



Department of Health
SAN LAZARO HOSPITAL

**CITIZEN'S CHARTER
MANUAL**



DOCUMENT CODE:

CC - NDD - 001

REVISION NO.

0

DATE EFFECTIVE
June 1, 2019

DEPARTMENT: NUTRITION AND DIETETICS DEPARTMENT

**PROCESS 1: REQUEST FOR NOURISHMENT & NUTRITION
COUNSELING IN-PATIENTS/OUT-PATIENTS**

Schedule of Services: MONDAY - SUNDAY

8:00AM – 5:00PM (MONDAY-FRIDAY OFFICE)

5:30AM – 1:30PM (MORNING SHIFT)

6:00AM – 2:00PM (RECEIVING)

8:00AM – 4:00PM (SOAP-ING/THERAPEUTIC COOK)

11:00AM – 7:00PM (CLOSING SHIFT)

**Services Provided to: IN-PATIENTS AND ALL DEPARTMENT
OUT-PATIENT DEPARTMENT OFFICES**

**Requirements Needed: PATIENT'S HOSPITAL ID/REFERRAL FORM
GOVERNMENT EMPLOYEE ID**

Duration: 1 HOUR

Step	Activities	Forms	Fees	Response Time	Person Responsible
1	Request for Nourishment	Request for Nourishment Form	Php50 snack/ Php100 for Lunch depending on the nature of activity and source of fund	5 working days or as per request date	Admin. Aide VI RND Cook II Cook I
2	Nutrition Counseling In-Patient/OPD	Referral Form	None	1 hour	Clinical Nutritionist-Dietitian
END OF TRANSACTION					