

FOREWORD

“PUBLIC OFFICE IS A PUBLIC TRUST.” This mandate is given to all government officials and employees by the 1987 Constitution. Public trust is imbued with great importance because it ensures the public that there is integrity in the government.

Various measures have been issued to assure the people that the government will provide the utmost quality service. Among these salient measures is the promulgation of the Anti-Red Tape Act of 2007 (Republic Act No. 9485). This law empowers the people through the Citizen’s Charter to overall and to exact accountability honesty and integrity in the government.

In this regard, the San Lazaro Hospital in pursuit of providing comprehensive quality patient care as center for infectious diseases and tropical medicine, the fulfillment of the Citizen Charter is the realization of its quality policy and objective. Moreover, the Citizen’s Charter shall be the vital tool of this Hospital against graft and corruption as through this efficiency in delivery and service to the public outweighs bureaucracy thus integrity to graft in corruption.

It is with great privilege and honor to present the san Lazaro Hospital’s Citizen’s Charter as our driving force towards excellence, competence, efficiency and professionalism.

WINSTON S. GO, MD, MHA
Medical Center Chief

BRIEF HISTORY OF SAN LAZARO

The San Lazaro Hospital was first founded as dispensary in Intramuros by Fray Juan Clemente in 1577. In 1578, it became a hospital serving the sick people of the Walled City who were suffering from leprosy and other diseases. In its 206 years of existence within the walled City, the hospital has been demolished and transferred to four different places within the city, twice by conflagration and twice due to strategic reason: the protection of the city against invasion by Chinese pirates and later by the British invasion of Manila.

In 1974, the San Lazaro Hospital was transferred to its present site, known then as hacienda Mayhaligue by virtue of a Royal Decree signed by the king of Spain. It was Fray Felix Huerta who improved the compound, built a chapel enclosed the premises with stone walls in 1859. The last three religious administrators of the hospital were Fray Felix Huerta, Mariano Martines and Teodoro Fernandez.

In 1898, after 30 years, the Americans took over the hospital declaring it a contagious disease hospital. The hospital was administered by various Filipino and American Physicians.

In 1918, up to present, the hospital have been administrative by Filipino Physician and administrative officers who acted as Chief of Hospital and Superintendent, respectively.

In 1930 and 1931 insane patients of the San Lazaro Hospital were transferred to the National Psychopathic Hospital (National Center for Mental Health). In 1949, the leper patients were transferred to the Tala Leprosarium (Central Luzon Hospital).

To date, San Lazaro Hospital is mandated by the Department of Health as Referral Center for Infectious Diseases with 500 beds. It is involved in health delivery care service, especially for the poor who are suffering

from infectious diseases. It has a continuous and on-going Medical training and research program for medical and paramedical personnel. Some of its short and long range programs are infrastructure are strengthening of the frontline services.

After the Spanish and American Administrators, the following Filipino Physicians became the Chief of Hospital (Medical Center Chief II) of San Lazaro Hospital.

1918-1919	- DR. FLORENTINO AMPIL
1920-1921	- DR. ANDRES CATANIAL
1921-1948	- DR. CATALINO GAVINO
1948-1961	- DR. FELIX VELASCO
1961-1982	- DR. CESAR V. UYLANGCO
1982-1988	- DR. CATHERINE P. RANOA
1988-1997	- DR. VIRGILIO L. GONZALES
1998-1999	- DR. ALICIA L. CASPELLAN
1999-2003	- DR. BENITO F. ARCA
2003-2010	- DR. ARTURO B. CABANBAN
2010-2011	- DR. ENRIQUE TAYAG (OIC)
2011-Present	- DR. WINSTON S. GO

DOH VISION

A global leader for attaining better health outcomes, competitive and responsive health care system, and equitable health financing.

SLH VISION statement:

Center of Excellence in Infectious and Tropical Medicine.

SLH MISSION Statement:

Provide quality patient care.

Provide a comprehensive, quality, education, training and research program.

Provide relevant and updated information on health promotion and disease prevention.

HOSPITAL QUALITY POLICY

“San Lazaro Hospital is committed to be the leading healthcare facility for infectious and tropical medicine providing our clients with comprehensive quality patient care, training, education, and research services delivered with competence, excellence, commitment, compassion, and professionalism based on statutory and regulatory requirements; and shall continually improve our quality management systems to the satisfaction of our clients and other stakeholders”.

SERVICE PLEDGE:

We, the officials and employee of the San Lazaro Hospital pledge and commit to deliver quality public services as promised in this charter. Specifically, we will: Serve with Integrity. Be prompt and timely. Display procedures, fees and charges. Provide feedback mechanism. Be polite and courteous. Demonstrate sensitivity and appropriate behavior and professionalism. Wear proper uniform and identification. Be available during office hours. Respond to complaints. Provide a comfortable waiting area. Treat everyone equally.

FEEDBACK AND REDRESS MECHANISM

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

- Accomplish our Feedback Form available in the offices and put this in the drop box at the Public Assistance and Complaints Desk.
- Send your Feedback/Complaints through e-mail (slhpublicassistance@gmail.com) or call us at (02 3099544)
- Talk to our OFFICER OF THE DAY

If you are not satisfied with our service, your written/verbal complaints shall immediately be attended to by the Officer of the Day at the Public Assistance and Complaints Desk.

LIST OF FRONTLINE SERVICES

A.Procedure for Complaints, Recommendations, Inquiries, Suggestions.

Steps	Activity	Responsible Officer/ Employee
1	Member of the public submits the complaint, recommendation, inquiry, or suggestion in person, by text, by phone call, by mail, or by e mail.	The Medical Center Chief II or the Head of the concerned office/center/bureau, the Integrity Management Committee Chairperson, the Public Assistance Unit Head, the Grievance Committee Chairperson, or the Supervising officer
2	Acknowledges receipt of report	Receiving staff member
3	Notifies concerned person on action taken	Officer in Step 1.0

THE SLH MAY BE CONTACTED AT 732-37-76 to 732-31-06 Loc. 125 (Public Assistance Unit) Integrity Management Committee), 103 (Medical Center Chief II).

B.Procedure for Public Assistance and Complaint Desk (LEGAL SERVICE)

Steps	Activities	Necessary forms	Processing time	Responsible Officer/employee
1	Fill-up complaint form and submit it to the Desk Officer	Complaint form	3-5 minutes	Desk Officer
2	Desk officer shall identify the causes and nature of the		5-10 minutes	Desk Officer

	complaints. If:			
2.1	Policy- Desk Officer shall submit/forward the complaint to the IAO	Complaint form	3-5 minutes	Desk Officer
2.2	Violation of RA 9262 (VAWC)- Desk Officer shall forward the complaint to the WCPU	Complaint Form	3-5 minutes	Desk Officer
2.3	Hospital Employee-Desk Officer shall hear and resolve the initial complain. If resolve- Desk Officer shall submit a report to the Prosecution Unit If not resolve- Desk Officer shall elevate the complaint to the Prosecution Unit	Complaint Form	15-30 minutes 3 days maximum 3-5 minutes	Desk Officer Desk Officer Desk Officer
3	Prosecution Unit shall conduct an Investigation	Complaint Form	w/in 5 days upon receipt of the complaint	Prosecutor
4	Prosecution Unit shall hear and resolve the complaint.	Complaint Form	5 days upon receipt of the complaint and shall be terminated w/in 20 days thereafter.	Prosecutor

THE SLH MAY BE CONTACTED AT 732-37-76 to 732-31-06 Loc. 125 (Legal Service) Integrity Development Committee), 103 (Medical Center Chief II).

C.Step by Step procedure for 8 to 16 hours duty (Pharmacy)

Step	Activities	Fee	Necessary Form	Documentary Requirement	Processing Time	Responsible Officer/ employee
1	<p><u>DISPENSING: REGULAR/CHARITY</u></p> <p>Receives Prescription orders from wards and checks if the following are correctly written in:</p> <p>a.) Generic name</p> <p>b.) Proper dosage form</p> <p>c.) No. of patients coincide with the no. of drugs requested.</p> <p>(Notifies Doctors, Supervisors, Head Nurse on Erroneous Prescription)</p> <p>Prepare prescription orders, labels, checks and fills prescription orders</p> <p>Records prescription order to daily issuance</p>	None	Prescription requisition form	Prescription orders physicians, supervisors, head nurse and nursing attendant signature	3 minutes to 5 minutes	Pharmacist
2		None	Prescription requisition form		5 minutes	Pharmacist

3		none	Ledger Cards		10 minutes to 30 minutes	Pharmacist
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C.1

Steps	Activities	Fee	Necessary Form	Documentary Requirement	Processing Time	Responsible Officer/Employee
1	<u>OPD SALES</u> Receives Prescription orders with their corresponding scheduled cards and checks prescription presented (mostly on Anti-Rabies Vaccine with their skin test result- ERIG, ATS, PCEC, PVRV)	None	Prescription Schedule Cards	Prescription orders with physicians trodat and signatures	2 minutes	Pharmacist
2	Prepare assessment for payment to cashier	None	Prescription assessment form	Prescription orders with physicians trodat and signatures & pharmacy assessment form	45 seconds per prescription	Pharmacist
3	Checks, dispenses prescription orders based on assessment prepared with corresponding receipt from cashier		Official receipt		1 ½ minutes	Pharmacist
4	Record sold drugs/medicines daily		Prescription assessment form	Prescription orders with physicians trodat and signatures & Pharmacy assessment form	5 hours	Pharmacist/Clerk

C.2

Steps	Activities	Fee	Necessary Form	Documentary Requirement	Processing time	Responsible Officer/Employee
1	<u>PDAF</u> Receives prescription orders with their corresponding scheduled cards and checks prescription & documents from MSS. (mostly on Anti-Rabies Vaccine with their skin test result- ERIG, ATS, PCEC, PVRV)	None	-	Guarantee letters and acknowledgement receipts from MSS	1 Minute	Pharmacist/Clerk
2	Prepare assessment for payment to cashier		Prescription & assessment form	Prescription orders with physicians trodat and signatures, Pharmacy assessment form, Guarantee letters and acknowledgement receipts from MSS	30 seconds per prescription	Pharmacist/Clerk
3	Checks, dispenses prescription orders based on assessment prepared with corresponding receipt from cashier		Prescription assessment form & official receipts if applied	Prescription assessment form	30 second per prescription	Pharmacist

4	Record sold drugs/medicines daily		Prescription assessment form	Pharmacy assessment form	5 minutes per prescription	Pharmacist/clerk
5	Submits to accounting office the documents for PDAF with their corresponding charge slips per patient.				5 minutes per prescription	Clerk

C.3

Step	Activities	Fee	Necessary form	Documentary Requirement	Processing Time	Responsible Officer/Employee
1	<u>PAYWARD/PHILHEALTH</u> Receives Prescription orders and checks	None	Prescription form for Payward and PhilHealth	Prescription orders, physicians, head nurse, supervisors signatures	1 minute	Pharmacist
2	Prepares charges slips and dispenses billed drugs/medicines per		Charge slip	Prescription orders with Pharmacist signatures	5 minutes per charge slip	Pharmacist

3	individual patients					
	Record billed drugs/medicines		Ledger cards		30 minute	Pharmacist

C.4

Step	Activities	Fee	Necessary Form	Documentary Requirement	Processing Time	Responsible Officer/Employee
1	<u>DISPENSING ARV DRUGS FOR HIV/AIDS PATIENTS</u> Checks patients/Enrollees booklet, prescription and follow-up form	None	Health regimen booklet (patient's copy)		2 minutes	Pharmacist
2	Transcribes the patient's prescription to their booklet for reference	None	Enrollees Follow-up Form		5 minutes	Pharmacist
3	Filled-up the enrollees booklet & follow-up forms	None	Prescription form treatment HUBS copy		2 minutes	Pharmacist

**D.PERIOD OF ACTION ON PROCUREMENT ACTIVITES (BAC)
(Revised Implementing Rules and Regulations Annex “C”)**

LATEST ALLOWABLE TIME

Stage	Activities	Deadline	Goods	Infrastructure	Project	Consulting Services
				For ABC 50M and below	For ABC above 50M	
1	Advertisement/ posting of invitation to Bid/Request for Expression of Interest		7 cd	7 cd	7 cd	7 cd
2	Eligibility Check (and Short Listing, in case of Consulting Services)		Refer to Stage 5	Refer to Stage 5	Refer to Stage 5	20 cd
3	Issuance and availability of Bidding Documents	From 1 st day of Stage 1 until Stage 5				
4	Pre-bid Conference	12 cd before Stage 5	1 cd	1 cd	1 cd	1 cd
	Request for clarification	10 cd before stage 5				
	Supplemental/Bid Bulletin	7 cd before stage 5				
5	Submission and receipt of Bids	45 cd from the last day of stage 1 for Goods. 50/65 cd from last day of stage 1 for infrastructure Projects. 75 cd from the last day of stage 1 for consulting services	1 cd (includes opening of bids and eligibility check)	1 cd (includes opening of bids and eligibility check)	1 cd (includes opening of bids and eligibility check)	1 cd (includes opening of bids)
6	Bid Evaluation		7 cd	5 cd	7 cd	21 cd + 2 cd for

						approval of ranking
7	Notification for negotiation		n/a	n/a	n/a	3 cd
8	Negotiation		n/a	n/a	n/a	10 cd
9	Post-qualification		30 cd	30 cd	30 cd	30 cd
10	Approval of resolution/Issuance of Notice of award		7 cd	4 cd	7 cd	7 cd
11	Contract preparation and signing		10 cd	10 cd	10 cd	10 cd
12	Approval of contract by higher authority		15 cd	5 cd	15 cd	15 cd
13	Issuance of Notice to proceed		3 cd	2 cd	3 cd	3 cd
Total Time			124 cd	113 cd	144 cd	170 cd

**D.1. PERIOD OF ACTION ON PROCUREMENT ACTIVITES
(Revised Implementing Rules and Regulations Annex “C”)**

EARLIEST POSSIBLE TIME

Stage	Activities	Deadline	Goods	Infrastructure	Consulting Services
1	Advertisement/ posting of invitation to Bid/Request for		7 cd	7 cd	7 cd

	Expression of Interest				
2	Eligibility Check (and Short Listing, in case of Consulting Services)		Refer to Stage 5	Refer to Stage 5	3 cd (1cd for eligibility, 1 cd for short listing, and 1 cd for notice)
3	Issuance and availability of Bidding Documents	From 1 st day of Stage 1 until stage 5			
4	Pre-bid Conference	12 cd before Stage 5	1 cd	1 cd	1 cd
	Request for clarification	10 cd before Stage 5			
	Supplemental/Bid Bulletin	7 cd before Stage 5			
5	Submission and receipt of Bids		1 cd (includes opening of Bids and eligibility check)	1 cd (includes opening of Bids and eligibility check)	1 cd (includes opening of bids)
6	Bid Evaluation		1 cd	1 cd	1 cd + 1 cd for approval of ranking
7	Notification for negotiation		n/a	n/a	1 cd
8	Negotiation		n/a	n/a	1 cd
9	Post-qualification		1 cd	1 cd	1 cd
10	Approval of resolution/Issuance of Notice of award		2 cd (1 cd for BAC resolution and 1 cd for NOA)	2 cd (1 cd for BAC resolution and 1 cd for NOA)	2 cd (1 cd for BAC resolution and 1 cd for NOA)
11	Contract preparation and signing		2 cd (1 cd for contract preparation and 1 cd for contract	2 cd (1 cd for contract preparation and 1 cd for contract	2 cd (1 cd for contract preparation and 1 cd for

			signing	signing	contract signing
12	Approval of contract by higher authority		1 cd	1 cd	1 cd
13	Issuance of Notice to proceed		1 cd	1 cd	1 cd
Total Time			28 cd	28 cd	34 cd

E. Procurement Process for items included in the Approved annual Procurement Plan Preparation of Public Bidding

Step	Activity	Responsible Office/Employee
1	Preparation/Planning <ul style="list-style-type: none"> - Prepares notice to all end-users the scheduled pre-procurement conference, - Conduct Pre-procurement conference - Discuss the details in the submitted items as to complete specifications with the end-user/program managers - Requires all end -users/program managers to submit the required documents (PPMP) - Discuss and consolidate for the creation of APP. - Facilitate the Bidding documents and prepare notices of advertisement. 	BAC
2	Advertisement and Issuance of Bidding documents including bid bulletins to prospective bidders <ul style="list-style-type: none"> - Advertise base ED-QA-BAC-001 ref. Sec. 21 & 	BAC

	Annexed C and Issue Bidding document to prospective bidders upon payment of the corresponding bidding document fee see GPPB Resolution No. 04-2012	
3	Conduct of Pre –Bid Conference <ul style="list-style-type: none"> - Discuss the details and agency requirements per category to prospective supplies - Provide the instructions on how to prepare and submit their bid proposal. - Discuss the additional requirements - Clarifies issues and concerns relative to the items to be bidden. 	BAC
4	Receiving of Bid proposal <ul style="list-style-type: none"> - To prepare the venue and drop boxes, attendance sheets, abstract of bids and materials to be used in the opening of bids. - Receives the bid Proposal from participating Bidders 	BAC
5	Opening of Bid Proposal <ul style="list-style-type: none"> - Check the presence of the documentary requirements based on the checklist - Announce the bidders who are considered eligible from those who failed, inform the concerned bidders on the deficiencies noted and return the documents with the envelop B unopened. - Proceed to checking the documentary requirements for the financial proposal. 	BAC

	<ul style="list-style-type: none"> - Declare the qualified bidders. - Post in the Abstract of Bids the bid offered as written in the Bid Proposal submitted - Instruct the bidders to acknowledge the correctness of the bid offer as copied in the Abstract Bids. - Inform the Bidder of the “No Contact Rule” 	
6	Review of Documents <ul style="list-style-type: none"> - Issue notice of “Jury Duty” to the TWG members to conduct preliminary evaluation - Review, verify and validate of documents submitted. - Collect recommendation made by the TWG. 	BAC
7	Post Evaluation <ul style="list-style-type: none"> - Review the evaluation reports submitted by TWG and decides on it. - Issue notification to possible winning bidder as to additional requirements to be submitted within 7 days from receipt of the notice, including the required samples, if required. - Conduct post evaluation and determine the lowest calculated responsive bidder or the Highest rated responsive bidder. If the bidder passed and the Post evaluation process the BAC shall issue BAC Resolution and Notice Of AWARD 	BAC
8	Reparation of BAC Resolution and Issuance of Notice of Award	BAC

	<ul style="list-style-type: none"> - Prepare and sign the BAC resolution, price schedules and NOA for signature of BAC and for approval of the MCCII within 7 days upon completion of the Post Evaluation. - Furnish the Procurement Department, end-users and other concerned offices of the copy of approved documents. 	
9	Issuance of NOA <ul style="list-style-type: none"> - Notify the winning bidder to get the approved NOA and submit the required Performance Bond within 10 days fro receipt thereof. 	BAC

E.1. Policy and procedures in handling complaints and queries from receipt of MR/letter to resolution of protest.

Step	Activity	Required Documents	Fee	Maximum Time	Responsible Officer/Employee
1	Receiving of request of Motion for Reconsideration	Written request of Motion for reconsideration	None	Within 3 cd	BAC
2	Deliberation of Motion for Reconsideration		None	Within 7 cd	BAC
3	Resolution of Motion for Reconsideration		None		BAC
4	Issuance of the decision	Issue its decision to the bidder thru a letter.	None		BAC

F. Procedure for Recruitment (HRMD)

STEP	Activity	Fee	Necessary Forms	Required Documents	Maximum Time	Responsible Officer/Employee	Allowable Extension
1	Acceptance of Application Documents	N/A	Updated Resume Form 212- Personal Data Sheet	Application letter addressed to the MCCII indicating the position, Photocopy of the following documents(if applicable) <ul style="list-style-type: none">- Diploma- Transcript of Record- Certificate of training, seminars attended- CSC eligibility- PRC License and Board rating		HRM Department	
2	Pre-Screening of application			Submission of additional requirements such as but not limited to certificate of employment with duties and		HR Staff	

				responsibilities may be required			
3	Preparation of Candidates Line-up					HR Staff	
4	Schedule of Interview					HSPB Secretary	
5	Interview and Evaluation of Applicant		Oral Interview Assessment Form of the applicant			Hospital Selection and Promotion Board (HSPB)	
6	Preparation of Recommendation					HSPB Secretary/MCCII	

F.1 Procedure for Promotion

STEP	Activity	Fee	Necessary Forms	Required Documents	Maximum Time	Responsible Officer/Employee	Allowable Extension
1	Acceptance of Application Documents	N/A	Updated Resume, Personal Data Sheet(CS Form 212)	<p>Application letter addressed to the MCCII indicating the position being applied for.</p> <p>Performance Rating for the last two (2) grading period.</p> <p>Photocopy of the ff.(if applicable)</p> <p>Cert. of trainings or seminars attended.</p>		HR Staff	

				<p>Eligibility</p> <p>PRC License/Board Rating</p> <p>Diploma, Transcript of Records or any School Records for those who updated their studies.</p>			
2	Pre-screening of Application			<p>performance evaluation rating.</p> <p>Fill-up the Employee Work Attitude Appraisal Form</p>		HR Staff	
3	Preparation of Candidates Line-up					HR Staff	
4	Schedule of Interview					HSPB Secretary	
5	Interview and Evaluation of Applicant					HSPB	
6	Preparation of Recommendation		Tabulation of Results for Evaluation Promotion			HSPB Secretary/MCCII	

G.Procedure for Availment of blood, laboratory and diagnostic procedure, medicines, medical supplies and animal bite vaccines thru Medical Assistance Program. (MAP)

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Receiving Referrals	N/A	Brgy. Clearance/Brgy. Indigency, request and/or referral from solons.	referral from the doctor Indorsement Letter (QR-HOPSS-MSS-ED001)		Medical Social Worker
2	Gathering Information					Administrative Aide
3	Generation of Indorsement Letter					Administrative Aide
4	Processing of Documents		three (3) photocopy of the Indorsement Letter			MSW
5	Documentation and Filing			Recordings Logbook (QR-HOPSS-MSS-W002) register the patient's name at the Medical Assistance Program (MAP) General Registry (QR-HOPSS-MSS-W013B) MAP Patient Information		MSW Administrative Aide

				Form (QR-HOPSS-MSS-F013)		
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G.1. Procedure Availment of blood, laboratory and diagnostic procedure, medicines and medical supplies not available in the hospital by In-patient thru Philhealth

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Receiving Referrals from ward Receive referral from the doctor on the need of the patients.	N/A	referral from the doctor on the need of the patients			Medical Social Worker
2	Orientation Orients the patient's relative about the referral made by the attending physician.					Medical Social Worker
3	Coordination Coordinate the needed assistance to the concern agencies					Medical Social Worker
4	Processing of Documents Process the necessary documents			For medicine: 1) Acknowledgement Receipt (In-Patient) (QR-HOPSS-MSS-F003) 2)		Medical Social Worker

				<p>Prescription</p> <p>3) Photocopy of Acknowledgement Form from billing or ORE Certificate.</p> <p>For Blood or Diagnostics procedure:</p> <p>1) Acknowledgement Receipts (In-Patient) (QR-HOPSS-MSS-F003) 2) Request for blood or diagnostics procedure</p> <p>3) Clinical Abstract</p> <p>4) Acknowledgement Form from Billing or ORE Certificate.</p> <p>Official receipts should be attached to the acknowledgement receipts.</p>		
5	<p>Documentation and Filing</p> <p>Shall record the activity to the Individual Daily Recordings Logbook.</p> <p>While the Administrative Aide shall register the patient's name at the Medical Assistance Program (MAP)</p>					Medical Social Worker

G.2. Procedure for Availment of Vaccine Assistance for Animal Bite Patients through NBB Philhealth

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Receiving Referrals from ward Receive referral from the doctor on the need of the patients	N/A				Medical Social Worker
2	Verification Shall instruct the patient to the Philhealth Cares for verification If active instruct the patient to go back to the Medical Social Worker.					Medical Social Worker
3	Interview and Assessment Shall interview and classify the patient, determine the kind of Philhealth the patient have and check the category					Medical Social Worker

	of exposure.					
4	<p>Processing of Documents</p> <p>Process the necessary documents needed for the patients to avail vaccine</p>			<p>Animal Bite Form</p> <p>Claim Summary Report, Claim Form 1, Claim Form 2, Member Data Record,</p> <p>Acknowledgement Receipt (Out-patient)</p>		Medical Social Worker
5	<p>Documentation and Filing</p> <p>record the activity to the Individual Daily Recordings Logbook (</p>					Medical Social Worker
6	<p>Submission of needed documents for hospital claims</p> <p>Submit all the papers to the Billing Section upon the end of vaccination of the NBB patients for hospital claim every Friday.</p>					Medical Social Worker

G.3. Procedure for Availment of Animal Bite Vaccine for Indigent Patients through Regular Fund (SLH Indigency Fund)

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Receiving of Referrals Receive referral from the doctor on the need of the patients. Please refer to			referral from		Medical Social Worker
2	Interview and Assessment Interview and classify the patient.					Medical Social Worker
3	Process request and approved Availment of free animal bite vaccine			Three (3) copies of the Acknowledgement Receipt		Medical Social Worker

G.3 Procedure for Availment of Medical Assistance through Walk-in Donor

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
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1	Receiving of Referrals Receive referral from the doctor on the need of the patients.	N/A		Referral from		Medical Social Worker
2	Facilitating Referrals Process the necessary documents needed for the patient to avail the assistance such as			Acknowledgement receipt		Medical Social Worker
3	Documentation and Filing Record the activity in the Individual Daily Recordings Logbook					Medical Social Worker

H. STEP BY STEP PROCEDURE IN THE MEDICAL SOCIAL SERVICE (OPD)

Step	Activities	Fee	Activity Details	Necessary Forms	Processing time	Responsible Officer/Employee

1	Receiving of Referrals	None	<p>Medial Social worker receive referral from the doctor on the need of the patients:</p> <ul style="list-style-type: none"> a. Availment of Animal Bite vaccine thru Regular Fund b. Senior citizen free Laboratory thru Senior Citizen fund c. Laboraory Examination Discount d. Availment of medicines, laboratory and animal bite vaccines thru Medical Assistance Program 	<p>MSS Referral Forms for In-patient and Out-patient</p> <p>Documents Required</p> <ul style="list-style-type: none"> - Referral 	5 minutes	Medical Social Worker
2	Interview and Referrals	None	Medical Social Worker shall and classify the patient	<p>MSS Assessment Tool</p> <p>Documents Required - none</p>	5 minutes	Medical Social Worker
3	Process request and approval	None	<p>A. Availment of free animal bite vaccine</p> <p>1. Medical Social Worker shall accomplished three copies of the Acknowledgement</p>	<p>Acknowledgement receipt for Out-patient</p> <p>Document required – Prescription of vaccine and schedule</p>	5 minutes	Medical Social Worker

			<p>Receipt (out-patient)</p> <p>2. Forward the accomplished file to the pharmacy section</p> <p>B. Availment of free Laboratory for Senior Citizen</p> <p>1. Medical Social Worker shall affixed his/her signature at the charge slip of the laboratory and note that the said assistance is to be charge to senior citizen fund</p> <p>C. Availment of laboratory discount.</p> <p>1. MSW shall indicate the classification of the patient on the laboratory request and charge slip and advise to go to the cashier for the patient share.</p> <p>D. Availment of medicines, laboratory and animal bite</p>	<p>Documents required – Laboratory request and charged slip</p> <p>Documents required – Laboratory request and charge slip</p>	<p>2-3 minutes</p>	<p>Medical Social Worker</p> <p>Medical Social Worker</p>
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			<p>vaccines thru Medical Assistance Program.</p> <ol style="list-style-type: none">1. MSW receive referral from the doctor on the need of the patient.2. Administrative aide shall collect the requirements and gather the information needed in the WebPAIS.3. Administrative Aide shall encode the information to the system in order to generate an Indorsement Letter.4. Patient must have three photocopy of the Indorsement Letter. MSW shall process the necessary documents needed and instruct the patient/relative to proceed to the concerned	<p>➤ Acknowledgement Receipt for out patient</p> <p>Documents required- Brgy. Indigency</p> <p>- Request and referral</p>	5-10 minutes	<p>Administrative Aide I</p> <p>Medical Social Worker</p>
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I. STEP BY STEP PROCEDURE IN THE MEDICAL SOCIAL SERVICE (Emergency Room Admitting Section)

Step	Activities	Fee	Activity Details	Necessary Forms	Processing time	Responsible Officer/Employee
1	Receiving of Clinical Cover Sheet for classification	None	Medical Social Worker assigned at emergency room shall receive the Clinical Cover sheet brought by the patient/watcher for interview and classification	Documents required - Clinical cover sheet	1 minute	Medical Worker Social
2	Pre-admission Counseling	None	Medical Social Worker shall orient the patient/watcher the purpose of the interview and the classification. Orient patient on the rules and regulation of the hospital and the scope of service of Medical Social Service		5 minutes	Medical Service Social
3	Interviewing and Issuance of MSS Card	None	Assessment Tool		5-10 minutes	Social Worker
4	Recording of Classification	None	General record the classification of the patient on the clinical sheet with his/her name and signature and the	General Registry HOMIS	2 minutes	Social Worker

			date of interview. MWS shall also record the patient's General Registry and encode the classification at the HOMIS			
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J. STEP BY STEP PROCEDURE IN THE MEDICAL SOCIAL SERVICE (In-Patient Section)

Step	Activities	Fee	Activity Details	Necessary Forms	Processing time	Responsible Officer/Employee
1	Receiving Referrals from ward	None	Medical Social Worker receive referral from the doctor on the need of patients		1 minute	Social Worker
2	Facilitating Referrals	None	<p>A. Availment of medical assistance thru Philhealth MAP, PCSO Endowment Fund, Regular Fund and walk-in donor</p> <p>B. Managing of Referrals from other agencies</p> <p>C. Managing unclaimed Cadaver</p> <p>D. Managing of Referrals from</p>		5 minutes	Social Worker

			<p>three photocopy of the Indorsement Letter. MSW shall process the necessary documents needed and instruct the patient/relative to proceed to the concerned department.</p> <p>B. Managing of Referrals from other agencies</p> <p>1. The MSW receives referral and determines if the hospital can provide patient's request</p> <p>2. MSW shall consult other health personnel regarding the availability of the request</p> <p>3. If the hospital cannot accommodate the patient's request, inform the patient and refer back to the referring agency with the return referral slip properly filled up.</p>	Referral from other agency	3-5 minute	Social Worker
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			<p>4. If the request is available, MSW conduct intake interview to classify the patient</p> <p>5. MSW performs necessary casework intervention and stablished continuing working relationship with the referring agency</p> <p>C. Management of patient with no relatives/watcher</p> <p>1. The Medical Social Worker receives referral on relocation of relative from the ward</p> <p>2. retrieves the MSW record for the complete data of the patient gathered during the interview</p> <p>3. Refers and coordinated with Baragay officials and Local DSWD, police mobile for location of relative</p> <p>4. Home conduction for un-relocated</p>			
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			<p>relatives within three consecutive attempts and if the patient was advice for go home by his/her attending physician</p> <p>D. Managing Unclaimed Cadaver</p> <p>1. The Medical Social Worker receives referral on unclaimed cadaver from mortuary unit staff directly supervises by the nursing service</p> <p>2. Validates the name of patient from chart</p> <p>3. Retrieves the MSW record for the complete data of the patient gathered during the interview.</p> <p>4. Refers and coordinated with Barangay officials and local DSWD, police mobile and tri-media for location of relatives</p> <p>5. The Medical</p>	<p>1. Referral from the mortuary</p> <p>2. Baragay Certificate</p> <p>3. Death Certificate</p> <p>4. I.D</p> <p>5. Tri-media certificate</p> <p>6. Certificate of non-residence</p> <p>7. Social Case study</p> <p>8. Agency Referral from other agency</p>	<p>1minute</p> <p>5 minute</p> <p>1 week</p> <p>1 day</p>	<p>Social Worker</p> <p>Social Worker</p>
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			<p>Social Worker shall secure certification for all exhausted efforts to locate the relatives</p> <p>6. The MSW ensures the proper documentation of the cadaver for reference</p> <p>7. the MSW recommends paupers burial in case no claimants or failed to locates patient's relative within the required period of (3 months)</p> <p>8. The MSW prepares a letter for pauper's burial and refer it to the Administrative/Chief of hospital for approval.</p> <p>9. Document and files record</p>		<p>3 months</p> <p>1 day</p>	
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K. STEP BY STEP PROCEDURE in payment of DRUGS, LABORATORY and OTHER MISCELLANEOUS TRANSACTION TO CASH MANAGEMENT DEPARTMENT.

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
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1	To receive payments from various creditors as to the following:					
	a) Drugs & Medicines			Assessment Form	2 minutes	Cash Clerk on-duty
	b) Laboratory & Other Medical Procedures			Charged slip	2 minutes	Cash Clerk on-duty
	b.1. Laboratory examination			Charged slip	2 minutes	Cash Clerk on-duty
	b.2. Dental service			Charged slip	2 minutes	Cash Clerk on-duty
	b.3 X-ray / Ultrasound & others			Charged slip	2 minutes	Cash Clerk on-duty
	c) Hospital Bills			Charged slip	2 minutes	Cash Clerk on-duty
	c.1. Donation			Charged slip	2 minutes	Cash Clerk on-duty
	d) Other / Miscellaneous			Charged slip	2 minutes	Cash Clerk on-duty
	d.1. Affiliation fee			Billing statement	2munites	Cash Clerk om-duty

	d.2. Bid documents (non-refundable)			Order Payment	of	2 minutes	Cash Clerk on-duty
	d.3. Performance Bond (refundable)			Order Payment	of	2 minutes	Cash Clerk on-duty
	d.4. Professional fee			Charged slip		2 minutes	Cash Clerk on-duty
	d.5. Hospital share from Pay Consultation			Charged slip		2 minutes	Cash Clerk on-duty
	d.6. OPD Card			Charged slip		2 minutes	Cash Clerk on-duty
	d.7. Watcher's ID			ID		2 minutes	Cash Clerk on-duty
	d.8. Oxygen consumption			Charged slip		2 minutes	Cash Clerk on-duty

2	To issue official Receipts (OR)					
	For every payment made by various creditor such as:					
	a) Drug & Medicines					
	b) Laboratory & Other Medical Procedures			Official Receipt	2 minutes	Cash Clerk on-duty
	b.1. Laboratory examinations			Official Receipt	2 minutes	Cash Clerk on-duty
	b.2. Dental service					
	b.3. X-ray/Ultrasound & others			Official Receipt	2 minutes	Cash Clerk on-duty
				Official Receipt	2 minutes	Cash Clerk on-duty
				Official Receipt	2 minutes	Cash Clerk on-duty
	c) Hospital Bills			Official Receipt	2 minutes	Cash Clerk on-duty
	c.1 Donation					
				Official Receipt	2 minutes	Cash Clerk on-duty
	d) Others/Miscellaneous					

	d.1. Affiliation Fee					
	d.2 Bid documents (non-refundable)					
	d.3. Performance Bond (refundable)			Official Receipt	2 minutes	Cash Clerk on-duty
	d.4. Professional Fee			Official Receipt	2 minutes	Cash Clerk on-duty
	d.5. Hospital share from Pay Consultation					
	d.6. OPD Card			Official Receipt	2 minutes	Cash Clerk on-duty
	d.7. Watcher's ID					
	d.8. Oxygen consumption			Official Receipt	2 minutes	Cash Clerk on-duty
				Official Receipt	2 minutes	Cash Clerk on-duty
				Official Receipt	2 minutes	Cash Clerk on- duty
				Official Receipt	2 minutes	Cash Clerk on-duty
				Official Receipt	2 minutes	Cash Clerk on-duty

L. SPEP BY STEP PROCEDURE – OUT PATIENT DEPARTMENT (OPD)

Steps	ACTIVITIES FOR ANIMAL BITE CASES	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Get Hospital Card for registration			ID card Information Sheet	5 min	N.A. on duty
2	Pay registration fee at the cashier	Php. 50.00		Charge slip	5 min	Cashier
3	Proceed to medical record section for encoding of information				5 min	N.A on duty
4	Proceed to consultation room			Blotter form Schedule of injection Prescription	10-15 min	Resident on Duty
5	Proceed to pharmacy section <ul style="list-style-type: none"> ➤ For assessment of medicines ➤ To pay for medicines at the cashier ➤ To releasing to get medicines paid for 			Prescription Receipt Payment of		Pharmacist/Cashier

6	To proceed to injection area			Schedule of injection		Nurse on Duty
7	Check with prescribed medicines for testing				30 min	Nurse on duty
8	Follow step no. 4 procedure to consultation room for reading of testing			Schedule of injection	5 min	Resident on Duty
9	Follow step 5-6 procedure			Prescription		Nurse on duty
10	Advice to come back on scheduled date of injection			Schedule of injection		Nurse on duty

I.1 STEP BY STEP PROCEDURE – OUT PATIENT DEPARTMENT (OPD)

Steps	ACTIVITIES FOR Medical CASES	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Get Hospital Card for Registration			ID Card Information Sheet	5 min	N.A on duty
2	Pay registration fee at the cashier			Charge slip	5 min	Cashier
3	Proceed to medical record section for encoding of			Information sheet	5 min	Medical Record Staff

	information			Blotter		
4	Proceed to consultation room 4.1 Patient for admission Refer to: 4.1.1 Emergency Room (ER) 4.1.2 Triage (PTB)			Blotter Prescription	10-15 min 5 min 5 min	Resident on Duty Nurse on duty N.A. on duty
	4.2 Patient for diagnostic procedure 4.2.1 refer to laboratory SACCL 4.2.2 refer to radiology department		Laboratory request			Resident on duty

			X-ray request			
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M. STEP BY STEP PROCEDURE (EMERGENCY ROOM)

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/Employee
1	Assess/ Direct patients according to priority of care				3 mins.	Nurse/ N.A on duty
2	Fill up patient information slip			Information slip	5 mins.	Nurse/N.A. on duty
3	Instruct watcher/ patient to proceed to collection area for registration fee and to secure admission number	P20.00		Registration No. and Admission No.	5-10 mins.	ROD/N.A.
4	Assess, examine and evaluate patient's condition <ul style="list-style-type: none"> - Take vital signs - Admitting history - Admitting diagnosis 			Patients medical record	10-15 mins	ROD/ Nurse
5	Instruct/ Accompany watcher to central admitting to secure clinical case record				5-10 mins.	Nurse/N.A.

6	Review the accuracy and completeness of clinical case record to be attached to			Medical record on patient chart	5 min	Nurse/N.A.
7	Inform ward personnel regarding admission and clinical status of patient through telephone				3 min	N.A. on duty
8	Accompany patient to ward and endorse				5 min	N.A. on duty

N. STEP BY STEP PROCEDURE (Billing Section)

Step	Activities	Fee	Documentary Requirement	Necessary Forms	Processing time	Responsible Officer/ Employee
1	Issuance and orientation of Philhealth Forms			Philhealth Form 1 & Form 2	5 mins.	Billing Clerk on duty
2	Prepares patient's bill			Billing Statement/Statement of Account	5-10 mins	Billing Clerk on duty
3	Attendant pick up the patients bill			Billing Statement/Statement of Account	3 min	Nursing Attendant on duty
4	Patients pay the bill	As stated in the bill		Billing Statement/ Statement of Account	10-30 mins.	Patients watcher (Cashier)
5	Issuance of discharge slip			Official Receipt/and other provision like PDAF,	3 min	Billing Clerk on duty

				Indigency fund and others		
6	Filing of PHIC			Claim Form 1, Claim Form 2 & Claim Form 3	3-7 mins.	Billing Clerk on duty
7	Prepare affiliation fee, user's fee, preceptorship, tour, MCI and other related fees.	As stated in the bill		Billing Statement/Statement of Account	3-7 mins.	Billing Clerk on duty

O. Turn Around Time (TAT) for Laboratory Test:

Section	Test	TAT
Hematology	CBC	3-4 hours *STAT-within 1 hour
	Malarial Smear	3-4 hours
	Filarial Smear	3-4 hours
	PT/APTT	3-4 hours
	PBS	After 1 day, excluding weekends and holidays
	CT/BT	3-4 hours
	ESR	3-4 hours
Clinical Chemistry	Tests that require fasting: FBS, LIPID PROFILE	Specimens received before 12 noon will be released at 3pm
	Tests that does not require fasting: RBS, BUN, SGPT, ALP, TBI, IDB, DBI	
	Other Body Fluids: CSF, Pleural/Peritoneal/Ascitic glucose, CSF,/Pleural/Peritoneal/Ascitic protein,	

	Electrolytes: Na, K, Cl, iCa, tCa		Within 2-3 hours
Microbiology	Culture and Sensitivity:		
		CSF	After 5 days if Negative After 7 days if Positive
		Pleural fluid	
		Peritoneal/Ascitic	
		Pericardial	
		Urine	After 2 days if Negative After 5 days if Positive
		Stool/Rectal Swab	After 4 days if Negative After 5 days if Positive
		Nose and Throat Swab	After 4 days if Negative After 7 days if Positive
		Wound Aspirate	After 5 days if Negative After 7 days if Positive
		Blood	After 5 days if Negative After 4-8 days if Positive
		KOH	After 3-4 hours on the subsequent working days. When received during weekends and holidays and especially after 2PM, releasing will be the following working day

		Gram Stain of Clinical Sample	After 3-4 hours on the subsequent working days. When received during weekends and holidays and especially after 2PM, releasing will be the following working day
		Sputum AFB	After 1 working day excluding weekends and holidays.
Blood Banking	ABO & Rh Typing		Within 1-2 hours
	Cross matching (Whole blood, Packed RBC, Leukoreduced RBC)		Within 3-4 hours
	Fresh Frozen Plasma/ Platelet Concentrate (Type Specific)		Within 2-3 hours
Clinical Microscopy	Urinalysis		Within 1-2 hours
	Fecalysis		Within 3-4 hours
	Other body fluids (cell ct and diff ct)	CSF	Within 203 hours
		Pleural fluid	
		Ascitic/ Peritoneal	
		Pericardial fluid	

P. Step-by step procedure: OPD and ER Laboratory Service

STEP	ACTIVITIES	FEE	NECESSARY FORM	DOCUMENTARY REQUIREMENTS	MAXIMUM TIME	RESPONSIBLE OFFICER/ EMPLOYEE	ALLOWABLE PERIOD OF EXTENSION AND ACCEPTABLE REASON
1	Present lab request	Depends on the numbers of lab tests requested (refer to price list of laboratory services)	Lab request form	Lab request form accomplished by attending physician	5 minutes	Lab. Aide	<ul style="list-style-type: none"> - Incomplete data on lab request - No signature of attending physician
2	Issuance of change slip form		Charge-slip form	Charge slip	5 minutes	Lab. Aide	10-30 minutes waiting time if there are other patients ahead
3	Payment to cashier			Official receipt	20 minutes	Cashier	
4	Specimen collection		Lab request form	Lab request	10 minutes	Med. Tech. on duty	-30 minutes depending on difficulty of specimen collection or if there are more patients ahead; -waiting time also depends if there are urgent STAT request for other patients
5	Performance of exam/test		Lab request form	Lab request form	3 hours	Med. Tech. on duty	-4 hours or longer depending on the number of test and volume

							of workload per section -Turn-around-time (TAT) vary for each test depending on complexity of test -if there are STAT requests from ER/ICU
6	Releasing of result		Signed laboratory result form	Official receipt	5 minutes	Lab. Aide	-10 minutes, if there are other patients ahead; - depends also on TAT per test -STAT requests are prioritized

Q. LABORATORY EXAMINATION PRICE LIST

Laboratory Test	Type of Specimen	Receiving Cut-off Time	Running Day	Schedule of Release	Amount (Php)
SEROLOGY					
HIV Screening Test:					
Immunoassay	Serum, Plasma	3:00 PM Monday-Friday	Mon-Fri	Follow up after 3 working days; if not available, after 10 working days	350
RAPID					
HIV Confirmatory Test:					

Western Blot	Serum, Plasma			After 10 working days	FOC
CD4 Absolute/Percent	Whole Blood (EDTA)	11:00 AM Tuesday, Thursday	Tuesday, Thursday	2-3 PM	2,000
				Next Day	
HBV Screening Test:					
Immunoassay	Serum, Plasma	3:00PM Monday-Friday	Monday, Wednesday, Friday	2-3 PM After 3 working days	300
HBV Markers:					
Anti-HBs (IA)	Serum, Plasma	3:00 PM Monday-Friday	Monday, Wednesday, Friday	2-3 PM after 10 working days	350
Hbe Ag/Ab (IA)					850
Anti-HBc: (lgm)					400
Anti-HBc: (Total)					400
HBV Confirmatory Test:					
Neutralization Assay	Serum, Plasma	3:00 PM Monday-Friday	Monday, Wednesday, Friday	2-3 PM After 10 working days	1,500
HCV Screening Test:					
Immunoassay	Serum, Plasma	3:00 PM Monday-Friday	Thursday	2-3 PM After 7 working days	650
HCV Confirmatory Test:					
SIA	Serum, Plasma	3:00 PM Monday-Friday	Every 10 working days	2-3 PM After 10 working days	6000
SYPHILIS Screening Test:					

RPR	Serum, Plasma	3:00 PM Monday-Friday	Monday, Wednesday, Friday	2-3 PM after 3 working days	250
SYPHILIPIS Confirmatory Test:					
TPHA	Serum, Plasma	3:00 PM Monday-Friday	Monday, Wednesday, Friday	2-3 PM After 3 working days	270
TPPA					270
MOLECULAR DIAGNOSTICS					
HBV Viral Load Real Time PCR	Serum, Plasma(EDTA)	3:00 PM Monday-Friday	Accrued 9 Sample	2-3 PM After 3 weeks	3,800
HCV Viral Load Real Time PCR					7,000
HIV Viral Load Real Time PCR	Plasma (EDTA)				5,000
MICROBIOLOGY					
Gram Stain	Body Fluids	3:00 PM Monday-Friday	Mon-Fri	2-3 PM Next day	120
Wet Mount	Vaginal Swab				120
KOH Mount					120
N. gonorrhea Culture & Sensitivity	Urethral, Cervical Swab	3:00 PM Monday-Friday	Mon-Fri	After 3-5 days	1000

R. Step by step for registration and treatment (Dental)

STEP	ACTIVITIES	FORMS	DOCUMENTS REQUEST	FEES	PROCESSING TIME	RESPONSIBLE PERSON
1	A. New patient Dental Aide Instruct patient to fill-up Patient's Information form and Hospital I.D card.	Patient information Form & Hospital I.D card			5 minutes	Dental Aide

2	Dental Aide issue charge slip and instructs patient to pay registration fee at Cashier.	Charge Slip		P 50.00	5 minutes	Dental Aide/Cashier Clerk
3	Patient to go back to Dental Department for encoding of information and to fill-up ITR. Patient is assigned to a dentist.	ITR	Official Receipt		5 minutes	Dental Aide
4	Dentist examines the oral health condition of the patient, evaluates and assess the necessary treatment/procedure to be done.	ITR			10-15 minutes	Dentist
5	Instruct patient to pay the corresponding dental fees at cashier.	Charge Slip	Dental Fees/Charges		5 minutes	Dental Aide/Cashier Clerk
6	Patient is treated accordingly	ITR	Official Receipt			Dental

STEP	ACTIVITIES	FORM	DOCUMENTARY REQUEST	FEES	PROCESSING TIME	RESPONSIBLE PERSON
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1	Follow-up/Old Patient Shall ask for the patient Hospital I.D card. Dental Aide retrieve the ITR of the patient and inform the attending Dentist Dentist examines the oral health condition of the patient, evaluates and assess the necessary treatment/procedure to be done. Instruct patient to pay the corresponding dental fees at Cashier Patient is treated accordingly	ITR	I.D card		2 minutes	Dental Aide
2					5 minutes	Dental Aide
3		ITR			5 minutes	Dental Aide/Cashier Clerk Dentist
4		Charge slip	Dental fees/charges			
5		ITR	Official Receipt			

S. Education, training, Research, and Human Resource Development

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
Request for Training				
1. Receiving Invitation of Training	Invitation Letters, Circular		Under normal circumstances per transaction	Receiving/Releasing ETRHRD Staff
2. Review and Assessment of	FM-HRM-029/DOH		Under normal	NMTD, METRD,

Training Needs Analysis/Professional Development Plan	Competency Tool		circumstances per transaction	NETRD Head
3. Providing List of Participants for the Training	N/A		Under normal circumstances per transaction	ETRHRD Staff
4. Receiving, Assessment, and Approval of Request for Training	FM-ETRHRD-001		1-7 days	NMTD, METRD, NETRD Head/Hospital Chief Training Officer/Medical Center Chief II
5. Forwarding the request to Human Resource Management Department for Hospital Order	FM-ETRHRD-001		1 day	ETRHRD Staff
Customer Satisfaction survey				
1. Collection of CSS Form Different Department	N/A		1 day per week	NMTD Staff
2. Encoding and Analysis of Data	FM-ETRHRD-NMTD-002		3 days	NMTD Staff/NMTD Head
3. Reporting of Customer Satisfaction Survey Result	CSS Report		1 day	NMTD Staff

T. DEPARTMENT UNDER THE FINANCE MANAGEMENT SERVICE (FMS)

T.1 INANCE MANAGEMNET SEERVICE

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
Purchase Request	Purchase Request RIS		15 mins/document	M.L. Bautista

<ul style="list-style-type: none">- Retirement- Resignation- Maternity- More than 30 days			1-3 days 1-2 days 1-2 days 1-2 days	Accounting Staff
3. Certifications Philhealth/GSIS <ul style="list-style-type: none">- Philhealth 6 mos. 12 mos. Morethan 12 mos.- GSIS 6 mos. 12 mos. 1-2 yrs More than 2 yrs- Pagibig 6 mos. 12 mos. More than 12 mos.			2hrs 4 hrs 2 days 2hrs 4hrs 2 days 5 days 2hrs 4hrs 2 days	
4. BIR Updating of Status Employee <ul style="list-style-type: none">- 1902- 1905- 2305			1hr 1hr 1hr	
5. Claiming of BIR Form <ul style="list-style-type: none">- 2306- 2307- 2316			2hrs 2hrs 2hrs	Accounting Staff

T.3. BILLING AND CLAIMS DEPARTMENT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
1. Attends to Philhealth requirements queries (Animal Bite & in-patient)	Philhealt requirements/documents	None	5 mins.	Counter
2. Assists in filling-up Philhealth forms	CF1, CF2, PBEF, PMRF		5 mins.	Counter
3. Receives charge slips for hospital billing	Charge Slips		30 mins.	Adm. Asst./Aide
4. Generates hospital bills from different pavilions/wards	Statement of Account		1 min.	Adm. Asst./Aide
5. Record, release hospital bills	Statement of Account		1 min.	Adm. Aide
6. Encodes charge slip from Laboratory, Pharmacy, Central Supply and Medical Social Service	Charge Slips		15 mins./patient	Adm. Asst./Aide

T.4. BUDGET SECTION

T.4.1. QUARTERLY PREPARATION AND SUBMISSION OF FINANCIAL ACCOUNTABILITY REPORT (FAR)

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
Preparation of quarterly (FAR)	DBM/GAM Form	N/A	Submitted on the 15 th day following	<ul style="list-style-type: none"> - Mrs. Rozel Garcia - Ms. Theresa Garcia

	(FAR1, 2-a) (FAR 2, 2-a)		each quarter	(FAR 1, 1-a) - Mr. Reynaldo Rosel (FAR 2, 2-a)
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T.4.2. MONTHLY PREPARATION AND SUBMISSION OF STATEMENT OF ALLOTMENT, OBLIGATIONS AND BALANCES (SAOB)

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
Preparation of monthly SAOB	DBM/DOH form	N/A	Submitted on the 10 th day of each succeeding month	- Mrs. Rozel Garcia - Ms. Theresa Garcia

T.4.3. DAILY PROCESSING OF OBLIGATION REQUEST AND STATUS (ORS) AND BUDGET UTILIZATION REQUEST AND STATUS (BURS)

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<p>Processed request using ORS for charges to Regular Fund and BURS for charges to Income Fund/Trust Fund</p> <p>Sorting and checking of attached documents and computations</p> <p>(Including receiving and recording of requests on a</p>	GAM Form (ORS) (BURS)	N/A	(10-15) minutes per request (ORS.BURS)	<p>- Ms. Lizette Mutuc (ORS)</p> <p>- Mr. Reynaldo Rosel (BURS)</p> <p>- Mrs. Mayolita Gonzales (BURS)</p> <p>- Mrs. Rozal Garcia (Approving)</p>

daily basis)				
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U. HOSPITAL OPERATIONS AND PATIENT SUPPORT SERVICE (HOPPS)

**U.1. CHIEF ADMINISTRATIVE OFFICE
DOCUMENTS PROCESSING**

STEP	APPLICANT/CLIENT	SERVICE PROVIDER	DURATION OF ACTIVITY (UNDER NORMAL CIRCUMSTANCES)	PERSON IN CHARGE	FEE S	FORM
1	Submit document to be processed with complete attachment	Review and receive submitted documents with complete attachment/ signatory and properly accomplished	2 minutes	Receiving Clerk		
		Record in the corresponding logbook the received documents	2 minutes	Receiving Clerk		
		Process check/review submitted documents as to contents authenticity/signatories/attachment	10 minutes	Processing Officer		
		Approved/acted upon document processed	3 minutes	Chief Administrative Officer		
		Record/Encode processed documents in the corresponding logbook	10 minutes	Releasing Clerk		
		Released approved/acted upon documents to corresponding offices	15 minutes	Releasing Clerk		

U.2. ENGINEERING DEPARTMENT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<u>Corrective Maintenance Procedure</u> 1. Receiving the filled up job order form 2. Checking the Job Order Request 3. Assigning staff and requesting supplies and materials 4. Performing Duties 5. Submitting the accomplished Service Order and Report Form 6. Validation of the accomplished job order and filling up of service report	FM-HOPPS-EFMD-001 N/A FM-HOPPS-EFMD-002 FM-HOPPS-EFMD-001 FM-HOPPS-EFMD-002	N/A	15 mins. 45 mins. 1-7 days 15 mins 30-45 mins.	Receiving/Releasing EFMD Staff EFMD Unit Head EFMD Staff EFMD Unit Head and Receiving/Releasing Staff
<u>Preventive Maintenance Procedure (Service Provider)</u> 1. Receiving of preventive maintenance contract 2. Coordinating the preventive maintenance schedule 3. Performing the preventive maintenance 4. Filing of checklist and	N/A	N/A	30-45 mins N/A	Receiving/Releasing EFMD Staff Chief, EFMD/Engineer III EFMD Unit Head

preparing of voucher for payment			4-5 days	EFMD Secretary/ODC
<u>Preventive Maintenance Procedure (In-House)</u>				
1. Preparing of preventive maintenance	FM-HOPPS-EFMD-23	N/A	1 week	EFMD Unit Head
2. Preparing the supplies and materials	N/A		30=45 mins.	EFMD Storekeeper and unit head
3. Performing the preventive maintenance	FM-HOPPS-EFMD-009 FM-HOPPS-EFMD-010 FM-HOPPS-EFMD-011		4-5 days	EFMD STAFF
<u>Medical Equipment Service Request Procedure</u>				
1. Receiving Job Order	FM-HOPPS-EFMD-001	N/A	15 mins.	Receiving/Releasing EFMD Staff
2. Deciding whether to repair the unit or pull-it-out	N/A		30 mins.	EFMD Unit Head
3. Conducting repair	FM-HOPPS-EFMD-002		3-5 days	EFMD Staff
4. Filling up Service Order and Report			30-45 mins.	EFMD Unit Head/Staff

U.3. HOUSEKEEPING UNIT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
1. Regular Cleaning (Office)	Monitoring and Evaluation Form	None	6 hours/area	Janitor
2. Regular Cleaning (Ward)	Monitoring and Evaluating Form	None	6 hours/ area	Janitor
3. General Cleaning (Off)	Job Order	None	2 hours/ area	Supervisor Janitor

4. Terminal Cleaning (ward0	Job Order	None	3 hours/ area	Supervisor and janitor
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U.4. GROUND UNIT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
1. Cleaning of hospital vicinity	Job Order	None	30 mins./area	Ground Unit Staff
2. Trimming of bushes/trees	Accomplishment report	None	1 hour	-do-
3. Crushing of vials	Job order	None	4 hours	-do-
4. Disposal of Healthcare wastes	Manifest form	None	2 hours	-do-

U.5. SECURITY

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
1. Maintenance of Security around SLH Vicinity	Monitoring Log Book	None	8 hours/shift	Contractual Security Guard and Security Supervisor
2. Parking Lot Management			2 minutes/ Vehicle	
3. Patient's Assistance and Information Dissemination	Daily journal Report	None	5 minutes	Contractual Security Guard
4. Recording all activities inside the hospital			5 minutes	
5. CCTV Viewing	CCTV Access		Minimum of 30	Security Unit Staff

6. Monitoring and Inspection of Contractual Security Guard	request form Daily Duty Detail Schedule		minutes upon request 30 minutes	Security Unit Staff
7. Orient SOP, Policies and safety measures of Contractual Security Guard	Masterlist Standard operating procedure and policies and guidelines		1 hour/shift	Security Unit Staff and Security Supervisor
8. Incident Report for Action	Incident Report Form		1 hour/case	AO V, Security Guard Supervisor

U.6. MOTORPOOL UNIT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
1. For use of ambulance to transport patient to other facilities outside	request for use of vehicle form/Driver's official trip ticket from and charge slip	None	5-6 hours (depends on the patient schedule and procedure)	Dispatchers/Nursing Staff on Ward/Attending Physician and watcher
2. For use of ambulance transport of patient to and from ward within the San Lazaro Hospital compound	ambulance trip ticket form		10 minutes	Driver/Nursing Attendant on duty
3. For use of Service Vehicle to transport	request for use of vehicle form and		1-8 hours depend on the designated	Despatchers & Driver

requesting Employees/ Officer to designated destination of activities	driver's official Trip Ticket form		destination	
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U.6. LINEN

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<u>Acceptance of soiled Linen from the ward</u> 1. Receives soiled linens, weighing the total number of kilos per ward 2. Counts the number of soiled linens per ward 3. Rebag the counted linens for pick up by the service provider	Request for linen laundry and issuance	None	Within 1 hour	Laundry Staff
<u>Issuance of clean linens for from the service provider</u> 1. Count the total number of delivery per type of linens 2. Rebag the linens per bag 3. The clean linens to the CSSU for pick up	Request for linen laundry and issuance	None	Within 30 minutes	Linen Staff
<u>Acceptance of soiled linens from offices</u>	Request for linen	None	Within 10 minutes	Laundry Staff

1. Received the soiled linens 2. Counts the number of linens per type 3. For soiled linens to the laundry are for washing	laundry and issuance			
<u>Issuance of cleaned linens to the offices</u> 1. Count the number of linens washed to exact quantity 2. Delivered to the office concerned	Request for linen laundry and issuance	None	Within 20 minutes	Linen Staff
<u>Manufacturing of new and received linens</u> 1. Receives request from end-user 2. Measures the length, width, height of object or area to be manufactured 3. Saved and Delivered to the requesting end-user	Request for linen laundry and issuance	None	As scheduled (not later than 15 working days, after acceptance of request)	Linen Staff

U.7. RECORDS MAINTENANCE AND CERTIFICATION UNIT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<u>Issuance of Medical Certificate/Certificate of Confinement & other</u>				

certified true copy of the original documents, signed by the HIMD Head or Unit Head with dry seal				
<u>Issuance of Birth Certificate</u> 1. Acknowledge receipt of accomplished Birth Certificate perform and official form duly signed by the Attending Physician 2. Interview parent/s for accomplishment of Birth Certificate; if not married, get their latest 3. Issue charge slip form for payment of requested Birth Certificate 4. Transcribed all related information from Birth Certificate preform to official form, prepare affidavit to use the surname of the father (AUSF) if parents are not married; both forms need to be notarized	Birth Certificate preform and official form Birth Certificate preform Community Tax Charge slip Birth Certificate and AUSF	None P150.00	45 minutes	HIMD Staff

<p>5. Prepares transmittal letter with the attached birth certificate for checking and signature of HIMD Head</p> <p>6. Transmits the prepared birth certificate to Local Civil Registry Office of Manila</p>	Transmittal letter and birth certificate	None	Within 3 days it will be forwarded to Manila City Hall	
<p><u>Issuance of Death Certificate</u></p> <p>1. Acknowledge receipt of Patient Health Record with Death Certificate preform & official Death Certificate form duly signed and filled up by the Attending Physician from the Nurse on Duty/Nursing Attendant</p> <p>2. Transcribe data into official Death Certificate form</p> <p>3. HIMD Head will then checked the accuracy of all the information given in the Death</p>	<p>Death Certificate pre form and Death Certificate official form</p> <p>Death Certificate form</p>	None	45 minutes	HIMD Staff

<p>Certificate, before releasing to authorized</p> <p>4. Establish the identity of the relative/next of kin before releasing the Death Certificate form and shall fill up the receiving logbook for proper control of documents</p> <p>5. Advise the relative/nest of kin to register within 45 hours upon receipt to the Local Civil Registrar's Office, City of Manila</p>				
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U.7.1. OPD/HIMD UNIT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<p><u>Issuance of Patient's ID, ER/Out Patient Record & Animal Human Bite Data Sheet</u></p> <p>1. Receives properly filled up forms</p>	<p>Hospital ID, Patient Information Sheet & Rabies Post Exposure Prophylaxis Card</p>	<p>None</p>	<p>None</p>	<p>OPD/HIMD Staff</p>

2. Encodes patient's data & other related information thru HOMIS system	Animal & Human Bite Data Sheet and ER/Out Patient Record	None	10 minutes/client	
<u>Retrieval of Patient's Blotter Sheets (Animal & human Bite Data Sheet & ER/Out Patient Record)</u> 1. Receives Rabies Post Exposure Prophylaxis Card & Patient's Hospital ID as basis in retrieving patient's Blotter Sheets in the active files area 2. Upon retrieval of the patient's Blotter Sheets, it shall be forwarded to Nursing Attendant on duty & he/she shall forwarded them to the Physician on Duty	Animal & Human Bite Data Sheet ER/Out Patient Record	None	10 minutes/client	OPD/HIMD Staff
		None	None	Nursing Attendant & Physician on Duty
<u>Issuance of OPD Medical Certificate</u> 1. Interviews & verify the accuracy of patient's information including to whom & where it will be presented 2. Issue Charge Slip form for payment receipt of requested Certificate	Animal & Human Bite Data Sheet ER/Out patient Record	None		HIMD Staff
	Charge Slip Form	P130.00 w/o Documentary stamp	15 minutes/client	

at the Cashier 3. Prepare & print requested certificate	OPD Medical Certificate		Issued & released the Med Cert day after it was requested	
4. Assist requesting /patient to fill up the receiving logbook for proper control of document	None	None	1-2 minutes/client	

U.7.2. ADMITTING/INFORMATION UNIT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<u>Issuance of ER/Out Patient Record & Hospital ID</u> 1. Receives properly filed up Patient Information sheet & review accuracy of information/data given by the patient/patient's relative. 2. Encodes patients information & shall issue a computer generated hospital number thru HOMIS system & patient's	Patient's Information Sheet ER/Out patient Record Patient's Hospital ID card	P50.00 Medical cases And Animal bite cases	20 minutes	HIMD Staff

a. Internal calls b. External calls			2 mins. 20 mins.	
<u>From Doctors</u> 1. Ensure the doctor identifies himself clearly 2. Retrieves patient's name, date of admission & other identifying information thru HOMIS system 3. Forwards such inquiry to HIMD Head for him to answer the inquiry during office hours & he/she shall take the name & address of the doctor for reference purposes	None	None	A minute or more 2-3 minutes/client 2-3 minutes after patient's retrieval thru HOMIS system/client	HIMD Staff HIMD Staff HIMD Staff
<u>From a patient:</u> 1. Ask the patient for identifying information & find out what he/she wishes to know 2. Only the following data shall be given directly to the patient w/o the approval of the attending physician, adm & disch date, AP's name & other demographic	None	None	A minute of more 2-3 minutes/client	HIMD Staff HIMD Staff

<p>data except any clinical information</p> <p>3. If an approval has been obtained from the A, the patient may have the right to access all the clinical information recorded</p>	None	None	3-5 minutes/client	HIMD Staff
<p><u>From a police & other Law enforcer Agencies:</u></p> <p>1. Any information about the patient shall not be release except when there is a written request signed by the head of the agency. Police shall be reminded that the said information shall be reminded that the said information shall be only use for legal purposes</p>	None	None	2-3 minutes/client	HIMD Staff
<p><u>From Government Agencies</u></p> <p>1. The only information that may be released over the telephone are the patient's</p>	None	None	2-3 minutes/client	HIMD Staff

<p>admission & discharge date & name of the AP. Patient's written consent shall be required should any additional information be needed</p> <p><u>Paging of names, announcement other related concerns:</u></p> <p>1. Attends to the request for paging of names, announcements & other related concerns to be page or announce twice immediately thru paging system</p>	None	None	1-2 minutes depending on the names or announcements to be page/client	HIMD Staff
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U.8. HUMAN RESOURCE MANAGEMENT DEPARTMENT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
<p><u>Issuance of Certificate</u></p> <p>1. Certificate of Employment</p> <p>2. Certificate of Employment with compensation</p> <p>3. Service Record</p>				Action Officer/HRM staff

<p>4. Last Day of Duty Certificate</p> <ol style="list-style-type: none"> Fill up information needed in requesting Logbook for the documents to be requested Review and prepare necessary documents needed for the preparation of the requested office Preparation of the Certification Reviewed and initiated by the records officer and assistant head of the HRMD Final assessment and signature of the Head of the HRMD or her/his Officer in charge Issuance of the requested certification Requesting party should sign the requesting log book as proof that he/she received the requested certification <p><u>Application for employment/promotion</u></p> <ol style="list-style-type: none"> Submission of complete requirements <ul style="list-style-type: none"> Application form Application letter Resume 			<p>Within 1 min.</p> <p>5 mins.</p> <p>5 mins.</p> <p>5 mins</p> <p>5 mins.</p> <p>Within 1 min.</p> <p>Within 1 min.</p>	
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<ul style="list-style-type: none">• Diploma• Transcript of records• Copy of eligibility (if required)• PRC License (if required)• Board rating (if required)• Certificate of trainings and convention attended (for the last 5 yrs.)• Fellowship/Diplomatic certificate (for Medical Specialist applicant) <p><u>Requirement for promotional position:</u></p> <ul style="list-style-type: none">• Performance Evaluation Report (IPCR) for the last two (2) semester with very satisfactory (VS) rating <p>2. Review and evaluate the application for employment/promotion</p> <p>Check the following</p> <ul style="list-style-type: none">• Proper accomplishment of the application form• Qualification of the applicant• Completeness and validity of the supporting documents/			10 mins.	Action Officer/HRM Staff
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9. Preparation of supply availability inquiry	Supply Availability Inquiry		10 minutes	Warehouseman III
10. Preparation and submission of monthly report for all the deliveries and issuances			10 minutes-RIS 4hours compilation of deliveries	Admin Aide III
11. Gathering and reproduction of all documents needed in the preparation for disbursement vouchers			5-10 minutes	Admin Aide III
12. Processing of disbursement voucher for payment of completed deliveries	Disbursement voucher		10-20 minutes	Admin Aide III
<u>Property Management Unit</u>				
1. Issuance of equipment and semi-expandable equipment and updating of property card	PAR, ICS		10-15 mins.	Admin Assistant I
2. Preparation and acknowledgement receipt for equipment (ARE) and inventory custodian slip (ICS)	ARE, ICS		10-15 mins.	Admin Aide, Physical Inventory committee
3. Participants in the conduct of regular physical inventory of equipment and			½ day per office	Admin Aide I

semi expandable equipment				
4. Preparation consolidation and updating the physical inventory report for equipment/ semi expendable	Physical Inventory Report		30 mins.	Admin assistant I Admin Aide I
5. Consolidates inventory and inspection report for unserviceable property (IIRUP)	Condemned form, IIRUP		30 mins.	Admin Assistant I
6. Preparation of waste material report (WMR) for the parts replaced or worn out	Waste Material Report		10-15 mins.	Admin Aide I
7. Processing transfer of property accountability	Property transfer report		25 mins per person	Admin Assistant I
8. Verification, receiving and recording of condemned properties	Condemned form		10-15 mins.	Admin Assistant I
9. Processing of clearance certificate and gate pass	Transfer pf Property		With accountability 1-2 weeks w/o accountability 5-10 mins.	Admin Assistant I
10. Preparation of report of issuances for equipment	Daily Report Form		30 mins/ P.O.	Admin Officer I
11. Preparation of pre-repair inspection	Pre-repair inspection		5-10 mins	Admin Officer I
12. Issuance of certificate of acceptance	Certificate of good running condition		10-15 mins	Admin Assistant I Admin Aide
<u>Reproduction Unit</u>				
1. Reproduction of Hospital	Request for reproduction		15-20 minutes/client	Admin Assistant I

forms, iec materials, manuals and other related hospital documents				Admin Aide VI Admin Aide I
2. Preparation of report, including the total quantity reproduction of all hospital forms	Summary of Reproduction Activities		20-30 minutes/department	Admin Assistant I Admin Aide VI
3. Sorting and recording of documents reproduce through xerox	Request for reproduction		30 minutes	Admin assistant I Admin Aide VI Admin Aide I

U.10 NUTRION AND DIETETICS DEPARTMENT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE
Request for nourishment	Request for nourishment form	Php40.00 (and depending on the nature of meeting/activity and source of funds)	5 working days	Administrative Aide VI, Administrative Aide III
Nutrition Counselling In-Patient OPD	Referral Form		1 hour	Clinical Nutritionist dietitians

U.11 PROCUREMENT DEPARTMENT

ACTIVITIES	FORMS	FEES	MAXIMUM TIME	PERSON'S RESPONSIBLE

<u>Procurement of Goods-Alternative Mode of Procurement (AMP)</u>				
1. Receiving/recording of approved purchase request with attached requisition and issue slip from the Director 's Office and assigning of control number	GAM Form/Purchase Request and PO Logbook		5 mins.	Receiving Clerk
2. Verifying if items are included in PPMP/APP	PPMP/APP File copy		30 mins.	Procurement staff in charge
3. Alternative mode of procurement				
a. Return PR and RIS to end user if items/d is not included in PPMP/APP and submit supplemental PPMP	PPMP/APP. Purchase Request Form, and Issue Slip Form		7 calendar days	Procurement staff in charge
b. Request for BAC resolution as AMP (if items are including in PPMP/APP)	Action note from department head		7 calendar days	BAC Secretariat
4. Sanding request for quotation to suppliers	Request for Quotation Form		3 days	Procurement staff in charge
5. Preparing abstract to quotation	Abstract of Quotation Form		4 hours	Procurement staff in charge

6. Preparing purchase order	Purchase Order Form		3 hours	Procurement staff in charge
7. Reviewing/checking of documents	Purchase Order Logbook Control#		10 mins.	Head of Procurement Department
8. Processing of purchase order	Purchase Order Logbook		7 calendar days	Concerned Department
9. Receiving approved purchase	Purchase Order Logbook		5 mins.	Procurement staff in charge
10. Fax and notify supplier for approved purchase order for delivery	Approved Purchase Order Logbook		5 mins.	Procurement staff in charge
11. Forwarding of approved purchase order to MMD for delivery of goods	Approved Purchase Order Logbook		1 day	Procurement staff in charge
<u>Procurement of Good-Public Bidding</u>				
1. Receiving of approved purchase request with attached requisition and issue slip from the Directors Office & assigning of control	GAM Form/Purchase Request		5 mins.	Receiving Clerk

number				
2. Verifying items in the PPMP/APP	PPMP/APP File copy		30 mins.	
3. Assigning to procurement staff in charge	Purchase Request Logbook		5 mins.	Procurement staff in charge
4. Preparation of purchase order	Purchase Order Form/Purchase Order Logbook Control #		2 hours	
5. Reviewing/ checking of documents and signing of purchase order	Purchase order form		10 mins.	Head of Procurement Department
6. Processing of purchase order	Purchase Order Logbook		7 calendar days	Concerned Department
7. Receiving of approved purchase order			10 mins.	
8. Fax and notify supplier for approved purchase order for delivery			5 mins.	Procurement staff in charge
9. Forwarding of approved purchase order to MMD for delivery of goods	Approved Purchase Order Logbook		1 day	
<u>Procurement of Goods-job order</u>				

<u>(repairs and maintenance)</u>				
1. Receiving/recording of approved request for pre-repair inspection with attached service order and report from MMD	GAM Form/ Request for Pre-repair inspection form and logbook		5 mins.	Receiving clerk
2. Checking and assigning job order to procurement	None		5 mins.	
3. Sending request for quotation to suppliers	Request for quotation form		3 days	Procurement staff in charge
4. Preparing abstract of quotation	Abstract of quotation form		4 hours	
5. _Reviewing/checking and signing documents	None		10 mins.	Head of procurement department
6. Processing Job Order	Job order logbook		7 calendar days	
7. Receiving approved job order			10 mins.	
8. Fax notify supplier for approved job order for repair and maintenance	Approved job order Logbook		5 mins.	Procurement staff in charge

9. Forwarding of approved purchase order to MMD			1 day	
<u>Procurement of goods-Petty Cash</u>				
1. Receiving/ recording of approved purchase request with attached requisition and issue slip from the director's office and assigning of control number	GAM Form/ Purchase request		5 mins.	Receiving clerk
2. Verifying items in the PPMP/APP	PPMP/APP File copy		30 mins.	
3. Sending request for quotation to suppliers	Request for quotation form		3 days	Procurement staff in charge
4. Preparing abstract of quotation	Abstract of quotation form		4 hours	
5. Preparing petty cash voucher	Petty cash voucher form		1 hour	
6. Reviewing/checking and signing of voucher	Petty cash voucher form		10 mins.	Head of Procurement Department
7. Processing of petty cash voucher	Petty cash voucher logbook and control number		1 day	

8. Receiving approved petty cash voucher	Approved petty cash Voucher logbook		10 mins.	Procurement staff in charge
9. Purchase goods requested by end user	None		4 hours	
10. Issuance of purchased good to end user	Issuance of petty Cash Voucher Logbook		1 hour	

V.MORTUARY SERVICES

STEP	ACTIVITY		FEE	NECESSARY FORMS	DOCUMENTARY REQUIREMENTS	DURATION OF ACTIVITY	RESPONSIBLE EMPLOYEE	ALLOWABLE PERIOD
	CLIENT	SERVICE PROVIDER						
I. MORTUARY OFFICE RECEIVES CALLS		Receive calls from the clinical area and write down details of the deceased	none	Mortuary unit Infection Control Notification Forms and Death Register Logbook	none	5 minutes	Nursing Attendant	5 minutes
II. PICK UP AND TRANSPORTING OF CADAVER TO THE MORTUARY UNIT	Understands given instructions and explanations	Check the identification of cadaver's tag and medical Chart.	none	Mortuary unit Infection Control Notification Forms and Death Register Logbook	none	30-45 minutes	Nursing Attendant	30-45 minutes
III.RELEASING OF CADAVER	Cooperates with N.A.	Determine and check kinship of claimant of cadaver through	none	Authority to Release Cadaver	none	5 minutes	Nursing Attendant	5 minutes

		presentation of valid identification card		form				
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W. CENTRAL SUPPLY AND STERILIZATION UNIT

STEP	ACTIVITY		FEE	NECES SARY FORMS	DOCUM ENTARY REQUIR EMENTS	DURA TION OF ACTI VITY	RESPO NSIBLE EMPLO YEE	ALLO WABL E PERIO D
	CLIENT	SERVICE PROVIDE R						
Issuance of Supplies for IN PATIENT class C1 & C2								
I. RECEIVING OF REQUEST	Relatives / watcher presents accompli shed SW charge slip given by the Nurse on duty	Receives and evaluates completen ess of accomplis hed form given handed by the watcher a. Date b. Name of patient c. Hospital number	NONE	SW Charge Slip	NONE	30 secon ds	Nurse/ Nursing Attenda nt	1 minute

		d. Ward e. Signature of Requesting Nurse						
II. CHARGING		Makes charges of requested supplies according to approved price.	NONE	NONE	NONE	1 – 3 minutes	Nurse/ Nursing Attendant	5 minutes
III. SETTLE PAYMENT	Understands given instructions and explanations	a. Directs watcher to settle the bill at the cashier and return the triplicate copy of SW form	Varies* (Based on the requested supplies)	SW Charge Slip	NONE	15 seconds	Nurse/ Nursing Attendant	20 seconds
	Returns and presents 2 copies of SW Form & receipt	b. Checks the receipt and amount paid	NONE	SW Charge Slip	Official Receipt	30 seconds	Nurse/ Nursing Attendant	1 minute & 30 seconds

IV. PREPARATION OF REQUESTED SUPPLIES		Prepares the requested supplies	NONE	NONE	NONE	1 – 5 minutes	Nurse/ Nursing Attendant	10 minutes
V. RECORDING OF SUPPLIES		Records the requested medical supplies	NONE	NONE	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes
VI. ISSUANCE OF SUPPLIES	Receives and checks completeness of supplies given.	Issues the requested supplies and ask the watcher to check and inspect the supplies before leaving the releasing area. Stamps the official receipt with "ISSUED"	NONE	NONE	NONE	1 minute – 2 minutes	Nurse/ Nursing Attendant	3 minutes
Issuance of Supplies for IN PATIENT: Pay, Philhealth and Class D								

I. RECEIVING OF REQUEST	Nursing attendant presents accomplished SW charge slip given by the Nurse on duty	Receives and evaluates completeness of accomplished form handed by the nursing attendant a. Date b. Name of patient c. Hospital number d. Ward e. Signature of Requesting Nurse	NONE	SW Charge Slip	NONE	1 - 5 minutes	Nurse/ Nursing Attendant	10 minutes
II. VALIDATION OF REQUEST	Nursing Attendant awaits until validation is complete	Validates requested supplies quantity	NONE	NONE	NONE	5 -10 minutes	Nurse/ Nursing Attendant	15 - 20 minutes

	d							
III. ENCODING OF SUPPLIES REQUESTED		Encoding of supplies and preparation of charge slip	NONE	NONE	NONE	15 - 30 minutes	Nurse/ Nursing Attendant	35-40 seconds
IV. PREPARATION OF REQUESTED SUPPLIES		Prepares the requested supplies	NONE	NONE	NONE	10-15 minutes	Nurse/ Nursing Attendant	20 minutes
V. ISSUANCE OF SUPPLIES		Informs the Nursing Attendant that supplies are ready for pick-up thru telephone call	NONE	NONE	NONE	2 – 5 minutes	Nurse/ Nursing Attendant	11 minutes

	Nursing attendant receives and checks completeness of supplies given.	Issues the requested supplies and instruct Nursing Attendant to check and inspect the supplies before leaving the releasing area together with the charge slip	NONE	Charge Slip	NONE	5 - 10 minutes	Nurse/ Nursing Attendant	15 minutes
Issuance of Supplies for OUT-PATIENT								
I. RECEIVING OF PRESCRIPTION	Presents prescription.	Receives prescription handed by the watcher	NONE	SW Charge Slip	NONE	15 seconds	Nurse/ Nursing Attendant	1 minute
		Generates and transfer request to SW Charge Slip indicating the ff:	NONE	SW Charge Slip	NONE	1 - 2minutes	Nurse/ Nursing Attendant	3 minutes

		a. Date b. Name of patient						
II. CHARGING		Makes charges of requested supplies according to approved price.	NONE	NONE	NONE	1 – 3 minutes	Nurse/ Nursing Attenda nt	5 minute s
III. SETTLE PAYMENT	Understands given instructions and explanations	a. Directs watcher to settle the bill at the cashier and return the triplicate copy of SW form	Varies* (Based on the requested supplies)	SW Charge Slip	NONE	15 second s	Nurse/ Nursing Attenda nt	20 second s
	Returns and presents duplicate copy of SW Form & receipt	b. Checks the receipt and amount paid	NONE	SW Charge Slip	Official Receipt	1 minut e	Nurse/ Nursing Attenda nt	1 minute & 30 second s
IV. PREPARATION OF REQUESTED SUPPLIES		Prepares the requested	NONE	NONE	NONE	1 – 5 minutes	Nurse/ Nursing Attenda	10 minute s

		supplies					nt	
V. RECORDING OF SUPPLIES		Records the requested medical supplies	NONE	NONE	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes
VI. ISSUANCE OF SUPPLIES	Receives and checks completeness of supplies given.	Issues the requested supplies and ask the watcher to check and inspect the supplies before leaving the releasing area. Stamps the official receipt with "ISSUED"	NONE	NONE	NONE	1 – 2 minutes	Nurse/ Nursing Attendant	3 minutes
Requisition and Replacement of Medical Gases: Upon Admission								

I. RECEIVING OF MEDICAL GAS REQUEST	Nursing attendant presents accomplished SW charge slip given by the Nurse on duty	a. Receives and validates accomplished request, from E.R nurse handed by Nursing Attendant indicating the ff: a. Date b. Name of patient c. Hospital number d. Ward e. Signature of Requesting Nurse	NONE	SW Charge Slip	NONE	30 seconds	Nurse/ Nursing Attendant	1 minute
II. CHARGING		Makes charges of requested medical gas	NONE	SW Charge Slip	NONE	1 - 2 minutes	Nurse/ Nursing Attendant	3 minutes

		according to approved price.						
III. ENCODING OF REQUEST		Encodes requested medical gas and prepares charge slip	NONE	NONE	NONE	1 - 3 minutes	Nurse/ Nursing Attendant	4 minutes
IV. ISSUANCE OF MEDICAL GAS		Delivers the medical gas to respective area together with the charge slip.	NONE	Charge Slip	NONE	10 - 15 minutes	Nursing Attendant	20 minutes
V. RECORDING MEDICAL GAS		Records the requested medical oxygen	NONE	NONE	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes
Requisition and Replacement of Medical Gases: PAY/ Philhealth/ Class D								
I. RECEIVING OF MEDICAL GAS REQUEST	Nursing attendant presents accomplished	a. Receives and validates accomplished	NONE	SW Charge Slip/ Pay/Phi	NONE	30 seconds	Nurse/ Nursing Attendant	1 minute

	shed SW charge slip given by the Nurse on duty	request, from ward nurse handed by Nursing Attendant indicating the ff: a. Date b. Name of patient c. Hospital number d. Ward e. Signature of Requesting Nurse		lhealth Form				
II. CHARGING		Makes charges of requested medical gas according to approved price.	NONE	SW Charge Slip/ Pay/Phi lhealth Form	NONE	1 - 2 minutes	Nurse/ Nursing Attenda nt	3 minutes

III. ENCODING OF REQUEST		Encodes requested medical gas and prepares charge slip	NONE	NONE	NONE	1 - 2 minutes	Nurse/ Nursing Attendant	4 minutes
IV. ISSUANCE OF MEDICAL GAS		Delivers the medical gas to respective area together with the charge slip.	NONE	Charge Slip	NONE	10 - 15 minutes	Nursing Attendant	20 minutes
Requisition and Replacement of Medical Gases: Class C1 & C2								
I. RECEIVING OF OXYGEN REQUEST	Nursing attendant presents accomplished SW charge slip given by the Nurse on duty	Receives accomplished request, from ward nurse handed by Nursing Attendant indicating the ff: a. Date b. Name of	NONE	SW Charge Slip	NONE	30 seconds	Nurse/ Nursing Attendant	1 minute

		patient c. Hospital number d. Ward e. Signature of Requesting Nurse						
II. CHARGING		Makes charges of requested medical gas according to approved price.	NONE	SW Charge Slip	NONE	1 - 2 minutes	Nurse/ Nursing Attendant	3 minutes
III. SETTLE PAYMENT	Understands given instructions and explanations	a. Directs watcher to settle the bill at the cashier and return the triplicate copy of SW form	Varies* (Based on the classification)	SW Charge Slip	NONE	15 seconds	Nurse/ Nursing Attendant	20 seconds

	Returns and presents duplicate copy of SW Form & receipt	b. Checks the receipt and amount paid	NONE	SW Charge Slip	Official Receipt	1 minute	Nurse/ Nursing Attendant	1 minute & 30 seconds
V. RECORDING OF MEDICAL GAS		Records the requested medical oxygen	NONE	NONE	NONE	1 - 2 minutes	Nurse/ Nursing Attendant	3 minutes
VI. ISSUANCE OF MEDICAL GAS		Delivers the medical gas to respective area together with the charge slip.	NONE	NONE	NONE	10 - 15 minutes	Nurse/ Nursing Attendant	20 minutes
Borrowing and Returning of Instruments and Articles: Pay/ Philhealth/ Class D								

I. REQUESTING OF ITEMS	Nursing Attendant should sign at the borrower's logbook.	Checks & verify all request form for completeness of pertinent data such as: a. date b. patients name c. hospital number d. ward e. signature of requesting nurse	NONE	Borrower's logbook	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes
II. RECORDING OF ITEMS		Encodes requested instrument /articles	NONE	NONE	NONE	10 - 20 minutes	Nurse/ Nursing Attendant	30 seconds
III. PREPARATION OF REQUESTED ITEMS		Prepares and complete the requested articles/ instrument	NONE	NONE	NONE	1 - 2 minutes	Nurse/ Nursing Attendant	3 minutes

		s and issue to the borrower						
IV. ISSUANCE OF REQUEST	Nursing Attendant checks the items before leaving	Advice the borrower to check and inspect the packed item/s before leaving the releasing area and receiving logbook shall be completed	NONE	Borrow er's Logbook	NONE	1 - 2 minutes	Nurse/ Nursing Attendant	3 minutes
V. RETURN OF BORROWED ITEMS	Counter checks with the CSSU Staff and affix signature in the Borrower' s Logbook	Upon returning, check the reusable items for any damages or losses	NONE	Borrow er's Logbook	NONE	3 - 5 minutes	Nurse/ Nursing Attendant	10 minutes
Borrowing and Returning of Instruments								

and Articles: Class C1 & C2								
I. REQUESTING OF ITEMS	Watcher/relatives presents accomplished SW charge slip given by the Nurse on duty	Checks & verify all request form for completeness of pertinent data such as: a. date b. patients name c. hospital number d. ward e. signature of requesting nurse	NONE	SW Charge Slip	NONE	1 - 2 minutes	Nurse/Nursing Attendant	10 minutes
II. CHARGING		Makes charges of requested borrowed items according to approved price.	NONE	SW Charge Slip	NONE	1 minute	Nurse/Nursing Attendant	2 minutes

III. SETTLE PAYMENT	Understands given instructions and explanations	a. Directs watcher to settle the bill at the cashier and return the SW form with duplicated copy	Varies* (Based on the item)	SW Charge Slip	NONE	15 seconds	Nurse/ Nursing Attendant	20 seconds
	Watcher/ relatives presents duplicate copy of SW form & receipt. Then Instruct to go back to ward	b. Checks the receipt and amount paid.	NONE	SW Charge Slip	Official Receipt	1 minute	Nurse/ Nursing Attendant	1 minute & 30 seconds
V. ENCODING OF SUPPLIES REQUESTED		Encoding of instrument /articles	NONE	NONE	NONE	10 - 20 minutes	Nurse/ Nursing Attendant	30 seconds

VI. PREPARATION OF BORROWED ITEMS		Prepares the requested articles/ instruments and charge slip	NONE	Charge Slip	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes
		Informs the Nursing Attendant that articles/instruments are ready for pick-up thru telephohe call	NONE	SW Charge Slip	NONE	2 minute – 5 minutes	Nurse/ Nursing Attendant	11 minutes
VII. ISSUANCE OF REQUEST	Nursing Attendant should accomplish the Borrowers Logbook and counter check the borrows item	Advice the nursing attendant to check and inspect the packed item/s before leaving the releasing area	NONE	Borrower's Logbook	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes

VIII. RETURN OF BORROWED ITEMS	Counter checks with the CSSU Staff and affix signature in the Borrower's Logbook	Upon returning, check the reusable items for any damages or losses	NONE	Borrower's Logbook	NONE	2 minutes	Nurse/Nursing Attendant	4 minutes
Borrowing and Returning of Instruments and Articles: Student Affiliates								
I. REQUESTING OF ITEMS	Nursing Student Affiliates should sign at the Borrower's Slips	Checks & verify all request form for completeness of pertinent data	NONE	Borrower's Slip	NONE	1 minute	Nurse/Nursing Attendant	2 minutes
II. PREPARATION OF BORROWED ITEMS		Prepares the requested articles / supplies and issue to the borrower	NONE	NONE	NONE	1 minute	Nurse/Nursing Attendant	2 minutes

III. ISSUANCE OF REQUEST	Nursing Student Affiliate checks the items and surrenders school ID before leaving	Advice the borrower to check and inspect the packed item/s before leaving the releasing area and receiving logbook shall be completed	NONE	Borrower's Slip	NONE	1 minute	Nurse/ Nursing Attendant	2 minutes
IV. RETURN OF BORROWED ITEMS	Counter checks with the CSSU Staff and affix signature in the Borrower's Slip	Upon returning, check the reusable items for any damages or losses. If none, return the school ID.	NONE	Borrower's Slip	NONE	2 minutes	Nurse/ Nursing Attendant	4 minutes
Preparation and Issuance of Linen								
I. RECEIVING OF REQUEST	Nursing attendant presents accomplishment	Receives and evaluates completeness of	NONE	CSR Requisition and Issuance	NONE	30 seconds	Nurse/ Nursing Attendant	1 minute

	shed CSR Requisiti on and Issuance Slip given by the Nurse on duty	accomplis hed form given handed by the watcher a. Date b. Number of patient c. Ward d. Signature of Requesting Nurse		e Slip				
II. PREPARATION OF REQUESTED LINEN		Prepares requested linen from diffent clinical areas by (2-10 shift)	NONE	NONE	NONE	45 minut es - 1 hour	Attenda nt	1 hour and 30 minute s
III. RECORDING OF LINEN		Records the requested linen	NONE	NONE	NONE	1 minut e	Nurse/ Nursing Attenda nt	2 minute s

IV. ISSUANCE OF SUPPLIES	Receives and checks completeness of linen given.	Issuances of linen to different clinical areas and instruct the attendant to check and inspect the linens before leaving the releasing area by (10-6 shift)	NONE	NONE	NONE	1 – 2 minutes	Nurse/ Nursing Attendant	3 minutes
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HAKBANG	KLIYENTE	TAGAPAGBIGAY NG SERVISYO	TAGAL NG AKTIBIDAD	TAONG NAKATALAGA	BAYAD	FORM O PAPEL
A	Para sa konsultasyon					
1	Kumuha ng OPD Record sa OPD Record Station	Tatanungin kung ano ang nararamdaman/ sakit ng pasyente	20 segundo	TB-DOTS Nurse	Wala	Wala

	Pumunta sa TB-DOTS Clinic					
2	Dadalhin ng OPD clerk ang mga OPD cards sa TB-DOTS	OPD Clerk	10 minuto	OPD Clerk	Wala	OPD card at numero at ID patient record para sa bagong pasyente
3	Hintaying tawagin ng Nurse ang pangalan ng pasyente	TB-DOTS Nurse	20 segundo	TB-DOTS Nurse	Wala	Wala
	Pumunta sa TB-DOTS Clinic. Hintaying tawagin ng Nurse ang pangalan ng pasyente ayon sa pgkakasunod-sunod ng numero maliban sa Senior Citizen at people with disability na inuuna sa pagsususri	Tatanungin kung ano ang nararamdaman/ sakit ng pasyente o kung ano ang pakay sa pagpunta ng ospital	20 segundo	TB-DOTS Nurse	Wala	Wala

	Lumapit sa TB-DOTS Nurse	<p>Pagkuha ng mahalagang impormasyon o history ng pasyente, pagkuha ng mga palatandaan tulad ng presyon ng dugo, pulso, tempereaturang katawan, bilang ng paghinga at timbang</p> <p>Pagsasagawa ng pagsusuring pangkatawan mula ulo hanggang paa at itala sa OPD record ang datos</p>	2-5 minuto	TB-DOTS Nurse	Wala	OPD Record
4	Pagtawag sa pangalan ng pasyente ayon sa pagkakasunod-sunod ng bilanmg ng nkatalga sa pasyente maliban sa People with disability (PWD)	Para sa pagkaksunod-sunod ng bilang ng pasyenteng susurin ng doktor	5-10 minuto	TB-DOTS Nurse	Wala	OPD Record at numerong nakatalaga ayon sa pagkaksunod-sunod
5	Pagpasok ng kliyente s TB-DOTS Clinic kasabayng dala ng nurse ang OPD record para ibigay sa doktor	Pagsusri ng doktor sa suliraning pangkalusugan ng pasyente	5-10 minuto	TB-DOTS Physician	Wala	OPD Record

6	Pagsunod sa ginagawang eksaminasyon kung meron	Pagsusuri at pagpapagawa ng mga X-Ray, Laboratory, ultrasound, ECG at iba pang diagnostic exam	30 minuto- 1 oras (blood chem 3 Oras)	Laboratory Med Tech, Xray Tech, ECG Clerk	Depende sa procedure na gagawin	Isang piraso ng papel na nakasulat ang klase ng eksaminasyon at pirma ng doktor na nagpaeksamin
7	Maghintay sa resulta ng pagsusuri at magtanong sa doktor kung mayroong hindi naunawaan	Pag eeksamina, pagbibigay ng lunas at pagpapaliwanag sa kalagayan/ karamdaman ng pasyente. Pagbibigay ng instruksyon sa pasyente bago umuwi	5-10 minuto	TB-DOTS Physician	Wala	OPD Record at mga resulta ng mga pinagawang eksaminasyon
8	Pagbalik sa OPD record sa Nurse pagkatapos ng eksaminasyon ng doktor, unawain at pakinggang mabuti ang dapat gawin. Magtanong sa nurse kung mayroong hindi naunawaan	Pagbibigay ng instruksyon sa pasyente bago umuwi ayon sa isinulat ng doktor sa OPD Record ng pasyente	1-2 minuto	TB-DOTS Nurse	Wala	OPD Record
B	Para sa tutok gamutan;	Titignan ang dalang	30 segundo	TB-DOTS Nurse	Wala	Patient's

1	Pumunta sa TB-DOTS Clinic dala ang Patient booklet/ NTP Identification Card sa nakatalagang oras ng gamutan	Patient's Booklet/NTP Identification Card para maibigay ang tamang bilang at uri ng gamot				Booklet/ NTP Identification Card
2	Pag-ubos ng gamot na nakatalaga sa harap ng nurse	Habang iniinum ang gamot, tatanungin ng nurse kung may ibang nararamdaman ang pasyente na kailangang bigyan ng atensyong medikal	30 minuto - 1 oras	TB-DOTS Nurse	Wala	Treatment Card/ Patient Booklet
3	Magtanong sa nurse kung mayroong hindi naunawaan	Pagbibigay ng instruksyon sa pasyente bago umuwi kung kelan babalik para sa susunod na pagkuha at paginom ng gamot	1-2 minuto	TB-DOTS Nurse	Wala	Patient's Booklet/ NTP Identification Card

