or any women of reproductive age to decide how many children to have with the use of natural and/or artificial contraceptives (every Thursday 8:00am-5:00pm)

<b>Office/Division:</b>	Family Planning (OPD)	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2C	
<b>Who May Avail:</b>	All couple or any women of reproductive age	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
1. Filled out Patient's Information Sheet	Triage Staff	
2. Pregnancy test result (if necessary)	Family Planning Counselor	



3. Consent to care		Family Planning Counselor		
CLIENT STEPS	AGENCY STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register to the logbook and submit accomplished patient's information sheet	1. Gather necessary patients' information	None	5 minutes	Midwife I
2. Proceed to Family Planning Room, submit result of pregnancy test, sign consent to Family Planning Procedures	2. Conduct Family Planning counseling 2.1 Secure consent and perform the Family Planning method choice of the patient	None	30 minutes	Midwife I
	Total:	None	35 minutes	

## 9. Laboratory Services

Conducts required laboratory tests that aid in diagnosis and treatment (daily 8:00am-500pm)

<b>Office/Division:</b>	Laboratory			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patients needing laboratory services			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Laboratory request from Doctors with Charge Slip/Request		1. Doctor/physician		
2. Proof of payment ( <i>if applicable</i> )		2. Cashier		
CLIENT STEPS	AGENCY STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE



<p>1. Present laboratory request</p>	<p>1. Receive and verify the laboratory test request 1.1 Instruct the client for the required specimen; give specimen bottle</p>	<p>None</p>	<p>2 minutes</p>	<p>Medical Technologist I Laboratory Aide</p>
<p>2. For fecalysis and urinalysis, secure specimen bottle from laboratory, provide the required sample 2.1 For other laboratory test/s requiring blood sample, cooperate during extraction of blood sample</p>	<p>2. Receive fecal/urine sample  2.1. Extract blood from patient  2.2. Examine the sample received</p>	<p>None  None</p>	<p>2 minutes  15 minutes  See table of turn-around time</p>	<p>Medical Technologist I Laboratory Aide</p>
<p>3. For OPD patient, secure order of payment For in-patient, required fee shall be</p>	<p>3. Charge the requested laboratory examination/s</p>	<p>See Laboratory Services Price Index</p>	<p>2 minutes</p>	<p>Medical Technologist I Laboratory Aide</p>



automatically charged to the respective hospital bill				
4. Pay the required fees to the Cashier	4. Receive payment 4.1 Issue corresponding official receipt	None	5 minutes	Cash Clerk
5. Present official receipt to the laboratory	5. Verify proof of payment	None	2 minutes	Medical Technologist I Laboratory Aide
6. Secure laboratory results	6. Release laboratory result	None	2 minutes	Laboratory Aide
<b>TOTAL</b>		None	See table of turn-around time	

## 10. Laundry Services

The Laundry Section is responsible for providing an adequate, clean, and constant supply of linen for the comfort and safety of the patients (daily, 8:00am-5:00pm)

<b>Office/Division:</b>	Hospital Laundry Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All in-patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Request slip ( <i>change of linen</i> )		1. Nurse or Midwife on duty		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Inform the Nurse/Midwife/Nursing Attendant for necessary change of	1. Inspect the linen and prepare	None	2 minutes	Midwife I NA I



linen	request slip for necessary change of linen			
2. Cooperate with hospital staff for the necessary change of linen	2. Change the linen accordingly, and completely accomplish the request slip 2.1. Record in the logbook 2.2. Send the used linen to the laundry area for cleaning	None	5 minutes  1 minute	Midwife I NA I  Laundry Worker

<b>TOTAL</b>	None	8 minutes	
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### Miscellaneous Hospital Services and Certification Fees Index

Miscellaneous Hospital Services & Certification	Amount (Php)
• Room and Board	• 400.00/day
• Emergency Room	• 200.00
• Delivery Room	• 1,500.00
• Medical Oxygen	• 750.00/tank
• Expanded Newborn Screening Kit	• 1,750.00
• Medical Certificate	• 80.00 + 30.00 (DST)
• Certificate of Live Birth	• 80.00 + 30.00 (DST)
• Death Certificate	• 80.00 + 30.00 (DST)
• Certificate of Confinement	• 80.00 + 30.00





	(DST)
• Clinical Abstract	• 80.00 + 30.00 (DST)

## 11. Medical Records Services

Provide patient's medical records in a timely manner and maintains all health records in accordance with the principles and practices of efficient and effective health record management. (Monday- Friday, 8:00am-5:00pm)

<b>Office/Division:</b>	Medical Records Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All clients with records of hospital services availed			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. One (1) original copy of Medical Records Form		1. Medical Records Section within the hospital		
2. One (1) Photocopy of Birth Certificate of both parents of newborn child <i>(if not married)</i>		2 Philippine Statistics Authority		
3. One (1) photocopy of Marriage Contract of newborn child <i>(if married)</i>		3 Philippine Statistics Authority		
4. One (1) original copy of Hospital case number card		4 Medical Records Section within the hospital		
5. One (1) photocopy and original copy of Valid IDs (for verification purposes)		5 SSS, PWD, Driver's License, National ID, 4Ps ID		
6. One (1) original copy of Authorization Letter <i>(for representative)</i>		6 Client		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Secure and fill out the request form	1. Provide request form and advise client for documentary requirements	None	1 minute	Midwife II Nursing Attendant I
2. Provide the accomplished Request form and Hospital	2. Validate the documentary requirements	None	1 minute	Midwife II Nursing



Case No. Card together with other documentary requirements	for legality and completeness			Attendant I
3. Provide the information required	3. Interview the client 3.1 Prepare the hospital records Requested 3.2 Issue charge slip for certification and advise client to pay to the Cashier	None	5 minutes	Midwife II Nursing Attendant I
<ul style="list-style-type: none"> <li>Medical Certificates</li> </ul>		None	10 minutes	
<ul style="list-style-type: none"> <li>Certified true copies of Clinical Abstracts, Diagnostic Test Results, Insurance forms</li> </ul>		None	20 minutes	
<ul style="list-style-type: none"> <li>Certificate of Live Birth, and Death Certificate</li> </ul>		None	20 minutes	
4. Pay to the Cashier	4. Issue corresponding official receipt	None	1 minute	Cash Clerk
5. Wait for the hospital record to be released	5. Release to the client hospital record requested	None	1 minute	Midwife II Nursing Attendant I
<b>TOTAL</b>		See certification fees index	Depending on the type/kind of document	



## 12. Medical Social Services

Responsible for evaluating and determining the eligibility of the patients in availing medical social services based on Administrative Order 51-A s.2001 in government hospitals (daily, 8:00am- 5:00pm)

<b>Office/Division:</b>	Medical Social Service			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patients			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. 1 Photocopy of Birth Certificate ( <i>if single</i> )			1. Philippine Statistics Authority	
2. 1 Photocopy of Birth Certificate of Dependent ( <i>if necessary</i> )			2. Philippine Statistics Authority	
3. 1 Photocopy of Marriage Contract ( <i>if married</i> )			3. Philippine Statistics Authority	
4 (1) Photocopy of Member Data Record (MDR)			4 Philhealth Office (LHIO)	
4. Authorization letter ( <i>if patient's representative</i> )			4. Client	
5. 1 Photo copy of Valid IDs ( <i>if patient's representative</i> )			4. GSIS, SSS, Tin, Driver's License, OSCA ID, PWD, ID, 4Ps ID	
- If employed in private:				
Proof of payment			Cashier Section within the hospital	
Claim Signature Form			Billing Section within the hospital	
Claim Form 1			Billing Section within the hospital	
CLIENT STEPS	AGENCY STEPS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>❖ For admitted patient with PhilHealth member eligibility</b>				
1. Proceed to the Social Service Officer and request for PhilHealth membership validation	1. Receive documents and interview client.	None	1 minute	Medical Social Welfare Officer
	1.1 Obtain PhilHealth Identification Number (PIN)	None	2 minutes	



	<p>of member</p> <p>1.2 Check the validity of PhilHealth membership in the IHCP portal</p>			
<p>2. Listen to medical Social Worker's explanation</p>	<p>2. Interview client and accomplish corresponding PhilHealth Member Registration Form (PMRF)</p> <p>2.1 Classify patient based on AO 51-A s. 2.2 and explain the patient's classification</p> <p>2.3 Indicate the classification in the patient's chart</p>	<p>None</p>	<p>2 minutes</p> <p>1 minute</p> <p>1 minute</p> <p>1 minute</p>	<p>Medical Social Welfare Officer</p>
<p>3. Sign in the PMRF</p> <ul style="list-style-type: none"> <li>▪ <i>If the representative will sign in behalf of the patient/member, authorization letter and valid IDs are required</i></li> </ul>	<p>3. In case of inadequate requirements, instruct the client to comply</p>	<p>None</p>	<p>1 minute</p>	<p>Medical Social Welfare Officer</p>



4. Comply with the requirements	4. Check the completeness of the requirements provided and attach into the SOA of patient	None	5 minutes	Medical Social Welfare Officer
<b>Total</b>		<b>None</b>	<b>14 minutes</b>	
<b>❖ For indigent patient who is non-PhilHealth member</b>				
1. Proceed to the Social Service Officer/ PhilHealth staff	1. Conduct intake interview and accomplish intake sheet/assessment tool	None	10 minutes	Medical Social Welfare Officer
2. Wait while processing the enrolment in POS	2. Enroll in the Point of Service (POS) program of Phil Health	None	3 minutes	Medical Social Welfare Officer
▪ PhilHealth Identification Number (PIN) will be subsequently issued by PhilHealth Central Office	▪ Issuance of PIN will be constantly monitored and notified to the client once available			
<b>Total</b>		<b>None</b>	<b>13 minutes</b>	
<b>❖ For indigent OPD patient</b>				



1. Proceed to the Social Service Officer/ PhilHealth staff	1. Conduct intake interview and accomplish intake sheet/assessment tool 1.1 Classify patient in terms of Per Capita Income (PCPT)	None	10 minutes	Medical Social Welfare Officer
2. Secure Medical Social Assistance Form	2. Accomplish and issue Medical Social Assistance Form	None	1 minute	Social Welfare Officer

3. For classifications "A" or "B", proceed to Cashier to pay the amount	3. Receive payment and issue corresponding official receipt 3.1 Attach the form to SOA	As indicated in the Medical Social Assistance Form	3 minutes	Cash Clerk
4. For classifications "C1", "C2", "C3", or "D" – no payment is required – proceed to laboratory for laboratory examination or to	4. Receive the Medical Social Assistance Form for laboratory examination or issuance of medicines/supplies	None	2 minutes	Guillard M. Geneta, RMT, Med. Technologist Shiela P. Agne, RMT, Med. Technologist or Rochelle P. Mendoza, Pharmacist



pharmacy to get the medicines/supplies				
<b>TOTAL</b>		As indicated in the Medical Social Assistance Form	16 minutes	



### 13. Out Patient Department Consultation

The outpatient department provides diagnosis and care for patients that do not need to stay overnight. Daily, (Monday- Friday 9:00am-12:00nn-1:00pm-5:00pm, no consultation during Saturdays, Sundays and Holidays)

<b>Office/Division:</b>	Out-Patient Department (OPD)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patient needing medical consultation			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. One (1) original Hospital ID card for old OPD clients		Triage staff on duty		
2. One (1) original Demographic Information sheet		Triage staff on duty		
3. One (1) original Registration form		Triage staff on duty		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Fill out registration form ( <i>for new OPD clients</i> ) and present hospital ID number ( <i>for old patient</i> ) to designated staff	1. Receive filled out form and hospital ID and forward to Medical Records Section	None	1 minute	Security Guard
	1.1. Verify data and locate medical chart and bring to the designated staff		1 minute	Midwife I Midwife II
2. Proceed to waiting area and wait for the number to be called for triaging	2. Call patient's name according to sequence.	None	1 minute	Nurse II Nurse, I Midwife I Midwife II





	<i>(Observe priority patients)</i>			
3. Approach the Triage Officer when name/number is called and present self for interview and vital signs checking	3. Interview/Assess patient, take vital signs, and categorize whether for OPD or to be given ER measures	None	3 minutes	Nurse II Nurse, I Midwife I Midwife II

4. Wait for the name to be called for consultation	4. Assess and examine patient. Prescribe medicines and/ or request additional procedure	No ne	5 minutes	Medical Officer IV Medical Officer III
5. Listen to and follow instructions	5. Give and explain prescribed medications	No ne	1 minute	Nurse II Nurse I
6. Proceed to Pharmacy	6. Prepare the prescribed drug/medicine	Indicate the price/s of drug/medicine Advise the patient to pay the amount to the	1 minute	Pharmacist I



		Cashier		
9. Pay corresponding amount	9. Receive payment 9.1. Issue corresponding official receipt	Applicable amount	1 minute	Cash Clerk
10. Present official receipt to Pharmacy	10. Verify the OR and issue the drug/medicine; provide further instructions (if necessary)	None	1 minute	Pharmacist I
	<b>TOTAL</b>	As indicated in the prescribed drug/medicine	15 minutes	
<b>❖ If for diagnostic procedure:</b>				
1. Proceed to Laboratory and present the laboratory request	1. Receive laboratory request and issue charge slip	None	1 minute	Medical Technologist I
2. Pay applicable fee/s as indicated in the charge slip	2. Collect payment; issue corresponding official receipt	See table of laboratory services price index	1 minute	Cash Clerk



3. Return to Laboratory Section and present the OR	3. Receive and verify issued OR 131. Extract/Collect required specimen	None	5 minutes	Medical Technologist I
4. Wait for the result	4. Issue laboratory result	None	Depending on the type of laboratory test performed	Medical Technologist I
5. Return to OPD upon receipt of diagnostic results and present to the physician on duty	5. Receive and evaluate the diagnostic 15.1 Give instructions on prescription, referral and follow up	None	3 minutes	Medical Officer IV Medical Officer III
<b>TOTAL</b>		See table of laboratory services price index	Depending on the type of laboratory test performed	

## 14. Patient Transport Services

Transport sick or injured patients to, from, and between places of treatment, affording safety and comfort to the patients up to the point of destination. (24 hours daily)

<b>Office/Division:</b>	Nursing Service			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All patients requiring transport			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Two (2) original copies of Service Delivery Network (SDN) referral Slip			1. Physician on Duty	
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



❖ Patients from ER/Ward/OPD				
1. Prepare for the transfer/conduction of patient	1. Inform ambulance driver about the transfer/conduction and its details	None	5 minutes	Medical officer IV Medical Officer III
2. Wait for further instructions	2. Process availability of ambulance	None	3 minutes	Nurse II Nurse I Midwife Nursing Attendant
3. Cooperate with Physician and Nurse	3. Coordinate transfer to patient's hospital of choice 3.1 Provide referral slip	None	5 minutes	Medical officer IV Medical Officer III
4. Get charge slip	4. Issue Charge slip	None	1 minute	Nurse II Nurse I Midwife Nursing Attendant
5. Pay corresponding fee	5. Receive Payment 5.1. Issue corresponding official receipt	As indicated in the SOA	1 minute	Cash Clerk
6. Wait for ambulance service	6. Transport patient	None	5 minutes	Administrative Aide III (Driver)
Total		As indicated in the SOA	20 minutes	



**Laboratory Turn-around Time and Services  
Price Index**

<b>Examinations</b>	<b>Turn-around Time</b>	<b>Amount (Php)</b>
Complete Blood Count (CBC)	1 hour	180.00
Platelet Count	30 mins.	100.00
Blood typing	15 mins.	100.00
Clotting time/Bleeding time	30 mins.	40.00
Fasting Blood Sugar (FBS)	30 mins.	100.00
Random Blood Sugar (RBS)	30 mins.	100.00
Fecalysis	30 mins.	5 0 . 0 0
Occult Blood (FOBT)	30 mins.	100.00
Malaria Microscopy	1 hour	150.00
Urinalysis	30 mins.	5 0 . 0 0
Pregnancy Test	15 mins.	150.00
Acid Fast Bacilli (AFB)	After 3 specimen collection	5 0 . 0 0
HBsAg	30 mins.	250.00
*stat request	30 mins.	



## 15. Pharmacy Services (Out-Patient)

Dispense drugs and other medical supplies for inpatient and outpatient. Ensures that every patient is receiving the prescribed drugs in adequate dose for sufficient duration.

<b>Office/Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All Out-Patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. One (1) original copy of Prescription		1. Prescribing Doctor		
2. One (1) original Senior citizen ID/PWD ID (if applicable)		2. Office of the Senior Citizen		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the prescription/s to the Pharmacist	1. Review the prescription 1.1 Prepare order of payment/charge slip	Cost of medicine (See Menu Card/Price List)	3 minutes	Pharmacist I
2. Request for the cost of item/s in the prescription Present Senior Citizen's ID card (if Senior Citizen) or PWD ID card (if PWD)	2. Indicate the cost items in the prescription ❖ Grant corresponding discount 2.1 Return the prescription and provide further instructions to the client (if necessary)	None	2 minutes	Pharmacist I
3. Pay at the cashier and secure the official receipt.	3. Receive payment 3.1 Issue	See table (Maximum Drug Retail)	2 minutes	Cash Clerk



	corresponding official receipt	<i>Price Index)</i>		
4. Return to the Pharmacy - Present the Official Receipt and get the drugs/medicine/s	4. Dispense the drugs/medicine/s 4.1. Counsel to the client the proper use of the medicine/s	None	4 minutes	Pharmacist I
<b>TOTAL</b>		See table ( <i>Maximum Drug Retail Price Index)</i> )	11 minutes	



## G-1- Pharmacy Services *(In-Patient)*

<b>Office/Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who May Avail:</b>	All In-Patients (To be picked-up by Nurse/Nurse Attendant)			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. One (1) original prescription (completely filled)		1. Prescribing Doctor		
2. One (1) original Senior citizen ID/PWD ID <i>(if applicable)</i>		2. Office of the Senior Citizen, Municipal Social Welfare Office		
<b>CLIENT STEPS</b>	<b>AGENCY STEPS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the prescription to the pharmacist ❖ Present Senior Citizen's ID card of the patient <i>(if Senior Citizen)</i> or PWD ID card <i>(if PWD)</i>	1. Receive, read, and analyze the prescription 1.1 Prepare and double check the prescribed medicines/medical supplies	None	2 minutes	Pharmacist I





2. Wait for the items in the prescription to be dispensed	2. Dispense the items in the prescription ❖ <i>Cost of the items will be automatically charged to the patient's hospital bill</i>	See table ( <i>Maximum Drug Retail Price Index</i> )	1 minute	Pharmacist I
<b>TOTAL</b>		See table ( <i>Maximum Drug Retail Price Index</i> )	3 minutes	



□ Maximum Drug Retail Price Index

MEDICINES	Unit	Price per Unit (Php)
Acetylcysteine 200mg	pc	16.00
Aciclovir 200mg/5mL	pc	993.00
AlMgOH suspension 60mL	pc	35.00
AlMgOH suspension 120mL	pc	60.00
AlMgOH tab	pc	2.00
Allopurinol 100mg	pc	2.00
Amlodipine 5mg	pc	2.00
Amlodipine 10mg	pc	3.00
Amikacin 250mg/2mL	pc	88.00
Amiodarone 150mg/3mL	pc	607.00
Ampicillin 250mg vial	pc	17.00
Ampicillin 500mg vial	pc	23.00
Ampicillin 1g vial	pc	27.00
Amoxicillin 500mg	pc	3.00
Amoxicillin drops	pc	23.00
Amoxicillin 250mg/5mL	pc	35.00
Ascorbic acid 500mg tab	pc	9.00
Ascorbic acid drops	pc	23.00
Ascorbic acid syrup	pc	22.00
Aspirin 80mg tab	pc	2.00
Aspirin 100 mg tab	pc	4.00
Atropine SO4 1mg/mL	pc	49.00
ATS 1,500U	pc	94.00
Azithromycin 500mg tab	pc	17.00
BCG vial	pc	638.00
Benzympenicillin 1M	pc	17.00
Betahistine 8mg tab	pc	9.00
Bisacodyl 5mg tab	pc	2.00
Bisacodyl 5mg supp	pc	94.00
Bisacodyl 10mg sup	pc	98.00
Butamirate citrate 50mg	pc	20.00
Calcium gluconate vial	pc	188.00
Calmoseptin ointment	pc	39.00
Carbocisteine 500mg	pc	3.00



Captopril 25mg tab	pc	2.00
Celecoxib 200mg	pc	9.00

Cefalexin 500mg cap	pc	5.00
Cefalexin 100mg/mL	pc	22.00
Cefalexin 125mg/5mL	pc	25.00
Cefalexin 250mg/5ml	pc	40.00
Cefuroxime 500mg tablet	pc	74.00
Cefuroxime 250mg/5mL	pc	433.00
Cefuroxime 750mg vial	pc	273.00
Ceftazidime 1g	pc	68.00
Ceftriaxone 1g vial	pc	39.00
Celecoxib 200mg	pc	9.00
Cetirizine 10mg tab	pc	1.00
Cetirizine 2.5mg/mL	pc	32.00
Cetirizine 5mg/mL	pc	55.00
Cinnarizine 25mg	pc	2.00
Ciprofloxacin 500mg	pc	5.00
Citicoline 1g amp	pc	294.00
Clarithromycin 500mg	pc	22.00
Clopidogrel 75mg tab	pc	4.00
Clonidine 150mcg/mL	pc	157.00
Clonidine 75mg	pc	16.00
Clonidine 150mg	pc	9.00
Cloxacillin 500mg	pc	5.00
Cloxacillin 250mg/5mL	pc	48.00
Co-amoxiclav 625mg tablet	pc	19.00
Co-Amoxiclav 228.5mg/5mL	pc	339.00
Co-Amoxiclav 312mg/5mL	pc	243.00
Colchicine 500mcg	pc	3.00
Cotrimoxazole 400mg/80mg	pc	2.00
Cotrimoxazole 200mg/40mg/5mL	pc	27.00
Dexamethasone vial	pc	65.00
Diazepam 5 mg/ML	pc	282.00
Diclofenac 25mg/mL	pc	30.00
Dicycloverine 10mg	pc	1.00
Dicycloverine 10mg/5mL	pc	23.00
Diltiazem 60mg tab	pc	6.00
Diphenhydramine 50mg	pc	5.00



Diphenhydramine 12.5mg/5mL	pc	20.00
Diphenhydramine 50mg/mL	pc	93.00
Digoxin 0.25 mcg	pc	8.00

Digoxin 500mcg/2mL	pc	429.00
Domperidone 10mg	pc	2.00
Dopamine 40mg/mL	pc	88.00
Epinephrine 1mg/mL	pc	69.00
Ferrous sulfate 325mg	pc	2.00
Ferrous sulfate 75mg/0.6mL	pc	20.00
Ferrous sulfate 150mg/5mL	pc	22.00
Ferrous sulfate+FA+Vit.B.Comp	pc	3.00
Furosemide 20mg	pc	1.00
Furosemide 40mg	pc	1.00
Furosemide 20mg/mL	pc	39.00
Gentamycin 80mg/2mL	pc	55.00
Gliclazide 30mg	pc	4.00
Glimepiride 2mg	pc	11.00
Glycerine 1.9g supp	pc	16.00
Glycerine 2.5g supp	pc	12.00
Guai + salbu cap	pc	5.00
Guai + dextromethorphan syrup	pc	80.00
Hepa B vaccine	pc	328.00
Hydralazine ampule	pc	88.00
Hydrocortisone 100mg	pc	80.00
Hydrocortisone 250mg	pc	116.00
Hydroxyethyl Starch	pc	1,646.00
Hyoscine 10 mg	pc	6.00
Hyoscine 20mg/mL amp	pc	55.00
Ibuprofen 200 mg	pc	2.00
Ibuprofen 200mg/5mL	pc	61.00
Ipratropium + Salbu neb	pc	35.00
ISDN 5mg	pc	40.00
Isoxsuprine 10 mg	pc	5.00
Ketorolac 30mg/mL	pc	34.00
Ketorolac 10mg	pc	27.00
Lactulose 3.35mg/5mL 120mL	pc	272.00



Lagundi 300mg/5mL	pc	60.00
Lidocaine vial	pc	89.00
Lidocaine polyamp	pc	48.00
Loperamide 2mg	pc	2.00
Losartan 50mg (Losagan)	pc	5.00

Lubricating jelly	pc	15.00
Magnesium sulfate vial	pc	83.00
Mebendazole 100mg/5mL	pc	21.00
Mebendazole 100mg tablet	pc	5.00
Mefenamic acid 500mg	pc	2.00
Methyldopa 250mg tablet	pc	10.00
Meloxicam 15mg	pc	4.00
Metformin 500mg	pc	3.00
Metoclopramide 10mg	pc	2.00
Metoclopramide 5mg/5mL	pc	25.00
Metoclopramide 5mg/mL amp	pc	11.00
Metoprolol 50mg	pc	2.00
Metronidazole 500mg	pc	2.00
Metronidazole 125mg/5mL	pc	25.00
Metronidazole 500mg IV	pc	30.00
Methylergomethrine 125mcg	pc	6.00
Methylergomethrine 200mcg/mL	pc	44.00
Montelukast 10mg	pc	20.00
Multivitamins cap	pc	2.00
Multivitamins drops	pc	23.00
Multivitamins syrup	pc	27.00
Nalbuphine 10mg/mL	pc	230.00
Nicardipine 1mg/mL	pc	669.00
Nifedipine 5mg	pc	3.00
Norepinephrine 1mg/mL	pc	949.00
Nitroglycerin 5mg	pc	170.00
Omeprazole 20mg	pc	3.00
Omeprazole 40mg	pc	7.00
Omeprazole 40mg IV	pc	246.00
Oresol sachet	pc	5.00
Oxytocin 10IU/mL	pc	82.00
Paracetamol 500mg	pc	2.00



Paracetamol 100mg/mL	pc	20.00
Paracetamol 125mg/5mL	pc	20.00
Paracetamol 250mg/5mL	pc	21.00
Paracetamol 150mg/mL amp	pc	22.00
Paracetamol 125mg supp	pc	30.00
Paracetamol 250mg supp	pc	33.00

Phenylpropanolamine tab	pc	5.00
Phytomenadione 10mg/mL	pc	65.00
Potassium chloride vial	pc	89.00
Prednisone 10mg	pc	4.00
Propanolol 10mg	pc	2.00
Ranitidine 25mg/mL	pc	12.00
Rabies vaccine 2.5IU	pc	2,320.00
Salbutamol 2mg	pc	1.00

Salbutamol neb	pc	15.00
Salbutamol 2mg/5mL	pc	20.00
Silver sulfadiazine 10mg/g	pc	129.00
Simvastatin 20mg	pc	2.00
Simvastatin 40mg	pc	5.00
Sodium chloride 1g	pc	1.00
Sodium chloride 2.5mEq/mL	pc	86.00
Sodium bicarbonate 8.4%	pc	232.00
Tamsulosin 200mg	pc	20.00
Tramadol 50mg cap	pc	3.00
Tramadol 50mg/mL	pc	17.00
Tetanus toxoid40IU/0.5mL	pc	92.00
Telmisartan 40mg tab	pc	9.00
Telmisartan 40mg/12.5mg	pc	25.00
Tranexamic 500mg	pc	8.00
Tranexamic 500mg/5mL	pc	88.00
Trimetazidine 35mg	pc	8.00
Vitamin B complex tab	pc	2.00
Vitamin B complex amp	pc	65.00
Verapamil 5mg/2mL	pc	376.00
Zinc drops	pc	33.00
Zinc syrup	pc	45.00



<b>FLUIDS</b>	<b>Unit</b>	<b>Price per Unit</b>
D10W 500mL	btl	116.00
D50.50	btl	94.00
D5.3 500 mL	btl	94.00
D5LR 500 mL	btl	112.00
D5LR 1L	btl	89.00
D5NM 1L	btl	94.00



D5NSS 1L	btl	94.00
D5W 250mL	btl	238.00
D5W 500mL	btl	93.00
D5W 1L	btl	93.00
D5IMB 500 mL	btl	95.00
Mannitol 500mL	btl	225.00
PLR 1L	btl	94.00
PNSS 500 mL	btl	94.00
PNSS 1L	btl	94.00
PNSS Irrigating sol'n	btl	94.00
Sterile water 100mL	btl	116.00
<b>SUPPLIES</b>	<b>Unit</b>	<b>Price per Unit</b>
Abdominal binder	pc	150.00
Alcohol 500mL	pc	94.00
Alcohol 1L	pc	378.00
Armsling (mediu m)	pc	50.00
Blade	pc	26.00
Bubble humidifier	pc	477.00
Chromic	pc	180.00
Cord clamp	pc	4.00
Cotton roll	pc	247.00
Elastic bandage 3x5	pc	18.00
Elastic bandage 4x5	pc	24.00
Elastic bandage 6x5	pc	45.00
Examination Gloves	pc	294.00
ET tube	pc	129.00
Face mask	pc	17.00
Foley cath G. 12	pc	40.00
Foley cath G. 14	pc	62.00
Foley cath G. 16	pc	68.00
Foley cath G. 18	pc	68.00
Gauze pad (4x4)	pc	5.00
Gloves	pc	30.00
Guedel (white)	pc	109.00
Guedel (green)	pc	108.00
Guedel (red)	pc	108.00
Hot Water bag 100mL	pc	82.00
Hydrogen peroxide (Agua Oxinada)	pc	44.00
Ice bag #9	pc	117.00





IV cath G. 18	pc	47.00
IV cath G. 20	pc	50.00
IV cath G. 22	pc	40.00
IV cath G. 24	pc	40.00
IV cath G. 26	pc	109.00
Lubricating jelly sachet	pc	15.00
Lubricating jelly 150g	pc	229.00
Macroset	pc	47.00
Medicine cup	pc	5.00
Micropore	pc	68.00
Microset	pc	50.00
Nasal cannula (Adult)	pc	60.00
Nasal cannula (Pedia)	pc	27.00
Nasal cannula (Neonate)	pc	122.00
Nasal cannula w/ Mask (adult)	pc	71.00
Nasal cannula w/ Mask (pedia)	pc	74.00
NGT F. 8, 14, 16	pc	33.00
Nebulizer kit	pc	60.00
Needle	pc	3.00
N95 mask	pc	77.00
Paratulle	pc	55.00
Penrose drain	pc	39.00
Povidone Iodine 10%	pc	1,108.00
Roll gauze	pc	1,276.00
Silk	pc	254.00
Soluset	pc	134.00
Sterile water 100 mL	pc	144.00
Suction catheter 8, 10, 12, 18	pc	60.00
Syringe 1cc	pc	10.00
Syringe 3cc	pc	10.00
Syringe 5cc	pc	10.00
Syringe 10cc	pc	12.00
Syringe 30cc	pc	25.00
Thermal Scanner	pc	3,360.00
Thermometer	pc	117.00
Urine bag (A)	pc	32.00
Urine bag (P)	pc	7.00
<input type="checkbox"/> <b>Note:</b> Price varies according to manufacturer's price at a given time		



**ORIENTAL MINDORO CENTRAL DISTRICT  
HOSPITAL  
EXTERNAL SERVICES**



## 1. ADMITTING SECTION

Description: The Admitting Section is open 24 hours daily.

<b>Office or Division:</b>	Health Information Management Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All Patients who will be admitted to the ward of the hospital			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request for admission slip		Attending Physician / ER Nurse		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
Hospital Record		Medical Record Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. <i>Dalhin ang request of admission slip sa admitting section para sa panayam. (Patient / relative brings the request for Admission slip to Admitting Section for interview.)</i>	1. <i>Panayamin ang pasyente / kamag-anak na kailangang "i-admit". (Interviews the patient or relative of the patient to be admitted.)</i>	Walang Bayad	5 minuto	<i>Admin Aide Admitting Section OMCDH</i>
	1.1. <i>Lagyan ng mga detalye ang patient information sheet. (Fills up the patient's information sheet.)</i>	Walang Bayad	2 minuto	<i>Admin Aide Admitting Section OMCDH</i>
	1.2. <i>Isulat sa admission logbook. (Logs admission.)</i>	Walang Bayad	1 minuto	<i>Admin Aide Admitting Section OMCDH</i>
	1.3. <i>I-encode ang detalye ng pasyente sa sistema.</i>	Walang Bayad	2 minuto	<i>Admin Aide Admitting Section</i>





	(Instructs patient / patient's relative to return to Emergency Unit.)			
2. Bumalik sa ER at isumite ang dokumento sa ER Nars. (Returns to ER and submits admitting documents to ER nurse-on-duty.)	2. Ipagbigay alam sa ward na ang bagong admit na pasyente. (Informs ward or clinical area concerned of admission.)	Walang bayad	2 minuto	Nurse ER Section OMCDH
End of Transaction			14 minuto	

## 2. ANIMAL BITE TREATMENT CENTER

Description: Animal Bite Treatment Center is open Monday to Friday from 8:00am to 5:00pm. It caters all patients bitten by any kind of rabid animals.

<b>Office or Division:</b>	Animal Bite Treatment Center			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patient bitten by any kind of rabid animals			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
Hospital Record		Medical Record Section		
Informed Consent		Animal Bite Treatment Center		
Animal Bite Assessment Tool		Animal Bite Treatment Center		
Animal Bite Vaccine Card		New Patient-Animal Bite Treatment Center Old Patient (follow-up visit)- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Kumuha ng numero sa gwardya. (Get the number from the Security Guard.)	1. Bigyan ng numero ang pasyente. (Issue number to patient.)	Walang Bayad	2 Minuto	Security Guard I Civil Security Unit OMCDH



<p>2. Ilagay ang numero at Hospital Number ng pasyente sa kahon sa tapat ng OPD consultation Room. (Place the number together with his/her hospital number and put in a box provided in front of consultation room.)</p>	<p>2. Kunin ang ibinigay n numero at hospital number ng pasyente. (Get the patient assigned number together with his/ her hospital number and</p>	Walang Bayad	5 minuto	Administrative Aide III Medical Records OMCDH
	<p>2.1. Kunin ang talaan ng pasyente sa Medical Records Section. (Secure patients' record at the Medical Records Section.)</p>	Walang bayad	2 minuto	Administrative Aide III Medical Records OMCDH
<p>3. Pumunta sa "waiting area" at hintayin na tawagin ang pangalan. (Proceeds to waiting area and wait the name to be called.)</p>	<p>3. Tawagin ang pangalan ng pasyente. (Call Patient by his/ her name.)</p>	Walang Bayad	1 minuto	Nurse I OPD OMCDH
<p>4. Ibigay ang buong detalye ng kagat ng hayop. (Give full details of animal bite.)</p>	<p>4. Isulat ang detalye ng kagat ng hayop. (Record chief complain, history of animal bite.)</p>	Walang Bayad	1 minuto	Nurse I OPD OMCDH
	<p>4.1. Kunan ng vital signs ang pasyente at isulat sa patients' record. (Take initial vital signs and write</p>	Walang Bayad	3 minuto	Nurse I OPD OMCDH



	<i>on patients' record.)</i>			
<i>5. Hintayin na tawagin para sa pagsusuri ng doctor. (Wait for the name to be called and proceeds to OPD room for consultation.)</i>	<i>5. Tawagin ang pasyente. Suriin at ipaliwanag ang kailangang gamutan. (Call out name of patient, examine, diagnose, explain the animal bite and give appropriate treatment.)</i>	Walang Bayad	5 minuto	Surgeon OPD OMCDH
<i>6. Pumunta sa ABTC para sa pagsusuri ng kagat ng hayop. (Proceeds to ABTC for categorization of animal bite.)</i>	<i>6. Ilista at suriin ang parte ng katawan na kinagat ng hayop. (Register and assess animal bite.)</i>	Walang Bayad	1 minuto	Nurse I ABTC OMCDH
<i>7. Tanggapin ang Bakuna sa Rabies at iba pang lunas. (Receive Anti-Rabies vaccine and other needed treatment.)</i>	<i>7. Bigyan ng naaayong Bakuna at iba pang lunas ayon sa kategorya ng sugat. ( Provide vaccine and other treatment according to category of animal bite.)</i>	Depende sa availability ng bakuna	45 minuto	Nurse I ABTC OMCDH
	<i>7.1. Bigyan at ipaliwanag ang skedyul nag susunod na pagbabakuna. (Explain instruction regarding the schedule of immunization/</i>	Walang Bayad	1 minuto	Nurse I ABTC OMCDH



	<i>vaccination and follow-up visit.)</i>  <i>7.2. Isulat ang detalye ng pasyente sa logbook, i-HOMIS at NARIS. (Enter patient's data to the logbook, Hospital Information System (i-HOMIS) and NARIS- National Rabies Information System.</i>	Walang Bayad	2 minuto	Nurse I ABTC OMCDH
<i>8. Pumunta sa Philhealth Section. (Proceeds to Philhealth Section.)</i>	<i>8. Bigyan ng direksyon patungo sa Philhealth Section para sa paggamit ng Philhealth Insurance.</i>	Walang Bayad	1 Minuto	Nurse I ABTC OMCDH
	Total	Depende sa availability ng bakuna	1 oras at 9 minuto	

### 3. BILLING SERVICE (Open from Monday to Sunday from 8:00am to 5:00pm)

#### Availing of BILLING/Discharge Patients (External Services)

<b>Office or Division:</b>	Billing Section
<b>Classification:</b>	Simple Transaction
<b>Type of Transaction:</b>	G2C-Government to Citizen
<b>Who may avail:</b>	All patients of OMCDH





CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
<p>I. Patient with Valid Philhealthmembership (Mayroon Philhealth)</p> <p>A. In-Patient – Discharge/Clearance Slip (Admitted)-PhilHealth Approval Slip</p> <p>B. Out-Patient - OPD Clearance Slip Patient's OPD Record PhilHealth Approval Slip</p> <p>C. Emergency Room/Surgical ER/ Surgical Clearance of Slip ER/Surgical Record PhilHealth Approval Slip</p> <p>D. Animal Bite (ABTC) Animal Bite Clearance Slip Patient's Record (ER/OPD) PhilHealth Approval Slip</p>	<p>Nurse's Station Medical Social Service</p> <p>OPD Section OPD/Record Section Medical Social Service</p> <p>ER/Nurse in-charge ER/Record Section Medical Social Service</p> <p>ABTC Nurse Animal Bite Center/Record Section Medical Social Service</p> <p>Nurse's Station OPD Section</p> <p>ER/Nurse in-charge</p>
<p>II. Patient without valid Philhealth Membership (Walang PhilHealth)</p> <p>A. In-Patient – Discharge/Clearance Slip</p> <p>B. Out-Patient – OPD Clearance Slip</p> <p>C. Emergency Room/Surgical ER/Surgical Clearane or Slip</p> <p>D. Animal Bite (ABTC)</p>	<p>ABTC Nurse</p>



Animal Bite Clearance Slip				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For PhilHealth Patient: Submit Discharge/OPD/ER Animal Bite Clearance or Slip.	1. Receive and check Discharge Clearance or Slip and other supporting documents.	None	1 minutes	<i>Admin. Aide Billing Section OMCDH</i>
Philhealth Approval Slip OPD/ER Records.	1.1. Generate and Proces Philhealth Claim Forms.	None	10 minutes	<i>Admin. Aide Billing Section OMCDH</i>
For Non-PhilHealth Patient:	1.2. Receive and check Discharge clearance or Slip.			<i>Admin. Aide Billing Section OMCDH</i>
Submit Discharge/OPD/ER Animal Bite Clearance or Slip.	1.3. Generate Patient's Hospital Bill or SOA.			<i>Admin. Aide Billing Section OMCDH</i>
Wait for issuance of statement of account or hospital bill (proceed to Step 3).				
2. For Patient with Philhealth:  Sign claims form and other related documents.	2. Asks and assists patient/representative to sign claim forms and other documents needed.  2.1. Verify completeness of Claim forms.	None	5 minutes	<i>Admin. Aide Billing Section OMCDH</i>



3. Receive copy of Statement of Account or bill and listen for further instructions.	3. Issued a copy of Statement of Account or Patient's Bill.  3.1. Give instructions as needed for the next flow of transactions. (Discharging of Patient.)	Wala	10 minuto	<i>Admin. Aide Billing Section OMCDH</i>
	End of Transaction	None	10 minutes & 20 minutes w/philhealth	

**4. CASHIERING SERVICE / (Pagbabayad ng Bill ng Pasyente) – External Services**  
**Open Monday- Sunday 8am – 5:00pm at kung wala po ay sa Pharmacy ang pagbabayad.**

<b>Office or Division:</b>	Cash Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	In-patients and Out-Patients na magbabayad ng kanilang bill o charges slip			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Para sa mga In-Patient/For In-Patient - Bill at Clearance ng Pasyente		Billing Section/Nursing Station		
Para sa mga Out-Patient - Charge Slip - Senior Citizen/PWD ID(kung naangkop)		OPD Section/Laboratory/X'ray/Pharmacy		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. <i>In-Patient:</i> <i>Kukuha ang kliyente ng numero na nkalagay sa harap ng kahera. Umupo sa waiting area at hintaying matawag ang kanyang numero at lumapit</i>	1. <i>Magtawag ng numero ang kaherang nakatalaga. Tatanggapin ang bill at clearance ng pasyente ang kaukulang bayad. (Call the number the Cashier</i>	Wala	1 minuto	<i>Cash Clerk I Cashiering OMCDH</i>



<p>sa Cashier's window. (In-Patient: The client will take the number placed on the front of Cash Register. Sit on waiting area and wait for his number to be called and approach the Cashier window.)</p>	<p>assigned. The patient will be receive the bill and clearance the corresponding fee.)</p>			
<p>2. <i>Ibibigay ng pasyente ang kaukulang bayad base sa kanyang bill.</i> (Patient will provide the corresponding fee based on his/her bill.)</p>	<p>2. <i>Bibigyan ng resibo batay sa ibinayad sa bill ng pasyente at lalagdaan ang clearance.</i> (Will be given a receipt based on the patients bill paid and clearance will be signed.)</p>	<p>Base sa ibinayad sa bill (Based on what patient paid)</p>	1minuto	<p>Cash Clerkl Cashiering OMCDH</p>
	Total		2minuto	
<p>1. <i>Out-Patient: Kumuha ng numero sa harap ng Cashier at hintayin matawag ang kanyang hawak na numero at ibibigay ang charge slip.</i>(Get a number on the front of the Cashier and wait his number to be called and the charge slip will be issued.)</p>	<p>1. <i>Magtatawag ang Cash Clerk sa may mga numerong hawak ng magbabayad.at tatanggapin ang charge slip.</i> (The Cash Clerk will call the number held by the payer and accept the charge slip.)</p>	Wala	1 minuto	<p>Cash Clerkl Cashiering OMCDH</p>
<p>2. <i>Ibibigay ang kaukulang bayad batay sa charge slip.</i> (The corresponding fee will be provided</p>	<p>2. <i>Tatanggapin at bibigyan ng resibo batay sa binayarang charge slip.</i></p>	<p>Base sa ibinayad ng pasyente.</p>	1 minuto	<p>Cash Clerkl Cashiering OMCDH</p>



<i>based on the charge slip.)</i>	<i>(Will be accepted and given a receipt based on the paid charge slip.)</i>	<i>(Based on what patient paid.)</i>		
	Total		2 minuto	

## 5. DENTAL SERVICE

(Open to all who needed the dental services)

Araw at oras ng serbisyo: Lunes hanggang Byernes (8:00 ng umaga hanggang ika 4:00 ng hapon)

<b>Office or Division:</b>	Oriental Mindoro Central District Hospital			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Ang mga nagangailangan ng serbisyong Medikal			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
OPD FORM		RECORD SECTION		
Patient's Information (Form)		OPD Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. <i>Secure a number from TRIAGE area. (12 na payente lamang kada araw ang maaaring bigyan ng numero para sa tamang oras ng serbisyo.)</i>	1. Give the patient's number. (1 <sup>st</sup> come 1 <sup>st</sup> serve basis.)	None	1 minute	<i>Triage staff</i>
2. <i>Kumuha ng Covid 19 Pre-Form at sagutan ito ng matapat at totoo lamang para sa kaligtasan at seguridad ng bawat isa.</i>	2. <i>Ibigay sa pasyente ang (Form) at pasagutan ito sa kanila at kuhanin kapag ito ay kompleto nang sagutan ang lahat ng katanungan.</i>	wala	10 minuto	<i>Admin Aide Triage Section OMCDH</i>



<p>3. Kumuha ng OPD record.</p>	<p>3. For old record- hanapin ang dating record ng pasyente at ibigay sa kanila. For new patient- bigyan ng bagong record at hospital number ang pasyente.</p>		<p>30 minuto</p>	<p>Admin. Aide III Medical Records OMCDH</p>
<p>4. Magpunta sa dental clinic (2<sup>nd</sup> floor). Ibigay sa dental aide ang OPD record ng pasyente at hintayin ang tawag ng pangalan.</p>	<p>4. Kunan ng vital signs ang pasyente.</p> <p>4.1. Kapag mataas ang presyon ng pasyente pagpahingahin muna ito bago magpatuloy sa proseso.</p>	<p>wala</p>	<p>3 minuto</p>	<p>Nursing Attendant Dental Section OMCDH</p> <p>Nursing Attendant Dental Clinic OMCDH</p>
	<p>4.2. Ang dental aide ay magsasagawa ng pinal na interbyu sa pasyente sa kanilang sariling record forms (IPTR) at magbibigay ng family serial number.</p>	<p>wala</p>	<p>10 minuto</p>	<p>Nursing Attendant Dental Clinic OMCDH</p>
<p>5. Sumulat sa log book at pumirma sa consent para sa gagawin.</p>	<p>5. Ibigay ang consent form.</p>	<p>wala</p>	<p>1 minuto</p>	<p>Dentist II Dental Clinic OMCDH</p>



<p>6. <i>Papasukin sa loob ng dental clinic ang unang pasyente ayon sa kanilang hawak na numero.</i></p>	<p>6. <i>Ang Dentista ay magsasagawa ng Oral examination sa pasyente at recording at ipapaalam ang nararapat na serbisyo.</i></p>	<p>wala</p>	<p>10 minuto</p>	<p>Dentist II Dental Clinic OMCDH</p>
<p>7. <i>Pabilihin ang pasyente ng mga kailangang gamitin sa gagawing serbisyo.</i></p>	<p>7. <i>Bigyan ng lista ang pasyente sa mga kakailanganing gagamitin sa kanya.</i></p>	<p>Depende sa presyo ng gamit pangkasalukuyan at pangangailangan</p>	<p>15 minuto</p>	<p>Patient</p>
<p>8. <i>Ihanda ang sarli ayon sa gagawing serbisyo.</i></p> <p>8.1. <i>Hintayin ang inyong reseta ng gamot na kailangan inumin at unawain ang instraksyon kung papaano.</i></p>	<p>8. <i>Ang Dentista ay magsasagawa ng nararapat gawin ayon sa pangangailangan ng pasyente.</i></p> <p>8.1. <i>Resetahan ng gamot at payuhan kung papaano at hanggang kelan ito dapat inumin.</i></p> <p>8.2. <i>Payuhan ng tamang pangangalagan ng ngipin.</i></p>	<p>Tingnan sa talaan ng dental service</p> <p>wala</p>	<p>30 minuto</p> <p>1 minuto</p>	<p>Dentist II Dental Clinic OMCDH</p> <p>Dentist II Dental Clinic OMCDH</p>



<b>TAPOS NG TRANSAKSYON:</b> <b>Mahigit 2 oras</b> <i>depende sa pangangailanga ng serbisyo ksama ang paghihintay. ( 143 minuto)</i>	<i>Mga serbisyo:</i>  <i>Bunot ng ngipin</i>		30minuto	Dentist II Dental Clinic OMCDH
	<i>Linis ng ngipin</i>		30 minuto	
	<i>Fluoride application</i>		30 minuto	
	<i>Pits &amp; fissure sealant</i>		30 minuto	
	<i>Special Procedures</i> <i>1. Pagbusbos/ I&amp;D</i> <i>2. odontectomy</i> <i>3. alveolectomy may kasamang tahi</i>		30 minuto 1-2 oras 1 oras	

## 6. EMERGENCY UNIT

Description: Ang Emergency Unit is open 24 hours daily.

### A. Pagdating ng pasyente sa Triage

<b>Office or Division:</b>	Emergency Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patients needing emergency care and admission.			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Hospital Number			New Patient-Medical Record Section Old Patient- Patient Itself	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Ibigay ang impormasyon tungkol sa pasyente at nakaraang paglalakbay. Itsek sa papel na ibinigay.	1. Tingnan ang nakasulat na impormasyon tungkol sa pasyente o galing sa malapit na	Walang Bayad	5 Minuto	Nurse II ER OMCDH





<p><i>(Give details of patients' present illness, history of travel and exposure.)</i></p>	<p><i>kamag-anak at alamin ang sanhi ng pagkakasakit, history ng paglalakbay at exposure sa covid positive (lugar o tao)</i>  <i>(Check the correct information of patient, travel history and exposure to Covid positive.)</i></p>			
	<p><i>1.1. Kunan ng vital signs at tingnan ang kalagayan ng pasyente</i>  <i>(Get vital signs and assess patient condition.)</i></p>	Walang Bayad	3 Minuto	Nurse II ER OMCDH
	<p><i>1.2. Isulat sa logbook o daily census ang pangalan ng pasyente</i>  <i>(Write patient details on daily census logbook.)</i></p>	Walang Bayad	1 Minuto	Nurse II ER OMCDH
<p><i>2. Pasyenteng walang sintomas</i>  <i>(Patient with no symptoms.)</i></p>	<p><i>2. Ibigay ang Covid Checklist form sa pasyente at direksyon kung saang unit ng ospital sya pupunta ( e.g. ER/ OPD/ ABTC/ DR/ Dental/ Laboratory)</i>  <i>(Give the Covid Checklist form and direction depending the</i></p>	Walang Bayad	2 minuto	Nurse II ER OMCDH



	<i>needed health service.)</i>			
<i>3. Pasyenteng mayroong sintomas (Patient with symptoms.)</i>	<i>3. Dalhin ang pasyente sa Holding Area. (Bring patient to the Holding Area.)</i>	Walang Bayad	1 minuto	Utility Worker ER OMCDH
	<i>3.1. Kumuha ng kumpletong impormasyon tungkol sa sakit ng pasyente at paglalakbay. (Get complete patient details about present condition and travel history.)</i>	Walang Bayad	2 minuto	Nurse II ER OMCDH
	<i>3.2. Isangguni sa doctor ang kalagayan ng dumating na pasyente. (Notify the resident on duty about the new patient and his/her condition.)</i>	Walang Bayad	2 minuto	Nurse II ER OMCDH
	<i>3.3. Suriin ng doctor ang kondisyon ng pasyente at bigyan ng kinakailangang gamutan. (Examine and evaluate patients' condition and</i>	Walang Bayad	5 minuto	Medical Officer III ER OMCDH



	<p><i>provide corresponding treatment.)</i></p> <p><i>3.4. Ibigay ang gamutan sa pasyente. (Carries out doctors' order and administer treatment.)</i></p> <p><i>3.5. Ipaliwanag sa pasyente ang disposisyon ng kanyang kondisyon (e.g. Admission/ Transfer/ Sent Home) (Explain patients' condition and his/her disposition.)</i></p> <p><i>3.6. Ipagbigay alam sa MESU/ PESU ang detalye ng pasyente. (Inform MESU / PESU about the patient.)</i></p>	<p>Depend e sa supplies at gamot na ibinigay</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>45 minuto</p> <p>2 minuto</p> <p>2 minuto</p>	<p>Nurse II ER OMCDH</p> <p>Medical Officer III ER OMCDH</p> <p>Nurse II ER OMCDH</p>
	Total	Depend e sa supplies at gamot na ibinigay	1 oras at 10 minuto	



## B. Pagdating ng Pasyente sa Emergency Unit

<b>Office or Division:</b>	Emergency Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patients needing emergency care and admission.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Ibigay ang impormasyon tungkol sa pasyente. (pangalan, edad, kasarian, tirahan at ang kalagayan o sanhi ng pagkakasakit ng pasyente.) (Give details of patients' present illness.)	1. Isulat ang tamang impormasyon tungkol sa pasyente galing sa malapit na kamag-anak at alamin ang sanhi ng pagkakasakit. ( Write the correct information of patient.)	Walang Bayad	5 Minuto	Nurse II ER OMCDH
2. Pumunta sa Medical Record section para sa pagkuha ng Talaan ng pasyente na may bilang. (Proceeds to Medical Records Section for issuance of patients' record with hospital number.)	2. Bigyan ng instraksyon sa pagkuha ng patients' record na may numero ng ospital sa Medical Record Section. (Give instruction on how to get patients' record with hospital number to Medical Record Section.)	Dating Pasyente- Walang Bayad  Bagong Pasyente- Php 20.00	1 Minuto	Nurse II ER OMCDH
3. Manatili sa tabi ng pasyente at magbigay ng karagdagang impormasyon. (Relative stay with the patient and gives additional information for the present illness of his/ her patient.)	3. Kunan ng "vital signs" at tingnan ang kalagayan ng pasyente. (Get vital signs and assess condition of patient.)	Walang Bayad  Walang Bayad	5 Minuto  3 Minuto	Nurse II ER OMCDH  Nurse II ER



	<p>3.1. <i>Isangguni sa doktor ang dumating na pasyente at ang kalagayan nito. (Refer to resident on duty the new arrived patient and his/ her condition.)</i></p> <p>3.2. <i>Suriin ang kalagayan ng pasyente at ibigay ang kailangang gamutan. (Examine and evaluate patients' condition and provide necessary treatment.)</i></p> <p>3.3. <i>Ibigay ang mga kailangang gamot ayon sa resita ng doktor. (Carries out treatment prescribed by the resident physician on duty.)</i></p>	<p>Walang Bayad</p> <p>Walang Bayad</p>	<p>5 Minuto</p> <p>30 Minuto</p>	<p>OMCDH</p> <p>Medical Officer III ER OMCDH</p> <p>Nurse II ER OMCDH</p>
<p>4. <i>Ibigay ang pahintulot sa mga pagsusuri na kailangan ng pasyente. (Give consent on diagnostic test/ laboratory test/ x-ray/ ECG.)</i></p>	<p>4. <i>Ibigay ang mga tagubilin sa mga pagsusuri na gagawin sa pasyente. (pagsusuri ng dugo, ihi, dumi, X-ray, ECG at iba pang pagsusuri na kailangan base sa kanyang gamutan) (Explain the diagnostic or laboratory test needed by the patient.)</i></p>	<p>Walang Bayad</p>	<p>2 Minuto</p>	<p>Nurse II ER OMCDH</p>



	<p><i>4.1. Isulat ang detalye ng pasyente sa logbook at sa i-HOMIS. (Enter patient's data to the logbook and Hospital Information System (I-HOMIS.)</i></p>	Walang bayad	1 minuto	Nurse II ER OMCDH
<p><i>5. Bayaran ang mga obligasyon para sa mga ibinigay na gamutan sa pasyente. (Pay bills to the cashier.)</i></p>	<p><i>5. Ibigay ang ER Clearance at ibigay ang direksyon papunta sa Botika bago pumunta sa Cashier. (Give ER Clearance to patient or relatives, and proceeds to pharmacy and cashier to pay bills.)</i></p>	Depend e sa supplies at gamot na ibinigay	3 Minuto	Nurse II ER OMCDH
	Total	Depend e sa supplies at gamot na ibinigay	45 minuto	

C. Pagdating ng Pasyente na Nag-aagaw Buhay sa Emergency Unit

<b>Office or Division:</b>	Emergency Unit
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C- Government to Citizen
<b>Who may avail:</b>	All patient needing very urgent care or resuscitation.
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
Hospital Number	New Patient-Medical Record Section



		Old Patient- Patient Itself		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Ibigay ang impormasyon tungkol sa pasyente. (Give details of patients, present illness.)	1. Isulat ng tamang impormasyon tungkol sa pasyente galing sa malapit na kamag-anak at alamin ang sanhi ng pagkakasakit ng pasyente. ( Write the correct information of patient.)	Walang Bayad	3 Minuto	Nurse II ER OMCDH
2. Ibigay ang pahintulot sa pagbibigay ng pangsagip buhay o lunas sa pasyente at karagdagang impormasyon tungkol sa sakit ng pasyente. (Give consent for resuscitation and additional information on the illness of the patient.)	2. Mabilis na pagsusuri sa kalagayan o kondisyon ng pasyente at pagkuha ng “vital signs” habang inilalapat ang pangunahing lunas. (Immediate assessment of patients’ condition and taking of vital signs.)	Walang Bayad	3 Minuto	Nurse II ER OMCDH
	2.1. Mabilis na isangguni sa doktor ang dumating na pasyente at ang kalagayan nito. (Notify immediately the resident on duty of the new patient arrived and his/ her condition.)	Walang Bayad	1 Minuto	Nurse II ER OMCDH
	2.2. Mabilis na pagsusuri sa kalagayan o kondisyon ng pasyente.	Walang Bayad	5 Minuto	Medical Officer III



	<p><i>(Examine and evaluate immediately the patients' condition.)</i></p> <p><i>2.3. Mabilis na pagbibigay ng kailangang gamot at pagsasagawa ng iba pang pangsagip buhay o lunas ayon sa tagubilin ng doctor. (Provide immediate treatment and resuscitation.)</i></p> <p><i>2.4. Patuloy na bantayan ang "vital signs" at kalagayan ng pasyente. (Continuous monitoring of patients' vital signs and patients' condition.)</i></p> <p><i>2.5. Isaayos ang katawan ng pasyente kung sakaling binawian ng buhay. (Provide post mortem care to patient.)</i></p> <p><i>2.6. Makipag-ugnayan sa Administrative Aide para sa paglilipat ng pasyente sa morgue. (Coordinate to Administrative Aide in bringing the cadaver to morgue.)</i></p>	<p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>3 Minuto</p> <p>30 minuto</p> <p>5 minuto</p> <p>3 minuto</p>	<p>ER OMCDH</p> <p>Medical Officer III ER OMCDH</p> <p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p> <p>Nurse II ER</p>
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	<p><i>2.7. Isulat ang detalye ng pasyente sa logbook at sa i-HOMIS. (Enter patient's data to the logbook and Hospital Information System (I-HOMIS.)</i></p>	Walang bayad	2 minuto	<p>OMCDH</p> <p>Nurse II ER OMCDH</p>
<p><i>3. Bayaran ang mga obligasyon para sa mga ibinigay na gamutan sa pasyente. (Pay bills to the cashier.)</i></p>	<p><i>3. Ibigay ang Emergency Clearance at magbigay ng direksyon papunta sa Botika at Cashier. (Give ER Clearance to patient or patients' relatives, and proceeds to pharmacy, then to cashier to pay bills.)</i></p>	Depend e sa supplies at gamot na ibinigay	3 minuto	Nurse II ER OMCDH
	Total	Depend e sa supplies at gamot na ibinigay	58 minuto	



D. Para sa mga pasyenteng kailangang ilipat sa Mataas ng Pagamutan

<b>Office or Division:</b>	Emergency Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patient requiring intervention to higher health facilities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. <i>Itanong ang kalagayan o kondisyon ng pasyente. (Ask details of patients' present condition.)</i>	1. <i>Ibigay ng tamang impormasyon tungkol sa kalagayan o kondisyon ng pasyente at ang dahilan ng paglipat sa mataas na pagamutan. (Give information about status of patients' illness and the need of transfer to higher facility.)</i>	Walang Bayad	5 Minuto	Medical Officer III ER OMCDH
2. <i>Ibigay ang pahintulot sa paglipat ng pasyente sa mataas na pagamutan. (Give consent for transfer of patient to higher facility.)</i>	2. <i>Isagawa ang Referral Letter para sa paglipat sa mataas na pagamutan. ( Make a Referral Letter- duplicate copy.)</i>	Walang Bayad	3 minuto	Medical Officer III ER OMCDH/ Nurse II ER OMCDH
	2.1. <i>Makipag-ugnayan sa paglilipatang pagamutan para sa pagdating ng pasyente.</i>	Walang Bayad	5 minuto	Nurse II ER OMCDH



	<p><i>(Coordinate to receiving hospital about the transfer of patient to their facility.)</i></p> <p><i>2.2. Makipag-ugnayan sa Ambulance Driver at Health Worker na nakatalaga sa paglipat ng pasyente sa mas mataas na antas ng pagamutan. (Coordinate to Ambulance Driver and to the Health Worker that will accompany the patient during transport.)</i></p> <p><i>2.3. Isulat ang detalye ng pasyente sa logbook at sa i-HOMIS. (Enter patient's data to the logbook and Hospital Information System (I-HOMIS.)</i></p>	<p>Walang Bayad</p> <p>Walang bayad</p>	<p>5 minuto</p> <p>2 minuto</p>	<p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p>
<p><i>3. Bayaran ang mga obligasyon para sa mga ibinigay na gamutan sa pasyente. (Pay bills to the cashier.)</i></p>	<p><i>3. Bigyan ng Emergency Clearance at magbigay ng direksyon papunta sa Botika at Cashier. (Give ER Clearance to patient or patients' relatives, and</i></p>	<p>Depend e sa mga supplies o gamot na ibinigay sa pasyent e</p>	<p>2 minuto</p>	<p>Nurse II ER OMCDH</p>



	<p><i>proceeds to pharmacy and cashier to pay bills.)</i></p> <p><i>3.1. Makipag-ugnayan sa Administrative Aide para sa paglipat ng pasyente sa sasakyan o ambulansya. (Coordinate to Administrative Aide for the transfer of patient to ambulance.)</i></p>	Walang Bayad	2 minuto	Nurse II ER OMCDH
	Total	Depend e sa mga supplies o gamot na ibinigay sa pasyent e	24 minuto	

E. Para sa mga pasyenteng kailangang Obserbahan o Babantayan ang kalagayan o kondisyon sa loob ng apat na oras

<b>Office or Division:</b>	Emergency Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patient requiring observation of present illness for four hour or less.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



<p>1. Itanong ang kalagayan o kondisyon ng pasyente. (Ask details of patients' present condition.)</p>	<p>1. Ibigay ang tamang impormasyon tungkol sa kalagayan o kondisyon ng pasyente at ang dahilan ng observation. (Give information about status of patients' illness and the need for observation.)</p>	<p>Walang Bayad</p>	<p>5 Minuto</p>	<p>Medical Officer III ER OMCDH</p>
<p>2. Manatili sa tabi ng pasyente at magbigay ng karagdagang impormasyon gayundin ang panibagong nararamdaman nito. (Relative stay beside the patient and report complain of patient.)</p>	<p>2. Patuloy na bantayan ang "vital signs" at kalagayan ng pasyente at alamin ang panibagong nararamdaman. (Monitor patients' vital signs and re-assess for any untoward signs and symptoms that may arise.)</p> <p>2.1. Isangguni sa doktor ang di-magandang pakiramdam ng pasyente at ang kalagayan nito. (Notify the resident on duty about the untoward signs and symptoms experienced by the patient.)</p> <p>2.2. Suriin ang kalagayan ng pasyente at</p>	<p>Walang bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>5 minuto</p> <p>3 minuto</p> <p>5 minuto</p>	<p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p> <p>Medical Officer III ER</p>



	<p><i>magbigay ng kailangang gamutan. (Examine, evaluate patients' condition and provide treatment.)</i></p> <p><i>2.3. Ibigay ang gamot sa pasyente ayon sa utos ng doctor. (Carries out treatment ordered by the doctor.)</i></p> <p><i>2.4. Isulat ang detalye ng pasyente sa logbook at sa i-HOMIS. (Enter patient's data to the logbook and Hospital Information System (I-HOMIS).)</i></p>	<p>Depend e sa supplies at gamot na ibinigay</p> <p>Walang bayad</p>	<p>5 minuto</p> <p>2 minuto</p>	<p>OMCDH</p> <p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p>
<p><i>3. Alamin ang mga gamot na iinumina pag-uwi sa bahay. (Receives instruction on home medication and treatment needed.)</i></p>	<p><i>3. Ipaliwanag ang tamang pag-inom ng mga gamot sa bahay at bigyan ng sapat na kaalaman para maiwasan ang pagkakasakit o komplikasyon. (Provides instruction on home medication, treatment given and prevention of illness and its complication.)</i></p>	<p>Walang Bayad</p>	<p>2 minuto</p>	<p>Nurse II ER OMCDH</p>



4. Bayaran ang mga obligasyon para sa mga ibinigay na gamutan sa pasyente. (Pay bills to the cashier.)	4. Ibigay ng Emergency Clearance at direksyon papunta sa Botika at Cashier. (Give ER Clearance to patient or patients' relatives, and proceeds to pharmacy and cashier to pay bills.)	Depend e sa supplies at gamot na ibinigay sa pasyente	2 minuto	Nurse II ER OMCDH
	Total	Depend e sa supplies at gamot na ibinigay sa pasyente	29 minuto	

F. Para sa mga pasyenteng kinakailangang Tumigil sa Pagamutan

<b>Office or Division:</b>	Emergency Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patient requiring hospital management or confinement.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
Philhealth Documents		Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Ibigay ang pahintulot sa pagtigil ng pasyente sa pagamutan. (Gives consent for admission.)	1. Ibigay ang tamang impormasyon tungkol sa kalagayan o kondisyon ng	Walang Bayad	5 Minuto	Medical Officer III ER OMCDH



	<p><i>pasyente at sa pagtigil sa pagamutan. (Gives information about status of patients' illness and the need for admission or confinement.)</i></p> <p><i>1.1. Kunan ng "Informed Consent to Care" ang pasyente. (Secures Informed Consent to Care for admission.)</i></p> <p><i>1.2. Ibigay ang gamot ayon sa kalagayan o kondisyon ng pasyente. (Provides treatment needed by the patient on his/ her stay to hospital.)</i></p> <p><i>1.3. Dalhin ang resita ng doktor sa botika. (Bring the prescripton to the pharmacy.)</i></p> <p><i>1.4. Ibigay ng kailangang gamot ayon na ineresita ng doctor. (Carries out prescribed treatment ordered by the resident on duty.)</i></p>	<p>Walang Bayad</p> <p>Depend e sa supplies at gamot na ibinigay sa pasyent e</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>2 minuto</p> <p>5 minuto</p> <p>2 minuto</p> <p>45 minuto</p>	<p>Nurse II ER OMCDH</p> <p>Medical Officer III ER OMCDH</p> <p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p>
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<p>2. Ayusin ang dokumento sa PhilHealth at sa Social Service. (Proceeds to Philhealth for the the documents needed in admission and to Social Service for classification of patient.)</p>	<p>2. Ibigay ang direksyon papunta sa PhilHealth at Social Service para sa mga dokumento. (Gives instruction to proceed to PhilHealth for requirement on admission and to Social Service for classification of patient.)</p>	<p>Walang Bayad</p>	<p>2 minuto</p>	<p>Nurse II ER OMCDH</p>
<p>3. Ihanda ang paglipat sa Ward Unit o silid tigilan ng pasyente sa pagamutan. (Prepares for transfer to Ward.)</p>	<p>3. Makipag-ugnayan sa Ward Unit Nars para bagong admit na pasyente. (Coordinates to Ward Nurse about the admission of patient.)</p> <p>3.1. Makipag-ugnayan sa Laboratoryo/ X-ray para sa kinakailangang pagsusuri ng pasyenteng ititigil sa pagamutan. (Coordinates to Laboratory staff / radiologic staff for the needed diagnostic test of patient.)</p> <p>3.2. Makipag-ugnayan sa Administrative Aide para sa paglipat ng pasyente sa Ward Unit.</p>	<p>Walang Bayad</p> <p>Depend e sa laborator y pagsu- Suri na gagawin</p> <p>Walang Bayad</p>	<p>2 minuto</p> <p>2 minuto</p> <p>2 minuto</p>	<p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p> <p>Nurse II ER OMCDH</p>



	<i>(Coordinates to Administrative Aide for the transport of patient to ward.)</i>			
	Total	Walang Bayad	1 oras at 7 minuto	

G. Pagkonsulta ng pasyenteng nasa Emergency Unit

<b>Office or Division:</b>	Emergency Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	Patients that need immediate consultation.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Ibigay ang kaalaman tungkol sa kalagayan o kondisyon ng pasyente. <i>(Give details of patients' present condition.)</i>	1. Suriin at ibigay ang tamang impormasyon tungkol sa kalagayan o kondisyon ng pasyente. <i>(Give information about status of patients' illness.)</i>	Walang Bayad	5 Minuto	Medical Officer III ER OMCDH
2. Bigyan ng kaalaman tungkol sa mga gamot na iinumina pag-uwi sa bahay. <i>(Receives instruction on home medication and needed treatment.)</i>	2. Ipaliwanag ang tamang pag-inom ng gamot sa bahay at bigyan ng sapat na kaalaman para maiwasan ang pagkakasakit o ang komplikasyon nito. <i>(Provides instruction on home medication,</i>	Walang Bayad	5 Minuto	Nurse II ER OMCDH



	<i>treatment given and prevention of illness and its complication.)</i>  <i>2.1. I-encode ang detalye ng pasyente sa sistema. (Encodes data to Hospital Information System (I-HOMIS.)</i>	Walang Bayad	2 minuto	Nurse II ER OMCDH
<i>3. Bayaran ang mga obligasyon para sa mga ibinigay na gamutan sa pasyente. (Pay bills to the cashier.)</i>	<i>3. Ibigay ang Emergency Clearance at direksyon papunta sa Botika at Cashier. (Give ER Clearance to patient or patients' relatives, and proceeds to pharmacy and cashier to pay bills.)</i>	Depend e sa mga supplies at gamot na ginamit ng pasyente	2 Minuto	Nurse II ER OMCDH
	Total	Depend e sa mga supplies at gamot na ginamit ng pasyente	14 minuto	

## 7. FAMILY PLANNING CLINIC

Description: Family Planning Clinic is open From Monday to Friday at 8:00am to 5:00pm. It provides services to all reproductive age group needing Family Planning services.

<b>Office or Division:</b>	Family Planning Clinic
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C- Government to Citizen



<b>Who may avail:</b>	All patient chose to be admitted in the ward			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>1. Kumuha ng numero sa gwardya sa main hospital entrance. (Get number to guard in the main hospital entrance.)</i>	<i>1. Bigyan ng numero ang pasyente. (issue number to patient.)</i>	Walang Bayad	1 minuto	Security Guard I Civil Security Unit OMCDH
<i>2. Pumunta sa Medical Record Section at magpalista. (Proceed to the Medical Record Section and register.)</i>  <i>New patient- Fill up the Pre-form.</i>  <i>Old Patient- Present the hospital number.</i>	<i>2. Kunin ang Pre-form na may mga impormasyon ng pasyente. (Get the accomplished Pre-form.)</i>  <i>2.1. Kung ang pasyente ay bago, ilista at bigyan ng hospital ID number. (For new patient, register and give the hospital ID number.)</i>  <i>2.2. Kung ang pasyente ay dati na o luma, tingnan ang hospital number at ilista. (For old patient: check the hospital number and register.)</i>	Walang Bayad	5 minuto	Administrative Aide III Medical Records OMCDH  Administrative Aide III Medical Records OMCDH  Administrative Aide III Medical Records OMCDH



<p><i>3. Pumunta sa Family Planning Clinic at tumanggap ng Family Planning services. (Proceeds to Family Planning Clinic and receive the chosen Family Planning services.)</i></p>	<p><i>3. Tawagin ang pangalan ng kliyente. (Call out the name of the client.)</i></p> <p><i>3.1. Tanungin ang kliyente tungkol sa kailangang Family Planning Services. (Ask client on needed Family Planning services.)</i></p> <p><i>3.2. Bigyan ng payo ang kliyente tungkol sa mga pamamaraan ng pagpapalano ng pamilya. (Give counselling to client about the different methods of family planning services.)</i></p> <p><i>3.3. Bigyan ng napiling pamamaraan ng pagpapalano ng pamilya at kaalaman dito. (Give the chosen Family Planning method and information about the</i></p>	<p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>1 minuto</p> <p>2 minuto</p> <p>5 minuto</p> <p>15 minuto</p> <p>1 minuto</p>	<p>Nursing Attendant I Family Planning Clinic OMCDH</p> <p>Nursing Attendant I Family Planning Clinic OMCDH</p> <p>Nursing Attendant I Family Planning Clinic OMCDH</p> <p>Nursing Attendant I Family Planning Clinic OMCDH</p> <p>Nursing Attendant I Family Planning Clinic OMCDH</p>



	<i>method or device.)</i>  3.4. <i>Bigyan ang kliyente ng itinakdang araw ng follow-up visit. (Give the scheduled follow-up visit to the client.)</i>  3.5. <i>Isulat ang detalye ng pasyente sa logbook at sa i-HOMIS. (Enter patient's data to the logbook and Hospital Information System (I-HOMIS).</i>	Walang Bayad	2 minuto	Nursing Attendant I Family Planning Clinic OMCDH          Nursing Attendant I Family Planning Clinic OMCDH
	Total	Walang Bayad	32 minuto	

## 8. HEALTH INSURANCE SECTION (PhilHealth) External Services

Description: Hospital Health Insurance Section (caters In-patients, Out-patients, ER Patients who are eligible Philhealth Beneficiaries)

The HEALTH INSURANCE SECTION (PHILHEALTH) is open from Monday-Sunday 8:00 am – 5:00 pm

<b>Office or Division:</b>	<b>MEDICAL SOCIAL SERVICE</b>	
<b>Classification:</b>	Complex	
<b>Type of Transaction:</b>	G2C- Government to Citizen	
<b>Who may avail:</b>	All Qualified Philhealth Beneficiaries/ALL Filipino	
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
	Philhealth ID/MDR,	



OTHERS: <b>IF NEEDED</b> (KUNG KAILANGAN LAMANG) – -Proof of Payment/OR -Marriage Contract/License -Birth Cert.(patient/member) -Valid ID -Authorization Letter (for representative) -Certification from LSWDO		As provided by Patient or Guardian  NGA/LGU OFFICES		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Request for assistance availing <b>of Philhealth benefits.</b>  <b>“Humingi ng tulong para makagamit ng PHilhealth benefits”</b>	1. Assists clients/patient.  <b>“Tulungan at i-guide ang kliyente/pasyente”</b>	None	5 minutes	<i>Security Guard OPD Entrance Door OMCDH</i>
2. Proceed to the OMCDH Medical Social Service office and submit requirements <b>“Windows Transaction only”</b>  <b>“Pumunta sa Medical Social Service office at ipasa ang mga kelangan dokumento “</b>	2. Medical Social Worker will check the philhealth’s validity of the member.  <b>“I-check ang validity ng miyembro”</b>			<i>Social Worker Officer Social Welfare OMCDH</i>
	a)With current membership <b>“aktibo/dating miyembro”</b>	None	7. minutes	<i>Social Worker Officer Social Welfare Services OMCDH</i>
	b)Non-member (to be enrolled) <b>“Di pa miyembro ng Philhealth at Pagtatala”</b>	None	2 days	<i>Social Worker Officer Social Welfare Services</i>



				OMCDH
<p>3. Declaration of patient as new Dependents (if not yet included at MDR):</p> <p>a) Submit requirements needed</p> <p><b>“a)Ipasa ang mga kelangan dokumento”</b></p> <p>b) Filling up the PMRF</p> <p><b>“b)mag fill-up ng PMRF”</b></p>	<p>3. MSW will check if the patient is not yet declared at as valid dependent through philhealth portal system. An update will be done accordingly. ‘I-check ang dependent at isama sa mga naka-deklara na”</p> <p>Verify the requirements</p> <p><b>“a)Suriin ang mga dokumento”</b></p> <p>Issuance of PMRF to be accomplished by the member or representative</p> <p><b>“Pagbibigay ng PMRF”</b></p>	None	1 day	<p>Social Worker Officer Social Welfare Services OMCDH</p>
<p>4. Securing of Approval Stub</p> <p>a. Secure approval slip</p>	<p>4. Issuance of Approval Stub for Philhealth benefit availment</p> <p><b>“Magbigay ng Approval Slip”</b></p>	None	3 minutes	<p>Social Worker Officer Social Welfare Services</p>





<b>“Humingi ng Approval Slip”</b>				OMCDH
End of transaction	(Maximum time to conclude the process is 3 days and 11 minutes) except waiting time.			

## 9. ISOLATION WARD

Description: Isolation is the separation of a person or a group of person infected or believed to be infected with contagious disease to prevent spread infection. Isolation ward is open 24 hours daily. It caters to all admitted patients with communicable disease needing isolation.

### A. Pagtigil ng pasyente sa pagamutan (Isolation Ward)

<b>Office or Division:</b>	Ward			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All admitted patients needing isolation.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>I. Pumunta sa Ward area para sa pagtigil sa pagamutan. (Transfer to ward for confinement.)</i>	<i>1. Tanggapin ang endorsement galing sa ER Nars. (Receive endorsement from ER Nurse.)</i>	Walang Bayad	2 minuto	<i>Nurse I Isolation Building OMCDH</i>
	<i>1.1. Ihanda ang kama at kuwarta na paglalagyan ng pasyente.</i>	Walang Bayad	2 minuto	<i>Nurse I Isolation Building OMCDH</i>



	<p><i>(Prepares bed and room of patient.)</i></p> <p>1.2. <i>Ilagay sa komportableng higaan ang pasyente. (Placed patient in comfortable bed.)</i></p> <p>1.3. <i>Suriin ang kondisyon at kunan ng vital signs ang pasyente. (Assess patient condition. and take vital signs.)</i></p> <p>1.4. <i>Suriin ang order ng Doktor para sa patuloy gamutan. (Check Doctors order for the continuity of care.)</i></p> <p>1.5. <i>Bigyan ng mga tagubilin sa mga pagsusuri na gagawin. (Give instruction about diagnostic procedures (e.g. proper collection of stool, urine etc.)</i></p> <p>1.6. <i>Isulat ang pangalan sa daily census. (Record patients</i></p>	<p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>3 minuto</p> <p>2 minuto</p> <p>2 minuto</p> <p>1 minuto</p> <p>1 minuto</p>	<p><i>Nurse I Isolation Building OMCDH DH</i></p> <p><i>Nurse I Isolation Building OMCDH</i></p> <p><i>Nurse I Isolation Building OMCDH</i></p> <p><i>Nurse I Isolation Building OMCDH</i></p> <p><i>Nurse I Isolation Building</i></p>
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	<p><i>name in daily census.)</i></p> <p><i>1.7. Makipag ugnayan sa dietary department para sa pagkain ng pasyente. (Coordinate to the dietary department for patients' appropriate meal.)</i></p> <p><i>1.8. Makipag ugnayan sa ibang institusyon o klinika para sa iba pang examination. (Ultrasound, CT-Scan, etc.) (Coordinate to other institution or clinic for other diagnostic procedure needed.)</i></p> <p><i>1.9. Subaybayan ang kondisyon ng pasyente at isangguni sa doctor ang mga sintomas na nakita. (Monitor patients' condition and refer to resident on duty any untoward signs and symptoms)</i></p>	<p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>3 minuto</p> <p>3 minuto</p> <p>5 minuto</p> <p>2 minuto</p>	<p>OMCDH</p> <p>Nurse I Isolation Building OMCDH</p> <p>Nurse I Isolation Building OMCDH</p> <p>Nurse I Isolation Building OMCDH</p>
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	1.10. <i>Ipagbigay-alam sa kasunod na shift and kondisyon ng pasyente, at ang pagpapatuloy ng gamutan (Endorse patients' condition and continuity of care to the incoming shift)</i>			Nurse I Isolation Building OMCDH
	Total	Walang bayad	26 minuto	

## 10. LABOR ROOM/ DELIVERY ROOM

### A. Pagpunta ng pasyente sa lugar paanakan

<b>Office or Division:</b>	Labor Room/ Delivery Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All pregnant mothers			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
Pre-natal Guide		Patient Itself		
Copy of Laboratories required to pregnant woman		Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>I. Pumunta sa lugar paanakan para sa panganganak (Transfer to Labor Room/ Delivery Room for birthing)</i>	<i>1. Tanggapin ang endorsement galing sa ER Nars (Receive endorsement from ER Nurse)</i>	Walang Bayad	2 minuto	Nurse I LR/DR OMCDH
	<i>1.1. Ilagay sa komportableng higaan ang pasyente</i>	Walang Bayad	2 minuto	Nurse I LR/DR OMCDH



	<i>(Placed patient in comfortable bed.)</i>			
	<i>1.2. Tingnan ang kondisyon ng pagbubuntis at kunan ng vital signs ang pasyente (Assess obstetrical status and take vital signs)</i>	Walang Bayad	2 minuto	Midwife II LR/DR OMCDH
	<i>1.3. Isangguni sa doctor ang bagong dating na pasyente at kondisyon ng pagbubuntis (Notify the resident on duty or OB consultant on the new OB patient)</i>	Walang Bayad	2 minuto	Midwife II LR/DR OMCDH
	<i>1.4. Suriin ang bagong dating na pasyente at kondisyon ng pagbubuntis (Examine and evaluate the pregnant woman)</i>	Walang Bayad	5 minuto	Medical Specialist I OB-Gyne OMCDH
	<i>1.5. Subaybayan ang progress of labor ng payente (Monitor progress of labor)</i>	Walang Bayad	Tuwing ika- 5 minuto	Midwife II LR/DR OMCDH
	<i>1.6. Isulat sa Partograph kung ang pasyente ay</i>	Walang Bayad	1 minuto	Midwife II LR/DR



	<p><i>nakararanas na ng True Labor (Write in the partograph when patient is in True Labor already)</i></p> <p><i>1.7. Ihanda ang pasyente sa panganganak. (Prepare the patient for delivery.)</i></p>	Walang Bayad	3 minuto	OMCDH  Midwife II LR/DR OMCDH
	Total	Walang Bayad	21 minuto	

## 11. LINEN / Pagpapalit o Pagbabalik ng Linen

<b>Office or Division:</b>	Nursing Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Mga pasyenteng na-confined sa ospital na ito.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request Form for change of Linen		Nurse Station		
Maruming sapin sa pagsasauli		Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Ibibigay ng kamag-anak ng pasyente ang Request Form for the Change of Linen at ipakita ang numero ng sapin na papalitan o ibabalik.	1. Kukunin ang Request Form for Change of Linen at i-check ang numero ng sapin kung magkatugma sa nakasulat.	Wala	3 minuto	Nursing Attendant Ward OMCDH
2. Ilagay ang sapin sa lagayan ng mga	2. Sabihin at ituturo kung saan	wala	3 minuto	Nursing Attendant Ward



<i>nagamit na. (Laundry Basket.)</i>	<i>dapat ilagay ang sapin.</i>			<b>OMCDH</b>
<i>3. Hintayin ang papel na pipirmahan.</i>	<i>3. Para sa unang transakyon ng pagpapalit o pagbabalik, isulat ang petsa, oras, pangalan ng pasyente, number ng sapin na papalitan. Para sa pangalawang ulit na transakyon, hanapin ang record at isulat ang numero ng sapin na ibabalik, status, pangalan at petsa. Para sa panibagong record, isulat ang petsa, oras, pangalan ng pasyente, laundry staff at numero ng bagong sapin.</i>	Wala	5 minuto	<i>Nursing Attendant Ward OMCDH</i>
<i>4. Pirmahan ang Monitoring of Returned and Issued Linen at ibalik sa Laundry staff on Duty.</i>	<i>4. Papirmahin ang kamag-anak ng pasyente sa Monitoring of Returned and Issued Linen at isulat ang numero ng bagong sapin sa Request Form for Change.</i>	Wala	5 minuto	<i>Nursing Attendant Ward OMCDH</i>



5. <i>Kuhanin ang bagong sapin at isang kopya ng Request Form for change of Linen at bumalik sa ward kung saan naka-admit ang pasyente.</i>	5. <i>Ibigay ang bagong sapin at isang kopya ng Request form for Change of Linen at ibilin na ibigay ang form sa Nursing Attendant o Nurse on Duty ng ward kung saan naka-admit ang pasyente.</i>	wala	1 minuto	<i>Nursing Attendant Ward OMCDH</i>
	Tapos ang transakyon	Wala	17 minuto	

## 12. LINEN / Pagpapapirma ng Discharge Clearance

<b>Office or Division:</b>	Nursing Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Mga pasyenteng na-confined sa ospital na ito.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
-Request Form for change of Linen		Nurse Station		
-Discharge Clearance -Maruming sapin na ibabalik		Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. <i>Ibibigay ng kamag-anak ng pasyente ang Discharge Clearance at Request Form for change of Linen at ipakita ang numero ng sapin na ibabalik.</i>	1. <i>Kukunin ang Discharge Clearance, Request Form for Change of Linen at i-check ang numero ng sapin kung magkatugma sa nakasulat.</i>	Wala	3 minuto	<i>Nursing Attendant Ward OMCDH</i>





<p>2. Ilagay ang sapin sa lagayan ng mga nagamit na. (Laundry Basket.)</p>	<p>2. Sabihin at ituturo kung saan dapat ilagay ang sapin.</p>	<p>wala</p>	<p>3 minuto</p>	<p>Nursing Attendant Ward OMCDH</p>
<p>3. Hintayin ang pirmadong Discharge Clearance at Request Form for Change of Linen.</p>	<p>3. Isulat ang petsa, oras, pangalan ng pasyente, numero ng sapin na ibabalik, laundry staff, status at petsa. Para sa may nauna nang transakyon, hanapin ang record at isulat ang numero ng sapin na ibabalik, status, pangalan ng laundry staff at petsa. Pirmahan ang Discharge Clearance at Request Form for change of Linen.</p>	<p>Wala</p>	<p>5 minuto</p>	<p>Nursing Attendant Ward OMCDH</p>
<p>4. Kuhanin ang 2 kopya ng Discharge Clearance at 1 kopya ng Request Form for Change of Linen. Dalhin ang Discharge Clearance sa Nurse on Duty sa Ward kung saan naka admit ang pasyente.</p>	<p>4. Ibigay ang 2 kopya ng pirmadong Discharge Clearance at 1 kopya ng Request Form for Change sa kamag-anak ng pasyente at sabihing dalhin ang Discharge Clearance at Request Form for Change of Linen sa Nurse Station sa ward kung saan nakaadmit an ang pasyente.</p>	<p>Wala</p>	<p>3 minuto</p>	<p>Nursing Attendant Ward OMCDH</p>



	Tapos ang transakyon	Wala	14 minuto	
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### 13. MEDICAL RECORDS INFORMATION TO INSURANCE VERIFIER (External Services)

Availment of patient information to Insurance Verifier

<b>Office or Division:</b>	Medical Records Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Insurance Representative			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Written request		Insurance Company		
2. Valid ID		Insurance Representative		
3. Authorization Letter		Patient		
4. Waiver		Patient		
5. Triage Form		Triage Area		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Accomplish Triage Form from the Triage Area.  <i>(Sulatan ang Triage Form mula Triage Area.)</i>	1. Receive Triage Form from the Triage Area.  <i>(Tanggapin ang Triage Form galing sa Triage Area.)</i>	None	1 minute	<i>Admin. Aide III Medical Records OMCDH</i>
2. Queue up with enough space. Submit triage form and all requirements to Medical Record Section.  <i>(Pumila ng may tamang espasyo.)</i>	2. Collect triage form and all requirements.  <i>(Kunin ang triage form at mga requirement.)</i>	None	2 minutes	<i>Admin. Aide III Medical Records OMCDH</i>



<p><i>Ibigay ang mga requirements at triage form sa Medical Record Section.)</i></p>				
<p>3. Proceed to waiting Area.  <i>(Pumunta sa waiting area.)</i></p>	<p>3. Medical Record staff retrieve records of patient.  <i>(Hahanapin ang rekord ng pasyente.)</i></p>	<p>None</p>	<p>5 minutes</p>	<p><i>Admin. Aide III Medical Records OMCDH</i></p>
<p>4. Proceed to Medical Records once name is called.  <i>(Pumunta sa Medical records Section kapag tinawag.)</i></p>	<p>4. Attending physician determine whether information is release with guidelines of Data Privacy Act (Republic Act 10173) The issuance of documents depends on availability and presence of attending Physician.  4.1. Medical Records staff advise the status of request.  4.2. If Physician is available or present and request is approve, Medical</p>	<p>None</p>	<p>5 minutes</p>	<p><i>Admin. Aide III Medical Records OMCDH</i></p> <p><i>Admin. Aide III Medical Records OMCDH</i></p> <p><i>Admin. Aide III Medical Records OMCDH</i></p>



	<p>Record staff issue a charge slip.</p> <p>4.3. If Physician is not available or present, client advise to return to a set date.</p> <p><i>(4. Ang doctor na nagtingin ang tutukoy at magpapasya sa pagbibigay dukumento o impormasyon na na aayon sa alituntunin ng Data privacy Act (10173).</i></p> <p><i>(4.1. Sasabihin ng Medical Records staff ang estado ng Kahilingan.)</i></p> <p><i>(4.2. Kapag ang doctor ay nandito, ang Medical Record ay magbibigay ng charge slip gagawin at ihahanda ang dokumento o impormasyon kapag aprobado na ng doctor.)</i></p> <p><i>(4.3. Kapag ang doctor ay wala, ang kleyente ay pabalikin sa araw na tinakda.)</i></p>			<p><i>Admin. Aide III Medical Records OMCDH</i></p>
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5. Pay cashier once called upon approval of attending Physicians.  <i>(Magbayad sa cashier kapag aprobado na ng doctor.)</i>	5. Cashier issue a receipt to client.  <i>(Iisyuhan ng opisyal na resibo ng kahera.)</i>	P 50.00 30.00- docum entary stamp	2 minutes	Cash Clerk I Cashierieng OMCDH
6. Proceed to Medical Records once the name is called to receive the documents or information requested.  <i>(Pumunta sa Medical Records para tanggapin ang kinukuhang dokumento o inpormasyon.)</i>	6. Issue the requested the authenticated and photocopied documents or information and record it to insurance verifier logbook.  <i>(Ibibigay na ang utintikadong document o impormasyon na naka photocopies at itala sa talan ng mga kumuha ng impormasyon.)</i>	None	2 minutes	<i>Admin. Aide III</i> <i>Medical</i> <i>Records</i> <i>OMCDH</i>
Tapos ang transasyon		P 80.00	17 Minuto	

## 14. NEWBORN SCREENING SERVICES

Pagbibigay ng serbisyo ng Newborn Screening para sa lahat ng mga bagong silang na sanggol sa loob ng hospital o sa iba pa mang institusyon. Bukas mula Lunes hanggang Biyernes, 8:00 am hanggang 5:00 pm.

(Provision of Newborn Screening Services to all Newborn babies of the hospital as well as other institution. Open from Monday to Friday 8:00 am to 5:00 pm.)

<b>Office or Division:</b>	Clinical Laboratory Department
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<b>Classification:</b>	Highly Technical				
<b>Type of Transaction:</b>	G2C – Government to Citizen				
<b>Who may avail:</b>	All Newborn needing Newborn Screening Services				
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>		
Document 1: Record of Newborn			Institution where newborn baby is delivered.		
<b>CLIENT STEPS</b>		<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.	<i>Ibigay o dalhin ang record ni baby sa laboratory.</i>	<p>1. <i>Tanggapin ang record ni baby at suriin kung kumpleto na ang datos at kung maaari nang kuhanan ng dugo si baby.</i></p> <p>1.1. <i>Bigyan ng charge slip ang pasyente kung ito ay sa ibang institusyon ipinanganak o i-charge ang pasyente kung ito ay sa loob ng hospital ipinanganak.</i></p>	Wala	3 Minuto	<i>Medical Technologist Laboratory OMCDH</i>
2.	<i>Para sa mga baby na ipinanganak sa ibang institusyon – ibigay ang charge slip sa kahera at magbayad.</i>	<p>2. <i>Tanggapin ang charge slip at bayad.</i></p> <p>2.1. <i>Mag-isyu ng opisyal na resibo.</i></p>	P 1750.0 0	3 Minuto	<i>Cash Clerk / Cashiering OMCDH</i>



3.	<i>Bumalik sa laboratory at ipakita ang pinagbayaran.</i>	<i>3. Suriin ang katibayan ng pagbabayad.</i>	Wala	1 Minuto	<i>Medical Technologist Laboratory OMCDH</i>
4.	<i>Pakuhanan ng dugo si baby.</i>	<i>4. Kuhanan ng dugo si baby.</i>  <i>4.1. I-proseso ang filter card na may dugo ni baby para ipadala sa Newborn Screening Center.</i>	Wala	10 Minuto  22 araw	<i>Medical Technologist Laboratory OMCDH</i>  <i>Medical Technologist Laboratory OMCDH</i>
5.	<i>Bumalik sa laboratory para sa resulta makalipas ang 22 araw o hintayin ang tawag mula sa laboratory kung may karagdagang abiso mula sa Newborn Screening Center.</i>	<i>5. Ihanda ang resulta ng newborn screening ni baby.</i>  <i>5.1. Tawagan ang mga magulang kung sakaling kinakailangan ang agarang aksyon sa bagong silang na sanggol.</i>	Wala	1 Minuto	<i>Medical Technologist Laboratory OMCDH</i>
6.	<i>Pirmahan ang record ng pagrelease at sagutan ang Client Satisfaction Survey.</i>	<i>6. Ibigay ang releasing record book at Client Satisfaction Survey sa pasyente.</i>  <i>6.1. Ibigay ang opisyal na resulta</i>	Wala	1 Minuto	<i>Medical Technologist Laboratory OMCDH</i>



		ng newborn screening.  6.2. <i>Tanggapin at itabi ang Client Satisfaction Survey.</i>			
		TOTAL	P1750.00	22 araw at 20 Minuto	

### English

<b>Office or Division:</b>	Clinical Laboratory Department				
<b>Classification:</b>	Simple Transaction				
<b>Type of Transaction:</b>	G2C – Government to Citizen				
<b>Who may avail:</b>	All Newborn needing Newborn Screening Services				
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>		
Document 1: Record of Newborn			Institution where newborn baby is delivered.		
<b>CLIENT STEPS</b>		<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.	Present newborn record to laboratory.	1. Receive newborn record and check if it is completely filled or and be sure if blood can now be collected.  1.1. Issue charge slip to patient for payment if it is delivered outside the facility or charge the patient to its bill when it is delivered in the hospital.	None	3 Minutes	<i>Medical Technologist Laboratory OMCDH</i>





2.	For newborn that is delivered to other institution – present charge slip and payment to the cashier.	2. Received charge slip and payment.  2.1. Issue official receipt.	P 1750.0 0	2 Minutes	<i>Cash Clerk / Cashiering OMCDH</i>
3.	Return to laboratory and present official receipt.	3. Check the proof of payment.	None	1 Minute	<i>Medical Technologist Laboratory OMCDH</i>
4.	Submit your baby for blood collection.	4. Collect blood from newborn.  4.1. Process the filter card with collected blood from newborn and send it Newborn Screening Center.	None	10 Minutes  22 days	<i>Medical Technologist Laboratory OMCDH  Newborn Screening Center</i>
5.	Return to the laboratory 22 days after blood extraction to get the result or wait for a call for further notice from the Newborn Screening Center.	5. Prepare for the newborn screening result.  5.1. Call the parent/guardian of newborn in cases where there is a need for an immediate	None	2 Minutes	<i>Medical Technologist Laboratory OMCDH  Medical Technologist Laboratory OMCDH</i>



		action to be taken.			
6.	Sign the Release Record and complete the Client Satisfaction Survey.	<p>6. Give releasing record to the patient and Client Satisfaction Survey Form.</p> <p>6.1. Release Official Result of newborn screening.</p> <p>6.2. Receive and keep the Client Satisfaction Survey.</p>	None	1 Minute	<p><i>Medical Technologist Laboratory OMCDH</i></p> <p><i>Medical Technologist Laboratory OMCDH</i></p> <p><i>Medical Technologist Laboratory OMCDH</i></p>
		TOTAL	P1750.00	22 days and 20 minutes	

## COMPREHENSIVE LIST OF SERVICES

SERVICES		DOCUMENTARY REQUIREMENTS	FEE	PROCESSING HOURS
1.	Complete Blood Count	Laboratory Request	180.00	5 Hours
2.	Prothrombin Time	Laboratory Request	350.00	5 Hours
3.	Activated Partial Thromboplastin Time	Laboratory Request	350.00	5 Hours
4.	Clotting Time / Bleeding Time	Laboratory Request	100.00	5 Hours
5.	Malarial Smear	Laboratory Request	100.00	5 Hours
<b>CLINICAL MICROSCOPY</b>				



6.	Routine Urinalysis	Laboratory Request	50.00	5 Hours
7.	Fecalysis	Laboratory Request	40.00	5 Hours
8.	Kato Katz Method	Laboratory Request	40.00	5 Hours
<b>SEROLOGY / IMMUNOLOGY</b>				
9.	HBsAg	Laboratory Request	120.00	5 Hours
10.	Syphilis / Anti-TP	Laboratory Request	170.00	5 Hours
11.	Typhidot	Laboratory Request	350.00	5 Hours
12.	Dengueblot	Laboratory Request	1200.00	5 Hours
13.	Blood Typing – Forward Card Method	Laboratory Request	180.00	5 Hours
14.	Pregnancy Test	Laboratory Request	150.00	5 Hours
15.	C – Reactive Protein	Laboratory Request	600.00	5 Hours
16.	TSH	Laboratory Request	600.00	5 Hours
17.	FT3	Laboratory Request	600.00	5 Hours
18.	FT4	Laboratory Request	600.00	5 Hours
19.	TROP I	Laboratory Request	1200.00	5 Hours
20.	CKMB	Laboratory Request	900.00	5 Hours
21.	PSA	Laboratory Request	850.00	5 Hours
<b>CLINICAL CHEMISTRY</b>				
22.	Fasting Blood Sugar	Laboratory Request	100.00	7 Hours
23.	Random Blood Sugar	Laboratory Request	100.00	5 Hours
24.	Total Cholesterol	Laboratory Request	100.00	7 Hours
25.	Triglycerides	Laboratory Request	100.00	7 Hours
26.	HDL/LDL – Cholesterol	Laboratory Request	250.00	7 Hours



27.	Blood Uric Acid	Laboratory Request	150.00	7 Hours
28.	Blood Urea Nitrogen	Laboratory Request	100.00	7 Hours
29.	Creatinine	Laboratory Request	100.00	7 Hours
30.	SGOT	Laboratory Request	200.00	7 Hours
31.	SGPT	Laboratory Request	200.00	7 Hours
32.	Alkaline Phosphatase	Laboratory Request	300.00	7 Hours
33.	Bilirubin	Laboratory Request	300.00	7 Hours
34.	Oral Glucose Tolerance Test	Laboratory Request	500.00	7 Hours
35.	Serum Electrolytes (Na K Cl)	Laboratory Request	500.00	7 Hours
36.	HbA1c	Laboratory Request	650.00	7 Hours
<b>BLOOD STATION</b>				
37.	Blood Typing Tube Method	Laboratory Request	250.00	7 Hours
38.	Compatibility Testing	Laboratory Request	500.00	7 Hours
39.	Packed Red Blood Cell	Laboratory Request	1500.00	-
40.	Whole Blood	Laboratory Request	1800.00	-

## 15. NUTRITION and DIETARY COUNSELING SERVICES

Brief Description: The Nutrition and Dietetics Counseling Services is an independent out-patient and in-patient clinic which aims to help the patients carry out the diet prescription according to the principles of nutrition and therapeutic diet management.

<b>Office or Division:</b>	Nutrition and Dietetics Service Section
<b>Classification:</b>	Simple Transaction
<b>Type of Transaction:</b>	G2C-Government to Citizen
<b>Who may avail:</b>	Mga pasyenteng natingnan/na-confined sa ospital na ito na nangangailangan ng tamang diet.
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	



Medical Chart		Ward Section		
Referral Slip		OPD		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>Out-Patient:</b>				
1. <i>Tanggapin ang referral slip para sa pagpapayo sa diyeta. (Accepts the referral slip for diet counseling.)</i>	1. <i>Ibigay ang referral slip para sa pagpapayo sa diyeta. (Give the referral slip for diet counseling.)</i>	Wala	1 minuto	Nurse OPD OMCDH
2. <i>Ipasa ang referral slip para sa pagpapayo sa diyeta sa Nutrition at Dietetics Service. (Submit referral Slip for diet counselling to Nutrition and Dietetics Service.)</i>	2. <i>Tanggapin at suriin ang referral slip para sa diet counseling. (Accept and check the referral slip for Diet counseling.)</i>	Wala	1 minuto	Nutritionist-Dietitian Dietary Section OMCDH
	2.1. <i>Kunin at isulat ang lahat ng impormasyon tungkol sapasyente kasama ang anthropometric, physical exams, latest laboratory at clinical result. (Get the medical chart of the anthropometric, biochemical, clinical, physical data or recprd of the patient.)</i>	Wala	5 minuto	Nutritionist-Dietitian Dietary Section OMCDH
	2.2. <i>Bisitahin at suriin ang</i>	Wala	10 minuto	



	<p><i>pasyente para sa diet counseling. (Visit and Assess the patient for diet counseling.)</i></p>			<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
<p><i>3. Tumugon sa mga katanungan. (Respond to questions.)</i></p>	<p><i>3. Alamin ang kabuuang kaalaman tungkol sa nutrisyon tulad ng gusto at ayaw na pagkain, uri at mga paraan sa pagkain at mga kailangan na impormasyon. (Interview on his nutritional history, food likes and dislikes, meal pattern, and other needed information.)</i></p>	Wala	5 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
	<p><i>3.1. Icompute at ipaliwanag ang mga tamang sukat sa pagkain. (Perform s diet computation.)</i></p>	Wala	15 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
	<p><i>3.2. Ipaliwanag ang tama at angkop na nutrisyon para sa pasyente</i></p>	Wala	25 minuto	<p><i>Nutritionist-Dietitian Dietary Section</i></p>



	<i>(Performs diet counseling.)</i>			OMCDH
<i>4. Pirmahan ang Patients' Counsel Logbook. (Sign the Patient Counsel Logbook.)</i>	<i>4. Ibigay ang patients counsel logbook.(Give the patient counsel logbook.)</i>	Wala	2 minuto	<i>Nutritionist-Dietitian Dietary Section OMCDH</i>
<i>5. Tanggapin ang iniresetang gabay sa pagkatuto sa pagkain.(Accept prescribed dietary instruction guide.)</i>	<i>5. Ihanda at bigyan ng tularan at listahan ng mga tamang pagkain. (Prepares and gives prescribed dietary instruction guide.)</i>	Wala	1 minuto	<i>Nutritionist-Dietitian Dietary Section OMCDH</i>
End of Transaction	Total		65 minuto	
<b>In-Patient:</b>				
<i>1. Tanggapin ang referral slip para sa pagpapayo sa diyeta na mula sa ward nurse. (Accept the referral slip for diet counselling from the ward nurse.)</i>	<i>1. Ibigay ang referral slip para sa pagpapayo sa diyeta.(Give the referral slip for diet counseling.)</i>	Wala	1 minuto	<i>Nurse Medical Ward OMCDH</i>
<i>2. Ipasa ang referral Slip para sa pagpapayo sa diyeta sa Nutrisyon at Dietetics Service. (Submit referral slip for diet counseling to Nutrition and Dietetics Service.)</i>	<i>2. Tanggapin at suriin ang referral slip para sa diet counseling. (Accept and check the referral slip for Diet counselling.)</i>	Wala	1 minuto	<i>Nutritionist-Dietitian Dietary Section OMCDH</i>
	<i>2.1. Kunin ang Medical chart ng pasyente at isulat ang lahat ng</i>	Wala	5 minuto	<i>Nutritionist-Dietitian</i>



	<p><i>impormasyon tungkol sa pasyente kasama ang anthropometric, physical exams, latest laboratory and clinical result. (Get the medical chart of the patient and copy all the anthropometric, biochemical, clinical, physical data or record of the patient.)</i></p> <p><i>2.2. Bisitahin at suriin ang pasyente para sa diet counseling. (Visit and Assess the patient for Diet Counseling.)</i></p>	Wala	10 minuto	<p><i>Dietary Section OMCDH</i></p> <p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
<p><i>3. Tumugon sa mga katanungan. (Respond to questions.)</i></p>	<p><i>3. Alamin ang kabuuang kaalaman tungkol sa nutrisyon tulad ng mga gusto at ayaw na pagkain, uri at mga paraan sa pagkain at iba pang mga kailangan na impormasyon. (Interview on his</i></p>	Wala	5 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>





	<p><i>nutritional history food likes and dislikes meal pattern and other needed information.)</i></p> <p><i>3.1. Icompute at ipaliwanag ang mga tamang sukat sa pagkain. (Perform diet computation.)</i></p> <p><i>3.2. Ipaliwanag ang tama at angkop na nutrisyon para sa pasyente. (Perform diet counseling.)</i></p>	Wala	15 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
		Wala	25 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
<p><i>4. Pirmahan ang Patients Counsel Logbook. (Sign the Patient Counsel Logbook.)</i></p>	<p><i>4. Ibigay ang patients counsel logbook. (Give the patient counsel logbook.)</i></p>	Wala	2 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
<p><i>5. Tanggapin ang ineresetang gabay sa pagtututo sa pagkain. (Accept prescribed dietary instruction guide.)</i></p>	<p><i>5. Ihanda at bigyan ng tularan at listahan ng mga tamang pagkain. (Prepares prescribed dietary instruction guide.)</i></p>	Wala	1 minuto	<p><i>Nutritionist-Dietitian Dietary Section OMCDH</i></p>
End of Transaction			65 minuto	



## 16. OUT-PATIENT CONSULTATION

Description: The Out-Patient Consultation is open from Monday to Friday at 8:00am to 5:00pm. It caters all ages of patient from infancy to adulthood.

<b>Office or Division:</b>	Out-Patient Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
Hospital Record		Medical Record Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Kumuha ng numero sa main hospital entrance para sa konsulta. (Get the number to the guard in the main hospital entrance for OPD consult.)	1. Bigyan ng numero ang pasyente para sa konsulta. (Issue number to patient for OPD consult.)	Walang Bayad	1 minuto	Security Guard I/Civil Security OMCDH
2. Ilagay ang numero kasama ng Hospital Number ng pasyente sa kahon sa tapat ng OPD consultation Room.  (Place the number together with his/ her hospital number and put in a box provided in front of consultation room.)	2. Kunin ang ibinigay na numero at hospital number ng pasyente. (Get the patient assigned number together with his/ her hospital number.)  2.1. Kunin ang talaan ng pasyente sa Medical Records Section. (Secure patients' record at the Medical Records Section)	Walang Bayad  Walang Bayad	1 minuto  5 minuto	Nurse I OPD OMCDH  Administrative Aide III Records Section OMCDH



<p>3. Pumunta sa “waiting area” at hintayin na tawagin ang pangalan. (Proceeds to waiting area and wait the name to be called.)</p>	<p>3. Tawagin ang pangalan ng pasyente (Call Patient by his/ her name.)</p>	<p>Walang Bayad</p>	<p>1 minuto</p>	<p>Nurse / OPD OMCDH</p>
<p>4. Magbigay ng buong detalye ng kasalukuyang karamdaman. (Give full details of present illness.)</p>	<p>4. Isulat ang sanhi ng sakit ng pasyente (Record chief complain, history of present illness)</p>	<p>Walang Bayad</p>	<p>1 minuto</p>	<p>Nurse / OPD OMCDH</p>
	<p>4.1. Kunan ng vital signs ang pasyente at isulat sa patients’ record (Take initial vital signs and write on patients’ record.)</p>	<p>Walang Bayad</p>	<p>3 minuto</p>	<p>Nurse / OPD OMCDH</p>
<p>5. Pumunta sa OPD Examination Room. Magdagdag ng kaukulang detalye tungkol sa sakit ayon sa pagtatanong ng doktor. (Proceeds to OPD Examination Room. Give additional information about the present illness according to the question asked by the physician.)</p>	<p>5. Tawagin ang pangalan ng pasyenteng kokonsultahin. (Call out name the patient to be examined.)</p>	<p>Walang Bayad</p>	<p>1 minuto</p>	<p>Nurse / OPD OMCDH</p>
	<p>5.1. Ipaliwanag ang karamdaman sa pasyente. (Explain illness to the patient.)</p>	<p>Walang Bayad</p>	<p>2 minuto</p>	<p>Internist Medicine Surgeon OB-Gyne Pediatrician OPD OMCDH</p>
	<p>5.2. Ibigay ang reseta at ipaliwanag ang kailangang gamutan sa pasyente</p>	<p>Walang Bayad</p>	<p>2 minuto</p>	<p>Internist Medicine Surgeon OB-Gyne Pediatrician OPD</p>



	<i>(Explain treatment to the patient.)</i>			OMCDH
	5.3. Isulat ang detalye ng pasyente sa logbook at sa i-HOMIS. <i>(Enter patient's data to the logbook and Hospital Information System (I-HOMIS.)</i>	Walang Bayad	2 minuto	Nurse / OPD OMCDH
	Total	Walang Bayad	19 minuto	

### 17. Out-Patient Department (OPD) Registration of New Patients (Bagong Pasyente) ( External Services)

Registration of new patients consulting at the OPD from Monday to Friday at 8am to 5pm

<b>Office or Division:</b>	Medical Record Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Patients who would like to consult at the OPD			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1.Data Form		Guard on Duty/ Admitting Personnel		
2. Person with Disability or Senior Citizens ID		Barangay or Municipal Hall residence		
3.Triage Form		Triage Area		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Patient/ Companion gets queuing number data Pre-form to be accomplished from	1. Distribute the pre-forms, queuing number and priority number and	None	1 minute	Security Guard / Entrance Door OMCDH



<p>Guard on Duty and present triage form.</p> <p>If PWD/SC: Present the PWD/SC ID and get priority number from Guard/Admitting Personnel and fill out pre-form.</p> <p><i>(Kumuha ng numero at Pre-form sa Guard /Admitting personnel at ibigay ang triage form.)</i></p> <p><i>(Kung PWD/SC Ipakita ang SC/PWD, kumuha ng Priority Number sa Guard on duty at sagutan ang pre-form. )</i></p>	<p>check triage form.</p> <p><i>(Ibigay ang Pre-form at numero at suriin ang triage form.)</i></p>			
<p>2. Proceed to patients waiting area or OPD area and wait for the for numer to be called.</p> <p><i>(Maupo sa mga upuang nakalaan sa harapan ng OPD at hintayin na tawagin ang numero.)</i></p>	<p>2. Calls out the number/name of the patient to be accommodated at the OPD Section.</p> <p><i>(Pagtawag sa pangalan o numero ng pasyente na tatanggapin sa OPD Section.)</i></p>	None	2 minutes	Administrative Aide III Medical Record OMCDH



<p>3. Present the complete filled-out Pre-form once the number is called.</p> <p>If PWD/SC ID: Present PWD/SC and fill-out Pre-form once number is called from OPD Priority Lane.</p> <p><i>Kung PWD/SC: Ipakita ang PWD/SC ID.</i></p>	<p>3. Receives the filled-out Pre-form and queuing number.</p> <p>3.1. Checks for the completeness of Pre-form.</p> <p>3.2. Encodes data to the patient logbook/I-HOMIS.</p> <p>3.3. Prepares the OPD Health Record and Patient Identification Card/Yellow Card of the patient and issue charge slip.</p> <p><i>(3. Pagtanggap ng sinagutang Pre-form.</i></p> <p><i>3.1. Pagsusuri sa pagkukumpleto ng Pre-form.</i></p> <p><i>3.2. Paglilista ng pasyente sa logbook/I-HOMIS.</i></p> <p><i>3.3. Paggawa ng OPD Health Record at ng Patient Identification Card/Yellow Card ng</i></p>	<p>None</p>	<p>3 minutes</p>	<p>Administrative Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p>
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	<i>pasyente at magbigay ng charge slip.)</i>			
4. Proceed to Cashier for Payment of OPD Health Record.  <i>(Pumunta sa Cashier para magbayad ng OPD Health Record.)</i>	4. Issue an unofficial receipt.	Php 20.00	2 minutes	Cashier
5. Once the number/name is called, proceed to OPD Section for consultation.  <i>(Magtungo sa OPD Section kapag tinawag na ang pangalan o numero.)</i>	5. Forwards OPD Health Record to the Nursing Attendant of OPD Section at which the patient will consult.  <i>( Pagbibigay ng OPD Health Record ng pasyente sa Nursing Attendant ng OPD Section na kung saan siya titingnan ng Doktor.)</i>	None	2 minutes	Admin Aide III Medical Record OMCDH  Admin Aide III Medical Record OMCDH
End of Transaction			10 minutes	



## 18. Out-Patient Department Registration of Old Patients (Dating Pasyente)- External Services

Registration of old patients consulting at the OPD from Monday to Friday 8am to 5pm.

<b>Office or Division:</b>	Medical Records Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen			
<b>Who may avail:</b>	Old patients consulting at the OPD			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Patient's Identification Card / Yellow Card		Medical Records Section		
2. Persons with Disability or Senior Citizen ID if applicable		Barangay or Municipal Hall of residence		
3. Triage Form		Triage Area		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Patient/ Companion gets queuing number data Pre-form (to be accomplished from Guard on Duty and present triage form.  If PWD/SC: Present the PWD/SC ID and get priority number from Guard/Admitting Personnel and fill out pre-form.	1. Distribute the pre-forms, queuing number and priority number and check triage form.	None	1 minute	Security Guard I Entrance Door OMCDH
2. Proceed to patients waiting area or OPD area and wait for the for numer to be called.  <i>(Maupo sa mga upuang nakalaan sa harapan ng OPD at hintayin na tawagin ang numero.)</i>	2. Calls out the number/name of the patient to be accommodated at the OPD Section.  <i>(Pagtawag sa pangalan o numero ng pasyente na</i>	None	2 minutes	Admin Aide III Medical Record OMCDH





	<i>tatanggapin sa OPD Section.)</i>			
<p>3. Present the complete filled-out Pre-form once the number is called.</p> <p>If PWD/SC ID: Present PWD/SC and fill-out Pre-form once number is called from OPD Priority Lane.</p> <p><i>Kung PWD/SC: Ipakita ang PWD/SC ID.</i></p>	<p>3. Receives the filled-out Pre-form with old patient remark and queuing number.</p> <p>3.1. Checks for the completeness of Pre-form.</p> <p>3.2. Retrieves OPD Health Record of the patient.</p> <p>3.3. Encodes data to the patient logbook/I-HOMIS.</p> <p>3.4. Prepares the OPD Health Record and Patient Identification Card/Yellow Card of the patient and issue charge slip.</p> <p><i>(3. Pagtanggap ng sinagutang Pre-form na may old patient remark at numero ng pila.</i></p> <p><i>3.1. Pagsusuri sa pagkukumpleto ng Pre-form.</i></p>	None	3 minutes	<p>Admin Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p> <p>Admin Aide III Medical Record OMCDH</p>



	<p>3.2. <i>Paghahanap ng OPD Health Record ng pasyente.</i></p> <p>3.3. <i>Paglilista ng pasyente sa logbook/I-HOMIS.</i></p> <p>3.4. <i>Paggawa ng OPD Health Record at ng Patient Identification Card/Yellow Card ng pasyente at magbigay ng charge slip.)</i></p>			
<p>4. Proceed to Cashier for Payment of OPD Health Record.</p> <p><i>(Pumunta sa Cashier para magbayad ng OPD Health Record.)</i></p>	<p>4. Issue an unofficial receipt.</p>	<p>Php 20.00</p>	<p>2 minutes</p>	<p>Cash clerk I Cashiering OMCDH</p>
<p>5. Once the number/name is called, proceed to OPD Section for consultation.</p> <p><i>(Magtungo sa OPD Section kapag tinawag na ang pangalan o numero.)</i></p>	<p>5. Forwards OPD Health Record to the Nursing Attendant of OPD Section at which the patient will consult.</p> <p><i>(5.1 Pagbibigay ng OPD Health Record ng pasyente sa Nursing Attendant ng OPD Section na</i></p>	<p>None</p>	<p>2 minutes</p>	<p>Admin Aide III Medical Records OMCDH</p>



	<i>kung saan siya titingnan ng Doktor.)</i>			
End of Transaction			10 minutes	

## 19. Pagbibigay ng Serbisyo para sa mga Pasyenteng nangangailangan ng Tulong. External Service

Bukas Lunes (7:00 ng umaga hanggang 4:00 ng hapon) Martes hanggang Linggo (8:00 ng umaga hanggang 5:00 ng hapon)

<b>Office or Division:</b>	Medical Social Service			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Lahat ng pasyente ng Oriental Mindoro Central District Hospital na nangangailangan ng tulong at walang Philhealth.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Para sa ER/Triage, In at Out, Laboratory, Pharmacy Patient <ul style="list-style-type: none"> <li>➤ Order of Payment</li> <li>➤ Prescribed Medicines</li> <li>➤ Laboratory Request</li> <li>➤ Acknowledgement Receipt</li> </ul>		Nurse in charge (ER/Triage, In at OPD/Ward), Medical Technologist in charge Pharmacist in charge		
2. Para sa Hospital Sponsored Philhealth <ul style="list-style-type: none"> <li>➤ Birth Certificate or Marriage Certificate</li> <li>➤ Philhealth Membership Registration Form</li> </ul>		Client  Medical Social Service		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Lumapit sa Medical Social Worker.	1. Pakikipanayam sa pasyente o kamag anak upang malaman kung anung uri ng serbisyo ang maibibigay at ipaliwanag sa kliyente ang kanyang klasipikasyon.	Wala	8 minuto	Social Worker Officer Social Welfare Services OMCDH



<p><i>Pirmahan ang MSS Assessment Tool ng OMCDH-Kasunduan.</i></p> <p><i>Ipakita ang reseta, laboratory/ radiology request o Order of Payment.</i></p>	<p><i>Ibigay ng MSS Assessment Tool.</i></p> <p><i>Ilagay ang kaukulang diskwento sa kanilang Order of Payment at ilagay ang MSS Classification.</i></p>	<p>wala</p> <p>Depende sa natitirang bayarin</p>	<p>1 minuto</p> <p>1 minuto</p>	<p>Social Worker Officer Social Welfare Services OMCDH</p> <p>Social Worker Officer Social Welfare Services OMCDH</p>
<p><i>2. Ipasa ang kinakailangang dokumento.</i></p>	<p><i>2. Tanggapin at suriin.</i></p>	<p>wala</p>	<p>1 minuto</p>	<p>Social Worker Officer Social Welfare Services OMCDH</p>
	<p><i>2.1. I-enroll sa Philhealth (Point of Service.) Mabigyan ng Philhealth ang:</i></p> <p><i>2.2. May kakayahan o Financially Capable. (Payuhan ang kliyente na magbayad ng kontribusyon sa opisina ng Philhealth.)</i></p> <p><i>2.3. Walang kakayahan of</i></p>	<p>Wala</p> <p>wala</p> <p>wala</p>	<p>2 minuto</p> <p>3 minuto</p> <p>2 minuto</p>	<p>Social Worker Officer Social Welfare Services OMCDH</p> <p>Social Worker Officer Social Welfare Services OMCDH</p> <p>Social Worker Officer</p>



	<i>Financially Incapable.</i>			Social Welfare Services OMCDH
<i>3. Pagbalik ng kliyente.</i>	<i>3. Ibigay ang kopya ng kanilang registration slip.</i>  <i>3.1. Ipaliwanag ang mabuting maidudulot na ma i-enrol sa Point of Service.</i>	wala	2 days	Social Worker Officer Social Welfare Services OMCDH
End of Transaction			Minimum of 2 hours & 30 minutes and Maximum of 2 days and 30 minutes	

## 20. PROCEDURE ON DISPENSING OF DRUGS AND MEDICINES FOR OUT- PATIENT (External Services)

Dispensing of drugs and medicines to outpatients

<b>Office or Division:</b>	Pharmacy Department-Medical				
<b>Classification:</b>	Simple Transaction				
<b>Type of Transaction:</b>	G2C – Government to Citizen				
<b>Who may avail:</b>	All Out-Patient who consulted in OPD in need of drugs and medicines				
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>		
1. Doctor's Prescription			Attending Physician		
2. Charge Slip			Pharmacy		
3. Official Receipt and Copy of Charge Slip			Cashier		
<b>CLIENT STEPS</b>		<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.	Presents prescription to Pharmacy.  <i>(ipakita ang reseta sa Parmasya.)</i>	1. Evaluates and validates prescription for completeness  1.1. Check the availability of the medicine	None	2 minutes	Pharmacist Pharmacy OMCDH



		and informs the price of the medicine.  <i>(Susuriin ang reseta at titingnan kung available and gamot na kailangan.)</i>	(Wala)	(2 minuto)	<i>(Parmasyutiko)</i> OMCDH
2.	Pay the corresponding fee at the Cashier and the return to Pharmacy after payment.  <i>(Pumunta sa Cashier para sa bayad at bumalik sa Parmasya pagkatapos magbayad.)</i>	2. Issues Charge Slip in triplicate copies for payment and directs the patient/relative to pay at the cashier.  <i>(Magbibigay ng Charge Slip para sa bibilhing gamut.)</i>	Cost of Medicine  (Halaga ng gamut)	Refer to Cash Operation's Citizen's Charter  <i>(Sumangguni sa proseso ng Cashier)</i>	Pharmacist Pharmacy OMCDH  <i>(Parmasyutiko)</i> Cash Clerk Cashiering OMCDH  <i>(Kahera)</i>
3.	Presents the Official Receipt and copy of charge slip.  <i>(ipakita ang Resibo at Charge Slip.)</i>	3. Verifies the details of the Official Receipt with the Charge Slip.  <i>(ibeberipika ang resibo at charge slip.)</i>	None  (Wala)	2 minutes  <i>(2 minuto)</i>	Pharmacist Pharmacy OMCDH  <i>(Parmasyutiko)</i>
4.	Claims the medicine(s).  <i>(Kunin ang gamut.)</i>	4. Prepares and dispense the medicines; Counsels patient regarding the medication.  <i>(Ihahanda at ibibigay ang gamut</i>	None  (Wala)	3 minutes  (3 minuto)	Pharmacist Pharmacy OMCDH



		<i>sa kliyente at ituturo/ipapayo ang tamang paggamit/pag-inom ng gamut.)</i>  4.1. Records the transaction in Pharmacy OPD Record Logbook.  <i>(Irerekord ang transakyon.)</i>		1 minute  (1 minuto)	<i>(Parmasyutiko)</i>  Pharmacist Pharmacy OMCDH  <i>(Parmasyutiko)</i>
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## 21. PROVISION OF LABORATORY SERVICE TO OUT-PATIENT (Pagbibigay ng serbisyo ng laboratory para sa mga Out-Patient)

Pagbibigay ng serbisyo ng laboratory para sa mga pasyente sa Out-Patient Department ng hospital at iba pang institusyon na nangangailangan nito. Bukas sa loob ng 24 oras, araw-araw.

(Provision of laboratory service to Out-Patient Department of the hospital as well as other institution needing its services. Open 24 hours everyday.)

<b>Office or Division:</b>	Clinical Laboratory Department			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All Out-Patient needing laboratory service			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Document 1: Laboratory Request		Attending Physician/ Requesting Party		
Document 2: Triage Form		Triage - OMCDH		
Document 3: Official Receipt		Cashier - OMCDH		
Document 4: Medical Social Service Classification for Indigent Patient		Medical Social Service - OMCDH		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



<p>1. <i>Kumuha ng Covid Form sa TRIAGE area at sagutan ito ng matapat at totoo lamang para sa kaligtasan at seguridad ng bawat isa.</i></p>	<p>1. <i>Ibigay sa kliyente ang (Form) at pasagutan ito sa pasyente/kliyente at suriin kung kompleto ng sagutan ang lahat ng katanungan.</i></p>	<p>Wala</p>	<p>5 minuto</p>	<p>Admin Aide Triage Area OMCDH</p>	
<p>2.</p>	<p><i>Ipakita ang laboratory request at triage form na may kumpletong detalye.</i></p>	<p>2. <i>Tanggapin ang laboratory request at triage form.</i></p> <p>2.1. <i>Bigyan ng charge slip ang pasyente para sa bayaran.</i></p>	<p>Wala</p>	<p>5 Minuto</p>	<p>Medical Technologist Laboratory OMCDH</p>
<p>3.</p>	<p><i>Magbigay ng specimen na kailangan o magpakuha ng dugo.</i></p>	<p>3. <i>Tanggapin ang sample na kailangan o kuhanan ng dugo ang pasyente.</i></p> <p>3.1. <i>Lagyan ng pangalan at laboratory number ang sample.</i></p> <p>3.2. <i>Itala ang eksaminasyon na ipinapagawa.</i></p>	<p>Wala</p>	<p>30 Minuto</p> <p>4 na oras para sa Hematology,</p>	<p>Medical Technologist Laboratory OMCDH</p>





		<i>3.3. Dalhin sa laboratory ang sample at i-proseso ito.</i>		Clinical Microscopy at Serology/Immunology 6 oras para sa Clinical Chemistry	
4.	<p><i>Ayusin ang bayarin.</i></p> <p><i>4.1 Magbayad ng kaukulang bayarin sa kahera.</i></p> <p><i>4.2. Para sa mga indigent na pasyente – magtungo sa opisina ng Medical Social Service.</i></p>	<p><i>4. Tanggapin ang laboratory charges, bayad at mag-isyu ng opisyal na resibo.</i></p> <p><i>4.1. Tanggapin ang laboratory charges, tayahin ang pasyente at magbigay ng kaukulang sertipikasyon o ebalwasyon.</i></p>	<p>Halaga ng tinukoy na singilin (Tingnan sa talaan ng pagbabayaran)</p> <p>Wala</p>	<p>3 Minuto</p> <p>(10 Minutes)</p>	<p>Cash Clerk I Cashiering OMCDH</p> <p>Social Worker Officer Social Welfare OMCDH</p>
5.	<i>Balikan ang resulta sa oras na itinakda ng laboratory at ipakita ang resibo ng pinagbayaran o sertipikasyon galing sa Medical</i>	<p><i>5. Ihanda ang opisyal na resulta.</i></p> <p><i>5.1. Itala ang opisyal na resulta.</i></p>	Wala	5 Minuto	Medical Technologist Laboratory OMCDH



	<i>Social Service Office.</i>	<i>5.2. Suriin ang katunayan ng pinagbayaran o sertipikasyon galling sa Medical Social Service Office.</i>			
6.	<i>Pirmahan ang record ng pagrelease at sagutan ang Client Satisfaction Survey.</i>	<i>6. Ibigay ang record book sa pasyente.</i>  <i>6.1. Ibigay ang resulta sa pasyente.</i>  <i>6.2. Tanggapin at itabi ang Client Satisfaction Survey.</i>	Wala	2 Minuto	Medical Technologist Laboratory OMCDH
		KABUUAN		5 na oras para sa Hematology, Clinical Microscopy at Serology/Immunology 7 oras para sa Clinical Chemistry	

## ENGLISH

<b>Office or Division:</b>	Clinical Laboratory Department
<b>Classification:</b>	Simple Transaction
<b>Type of Transaction:</b>	G2C – Government to Citizen
<b>Who may avail:</b>	All Out-Patient needing laboratory service
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>



Document 1: Laboratory Request		Attending Physician/ Requesting Party			
Document 2: Triage Form		Triage - OMCDH			
Document 3: Official Receipt and a copy of Charge Slip		Cashier - OMCDH			
Document 4: Medical Social Service Classification for Indigent Patient		Medical Social Service - OMCDH			
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Get a COVID Form at the Triage area and fill it out honestly for everyone's safety and security.		1. Give the client the COVID Form and have the client/patient fill it in and check if all the questions are answered correctly.	None	5 minutes	<i>Admin Aide Triage Area OMCDH</i>
2.	Present laboratory request and Triage Form with complete details.	2. Accept the laboratory request and Triage Form.  2.1. Give the patient charge slip for payment.	None	5 Minutes	Medical Technologist Laboratory OMCDH
3.	Provide the specimen as needed or have blood drawn.	3. Accept the sample needed or draw the patient's blood.  3.1. Label the sample with a name and laboratory number.  3.2. Record the examination being requested.	None	30 Minutes	Medical Technologist Laboratory OMCDH



		3.3. Take the sample to the laboratory and process it.		4 hours for Hematology, Clinical Microscopy and Serology/Immunology 6 hours for Clinical Chemistry	
4.	Settle payment.  4.1 Pay appropriate fee at the cashier.  4.2 For Indigent patient – Go to Medical Social Service Office.	4.1 Accept laboratory charges, fees and issue an Official Receipt.  4.2 Accept laboratory charges, assess the patient and provide appropriate certification or evaluation.	Amount specified to be charged (See Laboratory Pricelist)  None	3 Minutes  (10 Minutes)	Cash Clerk I Cashiering OMCDH  Social Worker Officer Social Welfare OMCDH
5.	Return for the official result on the time specified by the laboratory and present proof of payment or the certification from the Medical	5. Prepares official result.  5.1. Record official result.  5.2. Check the proof of payment or the certification	None	5 Minutes	Medical Technologist Laboratory OMCDH



	Social Service Office.	from the Medical Social Service Office.			
6.	Sign the Release Record and complete the Client Satisfaction Survey.	6. Give the Record book and Client Satisfaction Survey Form to the patient.  6.1. Give the laboratory result to the patient.  6.2. Receive and keep the Client Satisfaction Survey.	None	2 Minutes	Medical Technologist Laboratory OMCDH
		Total		5 hours for Hematology, Clinical Microscopy and Serology/Immunology 7 hours for Clinical Chemistry	

## **22. PROVISION OF RADIOLOGIC SERVICE TO OUT-PATIENT (Pagbibigay ng serbisyo ng radiology para sa mga Out-Patient)**

Pagbibigay ng serbisyo ng radiology para sa mga pasyente sa Out-Patient Department ng hospital at iba pang institusyon na nangangailangan nito. Bukas sa loob ng 24 oras, araw-araw.

(Provision of radiologic service to Out-Patient Department of the hospital as well as other institution needing its services. Open 24 hours everyday.)



<b>Office or Division:</b>	Department of Radiology			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All Out-Patient needing radiologic service			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Document 1: Radiology Request Form		Attending Physician/ Out-Patient Department		
Document 2: Hospital Card		Medical Record Section		
Document 3: Charge Slip		Radiology Information Area		
Document 4: Official Receipt		Cashier		
Document 5: Triage Form		Triage		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. <i>Kumuha ng Covid Form sa TRIAGE area at sagutan ito ng matapat at totoo lamang para sa kaligtasan at seguridad ng bawat isa.</i>	1. <i>Ibigay sa kliyente ang (Form) at pasagutan ito sa pasyente/kliyente at kuhanin kapag ito ay kompleto ng sagutan ang lahat ng katanungan.</i>	Wala	5 minuto	Admin Aide Triage Area OMCDH
2. <i>Ipakita ang request at triage form na may kumpletong detalye.</i>  (Present radiology request with complete data.)	2. <i>Tanggapin at suriin ang request at triage form para sa isasagawang x-ray procedure.</i>  2.1. <i>Bigyan ng charge slip ang pasyente para sa bayaran.</i>  (2. Receive and sort request for the x-ray procedure to be performed.)	Wala  (None)	5 Minuto  (5 Minutes)	Radiologic Technologist I Radiology Area OMCDH



		2.1 Issue charge slip for payment.)			
3.	<p><i>Ayusin ang bayarin.</i></p> <p>(Settle radiology charges.)</p> <p><i>3.1 Magbayad ng kaukulang bayarin sa kahera.</i></p> <p>(Pay radiology charges to the cashier.)</p> <p><i>3.2 Para sa mga indigent na pasyente – magtungo sa opisina ng Medical Social Service.</i></p> <p>(For indigent patient – go to Medical Social Service Office.)</p>	<p><i>3.1 Tanggapin ang radiology charges, bayad at mag-isyu ng opisyal na resibo.</i></p> <p>(Received charge slip, payment and issue official receipt.)</p> <p><i>3.2. Tanggapin ang radiology charges, i-evaluate ang pasyente at magbigay ng kaukulang sertipikasyon o ebalwasyon.</i></p> <p>(Received radiology charges, evaluate patient and issue certification or evaluation.)</p>	<p>Halaga ng tinukoy na singilin</p> <p>(Amount specified on the charge slip)</p> <p>Wala</p> <p>(None)</p>	<p>3 Minuto</p> <p>(3 Minutes)</p> <p>10 Minuto</p> <p>(10 Minutes)</p>	<p>Cash Clerk I Cashiering OMCDH</p> <p>Social Worker Officer Social Welfare Services OMCDH</p>
4.	<p><i>Bumalik sa Radiology Department at ipakita ang resibo pinagbayaran o sertipikasyon</i></p>	<p><i>4. Kunin at suriin ang resibo ng pinagbayaran o sertipikasyon galling sa Medical Social Service Office.</i></p>	<p>Wala</p>	<p>1 Minuto</p>	<p>Rad. Tech Radiology Area OMCDH</p>



	<p><i>galling sa Medical Social Service Office.</i></p> <p>(Return to Radiology Department and show the official receipt of payment or certification from Medical Social Service Office.)</p>	<p>( Get and check the proof of payment or the certification issued by the Medical Social Service Office.)</p>	(None)	(1 Minute)	
5.	<p><i>Ipagawa ang radiologic procedure na kailangan.</i></p> <p>(Submit yourself for the radiologic procedure needed.)</p>	<p><i>5. Isagawa ang radiologic procedure na kailangan.</i></p> <p>( Process the radiologic procedure needed.)</p>	Wala  (None)	2 araw  (2 days)	Rad. Tech Radiology Area OMCDH
6.	<p><i>Balikan ang resulta sa araw na itinakda ng Radiology Department.</i></p> <p>(Return for the official result on the date specified by the Radiology Department.)</p>	<p><i>6. Ihanda ang opisyal na resulta.</i></p> <p><i>6.1. Itala ang opisyal na resulta.</i></p> <p>(6. Prepares official result.</p> <p>6.1. Record official result.)</p>	Wala  (None)	5 Minuto  (5 Minutes)	Rad. Tech Radiology Area OMCDH
7.	<p><i>Pirmahan ang record ng pagrelease at sagutan ang client satisfaction form.</i></p>	<p><i>7. Ibigay ang record book sa pasyente at client satisfaction form.</i></p> <p><i>7.1. Ibigay ang resulta sa pasyente.</i></p>	Wala	3 Minuto	Rad. Tech Radiology Area OMCDH





	(Sign in the releasing record and fill out client satisfaction survey form.)	(7. Give the record book to the patient. 7.1. Release the result to the patient.)	(None)	(1 Minute)	
		total		2 days and 33 Minutes	

### COMPREHENSIVE LIST OF SERVICES

SERVICES		Actual Charges PHP	PROCESSING TIME	
			PROCEDURE	RESULT
1.	Chest / Lung Adult X-ray	280.00	5 Minutes	2 days
2.	Chest / Lung Pedia X-Ray	360.00	5 Minutes	2 days
3.	Skull APL	330.00	10 Minutes	2 days
4.	Upper and Lower Extremities	280.00	5 Minutes	2 days
5.	Abdomen	280.00	5 Minutes	2 days
6.	Spine	280.00	5 Minutes	2 days
7.	Pelvis	280.00	5 Minutes	2 days

### 23. Records Section/ Pagkuha ng Medical Certificate, Certificate of Confinement, at Medico Legal (External Services)

<b>Office or Division:</b>	Medical Record Section
<b>Classification:</b>	Simple Transaction
<b>Type of Transaction:</b>	G2C-Government to Citizen
<b>Who may avail:</b>	Mga pasyenteng natingnan/nagamot/na-confined sa ospital na ito.
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Para sa Medical Certificate Para sa Certificate of Confinement(IN-Patient) ER/OPD-Medico Legal Request letter galling sa Pulis/Authority	Records Section



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Pumila sa record's section isang metrong agwat. Kapag galling sa OPD doctor ipakita ang medical certificate.	1. Interbyuhin ang pasyente/relative, at bigyan ng charge slip.	Wala	5 minuto	Admin. Aide III Medical Records OMCDH
2. Magbayad sa Cashier.	2. Out Patient- Lagyan ng seal ang medical certificate. In-Patient- i-pull out sa chart ang medical certificate at lagyan ng seal.	Ph 50.00 Ph 30.00 doc stamp	5 minuto	Cash Clerk I Cashiering OMCDH
3. Bumalik sa records section para kunin ang medical certificate.	3. Ibigay ang medical certificate na may pirma ng doctor. At papirmahin sa logbook.		1 minuto	Admin. Aide III Medical Records OMCDH
	Tapos ang transakyon	Wala	11 minuto	

**TAPOS NG TRANSAKSYON:** Mahigit 2 oras depende sa pangangailanga ng serbisyo ksama ang paghihintay. ( 143 minuto)

## 24. Records Section/ Pagpapagawa ng Insurance Claim (Insurance) at Clinical Abstract

<b>Office or Division:</b>	Medical Record Section
<b>Classification:</b>	Simple Transaction
<b>Type of Transaction:</b>	G2C-Government to Citizen
<b>Who may avail:</b>	Mga pasyenteng natingnan/na-confined sa ospital na ito.
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
Insurance Form	Records Section



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Pumila na may isang metrong agwat sa record's section, ibigay ang form ng insurance at mag fill-up ng request form.	1. Interbyuhin ang pasyente/relative, kunin ang insurance form at pafill-up- an ang request form.	Wala	5 minuto	Admin. Aide III Medical Records OMCDH
2. Kunin ang claim slip at maari ng umuwi.	2. Bigyan ng claim slip at sabihan bumalik pagnakatanggap na ng text.	Wala	5 minuto	Admin. Aide III Medical Records OMCDH
3. Maghintay na makatanggap ng abiso at bumalik sa itinakdang araw sa Record Section kung maaari ng kuhanin ang insurance claim o clinical abstract.	3. Gawin o i-process ang insurance claim o clinical abstract at i-text ang pasyente/relative kapag maari ng kuhanin ang insurance claim o clinical abstract.		Nakadepende sa kompirasyon ng doktor	Admin. Aide III Medical Records OMCDH
4. Pumila sa record section at ipakita ang claim slip.	4. Kunin ang claim slip at i-check sa system ang pangalan ng pasyente. Bigyan ng charge slip.	Wala	5 minuto	Admin. Aide III Medical Records OMCDH
5. Kunin ang charge slip at magbayad sa Cashier. Pagkatapos ay bumalik sa record section at ipakita ang Opisyal na resibo upang makuha ang insurance claim o clinical abstract.	5. Hanapin ang opisyal na resibo at ibigay ang insurance form o clinical abstract at papirmahin sa logbook ang pasyente/o kamag- anak.	Ph 50.00 Ph 30.00 docs stamp	5 minuto	Admin. Aide III Medical Records OMCDH
	Tapos ang transakyon	Wala	20 minuto	



## 25. Records Section/Paraan ng Pagkuha ng Birth Certificate Para sa Bagong Panganak - (External Services)

Ang pagkuha ng Birth Certificate para sa bagong panganak na sanggol ay mula Lunes – Biyernes mula 8:00am -5:00pm maliban kung piyesta opisyal.

<b>Office or Division:</b>	Medical Record Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Mga batang ipinanganak sa ospital na ito			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Para Birth Certificate a) Para sa mga Kasal-2 photocopy ng Marriage contract at valid ID b) Para sa mga hinde Kasal- 2 photocopy ng valid I.D.'s at birth certificate ng nanay at tatay at sedula ng tatay c) Para sa single mother at menor de edad na nanay – 2 photocopy ng valid ID at birth certificate ng nanay at 2 photocopy ng valid ID ng magulang o guardian ng nanganak.		Records Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Pumila na may isang metro agwat at ipasa ang requirements sa Record section.	1. Interbyuhin ang magulang na may layong isang metro agwat at ipalagay ang requirements sa tray.	Wala	5 minuto	Admin Aide III Medical Records OMCDH
2. Maghintay sa waiting area/lobby ng hospital.	2. Gawin ang Birth Certificate na galling sa Nurse.	Wala	15 minuto	Admin Aide III Medical Records OMCDH
3. Bumalik sa Record Section kapag tinawag ang pangalan ng nanganak o asawa	3. Ipatawag ang magulang ng baby at bigyan ng charge slip	Wala	1 minuto	Admin Aide III Medical Records OMCDH
Magbayad sa Cashier	Resibuhan	P50.00	2 minuto	Cash Clerk I Cashiering



				OMCDH
4. Pagkatapos magbayad ay bumalik sa Record section at i-check kung tama ang nakasulat sa birth certificate.	4. Isulat sa logbook at ipa-check kung tama ang naka-type sa ginawang birth certificate.	Wala	3 minuto	Admin. Aide III Medical Records OMCDH
5. Bumalik sa Record Section para kunin ang rehistradong Birth Certificate sa itinakdang araw.	5. Ihanda at itala ang rehistradong Birth Certificate.	Wala	5 minuto	Admin. Aide III Medical Records OMCDH
6. Pumirma sa logbook at kunin ang birth certificate.	6. Papirmahin ang magulang ng baby sa logbook bago ibigay ang birth certificate.	Wala	1 minuto	Admin. Aide III Medical Records OMCDH
Tapos ang transakyon		P50.00	32 minuto	

## 26. Records Section/Paraan ng Pagkuha ng birth Certificate Para sa Bagong Panganak (late Registration) – External Services

<b>Office or Division:</b>	Medical Record Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Mga batang ipinanganak sa ospital na ito			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Para late Registration ng Birth Certificate: <ul style="list-style-type: none"> <li>✓ Birth Certificate na hinde napa-rehistro</li> <li>✓ Negative Result from NSO</li> <li>✓ Photocopy ng valid ID ng Nanay at Tatay o Marriage Contract kung kasal</li> </ul>		Records Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



<p>1. Pumila na may agwat na isang metro ang layo sa iba at i-file sa record section kasama ang requirements para sa late registration ng birth certificate.</p> <p>Kuhanin ang claim slip.</p>	<p>1. Interbyuhin ang magulang o legal guardian, i-check kung kumpleto ang dalang requirements.</p>	Wala	1 minuto	<p>Admin. Aide III Medical Records OMCDH</p>
	<p>1.1. Bigyan ng claim slip at pabalikin matapos ang 1 linggo.</p>	Wala	1 minuto	
	<p>1.2. Hanapin ang record ng nanay at baby at i-type ang birth certificate.</p>	Wala	5 minuto	
<p>2. Pagbalik ipakita ang claim slip at magbayad sa cashier.</p>	<p>2. Bigyan ng charge slip at i-type ang certificate for late registration.</p>	P50.00		<p>Cash Clerk I Cashiering OMCDH</p>
<p>3. Ipakita ang resibo at kuhanin ang birth certificate at certificate for late registration at pumirma sa logbook.</p>	<p>3. Ibigay ang birth certificate kasama ang certificate for late registration at papirmahin sa logbook.</p>			<p>Admin. Aide III Medical Records OMCDH</p>
	<p>Tapos ang transakyon</p>	P50.00	7 minuto	

## 27. Records Section/ Paraan ng Pagkuha ng Death Certificate (External Services)

Ang pagkuha ng Death Certificate ay mula Lunes – Byernes 8:00am-5:00pm maliban kung ang sanhi ng pagkamatay ay Rabies at Covid-19 Suspect/Probable/Positive, ito ay ibibigay sa loob ng 12 oras anumang araw.



<b>Office or Division:</b>	Medical Record Section			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	Mga namatay sa ospital na ito.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Statement of Account (SOA), Discharge Clearance at Acknowledgement Receipt		Records Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Pumila sa Records Section na may agwat na 1 metro ang pagitan.	1. Interbiyuhin ang kamag-anak ng pasyenteng namatay.	Wala	5 minuto	Admin. Aide III Medical Records OMCDH
2. Isumete ang Death slip sa Record staff at ibigay ang mga datus na kinakailangan.	2. I-type ang Death certificate at ibalik sa Nurse kung saang ward namatay ang pasyente para sa pagpirma ng Doktor.	Wala	30 minuto	Admin. Aide III Medical Records OMCDH
3. Mag ayos ng bill sa Billing section.				Admin. Aide IV Billing Section OMCDH
4. Bumalik sa record section matapos mag ayos sa billing section at ibigay ang SOA at discharged clearance.	4. Ipalagay ang mga dokumento sa tray at bigyan ng charge slip. At papirmahin ang kamag-anak ng namatay sa logbook. At payuhan na pumunta sa Municipal Civil Registry para sa pagpapatala ng namatay.	Wala	2 minuto	Admin. Aide III Medical Records OMCDH
	Tapos ang transakyon	Wala	37 minuto	



## 28. WARD

Description: Ward is open 24 hours daily. It caters to all admitted patients.

### B. Pagtigil ng pasyente sa pagamutan (General Ward)

<b>Office or Division:</b>	Ward			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patient chose to be admitted in the ward			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Hospital Number		New Patient-Medical Record Section Old Patient- Patient Itself		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<i>I. Pumunta sa Ward area para sa pagtigil sa pagamutan. (Transfer to ward for confinement.)</i>	<i>1. Tanggapin ang endorsement galing sa ER Nars. (Receive endorsement from ER Nurse.)</i>	Walang Bayad	2 minuto	Nurse I Ward OMCDH
	<i>1.1. Ihanda ang kama at kuwarta na paglalagyan ng pasyente. (Prepares bed and room of patient.)</i>	Walang Bayad	2 minuto	Nurse I Ward OMCDH
	<i>1.2. Ilagay sa komportableng higaan ang pasyente. (Placed patient in comfortable bed.)</i>	Walang Bayad	3 minuto	Nurse I Ward OMCDH
	<i>1.3. Suriin ang kondisyon at kunan ng vital signs ang</i>	Walang Bayad	2 minuto	





	<p><i>pasyente. (Assess patient condition. and take vital signs.)</i></p> <p><i>1.4. Surin ang order ng Doktor para sa patuloy gamutan. (Check Doctors order for the continuity of care.)</i></p> <p><i>1.5. Bigyan ng mga tagubilin sa mga pagsusuri na gagawin. (Give instruction about diagnostic procedures (e.g. proper collection of stool, urine etc.)</i></p> <p><i>1.6. Isulat ang pangalan sa daily census. (Record patients name in daily census.)</i></p> <p><i>1.7. Makipag ugnayan sa dietary department para sa pagkain ng pasyente. (Coordinate to the dietary department for patients' appropriate meal.)</i></p> <p><i>1.8. Makipag ugnayan sa ibang institusyon o</i></p>	<p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p> <p>Walang Bayad</p>	<p>2 minuto</p> <p>1 minuto</p> <p>1 minuto</p> <p>3 minuto</p> <p>3 minuto</p>	<p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p>
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	<p><i>klinika para sa iba pang examination. (Ultrasound, CT-Scan, etc.) (Coordinate to other institution or clinic for other diagnostic procedure needed.</i></p> <p><i>1.9. Subaybayan ang kondisyon ng pasyente at isangguni sa doctor ang mga sintomas na nakita. (Monitor patients' condition and refer to resident on duty any untoward signs and symptoms.)</i></p> <p><i>1.10. Ipagbigay-alam sa kasunod na shift and kondisyon ng pasyente, at ang pagpapatuloy ng gamutan. (Endorse patients' condition and continuity of care to the incoming shift.)</i></p>	<p>Walang Bayad</p> <p>Walang bayad</p>	<p>5 minuto</p> <p>2 minuto</p>	<p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p>
	Total	Walang bayad	26 minuto	



B. Pagpapauwi ng pasyente (Discharging patient)

<b>Office or Division:</b>	Ward			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All patients recovered from illness			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Statement of Account		Billing Section		
Discharge Clearance Slip		Cashier		
Gate Pass		Ward		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Tumanggap ng tagubilin para sa pag-uwi. (Receive instruction on discharge order.)	1. Isulat sa chart ng pasyente ang utos ng pag-uwi. (Write on patient chart the discharge order.)	Walang Bayad	2 minuto	Medical Specialist I Ward OMCDH
	1.1. Suriin ang tagubilin ng doktor para sa pag uwi ng pasyente. (Check Doctors order for patients' discharge.)	Walang Bayad	2 minuto	Nurse I Ward OMCDH
	1.2. Ipaliwanag sa pasyente ang pag uwi. (Explain to patient the discharge order of the physician.)	Walang Bayad	2 minuto	Nurse I Ward OMCDH
	1.3. Dalhin ang discharge	Walang Bayad	2 minuto	



	<p><i>clearance slip sa Billing Section. (Bring the discharge clearance slip to Billing Section.)</i></p> <p><i>1.4. Itala sa sistema ang pasyenteng uuwi sa i-HOMIS. (Encode the patient for discharge on i-HOMIS.)</i></p>	Walang Bayad	2 minuto	<p>Nurse I Ward OMCDH</p> <p>Nurse I Ward OMCDH</p>
<p><i>2. Bantay o kamag-anak- pumunta sa Billing Section para pagsasaayos ng Hospital Bill. (Watcher or Relative – proceeds to Billing Section to settle Hospital Bill.)</i></p>	<p><i>2. Ayusin ang Hospital Bill ng pasyente. (Settle the bills of the patient for discharge.)</i></p>	PhilHealth Coverage	5 minuto	Admin. Aide IV Philhealth OMCDH
<p><i>3. Tanggapin ang Statement of Account at dalhin sa Cashier. (Receives the Statement of Account and bring to Cashier.)</i></p>	<p><i>3. Bigyan ng Statement of Account. (Gives the Statement of Account.)</i></p>	Walang Bayad	2 minuto	Admin. Aide IV Billing Section OMCDH
<p><i>4. Tanggapin ang Discharge Clearance slip at ibigay sa ward nars para sap ag-uwi. (Receives the Discharge Clearance slip.)</i></p>	<p><i>4. Bigyan ng Discharge Clearance slip. (Gives Discharge Clearance slip.)</i></p>	Walang Bayad	2 minuto	Cash Clerk I Cashiering OMCDH
<p><i>5. Ipakita ang Statement of Account o katibayan ng pagbabayad.</i></p>	<p><i>5. Tanggapin ang Statement of Account at ilakip sa chart ng pasyente.</i></p>	Walang Bayad	2 minuto	Nurse I Ward OMCDH





<p><i>7. Ibigay ang gate pass at isauli ang Watcher's ID. (Give the gate pass and the Watcher's ID.)</i></p>	<p><i>7. Tanggapin ang gate pass at Watcher's ID. (Receives the gate pass and Watcher's ID.)</i></p> <p><i>7.1. Isulat ang pangalan ng umuwing pasyente sa logbook. (Write the discharge patient on the logbook.)</i></p>	<p>Walang Bayad</p>	<p>1 minuto</p>	<p>Security Guard I Exit Gate OMCDH</p>
		<p>Walang Bayad</p>	<p>1 minuto</p>	<p>Security Guard I Exit Gate OMCDH</p>
	<p>Total</p>	<p>Walang Bayad</p>	<p>26 minuto</p>	



# **Oriental Mindoro Southern District Hospital External Services**



## BILLING AND CASHIERING SERVICES

### 1. PAYMENT OF HOSPITAL BILL FOR EMERGENCY ROOM (ER) CLIENT WITH PHILHEALTH FOR MINOR SURGICAL PROCEDURES

Processing payments and other financial transactions for services rendered at the emergency room and ensuring that patients understand their financial obligations. Billing and Cashier are open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
ER Clearance Slip (1 original copy)		ER Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit a signed CF4 form and ER Clearance slip at the PhilHealth office	1. Receive signed CF4 form; 1.1. Release countersigned ER Clearance slip with PhilHealth stamp	none	5 minutes	Medical Social Welfare Officer PhilHealth Section OMSDH
2.1. Present the signed ER Clearance slip with PhilHealth stamp to Billing 2.2. Sign the two (2) copies of SOA and CF2	2. Explain the bill to patient; 2.1. Release two (2) copies of SOA, and the countersigned ER Clearance slip	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Submit two (2) copies of SOA and the ER Clearance slip to Cashier	3. Release one (1) copy of SOA and the countersigned ER Clearance slip	None	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		None	15 minutes	





## 2. PAYMENT OF HOSPITAL BILL FOR EMERGENCY ROOM (ER) CLIENT WITHOUT PHILHEALTH AND WITHOUT MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the emergency room and ensuring that patients understand their financial obligations. It is open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
ER Clearance Slip (1 original copy)		ER Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the accomplished ER Clearance slip to Billing	1. Release two (2) copies of Statement of Account (SOA); 1.1. Release countersigned ER clearance slip.	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
2. Submit the two (2) copies of SOA and countersigned ER Clearance slip to Cashier	2. Receives the two (2) copies of SOA, the clearance slip and the payment; 2.1. Return one (1) copy of SOA, and the countersigned ER clearance slip; 2.2. Release an Official Receipt (OR)	Total Cost of Services *See schedule of fees	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	10 minutes	



### 3. PAYMENT OF HOSPITAL BILL FOR EMERGENCY ROOM (ER) CLIENT WITHOUT PHILHEALTH BUT WITH MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the emergency room and ensuring that patients understand their financial obligations. It is open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
ER Clearance Slip (1 original copy)		ER Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the accomplished ER Clearance slip to Billing	1. Explain the bill to patient; 1.1. Release the first (1st) copy of Statement of Account (SOA)	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
2. Present the 1 <sup>st</sup> SOA to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	2. Release the Certificate of Indigency and the MAIP slip	none	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
3. Return the 1 <sup>st</sup> SOA, and submit the Certificate of Indigency and the MAIP slip to Billing; 3.1. Sign the final two (2) copies of SOA	3. Explain the final bill to patient; 3.1. Release two (2) copies of SOA (one with signature of client and another one without), and the countersigned ER Clearance slip	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
4. Submit two (2) copies of SOA, and ER	4. Release (1) copy of SOA, the countersigned ER Clearance slip plus	None if fully covered	5 minutes	Billing and Cashiering Services Head Cashier



Clearance slip to Cashier	the Official Receipt if not fully covered by MAIP	by MAIP or the excess of MAIP		OMSDH
<b>TOTAL</b>		None if fully covered by MAIP or the excess of MAIP	20 minutes	

#### 4. PAYMENT OF HOSPITAL BILL FOR INPATIENT CLIENT WITH EXCESS FROM PHILHEALTH CASE RATE BUT WITH MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the ward and ensuring that patients understand their financial obligations. The procedure commences after the billing clerk announces the names of the clients on process. Billing and Cashier are open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<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 both signed CF2/CF4 forms and the first copy of Statement of Account (SOA) to PhilHealth	1. Receive signed CF2/CF4 forms 1.1. Release the first copy of SOA and the PhilHealth stab	none	5 minutes	Medical Social Welfare Officer PhilHealth Section OMSDH
2. Present the 1 <sup>st</sup> SOA to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	2. Release the Certificate of Indigency and the MAIP slip	none	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH



3.1. Return the first SOA, and submit the PhilHealth stab, the Certificate of Indigency, and the MAIP slip to Billing; 3.2. Sign the final two (2) copies of SOA	3. Explain the final bill to patient; 3.1. Release two (2) copies of SOA (one with signature of client and another one without), and the countersigned Admission Clearance	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
4. Submit two (2) copies of SOA, and Admission slip to Cashier	4. Release (1) copy of SOA, the countersigned Admission Clearance slip plus the Official Receipt if not fully covered by MAIP	None if fully covered by MAIP or the excess of MAIP	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		None if fully covered by MAIP or the excess of MAIP	20 minutes	

## 5. PAYMENT OF HOSPITAL BILL FOR INPATIENT CLIENT WITHOUT EXCESS FROM PHILHEALTH CASE RATE

Processing payments and other financial transactions for services rendered at the ward and ensuring that patients understand their financial obligations. The procedure commences after the billing clerk announces the names of the clients on process. Billing and Cashier are open 24/7.

<b>Office or Division:</b>	Billing and Cashier
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C – Government to Citizen
<b>Who may avail:</b>	All
<b>CHECKLIST OF REQUIREMENTS</b>	
None	None
<b>WHERE TO SECURE</b>	



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the signed CF2/CF4 forms and the first copy of Statement of Account (SOA) to PhilHealth	1. Receive signed CF2/CF4 forms 1.1. Release the first copy of SOA and the PhilHealth stab	none	5 minutes	Medical Social Welfare Officer PhilHealth Section OMSDH
2. Present the first copy of SOA and the PhilHealth stab to Billing	2. Explain the bill to patient; 2.1. Release the second copy of SOA and the Admission Clearance	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Submit the first and the second (2) copies of SOA, the PhilHealth stab and the Admission Clearance to Cashier	3. Release the countersigned (1) copy of SOA and the countersigned Admission Clearance	None	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		None	15 minutes	

## 6. PAYMENT OF HOSPITAL BILL FOR INPATIENT CLIENT WITHOUT PHILHEALTH BUT WITH MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the ward and ensuring that patients understand their financial obligations. The procedure commences after the billing clerk announces the names of the clients on process. Billing and Cashier are open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Proceed to Billing to get a copy of Statement of Account (SOA)	1. Explain the bill to patient; 1.1. Release the first SOA	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
2. Present the 1 <sup>st</sup> SOA to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	2. Release the Certificate of Indigency and the MAIP slip	none	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
3.1. Return the 1 <sup>st</sup> SOA, and submit the Certificate of Indigency and the MAIP slip to Billing; 3.2. Sign the final two (2) copies of SOA	3. Explain the final bill to patient; 3.1. Release two (2) copies of SOA (one with signature of client and another one without), and the countersigned ER Clearance slip	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
4. Submit two (2) copies of SOA, and ER Clearance slip to Cashier	4. Release (1) copy of SOA, the countersigned ER Clearance slip plus the Official Receipt if not fully covered by MAIP	None if fully covered by MAIP or the excess of MAIP	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		None if fully covered by MAIP or the excess of MAIP	20 minutes	



## 7. PAYMENT OF HOSPITAL BILL FOR INPATIENT CLIENT WITHOUT PHILHEALTH AND WITHOUT MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the ward and ensuring that patients understand their financial obligations. The procedure commences after the billing clerk announces the names of the clients on process. Billing and Cashier are open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Proceed to sign and submit one copy of Statement of Account (SOA) to Billing after the explanation of bill	1. Explain the final bill to patient; 1.1. Release two (2) copies of SOA (one with signature of client and another one without), and the countersigned Admission Clearance slip	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
2. Submit two (2) copies of SOA, and the Admission Clearance slip to Cashier	2. Release one (1) copy of SOA (the one without signature) and the countersigned Admission Clearance slip	Total Cost of Services *See schedule of fees	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	10 minutes	



## 8. PAYMENT OF HOSPITAL BILL FOR OUTPATIENT CLIENT WITH MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the outpatient department and ensuring that patients understand their financial obligations. It is open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Charge Slip		OPD iHOMIs Pharmacy; CSSR;		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the charge slip to Billing	1. Explain the bill to client; 1.1. Release the first copy of Statement of Account (SOA)	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
2. Present the 1 <sup>st</sup> SOA to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	2. Release the Certificate of Indigency and the MAIP slip	none	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
3.1. Return the 1 <sup>st</sup> SOA, and submit the Certificate of Indigency and the Medical Assistance For Indigent Patients (MAIP) slip to Billing; 3.2. Sign the final two (2) copies of SOA	3. Explain the final bill to patient; 3.1. Release two (2) copies of SOA (one with signature of client and another one without), and the MAIP	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH





4. Submit two (2) copies of SOA and the MAIP slip to Cashier	4. Release (1) copy of SOA, the countersigned MAIP slip plus the Official Receipt if not fully covered by MAIP	None if fully covered by MAIP or the excess of MAIP	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
<b>TOTAL</b>		None if fully covered by MAIP or the excess of MAIP	None if fully covered by MAIP or the excess of MAIP	

## 9. PAYMENT OF HOSPITAL BILL FOR OUTPATIENT CLIENT WITHOUT MEDICAL ASSISTANCE FOR INDIGENT PATIENTS (MAIP)

Processing payments and other financial transactions for services rendered at the outpatient department and ensuring that patients understand their financial obligations. It is open 24/7.

<b>Office or Division:</b>	Billing and Cashier			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Charge Slip		OPD iHOMIS Pharmacy; CSSR;		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.1. Present the charge slip to Billing 1.2. Sign the Statement of Account (SOA)	1. Explain the bill to client; 1.1. Release one (1) copy of SOA	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
2. Submit one (1) copy of SOA to Cashier	2. Release one (1) copy of	Total Cost of Services	5 minutes	Billing and Cashiering Services Head



	Official Receipt (OR)	*See schedule of fees		Cashier OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	10 minutes	

## CENTRAL SUPPLY ROOM (CSR) SERVICES

### 10. FILL-UP PRESCRIPTION FOR DISCHARGED INPATIENT CLIENT

The medical supplies used for the patients are obtained from this unit. It is open 24/7.

<b>Office or Division:</b>	Central Supply Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		Ward Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the Central Supply Room (CSR)	1. Dispense the medical supplies	None	5 minutes	Central Supply Head Central Supply Room OMSDH
<b>TOTAL</b>		None	5 minutes	

\*Payment shall be included in hospital bill when patient is about to secure clearance for discharge

### 11. FILL-UP PRESCRIPTION FOR EMERGENCY ROOM CLIENT

The medical supplies used for the patients are obtained from this unit. It is open 24/7.

<b>Office or Division:</b>	Central Supply Room
<b>Classification:</b>	Simple



<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		ER Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the Central Supply Room (CSR)	1. Dispense the medical supplies	None	5 minutes	Central Supply Head Central Supply Room OMSDH
<b>TOTAL</b>		None	5 minutes	

\*Payment shall be after patient management when patient is about to secure clearance for discharge.

## 12. FILL-UP PRESCRIPTION FOR INPATIENT CLIENT

The medical supplies used for the patients are obtained from this unit. It is open 24/7.

<b>Office or Division:</b>	Central Supply Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		Ward Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the Central Supply Room (CSR)	1. Dispense the medical supplies	None	5 minutes	Central Supply Head Central Supply Room OMSDH
<b>TOTAL</b>		None	5 minutes	

\*Payment shall be included in hospital bill when patient is about to secure clearance for discharge.

## 13. FILL-UP PRESCRIPTION FOR OUTPATIENT DEPARTMENT CLIENT WITH MEDICAL ASSISTANCE FOR INDIGENT PATIENT (MAIP)

The medical supplies used for the patients are obtained from this unit. It is open 24/7.

<b>Office or Division:</b>	Central Supply Room
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<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		OPD Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the Central Supply Room (CSR)	1. Release CSR charge slip	None	5 minutes	Central Supply Head Central Supply Room OMSDH
2. Present the CSR charge slip to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	2. Release the discounted CSR charge slip with MAIP stamp and Certificate of Indigency	none	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
3. Submit the discounted CSR charge slip with MAIP stamp and Certificate of Indigency to Billing	3. Release two (2) copies of SOA (one with signature of client and another one without), and the MAIP slip	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
4. Submit two (2) copies of SOA and the MAIP slip to Cashier	4. Release (1) copy of SOA, the countersigned MAIP slip plus the Official Receipt if not fully covered by MAIP	None if fully covered by MAIP or the excess of MAIP *See schedule of fees	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
5. Present the countersigned MAIP slip plus the OR if not fully	5. Dispense the medical supplies	None	5 minutes	Central Supply Head Central Supply Room OMSDH



covered by MAIP to the CSR				
<b>TOTAL</b>		None if fully covered by MAIP or the excess of MAIP *See schedule of fees	25 minutes	

#### 14. FILL-UP PRESCRIPTION FOR OUTPATIENT DEPARTMENT CLIENT WITHOUT MEDICAL ASSISTANCE FOR INDIGENT PATIENT (MAIP)

The medical supplies used for the patients are obtained from this unit. It is open 24/7.

<b>Office or Division:</b>	Central Supply Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		OPD Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the Central Supply Room (CSR)	1. Release CSR charge slip	None	5 minutes	Central Supply Head Central Supply Room OMSDH
2. Submit CSR charge slip to Billing	2. Release one (1) copy of Statement of Account (SOA);	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Submit one (1) copy of SOA to Cashier	3. Release the Official Receipt (OR)	Total Cost of Services	5 minutes	Billing and Cashiering Services Head Cashier OMSDH



		*See schedule of fees		
4. Present the OR to the CSR	4. Dispense the medical supplies	None	5 minutes	Central Supply Head Central Supply Room OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	20 minutes	

## EMERGENCY ROOM (ER) SERVICES

### 15. ADMISSION OF CLIENT WITH PHILHEALTH

The process of admitting a patient for an extended period of medical care and treatment to help the patient recover and regain their health. It is open 24/7.

<b>Office or Division:</b>	Emergency Room (ER) Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Provide demographic and pertinent data to Integrated Hospital Operations and Management Information System (IHOMIS) at the Emergency Room (ER)	1. Record demographic and pertinent data	None	5 minutes	IHOMIS Head Emergency Room OMSDH



2. Sign the Consent for Admission form by the client	2. Assess the clinical condition of the client; 2.1. Secure the signed Consent for Admission form; 2.2. Complete charting for admission	None	30 minutes	ER Resident on Duty Emergency Room OMSDH
3. Secure prescribed medicines and supplies to Pharmacy and to Central Supply Room respectively	3. Carry out doctor's orders	None	4 hours	Supervising ER Nurse Emergency Room OMSDH
4. Secure PhilHealth stub at PhilHealth	4. Release PhilHealth stub	None	5 minutes	Medical Social Welfare Officer PhilHealth OMSDH
5. Prepare the client's belonging to be brought into the ward	5. Transferred the client into the ward	None	5 minutes	Supervising ER Nurse Emergency Room OMSDH
<b>TOTAL</b>		None	4 hours, 45 minutes	

## 16. ADMISSION OF CLIENT WITHOUT PHILHEALTH

The process of admitting a client for an extended period of medical care and treatment to help the patient recover and regain their health. It is open 24/7.

<b>Office or Division:</b>	Emergency Room (ER) Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Provide demographic and pertinent data to IHOMIS at the Emergency Room (ER)	1. Record demographic and pertinent data	None	5 minutes	IHOMIS Head Emergency Room OMSDH
2. Sign the Consent for Admission form by the client	2. Assess the clinical condition of the client; 2.1. Secure the signed Consent for Admission form; 2.2. Complete charting for admission	None	30 minutes	ER Resident on Duty Emergency Room OMSDH
3. Secure prescribed medicines and supplies to Pharmacy and to Central Supply Room respectively	3. Carry out doctor's orders	None	4 hours	Supervising ER Nurse Emergency Room OMSDH
4. Secure PhilHealth stub at PhilHealth	4. Release PhilHealth stub	None	5 minutes	Medical Social Welfare Officer PhilHealth OMSDH
5. Proceed to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	5. Enroll the client to PhilHealth Point of Servicer	None	10 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
6. Prepare the client's belonging to be brought into the ward	6. Transferred the client into the ward	None	5 minutes	Supervising ER Nurse Emergency Room OMSDH
<b>TOTAL</b>		None	4 hours, 55 minutes	

## 17. EMERGENCY ROOM CONSULTATION

The doctor promptly assesses patients who can not wait in the Outpatient Department (OPD) and those who arrive at the hospital when the OPD is closed but need





immediate attention. However, they do not necessarily need to be admitted, so the doctor will eventually send them home. It is Open 24/7

<b>Office or Division:</b>	Emergency Room (ER) Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Provide demographic and pertinent data to IHOMIS at the Emergency Room (ER)	1. Record demographic and pertinent data	None	5 minutes	IHOMIS Head Emergency Room OMSDH
2. Subject the self for medical evaluation	Assess the clinical condition of the client;	None	30 minutes	ER Resident on Duty Emergency Room OMSDH
3. Secure prescribed medicines and supplies to Pharmacy and to Central Supply Room respectively	3. Carry out doctor's orders	None	4 hours	Supervising ER Nurse Emergency Room OMSDH
4. Secure ER Clearance slip and have it signed by Laboratory, Radiology, CSSR, and Pharmacy	4. Order patient for discharge	None	15 minutes	Supervising ER Nurse Emergency Room OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	4 Hours, 50 minutes	



\*Follow the procedure of payment of hospital bills for Emergency Room client accordingly.

## LABORATORY SERVICES

### 18. LABORATORY FOR EMERGENCY ROOM (ER) AND INPATIENT CLIENTS

The hospital laboratory performs various diagnostic tests and analyses. Patients typically provide samples or undergo tests as directed by the doctors, and the results are then interpreted by healthcare professionals to make informed decisions about treatment and care. It is open 24/7

<b>Office or Division:</b>	Diagnostic Laboratory			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Laboratory Request thru IHOMIS interface		Emergency Room IHOMIS interface Ward Nurse Station IHOMIS interface		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit for collection of specimens	1. Extract specimen sample 1.1. Subject the specimen to laboratory examination 1.2. Release of results directly to ER nurse station and/or Ward nurse station	none	*See the table of turnaround time	Chief Medical Technologist Laboratory OMSDH
<b>TOTAL</b>		none	*See the table of turnaround time	

\*Table of Turnaround time

\*Payment shall be included in hospital bill when patient is about to secure clearance for discharge.



## 19. LABORATORY FOR OUTPATIENT CLIENT

The hospital laboratory performs various diagnostic tests and analyses. Patients typically provide samples or undergo tests as directed by the doctors, and the results are then interpreted by healthcare professionals to make informed decisions about treatment and care. It is open 24/7

<b>Office or Division:</b>	Diagnostic Laboratory			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Laboratory Request/s (for submission)		OPD Nurse Station		
Official Receipt (for presentation) and/or countersigned MAIP (for submission)		Cashier		
<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 Laboratory Request/s and the Official Receipt and or countersigned MAIP slip to the laboratory 2. Submit specimens for examination	1. Extract specimen sample 1.1. Subject the specimen to laboratory examination	None	5 minutes  *See the table of turnaround time	Chief Medical Technologist Laboratory OMSDH
2. Get result directly from the laboratory	2. Release of results directly to client	None	5 minutes	Chief Medical Technologist Laboratory OMSDH
<b>TOTAL</b>		None	10 minutes plus the turnaround time	

\*No additional charges except for the already paid diagnostic procedure/s or test

\*See schedule of fees

## MEDICAL SOCIAL SERVICES

### 20. PROVISION OF MEDICAL ASSISTANCE FOR INDIGENT PATIENT

This unit provide support and assistance to patients and their families. It is open during office hours.



<b>Office or Division:</b>	Medical Social Welfare Office			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Statement of Account (SOA)		Billing 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 SOA	1. Interviewed for social classification 1.1. Release Certificate of Indigency and MAIP slip	None	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
<b>TOTAL</b>		None	5 minutes	

## OUTPATIENT DEPARTMENT SERVICES

### 21. ANIMAL BITE TREATMENT CENTER SERVICES

A specialized healthcare clinic that focuses on the assessment, treatment, and management of individuals who have been bitten by animals. It is open from Monday to Friday at 8:00 am to 4:00 pm.

<b>Office or Division:</b>	Outpatient Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Log to Patient's Logbook and submit the filled-up Patient	1. Provide Patient Demographic (PD) slip; 1.1. Submit accomplished PD	None	10 minutes	OPD Supervising Nurse Security guard OMSDH



Demographic (PD) slip at OPD information desk;	slip to OPD IHOMIS 1.2. Forward generated / retrieved patient's chart to OPD nursing staff			
2. Proceed to OPD nurse station	2. Take history and vital signs; 2.1. Provide laboratory request to client (if applicable)	None	10 minutes	OPD Supervising Nurse Nursing Staff OMSDH
3. Proceed to Animal Bite Treatment Center (ABTC)	3. Evaluate and categorize the wound 3.1. Provide prescription for medicines and supplies	None	5 minutes	ABTC Nurse Dental Clinic OMSDH
4. Follow step by step procedures on how to pay hospital bills based on paying capacity of the client and how to fill-up prescription	4. Release the Statement of Account (SOA) and the official Receipt (OR) and/or the countersigned MAIP slip 4.1 Release medicine and medical supplies from the Pharmacy and from the Central Supply Room respectively	Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	30 minutes	Billing and Cashiering Services Head Billing and Cashier OMSDH
5. Bring the medicine and medical supplies to the ABTC	5. Proceed with the ABTC procedure/s and advises the patient about home medication.	None	45 minutes	ABTC Nurse Dental Clinic OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	1 hour, 40 minutes	



	*None if fully covered by MAIP or the excess of MAIP		
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## 22. CONSULTATION IN PEDIATRICS, MEDICINE, SURGERY AND OBSTETRICS AND GYNECOLOGY

The designated area where medical services are provided to patients who do not require hospitalization. It is open from Monday to Friday at 8:00 am to 4:00 pm.

<b>Office or Division:</b>	Outpatient Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Log to Patient's Logbook and submit the filled-up Patient Demographic (PD) slip at OPD information desk;	1. Provide Patient Demographic (PD) slip; 1.1. Submit accomplished PD slip to OPD IHOMIS 1.2. Forward generated / retrieved patient's chart to OPD nursing staff	None	10 minutes	OPD Supervising Nurse Security guard OMSDH
2. Proceed to OPD nurse station	2. Take history and vital signs; 2.1. Provide laboratory request to client (if applicable)	None	10 minutes	OPD Supervising Nurse Nursing Staff OMSDH



3. Present laboratory request to OPD IHOMIS	3. Return laboratory request and release charge slip to client	None	5 minutes	IHOMIS Head IHOMIS OMSDH
4. Follow step by step procedures on how to pay hospital bills based on paying capacity of the client	4. Release the Statement of Account (SOA) and the official Receipt (OR) and/or the countersigned MAIP slip	Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	20 minutes	Billing and Cashiering Services Head Billing and Cashier
5. Submit the laboratory request and present the OR and/or countersigned MAIP slip to laboratory	5. Conduct diagnostic procedure and release result directly to client		*See the table of turnaround time	Chief Medical Technologist Laboratory OMSDH
6. Submit the result to OPD nursing staff	6. Call the name of client for clinical checkup; 6.1 Release prescription to client		15 minutes	ROD on Duty OPD Physician OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	Turnaround time plus 1 hour	

## 23. DENTAL SERVICES

A specialized unit in the hospital's outpatient department that provides dental care services to patients. It is open from Monday to Friday at 8:00 am to 4:00 pm.



<b>Office or Division:</b>	Outpatient Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Log to Patient's Logbook and submit the filled-up Patient Demographic (PD) slip at OPD information desk;	1. Provide Patient Demographic (PD) slip; 1.1. Submit accomplished PD slip to OPD IHOMIS 1.2. Forward generated / retrieved patient's chart to OPD nursing staff	None	10 minutes	OPD Supervising Nurse Security guard OMSDH
2. Proceed to OPD nurse station	2. Take history and vital signs; 2.1. Provide laboratory request to client (if applicable)	None	10 minutes	OPD Supervising Nurse Nursing Staff OMSDH
3. Proceed to dental clinic	3. Evaluate dental status if for tooth extraction 3.1. provide prescription for medicines and supplies	None	30 minutes	Dentist II Dental Clinic OMSDH
4. Follow step by step procedures on how to pay hospital bills based on paying capacity of the client and how to fill-up prescription	4. Release the Statement of Account (SOA) and the official Receipt (OR) and/or the countersigned MAIP slip 4.1. Release medicine and medical supplies	Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the	30 minutes	Billing and Cashiering Services Head Billing and Cashier OMSDH  Chief Pharmacist





	from the Pharmacy and from the Central Supply Room respectively	excess of MAIP		Pharmacy OMSDH
5. Bring the medicine and medical supplies to the Dental Clinic	5. Proceed with the procedure/s and advises the patient about home medication.	None	30 minutes	Dentist II Dental Clinic OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	1 hour, 50 minutes	

## 24. TUBERCULOSIS - DIRECTLY OBSERVED TREATMENT, SHORT COURSE (TB-DOTS) SERVICES

A specialized healthcare facility that plays a crucial role in the diagnosis and treatment of tuberculosis (TB) using DOTS strategy. It is open Monday to Friday at 8:00 am to 4:00 pm.

<b>Office or Division:</b>	TB-DOTS clinic			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		None		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Log to Patient's Logbook and submit the filled-	1. Provide Patient Demographic (PD) slip;	None	10 minutes	OPD Supervising Nurse Security guard



up Patient Demographic (PD) slip at OPD information desk;	1.1. Submit accomplished PD slip to OPD IHOMIS 1.2. Forward generated / retrieved patient's chart to OPD nursing staff			OMSDH
2. Proceed to OPD nurse station	2. Take history and vital signs; 2.1. Provide radiology and laboratory requests to client (if applicable)	None	10 minutes	OPD Supervising Nurse Nursing Staff OMSDH
3. Present radiology and laboratory requests to OPD IHOMIS	3. Return radiology and laboratory requests and release charge slip to client	None	5 minutes	IHOMIS Head IHOMIS OMSDH
4. Follow step by step procedures on how to pay hospital bills based on paying capacity of the client	4. Release the Statement of Account (SOA) and the official Receipt (OR) and/or the countersigned MAIP slip	Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	20 minutes	Billing and Cashiering Services Head Billing and Cashier OMSDH
5. Submit the radiology and laboratory requests and present the OR and/or countersigned MAIP slip to x-ray room and laboratory respectively	5. Conduct diagnostic procedures and release results directly to client	None	*See the table of turnaround time	Chief Medical Technologist Laboratory OMSDH



6. Submit the result to OPD nursing staff	6. Call the name of client for clinical checkup; 6.1 Release prescription to client 6.2. Refer to hospital TB DOTS	None	15 minutes	ROD on Duty OPD Physician OMSDH
7. Proceed to hospital TB-DOTS clinic	7. Evaluate and prescribe other test before initiation of treatment	None	10 minutes	TB DOTS Nurse TB DOTS Clinic OMSDH
8. Follow step by step procedures on how to pay hospital bills based on paying capacity of the client	8. Release the Statement of Account (SOA) and the official Receipt (OR) and/or the countersigned MAIP slip	Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	10 minutes	Billing and Cashiering Services Head Billing and Cashier OMSDH
9. Submit the laboratory requests and present the OR and/or countersigned MAIP slip to laboratory	9. Conduct diagnostic procedures and release results directly to client	None	2 days	Chief Medical Technologist Laboratory OMSDH
10. Submit Claim the result	10. Release the result directly to client	None	5 mins	
11. Submit the result to TB DOTS Clinic	11. Start anti-TB medications	None	15 minutes	TB DOTS Nurse TB DOTS Clinic OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees *None if fully	Turnaround time plus 2 days, 1 hour, 35 minutes	



	covered by MAIP or the excess of MAIP		
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## PHARMACY SERVICES

### 25. FILL-UP PRESCRIPTION FOR DISCHARGED INPATIENT CLIENT

The medication is handed to the patient, and any additional counseling or instructions are provided. It is open 24/7.

<b>Office or Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		Ward Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the pharmacy	1. Dispense the medicines	None	5 minutes	Chief Pharmacist Pharmacy OMSDH
<b>TOTAL</b>		None	5 minutes	

\*Payment shall be included in hospital bill when patient is about to secure clearance for discharge

### 26. FILL-UP PRESCRIPTION FOR EMERGENCY ROOM CLIENT

The medication is handed to the patient, and any additional counseling or instructions are provided. It is open 24/7.

<b>Office or Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		ER Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Present prescription to the pharmacy	1. Dispense the medicines	None	5 minutes	Chief Pharmacist Pharmacy OMSDH
<b>TOTAL</b>		None	5 minutes	

\*Payment shall be after patient management when patient is about to secure clearance for discharge.

## 27. FILL-UP PRESCRIPTION FOR INPATIENT CLIENT

The medication is handed to the patient, and any additional counseling or instructions are provided. It is open 24/7.

<b>Office or Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		Ward Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
2. Present prescription to the pharmacy	1. Dispense the medicines	None	5 minutes	Chief Pharmacist Pharmacy OMSDH
<b>TOTAL</b>		None	5 minutes	

\*Payment shall be included in hospital bill when patient is about to secure clearance for discharge.

## 28. FILL-UP PRESCRIPTION FOR OUTPATIENT DEPARTMENT CLIENT WITH MEDICAL ASSISTANCE FOR INDIGENT PATIENT (MAIP)

The medication is handed to the patient, and any additional counseling or instructions are provided. It is open 24/7.

<b>Office or Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			



CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Prescription		OPD Nurse Station		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present prescription to the Pharmacy	1. Release Pharmacy charge slip	None	5 minutes	Chief Pharmacist Pharmacy OMSDH
2. Present the Pharmacy charge slip to Medical Social Welfare (MSW) Office for social classification and to sign at the MSW logbook	2. Release the discounted Pharmacy charge slip with MAIP stamp and Certificate of Indigency	none	5 minutes	Medical Social Welfare Officer Medical Social Welfare Office OMSDH
3. Submit the discounted Pharmacy charge slip with MAIP stamp and Certificate of Indigency to Billing	3. Release two (2) copies of SOA (one with signature of client and another one without), and the MAIP slip	none	5 minutes	Billing and Cashiering Services Head Billing OMSDH
4. Submit two (2) copies of SOA and the MAIP slip to Cashier	4. Release (1) copy of SOA, the countersigned MAIP slip plus the Official Receipt (OR) if not fully covered by MAIP	None if fully covered by MAIP or the excess of MAIP *See schedule of fees	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
5. Present the countersigned MAIP slip plus the OR if not fully covered by MAIP to the Pharmacy	5. Dispense the medicines	None	5 minutes	Chief Pharmacist Pharmacy OMSDH
<b>TOTAL</b>		None if fully covered by	25 minutes	



	MAIP or the excess of MAIP *See schedule of fees		
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## 29. FILL-UP PRESCRIPTION FOR OUTPATIENT DEPARTMENT CLIENT WITHOUT MEDICAL ASSISTANCE FOR INDIGENT PATIENT (MAIP)

The medication is handed to the patient, and any additional counseling or instructions are provided. It is open 24/7.

<b>Office or Division:</b>	Pharmacy			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription		OPD Nurse Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present prescription to the pharmacy	1. Release Pharmacy charge slip	None	5 minutes	Chief Pharmacist Pharmacy OMSDH
2. Submit Pharmacy charge slip to Billing	2. Release one (1) copy of Statement of Account (SOA);	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Submit one (1) copy of SOA to Cashier	3. Release the Official Receipt (OR)	Total Cost of Services *See schedule of fees	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
4. Present the OR to the Pharmacy	4. Dispense the medicines	None	5 minutes	Chief Pharmacist Pharmacy OMSDH



<b>TOTAL</b>	Total Cost of Services *See schedule of fees	20 minutes	
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## PHILHEALTH SERVICES

### 30. PHILHEALTH AVAILMENT FOR INPATIENT CLIENT

The process of accessing the benefits and coverage provided by PhilHealth to help offset the cost of healthcare services received from the hospital. It is open during office hours daily.

<b>Office or Division:</b>	PhilHealth			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Member Data Record (1 copy for presentation);		PhilHealth		
Valid ID (1 photo copy back to back for submission if no other document to present)		Any agency releasing valid ID		
Birth certificate of client (if not declared) (1 photocopy for submission)		PSA, LCR		
Marriage contract (if client is not declared) (1 photocopy for submission);		LCR		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Check benefit eligibility to PhilHealth Section	1. Check benefit eligibility through Integrated Hospital Operations and Management	None	15 minutes	Medical Social Welfare Officer PhilHealth Clerk OMSDH





1.1. Proceed to step 2 if "yes"	Information System (iHOMIS)			
1.2. Proceed to Medical Social Welfare (MSW) Office if "No"				
2. Submit verified diagnosis	2. Release PhilHealth stub	None	5 minutes	Medical Social Welfare Officer PhilHealth Clerk OMSDH
<b>TOTAL</b>		None	20 minutes	

## RADIOLOGY SERVICES

### 31. LABORATORY FOR EMERGENCY ROOM (ER) AND INPATIENT CLIENTS

A critical component of the hospital, providing various imaging services that aid in the diagnosis, treatment, and monitoring of medical conditions and injuries. It is open during office hours from Monday to Friday and on-call on Saturday and Sunday for critically ill patients.

<b>Office or Division:</b>	Radiology			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Radiologic Request thru Integrated Hospital Operations and Management Information System (iHOMIS) interface		Emergency Room (ER) IHOMIS interface Ward Nurse Station IHOMIS interface		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit for radiologic procedure at x-ray room	1. Subject client to radiologic procedure 1.1. Release results directly to Emergency Room (ER) IHOMIS interface and/or	none	30 minutes	Radiologic Technologist X-ray Room OMSDH



	Ward Nurse Station IHOMIS interface			
<b>TOTAL</b>		none	30 minutes	

\*Payment shall be included in hospital bill when patient is about to secure clearance for discharge.

## 32. RADIOLOGIC PROCEDURE FOR OUTPATIENT CLIENT

A critical component of the hospital, providing various imaging services that aid in the diagnosis, treatment, and monitoring of medical conditions and injuries. It is open during office hours from Monday to Friday and on-call on Saturday and Sunday for critically ill patients.

<b>Office or Division:</b>	Radiology			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Radiologic Request/s (for submission)		OPD Nurse Station		
Official Receipt (for presentation) and/or countersigned MAIP (for submission)		Cashier		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit for radiologic procedure at x-ray room	1. Subject client to radiologic procedure 1.1. Release unofficial result to Medical Team and OPD official GC	none	30 minutes	Radiologic Technologist X-ray Room OMSDH
2. Get the official result directly from the x-ray room	2. Release of official results directly to client	None	2 days	Radiologic Technologist X-ray Room OMSDH
<b>TOTAL</b>		None	2 days, 30 minutes	

\*No additional charges except for the already paid diagnostic procedure/s or test

\*See schedule of fees



## RECORDS SERVICES

### 33. ISSUANCE OF BIRTH CERTIFICATE (MARRIED PARENTS)

A process by which official birth certificate is provided. It is open during office hours (8:00am – 5:00pm) from Monday to Friday.

<b>Office or Division:</b>	Medical Records			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Marriage Contract (1 photocopy for submission)		Philippine Statistics Authority Municipal Civil Registrar		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-up Birth Certificate Draft Form for validation	1. Receive and validate the filed-up Birth Certificate Draft Form	None	15 minutes	Medical Record Officer Medical Records Section OMSDH
2. Sign and submit final form of Birth Certificate	2. Forward signed birth certificate to Local Civil Registrar (T-TH) 2.1. Retrieve the Registered Birth Certificate	None	6 days	Municipal Civil registrar Municipal Civil Registrar's Office OMSDH
3. Retrieve the Birth Certificate Draft Form from Medical Record and present to Billing	3. Release SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
4. Proceed to Cashier for payment and submit two copies of SOA	4. Receive payment and release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
5. Present the OR to Medical records	5. Release Birth Certificate	None	5 minutes	Medical Record Officer



				Medical Records Section OMSDH
<b>TOTAL</b>		PHP 80	6 days, 30minutes	

### 34. ISSUANCE OF BIRTH CERTIFICATE (MARRIED PARENTS) LATE REGISTRATION

A process by which official birth certificate is provided. It is open during office hours (8:00am – 5:00pm) from Monday to Friday.

<b>Office or Division:</b>	Medical Records			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Marriage Contract (1 photocopy for submission)		Philippine Statistics Authority Municipal Civil Registrar		
Community Tax Certificate (1 original copy for presentation of applicant)		Barangay		
Negative Birth Registration Certificate (original for submission)		Philippine Statistics Authority		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-up Birth Certificate Draft Form for validation	1. Receive and validate the filled-up Birth Certificate Draft Form	None	15 minutes	Medical Record Officer Medical Records Section OMSDH
2. Sign and submit final form of Birth Certificate	2. Forward signed birth certificate to Local Civil Registrar (T-TH) 2.1. Retrieve the Registered Birth Certificate	None	15 days	Municipal Civil registrar Municipal Civil Registrar's Office OMSDH
3. Retrieve the Birth Certificate Draft Form from Medical Record	3. Release SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH



and present to Billing				
4. Proceed to Cashier for payment and submit two copies of SOA	4. Release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
5. Present the OR to Medical records and claim the Birth Certificate	5. Release Birth Certificate	None	5 minutes	Medical Record Officer Medical Records Section OMSDH
<b>TOTAL</b>		PHP 80	15 days, 30 minutes	

### 35. ISSUANCE OF BIRTH CERTIFICATE (UNMARRIED PARENTS)

A process by which official birth certificate is provided. It is open during office hours (8:00am – 5:00pm) from Monday to Friday.

<b>Office or Division:</b>	Medical Records			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Valid ID (Photocopy for submission of both parents); or		Requesting party		
Barangay Clearance ((2) original copies for submission of both parents)		Barangay		
Community Tax Certificate (both parents for presentation)		Barangay		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-up Birth Certificate Draft Form for validation	1. Receive and validate the filed-up Birth Certificate Draft Form 1.1. Release the Birth Certificate Draft Form with	None	15 minutes	Medical Record Officer Medical Records Section OMSDH



	OMSDH Medical Record slip			
2. Proceed to MCR to secure affidavit to use the surname of the father	2. Provide affidavit to use the surname of the father and official Receipt	PHP 200	2 hours (Outside OMSDH)	Municipal Civil registrar Municipal Civil Registrar's Office OMSDH
3.1. Submit the affidavit to use the surname of the father 3.2. Sign and submit the final form of Birth Certificate	3. Forward signed birth certificate to Local Civil Registrar (T-TH) 3.1. Retrieve the Registered Birth Certificate	None	6 days	Municipal Civil registrar Municipal Civil Registrar's Office
4. Retrieve the Birth Certificate Draft Form from Medical Record and present to Billing	4. Release SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
5. Proceed to Cashier to submit two copies of SOA	5. Receive payment and release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
6. Present the OR to Medical records and claim the birth certificate	6. Release Birth Certificate	None	5 minutes	Medical Record Officer Medical Records Section OMSDH
<b>TOTAL</b>		PHP 280	6 days, 2 hours, 30minutes	

### 36. ISSUANCE OF BIRTH CERTIFICATE (UNMARRIED PARENTS) LATE REGISTRATION

A process by which official birth certificate is provided. It is open during office hours from Monday to Friday.

<b>Office or Division:</b>	Medical Records
<b>Classification:</b>	Highly Technical



<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Valid ID (Photocopy for submission of both parents); or		Requesting party		
Barangay Clearance ((2) original for submission of both parents)		Barangay		
Community Tax Certificate (both parents for presentation)		Barangay		
Negative Birth Registration Certificate ((1)original for submission)		Philippine Statistics Authority		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-up Birth Certificate Draft Form for validation	1. Receive and validate the filed-up Birth Certificate Draft Form 1.1. Release the Birth Certificate Draft Form with OMSDH Medical Record slip	None	15 minutes	Medical Record Officer Medical Records Section OMSDH
2. Proceed to MCR to secure affidavit to use the surname of the father	2. Provide affidavit to use the surname of the father and official Receipt	PHP 200	2 hours (Outside OMSDH)	Municipal Civil registrar Municipal Civil Registrar's Office OMSDH
3.1. Submit the affidavit to use the surname of the father 3.2. Sign and submit the final form of Birth Certificate	3. Forward signed birth certificate to Local Civil Registrar (T-TH) 3.1 Retrieve the Registered Birth Certificate	None	15 days	Municipal Civil registrar Municipal Civil Registrar's Office OMSDH
4. Retrieve the Birth Certificate Draft Form from Medical Record and present to Billing	4. Release SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH



5. Proceed to Cashier for payment and submit two copies of SOA	5. Receive payment and release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
6. Present the OR to Medical records and claim the Birth Certificate	6. Release Birth Certificate	None	5 minutes	Medical Record Officer Medical Records Section OMSDH
<b>TOTAL</b>		PHP 280	15 days, 30minutes	

### 37. ISSUANCE OF CLINICAL ABSTRACT FROM CONFINEMENT

A process of providing a summarized, comprehensive document that contains essential information about a patient's medical history, treatment, and current health status. It is open during office hours (8:00am – 5:00pm) from Monday to Friday.

<b>Office or Division:</b>	Medical Records			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Valid ID (for presentation) and/or		Requesting party		
Authorization Letter (1 original copy for submission)		Patient or immediate legal next of kin		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-out request form	1. Prepare certified true copy of Clinical Abstract	none	15 minutes	Medical Record Officer Medical Records Section OMSDH
2. Present to Billing the retrieved request form for Clinical Abstract	2. Release 2 copies of SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Proceed to Cashier for payment and submit two copies of SOA	3. Receive payment and release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH





4. Present the OR to Medical records and claim the clinical abstract	4. Release the certified true copy of Clinical Abstract	None	5 minutes	Medical Record Officer Medical Records Section OMSDH
<b>TOTAL</b>		PHP 80	30 minutes	

### 38. ISSUANCE OF DEATH CERTIFICATE

The Official process of providing a legal document that confirms and records the death of an individual. It is open during office hours from Monday to Friday.

<b>Office or Division:</b>	Medical Records			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Birth Certificate or marriage contract of deceased (1 photocopy for submission)		PSA or MCR		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-up Death Certificate Draft Form for validation	1. Receive and validate the filed-up Death Certificate Draft Form 1.1. Release draft of Death Certificate	None	15 minutes	Medical Record Officer Medical Records Section OMSDH
2. Proceed to MHO for submission of draft of Death Certificate	2.1. Review the draft of Death Certificate	None	4 hours (outside OMSDH)	Municipal Health Officer Municipal Health Officer OMSDH
3. Submit the reviewed draft of Death Certificate	3. Receive and prepare the final form of Death Certificate	None	15 minutes	Medical Record Officer Medical Records Section OMSDH
4. Present to Billing the retrieved Death Certificate Draft	4. Release 2 copies of SOA	None	5 minutes	Billing and Cashiering Services Head Billing



Form from Medical Records				OMSDH
5. Proceed to Cashier for payment and submit two copies of SOA	5. Receive and release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
6. Present the OR to Medical records and claim the death certificate	6. Release the final form of Death Certificate and give further instructions	None	5 minutes	Medical Record Officer Medical Records Section OMSDH
<b>TOTAL</b>		PHP 80	4 hours, 45 minutes	

### 39. ISSUANCE OF MEDICAL CERTIFICATE FOR EMPLOYMENT / ON-THE-JOB TRAINING AND ENROLLMENT TO SCHOOL

The provision of an official document that verifies an individual's health status and fitness for a specific purpose. It is open during office hours (8:00am – 5:00pm) from Monday to Friday.

<b>Office or Division:</b>	Chief of Hospital			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Original Radiologic and Laboratory Results		Any Accredited Diagnostic Laboratory		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Log to Patient's Logbook and submit the filled-up Patient Demographic (PD) slip at OPD information desk;	1. Provide Patient Demographic (PD) slip; 1.1 Submit accomplished PD slip to OPD IHOMIS 1.2. Forward generated / retrieved patient's chart to Chief of	None	10 minutes	OPD Supervising Nurse Security guard OMSDH



	Hospital (COH) Office			
2. Proceed to COH	2. Release diagnostic requests	None	5 minutes	Chief of Hospital COH office OMSDH
3. Present laboratory request to OPD IHOMIS	3. Return laboratory request and release charge slip to client	None	5 minutes	IHOMIS Head OPD IHOMIS OMSDH
4. Follow step by step procedures on how to pay hospital bills based on paying capacity of the client	4. Release the Statement of Account (SOA) and the official Receipt (OR) and/or the countersigned MAIP slip	Total Cost of Services *See schedule of fees *None if fully covered by MAIP or the excess of MAIP	20 minutes	Billing and Cashiering Services Head Billing and Cashier OMSDH
5. Submit the laboratory request and present the OR and/or countersigned MAIP slip to laboratory	5. Conduct diagnostic procedures and release result directly to client	None	*See the table of turnaround time	Chief Medical Technologist Laboratory  Radiologic Technologist X-ray Room OMSDH
6. Submit the result to COH office	6. Forward the Medical Certificate to Cashier	None	10 minutes	Chief of Hospital COH office OMSDH
7. Proceed to Cashier; follow procedures of payment and claim the medical certificate	7. Release the two (2) copies of Medical Certificate	PHP 80	10 minutes	Billing and Cashiering Services Head Billing and Cashier OMSDH
<b>TOTAL</b>		Total Cost of Services *See schedule of fees	Turnaround time plus 50 minutes	



	*None if fully covered by MAIP or the excess of MAIP plus PHP 80		
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#### 40. ISSUANCE OF MEDICAL CERTIFICATE FOR CONFINEMENT, OPD CONSULTATION, AND EMERGENCY ROOM CONSULTATION

The provision of official document that verifies a patient's medical condition, treatment plan, and the necessity for confinement or a medical consultation. It is open during office hours (8:00am – 5:00pm) from Monday to Friday.

<b>Office or Division:</b>	Oriental Mindoro Southern District Hospital			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Valid ID (for presentation) and/or		Requesting party		
Authorization Letter (1 original copy for submission)		Patient or immediate legal next of kin		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-out request form	1. Prepare Medical Certificate	none	4 hours	Medical Record Officer Medical Records Section OMSDH
2. Present to Billing the retrieved request form for Medical Certificate	2. Release 2 copies of SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Proceed to Cashier for payment and submit two copies of SOA	3. Receive payment and release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
4. Present the OR to Medical records and claim	4. Release the Medical Certificate	None	5 minutes	Medical Record Officer



the medical certificate				Medical Records Section OMSDH
<b>TOTAL</b>		PHP 80	4 hours, 15 minutes	

#### 41. ISSUANCE OF MEDICO-LEGAL CERTIFICATE

The creation and provision of an official document that contains medical information and findings related to a patient's condition or injuries, particularly in cases with legal implications.

<b>Office or Division:</b>	Oriental Mindoro Southern District Hospital			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Valid ID (for presentation) and/or		Requesting party		
Authorization Letter (1 original copy for submission)		Patient or immediate legal next of kin		
Police Request (1 original copy)		Police station of the town where the incident happened		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit filled-out request form	1. Prepare Medico-legal Certificate	none	4 hours	Medical Record Officer Medical Records Section OMSDH
2. Present to Billing the retrieved request form for Medico-legal Certificate	2. Release 2 copies of SOA	None	5 minutes	Billing and Cashiering Services Head Billing OMSDH
3. Proceed to Cashier for payment and submit two copies of SOA	3. Release one (1) copy of Official Receipt (OR)	PHP 80	5 minutes	Billing and Cashiering Services Head Cashier OMSDH
4. Present the OR to Medical records and claim the Medico-legal certificate	4. Release the Medico-legal Certificate	None	5 minutes	Medical Record Officer Medical Records Section OMSDH
<b>TOTAL</b>		PHP 80	4 hours, 15 minutes	



# **Oriental Mindoro Provincial Hospital External Services**



## 1. ADMINISTRATIVE - ACCOUNTING SECTION

Accounting Section is in charge in accounting the issuance of certification of last premiums of Pag-Ibig for Retirees and eRF1 (PhilHealth Premium) as requirement for PhilHealth Accreditation renewal of Medical Staff of OMPH and all Satellite Hospitals.

Operating Hours: Monday-Friday (8:00 am- 5:00 pm)

<b>Office or Division:</b>		Administrative Division-Accounting Section (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C & G2G		
<b>Who may avail:</b>		All permanent employees		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
4 Copies of Payroll, Internet Connection			At the Provincial Treasurer's Office, Office of the Provincial Accountant, Provincial Administrator's Office	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Issuance of Last Remittances of Pag-Ibig for Retirees of OMPH and all Satellite Hospitals.	1.1 Provide logbook to the client for the details. 1.2 Issue certification received from the logbook.	None	5 minutes	Administrative Assistant III (OMPH Accounting Section)
2. Issuance of eRF1 for active member Medical Staff of OMPH and all Satellite Hospitals.	2.1 Provide logbook to the client. 2.2 Issue eRF1 received from the logbook.	None	5 minutes	Administrative Assistant III (OMPH Accounting Section)
<b>TOTAL</b>		None	10 minutes	



## 2. ADMINISTRATIVE-BILLING SECTION

### PROVISION OF BILLS AND CHARGES- NO BALANCE BILLING (NBB)

Provision of bills lists out the total charges of hospitalization and are often grouped by service categories, such as room and board, pharmacy, laboratory and operating room, etc.

<b>Office or Division:</b>	Administrative Division-Billing Section (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C, G2G			
<b>Who may avail:</b>	PhilHealth Inpatient (Lifetime Member, Indigent, Hospital Sponsored)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ol style="list-style-type: none"> <li>1. Discharge/Disposition slip- 1 original</li> <li>2. PhilHealth Stub- 1 original</li> <li>3. New born and hearing sticker (for newborn)-1 original</li> <li>4. Member Data Record (MDR) (if necessary) 1 photocopy</li> <li>5. Marriage Contract (if the PhilHealth member is expired)-1 photocopy with registry number</li> <li>6. Birth Certificate (if necessary) 1 photocopy</li> <li>7. Valid ID (any government issued ID-if necessary) 1 photocopy</li> <li>8. Properly accomplished CEWS, CSF, CF2, CF4 (all original 1 copy each)</li> </ol>		<p>Nurse Station (OMPH) Medical Social Service Nurse Station (OB Ward)</p> <p>PhilHealth Local Insurance office (Masipit, Calapan City) Philippine Statistics Authority</p> <p>Philippine Statistics Authority GSIS, SSS, TIN, Driver's License, OSCA ID,PWD ID PhilHealth Section (OMPH)</p>		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Discharge /Disposition Slip and PhilHealth Stub (Window 1). (For expired patient, make sure there is exact date and time of death written in the slip).	<ol style="list-style-type: none"> <li>1. Receive and verify the discharge/ disposition slip and other necessary documents.</li> <li>1.1Verify in the system if patient charges have already been debited.</li> <li>1.2Generate and issue Clearance</li> </ol>	None	15 minutes	Administrative Aide III (OMPH Billing Section)





	Slip for processing PhilHealth Claims Forms.			
2. Present the obtained Clearance Slip and other necessary requirements.	<p>2. Receive and verify the PhilHealth Stub and other necessary documents for issuance PhilHealth Claims Forms (CEWS, CSF, CF2, CF4).</p> <p>2.1 Check the required documents for completeness and sign the Clearance Slip (For Claims Part)</p>	None	10 minutes	Administrative Aide III (OMPH Billing Section)
<p>3. Submit all the necessary documents/requirements</p> <p>3.1 Receive Statement of Account for signature of the patient/PhilHealth member and proceed to Malasakit Center</p>	<p>3. Review all the submitted requirements and designated PhilHealth Case Rate in the system.</p> <p>3.1 Generate and release Statement of Account (SOA) for signature and fill-up of the patient/PhilHealth member. Issue statement of account and instruct client to proceed to</p>	None	45 minutes	Administrative Aide III (OMPH Billing Section)



	Malasakit Center.			
4. Return to Billing with signed Statement of Account and other necessary documents	4. Receive and verify all the submitted documents. Stamp Cleared/Paid the SOA and Clearance Slip.  4.1 Sign Clearance Slip	None	5 minutes	Administrative Aide III (OMPH Billing Section)
5. Receive Clearance Slip (Nurse Copy) and SOA (Patient's Copy)	5. Release Clearance Slip (Nurse Copy) and SOA (Patient's copy) to client	None	5 minutes	Administrative Aide III (OMPH Billing Section)
<b>TOTAL</b>			<b>1 hour and 20 minutes</b>	



### 3. PROVISION OF BILLS AND CHARGES – PHIC NON-NBB PHILHEALTH MEMBERS

Provision of bills lists out the total charges for hospitalization and are often grouped by service categories, such as room and board, pharmacy, laboratory, radiology, etc.

<b>Office or Division:</b>		Administrative Division- Billing Section (OMPH)		
<b>Classification</b>		Simple		
<b>Type of Transaction:</b>		G2C & G2G		
<b>Who may avail:</b>		PhilHealth Inpatient (Private-Employed, Government Employed, Individual Paying, OFW)		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1.Discharge/Disposition Slip- 1 original copy 2.PhilHealth Stub-1 original copy 3.Newborn and hearing sticker (for newborn)- 1 original copy 4.Member Data Record (MDR)- (if necessary) 1 photocopy 5.Marriage Contract (if the PhilHealth member is expired)-1 photocopy with registry number 6.Birth Certificate (if necessary) 1 photocopy 7.Valid ID (any government issued ID-if necessary) 1 photocopy  8.Properly accomplished CEWS, CSF, CF2, CF4 (all original 1 copy each)		Nurse Station (OMPH) Medical Social Service (OMPH) Nurse Station OB Ward (OMPH)  PhilHealth Local Insurance office (Masipit, Calapan City) Philippine Statistics Authority  Philippine Statistics Authority GSIS, SSS, TIN, Driver's License, OSCA ID,PWD ID  Claims Section (OMPH)		
<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 Discharge/Disposition Slip and PhilHealth Stub (Window 1). (For expired patient, make sure there is exact date and time of death written in the slip)	1. Receive and verify the presented discharge/disposition slip and other necessary documents.  1.1Verify in the system if patient's charges have already been debited.  1.2Generate and issue	None	15 minutes	Administrative Aide III (OMPH Billing Section)



	Clearance Slip for processing PhilHealth Claims Forms.			
2. Present the obtained Clearance Slip and other necessary requirements/documents.	<p>2.Receive and verify PhilHealth Stub and other necessary documents for issuance of PhilHealth Claims Forms (CEWS, CSF, CF2, and CF4).</p> <p>2.1Check the required documents for completeness. 2.2Sign the clearance slip (for claims part)</p>	None	10 minutes	Administrative Aide IV, Claims Section (OMPH Billing Section)
<p>3. Submit all the necessary requirements and documents indicating the signature of the patient/member of PhilHealth on the documents.</p> <p>(If without excess bill, proceed to STEP 6)</p> <p>(If with excess bill, proceed to Cashier for payment or to Malasakit Center</p>	<p>3. Review and check all the submitted requirements and designated PhilHealth Case Rate in the system.</p> <p>3.1Generate and release Statement of Account (SOA) for signature and fill-up of the patient/member of PhilHealth.</p>	None	45 minutes	Administrative Aide III (OMPH Billing Section)



for Financial Assistance)	3.2 Inform client of hospital excess bill (if there's any) and instruct client to proceed to Malasakit Center, MSW and/or Cashier for payment			
4. Submit the official receipt and/or Acknowledgement receipt/Guarantee Letter from Malasakit Center and other necessary documents	4. Receive and verify all the submitted documents. Stamp Cleared/Paid the SOA and Clearance Slip.  4.1 Sign Clearance Slip	None	5 minutes	Administrative Aide III (OMPH Billing Section)
5. Receive Clearance Slip (Nurse Copy) and SOA (Patient's copy)	5. Release Clearance Slip (Nurse copy) and SOA (Patient's copy) to client	None	5 minutes	Administrative Aide III (OMPH Billing Section)
<b>TOTAL</b>			<b>1 hour and 20 minutes</b>	



#### 4. PROVISION OF CHARGES- NON PHILHEALTH

Provision of bills lists out the total charges for hospitalization and re often grouped by service categories, such as room and board, pharmacy, laboratory, radiology, etc.

<b>Office or Division:</b>		Administrative Division-Billing Section (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C & G2G		
<b>Who may avail:</b>		Inpatient Non PhilHealth Member		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Discharge/Disposition Slip-1 original copy 2.PhilHealth Stub with Classification from MSW- 1 original copy (for checking only) 3.New born and hearing Sticker (for newborn) -1 original copy			Nurse Station, OMPH Medical Social Services, OMPH  Nurse Station (OB Ward)	
<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 Discharge/Disposition Slip (For expired patient, make sure there is exact date and time of death written in the slip)	1.Receive and verify the presented discharge/di position slip and other necessary documents  1.1Verify in the system if patient charge have already been debited  1.2 Generate and issue Clearance Slip and check the PhilHealth stub to determine the reason of non-processing PhilHealth Claims.	None	15 minutes	Administrative Aide III (OMPH Billing Section)
2. Receive the patient's final bill and statement of account or summary of payment.	2.Generate Statement of Account (SOA) and issue summary of	None	45 minutes	Administrative Aide III (OMPH Billing Section)



2.1 Proceed to Cashier for payment or to Malasakit Center for Financial Assistance	<p>payment to client</p> <p>2.1 Inform client of the Patient's Final Bill and instruct client to proceed to Malasakit Center, MSW for financial assistance and/or Cashier for payment</p>			Administrative Aide III (OMPH Billing Section)
3. Submit the official receipt and/or Acknowledgement receipt/Guarantee Letter from Malasakit Center and other necessary documents	<p>3. Receive and verify all the submitted documents. Stamp Cleared/Paid the SOA and Clearance Slip.</p> <p>3.1 Sign Clearance Slip</p>	None	5 minutes	Administrative Aide III (OMPH Billing Section)
4. Receive Clearance Slip (Nurse Copy) and SOA (Patient's copy)	4. Release Clearance Slip (Nurse copy) and SOA (Patient's copy) to client	None	5 minutes	Administrative Aide III (OMPH Billing Section)
<b>TOTAL</b>			<b>1 hour and 10 minutes</b>	



## 5. PROVISION OF BILLS AND CHARGES-ER/OBS PATIENTS

Provision of bills lists out the total charges for hospitalization and are often grouped by service categories, such as room and board, pharmacy, laboratory, radiology, etc.

<b>Office or Division:</b>		Administrative Division-Billing Section (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G- Government to Government employees		
<b>Who may avail:</b>		Emergency Room (ER) Patients/Under Observation (OBS) Patients		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Clearance Slip-1 original 2.Valid ID (any government issued ID- if necessary) 1 photocopy			Emergency Room, OMPH GSIS,SSS, TIN, Driver's License, OSCA ID, PWD ID	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Submit ER Clearance Slip with corresponding amount of patient's charges (if any) and signatures of the duty from different sections- Pharmacy, CSR, Radiology and Laboratory  (If to be pay, proceed to Cashier for payment and return to Billing Section for Step 3)  (If for Financial Assistance, proceed to STEP 2)	1. Receive and verify the presented ER Clearance slip. Check the indicated amount and signature of the duty.  1.1Verify in the system if patient's charges have already been debited.  1.2Issue Summary of Payment if the client choose to pay the bill or Process documents to avail financial assistance on Malasakit Center	None	15 minutes	Administrative Aide III (OMPH Billing Section)
2. Proceed to Malasakit Center	2.Issue Statement of	None	20 minutes	Administrative Aide III





and present the necessary requirements/ documents for financial assistance.	Account and instruct client to proceed to Malasakit Center  2.1 Process documents to avail financial assistance			(OMPH Billing Section)
3. Return to the Billing Section and submit the official receipt and/or Acknowledgement receipt/Guarantee letter from Malasakit Center and other necessary documents	3.1 Receive and verify all the submitted documents. Stamp Cleared/Paid the ER Clearance Slip.  3.2 Sign and release ER Clearance Slip.	None	5 minutes	Administrative Aide III (OMPH Billing Section)
4. Receive ER Clearance Slip (Nurse copy)	4. Release ER Clearance Slip (Nurse copy)	None	5 minutes	Administrative Aide III (OMPH Billing Section)
<b>TOTAL</b>			<b>45 minutes</b>	



## 6. PHILHEALTH SERVICES

Process and validate submitted accomplished PhilHealth forms and documentary requirements of all the patients for discharge.

<b>Office or Division:</b>		Administrative Division-PhilHealth Services (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G- Government to Citizen		
<b>Who may avail:</b>		All patients for discharge availing PhilHealth Benefits		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. PhilHealth Eligibility Form, Updated Member 2. Data Record, Photocopy of Marriage 3. Certificate (PSA), Photocopy of Birth 4. Certificate (PSA), Patient's Stub, Routing Slip, CEWS, CSF, CF2, CF4, PhilHealth Stub			PhilHealth Office, PSA, Admitting Section within the ER Complex, Social Services Section (OMPH)	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Proceed to PhilHealth Section and present the obtained PhilHealth Stub and wait until the patient's name is called.	1 Receive and verify the Discharge Slip, PhilHealth stub issuance of required documents (CEWS, CSF, CF2, CF4).	None	10 minutes	Administrative Aide IV (OMPH PhilHealth Section)
2. Submit the required documents for the processing of Clearance and wait until the documents have been checked and verified.	2. Receive and verify the required documents and check for completeness 2.1 Return to the client all the verified documents for processing of clearance 2.2 Instruct patient to proceed to the Billing Section.	None	10 minutes	Administrative Aide IV (OMPH PhilHealth Section)



<b>TOTAL</b>		<b>20 minutes</b>	
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## 7. CASHIER DIVISION

### ACCEPTANCE OF PAYMENTS FROM CLIENT

Customers pay at the Cashier for the services received and for the supplies and medicines purchased during hospitalization, consultation and referrals.

<b>Office or Division:</b>	Cashier Section (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C & G2G			
<b>Who may avail:</b>	Clients who will pay for their bills, medicines, laboratory, other diagnostic procedures, medical documents and other fees.			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Charge Slip (Original)			OPD Services Areas	
2.Statement of Account/Summary of Payment (Original)			Billing Section	
3.Referral Slip (Original)			Referring Agency	
4.Patient with Disability ID/Senior for discount purposes (if the patient is senior citizen or PWD) (Original and Photocopy)			Patient	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Submit Charge Slip or Statement of Account/Summary of Payment, Referral Slip	1.Receive and verify the submitted documents  1.1 Inform the client of the amount to be paid.	None	5 minutes	Cashier II (OMPH Cashier Section)
2. Pay the amount in the charge slip and wait for the issuance of the Official Receipt.	2.Receive and check the payment  2.1 Prepare Official Receipt	None	5 minutes	Cashier II (OMPH Cashier Section)
3.Receive Official Receipt and change (if any)	3.Issue Official Receipt and give change (if any)	None	1 minute	Cashier II (OMPH Cashier Section)
<b>TOTAL</b>			<b>11 minutes</b>	



## 8. CASHIER DISBURSEMENT

Releasing of payments for salaries and wages and other benefits to employees.

<b>Office or Division:</b>	Cashier Section (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G			
<b>Who may avail:</b>	Casuals/ Contractual/ Retired/Resigned employee, legal heir in case of the deceased employee who has unpaid claims)			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Valid ID with signature of the payee (original and photocopy)			Payee	
2.Valid ID with signature of the representative (original and photocopy)			Representative	
3.Special Power of Attorney (if there is a representative)			Notary Public	
4.Documents that he/she is a legal heir (in case the payee is deceased) Example: -authenticated marriage contract if the claimant is husband/wife -authenticated birth certificate if the claimant is son/daughter			Claimant or Philippine Statistics Authority, Calapan City	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Inform the disbursing officer on the nature of claim and present a valid ID	1.Verify the name of claimant on the list of payroll/voucher  1.1Let the payee sign the payroll or voucher (if not available inform the payee)  1.2Verify the signature of the payee in the payroll/voucher	None	10 minutes	Cashier II (OMPH Cashier Section)



2. Receive the payroll amount from the disbursing officer and count it before leaving the counter.	2. Release and fill out the amount receive on the payroll  2.1 Stamp the payroll/voucher as "PAID"	None	2 minutes	Cashier II (OMPH Cashier Section)
<b>TOTAL</b>			<b>12 minutes</b>	



## 9. REFUND FOR UNSERVED PROCEDURE AND/OR MEDICINE

Service or goods that have been paid out but were not availed are given a refund after processing and submission of the necessary documents.

<b>Office or Division:</b>	Cashier Section (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C & G2G			
<b>Who may avail:</b>	Clients who paid for the services or goods but were not availed.			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Valid ID of the client or authorized representative (Original)			Payor or Authorized Representative	
2.Official Receipt ( 1 Original)			Payor	
3.Authorization Letter (if representative)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present valid ID and original Official Receipt with explanation from the concerned department written at the back of the Official Receipt why refund should be made and affixing signature over printed name of the authorized representative from the department.	1. Receive and verify the identity of the payor thru the submitted documents.  1.1 Look for the duplicate and triplicate copy of Official Receipt and stamp "CANCELLED".	None	5 minutes	Cashier II (OMPH Cashier Section)
2.Receive the refund amount (proceed to Billing Section if	2.Return the amount of money stated	None	5 minutes	Cashier II (OMPH Cashier Section)



not refund within the day)	on the Official Receipt.  2.1 Advise the payor to proceed to Billing Section (if the request for the refund was not made within the day)			
<b>TOTAL</b>			<b>10 minutes</b>	



## 10. ADMINISTRATIVE-HUMAN RESOURCE DEPARTMENT

### ACCEPTANCE OF APPLICATION FOR RECRUITMENT, SELECTION AND PLACEMENT FOR PERMANENT POSITION AND PROMOTION

Provision of access to equal employment opportunities in the facility.

<b>Office or Division:</b>		Administrative Division- Chief of Hospital (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C & G2G		
<b>Who may Avail:</b>		Applicant		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Three sets of the following Application documents to be placed in long folder:				
1. Application Letter addressed to the Provincial Governor thru the Chief of Hospital (2 Original)		Applicant		
2. Personal Data Sheet from CSC (2 Original)		CSC Website		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit documents for application	1. Review completeness of documents	None	3 minutes	Administrative Aide II (Administrative Office Section)
	1.1 Give one set of document to the Chief of Hospital for applicant's interview	None	1 minute	
	1.2 Applicant's interview with the Chief of Hospital	None	5 minutes	OIC-Chief of Hospital, OMPH
1.3 Return two sets of documents	None	1 minutes		
<b>TOTAL</b>			<b>10 minutes</b>	





## 11. APPLICATION OR AFFILIATES/OJT

The hospital offers teaching-learning activities to different private and government institutions bound by the Memorandum of Agreement signed by both parties. Period of exposure would depend on the required minimum hours prescribed by the institution sending affiliates.

<b>Office or Division:</b>		Administrative Division-Chief of Hospital (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2B & G2G		
<b>Who may avail:</b>		Students		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1 Letter of inter by applicant or letter of request and endorsement from sending agency/school			Student/School	
<b>CLIENTS STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit documents	1. Forward document to Chief of Hospital if without endorsement from Chief of Hospital	None	1 minute	Administrative Aide II (OMPH Administrative Office Section)  OIC-Chief of Hospital, OMPH
	1.1 Review endorsement and letter of intent/request	None	3 minutes	
	1.2 Call up concerned units for endorsement of applicants	None	5 minutes	
	1.3 Call up applicant or affiliation coordinator for assignment	None	5 minutes	
	1.4 Facilitate signing of Memorandum of Agreement between Oriental Mindoro	None	2 days	



	Provincial Hospital and sending agency			
<b>TOTAL</b>			<b>2 Days 14 minutes</b>	

## 12. ISSUANCE OF CERTIFICATE OF APPEARANCE

The agency processes and releases the request for the issuance of Certificate of Appearance to all concerned personnel and other parties who have personally appeared and transact official business in the hospital with approved Travel Order from authorities.

<b>Office or Division:</b>		Administrative Division- Chief of Hospital (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G		
<b>Who may avail:</b>		Walk-in Client		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Travel Order and/or Routing Slip (Original)			Employee concerned/ Client	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present Travel Order and/or Routing slip from the concerned Department Section	I. Receive and reviews Travel Order and/or Routing Slip.	None	2 minutes	Administrative Aide II (OMPH Administrative Office Section)
2. Receive the Certificate of Appearance and signs Visitor's Logbook.	2. Release the Certificate of Appearance and asks Client to sign Visitor's Logbook.	None	2 minutes	Administrative Aide II (OMPH Administrative Office Section)
<b>TOTAL</b>			<b>4 minutes</b>	



### 13. ISSUANCE OF CERTIFICATE OF EMPLOYMENT

The agency processes and releases the request for the issuance of Certificate of Employment who had actually rendered services to the hospital after the termination of employment or upon request by an employee.

<b>Office or Division:</b>	Administrative Division- Human Resource Management Section (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C & G2G			
<b>Who may avail:</b>	OMPH employees/Retired/Resigned			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Principal: 1. 1 Employee ID (Original)			Administrative Division (OMPH)	
Authorized Representative: 1. 1 Proof of Identification of the principal and authorized representative (Original) 2. 1 Authorization letter (Original)			Administrative Division (OMPH)	
<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 Certificate of Employment  1.1Submit the filled out logbook/request form/request slip.	1. Advise client to log in request in the logbook.  1.1 Receive the filled out logbook/request form/request slip and advise the schedule of release of the COE	None	3 minutes	Administrative Aide IV (OMPH Administrative Office Section)
	1.2 Prepare, verify and print the COE.	None	5 minutes	
	1.3 Review and sign the approved COE.	None	1 hour	
2. Return on the scheduled date and claim the requested COE.	2.Release the signed COE	None	2 minutes	Administrative Aide IV(OMPH Administrative Office Section)



3. Sign the Outgoing logbook	3. Give the Outgoing Logbook and instruct client to sign	None	2 minutes	Administrative Aide IV (OMPH Administrative Office Section)
<b>TOTAL</b>			<b>1 hour and 14 minutes</b>	



## 14. LEAVE OF ABSENCE APPLICATION

This is one among the service features provided by the OMPH – Administrative Division to employees who are entitled to leave benefits.

<b>Office or Division:</b>	Administrative Division-Human Resource Management Section (OMPH)
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2G
<b>Who may avail:</b>	All OMPH employees
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
For Vacation Leave within Country: 1.CSC Form No.6 Application for Leave Form	Administrative Office-OMPH Bldg.4
For Vacation Leave Outside Country 1.CSC Form No.6 Application for Leave Form 2.Hospital Clearance-4 copies 3.Travel Authority Form (1 Original Copy)	Administrative Office-OMPH Bldg.4
For Vacation Leave of One Month or more Duration 1.CSC Form No.6 Application for Leave Form 2.Hospital Clearance-4 copies 3.Agency Head approved letter of intent	Administrative Office-OMPH Bldg.4
For Sick Leave 1.CSC Form No.6 Application for Leave Form 2.Medical Certificate (Original Copy) Medical Certificate (Fit to Work, if applicable)	Administrative Office-OMPH Bldg.4
For Maternity Leave 1.CSC Form No.6 Application for Leave Form 2.Hospital Clearance-4 copies 3.Medical Certificate (CSC Form 41)	Administrative Office-OMPH Bldg.4
For Paternity Leave 1.CSC Form No.6 Application for Leave Form 2.Birth Certificate of Child (Photocopy only) or Medical Certificate for Miscarriages (Photocopy only)	Administrative Office-OMPH Bldg.4 City Social Welfare and Development Office-City Hall (CSWDO)



<p>For Solo Parent Leave</p> <ol style="list-style-type: none"> <li>1.CSC Form No.6 Application for Leave Form</li> <li>2.Solo Parent ID or Certification from DSWD (Photocopy)</li> </ol> <p>For Study Leave</p> <ol style="list-style-type: none"> <li>1.Holds a permanent appointment</li> <li>2.Holds a degree that requires passing of bar/board examination</li> <li>3.Field of study pursues must be relevant to the agency's mandate or to the duties and responsibilities of the concerned employee</li> <li>4.Agency Head approved Letter of intent to go on Study Leave</li> <li>5.Signed and notarized Study Leave Contract</li> <li>6.CSC Form No.6 Application for Leave Form</li> <li>7.Hospital Clearance-4copies</li> </ol>		<p>Employee</p> <p>Training Unit</p> <p>Administrative Office-OMPH Bldg.4</p>		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Fill-out request form for Leave Application	1.Entertain the client's request and advise to log in request in the log-in book.	None	5 minutes	Administrative Aide IV (OMPH Administrative Office Section)
2. Sign logbook and Submit the filled out request form/request slip.	2.Receive and validate the required document/Attachments	None	5 minutes	Administrative Aide IV (OMPH Administrative Office Section)
	2.1Verify the Leave Balances of the employee	None	9 minutes	



	2.2 If the employee has no leave of absence, inform the employee that he/she cannot avail the desired leave.		3 minutes	
	2.3 Entry the dates for the leave application into leave cards.	None	3 minutes	Administrative Aide IV(OMPH Administrative Office Section)
	2.4 Obtain initial of Administrative Aide IV or incharge for the Leave Application Form	None	30 minutes	Administrative Aide IV(OMPH Administrative Office Section)
<b>TOTAL</b>			<b>55 minutes</b>	



## MATERIALS MANAGEMENT SERVICES

### SUPPLY PROVISION SERVICES

#### ACCEPTANCE OF GOODS DELIVERED

The Supply Section is responsible of distributing office supplies and resources to various departments (end users) within the Oriental Mindoro Provincial Hospital. In addition, update and maintain office and medical equipment inventories.

<b>Office or Division:</b>		Administrative Division-Supply Section (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G		
<b>Who may avail:</b>		All permanent employees		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1.Approved Request Slip and Inventory Report (3 Original)		At the Provincial General Services Office, Provincial Capitol Complex External Provider		
2.Delivery Receipt (1 Original)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Proceeds to Office of Supply and give the required documents to personnel in charge.	1.Receives the papers relative to the delivery.	None	5 minutes	Administrative Aide IV (Storekeeper) (OMPH– Supply Section)
	1.1 Checks the PO and other procurement documents.		5 minutes	
	1.2 Convenes the End-User, Inspectorate Committee and the Representative from the Commission on Audit for inspection of the delivered goods.		20 minutes	Administrative Aide III (OMPH– Supply Section)
	1.3 Prepares inspection and acceptance			





1.1 Issuance of office supplies and materials to different OMPH offices (end-user)	report for proper documentation  1.4 Provide request slips to the client (end-user)		5 minutes	
2. Deliver the goods	2. If everything is in order, accepts delivery by affixing signature on Inspection Acceptance Report (IAR) and Delivery Receipts	None	1 day	Administrative Aide IV (Storekeeper) (OMPH- Supply Section)
<b>TOTAL</b>			<b>1 Day 35 minutes</b>	



## 15. ISSUANCE OF REQUESTED SUPPLIES/EQUIPMENTS

Processing of issuance of requested supplies/equipment.

<b>Office or Division:</b>		Administrative Division-Supply Section (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G		
<b>Who may avail:</b>		End-users, CSR		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Approved RIS (3 Original)			End-users , CSR	
<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 request	None	5 minutes	Administrative Aide IV (Storekeeper) (OMPH– Supply Section)
2.Wait for the requested supplies/equipment	2.Prepare requested supplies/equipment	None	4 hours	Administrative Aide IV (Storekeeper) (OMPH– Supply Section)
	2.1Prepares Property Acknowledgement Receipt (PAR) for equipment and Inventory Custodian Slip (ICS) for semi expendable items	None	30 minutes	Administrative Aide III (OMPH– Supply Section)
	2.2Issues requested supplies/equipment	None	1 hour	
3.Receives and signs requested supplies/equipment	3.Signs the portion issued and let the end-users/CSR sign the received portion	None	5 minutes	Administrative Aide IV (Storekeeper) (OMPH– Supply Section)
<b>TOTAL</b>			<b>5 hours and 40 minutes</b>	



## NURSING SERVICES

### 16. ADMISSION OF PATIENTS

This process covers patients from Emergency Room, OMPH requiring admission and thorough observation, examination, treatment and care. The service is open Monday to Sunday.

<b>Office or Division:</b>	Nursing Services- Emergency (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Classification:</b>	G2C			
<b>Who may avail:</b>	Patients for Admission			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Admission Slip (1 Original)			Emergency Room, OMPH	
2. Patient Information Data Form (1 Original)			Emergency Room, OMPH	
3. Consent Form for Admission (1 Original)			Emergency Room, OMPH	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Fill up the necessary forms for admission such as Admission Slip, Patient Information and Consent Form	Receive the forms and encode it to the system	None	10 minutes	Admitting Clerk ER, OMPH
1.1 Present Admission Slip, Impormasyon sa Pasyente and Consent Form for Admitting Clerk	1.1 Receive the forms and have the Consent Form filed and signed by the patient's watcher.	None	20 minutes	Admitting Clerk ER, OMPH
2. Signs the consent Form and gives back to the staff on duty	2. Conduct interview for further clarification and encodes Patient's information in the system.	None	5 minutes	Admitting Clerk ER, OMPH
		None	5 minutes	Admitting Clerk



<p>3. Checks the correctness or information's in the Cover Sheet</p> <p>4. Receives and brings the cover sheet and consent forms for admission back to Emergency Room</p>	<p>3. Print cover sheet and have it double checked by the patient's watcher</p> <p>4. Releases the cover Sheet together with the admission slip and Consent Form for admission to patient's watcher and instructs to Give the forms to the Nurse at the Emergency Room.</p>	<p>None</p>	<p>5 minutes</p>	<p>ER, OMPH</p> <p>Admitting Clerk ER, OMPH</p>
<p><b>TOTAL</b></p>			<p><b>45 minutes</b></p>	



## 17. EMERGENCY ROOM CONSULTATION PROCESS

Steps for patients seeking for emergency consultation.

<b>Office or Division:</b>	Nursing Services (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C			
<b>Who may avail:</b>	All patients seeking Emergency Care Services			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
<ol style="list-style-type: none"> <li>1. Valid ID (1 original copy)</li> <li>2. Patient Data Form (1 original copy)</li> <li>3. Phil Health Stub (1 original copy)</li> <li>4. Referral Form (1 original copy)</li> <li>5. ER chart (1 original copy)</li> <li>6. Prescription Pad (1 original copy)</li> <li>7. Laboratory Request Form (1 original copy)</li> <li>8. Radiology Request Form (1 original copy)</li> <li>9. Admission Chart (1 original copy)</li> <li>10. Discharge Slip (1 original copy)</li> </ol>			ER Admitting Section ER Admitting Section ER Admitting Section Referring Facility ER Nurse Station ER Nurse Station ER Nurse Station  ER Nurse Station  ER Nurse Station ER Nurse Station	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Proceed to ER Entrance and Register Patient to Admitting Section.	Get patient information and instruct to proceed to ER	None	10 minutes	Admitting Clerk ER, OMPH
2. Proceed to Triage Area of Assessment and prepare to answer questions regarding illness.	2.1 Receive Patient	None	3 minutes	ER Nurse on Duty ER, OMPH
	2.2 Interview patient/relative		5 minutes	
	2.3 Check Vital Signs and Anthropometric measurement.		5 minutes	
	2.4 Classify into:		3 minutes	
	<ul style="list-style-type: none"> <li>• Medicine</li> <li>• Pediatrics</li> <li>• Surgery</li> <li>• OB-Gyne</li> </ul>		10 minutes	Institutional Worker on Duty ER, OMPH



	2.5 Transport patient to assigned ER (Clean Isolation, Minor Surgery, OB-Gyne and Pedia Area)			
3. Consent for Treatment	3. Assess and Examine the patient for admission/or consultation	None	1 hour	ER Physician on Duty ER, OMPH
4. Follow instructions given by staff	<p>Give Disposition:</p> <p>4.1 Patients for discharge/may go home: Instruct patient/relative of patient's home medications and date of when and where to follow up.</p> <p>4.2 Patients for emergency medication/lab oratory test/Radiology exam: Give request necessary forms and instruct to submit to appropriate unit/section.</p> <p>4.3 Patient for observation: Explain</p>	None	4 hours	ER Nurse on Duty ER, OMPH



	<p>management plan and what and why to wait.</p> <p>4.4 Patients for admission: Follow steps in emergency room Admission process.</p> <p>4.5 Patients for Transfer to other hospital: Give instruction and referral form</p> <p>4.6 Patient Expired: Give instruction for Cadaver Release and processing of Death Certificate.</p>			
	<b>TOTAL</b>		<b>5 hours, 36 minutes</b>	



**MEDICAL AND ANCILLARY DEPARTMENT**  
**OMPH BLOOD BANK WITH ADDITIONAL FUNCTION**  
**BLOOD AND BLOOD COMPONENTS PROCUREMENT**

This service refers to the purchase of blood and blood components by individuals and other Blood Service Facilities.

<b>Office or Division:</b>		Blood Blank-OMPH		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C-Government to Citizen G2G-Government to Government		
<b>Who may avail:</b>		All		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Doctor's request/ Hospital Blood request (1 original copy) 2. Cooler with ice pack			Doctor's Clinic/ Hospital  From requesting Hospital	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present requirements at the Blood Bank Reception Area.	1. Receive requirements and check patients information if completely filled up  1.1 Process registration and issue charge slip (request slip)  1.2 Instruct client to pay at the cashier and comeback with Official receipt	None	5 minutes	Clerk or Medical Technologist (OMPH-Laboratory Section)
2. Pay applicable fees Note: Make sure to get Official receipt.	2. Receive payment and issue Official Receipt (OR)	Refer to the prices below the chart	10 minutes	Cashier Cashier's Office (OMPH-Cashier Section)





3. Present Official receipt to Blood Bank Reception Area	3. Record Official receipt number	None	5 minutes	Medical Technologist Blood Bank (OMPH-Laboratory Section)
4. Receive blood and blood components and counter check.	4. Provide instructions on how to handle blood and blood components	None	5 minutes (per unit of blood)	Medical Technologist Blood Bank (OMPH-Laboratory Section)
5. Sign blood issuance logbook.	5. Check issuance form	none	5 minutes	Medical Technologist Blood Bank (OMPH-Laboratory Section)
<b>TOTAL</b>			<b>30 minutes</b>	

**Blood and Blood Components Prices**

1 Unit Whole Blood	P 1,800.00
1 Unit Packed Red Blood Cell	P 1,500.00
1 Unit Platelet Concentrate	P 1,000.00
1 Unit Fresh Frozen Plasma	P 1,000.00



## BLOOD DONOR SCREENING AND DONATION

This refers to the process of screening individuals for blood donation. Only persons in normal health with a good medical history and absence of high-risk behaviour associated with transfusion-transmissible infections shall be accepted as donors of blood or a component of blood.

<b>Office or Division:</b>	Blood Bank (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Identification Card (original copy)-government or non-government issued ID Any of the following: PRC, SSS, GSIS, Company ID, Passport, School ID, PhilHealth, Driver's License, TIN, Postal ID, Voter's ID, Senior Citizen's ID, OFW ID &PAG-IBIG ID (1 Original)			Client (owner)	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Inquire about blood donation /secure and fill out Blood Donor's Form at the Blood Bank Reception Area	1. Explain about Blood Donation using leaflets on Donor's qualification 1.1 Assist blood donor in filling out of form	None	5 minutes	OMBC Staff (OMPH-Laboratory Section)
2. Submit blood donor's form at Blood Bank Reception Area	2. Receive & check filled out Blood donor's form and instruct to wait for name to be called for interview	None	10 minutes	OMBC Staff (OMPH-Laboratory Section)
3. Receive & check filled out Blood donor's form and instruct to wait for name to be called for interview	3. Log donor's data in the logbook and call donor for screening (pre-counselling)  3.1 If qualified, extract blood	None	1 hour	OMBC Staff (OMPH-Laboratory Section)



	<p>sample and collect urine</p> <p>3.2 Instruct to wait for results of initial Screening</p> <p>3.3 Perform Blood Tests on extracted blood sample</p> <p>- Hemoglobin (hgb), Hematocrit (hct), White Blood Cells (WBC), Platelet count</p> <p>3.4 Record result at donor's logbook</p> <p>3.5 Counsel donor if not qualified</p> <p>3.6 If qualified, proceed with actual bleeding procedure.</p>			
<p>5. Proceed to Blood Bank Donor area for Blood donation – Listen and cooperate in Post-counselling and rest. Note: For donors who do not qualify, charges will be according to the tests</p>	<p>5. Prepare blood bags and do aseptic collection of donors blood (450ml)</p> <p>5.1 Conduct Post-Counselling</p>	None	45 minutes	MTOD/OMB C Staff (OMPH-Laboratory Section)
<b>TOTAL</b>			<b>2 hours</b>	



## 19. AVAILMENT OF DIETARY COUNSELLING AND INSTRUCTIONS

Nutrition is a supportive process which provides medical nutrition therapy to an individual based on specific health needs by creating individualized action plan which promotes better nutrition and good eating habits to prevent or manage specific diseases. The nutrition counselor provides information, educational materials and follow-up care to help individual foster responsible self-care.

<b>Office or Division:</b>		Ancillary Division-DIETARY (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C		
<b>Who may avail:</b>		Inpatient/Outpatient		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Referral from the Nurse or Doctor		Nurse Station		
1.Presents referral slip	<p>For Non-COVID Conduct anthropometric measurement, screening and collects patient's data. Computes nutritional requirements and creates individualized meal plan.</p> <p>For COVID Collect patient's data. Compute nutritional requirements and creates individualized meal plan.</p>	None	15 minutes	Nutritionist-Dietician I (OMPH – Dietary Section)
2.Receives Dietary Instructions	<p>For Non-COVID Provides dietary instruction to client face to face</p> <p>For COVID Provides dietary instruction to client thru phone</p>	None	20 minutes	Nutritionist-Dietitian I (OMPH – Dietary Section)
<b>TOTAL</b>			<b>35 minutes</b>	



## HOSPITAL INFORMATION MANAGEMENT

### 24. ISSUANCE OF UNREGISTERED CERTIFICATE OF LIVE BIRTH

This service involves processing and releasing of unregistered Certificate of Live Birth. Availability of Service is from Monday to Friday at 8:00 am-5:00pm (no noon break).

<b>Office of Division:</b>	Medical Records Services (OMPH)
<b>Classification</b>	Simple
<b>Type of Transaction:</b>	G2C
<b>Who may avail:</b>	Parents Authorized Representative
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
<p>Primary requirements for principal:</p> <ol style="list-style-type: none"> <li>1. Filled up Service Form</li> <li>2. One (1) photocopy of valid ID, any of the <ul style="list-style-type: none"> <li>➤ Government issued IDs such as (GSIS, SSS, Pag-ibig, Driver's License, Passport, Voter's IDs, PHIC ID, TIN, Postal)</li> <li>➤ NBI/ Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> <li>➤ Brgy. Clearance</li> </ul> </li> <li>3. Official Receipt or MSS Note/Form or its equivalent</li> <li>4. Marriage Certificate (for married) or Authority to Use the Surname of the Father and Certificate of Live Birth for mother (for unmarried)</li> </ol>	<p>NICU/DR/OR, OMPH</p> <p>GSIS, SSS, Pagibig , LTO,DFA, LGU, BIR, PhilHealth, PHLPost,COMELEC, School and concerned company of the requesting Party</p> <p>Cashier/MSS, OMPH</p> <p>Philippine Statistics Authority/Local Civil Registry</p>
<p>Authorized Representative:</p> <ol style="list-style-type: none"> <li>1. Pre-filled us Service Form</li> <li>2. One(1) photocopy of valid ID of the principal and authorized representative, any of the following: <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS,SSS, Pag-ibig, Driver's License, Passport, Voter's IDs, PHIC ID, TIN, Postal)</li> <li>➤ NBI/Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> </ul> </li> </ol>	<p>NICU/DR/OR, OMPH</p> <p>GSIS,SSS, Paglbig,LTO DFA LGU,BIR,PhilHealth,PHLPost, COMELEC, School and concerned company of the requesting party</p> <p>Cashier/MSS, OMPH</p>



<p>3. Official Receipt or MSS Note/Form or its equivalent</p>	<p>Philippine Statistics Authority/Local Civil Registry</p>
<p>4. Marriage Certificate (for married) or Authority to use the Surname of the Father and Certificate of Live Birth for mother (for unmarried) (1 photocopy) 5. Authorization letter (1 (Original))</p>	<p>Parent (mother of father) Client</p>
<p><b>Additional requirements for Late Registration:</b> <i>If more than 30 days after birth but within six months:</i></p> <p>Certification from LCR of non-registration (LCR Form No. 18)</p> <p><i>If more than six months after birth:</i> Certification from NSO for No Records of Birth Available</p>	<p>Local Civil Registrar</p> <p>Philippine Statistics Authority</p>
<p>Primary requirements for principal: 1. Pre-filled up Service Form One (1) photocopy of valid ID, any of the following:</p> <ul style="list-style-type: none"> <li>➤ government issued IDs such as GSIS, SSS, Pag-Ibig, Driver's License, Passport, Voter's IDs, PHIC ID, TIN, Postal)</li> <li>➤ NBI/Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> </ul> <p>2. Official Receipt or MSS Note/Form or its equivalent 3. PSA Birth Certificate (Negative) 4. Marriage Certificate (for married) or Authority to use the Surname of the Father and Certificate of Live Birth for mother (for unmarried)</p>	<p>NICU/DR/OR</p> <p>GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPost, COMELEC, School and concerned company of the requesting party</p> <p>Cashier/MSS</p> <p>Philippine Statistics Authority/Local Civil Registry</p>



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure priority number and present requirements	1. Receive priority number and requirements	None	2 minutes	Administrative Aide III (OMPH – Records Section)
1.1 Undertake interview	1.1 Evaluate requirement and interview the client	None	5 minutes	Records Officer I
<i>For non-indigent:</i> 2. Receive charge slip/order of payment and proceed to Cashier for payment	2. Issue charge slip/order of payment and instruct the client to proceed to cashier for payment or MSS for discounting	Php 80.00	2 minutes	Administrative Aide III (OMPH – Records Section)
<i>For indigent:</i> 2.1 Receive charge slip/order of payment and proceed to MSS for discounting	2.1 Advise client to return on the scheduled date	None	2 days	Records Officer I (OMPH – Records Section)
	2.2 Prepare/encode birth certificate and secure signature of the attending physician			Administrative Aide III (OMPH – Records Section)



<p><i>For non-indigent:</i> 3. Pay the amount indicated on the charge slip/order of payment</p>	<p><i>For non-indigent:</i> 3. Receive charge slip/order of payment and its corresponding amount; issues Official Receipt</p>	None	20 minutes	Records Officer I (OMPH – Records Section)
<p><i>For indigent:</i> 3. Present charge slip/order of payment and</p>	<p><i>For indigent:</i> 3. Receive charge slip/order of payment</p>	None	30 minutes	





undertake interview	and interviews client; issues MSS Note/MSS form		2 minutes	
3.1 Receive MSS Note/MSS Form				
4. Return to Health Information Management Office (based on the indicated schedule) and present the Official Receipt/MSS Note/MSS Form	4. Receive and check Official Receipt/MSS Note/MSS Form	None	3 minutes	Administrative Aide III (OMPH – Records Section)
4.1. Sign the releasing logbook	4.1. Instruct client to sign the logbook		2 minutes	
4.2. Receive the unregistered Certificate of Live Birth Certificate	4.2. Release the unregistered Certificate of Live Birth Certificate		3 minutes	
	4.3. Advise client to process the registration of the Certificate of Live Birth Certificate at the Local Civil Registry		5 minutes	
<b>TOTAL</b>	<b>For Non Indigent: P80.00</b>		<b>For Non Indigent: 2 Days &amp; 46 minutes For Indigent 2 Days and 56 minutes</b>	



	<b>For Indigent: Depending on the MSS Discount</b>	
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## 25. ISSUANCE OF UNREGISTERED DEATH CERTIFICATE

This service involves processing and releasing of unregistered Death Certificate (for Inpatient & Emergency Room, except for Dead on Arrival). Availability of service is from Monday-Friday at 8:00 am to 5:00 pm (No noon break). Further, this service is necessary for the registration of Death Certificate at the Local Civil Registry.

**Next of kin** refers to the following: parents, children and siblings

<b>Office or Division:</b>	Medical Records Services (OMPH)
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C
<b>Who may avail:</b>	Spouse and next of kin of the deceased or their Authorized Representative
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
<b>Primary requirements for principal:</b> 1. Filled up Service Form 2. One (1) photocopy valid ID, any of the following: <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS, SSS, Pag-ibig, Driver's License, Passport, Voter's ID, PHIC ID, TIN, Postal)</li> <li>➤ NBI/Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> <li>➤ Brgy, Clearance</li> </ul> 3. Official Receipt or MSS Note/Form or its equivalent 4. PSA Birth Certificate of the deceased patient/client 5. Marriage Certificate (spouse) or Birth Certificate (next of kin)	Doctor/Nurse on Duty  GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPPost, COMELEC, School and concerned company of the requesting party  Cashier/MSS  Philippine Statistics Authority
<b>Authorized Representative:</b> 1. Filled up Service Form Photocopy of one (1) valid ID of the principal and authorized representative, any of the following: <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS, SSS, Pag-ibig, Driver's License,</li> </ul>	NICU/DR/OR  GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPPost, COMELEC,



Passport, Voter's ID, PHIC ID, TIN, Postal) ➤ NBI/Police Clearance ➤ Voter's Certification ➤ Student ID ➤ Company ID ➤ Brgy, Clearance  2. Official Receipt or MSS Note/Form or its equivalent 3. PSA Birth Certificate of the deceased patient/client 4. Marriage Certificate (spouse) or Birth Certificate (next of kin) 5. Authorization letter (Notarized) Special Power of Attorney		School and concerned company of the requesting party  Cashier/MSS  Philippine Statistics Authority  Next of kin/Authorized Person		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure priority number and present requirements	1. Receive priority number and requirements	None	2 minutes	Records Officer I (OMPH – Records Section)
1.1 Undertake interview	1.1 Evaluate requirements and interview the client	None	5 minutes	Administrative Aide III (OMPH – Records Section)
<b>For non-indigent:</b> 2. Receive charge slip/order of payment and proceed to Cashier for payment  <b>For indigent:</b> 2. Receive charge slip/order of payment and proceed to MSS for discounting	2. Issue charge slip/order of payment and instruct the client to proceed to cashier for payment or MSS for discounting  2.1 Retrieve patient's chart	None  None	2 minutes  3 minutes	Administrative Aide III (OMPH – Records Section)



	2.2 Advise client to return on the scheduled date	None	2 minutes	Records Officer I (OMPH – Records Section)
	2.3 Prepare/encode death certificate and secure signature of the attending physician	None	2 Days	Administrative Aide III (OMPH – Records Section)
<p><b>For non-indigent:</b> 3. Pay the amount indicated on the charge slip/order of the payment</p> <p><b>For indigent:</b> 3.1 Present charge slip/order of payment and undertake interview</p> <p>3.2 Receive MSS Note/MSS form</p>	<p><b>For non-indigent:</b> 3. Receive charge slip/order of payment and its corresponding amount; issue Official Receipt</p> <p><b>For indigent:</b> 3.1 Receive charge slip/order of payment and interview client; issue MSS Note/MSS form</p>	None	20 minutes	Administrative Aide III (OMPH – Records Section)
			30 minutes	Records Officer I (OMPH – Records Section)
			2 minutes	Administrative Aide III (OMPH – Records Section)
4. Return to Health Information Management Office (based on	4. Receive and check Official Receipt MSS	None	3 minutes	Administrative Aide III (OMPH – Records Section)



the indicated schedule) and present the Official Receipts/MSS Note/MSS Form	Note/MSS Form		2 minutes	
4.1 Sign the releasing logbook	4.1 Instruct client to sign the logbook		3 minutes	Records Officer I (OMPH – Records Section)
4.2 Receive the unregistered Death Certificate	4.2 Release the unregistered Death Certificate		5 minutes	Administrative Aide III (OMPH – Records Section)
	4.3 Advise client to process the registration of the Death Certificate at the Local Civil Registry			
<b>TOTAL:</b>			<b>For Non Indigent; 2 Days 49 minutes</b>	
			<b>For Indigent: 2 Days 59 minutes</b>	

## 26. ISSUANCE OF MEDICO-LEGAL CERTIFICATE

This service involves processing and releasing of Medico-Legal Certificate. Availability of service is from Monday to Friday at 8:00 am-5:00 pm (No noon break).

**Next of kin** refers to the following: spouse, parents, children, and siblings

<b>Office or Division:</b>	Medical Records Services
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C and G2G
<b>Who may avail:</b>	Patient Next of kin/Authorized Representative Courts and Administrative bodies exercising quasi-judicial and/or investigative function
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
<b>Primary requirements for principal:</b>	
1. Filled up Service Form	Attending Doctor



<p>2. One (1) photocopy valid ID, any of the following:</p> <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS, SSS, Pag-ibig, Driver's License, Passport, Voter's ID, PHIC ID, TIN, Postal)</li> <li>➤ NBI/Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> <li>➤ Brgy, Clearance</li> </ul>		<p>GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPost, COMELEC, School and concerned company of the requesting party</p> <p>Cashier/MSS</p> <p>Clerk of Court, PNP, NBI and enforcement agencies</p>		
<p>3. Official Receipt or MSS Note/Form or its equivalent (1 original)</p> <p>4. Court Order/Letter of Request (1 photocopy)</p> <p><b>Primary Requirement</b> <b>Authorized Representative:</b></p> <p>1. Fill up Service Form</p> <p>2. One (1) photocopy of valid ID of the principal and authorized representative, any of the following:</p> <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS, SSS, Pag-ibig, Driver's License, Passport, Voter's ID, PHIC ID, TIN, Postal)</li> <li>➤ NBI/Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> <li>➤ Brgy, Clearance</li> </ul> <p>3. Official Receipt or MSS Note/Form or its equivalent (1 original)</p> <p>4. Court Order/Letter of Request (1 photocopy)</p> <p>5. If underage, PSA Birth Certificate of patient and PSA Marriage Certificate of Parents (1 photocopy)</p> <p>6. Authorization letter (Notarized) Special Power of Attorney (1 original)</p>		<p>NICU/DR/OR</p> <p>GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPost, COMELEC, School and concerned company of the requesting party</p> <p>Cashier/MSS</p> <p>Clerk of Court, PNP, NBI, and enforcement agencies</p> <p>Requesting party (patient/principal)</p>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Secure priority number and present requirements	1. Receive priority number and requirements	None	2 minutes	Administrative Aide III (OMPH – Records Section)
1.1 Undertake interview	Evaluate requirements and interview the client	None	5 minutes	Records Officer I (OMPH – Records Section)
<b>For non-indigent:</b> 2. Receive charge slip/order of payment and proceed to Cashier for payment	2. Issue charge/slip order of payment and instruct the client to proceed to cashier for payment or MSS for discounting	Php 105.00	3 minutes	Administrative Aide III (OMPH – Records Section)  Records Officer I (OMPH – Records Section)
<b>For indigent:</b> 2.1 Receive charge slip/order of payment and proceed to MSS for discounting	2.1 Retrieve patient's chart	None	3 minutes	Administrative Aide III (OMPH – Records Section)
	2.2 Prepare the medico-legal certificate and secure signature of the attending physician	None	7 hours	
<b>For non-indigent:</b> 3. Pay the amount indicated on the charge slip/order of payment	<b>For non-indigent:</b> 3. Receive charge slip/order of payment and its corresponding	None	20 minutes	Administrative Aide III Records Officer I Administrative Aide III



	amount; issue Official Receipt			
<b><i>For indigent:</i></b> 3.1 Present charge slip/order of payment and undertake interview	<b><i>For indigent:</i></b> 3.1 Receive charge slip/order of payment and interview client; issue MSS Note/MSS form		30 minutes	
3.2 Receive MSS Note/MSS Form			2 minutes	
4. Return to Health Information Management Office (based on the indicated scheduled) and present the Official Receipt/MSS Note/MSS Form	4. Receive and check Official Receipts MSS Note/MSS Form	None	3 minutes	Administrative Aide III
4.1 Sign the releasing logbook	4.1 Instruct client to sign the logbook		2 minutes	Records Officer I (OMPH – Records Section)
4.2 Receive the Medico-legal Certificate	4.2 Release the Medico- legal Certificate		2 minutes	Administrative Aide III (OMPH – Records Section)
	<b>TOTAL:</b>	<b>P 150.00</b>	<b>For Non Indigent: 7 hours 44 minutes For Indigent: 7 hours 54 minutes</b>	





## 27. ISSUANCE OF MEDICAL/CONFINEMENT CERTIFICATE

This service involves processing and releasing of Medical/Confinement Certificate. Availability of service is from Monday to Friday at 8:00 am-5:00pm (No noon break).

**Next of kin** refers to the following: spouse, parents, children and sibling/s.

<b>Office or Division:</b>	Medical Records Services (OMPH)
<b>Classification:</b>	Simple
<b>Type of transaction:</b>	G2C and G2G
<b>Who may avail:</b>	Patient Next of kin/Authorized Representative Courts and Administrative bodies exercising quasi-judicial and/or investigative function
<b>CHECKLIST OF REQUIREMENTS</b>	
<b>WHERE TO SECURE</b>	
<p><b>Primary requirements for principal:</b></p> <p>1. Fill up Service Form</p> <p>2. One (1) photocopy of valid ID of the principal and authorized representative, any of the following:</p> <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS, SSS, Pag-ibig, Driver's License, Passport, Voter's ID, PHIC ID, TIN, Postal)</li> <li>➤ NBI/Police Clearance</li> <li>➤ Voter's Certification</li> <li>➤ Student ID</li> <li>➤ Company ID</li> <li>➤ Brgy, Clearance</li> </ul> <p>3. Official Receipt or MSS Note/Form or its equivalent</p> <p>4. Hospital card (inpatient)</p>	<p>Attending Doctor</p> <p>GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPost, COMELEC, School and concerned company of the requesting party</p> <p>Cashier/MSS</p> <p>Admitting section</p>
<p><b>Authorized Representative:</b></p> <p>1. Fill up Service Form</p> <p>2. One (1) photocopy of valid ID of the principal and authorized representative, any of the following:</p> <ul style="list-style-type: none"> <li>➤ Government issued IDs such as GSIS, SSS, Pag-ibig, Driver's License,</li> </ul>	<p>NICU/DR/OR</p> <p>GSIS, SSS, PagIbig, LTO, DFA, LGU, BIR, PhilHealth, PHLPost, COMELEC, School and concerned company of the requesting party</p>



Passport, Voter's ID, PHIC ID, TIN, Postal) ➤ NBI/Police Clearance ➤ Voter's Certification ➤ Student ID ➤ Company ID ➤ Brgy. Clearance  3. Official Receipt or MSS Note/Form or its equivalent (1 original) 4. Hospital card (inpatient) (1 original) 5. Authorization letter (Notarized)/Special Power of Attorney (1 original)		Cashier/MSS  Admitting Section Requesting Party (patient/principal)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure priority number and present requirements	1. Receive priority number and requirements	None	2 minutes	Administrative Aide III Records Officer I Administrative Aide III
1.1 Undertake interview	Evaluate requirements and interview the client	None	5 minutes	(OMPH – Records Section)
<b><i>For non-indigent:</i></b> 2. Receive charge slip/order of payment and proceed to Cashier for payment  <b><i>For indigent:</i></b> 2.1 Receive charge slip/order of payment and proceed to MSS for discounting	2. Issue charge/slip order of payment and instruct the client to proceed to cashier for payment or MSS for discounting  2.1 Retrieve patient's chart  2.2 Prepare the medico-legal certificate and secure	None  None  None	3 minutes  3 minutes  2 hours	Administrative Aide III Records Officer I Administrative Aide III (OMPH – Records Section)



	signature of the attending physician  <i>For Confinement certificate:</i> Secure the signature MRS head		3 minutes	
<b><i>For non-indigent:</i></b> 3. Pay the amount indicated on the charge slip/order of payment  <b><i>For indigent:</i></b> 3.1 Present charge slip/order of payment and undertake interview  3.2 Receive MSS Note/MSS Form	<b><i>For non-indigent:</i></b> 3. Receive charge slip/order of payment and its Corresponding amount; issue Official Receipt  <b><i>For indigent:</i></b> 3.1 Receive charge slip/order of payment and interview client; issue MSS Note/MSS form	Php 80.00	20 minutes  30 minutes  2 minutes	(OMPH – Cashiering Section)
4. Return to Health Information Management Office (based on the indicated scheduled) and present the Official Receipt/MSS Note/MSS Form  4.1 Sign the releasing logbook	4. Receive and check Official Receipts MSS Note/MSS Form  4.1 Instruct client to sign the logbook	None	3 minutes  2 minutes	Administrative Aide III Records Officer I Administrative Aide III (OMPH – Records Section)



4.2Receive the Medical/ Confinement Certificate	4.2Release the Medical/Confi nement Certificate		2 minutes	
	<b>TOTAL</b>	<b>P 80.00</b>	<b>For Non Indigent: 2 Hours 45 minutes</b>	<b>For Indigent: 2 hours 55 minutes</b>

## LABORATORY SERVICES

### AVAILMENT OF LABORATORY SERVICES IN-PATIENT AND OUT-PATIENT

#### SERVICES OFFERED:

EXAMINATION
<b>HEMATOLOGY</b>
• COMPLETE BLOOD COUNT, PLATELET COUNT (CBC, PC)
• HGB/HCT
• BLOOD TYPING (ABO, RH TYPING)
• BLEEDING TIME (BT) / CLOTTING TIME (CT)
• PROTINE
• APTT
• ERYTHROCYTE SEDIMENTATION RATE (ESR)
• PERIPHERAL BLOOD SMEAR (PBS)
• RETICULOCYTE COUNT
• MALARIAL SMEAR
• FILARIAL SMEAR
<b>CLINICAL MICROSCOPY</b>
• URINALYSIS (UA)
• PREGNANCY TEST
• KOH
• FECALYSIS (FA)
• FECAL OCCULT BLOOD TEST (FOBT)
• URINE KETONES



<ul style="list-style-type: none"><li>• CERVICOVAGINAL SMEAR</li></ul>
<b>CLINICAL CHEMISTRY</b>
<ul style="list-style-type: none"><li>• FBS</li></ul>
<ul style="list-style-type: none"><li>• BUN</li></ul>
<ul style="list-style-type: none"><li>• CREATININE</li></ul>
<ul style="list-style-type: none"><li>• BUA</li></ul>
<ul style="list-style-type: none"><li>• TOTAL CHOLESTEROL</li></ul>
<ul style="list-style-type: none"><li>• TRIGLYCERIDES</li></ul>
<ul style="list-style-type: none"><li>• ELECTROLYTES ( Na, Ca, K, Cl)</li></ul>
<ul style="list-style-type: none"><li>• SGOT</li></ul>
<ul style="list-style-type: none"><li>• SGPT</li></ul>
<ul style="list-style-type: none"><li>• LDL</li></ul>
<ul style="list-style-type: none"><li>• HDL</li></ul>
<ul style="list-style-type: none"><li>• BILIRUBIN</li></ul>
<ul style="list-style-type: none"><li>• ALBUMIN</li></ul>
<ul style="list-style-type: none"><li>• AMYLASE</li></ul>
<ul style="list-style-type: none"><li>• HBAIC</li></ul>
<ul style="list-style-type: none"><li>• PROCALTONIN</li></ul>
<ul style="list-style-type: none"><li>• D-DIMER</li></ul>
<ul style="list-style-type: none"><li>• PHOSPHORUS</li></ul>
<ul style="list-style-type: none"><li>• MAGNESIUM</li></ul>
<ul style="list-style-type: none"><li>• LDH</li></ul>
<ul style="list-style-type: none"><li>• ALKALINE PHOSPHATASE</li></ul>
<b>SEROLOGY</b>
<ul style="list-style-type: none"><li>• HBSAG</li></ul>
<ul style="list-style-type: none"><li>• DENGUE DUO (NS1 AG, IgM, IgG)</li></ul>
<ul style="list-style-type: none"><li>• TYPHI DOT (IgM, IgG)</li></ul>
<ul style="list-style-type: none"><li>• ANTI-HCV [RAPID TEST]</li></ul>
<ul style="list-style-type: none"><li>• HIV [RAPID TEST]</li></ul>
<ul style="list-style-type: none"><li>• SYPHILIS [RAPID TEST]</li></ul>
<ul style="list-style-type: none"><li>• FT3</li></ul>
<ul style="list-style-type: none"><li>• FT4</li></ul>
<ul style="list-style-type: none"><li>• TSH</li></ul>
<ul style="list-style-type: none"><li>• FT3,FT4,TSH</li></ul>
<ul style="list-style-type: none"><li>• PSA</li></ul>
<ul style="list-style-type: none"><li>• CEA</li></ul>
<ul style="list-style-type: none"><li>• CA 125</li></ul>
<ul style="list-style-type: none"><li>• CA 19-9</li></ul>
<ul style="list-style-type: none"><li>• CA 15-3</li></ul>
<ul style="list-style-type: none"><li>• FERRITIN</li></ul>



<ul style="list-style-type: none"><li>• AFP</li></ul>
<ul style="list-style-type: none"><li>• CRP</li></ul>
<ul style="list-style-type: none"><li>• TROPONIN I</li></ul>
<ul style="list-style-type: none"><li>• CK-MB</li></ul>
<ul style="list-style-type: none"><li>• NT-PROBNP</li></ul>
<ul style="list-style-type: none"><li>• TPAG</li></ul>
<b>MICROBIOLOGY</b>
<ul style="list-style-type: none"><li>• BLOOD CS</li></ul>
<ul style="list-style-type: none"><li>• URINE CS</li></ul>
<ul style="list-style-type: none"><li>• GRAM STAIN</li></ul>
<b>HISTOPATHOLOGY</b>
<ul style="list-style-type: none"><li>• FLUID CYTOLOGY</li></ul>
<ul style="list-style-type: none"><li>• HISTOPATH</li></ul>
<ul style="list-style-type: none"><li>• FNAB</li></ul>
<ul style="list-style-type: none"><li>• PAP's SMEAR</li></ul>



## OUT PATIENT

<b>Office or Division:</b>	Department of Pathology			
<b>Classification:</b>	Simple for majority of laboratory tests except for Microbiology, Hispathology and for special tests sent out to Manila which are classified as Complex			
<b>Type of Transaction:</b>	Government-to-Citizens (G2C) and Government-to-Government (G2G)			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Official Laboratory Request From Medical Doctor (original) 2. Charge Slip (original) 3. Proof of Payment (OR) (original) 4. Classification from Hospital Social Welfare (MALASAKIT, KONSULTA, and any other assistance.) (original)			-Requesting Physician  -Department of Pathology -Cashier -Hospital Social Welfare	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Patient presents laboratory request.	1. Received and check the request form	None	5 minutes	Registered Medical Technologist III Registered Medical Technologist I
2. Patient received charge slip	2. Issue charge slip	None	10 minutes	Registered Medical Technologist III Registered Medical Technologist I
3. Patient pays laboratory fee/ submits to HSW interview	3. Receive payment or Classification report from HSW (OMPH)	As charged (Please see fee schedule)	30 minutes	Cashier/Hospital Social Welfare (OMPH)
4. Patient presents OR/HSW classification	4. Receive and validate OR/HSW classification	None	5 minutes	Registered Medical Technologist III Registered Medical Technologist I
5. Patient submits for specimen collection	5. Collect sample	None	30 minutes	Registered Medical Technologist III Registered Medical Technologist I



6. Patient wait for results	6. Performs laboratory procedure	None	As scheduled (Please see turn around time; starts from presentation of OR/HSW classification)	Registered Medical Technologist III Registered Medical Technologist I
7. Patient gets result	7. Issue results	None	2 Days (Simple) 7 Days (Complex) 30 Days (Histopath)	Registered Medical Technologist III Registered Medical Technologist I
	<b>TOTAL</b>		<b>40 Days, 1 hour and 20 minutes</b>	

## IN-PATIENT

CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Laboratory Results	1.1 Receive and check the request	None	5 minutes	Registered Medical Technologist III Registered Medical Technologist I
	1.2 Collect sample	None	30 minutes	
	1.3 Bill the patient	As charged (Please see fee schedule)	5 minutes	
	1.4 Perform laboratory procedure	None	As scheduled (Please see turn-around time; starts from presentation of OR/HSW classification)	
2. Get Lab Result	Issue results	None	3 Days (Simple)	Registered Medical Technologist III





			7 Days (Complex) 30 Days (Histopath)	Registered Medical Technologist I
	<b>TOTAL</b>		<b>40 Days and 40 minutes</b>	

**LABORATORY FEES TO BE PAID AND PROCESSING TIME:**

<b>EXAMINATION</b>	<b>PRICE</b>	<b>PROCESSING TIME (TURN AROUND TIME)</b>
<b>HEMATOLOGY</b>		
• COMPLETE BLOOD COUNT, PLATELET COUNT (CBC, PC)	180	4 HOURS
• HGB/HCT	180	4 HOURS
• BLOOD TYPING (ABO, RH TYPING)	200	4 HOURS
• BLEEDING TIME (BT) / CLOTTING TIME (CT)	60	4 HOURS
• PROTINE	750	4 HOURS
• APTT	750	4 HOURS
• ERYTHROCYTE SEDIMENTATION RATE (ESR)	200	4 HOURS
• PERIPHERAL BLOOD SMEAR (PBS)	170	6 HOURS
• RETICULOCYTE COUNT	170	4 HOURS
• MALARIAL SMEAR	150	8 HOURS
• FILARIAL SMEAR	150	8 HOURS
<b>CLINICAL MICROSCOPY</b>		
• URINALYSIS (UA)	50	4 HOURS
• PREGNANCY TEST	150	4 HOURS
• KOH	100	4 HOURS
• FECALYSIS (FA)	50	4 HOURS



• FECAL OCCULT BLOOD TEST (FOBT)	150	4 HOURS
• URINE KETONES	100	4 HOURS
• CERVICO VAGINAL SMEAR	50	6 HOURS
<b>CLINICAL CHEMISTRY</b>		
• FBS	100	5 HOURS
• BUN	100	5 HOURS
• CREATININE	100	5 HOURS
• BUA	500	5 HOURS
• TOTAL CHOLESTEROL	100	5 HOURS
• TRIGLYCERIDES	120	5 HOURS
• ELECTROLYTES ( Na, Ca, K, Cl)	500	2 HOURS
• SGOT	120	5 HOURS
• SGPT	120	5 HOURS
• LDL	150	5 HOURS
• HDL	150	5 HOURS
• BILIRUBIN	600	5 HOURS
• ALBUMIN	150	5 HOURS
• AMYLASE	190	5 HOURS
• HBAIC	650	2 HOURS
• PROCALTONIN	1,400	2 HOURS
• D-DIMER	1,500	2 HOURS
• PHOSPHORUS	300	5 HOURS
• MAGNESIUM	395	5 HOURS
• LDH	300	5 HOURS
• ALKALINE PHOSPHATASE	200	5 HOURS
• OGTT	600	5 HOURS
• TPAG	600	5 HOURS



<b>SEROLOGY</b>		
• HBSAG	150	4 HOURS
• DENGUE DUO (NS1 AG, IgM, IgG)	1200	4 HOURS
• TYPHI DOT (IgM, IgG)	900	4 HOURS
• ANTI-HCV [RAPID TEST]	450	4 HOURS
• HIV [RAPID TEST]	250	4 HOURS
• SYPHILIS [RAPID TEST]	250	4 HOURS
• FT3	800	7 DAYS
• FT4	800	7 DAYS
• TSH	800	7 DAYS
• FT3,FT4,TSH	2,200	7 DAYS
• PSA	1,500	7 DAYS
• CEA	2,500	7 DAYS
• CA 125	2,500	7 DAYS
• CA 19-9	2,500	7 DAYS
• CA 15-3	2,500	7 DAYS
• FERRITIN	2,500	7 DAYS
• AFP	2,500	7 DAYS
• CRP	800	7 DAYS
• TROPONIN I	1,200	3 HOURS
• CK-MB	900	3 HOURS
• NT-PROBNP	1,800	3 HOURS
<b>MICROBIOLOGY</b>		
• BLOOD CS	1,300	7 DAYS
• URINE CS	900	7 DAYS
• GRAM STAIN	150	7 DAYS
<b>HISTOPATHOLOGY</b>		



<ul style="list-style-type: none"> <li>FLUID CYTOLOGY</li> </ul>	3,000	14 DAYS
<ul style="list-style-type: none"> <li>HISTOPATH LEVELS (L) DEPEND ON SIZE OF SPECIMEN</li> </ul>	L1- 1,000 L2- 2,500 L3- 3,500 L4- 4,500 L5- 6,000 L6- 8,000	30 DAYS
<ul style="list-style-type: none"> <li>FNAB</li> </ul>	2,800	30 DAYS
<ul style="list-style-type: none"> <li>PAP's SMEAR</li> </ul>	500	30 DAYS

## MEDICAL SOCIAL SERVICES

### CLASSIFICATION OF PATIENTS

An interview conducted by a Registered Social Worker, which determine the eligibility of the patients in availing medical social services based on Administrative Order 51-A s. 2001 in government hospitals.

<b>Office or Division:</b>	Medical Division-Medical Social Services (OMPH)	
<b>Classification:</b>	Simple	
<b>Type of Transaction:</b>	G2C-Government to Citizen	
<b>Who may avail:</b>	All patient	
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
	Any of the following document of the patient: 1. Identification Card <ul style="list-style-type: none"> <li>Senior Citizen</li> <li>Person's with Disability (PWD)</li> <li>4P's ID</li> <li>Government ID (Postal, Voter's, etc.)</li> </ul>	Office of the Senior Citizen DSWD Barangay Office  Philippine Post Office, COMELEC
	2. Certification <ul style="list-style-type: none"> <li>Certificate of Indigency</li> <li>Certificate of Indigenous People</li> <li>Certificate of Detention</li> </ul>	Barangay Office NCIP BJMP DSWD



<ul style="list-style-type: none"> <li>Certificate of Active 4P's membership</li> </ul>				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Sanitize and get queuing number from MSWD receptionist and wait to be called.	1.Provide the alcohol and issue queuing number	None	5 minutes	Social Welfare Officer I
1.1Present the documents (Valid IDs/Certification) to social worker on duty at MSW window 1 and submits to interview.	1.1Receive the documents and interview client using MSWD assessment tool.	None	15 minutes	Social Welfare Officer I
2.Listen to Medical Social Worker's explanation	2.1Classify patients based on AO 51-A s. 2001 and explain the patients classification.	None	15 minutes	Social Welfare Officer I
	2.2Indicate the classification in the patients MSWD assessment tool and per capita income.	None	5 minutes	Social Welfare Officer I
<b>TOTAL</b>			<b>40 minutes</b>	



## AVAILMENT OF MALASAKIT CENTER- MEDICAL ASSISTANCE TO INDIGENT PATIENT (MC-MAIP) PROGRAM

Provision of medical assistance such as drugs and medicines, laboratory, imaging and other diagnostic procedure, medical supplies to indigent patients in government hospitals based.

<b>Office or Division:</b>	Ancillary Division-Medical Social Service (OMPH)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government- to- Citizen			
<b>Who may avail:</b>	All Patient			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Any of the following document of the patient: 3. Identification Card (original) <ul style="list-style-type: none"> <li>• Senior Citizen</li> <li>• Person's with Disability (PWD)</li> <li>• 4P's ID</li> <li>• Government ID (Postal, Voter's, etc.)</li> </ul>			Office of the Senior Citizen DSWD/MSWD/CSWD  Philippine Post Office, COMELEC	
4. Certification (original) <ul style="list-style-type: none"> <li>• Certificate of Indigency</li> <li>• Certificate of Detention</li> <li>• Certificate of no Valid ID</li> </ul>			MALASAKIT CENTER BJMP Barangay Office	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sanitize and get queuing from MSWD receptionist and wait to be called.	1. Provide alcohol and issue queuing number.	None	5 minutes	Social Welfare Officer I
1.1 Present the documents (ID, Prescription, Laboratory and other diagnostic, imaging Requests and additional request if there is, Hospital Statement of Account) to Social Worker on duty at Malasakit window 1 and 2 submits to interview	1.1 Receive the documents and interview client using MSS Intake Sheet, Unified Intake Sheet and conduct socio-economic evaluation. If found eligible, fill out social work	None	30 minutes	



	<p>assessment column for MC-MAIP assistance</p> <p>1.2 Review the completeness of documents</p>			
<p>2. Sign the MSWD Assessment toll and Unified Intake Sheet.</p>	<p>2.2 Register patient's name in the logbook for control</p> <p>number, and stamp the Laboratory and other diagnostic &amp; imaging Requests and Hospital Statement of Account indicating charges has been charge to MC-MAIP fund.</p>	None	10 minutes	Social Welfare Officer I
<p>3. Fill out the logbook for patient with Non-PhilHealth, Student, Individual applying for a job and patient with no Valid ID.</p> <p>3.1 Fill out the daily log book</p>	<p>3. Provide logbook to the patient/watcher for signing.</p> <p>3.1 Register patient's information in the daily</p>	None	10 minutes	Social Welfare Officer I



	logbook for auditing.			
4. Sign and receive the acknowledgement receipt	4. Issue acknowledgement receipt for liquidation report.	None	5 minutes	Social Welfare Officer I
4.1 Receive the stamped requests (Laboratory and other diagnostic & imaging Requests and Hospital Statement of Account) and proceed to laboratory/ X-ray/ Pharmacy/ Billing.	4.1 Give the stamped requests to the client and instruct them to proceed to laboratory/ X-ray/ Pharmacy to avail the services needed charge to MC-MAIP.	None	5 minutes	Social Welfare Officer I
<b>TOTAL</b>			<b>1 hour and 5 minutes</b>	

## PHILHEALTH POINT OF SERVICE ENROLLMENT (POS)

Point of Service (POS Program) is the program provided by the GAA for the current year to register Non-PhilHealth members into the National Health Insurance Program especially those financially incapable to pay their PhilHealth membership.

<b>Office or Division:</b>	Ancillary Division-Medical Social Service			
<b>Classification:</b>	Simple			
<b>Type Of Transaction:</b>	Government-to-Citizen			
<b>Who may avail:</b>	All Patient			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Any of the following document of the patient: 1. Birth Certificate of Patient 2. Birth certificate of Parent's (if patient is minor)			Philippine Statistics Authority Philippine Statistics Authority	
Valid Identification Card: <ul style="list-style-type: none"> <li>Government issued ID (Postal, Voter's, Driver's License and other IDs which indicate birth date and signature)</li> <li>Certificate of Residency</li> </ul>			Philippine Post Office/COMELEC  Barangay Office	
-Baptismal Certificate in Lieu of Birth Certificate			Church	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>





1.Sanitize and present the documents (Valid IDs/Certification) to social worker on duty at MSW window 1 and submits to interview	1.Provide alcohol and receive the documents and interview client using MSWD assessment tool.	None	10 minutes	Social Welfare Officer I
	1.1Identify the patient's PhilHealth resources.	None	30 minutes	
	1.2Advice the patient to the PCARES for checking their PhilHealth status.	None	20 minutes	
2.Submit the MSWD stub and supporting documents and wait for a review	2.Receive MSWD stub and check the status. If found qualified for POS enrolment, get the watcher/patient sign the POS agreement stub	None	20 minutes	Social Welfare Officer I
	2.1Receive the supporting documents (Birth certificate, Valid IDs and Marriage Contract)	None	10 minutes	
3.Get PMRF and fill out the form correctly	3.Provide PMRF and	None	10 minutes	Social Welfare Officer I



	instruct client/watcher to fill out the form correctly to avoid discrepancy.			
3.1 Submit filled-out PMRF and required documents	3.1 Receive and review PMRF and attached documents.	None		
3.2 Wait to be enrolled to Point of Service	3.2 For Point of Service Financially Incapable. Enrol patient to PhilHealth POS.	None	72 hours	
3.3 Wait the approved Point of Service from Batangas Regional PhilHealth Office	3.3 Check the approved Point of Service.	None		
4. Pay at the PhilHealth Office for PhilHealth Membership	4. For Point of Service Financially Capable: Instruct the client to pay Php 5400.00 or the required month/s of contributions at PhilHealth Office for PhilHealth membership.	None	1 hour	Social Welfare Officer I



5.Receive POS FI certification for immediate update of PhilHealth Membership	5.Provision of POS FI Certification signed by a Registered Social Worker for immediate update of  PhilHealth Membership status during the following reasons:  a.When there will be a holiday.  b.If patient does not comply with the requirements. Within 72 hours of admission	None	10 minutes	Social Welfare Officer I
<b>TOTAL</b>			<b>3 Days, 2 hours and 50 minutes</b>	

## OUTPATIENT SERVICES

### OUTPATIENT SERVICES CONSULATION

The Oriental Mindoro Provincial Hospital is established to provide outpatient consultation and give quality care and treatment to all client's sick or well regardless of their race, creed, color, gender social status and political belief.

<b>Office or Division:</b>	Out Patient Services Department (OMPH)
<b>Classification:</b>	Simple



<b>Type of Transaction:</b>		G2C-Government to Citizen		
<b>Who may avail:</b>		All		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Hospital Number			New Patient-Medical Record Section Old Patient-Patient itself	
2.Hospital Record			Medical Record Section	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Get the number from the security guard.	1.1Issue number to patient	None	1 minute	Security Guard on Duty
2.Place the number together with his/her hospital number and put box provided in front of Consultation Room.	2.1Get the patient assigned number together with his/her hospital number	None	1 minute	Registration Clerk (Medical Records Section)
	2.2Secure patients record at the Medical Records Section	None	5 minutes	Registration Clerk (Medical Records Section)
3.Proceed to waiting area and wait to be called. Give full details of present illness.	3.Call patient by his/her name and record the present history of illness or chief complaint	None	1 minute	OPD Nurse/Nursing Attendant
	3.1Take initial vital signs and write on patients record	None	3 minutes	
4.Proceed to OPD Room for consultation	4.Call out name of patient, examine,	None	5 minutes	Physician on Duty



	explain the illness and give treatment			
5.If the Doctor have a request for laboratory test proceed to Laboratory and X-ray Department located at Building 2.	5.Receives Request	None	1 minute	Laboratory Aide/Med. Tech or Rad. Tech on Duty
	5.1Issue charge slip to the patient		2 minutes	
	5.2Performs laboratory test to the patient		1 minute	
<b>TOTAL</b>			<b>20 minutes</b>	

## ANIMAL BITE TREATMENT CENTER

Animal Bite Clinic is open Monday to Friday from 8:00 am to 5:00 pm. It caters all patients by any kind of rabid animals.

<b>Office or Division:</b>	Animal Bite Treatment Center			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C-Government to Citizen			
<b>Who may Avail:</b>	All patient bitten by rabid animals			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Hospital Number (1 original)			New Patient-Medical Record Section Old Patient-Patient itself	
Hospital Record (1 original)			Medical Record Section	
Informed Consent (1 original)			Animal Bite Treatment Center	
Animal Bite Assessment Tool (1 original)			Animal Bite Treatment Center	
Animal Bite Vaccine Card (1 original)			Animal Bite Treatment Center	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Get the number from the Security Guard	1.Issue number to patient	None	1 minute	Security Guard on Duty
2.Proceed to Window 2 for Registration	2.Get the patient assigned number together with his/her registration form	None	1 minute	Registration Clerk (Medical Section Records)



	2.1 Secure patients record at the Medical Records Section	None	5 minutes	
3. Proceeds to waiting area and wait to be called. Give full details of present illness.	3. Call patient by his/her name and record the present history of animal bite.	None	1 minute	OPD Nurse/Nursing Attendant on Duty
	3.1 Take initial vital signs and write on patients record	None	3 minutes	OPD Nurse/Nursing Attendant on Duty
4. Proceeds to OPD Room for consultation	4. Call out the name of patient, examine, explain the illness and give treatment	None	5 minutes	Physician on Duty
5. Proceed to Animal Bite Treatment Center	5. Register and assess animal bite	None	1 minute	ABTC Nurse on Duty
6. Receives treatment and vaccination	6. Provides treatment/ vaccine according to category of animal bite	None	30 minutes	ABTC Nurse
	6.1 Explain instruction regarding the schedule of immunization and follow up schedule	None	1 minute	ABTC Nurse
		None	1 minute	



	6.2 Encode data to National Rabies Information System			Data Encoder/ABTC Nurse
<b>TOTAL</b>			<b>49 minutes</b>	

## PHARMACY

### DISPENSING OF DRUGS AND MEDICINES (CASH)

This process covers dispensing of medicine and, medical supplies to all patient. The Pharmacy is open Monday – Sunday.

<b>Office or Division:</b>		Pharmacy Services		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen (G2C)		
<b>Who may avail:</b>		Out-Patients		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Prescription (completely filled)			Prescribing doctor	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the prescription/s to the Pharmacist	1. Review the prescription  1.1 Put the total amount of the medicines in the prescription.		2 minutes	Pharmacist III (OMPH – Pharmacy Division)
2. Pay at the Cashier and get the official receipt	2. Prepare the corresponding Official Receipt	Cost of medicine (see price list)	3 minutes	Pharmacist III (OMPH – Pharmacy Division)
3. Return to the Pharmacy. Present the OR and get the drugs/medicine/s.	3. Dispense the medicines  3.1 Counsel the proper use of the medicine/s	None	5 minutes	Pharmacist III (OMPH – Pharmacy Division)
<b>TOTAL</b>		Cost of medicine (see price list)	<b>10 minutes</b>	



## DISPENSING OF DRUGS AND MEDICINES (Medical Assistance)

<b>Office or Division:</b>		Pharmacy Services (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen (G2C)		
<b>Who may avail:</b>		In and Out-Patients		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Prescription (completely filled) (1 original)		Prescribing doctor		
VALID ID CERTIFICATE OF INDIGENCY (from Social Service) Statement of Account (SOA)- (From Malasakit to OMPH) Unified Intake Sheet (from Social Service) (1 original)		SOCIAL SERVICE ACCOUNTING		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Present the prescription/s	1.1Verify the authenticity of the prescription/s  1.2Instruct the client to go to the Social Service	None	2 minutes	Pharmacist III
2.Go back to the Pharmacy and presents the prescription/s	2.1Check the prescription if it is already charged in the medical assistance thru their valid stamp mark  2.2Prepape the medicine/s	None	3 minutes	Pharmacist III
3.Get the drugs/medicines and listen to the dispensing and counselling information	3.1Dispense the medicines  3.2Counsel the client for the proper use of medicine/s	None	5 minutes	Pharmacist III
	<b>TOTAL</b>		<b>10 minutes</b>	





## DISPENSING OF DRUGS AND MEDICINES (Inpatients)

This process covers dispensing of medicine and supplies to all in patients under pay accommodation.

<b>Office or Division:</b>		Pharmacy Services		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen (G2C)		
<b>Who may avail:</b>		In-Patients		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Prescription (completely filled)			Prescribing Doctor	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Request the Drugs and Medicines thru the systems.	1.1 Received the prescription  1.2 Check the availability of the prescribed drugs.  1.3 Encode the quantity of the available drugs to IHOMIS for charging.	None	5 minutes	Pharmacist III
2. Get the medicines  2. If available  2.1 If not available	2. Dispense the medicines indicated in the prescription  2.1 Inform the patient/ patient's relative to buy the unavailable drugs to other pharmacy	None	5 minutes	Pharmacist III



	<b>TOTAL</b>		<b>10 minutes</b>	
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## CENTRAL SUPPLY ROOM

### DISPENSING OF MEDICAL SUPPLIES FOR ADMITTED PATIENTS

The process covers issuance of medical supplies available is conformity with Requisition and Issue Slip (RIS) forwarded by the requesting clinical areas.

Availability of Service: Monday to Sunday (24 hours)

<b>Office or Division:</b>		Nursing Department-Central Supply Room (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government-to-Client		
<b>Who may avail:</b>		Admitted patients		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Prescription-1 original copy			Prescribing Doctor or Nurse	
2.PhilHealth stub-1 original copy			Admitting 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 prescription and present PhilHealth stub	1.Receive and check the availability of supplies  1.1If supplies are available, encode charges to patient's hospital bill thru IHOMIS.	None	5 minutes	Nurse I
2.Wait for the supply	2.Prepare the requested supply  *unavailable items will be written in	None	5 minutes	Nurse I



	separate prescription and will be used to purchase item to other pharmacy			
3.Receive the medical supply	3.Dispense the medical supply.  *If there is unavailable items, the watcher will be advise to purchase the items from other pharmacy.	None	5 minutes	Nurse I
<b>TOTAL</b>			<b>15 minutes</b>	

## DISPENSING OF MEDICAL SUPPLIES FOR OUT-PATIENTS

The process covers issuance of medical supplies available is conformity with Requisition and Issue Slip (RIS) forwarded by the requesting clinical areas.

Availability of Service: Monday to Sunday (24 hours)

<b>Office or Division:</b>		Nursing Department-Central Supply Room(OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government-to-Citizen		
<b>Who may avail:</b>		Out patients		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Prescription-1 original copy			Prescribing Doctor or Nurse	
2.Official Receipt-1 original copy			Cashier Section	
3.Guarantee Letter (if applicable)-1 original copy			Local Chief Executives/PCSO/Malasakit Center/DOH/DSWD	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Submit prescription	1. Receive and check the availability of supplies.	None	5 minutes	Nurse I



	<p>1.1If supplies are available, prepare and issue charge slip.</p> <p>*if supplies are not available, advise for other available alternative. If not advise to buy outside.</p>			
2.Receive charge slip and proceed to cashier for payment or go to Social Service Office for availment of medical assistance	<p>2.Instruct client to pay at the cashier/ Social Service Office.</p> <p>2.1Issues official receipt/medical assistance slip.</p>	<p>None</p> <p>List of fees (see table below)</p>	<p>2 minutes</p> <p>10 minutes</p>	<p>Nurse I</p> <p>Cashier/Social Service Worker</p>
3.Return to Central Supply Room and present official receipt/medical assistance slip.	3.Receive official receipt/medical assistance slip.	None	1 minute	Nurse I
4.Receive the medical supplies	4.Dispense the requested medical supplies	None	5 minutes	Nurse I
<b>TOTAL</b>			<b>23 minutes</b>	

## CENTRAL SUPPLY ROOM PRICE LIST

NAME OF MEDICAL SUPPLY	UNIT	UNIT PRICE
AMBU MINI PERFIT ACE COLLAR GCI	pc	₱ 1,444.00
AMBU PERFIT CERVICAL COLLAR ADULT	pc	₱ 1,313.00
ARMSLING LARGE	pc	₱ 128.00
ARMSLING MEDIUM	pc	₱ 128.00
ARMSLING SMALL	pc	₱ 125.00
ASEPTO SYRINGE	pc	₱ 83.00
BIPAP MASK	pc	₱10,125.00
BONEWAX	pc	₱ 274.00
BUTTERFLY G.23	pc	₱ 28.00



BUTTERFLY G.25	pc	₱ 28.00
BLOOD TRANSFUSSION SET	pc	₱ 117.00
CAUTERY PAD	pc	₱ 625.00
CAUTERY PENCIL	pc	₱ 1,050.00
CHEST DRAINAGE BOTTLE 1200 ML	pc	₱ 1,657.00
CHROMIC 0 round	pc	₱ 375.00
CHROMIC 1 round	pc	₱ 375.00
CHROMIC 2 -0 round	pc	₱ 375.00
CHROMIC 3-0 round	pc	₱ 375.00
CHROMIC 4-0 round	pc	₱ 375.00
CLEAN GLOVES SMALL	pair	₱ 10.00
CLEAN GLOVES MEDIUM	pair	₱ 10.00
CLEAN GLOVES LARGE	pair	₱ 10.00
COTTON STRANDS SS	pc	₱ 110.00
COTTON APPLICATOR	pc	₱ 5.00
DIAPER LARGE	pc	₱ 25.00
DISP.GLOVES 6.5 ANSELL	pair	₱ 91.00
DISP.GLOVES 7.0 ANSELL	pair	₱ 91.00
DISP.GLOVES 7.5 ANSELL	pair	₱ 91.00
DISP.GLOVES 8.0 ANSELL	pair	₱ 91.00
DISP.GLOVES 6.5 LATEX	pair	₱ 40.00
DISP.GLOVES 7.0 LATEX	pair	₱ 40.00
DISP.GLOVES 7.5 LATEX	pair	₱ 40.00
DISP.GLOVES 8.0 LATEX	pair	₱ 40.00
DISP. NEEDLE 18	pc	₱ 6.00
DISP. NEEDLE 19	pc	₱ 6.00
DISP. NEEDLE 20	pc	₱ 6.00
DISP. NEEDLE 21	pc	₱ 6.00
DISP. NEEDLE 22	pc	₱ 6.00
DISP. NEEDLE 23	pc	₱ 6.00
DISP. NEEDLE 24	pc	₱ 6.00
DISP. NEEDLE 25	pc	₱ 6.00
DISP. NEEDLE 26	pc	₱ 6.00
DISP. NEEDLE 27	pc	₱ 6.00
DISP.HEAD COVER	pc	₱ 7.00
DISP. RESUSCITATOR BAG ADULT	pc	₱ 2,035.00
DISP. RESUSCITATOR BAG PEDIA	pc	₱ 2,573.00
DISP. RESUSCITATOR BAG NEONATE	pc	₱ 2,571.00
DISP. SYRINGE 20ml	pc	₱ 23.00
DISP. SYRINGE 30ml	pc	₱ 53.00
DISP. SYRINGE 50ml	pc	₱ 53.00
DISP. SYRINGE 1ml	pc	₱ 13.00



DISP. SYRINGE 3ml	pc	₱ 13.00
DISP. SYRINGE 5ml	pc	₱ 13.00
DISP. SYRINGE 10ml	pc	₱ 16.00
DISTILLED WATER 50ml	pc	₱ 71.00
ELECTRODES BLUE SENSOR ADULT GCI	pc	₱ 33.00
ELECTRODES BLUE SENSOR PEDIA GCI	pc	₱ 66.00
EXTENSION SET	pc	₱ 40.00
ELASTIC BANDAGE 3x5	pc	₱ 45.00
ELASTIC BANDAGE 4x5	pc	₱ 61.00
ELASTIC BANDAGE 6x5	pc	₱ 82.00
ENDOTRACHEAL TUBE 2.0 UNCUFFED	pc	₱ 257.00
ENDOTRACHEAL TUBE 2.5 UNCUFFED	pc	₱ 257.00
ENDOTRACHEAL TUBE 3.0 UNCUFFED	pc	₱ 257.00
ENDOTRACHEAL TUBE 3.5 UNCUFFED	pc	₱ 257.00
ENDOTRACHEAL TUBE 4.0 UNCUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 4.0 CUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 4.5 UNCUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 5.0 CUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 5.5 CUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 6.0 CUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 6.5 CUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 7.0 CUFFED	pc	₱ 256.00
ENDOTRACHEAL TUBE 7.5 CUFFED	pc	₱ 257.00
ENDOTRACHEAL TUBE 8.0 CUFFED	pc	₱ 257.00
ENDOTRACHEAL TUBE 8.5 CUFFED	pc	₱ 257.00
EPIDURAL SET G.16	pc	₱ 1,520.00
EPIDURAL SET G.18	pc	₱ 1,529.00
EYE GOGGLES	pc	₱ 92.00
FACE MASK N95	pc	₱ 238.00
FACE MASK EAR LOOP	pc	₱ 5.00
FACESHIELD	pc	₱ 19.00
FLEET ENEMA	pc	₱ 656.00
FOLEY CATH. FR. 8	pc	₱ 62.00
FOLEY CATH. FR. 10	pc	₱ 62.00
FOLEY CATH. FR. 12	pc	₱ 62.00
FOLEY CATH. FR. 14	pc	₱ 70.00
FOLEY CATH. FR. 16	pc	₱ 66.00
FOLEY CATH. FR. 18	pc	₱ 63.00
GAUZE 4 X 8 PACK OF 10	pack	₱ 94.00
GELFOAM SPONGESTAN	pc	₱ 722.00
GLASS SLIDES	pc	₱ 3.00
GUEDEL AIRWAY GREEN	pc	₱ 107.00
GUEDEL AIRWAY ORANGE	pc	₱ 107.00



GUEDEL AIRWAY WHITE	pc	₱ 106.00
GUEDEL AIRWAY YELLOW	pc	₱ 129.00
GUEDEL AIRWAY BLACK	pc	₱ 111.00
HEPLOCK	pc	₱ 43.00
HERNIA KIT PC	pc	₱ 3,544.00
HYDROGEN PEROXIDE 60 ml	pc	₱ 47.00
HYDROGEN PEROXIDE 120 ml	pc	₱ 60.00
HYDROGEN PEROXIDE 500 ml	pc	₱ 114.00
INSULIN SYRINGE	pc	₱ 15.00
IV CATH G.16	pc	₱ 50.00
IV CATH G.18	pc	₱ 50.00
IV CATH G.20	pc	₱ 50.00
IV CATH G.22	pc	₱ 50.00
IV CATH G.24	pc	₱ 50.00
IV CATH G.26	pc	₱ 50.00
ID BRACELET PEDIA	pc	₱ 7.00
ID BRACELET ADULT	pc	₱ 7.00
JACKSON PRATT DRAIN	pc	₱ 2,232.00
JACKSON REES PEDIA	pc	₱ 5,935.00
LAP SPONGE ABDOMINAL PACK 12X12	pc	₱ 119.00
LANCET	pc	₱ 7.00
LEUKOPLAST 2.5 CMX 5M	pc	₱ 388.00
LONGBONE FIBERGLASS CAST	pc	₱ 718.00
LUBRICATING JELLY TUBE	pc	₱ 283.00
LUBRICATING JELLY SACHET	pc	₱ 18.00
MALE URINAL	pc	₱ 52.00
MACROSET REGULAR	pc	₱ 80.00
MICROSET REGULAR	pc	₱ 49.00
MACROSET NEEDLELESS	pc	₱ 174.00
MEASURING CUP 210 ML	pc	₱ 92.00
MEDICINE CUP 30 ML	pc	₱ 2.00
MERSILK 0 ROUND PC	pc	₱ 245.00
MERSILK 0 STRAND	pc	₱ 245.00
MERSILK 1 STRANDS	pc	₱ 242.00
MERSILK 2-0 ROUND	pc	₱ 245.00
MERSILK 2-0 CUTTING	pc	₱ 245.00
MERSILK 2-0 STRAND	pc	₱ 245.00
MERSILK 3-0 ROUND	pc	₱ 245.00
MERSILK 3-0 CUTTING	pc	₱ 245.00
MERSILK 3-0 STRAND	pc	₱ 252.00
MERSILK 4-0 ROUND	pc	₱ 157.00
MERSILK 4-0 CUTTING	pc	₱ 157.00



METRICIDE	pc	₱ 2,568.00
MONOCRYL 4-0 CUTTING	pc	₱ 593.00
NEB KIT PEDIA W/MASK	pc	₱ 221.00
NEB KIT W/ MOUTHPIECE	pc	₱ 63.00
NEB KIT ADULT W/MASK	pc	₱ 95.00
NGT.FR.5	pc	₱ 30.00
NGT.FR.8	pc	₱ 30.00
NGT.FR.10	pc	₱ 48.00
NGT.FR.12	pc	₱ 30.00
NGT.FR.14	pc	₱ 30.00
NGT.FR.16	pc	₱ 34.00
NGT.FR.18	pc	₱ 30.00
NYLON 3-0 CUTTING	pc	₱ 219.00
NYLON 4-0 CUTTING	pc	₱ 258.00
OXYGEN CANNULA ADULT	pc	₱ 60.00
OXYGEN CANNULA PEDIA	pc	₱ 53.00
OXYGEN CANNULA NEONATE	pc	₱ 123.00
OXYGEN MASK ADULT	pc	₱ 138.00
OXYGEN MASK PEDIA	pc	₱ 119.00
PARATULLE	pc	₱ 63.00
PENROSE DRAIN ½	pc	₱ 154.00
PENROSE DRAIN ¼	pc	₱ 154.00
PLASTER 1" MICROPOR	pc	₱ 77.00
POVIDONE IODINE 10% 60ml	pc	₱ 63.00
POVIDONE IODINE 10% 120ml	pc	₱ 102.00
PROLENE 3-0 CUTTING	pc	₱ 495.00
PULSE OXIMAX SENSOR ADULT	pc	₱ 1,156.00
PULSE OXIMAX SENSOR PEDIA	pc	₱ 1,156.00
SHAVER	pc	₱ 24.00
SHOECOVER	pc	₱ 20.00
SKIN STAPLER	pc	₱ 854.00
SKIN STAPLE REMOVER SESE	pc	₱ 276.00
SPINAL NEEDLE G.23	pc	₱ 119.00
SPINAL NEEDLE G.25	pc	₱ 119.00
STRAIGHT THORACIC FR. 28	pc	₱ 630.00
STRAIGHT THORACIC FR. 32	pc	₱ 630.00
STRAIGHT THORACIC FR. 36	pc	₱ 630.00
SUCTION FR. 5	pc	₱ 14.00
SUCTION FR. 8	pc	₱ 15.00
SUCTION FR. 10	pc	₱ 23.00
SUCTION FR. 12	pc	₱ 12.00
SUCTION FR. 14	pc	₱ 11.00





SUCTION FR. 16	pc	₱ 12.00
SUCTION FR. 18	pc	₱ 23.00
SUCTION POOLE DRAIN	pc	₱ 491.00
SURGICAL BLADE # 10 FEATHER	pc	₱ 24.00
SURGICAL BLADE # 11 FEATHER	pc	₱ 24.00
SURGICAL BLADE # 12 FEATHER	pc	₱ 24.00
SURGICAL BLADE # 15 FEATHER	pc	₱ 30.00
SURGICAL BLADE # 20 FEATHER	pc	₱ 30.00
SURGICAL BLADE # 21 FEATHER	pc	₱ 30.00
SURGICAL BLADE # 22 FEATHER	pc	₱ 30.00
SURGICAL GAUZE (RG BOLT) 24 X 28	pc	₱ 1,182.00
SURGICAL SCRUB BRUSH W/CLOREX	pc	₱ 195.00
TEGADDERM 9cmx25cm PC	pc	₱ 286.00
TEGADDERM 9cmx15cm PC	pc	₱ 300.00
TEGADDERM 6cmx10cm PC	pc	₱ 75.00
THREE WAY STOPCOCK	pc	₱ 46.00
TONGUE DEPRESSOR STERILE	pc	₱ 3.00
TRACHEOSTOMY TUBE SHILEY FEN 6	pc	₱ 4,594.00
TRACHEOSTOMY TUBE SHILEY FEN 8	pc	₱ 4,594.00
T- TUBE (LATEX) FR. 16	pc	₱ 276.00
T- TUBE (LATEX) FR. 18	pc	₱ 276.00
T- TUBE (LATEX) FR. 14	pc	₱ 276.00
URINE BAG ADULT	pc	₱ 69.00
URINE BAG PEDIA (WEE BAG)	pc	₱ 7.00
UNDERPADS	pc	₱ 18.00
UMBILICAL CORD CLAMP	pc	₱ 7.00
VENTILATOR CIRCUIT PEDIA	pc	₱ 2,794.00
VICRYL 0 CT-1 PC	pc	₱ 457.00
VICRYL 1 CT-1 PC	pc	₱ 413.00
VICRYL 2-0 CT-1 PC	pc	₱ 457.00
VICRYL 2-0 SH PC	pc	₱ 285.00
VICRYL 3-0 CT -1 PC	pc	₱ 457.00
VICRYL 3-0 CUTTING PC	pc	₱ 457.00
VICRYL 3-0 SH PC	pc	₱ 285.00
VICRYL 4-0 CUTTING PC	pc	₱ 456.00
VICRYL 4-0 SH PC	pc	₱ 309.00
VOLUMETRIC/SOLUSET SET	pc	₱ 158.00
WADDING SHEET 4 X 5	pc	₱ 94.00
WADDING SHEET 6 X 5	pc	₱ 84.00



## RADIOLOGY SERVICES

### AVAILMENT OF DIAGNOSTIC SERVICES

Radiology and Diagnostic Unit provides procedures on schedules except in emergency cases which are provided any time necessary as per request by the physician. This service also provides routine diagnostic procedures for outpatient department patients.

Availability of service is 24 hours Monday to Sunday, NO HOLIDAYS.

<b>Office or Division:</b>		Radiologic & Imaging Sciences		
<b>Classification:</b>		Complex		
<b>Type of Transaction:</b>		G2C		
<b>Who may avail:</b>		All outpatients seeking OPD General X-ray		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Doctor's Request			Spellout	
2. Official Receipt for paid X-ray procedure or MSW referral slip			Cashier Medical Social Service	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Presents radiological and/or Sonographical request	1. Receive and verify requirements. Instruct patient to proceed to X-ray Room waiting area. If patient has no ability to pay, proceed to Social Service for assistance of routing slip. If the patient decides to pay for the needed procedures, proceed to Cashier, pay the amount and secure for the Official Receipt.	None	3 minutes	Radiologic Technologist II  Radiologic Technologist II



	The following are X-ray procedures and the corresponding amount for each:			
2. Undergo the X-ray procedure	2. Call patient name, prepare materials and instruct patient on what to do and conduct procedure.	None	5 minutes	Radiologic Technologist II
2.1 Listens to instructions on the release of results.	2.1 Instruct the patient when to get result and bring official receipt.	None	5 minutes	
	2.3 Examine images and provide initial/preliminary reading.	None	3 Days	
	2.4 Referral of preliminary reading and finalizing of result for releasing.			
3. Return to X-ray releasing counter, after 3 working days and present official receipt or MSW referral slip.	3. Receive and verify official receipt.	None	5 minutes	Radiologic Technologist II
3.1 Affix name and signature on the claim stub and proceed to be	3.1 Instruct patient/representative to affix name and	None	5 minutes	Radiologic Technologist II



designated waiting area.	signature on the logbook.			
3.2Receive official diagnostic report	3.2Print the official report and affix name and signature on the ancillary staff.	None	5 minutes	
	3.3Release the official diagnostic report.	None	5 minutes	
<b>TOTAL</b>			<b>3 Days and 33 minutes</b>	

## A. RADIOLOGY SERVICES OFFERED AND FEES

X-RAY	
EXAMINATION	PRICE
Skull AP/L	Php 400.00
Water's View/Towne's View	Php 200.00
Nasal Bone	Php 300.00
Mandible AP/L	Php 400.00
Mandible Series	Php 600.00
Cervical AP/L	Php 400.00
Chest PA	Php 200.00
Chest AP/L	Php 400.00
Chest AP/L (Pedia)	Php 300.00
L-Sacral Ap/L	Php 400.00
Pelvis	Php 200.00
Plain Abdomen	Php 200.00
Abdomen Upright/Supine	Php 400.00
Coccyx Ap/L	Php 200.00
Shoulder Joint	Php 200.00
Lateral Decubitus View	Php 200.00
Knee Ap/L	Php 300.00
Leg Ap/L	Php 300.00
Ankle Ap/L	Php 300.00
Foot Ap/L	Php 300.00
T-Cage	Php 200.00



Babygram	Php 200.00
T-lumbar Ap/L	Php 400.00
Hand Ap/L	Php 300.00
Hip Joint	Php 200.00
Femur Ap/L	Php 300.00
Arm Ap/L	Php 300.00
Elbow Ap/L	Php 300.00
Forearm Ap/L	Php 300.00
Wrist Ap/L	Php 300.00

<b>ULTRASOUND</b>	
<b>EXAMINATION</b>	<b>PRICE</b>
Whole Abdomen	Php 1000.00
Abdomino-Pelvic	Php 1000.00
Transvaginal/Transrectal	Php 900.00
Breast	Php 800.00
KUB-Prostate	Php 750.00
Upper and Lower Abdomen	Php 750.00
Thyroid/Neck	Php 750.00
Soft Tissue	Php 750.00
Hepatobiliary Tree	Php 650.00
KUB/Chest	Php 450.00
Scrotal w/Doppler	Php 900.00
Single Organ	Php 400.00
Biophysical Scoring (BPS)	Php 700.00
Pelvic	Php 500.00
Twin Pelvic UTZ	Php 800.00
Cranial	Php 600.00

<b>CT SCAN</b>	
<b>EXAMINATION</b>	<b>PRICE</b>
Cervical Plain	Php 4100.00
Cervical w/contrast	Php 5600.00
Chest Plain	Php 5600.00
Chest w/contrast	Php 7100.00
Cranial Plain	Php 4100.00
Cranial w/bone setting	Php 4200.00
Cranial w/ contrast	Php 5600.00
Extremities plain	Php 4100.00
Extremities w/contrast	Php 5600.00
Facial plain	Php 5600.00
Facial w/contrast	Php 7100.00
Lower Abdomen Plain	Php 6100.00



Lower Abdomen w/contrast	Php 7600.00
Lumbar plain	Php 7600.00
Lumbar w/contrast	Php 7100.00
Mandible Plain	Php 5600.00
Mandible w/contrast	Php 7100.00
Naso pharynx Plain	Php 5600.00
Naso pharynx w/contrast	Php 7200.00
Orbits plain	Php 4100.00
Orbits w/contrast	Php 7200.00
PNS plain	Php 5600.00
PNS w/contrast	Php 7100.00
Stonogram	Php 6000.00
Thoracic spine plain	Php 5600.00
Thoracic spine w/contrast	Php 7100.00
TMJ Plain	Php 5600.00
TMJ w/contrast	Php 7100.00
Upper abdomen Plain	Php 6100.00
Upper abdomen w/contrast	Php 7600.00
Whole abdomen Plain	Php 8600.00
Whole abdomen w/contrast	Php 10600.00
Urogram	Php 10600.00
Abdomen w/liver triphase	Php 10600.00

## SECURITY/FRONTLINE SERVICES

### CIVIL SECURITY SERVICES

The Security unit shall be adequately manned and armed to perform their duties respectively. They shall monitor and record traffic of patients, visitors, personnel and vehicles in the hospital. Controls the number of visitors for each patient and provides the visitor's pass allowing only 2 at a time for each patient.

<b>Office or Division</b>		Security/Frontline Services (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen		
<b>Who may avail:</b>		All watcher's patient and visitor seeking patient		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Parking Area 2.Cadaver Release Form 3.List of Patient 4.All Oxygen Incoming Full Tank's and Outgoing empty Tank's 5.Gate Pass			Entrance/Exit Gate on Duty Information Desk on Duty Guard on Duty in Wards Copy of Receipt in Voice Recorded in logbook All Duty Guard in Ward	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1.Arrival/Departure of vehicle entering at OMPH	1.Parking Area	None	1 minute	Guard on Duty
2.Patient were about	2.1.Assist of patient watcher's and visitors	None	3 minutes	Guard on Duty
	2.2Control the flow entering watcher's of the patient		15 minutes	Guard on Duty
3.Check and count the number of incoming tanks.	3.Receive the copy of duplicate invoice of deliveries.	None	1 hour	Guard on Duty
4.Incident Report	4.1Follow up investigation 4.2Making report	None	30 minutes	Team Leader
<b>TOTAL</b>			<b>1 hour and 49 minutes</b>	

## SPECIAL PROGRAMS

### DENTAL SERVICES

#### DENTAL CONSULTATION AND TREATMENT

Promotes oral health education, renders oral examinations of patients to assess their specific dental needs, performs preventive & curative treatment.

<b>Office or Division:</b>		Dental Services-OMPH		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C-Government to Citizen		
<b>Who may avail:</b>		All patients needing Dental Consultation & treatment procedures		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Patient's Information Sheet			Outpatient Section-Security Guard/Nurse on Duty	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Sanitize hands	1.Provide alcohol at the OPD door entrance	None	3 minutes	Guard on Duty



<p>2.Proceed to triage and accomplish the patient's information sheet. (Make sure to secure the priority number from the Nurse on duty)</p>	<p>2.Priority number will be issued by the Nurse on duty</p>	<p>None</p>	<p>3 minutes</p>	<p>Guard on Duty</p>
<p>3.Submit the accomplished patient's information sheet to Window 1</p>	<p>3.1 Encode all the information of the patients written in the accomplished information sheet in the iHOMIS system and wait until your number is called.</p> <p>3.2 When your number is called, the Nurse on duty will record the patients vital signs, chief complaint and endorse to the dentist for consultation</p>	<p>None</p>	<p>10 minutes</p>	<p>Records Section/OPD Nurse on duty</p>
<p>4.Proceed to the Dental Clinic for consultation/ treatment</p>	<p>4.1 Dental Aide will interview &amp; record it to the Individual Patient's treatment Record (IPTR) and let the patient sign the consent form</p>	<p>None</p>	<p>5 minutes</p>	<p>Dental Aide</p>





	<p>4.2 Performs oral examination, assesses the existing condition of the mouth, Interviews on the past medical history.</p> <p>4.3 If medically compromised, a diagnostic result/ medical clearance should be presented or will be referred to the medical doctor on duty</p> <p>4.4 Performs dental procedures according to the patients need:  a.)tooth restoration  b.)oral prophylaxis  c.)tooth extraction  d.)fluoride application  e.)pit&amp; fissure sealants</p>	<p>None</p> <p>None</p>	<p>20 minutes</p> <p>15 minutes</p> <p>20 minutes</p> <p>10 minutes</p> <p>15 minutes</p>	<p>Dentist</p> <p>Dentist</p>
5.Take the post extraction instruction	Give post of instructions & oral health education/ chair side instructions	None	3 minutes	Dentist
<b>TOTAL</b>			<b>1 hour and 44 minutes</b>	



# **Oriental Mindoro Provincial Hospital Internal Services**



## INTERNAL SERVICES

### LAUNDRY/LINEN SERVICES

#### REPAIR/SEWING,CUTTING & ISSUANCE OF LINEN

This process covers the different words requesting linens. Count and segregates repairable linens. Repairing, cutting and sewing linen. Collects and records all linen from laundry section.

<b>Office or Division:</b>		Laundry/Linen Services-OMPH		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen		
<b>Who may avail:</b>		All Ward		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Linen Receipt (1 original)				
2.Linen Requisition Issue Slip (1original)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Forward/endorse repairable linen	<p>1. Receive and logs the forwarded repairable linen from ward personnel.</p> <p>1.1Cut and sew linens (doctor's gown, patient's gown, bedsheet, pillow case, curtain).</p> <p>1.2Repair and sew the repairable linen and record all linen in the logbook.</p>	None	1 hour	Linen Personnel
2. Request/receive of clean linen (doctor's gown, patients gown, bedsheet, pillow case).	2. Receive, sort and count the linen from laundry section.		1 hour	Linen Personnel Laundry Personnel



	2.1 Issue clean linen as per number of surrendered soiled linen using Linen Receipt and as per RIS. 2.3 Number of the soiled linen will be registered to the Inventory Logbook and Linen Receipt Form 2.4 Check for accuracy and completeness of receiving.			
<b>TOTAL</b>			<b>2 hours</b>	

### COLLECTION AND DELIVERIES OF LINEN

This process covers the outsourced laundry service provider. The laundry are shall be planned, equipped and ventilate to prevent the spread of contaminants. Laundry facilities in the hospital should be separated from linen processing room, patient's, rooms, food preparation and storage and other areas where clean materials and equipment's are stored.

<b>Office or Division:</b>		Laundry/Linen Services-OMPH		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2C-Government to Citizen		
<b>Who may avail:</b>		All areas requesting for clean linen		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1.Outsourcing Monitoring Sheet (1 original)				
2.Shortages Receipt Form (1 original)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Requesting/receiving and counting of clean linen	1.Received request form personnel 1.1Record number of sorted linen in the collection	None	2 hours	Linen Personnel /Laundry Personnel



	book/control number 1.2Signs logbook and indicates the date of collection. 1.3Counts and tallies the number of soiled linen received from laundry personnel.			
<b>TOTAL</b>			<b>2 hours</b>	

## HOUSEKEEPING/UTILITY SERVICES

### REQUEST FOR GENERAL CLEANING

This process covers request for the conduct of general cleaning. The service is upon the request of the area with their chosen schedule, time and day.

<b>Office or Division:</b>		Housekeeping/Utility Services (OMPH)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G-Government to Government		
<b>Who may avail:</b>		All offices, centers and units		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Request Logbook			Housekeeping office	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.Request for general cleaning	1.1Receive request through phone call or personal housekeeping office of different wards/offices.  1.2Housekeeping staff logged the	None	1 day	Utility Staff



	request to the request logbook (requesting area, requesting officer, time of request)  1.3Performs general cleaning			
2.Affixes signature in the service logbook	2.Instructs to sign in the service request logbook after completion of general cleaning	None	2 minutes	Utility Staff
<b>TOTAL</b>			<b>1 day and 2 minutes</b>	



**PROVINCIAL SOCIAL WELFARE AND  
DEVELOPMENT OFFICE**

**External Service**



## 1. Assistance to Client in Need of Special Protection

Provision of assistance to disadvantaged sectors in need of special protective interventions including basic specialized services by reason of their difficult circumstances which gravely threaten their social and economic development. Service availability is 24/7.

<b>Office or Division</b>	Family Welfare Division			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Disadvantaged Sectors			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Government issued Valid Identification/ID of the victim (1 original, 1 photocopy)		Client		
2. Copy of original NSO/PSA Birth Certificate of the child if necessary (1 original, 1 photocopy)		PSA/Local Civil Registrar		
3. Copy of medico-legal of abuse if necessary (1 original, 1 photocopy)		Accredited Hospital with Physician's Signature		
4. Police Blotter/Report (1 original, 1 photocopy)		Philippine National Police/ Women & Children Protection Desk		
5. Medical Certificate (1 original, 1 photocopy)		Attending Physician		
6. Referral Letter from City/Municipal Social Welfare and Development Office or other Law Enforcement Agencies (1 original, 1 photocopy)		City/Municipal Social Welfare and Development Office and other Law Enforcement Agencies		
<b>Client Steps</b>	<b>Agency Action</b>	<b>Fees To Be Paid</b>	<b>Processing Time</b>	<b>Person Responsible</b>
<b>For Counseling</b>				
1. Register in clients' logbook	1. Assist client in registering in logbook	None	2 minutes	<i>Officer of the Day</i> Provincial Social Welfare and Development Office
2. Submit for initial/basic interview	2. Direct client to Division/Unit/Social Worker handling cases	None	2 minutes	<i>Officer of the Day</i> PSWDO





<p>3. Proceed to division/unit/social workers routed to and participate in interview</p>	<p>3. Conduct detailed interview and assessment of case using the General Intake Sheet Form</p> <p>3.1 Conduct counseling if necessary</p> <p>3.2 Provide food assistance if necessary</p> <p>3.3 Provide transportation assistance if necessary</p>	<p>None</p> <p>None</p>	<p>30 minutes</p> <p>30 minutes for simple cases; 2 hours for difficult cases</p>	<p><i>Social Welfare Officer II Social Welfare Officer / PSWDO</i></p> <p><i>Social Welfare Officer II Social Welfare Officer / PSWDO</i></p>
<p><b>For rescue</b></p> <p>1. Report/request for rescue of an abuse</p>	<p>1. Assess if rescue is needed</p> <p>1.1 If yes, coordinate with PNP/NBI or refer to Local Social Welfare and Development Officer of their respective LGUs or meet with other staff or social worker for an urgent case conference, contact shelter could take in client</p>	<p>None</p> <p>None</p>	<p>20 minutes</p> <p>1 day</p>	<p><i>Social Welfare Officer II Social Welfare Officer / PSWDO</i></p> <p><i>Social Welfare Officer II Social</i></p>



2. Accompanies rescuer/s	1.2 If rescue not needed, refer to LSWDOs to conduct collateral information	None	2 hours	<i>Welfare Officer / PSWDO</i>
	1.3 Conduct the rescue either on its own or with a Law Enforcement Agency	None	4 hours	<i>Social Welfare Officer II Social Welfare Officer / PSWDO</i>
		None	2 hours	<i>Social Welfare Officer II Social Welfare Officer / PSWDO</i>
	1.4 If client needs custody, referral is made to appropriate shelter or take into temporary custody with Bahay Kanlungan or other partner agencies	None	4 hours	<i>Social Welfare Officer II Social Welfare Officer / PSWDO</i>
	1.5 If client is accepted by a shelter, LSWDO/assigned social worker prepares documents and attend the admission conference	None	2 hours	<i>Social Welfare Officer II Social Welfare Officer / PSWDO</i>
2. Bring client to shelter	None	2 hours	<i>Social Welfare Officer II Social Welfare Officer / PSWDO</i>	
3. Cooperate in the entire case management process	3. Prepare necessary documents	None	1 day	
<b>TOTAL</b>		None	Counseling-3 hours and 4 minutes	



		Rescue- 2 days, 14 hours and 20 minutes	
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## 2. Augmentation Support to Children in Conflict with the Law (CICL)

Provision of 1/3 share for the rehabilitation of CICL of the province at the MIMAROPA Youth Center (MYC) / National Training School for Boys (NTSB). Service availability is from 8:00AM to 5:00PM.

<b>Office or Division</b>	Family Welfare Division			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2G – Government to Government			
<b>Who may avail:</b>	Government Agency			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Billing Statement from DSWD (1 copy sent via email)		DSWD - MIMAROPA Youth Center (MYC) and National Training School for Boys (NTSB)		
<b>Client Steps</b>	<b>Agency Action</b>	<b>Fees To Be Paid</b>	<b>Processing Time</b>	<b>Person Responsible</b>
1. Forward billing statement for the month	1. Receive billing statement from MYC/ NTSB	None	2 minutes	<i>Administrative Aide IV</i> Provincial Social Welfare and Development Office
	1.1 Prepare necessary documents for payment	None	1 day	<i>Administrative Aide IV</i> PSWDO
	1.2 Processing of documents for payment	None	5 days	Provincial Budget Office, Office of the Provincial Accountant, Provincial Treasurer's Office



2. Receive payment for 1/3 share	2. Payment for 1/3 share	None	1 day	Provincial Treasurer's Office
<b>TOTAL</b>		None	7 days and 2 minutes	

### 3. Children Welfare Assistance

Provision of program materials to child development centers province wide. Service availability is from 8:00AM to 5:00PM.

<b>Office or Division</b>	Family Welfare Division			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Child Development Workers/ Centers Province wide			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Barangay Resolution (2 original copies)		Barangay		
<b>Client Steps</b>	<b>Agency Action</b>	<b>Fees To Be Paid</b>	<b>Processing Time</b>	<b>Person Responsible</b>
1. Forward Barangay Resolution with MSWDO's endorsement to Office of the Governor	1. Receive Barangay Resolution from the barangay	None	2 minutes	<i>Administrative Aide IV</i> Provincial Social Welfare and Development Office
	1.1 Review of request/ resolution for child development centers (CDC) program materials	None	2 minutes	<i>Social Welfare Officer II</i> PSWDO
	1.2 Encode resolution to master list of approved requests	None	1 hour	<i>Social Welfare Officer II</i> PSWDO
	1.3 Validate request for	None	5 days	<i>Social Welfare Officer II</i>



	CDC program materials			
	1.4 Consolidate validated request	None	2 days	<i>Day Care Worker II</i> <i>PSWDO</i> <i>Social Welfare Officer II</i> <i>PSWDO</i>
	1.5 Forward approved master list to Admin Division for preparation of necessary documents for processing	None	10 minutes	<i>Social Welfare Officer II</i> <i>PSWDO</i>
	1.6 Process documents	None	10 days	Provincial Budget Office, Office of the Provincial Accountant, Provincial Treasurer's Office
2. Proceed to PSWDO for the release of assistance	2. Notify concerned barangay and MSWDO for the release of assistance		1 day	<i>Social Welfare Officer II, Day Care Worker II</i> <i>PSWDO</i>
	2.1 Release of program materials to CDC		1 day	<i>Social Welfare Officer II, Day Care Worker II</i> <i>PSWDO</i>
	<b>TOTAL</b>	None	19 days, 1 hour and 14 minutes	



## 4. Disaster Relief

Provision of clothing, food and other relief goods to disaster victims and displaced families.

<b>Office or Division</b>	Community Welfare Division			
<b>Classification</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen G2G - Government to Government			
<b>Who may avail:</b>	Victims of disaster (natural and manmade) including displaced families, indigent families			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<u>For Fire Victim.</u> 1. Bureau of Fire Certification (1 original copy) 2. Picture of burned house (1 original copy) 3. Barangay Certification (1 original copy)		Bureau of Fire Protection (BFP)  Requesting Client  Barangay Captain		
<u>For Typhoon Victim</u> 1. Sangguniang Panlalawigan certification under state of calamity 2. Signed disaster report (1 copy)		Sangguniang Panlalawigan  Municipal Local Government Unit (MLGU) or Provincial Disaster and Risk Reduction Management Office (PDRRMO)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request and other documents to Governor's Office	1. Receive the letter request together with other documents from Governor's Office, record the request and forwarded to the program focal	None	10 minutes	<i>Administrative Aide IV</i> Provincial Social Welfare and Development Office (PSWDO)



	1.1 Evaluate the submitted documents	None	10 minutes	<i>Social Welfare Officer II</i> PSWDO
2. Receive assistance	2. Provide disaster assistance food and non-food item.	None	15 minutes	<i>Social Welfare Officer II</i> PSWDO
	<b>TOTAL:</b>	None	35 minutes	
<b>For Municipalities</b>				
1. The LGU submits report of affected families at the office	1. Receive, record and forwarded to PSWDO	None	10 minutes	<i>Administrative Aide IV</i> PSWDO
	1.1 Identify areas for augmentation based on submitted and validated report of damages by the MSWDOs/LGUs.	None	10 minutes	<i>Provincial Social Welfare Officer</i> <i>Social Welfare Officer II</i> PSWDO
	1.2 Coordinate with the LGU re: relief distribution schedule.	None	4 hours	<i>Social Welfare Officer II</i> <i>Social Welfare Officer I</i> PSWDO
2. Receive assistance	2. Distribute relief packs to affected families.  *Goods are always available	None	1 day	PSWDO Staff
	<b>TOTAL:</b>	None	1 day, 4 hours and 55 minutes	



## 5. Emergency Shelter Assistance

Provision of housing materials to victims of natural and manmade disasters, poor, displaced families and those living in makeshift houses. Service availability is from 8:00AM to 5:00PM.

<b>Office or Division</b>	Community Welfare Division			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C - Government to Citizen G2G - Government to Government			
<b>Who may avail:</b>	Victims of manmade & natural disaster, individuals in crisis			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<u>For Fire Victim</u>		Client		
1. Letter request or barangay resolution (1 original copy)		Client		
2. Photos of burned house (1 original)		Bureau of Fire (BFP)		
3. Certificate from Bureau of Fire Protection (BFP) (1 original copy)		Barangay Captain		
<u>For typhoon victim</u>		Municipal Disaster Risk Reduction and Management Office (MDRRMO)		
1. Barangay certification (1 original copy)		Client		
2. Municipal Disaster Risk Reduction and Management Office (MDRRMO) certification (1 original copy)				
3. Photos of damage house (1 original)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>





1. Submit request to Governor's Office	1. Receive approved request of clients and record it in the logbook after to Provincial Social Welfare and Development Officer down to Division Chief for routing	None	5 minutes	<i>Administrative Aide IV</i> Provincial Social Welfare and Development Office (PSWDO)
	1.1 Notify the client for the schedule of home visitation and screening	None	2 minutes	<i>Social Welfare Officer I</i> PSWDO
	1.2 Conduct field validation and collateral interview	None	14 days	<i>Social Welfare Officer I</i> PSWDO
	1.3 Endorse the accomplished form to Division and Department Head for recommending approval. And then forwarded by the administrative staff to the Provincial Governor for approval	None	5 days	<i>Social Welfare Officer I</i> PSWDO
	1.4 Receive and log the approved	None	15 minutes	<i>Social Welfare Officer I</i> PSWDO



	<p>proposals. And rout to the focal person for payroll preparation.</p> <p>1.5 Prepare the payroll and endorse to the Administrative Division for payroll processing and other office signatories.</p> <p>1.6 Encode the approved payroll and notify the client of the release of assistance</p>	<p>None</p> <p>None</p>	<p>10 days</p> <p>1 day</p>	<p><i>Social Welfare Officer I</i> <i>Social Welfare Assistant</i> <i>PSWDO</i></p> <p><i>Social Welfare Officer I</i> <i>PSWDO</i></p>
2. Client prepares list of housing materials; Client receives assistance and purchase materials needed	2. Issue slip for the release of the assistance.	None	5 minutes	<p><i>Social Welfare Officer I</i> <i>PSWDO</i> <i>Disbursing Officer I</i> <i>Provincial Treasurer's Office</i></p>
	<b>TOTAL:</b>	None	30 days and 27 minutes	



## 6. Enhanced Comprehensive Local Integration Program

Provision of package of assistance to former rebels and their families including the Militia ng Bayan

<b>Office or Division</b>	Community Welfare Division			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C - Government to Citizen			
<b>Who may avail:</b>	Former rebels and Militia ng Bayan			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Joint Armed Forces of the Philippines- Philippine National Police Intelligence Committee Certification (2 original) 2. Enhanced Comprehensive Local Integration Program (ECLIP) Enrollment form (1 original copy)		Philippine National Police (PNP) Provincial Director's Office and Army Brigade Commander's Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Endorse the names of the surrenderees to the Provincial Social Welfare and Development Office (PSWDO)	1. Receive and record Joint AFP-PNP Intelligence Committee Certification Enhanced Comprehensive Local Integration Program (ECLIP) Enrollment form and other documents forwarded to Department Head to Division	None	10 minutes	<i>Administrative Aide IV Social Welfare Officer IV Provincial Social Welfare Officer Provincial Social Welfare and Development Office</i>
		None	10 minutes	<i>Social Welfare Officer IV</i>



	<p>Chief for verification</p> <p>1.1 Validates the name of the Former Rebel (FR) and Militia ng Bayan (MB) in the databank to ascertain whether they are already beneficiaries of previous program and notify the receiving unit for the schedule of interview</p>			<p><i>Social Welfare Officer I</i> PSWDO</p>
<p>2. Attend scheduled interview</p>	<p>2.1 Conduct interview with the applicant using the prescribed program forms and submit accomplished documents to ECLIP committee for signature</p>	<p>None</p> <p>None</p>	<p>45 days</p> <p>3 hours</p>	<p><i>Social Welfare Officer I</i> PSWDO</p> <p><i>Social Welfare Officer I</i> PSWDO</p>



	<p>and approval</p> <p>2.2 Online Enrolment of the Former Rebel (FR) to the given website.</p> <p>2.3 Notify the ECLIP committee of the approved assistance and the former rebel.</p>	None	1 day	<i>Social Welfare Officer I PSWDO</i>
3. Receive assistance	3. Release of Assistance in the designated venue.	None	1 day	<i>Social Welfare Officer I PSWDO Department of Interior and Local Government (DILG) Personnel DILG</i>
	<b>TOTAL:</b>	None	47 days, 3 hours and 20 minutes	



## 7. Food for Work

Provision of food to disaster victims/displaced or distressed persons in exchange for their services or involvement in undertaking restoration or rehabilitation activities. Service availability is from 8:00AM to 5:00PM.

<b>Office or Division</b>	Community Welfare Division			
<b>Classification</b>	Simple			
<b>Type of Transaction:</b>	G2G – Government to Government			
<b>Who may avail:</b>	Victims of manmade & natural disaster, barangay undertaking rehabilitation or restoration activities			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Barangay resolution with list of volunteers (1 original copy)		Barangay Hall		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request & other documents at the Provincial Social Welfare and Development Office	1. Receive the letter request together with other documents, record the letter request and forwarded to Department Head.	None	10 minutes	<i>Administrative Aide IV</i> Provincial Social Welfare and Development Office
	1.1 Evaluate the eligibility of the requesting barangay. And if eligible the document will be returned to the Administrative Officer with instruction indicating the	None	30 minutes	<i>Provincial Social Welfare Officer</i> PSWDO



	number of goods to be release.			
2. Receive the assistance	2. Prepare Requisition and Issue Slip (RIS) and Inventory Custodian Slip (ICS) for signature of the client and then release the assistance as indicated in the RIS	None	30 minutes	<i>Social Welfare Officer II</i> PSWDO
	<b>TOTAL:</b>	None	1 hour and 10 minutes	

## 8. Issuance of Certificate of Eligibility

For a client eligible for medical, burial and financial assistance extended by the Office of the Governor thru Galing at Serbisyo para sa Mindoreño Action Center (GSMAC). Service availability is 24/7.

<b>Office or Division</b>	Family Welfare Division			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Disadvantaged Sectors			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Medical Certificate or 1. Clinical Abstract 2. Doctors Referral 3. Hospital Bill 4. Doctor's Prescription 5. Request for Laboratory Examination 6. Death Certificate/Funeral Contract		Hospital of Confinement or hospital/ clinic where he/she underwent medical examination (with Doctor's signature)  Attending Physician  Local Civil Registrar		
<b>Client Steps</b>	<b>Agency Action</b>	<b>Fees To Be Paid</b>	<b>Processing Time</b>	<b>Person Responsible</b>



<p><b>For Certificate of Eligibility:</b></p>				
<p>1. Sign in the client logbook in the office lobby</p>	<p>1. Give the logbook to the client</p>	<p>None</p>	<p>3 minutes</p>	<p><i>Social Welfare Assistant</i> Provincial Social Welfare and Development Office</p>
<p>2. Submit the required documents to the worker</p>	<p>2. Receive the required documents and check for completeness (if not, give them list of documentary requirements)</p>	<p>None</p>	<p>3 minutes</p>	<p><i>Social Welfare Officer II</i> <i>Social Welfare Officer I</i> <i>Social Welfare Assistant</i> <i>Community Affairs Officer I</i> PSWDO</p>
	<p>2.1 Verify eligibility of client in the database. If eligible proceed to Step 3. If not eligible, refer to other concerned agency.</p>	<p>None</p>		
<p>3. Give the required data or basic information upon interview</p>	<p>3. Conduct intake interview with the client using General Intake Sheet (GIS)</p>		<p>10 minutes</p>	<p><i>Social Welfare Officer II</i> <i>Social Welfare Officer I</i> <i>Social Welfare Assistant</i> <i>Community Affairs Officer I</i> PSWDO</p>
<p>4. Receive the certificate of eligibility and proceed to</p>	<p>4. Issue certificate of eligibility to client</p>		<p>1 minute</p>	<p><i>Social Welfare Officer II</i> <i>Social Welfare Officer I</i></p>





GSMAC staff for the grant of assistance.				<i>Social Welfare Assistant Community Affairs Officer / PSWDO</i>
<b>TOTAL</b>		None	17 minutes	

## 9. Livelihood Assistance Program

Provision of an interest/collateral free loan payable from six months to one year for the beneficiary to engage in an income generating project. Service availability is from 8:00AM to 5:00PM.

<b>Office or Division</b>	Community Welfare Division			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Women, elderly, person with disability, Indigenous People and other needy adults are qualified to avail this program.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Letter request or resolution from the requesting party (1 original)		Client		
2. Valid identification cards (1 photocopy)				
3. Barangay Certification/Residency (1 original)		Barangay Captain		
4. Photo of Existing project (1 original)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Submit request & other documents at the Administrative Division	1.6 Receive request together with other documents, record the request in the logbook forwarded to Department Head down then to Division Chief	None	5 minutes	<i>Administrative Aide IV Provincial Social Welfare Officer Provincial Social Welfare and Development Office</i>
		None	5 minutes	<i>Social Welfare Officer IV Social Welfare Assistant PSWDO</i>
	1.1 Receive and evaluate the request based on the program eligibility criteria forwarded to focal person	None	1 hour	<i>Social Welfare Assistant PSWDO</i>
	1.2 Conduct on site interview with the clients and notify the client to attend Basic Management Training if qualified			
2. Attend Basic Business Management Training and prepared Project Proposal	1.6 Conduct Basic Business Management Training with clients	None	2 days	<i>Social Welfare Assistant Social Welfare Officer IV Provincial Social Welfare Officer PSWDO</i>



	<p>2.1 Review and endorse clients project proposal to Division Chief, Provincial Social Welfare and Development Officer, and Provincial Administrator's Office for their approval and signature</p> <p>2.2 Receive approve project proposal and prepare payroll for signature and approval of Provincial Social Welfare and Development Office and other concern agencies</p>	<p>None</p> <p>None</p>	<p>20 days</p> <p>40 days</p>	<p><i>Social Welfare Assistant Social Welfare Officer IV Provincial Social Welfare Officer PSWDO</i></p> <p><i>Social Welfare Assistant Provincial Social Welfare Officer PSWDO Provincial Budget Office, Office of the Provincial Accountant Provincial Treasurer's Office and Provincial Administrator's Office</i></p>
1.6 Receive the livelihood assistance	3. Notify requesting party and Municipal Social Welfare and Development Office for the	<p>None</p> <p>None</p>	<p>3 minutes</p> <p>5 minutes</p>	<p><i>Social Welfare Assistant PSWDO Provincial Treasurer's Office</i></p>



	schedule of release  3.1 Issue claim stub to clients to disbursing officer and given a copy of amortization schedule			<i>Social Welfare Assistant PSWDO Disbursing Officer / Provincial Treasurer's Office</i>
	<b>TOTAL:</b>	None	62 days, 1 hour & 18 minutes	

## 10. Logistical Assistance

Provision of financial/ logistical assistance to the federations/associations of Senior Citizen/Persons with Disability in every barangay. Service availability is from 8:00AM to 5:00 PM.

<b>Office or Division</b>	Family Welfare Division	
<b>Classification</b>	Highly Technical	
<b>Type of Transaction</b>	G2C – Government to Citizen	
<b>Who may avail:</b>	Associations/Federations of Senior Citizens/ Person with Disability	
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
	1. Barangay Resolution (2 original copies)	Barangay Sangguniang Panlalawigan
	2. Sangguniang Panlalawigan resolution accrediting the Non-Government Organizations/People's Organizations (1 original, 2 photocopies)	SEC/DOLE
	3. Certificate of registration (Securities and Exchange Commission/Cooperative Development Authority/Department of Labor and Employment) (1 original, 2 photocopies)	Organization  Organization
	4. Audited Financial Statements (1 original, 2 photocopies)	Organization



<p>5. Disclosure of other related business and extent of ownership therein; (1 original, 2 photocopies)</p> <p>6. Work and Financial Plan, Sources and Details of Proponents Equity Participation in the Project; (1 original, 2 photocopies)</p> <p>7. List and or photographs of similar projects previously completed by the NGO/PO; (1 original, 2 photocopies)</p> <p>8. Sworn Secretary's Affidavit that none of the incorporators, organizers, directors (1 original, 2 photocopies)</p>		<p>Organization</p> <p>Organization</p>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Submit Memorandum of Agreement/Project Proposal endorsed by the Municipal Social Welfare and Development Office along with other requirements	1. Receive MOA/Project Proposal and other documents from the Barangay Association/Municipal Federation	None	2 minutes	<i>Office of the Governor's Staff Provincial Governor's Office</i>
		None	1 day	<i>Social Welfare Officer I/II, Social Welfare Assistant, Administrative Aide IV PSWDO</i>
	1.1 Endorse the documents to Provincial Social Welfare and Development Office (PSWDO)	None	5 days	<i>Social Welfare Officer I/II PSWDO</i>
		None	1 day	<i>Social Welfare Officer I/II PSWDO</i>
	1.2 Receive requests/documents from the Office of the Governor	None	1 hour	<i>Social Welfare Officer I/II, Social Welfare Assistant PSWDO</i>
	1.3 Review of requests/documents for logistical assistance	None	10 days	<i>Social Welfare Officer I/II, Social Welfare Assistant PSWDO</i>
	1.4 Encode resolution to master list of approved requests	None	3 days	<i>Social Welfare Officer I/II PSWDO</i>
	1.5 Validate request for	None	10 minutes	<i>Social Welfare Officer I/II, Social Welfare Assistant</i>



	logistical assistance			PSWDO
	1.6 Consolidate validated request and submit to Governor's Office for marginal note/ approval	None	15 days	Provincial Budget Office, Office of the Provincial Accountant, Provincial Treasurer's Office
	1.7 Forward approved masterlist to Admin Division for preparation of necessary documents for processing	None	1 day	<i>Social Welfare Officer I/II, Social Welfare Assistant PSWDO</i>
2. Proceed to PSWDO for the release of assistance	1.8 Process documents	None	1 day	<i>Provincial Social Welfare and Development Officer, Social Welfare Officer I/ II, Social Welfare Assistant PSWDO</i>
3. Proceed to Provincial Treasurer's Office for claiming of assistance.	2. Notify concerned barangay/ association/federation and MSWDO for the release of assistance			
	3. Release of logistical assistance to			



	Senior Citizens/ PWD barangay association/fed eration			
<b>TOTAL:</b>		None	37 days, 1 hour and 12 minutes	

## 11. Maintenance of Crisis Center

Provision of programs and services such as temporary shelter, treatment and rehabilitation, group life and home care, health and nutrition, and productivity skills training program to abuse women and children. Service availability is 24/7.

<b>Office or Division</b>	Center & Institution Management Division
<b>Classification</b>	Highly Technical
<b>Type of Transaction</b>	G2C – Government to Citizen
<b>Who may avail:</b>	Abused Women and Children
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>





<ol style="list-style-type: none"> <li>1. Referral letter (1 original)</li> <li>2. Social Case Study Report (1 original)</li> <li>3. Court Order (if any) (1 original)</li> <li>4. Birth Certificate (1 photocopy)</li> <li>5. Chest X-Ray, Swab Test, CBC, Urinalysis, and Fecalalysis Result (1 original copy each)</li> <li>6. Medical Certificate reflecting physically fit for admission (1 original)</li> <li>7. Medico Legal (1 photocopy)</li> <li>8. Police Report/Complaints (1 photocopy)</li> <li>9. Sinumpaang Salaysay (1 photocopy)</li> <li>10. Card/School Records (if any) (1 photocopy)</li> </ol>	<p>Municipal Social Welfare and Development Office Regional Trial Court Branch/Family Court Local Civil Registrar/ Philippine Statistics Office Accredited Hospital and Laboratory</p> <p>Municipal Health Office</p> <p>Philippine National Police Office</p> <p>Last School Attended</p>
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CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<p><b>For the Referring Party:</b></p> <ol style="list-style-type: none"> <li>1. Coordinate thru mobile numbers 0920-805-6423 and 0920-969-5817 or email at bahaykanlungan_ormin@yahoo.com.</li> <li>2. Accomplish necessary</li> </ol>	<ol style="list-style-type: none"> <li>1. Initial interview/ pre-admission conference to the referring party about the case</li> </ol>	None	15 minutes	<p><i>Social Welfare Officer I</i> Provincial Social Welfare and Development Office</p>
	<ol style="list-style-type: none"> <li>1.1 Discuss the referral to the Provincial Social Welfare and Development Officer and Center Head</li> </ol>	None	15 minutes	<p><i>Provincial Social Welfare and Development Officer, Social Welfare Officer II, Social Welfare Officer I</i></p>
	<ol style="list-style-type: none"> <li>1.1 Discuss the referral to the Provincial Social Welfare and Development Officer and Center Head</li> </ol>	None	2 days	<p>PSWDO <i>Social Welfare Officer I</i> PSWDO</p>



documents for admission or facilitate referral to other agency if not eligible for admission	2. Confirm the result of pre-admission conference	None	4 hours	<i>Social Welfare Officer I</i> PSWDO	
3. Bring the client to the center for admission	3. Conduct admission conference with the referring party	None			
<b>For the Client (after admission conference)</b>	6.1 Prepare documents for client's admission	None	2 hours	<i>Social Welfare Officer II</i> <i>Social Welfare Officer I</i> PSWDO	
	6.2 Facilitate the admission of client	None	30 minutes	<i>Social Welfare Officer I</i> PSWDO	
	1. Provide necessary information about herself, family and significant others	None	10 minutes	<i>Social Welfare Officer I</i> PSWDO	
	2. Surrender belongings to the houseparent on duty	1. Conduct intake interview and orientation about the center			
	3. Proceed to bed assignment and arrangement of personal belongings to the assigned cabinet	2. Conduct inventory of client's belongings	None	15 days after admission	<i>Social Welfare Officer II, Social Welfare Officer I</i> PSWDO
		3. Assign bed	None	30 days after admission	<i>Social Welfare Officer I</i> PSWDO



4. Participate in the preparation of the intervention plan	<b>For BK Social Workers:</b>	None	24 hours	<i>Social Welfare Officer II, Social Welfare Officer I PSWDO</i>
		None	90 days after admission	<i>Social Welfare Officer I PSWDO</i>
		None	1 day	<i>Social Welfare Officer II, Social Welfare Officer I PSWDO</i>
		None	1 day	<i>Social Welfare Officer II, Social Welfare Officer I PSWDO</i>
5. Participate in the center's activities (as per intervention plan)	4.1 Prepare Social Case Study Report (SCSR)	None	1 day	<i>Social Welfare Officer II, Social Welfare Officer I PSWDO</i>
6. Attend scheduled court hearing	4.2 Monitor daily activities and progress of the client			
<b>For the Referring Party:</b>	5. Prepare progress report	None	3 hours	<i>Social Welfare Officer II, Social Welfare Officer I PSWDO</i>
	1.1 Attend/ escort client's court hearing	None	After 60 days	<i>Social Welfare Officer II, Social Welfare Officer I PSWDO</i>
	1. Conduct home visitation and assessment of the client's family/relatives for possible reintegration	1. Coordinate with the Municipal Social Welfare and	None	1 day



2. Attend case conference for discharged/ reintegration  3. For the client	Development Office (MSWDO)/ Court Social Worker for the preparation of Parent Capability Assessment Report (PCAR)  2. Conduct of case conference for the client's discharge 2.1 Monitor discharged client 3. Reintegrate to family			
<b>TOTAL:</b>		None	200 days, 34 hours & 10 minutes	

## 12. Men and Women in Uniformed Personnel Welfare Assistance

Provision of monetary and other related assistance to uniformed Personnel/agents. Service availability is from 8:00Am to 5:00PM.

<b>Office or Division</b>	Community Welfare Division
<b>Classification</b>	Complex
<b>Type of Transaction:</b>	G2G – Government to Government
<b>Who may avail:</b>	Philippine National Police (PNP) and Armed Forces of the Philippines (AFP) including personnel agents of the Philippines Coast Guard (PCG), National Bureau of Investigation (NBI), Bureau of Jail Management and Penology (BJMP), Bureau of Fire Protection (BFP) and Philippine Drug Enforcement Agency (PDEA) of Oriental Mindoro
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>



<ol style="list-style-type: none"> <li>1. Certificate of Assignment in the province (1 original copy)</li> <li>2. Death certificate (1 photocopy)</li> <li>3. Certification that the uniformed personnel/agent suffered or acquired illness/died in the performance of his/her official (1 original copy)</li> <li>4. Copy of the court decision of acquitting the uniformed personnel (1 photocopy)</li> </ol>	<ol style="list-style-type: none"> <li>1. Office Head of the applicant</li> <li>2. Local Civil Registrar</li> <li>3. Office Head of the applicant</li> <li>4. Regional Trial Court (RTC)/Department of Justice (DOJ)</li> </ol>			
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<ol style="list-style-type: none"> <li>1. Submit request &amp; other documents at the Administrative Division</li> </ol>	<ol style="list-style-type: none"> <li>1. Receive the letter request together with other document, recorded in the logbook and Route slip will then be prepared and submitted to the Administrative Officer and then forwarded to the Department Head.</li> <li>1.1 Evaluate the submitted documents based on the document requirements per Provincial Ordinance No. 008-2009 and Provincial Ordinance No. 80-2018</li> </ol>	<p>None</p> <p>None</p> <p>None</p>	<p>20 minutes</p> <p>20 minutes</p> <p>20 minutes</p>	<p><i>Administrative Aide IV</i> Provincial Social Welfare and Development Office</p> <p><i>Social Welfare Assistant</i> <i>Social Welfare Officer II</i> PSWDO</p> <p><i>Social Welfare Assistant</i> <i>Social Welfare Officer II</i></p>





	<p>1.4 Prepare voucher once the financial assistance form is approved. The voucher will then be route again for signature of concerned head of the agency</p> <p>1.5 Prepare the payroll and endorse to the Administrative Division for payroll processing and other office signatories</p>	None	3 days	<i>Administrative Aide IV</i> PSWDO
	1.6 Contact the beneficiary for the schedule of release	None	5 minutes	<i>Social Welfare Assistant</i> PSWDO
2. Receive the assistance	2. Issue a claim stub to the client for the release of his/her assistance at the Provincial Treasurer's office.	None	10 minutes	<i>Social Welfare Assistant</i> PSWDO Provincial Treasurer's Office
	<b>TOTAL:</b>	None	3 days, 1 hour & 25 minutes	



### 13. Recognition and Awarding of Incentives to Qualified Senior Citizens

Provision of financial incentive and recognition to qualified senior citizens provincewide.  
Service availability is from 8:00AM to 5:00PM.

<b>Office or Division</b>	Family Welfare Division			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	Senior Citizens			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Birth Certificate or any proof of birth		Phil. Statistics Authority/ Local Civil Registrar		
2. Barangay Residency		Barangay, Member Data Record from Philhealth, Social Security System, GSIS, Commission on Elections, Department of Foreign Affairs		
3. Senior Citizen's ID (Office of the Senior Citizens Affairs ID)		Sangguniang Barangay Office of the Senior Citizens Affairs		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the client logbook in the office lobby	1. Give the logbook to the client	None	2 minutes	<i>Administrative Aide IV</i> Provincial Social Welfare and Development Office (PSWDO)
2. Submit the required documents to the Administrative Division	2. Receive the required documents and check/review its veracity and completeness	None	2 days	<i>Social Welfare Officer I, Social Welfare Assistant, Administrative Aide IV</i> PSWDO
	2.1 Encode submitted documents to the master list	None	1 day	<i>Social Welfare Officer I, Social Welfare Assistant</i> PSWDO
	2.2 If centenarian, validation of submitted documents of centenarian, if	None	10 days	<i>Social Welfare Officer I, Social Welfare Assistant</i>





	not proceed to Step No. 2.5			PSWDO
	2.3 Consolidate validated centenarian documents and submit to PSWDO and Provincial Administrator's Office for approval	None	3 days	<i>Social Welfare Officer I, Social Welfare Assistant</i> PSWDO
	2.4 Prepare payroll for processing	None	3 days	<i>Social Welfare Officer I, Social Welfare Assistant</i> PSWDO
	2.5 Process documents			
	3. Notify client and MSWDO for the release of assistance	None	15 days	Provincial Budget Office, Office of the Provincial Accountant, Provincial Treasurer's Office
	4. Release of financial incentives	None	1 day	<i>Social Welfare Officer I, Social Welfare Assistant</i> PSWDO
3. Proceed to PSWDO for the release of assistance		None	1 day	<i>Provincial Social Welfare and Development Officer, Social Welfare Officer I, Social Welfare Assistant</i> PSWDO
4. Proceed to Provincial Treasurer's Office for claiming of assistance.				Provincial Treasurer's Office
<b>TOTAL:</b>		None	36 days and 2 minutes	



**PROVINCIAL SOCIAL WELFARE AND  
DEVELOPMENT OFFICE**  
**Internal Service**



## 1. Early Childhood Care and Development

Provision of substitute parental care to pre-school children of Provincial Government of Oriental Mindoro (PGOM) employees from 8:00AM to 5:00PM.

<b>Office or Division</b>	Center & Institution Management Division			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G – Government to Government			
<b>Who may avail:</b>	Provincial Government of Oriental Mindoro (PGOM) employees			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Birth Certificate (1 photocopy) 2. Health Record (Immunization) (1 photocopy) 3. Registration Form (1 original)		Philippine Statistics Authority Health Center or Private clinic Child Development Center		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Registration of preschoolers	1. Conduct of registration for the current school year	None	10 minutes	Day Care Worker // Provincial Social Welfare and Development Office (PSWDO)
2. Submit required documents upon registration	2. Review of submitted documents	None	3 minutes	Day Care Worker // PSWDO
3. Accomplish registration form	3. Provide registration form to be accomplished by parents	500.00 registration fee	5 minutes	Day Care Worker // PSWDO
4. Proceed to Provincial Treasurer's Office for payment of registration fee	4. Get the receipt number of payment and record to the registration list	200.00 per month participation fee	15 minutes	Day Care Worker // PSWDO



and monthly participation fee				
5. Receive the list of materials to bring	5. Provide the list of materials to bring		3 minutes	Day Care Worker II PSWDO
	5.1 Advise to be back on the schedule date of parent's orientation and start of classes		3 minutes	Day Care Worker II PSWDO
6. Attend parent's orientation	6. Conduct orientation about day care service, center's policies and monthly activities		2 hours	Provincial Social Welfare and Development Officer, Social Welfare Officer II, Day Care Worker II PSWDO
7. Attend daily session	7. Conduct regular session		3 1/2 hours	Day Care Worker II PSWDO
<b>TOTAL:</b>		2,500.00 per child per school year	6 hours and 9 minutes	



# **Provincial Agriculturist's Office**

## **External Services**



## 1. Agricultural Inputs Support

It is a program of the Provincial Government of Oriental Mindoro (PGOM) that provides agricultural inputs (palay seeds, corn seeds, vegetable seeds, fruit trees, fertilizers, and pesticides) to farmers/farmer's cooperative/associations, Local Government Units and Schools. This is funded through the Provincial Agriculturist's Office.

<b>Office or Division:</b>	<b>Agro-Technology Resource Development &amp; Management Division</b>			
<b>Classification:</b>	<b>Highly Technical</b>			
<b>Type of Transaction:</b>	<b>G2C and G2G</b>			
<b>Who may avail:</b>	<b>Farmers' Cooperative / Associations (FCAs)/ Local Government Units (LGUs)/ Schools</b>			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. FCAs/LGUs/ Schools Request Letter/Resolution (1 Original, 1 Photocopy)		Farmer Associations/Cooperative		
2. Endorsement Letter (for FCAs) (1 Original, 1 photocopy)		Municipal/City Agriculturist or Municipal/City Mayors		
3. Certificate of Registration from SEC/ CDA/ DOLE (for FCAs) (1 Photocopy)		Office of the Security and Exchange Commission (SEC) or Cooperative Development Authority (CDA) or Department of Labor and Employment (DOLE) (for FCAs)		
4. SP Certificate of Accreditation (for FCAs) (1 Photocopy)		Sangguniang Panlalawigan (SP)		
5. Validation Reports (1 original/1 photo copy)		Provincial Agriculturist's Office (PAgO)		
6. Masterlist of Approved Request (1 original/1 photo copy)		PAgO		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client Logbook at the front desk and submit complete required documents	1. Receive complete documents and Endorse to the Provincial Agriculturist	None	3 minutes	Admin Staff (Administrative Division, Provincial Agriculturist's Office)



	1.1 Endorse documents to concerned division/program implementer for appropriate actions	None	2 minutes	Provincial Agriculturist
	1.2 Review of documents and Endorse to Program Implementer for scheduling of on-site validation	None	5 minutes	Supervising Agriculturist (SA) (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	1.3 Schedule conduct of on-site validation	None	2 minutes	Agriculturist II (Agri II) (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	1.4 Notify concerned FCAs/LGUs/Schools for the schedule of on-site validation/assessment	None	2 minutes	Agri II/ Agricultural Technologist (AT) (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)



2. Participate in the on-site validation/ Assessment	2. Conduct of on-site validation/ Assessment/ Preparation of validation reports with recommendation for approval	None	1 day	SA/Agri II/AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	2.1 Approve request/ resolution	None	5 minutes	Provincial Agriculturist
	2.2 Prepare and facilitate of procurement documents	None	10 minutes	Agri II/AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	2.3 Process documents	None	3 months	Budget Office/Bids and Awards Committee/ General Service Office/ Accounting
3. Receive agricultural inputs and fill up of requisition & issue slip (RIS) form and client satisfaction survey (CSSF) form	3. Schedule of distribution  3.1 Notify concerned FCAs/LGUs/ Schools for the release of	None	1 day	Provincial Agriculturist, SA, Agri II, AT (Agro-Technology Resource Development and Management Division, Provincial





	<p>agricultural inputs</p> <p>3.2 Release/ Distribution of agricultural inputs</p> <p>3.3 Give and Received the Requisition Issue Slip (RIS) and Client Satisfaction Survey Form (CSSF)</p>			Agriculturist's Office)
4 Participate in the monitoring and evaluation	4. Conduct of Monitoring and Evaluation and prepare required reports	None	2 days	SA/Agri II/AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	3 months, 4 days and 29 minutes	



## 2. Availing of Farm Tools and Machineries (Logistical Support)

PGOM provides farm tools and machineries to qualified Farmer Cooperative/Association (FCAs)/ Local Government Unit (LGUs) and Schools of Oriental Mindoro to ensure the continued growth and competitiveness of the province agricultural industry through the promotion of modern technology.

<b>Office or Division:</b>	<b>Agro-Technology Resource Development &amp; Management Division</b>			
<b>Classification:</b>	<b>Highly Technical</b>			
<b>Type of Transaction:</b>	<b>G2C and G2G</b>			
<b>Who may avail:</b>	<b>Farmers' Cooperative / Associations (FCAs)/ Local Government Units (LGUs)/ Schools</b>			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. FCAs/LGUs/ Schools Request Letter/Resolution (1 Original, 2 Photocopy)				
2. Endorsement Letter (for FCAs) (1 Original, 1 photocopy)		Municipal/City Agriculturist or Municipal/City Mayors		
3. Certificate of Registration from SEC/ CDA/ DOLE (for FCAs) (1 Photocopy)		Office of the Security and Exchange Commission (SEC) or Cooperative Development Authority (CDA) or Department of Labor and Employment (DOLE)		
4. SP Certificate of Accreditation (for FCAs)		Sangguniang Panlalawigan (SP)		
5. Validation Reports (1 original/1 photo copy)		Provincial Agriculturist's Office (PAgO)		
6. Masterlist of Farmer – beneficiaries (1 original/1 photo copy)		PAgO		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client Logbook at the front desk and submit complete	1.1Receive complete documents and Endorse to the Provincial Agriculturist	None	3 minutes	Admin staff (Administrative Division, Provincial Agriculturist's Office)



required documents	1.2 Endorse documents to concerned division/program implementer for appropriate actions	None	2 minutes	Provincial Agriculturist
	1.3 Review of documents and Endorse to Program Implementer for scheduling of on-site validation	None	5 minutes	Supervising Agriculturist (SA) (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	1.4 Schedule Conduct of on-site validation/ assessment	None	2 minutes	Agriculturist II (Agri II) (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	1.5 Notify concerned FCAs/LGUs/ Schools for the schedule of on-site validation/	None	2 minutes	Agriculturist II/Agricultural Technologist (AT) (Agro-Technology Resource



	assessment			Development and Management Division, Provincial Agriculturist's Office)
2. Participate in the on-site validation/ Assessment	2. Conduct of on-site validation/ Assessment and preparation of validation reports with recommendations for approval	None	1 day	Supervising Agriculturist/ Agriculturist II/Agricultural Technician (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	2.1 Approve of request/ resolution	None	5 minutes	Provincial Agriculturist
	2.2 Prepare and facilitate of procurement documents	None	10 minutes	Agriculturist II/Agricultural Technician (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)



	2.3 Process documents	None	3 months	Budget Office/Bids and Awards Committee/ General Service Office/ Accounting
3. Receive the farm tools and machineries and fill up requisition & issue slip (RIS)/ invoice receipt for property (IRP) form and client satisfaction survey form (CSSF)	<p>3. Schedule of distribution</p> <p>3.1 Notify concerned FCAs/LGUs/ Schools for the schedule of distribution</p> <p>3.2 Release/ Distribution of farm tools and machineries</p> <p>3.3 Give and Received the RIS, IRP and CSSF</p>	None	1 day	Provincial Agriculturist, Supervising Agriculturist, Agriculturist II, Agricultural Technologist (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
4. Participate in the monitoring and evaluation	4. Conduct of Monitoring and Evaluation and prepare required reports	None	2 days	Supervising Agriculturist, Agriculturist II, Agricultural Technologist (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)



	<b>TOTAL</b>	None	3 months, 4 days and 29 minutes	
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### 3. Availing of Financial Assistance

PGOM provides Financial Assistance to qualified Rural Based Organization (RBOs) and Farmers' Cooperative/Association (FCAs) of Oriental Mindoro to empower local organizations and contribute to the development of the agricultural value chain of key commodities in the province.

<b>Office or Division:</b>	<b>Agro-Technology Resource Development &amp; Management Division</b>		
<b>Classification:</b>	<b>Highly Technical</b>		
<b>Type of Transaction:</b>	<b>G2C</b>		
<b>Who may avail:</b>	<b>Rural Based Organization (RBOs) /Farmers' Cooperative/Association (FCAs)</b>		
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>	
	1. RBOs/FCAs Request Letter/Board Resolution requesting financial assistance (1 Original, 2 photocopy)		
	2. SP Accreditation (1 photocopy)	Sangguniang Panlalawigan (SP)	
	3. Certificate of Registration from SEC/ CDA/ DOLE (for FCAs) (1 Photocopy)	Office of the Security and Exchange Commission (SEC) or Cooperative Development Authority (CDA) or Department of Labor and Employment (DOLE)	
	4. Board Resolution signed by the governing board/officers authorizing the representative to enter into Memorandum of Agreement (MOA) with the Provincial Government of Oriental Mindoro (PGOM) (1 original, 1 photocopy)	Client	
	5. Draft Memorandum of Agreement (MOA) (3 original)	Project Implementor	
	6. Source of Equity (1 original, 1 photocopy)	Client	



7. Audited Financial Assistance previously granted to the organization (if any) (1 original, 1 photocopy)	Client			
8. Audited Financial Statement (1 original, 1 photocopy)	Client			
9. By Laws (1 photocopy)	Client			
10. Receipt of the Organization issued by BIR (1 original copy, 1 photocopy)	Client			
11. Endorsement Letter (1 Original, 1 photocopy)	Municipal/City Agriculturist or Municipal/City Mayors			
12. Project Proposal signed by the organization's officers (1 original, 1 photocopy)	Client			
13. Sworn affidavit of the Secretary of the NGO/PO that none of its incorporators, organizers, directors, or officials is an agent or related by consanguinity or affinity up to the fourth civil degree to the officials of GO authorized to process and/or approve the proposal and release of funds (1 original/1 photo copy)	Client			
14. Certified photocopy of depository account opened (2 photo copy)	Client			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Sign in the Client Logbook at the front desk and submit number 1 documents	1. Receive documents and endorse to the Provincial Agriculturist	None	5 minutes	Administrative staff (Administrative Division, Provincial Agriculturist's Office)
	1.1 Endorse documents to concerned division/program implementer for appropriate actions	None	10 minutes	Provincial Agriculturist



	1.2 Review of request/resolution for financial assistance and Endorse to Program Implementer for scheduling of on-site validation	None	15 minutes	Supervising Agriculturist (SA) (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	1.3 Receive documents and Schedule an on-site validation	None	5 minutes	Agriculturist II (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	1.4 Notify concerned RBO's and FCAs on the schedule of on-site validation	None	2 minutes	Agriculturist II/ Agricultural Technologist (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
2. Participate in the on-site	2. Conduct an on-site validation and Preparation	none	2 days	Supervising Agriculturist, Agriculturist II,





validation/ Assessment	of validation reports and recommendation for approval			Agricultural Technologist (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	2.1 Approve request/ resolution	none	15 minutes	Provincial Agriculturist
	2.2 Draft Memorandum of Agreement (MOA)	none	1 day	Agriculturist II, Agricultural Technician (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
3. Submit remaining documents (Source of Equity, SP Accreditation, Certificate of Registration with SEC/CDA/DOLE, Audited Financial Statement, By Laws) as	3. Receive necessary requirements and indorse together with MOA to Provincial Legal Office (PLO) for review	none	10 minutes	Agriculturist II (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
	3.1 Review of the MOA and	none	2 days	Provincial Legal Office (PLO)



<p>attachment to MOA (1 original, 2 certified true copy)</p>	<p>Issuance of Certificate of Legal Sufficiency</p> <p>3.2 Indorse MOA to Sangguniang Panlalawigan for Committee Hearing</p>	<p>none</p>	<p>1 day</p>	<p>PLO staff</p>
<p>4. Participate in the Committee Hearing as advised</p>	<p>4. Notify RBOs/ FCAs on the schedule of Committee Hearing</p> <p>4.1 Issuance of legislative authority to LCE to sign and enter into MOA</p> <p>4.2 Signing of MOA between PGOM and RBOs/ FCAs</p> <p>4.3 Prepare and facilitate of procurement documents</p>	<p>none</p> <p>none</p> <p>none</p> <p>none</p>	<p>5 minutes</p> <p>1 day</p> <p>1 day</p> <p>20 minutes</p>	<p>SP</p> <p>SP</p> <p>SA, Agri II, AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)</p> <p>Agri II, AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)</p>



	4.4 Process of documents	none	3 months	Budget Office/Bids and Awards Committee/ General Service Office/ Accounting
	4.5 Notify concerned RBO/FCA and LGUs for the release of financial assistance	none	20 minutes	SA, Agri II, AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
5. Receive the financial assistance and issue receipt of the organization issued by BIR and fill up client satisfaction survey form (CSSF)	5. Release/ Distribution of financial assistance, receive receipt of the organization issued by the BIR and Give/received CSSF	none	1 day	Provincial Agriculturist, SA, Agri II, AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)
6. Participate in the monitoring and evaluation	6. Monitoring and Evaluation	none	1 day	SA, Agri II, AT (Agro-Technology Resource Development and Management Division, Provincial Agriculturist's Office)



	<b>TOTAL</b>	None	3 months, 10 days, 1 hour, 47 minutes	
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#### 4. Availing of Financial Assistance

The Provincial Government of Oriental Mindoro (PGOM through the Provincial Agriculturist's Office (PAgO) provides Financial Assistance to qualified Fisherfolk Associations or Cooperatives (FCAs), Lower Local Government Units, (Barangay and Municipal) of Oriental Mindoro to empower LGUs, local organizations and contributes to the protection, conservation, and management of fishery resources, increase fisheries production and increased value of fishery commodities.

<b>Office or Division:</b>	<b>Fishery &amp; Coastal Resource Management Division</b>		
<b>Classification:</b>	<b>Complex</b>		
<b>Type of Transaction:</b>	<b>G2C</b>		
<b>Who may avail:</b>	<b>FISHERFOLKS ASSOCIATION/COOPERATIVE/ MUNICIPAL AND BARANGAY LOCAL GOVERNMENT UNITS (B/MLGUS)</b>		
	<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>	
	1. Original copy of Board Resolution /Letter Request signed by the governing board/officers requesting financial	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units	
	2. SP Accreditation (authenticated photocopy)	Sangguniang Panlalawigan	
	3. Certificate of Registration with SEC/CDA/DOLE (authenticated photocopy)	Security Exchange Commission (SEC), Cooperative Development Authority (CDA), Department of Labor and Employment (DOLE)	
	4. Sworn affidavit of the Secretary of the FA/PO that none of its incorporators, organizers, directors, or officials is an agent or related by consanguinity or affinity up to the fourth civil degree to the officials of GO authorized to process and/or approve the proposal and release of funds (one photocopy)	Public Attorney's Office	



5. Project Proposal signed by the organization's officers (one original copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
6. Resolution Request (one original copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
7. Certificate of Non Related Business	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
8. Original Copy of & one photocopy of LGU endorsement	Municipal and Barangay Local Government Units			
9. Validation report (one original copy)	PAgO			
10. Memorandum of Agreement (MOA) (one original copy)	PAgO			
11. Liquidation Report (four original copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
12. Fund Utilization Report/Status of the projects (one original copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
13. Acceptance receipt with signature of the members (one original copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
14. Certificate of Project Completion (one original copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
15. Constitution and By Laws (one authenticated copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
16. List of members (one authenticated copy)	Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units			
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Submit a request letter/ resolution with a received copy from the Office of the Governor	1. Receive request letter/ resolution	None	1 minute	Administrative Aide IV (Administrative Division, Provincial Agriculturist's Office)
2. Participate in the on-site validation	2. Conduct On-site validation	None	1 day	Supervising Agriculturist  Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	2.1 Preparation of validation reports and recommendations for approval	None	1 day	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	2.2. Review and Approval	None	4 hours	Provincial Agriculturist
	2.3 Draft Memorandum of Agreement (MOA)	None	3 days	Aquaculturist II Agricultural Technologist Agricultural Technologist



				(Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
3. Submit required documents (Proposal, SP accreditation, SEC/CDA/DOL E accreditation, Audited Financial Report, Work and Financial Plan, Sworn Affidavit of Secretary, Source of Equity, SP Resolution authorizing the Provincial Governor to enter inter contracts with Pos) 1 photocopy each	3. Receive necessary requirements and indorse together with MOA to Provincial Legal Office for review	None	5 minutes	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	3.1 Indorse MOA to Sangguniang Panlalawigan for Committee Hearing	None	5 minutes	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division,



	3.2 Signing of MOA between PGOM and RBO/FCA	None	4 hours	Provincial Agriculturist's Office)  Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	3.3. Preparation and facilitation of procurement documents	None	20 minutes	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
4. Receive the financial assistance and issue receipt of the organization issued by BIR and fill up the	4. Release/ Distribution of financial assistance, receive receipt of the organization issued by	None	1 day	Supervising Agriculturist Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal





client satisfaction survey form	the BIR and provide client satisfaction survey form			Resource Management Division, Provincial Agriculturist's Office)
5. Submit Required Documents for Liquidation	5. Receive necessary requirements and indorse together with MOA to Provincial Accounting Office for review	None	2 days	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
6. Participate in the monitoring and evaluation	6. Monitor and Evaluate	None	1 day	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	9 days, 8 hours, 31 minutes	

## 5. Availing of Information, Education, Communication (IEC) Materials

Farmers, students, and other clients can avail a variety of Information, Education, and Communication (IEC) materials on agriculture and fishery technologies, production guides, etc.

<b>Office or Division:</b>	Technical Support Services Division
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<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government to Citizen (G2C)			
<b>Who may avail:</b>	Farmers, walk-in clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
N/A		N/A		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client's logbook	1. Give logbook to client	None	1 minute	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
2. Provide necessary information needed.	2. Interview client to verify needed IEC materials.	None	3 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
3. Receive IEC materials.	3. Provide appropriate IEC materials.	None	10 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
4. Fill up client satisfaction rating form.	4. Assist client in filling-up client satisfaction rating form.	None	2 minutes	Agricultural Technologist (Technical Support Services



				Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	16 minutes	

## 6. Availing of Livelihood Projects

The Fishery Livelihood Projects extended to fisherfolk (POs and farmers) to diversify their source of income, for sustainable development of fishery resources. Livelihood projects provide fishery inputs like feeds, fertilizers, fingerlings, and cage materials (fish nets, PE rope), fish processing equipment like smokehouse, grinding machine, drying machine pressure cooker and kitchen utensils. Beneficiary counterparts are essential to avail the project. Livelihood projects are packaged with training to capacitate the beneficiaries.

<b>Office or Division:</b>	<b>Fishery &amp; Coastal Resource Management Division</b>		
<b>Classification:</b>	<b>Complex</b>		
<b>Type of Transaction:</b>	<b>G2C</b>		
<b>Who may avail:</b>	<b>FISHERFOLK ASSOCIATION/COOPERATIVE</b>		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>	
1. Original copy of Board Resolution /Letter Request signed by the governing board/officers requesting financial		Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units	
2. Board Resolution signed by the governing board/officers authorizing the representative to enter into MOA with the PGOM (one original copy)		Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units	
3. SP Accreditation (authenticated photocopy)		Sangguniang Panlalawigan	
4. Certificate of Registration with SEC/CDA/DOLE (one photocopy)		Security Exchange Commission (SEC), Cooperative Development Authority (CDA), Department of Labor and Employment (DOLE)	
5. Project Proposal signed by the organization's officers (one original copy)		Fisherfolk Association/Cooperative/ Municipal and Barangay Local Government Units	
6. Original Copy of & one photocopy of LGU endorsement		Municipal and Barangay Local Government Units	



7. Validation report (one original copy)		PAgO		
8. Memorandum of Agreement (MOA) (one original copy)		PAgO		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit request letter/ resolution with a received copy from the Office of the Governor	1. Receive request letter/ resolution	None	1 minute	Administrative Aide IV (Administrative Division, Provincial Agriculturist's Office)
2. Participate in the on-site validation	2. Conduct On-site validation	None	1 day	Supervising Agriculturist/ Aquaculturist II/ Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	2.1 Preparation of validation reports and recommendations for approval	None	1 day	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	2.2 Review and Approval	None	4 hours	Provincial Agriculturist



	2.3 Draft Memorandum of Agreement (MOA)	None	3 days	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
3. Submit required documents (Proposal, SP accreditation, SEC/CDA/DOLE accreditation, Audited Financial Report, Work and Financial Plan, Sworn Affidavit of Secretary, Source of Equity, SP Resolution authorizing the Provincial Governor to enter inter contracts with Pos) 1 photocopy each	3. Receive necessary requirements and indorse together with MOA to Provincial Legal Office for review	None	5 minutes	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	3.1 Indorse MOA to Sangguniang Panlalawigan for Committee Hearing	None	5 minutes	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	3.2 Signing of MOA between	None	4 hours	Aquaculturist II



	PGOM and RBO/FCA			<p>Agricultural Technologist Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office)</p> <p>Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office)</p>
	3.3.Preparation and facilitation of procurement documents	None	20 minutes	
4. Receive the inputs for livelihood and fill up requisition & issue slip/ invoice receipt for property form and client satisfaction survey form	4. Release/ Distribute inputs for livelihood and facilitate filling up of requisition & issue slip/ invoice receipt for property form and client satisfaction survey form	None	1 day	<p>Provincial Agriculturist Supervising Agriculturist Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office)</p>



5. Participate in the monitoring and evaluation	5. Technical Assistance/ Monitoring and Evaluation	None	1 day	Supervising Agriculturist Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	7 days, 8 hours and 31 minutes	

## 7. Availing of On-site Soil Test

The Provincial Soils Laboratory also provides free on-site soil testing services for farmers/ farmer associations. Soils Laboratory staff visit and conduct soil test on-site as per request of LGUs or Farmer Associations.

<b>Office or Division:</b>	Technical Support Services Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government to Citizen (G2C), Government to Government (G2G)			
<b>Who may avail:</b>	Farmer Associations, LGU			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Client	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Request for on-site soil test.	1. Receive request.	None	15 minutes	Agricultural Center Chief II



				Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
2. Wait for notification on approval of request.	2. Notify client/requesting party on status of request.  2.1 Discuss with client/ requesting party the schedule and preparations for the on-site soil analysis	None	15 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
3. On-site soil test	3. Soil sampling and soil analysis using the Soil Test Kit (STK).	None	3 hours	Agricultural Technician II (Technical Support Services Division, Provincial Agriculturist's Office)
	3.1 Prepare soil test result and fertilizer recommendations	None	2 hours	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
	3.2 Review of soil analysis report.	None	10 minutes	Agricultural Center Chief II





				(Technical Support Services Division, Provincial Agriculturist's Office)
4. Receive soil test result.	4. Issue and discuss soil analysis result and fertilizer recommendation with client.	None	10 minutes	Agricultural Center Chief II  Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
5. Fill up client satisfaction rating form.	5. Assist client in filling-up client satisfaction rating form.	None	2 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	5 hours, 52 minutes	

## 8. Availing of Planting Materials

The Provincial Demonstration Farm at Merit, Victoria produces a variety of propagated planting materials such as calamansi, lanzones, rambutan, mango, santol, and other fruit crops which are provided free for farmers and clients.

<b>Office or Division:</b>	Technical Support Services Division
<b>Classification:</b>	Government to Citizen (G2C)



<b>Type of Transaction:</b>	Simple			
<b>Who may avail:</b>	Farmers, walk-in clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		N/A		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client's logbook.	1. Give logbook to client	None	1 minute	Administrative Aide III (Technical Support Services Division, Provincial Agriculturist's Office)
2. Provide necessary information needed (farm size, fruit trees preferences, location, etc)	2. Interview client to verify needed information.	None	5 minutes	Agricultural Center Chief I (Technical Support Services Division, Provincial Agriculturist's Office)
3. Receive planting materials.	3. Provide planting materials.	None	30 minutes	Agricultural Center Chief I (Technical Support Services Division, Provincial Agriculturist's Office)
4. Fill up client satisfaction rating form.	4. Assist client in filling-up client	None	2 minutes	Agricultural Center Chief I (Technical Support



	satisfaction rating form.			Services Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	38 minutes	

## 9. Availing of Soil Test for Walk-in Clients

The Provincial Soils Laboratory provides free soil testing services for farmers, researchers, students, and other clients. Soil samples brought by walk-in clients are immediately analyzed in the laboratory.

<b>Office or Division:</b>	Technical Support Services Division			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	Government to Citizen (G2C)			
<b>Who may avail:</b>	Farmers, students, walk-in clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Soil sample		Client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client's logbook	1. Give logbook to client	None	1 minute	Agricultural Technician II  Laboratory Aide I (Technical Support Services Division, Provincial Agriculturist's Office)



2. Submit soil samples for laboratory analysis.	2. Accept soil samples	None	2 minutes	Agricultural Technician  Laboratory Aide I (Technical Support Services Division, Provincial Agriculturist's Office)
3. Fill-up soil sample information sheet	3. Give soil sample information sheet to be filled up by client	None	2 minutes	Agricultural Technician  Laboratory Aide I (Technical Support Services Division, Provincial Agriculturist's Office)
4. Provide information/ data.	4. Interview client to verify information/ data provided in the soil sample information sheet	None	5 minutes	Agriculturist II  Agricultural Technician (Technical Support Services Division, Provincial Agriculturist's Office)
	4.1 Preparation of the soil sample (air-drying and labelling).	None	5 days	Agricultural Technician (Technical Support Services Division, Provincial Agriculturist's Office)
	4.2 Analysis of the soil sample using the Soil Test	None		Agricultural Technician (Technical Support



	Kit.			Services Division, Provincial Agriculturist's Office)
	4.3 Preparation of soil analysis result	None	5 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
	4.4 Interpretation of soil analysis result and formulation of fertilizer recommendation.	None	15 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
	4.5 Review of soil analysis report.	None	10 minutes	Agricultural Center Chief II (Technical Support Services Division, Provincial Agriculturist's Office)
5. Receive soil analysis result.	5. Issue and discuss soil analysis result and fertilizer recommendation with client.	None	5 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)



6. Fill up client satisfaction rating form.	6. Assist client in filling-up client satisfaction rating form.	None	2 minutes	Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	5 days, 47 minutes	

## 10. Availing of Technical Services

This service involves the provision of technical assistance on agricultural production involving consultations, referrals and advice.

<b>Office or Division:</b>	<b>Agro-Technology Resource Development &amp; Management Division</b>			
<b>Classification:</b>	<b>Simple</b>			
<b>Type of Transaction:</b>	<b>G2C</b>			
<b>Who may avail:</b>	<b>Farmers and Walk-In Clients</b>			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
N/A		N/A		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



1. Sign in the client logbook at the front desk	1. Interview client and endorse to concerned division/ program implementer for appropriate action	None	2 minutes	Administrative staff (Administrative Division, Provincial Agriculturist's Office)
	1.1. Provide technical assistance	None	10 minutes	Supervising Agriculturist/ Agriculturist II, Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
2. Fill up client satisfaction survey form	2. Give and Receive Client Satisfaction Survey Form	None	2 minutes	Agriculturist II, Agricultural Technologist (Technical Support Services Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	14 minutes	

## 11. Availing of Trichoderma and Metarhizium

The Provincial Soils Laboratory and Pest Clinic produce *Trichoderma* that are used to improve soil health and as biocontrol agents for plants pests. This is provided and distributed for free to farmers, farmers' associations, and other clients.



<b>Office or Division:</b>	Technical Support Services Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Government to Citizen (G2C)			
<b>Who may avail:</b>	Farmers, farmers' associations, walk-in clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			N/A	
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client's logbook	1. Give logbook to client	None	1 minute	Laboratory Aide II/ Laboratory Aide I (Technical Support Services Division, Provincial Agriculturist's Office)
2. Provide necessary information needed (farm size, crops planted, location, etc)	2. Interview client.	None	5 minutes	Agriculturist II Agricultural Technician II (Technical Support Services Division, Provincial Agriculturist's Office)
3. Receive <i>Trichoderma</i> .	3. Provide <i>Trichoderma</i> .	None	2 minutes	Agriculturist II Agricultural Technician II (Technical Support Services Division, Provincial





				Agriculturist's Office)
4. Fill up client satisfaction rating form.	4. Assist client in filling-up client satisfaction rating form.	None	2 minutes	Agriculturist II Agricultural Technician II (Technical Support Services Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	10 minutes	

## 12. Establishment and Maintenance of Marine Protected Areas (MPAs)

The Provincial Agriculture Office- Fisheries and Coastal Resource Management Division provide technical, financial, and logistical support to Local Government Units (LGUs), fisherfolk associations, and people's organization in the establishment of Marine Protected Areas. The office attends to walk-in clients, letter requests and resolutions with the intention of establishing MPAs from baseline and biophysical assessments, consultations, drafting of resolutions and ordinances, and crafting and adoption management plans for the establishment and sustainability. The mandate and implementation are being backed up with Provincial Ordinance No. 90-2018 An Ordinance Creating Provincial Marine Protected Areas Network Coordinating Council and for other purposes for legal and budget allocation to sustain programs and activities and support to the Oriental Mindoro Resource Monitoring Team (ORMT) and the Provincial Bantay Dagat Taskforce (Law Enforcement Team) created through an Executive Order 09. This service is being done in partnership with NGOs, NGAs, and ACADEME to sustain its operation and maintenance.

<b>Office or Division:</b>	<b>Fishery and Coastal Resource Management Division</b>
<b>Classification:</b>	<b>Highly Technical</b>
<b>Type of Transaction:</b>	<b>G2C – Government to Citizen</b>
<b>Who may avail:</b>	<b>Municipal/city Agriculturist, Municipal Mayor, MPA management council, Fisherfolk Association, LGUs</b>
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
1. Request Letter/ Resolution from POs/LGU for the assessment of	Municipal/City Agriculturist or Municipal/City Mayors MPA Management Council



	the proposed Marine Protected Area/fish sanctuary	Fisherfolk Association		
	2. Assessment report (1 photocopy)	Provincial Agriculturist's Office Municipal Agriculturist Office		
	3. Barangay Resolution Request for the establishment of MPA	Municipal/City Agriculturist or Municipal/City Mayors MPA Management Council Fisherfolk Association		
	4. Approved Marine Protected Area Ordinance (1 photocopy)	Municipal/City Agriculturist or Municipal/City Mayors MPA Management Council Fisherfolk Association		
	5. Approved MPA Management Plan			
	6. Resolution from Sangguniang Bayan re: Adoption of MPA Management Plan	Sangguniang Bayan		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit letter request/barangay resolution for baseline assessment	1. Receive request letter/resolution from the Office of the Governor	None	1 minute	Administrative Aide IV (Administrative Division, Provincial Agriculturist's Office)
	1.1 Conduct baseline assessment (habitat survey/establish technical description of the proposed area)	None	2 days	Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	1.2 Writing of baseline assessment reports	None	4 days	Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial



	1.3 Approval of endorsement letter and baseline assessment reports	None	5 minutes	Agriculturist's Office) Provincial Agriculturist
	1.4 Submission of report to respective LGUs	None	5 minutes	Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	1.5 Feedbacking/consultation and presentation of assessment result, technical description and map of proposed MPA to LGU and community	None	1 day	Supervising Agriculturist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
2. Drafting, review and approval of Barangay Resolution for MPA establishment	2. Facilitate and render technical assistance in drafting of Barangay Resolution for MPA establishment	None	2 days	Supervising Agriculturist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
3. Drafting of MPA ordinance with	3. Facilitate and render technical	None	2 days	Supervising Agriculturist



<p>the Sangguniang Barangay</p>	<p>assistance in drafting of MPA ordinance</p> <p>3.1 General Public consultation/presentation of survey results and ordinance to the community and signing of commitment</p>	<p>None</p>	<p>1 day</p>	<p>Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office) Supervising Agriculturist Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office)</p>
<p>4. Approval of MPA Ordinance and forwarding to the Sangguniang Panlalawigan for review</p>	<p>4. Forward MPA Ordinance to Sanggunian Panlalawigan</p> <p>4.1 Provision of MPA materials</p>	<p>None</p> <p>None</p>	<p>1 day</p> <p>1 hour</p>	<p>Supervising Agriculturist Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office)</p> <p>Agricultural Technologist (Fishery &amp; Coastal Resource Management Division, Provincial Agriculturist's Office)</p>



	4.2 Formal Launching of MPA/deployment of MPA boundary markers	None	3 hours	Supervising Agriculturist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	4.3 Biophysical assessment and concrete monitoring blocks (CMB) installation and reef survey (if proposed area is coral reef)	None	3 days	Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	4.4 Writing of assessment report for data baseline and feedbacking	None	15 days	Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
5. Creation of MPA Management Council	5. Facilitate the creation of MPA Management Council	None	1 day	Supervising Agriculturist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)



6. Crafting and Adoption of MPA Management Plan	6. Facilitate crafting of MPA Management Plan	None	1 day	Supervising Agriculturist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	6.1 Approval and Adoption of MPA Management Plan	None	1 day	Supervising Agriculturist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	6.2 Information, Education and Communication Campaigns	None	1 day	Agricultural Technologist
	<b>Total</b>	None	1 month, 5 days, 4 hours, 11 minutes	

### 13. Fishery Inputs Support

It is a program of the Provincial Government of Oriental Mindoro (PGOM) that provides fishery inputs (fishery fry/fingerlings, organic fertilizer, agricultural lime, teaseeds, feeds, fertilizer, nets, PE rope, fishing gears) to individual fisherfolk, fisherfolk cooperatives, and associations. This is funded through the Provincial Agriculturist's Office.

<b>Office or Division:</b>	<b>Fishery &amp; Coastal Resource Management Division</b>
<b>Classification:</b>	<b>Complex</b>
<b>Type of Transaction:</b>	<b>G2C</b>
<b>Who may avail:</b>	<b>INDIVIDUAL FISHERFOLK, FISHERFOLK ASSOCIATION/ COOPERATIVE (FCA)</b>



CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Request Letter/Resolution with marginal note of the Provincial Governor/Provincial Administrator (one original copy)		Fisherfolk/Fisherfolk Association/Cooperative		
2. Endorsement Letter from LGU (one original copy)		Municipal/City Agriculturist or Municipal/City Mayors		
3. Certificate of Registration with SEC/CDA/DOLE (one photocopy)		Security Exchange Commission (SEC), Cooperative Development Authority (CDA) Department of Labor and Employment (DOLE)		
4. SP Accreditation (one photocopy)		Sangguniang Panlalawigan		
5. Validation Report (one copy)		Provincial Agriculturist's Office (PAgO)		
6. Masterlist of Fisherfolk beneficiaries (one copy)		Municipal Agriculturist Office/Fisherfolk Association/Cooperative		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit request letter/ resolution with a received copy from the Office of the Governor	1. Receive request letter/ resolution	None	1 minute	Administrative Aide IV (Administrative Division, Provincial Agriculturist's Office)
2. Participate in the on-site validation and submit the required documents (Certificate of Registration, SP Accreditation) one photocopy	2. Conduct On-site validation	None	1 day	Supervising Agriculturist Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)



	2.1Preparation of validation reports and recommendations for approval	None	4 hours	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	2.2.Review and Approval	None	4 hours	Provincial Agriculturist
	2.3Preparation and facilitation of procurement documents		20 minutes	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
3. Receive the inputs and fill up the requisition & issue slip form and client satisfaction survey form	3. Release/ Distribution of fishery inputs and facilitate filling up of requisition & issue slip form and client satisfaction survey form	None	1 day	Supervising Agriculturist Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)





4. Participate in the monitoring and evaluation	4. Monitoring and Evaluation	None	1 day	Aquaculturist II Agricultural Technologist Agricultural Technologist (Fishery & Coastal Resource Management Division, Provincial Agriculturist's Office)
	<b>TOTAL</b>	None	3 days, 8 hours, 21 minutes	