



# **Claims Section**

## Frontline Service

# 1. PROCESSING OF PHIHEALTH BENEFIT CLAIMS

The processing of PhilHealth benefit claims is intended for all PhilHealth beneficiaries admitted and/or seek consult in the hospital.

<b>Office or Division:</b>	Claims Section	
<b>Classification:</b>	Complex	
<b>Type of Transaction:</b>	G2C/G2G	
<b>Who may avail:</b>	All IN/ER/OPD patients who are PhilHealth beneficiaries	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Birth Certificate		Records Section
Complete Clinical Chart		OSS
Complete PhilHealth Requirements		OSS
<b>AGENCY ACTION</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Receives from OSS matched Complete Clinical Charts, claim forms and documentary requirements for processing.	2 Minutes	Claims Section Staff
2. Arranges the matched CCCs, claim forms and documentary requirements in chronological order and distributes to processors.	5 Minutes	Claims Section Staff
3. Checks and processes accuracy and completeness of EMR, CCC, claim forms and documentary requirements.	10 Minutes	Processor
4. Photocopies SOA, scans laboratory results, Operative Technique and/or attaches filter sticker in CSF.	6 Minutes	Processor
5. Facilitates SOA Certified True Copy signing of Hospital Officer (Records, COC or COH).	2 Minutes	Hospital Runner
6. Posts processed claim, records posted claim in logbook then forwards to DCI staff for transmittal to PRO V.	2 Minutes	Processor
7. Stamps "Processed Claim" in face sheet of clinical chart, affixes signature and date then submits accomplishment and transmittal reports to OIC.	2 Minutes	Processor
8. Records and returns processed chart to Medical Records Section.	1 Minute	Claims Section Staff
<b>TOTAL:</b>	30 Minutes	

Prepared by:

**CHRISTIANE VIVIEN F. BOLO**

Administrative Officer II

Officer in Charge-Claims Section/One-Stop-Shop Unit

Approved by:

**ROBERTO A. CHACON, JR., MD, MHA, CHA, FPCS, FPSGS, FPALES**

Acting PGADH/Supervising Chief of Hospital



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**Admission Service**

<b>Office</b>	MEDICAL/SURGERY/PEDIATRIC/ OB/GYNE WARD			
<b>Classification</b>	COMPLEX			
<b>Type of Transaction</b>	GOVERNMENT TO CITIZEN			
<b>Who may avail:</b>	All patient's for confinement			
<b>Checklist of Requirements</b>			<b>Where to secure</b>	
<ul style="list-style-type: none"> <li>• Doctors' Order for Admission:             <ul style="list-style-type: none"> <li>➢ For PHIC patient- PHIC id and MDR FORM 1(Further documentary requirement for PHIC beneficiaries will be accomplished by the PHIC staff)</li> </ul> </li> </ul>			OSS	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEE S TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1	Receives endorsement from ED/OPD. Prepare the room/bed for the patient.	NON E	5 minutes	Nurse/Nursing Attendant
2 PATIENT	Accompany the patient to the assigned room/bed. <ol style="list-style-type: none"> <li>a. Obtains and record vital signs.</li> <li>b. Notifies attending physician regarding admission.</li> <li>c. Carries out Doctor's order according to priority.</li> <li>d. Explains hospital rules and regulation and visiting time, smoking restrictions, etc.</li> <li>e. Complete routine admission forms such as Kardex, input personal data to Medix system, bed number, census, admission registry logbook.</li> </ol>	NON E	30 minutes	Nurse/Nursing Attendant



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**SORSOGON PROVINCIAL HOSPITAL**



**Admission Service**

	<ul style="list-style-type: none"> <li>f. Complete the file according to the hospital policy of file management.</li> <li>g. Complete an accurate admission documentation.</li> <li>h. Monitors/assesses patient's condition and inform doctor for any untoward complaints.</li> </ul>			
<b>3</b>	<p><b>PRE-OPERATIVE PROCEDURES FOR SURGICAL INTERVENTION</b></p> <ul style="list-style-type: none"> <li>a. Discusses to patient and or relative the procedure.</li> <li>b. Secures informed consent if emergency or elective.</li> </ul>	<b>NON E</b>	<b>20 minutes</b>	<b>Doctor/Ward Nurse</b>
<b>4</b>	<ul style="list-style-type: none"> <li>a. Notifies operating room staff for the procedure.</li> <li>b. Notifies anesthesiologist for pre-op evaluation/orientation of patient to anesthetic procedure to be done and pre-op medication</li> </ul>	<b>NON E</b>	<b>20 minutes</b>	<b>Nurse/ Anesthesiologist</b>
<b>5</b>	<ul style="list-style-type: none"> <li>a. Removes jewelry, contact lenses, dentures,etc and endorses to relative for safekeeping.</li> <li>b. Inspects operative site and checks completeness of pre-op medications.</li> <li>c. Takes vital signs.</li> <li>d. Gives pre-operative medications</li> <li>e. Transports patient to OR including chart,medications and other supplies needed.</li> <li>f. Endorses patient to OR nurse</li> </ul>	<b>NON E</b>	<b>15 minutes</b>	<b>Nurse/Nursing Attendant/IW's</b>
<b>TOTAL:</b>			<b>90 minutes</b>	

Prepared by: Marie Glen L. Cirujales, RN,MAN  
 Nurse IV-Assistant Chief Nurse

Approved by:  
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**Admission Service**

<b>FEEDBACK AND COMPLAINTS MECHANISMS</b>	
How to send feedback	
How feedback is processed	
How to file complaint	
How complaints are processed	
Contact information of Agency	



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**Admission Service**



# **CENTRAL SUPPLY ROOM**

## **DISPENSING AND ISSUANCE OF MEDICAL SUPPLIES**





## Dispensing and issuance of Medical Supplies

Preparation of documents needed for the dispensing of medical Supplies to Patients

<b>Office or Division:</b>	Central Supply Room			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Public			
<b>Who may Avail:</b>	All Clients / Patients within the Hospital Premises, In and Out Patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Auto Print Request / Prescription		1. Wards / Stations		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Concerned client / Patient hands over request or prescription.	1. Receives, validates and segregates the request according to type of ward / station.	None	2 Minutes	Central Supply / Staff
	2. Inputs requests in Medix and renders available supplies to the patient's account.		2 Minutes	
	3. Referral to Social Service for assistance incase supplies are not available in the Central Supply Room.		2 Minutes	
	4. Prepares and Dispenses/ Issues supplies to the patient/ Watcher.		2 Minutes	
<b>TOTAL:</b>		None	8 Minutes	

Prepared By:

**AMALIA J. LADESMA**  
Nursing Attendant II

Approved By:

**AARON JOSEPH J. CARPIO, RPh.**  
Supervising Administrative Office

Noted By:

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Citizen Charter

Dental Consultation and Treatment

This process covers patient requiring dental consultation/assessment/evaluation and treatment. This service is offered Monday to Saturday excluding holiday. From 8:00 AM – 4:00 PM. Dental extraction is performed only in the morning to ensure patient's safety and stability.

<b>Office of Division:</b>	Paramedical Service – Dental Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen G2G – Government to Government			
<b>Who may avail:</b>	All patient needing dental consultation/assessment/evaluation and treatment.			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
1. OPD Card (Original)		OPD Registration Section		
2. OPD Chart with Personal Information (Original)		OPD Registration Section		
3. Medical Clearance (Medically Compromised Patient)		Medical Specialist		
4. Individual Patient Treatment Record/ Informed Consent (Properly Accomplished)		Dental Aide		
5. Checklist for Covid 19		Triage		
6. Ekonsulta Health Screening and Assessment Form		Triage		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Proceed to OPD Registration to Hospital Information System (DBP – Medix) Electronic System	Patient Registration /Encode/Update/ process produce/ retrieve information – OPD Record with complete COVID-19 checklist	None	5 minutes	OPD Clerk
	Endorse OPD record/chart to Dental Room	None	5 minutes	OPD Assistant
2. Proceeds to waiting area	Issuance of Patient Individual Treatment Record	None	2 minutes	Dental Aide
3. Fill out and Sign Individual Patient Treatment/Record/ Informed Consent	Instruct patient to wait until their name will be called	None	2 minutes	Patient
4. Submission of Accomplished Individual Patient Treatment Record	Validate completion of accomplished Individual Treatment Record and Informed Consent/ Identification of Medically Compromised Patient	None	2 minutes	Dental Aide



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**SORSOGON PROVINCIAL HOSPITAL**



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Search patient data in the electronic system, request dental anesthesia to the pharmacy	None	5 minutes	Dental Aide
5. Proceed to Dental Room/ dental chair for Oral Assessment/ Evaluation and Treatment	Completion of Dental Chart, evaluation of Chief Complaint, secure informed consent and performance of required dental procedure	None	15minutes – 1hour (Case to Case Basis)	Dentist
6.Settle necessary bill to the cashier	Gives order of payment to settle bill at the cashier for the treatment/ procedured done to the electronic system	See table of fees and charges	5 minutes	Dental Aide
7.Present proof of payment to Dental Aide	Provide written prescription and take home instruction	None	4 minutes	Dentist/Dental Aide
END OF TRANSACTION		<b>TOTAL:N/A</b>	1 hour and 33 minutes	

Prepared by:	Reviewed by:	Approved by:
<b>CHRISTY D. HUGO, DMD</b> Dentist III	<b>ROBERTO A. CHACON JR., MD., MHA. CHA. FPCS. FPSGS. FPALES. DPBS.</b> PGADH/Supervising Chief of Hospital	<b>RENATO B. BOLO, JR MD, MHA, CHA, FPCHA</b> Quality Management Representative



**List of Dental Services and Fees**

Type of Procedure	Amount
Oral Propylaxis	P250.00
Temporary Filling	P200.00 / tooth
Extraction	P153.00 / tooth
Permanent Filling	P400.00 / tooth
Pit and Fissure Sealant	Free
Fluoride Application	Free
Alveolectomy	Covered by Phil Health
Drainage of Abscess	Ekonsulta
Impaction Note: (Simple case only)	Note: Non-paying Patient through Social Services



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**SORSOGON PROVINCIAL HOSPITAL**



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Search patient data in the electronic system, request dental anesthesia to the pharmacy	None	5 minutes	Dental Aide
5. Proceed to Dental Room/ dental chair for Oral Assessment/ Evaluation and Treatment	Completion of Dental Chart, evaluation of Chief Complaint, secure informed consent and performance of required dental procedure	None	15minutes – 1hour (Case to Case Basis)	Dentist
6.Settle necessary bill to the cashier	Gives order of payment to settle bill at the cashier for the treatment/ procedured done to the electronic system	See table of fees and charges	5 minutes	Dental Aide
7.Present proof of payment to Dental Aide	Provide written prescription and take home instruction	None	4 minutes	Dentist/Dental Aide
END OF TRANSACTION		<b>TOTAL:N/A</b>	1 hour and 33 minutes	

Prepared by:	Reviewed by:
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**SORSOGON PROVINCIAL HOSPITAL**



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	Search patient data in the electronic system, request dental anesthesia to the pharmacy	None	5 minutes	Dental Aide
5. Proceed to Dental Room/ dental chair for Oral Assessment/ Evaluation and Treatment	Completion of Dental Chart, evaluation of Chief Complaint, secure informed consent and performance of required dental procedure	None	15minutes – 1hour (Case to Case Basis)	Dentist
6.Settle necessary bill to the cashier	Gives order of payment to settle bill at the cashier for the treatment/ procedured done to the electronic system	See table of fees and charges	5 minutes	Dental Aide
7.Present proof of payment to Dental Aide	Provide written prescription and take home instruction	None	4 minutes	Dentist/Dental Aide
END OF TRANSACTION		<b>TOTAL:N/A</b>	1 hour and 33 minutes	



## Hemodialysis Services

<b>Office</b>	Sorsogon Provincial Hospital Dialysis Center			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	Government-Patient			
<b>Who may avail:</b>	All in and out patients needing dialysis but priority is given to emergency cases			
<b>Schedule of availability of service</b>	<ul style="list-style-type: none"> <li>▪ Monday to Saturday from 6:00 AM to 5:00 PM</li> <li>▪ Two (2) shifts (1<sup>st</sup> shift: 6:00 AM, 2<sup>nd</sup> shift: 11AM)</li> </ul>			
	<b>Checklist of Requirements</b>	<b>Where to secure</b>		
	<p>Government Issued Identification Card            (1 photocopy of Gov't/Senior Citizen/PWD ID)            PHIC updated MDR ( 1 photocopy )</p> <p><b>Out- Patient (Transient)</b></p> <ul style="list-style-type: none"> <li>➤ Latest HbsAg and Anti-HCV test (valid within 6months) ( 1 photocopy )</li> <li>➤ Latest laboratory result ( CBC with platelet, BUN, Crea) - ( 1 photocopy )</li> <li>➤ Last three (3) previous Hemodialysis treatment sheet (for regular dialysis patients) - ( 1 photocopy each)</li> <li>➤ Philhealth Certification( 1 original copy )</li> <li>➤ PDD ( 1 photocopy )</li> <li>➤ Endorsement/Referral ( 1 original copy )</li> </ul> <p><b>In-patient (New &amp; Transient)</b></p> <p>Patient's Chart with the following:</p> <ul style="list-style-type: none"> <li>➤ Doctor's order</li> <li>➤ Assessment by Nephrologist or Medical Resident on duty</li> <li>➤ Latest HbsAg and Anti-HCV test (valid within 6months)</li> <li>➤ Latest laboratory result (CBC with platelet, BUN, Crea)</li> <li>➤ Last three (3) previous Hemodialysis treatment sheet (for regular dialysis patients)</li> </ul>	<p>PHIC Office</p> <p>HD Center where the patient is currently having his/her HD treatment</p> <p>ER/WARD Patient's Chart</p>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>

		PAID		
1 From ER/Ward	1. Refer to Nephrologist & Hemodialysis Staff  1.1 Informs the dialysis unit of schedule.  1.2 Educate patient about the procedure.  1.3 Secures informed consent  1.4 Secures materials for HD  1.5 Transports patient to dialysis unit  1.6 Patient endorsement		5 minutes  5 minutes  5-10 minutes  1-2 minutes  2 hours  10-15 minutes  1-5 minutes	ER/ Ward Nurse
2 HD Unit	2. Receives patient for dialysis  2.1 Check doctor's order.  2.2 Checks and prepare materials needed and orients patient and relative about the procedure.  2.3 Check for Access Line <b>*If with existing access line(proceed to Step 3)</b>  <b>*if without access line:</b> 2.4 Refers to vascular surgeon for insertion of temporary access. 2.5 Secures consent for procedure  2.6 Prepare materials needed for insertion.		5 minutes  2 minutes  5 minutes  1 minute  1-30 minutes  1-2 minutes  15 minutes	HD Nurse



	<p>2.7 Prepares the patient.</p> <p>2.8 Proceed for Access Creation</p> <p>2.9 Enrolls patient to PHIC/PDD</p>		<p>5 minutes</p> <p>30 minutes</p> <p>10 minutes</p>	<p>Surgeon-on-duty</p> <p>Clerical Aide</p>
<p><b>3</b></p> <p>HD Unit</p>	<p>3. Prepares patient for dialysis treatment and perform the procedure.</p> <p><b>PRE-DIALYSIS:</b></p> <p>3.1 Patient Assessment (Determines patient's condition, checks contraptions, takes vital signs, weighs patient, calculates dry weight, assesses access line of patient)</p> <p>3.2 Prepares materials.</p> <p>3.3 Prepares machine.</p> <p><b>INTRA-DIALYSIS:</b></p> <p>3.4 Monitors patient (vital signs, neurologic status, integrity of access line, presence of bleeding, complications)</p> <p>3.5 Monitors dialysis machine.</p> <p>3.6 Provide appropriate health teachings.</p> <p><b>4.Termination</b></p> <p>4.1 Gives post dialysis care. (Patient care, remind s next schedule of treatment, documentation, transports home, endorsement and machine care).</p>		<p>3-5 HOURS</p> <p>25 minutes</p> <p>10 minutes</p> <p>30 minutes</p> <p>Every 30 minutes</p> <p>5-10 minutes</p> <p>5-10 minutes</p> <p>20-30 minutes</p>	<p>HD Nurse / HD Technician</p> <p>HD Nurse</p> <p>HD Nurse</p> <p>HD Technician</p> <p>HD Technician</p> <p>HD Nurse</p> <p>HD Nurse</p> <p>HD Nurse/ HD Technician</p>

	4.2 Transports back to Ward/ER and endorse.  - END OF SERVICE-		15 minutes	Ward IW / HD Nurse
<b>TOTAL:</b>		Charge to PHIC		

Prepared by:

**Sybelle F. Rañola, RN**  
Designated Senior Nurse – Hemodialysis Unit

Approved by:

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Chief of Hospital



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**Frontline Services:**

<b>Office</b>	<b>EMERGENCY DEPARTMENT</b>			
<b>Classification</b>	<b>COMPLEX</b>			
<b>Type of Transaction</b>	<b>GOVERNMENT TO CITIZEN</b>			
<b>Who may avail:</b>	Persons needing "emergency" medical care.			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
Triage Checklist for COVID-19, Referral from other Health Facilities (if available)		Triage Area, Referring hospital/Health center		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1 <b>PATIENT</b>	Directs patient/companion to ER Triage area (Accomplish COVID-19 Checklist) if with signs may proceed to Holding area (tent), if with no signs and symptoms will go directly to ER	NONE	1 minute	Security Guard on duty/Nurse/Nursing Attendant
2	Obtain Vital Signs, asks patient's name, and chief complaints	NONE	5 minutes	Nurse/ER Med
3	Examines/assesses patient's condition according to Triage Scale Categories <ul style="list-style-type: none"> <li>• EMERGENT- will be attended promptly (within 10 minutes)</li> <li>• URGENT- 1 hour</li> </ul>	NONE	5-10 minutes	Nurse/ER Med



**Frontline Services:**

	<ul style="list-style-type: none"> <li><b>NON-URGENT</b> about 2-3 hours</li> </ul> <p>Inputs patient's data into the computer</p>			
4	Prescribes medicines and/or requests diagnostic procedures in MEDIX system	NONE	5 minutes	Nurse/ER Med
5	Administers medications	NONE	2 minutes	Nurse
6	Evaluates results of diagnostic procedures	NONE	1 minute	ER Med
7	Evaluates disposition of patient (admission or out-patient)	NONE	2 minutes	ER Med
8	Gives charge slip for medicines and other procedures	NONE	1 minute	ER Clerk
9	Presents official receipt (OR)	NONE	5 minutes	Patient/Companion
10	Checks and gives instructions on: prescription, further laboratory work-up, referral and follow-up	NONE	3 minutes	Nurse/ER Med
11	<b>PATIENT FOR ADMISSION</b>  Attending Physician shall issue an admitting order slip	NONE	5 minutes	ER Med
12	Gives admission slip to patient's companion to	NONE	15 minutes	Nurse



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**SORSOGON PROVINCIAL HOSPITAL**



**Frontline Services:**

	proceed to OSS for patient registration and for signing of informed consent for admission			
13	Notify the ward of admission/ bed assignment and for any equipment to be prepared in the unit prior to transfer	NONE	5 minutes	Nurse
14	Carries out stat Docror's order	NONE	2 minutes	Nurse
15	Checks for completeness and accuracy of chart prior to transfer to the ward	NONE	5 minutes	Nurse
16	Coordinates and accompanies patient who are weak or in critical condition	NONE	5 minutes	Nurse/IW's
<b>TOTAL:</b>			<b>77 minutes</b>	

**TOTAL RESPONSE TIME:**

- **Triaging System**
- **Category of Patients:**
  - **Emergent (Red)-will attend to promptly**
  - **Urgent (Yellow)-Maximum waiting time(1) hour**
  - **Non-Urgent (Green)-Maximum waiting time(3) hours**
- **Extension of time will depend on the presenting symptoms, previously diagnosed disease/illness, completion of diagnostic procedures, treatment, recommendations by attending physician and referrals and availability of room especially COVID/PROBABLE ward.**

**Prepared by:**

**Marie Glen L. Cirujales, RN,MAN**  
**Nurse IV-Assistant Chief Nurse**

**Approved by:**

**Roberto A. Chacon Jr.,MD.,MHA,CHA,FPCS,FPSGS,FPALES,DPBS**  
**PGADH/Supervising Chief of Hospital**



## HEART STATION CITIZEN CHARTER

**SERVICE TITLE:** Availability of 2D echo and ECG Diagnostic Procedure of the clients.

**RATIONALE:** To promote and provide, safety, effective, appropriate quality diagnostic health services.

**WHO MAY AVAIL:** All (Both Admitted and Out Patient)

**SCHEDULE OF AVAILABILITY:**

**2D Echocardiography Out – Patient**

Monday to Friday	8:00 am – 12:00 noon	2D Echo procedure
	12:00 noon – 1:00 pm	save & upload file to DVD

**2D Echocardiography In – Patient**

Monday to Friday	1:00 pm – 3:00 pm	2D Echo procedure
	3:00 pm - 4:00 pm	save & upload file to DVD

**Electrocardiogram (ECG) Out Patient**

Monday to Friday	8:00 am - 12:00 noon
Saturday	8:00 am – 1:00 pm

**Electrocardiogram (ECG) In Patient**

Monday to Friday	1:00 am - 4:00 pm
Saturday	8:00 am - 1:00 pm

*Echocardiography is a non-invasive procedure used to assess the heart's function and structures. It uses two-dimensional and Doppler ultrasound to create images of the heart*

**1. 2D Echocardiography Procedure for the In- patient Department**

Office or Division:		<b>All Units wards</b>		
Classification :		<b>Complex</b>		
Type of Transaction:		<b>Government to Citizen</b>		
Who may avail:		<b>All</b>		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Completed 2d-echo request & via MEDIX and request form with complete data  2. 2D Echo Materials needed <ul style="list-style-type: none"> <li>• ECG electrodes - 4 pcs</li> <li>• Clean gloves - 2 pairs</li> <li>• DVD – R w/ jacket – 1 pc</li> <li>• Face mask - 1 pc</li> <li>• Tissue - 1 roll</li> </ul>		1. Requesting Physician / Nurse on duty  2. CSR		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



### HEART STATION CITIZEN CHARTER

<p>1. The relatives go to the Heart Station and present 2D echo request and other documents for assessment</p>	<p>1. Request from the ward that are encoded to the system and printed request is given to watcher and advised to bring the request to the Heart Station</p>	<p>1. As per approved fees</p>	<p>1 minutes</p>	<p>1. 2d Echo Technician Heart Station</p>
<p>2. Pay attention to the instruction given, and inform the Nurse on duty regarding the day and time of schedule.</p>	<p>2.1 Receive and checks completely filled out patients details ( particularly the ward/room, age, gender, birthday, address , weight, height, chief complains and clinical indication</p> <p>2.2 Relatives is informed of the day and time schedule of the procedure.</p> <p>2.3 Give the list of materials needed and advised to secure it at the CSR of the hospital</p>	<p>2.1 none</p>	<p>5 minutes</p>	<p>2. 2D echo technician Heart Station</p>
<p>3. Report on time to the Heart Station</p>	<p>3.1 Transported to the Heart Station via wheelchair or stretcher with provided materials to use.</p> <p>3.2 Identify patient as for request and performs requested procedure.</p> <p>3.3 Advise patient/ relative regarding the payment to be charged and billed upon discharge, if necessary</p>	<p>3. None</p>	<p>3. 1 5 minutes</p>	<p>CSR</p> <p>3.1 CAP/Nursing Attendant on duty</p>
		<p>3.2 as per approved fees</p>	<p>3.2 30 minutes to 1 hour</p>	<p>3.2 2D Echo Technician</p>



### HEART STATION CITIZEN CHARTER

	<p>3.4 Advise patient that official result will be release after 5 to 10 working days</p> <ul style="list-style-type: none"> <li>• <i>If the patient is already discharge, advise to come back after 5 – 10 working days.</i></li> <li>• <i>If still confined result will handed to the Nurse on duty</i></li> </ul>			
4. Return to ward	4. After the procedure done , patient will be transferred return back to the ward via wheelchair or stretcher	4. None	4. 5 minutes	4. CAP/Nursing Attendant on duty
5. Release of result	<p>5. Issues official 2d echo result to the nurse on duty in the ward where the patient is admitted.</p> <p>But if the Patient is already discharge, advised to come back to the Heart Station after 5 to 10 working days to get the 2D echo result.</p>	5. none	5. 1 minute	5. 2D Echo Technician
	Total		5 days 1 hour and 17 minutes	

*Electrocardiography is non – invasive procedure that records electrical activity of the heart.*





## HEART STATION CITIZEN CHARTER

### 2. Electrocardiogram Procedure for In- Patient Department

ECG procedures to be done from: 1:00 pm – 4:00 pm Monday – Friday  
 8:00 am - 1:00 pm Saturday

Stat order will be done right away.

Office or Division:		<b>All Units Wards</b>		
Classification:		<b>Complex</b>		
Type of transaction:		<b>Government to Citizen</b>		
Who may avail:		<b>All</b>		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Completed ECG request via MEDIX		1. Requesting Physician		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient on bed	1. Check to the computer the encoded request for ECG procedure from the ward and have a list of patients for ECG from the System file	1. None	1. 5 minutes	1. ECG technician Heart Station
	1.2 Carrying the ECG machine to the ward and reach out the patient to do the ECG procedures at bedside	1.2 none	1.2 5 minutes	1.2 ECG Technician
2. Procedure proper	2.1 Identify patient as for request and performs requested procedures	2.1 as per approved fees	2.1 10 minutes	2.1 ECG Technician
	2.2 After the procedure rendered, the ECG tracing will be print out to the Heart Station then submit it the Nurse	2.2 none	2.2 5 minutes	2.2 ECG Technician



### HEART STATION CITIZEN CHARTER

3. Inform for the release of result forwarded to Nurse's Station.	on duty where in the patient is confined 3. Advises patient regarding the result will be handed to the Nurse on duty	3. Bills is encoded to the System and to be charged and billed upon discharge.	3. 5 minutes	3. ECG Technician
	Total		1 day 30 minutes	

#### 3. 2D – Echocardiography Procedure for Out Patient Department

Procedures to be done from: 8:00 am – 12:00 noon

Office or Division:		<b>All Units Wards</b>		
Classification		<b>Complex</b>		
Type of Transaction:		<b>Government to Citizen</b>		
Who may avail:		<b>All</b>		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Completed 2D echo request		1. Requesting Physician		
2. 2D echo materials needed		2. CSR		
3. Senior Citizen ID or PWD ID or certificate of Indigence		3. Social Worker Section		
4. Official Receipt and Order of Payment		4. Cashier Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>



### HEART STATION CITIZEN CHARTER

<p>1. Present 2D echo request and other documents for assessment</p>	<p>1.1 Receive and checks completely filled out 2D echo request (particularly the age, gender, birthday, address, weight, height and clinical indication.</p> <p>1.2 Assess patient's condition if there is a presence or S/S of severe dyspnea, generalize edema. Tachycardia, orthopnea, restless and infectious (dirty cases)</p>	<p>1.1 None</p>	<p>1.1 5 minutes</p>	<p>1. 1 2D echo Technician</p>
<p>2. Pay attention to the instruction given.</p>	<p>2.1 Inform the day and time schedule.</p> <p>2.2 Give the list of materials needed and advised to secure</p>	<p>2.1 none</p> <p>2. 2 none</p>	<p>2. 1 2 minutes</p> <p>2.2 2 minutes</p>	<p>2.1 2D Echo Technician</p> <p>2.2 2D Echo Technician</p>
<p>3. Report on time and wait in front of the Heart Station( waiting area provided)</p>	<p>3.1 Request is encoded to the System and print out charge slip</p>	<p>3.1 as per approves fees</p>	<p>3.1 1 minutes</p>	<p>3.1 2D Echo Technician</p>
<p>4. Charge slip is given and advise to settle it either to the Social Services or to the Billing/Cashier</p>	<p>4. Check to the System if it is already rendered and cleared out from the billing or social service</p>	<p>4. as per approves fees</p>	<p>4. 1 minute</p>	<p>4. 2D Echo Technician</p>
<p>5. Advised to get inside the Heart Station and prepared for the procedure</p>	<p>5. Facilitate complete procedure for 2D echo with Doppler study</p> <p>5.1 After the procedure done advised to comeback to get the result, after 5 to 10 working days.</p>	<p>5. as per Approve fees</p> <p>5.1 none</p>	<p>5. 30 minutes to 1 hour</p> <p>5. 1 minute</p>	<p>5. 2D Echo Technician</p> <p>5. 2D Echo Technician</p>
<p>6. Return back to the Heart Station per</p>	<p>6. Issues official result and advised to show it to the requesting physician</p>	<p>6. none</p>	<p>6. 1 minute</p>	<p>2D Echo Technician</p>



### HEART STATION CITIZEN CHARTER

scheduled date to claim the result.	for further medical management		
	Total		5 days 1 hour & 13 minutes

**4. Electrocardiogram procedure for Out – Patient Department**

ECG procedures are done from 8:00 am - 12:00 noon Monday – Friday  
 1:00 pm - 1:00 pm Saturday

<b>Office or Division :</b>		Department of Medicine		
<b>Classification :</b>		Simple		
<b>Type of Transaction:</b>		Government to Citizen		
<b>Who may avail:</b>		All		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Completed ECG request 2. Senior Citizen ID or PDW ID or Certificate of Indigence 3. Official Receipt and Order of payment		1. Requesting Physician 2. Social Worker Section 3. Cashier Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present ECG request and other documents	1. Receives, assesses request and evaluate amount to be paid	1. As per approved fees	1. 5 minutes	1. ECG Technician Heart Station
2. Pay attention to the instruction given. Wait in front of the Heart Station (waiting area)	2. Request is encoded to the System and print out the charge slip	2. As per approved fees	2. 2 minutes	2. ECG Technician Heart Station
3. Charge slip is given and advise to settle it either to the Social	3. Check to the System if it is rendered and cleared	3. As per approved fees	3. 2 minutes	3. ECG Technician



**HEART STATION CITIZEN CHARTER**

Services or to the Billing/Cashier	out from the billing or social service			
4. Advised to get inside the Heart Station and prepared for the procedure	4. Facilitate complete ECG procedure	4. As per Approved fees	3. 15 minutes	3. ECG technician Heart Station
5. After the procedure advised to wait outside of the Heart Station waiting area for the printed ECG tracing result.	5. Give the result and advised to show it to the requesting physician for further medical management.	5. None		
	total		40 minutes	

Prepared by:

**CYNTHIA L. GALIDO, RN**  
Heart Station Unit – Nurse In charge

Noted by:

**MARIA PRISCILLA C. FAJARDO, MD, MPH**  
PGADH/Supervising Chief of Clinics- Paramedical

Approved by:

**ROBERTO A. CHACON JR., MD, MHA, FPCS, FPSGS, FPALES**  
PGADH/Supervising Chief of Hospital



# *Provincial Government of Sorsogon*

## **SORSOGON PROVINCIAL HOSPITAL**



### **Vision**

A government healthcare facility that provides safe, specific and specialized care for all.

### **Mission**

To make quality healthcare services available and affordable to all through compassionate, committed and competent healthcare workers.

### **Quality Policy**

The Provincial, District and Medicare Hospital of the Provincial Government of Sorsogon are strongly committed to provide safe, specialized and highly quality health care for all Sorsoganons ensuring responsiveness and satisfaction of its clients and stakeholders.

To uphold this commitment, we shall:

- Formulate Quality Objectives on all functional areas aligned with the department of health standards, thrusts and programs;
- Strongly comply with the provisions set forth by the RA 11223 of the Universal health Care Act and other applicable statutory and regulatory requirements.
- Institute mechanism to sustain efficient performance and continually improve the human resources knowledge, skills, expertise, and health practices making our services readily available;
- Continually improve our processes and infrastructure to ensure that the state of the art facilities are in place to respond to their clients' needs and requirements;
- Uphold client-focused and output-oriented services at all levels of the organization through effective communication, collaboration, and values-laden environment



Barangay Macabog, Sorsogon City 4700 Province of Sorsogon

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# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



<b>Office/Division/Department</b>	<b>SPH Human Resource Management Department</b>
<b>Classification</b>	<b>Highly Technical</b>
<b>Type of Transaction</b>	<b>G2C- Government to Citizen, G2G Government to Government</b>
<b>Who may Avail</b>	<b>All interested/Qualified applicants</b>

### 1. Recruitment, Selection and Placement

<b>Client Steps</b>	<b>Department Action</b>	<b>Duration/ Time Frame</b>	<b>FEES TO BE PAID</b>	<b>DOCUMENT REQUIRED/Checklist of Requirements</b>	<b>RESPONSIBLE Person</b>
Publication of Vacant Position	Posting of Vacant Position at designated area	15 Calendar days	None	Posting of Vacant Position list from PHRMO	HR Admin Section
Document upon Receipt of Newly Permanent Appointment	Checking & Review	As per specified date of Submission to PHRMO	None	Personal Data Sheet Work Experience Sheet Original copy of Authenticated Certificate of Eligibility Position Description Form Oath of Office Certificate of Assumption to Duty Medical Certificate NBI Clearance Statement of Assets, Liabilities and net worth(SALN) Certificate of Live Birth/Marriage Contract Certificate of True copy of TOR	HR Admin Section
Promotion	Checking & Review	As per specified date of Submission to PHRMO		Personal Data Sheet Work Experience Sheet Original Copy of Authenticated of Eligibility Position Description Form Oath of Office Certificate of assumption to Duty Performance Rating in the last rating period/Individual Performance Commitment and Review Statement of assets & liabilities	



# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



Job Application Job Order Worker & Contract of Service	1. Submit PDS/Resume/ Bio Data 2. Review & Asses Application 3. Conduct Initial Interview 4. Endorse to Chief of Hospital for final interview 5. Endorsement to Governor, Provl Admin & PHRMO 6. Job Briefing, Salary, Hospital Policy 7. Processing of requirements BIR, submission of other required documents 8. Start of Duty	1 min  2-5 mins  5-10 mins 5-10 mins  5-10 mins  15mins  5-10 mins	None	1. Application letter 2. PRC license (For Medical License Professional) 3. CSC Cert of Eligibility 4. College Diploma 5. BIR-TIN 6. Board Diploma 7. PHIC Healthcare Accreditations (for applicable applicant) 8. S2 Number (for applicable applicant) 9. Residence Certificate 10. Oath of office	HR Admin Section







# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



### 2. Request of Documents

<b>Office/Division/Department</b>		<b>SPH Human Resource Management Department</b>			
<b>Classification</b>		<b>Simple</b>			
<b>Type of Transaction</b>		<b>G2C- Government to Citizen, G2G Government to Government</b>			
<b>Who may Avail</b>		<b>Employees &amp; Former Employees</b>			
<b>Client Steps</b>	<b>Department Action</b>	<b>Duration/ Time Frame</b>	<b>FEES TO BE PAID</b>	<b>DOCUMENT REQUIRED/Checklist of Requirements</b>	<b>RESPONSIBLE Person</b>
Issuance of Service Record/ Certificate of Employment	Preparation	1 days	None	Fill up request form or written request form	HR Admin Section
	Release	3 days			
Accrued Leave Credit Cert/ Certificate of No pending case		1 day	None	Signed Certificate of Leave Credits & No Pending case	HR Records Section

### 3. Processing of Leave Application

<b>Office/Division/Department</b>		<b>SPH Human Resource Management Department</b>			
<b>Classification</b>		<b>Complex</b>			
<b>Type of Transaction</b>		<b>G2G Government to Government</b>			
<b>Who may Avail</b>		<b>SPH Employees</b>			
<b>Client Steps</b>	<b>Department Action</b>	<b>Duration/ Time Frame</b>	<b>FEES TO BE PAID</b>	<b>DOCUMENT REQUIRED/Checklist of Requirements</b>	<b>RESPONSIBLE Person</b>
Processing of Leave Application	Vacation Leave	5 days upon receipt of application	None	Leave form signed/approved by the immediate supervisor	HR Admin Section
	Mandatory/ Forced leave	5days upon receipt of application	None	Leave form signed/approved by the immediate supervisor	HR Admin Section
	Sick Leave	Shall be filed immediately	None	Leave form signed/approved by the immediate supervisor	



# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



		upon return to work		
	Maternity leave	Seven to Fourteen days(7-14days) upon receipt of application	None	Leave form signed/approved by the immediate supervisor/approved by the immediate supervisor.
	Paternity Leave	Three to Seven days(3 to7days) upon receipt of application	None	Leave form signed by the immediate /approved by the immediate supervisor
	Special Privilege leave(SPL)	5days upon receipt of application	None	Leave form signed by the immediate /approved by the immediate supervisor
	Solo Parent Leave	5days upon receipt of application	None	Leave form signed/approved by the immediate supervisor
	Study Leave	Seven to Fourteen days(7-14days) upon receipt of application	None	Leave form signed/approved by the immediate supervisor Shall meet the all the requirements if any.
	VAWC Leave	Shall be filed in advance or immediately upon the womans employees return to work	None	Attachment upon filing: Barangay Protection Order, Temporary/Permanent protection Order obtained from the court; If the Protection order is not yet issued by the barangay or the court, a certification issued by the PunongBarnagy/kagawad or Prosecutor of Clerk of Court that the application for the BPO,



# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



				TPO, PPO has been filed with the said office shall be sufficient to support the application.	
	Rehabilitation Leave	5days upon receipt of application	None	Leave form signed/approved by the immediate supervisor	
	Magna Carta for Women	Seven to Fourteen days(7-14days) upon receipt of application	None	Leave form signed/approved by the immediate supervisor	
	Travel Abroad	Seven to Fourteen days(7-14days) upon receipt of application	None	Leave form signed/approved by the immediate supervisor	
	Relocation Leave	5days upon receipt of application	None	Leave form signed/approved by the immediate supervisor	
	Adoption leave	Fourteen Days(14) upon receipt of application	None	Leave form signed/approved by the immediate supervisor And shall be filed with an authenticated copy of the Pre-Adoptive Placement Authority issued by the DSWD.	
	Quarantine leave	Shall be filed immediately upon return to work	None	Leave form signed/approved by the immediate supervisor	



# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



	Terminal Leave	Twenty-one days(21) upon receipt	None	<p>With attached Quarantine certification from IPC/or Barangay/CHO</p> <p>Leave form signed/approved by the immediate supervisor</p> <p>Proof of employees resignation or retirement or separation from the service</p>	
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<b>Office/Division/Department</b>			<b>SPH Human Resource Management Department</b>		
<b>Classification</b>			<b>Highly Technical</b>		
<b>Type of Transaction</b>			<b>G2G Government to Government</b>		
<b>Who may Avail</b>			<b>SPH Employees</b>		
<b>Kind of Service</b>			<b>Internal Services</b>		
<b>Client Steps</b>	<b>Department Action</b>	<b>Duration/ Time Frame</b>	<b>FEES TO BE PAID</b>	<b>DOCUMENT REQUIRED/Checklist of Requirements</b>	<b>RESPONSIBLE Person</b>
Preparation of Contract of Service	After the Contract signing of Nurse, Nursing Attendant, & Medical officer	2 days	None	Contract of Service Doc, Oath of Office, Residence Certificate	HR Admin Section
Job Order Worker salary	After the 15 <sup>th</sup> & 30 <sup>th</sup> of the month	2 days submission to PHRMO	None	Daily Time record & Accomplishment report	HR Admin Section
Contract of Service Salary	Monthly basis	1 day submission to PHRMO	None	Daily Time record & Accomplishment report	HR Admin Section
Travel Order	Preparation	5 mins	None	Travel Order, Appearance, signed vouchers	HR Admin Section
Reimbursement of Travel	Preparation	15 mins	None	Signed Vouchers	HR Admin Section
Utilities Payment ( Electric/ Water/Internet/Cable	Preparation	15 mins	None	Signed Vouchers	HR Admin Section
RATA(PGDH/PGADH & Authorized Head by	Preparation	15 mins	None	Signed Vouchers	HR Admin Section



# Provincial Government of Sorsogon

## SORSOGON PROVINCIAL HOSPITAL



LCE)					
Preparation of Terminal Leave	Preparation	15 days	None	Signed vouchers, CTC documents	HR Admin Section/HR Records Section
Salary/Deduction/Loans (Payroll)	Preparation, Checking & Review	3days	None	Signed Payroll	HR Admin Section
Pay-roll of PHIC Honorarium	Preparation, Checking & Review	3 days	None	Signed payroll	HR Admin Section
Disbursement of Honorarium		2-3 days	None	Signed Payroll	HRMO Disbursing Officer
OPCR/DPCR/IPCR		Jan-June(July 15) July-Dec(Jan 15)	None	OPCR/DPCR/IPCR Signed	HRMO/HR Admin Section
SALN		March 15	None	SALN Form signed and notarized	HR Admin Section
Hazard Pay(SRA/AHDP)	Preparation, Checking & Review	3-4 weeks	None	DTR	HR Admin Section
Orientation of Newly appointed Employee		5 hours	None	Personal Appearance	HRMO
Other documents related to HR for action			None		HRMO

Prepared by:

**LYN D. DE LA CRUZ, RPh, APCHA**  
Administrative Officer IV-HRMO

Approved by:

**ROBERTO A. CHACON, JR., MD, MHA, CHA, FPSGS, FPALES, DPBS**  
PGADH/Supervising CHIEF OF HOSPITAL



The Imaging Department of Sorsogon Provincial Hospital provides adequate and quality diagnostics imaging examinations with the least possible cost and least possible exposure to the patients.

<b>Office/Division:</b>	IMAGING DEPARTMENT
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	Government to Client
<b>Who may Avail:</b>	<ul style="list-style-type: none"> <li>- ER Patients</li> <li>- In-Patients</li> <li>- OPD Patients</li> </ul>

PATIENT ACTION	AGENCY ACTION	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For OPD, submits the request to the radiology department	Receives and evaluate the request.	None	<b>1 minute</b>	<i>Clerk/ Rad Tech</i>
1.1 For In-Patient/ER, register the request to the Hospital Information System		None	<b>1 minute</b>	<i>Ward Nurse/ ER Nurse</i>
	Schedule patient for ultrasound/CT scan (with contrast) and X-ray (special procedure)	None	<b>2 minutes</b>	<i>Clerk / Rad Tech</i>
	Prepares charge slip for radiologic examination.	None	<b>1 minute</b>	<i>Rad Tech</i>
2. Patient/ Patient's escort receives the charge slip	Refer the patient to -Cashier -Billing  -Social Worker/ Malasakit Center	Original Hospital Service Fee + Reading Fee  Discounted Hospital Fee + Reading Fee	<b>1 minute</b>	<i>Clerk / Rad Tech</i>



3. Patient/ Patient's relative returns the processed charge slip to the Radiology dept.  Pay – (with O.R.) Charity/Indigent/PW D/SC	Receives the charge slip and inform the patient about the procedure	None	<b>1 minute</b>	<i>Rad Tech</i>
4. Patient may proceed to the examination room	Performs specific examination (Plain) Performs specific examination. (Special Procedures)	None	<b>10 minutes</b>  <b>1 hour</b>	<i>Rad Tech</i>  <i>Rad Tech</i>
5. Patient / Patient's relative waits for the official results	Inform the patient/ patient's relative the schedule of the releasing of the official results	None	<b>1 minute</b>	<i>Rad Tech</i>
6. Patient / Patient's relative receives the O.R. and insert their signature in the releasing logbook	Records and release official result.	None	<b>2 minutes</b>	<i>Rad Tech</i>
<b>TOTAL:</b>			<b>1 Hour 20 Minutes</b>	

Prepared by:

**MA. MONICA C. MANLANGIT, RRT**  
 OIC, Chief Radiologic Technologist

Approved by:

**ROBERTO A. CHACON JR., MD, MHA, CHA, FPCS, FPSGS, FPALES, DPBS**  
 PGADH / Supervising Chief of Hospital





*Provincial Government of Sorsogon*  
**SORSOGON PROVINCIAL HOSPITAL**



**ISO/QMS SECTION** - The ISO/QMS office make certain of the hospital's commitment to quality and continual improvement, is intended to be used by all the offices, departments or units of Sorsogon Provincial Hospital. It defines and clarifies policies, systems, and procedures adopted to implement and continually improve the hospital Quality Management System. It also intends to provide accurate compliance on the satisfaction of clients of the hospital. Likewise, it serves as a reference and a guide for personnel in decisions and actions for the performance of their day-to-day tasks and to ensure awareness, consistency in the implementation of processes, conformance to planned arrangements; compliance to regulatory and statutory requirements; and providing relevant stakeholder requirements

<b>Office</b>	ISO/QMS Office			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C			
1. The External Client Satisfaction Measurement is a form to evaluate the services rendered by the Hospital to the patients. It helps to gather information to upgrade the hospital's services through suggestions by the patients and to correct non-conformities of patient's care done during hospitalization.				
<b>Who may avail:</b>	Patients			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
1. External Client Satisfaction Measurement Form.		1 Nurses Station		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1 Fill up the ECSM Form completely and honestly	1.1 Assist the client in filling the ECSM Form if requested.	1.1 NONE	1.1 15 minutes	1.1 Unit Head/Representative
2. Submits the filled up form to the Unit Head/Representative	2. Receives the filled-up form and checks for completeness of entries. 2.1 Checks for complaints that can be acted upon immediately and provide necessary action.	1.1 NONE	2. 5 minutes	1.1 Unit Head/Representative
3. Clarifies with the Unit Head/Representative if form is valid and if correctly filled.	3. If form is correctly filled up advise client to proceed home.	1.1 NONE	2. 5 minutes	1.1 Unit Head/Representative
<b>TOTAL:</b>		<b>NONE</b>	25 minutes	1.1 Unit Head/Representative





*Provincial Government of Sorsogon*  
**SORSOGON PROVINCIAL HOSPITAL**



<b>Office</b>	ISO/QMS Office			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C			
1. The Internal Client Satisfaction Measurement is a form to evaluate the intra-hospital services rendered among the different Departments/Sections.				
<b>Who may avail:</b>	Hospital Personnel			
<b>Checklist of Requirements</b>			<b>Where to secure</b>	
1. Internal Client Satisfaction Measurement Form.			1. Service Provider	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Fill up the ICSM Form completely and honestly	1. Assist the client in filling the ICSM Form if requested.	1. NONE	1. 15 minutes	1. Service Provider/Representative
2. Submits the filled up form to the Service Provider/Representative	2. Receives the filled-up form and checks for completeness of entries.  2.1 Checks for complaints that can be acted upon immediately and provide necessary action.	2. NONE	2. 5 minutes	2. Unit Head/Representative
3. Clarifies with the Service Provider/Representative if form is valid and if correctly filled.	3. If form is correctly filled up advise client to proceed.	1.1 NONE	2. 5 minutes	1.1 Unit Head/Representative
<b>TOTAL:</b>		<b>NONE</b>	25 minutes	1.1 Unit Head/Representative



## **MAINTENANCE SECTION**

### **REQUEST FOR MAINTENANCE AND IMPLEMENTATION OF REPAIR**



## Request for Maintenance and Implementation of Repair

Preparation of documents needed for the request of Maintenance and Calibration and implementation of work or repair of Hospital Equipment.

<b>Office or Division:</b>	Maintenance Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who may Avail:</b>	Intra-Agency			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Maintenance Request Form / Job Order		1. Administration Office		
2. Requisition and Issuance Slip		2. Supply Office / Supply Warehouse		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. End-User accomplishes Maintenance Request Form and forwards to the Administration Office.	1. The Admin Staff receives the Maintenance Request Form and notifies the concerned Maintenance Worker.	None	2 Minutes	Admin Staff / Supply Staff / Maintenance Worker
	2. The Maintenance Worker conducts a pre inspection report and accomplishes pre inspection form.		10 Minutes	
	3. The Maintenance Worker accomplishes Requisition and Issuance Slip from the Supply Warehouse.		10 Minutes	
	4. The Supply Staff renders request and issues the supplies needed by the concerned maintenance		10 Minutes	



	<p>worker.</p> <p>5. The maintenance Worker implements the repair / calibration of the equipment.</p> <p>6. The maintenance worker conducts final inspection to ascertain the serviceability of the equipment.</p> <p>7. The Maintenance Worker accomplishes Post Inspection Report to be forwarded to the maintenance head.</p>		<p>1 Day</p> <p>5 Minutes</p> <p>5 Minutes</p>	
<b>TOTAL:</b>		None	1 Day 42 Minutes	

Prepared By:

**DANILO P. FUNGO**  
MET II, Maintenance Head

Approved By:

**AARON JOSEPH J. CARPIO, RPh.**  
Supervising Administrative Officer

Noted By:

**ROBERTO A. CHACON JR., MD, MHA, FPCS, FPSGS, FPALES, DPBS**  
PGADH -Supervising Chief of Hospital



*Provincial Government of Sorsogon*  
**SORSOGON PROVINCIAL HOSPITAL**



**PROVISION OF MEDICAL ASSISTANCE**

<b>Office</b>	<b>SPH- MALASAKIT CENTER OFFICE</b>			
<b>Classification</b>	<b>SIMPLE</b>			
<b>Type of Transaction</b>	<b>GOVERNMENT TO PATIENT/CLIENT</b>			
<b>Who may avail:</b>	<b>IN-PATIENT AND OUT-PATIENT</b>			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
For Medical Assistance: 1. Valid I.D./Barangay Certification  2. Medical Abstract/Certificate 3. Laboratory/ies Request 4. Prescription/s 5. Initial Statement of Account		Client/Patient if with available I.D/ Barangay Hall of Client/Patient respective residence  Nurse Station of patient's ward  Billing Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Listen attentively and exemplify willingness to comply needed requirements	Inform the client/patient of Malasakit Center assistance as well provision of checklist of requirements <b>In- patient:</b> (Undertaken at One stop shop during admission screening)  <b>Out- patient:</b> (Undertaken at OPD Screening Section)	None	5 minutes	Social Worker on duty at Social Service/ Malasakit Center Office  Social Welfare Aide of Malasakit Center Office
Present the requirements for the particular assistance being asked	Signing on the Visitors logbook and Initial screening of requirements (Patient's/Client's valid ID, Medical Certificate/Abstract, Laboratory request/Prescriptions)	None	3 minutes	Social Welfare Aide
Comply the needed requirements  Provide the information needed by the Social Worker for assessment	-Interview/ Qualification assessment to avail Malasakit Center assistance.  -Checking of required documents as to completeness and correctness.  -Completion of Unified Intake Sheet and issuing Certificate of Eligibility ( to assess qualified client/patient)	None	20 minutes	Medical Social Worker



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**SORSOGON PROVINCIAL HOSPITAL**



	-Recording of patient's availment to  Malasakit Center Monitoring System			
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Show willingness to engage in referral process	-Referral to other agency/ies if needed	None	5 minutes	Medical Social Worker
Sign the Acknowledgement Receipt and Disbursement Monitoring logbook	Granting of Assistance Recording of Disbursed Amount	None	3 minutes	Disbursing Officer
Receive the patient's access card for the succeeding availment transaction of assistance at Malasakit Center Office	Provision of Access Card (yellow/white card) and advise patient/watcher of its use (for ER/In-patient only)	None	2 minutes	Social Worker
<b>TOTAL:</b>			Out-patient: <b>26 minutes</b> (maximum, it may vary on client's/patient's response during the interview process)  In-patient: <b>28 minutes</b> (maximum, it may vary on client's/patient's response during the interview process)  Out-patient/In-patient for <b>referral</b> to other agency/ies: <b>8 minutes</b>	





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**SORSOGON PROVINCIAL HOSPITAL**



1.

<b>Office</b>	Outpatient Department			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2C			
<b>Who may avail:</b>	All			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Secure a triage queuing number (first come, first serve basis) <small>*All OPD patients (old and new) for consultation</small>	Provide triage queuing number	None	1 – 2 minutes	Nursing Attendant
Go to the COVID-19 triage once queuing number is called.	Assessment for history and signs and symptoms of COVID-19	None	5 – 10 minutes	Nursing Attendant (COVID-19 triage booth.)
Proceed to the OPD Records section.	Provide a system-generated auto-printed card with a new patient's record/chart. (New patients for consultation) Verify the patient's data and retrieve the chart for old returning patients.	None	10 – 15 minutes	OPD CLERKS (Records Section)
State the needs and complaints or symptoms.	Assessment and classification depending on the manifesting symptoms. Replacement of the triage queuing number to a departmentalized queuing number.	None	5 – 10 minutes	OPD Triage nurse (Triage Area) <b>TABLE 2</b>
Submit oneself for vital signs taking and other pertinent data gathering.	Take vital signs, height and weight measurements and record in the patient's OPD record/chart. <small>*All patients regardless of age</small>	None	5 – 8 minutes	Nursing Attendant (Triage Area) <b>TABLE 3</b>
Proceed to TABLE 4 for encoding.	Encodes the patient's data to the system (MEDIX).	None	3 – 5 minutes	Nursing Attendant (Triage Area) <b>TABLE 4</b>
Surrender the departmentalized queuing card to the NA once number is called.	<b>PATIENT CONSULTATION</b> Doctors shall see and examine the patients in a chronological manner.	None	15 – 30 minutes	Nursing Attendant Physician on-Duty (Per Clinic / Department)
Wait for the Doctor to finish the consultation and for the Tagubilin form to be given.	Doctors shall discharge the patients in 3 ways according to their disposition. Nursing Attendant shall provide TAGUBILIN or discharge instructions to the patients or watchers.	None	5 – 10 minutes	Nursing Attendant & OPD Physician on-duty (Per Clinic / Department)
<b>TOTAL:</b>			90 minutes	





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**SORSOGON PROVINCIAL HOSPITAL**



1. (service name)

<b>FEEDBACK AND COMPLAINTS MECHANISMS</b>	
How to send feedback	Answer the External Client Satisfaction Monitoring (ECSM) form and submit immediately to the Nursing Attendants on duty on each department/clinic. Send a direct message to the Care Desk Hotline 09213514777.
How feedback is processed	ECSM forms are consolidated every end of the month and a summary report is made. All concerns sent to the care desk hotline are given immediate actions by the Care Desk Officer. The patient involved shall likewise be informed of the outcome of his/her feedback.
How to file complaint	Complaints are filed within the office of the hospital's Care Desk in different ways it can be made through personal approach or by sending a message through the hotline number or the official social media account of the care desk.
How complaints are processed	The Care Desk Officer upon verification on the validity of the complaints shall start an investigation.
Contact information of Agency	09213514777



# **One-Stop-Shop Unit**

## Frontline Services

# 1. ADMISSION PROCESS

The admission process provides patient registration services including patient interview, preparation of hospital forms, PhilHealth forms and other related documentary requirements.

<b>Office or Division:</b>	One-Stop-Shop Unit		
<b>Classification:</b>	Simple		
<b>Type of Transaction:</b>	G2C		
<b>Who may avail:</b>	Patients admitted and/or seen at the hospital; PhilHealth Beneficiaries		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>	
Admission Slip		ER/OPD	
ID of Member/Patient		Client	
Face sheet of chart, CSF, CF2,CF1,PMRF, Authorization		Admitting Clerk	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Watcher gives Personal Information Sheet form to Admitting Staff.	Interviews watcher and checks patient's PhilHealth eligibility in PHIC portal.	8 Minutes	Admitting Clerk
2.	Encodes data in MEDIX HIS for patient's admission.	10 Minutes	Admitting Clerk
3. Watcher receives 1 set of claim forms and watcher's ID.	Prints face sheet and claim forms; attaches other forms; gives watcher's ID.	6 Minutes	Admitting Clerk
4. Watcher signs and keeps affidavit of compliance.	Instructs watcher to immediately submit completely filled-out claim forms and required documents with attached checklist.	5 Minutes	Admitting Clerk

5. Watcher presents printed face sheet and PIS.	Refers watcher to SWO on duty for patient's classification and POS enrollment interview.	1 Minute	Admitting Clerk
<b>TOTAL:</b>		30 Minutes	

## 2. DISCHARGE PROCESS

The discharge process provides services for patient undergoing hospital discharge, to include rendering of PhilHealth deduction and signing of patient in the hospital forms.

<b>Office or Division:</b>	One-Stop-Shop Unit		
<b>Classification:</b>	Complex		
<b>Type of Transaction:</b>	G2C		
<b>Who may avail:</b>	IN/ER/OPD patients undergoing hospital discharge and/or consulted in the hospital.		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>	
Not applicable			
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Nursing Attendant logs clinical chart then returns to ward.	Checks completeness of clinical chart, EMR and documentary requirements.	5 Minutes	Receiving Clerk/TQM Staff
2.	Pairs patient chart with corresponding requirements, checks and gives to discharging staff.	8 Minutes	Receiving Clerk/Customer Affairs Staff
3.	Assigns ICD 10/RVS code for PhilHealth case rate and corresponding PhilHealth deduction.	7 Minutes	Discharging Clerk/TQM Staff
4.	Inputs PhilHealth deduction in HIS and completes the computation of hospital charges.	10 Minutes	Discharging Clerk

5.	Prints front SOA and detaches CSF and CF 2 for signature of member/patient.	3 Minutes	Discharging Clerk
6. Member/patient signs CSF and CF 2 and receives a copy of the SOA.	Facilitates signing of member/patient in CSF and CF 2 and gives a copy of the SOA.	4 Minutes	Customer Affairs Staff
7.	Returns clinical chart to ward and returns signed CSF and CF 2 to discharging staff.	3 Minutes	Customer Affairs Staff
	<b>TOTAL:</b>	40 Minutes	

Prepared by:

**CHRISTIANE VIVIEN F. BOLO**

Administrative Officer II

Officer in Charge-Claims Section/One-Stop-Shop Unit

Approved by:

**ROBERTO A. CHACON, JR., MD, MHA, CHA, FPCS, FPSGS, FPALES**

Acting PGADH/Supervising Chief of Hospital



**SORSOGON PROVINCIAL HOSPITAL  
PHARMACY SECTION**

**CITIZEN'S CHARTER**



## **I. VISION**

A serviceable Hospital Pharmacy which ensures the availability of safe, effective, affordable and good quality drugs accessible to the patients of Sorsogon Provincial Hospital.

## **II. MISSION**

To provide quality patient care by assuring safe, accurate, rational and cost-effective use of medicines by dedicated and compassionate staff.

## **III. OBJECTIVES**

1. To provide continuous supply of safe, quality, and cost-effective pharmaceutical products to all patients.
2. To provide patient-centered pharmaceutical care through patient medication counselling.
3. To enhance professional competence of pharmacists and its support staff through regular participation in continuing professional development.



## LIST OF SERVICES

### Frontline Services

Dispensing of Medicines to In-Patients	Page 5-6
Dispensing of Medicines to Out-Patients	Page 6-7
Dispensing of Medicines to Walk-In Patients	Page 7-8
Dispensing of Medicines to Animal Bite Center Patients	Page 9-10





# **PHARMACY SECTION**

## **Frontline Services**



## 1. Dispensing of Medicines to In-Patients

The basic duty of the pharmacy is to check requests of medicines from nurse's stations before dispensing the medications to ensure that the correct patient receives the appropriate medicines.

<b>Office or Division:</b>	Pharmacy Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen			
<b>Who may avail:</b>	Admitted Patients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Auto Print Request Forms		Hospital Pharmacy (request coming from nurse's stations via computer)		
Order of Payment		Hospital Pharmacy		
Prescription of Not Available Medicines		Hospital Pharmacy		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Pick-up patient medicines.	1. Checks the appropriateness, validity and availability of the request.  1.1 Renders the available medicines to patient's account in the system.	None	5 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
2. Signs the order of payment. Check the appropriateness of the received medicines.	2.Pre pares and dispenses/issues the medicines to the patient/watcher.	None	10 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
3. Goes to Social Services for medical	3.Referral to Social Services for	None	3 Minutes	<i>Pharmacist/ Pharmacy</i>



assistance.	assistance regarding the medicines not available in the pharmacy.			<i>Assistant</i>
<b>TOTAL:</b>		None	18 Minutes	

## 2. Dispensing of Medicines to Out-Patients

The basic duty of the pharmacy is to check requests of medicines before dispensing to out patients to ensure that the correct patient receives the appropriate medicines.

<b>Office or Division:</b>	Pharmacy Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen			
<b>Who may avail:</b>	General Public			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Auto Print Request Forms		Hospital Pharmacy (request coming from nurse's stations via computer)		
Order of Payment		Hospital Pharmacy		
Prescription of Not Available Medicines		Hospital Pharmacy		
Senior Citizen ID and Booklet (if applicable)		Patient/Client		
PWD ID (if applicable)		Patient/Client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Pick-up patient medicines.	1. Checks the appropriateness, validity and availability of the request (from Dental/OPD).  1.1 Renders the available medicines to	None	5 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>



	patient's account in the system.			
2. Settles order of payment to either Cashier or Social Services.	2. Instructs patient/watcher to settle the order of payment.	Cost of Medicines	3 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
3. Returns and signs the order of payment to pharmacy. Check the appropriateness of the received medicines.	3. Prepares and dispenses /issues the medicines to the watcher/patient.	None	10 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
4. Goes to Social Services for medical assistance.	4. Referral to Social Services for assistance regarding the medicines not available in the pharmacy.	None	3 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
<b>TOTAL:</b>		Total Cost of Medicines	21 Minutes	

### 3. Dispensing of Medicines to Walk-In Patients

The basic duty of the pharmacy is to check prescriptions of medicines before dispensing to walk-in patients to ensure that they receive the appropriate medicines.

<b>Office or Division:</b>	Pharmacy Section		
<b>Classification:</b>	Simple		
<b>Type of Transaction:</b>	G2C - Government to Citizen		
<b>Who may avail:</b>	General Public		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>	
Prescription		Physician	
Order of Payment		Hospital Pharmacy	
Senior Citizen ID and Booklet (if		Patient/Client	



applicable)				
PWD ID (if applicable)		Patient/Client		
Official Receipt		Cashier		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Presents prescription to pharmacy.	1. Reads, interprets and checks prescription carefully.  1.1 Encodes patient details and render the available medicines to patient account in the system.	None	6 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
2. Settles order of payment to either Cashier or Social Services.	2. Instructs patient/watcher to settle the order of payment.	Cost of Medicines	3 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
3. Returns and signs the order of payment to pharmacy. Receives and checks the appropriateness of the received medicines.	3. Checks if the order of payment is already cleared. Prepares, dispenses/issues the medicines to patient/watcher. Gives medication regimen counseling to patient.	None	10 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
4. Goes to Social Services for medical assistance (not available medicines).	4. Referral to Social Services for assistance regarding the medicines not available in the	None	3 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>



	pharmacy.			
<b>TOTAL:</b>		Total Cost of Medicines	22 Minutes	

#### 4. Dispensing of Medicines to Animal Bite Center Patients

The basic duty of the pharmacy is to check requests of medicines and/or prescriptions before dispensing the medications to the patients to ensure that they receive the appropriate medicines.

<b>Office or Division:</b>	Pharmacy Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen			
<b>Who may avail:</b>	General Public			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Goes to Pharmacy for the requested medicines	1.Checks the appropriateness, validity and availability of the request (from Animal Bite Center). Render the available medicines to patient's account in the system.	None	3 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
2. Settles order of payment to either Cashier or Social Services.	2.Instructs patient/watcher to settle order of payment.	Cost of Medicines	3 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
3. Returns and signs	3.Checks if the order	None	10 Minutes	<i>Pharmacist/</i>



the order of payment to pharmacy. Received and checks the appropriateness of the received medicines.	of payment is already cleared. Prepares, dispenses and issues the medicines to the patient/watcher.			<i>Pharmacy Assistant</i>
4. Returns one (1) copy of order of payment to Animal Bite Center together with attached ARV slip.	4. Files two copies of the order of payment and request form for record purposes.	None	1 Minutes	<i>Pharmacist/ Pharmacy Assistant</i>
<b>TOTAL:</b>		Total Cost of Medicines	17 Minutes	

<b>Prepared by:</b>	<b>Noted by:</b>
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Officer-In-Charge, Pharmacy Section	Provincial Chief of Clinics - Paramedical
<b>Approved by:</b>	
<b>ROBERTO A. CHACON, JR., MD, MHA, CHA, FPCS, FPSGS, FPALES, DPBS</b>	
PGADH / Supervising Chief of Hospital	



## PHYSICAL THERAPY SECTION

The Physical Therapy Section of Sorsogon Provincial Hospital provides patient oriented management plans with the latest and most efficient techniques to achieve patient goals.

<b>Office / Division</b>	Physical Therapy Section			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	Government to client			
<b>Who may avail</b>	Out Patient & In patient			
<b>Checklist of Requirements</b>		<b>Where to Secure</b>		
Doctor's Referral		In patient: Nurse's Station Out Patient: OPD Section		
<b>PATIENT ACTION</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<p>1. <b>InPatient:</b>Nursing attendant /relative proceeds to Physical Therapy Section and presents PT referral</p> <p><b>Out- Patient:</b> OPD assistant/ Patientproceeds to PT section and presents referral from Doctors</p> <p>2. Patient proceeds to assessment area</p>	<p>1. Receive request</p> <p>2. <b>In – Patient:</b> To be seen in the afternoon</p> <p><b>Out-Patient:</b>Interview Patient</p> <p>3. Perform patient assessment</p> <p>4. Present Patient management plan</p> <p>5. Perform treatment and instruct patient with exercises</p> <p>6. Reassess patient</p> <p>7. Give patient home exercise programs</p> <p>8. Give patient patient feedback form to fill out</p>	none	1 minute	Physical Therapist
			8 minutes	Physical Therapist
			5 minutes	PhysicalTherapist
			5 minutes	PhysicalTherapist
			25 minutes	PhysicalTherapist
			5 minutes	PhysicalTherapist
			5 minutes	Physical Therapist
			5 minutes	Patient
<b>TOTAL</b>			1 hour	





## Feedback and Complaints Mechanisms

<b>FEEDBACK AND COMPLAINTS MECHANISM</b>	
How to send a feedback	Answer the client feedback form and return to the physical therapist
How feedback are processed	Every end of the month physical therapist compiles and record all feedback submitted.
How to file a complaint	Write a complaint letter and give it to the person-in-charge
How complaints are processed	The physical therapist reads the complaints on a daily basis and evaluates every complaint  The physical therapist shall forward the complaint to the Care Desk Section
Contact information of PT Section	PT Section: 09985602495

Prepared by:

Jessin F.Galeza, PTRP

Approved by:

**ROBERTO A. CHACON JR., MD., MHA, CHA, FPCS, FPSGS, FPALES, DPBS**  
PGADH- Supervising Chief of Hospital



**OUT PATIENT DEPARTMENT (OPD)**

This were established to provide about the overall activities of the section and services being offered in the Out-Patient Registration are accurate, complete and accepted by the patient by a facility for the purpose of providing Out-Patient services.

<b>Office</b>	<b>SPH- HIMS – OPD REGISTRATION</b>			
<b>Classification</b>	<b>SIMPLE</b>			
<b>Type of Transaction</b>	<b>GOVERNMENT TO PATIENT</b>			
<b>Who may avail:</b>	<b>OUT PATIENT FOR CONSULTATION</b>			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
Covid 19 check list		TRIAGE		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Present Covid 19 checklist and provide data needed for the accomplishment of OPD chart.	<b>New Patient and ER Consult Patient:</b> Search name of patient in the system, interview and accomplish/create OPD chart, issue OPD card and encode data to the system.	None	5 minutes	OPD Registration Clerk
Present Covid 19 checklist and old OPD card	<b>Re-visit:</b> OPD clerk retrieves and update OPD chart and encode data to the system.	None	10 minutes	OPD Registration Clerk/ Patient
Proceed to TRIAGE	Forwards OPD chart and advise patient to proceed to TRIAGE for vital signs, temperature, etc.	None	2 minutes	OPD Registration Clerk/ Patient
<b>TOTAL:</b>			<b>17 Minutes</b>	

*Prepared by;*

**MARIA JOSEFINA P. JIMENA**  
Records Officer II

*Approved by;*

**ROBERTO A. CHACON, JR. MD, MHA, CHA, FPCS, FPSGS, FPALES**  
Supervising Chief of Hospital



**ISSUANCE OF BIRTH CERTIFICATE**

<b>Office</b>	<b>SPH- HEALTH INFORMATION MANAGEMENT SECTION (HIMS)</b>			
<b>Classification</b>	<b>SIMPLE</b>			
<b>Type of Transaction</b>	<b>GOVERNMENT TO CLIENT</b>			
<b>Who may avail:</b>	<b>OUT PATIENT AND IN PATIENT</b>			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
<b>Married :</b> 1. Pink/Blue Card (Baby Card) 2. Personal Information Sheet (PIS) 3. Marriage Contract <b>Not Married :</b> 1. Pink/Blue Card (Baby Card) 2. Personal Information Sheet (PIS) 3. Birth Certificate or /Baptismal Certificate/Valid ID/Barangay Certificate of parents 4. Community Tax Certificate (CTC)		1. Delivery Room 2. One Stop Shop(OSS)/Health Information Management Section(HIMS)  1. Delivery Room 2. One Stop Shop(OSS)/Health Information Management Section(HIMS)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Watcher proceed to OSS for admission of Newborn	Admitting Staff provides Personal Information sheet (PIS) and checklist of requirements upon admission of newborn.	None	1 minute	Admitting Clerk
Watcher submits requirements/documents	HIMS clerk validate submitted requirements and process Birth Certificate and provide relevant advise.	None	25 minutes	HIMS Clerk/ Watcher
Patient shall claim the original Birth Certificate at the City Civil Registrar after 2 weeks  The Couple shall claim the Original Birth Certificate at HIMS and proceed to City Civil Registrar	<b>For Married and Single Parent:</b> HIMS clerk transmit Birth Certificate to City Civil Registrar <b>For Unmarried Couple:</b> Birth is released after 2 weeks and upon signature of father for paternal acknowledgement.	None	1 to 1 ½ hours  5 minutes	HIMS Clerk  HIMS Clerk/ Parents of Newborn
<b>TOTAL:</b>			<b>26 Minutes</b>	

*Prepared by;*

**MARIA JOSEFINA P. JIMENA**  
Records Officer II

*Approved by;*

**ROBERTO A. CHACON, JR. MD, MHA, CHA, FPCS, FPSGS, FPALES**  
Supervising Chief of Hospital



**ISSUANCE OF DEATH CERTIFICATE**

<b>Office</b>	<b>SPH- HEALTH INFORMATION MANAGEMENT SECTION (HIMS)</b>			
<b>Classification</b>	<b>SIMPLE</b>			
<b>Type of Transaction</b>	<b>GOVERNMENT TO CLIENT</b>			
<b>Who may avail:</b>	<b>OUT PATIENT AND IN PATIENT</b>			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
<ol style="list-style-type: none"> <li>1. Request Form</li> <li>2. Statement of Account (SOA)</li> <li>3. Birth Certificate or Valid ID of Decease</li> <li>4. Valid ID of next of kin</li> </ol> <b>For Authorized Representative:</b> <ol style="list-style-type: none"> <li>1. Valid ID of decease</li> <li>2. Authorization Letter from immediate family</li> <li>3. Valid ID of authorized representative</li> </ol>		<ol style="list-style-type: none"> <li>1. Health Information Management Section</li> <li>2. One Stop Shop (OSS)</li> </ol>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Relative of the decease request for Death Certificate	Advise relative to fill out request form and submit to HIMS	None	5 minutes	HIMS Clerk/ Next of Kin
Submits required documents	Verify and validate submitted/ required documents and Statement of Account (SOA) with zero balance.	None	5 minutes	HIMS Clerk/ Next of Kin
Relative signs Death Certificate as informant.	Preparation of Death Certificate and advise next of kin on Standard Operating Procedures.	None	15 minutes	HIMS Clerk
	Release Death Certificate.	None	2 minutes	HIMS clerk
<b>TOTAL:</b>			<b>27 minutes</b>	

*Prepared by;*

**MARIA JOSEFINA P. JIMENA**  
Records Officer II

*Approved by;*

**ROBERTO A. CHACON, JR. MD, MHA, CHA, FPCS, FPSGS, FPALES**  
Supervising Chief of Hospital



**ISSUANCE OF MEDICAL CERTIFICATE**

<b>Office</b>	<b>SPH- HEALTH INFORMATION MANAGEMENT SECTION (HIMS)</b>			
<b>Classification</b>	<b>SIMPLE</b>			
<b>Type of Transaction</b>	<b>GOVERNMENT TO PATIENT</b>			
<b>Who may avail:</b>	<b>OUT PATIENT AND IN PATIENT</b>			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
For Medical Certificate: 1. Request Form 2. Valid ID of patient For Medico-Legal Certificate: 1. Request Form 2. Valid ID of patient and Valid Id of authorize representative 3. Authorization letter if authorized representative will claim		Health Information Management Section  Health Information Management Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Patient request for Medical Certificate	<b>Out-patient, In-patient and previous In-patient:</b> Advise patient to fill out request form and submits to HIMS staff	None	5 minutes	HIMS Clerk/ Patient/Relative
Patient request for Medical Certificate at the ER and OPD and forwards issued Medical Certificate to HIMS	<b>Out-patient and In-patient (seeking assistance from Malasakit/AICS)</b> Affix dry seal to issued Medical Certificate from ER and OPD	None	3 minutes	HIMS Clerk
Proceed to Malasakit Center/AICS	<b>Previous In-patient and Out-patient:</b> Advise patient/watcher to claim requested Medical Certificate after 3 days and prepares Medical Certificate.	None	6 minutes	HIMS Clerk
	<b>Out-patient and In-patient (seeking assistance from Malasakit/AICS):</b> Advise patient/watcher to proceed to Malasakit Center/AICS	None	1 minute	HIMS Clerk
Proceed to Billing Section for payment and if patient is indigent proceed to Social Service for assistance.	If requested Medical Certificate is <b>Medico-Legal</b> patient/relative is advice to proceed to billing and/or Social Service Section and provide relevant advice:	Php 70.00	20 minutes	HIMS Clerk/ Billing Clerk/ Social Worker/ Patient/Relative



Claim requested Medical Certificate after 3 days	Medical Certificate is released to patient/relative after 3 days.	None	3 minutes	HIMS Clerk/ Patient
Submits valid ID and authorization letter, if authorized representative	<b>Medico-Legal Certificate:</b> - Validate submitted requirements/documents -Release on the same day of request	None	2 minutes	HIMS Clerk/ Patient
<b>TOTAL:</b>			*Out-patient, In-patient and Previous In-patient – <b>3days and 14 minutes</b>  *Out-patient and In-patient(seeking assistance) – <b>4 minutes</b>  *Medico-legal Certificate – <b>27minutes</b>	

*Prepared by;*

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*Approved by;*

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Supervising Chief of Hospital



### 5. Control of Documented Information

This procedure intends to define the controls needed to ensure that documents necessary for effective operation of SORSOGON PROVINCIAL HOSPITAL's processes are available and suitable for use, where and when it is needed. This procedure applies only to internal and external documents relevant to the same. Documents outside of this scope do not require control.

<b>Office</b>	SPH-Health Information Management Setion			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	Government to Government/Private			
<b>Who may avail:</b>	Inter-agency Transaction			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submits Document/s	Receiving and registration of document/s	none	1-minute	Clerical aide in-charge
	Scanning of document/s	none	5-10 minutes/and or depending on pages and copies to be reproduced	Clerical aide in-charge
	Issuance of Document/s	none	10-15minutes	Clerical aide in-charge
	Filing of Master copy	none	1-3 minutes	Clerical aide in-charge
<b>TOTAL:</b>			30minutes	

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**SORSOGON PROVINCIAL HOSPITAL**



<b>Office</b>	SPH- MEDICAL SOCIAL SERVICE DEPARTMENT (MSSD)			
<b>Classification</b>	SIMPLE			
<b>Type of Transaction</b>	GOVERNMENT TO PATIENT/CLIENTS			
<b>Who may avail:</b>	OUT PATIENT AND IN PATIENT			
<b>Checklist of Requirements</b>		<b>Where to secure</b>		
<p><b>IN-PATIENT</b>  <b>For Screening:</b>            Admission Slip            MSSD Intake Sheet form (DOH)</p> <p><b>For POS Enrollment:</b>            Accomplished and Signed PMRF of member (with attached Birth Certificate or Marriage Certificate, if married).</p> <p><b>OUT-PATIENT</b>            Charge Slip</p> <p><b>ER-PATIENT</b>            Accomplished and signed PMRF of member,            Signed Certificate of Financial Assessment by designated Social Worker and Statement of Account (SOA).</p>		MEDICAL SOCIAL SERVICE DEPARTMENT (MSSD)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<p>Client provides significant information needed as basis for economic classification thru interview/screening conducted by the Social Worker.</p> <p>Client is Given Instruction on how the process is carried out including the requirements needed for availing assistance.</p>	<p><b>IN-PATIENT:</b></p> <ul style="list-style-type: none"> <li>Upon Admission -MSSD Screening for patient's classification (D, C3, C2, C1, B, A).</li> <li>Informing the client/patient about the medical assistance of Malasakit Center and the requirements needed.</li> </ul>	NONE	<ul style="list-style-type: none"> <li>5-15 mins</li> <li>5-10 mins</li> </ul>	SOCIAL WORKER
<p>Client must comply lacking documents</p> <p>Client provides</p>	<ul style="list-style-type: none"> <li>Conducting Ward-Rounds/ for clients/patients with incomplete requirements.</li> <li>Enrollment of patient to Point of Service (non-</li> </ul>	NONE	<ul style="list-style-type: none"> <li>30-60 mins</li> <li>3-5 mins</li> </ul>	SOCIAL WORKER





*Provincial Government of Sorsogon*  
**SORSOGON PROVINCIAL HOSPITAL**



information and documents needed for POS enrollment purposes.	Philhealth member).			
None required clients participation	<ul style="list-style-type: none"> <li>• Printing of Registration Slip from POS program.</li> <li>• Signing of CFA done by the designated Medical Social Worker.</li> </ul>	NONE	<ul style="list-style-type: none"> <li>• 1-3 mins</li> <li>• 5-20 mins</li> </ul>	CLERICAL AIDE/SOCIAL WORKER
None required clients participation	<ul style="list-style-type: none"> <li>• Records the enrolled patient to logbook and forwarding it to OSS for reference.</li> </ul>	NONE	<ul style="list-style-type: none"> <li>• 5-10 mins</li> </ul>	SOCIAL WORKER
	<b>TOTAL:</b>		INPATIENT FOR POS AND SCREENING:  20MINS	
Clients are required to be in MSSD for interview while they are waiting for the worker's prior advices for the next process.	<b>OUT-PATIENT:</b> <ul style="list-style-type: none"> <li>• Initial assessment of patient</li> <li>• Explaining the program and services rendered by the department</li> </ul>	NONE	<ul style="list-style-type: none"> <li>• 1 min</li> </ul>	SOCIAL WORKER
Clients to present charge slip for proof of procedure.	<ul style="list-style-type: none"> <li>• Processing / rendering patient's transaction like medicine or diagnostic procedure for discount or 100% social service (free)</li> </ul>	NONE	<ul style="list-style-type: none"> <li>• 3-5 mins</li> </ul>	SOCIAL WORKER
	<b>TOTAL:</b>		6MINS	
Clients are required to comply attachments like : Valid ID, Birth Certificate and Marriage Contract (if needed)	<b>ER-PATIENT</b> <ul style="list-style-type: none"> <li>• Conducts initial assessment to non-philhealth member and issued certificate of financial assessment (CFA) for availing philhealth benefits (if patient has undergone procedures)</li> </ul>	NONE	<ul style="list-style-type: none"> <li>• 5-15 mins</li> </ul>	SOCIAL WORKER
Clients to present SOA.	<ul style="list-style-type: none"> <li>• Rendering Statement of Account (SOA) for those who are financially incapable patients based on the assessment of Social Worker.</li> </ul>	NONE	<ul style="list-style-type: none"> <li>• 1-2 mins</li> </ul>	SOCIAL WORKER
	<b>TOTAL:</b>		17MINS	



# **SUPPLY OFFICE / SUPPLY WAREHOUSE**

## **PROCUREMENT PROCESS**



## 1. Procurement of Supplies

Preparation of documents needed for the procurement of supplies needed or being requested by the agency.

<b>Office or Division:</b>	Supply Office			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who may Avail:</b>	Intra-agency			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Purchase Request		Supply Office / Liaison Officer		
2. Obligation Request		Supply Office / Liaison Officer		
3. Disbursement Voucher		Supply Office / Liaison Officer		
4. Project Procurement Management Plan		Supply Office / Storekeeper II		
<b>STEPS</b>	<b>DEPARTMENT/ OFFICE ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCE SSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Requesting party accomplishes a request form indicating the list of Items needed by the Office, Department and/or Agency.	1. Storekeeper receives the Request Form.  1.1 Supervising Administrative Officer verifies the Purchase Request based on the submitted Project Procurement Management Plan.	None	1 Day	Client / Office Representative
2. The Liaison Officer forwards the Purchase Request to the Chief of Hospital.	2. The secretary of the Chief of Hospital receives the Purchase Request and forwards to the Chief of Hospital for counter signature and/or initial.  2.1 The Chief of Hospital reviews and counter signs the Purchase Request.	None	1 Day	COH Secretary / Chief of Hospital
3. The Liaison Officer or the COH secretary then forwards the counter signed Purchase Request to the Office of the Acting Provincial Health Officer.	3. The Acting Provincial Health Officer Staff receives the Purchase Request.  3.1 The Acting Provincial Health Officer reviews and signs the Purchase Request.	None	1 Day	APHO Staff / Provincial Health Officer
<b>STEPS</b>	<b>DEPARTMENT/ OFFICE</b>	<b>FEES</b>	<b>PROCE</b>	<b>PERSON</b>

	<b>ACTION</b>	<b>TO BE PAID</b>	<b>SSING TIME</b>	<b>RESPONSIBLE</b>
4. The Liaison Officer forwards the duly signed Purchase Request to the Provincial General Services Office.	4. The Provincial General Services Office receives, records and stamps date and numbering on the Purchase Request.	None	1 Day	Provincial General Services Office Staff / Officer
5. The Liaison Officer forwards the Purchase Request to the Provincial Budget Office.	5. The Provincial Budget Staff receives the Purchase Request. 5.1 The Provincial Budget Officer verifies the amount of the Purchase Request for Budget Appropriation.	None	1 Day	Provincial Budget Officer
6. The Liaison officer forwards the Purchase Request to the Provincial Treasurer's Office.	6. The Staff of the Provincial Treasurers Office receives the Purchase Request. 6.1 The Provincial Treasurer assesses the Purchase Request for cash availability.	None	1 Day	Provincial Treasurer
7. The Liaison Officer forwards the Purchase Request to the Office of the Governor.	7. The Office of the Governor's Staff receives the Purchase Request. 7.1 The Governor reviews and Approves the Purchase Request.	None	1 Day	Office of the Governor Staff / Governor
8. The Liaison Officer forwards the Purchase Request to the Bids and Awards Committee.	8. The Bids and Awards Committee receives the Purchase request. 8.1 The Bids and Awards Committee assesses the Purchase Request whether it is classified as Shopping, Small Value or Bidding, and consolidates all incoming Purchase Requests. 8.2 If classified other than as Bidding, Purchase Requests are forwarded back to the End-users / Agency.	None	14 Days	Bids and Awards Committee
<b>STEPS</b>	<b>DEPARTMENT/ OFFICE ACTION</b>	<b>FEES TO BE</b>	<b>PROCE SSING</b>	<b>PERSON RESPONSIBLE</b>

		<b>PAID</b>	<b>TIME</b>	
9. The Liaison Officer retrieves the Purchase request from the Bids and Awards Committee	9. The Supply Officer/Storekeeper proceeds to canvassing the procured supplies and prepares the Abstract and Purchase Order.	None	14 Days	Storekeeper / Supply Staff / Bids and Awards Committee
10. The Supply Officer issues the Purchase Order to the Supplier	10. The Supplier then delivers the Procured Items to the Supply Warehouse for inspection and inventory.	None	2 Days	Supply Officer / Supplier
<b>TOTAL:</b>		None	34 Days	



## 2. Receiving of Procured Supplies

Inspection and Documentation of supplies delivered.

<b>Office or Division:</b>	Supply Office / Supply Warehouse			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who may Avail:</b>	Intra-Agency, District Hospitals, Infirmaries, RHUs			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Requisition and Issue Slip		1. Provincial General Services Office (PGSO)		
<b>STEPS</b>	<b>DEPARTMENT / OFFICE ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. The Provincial General Services Office forwards the Requisition and Issuance Slip.	<p>1. The Storekeeper receives the Requisition and Issuance Slip</p> <p>2. The Storekeeper inspects the quantity and specifications whether the items actually corresponds to the delivery.</p> <p>3. The Storekeeper acknowledges and signs the copy Requisition and issuance Slip.</p> <p>4. The Storekeeper or Supply Staff then records the received supplies to Bin Cards, Stock Cards and Equipment/Property Cards.</p>	None	2 hours	Storekeeper / Supply Staff
<b>TOTAL:</b>			2 hours	



### 3. Requisition and Issuance of Supplies

Preparation of documents needed for the requisition and issuance of supplies.

<b>Office or Division:</b>	Supply Office / Supply Warehouse			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who may Avail:</b>	Intra-Agency, District Hospitals, Infirmaries, RHUs			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Requisition and Issue Slip		1. Supply Office		
<b>CLIENT STEPS</b>	<b>DEPARTMENT / OFFICE ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. End-User accomplishes Requisition and Issue Slip.	1. The Supply Staff acknowledges the accomplished Requisition and Issue Slip  2. The Supply Staff then inputs the requested supplies to the Medix.  3. The Supply Staff retrieves all the requested supplies from the Supply warehouse.  4. The Supply Staff hands out the Issuance slip generated by the Medix for acknowledgement and signature of the requesting entity or client.  5. The Supply Staff Releases the requested supplies to the client.	None	10 Minutes	Supply Staff
<b>TOTAL:</b>		None	10 Minutes	

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Supervising Administrative Office

Noted By:

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*Provincial Government of Sorsogon*  
**SORSOGON PROVINCIAL HOSPITAL**



<b>1. TB DOTS PROGRAM</b>		Pagbibigay ng mga health instructions		wala	10-15 minuto	TB DOTS Nurse
<b>Office</b>	3-Pagsunod samgapinagawang eksaminasyon kung meron tulad ng X-RAY	OUT PATIENT DEPARTMENT				
<b>Classification</b>	Blood chemistry, plema (DSSM o Geriatrics)	OUT PATIENT CONSULTATION	at pagbibigay ng request form para sa eksaminasyon ng pasyente			
<b>Type of Transaction</b>	<b>GOVERNMENT TO CITIZEN</b>					
<b>Who may avail:</b>	<b>OUT-PATIENT</b>					
<b>Checklist of Requirements</b>				<b>Where to secure</b>		
OPD Card, OPD Record				OPD RECORDS SECTION		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>		
1- Kumuha ng OPD Record sa OPD Records Section, Pumuntasa TB DOTS para sa bago at dating pasyente, mauposa waiting area salikod ng TB DOTS at antayingmatawag ang pangalan. Malibansamga Senior Citizen, Person with Disability (PWD), at buntis.	-Tanungin kung ano ang karamdaman o problemang pangkalusugan ng pasyente. Pagkuha ng mahahalagang palatandaan tulad ng presyon ng dugo, temperature ng katawan, pulso at bilang ng paghinga.	Wala	2-3 minuto	OPD TB DOTS Nurse		
-Pagsasabi ng problemang pangkalusugan ulad ng mganaramdamannasinto masgaya ng paguubo ng 2 linggo o higit pa, pagsakit ng likod at dibdib, pagsuka ng dugo, paglalagnattuwing hapon, biglaang pagpayat.	-Pagkuha ng mahalagang impormasyong gaya ng past medical history, pagkakaroon ng bisyo, mga iba pang sakit ng pasyente, kontak ng pasyente na may sakit na tuberculosis.	wala	5-10 minuto	OPD TB DOTS Doctor/Nurse		
2- Pag eksamin ng Doktor	Pagpasok ng pasyente sa TB DOTS clinic para matingnan ng Doktorsabaynadala ng nurse ang OPD record ng pasyente para ibigaysa doktor.	wala	10-20 minuto	TB DOTS Doctor		



*Provincial Government of Sorsogon*  
**SORSOGON PROVINCIAL HOSPITAL**



4- Maghintaysa resulta ng pagsusuri at magtanongsa doctor kung mayroonghindinaunawaan.	Pag eeksamin, pagbibigay ng lunas at pagpapaliwanagsakalagayan/karamdaman ng pasyente. Pagbibigay ng instruksiyonapasyentebagoumuwi.	wala	5-10 minut o	TB DOTS Physici an
5-Pagbalik ng OPD record sa nurse pagkatapos ng eksaminasyon ng doctor, unawain at pakinggangmabuti ang dapatgawin. Magtanongsa nurse kung mayroonghindinaunawaan.	Pagbibigay ng instruksiyonapasyentebagoumuwiasaisinulat ng doctor sa OPD record ng pasyente.	wala	1-2 minut o	TB DOTS Nurse
6-Para samgapasyentengnakarehistrosatutokgamutan:Pumuntasa TB DOTS Clinic dala ang NTP Treatment card at NTP identification card sanakatalagangoras ng gamutan.	Pagcheck ng patients treatment card at NTP identification card para sabilang at uri ng gamot.	wala	1-2 minut o	TB DOTS Nurse
7-Pag ubos ng bilangng gamutnankatalagasaharap ng nurse	Habanginiinom ang gamut, tatanungin ng nurse kung may ibangnararamdaman ang pasyentenakailangangbigyan ng atensyon medical.	wala	15-30 minut o	TB DOTS Nurse
8-Magtanong sa nurse kung mayroonghindinaunawaan.	Pagbibigay ng instruksiyonapasyentebagoumuwi kung kelanbabalik para sasusunodnapagkuha at paginom ng gamot.	wala	1-2 minut o	TB DOTS Nurse
<b>TOTAL:</b>		<b>WA LA</b>	<b>46 MINU TO</b>	

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