



BICOL MEDICAL CENTER

CITIZEN'S CHARTER

2021 (3rd Edition)



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I. Mandate:

Republic Act No. 8053, an act converting the Bicol Regional Training and Teaching Hospital into Bicol Medical Center, defining its functions, responsibilities, powers and authority, and appropriating funds thereof.

Republic Act No. 11478 or "An Act Increasing the Bed Capacity of Bicol Medical Center from 500 beds to 1,000 beds, Upgrading its Service Facilities and Professional Health Care Services, Authorizing the increase of its Medical Workforce Complement, Amending for the Purpose Republic Act 8053, and Appropriating Funds Therefor."

II. Vision:

We are a Patient-Centered, highly specialized, multi-disciplinary, tertiary referral Medical Center in Bicol.

III. Mission:

We provide specialized healthcare services, training and research with excellence.

IV. Service Pledge:

We are committed to serve our clients with the highest standard of health care in compliance to statutory and regulatory requirements.

We aspire for excellence by managing risks and continuously improve our services to achieve customer satisfaction.

We are committed to attend to all applicants or requesting parties who are within the premises of the office prior to the end of official working hours and during lunch break.



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Office of the Medical Center Chief

Internal Services



1. Processing of Incoming and Outgoing Documents/Records/ Reports/ Correspondences

The Office of the Medical Center Chief receives and processes documents/records/ reports/correspondences from both internal (employees) and external (patients and other stakeholders) clients addressed to the Medical Center Chief II for appropriate actions.

The Office of the Medical Center Chief is open Monday to Friday from 8:00 AM to 5:00 PM, except Saturdays, Sundays and Regular Holidays.

OFFICE OR DIVISION:		Office of the Medical Center Chief		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen G2B – Government to Business G2G – Government to Government		
WHO MAY AVAIL:		All		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Documents/Records/Reports/ Correspondences (original copies for processing)			From Interested party	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/reports/ correspondences to the Receiving Staff	1.1 Receives documents/records/ reports/correspondences	None	5 minutes	<i>Administrative Assistant II</i> Office of the Medical Center Chief
	1.2 Sorts and register/log incoming documents/records/ reports/ correspondences in DLOCS for tracking purpose	None	5 minutes	<i>Administrative Assistant II</i> Office of the Medical Center Chief
	1.3 Reviews important, urgent and classified documents/records/ reports/correspondences	None	15 minutes	<i>Secretary</i> Office of the Medical Center Chief
	1.4 Reviews/ comment/signs/ forwards/approves documents/records/	None	1 hour	<i>Officer-in-Charge/</i> Medical Center Chief II



	reports/ correspondences			
	1.5 Facilitates forwarding of documents with Division/Department Head comments to concerned unit/area within set deadlines	None	10 minutes	<i>Secretary Administrative Assistant II Office of the Medical Center Chief</i>
	1.6 Registers outgoing documents/records/reports/correspondences in the DLOCS system and logbooks	None	5 minutes	<i>Administrative Assistant II Office of the Medical Center Chief</i>
	1.7 Conveys the documents/ records/reports/ correspondences accordingly	None	20 minutes	<i>Administrative Aide I/III Office of the Medical Center Chief</i> <i>Administrative Aide I/III Office of the Medical Center Chief</i>
	TOTAL FEES: None		TOTAL TIME: 2 hours	



Office of the Chief of Medical Professional Staff

Internal Services



1. Processing of Incoming and Outgoing Communications

The Office of the Chief of Medical Professional Staff receives and process documents and records of employees including communications pertinent to office and hospital operations. Office of the Chief of Medical Professional Staff is available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:	Office of the Chief of Medical Professional Staff			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen G2B – Government to Business G2G – Government to Government			
WHO MAY AVAIL:	All (Patients/ Employees / Visitors)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Documents/Records/Reports/ Correspondences (original copies for processing)		From Interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ communications to the receiving personnel.	1.1 Receives documents/ communications and stamped it accordingly.	None	5 minutes	<i>Administrative Assistant</i> CMPS Office
	1.2 Classifies the documents/communications received.	None	5 minutes	<i>Administrative Assistant</i> CMPS Office
	1.3 Reviews important documents	None	15 minutes	<i>Administrative Assistant</i> CMPS Office
	1.4 Reviews/signs/ approves documents.	None	1 hour	<i>Chief of Medical Professional Staff</i> CMPS Office
	1.5 Facilitates forwarding of documents with CMPS comments concerning Department/ Sections/ Personnel within set deadlines.	None	5 minutes	<i>Administrative Assistant</i> CMPS Office



	1.6 Updates records in logbooks for release to respective Divisions/ Department/ Sections/Personnel (CMPS-approved/with deficiency/for appropriate action)	None	10 minutes	<i>Administrative Assistant</i> CMPS Office
2. Receives signed/acted upon documents.	2. Conveys the documents accordingly.	None	20 minutes	<i>Administrative Assistant</i> CMPS Office
	TOTAL FEES: None		TOTAL TIME: 2 hours	



Office of the Chief Administrative Officer

Internal Services



1. Issuance of Certificate of Appearance

The Office of the Chief Administrative Officer prepares Certificate of Appearance to hospital guest with a particular date and purpose. The office is open daily from Monday to Friday, 8:00 am to 5:00 pm except Weekends and Holidays.

OFFICE OR DIVISION:		Office of the Chief Administrative Officer (CAO)/ HOPSD		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		All Hospital Guest		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Approach and Inform staff of the service request.	1. Inform guest to register the visit at the Visitor's Logbook.	None	3 minutes	<i>Administrative Assistant I/ Administrative Officer II CAO's Office</i>
2. Log in at the Visitor's Logbook indicating the Name, Date, Designation/Position, Office of Origin, and Purpose of visit.	2.1 Provides the Logbook to be filled up by the guest.	None	2 minutes	<i>Administrative Officer/ Administrative Assistant CAO's Office</i>
	2.2 Prepares the Certificate of Appearance for signature of the Chief Administrative Officer/representative.	None	3 minutes	<i>Administrative Officer/ Administrative Assistant CAO's Office</i>
	2.3 Chief Administrative Officer signs the Certificate of Appearance	None	1 minute	<i>Chief Administrative Officer CAO's Office</i>
3. Receives the signed Certificate of Appearance	3. Endorses the Certificate of Appearance to guest	None	1 minute	<i>Administrative Officer/ Administrative Assistant CAO's Office</i>
	TOTAL FEES: None		TOTAL TIME: 10 minutes	



2. Processing of Incoming and Outgoing Documents

The Office of the Chief Administrative Officer receives and process documents from both internal (employees) and external stakeholders in support to hospital operations. The office is open daily from Monday to Friday, 8:00 am to 5:00 pm except weekends and holidays.

OFFICE OR DIVISION:		Office of the Chief Administrative Officer/ HOPSD		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		Employees		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Documents/ records (original copies for processing)			From interested party	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/records/communications to the receiving personnel	1.1. Receives documents/records/ Communications	None	5 minutes	Administrative Assistant I/ Administrative Officer II CAO's Office
	1.2. Sorts and classifies the documents/records/communications accordingly:	None		Administrative Assistant I/ CAO's Office
	• Daily Time Record	None	10 minutes	
	• COE, SR, COE w/ NTHP, Certification	None	2 minutes	
	• Loan Forms	None	2 minutes	
	• Leave Forms	None	2 minutes	
	• Personal Data Sheet/ SALN	None	5 minutes	
	• NOSA	None	5 minutes	
	• OPMIS Accession/Separation Form	None	3 minutes	
	• Payroll	None	10 minutes	
	• Disbursement Voucher	None	5 minutes	
	• Obligation Requisition Status	None	10 minutes	
	• Budget Utilization Request and Status	None	5 minutes	
	• Checks, ADA, LDDAP, SLIIE,	None	5 minutes	



	ACIC, Database Report, Payroll Register, Whitelist, Salary			
	• Requisition and Issuance Slip	None	2 minutes	
	• Contract	None	5 minutes	
	• Notice of Award	None	5 minutes	
	• Notice to Proceed	None	5 minutes	
	• Purchase Order	None	5 minutes	
	• NORSA	None	3 minutes	
	• PR, PCV, RFQ	None	5 minutes	
	• Liquidation	None	2 minutes	
	• Clearance Forms	None	2 minutes	
	• Request for Use of Vehicle	None	2 minutes	
	• Request to go out of the hospital	None	2 minutes	
	• Letters (Reports, Request, etc.)	None	2 minutes	
	• Performance Monitoring Tool	None	5 minutes	
	• Request for Action	None	3 minutes	
	• Unit Work Plan	None	5 minutes	
	• Quality Objective	None	5 minutes	
	• Risk Register	None	3 minutes	
	• PPMP/WFP	None	5 minutes	
	1.3. Reviews and record documents/ communications.	None	15 minutes	Administrative Officer IV/ Chief Administrative Officer CAO's Office
	1.4. Reviews/signs & approves documents & communications:	None	3 minutes per document	Chief Administrative Officer CAO's Office
	1.5. Facilitates action for the communications.	None	5 minutes	Administrative Assistant I CAO's Office
	1.6. Facilitates forwarding of documents with CAO's comments to concerned	None	10 minutes	Administrative Assistant I CAO's Office



	unit/area within set deadlines. 1.7. Registers outgoing documents, records and communications in the logbooks	None	15 minutes	<i>Administrative Assistant I</i> CAO's Office
2. Receives signed/acted upon documents/records/communications	2. Conveys the documents/records /communications accordingly.	None	10 minutes	<i>Administrative Assistant I/ Administrative Officer II</i> CAO's Office
	TOTAL FEES: None		TOTAL TIME: 3 hours and 8 minutes	



Nursing Office Internal Services



1. Processing of Incoming and Outgoing Documents/Records

Nursing Office receives and process documents and records of employees including trainees, students, and other stakeholders who would want to avail the hospital services, specifically on Nursing. Nursing office services are available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:	Nursing Office			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government G2B – Government to Business			
WHO MAY AVAIL:	Employees/ Trainees/ Schools/ other private and government agencies			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Letter of intent (1 original copy) Documents/ records (original copies for processing)		From interested party From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/ communications to the receiving personnel	1.1. Receives documents/ records/ communications	None	5 minutes	<i>Nursing Attendant</i> Nursing Office
	1.2. Sorts and classifies the documents/records/ communications accordingly	None	5 minutes	<i>Nursing Attendant</i> <i>Nurse III</i> Nursing Office
	1.3. Reviews important documents/records/ communications	None	15 minutes	<i>Nurse V</i> <i>Nurse VI</i> Nursing Office
	1.4. Reviews/signs/approves documents, records and communications	None	1 hour	<i>Chief Nurse</i> Nursing Office
	1.5. Facilitates forwarding of documents with CN comments to concerned unit/	None	10 minutes	<i>Nursing Attendant</i> <i>Nurse III</i> Nursing Office



	area within set deadlines.			
	1.6. Registers outgoing documents, records and communications to logbook	None	5 minutes	<i>Nursing Attendant</i> Nursing Office
2. Receives signed/acted upon documents/ records/ communications.	2. Conveys the documents/ records/ communications accordingly	None	20 minutes	<i>Nursing Attendant</i> Nursing Office
	TOTAL FEES: None		TOTAL TIME: 2 hours	



Finance Office Internal Services



1. Processing of Incoming and Outgoing Communications

Finance Office receives documents/reports/communications from internal and external sources for evaluation and forwards the same to concerned offices/sections/departments for appropriate actions/recommendations. Finance office is open from Monday-Friday 8:00am - 5:00pm.

OFFICE OR DIVISION:	Finance Office			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government G2B – Government to Business			
WHO MAY AVAIL:	Internal Offices/Sections/Departments and External Private and Government Agencies			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Documents to be processed/evaluated (original copies)		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/records/communications to the receiving personnel	1.1 Receives the documents/reports/communications	none	5 minutes	<i>Administrative Aide II</i> Finance Office
	1.2 Reviews the documents/reports/communications	none	3 minutes	<i>Administrative Assistant I</i> Finance Office
	1.3 Pre-evaluates the documents/reports/communications	none	10 minutes	<i>Administrative Assistant I</i> Finance Office
	1.4 Reviews/signs/approves/notes on the documents/reports/communications	none	1 hour	<i>Financial Management Officer II</i> Finance Office
	1.5 Registers outgoing documents/reports/communications to logbook	none	2 minutes	<i>Administrative Aide II</i> Finance Office
2. Releases signed/acted upon documents/ reports/communications	2. Files copy of the documents/reports/communications accordingly	none	10 minutes	<i>Administrative Assistant I</i> Finance Office
TOTAL FEES: None		TOTAL TIME: 2 hours		



Accounting Section

External Services



1. Issuance of Order of Payment

Order of payment is issued to client/payor based from Statement of Account for unpaid hospital bills (Promissory Notes), use of facility, blood and blood products issued to health facilities, agency's annual medical check-up, transfer of funds, medical assistance from other agencies and other collectibles as authorized by law or regulations. Accounting office is open daily from 8am to 5 pm Mondays thru Fridays.

OFFICE OR DIVISION:	Accounting Section/Finance Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen / G2G – Government to Government / G2B – Government to Business			
WHO MAY AVAIL:	Patients/Clients/Employee/Business Entity/Government Agency			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Demand Letter/Promissory Note/Patient's Statement of Account (1 original copy)		Concerned client, however, may secure copy from the Accounting Section if lost		
Statement of Account (for use of facility, blood and blood products issued to health facilities, agency's annual medical check-up) and of Senior Citizen's ID to avail discount (1 photocopy)		Concerned client/business entity or agency		
Memorandum of Agreement/Guidelines in the Use of Funds and Copy of Disbursement Voucher for funds transfer (1 original copy)		Concerned agency		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents copy of documentary requirements.	1.1 Reviews completeness of data and retrieve record from file for unpaid hospital bills and logs transaction and prepare/print filled-out Order of Payment (OP) in two (2) copies	None	30 minutes	<i>Administrative Assistant</i> Accounting Office
	1.2 Affixes initial below the name of the Authorized Signatory	None	5 minutes	<i>Administrative Assistant</i> Accounting Office
	1.3 Signs Order of Payment.	None	15 minutes	<i>Accountant IV</i> Accounting Office



2. Receives copy of signed Order of Payment	2. Issues signed Order of Payment to client. First Copy – Client Second Copy – Accounting File	None	5 minutes	<i>Administrative Assistant Accounting Office</i>
3. Pays at the Cashier	3. Issues corresponding Official Receipt	As stated in the Order of Payment	30 minutes	<i>Administrative Officer I Cashier's Office Main building or New ER located at 5-Storey building</i>
4. Presents copy of Official Receipt	4. Records Official Receipt Number, Date and Amount	None	5 minutes	<i>Administrative Assistant Accounting Office</i>
	TOTAL FEES: As stated in the Order of Payment		TOTAL TIME: 1 hour and 30 minutes	



Billing

Internal Services



1. Procedures in Statement of Account Preparations

The Billing Section is in-charge of Preparation of Statement of Account for Patient admitted at BMC. Processing time 7:00 am to 8:00 pm Monday to Sunday including Holidays.

OFFICE OR DIVISION:	Billing Section			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government			
WHO MAY AVAIL:	Internal Clients - Nurse/Nursing Attendant of different wards			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Pre-billing requirements Checklist (PHIC Claims/Pre-discharge Order) –1 original copy of the following: <ul style="list-style-type: none"> • Final Diagnosis • ICD10 Code • CF4 • CF3 • MSS Classification • Operative Technique • Anesthesia Record • Chemo Flow Sheet • PD Sheet • Hemodialysis Sheet • Endoscopy Report, (whichever applicable) 		Different Wards		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Forwards pre-billing requirements (from ward)	1.1 Receives pre-billing requirements 1.2 Validates/ Prepares & Print Statement of Account (SOA) 1.3 Prepares routing slip and records SOA	None	18 minutes/ patient	Administrative Aide II/ Administrative Assistant III Billing Section
2. Receives Statement of Account (SOA)	2. Forwards SOA to different wards & Philhealth Processing Unit (by batch)	None	2 minutes	Nurse/Nursing Attendant Wards
	TOTAL FEES: None		TOTAL TIME: 20 minutes	



Budget Office Internal Services



1. Processing of Obligation Request and Status (ORS) and Budget Utilization Request Status (BURS)/ Obligation Transaction for Purchase Order (PO), Disbursement Voucher (DV), Payroll and Travel Expense Voucher (TEV)

When the PO/DV/Payroll and TEV are forwarded to Budget Section its codes and source of fund is classified, seriated and obligated. Budget Office is open from 8 am to 5 pm, Mondays thru Fridays, except holidays.

OFFICE OR DIVISION:		Finance Division/ Budget Section		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		BMC Employee		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Pre-Audited PO/DV/Payroll/TEV from Accounting Section (original copies)		Accounting Section		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Forwards Document for obligation (such as (PO/ DV /Payroll/ TEV)	1.1 Receives the document from the Accounting Section	None	5 minutes	<i>Administrative Aide II</i> Budget Office
	1.2 Process the document received (Checking in the PPMP, Classification of fund, typing the codes in OBR/BUR, assigning a serial number for the OBR/BUR)	None	1 hour	<i>Administrative Assistant II</i> Budget Office
	1.3 Reviews and certifies OBR/ BUR	None	25 minutes	<i>Supervising Administrative Officer</i> Budget Office
2. Receives the processed documents (Accounting Section)	2. Gets file copy and releases to Accounting Section	None	10 minutes	<i>Administrative Aide II</i> Budget Office
TOTAL FEES: None		TOTAL TIME: 1 hour and 40 minutes		



Cancer Center External Services



1. Cancer Center Clinic Consultation

Cancer Center offers services such as Radiation Oncology, CT Simulation, LINAC and Brachytherapy. Clinic consultation is available daily from Monday to Friday, from 8:00 AM to 5:00 PM, except Saturdays, Sundays, and Holidays.

OFFICE OR DIVISION:	Regional Cancer Center			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Cancer Patients of Out-Patient Department and of other Health Care Providers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Referral Letter/Sheet (1 original copy) • Surgical Pathology Report (1 original copy) • Laboratory Tests Results (if any, 1 original copy) • Triage Slip, Charge Slip (for facility fee) • Patient Information Sheet; Hospital Record ID (green card) • PhilHealth Slip, PhilHealth Benefit Eligibility Form (PBEF) (1 original copy) • Official Receipt (1 original copy) 		Referring Health Care Provider or Clinic Histopathology Laboratory or Pathologist Referring Clinical Laboratory or Department of Laboratories, 1 st floor of Main Building Triage Area, 1 st floor RCC HIMS Clerk Table, 1 st floor RCC PhilHealth Processing Clerk Table, 1 st floor RCC Cashier's Window, 1 st floor RCC		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Sign in to the Security's Client Logbook	1.1 Give the logbook to the patient.	None	1 minute	Watchman, 1 st floor of the Regional Cancer Center
	1.2 Guide the patient to the Triage area.	None	1 minute	
2. Presents any of the requirements to the Triage Nurse or Patient Navigator: a. Referral Letter/Sheet, b. Surgical Pathology Report, c. Laboratory Tests Results	2.1 Evaluates patient-specific requirements if available.	None	3 minutes	Nurse II/ Nurse III Triage Area, 1 st floor of the Regional Cancer Center
	2.2 Checks the schedule if it is consultation day in: a. Radiation Oncology– Monday to Friday; b. ENT / Ophthalmic Oncology– Monday,	None	3 minutes	



	<p>Wednesday, and Friday;</p> <p>c. Orthopedic Oncology– Monday & Thursday;</p> <p>d. Medical Oncology / Surgical Oncology– Tuesday and Wednesday;</p> <p>e. Gynecologic Oncology– Tuesday and Thursday;</p> <p>f. Hematology- Oncology (Adult)–Thursday</p> <p>2.3. If the patient is from a distant place or far-flung areas, call the on-call physician to check the patient.</p>	None	3 minutes	Nurse II/ Nurse III Triage Area, 1 st floor of the Regional Cancer Center
3. Receives the <i>Triage Slip</i> , where the clinic of assignment is written, and the <i>Charge Slip</i> and go to the HIMS clerk	3.1 Writes the clinic of assignment and the floor the patient's clinic is located on the <i>Triage Slip</i> and provide the patient with the <i>Charge Slip</i> for facility fee which shall be paid after PhilHealth verification.	None	1 minute	Nurse II/ Nurse III Triage Area, 1 st floor of the Regional Cancer Center
	3.2 Guides the patient to the HIMS clerk for data gathering.	None	1 minute	Nurse II/ Nurse III Triage Area, 1 st floor of the Regional Cancer Center
4. Fills out the data required on the <i>Patient Information Sheet (PIS)</i> and provide it to the HIMS clerk	4.1 Provides Patient Information Sheet (PIS) and assist the patient if incapable of filling out the PIS.	None	5 minutes	Administrative Assistant II, 1 st floor of Regional Cancer Center



Note: Present also the <i>Hospital Record ID</i> for patients with existing medical records	4.2 Encodes the gathered data in the IHOMIS (database).	None	5 minutes	
5. Accepts <i>Hospital Record ID</i> (green card)	5. Prints out a <i>Hospital Record ID</i> and give it to the patient.	None	3 minutes	Administrative Assistant II, 1 st floor of Regional Cancer Center
	5.1. Includes in the patient's medical record folder the requirements obtained during Triage.	None	2 minutes	
6. Submits for interview with the Cancer Registrar to secure <i>Informed Consent for CARE Philippines</i> Note: Only those patients with NO existing signed <i>Informed Consent for CARE Philippines</i> shall submit themselves for interview.	6.1 Gets <i>Informed Consent to CARE Philippines</i> and explain to the patient the importance of enrolling in the Hospital-based Tumor Registry.	None	6 minutes	Administrative Assistant II, 1 st floor of Regional Cancer Center
	6.2 If the patient agreed to the <i>Informed Consent for CARE Philippines</i> , instruct him/her to sign it.	None	2 minutes	
	6.3 Attach the signed <i>Informed Consent for CARE Philippines</i> to the patient's medical record folder.	None	2 minutes	
7. For patients who will undergo radiation therapy, chemotherapy, blood transfusion, colposcopy, and biopsy: 7.1 Submits Updated MDR and receive color-coded <i>PhilHealth Slip</i> and <i>PhilHealth</i>	7. Verifies <i>PhilHealth</i> of the member/patient in the PORTAL. If the eligibility indicates YES but with remarks, submit the following: a. If Self-Employed, Official Receipt;	None	3 minutes	Administrative Aide II, 1 st floor of Regional Cancer Center



<i>Benefit Eligibility Form (PBEF)</i> from the PhilHealth Processing Clerk	b. If Employed (in Government or Private sector), CSF with the signature of the employer; c. If Indigent Member of 4Ps, CE1 form from PhilHealth as per advised by PCARES;			
	7.1 If the patient has no PhilHealth Membership after verifying with the PhilHealth Processing Clerk/PCARES, advise the patient to proceed to POS (Point-of-Service) for enrollment. 7.2 Prints PORTAL-CEWS and tag the qualified and verified patient in IHOMIS and issue <i>PhilHealth Slip</i> and the <i>PhilHealth Benefit Eligibility Form (PBEF)</i> .	None	2 minutes	Administrative Aide II, 1 st floor of Regional Cancer Center
8. Presents <i>Charge Slip</i> (for facility fee) and pay the amount at Cashier's Window Note: Make sure to get <i>Official Receipt</i> of payment	8. Accepts the <i>Charge Slip</i> and collect the patient's payment and issue him/her the <i>Official Receipt</i> .	PHP 150.00	30 minutes	Administrative Officer I, Cashier's Window, 1 st floor of Regional Cancer Center
9. Proceeds to the clinic of assignment for the consultation	9. Guides the patient to the clinic of assignment.	None	5 minutes	Nurse II/ Nurse III Triage Area, 1 st floor of the Regional Cancer Center
TOTAL FEES: PHP 150.00		TOTAL TIME: 1 hour and 20 minutes		



2. Procedure on Brachytherapy

In Brachytherapy, a radioactive material is used. The patient is positioned in the treatment couch. The applicator is inserted/positioned very near the target volume in the patient's body. An x-ray of the region of interest is taken to make sure that the placement of the applicator is appropriate for the intended treatment. A treatment plan is made using these images. The dose prescribed is then delivered.

Brachytherapy is done from Monday to Friday, from 8:00 AM to 4:00 PM, except Saturdays, Sundays, and Holidays.

OFFICE OR DIVISION:		Radiation Oncology, 1 st Floor of Regional Cancer Center (RCC)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Patients for treatment in Brachytherapy		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Signed Patient's Daily Treatment Monitor (original copy)			Radiation Oncology, 1 st floor RCC	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Sign in to the Security's Client Logbook	1. Instruct the patient to sign in the logbook. And then direct the patient to the front desk.	None	2 minutes	<i>BMC Watchman, 1st floor of Regional Cancer Center</i>
2. Inform the Triage Nurse or Patient Navigator at the front desk that you are there for your Brachytherapy session.	2.1 Request for the green card of the patient. Verify patient identity to ensure correct treatment to correct patient.	None	1 minute	<i>Triage Nurse or Patient Navigator (Nurse I or II),</i>
	2.2. Get the vital signs of the patient and record them to the patient's chart. Guide patient to Preparation Room.	None	3 minutes	<i>Nursing Attendant Triage Area, 1st floor of the Regional Cancer Center</i>
	2.3. Apply necessary charges and endorse relative of patient to Billing for their daily <i>Statement of Account.</i>	None	1 minute	<i>Nurse I or II, Triage Area, 1st floor or Regional Cancer Center</i>



3. Sign the Consent to Brachytherapy	3. Explain again to patient the process of Brachytherapy. Have the Consent to Brachytherapy signed by the patient. Sign as witness.	None	10 minutes	Nurse I or II, Triage Area, 1 st floor or Regional Cancer Center
4. Proceed to the Preparation Room.	4. Perform all necessary pre-operative preparations.	None	15 minutes	Nurse I or II, Triage Area, 1 st floor or Regional Cancer Center
5. Relative of patient proceed to billing and Receive the <i>Statement of Account</i> for the daily treatment.	5.1. Issue the <i>Statement of Account</i> . Have all pertinent forms signed by the patient or relative. 5.2. If payment is needed, instruct relative to go to the Cashier's Window.	None	5 minutes	Administrative Assistant III, 1 st floor of Regional Cancer Center
6. Relative proceed to Cashier and settle the outstanding bill.	6. Issue an <i>Official Receipt</i> for Brachytherapy procedures.	Varied fees (refer to List of Radiation Oncology Charges)	5 minutes	Administrative Officer I, Cashier's Window, 1 st floor of Regional Cancer Center
7. Proceed to Brachytherapy Treatment Room	7.1. Transport the patient to the Brachytherapy Treatment Room.	None	2 minutes	Nurse I or II, Radiation Technologist II, III, IV, Radiation Oncology, 1 st floor or Regional Cancer Center
	7.2. If anesthesia is required, administer anesthetic.	None	20 minutes	Anesthesiologist Regional Cancer Center
	7.3. Position the patient for insertion. Insert the applicators.	None	30 minutes	Nurse I or II, Radiation Oncology, 1 st floor of Regional Cancer Center



	7.4. Take a radiograph to confirm correct placement of applicator.	None	5 minutes	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor or Regional Cancer Center</i>
	7.5. Export to SAGINOVA the approved radiographs.	None	1 minute	<i>Health Physicist III, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	7.6. Create treatment plan using exported x-ray images.	None	60 minutes	<i>Medical Specialist III (ROOD), Radiation Oncology, 1st floor of Regional Cancer Center</i>
	7.7. Evaluate and approve the treatment plan.	None	2 minutes	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor or Regional Cancer Center</i>
	7.8. Deliver the dose.	None	20 minutes	<i>Medical Specialist III (ROOD), Radiation Oncology, 1st floor of Regional Cancer Center</i>
	7.9. Remove the applicators.	None	10 minutes	
8. Patient is transported to Recovery Room	8.1. After the treatment, transport patient to the Recovery Room.	None	5 minutes	<i>Nurse I or II, Radiation Technologist II, III, IV, Radiation Oncology, 1st floor or Regional Cancer Center</i>
	8.2. Perform all necessary post-operative steps. Follow discharge orders.	None	2 hours	<i>Nurse I or II, Radiation Oncology, 1st floor or Regional Cancer Center</i>



	8.3. If numbing due to anesthetic subsided, discharge the patient.	None	5 minutes	
9. Go home and return on the scheduled treatment the following week.	9.1. Instruct patient to return the following week, on the assigned day for the next treatment.	None	2 minutes	<i>Nurse I or II, Radiation Oncology, 1st floor or Regional Cancer Center</i>
	9.2. Remind to follow the same process as the first day of treatment.	None	1 minutes	<i>Nurse I or II, Radiation Oncology, 1st floor or Regional Cancer Center</i>
	TOTAL FEES: Varied Fees (Refer to List of Radiation Oncology Charges)		TOTAL TIME: 5 hours and 25 minutes	



3. Procedure on CT Simulation and Treatment Planning

A patient for radiation therapy will undergo imaging using CT. The position of the patient during the actual treatment is implemented on the CT couch. Different immobilization devices may be used to maintain specific body positioning. Set imaging protocol for the patient's case, as reflected in the CT Simulation Request Form, is executed in the machine. The images will then be used in the computerized planning, where the delivery of prescribed radiation dose is designed.

CT Simulation is done from Monday to Friday, from 8:00 AM to 4:00 PM, except Saturdays, Sundays, and Holidays.

OFFICE OR DIVISION:		Radiation Oncology, 1 st Floor of Regional Cancer Center (RCC)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Patients for CT Simulation		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Laboratory Tests Results (if any, 1 original copy) Hospital Record ID (green card) Statement of Account (for CT Simulation fee) Official Receipt (for CT Simulation fee) (1 original copy)		Clinical Laboratory HIMS Clerk Table, 1 st floor RCC Billing, 1 st floor RCC Cashier's Window, 1 st floor RCC		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Signs in the Security's Client Logbook	1. Instructs the patient to sign in the logbook. Directs the patient to the front desk.	None	2 minutes	<i>BMC Watchman</i> , 1 st floor of Regional Cancer Center
2. Informs the Triage Nurse at the front desk that you are for CT Simulation.	2. Requests for the green card of the patient. If creatinine result is requested during consult, ask for the result. If the result is available and normal, Check-in the patient to ARIA. If the result is low, instruct patient to secure a clearance to proceed with contrast study	None	3 minutes	<i>Triage Nurse or Patient Navigator (Nurse I or II), Nursing Attendant</i> Triage Area, 1 st floor of the Regional Cancer Center



	<p>despite creatinine level from the attending/primary physician.</p> <p>If the creatinine test was not performed, re-schedule the CT simulation. Instruct patient to return on date of the new schedule.</p>			
3. Reports compliance to patient preparation instructions.	<p>3. Confirms if the instructions on patient preparation were followed. If yes, endorse patient to Billing.</p> <p>If no, and the preparation can be done within the operating hours of the day, instruct the patient to wait until the required preparation is done.</p> <p>If the required preparation is not doable within the operating hours of the day, re-schedule the CT Simulation. Instruct the patient to return on another date.</p>	None	5 minutes	Nurse I or II, Nursing Attendant Triage Area, 1 st floor of the Regional Cancer Center
4. Receives the <i>Statement of Account</i> for the CT simulation from Billing.	4. Issues <i>Statement of Account</i> .	None	5 minutes	Administrative Assistant III, 1 st floor of the Regional Cancer Center
5. Proceeds to Cashier and settles the required amount. Receives official receipt	5. Issues an <i>Official Receipt</i> for the CT Simulation.	Varied fees (refer to List of Radiation Oncology Charges)	5 minutes	Administrative Officer I, Cashier's Window, 1 st floor of Regional Cancer Center



6. Presents official receipt to the front desk	6. Endorses patient to Radiation Therapist (RTT) assigned to CT Simulation.	None	1 minute	<i>Nurse I or II, Nursing Attendant</i> Regional Cancer Center
7. Proceeds to Preparation Room.	7.1 Checks to have all necessary pre-procedure preparations done in the Preparation Room.	None	10 minutes	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	7.2 Transports/ guides patient towards CT Simulation Room. Position the patient per instruction in the CT Simulation Request Form. Scan the patient according to chosen protocol.	None	30 minutes	<i>Medical Specialist III (ROOD), Radiation Technologist II, III, IV, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	7.3 Approves the resulting scan. Then import the images to ARIA.	None	2 minutes	
8. Go home and return on the scheduled first day of treatment.	8. Instructs patient to go home and return on the date of first day of treatment.	None	1 minute	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	8.1 Creates a treatment plan and have it approved by the Radiation Oncologist.	None		<i>Health Physicist III, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	8.2 For Schedule of first day of treatment. Informs the patient of this schedule via text message or call.	None	2 minutes	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	TOTAL FEES: Varied Fees (Refer to List of Radiation Oncology Charges)		TOTAL TIME: 63 minutes in the facility	



4. Procedure on External Beam Radiotherapy (LINAC)

In External Beam Radiotherapy (EBRT), a machine called Linear Accelerator (LINAC) is used. The patient is positioned in the treatment couch the same way he/she was positioned during the CT Simulation. The treatment plan designed in the CT images is implemented to the patient in the LINAC. The dose prescribed is then delivered via a high energy x-ray beam or electron beam.

EBRT is done from Monday to Friday, from 8:00 AM to 4:00 PM, except Saturdays, Sundays, and Holidays.

OFFICE OR DIVISION:		Radiation Oncology, 1 st Floor of Regional Cancer Center (RCC)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Patients for treatment in LINAC		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Signed Patient's Daily Treatment Monitor (1 original copy)			Radiation Oncology, 1 st floor RCC	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Sign in to the Security's Client Logbook	1. Instruct the patient to sign in the logbook. And then direct the patient to the front desk.	None	2 minutes	<i>BMC Watchman</i> , 1 st floor of Regional Cancer Center
2. Inform the Triage Nurse or Patient Navigator at the front desk that you are for CT Simulation.	2.1. Request for the green card of the patient. 2.2. Get the vital signs of the patient and record them to the patient's account in ARIA. 2.3. Endorse patient to Billing for their daily Statement of Account.	None	3 minutes	<i>Triage Nurse or Patient Navigator (Nurse I or II), Nursing Attendant</i> Triage Area, 1 st floor of the Regional Cancer Center
3. Proceed to billing and Receive the <i>Statement of Account</i> for the daily treatment.	3.1. Issue the <i>Statement of Account</i> . Have all pertinent forms signed by the patient or relative. 3.2. If the patient needs to pay, instruct to go to the Cashier.	None	5 minutes	<i>Administrative Assistant III</i> , 1 st floor of Regional Cancer Center



	If no payment is required, endorse patient to Radiation Therapist (RTT) assigned to LINAC.			
4. Proceed to Cashier and settle the outstanding bill.	4.1 Issue an <i>Official Receipt</i> for the CT Simulation. Sign the Patient's <i>Daily Treatment Monitor</i> . 4.2 Endorse patient to Radiation Therapist (RTT) assigned to LINAC.	Varied fees (refer to List of Radiation Oncology Charges)	5 minutes	<i>Administrative Officer I, Cashier's Window, 1st floor of Regional Cancer Center</i>
5. Proceed to LINAC Treatment Room	5.1 Call the patient when ready for treatment. Verify identity of the patient to ensure correct treatment of correct patient. 5.2 Instruct the patient on the proper positioning. Verify correctness of setup and position. And then deliver the dose according to the approved plan.	None	30 minutes	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor of Regional Cancer Center</i> <i>ROOD, Health Physicist III, Radiation Technologist II, III, IV, Radiation Oncology, 1st floor or Regional Cancer Center</i>
6. Goes home and returns the next working days for daily treatment and check-up.	6.1 After the treatment, instruct patient to return daily on the assigned time slot for their treatment. 6.2 Remind to follow the same process as the first day of treatment. 6.3 Instruct patient to meet with the Radiation Oncologist as scheduled weekly for check-up.	None	5 minutes	<i>Radiation Technologist II, III, IV, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	TOTAL FEES: Varied Fees (Refer to List of Radiation Oncology Charges)		TOTAL TIME: 50 minutes	



5. Procedure on Radiation Oncology Consultation

The consultation to a radiation oncologist is required so that the patient can be assessed and the best radiation treatment technique may be determined. The radiation oncologist discusses to the patient the best treatment modalities, side effects of radiation, and the process of radiation therapy. Also, physical limitations that may influence positioning during the simulation and treatment is identified so it can be considered in the treatment design.

Consultation is available from Monday to Friday, from 8:00 AM to 4:00 PM, except Saturdays, Sundays, and Holidays.

OFFICE OR DIVISION:		Radiation Oncology, 1 st Floor of Regional Cancer Center (RCC)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Patients for radiation therapy		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Referral Letter/Sheet (1 original copy) Surgical Pathology Report (1 original copy) Laboratory Tests Results (if any, 1 original copy) Patient Information Sheet (original copy) Hospital Record ID (green card) Charge Slip (for facility fee) Official Receipt (for facility fee) (original copy)		Referring Health Care Provider or Clinic Histopathology Laboratory or Pathologist Clinical Laboratory HIMS Clerk Table, 1 st floor RCC Triage Area, 1 st floor RCC Cashier's Window, 1 st floor RCC		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Signs in the Security's Client Logbook	1.1 Instructs to sign in the logbook. 1.2 Directs to the front desk.	None	2 minutes	BMC Watchman, 1 st floor of Regional Cancer Center
2. Presents the following requirements to the front desk: <i>d. Referral Letter,</i> <i>e. Histopathology Report,</i> <i>f. Laboratory Tests Results</i>	2.1 Receives the presented documents. Checks for the completeness of the requirements. 2.2 If requirements are not complete, issues an applicable form, either request form or referral	None None	1 minute 1 minute	Triage Nurse or Patient Navigator (Nurse I or II), Nursing Attendant Triage Area, 1 st floor of the Regional Cancer Center



<p><i>g. Diagnostic Radiology Tests Results</i></p>	<p>signed by the Radiation Oncologist on duty (ROOD), so the lacking tests may be done before the CT simulation. Otherwise, queue patient for consultation.</p> <p>2.3 Issues the <i>Patient Information Form</i> and instructs the relative to fill it out.</p> <p>2.4 Gets the vital signs of the patient.</p>	<p>None</p> <p>None</p>	<p>1 minute</p> <p>5 minutes</p>	
<p>3. Fills out the <i>Patient Information Form</i>. Gives the accomplished form to the Triage Nurse</p>	<p>3. Receives the filled-out <i>Patient Information Form</i> then register the patient to ARIA. Record the vital signs to the patient account in ARIA.</p>	<p>None</p>	<p>5 minutes</p>	
<p>4. Receives the <i>Charge Slip</i> and pays the amount at Cashier. Receives the <i>Official Receipt</i> and presents to the Triage Nurse</p>	<p>4.1 Issues a Charge Slip for the facility fee. Instruct the relative to pay at the Cashier.</p> <p>4.2 Accepts the Charge Slip and collects the patient's payment and issues Official Receipt.</p>	<p>None</p> <p>PHP 150.00</p>	<p>4 minutes</p> <p>30 minutes</p>	<p><i>Nurse I or II, Nursing Attendant</i> Triage Area, 1st floor of the Regional Cancer Center</p> <p><i>Administrative Officer I, Cashier's Window, 1st floor of Regional Cancer Center</i></p>



	4.3 After payment, instructs to wait until name is called for consultation.	None	2 minutes	<i>Nurse I or II, Nursing Attendant</i> Triage Area, 1 st floor of the Regional Cancer Center
5. Proceeds to the Consultation Room	5.1 Interviews the patient and takes history. Performs clinical examination. Discusses the options and best radiotherapy technique for the case. Explains side-effects of radiation. Discusses all costs and possible discounts/assistance they may avail such as PWD or Senior Citizen Discount, and PhilHealth coverages.	Varied fees (refer to List of Radiation Oncology Charges)	25 minutes	<i>Medical Specialist III (ROOD), Radiation Oncology, 1st floor of Regional Cancer Center</i>
	5.3 If the CT simulation requires a contrast, confirms if the patient has a recent (within one month before the schedule of CT simulation) creatinine test. If none, issue a request for creatinine test. Also, issue a prescription for the contrast. Otherwise, proceed to accomplishing a <i>CT Simulation Request Form</i> .	None	5 minutes	<i>ROOD, Nurse I or II, Health Physicist III, Radiation Oncology, 1st floor of Regional Cancer Center</i>
	5.4 Endorses the request form and the patient to the Radiation Therapist	None	4 minutes	<i>Medical Specialist III (ROOD), Radiation</i>



	(RTT) assigned to CT Simulation.			Oncology, 1 st floor of Regional Cancer Center
6. Proceeds to Radiation Therapist (RTT) assigned to CT Simulation. Signs the <i>Consent Form to Treatment</i> .	6.1 Receives the <i>CT Simulation Request Form</i> . If the request included contrast study, explain to patient the needed preparation (fasting).	None	5 minutes	Radiation Technologist II, III, IV, Radiation Oncology, 1 st floor of Regional Cancer Center
	6.2 Repeat explaining the process of radiotherapy to the patient. Have the patient sign the <i>Consent Form to Treatment</i> and sign as witness.	None	5 minutes	
7. Receives schedule for the CT Simulation and goes home.	7. Assigns the patient a schedule for CT Simulation. Instruct the patient to return on the date of the scheduled scan and remind them of the needed tests (i.e. creatinine), patient preparations (i.e. fasting, bowel preparation, full bladder), and other specific instructions, if there are any.	None	5 minutes	Radiation Technologist II, III, IV, Radiation Oncology, 1 st floor of Regional Cancer Center
	TOTAL FEES: Varied fees (Refer to List of Radiation Oncology Charges)		TOTAL TIME: 1 hour and 40 minutes	



LIST OF RADIATION ONCOLOGY CHARGES

(FIXED CHARGES) LINAC / EXTERNAL BEAM RADIOTHERAPY

SERVICE

	CHARGES	GROSS CHARGE (in PHP)	SC/PWD DISCOUNT (in PHP)	PHIC COVERAGE (in PHP)	NET CHARGE (in PHP)
CT	CT SIMULATION				
	1 CT SIMULATION	16,875.00	3,375.00	13,500.00	-
	2 SIMULATION FEE	21,000.00	4,200.00	16,800.00	-
	TOTAL				0.00
2D/3D	2D PLANNING				
	1 2D PLANNING	12,000.00	2,400.00	9,600.00	-
	2 2D PLANNING	10,500.00	2,100.00	8,400.00	-
	TOTAL				0.00
	2D/3D TREATMENT				
	1 2D DAILY TREATMENT	3,600.00	720.00	2,200.00	680.00
	2 2D DAILY TREATMENT	1,000.00	200.00	800.00	-
	DAILY TOTAL				680.00
IMRT	IMRT PLANNING				
	1 IMRT PLANNING	14,500.00	2,900.00	9,600.00	2000.00
	2 IMRT PLANNING	10,500.00	2,100.00	8,400.00	-
	TOTAL				2000.00
	IMRT TREATMENT				
	1 IMRT DAILY TREATMENT	7,500.00	1,500.00	4,000.00	2000.00
	2 IMRT DAILY TREATMENT	2,100.00	420.00	1,680.00	-
	DAILY TOTAL				2000.00

PAY

	CHARGES	GROSS CHARGE (in PHP)	SC/PWD DISCOUNT (in PHP)	PHIC COVERAGE (in PHP)	NET CHARGE (in PHP)
CT	CT SIMULATION				
	1 CT SIMULATION	16,875.00	3,375.00	13,500.00	-
	2 SIMULATION FEE PF	21,000.00	4,200.00	16,800.00	-
	TOTAL				0.00
2D/3D	2D PLANNING				
	1 2D PLANNING	18,250.00	3,650.00	9,600.00	5000.00
	2 2D PLANNING PF	16,750.00	3,350.00	8,400.00	5000.00
	TOTAL				10000.00
	2D/3D TREATMENT				
	1 2D DAILY TREATMENT	3,600.00	720.00	2,200.00	680.00
	2 2D DAILY TREATMENT PF	1,625.00	325.00	800.00	500.00
	DAILY TOTAL				1180.00
IMRT	IMRT PLANNING				
	1 IMRT PLANNING	22,000.00	4,400.00	9,600.00	8000.00
	2 IMRT PLANNING PF	23,000.00	4,600.00	8,400.00	10000.00
	TOTAL				18000.00
	IMRT TREATMENT				
	1 IMRT DAILY TREATMENT	7,500.00	1,500.00	4,000.00	2000.00



2	IMRT DAILY TREATMENT PF	3,350.00	670.00	1,680.00	1000.00
DAILY TOTAL					3000.00

(FIXED CHARGES) BRACHYTHERAPY

SERVICE

CHARGES		GROSS CHARGE (in PHP)	SC/PWD DISCOUNT (in PHP)	PHIC COVERAGE (in PHP)	NET CHARGE (in PHP)	
CYLINDER/FLETCHER	DAY 1					
	1	insertion	6,875.00	1,375.00	5,500.00	-
	2	insertion PF	5,250.00	1,050.00	4,200.00	-
	3	treatment	12,000.00	2,400.00	9,600.00	-
	4	treatment PF	10,500.00	2,100.00	8,400.00	-
	TOTAL					0.00
	DAY 2 UNTIL DAY 3 (CYLINDER) OR DAY 4 (FLETCHER)					
	1	insertion	6,875.00	1,375.00	-	5,500.00
	2	treatment	12,000.00	2,400.00	9,600.00	-
	3	treatment PF	10,500.00	2,100.00	8,400.00	-
	4	HDR treatment	5,000.00	1,000.00	4,000.00	-
	5	HDR treatment PF	2,100.00	420.00	1,680.00	-
	TOTAL					5,500.00
IGBT	DAY 1					
	1	insertion	6,875.00	1,375.00	5,500.00	-
	2	insertion PF	5,250.00	1,050.00	4,200.00	-
	3	CT scan	9,500.00	1,900.00	-	7,600.00
	4	IGBT planning	6,250.00	1,250.00	-	5,000.00
	5	treatment	12,000.00	2,400.00	9,600.00	-
	6	Treatment PF	10,500.00	2,100.00	8,400.00	-
	TOTAL					12,600.00
	DAY 2 UNTIL DAY 4					
	1	insertion	6,875.00	1,375.00	-	5,500.00
	2	CT scan	9,500.00	1,900.00	-	7,600.00
	3	IGBT planning	6,250.00	1,250.00	-	5,000.00
	4	treatment	12,000.00	2,400.00	9,600.00	-
5	treatment PF	10,500.00	2,100.00	8,400.00	-	
6	HDR treatment	5,000.00	1,000.00	4,000.00	-	
7	HDR treatment PF	2,100.00	420.00	1,680.00	-	
TOTAL					18,100.00	

PAY

CHARGES		GROSS CHARGE (in PHP)	SC/PWD DISCOUNT (in PHP)	PHIC COVERAGE (in PHP)	NET CHARGE (in PHP)	
CYLINDER	DAY 1					
	1	insertion	6,875.00	1,375.00	5,500.00	-
	2	insertion PF	14,000.00	2,800.00	4,200.00	7,000.00
	3	2D planning	6,250.00	1,250.00	-	5,000.00
	4	2D planning PF	1,250.00	250.00	-	1,000.00
	5	treatment	12,000.00	2,400.00	9,600.00	-
	6	treatment PF	19,250.00	3,850.00	8,400.00	7,000.00
	TOTAL					20,000.00



	DAY 2 UNTIL DAY 3 (CYLINDER)					
	1	insertion	6,875.00	1,375.00	-	5,500.00
	2	Insertion PF	8,750.00	1,750.00	-	7,000.00
	3	2D planning	6,250.00	1,250.00	-	5,000.00
	4	2D planning PF	1,250.00	250.00	-	1,000.00
	5	treatment	12,000.00	2,400.00	9,600.00	-
	6	treatment PF	19,250.00	3,850.00	8,400.00	7,000.00
	7	HDR treatment	5,000.00	1,000.00	4,000.00	-
	8	HDR treatment PF	2,100.00	420.00	1,680.00	-
	TOTAL					25,500.00
FLETCHER	DAY 1					
	1	insertion	6,875.00	1,375.00	5,500.00	-
	2	insertionPF	19,000.00	3,800.00	4,200.00	11,000.00
	3	2D planning	6,250.00	1,250.00	-	5,000.00
	4	2D planning PF	1,250.00	250.00	-	1,000.00
	5	treatment	12,000.00	2,400.00	9,600.00	-
	6	treatment PF	19,250.00	3,850.00	8,400.00	7,000.00
	TOTAL					24,000.00
	DAY 2 UNTIL DAY 4 (FLETCHER)					
	1	insertion	6,875.00	1,375.00	-	5,500.00
	2	Insertion PF	13,750.00	2,750.00	-	11,000.00
	3	2D planning	6,250.00	1,250.00	-	5,000.00
	4	2D planning PF	1,250.00	250.00	-	1,000.00
	5	treatment	12,000.00	2,400.00	9,600.00	-
	6	treatment PF	19,250.00	3,850.00	8,400.00	7,000.00
	7	HDR treatment	5,000.00	1,000.00	4,000.00	-
	8	HDR treatment PF	2,100.00	420.00	1,680.00	-
	TOTAL					29,500.00
IGBT	DAY 1					
	1	insertion	6,875.00	1,375.00	5,500.00	-
	2	insertion PF	19,000.00	3,800.00	4,200.00	11,000.00
	3	CT scan	9,500.00	1,900.00	-	7,600.00
	4	IGBT planning	6,250.00	1,250.00	-	5,000.00
	5	IGBT planning PF	1,250.00	250.00	-	1,000.00
	6	treatment	12,000.00	2,400.00	9,600.00	-
	7	treatment PF	19,250.00	3,850.00	8,400.00	7,000.00
	TOTAL					31,600.00
	DAY 2 UNTIL DAY 4 (FLETCHER)					
	1	insertion	6,875.00	1,375.00	-	5,500.00
	2	Insertion PF	13,750.00	2,750.00	-	11,000.00
	3	CT scan	9,500.00	1,900.00	-	7,600.00
	4	2D planning	6,250.00	1,250.00	-	5,000.00
	5	2D planning PF	1,250.00	250.00	-	1,000.00
	6	treatment	12,000.00	2,400.00	9,600.00	-
	7	treatment PF	19,250.00	3,850.00	8,400.00	7,000.00
	8	HDR treatment	5,000.00	1,000.00	4,000.00	-
	9	HDR treatment PF	2,100.00	420.00	1,680.00	-
	TOTAL					37,100.00



OTHER CHARGES – CHARGED WHEN USED, OTHERWISE NOT INCLUDED IN PATIENT CHARGE

Item	Price (in PHP)
Change of gown	20.00
Change of linen	50.00
O2 saturation	25.00
Vital signs	20.00
IV injection	10.00
IV insertion	30.00
IV Removal	10.00
Skin Testing	30.00

OTHER CHARGES FOR PROCEDURES WITH SPINAL ANESTHESIA

GENERIC NAME	QUANTITY	UNIT PRICE (in PHP)	TOTAL COST (in PHP)
MEDICATION			
Ketorolac 30mg ampule	1 amp	23.25	23.25
Midazolam 5mg ampule	1 amp	153.75	153.75
Bupivacaine 0.5% heavy	1amp	93.25	93.25
Iopamidol 300mg/50ml	vial	920.50	920.50
Tranexamic acid 500mg	amp	22.50	67.50
Lidocaine 2%	Amp	13.00	13.00
D5LR 1L	1 bot	51.35	51.35
SUPPLIES			
PNSS 1L irrigating sol'n	1 bot	50.00	50.00
Povidone iodine antiseptic 10%	2 bot	30.00	60.00
Povidone iodine cleanser 7.5%	1 bot	30.00	30.00
Plaster	1 roll	55.00	55.00
Disposable syringe 50mL	1pc	10.00	50.00
Disposable Syringe 3mL	4pcs	10.00	40.00
Disposable Syringe 5mL	4pcs	10.00	40.00
Disposable Syringe 10mL	4pcs	10.00	40.00
Burn pack	1 pack	13.00	13.00
ECG electrodes	3 pcs	6.00	18.00
O2 facemask	1 pc	60.00	60.00
Face mask (ear loop)	10 pcs	5.00	50.00
Foley catheter F. 14, F.16	1 pc	156.00	156.00
Infusion set macroset	1 pc	58.50	58.50
IV cannula G. 22,G.20,G.24,G.18	1 pc	6.89	6.89
Lubricating gel	1 tube	170.00	170.00
Nasal cannula	1 pc	60.00	60.00
Gauze cherry balls	1 pack	31.20	31.20
Vasiline gauze 63x5cm	1pack	270.00	270.00
Sterile gloves sizes (7,7.5,6.5)	15 pairs	7.00	105.00
Clean gloves	5 pair	3.00	15.00
Distilled water	Bot	104.00	104.00
Urine bag	1 pc	20.00	20.00
G.19 needle	2pc	5.00	5.00
Spinal needle	1	115.00	115.00
Sterile gown	2	256.00	512.00
Use of cardiac monitor	Per day	300.00	300.00
Minor OR procedure		250.00	250.00
Nursing care Procedure(linen, gown,v/s etc)		250.00	250.00



OTHER CHARGES FOR PROCEDURES WITH LOCAL ANESTHESIA

GENERIC NAME	QUANTITY	UNIT PRICE (in PHP)	TOTAL COST (in PHP)
MEDICATION			
Iopamidol 300mg/50ml	vial	920.50	920.50
Lidocaine spray	Bot	68.75/ spray	343.75
SUPPLIES			
PNSS 1L irrigating sol'n	1 bot	50.00	50.00
Povidone iodine antiseptic 10%	2 bot	30.00	60.00
Povidone iodine cleanser 7.5%	1 bot	30.00	30.00
Plaster	1 roll	55.00	55.00
Disposable Syringe 10mL	4pcs	10.00	40.00
ECG electrodes	3 pcs	6.00	18.00
O2 facemask	1 pc	60.00	60.00
Face mask (ear loop)	10 pcs	5.00	50.00
Foley catheter F. 14, F.16	1 pc	21.99	21.99
Lubricating jelly	tube	170.00	170.00
Gauze cherry balls	1 pack	31.20	31.20
Gauze burn pack	5 packs	13.00	65.00
Sterile gloves sizes(7,7.5,6.5)	15 pairs	7.00	105.00
Clean gloves	5pair	3.00	15.00
Distilled water 100ml	Bot	104.00	104.00
Urine bag	1 pc	20.00	20.00
G.19 needle	2pc	5.00	5.00
Sterile gown	2pcs	256.00	512.00
Use of cardiac monitor	Per day	300.00	300.00
Minor OR procedure		250.00	250.00
Nursing care Procedure(linen, gown, v/s, IV insertion, etc)		250.00	250.000



Cashier Section

External Services



1. Collection Procedures

Payment for the hospital services are received by the authorized personnel and issued the corresponding official receipt thereof. Cash Operations section is open daily 24/7.

OFFICE OR DIVISION:	Cash Operations Section/ Finance Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C(Government to Citizen)/ G2B(Government to Business Entity)/ G2G(Government to Government)			
WHO MAY AVAIL:	Patient/ Patient's Watcher/Clients/Employee/ Government Agency			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Bill to Patient/Statement of Account (1 original copy) Watcher's ID (for pay patient) (original copy) Order of Payment (original copy) Charge Slip (original copy) Prescription Form with price (original copy)		Billing Section HIMS (upon admission) Accounting Section Cost Center Pharmacy		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents Bill to Patient/ Statement of Account/ Order of Payment/ Charge Slip/Prescription Form with price, to the Cashier on Duty	1. Verifies the correctness of charges and/or total of Bill to Patient/ Order of Payment/ Charge Slip/ Prescription Form with price	NONE	3 minutes	<i>Administrative Officer I</i> Cash Operations Section
2. Gives money to the cashier as payment equivalent to the amount in the Bill to Patient/ Statement of Account/ Order of Payment/ Charge Slip/ price indicated at the prescription form	2.Counts the money received and counter checks/ verifies the amount if it tallies with the Bill to Patient/ Statement of Account/ Order of Payment/ Charge Slip/ Price of Medicine at the Prescription Form	Amount indicated/ reflected in the Bill to Patient/ Order of Payment/ Charge Slip/ Prescription Form	25 minutes	<i>Administrative Officer I</i> Cash Operations Section
3.Receives Official Receipt For pay patients: Signs the clearance. (back of watcher's ID)	3. Issues Official Receipt reflecting the amount paid.	NONE	2 minutes	<i>Administrative Officer I/</i> Cash Operations Section
	TOTAL FEES: Amount indicated/ reflected in the Bill to Patient/ Order of Payment/ Charge Slip/ Prescription Form		TOTAL TIME: 30 minutes	



2. Disbursement Procedure

Disbursement constitute all cash paid out during a given period either in currency (cash) or by check.

OFFICE OR DIVISION:	Cash Operations Section/ Finance Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C(Government to Citizen)/ G2B(Government to Business Entity)/ G2G(Government to Government)			
WHO MAY AVAIL:	Patient/ Patient's Watcher/ Employee/ Supplier/ Government Agency/ Other Stakeholder			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
To Supplier and BMC employee: <ul style="list-style-type: none"> Valid ID of Payee (1 original copy) Philhealth Refund < ₱3,000.00 : <ul style="list-style-type: none"> Valid ID (1 original copy) Original Official Receipt issued by BMC duly noted & signed for refund by the service provider Philhealth Refund > ₱3,000.00 : <ul style="list-style-type: none"> Valid ID (1 original copy) Approved Disbursement Voucher Special Power of Attorney: If claimant is not the payee (1 original copy)		Claimant Claimant Claimant Lawyer		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents ID and the pertinent documents required for the payment or refund of payment.	1.1 Verifies the validity of the documents presented.	None	15 minutes	Administrative Assistant II Cashier's office
For Suppliers: Issues Official Receipt (OR) / Collection Receipt (CR)	1.2 Checks OR/ CR issued by the supplier.			
2.Receives payment and acknowledges/ signs receipt on the Disbursement Voucher, Statement of Cash Refund, Payroll/ DV respectively	2.Releases payment	None	30 minutes	Administrative Assistant II/ Administrative Assistant III Cashier's office
	TOTAL FEES:	None		TOTAL TIME: 45 minutes



Central Supply and Sterilization Unit

External Services



1. Issuance of Medical and Surgical Supplies

Central Supply and Sterilization Unit issues medical and surgical supplies to clients (Out-patients and In-patients) daily 24/7.

Office or Division:	Central Supply and Sterilization Unit (CSSU)			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	In-Patients and Out-Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (green card) Prescription form (original copy) Official Receipt (original copy) 		<ul style="list-style-type: none"> Out-Patient Department-HIMS Attending Physician Cashier Section 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Presents prescription and Green Card/Watcher's ID to CSSU staff. -For out-patient, clients shall pay at the Cashier Section.	1. Receives properly filled out Prescription form and checks the availability of supplies. - For admitted clients charge directly to bill thru iHomis.	Varied fees (refer to Table 1 CSSU Price List)	5 minutes 5 minutes (for in-patient) 30 minutes (for outpatient)	<i>Nursing Attendant</i> // CSSU <i>Nursing Attendant</i> // CSSU <i>Collecting Officer</i> Located at Main Cashier Office (11:30am-10:00pm) <i>Cashier 2-Beside Pharmacy (24/7)</i>
2. Affixes the signature at the back of the prescription.	2. Files the prescription in the BIN card.	None	1 minute	<i>Nursing Attendant</i> // CSSU
3. Receives the needed item. FOR OUTPATIENT: Presents Official Receipt and receives the needed item.	3. Issues supplies needed by the client.	none	1 minute	<i>Nursing Attendant</i> // CSSU
	TOTAL FEES: Varied fees (refer to Table 1 CSSU Price List)		TOTAL TIME: FOR IN-PATIENT: 12 minutes FOR OUTPATIENT: 37 minutes	



TABLE 1: CSSU PRICE LIST

UNIT	NAME OF MEDICAL/SURGICAL SUPPLY	CSSU PRICE
pc	Arm sling, KIDIE	182.00
pc	Arm sling, Large	85.00
pc	Arm sling, Medium	85.00
pc	Arm sling, Small	85.00
pc	Bag, Colostomy, ADULT	26.40
pc	Bag, Colostomy, PEDIA	26.40
pc	Bag, Hot water, rubber	200.00
set	Bag, OSTOMY, with wafer,pouch,clip, 38mm	448.00
set	Bag, OSTOMY, with wafer,pouch,clip, 45mm	448.50
pc	Bandage, Elastic, 4"x5yards, brown	34.28
pc	Binder, Abdominal, 8x52", ADULT	169.00
pc	Blade, Surgical blade N10, sterile	3.60
pc	Blade, Surgical blade N11, sterile	3.40
pc	Blade, Surgical blade N12, sterile	3.40
pc	Blade, Surgical blade N15, sterile	3.40
pc	Blade, Surgical blade N20, sterile	3.40
pc	Bottle, Chest Drainage, single chamber 500-750ml	1,076.40
pc	Bottle, Chest Drainage, single chamber 1000ml-1200ml	2,280.00
pc	Bottle, Chest Drainage, double chamber 1500ml-2000ml, Bicacilar	1,290.51
pc	Cannula, Oxygen, ADULT	18.34
pc	Cannula, Oxygen, PEDIA	17.04
pc	Cannula, Oxygen, INFANT	23.54
pc	Cannula, withdrawal, luer-lock connector, needleless with integral filter	130.00
pc	Catheter, 2-way, foley, fr. 8	85.00
pc	Catheter, 2-way, foley, fr. 10	33.00
pc	Catheter, 2-way, foley, fr. 12	52.00
pc	Catheter, 2-way, foley, fr. 14	36.00
pc	Catheter, 2-way, foley, fr. 16	46.93
pc	Catheter, 2-way, foley, fr. 18	49.99
pc	Catheter, 2-way, foley, fr. 24	162.00
set	Catheter, Double Lumen (PERMCATH)	18,850.00
pc	Catheter, Internal Jugular vein (IJ), fr. 11/12	3,600.00
set	Catheter, EPIDURAL cath set, G18 (ADULT)	1,488.50
set	Catheter, EPIDURAL cath set, G20 (PEDIA)	2,000.00
set	Catheter, Nephrostomy/PIGTAIL fr.10	9,750.00
set	Catheter, Nephrostomy/PIGTAIL fr.14	9,750.00
pc	Catheter, PD CATH, ADULT	4,550.00
pc	Catheter, PD CATH, PEDIA	2,446.60
pc	Catheter, IV catheter G.16	8.57
pc	Catheter, IV catheter G.18	12.74
pc	Catheter, IV catheter G.20	10.70
pc	Catheter, IV catheter G.22	10.70
pc	Catheter, IV catheter G.24	10.70
pc	Catheter, IV catheter G.26	20.54
pc	Catheter, SUCTION catheter fr. 5	8.32
pc	Catheter, SUCTION catheter fr. 8	8.32
pc	Catheter, SUCTION catheter fr. 10	9.75
pc	Catheter, SUCTION catheter fr. 12	9.75
pc	Catheter, SUCTION catheter fr. 14	8.32
pc	Catheter, SUCTION catheter fr. 16	8.97
pc	Catheter, SUCTION catheter fr. 18	12.00
pc	Catheter, THORACIC fr. 28	135.00
pc	Catheter, THORACIC fr. 32	135.00
pc	Catheter, THORACIC fr. 36	110.50
pc	Cotton balls	6.00
pc	Depressor, Tongue depressor, sterile	1.22
pc	Depressor, Tongue depressor,with gauze, sterile	10.00
pc	Electrocautery cord with pencil, monopolar, disposable	114.40
pc	Electrodes, Cardiac Electrodes	8.06
pc	Eyesheet, disposable, blue	25.00
pc	Gauze, 4"x4", INDOPLAS, sterile	6.00
pc	Gauze, Burn Pack, 2's	13.00
pc	Gauze, OS, 3's/pack	8.00
pc	Glass Slide, frosted end	1.50
pair	Gloves, non-sterile (S,M,L) ,(pair)	4.10

UNIT	NAME OF MEDICAL/SURGICAL SUPPLY	CSSU PRICE
pc	Mask, N95	122.85
pc	Mask, Oxygen, ADULT	31.63
pc	Mask, Oxygen, PEDIA	31.63
pc	Mask, Oxygen, INFANT/NEONATE	34.00
pc	Nebulizer Kit	44.03
pc	Needle, disposable, G.19- G.24	2.00
pc	Needle, Spinal needle G. 25	115.00
pc	Peritoneal Dialysis, Catheter extension Luer lock, 40cm	1,679.60
pc	Peritoneal Dialysis, Disinfection Cap	45.00
pc	Peritoneal Dialysis, StaySafe Organizer	1,163.50
pc	Plaster, individual	27.00
pc	Plaster of Paris	142.00
pc	Probe, Pulse Oximeter, probe, NEONATAL TO ADULT	715.00
pc	Set, Cutdown	560.00
pc	Set, Dressing	125.00
pc	Set, Incision and drainage	120.00
pc	Set, Suturing	350.00
pc	Set, Tracheostomy/ Thoracostomy	960.00
pc	Set, Umbilical	550.00
gal	Solution, Alcohol, 70%	543.40
pc	Solution, Hydrogen Peroxide, 15ml	12.00
pc	Suture, SILK 3-0 round	86.67
pc	Syringe, 1cc	3.00
pc	Syringe, 3cc	5.40
pc	Syringe, 5cc	6.83
pc	Syringe, 10cc	6.44
pc	Syringe, 20cc	9.58
pc	Syringe, 50cc	27.40
pc	Syringe, ASEPTO, 60cc	31.20
pc	Syringe, Insulin 3/10 cc	7.54
pc	Syringe, Insulin 1/2 cc	6.70
pc	Syringe, Insulin 1 cc	6.70
pc	Thermometer, Digital, PARTNERS	71.50
pc	Tube, Endotracheal 2.5	83.07
pc	Tube, Endotracheal 3.0	83.07
pc	Tube, Endotracheal 3.5	83.07
pc	Tube, Endotracheal 4.0	84.50
pc	Tube, Endotracheal 4.5	72.54
pc	Tube, Endotracheal 5.0	97.50
pc	Tube, Endotracheal 5.5	97.50
pc	Tube, Endotracheal 6.0	117.00
pc	Tube, Endotracheal 6.5	97.50
pc	Tube, Endotracheal 7.0	91.00
pc	Tube, Endotracheal 7.5	117.00
pc	Tube, Endotracheal 8.0	117.00
pc	Tube, Endotracheal 8.5	117.00
pc	Tube, Feeding Tube 5x40cm	15.00



UNIT	NAME OF MEDICAL/SURGICAL SUPPLY	CSSU PRICE
pc	Tube, Feeding Tube 8x100cm	15.00
pc	Tube, Nasogastric Tube F10	28.00
pc	Tube, Nasogastric Tube F12	28.00
pc	Tube, Nasogastric Tube F14	30.00
pc	Tube, Nasogastric Tube F16	30.00
	Tube, Nasogastric Tube F16 (Siliconized)	270.00
pc	Tube, Nasogastric Tube F18	30.00
pc	Tubing, BT Set	35.00
pc	Tubing, Macroset	65.00
pc	Tubing, Microset	65.00
pc	Tubing, Plumset (tubing 104inches...)	715.00
pc	Tubing, Soluaset	62.40
pc	Tubing, BIFUSE	250.00
pc	Tubing, TRIFUSE (Tri-Extension set)	370.50
set	Tubing, T-piece	845.00
set	Tubing, Ventilator (ADULT)	1,550.00
set	Tubing, Ventilator (PEDIA)	1,690.00
set	Tubing, Ventilator (NEONATE)	1,625.00
pc	Urinal, Bedpan	20.00
pc	Urine Bag	20.00
pc	Urine Collector (PEDIA)	6.00
pc	Wadding Sheet 6x5 yards	50.95



Charity Wards

External Services



1. Discharge Process

The procedure starts from the May-go-home order made by the attending physician and ends upon presentation of discharge clearance of the patient to the guard-on-duty.

OFFICE OR DIVISION:	All Nursing Wards including Intensive Care Units			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	All patients with May-Go-Home order			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • MAY-GO-HOME order (1 original copy) • Statement of Account (1 original copy) • Philhealth Slip (1 original copy) • Blood clearance (1 Original copy) • Watcher's ID (1 original copy) • Discharge Clearance (1 original copy) • Expanded Newborn Screening Filter Card and Hearing Screening (for NICU patients) (1 original copy) 		<ul style="list-style-type: none"> • NURSES STATION (Patient's Chart) • BILLING SECTION • PHILHEALTH SECTION (room 8) • BLOOD BANK • ADMITTING SECTION (Given at time of patient admission) • NICU NURSES STATION 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Receives May-go-Home Advice	1. Advises client on his health condition (improved/recovered) then a May-go-home order is written.	None	10 minutes	Attending Physician Ward
	1.2 Accomplishes discharge Summary and CF4	None	30 minutes/patient	Nurse Nursing Attendant Ward
	1.3 Verifies completeness of discharge requirements	None	20 minutes	Nurse Nursing Attendant Ward
2. Receives Statement of Account	2. Encodes the patients final diagnosis at HOMIS	None	15 minutes	Attending Physician Ward
	2.1 Assigns ICD 10 Code	None	10 minutes	Administrative Officer Hospital Information Management Section
	2.2 Encodes charges for drugs, medicines, and supplies	None	10 minutes	Pharmacist Pharmacy



	2.3 Encodes charges for diagnostic examinations	None	10 minutes	<i>Nursing Attendant</i> <i>CSSR</i> <i>RadTech/ Medtech</i> <i>Radiology/ Heart Station/ Laboratory</i>
	2.4 Encodes charges for nursing procedures done	None	10 minutes	
	2.5 Prints Statement of Account	None	30 minutes (for NBB and other Philhealth patients) 1 hour (for pay patients)	<i>Nursing Attendant</i> <i>Ward</i> <i>Administrative Officer</i> <i>Billing Section</i>
	2.6 Endorses Statement of Account to NOD	None	2 minutes	<i>Administrative Officer</i> <i>Billing Section</i>
	2.7 Receives Statement of Account from Billing Section	None	1 minute	<i>Nurse/ Nursing Attendant</i> <i>Ward</i>
	2.8 Hands over Statement of Account to patient	None	2 minutes	<i>Nurse/ Nursing Attendant</i> <i>Ward</i>
3. PAYS REQUIRED FEE AT THE CASHIER	3. Receives payment and issues corresponding Official Receipt.	None	30 minutes	<i>Collecting Officer</i> <i>located at the Main Cashiers Office (11;30am-10:00pm)</i>
3.1 FOR NON-PHILHEALTH MEMBER - Proceeds to the Medical Social Service Office for financial assistance	3.1. Facilitates financial assistance (PDAF/ PCSO etc...)	None	15 minutes	<i>Medical Social Worker</i> <i>Medical Social Service Office</i>
3.2. FOR PHILHEALTH MEMBER - Proceeds to Philhealth Processing (Room 10). Presents Statement of Account, Official Receipt and	3.2. Verifies completeness of data on Claim Form 4 (CF4) & Claim Form 2 (CF2) from the HOMIS. Prints Claim Signature Form (CSF) and instructs the member/patient's	None	6 minutes	<i>Administrative Officer</i> <i>Philhealth Processing Office- Window 10 (8:00am-8:00pm)</i>



Discharge Clearance	relative to affix signature on the CSF, PBEF, and SOA			
3.3. Receives and signs the CSF, PBEF, and SOA	3.4 Verifies signature and date on CSF, SOA, PBEF	None	7minutes	Admin Officer Philhealth Processing Office- Window 10 (8:00am-8:00pm)
3.4 Submits duly signed CSF, PBEF, and SOA to Philhealth processing (Room 10)	3.5 Signs the patient's discharge clearance and instructs the member/ patient to go back to the Ward and present the Discharge Clearance to Nurse On Duty (NOD)	None	None	
4. Presents Official Receipt and discharge clearance to nurse-on-duty	4. Verifies official receipt/ MSS recommendation.	None	2 minutes	Nurse Nursing Attendant Ward
5. Receives a copy of the discharge summary and instruction on follow up check up and take home meds.	5. Furnishes patient a copy of the discharge summary and gives instructions on follow up check -up/ take home meds	None	20 minutes	Nurse Ward
	5.1. Wheels patient to hospital exit	None	None	Nursing Attendant Ward
6. Presents discharge clearance to Guard-on-duty	6. Receives discharge clearance	None	5 minutes	Guard-on-Duty
	TOTAL FEES: Amount specified in the Statement of Account (SOA)		TOTAL TIME: FOR NBB AND PHILHEALTH PATIENTS: 3 hours and 30 minutes FOR PAY PATIENTS: 4 hours	



COVID-19 Facility

External Services



1. Admission Process of COVID-19 Cases

EREID ward is a facility prepared for Covid-19 suspect/ probable and positive patients. The ward consists of several isolation rooms and with dedicated staff that adhere to strict infection control standards.

OFFICE OR DIVISION:		COVID-19 Facility/ EREID WARD		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Suspect, Probable and Confirmed COVID-19 Cases		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Referral Letter (1 original copy)			Referring Facility	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
For walk-in or patients with stable condition: 1.1. Undergoes initial assessment at BMC ER EREID.	1.1. Conducts initial assessment of the client's condition to determine if there's a need for admission. Only if there is approval from Infectious Disease Specialist that admission will take place.	None	20 minutes	Medical Specialist/ Medical Officer/Nurse II/ Nurse III ER EREID
For patients with unstable condition: 1.2. Undergoes initial assessment at ER Isolation Room.	1.2. Conducts initial assessment of client's condition at ER Isolation Room. All information will be relayed to the Infectious Disease Specialist to decide if there is a need for admission at EREID ward.	None	20 minutes	Medical Specialist/ Medical Officer/Nurse II/ Nurse III ER EREID
For patients referred from other healthcare facilities: 1.3. Undergoes initial assessment through phone interview with BMC-Surveillance Officer assisted by the referring staff.	1.3. Conducts interview via phone call to assess patient condition. All information will be relayed to the Infectious Disease Specialist to decide if there is a need to transfer the patient at EREID ward.	None	20 minutes	Nurse III ER EREID



2. Receives instructions on admission and transfer to EREID ward. Signs consent to care.	2.1. Facilitates the ambulance transport from ER EREID/ ER Isolation to EREID ward after the approval from Infectious Disease Specialist and once with go-signal from the EREID ward nurse on duty.	None	15 minutes	<i>Nurse III/ Nurse II/Medical Officer/ Medical Specialist</i> ER EREID
	2.2. For patients from other healthcare facilities: once the ambulance arrived at the EREID ward vicinity, the EREID nurse on duty facilitates the transport from ambulance to the designated isolation room.	None	15 minutes	<i>Nurse II</i> EREID WARD
3. Cooperates with the healthcare staff in the conduct of thorough health assessment, swabbing and other initial interventions.	3.1. Conducts further health assessment and obtains the needed personal data.	None	12 minutes	<i>Medical Specialist</i> EREID WARD
	3.2. Provides the necessary medical and nursing interventions.	None	12 minutes	<i>Medical Officer/Nurse II Nursing Attendant</i> EREID WARD
	3.3. Orients on the basic information regarding ward policies, waste management, infection control matters etc.	None	12 minutes	<i>Medical Officer/Nurse II Nursing Attendant</i> EREID WARD
	3.4. Facilitates the swabbing if not yet done and other diagnostic tests.	None	12 minutes	<i>Medical Technologist</i> EREID WARD



	3.5. Includes the patient in the computer database using a code as well as in the diet list.	None	12 minutes	<i>Nurse III</i> EREID WARD
	3.6. Logs patient in the Admission Logbook and Hospital Daily Census Report.	None	15 minutes	<i>Nurse II</i> EREID WARD
	3.7. Organizes the patient's chart according to the standard sequence; documents completely and properly; makes and labels the medication card and basket; and, inserts the chart in the chart holder appropriately.	None	15 minutes	<i>Nurse II</i> EREID WARD
	TOTAL FEES: None		TOTAL TIME: 3 hours	



2. Discharge Process of COVID-19 Cases

The procedure starts from the May-go-home order made by the Infectious Disease Specialist and ends upon presentation of discharge clearance of the patient to the EREID ward staff on duty.

OFFICE OR DIVISION:		COVID-19 Facility/ EREID WARD		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		All admitted Suspect, Probable and Confirmed COVID-19 Cases with May-go-home order.		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • MAY-GO-HOME order • Statement of Account (original copies) • Philhealth Slip (original copy) • Blood Clearance (optional) (original copy) • Watchers ID (original copy) • Discharge Clearance (original copy) • Expanded Newborn Screening Filter Card and Hearing Screening (for Newborns) (original copy) 		<ul style="list-style-type: none"> • NURSES STATION (Patient's Chart) • BILLING SECTION • PHILHEALTH SECTION (Room 8) • BLOOD BANK • ADMITTING SECTION (Given at time of patient admission) • BILLING SECTION • NEWBORN SCREENING ROOM 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Receives May-Go-Home Advice	1.1 Advises client on his health condition (improved/recovered) then a May-go-home order is written.	None	10 minutes	Attending Physician EREID WARD
	1.2 Coordinates with the admitting section to replace the patient code of the personal details in the hospital electronic database.	None	15 minutes	Nurse EREID WARD
	1.3 Accomplishes discharge Summary and CF4	None	20 minutes	Nursing Attendant EREID WARD
	1.4 Verifies completeness of	None	15 minutes	



	discharge requirements			
2. Receives Statement of Account	2.1 Encodes the patients final diagnosis at HOMIS	None	15 minutes	<i>Attending Physician Ward</i>
	2.2 Assigns ICD 10 Code	None	10 minutes	<i>Administrative Officer HIMS</i>
	2.3 Encodes charges for drugs, medicines, and supplies	None	10 minutes	<i>Pharmacist Pharmacy Nursing Attendant CSSR</i>
	2.4 Encodes charges for diagnostic examinations	None	10 minutes	<i>RadTech/ Medtech Radiology/ Heart Station/ Laboratory</i>
	2.5 Encodes charges for nursing procedures done	None	10 minutes	<i>Nursing Attendant Ward</i>
	2.6 Prints Statement of Account	None	30 minutes (for NBB and other Philhealth patients)	<i>Administrative Officer Billing</i>
	2.6 Endorses Statement of Account to NOD	None	1 hour (for pay patients)	<i>Administrative Officer Billing</i>
	2.6 Endorses Statement of Account to NOD	None	2 minutes	<i>Nurse/ Nursing Attendant Ward</i>
	2.7 Receives Statement of Account from Billing Section	None	1 minute	<i>Nurse/ Nursing Attendant</i>



	2.8 Hands over Statement of Account to patient	None	2 minutes	Nurse/ Nursing Attendant
3. Pays required fee through the assistance of EREID Nursing Attendant.	3. Receives payment and issues corresponding Official Receipt.	None	30 minutes	Administrative Officer I located at the Main Cashiers Office (11;3-am-10:00pm),
3.1 FOR NON-PHILHEALTH MEMBER - Proceeds to the Medical Social Service Office for financial assistance	3.1. Facilitates financial assistance (PDAF/ PCSO etc...)	None	15 minutes	Medical Social Worker Medical Social Service Office
3.2. FOR PHILHEALTH MEMBER - Proceeds to Philhealth Processing (Room 10). Presents Statement of Account, Official Receipt and Discharge Clearance	3.2 Verifies completeness of data on Claim Form 4 (CF4) & Claim Form 2 (CF2) from the HOMIS. Prints Claim Signature Form (CSF) and instructs the member/patient's relative to affix signature on the CSF, PBEF, and SOA	None	6 minutes	Admin. Officer Philhealth Processing Office- Window 10 (8:00am-8:00pm)
3.3. Receives and signs the CSF, PBEF, and SOA	3.3 Verifies signature and date on CSF, SOA, PBEF	None	7minutes	Administrative Officer Philhealth Processing Office- Window 10 (8:00am-8:00pm)
3.4 Submits duly signed CSF, PBEF, and SOA to Philhealth processing (Room 10)	3.4 Signs the patient's discharge clearance and instructs the member/ patient to go back to the Ward and present the Discharge Clearance to Nurse On Duty (NOD)	None	None	



4. Receives the Official Receipt	4. Verifies official receipt/ MSS recommendation.	None	2 minutes	EREID Nurse EREID Nursing Attendant EREID
5. Receives a copy of the discharge summary and instruction on follow up check up and take home meds.	5.Furnishes patient a copy of the discharge summary and gives instructions on follow up check -up/ take home meds 5.1 Wheels patient to Payward I Exit Area	None	20 minutes	EREID Nurse EREID Nursing Attendant EREID
6. Receives the completely signed discharge clearance to EREID Nurse.	6. Receives discharge clearance prior to patient's transport back to place of residence.	None	5 minutes	EREID Nurse EREID
	TOTAL FEES: None		TOTAL TIME: 4 hours	



3. Availment of COVID-19 GENEXPERT Testing

COVID-19 GENEXPERT Laboratory offers testing of SARS CoV-2 using Polymerase Chain Reaction (PCR). The Laboratory is open daily, including Saturdays, Sundays and Holidays from 6:00 am to 6:00 pm.

Note: Receiving of samples is until 5:00pm only.

OFFICE OR DIVISION:		COVID-19 GENEXPERT Laboratory		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		RHU's, Private and Government Hospitals		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Linelist of Samples • Case Investigation Forms (original copy) • Laboratory Test Request Forms (original copies) 		<ul style="list-style-type: none"> • Rural Health Units (Province) • Private Hospitals • COVID Laboratory of Government Hospitals 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents at the COVID Laboratory Receiving Area: <ul style="list-style-type: none"> • Linelist of Samples • Case Investigation Forms • Laboratory Test Request Forms • Specimens contained in an appropriate transport box 	1. Verifies for completeness of the following: <ul style="list-style-type: none"> • Linelist of Samples • Case Investigation Forms • Laboratory Test Request Forms at the COVID Laboratory Receiving Area • Specimens contained in an appropriate transport box 	None	5 minutes	COVID Staff COVID Laboratory
2. Awaits release of results through e-mail	2. Releases results and reports to appropriate point persons/agencies within 24 hours	None	24 hours	COVID Staff COVID Laboratory
		TOTAL FEES: None		TOTAL TIME: 24 hours and 5 minutes



Department of Anesthesia

External Services



1. Availment of Pain Management Consultation

Office of the Department of Anesthesiology provides services on Pain Management consultation to out patients. Services are available daily from 8 am to 5 pm, except Saturday and Sunday and Holidays.

OFFICE OR DIVISION:		Department of Anesthesia/Medical Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Out-patients		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Hospital Record ID (Green Card) (original copy)			Out-patient Department	
Referral Letter (1 original copy)			Resident or Consultant in charge, Regional Cancer Center	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Proceeds to Anesthesia office, presents referral letter to staff on duty	1. Directs Patient and Companion to the consultation room	None	2 minutes	Administrative Asstistant Department of Anesthesia
	1.1 Gathers Patient's Medical Database	None	5 minutes	Administrative Asstistant
	1.2. Informs Resident in Charge of Referral	None	5 minutes	Administrative Asstistant
	1.3. Determines Patient complaints	None	20 minutes	Medical Officer
	1.4. Examines and Assesses patient	None	10 minutes	Medical Officer
	1.5. Orders laboratory exam/s, diagnostic procedure/s, and medication	None	5 minutes	Medical Officer
	1.6. Explains treatment plan secures consent for treatment & procedure	None	5 minutes	Medical Officer



2. Undergoes treatment/ procedure	2. Wheels patient to treatment room for pain management procedure.	None	1 minute	Administrative Aide
	2.1. Performs treatment/ procedure	None	20 minutes	Medical Officer
	2.2 Endorses to PACU Staff for monitoring	None	2 minutes	Medical Officer
3. Receives instruction on follow up check up	3. Gives instruction on follow up check up	None	5 minutes	Medical Officer
TOTAL FEES: None		TOTAL TIME: 1 hour and 20 minutes		



Department of Anesthesia

Internal Services



1. Processing of Incoming and Outgoing Communications

Office of the Department of Anesthesia receives and process documents and records of employees including communications pertinent to office and hospital operations. Office of the Department of Anesthesia is available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:	Department of Anesthesia/ Medical Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government /G2B – Government to Business/G2C-Government to Client			
WHO MAY AVAIL:	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Communications addressed to the Chairman/Department Staffs (original copies)		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/Communications to the receiving personnel	1. Receives documents/ communications and stamped it accordingly.	None	5 minutes	<i>Administrative Assistant</i> (Department of Anesthesia Office)
	1.1 Classifies the documents/communications received.	None	5 minutes	<i>Administrative Assistant</i> (Department of Anesthesia Office)
	1.2 Reviews important documents.	None	5 minutes	<i>Administrative Assistant</i> (Department of Anesthesia Office)
	1.3 Reviews/signs/ approves documents.	None	30 minutes	<i>Department Chairman</i> (Department of Anesthesia Office)
	1.4 Facilitates forwarding of documents with department chairman comments concerning Hospital committees or Program/Department/Sections/Personnel within set deadlines.	None	10 minutes	<i>Administrative Assistant</i> (Department of Anesthesia Office)



2. Receives signed/acted upon documents/records/communications.	2. Releases of documents to respective Hospital Committees or Program/Divisions/Department/Sections/Personnel (Approved leaves, request for training, request letters and other outgoing communications for release)	None	30 minutes	<i>Administrative Assistant</i> (Department of Anesthesia Office)
	TOTAL FEES: None		TOTAL TIME: 1 hour and 25 minutes	



Department of Dental Services

External Services



1. Dental Consultation

Dental Clinic provides services like Dental Consultation, Extraction, Surgery, Preventive and Restorative Treatment. Dental services are available daily, 8:00am to 5:00pm except Saturday, Sunday and during Holidays.

OFFICE OR DIVISION:		Dental Clinic		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G- Government to Government, G2B- Government to Business, G2C – Government to Citizen		
WHO MAY AVAIL:		Employees, Private and Government Agencies, In and Out-patients.		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Hospital Record ID (Green Card) (original copy) Official Receipt (User's fee) (original copy) Referral letter (optional)			OPD Cashier Attending Physician	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Proceeds to Dental Clinic	1.1 Log user's fee at patient's OPD record	None	3 minutes	Admitting Aide Dental Clinic OPD Building
	1.2 Interviews patient to get information for the Dental Record		5 minutes	
2. Proceeds to screening area for oral examination, diagnosis and treatment plan 2.1 For extraction: receives charge slip and prescription 2.2 For Consultation: receives prescription. 2.3 For preventive and restorative treatment: receives charge slip 2.4 For employees Annual Exam: receives appointment slip	2. Makes a treatment plan	None	10 minutes	Dentist Dental Clinic OPD Building
	2.1 For extraction: issues charge slip and prescription.	None	5 minutes	Dentist Dental Clinic OPD Building
	2.2 For Consultation: issues prescription, referral slip and xray request	None	10 minutes	Dentist Dental Clinic OPD Building
	2.3 For Preventive and Restorative treatment: issues charge slip.	None	5 minutes	Dentist Dental Clinic OPD Building
	2.4 For Employees' Annual Exam: issues appointment slip	None	2 minutes	Dental Aide Dental Clinic OPD Building



	to BMC personnel			
3. Proceed to Cashier, pays required fee and receives official receipt. Note: Make sure to pay only at the Cashier and get official receipt.	3. Collects required fees and issues Official receipt	PHP 80.00 per tooth (excluding anesthesia)	5 minutes	<i>Administrative Officer I</i> Cashier at ground floor OPD Building
3. Proceeds to Dental clinic and waits for name to be called at the waiting area.	3.1 Calls patient name. 3.2 Records official receipt and assists the patient to the treatment area		2 minutes	<i>Dental Aide</i> Dental Clinic OPD Building
4. Undergoes treatment and procedures	4. Renders prescribed treatment and procedures (For extraction) (For preventive and restorative)	None	15 minutes 1 hour	<i>Dental aide and Dentist/s</i> Dental Clinic OPD Building
5. Receives instruction on take home medicines and post-operative care (for surgery cases) and follow up check up	5. Gives instruction on take home medicines and post-operative care (for surgery cases) and follow up check up	None	5 minutes	<i>Dentist</i> Dental
	TOTAL FEES: PHP 80.00 per tooth (excluding anesthesia)		TOTAL TIME: 2 hours and 7 minutes	



Department of ENT– Head and Neck Surgery

External Services



1. Availment of Newborn Hearing Screening Procedure

Newborn Hearing Screening is a procedure that checks a baby's hearing and identifies those patients who need further testing within the first 4 weeks or 28 days of life. NHS unit is available for In-Patient daily (Monday-Sunday) 8:00 to 10:30 in the morning and 1:00 to 3:00 in the afternoon and for Out-Patient (Monday, Wednesday and Friday) 8:00am to 10:00am consultation at OPD ENT Clinic; 1pm-4pm testing at NHSRC-ROV office.

OFFICE OR DIVISION:		Newborn Hearing Screening Reference Center-ROV (NHSRC-ROV) / Medical Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C - Government to Citizen		
WHO MAY AVAIL:		In-patients and out-patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
FOR IN-PATIENTS: Salud Bikolnon Kids Card and Newborn tag (1 original copy)		Concerned Wards (OBW, OBA, OBG, NICU, Pedia Ward, Pedia Annex)		
FOR OUT-PATIENTS: Green Card (Hospital Record ID) (1 original copy) Clearance form ENT(1 original copy) Initial hearing screening result and Registry Card (1 original copy) Salud Bikolnon Kids Card (1 original copy) E-Salvar ID (1 printed or electronic copy)		OPD HIMS OPD ENT Clinic Birthing Facility / Category A Hearing Screening Facility Birthing Facility Online (e-salvar.com)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. For In-patient: Presents Salud Bikolnon Kids Card and Newborn Tag For Out-Patient: Presents clearance from ENT, green card, initial hearing screening result, registry card, salud bikolnon kids card and e-salvar ID	1.1. Identifies if patient is In- patient or Out-patient 1.2. Fills out registry card and other forms using the information from the presented documents	None	2 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV
2. Receives NHS orientation	2. Educates parents or significant others on the importance of NHS procedure	None	1 minute	Nurse I / Nurse II / Administrative Aide NHSRC-ROV



3. Decides to give consent	3.1. If no, defers the procedure but explains the consequences of the decision 3.2. If yes, proceeds with NHS procedure	None	1 minute	Nurse I / Nurse II / Administrative Aide NHSRC-ROV
4. Undergoes OAE procedure	4. Performs the NHS standard procedure	None	30 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV
5. For In-patients: Waits to be charged at the ward via IHOMIS by the nurse or NA on duty For Out-patients: <u>1st OAE Testing</u> 5.1 Receives charge slip 5.2 Proceeds to medical social service section for financial assistance 5.3 Proceeds to cashier if with remaining fee 5.4 Goes back to NHS room to present the signed charge slip or the official receipt <u>2nd OAE Testing</u> -free of charge	5. For In-patients: Charge is made at the ward via IHOMIS 5.1 For Out-patient: Checks the signed charge slip and official receipt and records OR number at admission census form	<u>For In-patient:</u> Non-Philhealth: PHP 350.00 With Philhealth: PHP 150.00 <u>For Out-patient:</u> PHP 350.00 For indigent patients: Remaining fees indicated after medical social service evaluation	1 minute 1 minute 4 minutes 4 minutes 1 minute	Nurse I / Nurse II / Administrative Aide NHSRC-ROV Medical Social Worker Medical Social Service Administrative Officer I Cashier Section
6. <u>Pass result:</u> 6.1 Receives certificate, OAE result form, white copy of the registry card	6.1. Provides accomplished forms for the parents or significant others	None	2 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV



<u>Refer result:</u> 6.2 Receives white copy of the registry card, re-test schedule slip and instructions on the next appointment for the re-testing and confirmatory test	6.2. Explains the outcome of the result and its affecting factors	None	2 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV
7. For In-Patient: -Proceeds to the ward with NHS result and proper instruction For Out-Patient: -Goes home with NHS result and proper instruction	7. In-patient and Out-patient: Educates parents on the actual OAE result and the need to come back for the 2nd test and confirmatory test	None	3 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV
	TOTAL FEES: <u>For In-patient:</u> Non-Philhealth: PHP 350.00 With Philhealth: PHP 150.00 <u>For Out-patient:</u> PHP 350.00		TOTAL TIME: 52 minutes	



2. Availment of Audiologic Evaluation Services

Audiologic Evaluation is a series of diagnostic procedures used to determine the type of confirmation of hearing loss. Audiologic evaluation services are available by appointment (Tuesday-Friday) 9:00am and 1:00pm only at NHSRC-ROV office thru our mobile numbers: 09632845507 / 09678602589.

OFFICE OR DIVISION:		Newborn Hearing Screening Reference Center-ROV (NHSRC-ROV) / Medical Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C - Government to Citizen		
WHO MAY AVAIL:		In-patients and out-patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Referral slip (1 original copy)		OPD; Private and Government ENT Clinics and Cat. A NHS facilities		
Green Card (1 original copy)		OPD		
Results of previous hearing tests (1 original copy)		Private and Government ENT Clinics and Cat. A NHS facilities		
E-Salvar ID (1 printed or electronic copy)		Online (e-salvar.com)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Present E-Salvar ID and requirements	1. Fills -out the Audiologic test history form using the information from the presented requirements and transfer it to Google Form	None	2 minutes	<i>Nurse I / Nurse II / Administrative Aide</i> NHSRC-ROV
2. Receives orientation on audiologic services	2. Provides instructions regarding the procedure	None	3 minutes	<i>Nurse I / Nurse II / Administrative Aide</i> NHSRC-ROV
3. Undergoes audiologic evaluation / procedure	3.1. Performs audiologic services using standard procedure if patient is asleep 3.2. Re-schedules patient if unable to sleep on the scheduled date	None	4 hours	<i>Nurse I</i> NHSRC-ROV



4. Receives charge slip. <u>For Pay patients:</u> Proceeds to cashier for payment <u>For Indigent patients:</u> Proceeds to Medical Social Service Section for financial assistance and proceeds to cashier if with remaining fee	4. Issues charge slip	Procedure: PHP 1,500.00 Reading Fee: PHP 600.00 For indigent patients: Remaining fees indicated after medical social service evaluation	3 minutes 5 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV Medical Social Worker Medical Social Service
4.1 Pay the required fees at the cashier	4.1 Receives payment and issues Official Receipt		5 minutes	Administrative Officer I Cashier Section
4.2 Goes back to NHSRC-ROV office to present the signed charge slip and/or the official receipt	4.2. Records OR number at audiologic test listing form		2 minutes	Nurse I / Nurse II / Administrative Aide NHSRC-ROV
5. Receives instruction on when to come back for the release of result and where to consult for the interpretation of the final reading	5.1. Transfers results into the computer and accomplish the result form 5.2. Prints copy of the result 5.3. Audiologist analyses the result and writes down initial and final reading in the result form 5.4. Informs significant others or client of the schedule of releasing the result (Tuesday – Friday)	None None None None	5 minutes 2 minutes 20 minutes 3 minutes	Nurse I NHSRC-ROV Medical Specialist IV NHSRC-ROV Nurse I / Nurse II / Administrative Aide NHSRC-ROV
	TOTAL FEES: Procedure: PHP 1,500.00 plus Reading Fee: PHP 600.00 Total <u>PHP 2,100.00</u>		TOTAL TIME: 4 hours and 50 minutes	



Department of ENT– Head and Neck Surgery

Internal Services



1. Processing of Incoming and Outgoing Communications

The office of the ENT- Head and Neck Surgery Department receives and processes documents / records / communications addressed to its Chairman particularly those pertinent to office and hospital operations. The Office is available daily, 8:00 am to 5:00 pm except Saturday and Sunday and during holidays.

OFFICE OR DIVISION:		Department of ENT – Head and Neck Surgery / Medical Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C - Government to Citizen/G2G – Government to Government / G2B – Government to Business		
WHO MAY AVAIL:		All		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Communications addressed to the Chairman/Department Staffs (original copies)		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/ communications to the receiving personnel	1.1 Receives documents/ communications and stamped it accordingly.	None	5 minutes	<i>Administrative Assistant I</i> ENT-Head and Neck Surgery Department
	1.2. Classifies the documents/communications received.	None	5 minutes	<i>Administrative Assistant I</i> ENT- Head and Neck Surgery Department
	1.3. Reviews important documents	None	10 minutes	<i>Administrative Assistant I</i> ENT- Head and Neck Surgery Department
	1.4. Reviews/ signs/approves documents.	None	15 minutes	<i>Department Chairman</i> ENT- Head and Neck Surgery Department
	1.5. Facilitates forwarding of documents with	None	15 minutes	<i>Administrative Assistant I</i>



	Department Chair or Department Staff concern for comments concerning Hospital Committees or Program/Department/ Sections/ Personnel within set deadlines.			ENT- Head and Neck Surgery Department
2. Receives signed/acted upon documents/ records/ communications.	2. Releases of documents to respective Hospital Committees or Program/Divisions/ Department/ Sections/Personnel (Approved leaves, request for training, request letters and other outgoing communications for release)	None	30 minutes	<i>Administrative Assistant</i> ENT- Head and Neck Surgery Department
	TOTAL FEES: None		TOTAL TIME: 1 hour and 20 minutes	



Department of Laboratories

External Services



1. Availment of Bacteriological Examinations (Simple Procedures)

Microbiology Laboratory offers examinations like Acid Fast Stain, Gram Stain, Potassium Hydroxide Mount (KOH) and India ink. The Laboratory is open daily, including Saturdays, Sundays and Holidays from 7:00 am to 4:00 pm.

Note: Acid fast stain examinations for sputum are accepted only until 9:00 am.

OFFICE OR DIVISION:	Microbiology Section – Department of Pathology and Laboratories			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C- Government to Citizen			
WHO MAY AVAIL:	In-Patients and Out-Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (green card) (1 original copy) Microbiology Request Form (1 original copy) Charge Slip (1 original copy) Official Receipt (OR) (1 original copy) Claim Slip (1 original copy) 		<ul style="list-style-type: none"> Out-patient Department- HIMS/Admitting Section Attending physician Microbiology Laboratory Cashier Microbiology Laboratory 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Gets queue number from the Receiving Area of Microbiology Laboratory	1. Calls number card in chronological order. Gives priority to Senior citizen, PWD and pregnant.	None	2 minutes	Medical Technologist Microbiology Section
2. Presents Microbiology Request Form and Health Record ID/Watcher's ID at the Microbiology Receiving Area	2. Verifies Microbiology Request Form and Health Record ID/Watcher's ID if completely filled-out and instructs patient or watcher of the proper specimen collection	None	5 minutes	Medical Technologist Microbiology Section
3. Submits properly collected clinical specimen	3. Receives specimen and examines if properly collected 3.1 Issues Charge Slip to in-patients without Philhealth and out-patients	Refer to Table 1 for schedule of fees	3 minutes	Medical Technologist Microbiology Section



	3.2 Instructs patient or watcher to pay at the Cashier and emphasize to present Official Receipt (OR) at the Microbiology Section for processing of specimen	Refer to Table 1 for schedule of fees	None	<i>Medical Technologist Microbiology Section</i>
4. Pays required fee at cashier and receives official receipt Note: Make sure to pay only at the Cashier and get official receipt	4. Collects required fees and issues Official receipt	Refer to Table 1 for schedule of fees	30 minutes	<i>Administrative Officer I Cashier's Office</i>
5. Presents Official Receipt to Microbiology Staff	5. Verifies official receipt and indicates the O.R. # on the Charge Slip form. 5.1 Returns OR to client 5.2 Issues Claim Slip for the release of results	None	3 minutes	<i>Medical Technologist Microbiology Section</i>
6. Claims result/s from the Microbiology Staff	6. Asks for Claim Slip and/or OR and let the patient or watcher sign on the Releasing Log Sheet 6.1 Releases result/s	None	2 minutes	<i>Medical Technologist Microbiology Section</i>
	TOTAL FEES: <i>Vary on the procedure. Refer to Table 1. Simple Procedures</i>		TOTAL TIME: 2 days and 45 minutes <i>(Refer to Table 1 for Simple Procedures for release of result)</i>	



Table 1: Simple Procedures

PROCEDURES	FEES	PROCESSING TIME	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
Acid Fast Stain	PHP 300.00	45 minutes	2 days	2 days and 45 minutes
Gram Stain	PHP 265.00	45 minutes	2 days	2 days and 45 minutes
KOH	PHP 225.00	45 minutes	2 days	2 days and 45 minutes
India ink	PHP 225.00	45 minutes	2 days	2 days and 45 minutes



2. Availment of Bacteriological Examinations (Complex Procedures)

Microbiology Laboratory offers examinations like Culture and Sensitivity and GeneXpert (Xpert MTB/Rif Assay). The Laboratory is open daily, including Saturdays, Sundays and Holidays from 7:00 am to 4:00 pm.

Note: Culture and Sensitivity for sputum are accepted only until 9:00 am.

OFFICE OR DIVISION:		Microbiology Section – Department of Pathology and Laboratories		
CLASSIFICATION:		Complex		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-Patients and Out-Patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (green card) (original copy) Microbiology Request Form (1 original copy) Charge Slip (1 original copy) Official Receipt (OR) (1 original copy) Claim Slip (1 original copy) 		<ul style="list-style-type: none"> Out-patient Department-HIMS/Admitting Section Attending physician Microbiology Laboratory Cashier Microbiology Laboratory 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Gets queue number from the Receiving Area of Microbiology Laboratory	1. Calls number card in chronological order. Gives priority to Senior citizen, PWD and pregnant.	None	2 minutes	Medical Technologist Microbiology Section
2. Presents Microbiology Request Form and Hospital Record ID/Watcher's ID at the Microbiology Receiving Area	2. Verifies Microbiology Request Form and Hospital Record ID /Watcher's ID if completely filled-out and instructs patient or watcher of the proper specimen collection	None	5 minutes	Medical Technologist Microbiology Section
3. Submits properly collected clinical specimen	3. Receives specimen and examines if properly collected 3.1 Issues Charge Slip to in-patients	Refer to Table 1 for schedule of fees	3 minutes	Medical Technologist Microbiology Section



	without Philhealth and out-patients 3.2 Instructs patient or watcher to pay at the Cashier and emphasize to present Official Receipt (OR) at the Microbiology Section for processing of specimen	Refer to Table 1 for schedule of fees	None	<i>Medical Technologist Microbiology Section</i>
4. Pays required fee at cashier and receives official receipt Note: Make sure to pay only at the Cashier and get official receipt	4. Collects required fees and issues Official receipt	Refer to Table 1 for schedule of fees	30 minutes	<i>Administrative Officer / Cashier's Office</i>
5. Presents Official Receipt to Microbiology Staff	5. Verifies official receipt and indicates the O.R. # on the Charge Slip form. 5.1 Returns OR to client 5.2 Issues Claim Slip for the release of results	None	3 minutes <u>Release of Results:</u> 5 days	<i>Medical Technologist Microbiology Section</i>
6. Claims result/s from the Microbiology Staff	6. Asks for Claim Slip and/or OR and let the patient or watcher sign on the Releasing Log Sheet 6.1 Releases result/s	None	2 minutes	<i>Medical Technologist Microbiology Section</i>
	TOTAL FEES: <i>Vary on the procedure. Refer to Table 1. Complex Procedures</i>		TOTAL TIME: 5 days and 45 minutes (including <i>Release of result, Refer to Table 1 Complex Procedures</i>)	



Table 1: Complex Procedures

PROCEDURES	FEES	PROCESSING TIME	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
Culture and Sensitivity	PHP 1,500.00	45 minutes	5 days	5 days and 45 minutes
GeneXpert (Xpert/MTB Rif Assay)	Free of charge	45 minutes	5 days	5 days and 45 minutes



3. Availment of Blood Bank Diagnostic Procedures

Blood Bank and Transfusion Service offers laboratory examinations like ABO grouping- gel method, Waived cross-matching (for whole blood and packed red blood cells), STAT cross-matching (for whole blood and packed red blood cells), massive transfusion Protocol- Pack 1 and 2, cross-matching for hemodialysis and cancer patients (OPD), anti-human globulin (Direct and Indirect Coombs tests) and Antibody screening 3 panels for both in-patients and out patients. Blood Bank services are available from Monday to Sunday, 24 hours a day.

Office or Division:	Blood Bank and Transfusion Services/Medical Division			
Classification:	Simple			
Type of Transaction:	G2G - Government to Government			
Who may avail:	Medical Doctors, Nurses, Nursing Attendants, Institutional Workers, Medical Clerks, Medical Post Graduate Interns (PGI)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Completed Blood Bank Examination Request Form (1 original copy) Component Availability Claim Sheet (1 original copy) 		Requesting Physician, Nurse -Ward Blood Bank Reception Area		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits patient blood request form at the Blood Bank Reception area	1. Receives Blood Bank request form.	None	1 minute (Refer to Table 1-A for procedure time)	<i>Medical Technologist</i> Bloodbank
2. Receives notification via phone call or Softros LAN messenger of the availability of requested Blood Bank examination result	2. Notifies the ward of the availability of Blood Bank examination result.	None	5 minutes	<i>Medical Technologist</i> Bloodbank
3. Claims the official Blood Bank examination result	3. Releases blood bank examination result. 3.1 Request clients to sign in the receiving	None Refer to Table 1-A & 1-B for	2 minutes Refer to Table 1-A for the	<i>Medical Technologist</i> Bloodbank



	worksheet of blood bank examination result.	schedule of fees	release of result	
	TOTAL FEES: All fees are charged to patient bill; <i>In patients-</i> outright charging at HOMIS <i>Out patients-</i> issuance of charge slip and pay directly at cashier for the official receipt. <i>Note:</i> Charges may vary on the requested blood components and additional blood bank examination procedure. Refer to Table 1-A and 1-B.		TOTAL TIME: 8 minutes plus <i>Procedure time and Release of result (refer to Table 1-A Diagnostic Procedures)</i>	

Table 1-A: Diagnostic Procedures

PROCEDURES	FEES	PROCESSING TIME	PROCEDURE TIME	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
ABO/ Rh Blood Grouping, gel method	PHP 430	8 minutes	20 minutes	2 minutes	30 minutes
Cross-matching , gel method: Waived, STAT, Routine (for Whole Blood and Packed Red Blood Cells)					
Waived	*PHP 500	8 minutes	10 minutes	2 minutes	20 minutes
STAT	*PHP 500	8 minutes	50 minutes	2 minutes	1 hour
Routine	*PHP 500	8 minutes	23 hours	52 minutes	24 hours
Massive Transfusion Protocol Pack 1	PHP 13,650	8 minutes	50 minutes	2 minutes	1 hour
Massive Transfusion Protocol Pack 2	PHP 19,050	8 minutes	50 minutes	2 minutes	1 hour



Direct Anti- human globulin test	PHP 370	8 minutes	50 minutes	2 minutes	1 hour
Indirect Anti- human globulin test	PHP 370	8 minutes	50 minutes	2 minutes	1 hour
Antibody screening 3 cell panel (patient)	PHP 700	8 minutes	50 minutes	2 minutes	1 hour
Antibody screening 1 cell panel (blood unit)	*PHP 550	8 minutes	50 minutes	2 minutes	1 hour

*Cross-matching fee only, processing fee for blood component needed is not included; refer to **Table 1-B**

Table 1-B: Blood Components Processing & Blood Transfusion Set Fees

Blood Components:	Fees	Blood Components:	Fees
Whole Blood	PHP 1,600	Platelet Concentrate Random Donor	PHP 1,000
Packed Red Blood Cell	PHP 1,500	Platelet Concentrate Apheresis	PHP 15,000
Washed Red Blood Cell	PHP 2,700	Fresh Frozen Plasma	PHP 1,000
Leuko-reduced Red Cell	PHP 3,800	Cryoprecipitate	PHP 1,000
Aliquot (200mL below)	PHP 800		
Blood Transfusion set (for Platelet/ FFP)	PHP 150		
Blood Transfusion set (for red cells)	PHP 45		



4. Availment of Drug Screening Test Procedure

BMC Drug Testing Laboratory is the only government owned DOH Accredited Drug testing laboratory in Bicol region for the determination of Methamphetamine (Shabu) and THC or Marijuana.

Services are available daily: 8:00 am to 5:00 pm except Saturday and Sunday and during Holidays. (No Noon Break policy)

OFFICE OR DIVISION:		Poison Control Center / Drug Testing		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C- Government to Citizen/G2G- Government to Government/ G2B- Government to Business Entity		
WHO MAY AVAIL:		In & Out Patients/ walk in Clients/ Government & Private employees/ other entities upon request.		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Hospital Record ID (green card) • Request Form (1 original copy) • Charge Slip (1 original copy) • Official Receipt (1 original copy) • Any VALID ID'S with pictures ie.,(SSS, GSIS, PAGIBIG, DRIVER'S LICENSE, etc) (1 original copy) 		<ul style="list-style-type: none"> • Out-patient Department-HIMS • Attending physician • Drug Testing Laboratory • Cashier • Sending Agencies (Private or Government) 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Proceeds to the reception area and present the request form or any valid ID's with pictures and signature.	1. Verifies request form and valid ID. -If Out-patient: Gives charge slip. -If In patient: Encodes charges at HOMIS	None	5 minutes	Laboratory Aide II Drug Testing Laboratory
	2.1 Advises client to pay at the Cashier and return for the test procedures.	None	5 minutes	Laboratory Aide II Drug Testing Laboratory
2. Pays required fees at the cashier and receives the official receipt Note: Make sure to get official receipt	3. Collects/ receives the required fees and issues Official receipt	PHP 250.00	30 minutes	Administrative Officer I Located at Cancer Center Cashier's Office (8:am-5pm),



3. Presents Official Receipt to the staff or receptionist.	3.Receives the Official Receipt. 3.1 Records the patient's name, Hospital Record Number, and O.R. number in the logbook.	None	5 minutes	Laboratory Aide II Drug Testing Laboratory
4. Fills out the CCF form or Chain of custody form issued by the DOH; a)DT-001, b) DT 002A, c) 002B, d) 002C and e) 002D	4. Accepts the CCF form and checks before encoding to the system. Let the client's seat and relax for the biometrics and picture taking.	None	10 minutes	Laboratory Aide II Drug Testing Laboratory
5. Prepares for the Biometrics and picture takings	5. Instructs clients to wash his/her hands prior to biometrics and collection of specimen.	None	5 minutes	Laboratory Aide II Drug Testing Laboratory
6. Receives the urine bottle and proceed to collection of specimen. (60 ml required; split collection is allowed if not complete)	6. Receives the specimen. Affix seal and label with initial, date and time on the container.	None	10 minutes	Laboratory Aide II Drug Testing Laboratory
7. Submits the urine for testing and wait for the results.	7. Examines and checks if the seal is intact and record for confidentiality	None	10 minutes	Medical Technologist II Drug Testing Laboratory
8. Receives the results and sign the releasing logbook. (Date and Time)	8. If found Negative; signs and releases the result to the client.	None	5 minutes	Medical Technologist II Drug Testing Laboratory
9. Receives the instruction from the reception staff.	9. If found positive (+) Talks to the client privately and explains the processing for the	None	30 minutes	Medical Technologist II Drug Testing Laboratory



	confirmatory testing and to wait for 15 days for the results.			
	TOTAL FEES: PHP 250.00		TOTAL TIME: If Negative result: 1 hour and 25 minutes If Positive result: 1 hour and 55 minutes	



5. Availment of Histopathological Examinations

Histopathology Laboratory offers examinations such as Post-operative Biopsy, Cytological examination of body fluids, and smears for the diagnosis of body fluids and tumour malignancies. Histopathological exams are available daily, Mon- Friday, 8am to 5pm.

OFFICE OR DIVISION:		Histopathology Section		
CLASSIFICATION:		Highly Technical		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-patients and Out-patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Hospital Record ID (Green Card) 2. PHIC ID (1 original copy) 3. Histopathology Request Form (1 original copy) 4. Specimen		- CLIENT'S COPY - CLIENT'S COPY - ATTENDING PHYSICIAN - CLINIC/WARD		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents Laboratory Request and Specimen at the Reception area/window.	1. Verifies Lab. Request form and specimen including PHIC classification. 1.2. Issues Charge slip (For non-PHIC client)	BIOPSY: Small = PHP 630.00 Med = PHP 1,000.00 Large = PHP 1,200.00 XLarge= Php 2,000.00 CYTO/FN AB/PAPS: PHP 250.00	5 minutes	<i>Medical Technologist</i> Histopath Section



2. Proceeds to Cashier and pays required fees.	2. Collects required fees and issues Official Receipt. 2.1. For non-Philhealth clients, encodes charges to HOMIS.	BIOPSY: Small = PHP 630.00 Med = PHP 1,000.00 Large = PHP 1,200.00 XLarge= PHP 2,000.00 CYTO/FN AB/PAPS: PHP 250.00	30 minutes 5 minutes	<i>Collecting Officer</i> Cashier Section <i>Medical Technologist</i> Histopath Section
3. Proceeds back to Histopath section and presents Official Receipt. Submits specimen.	3. Accepts specimen, assigns accession number and records to Log Book. 3.1. Issues claim stub and inform client of date and time of release of result.	None	Refer to Table 1 Histopathological Examinations	<i>Medical Technologist</i> Histopath Section
4. Claims result, presents claim stub.	4. Releases result.	None	5 minutes	<i>Medical Technologist</i> Histopath Section
	TOTAL FEES: Vary on the procedure/specimen type (Refer to Table 1. Histopathological Examinations)		TOTAL TIME: 45 Minutes plus procedure time and release of results (Refer to Table 1. Histopathological Examinations)	

TABLE 1. HISTOPATHOLOGICAL EXAMINATIONS

1.1. CYTOLOGICAL SPECIMENS

TYPE OF SPECIMEN	FEES	PROCESSING TIME	PROCEDURE TIME (BATCH)	RELEASING OF OFFICIAL RESULT	TOTAL PROCESSING TIME INCLUDING RELEASE OF OFFICIAL RESULT
BODY FLUID CYTOLOGY	250.00	45 MIN.	5 WORKING DAYS	5 WORKING DAYS	10 WORKING DAYS & 45 MINUTES.
FINE NEEDLE ASPIRATE					
PAP'S SMEAR					



1.2. BIOPSY SPECIMENS

SPECIMEN	FEES (in PHP)	PROC ESSIN G TIME	PROCEDURE TIME (BATCH)	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME INCLUDING RELEASE OF OFFICIAL RESULT
SMALL SPECIMEN	630.00	45 MINUT ES	14 WORKING DAYS	6 WORKIN G DAYS	20 WORKING DAYS & 45 MINUTES
Mole Cervical Biopsy tissues Endometrial scrapings tissues Fistula tissues Buccal mass tissue tube BTL Hemorrhoids Molar tissue biopsy Lymph nodes cysts Small polyp mass Needle core biopsies Wedge biopsies	Tonsils Gastric Placental Bronchial Fallopian Omentum Rectal Small Vulvar Cell block				
MEDIUM SPECIMEN	1,000.00				
Appendix mass Ovary (ectopic) ovary Thyroid (Bilateral) mass	Parotid Cystic Breast				
LARGE SPECIMEN	1,200.00				
Gall Bladder tissues Stomach chips Kidney Mastoid Cystic ovary (5 cm diameter & more) Fallopian tube (ectopic)	Bone Prostatic Penis Testicles				
EXTRA LARGE SPECIMEN	2,000.00				
Segments of Colon/Intestines TAHBSO/TAHUSO/EHBSO Total LOBECTOMY MRM (BREAST)					



6. Availment of Laboratory Procedures (Main Laboratory)

Main Laboratory offers routine and special assays to aid in the diagnosis and management of the different clinical department of Bicol Medical Center. These tests are enumerated on Table 1 according to their categories with corresponding fees. The Laboratory caters 24/7 using the latest technology in the market according to the standard and regulation of a tertiary health care facility.

OFFICE OR DIVISION:		Main Laboratory – Department of Pathology and Laboratories		
CLASSIFICATION:		SIMPLE		
TYPE OF TRANSACTION:		G2C – Government to Citizen/ G2G – Government to Government		
WHO MAY AVAIL:		In-Patients and ER-Patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (green card) Laboratory Request (1 original copy) 		<ul style="list-style-type: none"> Admitting Section Attending physician 		
CLIENT'S STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	RESPONSIBLE PERSON
1. Presents laboratory request at laboratory reception area.	1. Verifies completeness of laboratory request and instruct patient or watcher of the proper urine/stool specimen collection and other body fluids	None	5 minutes	<i>Medical Technologist</i> Main Laboratory
2. Submits for blood extraction and submits the required specimen.	2. Extracts blood 2.1 Receives properly collected specimen.	None	20 minutes	<i>Medical Technologist</i> Main Laboratory
3. Claims result.	3. In-patient results are delivered as follows: ➤ 12:00AM-8:00AM ➔ 9:00AM ➤ 8:01AM-11:59PM ➔ 12:30AM	None	5 minutes	<i>Medical Technologist</i> Main Laboratory
	3.1 Encodes charges at HOMIS.	None	5 minutes	<i>Medical Technologist</i> Main Laboratory



	Total Fees: Vary on the procedure. Refer to Table 1. Laboratory Assays with Corresponding Fees	TOTAL TIME: 30 minutes plus Procedure time & Release of result (Refer to Table 2. Processing Time and Release of Result (For In-patient))
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Table 1. Laboratory Assays with Corresponding Fees

<u>CLINICAL CHEMISTRY</u>	FEE (PHP)	<u>HEMATOLOGY</u>	FEE (PHP)	<u>SEROLOGY</u>	FEE (PHP)
• ABG	1000	• CBC	250	• AFP	1000
• ABG w/ iCa	1200	• PBS**	250	• Anti-HAV IgM	800
• ALB/GLOB/ AG Ratio	200	• Retic Ct.	250	• Anti-HAV Total	900
• ALP	300	• Blood Typing	150	• Anti-HBc IgM	800
• ALT/SGPT	200	• Clotting/Bleeding Time	125	• Anti-HBc Total	800
• AMYLASE	300	• ESR	200	• Anti-HBe	800
• AST/SGOT	200	• Prottime	450	• Anti-HBs	750
• BUN	195	• APTT	450	• Anti-Tg	1100
• BUA	195	• LE Prep	250	• Anti-TPO	1200
• Calcium	250	• D – Dimer	2370	• ASO	360
• Chloride	250	• Heparin	2370	• Beta-HCG	1000
• Cholesterol	200	<u>CLINICAL MICROSCOPY</u>		• CA 125	1200
• CKMB	350	• Urinalysis	275	• CA 19-9	1200
• Creatinine	195	• Fecalalysis	240	• CA 153	1200
• Direct Bilirubin	200	• Cell/Diff. Ct.	250	• CD4	2500
• FBS/RBS	125	• Occult Blood	400	• CEA	1000
• Indirect Bilirubin	200	• Malarial Smear**	150	• Chikungunya Test	650
• Ionized Calcium	600	• Filarial Smear**	150	• Cortisol	850
• LDH	300	• Pregnancy Test	150	• CRP	500
• Lipase	500	• Sperm Analysis**	250	• Cyclosporine	1500
• Lipid Profile	575	• Urine RBC Morphology	250	• Cystatin-C	900
• Magnesium	200	• Sputum Smear**	150	• C3	500
• OGTT	375	➤ Kato-Katz**	150	• Dengue IgG/IgM	500
• Phosphorus	200	<u>SEROLOGY</u>	FEE	• Dengue NS1	570



• Potassium (K)	200	• LH	1000	• Estradiol	1500
• Sodium (Na)	200	• Pro BNP	1300	• Ferritin	850
• Total Bilirubin	200	• Procalcitonin	1350	• FSH	1000
• Total Protein	200	• Prolactin	950	• FT3	700
• TPAG	400	• PSA	1000	• FT4	700
• HDL / LDL	175	• RF	300	• HBsAg (Screening)	200
• Triglyceride	200	• RPR	250	• HBsAg (Quantitative)	700
		• Syphilis TP	650	• HCV	420
		• Tacrolimus	1500	• HIV	400
		• Testosterone	1150	• HIV-1Viral Load (Xpert)	2500
		• Troponin I	1200	• Leptospira	650
		• TSH	700	• LH	1000
		• Typhidot	600	• Intact PTH	1100
		• Vitamin D	1050	• Leptospira	650

**Refers to Assay with Complex Procedures.

Table 2: Processing Time and Release of Result (For In-patient)

Test Assays	PROCESSING TIME	PROCEDURE TIME AND RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
Clinical Chemistry	30 minutes	2 hours	2 hour and 30 minutes
Hematology	30 minutes	1 hour	1 hour and 30 minutes
Clinical Microscopy	30 minutes	90 minutes	2 hours
Immunology	30 minutes	2 hours	2 hour and 30 minutes
Malaria/Filaria	30 minutes	48 hours	48 hours and 30 minutes
Sperm Analysis	30 minutes	48 hours	48 hours and 30 minutes
Kato-Katz	30 minutes	48 hours	48 hours and 30 minutes
Sputum Smear (Paragonimiasis)	30 minutes	48 hours	48 hours and 30 minutes
Peripheral Blood Smear (PBS)	30 minutes	48 hours	48 hours and 30 minutes

*Processing Time refers to from time received laboratory request until sample is encoded in HOMIS for assay testing.

*Procedure Time refers to the actual assay testing of the samples submitted or collected.

*Processing and Procedure Time may be affected by the volume of samples for testing.



7. Availment of OPD Laboratory Examinations

OPD Laboratory offers routine and special assays to aid in the diagnosis and management of the different clinics of the Out-Patient Department. These tests are enumerated on Table 1 according to their categories with corresponding fees. The Laboratory is open Mondays thru Fridays from 7:00 am to 4:00 pm except for Saturdays 7:00 – 12 noon.

OFFICE OR DIVISION:	OPD Laboratory – Department of Pathology and Laboratories			
CLASSIFICATION:	SIMPLE			
TYPE OF TRANSACTION:	G2C – Government to Citizen G2G – Government to Government			
WHO MAY AVAIL:	In-Patients and Out-Patients; Employees			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
<ul style="list-style-type: none"> Hospital Record ID (green card) Laboratory Request (1 original copy) OPD Laboratory Charge Slip Official Receipt (OR) (1 original copy) 			<ul style="list-style-type: none"> Out-patient Department-HIMS/Admitting Section Attending physician OPD Laboratory Cashier 	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Obtain queue number for OPD examination <ul style="list-style-type: none"> RED queue number – for Senior Citizen, PWD, and Pregnant women. BLACK queue number – for non-senior and ambulatory patient. 	1. Calls number card in chronological order. Gives priority to Senior citizen, PWD and pregnant.	None	2 minutes	<i>Medical Technologist I</i> OPD Laboratory
2. Presents laboratory request and green card to the OPD staff with the queue number	2. Verifies laboratory request form for completeness with green card and instructs patients for proper specimen collection <ul style="list-style-type: none"> 2.1 Issues Charge Slip 2.2 Extracts blood samples 	Refer to Table 1 Laboratory Assays with Corresponding Fees	15 minutes	<i>Medical Technologist I</i> OPD Laboratory



3. Submits properly collected clinical specimen	3.Receives specimen with label and examines if properly collected	None	5 minutes	<i>Medical Technologist I</i> OPD Laboratory
	3.1 Instructs patient or watcher to pay at the Cashier and emphasizes to present Official Receipt (OR) to claim their official result at the recommended time placed at the right side of the charge slip.	None	5 minutes	<i>Medical Technologist I</i> OPD Laboratory
4. Pays required fee to the cashier and receives official receipt Note: Make sure to pay only at the Cashier and get official receipt	4.Issues Official receipt	Refer to Table 1 Laboratory Assays with Corresponding Fees	30 minutes	<i>Administrative Officer I</i> Cashier Section
5. Presents Official Receipt and Charge Slip to OPD Laboratory Staff	5. Verifies official receipt and indicates the O.R. # on the Charge Slip form. 5.1. Returns OR to client 5.2. Releases result/s	None	3 minutes	<i>Medical Technologist I</i> OPD Laboratory
	Total Fees: Vary on the procedure. Refer to Table 1. Laboratory Assays with Corresponding Fees		TOTAL TIME: 1 hour plus Procedure time & Release of result (Refer to Table 2)	

Table 1. Laboratory Assays with Corresponding Fees

<u>CLINICAL CHEMISTRY</u>	<u>FEE (PHP)</u>	<u>HEMATOLOGY</u>	<u>FEE (PHP)</u>	<u>SEROLOGY</u>	<u>FEE (PHP)</u>
• ABG	1000	• CBC	250	• AFP	1000
• ABG w/ iCa	1200	• PBS	250	• Anti-HAV IgM	800
• ALB/GLOB/ AG Ratio	200	• Retic Ct.	250	• Anti-HAV Total	900
• ALP	300	• Blood Typing	150	• Anti-HBc IgM	800



• ALT/SGPT	200	• Clotting/Bleeding Time	125	• Anti-HBc Total	800
• AMYLASE	300	• ESR	200	• Anti-HBe	800
• AST/SGOT	200	• Prottime	450	• Anti-HBs	750
• BUN	195	• APTT	450	• ASO	360
• BUA	195	• LE Prep	250	• Beta-HCG	1000
• Calcium	250	• D – Dimer	2370	• CA 125	1200
• Chloride	250	• Heparin	2370	• CA 19-9	1200
• Cholesterol	200	<u>CLINICAL MICROSCOPY</u>		• CA 153	1200
• CKMB	350	• Urinalysis	275	• CEA	1000
• Creatinine	195	• Fecalalysis	240	• Chikungunya Test	650
• Direct Bilirubin	200	• Cell/Diff. Ct.	200	• CRP	500
• FBS/RBS	125	• Occult Blood	400	• C3	500
• Indirect Bilirubin	200	• Malarial Smear	150	• Dengue IgG/IgM	500
• Ionized Calcium	600	• Filarial Smear	150	• Dengue NS1	570
• LDH	300	• Pregnancy Test	150	• FSH	1000
• Lipase	500	• Sperm Analysis	250	• FT3	700
• Lipid Profile	575	• Urine RBC Morphology	250	• FT4	700
• Magnesium	200	• Sputum Smear	150	• HBsAg(Screening)	200
• OGTT	375	• Wet Mounting	150	• HBsAg (Quantitative)	700
• Phosphorus	200	• CD4	2500	• HCV	420
• Potassium (K)	200	• HIV-1Viral Load (Xpert)	2500	• HIV	400
• Sodium (Na)	200			• Leptospira	650
• Total Bilirubin	200			• LH	1000
• Total Protein	200			• PSA	1000
• TPAG	400			• RF	300
• HDL / LDL	175			• RPR	250
• Triglyceride	200			• Troponin I	1200
				• TSH	700
				• Typhidot	600

Table 2: Processing Time and Release of Result (for Out-Patient)

PROCEDURES	PROCESSING TIME	PROCEDURE TIME AND RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
Clinical Chemistry	60 minutes	4 hours	5 hours
Hematology	60 minutes	3 hours	4 hours
Clinical Microscopy	60 minutes	3 hours	4 hours
Immunology	60 minutes	4 hours	5 hours



8. Blood Donation Process

The job of the Blood Bank and Transfusion Service is to ensure safe blood collection from voluntary non-remunerated blood donors (VNRBD). Blood Bank donation procedure and services are available Monday to Sunday 8:00AM to 5:00 PM. (No Holidays)

OFFICE OR DIVISION:	Blood Bank and Transfusion Services/Medical Division			
CLASSIFICATION:	SIMPLE			
TYPE OF TRANSACTION:	G2G - Government to Government			
WHO MAY AVAIL:	Blood Donors (voluntary non-remunerated blood donors, walk-in)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Donor History Questionnaire (DHQ)(1 original copy) • Donor History Questionnaire (DHQ) –Annex A (1 original copy) • Parents' Consent (for donor ages 16-17 y/o)(1 original copy) 		<ul style="list-style-type: none"> • Blood Bank Donor Screening Clinic • Blood Bank Donor Screening Clinic • Blood Bank Donor Screening Clinic 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Fills up Donor Assessment tool	1. To emphasize sanitation, hand washing and wearing of face mask of donor prior to donation to include the assessment tool before interview process	None	5 minutes	Nurse I/Nurse II Blood Bank
2. Fills up (DHQ) Donor History Questionnaire form/Annex	2. Checks DHQ form for complete personal data of donor	None	10 minutes	Nurse I/Nurse II Blood Bank
3. Provides information on physical status or condition	3. Performs interview, provides pre-donation information, screening and physical examination	None	20 minutes	Nurse I/Nurse II Medical Officer Blood Bank



4. Submits for blood extraction/ collection	5. Perform blood extraction aseptically with care	None	20 minutes	Nurse I/Nurse II Blood Bank
5. Receives counselling	5. Provides relevant Post-Donation instructions/advise and counseling to donors. 5.1 Provides light snack/token to the donors	None	20 minutes	Nurse I/Nurse II Medical Officer Blood Bank
	TOTAL FEES: None		TOTAL TIME: 1 hour and 15 minutes	



Department of Medicine

External Services



1. Availment of Cardio Pulmo Neuro Diagnostic Procedures (Complex)

Cardio-Pulmo-Neuro Laboratory offers diagnostic examinations like cardiovascular procedures (Electrocardiogram, 2D Echocardiogram & Vascular scans), Pulmo procedure (Spirometry/PFT), and Neuro procedure (Electroencephalogram/EEG). Laboratory services are from Monday to Friday at 8:00am to 5:00pm, Saturday, Sunday and Holidays at 8:00am to 4:00pm.

OFFICE OR DIVISION:		Cardio Pulmo Neuro Laboratory		
CLASSIFICATION:		Complex		
TYPE OF TRANSACTION:		G2C- Government to Citizen		
WHO MAY AVAIL:		In-Patients and Out-Patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (green card) Request Form (1 original copy) Charge Slip (1 original copy) Official Receipt (1 original copy) Patient Schedule Slip (1 original copy) 		<ul style="list-style-type: none"> Out-patient Department-HIMS Attending physician Cardio Pulmo Neuro Laboratory Cashier Cardio Pulmo Neuro Laboratory 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled-out request form at the reception area.	1. Verifies request form.	None	1 minute	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II I</i> Cardio Pulmo Neuro Laboratory
	1.1 Informs and explains to the client the diagnostic procedure and the necessary preparations (if applicable).	None	5 minutes	
	If In-patient: Encodes charges at HOMIS.		1 minute	
	If Out-patient: a. Gives charge slip. 1.1 b. Advises client to pay at the Cashier and return to Cardio Pulmo Neuro Laboratory once settled.	Refer to Table 1 for schedule of fees	5 minutes	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II I</i> Cardio Pulmo Neuro Laboratory
2. Pays required fee at cashier and receives official receipt Note: Make sure to get official receipt	2 Collects required fees and issues Official receipt	Refer to Table 1 for schedule of fees	30 minutes	<i>Administrative Officer I</i> Located at Main Cashier's Office (11:30am-10pm),



3. Presents Official Receipt to Cardio pulmo neuro staff	3	Receives the request with attached charge slip and official receipt.	None	1 minute	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II</i> Cardio Pulmo Neuro Laboratory
	3.1	Verifies official receipt and indicates the O.R. number on the request form.	None	1 minute	
	3.2	Records the patient's name, Hospital Record Number, and O.R. number in the logbook and gives schedule slip (date and time of procedure)	None	1 minute	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II</i> Cardio Pulmo Neuro Laboratory
		Note: Special diagnostic procedures like 2D Echo, Vascular Scan, Holter Monitoring, Ambulatory Blood Pressure Monitoring, Spirometry/PFT and Electroencephalogram (EEG) are done per schedule (unless an emergency case).			
4. Receives instruction when to come back for the performance of procedure	4	Gives instruction to the patient on the scheduled date of procedure	None	5 minutes	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II</i> Cardio Pulmo Neuro Laboratory
5. Undergoes the procedure as scheduled	5	Performs diagnostic procedure on patient and evaluates tracing and image quality. 5.1 Immediately informs requesting physician for highly significant findings.	None	Refer to Table 1 for Procedure Time	<i>Medical Equipment Technician II /Respiratory Therapist</i> Cardio Pulmo Neuro Laboratory



6. Receives instruction on the availability of official result/s.	6 Advises client to claim the result/s	None	Refer to Table 1 for Release of Results	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II</i> Cardio Pulmo Neuro Laboratory
7. Presents Official Receipt and acknowledges receipt of result/s	7 Issues official result and requests patient to sign in the logbook.	None	1 minute	<i>Medical Equipment Technician II /Respiratory Therapist/ Administrative Assistant II</i> Cardio Pulmo Neuro Laboratory
TOTAL FEES: <i>Vary on the procedure. Refer to Table 1. Complex Procedures</i>		TOTAL TIME: 51 minutes plus <i>Procedure time and Release of result (refer to Table 1. Complex Procedures)</i>		

Table 1: Complex Procedures

PROCEDURES	PROCEDURE FEE	READER'S FEE (for PAY patient only)	TOTAL FEE	PROCESSING TIME	PROCEDURE TIME	RELEASE OF OFFICIAL RESULT	TOTAL OF PROCESSING TIME
EEG (Electroencephalogram)	PHP 1,600	PHP 500	PHP 2,100	51 minutes	45 minutes	6 working days	6 working days, 1 hour & 36 minutes
Spirometry/PFT	PHP 850	PHP 150	PHP 1,000	51 minutes	1 hour	6 working days	6 working days & 1 hour & 51 minutes
24 – Hr Holter Monitoring	PHP 2,500	PHP 1,000	PHP 3,500	51 minutes	40 minutes	6 working days	6 working days, 1 hour and 31 minutes
24 – Hr Ambulatory Blood Pressure Monitoring	PHP 1,300	PHP 700	PHP 2,000	51 minutes	30 minutes	6 working days	6 working days, 1 hour & 21 minutes
2D Echo	PHP 2,600	PHP 700	PHP 3,300	51 minutes	1 hour	6 working days	6 working days & 1 hour & 51 minutes
Carotid with vertebral Duplex Scan	PHP 2,600	PHP 700	PHP 3,300	51 minutes	1 hour	6 working days	6 working days & 1 hour & 51 minutes



Arterial Duplex Scan Both Upper/Lower Extremities	PHP 3,300	PHP 1,200	PHP 4,500	51 minutes	2 hours	6 working days	6 working days & 2 hours & 51 minutes
Venous Duplex Scan Both Upper/Lower Extremities	PHP 3,000	PHP 1,000	PHP 4,000	51 minutes	2 hours	6 working days	6 working days & 2 hours & 51 minutes
Arterial Duplex Scan One Upper/Lower Extremities	PHP 1,500	PHP 1,000	PHP 2,500	51 minutes	2 hours	6 working days	6 working days & 2 hours & 51 minutes
Venous Duplex Scan One Upper/Lower Extremities	PHP 1,700	PHP 800	PHP 2,500	51 minutes	2 hours	6 working days	6 working days & 2 hours & 51 minutes



2. Availment of Diagnostic Procedure (ECG)

Cardio Pulmo Neuro Laboratory offers diagnostic examination (ECG) for pediatric, neonates and adult clients. Laboratory services are available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:	Cardio Pulmo Neuro Laboratory			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	In-Patients and Out-Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (green card) Request Form (1 original copy) Charge Slip (1 original copy) Official Receipt (1 original copy) Patient Schedule Slip (1 original copy) 		<ul style="list-style-type: none"> Out-patient Department-HIMS Attending physician Cardio Pulmo Neuro Laboratory Cashier Cardio Pulmo Neuro Laboratory 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled-out request form at the reception area.	1. Verifies request form	None	1 minute	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
	1.1 Informs and explains to the client the diagnostic procedure and the necessary preparations (if applicable).	None	5 minutes	
	If Out-patient: Gives charge slip. If In patient: Encodes charges at HOMIS 1.2 Advises client to pay at the Cashier and return to Cardio Pulmo Neuro Lab once settled.	None	1 minute	
2. Pays required fee at cashier and receives official receipt Note: Make sure to get official receipt	2. Collects required fees and issues Official receipt	PHP 220.00	30 minutes	<i>Administrative Officer I</i> Located at Main Cashier's Office (11:30am-10pm)
3. Presents Official Receipt to Cardio pulmo neuro staff	3. Receives the request with attached charge slip and official receipt.	None	1 minute	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory



	3.1 Verifies official receipt and indicates the O.R. # on the request form. 3.2 Records the patient's name, Hospital Record Number, and O.R. number in the logbook.	None	1 minute	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
		None	1 minute	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
4. Waits for the performance of procedure	4. Instructs patient to wait, name will be called for the performance of the procedure	None	5 minutes	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
5. Undergoes the procedure	5. Performs diagnostic procedure on patient and evaluates tracing and image quality. 5.1 Immediately informs requesting physician for highly significant findings.	None	<u>Procedure Time:</u> ECG-10 minutes	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
6. Receives instructions on the availability of official result/s.	6. Advises client to claim the result/s	None	<u>Release of result:</u> ECG-2 days	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
7. Presents Official Receipt and acknowledges receipt of result/s	7. Issues official result and requests patient to sign in the logbook.	None	1 minute	<i>Medical Equipment Technician II</i> Cardio Pulmo Neuro Laboratory
	TOTAL FEES: PHP 220.00		TOTAL TIME: 2 days, 1 hour & 1 minute	



3. Availment of Endoscopic Diagnostic and Therapeutic Procedures

Endoscopy Unit caters to patients with upper/lower gastro intestinal and pulmonary problems. Services offered are diagnostic and therapeutic procedures such as EGD, Colonoscopy and Bronchoscopy. Endoscopy Unit is open from 8:00 am to 5:00 pm, Monday to Friday except Saturday, Sunday and during Holidays.

OFFICE OR DIVISION:		Endoscopy Unit		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-Patients, Out-Patients and Walk – In pay patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Schedule Slip for In- Patients (1 original copy) • Patient's Chart for In-Patients (1 original copy) • Hospital Record ID (Green Card) for OPD and Walk-In Patients(1 original copy) • Referral Slip for Out - Patients and Walk-In Patients (1 original copy) • MDR for OPD and Walk-In Patients (1 original copy) 		<ul style="list-style-type: none"> • Nurse Station • Nurse Station • OPD/Admitting Section • IM Resident, Gastro Consultant at Endoscopy Unit • PHILHEALTH office 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled-out request form and green card/MDR for out and walk-in patients at the reception area.	1. Verifies request form If In-patient: Endoscopy Nurse checks for the schedule slip and pre-endoscopy checklist If Out-patient/Walk-In patient a. Verifies doctor's referral or orders. b. Check for the green card and MDR from phil-health	None	10 minutes	Nurse II Endoscopy Unit
2. Patient prepares himself/herself for the procedure	2. Provides patient's gown and assist patient for the procedure.	None	5 minutes	Nurse II/ Nurse III Endoscopy Unit



3. Understand and follows instructions given by the nurse.	3. Re-explains the procedure and re-assures patient for the procedure.	None	3 minutes	Nurse II/ Nurse III Endoscopy Unit
4. Waits for the procedure to be performed.	4. Prepares patient for the procedure. a. Transfer comfortably to the endoscopy bed. b. Position patient. c. Hook to O2 inhalation via nasal cannula at the desired LPM and to pulse oximeter.	None	5 minutes	Nurse II/ Nurse III / Medical Specialist/ Medical Officer Endoscopy Unit
5. Undergoes the procedure as scheduled.	5. Performs diagnostic procedure on patient. a. Monitors patient during the procedure.	None	1 hour (EGD/Colonoscopy/Bronchoscopy) 1 hour and 30 minutes (Endoscopy)	Nurse II/ Nurse III / Medical Specialist/ Medical Officer Endoscopy Unit
6. Receives explanation from the gastro consultant regarding the findings.	6. Explains the result and findings of the procedure a. Gives written order b. Provides prescription for the medications	None	10 minutes	Medical Specialist/ Medical Officer Endoscopy Unit
7. Receives charge slip and pays required fees at the Cashier (for outpatient/ walk in patient only) <i>Proceed to step 8 (for in patient)</i>	7. Issues charge slip and instruct patient to pay at the Cashier (for outpatient/ walk in patient); or charged to HOMIS (if in-patient)	PHP 5,000 (EGD); PHP 5,500(Colonoscopy/ Bronchoscopy); PHP 6,000(Endoscopy) plus additional charges for accessories used	3 minutes	Nurse II/ Nurse III Endoscopy Unit



8. Receives official result/reading and specimen for biopsy if any.	8. Issues official result and requests for biopsy if any and asked patient to sign in the logbook.	None	2 minutes	Nurse II/ Nurse III Endoscopy Unit
	TOTAL FEES: P5000 (EGD); PHP 5,500 (Colonoscopy/ Bronchoscopy); PHP 6,000 (Endoscopy) plus additional charges for accessories used (Refer to Table of Accessories and Fees)		TOTAL TIME: 1 hour & 38 minutes (EGD/ Colonoscopy/Bronchoscopy); 2 hours & 8 minutes (Endoscopy)	

Table of Accessories and Fees

ACCESSORIES	FEES	ACCESSORIES	FEES
O2 inhalation	PHP 300	Snare	PHP 1,500
Nasal cannula	PHP 20	Specimen bottle	PHP 25
Bipsy forcep	PHP 1,500	PEG set	PHP 20,000
Injector	PHP 1,500	Histo acryl	PHP 12,000
Clip deployer	PHP 4,000	RBL	PHP 12,000
Clip	PHP 3,000	Endoloop	PHP 3,000
Cautery pad	PHP 550	PAPR (for EGD/Broncho)	PHP 4,000
Cautery machine use	PHP 1,500	Pulse oximeter use	PHP 150
Epinephrine	PHP 80	propolol	PHP 80
Cavi wipes	PHP 20	PPE cover all	PHP 2,000



4. Availment of Hemodialysis Procedure

Hemodialysis is one of the Renal replacement therapy wherein it filters waste products and water in our blood. We provide excellence in health care services for End Stage Renal Disease patient.

Hemodialysis unit is available daily, 7:00 am to 11:00 pm, three sessions per day. (7:30am-11:30am - first session, 1:00pm-5:00pm - second session and 6:30pm-10:30pm - third session)

OFFICE OR DIVISION:	Nursing Service Division/Hemodialysis Unit			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Admitted Patients and Out patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1.Latest HEPATITIS PROFILE (HBSag and Anti HCV) (1 original copy) 2.Hospital Record ID (Green Card) 3.Member Data Record (MDR) (1 original copy)		1.Outside Laboratory or BMC Laboratory 2.OPD Admitting Section 3.Philhealth Office(Magsaysay, Naga City)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents green card and Member Data Record	1. Register patient thru iHOMIS 1.1 Instructs client to proceed to Room 8 to secure portal form	None	5 minutes	Nurse I / Nurse II / Administrative Aide Hemodialysis Unit
2. Proceeds to Room 8 (Philhealth Room)	2. Checks Philhealth claims of the patient	None	5 minutes	Administrative Aide Philhealth Room
3. Proceeds to hemodialysis and submits portal form	3. Checks the submitted documents for completeness 3.1 Instructs to wait for the treatment	None	5 minutes	Nurse I / Nurse II / Administrative Aide- Hemodialysis Unit
4.Waits for the call of the nurse or nursing attendant to start the treatment	4. Weighs the patient 4.1 Assists patient to the assigned chair 4.2 Prepares the hemodialysis machine	None	20 minutes	Nurse I / Nurse II/ Nursing Attendant II- Hemodialysis Unit
5. Undergoes hemodialysis procedure	5.Disinfects patient's access site 5.1 Starts the procedure 5.2 Charge to IHOMIS	New set: PHP 4,000.00 Re-used: PHP 3,000.00	4 hours	Nurse I / Nurse II Hemodialysis Unit



6. Receives instruction on next treatment schedule.	6.Weighs patient after the procedure 6.1 Reminds patient on next treatment schedule	None	10 minutes	Nurse I / Nurse II/ Nursing Attendant II Hemodialysis Unit
	TOTAL FEES: New set: PHP 4,000.00 Re-used: PHP 3,000.00		TOTAL TIME: 4 hours and 45 minutes	



Department of Medicine

Internal Services



1. Processing of Incoming and Outgoing Communications

The Office of the Department of Internal Medicine receives and process documents and records of employees including communications pertinent to office and hospital operations. Office of the Department of Internal Medicine is available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:		Department of Internal Medicine/Medical Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen/ G2G – Government to Government/ G2B – Government to Business		
WHO MAY AVAIL:		All		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Communications addressed to the Chairman/Department Staffs (original copies)			From interested party	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/ communications to the receiving personnel	1. Receives documents/ communications and stamped it accordingly.	None	5 minutes	<i>Administrative Assistant</i> Department of Medicine
	1.1. Classifies the documents/ communications received.	None	5 minutes	<i>Administrative Assistant</i> Department of Medicine
	1.2. Reviews important documents	None	5 minutes	<i>Administrative Assistant</i> Department of Medicine
	1.3. Reviews/signs /approves documents.	None	30minutes	<i>Department Chair</i> Department of Medicine
	1.4. Facilitates forwarding of documents with Department Chair or Department Staff concern for comments concerning Hospital Committees or Program/Department/ Sections/	None	10 minutes	<i>Administrative Assistant</i> Department of Medicine



	Personnel within set deadlines.			
2. Receives signed/acted upon documents/ records/ communications.	2. Releases documents to respective Hospital Committees or Program/Divisions/ Department/ Sections/Personnel (Approved leaves, request for training, request letters and other outgoing communications for release)	None	30 minutes	<i>Administrative Assistant</i> Department of Medicine
	TOTAL FEES: None		TOTAL TIME: 1 hour and 25 minutes	



Department of Obstetrics and Gynecology

Internal Services



1. Processing of Incoming and Outgoing Communications

Office of the Department of Obstetrics and Gynecology receives and process documents and records of employees including communications pertinent to office and hospital operations. Office of the Department of OB-GYN is available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:		Department of Obstetrics and Gynecology/Medical Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen/ G2G – Government to Government/ G2B – Government to Business		
WHO MAY AVAIL:		All		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Communications addressed to the Chairman/Department Staffs (original copies)		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/ communications to the receiving personnel	1. Receives documents/ communications and stamped it accordingly.	None	6 minutes	<i>Administrative Assistant</i> Department of OB & Gyn
	1.1. Classifies the documents/communications received.	None	6 minutes	<i>Administrative Assistant</i> Department of OB & Gyn
	1.2. Reviews important documents	None	6 minutes	<i>Administrative Assistant</i> Department of OB & Gyn
	1.3. Reviews/signs/ approves documents.	None	30 minutes	<i>Department Chair</i> Department of OB & Gyn
	1.4. Facilitates forwarding of documents with Department Chair or Department Staff concern for comments concerning Hospital Committees or Program/Department/ Sections/ Personnel within set deadlines.	None	10 minutes	<i>Administrative Assistant</i> Department of OB & Gyn
2. Receives signed/acted upon documents/ records/ communications.	2. Releases of documents to respective Hospital Committees or	None	30 minutes	<i>Administrative Assistant</i> Department of OB & Gyn



	Program/Divisions/ Department/ Sections/Personnel (Approved leaves, request for training, request letters and other outgoing communications for release)			
	TOTAL FEES: None		TOTAL TIME: 1 hour and 28 minutes	



Department of Orthopedics

Internal Services



1. Processing of Incoming and Outgoing Communications

The office of the Orthopedics Department receives and process documents/communications address to its chairman or other staff members particularly those pertinent to office and hospital operations. The office of Orthopedics Department is available Monday – Friday, 8am – 5pm.

OFFICE OR DIVISION:	Department of Orthopedics			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen/ G2G – Government to Government/ G2B – Government to Business			
WHO MAY AVAIL:	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Communications addressed to the Chairman or other Department staff (original copies)		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submit documents / communications to the receiving personnel	1.Receives documents / communications	None	5minutes	<i>Administrative Assistant</i> Orthopedics Office
	1.1 Sorts and classifies the documents /communications accordingly	None	5minutes	<i>Administrative Assistant</i> Orthopedics Office
	1.2 Review/signs /approves documents or communications	None	1 hour	<i>Consultants / Residents</i> Orthopedics Office
	1.3 Facilitates forwarding of signed documents to concerned unit/area	None	10 minutes	<i>Administrative Assistant</i> Orthopedics Office
	1.4 Registers outgoing documents / communications	None	15 minutes	<i>Administrative Assistant</i>



	ons to logbook			Orthopedics Office
2. Receives signed / acted upon documents / communications	2. Convey the documents accordingly	None	25 minutes	<i>Department Secretary Orthopedics Office</i>
	TOTAL FEES: None		TOTAL TIME: 2 hours	



Department of Pediatrics

External Services



1. Availment of Newborn Screening Procedure

BMC Newborn Screening is a test done after 24 hours of life through blood sample collection for early detection and management of any congenital metabolic disorders that if left untreated can lead to mental retardation or even death. BMC Newborn Services is available daily from Monday to Sunday for blood sample collection, and Tuesday and Thursday 9:00am-11:00am for releasing of result.

OFFICE OR DIVISION:		Department of Pediatrics/Newborn Screening		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Inborn and Outborn Babies		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Newborn Tag (Inborn) (1 original copy) Receipt of Payment (Outborn) (1 original copy)		Patient's chart Cashier's Section		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Provides relevant information of newborn	1. 1. Records information needed for newborn screening at the logbook and filter card.	None	5 minutes	<i>NBS Nurse</i> <i>I/II/III</i> Newborn Screening Room
	1.2. Issues charge slip for Outborn patient to be paid at cashier	PHP 1,800.00	5 minutes	<i>NBS Nurse</i> <i>I/II/III</i> Newborn Screening Room
2. Proceeds to newborn screening room at OB Annex once called.	2.1. Checks and verifies information given. 2.2. Conducts health education on Newborn Screening.	None	5 minutes	<i>NBS Nurse</i> <i>I/II/III</i> Newborn Screening Room
3. Underwent Newborn Screening Procedure. Receives instruction in claiming result.	3.1. Collects Blood Sample via Heel-Prick Method. 3.2. Instructs relative when to come back to secure result. (Tuesday and Thursday 9:00am-11:00am)	None	10 minutes Release of result - 30 days	<i>NBS Nurse</i> <i>I/II/III</i> Newborn Screening Room



4. If for confirmatory test, brings back the newborn to Bicol Medical Center	4. Recall for confirmatory test and referred to continuity clinic.	None	10 minutes	<i>Neonatologist and Pediatric Specialist/ NBS Nurse and NBS Coordinator Newborn Screening Room</i>
	TOTAL FEES: PHP 1,800.00		TOTAL TIME: 35 minutes Note: Release of Result-30 days	



2. Availment of Pasteurized Breastmilk to Sick Newborn

BMC Human milk bank, a service established for the purpose of collecting, screening, processing, storing, and distributing donated human milk to meet the specific needs of individuals for whom human milk is prescribed by health care providers who are licensed to prescribe. We provide safe pasteurized breast milk to all sick newborns especially to those mothers who cannot provide their own breast milk for the reason of inadequate supply or with medical conditions. BMC Human milk bank is open daily from Monday to Sunday 7am-7pm.

OFFICE OR DIVISION:		Department of Pediatrics/Human Milk Bank		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Sick Newborns		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Prescription from Pediatricians (1 original copy)		Neonatal Intensive Care Unit/Pediatric Intensive Care Unit		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Receives instruction on supplemental feeding of pasteurized breast milk.	1. Verifies the physician order and notifies the mother regarding supplemental feeding of pasteurized breast milk.	None	5 minutes	Nurse I/Nurse II NICU/PICU
2. Signs the recipient consent waiver form.	2. Explains the safety of pasteurized breast milk that will be given to the newborn.	None	10 minutes	Nursing Attendant II Human Milk Bank
	3. Receives the prescription and dispense the pasteurized breast milk to nurse on duty.	None	5 minutes	Nursing Attendant II Human Milk Bank
	4. Feeds the sick newborn via cup as ordered by the attending physician with the right	None	10 minutes	Nurse I/Nurse II NICU/PICU



	amount and frequency.			
	5. Records the amount of pasteurized breast milk consumed by the sick newborn.	None	5 minutes	<i>Nursing Attendant II</i> Human Milk Bank
	TOTAL FEES: None		TOTAL TIME: 35 minutes	



Department of Pediatrics

Internal Services



1. Processing of Incoming and Outgoing Communications

Office of the Department of Pediatrics receives and process documents and records of employees including communications pertinent to office and hospital operations. Office of the Department of Pediatrics is available daily, 8:00 am to 5:00 pm except Sat/ Sun and during holidays.

OFFICE OR DIVISION:	Department of Pediatrics/Medical Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen/ G2G – Government to Government/ G2B – Government to Business			
WHO MAY AVAIL:	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Communications addressed to the Chairman/Department Staffs (original copies)		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits documents/ records/ communications to the receiving personnel	1. Receives documents/ communications and stamped it accordingly.	None	5 minutes	<i>Administrative Assistant</i> Pediatrics Office
	1.1. Classifies the documents/communications received.	None	5 minutes	<i>Administrative Assistant</i> Pediatrics Office
	1.2. Reviews important documents	None	5 minutes	<i>Administrative Assistant</i> Pediatrics Office
	1.3. Reviews/signs /approves documents.	None	30 minutes	<i>Medical Specialist III</i> Pediatrics Office
	1.4. Facilitates forwarding of documents with Department Chair or Department Staff concern for comments concerning Hospital Committees or Program/Department/ Sections/	None	10 minutes	<i>Administrative Assistant</i> Pediatrics Office



	Personnel within set deadlines.			
2. Receives signed/acted upon documents/ records/ communications.	2. Releases of documents to respective Hospital Committees or Program/Divisions/ Department/ Sections/Personnel (Approved leaves, request for training, request letters and other outgoing communications for release)	None	30 minutes	<i>Administrative Assistant</i> Pediatrics Office
	TOTAL FEES: None		TOTAL TIME: 1 hour and 25 minutes	



Department of Psychiatry

External Services



1. Procedure for Out – Patient Consultations at the Psychiatry Department

The Psychiatry Department offers out-patient consultations to child, adolescent and adult patients from Monday – Thursday, 8am – 3pm.

OFFICE OR DIVISION:		Psychiatry Out – Patient Department		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Out-patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Hospital Record ID (green card) Charge Slip (1 original copy) Official Receipt (1 original copy)		OPD (Psychiatry) OPD (Psychiatry) Cashier		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONNEL RESPONSIBLE
1. Submits self to triage	1. Evaluates patient	None	10 minutes	<i>Nurse I</i> Psychiatry Department
2. Presents Hospital Record ID (green card) for enlistment and receives charge slip Note: New patients receives own Hospital Record ID (green card)	1. Enlists patient for outpatient consult and gives charge slip	None	10 minutes	<i>Administrative Officer III</i> Psychiatry Department
3. Pays corresponding amount indicated at charge slip and receives official receipt	3. Accepts payment for user's fee and gives official receipt	PHP 50.00	30 minutes	<i>Administrative Officer I</i> Cashier Psychiatry Department
4. Waits for name to be called Note: New patients are interviewed by social worker for social work-up	4. Calls for patient's name 4.1 Gathers pertinent social work – up details	None None	20 minutes 20 minutes	<i>Administrative Officer III</i> Psychiatry Department <i>Social Welfare Officer I</i> Psychiatry Department



5. Proceeds to consultation area, receives prescription and obtains schedule of next OPD follow-up	5. Assesses patient's symptoms, relays diagnosis, gives prescription and advices schedule of next OPD follow-up	None	20 minutes	Medical Officer IV, Medical Specialist II & III Psychiatry Department
6. Presents the prescription	6. Indicates the corresponding price for the medicine in the prescription	None	20 minutes	Administrative Assistant II / Pharmacist I Psychiatry Department
7. Pays the required amount and receives the official receipt	7. Collects the money for the purchased medicine and gives official receipt	Individual cost of medicine Refer to Table 1)	30 minutes	Administrative Assistant III or Administrative Officer I & II Psychiatry Department
8. Claims the purchased medicine and goes home	8. Checks the amount paid and gives the exact number of medicines.	None	20 minutes	Administrative Assistant II / Pharmacist I Psychiatry Department
TOTAL FEES: PHP 50.00 user's fee + PHP 50.00 new patient's green card + cost of purchased medicine (refer to Table 1 Cost of Medicines at Psychiatry Ward)		TOTAL TIME: 2 hours and 40 minutes (additional 20 minutes for new patients who will be interviewed by Social worker)		

TABLE 1: COST OF MEDICINES AT PSYCHIATRY WARD

UNIT	DESCRIPTION	SELLING PRICE
tab	Alprazolam 500mcg	PHP 24.70
tab	Aripiprazole 10mg ODT	PHP 288.50
tab	Aripiprazole 15mg ODT	PHP 288.50
tab	Biperiden 2mg	PHP 7.00
tab	Carbamazepine 200mg	PHP 2.10
tab	Chlorpromazine 100mg	PHP 1.90
tab	Clonazepam 2mg	PHP 11.70
tab	Clozapine 100mg	PHP 9.00
tab	Divalproex 250mg	PHP 35.75
tab	Escitalopram 10mg	PHP 5.50
amp	Fluphenazine 25mg/ml	PHP 130.00
tab	Olanzapine 10mg Plain	PHP 4.15
tab	Olanzapine 10mg ODT	PHP 23.40
pfs	Paliperidone 100mg/ml	PHP 8,832.00
pfs	Paliperidone 150mg/1.5ml	PHP 8,832.00
cap	Phenytoin 100mg	PHP 20.00
tab	Quetiapine 100mg	PHP 39.00
tab	Risperidone 2mg	PHP 3.75
tab	Sertraline 50mg	PHP 5.00
tab	Zolpidem 10mg	PHP 76.50



2. Procedure on Admitting Patients at the Psychiatry Department

The Psychiatry Department is open 24/7 to accept patients who are eligible for admission.

OFFICE OR DIVISION:	Psychiatry Department's Acute Crisis Intervention Service (ACIS)			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Admissible patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Hospital Record ID (green card) Official Receipt (1 original copy) Prescription (1 original copy)		Administrative Officer III Administrative Officer I - Cashier Medical Officer IV, Medical Specialist II & III		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONNEL RESPONSIBLE
1. Submits self to triage	1. Evaluates patient and deems him / her for admission	None	10 minutes	<i>Nurse / Psychiatry Department</i>
2. Presents Hospital Record ID (green card) for enlistment and receives charge slip <i>**new patients receive own Hospital Record ID (green card)</i>	2.Enlists patient for admission and gives charge slip	None	10 minutes	<i>Administrative Officer III Psychiatry Department</i>
3. Pays corresponding amount indicated at charge slip and receives official receipt	3. Accepts payment for user's fee and gives official receipt	PHP 50.00	30 minutes	<i>Administrative Officer I - Cashier Psychiatry Department</i>
4. Waits for name to be called <i>**new patients are interviewed by social worker for social work-up</i>	4.Calls for patient's name 4.1 Gathers pertinent social work – up details	None None	20 minutes 20 minutes	<i>Administrative Officer III Psychiatry Department</i> <i>Social Welfare Officer I Psychiatry Department</i>
5. Proceeds to the consultation area, receives prescription and informs of the admission	5. Assesses patient's symptoms, relays diagnosis, gives prescription and provides admitting orders	None	20 minutes	<i>Medical Officer IV, Medical Specialist II & III Psychiatry Department</i>



6. Presents the prescription	6. Indicates the corresponding price for the medicine in the prescription	None	20 minutes	Administrative Assistant II / Pharmacist I Psychiatry Department
7. Pays the required amount and receives the official receipt	7. Collects the money for the purchased medicine and gives official receipt	Individual cost of medicine (Refer to Table 1)	30 minutes	Administrative Assistant III or Administrative Officer I & II Psychiatry Department
8. Claims the purchased medicine	8. Checks the amount paid and gives the exact number of medicines.	None	20 minutes	Administrative Assistant II / Pharmacist I Psychiatry Department
9. Proceeds to ACIS for admission	9. Accompanies patient and relatives to ACIS and brings admitting orders	None	10 minutes	Guard or Watchman – on – duty Psychiatry Department
		TOTAL FEES: PHP 50.00 user's fee + PHP 50.00 new patient's green card + cost of purchased medicine		TOTAL TIME: 2 hours and 50 minutes (additional 20 minutes for new patients who will be interviewed by Social Worker)

TABLE 1: COST OF MEDICINES AT PSYCHIATRY WARD

UNIT	DESCRIPTION	SELLING PRICE
tab	Alprazolam 500mcg	PHP 24.70
tab	Aripiprazole 10mg ODT	PHP 288.50
tab	Aripiprazole 15mg ODT	PHP 288.50
tab	Biperiden 2mg	PHP 7.00
tab	Carbamazepine 200mg	PHP 2.10
tab	Chlorpromazine 100mg	PHP 1.90
tab	Clonazepam 2mg	PHP 11.70
tab	Clozapine 100mg	PHP 9.00
tab	Divalproex 250mg	PHP 35.75
tab	Escitalopram 10mg	PHP 5.50
amp	Fluphenazine 25mg/ml	PHP 130.00
tab	Olanzapine 10mg Plain	PHP 4.15
tab	Olanzapine 10mg ODT	PHP 23.40
pfs	Paliperidone 100mg/ml	PHP 8,832.00
pfs	Paliperidone 150mg/1.5ml	PHP 8,832.00
cap	Phenytoin 100mg	PHP 20.00
tab	Quetiapine 100mg	PHP 39.00
tab	Risperidone 2mg	PHP 3.75
tab	Sertraline 50mg	PHP 5.00
tab	Zolpidem 10mg	PHP 76.50



3. Process on Availment of Psychological Tests for Legal Proceedings

The Psychiatry Department provides battery of psychological tests to child, adolescent and adult clients for litigation purposes from Monday – Thursday, 8:30am – 12pm.

OFFICE OR DIVISION:	Psychological Testing Unit			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Clients referred by the Psychiatrist – on – Duty			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Patient Record (1 original copy) Charge Slip (1 original copy) Official receipt (1 original copy) Referral Letter (1 original copy)		Administrative Officer II Psychologist II Administrative Officer I – Cashier Section Medical Specialist II		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONNEL RESPONSIBLE
1. Submits self to triage	1. Instructs client to proceed to Outpatient building	None	10 minutes	<i>Nurse I</i> Psychiatry Department
2. Presents Hospital Record ID (green card) **new clients are given own Hospital Record ID (green card)	2. Enlists patient.	None	10 minutes	<i>Administrative Officer III</i> Psychiatry Department
3. Proceeds to consultation area and receives referral letter to Psychological Testing Unit	3. Evaluates client for presence of psychiatric symptoms, prepares Psychiatric Evaluation Report and provides referral letter to Psychological Testing Unit for battery of psychological tests	None	25 minutes	<i>Medical Officer IV / Medical Specialist II</i> Psychiatry Department
4. Proceeds to testing room and receives charge slip	4. Instructs patient according to the psychological test being administered and provides charge slip	None	2 hours	<i>Psychologist II</i> Psychiatry Department



5. Pays the required amount and receives official receipt	5. Collects the money for the psychological testing and gives official receipt	PHP 250.00 testing fee	30minutes	<i>Administrative Officer I Cashier Psychiatry Department</i>
6. Shows the official receipt and receives instruction on when to claim results.	6. Verifies official receipt and designates specific date on when to claim results	None	10minutes	<i>Psychologist II Psychiatry Department</i>
	TOTAL FEE: PHP 250.00 + additional PHP 250.00 for Psychiatric Evaluation Report to be paid on the day the result is claimed		TOTAL TIME: 3 hours and 25 minutes	



4. Process on Availment of Psychological Tests for Employment, Gun License Renewal and Classification of SPED Students

The Psychiatry Department provides battery of psychological tests for clients' with individualized purpose from Monday – Thursday, 8:30 – 12 noon.

OFFICE OR DIVISION:		Psychological Testing Unit		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C - Government to Citizen		
WHO MAY AVAIL:		Clients for employment, gun license renewal and SPED students		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Charge Slip (1 original copy) Official receipt (1 original copy) Referral letter (1 original copy)		Psychologist II Administrative Officer I –Cashier Section Medical Specialist II		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits self to triage	1. Instructs client to proceed to Outpatient building	None	10 minutes	Nurse I Psychiatry Department
2. Proceeds to consultation area and receives referral letter to Psychological Testing Unit	2. Evaluates client for presence of psychiatric symptoms, prepares Psychiatric Evaluation Report and provides referral letter to Psychological Testing Unit for battery of psychological tests	None	25 minutes	Medical Specialist II Psychiatry Department
3. Proceeds to testing room and receives charge slip	3. Instructs client according to the psychological test being administered and provides charge slip	None	2 hours	Psychologist II Psychiatry Department



4. Pays the required amount and receives official receipt	4. Collects the money for the psychological testing and gives official receipt	PHP 250.00 testing fee	30 minutes	<i>Administrative Assistant III or Administrative Officer I & II Psychiatry Department</i>
5. Shows the official receipt and receives instruction on when to claim results	5. Verifies official receipt and designates specific date on when to claim results	none	10minutes	<i>Psychologist II Psychiatry Department</i>
	TOTAL FEE: PHP 250.00 plus additional PHP 250.00 for Psychiatric Evaluation Report to be paid on the day the result is claimed		TOTAL TIME: 3 hours and 15 minutes	



Department of Psychiatry

Internal Services



1. Process on Referring Psychiatric Out – Patients to the Main Hospital

The Psychiatry Department refers to the main hospital patient/s in the OPD who does not have psychiatric symptoms but are deemed with other health concerns.

OFFICE OR DIVISION:		Psychiatry Out – Patient Department		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G-Government to Government		
WHO MAY AVAIL:		Psychiatric out – patients for referral to the main hospital		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Referral Letter (1 original copy)			Medical Officer IV, Medical Specialist II & III	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits self to triage	1. Evaluates patient and deems him/her for referral	None	10 minutes	<i>Nurse I</i> Psychiatry Department
2. Proceeds to consultation area and receives referral letter	2. Assesses patient's symptoms, relays working diagnosis and provides referral letter addressed to the particular Department in the main hospital.	None	20 minutes	<i>Medical Officer IV, Medical Specialist II & III</i> Psychiatry Department
3. Proceeds to the main hospital	3. Instructs patient and relatives to proceed to the department indicated in the referral letter.	None	5 minutes	<i>Nurse I</i> Psychiatry Department
TOTAL FEES: None		TOTAL TIME: 35 minutes		



Department of Radiology

External Services



1. Availment of Diagnostic General X-Ray Procedures

The Department of Radiology offers diagnostic general x-ray procedures like chest, abdominal, and skull radiography. General x-ray procedures are available twenty-four (24) hours a day, seven (7) days a week.

OFFICE OR DIVISION:		Department of Radiology		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-patients and Out-patients		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
<ul style="list-style-type: none"> • Hospital Record ID (Green Card) • Radiology Request Form (1 original copy) • Charge Slip (1 original copy) • Official Receipt (1 original copy) 			<ul style="list-style-type: none"> • Out-patient department – HIMS • Attending physician • Department of Radiology • Cashier 	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled-out request form at the reception area	1. Verifies radiology request form	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
	1.1 Informs and explains to the client the diagnostic procedure and the necessary preparations (if applicable) -If out-patient: Issues charge slip. -If in-patient: Encodes charges at HOMIS, proceeds to step 5.	None	2 minutes	<i>Radiologic Technologist I</i> Department of Radiology
	1.2 Advises client to pay at the cashier and return to the Radiology Department once settled.	Refer to Table 1 for the Schedule of fees	3 minutes	<i>Radiologic Technologist I</i> Department of Radiology
2. Pays required fee at cashier and receives official receipt Note: Make sure to get official receipt	2. Collects required fees and issues official receipt	Refer to Table 1 for the Schedule of fees	30 minutes	<i>Administrative Officer I</i> Located at Main Cashier's Office (11:30 am – 10:00 pm)
3. Presents official receipt to Radiology information officer	3. Receives the request with attached charge slip and official receipt	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
	3.1 Verifies official receipt and indicates	None	1 minute	<i>Radiologic Technologist I</i>



	<p>the O.R. number on the request form*</p> <p>3.2 Records the patient's name, hospital record number, and O.R. number in the scheduling logbook and issues schedule slip (date and time of the procedure)**</p> <p>*General radiography procedures proceed to client step number 5</p> <p>**Special imaging modality procedures only</p>	None	1 minute	<p>Department of Radiology</p> <p><i>Radiologic Technologist I</i> Department of Radiology</p>
4. Receives instruction when to come back for the performance of procedure.	4. Gives instruction to the patient on the scheduled date of procedure.	None	5 minutes	<i>Radiologic Technologist I</i> Department of Radiology
5. Undergoes the procedure as scheduled	<p>5. Performs diagnostic procedure on patient and evaluates image quality</p> <p>5.1 Immediately informs requesting physician for highly significant findings</p>	None	Refer to Table 1 For procedure time	<i>Radiologic Technologist I – Radiologic Technologist III</i> Department of Radiology
6. Receives instructions on the availability of official result/s.	6. Advices client to claim the result/s.	None	Refer to Table 1 for issuance of result	<i>Radiologic Technologist I</i> Department of Radiology
7. Presents official receipt and acknowledges receipt of result/s.	7. Issues official result and requests patient to sign in the releasing logbook.	None	30 minutes	<i>Administrative Aide</i> Department of Radiology
	<p>TOTAL FEES: Fees vary per procedure, refer to Table 1. Simple Procedures</p>		<p>TOTAL TIME: 1 hour and 13 minutes plus Procedure time and release of result (for out patients) 35 minutes plus Procedure time and release of result (for in patients)</p>	



Table 1. Simple Procedures

PROCEDURES	FEES (in PHP)	READER 'S FEE (for PAY patient's only)	PROCESSING TIME	PROCEDURE TIME	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
A. GENERAL RADIOGRAPHY (NON-CONTRAST STUDIES)						
Skeletal Survey	3,000.00	100.00	1 hour 13 minutes (for out- patients) 35 minutes (for in- patients)	1 hour	3 working days	3 working days, 1 hour and 13 minutes (for out- patients) 3 working days, 1 hour and 5 minutes (for in- patients)
Routine 1-View	250.00	100.00		30 minutes		
Routine 2-Views	400.00	100.00		30 minutes		



2. Availment of Diagnostic Ultrasonography Procedures

The Department of Radiology offers diagnostic ultrasonography procedures like abdomen, thyroid, and chest ultrasound. Diagnostic ultrasonography procedures are Monday to Friday except holidays, 8:00 am to 5:00 pm, except for emergency cases.

OFFICE OR DIVISION:		Department of Radiology		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-patients and Out-patients		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
<ul style="list-style-type: none"> • Hospital Record ID (Green Card) • Radiology Request Form (1 original copy) • Charge Slip (1 original copy) • Schedule slip (1 original copy) • Official Receipt (1 original copy) 			<ul style="list-style-type: none"> • Out-patient department – HIMS • Attending physician • Department of Radiology • Department of Radiology • Cashier section 	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled-out request form at the reception area	1. 1.Verifies radiology request form	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
	1.2 Records the patient's name and procedure in the scheduling logbook.	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
	1.3 Issues schedule slip (date and time of the procedure)	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
	1.4.Issues charge slip (OPD only)	Refer to Table 1 for the Schedule of fees	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
	-If in-patient: Proceeds to step 3.			
	1.5. Advises client to pay at the cashier and return to the Radiology Department on the indicated schedule.	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
2.Pays required fee at cashier and receives official receipt Note: Make sure to get official receipt	2. Collects required fees and issues official receipt	Refer to Table 1 for the Schedule of fees	30 minutes	<i>Administrative Officer I</i> Located at Main Cashier's Office (11:30 am – 10:00 pm),
2. Presents schedule slip and official	3. 1.Receives the schedule slip and official receipt	None	1 minute	<i>Radiologic Technologist I</i>



receipt to on scheduled date	3.2. Verifies official receipt and indicates the O.R. number on the request form and instructs patient to wait to be called	None	1 minute	Department of Radiology <i>Radiologic Technologist I</i> Department of Radiology
3. Undergoes the procedure as scheduled	4. 1.Performs ultrasonography procedure on patient 4.2 Immediately informs requesting physician for highly significant findings	None None	Refer to Table 1 For procedure time	<i>Radiologic Technologist II – Radiologic Technologist III and Radiologist</i> Department of Radiology
4. Receives instructions on the availability of official result/s.	5. Advices client to claim the result/s.	None	Refer to Table 1 for issuance of result	<i>Radiologic Technologist 1</i> Department of Radiology
5. Presents official receipt and acknowledges receipt of result/s.	6. Issues official result and requests patient to sign in the releasing logbook.	None	30 minutes	<i>Administrative Aide</i> Department of Radiology
	TOTAL FEES: Fees vary per procedure, refer to Table 1. Diagnostic Ultrasonography Procedures		TOTAL TIME: 1 hour and 8 minutes plus <i>Procedure time and release of result (for out patients)</i> 38 minutes plus <i>Procedure time and release of result (for in patients)</i>	

Table 1. DIAGNOSTIC ULTRASONOGRAPHY PROCEDURES

PROCEDURES	FEES (in PHP)	READER'S FEE (for PAY patient's only)	PROCESSING TIME	PROCEDU RE TIME	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
Whole Abdomen	1,500.00	500.00	1 hour 8 minutes (for out patients) 38 minutes (for in patients)	30 minutes	2 working days	2 working days, 1 hour and 38 minutes 2 working days, 1 hour and 8 minutes



3. Availment of Special Diagnostic Radiology Procedures

The Department of Radiology offers special diagnostic examinations like contrast radiography, mammography, ultrasonography, computed tomography and magnetic resonance imaging. Special diagnostic examinations are available from Monday to Friday except holidays, 8:00 am to 5:00 pm, except for emergency cases.

OFFICE OR DIVISION:		Department of Radiology		
CLASSIFICATION:		Complex		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-patients and Out-patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Hospital Record ID (Green Card) • Radiology Request Form (1 original copy) • Charge Slip (1 original copy) • Official Receipt (1 original copy) For CT, Ultrasound, and MRI only <ul style="list-style-type: none"> • Patient Schedule Slip (1 original copy) For special/ contrast procedures: (1 original copy) <ul style="list-style-type: none"> • BUN and Creatinine Lab Result • Contrast Consent Form If BUN and creatinine are elevated: (1 original copy) <ul style="list-style-type: none"> • Nephrology Clearance CT scan, MRI, and contrast x-ray procedures: (1 original copy) <ul style="list-style-type: none"> • Contrast Media • Various Medical Supplies 		<ul style="list-style-type: none"> • Out-patient department – HIMS • Attending physician • Department of Radiology • Cashier <ul style="list-style-type: none"> • Department of Radiology • Laboratory • Department of Radiology <ul style="list-style-type: none"> • Attending physician <ul style="list-style-type: none"> • Pharmacy • CSR 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled-out request form at the reception area	1. 1. Verifies radiology request form	None	1 minute	Radiologic Technologist I Department of Radiology
	1.2. Informs and explains to the client the diagnostic procedure and the necessary preparations (if applicable)	None	3 minutes	
	1.3. Issues charge slip (OPD only)*	Refer to Table 1 for the Schedule of fees	1 minute	Radiologic Technologist I Department of Radiology
	1.4. Issues prescription (contrast exams only)		1 minute	



	<p>1.5. Advises client to pay at the cashier and return to the Radiology Department once settled (for OPD only).</p> <p>1.6. Advises client to secure prescribed contrast and other materials and return to Radiology department once completed (for contrast exams only)</p>	<p>Refer to Table 1 for the Schedule of fees</p> <p>None</p>	<p>1 minute</p> <p>1 minute</p>	<p><i>Radiologic Technologist I</i> Department of Radiology</p> <p><i>Radiologic Technologist I</i> Department of Radiology</p>
<p>2. Pays required fee at cashier and receives official receipt</p> <p>Note: Make sure to get official receipt</p>	<p>2. Collects required fees and issues official receipt</p>	<p>Refer to Table 1 for the Schedule of fees</p>	<p>30 minutes</p>	<p><i>Administrative Officer I</i> Located at Main Cashier's Office (11:30 am – 10:00 pm)</p>
<p>3. Proceeds to Pharmacy and CSSR to secure contrast media and other prescribed materials</p>	<p>3. Issues contrast and other prescribed materials</p>	<p>None</p>	<p>1 hour</p>	<p><i>Pharmacist</i> Pharmacy Nursing Attendant CSSR</p>
<p>4. Proceeds back to Radiology and presents official receipt of payment.</p>	<p>4. 1.Receives the request with attached charge slip, verifies official receipt and indicates the O.R. number on the request form.</p> <p>4.2 Records the patient's name, hospital record number, and O.R. number in the scheduling logbook and issues schedule slip (date and time of the procedure)</p>	<p>None</p> <p>None</p>	<p>1 minute</p> <p>1 minute</p>	<p><i>Radiologic Technologist I</i> Department of Radiology</p> <p><i>Radiologic Technologist I</i> Department of Radiology</p>



	4.4. For contrast procedure, instruct client to bring contrast media and other prescribed materials on the day of scheduled procedure.	None	1 minute	<i>Radiologic Technologist I</i> Department of Radiology
5. Receives instruction when to come back for the performance of procedure.	5. Gives instruction to the patient on the scheduled date of procedure.	None	5 minutes	<i>Radiologic Technologist I</i> Department of Radiology
6. Undergoes the procedure as scheduled	6.1 Performs special diagnostic procedure on patient and evaluates image quality 6.2 Immediately informs requesting physician for highly significant findings	None	Refer to Table 1 for procedure time	<i>Radiologic Technologist I – Radiologic Technologist III</i> Department of Radiology
7. Receives instructions on the availability of official result/s.	7. Advises client to claim the result/s.	None	Refer to Table 1 for issuance of result	<i>Radiologic Technologist I</i> Department of Radiology
8. Presents official receipt and acknowledges receipt of result/s.	8. Issues official result and requests patient to sign in the releasing logbook.	None	30 minutes	<i>Administrative Aide</i> Department of Radiology
	TOTAL FEES: Fees vary per procedure, refer to Table 1. Complex Procedures		TOTAL TIME: For out-patients: 2 hours and 16 minutes plus Procedure time and release of result For In-patients: 1 hour and 42 minutes plus Procedure time and release of result For non-contrast exams: 42 minutes plus Procedure time and release of result (Refer to Table 1. Complex Procedures)	



Table 1. Complex Procedures

PROCEDURES	FEES (in PHP)	READER'S FEE (for PAY patient's ony)	PROCESSING TIME	PROCE DURE TIME	RELEASE OF OFFICIAL RESULT	TOTAL PROCESSING TIME
A. SPECIAL RADIOGRAPHY (X-RAY CONTRAST STUDIES)						
Fistulagram	850.00	100.00	2 hours 16 minutes (for out- patients)	1 hour	5 working days	5 working days, 3 hours, 16 minutes (for out- patients)
▪ Colonogram ▪ Cholangiogram	900.00	100.00				
▪ Barium Swallow ▪ KUB – IVP ▪ Sialogram	1,100.00	100.00				
▪ Barium Enema ▪ Upper Gastro Intestinal Series	1,500.00	100.00	1 hour 41 minutes (for in patients)			5 working days, 2 hours, 41 minutes (for in patients)
B. MAMMOGRAPHY						
Mammogram	1,000.00	500.00	1 hour 15 minutes (for out patients) 41 minutes (for in patients)	30 minutes	5 working days	5 working days, 1 hour, 45 minutes (for out patients) 5 working days, 1 hour, 11 minutes (for in patients)
C. COMPUTED TOMOGRAPHY SCAN						
▪ Cranial ▪ IAC / Temporal ▪ Mandible ▪ Maxillofacial / PNS ▪ Orbit ▪ Larynx ▪ Nasopharynx ▪ Oropharynx	4,000.00	1000.00	2 hours 16 minutes (for out patients)	1 hour	7 working days	7 working days, 3 hours, 16 minutes (for out patients)
▪ Facial 3D ▪ Chest/ HR Chest ▪ Neck / Cervical ▪ Upper Abdomen Lower Abdomen ▪ Extremities Long ▪ Extremities Short	4,500.00	1000.00	1 hour 42 minutes (for in patients)			7 working days, 2 hours, 42 minutes (for in patients)
▪ Pelvis 3D / Hip ▪ Stonogram	5,500.00	1000.00				7 working days, 1 hours, 11



Angiogram / Whole Spine	7,500.00	1000.00	41 minutes(for non contrast exams)			minutes(for non contrast exams)
Whole Abdomen	8,000.00	1000.00				
FAST	1,500.00	500.00				
Others	500.00	500.00				



Department of Rehabilitation Medicine

External Services



1. Availment of Physical/Occupational Therapy and Rehabilitation Medicine Service

Rehabilitation Medicine Department provides medical consultation and physical/occupational therapy for out-patients and in-patients. Rehabilitation services are available daily 8:00 am to 5:00 pm except Sunday and during holidays.

OFFICE OR DIVISION:	Department of Rehabilitation Medicine/Medical Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Out-Patients and In-Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Hospital Record ID (Greencard) Referral Form (1 original copy) Charge Slip (1 original copy) Treatment Schedule Slip (1 original copy) Official Receipt (1 original copy) 		<ul style="list-style-type: none"> Out Patient Department -HIMS Out Patient Department /Ward and Other Referring Physician Rehabilitation Medicine Department Rehabilitation Medicine Department Cashier 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents the documents	1.Receives patients' documents	None	1 minute	<i>Physical Therapist</i> Rehabilitation Medicine Department
If OUT-PATIENTS <ul style="list-style-type: none"> Gives Hospital Record ID (Green card) 	If Out-patients: Register patients in the logbook and fills-out personal data in the consultation form	None	3 minutes	<i>Physical Therapist</i> Rehabilitation Medicine Department
If IN-PATIENTS <ul style="list-style-type: none"> Gives consent for rehab medicine referral 	If In-patients: Receives inpatients referral 1.3 Informs Physiatrist of the referral	None	1 minute	<i>Physical Therapist</i> Rehabilitation Medicine Department
2. Undergo medical consultation	2. Conducts medical consultation/bedside rounds and prescribes rehabilitation management	None	30 minutes	<i>Physiatrist</i> Rehabilitation Medicine Department
3. If OUT-PATIENTS:	3. If OUT-PATIENT: Issues treatment schedule slip and	None	5 minutes	<i>Physical Therapist</i>



<ul style="list-style-type: none"> Receives treatment schedule slip and charge slip <p>If IN-PATIENTS:</p> <ul style="list-style-type: none"> Receives instruction on treatment schedule 	<p>charge slip and directs patient to pay the fees to the cashier and go back after payment</p> <p>If IN-PATIENT: Gives instruction to patient</p>			Rehabilitation Medicine Department
<p>4. Pays required fee at cashier and receives official receipt</p> <p>Note: Make sure to get official receipt</p>	<p>4. Collect required fees and issues Official Receipts</p> <p>IF IN-PATIENT: Charges at HOMIS PT Fee after treatment.</p> <p>IF OUT-PATIENT: Charges the user's fee and PT Fee after treatment.</p>	<p>Physical Therapy (PT) Fee PHP 450.00</p> <p>User's Fee PHP 50.00 and PT Fee PHP 450.00</p>	<p>5 minutes</p> <p>30 minutes</p>	<p><i>Administrative Officer I</i> Located at Main Cashier Office (11:30am-10:00pm)</p> <p><i>Administrative Officer I</i> Located at Main Cashier Office (11:30am-10:00pm)</p>
<p>5. Presents the official receipt to the Physical Therapist</p>	<p>5. Receives and records the official receipt number</p>	<p>None</p>	<p>5 minutes</p>	<p><i>Physical Therapist</i> Rehabilitation Medicine Department</p>
<p>6. Undergo physical/occupational therapy</p>	<p>6. Conducts PT/OT treatment</p>	<p>None</p>	<p>1 hour and 30 minutes.</p>	<p><i>Physical Occupational Therapist</i> Rehabilitation Medicine Department</p>
<p>TOTAL FEES:</p> <p>IF IN-PATIENT: Physical Therapy Fee-PHP 450.00</p> <p>IF OUT-PATIENT: User's Fee - PHP 50.00 Physical Therapy Fee-PHP 450.00 Total if out-patient PHP 500.00</p>		<p>TOTAL TIME:</p> <p>IF IN-PATIENT: 2 hours and 15 minutes</p> <p>IF OUT-PATIENT: 2 hours and 45 minutes</p>		



Department of Surgery

Internal Services



1. Processing of Incoming and Outgoing Communications

Surgery Office receives and process documents and records of employees (Doctors and Staff) including trainees, students, and other stakeholders who would want to avail the hospital services, specifically on Medical. Surgery Office services are available from Monday to Friday, 8:00am to 5:00pm, no offices during Saturday, Sunday and Holidays.

OFFICE OR DIVISION:	Surgery Office			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government /G2B – Government to Business			
WHO MAY AVAIL:	Employees / Trainees/ School/ other private and government agencies			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Letter of intent (1 original copy)		From interested party		
Documents/ records for processing		From interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
2. Submits documents/ records/Communications to the receiving personnel	2.1. Receives documents/reco rds/communications	None	5 minutes	<i>Administrative Assistant I / Admin Aide II</i> (Surgery Office)
	2.2. Sorts and classifies the documents/reco rds/ Communications Accordingly	None	5 minutes	<i>Administrative Assistant I / Admin Aide II</i> (Surgery Office)
	2.3. Reviews important documents/reco rds/ Communications	None	15 minutes	<i>Administrative Assistant. I /Chairman</i> (Surgery Office)
	2.4. Reviews/signs/ approves Documents, records/ communications	None	4 hours	<i>Chairman</i> (Surgery Office)
	2.5. Facilitates forwarding of documents with department chairman	None	10 minutes	<i>Administrative Assistant I / Admin Aide II</i> (Surgery Office)



	<p>comments to concerned unit/area within set deadlines</p> <p>2.6. Registers outgoing documents, records and communications to logbook</p>	None	5 minutes	Administrative Assistant I / Admin Aide II (Surgery Office)
3. Receives signed/acted upon documents/records/communications.	3. Conveys the documents/records/Communications accordingly	None	20 minutes	Administrative Assistant I / Admin Aide II (Surgery Office)
	TOTAL FEES: None		TOTAL TIME: 5 hours	



Emergency Care Services

External Services



1. Process on Receiving Patient at Emergency Room

Every patient is important. However to have a better service, all patients will be TRIAGE to prioritize patient's needing immediate attention, management and treatment, NOT "First come, First Serve".

OFFICE OR DIVISION:	Emergency Department			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Patient			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<input type="checkbox"/> Hospital record ID (Green Card)(1 original copy) <input type="checkbox"/> Referral Letter (Optional)(1 original copy) <input type="checkbox"/> Identification Card(Optional) <input type="checkbox"/> Emergency Room Record (1 original copy) <input type="checkbox"/> Doctor's Admitting order for Elective Admission (1 original copy)		➤ Admitting Section ➤ BMC-OPD, Healthcare Facility (Private or Government) ➤ Issuing agencies ➤ Triage at emergency room ➤ BMC-OPD/Private Doctor		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Informs the Triage officer regarding patients' chief complaints. Signs Consent for Treatment and Procedure	1. TRIAGE ASSESSMENT 1.1. Performs initial assessment. -Interview patient/relatives -Obtain vital signs 1.2. Secure Consent. 1.3 Assign patients according to Emergency Department service. 1.4 Transport immediately to acute care area.	None	2 minutes	Triage Officer Emergency Room
			1 minute	Nursing Attendant Emergency Room
			1 minutes	Nursing Attendant Emergency Room
			1 minute	Nursing Attendant Emergency Room
2. Fills-up Patient Data information Sheet. Present green card if with previous record	2. PATIENT PROFILING 2.1 Interview patients/relatives for data verification. 2.2 Register patients to iHOMIS.	None	6 minutes	Admitting Clerk Admitting Section
		None	2 minutes	Admitting Clerk Admitting Section



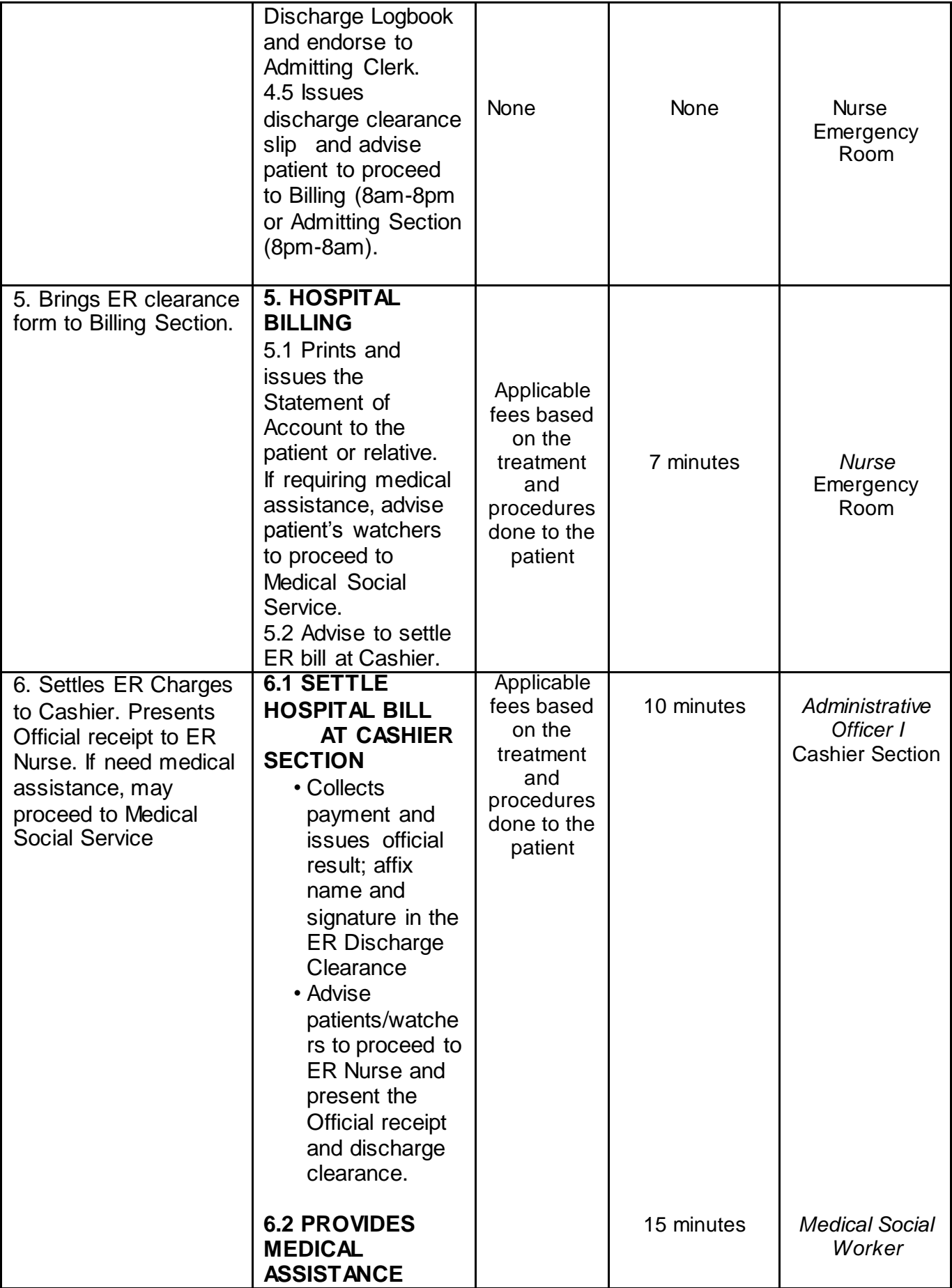
	2.3 Prints and release ER record and green card.	None	2 minutes	Admitting Clerk Admitting Section
3. Submits for assessment, medical treatment and procedure	3. EMERGENCY CARE MANAGEMENT-ASSESSMENT, PLAN & IMPLEMENTATION OF CARE 3.1 Thorough assessment and patient's history taking. 3.2 Performs emergency medical/ surgical procedures. 3.3 Requests Laboratory and Diagnostic work-ups. 3.4 Refers patient if necessary. 3.5 Performs nursing care procedure 3.6 Documents necessary findings, management, treatment and procedure done.	Applicable fees for procedure, medicines and supplies vary. It will be included in the Hospital Bill and available at the Triage, Laboratory and Radiologic Department (refer to table of fees)	20 minutes 20 minutes 20 minutes 20 minutes 20 minutes 20 minutes	Doctor/Nurses Emergency Room Doctor Emergency Room Doctor Emergency Room Nurses Emergency Room Nurses Emergency Room Doctor/Nurses Emergency Room
4. Understands doctor's explanation regarding plan of treatment. Signs Consent for admission	4. FINAL DISPOSITION if patient is for admission 4.1 Re-assessment and correlation of laboratory and diagnostic results with clinical findings and communicate plans, plan of treatment and make an admission orders. 4.2 Carry out doctor's order and document necessary	None None	15 minutes 15 minutes	Doctor Emergency Room Nurse Emergency Room



	<p>observations and nursing care procedures.</p> <p>4.3 Charge necessary medicines/ supplies used and procedure done.</p> <p>4.4 Forwards admission slip to admitting unit.</p>	None	5 minutes	<i>Nurse/Nursing Attendant</i> Emergency Room
		None	5 minutes	<i>Nurse</i> Emergency Room
5. Receives Watcher's ID	<p>5. ENCODING OF DIAGNOSIS TO iHOMIS</p> <p>5.1 Encodes admitting diagnosis and prints clinical cover sheet, bed tag, wrist tag and Watcher's ID.</p> <p>5.2 Endorses top sheet to Medical Social Service.</p>	None	5 minutes	<i>Admitting Clerk</i> Admitting Section
		None	5 minutes	<i>Admitting Clerk</i> Admitting Section
6. Submits for interview of Medical Social Worker.	<p>6. PATIENT'S CLASSIFICATION</p> <p>6.1 Demographic profiling thru interview.</p> <p>6.2 Check Philhealth eligibility.</p> <p>6.3 Refer to Philhealth Section if necessary.</p> <p>6.4 Endorse Top Sheet to Nurse on Duty.</p>	None	24 minutes for every patient	<i>Medical Social Worker</i> Admitting Section
7. Accompanies patient in transporting to nursing units/wards.	<p>7. TRANSPORT PATIENT TO WARD</p> <p>7.1 Ensures completeness of patient's charts and document in the Admitting Logbook.</p> <p>7.2 Endorses patient thru telephone once documents are complete.</p>	None	5 minutes	
		None	5 minutes	<i>Nurse</i> Emergency Room
		None	10 minutes	<i>Nurse</i> Emergency Room



	7.3 Validates for the completeness of patient's chart. 7.4 Transport patient safely to wards.	None None	5 minutes 5 minutes	Nurse Supervisor Nurse/ Nursing Attendant/ Admin. Aide.
IF patient will be discharged, please follow steps 1-3.				
4. Understands doctor's explanation regarding plan of treatment. Signs Consent for admission	4. FINAL DISPOSITION if patient will be discharge. 4.1 Re-assessment and correlation of laboratory and diagnostic results (if available) with clinical findings and communicate plans. 4.2 Discharges patients with the following instruction: ✓ <i>Home medication;</i> ✓ <i>Further laboratory and diagnostic tests;</i> ✓ <i>Follow-up check-ups at Out Patient Department;</i> ✓ <i>Diet, if necessary</i> ✓ <i>Special instructions if applicable</i> 4.3 Carry out discharge order, reinforces discharge instructions and charge necessary medicines/ supplies used and procedure done at the iHOMIS. 4.4 Ensure completeness of ER records and document in the	None	1 hour	Doctor Emergency Room Doctor Emergency Room Nurse Emergency Room Nurse Emergency Room Nurse Emergency Room





	through MAF or assists in the signing of Promissory. <i>Note: If requiring medical assistance.</i>			
7. Patient is discharged.	7. DISCHARGING PATIENTS <ul style="list-style-type: none"> Releases patient once patients'/ relatives presented official receipt or Billing statement with remarks of the Medical Social Service. 	None	12 minutes	Nurse/ Nursing Attendant/ Watchman on Duty
	TOTAL FEES: Fees vary on the case of patient condition (refer to ER Procedure Price List) (procedure x amount)		TOTAL TIME: 3 hours and 59 minutes (if patient is admitted) 3 hours and 59 minutes (if patient is for discharged)	

ER Procedure Price List

PROCEDURE	AMOUNT
Admission Kit	PHP 220.00
Amputation/Disarticulation	PHP 400.00
Bandaging	PHP 50.00
BP Taking	PHP 10.00
BT Insertion	PHP 30.00
BT Removal	PHP 10.00
Cadaver Bag	PHP 700.00
Cardiac Monitor	PHP 300.00
Casting, Boot Cast	PHP 250.00
Long Arm Circular	PHP 250.00
Long leg Circular	PHP 250.00
Long Arm Mold	PHP 250.00
PTB	PHP 250.00
Monsler	PHP 200.00
Short Arm Mold	PHP 200.00
Short leg circular	PHP 250.00
Short leg mold	PHP 200.00
Sugar Tong Mold	PHP 300.00
U-Mold	PHP 250.00



Catherization (Package)	PHP 120.00
PROCEDURE	AMOUNT
Catherization (Procedure)	PHP 50.00
CBG	PHP 50.00
CPR	PHP 100.00
CTT Insertion	PHP 960.00
Cutdown	PHP 560.00
CVP Line Insertion	PHP 560.00
Debridement	PHP 250.00
Defibrillator	PHP 400.00
ER Fee (Non-Office hours)	PHP 150.00
ER Fee (Office hours)	PHP 100.00
Extubation	PHP 20.00
Gastric Lavage	PHP 120.00
IC Insertion	PHP 120.00
IC Removal	PHP 10.00
IM Injection	PHP 10.00
Incision and drainage	PHP 120.00
Insulin Injection	PHP 20.00
Intubation (Adult)	PHP 1,060.00
Intubation (Pedia)	PHP 1,810.00
IVF Insertion	PHP 10.00
IVF Insertion Package	PHP 40.00
IVF Removal	PHP 10.00
V/S Monitor	PHP 300.00
Nebulization	PHP 50.00
NGT Insertion	PHP 120.00
NGT Feeding	PHP 25.00
NGT Removal	PHP 20.00
Nursing Care Procedure	PHP 350.00
O2 Saturation	PHP 25.00
OGT Insertion	PHP 120.00
Oral Care	PHP 50.00
Paracentesis	PHP 560.00
RBS (Monitoring)	PHP 10.00
Removal of Cast	PHP 100.00
Removal of Foreign body	PHP 150.00
Removal of suture	PHP 50.00
Removal Long leg cast	PHP 200.00
Removal PTB	PHP 150.00
Skin Testing	PHP 30.00
SQ Injection	PHP 10.00
Suctioning	PHP 100.00
Thoracentesis	PHP 560.00
Tracheostomy Care	PHP 100.00



PROCEDURE	AMOUNT
Charge of Gown	PHP 20.00
Charge of Linen	PHP 50.00
Closed Tube Procedure	PHP 400.00
Dressing	PHP 65.00
ECG	PHP 220.00
ET Suctioning	PHP 120.00
I & O Monitoring	PHP 10.00
Splinting (L)	PHP 270.00
Splinting (M)	PHP 220.00
Splinting (S)	PHP 170.00
Suturing (L)	PHP 200.00
Suturing (M)	PHP 150.00
Suturing (Multiple)	PHP 500.00
Vital Signs	PHP 20.00
NVS	PHP 30.00



Engineering and Facilities Management Section

External Services



1. Securing of Permit to Work (for Contractor/Sub-contractor/ Supplier/Third Party Service Provider)

Permit to work is one of the requirements before a winning contractor/subcontractor/ supplier/third party service provider can commence with their construction works/ activities. It is the Center's control point to monitor the ingress and egress of the Center's various counterparts inside the its premises. The said permit to work shall be secured at Engineering and Facilities Management Section (EFMS) office and is open from 8AM to 5PM from Mondays to Fridays..

OFFICE OR DIVISION:		Engineering and Facilities Management Section (EFMS)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		Contractors/Sub-contractors/ Suppliers/Third Party Service Providers		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Accomplished Permit to Work Form (2 original copies)			-EFMS Office	
2. Notarized Contract/Purchase Order/Approved Request (1 original copy)			-Procurement Section/Concerned End User	
3. Letter of Introduction (if subcontractor) (1 original copy)			-Main Contractor/Third Party Service Provider	
4. Medical Certificate (if applicable) (1 original copy)			-Accredited Health Facilities	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents accomplished Permit to Work form along with other requirements.	1.1.Checks and validates the requirements.	None	5 Minutes	<i>Administrative Assistant</i> (EFMS Office)
	1.2.Signs and recommends for approval.	None	3 Minutes	<i>Engineer IV</i> (EFMS Office)
	1.3.Instructs to proceed to Chief Administrative Officer's Office (CAO). (4 th Floor ER and Diagnostic Complex Bldg.)	None	3 Minutes	<i>Administrative Assistant</i> (EFMS Office)
2. Proceeds to Chief Administrative Officer's Office (4 th Floor ER and Diagnostic Complex Bldg.)	2.1.Approves the Permit to Work Form.	None	10 Minutes	<i>Chief Administrative Officer</i> (CAO Office)
	2.2.Instructs to go back to EFMS Office to submit the	None	3 Minutes	<i>Administrative Assistant</i>



	duplicate copy of the approved Permit to Work Form.			(CAO Office)
3. Proceeds to EFMS Office.	3.1.Retains the duplicate copy of the approved Permit to Work Form for future use/reference.	None	2 Minutes	<i>Administrative Assistant</i> (EFMS Office)
	3.2.Instructs to proceed to Security Unit for short briefing.	None	2 Minutes	<i>Administrative Assistant</i> (EFMS Office)
	TOTAL FEES: None		TOTAL TIME: 28 minutes	



Health Emergency Management Bureau External Services



1. Process on the Use of Ambulance

Ambulance service is used to transport patient to other hospital or facility to undergo diagnostic procedure or to transfer patient to other hospital. Ambulance is available daily 24/7.

OFFICE OR DIVISION:	Health Emergency Management Bureau			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Out-patient/In-patient			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ol style="list-style-type: none"> 1. Duly filled-in Request for Use of Vehicle Form. (1 original copy) 2. Laboratory results required for diagnostic procedure to be done. (1 original copy) 3. Referral Letter (1 original copy) 4. Ambulance charge slip (1 original copy) 5. Receipt of payment for use of ambulance (1 original copy) 		ER Nurse-on-duty/ Clinical ward where the patient is confined/ or at the Information Desk Laboratory Attending Physician Motor pool Cashier section		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
<ol style="list-style-type: none"> 1. Bring the duly accomplished Request for Use of Vehicle Form at the Maintenance Section (Motor pool) and look for the dispatcher. <p>Note: during Sat/ Sun & Holidays & after office hours (5 pm onwards) Bring the duly accomplished Request for Use of Vehicle Form at the HEMS op cen.</p>	<ol style="list-style-type: none"> 1. Reviews the request for ambulance and issues charge slip 	None	10 minutes	Dispatcher/ EOD Motor pool/ HEMS
<ol style="list-style-type: none"> 2. Pays to the Cashier 	<ol style="list-style-type: none"> 2. Issues official receipt. 	PHP 450.00	5 minutes	Administrative Officer / Cashier Section
<ol style="list-style-type: none"> 3. Presents official receipt to the dispatcher/ EOD 	<ol style="list-style-type: none"> 3.1 Records official receipt to the logbook and 	None	2 minutes	Dispatcher/ EOD Motor pool/ HEMS



	assigns driver for the ambulance. 3.2 Instructs client to wait in the ward, dispatcher/EOD will inform the ward once ambulance is ready.	None	3 minutes	<i>Dispatcher/ EOD</i> Motor pool/ HEMS
4. Waits for the call of the dispatcher/ EOD at the ward.	5. Wheels patient to the motor pool, assists patient , placed comfortably inside the ambulance	None	5 minutes	<i>Nursing Attendant</i> Clinical ward
	TOTAL FEES: PHP 450.00		TOTAL TIME: 25 minutes	



Health Information Management Section

External Services



1. Processing of Certificate of Live Birth (COLB)

Certificate of Live Birth (COLB), Municipal Form No. 102, Revised August 2016) is the prescribed form by the Philippine Statistics Authority (PSA) used for the declaration of facts and circumstances surrounding the birth of a person for purposes of registration. Health Information Management Section (HIMS) is in charge in the processing of COLB. HIMS office is open daily, Mondays thru Fridays from 8 am to 5 pm.

OFFICE OR DIVISION:	Department of OB Gyne/ Health Information Management Section/Medical Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C-Government to Citizen			
WHO MAY AVAIL:	Parent of child or authorized representative			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Certificate of Live Birth Pre Form (1 original copy)		OB Complex		
2. Original Certificate of Live Birth Form (4 original copies)		OB Complex		
3. Valid Identification Card (refer to below list of valid ID's per PSA MC No. 2019-16, June 11, 2019) (1 original copy)		Interested party		
4. Authorization letter from Parent (1 original copy)		Interested party		
5. Affidavit of Mother to Use the Surname of the Father and Acknowledgment of Paternity (in cases of illegitimate births) (1 original copy)		Window 1 HIMS, 2 nd floor OPD Building, BMC		
6. PSA Certification (negative result) for late registration (1 original copy)		Window 1 HIMS, 2 nd floor OPD Building, BMC		
		Philippine Statistics Authority (PSA)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Provides data needed for the completion of Birth Certificate	OB COMPLEX: 1.Interviews patient after delivery	None	5 minutes	Midwife OB Complex
2. Reads all entries at the Pre Form. Signs the pre form and the original copies of Birth Certificate	2.1. Ensures the completeness and accuracy of the Pre –Form.	None	5 minutes	Midwife OB Complex
	2.2. Instructs mother to sign the Pre Form and original copy of Birth Certificate. Once accomplished, let	None	18 minutes	Nurse 1 Medical Officer OB Complex



	the Resident on Duty sign the form 2.3. Submits the accomplished Pre Form and original Birth Certificate to HIMS office.	None	1 hour & 32 minutes	Administrative Assistant OB Complex
3.Fills out Request Form and secures queuing number in Window 2	<u>MEDICAL RECORDS SECTION (HIMS):</u> 3.Provides Request Form	None	5 minutes	Administrative Assistant HIMS
4.Waits for queuing number to be called /shown in TV monitor	4.Directs client to Waiting Area	None	1 minute	Administrative Assistant HIMS
5.Submits required documents for verification	5.1. Verifies submitted requirements, establishes identity of requesting party/client	None	3 minutes (for legitimate births)	Administrative Assistant HIMS
	5.2.Advises client when to be back to claim reconstructed COLB Release of reconstructed COLB: 7 working days	None	10 minutes (for illegitimate births)	Administrative Assistant HIMS
6.Receives Charge Slip and pays at Cashier	6.1.issues Charge Slip	PHP50.00 (livebirths within 30 days from date of occurrence) PHP 100.00 (COLB reconstruction)	1 minute	Administrative Assistant HIMS
	6.2.Transcribes COLB	None	15 minutes	Administrative Assistant HIMS
	6.3.Reviews COLB	None	1 minute	
7.Presents Official Receipt at Window 2	7.1.Verifies OR and indicates OR	None	4 minutes	Administrative Assistant HIMS



	number in COLB Pre-form 7.2. Records in Logbook and advises client on registration procedure	None	1 minute	<i>Administrative Assistant HIMS</i>
	TOTAL FEES: PHP 50.00 (livebirth within 30 days from date of occurrence) PHP 100.00 (COLB Reconstruction Fee)		TOTAL TIME: 1 hour & 59 minutes (legitimate live births) 2 hours & 10 minutes (illegitimate live births) Release of Reconstructed COLB: 7 Working days	

LIST OF VALID ID'S PER PSA MC No. 2019-16, June 11, 2019:

- Philippine Passport issued by the Department of Foreign Affairs (DFA)
- Driver's License issued by the Land Transportation Office (LTO)
- Professional Regulations Commission (PRC) ID
- Integrated Bar of the Philippines (IBP ID)
- Government Service Insurance System (GSIS) Unified Multi-Purpose ID/eCard
- Social Security System (SSS) Unified Multi-Purpose ID
- Home Development Mutual Fund (Pag-IBIG) Transaction/Loyalty Card
- Voter's ID issued by the Commission on Elections (COMELEC)
- Postal ID issued by the Philippine Postal Corporation (PhilPost)
- Senior Citizen's ID Card issued by the Office of Senior Citizens Affairs (OSCA) and/or Local Government Unit (LGUs)
- OFW ID issued by the Department of Labor and Employment (DOLE)
- Overseas Workers Welfare Administration (OWWA) ID
- Seaman's/Seawoman's Book issued by the Maritime Industry Authority (MARINA)
- Diploma/Consular ID issued by the Philippine Embassy
- National Bureau of Investigation (NBI) Clearance
- Philippine National Police (PNP) ID/Police Clearance
- Department of Social Welfare and Development (DSWD) Certification/4P'S id
- Barangay ID/Certification with picture and signature
- Person with Disability (PWD) ID issued by the National Council on Disability Affairs (NCDA) or its regional counterpart, Office of the Mayor, Office of the Barangay Captain. DSWD Office and other participating organization with Memorandum of Agreement with the Department of Health (DOH)
- IDs issued by National Government Offices (e.g. AFP, DAR, DENR, DOH, DOJ) including Government Owned and Controlled Corporations (GOCCSs)
- IDs issued by the Offices of the Local Chief Executives (Governor, Vice Governor, Mayor and Vice Mayor)



- Tax Identification Card (TIN) with picture and signature issued by the Bureau of Internal Revenue
- School/Student ID for currently-enrolled student, 18 years old and above, issued by reputable schools/colleges/universities recognized by the Department of Education (DepEd) or Commission on Higher Education (CHED) signed by the principal or head of the academic institution
- Company Ids issued by private entities or institutions registered with supervised or regulated by the Bangko Sentral ng Pilipinas (BSP), Securities and Exchange Commission (SEC) or Insurance Commission (IC)
- For foreign nationals, passport issued by foreign governments AND any of the following:
 - Alien Certification of Registration (ACR I-card)
 - Immigrant Certificate of Registration
 - Special Resident Retiree Visa issued by the Bureau of Immigration through the Philippine Retirement Authority



2. Processing of Certificate of Death (COD)

Certificate of Death (Municipal Form No. 103, Revised August 2016) is a record of vital information on the identity of the deceased. Records of patient who died in the hospital shall be processed at the Health Information Management Section (HIMS). HIMS office is open from Mondays thru Fridays, 8 am to 5 pm.

OFFICE OR DIVISION:	Medical Division/Nursing Division/ HIMS			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Next-of-kin of the deceased, authorized representative of next of kin			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Valid Identification Card/Identity Documents (PSA MC No. 2019-16 June 11, 2019) (refer to below list of valid ID's per PSA MC No. 2019-16, June 11, 2019) (1 original copy)		Interested party/ client		
2. Marriage Certificate/certificate of Live Birth, if applicable(to establish relationship with the deceased) (1 original copy)		Interested party/ client		
3. PSA Certification (negative result) for late registration (1 original copy)		Philippine Statistics Authority (PSA)		
4. Duly settled Statement of Account of the deceased (1 original copy)		BMC Billing Section		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Waits for further instruction	WARD:			
	1.1. Pronounces Death of the Patient	None	5 minutes	Attending Physician/Consulting Physician Ward/ER
	1.2. Renders Post mortem Care	None	25 minutes	Nurse on Duty/ Nursing Attendant Ward/ER
2. Waits for further instruction	2. Fills up the Pre-form and encodes the Final Diagnosis of the Deceased Patient in IHOMIS	None	16 hours	Attending Physician/Consulting Physician Ward/ER
	2.1 Accomplishes the Discharge Summary and CF4	None		
	2.2 Signs the Death Certificate	None		
3. Provides Pertinent information for	3. Interviews the Parents/Relatives	None	30 minutes	Nurse on Duty/ Nursing Attendant Ward/ER



processing of the document	/Next-of-Kin of the Deceased Patient 3.1 Verifies the details of the Deceased Patient written in the medical chart	None	20 minutes	<i>Nurse on Duty/ Nursing Attendant Ward/ER</i>
4. Signs the Death Certificate	4. Signs the Death Certificate	None	10 minutes	<i>Nurse on Duty/Nursing Attendant/Midwife Next-of-kin Ward/ER</i>
5. Waits for the Ward-to-morgue slip or clearance	5.1 Encodes or transcribes hospital charges including medicines and equipment/procedures done to the deceased patient	None	30 minutes	<i>Nurse on Duty/Nursing Attendant ward</i>
	5.2 Issues ward to morgue slip or clearance to the relative/ next of kin	None	None	<i>Nurse on Duty/Nursing Attendant/ Midwife Ward</i>
	5.3. Forwards the complete/accomplished medical chart to Medical Records Section (HIMS)	None	30 minutes	<i>Nurse on Duty/Nursing Attendant/ Midwife ward</i>
6. Fills out Request Form and secures queuing number from table 3	HIMS: 6. Provides Request Form	None	2 minutes	<i>Administrative Assistant II HIMS</i>
7. Wait for queuing number to be called	7.Directs client to Waiting Area	None	None	<i>Administrative Assistant II HIMS</i>
8.Submits required documents for verification	8. Verifies submitted requirements, establishes identity of requesting party.	None	2 minutes	<i>Administrative Assistant II HIMS</i>
	8.1 Transcribes the Certificate of Death	None	2 minutes	<i>Administrative Assistant II HIMS</i>
	8.2 Reviews the Certificate of Death	None	10 minutes	<i>HIMS Head HIMS</i>



9. Acknowledges receipt of Certificate of Death (COD)	9. Instructs client to sign in the logbook and COD Pre-form 9.1 Releases 3 copies of COD	None	4 minutes	Administrative Assistant II HIMS
	TOTAL FEES: None		TOTAL TIME: 18 hours and 30 minutes (WARD) 20 minutes (HIMS)	

LIST OF VALID ID'S PER PSA MC No. 2019-16, June 11, 2019:

- Philippine Passport issued by the Department of Foreign Affairs (DFA)
- Driver's License issued by the Land Transportation Office (LTO)
- Professional Regulations Commission (PRC) ID
- Integrated Bar of the Philippines (IBP ID)
- Government Service Insurance System (GSIS) Unified Multi-Purpose ID/eCard
- Social Security System (SSS) Unified Multi-Purpose ID
- Home Development Mutual Fund (Pag-IBIG) Transaction/Loyalty Card
- Voter's ID issued by the Commission on Elections (COMELEC)
- Postal ID issued by the Philippine Postal Corporation (PhilPost)
- Senior Citizen's ID Card issued by the Office of Senior Citizens Affairs (OSCA) and/or Local Government Unit (LGUs)
- OFW ID issued by the Department of Labor and Employment (DOLE)
- Overseas Workers Welfare Administration (OWWA) ID
- Seaman's/Seawoman's Book issued by the Maritime Industry Authority (MARINA)
- Diploma/Consular ID issued by the Philippine Embassy
- National Bureau of Investigation (NBI) Clearance
- Philippine National Police (PNP) ID/Police Clearance
- Department of Social Welfare and Development (DSWD) Certification/4P'S id
- Barangay ID/Certification with picture and signature
- Person with Disability (PWD) ID issued by the National Council on Disability Affairs (NCDA) or its regional counterpart, Office of the Mayor, Office of the Barangay Captain. DSWD Office and other participating organization with Memorandum of Agreement with the Department of Health (DOH)
- IDs issued by National Government Offices (e.g. AFP, DAR, DENR, DOH, DOJ) including Government Owned and Controlled Corporations (GOCCs)
- IDs issued by the Offices of the Local Chief Executives (Governor, Vice Governor, Mayor and Vice Mayor)
- Tax Identification Card (TIN) with picture and signature issued by the Bureau of Internal Revenue
- School/Student ID for currently-enrolled student, 18 years old and above, issued by reputable schools/colleges/universities recognized by the



Department of Education (DepEd) or Commission on Higher Education (CHED) signed by the principal or head of the academic institution

- Company Ids issued by private entities or institutions registered with supervised or regulated by the Bangko Sentral ng Pilipinas (BSP), Securities and Exchange Commission (SEC) or Insurance Commission (IC)
- For foreign nationals, passport issued by foreign governments AND any of the following:
 - Alien Certification of Registration (ACR I-card)
 - Immigrant Certificate of Registration
 - Special Resident Retiree Visa issued by the Bureau of Immigration through the Philippine Retirement Authority



3. Release of Medical Certificate and Medico-Legal Certificate

Medical certificate is a document which is issued when the patient is already discharged, and contains the patient diagnosis, bears the hospital seal and signature of the Attending Physician.

Services are available Mondays thru Fridays 8:00 am to 5:00 pm.

OFFICE OR DIVISION:		Health Information Management Section (HIMS)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C- Government to Citizen		
WHO MAY AVAIL:		Patient/authorized representative		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Valid Identification Card/Identity Documents (PSA MC No. 2019-16, June 11, 2019) (refer to below list of valid ID's per PSA MC No. 2019-16, June 11, 2019)			Interested party/Client	
2. Authorization letter from Patient (if applicable) (1 original copy)			Interested party/client	
3. Discharge Summary or any proof of confinement/consultation in this hospital (1 original copy)			Interested party/client	
4. Insurance/SSS/GSIS forms (original copy)			GSIS, SSS	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Fills out Request Form and secures queuing number	1. Provides Request Form	None	2 minutes	Administrative Officer //Administrative Assistant I Health Information Management Section
2. Waits for the number to be called /shown in the TV monitor	2. Directs client to Waiting Area	None	15 minutes	Administrative Officer //Administrative Assistant I Health Information Management Section
3. Submits required documents for verification	3.1 Verifies submitted requirements, establishes identity of requesting party.	None	4 minutes	Administrative Officer //Administrative Assistant I Health Information Management Section
	3.2 Advises client when to be back for	None	<u>Release of certificate:</u>	



	the requested documents/record		Medical Certificate-3days	
	3.3 Process the requested Medical Certificate/records	None	30 minutes (OPD)	<i>Administrative Officer I/Administrative Assistant I Health Information Mangement Section</i>
	3.4 Process requests for Certified photocopies of laboratory/diagnostic results, Operating Room record discharged from February 2020 to present	None	5 minutes	<i>Administrative Officer I/Administrative Assistant I Health Information Mangement Section</i>
	3.5 Forwards the certificate to the Physician In charge	None	None	
4. Goes home, receives instruction when to come back to claim the certificate	4.1 Receives and signs the Medical Certificate	None	5 minutes	<i>Medical Officer III Ward</i>
	4.2 Collects the Accomplished Medical Certificate	None	5 minutes	<i>Administrative Officer I/Administrative Assistant I Health Information Mangement Section</i>
5. Proceeds back to HIMS (Window 1), receives Charge Slip and pays at Cashier	5.1 Issues Charge Slip	PHP 50 Med. Cert Non ML	1 minute	<i>Administrative Officer I/Administrative Assistant I Health Information Mangement Section</i>
	5.2 Collects payment, issues official receipt	PHP 100 ML Med Cert./ Insurance Claims PHP 150 Out-patient (Industrial Clinic)	5 minutes	<i>Administrative Officer I Cashier located at ground floor OPD building</i>



6. Presents Official Receipt to Window 1; Acknowledges receipt of Medical Certificate	6.1 Verifies OR and records OR Number in duplicate copy of Medical/Medico-Legal certificate	None	4 minutes	Administrative Officer I/Administrative Assistant I Health Information Management Section
	6.2 Records in logbook	None	1 minute	Administrative Officer I/Administrative Assistant I Health Information Management Section
		TOTAL FEES: PHP 50.00 - Medical Certificate, (non-Medico-Legal), PHP 100.00 – Medico-Legal Medical Certificate PHP150.00 - Out-Patient (Industrial Clinic)		TOTAL TIME: <u>Processing time:</u> 3 days –Medical Certificates 57 minutes – OPD 27 minutes – Certified photocopies of Operating Room record, Laboratory/Diagnostic Results (Discharged from February 2020 to present)

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- Driver's License issued by the Land Transportation Office (LTO)
- Professional Regulations Commission (PRC) ID
- Integrated Bar of the Philippines (IBP ID)
- Government Service Insurance System (GSIS) Unified Multi-Purpose ID/eCard
- Social Security System (SSS) Unified Multi-Purpose ID
- Home Development Mutual Fund (Pag-IBIG) Transaction/Loyalty Card
- Voter's ID issued by the Commission on Elections (COMELEC)
- Postal ID issued by the Philippine Postal Corporation (PhilPost)
- Senior Citizen's ID Card issued by the Office of Senior Citizens Affairs (OSCA) and/or Local Government Unit (LGUs)
- OFW ID issued by the Department of Labor and Employment (DOLE)
- Overseas Workers Welfare Administration (OWWA) ID
- Seaman's/Seawoman's Book issued by the Maritime Industry Authority (MARINA)
- Diploma/Consular ID issued by the Philippine Embassy
- National Bureau of Investigation (NBI) Clearance
- Philippine National Police (PNP) ID/Police Clearance
- Department of Social Welfare and Development (DSWD) Certification/4P'S id



- Barangay ID/Certification with picture and signature
- Person with Disability (PWD) ID issued by the National Council on Disability Affairs (NCDA) or its regional counterpart, Office of the Mayor, Office of the Barangay Captain. DSWD Office and other participating organization with Memorandum of Agreement with the Department of Health (DOH)
- IDs issued by National Government Offices (e.g. AFP, DAR, DENR, DOH, DOJ) including Government Owned and Controlled Corporations (GOCCSs)
- IDs issued by the Offices of the Local Chief Executives (Governor, Vice Governor, Mayor and Vice Mayor)
- Tax Identification Card (TIN) with picture and signature issued by the Bureau of Internal Revenue
- School/Student ID for currently-enrolled student, 18 years old and above, issued by reputable schools/colleges/universities recognized by the Department of Education (DepEd) or Commission on Higher Education (CHED) signed by the principal or head of the academic institution
- Company IDs issued by private entities or institutions registered with supervised or regulated by the Bangko Sentral ng Pilipinas (BSP), Securities and Exchange Commission (SEC) or Insurance Commission (IC)
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 - Immigrant Certificate of Registration
 - Special Resident Retiree Visa issued by the Bureau of Immigration through the Philippine Retirement Authority



HIV/AIDS Core Team (HACT) Office External Services



1. Availment of HIV Screening

The testing for Human Immunodeficiency Virus (HIV) is being done with the observance of confidentiality to all clients who want to be screened voluntarily. For non-pregnant clients, the said service is provided to non-pregnant and admitted clients from Mondays to Fridays from 8:00am to 5:00pm at the HACT Office. On the other hand, walk-in and outpatient pregnant clients can avail only every Mondays, Wednesdays and Fridays from 8:00am-5:00pm.

OFFICE OR DIVISION:		HIV/AIDS CORE TEAM (HACT) OFFICE		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In patients/ Out patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> For Admitted Clients - Referral Letter (1 original copy) For Outpatients - Referral Letter or Lab Request (1 original copy) 		Attending Physician Attending Physician		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. For outpatient or walk-in: inquires at HACT Office and presents referral letter.	1.1 Receives the referral letter or request.	None	5 minutes (if outpatient or walk-in)	HACT Medical Specialist HACT Nurse II Medical Officer HACT Office
For inpatients: to be visited at the area of confinement upon the receipt of referral of HACT Nurse from Attending Physician.	1.2 Visits the patient at the area of confinement and coordinates with the attending physician.	None	10 minutes (if admitted)	HACT Medical Specialist HACT Nurse II Medical Officer HACT Office
2. Undergoes pre-test counselling, signs informed consent and fills-up Personal Information Sheet.	2.1 Conducts pre-test counselling to the client which includes provision of basic information regarding the HIV/AIDS (cause, risk factors, modes of transmission and course of illness, testing and its possible results, and the usual treatment); as well	None	20 minutes	HACT Nurse II HACT Office



	<p>as, emotional support.</p> <p>2.2 Assists the client in signing the informed consent as well as in accomplishing the Personal Information Sheet. For clients less than 15 years old, unconscious or disoriented, it is the nearest kin who will sign the consent.</p>	None	20 minutes	HACT Nurse II HACT Office
3. Undertakes HIV antibody testing.	<p>3.1 Presents to the Medical Technologist the coded laboratory request.</p> <p>3.2 Extracts blood specimen from the client.</p>	None	10 minutes	HACT Nurse II Laboratory HACT Medical Technologist Laboratory
4. Receives instructions on when to return for the result.	4. Instructs client on what time to return for the result; and, emphasizes the need to take note of their assigned code as this will be the guide to facilitate the release of their result.	None	4 hours (from the time the specimen is obtained until the release of result)	HACT Nurse II HACT Office
5. Receives the official result and undergoes post-test counselling.	5.1 For OPD and walk-in clients, the HACT nurse releases the result to the client only at the counselling room. Those who are admitted, results are personally given at the area where	None	10 minutes (if w/ non-reactive result)	HACT Medical Specialist HACT Nurse HACT Office



	<p>they are confined with observance of confidentiality.</p> <p>5.2 Conducts post-test counselling to the client which includes interpretation of results, establishing of emotional support and discussion of the next necessary healthcare steps. For clients screened with reactive result, linkage to treatment is emphasized.</p>	None	40 minutes (if w/ reactive result)	<p><i>HACT Medical Specialist</i></p> <p><i>HACT Nurse</i></p> <p><i>HACT Office</i></p>
	TOTAL FEES: None		TOTAL TIME: 5 hours and 40 minutes	



Human Resource Management Office External Services



1. Procedure on the Submission of Application for Employment Documents

Application for vacant positions is open to anyone provided that they meet the qualifications required for the job. Vacant positions are posted at the Bicol Medical Center BMC Bulletin Board, CSC Website (Bulletin of Vacant Positions), and official BMC-HRMS Facebook page. Applications must be submitted to the HRMS office.

Operating hours: Monday to Friday excluding holidays; 8 hours (8:00 am to 5:00 pm) without noon break

OFFICE OR DIVISION:	Human Resource Management Office (HRMO)			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government / G2C – Government to Citizen			
WHO MAY AVAIL:	Job Applicants and BMC employees			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Checklist of Requirements Form (1 copy) • Application Letter address to: Medical Center Chief • Duly Accomplished Personal Data Sheet (PDS) (original copy) • NBI Clearance, if available (original copy) • Certificate of Employment/Service Record, for transferee (original copy) • Certified True Photocopy by the issuing Agency/School/Universities of the following: <ul style="list-style-type: none"> - Diploma, Transcript of Records TOR) - Trainings/Seminars attended, if required - PRC license (I.D. & Report of Rating, Civil Service Eligibility, whichever is applicable - Latest Performance rating (at least Very Satisfactory), for promotion 		HRMO Interested party Interested party National Bureau of Investigation Previous Employer Agency/Schools/Universities attended		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Fills out the Checklist of Requirements Form.	1. Gives the Checklist of Requirements Form to the client.	None	10 minutes	<i>Administrative Assistant II</i> HRMO



2. Submits Checklist of Requirements Form and application documents	2. Receives and reviews completeness of application documents as per checklist. If found incomplete: Returns documents to applicant and informs applicant of the deficiency/ies for compliance	None	15 minutes	<i>Administrative Assistant II</i> HRMO
3. Waits for advice/notice on the status of the application documents.	3. Conducts initial evaluation based on the established qualification standards. If qualified: Receives application documents If not qualified: Returns documents to applicant and informs applicant of the reason/s thereof	None	15 minutes	<i>Administrative Assistant II</i> HRMO
4. Signs on the Applicant's Logbook.	4. Signs the checklist to certify completeness and qualification.	None	5 minutes	<i>Administrative Assistant II</i> HRMO
TOTAL FEES: None		TOTAL TIME: 45 minutes		



Human Resource Management Office Internal Services



1. Procedure on Application for Leave of Absence

In general, appointive officers and employees of the government whether permanent or temporary who render work during the prescribed office hours shall be entitled to 15 days vacation and 15 days sick leave annually with full pay, exclusive of Saturdays, Sundays and public holidays, without limitations as to the number of days of vacation and sick leave that they may accumulate. (Omnibus Rules Implementing Book V of EO No. 292 and other Pertinent Civil Service Laws)

Vacation leave shall be filed at least 5 days before the effective date of leave. For sick leave, the application shall be filed immediately upon the employee's resumption to work.

Operating hours: Monday to Friday excluding holidays; 8 hours (8:00 am to 5:00 pm) without noon break.

OFFICE OR DIVISION:	Human Resource Management Office (HRMO)
CLASSIFICATION:	Simple
TYPE OF TRANSACTION:	G2G – Government to Government
WHO MAY AVAIL:	All BMC employees holding plantilla position
CHECKLIST OF REQUIREMENTS	
WHERE TO SECURE	
1.) Leave Application Form (CSC Form No. 6) (1 HRM Copy, 1 DTR Attachment copy, 1 Employee's Copy)	HRM Office
2.) Documentary Requirements per type of leave applied: For Sick leave: <ul style="list-style-type: none"> ▪ Notice of Absence (1 original copy) ▪ If SL of: <ul style="list-style-type: none"> ○ 5 days or more <ul style="list-style-type: none"> ▪ Medical Certificate and Fit to Work Status (1 original, 1 photocopy) ○ 30 days or more <ul style="list-style-type: none"> ▪ Medical Certificate and Fit to Work Status (1 original, 1 photocopy) ▪ Clearance (1 original copy) For Maternity Leave: <ul style="list-style-type: none"> ▪ Medical Certificate (1 original, 1 photocopy) ▪ 30 days prior to delivery- Letter Notice approved by the Head of Agency ▪ Clearance (1 original copy) For Paternity Leave:	BMC employee Attending Physician HRM Office Attending Physician Requesting party HRM Office Requesting party



<ul style="list-style-type: none"> ▪ Letter notice to allocate 7 days issued by the female worker approved by the Head of Agency ▪ Medical Certificate of spouse (1 original, 1 photocopy) ▪ Marriage Certificate (photocopy) ▪ Birth Certificate of Child (1 original, 1 photocopy) <p>For Solo Parent Leave:</p> <ul style="list-style-type: none"> ▪ Solo Parent ID or Certificate from DSWD (1 original, 1 photocopy) <p>For Travel Abroad:</p> <ul style="list-style-type: none"> ▪ Letter of intent to travel approved by the Head of Agency ▪ Request for Issuance of Travel Authority ▪ Travel Authority Form (3 original copies) ▪ Clearance <p>For Rehabilitation Leave: (for wounds and/or injuries sustained while in the performance of official duties)</p> <ul style="list-style-type: none"> ▪ Medical Certificate (1 original, 1 photocopy) ▪ Letter of intent to avail rehabilitation leave addressed to the Head of Agency ▪ Approved Incident Report or Police Report (1 original, 1 photocopy) ▪ Approved Hospital Order/Department Order/Travel Order for Official Business or Official Time) (1 original, 1 photocopy) ▪ If 30 days or more: <ul style="list-style-type: none"> ○ Clearance (1 original copy) <p>For Study Leave: (coordinate with the Professional Education Training and Research Unit (PETRU))</p> <ul style="list-style-type: none"> ▪ Letter of intent to avail study leave ▪ Latest Service Record (1 original copy) ▪ Individual Performance Commitment and Review (IPCR) Form for the last 2 rating periods with at least Very Satisfactory Rating (1 Certified True Copy of each rating period) 	<p>Attending Physician</p> <p>Philippine Statistics Authority (PSA) Local Civil Registrar</p> <p>Department of Social Welfare and Development (DSWD)</p> <p>Requesting party</p> <p>HRM Office</p> <p>HRM Office and DOH Regional Office</p> <p>HRM Office</p> <p>Attending Physician</p> <p>Requesting Party</p> <p>Requesting Party/Agency/Philippine National Police (PNP)</p> <p>Requesting Party/Agency</p> <p>HRM Office</p> <p>Employee concerned HRM Office</p> <p>Employee concerned</p> <p>Employee concerned/School attended</p>
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<ul style="list-style-type: none"> ▪ School certification to wit: (1 original copy) <ul style="list-style-type: none"> ○ For Bachelor's Degree – qualified for Board/Bar Examination ○ Completion for Master's Degree ○ Completion for Doctoral Degree ▪ Certificate of No Pending Administrative and/or Criminal Case/Court clearance (1 original copy) ▪ Certificate of No Current Foreign or Local Scholarship Grant (1 original Copy) ▪ Clearance (4 original copies) <p>For Special Leave Privilege for Women (RA 9710):</p> <ul style="list-style-type: none"> ▪ Medical Certificate (1 original Copy) ▪ Clinical Summary (1 original Copy) ▪ Operative Technique (1 original Copy) ▪ Pre-operative Record (1 original Copy) ▪ Histopathological Report (1 original Copy) ▪ Clearance (4 copies) <p>For Ten (10) day Leave under RA 9262 (Anti-Violence Against Women and their Children Act of 2004):</p> <ul style="list-style-type: none"> ▪ Barangay Protection Order (1 original) ▪ Temporary/permanent protection order from the court, if available (1 original) ▪ If the court order is not yet issued/available: <ul style="list-style-type: none"> ○ Certification issued by the Punong Barangay/Kagawad or Prosecutor/Clerk of Court that application has been filed (1 original) ○ A Police Blotter specifying the details of the violence and medical certificate (1 original) 	<p>Chief Administrative Office/City Trial Court</p> <p>Employee concerned/HRM Office</p> <p>HRM Office</p> <p>Attending Physician</p> <p>HRM Office</p> <p>Requesting Party</p> <p>Court/ Requesting Party</p> <p>Barangay/ Requesting Party</p> <p>Philippine National Police/ Requesting Party</p>
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<p>For Calamity Leave (Special Emergency Leave):</p> <ul style="list-style-type: none"> ▪ Copy of the Declaration of State of Calamity ▪ In case of no declaration but was severely affected by calamity, Head of agency may grant the leave base on Proof of Evidence presented <p>For Terminal Leave:</p> <ul style="list-style-type: none"> ▪ Clearance (6 copies) ▪ GSIS Clearance (6 copies) ▪ Court Clearance (1 original copy) ▪ Declaration of Pendency/Non-pendency of Case (1 original copy) ▪ Philippine Veterans Bank Clearance, if applicable (1 original copy) ▪ Landbank Clearance (1 original copy) ▪ Affidavit (No Administrative/Criminal Case Filed) (1 original copy) ▪ Statement of Assets and Liabilities (SALN) (1 original copy) ▪ Latest Appointment (1 photocopy) ▪ Service Record (6 copies) ▪ Application for Terminal Leave (6 copies) ▪ Daily Time Record (DTR) (original copy) ▪ Notice of One step salary increase- for compulsory retirees (1 original copy) 		<p>National/Local declaration</p> <p>Requesting Party</p> <p>HRM Office GSIS Office Court</p> <p>Philippine Veterans Bank, Naga Branch</p> <p>Landbank Rotunda Branch Requesting Party</p> <p>Requesting Party Requesting Party HRM Office HRM Office Requesting Party</p> <p>Requesting Party</p> <p>HRM Office</p>		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Applies for leave and presents required document/s for the specific type of leave	1. Receives and validates the document/s presented.	None	10 minutes	<i>Administrative Assistant II</i> HRMO
	1.1 Checks and verifies leave credits. 1.1.1 If employee has no leave credit balance, informs the employee that he/she cannot avail the desired leave	None	40 minutes	<i>Administrative Assistant II</i> HRMO



	<p>1.1.2 If employee has sufficient leave credit balance, encodes application for leave on HRIS Leave Module System.</p> <p>1.2 Prints Application for Leave Form (CSC Form No. 6) in triplicate copies. (HRM copy, Employee's copy and DTR Attachment)</p>	<p>None</p> <p>None</p>	<p>None</p> <p>5 minutes</p>	<p><i>Administrative Assistant II</i> HRMO</p> <p><i>Administrative Assistant II</i> HRMO</p>
2. Receives and signs the printed Application for Leave Forms.	2.Issues printed Application for Leave Forms, requests employee to sign the form and advises employee to present it to the HR head for certification of leave credits	None	5 minutes	<i>Administrative Assistant II</i> HRMO
3. Presents the signed Application for Leave Forms to the HRM Head	3.Signs and certifies on the correctness of the accrued leave credits of the employee.	None	3 hours	<i>Supervising Administrative Officer</i> HRMO
4. Receives and routes leave application forms for recommendation and approval of authorized officials	4.Releases certified Application for Leave Forms to employee for recommendation and approval of authorized officials	None	2 minutes	<i>Administrative Assistant II</i> HRMO



Note: Approved “HRMO copy” of the Application for Leave form must be submitted to HRMO prior the effective date of leave.				
	TOTAL FEES: None		TOTAL TIME: 4 hours & 2 minutes	



2. Processing of Request for Certificate of Employment (COE) and Service Record (SR)

The Human Resource Management Office provides services to all employees related to their employment records. Aside from the usual safekeeping of 201 files function, the office also offers services such as issuance of service records and certificate of employment.

Operating hours: Monday to Friday excluding holidays; 8 hours (8:00 am to 5:00 pm) without noon break.

OFFICE OR DIVISION:	Human Resource Management Office (HRMO)			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government / G2C – Government to Citizen			
WHO MAY AVAIL:	BMC Employees, Government Service Insurance System (GSIS)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> ➤ Request for Issuance of Personnel Document Form (BMC-F-ADM/HRM-015) ➤ For Certificate of Employment with Compensation/ Net-take-home Pay <ul style="list-style-type: none"> ○ Latest Payslip (1 photocopy) ➤ If to be claimed by a representative: <ul style="list-style-type: none"> ○ Authorization letter ○ ID of employee (1 photocopy) and ID of authorized representative (original copy) 		HRMO BMC Employee BMC Employee/Representative		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Fills out request form	1. Gives request form to the client	None	2 minutes	<i>Administrative Aide II</i> HRMO
2. Submits the filled out request form	2. Receives the filled out request form and checks for its completeness. Advises client on the date of release of requested record.	None	2 minutes	<i>Administrative Officer II</i> HRMO
	2.1 Registers in the Issued Personnel Documents Logbook.(BMC-LB-ADM/HRM)	None	1 minute	<i>Administrative Officer II</i> HRMO



	2.2 Retrieves personnel record from file room.	None	2 hours	Administrative Assistant II HRMO
	2.3 Receives, evaluates and encodes record data of employee.	None	4 hours	Administrative Officer II HRMO
	2.4 Prints the certificate and submits to HRMO head for signature	None	2 minutes	Administrative Officer II HRMO
	2.5 Checks, signs and certifies the correctness of the entries in the certificate	None	1 day	Supervising Administrative Officer (SAO) HRMO
	2.6 Submits the requested document to the Chief Administrative Officer for approval.	None	20 minutes	Administrative Aide II HRMO
	2.7 Approves and signs the document	None	1 day	Chief Administrative Officer (CAO) (CAO's Office located at 4 th floor New ER Building)
	2.8 Returns approved document to HRMO for release.	None	20 minutes	Administrative Aide II CAO's Office
2. Claims COE/SR at HRMO within the specified processing time. Signs the logbook to acknowledge receipt of requested document.	3. Issues the approved requested COE/SR and requests client to sign the logbook.	None	3 minutes	Administrative Aide II HRMO
	TOTAL FEES: None		TOTAL TIME: 2 days, 6 hours & 50 minutes	



Infection Control Unit Internal Services



1. Management of Needlestick Injury and Blood/Body Fluid Exposure

All personnel (permanent, contractual and trainees) who have been pricked accidentally by used sharps or needles and/or have been exposed to blood/body fluids are being given with proper counselling, assisted for necessary laboratory screening and being referred to other offices, if necessary. The said services are being provided Mondays to Fridays from 8:00am-5:00pm at the office mentioned below.

OFFICE OR DIVISION:		Infection Control Unit		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government/ G2B – Government to Business		
WHO MAY AVAIL:		Healthcare Workers (Permanent, Job-Order and Trainees)		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
None			Not Applicable	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Reports the incident to the Infection Control Nurse.	1. Provides the client with necessary report forms (Needlestick Injury Report Form or Blood and Body Fluid Exposure Report Form) and assists client in answering the questions.	None	10 minutes	<i>Infection Control Nurse</i> Infection Control Unit
2. Undergoes further interview and counselling regarding blood borne infections, vaccination and other infection control protocols.	2.1 Interviews client with regards to when and how the needlestick injury and blood/body fluid exposure happened in order to obtain the specific details of the event; determines vaccination history.	None	15 minutes	<i>Infection Control Nurse</i> Infection Control Unit
	2.2 Assesses knowledge on bloodborne diseases and infection control;	None	10 minutes	<i>Infection Control Nurse</i> Infection Control Unit



	and, provides relevant information on such.			
3. Undertakes screening through review of his previous laboratory results or taking recent tests.	3. Conducts screening by reviewing his previous laboratory results if available (e.g Hepatitis B Surface Antigen–HBsAg, Hepatitis B Surface Antibody- anti-HBs, HIV Antibody Test etc) or by assisting the client in taking new tests.	None	15 minutes (If review of previous laboratory results only) 4 hours (if to undergo screening tests)	<i>Infection Control Nurse</i> Infection Control Unit
4. Presents laboratory results to Infection Control Nurse	4.1 Relays to the Infection Control Unit Physician the laboratory results for proper interpretation. 4.2 conducts counselling and endorses the client to other health clinics if needed such as Occupational Health Clinic for vaccination.	None None	10 minutes 15 minutes	<i>Infection Control Unit Physician</i> Infection Control Unit <i>Infection Control Nurse</i> Infection Control Unit
	TOTAL FEES: None		TOTAL TIME: 5 hours	



Integrated Hospital Operation Management Unit

Internal Services



1. Procedure on Providing Technical Assistance Regarding Information and Communication Technology and Hospital Information System Issues (Simple)

The process of attending to requests for assistance by way of troubleshooting computer hardware and software, local area network and and hospital information system issues to resolve which greatly affects the user's output.

IHOMP Office is open daily 8am to 5pm Monday to Friday and 9am to 5pm during Saturday, Sunday and Holidays.

OFFICE OR DIVISION:		Integrated Hospital Operation Management Unit		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		End-Users, Offices, Cost Centers, Wards		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Request via phone call, messenger, sms or personal appearance.			End-User	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Inform IHOMP of the request via phone call, messenger, sms or personal appearance.	1.1 Gathers required information regarding the technical issue	None	5 minutes	Computer Maintenance Technologist III/II, Administrative Assistant I/II IHOMP Office
	1.2 Input details into ICT Service Request ticketing system 1.3 Performs troubleshooting the equipment or device with technical issue may be done remotely or via phone, messenger or SMS	None	5 minutes	Computer Maintenance Technologist II or III Administrative Assistant I/II IHOMP Office
2. Sign the ICT Service Report form and check the necessary client satisfaction survey	2. Documenting the resolved issue for reference and record of IHOMP. Close the ticket on the ICT Service Report System	None	2 minutes	Computer Maintenance Technologist II or III Administrative Assistant I/II IHOMP Office
TOTAL FEES: None			TOTAL TIME: 12 minutes	



2. Procedure on Providing Technical Assistance Regarding Information and Communication Technology and Hospital Information System Issues (Complex)

The process of attending to requests for assistance by way of troubleshooting computer hardware and software, local area network and hospital information system issues to resolve which greatly affects the user's output.

IHOMP Office is open daily 8am to 5pm Monday to Friday and 9am to 5pm during Saturday, Sunday and Holidays.

OFFICE OR DIVISION:		Integrated Hospital Operation Management Unit		
CLASSIFICATION:		Complex		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		End-Users, Offices, Cost Centers, Wards		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Request via phone call, messenger, sms or personal appearance.			End-User	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Inform IHOMP of the request via phone call, messenger, sms or personal appearance.	1.1 Gathers required information regarding the technical issue 1.2 Input details into ICT Service Request ticketing system	None	5 minutes	Computer Maintenance Technologist III/II, Administrative Assistant I/II IHOMP Office
	1.3 Performs troubleshooting the equipment or device with technical issue may be done remotely or via phone, messenger or SMS If not resolved: visit the office of the requesting party If not resolved: pull-out the equipment/device to IHOMP	None	7 days	Computer Maintenance Technologist III/II, Administrative Assistant II IHOMP Office



2. Sign the ICT Service Report form and check the necessary client satisfaction survey	2. Documenting the resolved issue for reference and record of IHOMP. Close the ticket on the ICT Service Report System	None	2 minutes	<i>Computer Maintenance Technologist III/II, Administrative Assistant I/II</i> IHOMP Office
	TOTAL FEES: None		TOTAL TIME: 7 days and 7 minutes	



3. Procedure on Providing Technical Assistance Regarding Information and Communication Technology and Hospital Information System Issues (Highly Technical)

The process of attending to requests for assistance by way of troubleshooting computer hardware and software, local area network and hospital information system issues to resolve which greatly affects the user's output.

IHOMP Office is open daily 8am to 5pm Monday to Friday and 9am to 5pm during Saturday, Sunday and Holidays.

OFFICE OR DIVISION:		Integrated Hospital Operation Management Unit		
CLASSIFICATION:		Highly Technical		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		End-Users, Offices, Cost Centers, Wards		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Request via phone call, messenger, sms or personal appearance.			End-User	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Inform IHOMP of the request via phone call, messenger, sms or personal appearance.	1.1 Gathers required information regarding the technical issue 1.2 Input details into ICT Service Request ticketing system	None	5 minutes	Computer Maintenance Technologist III/II, Administrative Assistant I/II IHOMP Office
	1.3 Performs troubleshooting the equipment or device with technical issue may be done remotely or via phone, messenger or SMS If not resolved: visit the office of the requesting party <ul style="list-style-type: none"> If not resolved: pull-out the equipment/device to IHOMP Purchase of spare parts 	None	20 days	Computer Maintenance Technologist III/II, Administrative Assistant II IHOMP Office



	needed for repairs			
2. Sign the ICT Service Report form and check the necessary client satisfaction survey	2. Documenting the resolved issue for reference and record of IHOMP. Close the ticket on the ICT Service Report System	None	2 minutes	<i>Computer Maintenance Technologist III/II, Administrative Assistant I/II IHOMP Office</i>
	TOTAL FEES: None		TOTAL TIME: 20 days and 7 minutes	



Intensive Care Unit External Services



1. Patients' Admission/Transfer at ICU Complex

The process starts upon doctor's advise that patients requires comprehensive care, with serious medical, gynecological, general surgical condition including those recovering from trauma to meet each patient's critical needs. It serves as a place for the intensive monitoring and care of patients with moderate or potentially severe physiologic instability requiring specialized treatment and management. ICU COMPLEX Services are available 24/7.

OFFICE OR DIVISION:	Intensive Care Unit (ICU) Complex			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Patients needing acute/critical care and intensive monitoring.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Doctors order (1 original copy) Consent for ICU Admission (1 original copy) List of medical supplies needed in the ICU (1 original copy) Decking Logbook (if applicable)		ER/WARD ICU COMPLEX ICU COMPLEX ICU COMPLEX		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Receives notification from the doctor and agree on admission/ transfer to ICU.	1.1. Informs patients'/ watchers' necessity of admissions to ICU.	None	2 minutes	Medical Officer ER/Ward
	1.2. Coordinates with the doctor's ICU rotator for patient's admission or transfer.	None	5 minutes	Nurse I/ Nurse II ER/Ward
	1.3. Determines room vacancy.	None	3 minutes	Nurse I/ Nurse II ER/Ward
	<u>If With vacant room:</u> Advise patient's watcher to proceed to ICU Complex			



	for orientation. <u>If No vacant room:</u> Facilitates decking.			
2. Proceeds to ICU Complex for orientation once with vacant room.	2. Orients watcher and explains thoroughly ICU policies and procedures.	None	30 minutes	<i>Nurse II ICU</i>
3. Signs Consent for ICU Admission and receives list of required supplies needed by the patients.	3.1. Obtain Consent for ICU admission.	None	5 minutes	<i>Nurse II ICU</i>
	3.2. Advise watcher's to secure immediately required supplies.	None	25 minutes	<i>Nurse II ICU</i>
4. Secures necessary supplies and endorse to ICU nurse.	4.1. Checks for completeness and receives required supplies.	None	10 minutes	<i>Nurse II ICU</i>
	4.2. Prepares bed and equipment.	None	20 minutes	<i>Nurse II ICU</i>
5. Accompany patient to ICU Complex.	5. Receives patient's endorsement, transfer patients safely and attach the necessary equipment base on the illness.	None	30 minutes	<i>Nurse II ICU</i>
	TOTAL FEES: None		TOTAL TIME: 2 hours and 10 minutes	

❖ **Applicable hospital charges but not limited to the following:**

- (1) Number of days of ICU confinement
- (2) Laboratory and diagnostic tests
- (3) Equipment/machines used.
- (4) Procedures/operations done to patient



Materials Management Section

External Services



1. Procedure on Receiving Deliveries

Materials Management Section receives deliveries from Suppliers, Donors and other Government Agencies, Monday to Friday except during holidays, from 8:00 a.m. to 5:00 p.m.

OFFICE OR DIVISION:	Materials Management Section			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen G2B – Government to Business G2G – Government to Government			
WHO MAY AVAIL:	Supplier with valid Contract Agreement, Purchase Order, Approved Donation by the MCC and Property Transfer Report of other Government Agencies			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Delivery Receipt, Charge Invoice / Sales Invoice / Acknowledgment Receipt (original copy) Valid CPR and Batch Certificate for Drugs and Medicine (original copy) Other requirements stated in the Contract Agreement and Purchase Order upon delivery Approved Donation (original copy) Property Transfer Report from other Government Agencies (original copy) 		Concerned Suppliers		
		Concerned Suppliers		
		Concerned Suppliers		
		Donors Other government agencies		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits the required documents to receiving clerk	1. Receives the required documents and check for completeness	None	5 minutes	Administrative Assistant Materials Management Section
	1.1 Forwards the received documents to warehouseman	None	1 minute	
2. Proceeds to warehouse receiving area for the deliveries	2. Receives deliveries and checks quantity and conformance to specifications	None	30 minutes	Warehouseman Materials Management Section
	2.1 Signs in the receive portion of the delivery documents	None	1 minute	



3. Receives Copy of Delivery Receipt, Charge Invoice / Sales Invoice/ Acknowledgment Receipt	3. Forwards Acknowledged Copy of Delivery Receipt, Charge Invoice / Sales Invoice / Acknowledgment Receipt and other delivery documents to Administrative Assistant	None	10 minutes	Warehouseman Materials Management Section
	TOTAL FEES: None		TOTAL TIME: 47 minutes	



Materials Management Section

Internal Services



1. Issuance of Supplies and Materials

Materials Management Section issues supplies and materials to BMC Units/ Offices with complete and properly filled out Requisition and Issue slip. The office provides services daily from 8 am to 5 pm except Saturday, Sunday and holidays.

OFFICE OR DIVISION:		Materials Management Section		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		BMC employees in all offices/units		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Approved Requisition and Issue Slip (RIS) (original copy)		Online Requisition and Issue System or MMS Printing Unit (Manual Forms)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits Approved Requisition and Issue Slip to receiving clerk	1. Assigns Control Number to the R.I.S.	None	1 minute	<i>Administrative Assistant Materials Management Section</i>
	1.1 Forwards to Section Head for approval of Issuances	None	1 minute	<i>Administrative Assistant Materials Management Section</i>
	1.2 Forwards to Warehouseman for Issuances	None	1 minute	<i>Administrative Assistant Materials Management Section</i>
	1.3 Prepares supplies and materials for Issuances	None	4 hours	<i>Warehouseman Materials Management Section</i>
	1.4 Issues of Supplies and Materials requested	None	5 minutes	<i>Warehouseman Materials Management Section</i>
2. Checks and receives supplies and materials issued. Signs received by portion of the Requisition and Issue Slip	2. Signs Issued by portion of the Requisition and Issue Slip	None	10 minutes	<i>Warehouseman Materials Management Section</i>



3. Receives signed copy of Requisition and Issue Slip	3. Gives the supplier's copy of Requisition and Issue Slip	None	1 minute	<i>Warehouseman</i> Materials Management Section
	TOTAL FEES: None		TOTAL TIME: 23 minutes	



Medical Social Service Unit

External Services



1. Availment of Medical/Financial Assistance

Medical Social Services offers medical/financial assistance to patients to help attain patient's psycho-social and economic adjustment. Services are available 24/7 for ER and in-patients while Monday-Friday, 8:00am to 5:00pm only for out-patients.

OFFICE OR DIVISION:	Medical Social Service Section			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	In-patients and out-patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
IN-PATIENT: (1 original copy each) <ol style="list-style-type: none"> Hospital Record ID (Green Card) Watcher's Pass MSS Classification Slip Final Hospital Bill Discharge Summary/Medical Abstract Certificate of Indigency 		ER Admitting Section ER Admitting Section Medical Social Service Section Billing Section Attending Physician/Respective Ward Respective Barangay Office		
OUT-PATIENT: (1 original copy each) <ol style="list-style-type: none"> Hospital Record ID (Green Card) MSS Classification Slip Charge Slip/Prescription Certificate of Indigency 		Admitting Section Medical Social Service Section Attending Physician/Respective Ward Respective Barangay Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents Hospital Record ID (Green Card) (Green Card)/ Watcher's pass.	1. Receives the requirements presented and assesses the specific services needed.	None	2 minutes	Medical Social Worker Medical Social Service Section
2. Submits for interview.	2. Conducts interview and renders concrete social service or helping activities: <ul style="list-style-type: none"> Individual/Family Counselling Psycho-social Crisis Intervention Referral 	None	10 minutes	Medical Social Worker Medical Social Service Section
3. Pays attention with the orientation about hospital expenses incurred and the coverage of Medical	3.1 Orients the patient/relative about hospital expenses incurred and the preferential	None	2 minutes	Medical Social Worker Medical Social Service Section



Assistance Program and make some queries if there is any.	<p>order of charging such as:</p> <ul style="list-style-type: none"> • PhilHealth • Mandatory Discount (SC, PWD) • PCSO • DSWD • MAIP <p>3.2 Explains the coverage of the Medical Assistance Program. Motivates to prepare counterpart/share.</p>	None	3 minutes	<i>Medical Social Worker</i> Medical Social Service Section
<p>4. Receives the Medical Assistance as per endorsement made.</p> <p><i>For Service Patients:</i> Pays counterpart/share in the hospital expenses other than those charges excluded from the medical assistance</p> <p><i>For Pay Patients:</i> Pays the charges excluded from the medical assistance</p>	4.1 Grants the medical assistance endorsed by the partner helping agencies and/or MAIP proponent (PCSO, DSWD, MAIP) and assesses the capacity to pay.	None	5 minutes	<i>Medical Social Worker</i> Medical Social Service Section
5. Receives the Patient Watcher's Pass	5. Records data in the prescribed Logbook and encodes at the HOMIS and EWEBPAIS.	None	2 minutes	<i>Medical Social Worker</i> Medical Social Service Section
TOTAL FEES: None		TOTAL TIME: 25 minutes		



2. Patient Classification

Medical Social Service classifies patients to ensure their eligibility for medical social services in accordance to AO 51-A, s.2001. Patient Classification is done 24/7 for ER and in-patients while Monday-Friday, 8:00am to 5:00pm only for out-patients.

OFFICE OR DIVISION:	Medical Social Service Section			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	In-patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Hospital Record ID (Green Card) 2. Watcher's Pass (1 original copy) 3. MSS Classification Slip (1 original copy) 4. Certificate of Indigency (1 original copy)		ER Admitting Section ER Admitting Section Medical Social Service Section Respective Barangay Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents Hospital Record ID (Green Card)/ Watcher's pass	1. Receives and validates the identifications presented (thru HOMIS).	None	3 minutes	<i>Medical Social Worker</i> Medical Social Service Section
2. Provides the complete information/data needed and fill out the required form	2. Conducts interview for the new patients using MSS tool and follow-up/re-evaluation interview for the old patients. <i>For Pay Patients:</i> Orients the patient/relative regarding hospital's policies in availing Pay Services and accomplishes Consent for Admission to Payward and Obligation to Pay. Note: Interviewee should be of legal age and up to third degree of consanguinity.	None	10 minutes	<i>Medical Social Worker</i> Medical Social Service Section



3. Acknowledges and agrees of the Classification assigned to the patient	3. Assigns MSS Classification based on thorough evaluation and assessment. Encodes data at the HOMIS.	None	5 minutes	<i>Medical Social Worker</i> Medical Social Service Section
4. Seeks clarification and follows the given instructions correctly	4. Explains the MSS coverage of assistance as well as the guidelines to adhere to. Provides checklist of required documents.	None	10 minutes	<i>Medical Social Worker</i> Medical Social Service Section
5. Receives the MSS Classification Slip	5. Issues MSS Classification Slip with one-year validity period.	None	2 minutes	<i>Medical Social Worker</i> Medical Social Service Section
	TOTAL FEES: None		TOTAL TIME: 30 minutes	



3. Availment of Philhealth Point of Service (POS)

Medical Social Services offers enrollment of patients to Philhealth through Point of Service (POS) under Hospital Sponsor Membership program to avail Philhealth benefits according to the provisions of RA 10924 or the General Appropriations Act of 2017. Services are available for in-patients only from Monday-Saturday, 8:00am to 5:00pm only..

OFFICE OR DIVISION:		Medical Social Service Section		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen		
WHO MAY AVAIL:		In-patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Hospital Record ID (Green Card) 2. Watcher's Pass (1 original copy) 3. DOH Certificate of Indigence (1 original copy) 4. Duly Accomplished Philhealth Forms (1 original copy) 5. Member's Valid ID(1 original copy) 6. Birth Certificate (for minor and dependent patients) (1 original copy)		ER Admitting Section ER Admitting Section Medical Social Service Section Medical Social Service Section Interested party Interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents Hospital Record ID (Green Card)/ Watcher's pass	1. Receives the requirements presented and verifies membership through the Philhealth portal system.	None	3 minutes	Medical Social Worker Medical Social Service Section
2. Submits for interview.	2.1 Conducts intake interview and assesses financial capacity of the patient.	None	8 minutes	Medical Social Worker Medical Social Service Section
	2.2 Issues certification with corresponding DOH Classification on Indigence and instructs to fill out necessary forms and proceed to POS office.		2 minutes	Medical Social Worker Medical Social Service Section



3. Proceeds to POS office and presents the required documents.	3. Reviews correctness and completeness of the submitted requirements and records transaction at the POS Logbook.	None	2 minutes	<i>Medical Social Welfare Assistant Medical Social Service Section</i>
4. Pays attention with the orientation and make some queries if there is any.	4. Orients the patient/relative about the POS guidelines as well as the scope and limitations of the program.	None	3 minutes	<i>Medical Social Welfare Assistant Medical Social Service Section</i>
5. Receives the notice of enrollment and waits for the approval. For Financially Capable: proceeds to Philhealth main office and pays the required contribution	5.1 Enrolls the patient through online registration via Philhealth On-Site Rapid Enrolment.	None	4 minutes	<i>Medical Social Welfare Assistant Medical Social Service Section</i>
	5.2 Issues notice of enrollment to the patient/relative and instructs to wait for the approval of enrolment. 5.3 For Financially Capable: instructs to proceed to Philhealth main office and pay required contribution.	None	1 minute	<i>Medical Social Welfare Assistant Medical Social Service Section</i>
6. Follows-up status of enrollment and receives Philhealth forms with generated PIN. If disapproved, receives certificate of non-enrollment and seeks assistance for not availing Philhealth.	6. Issues generated PIN and MDR (for OB and Pedia cases with undeclared dependents) and instructs to proceed to Philhealth Processing to process philhealth claims. If disapproved, refers to Medical	None	5 minutes	<i>Medical Social Welfare Assistant Medical Social Service Section</i>



	Social Worker for necessary action/assistance and issues the certificate of non-enrollment.			
7.Proceeds to the next step.	7.Secures copy of duly accomplished forms and other records/documents and files them properly.	None	2 minutes	<i>Medical Social Welfare Assistant Medical Social Service Section</i>
	TOTAL FEES: None		TOTAL TIME: 30 minutes	



4. Availment of Malasakit Program/Services

Medical Social Services through the Malasakit Program provides medical and financial assistance through a one-stop-shop adopting a multi-sectoral and streamlined approach in addressing health and social issues of patients and their families. Services are available for out-patients and in-patients from Monday-Friday, 8:00am to 5:00pm only, except holidays.

OFFICE OR DIVISION:	Medical Social Service Section			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	In-patients and Out-patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
FOR IN-PATIENT: 1. Hospital Record ID (Green Card) 2. Watcher's Pass (1 original copy) 3. MSS Classification Slip (1 original copy) 4. Final Hospital Bill (1 original copy) 5. Discharge Summary/Clinical Abstract (1 original copy) 6. Certificate of Indigency/Eligibility (1 original copy)		ER Admitting Section ER Admitting Section Medical Social Service Section Billing Section Attending physician/Respective ward Respective Barangay Office		
FOR OUT-PATIENT: 1. BMC Health Record ID (Green Card) 2. MSS Classification Slip 3. Charge Slip/Prescription 4. Laboratory/Diagnostic Request 5. Medical Certificate 6. Certificate of Indigency		Admitting Section Medical Social Service Section Attending Physician/Respective Ward Attending Physician/Respective Ward Attending Physician/Respective Ward Respective Barangay Office		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents the required documents and submits for interview.	1. Receives the documents presented and conducts intake interview for pre-assessment of specific services needed.	None	3 minutes	Medical Social Worker Malasakit Center Triage
2. Receives the queuing number and waits for the number to be called.	2. Gives the queuing number and advises to proceed to the waiting area while waiting for his/her number to be called.	None	2 minutes	Medical Social Worker Malasakit Center Triage



<p>3. 3. Proceeds to the respective Partner Agency and presents the required documents.</p> <p>Fill out necessary forms, if any</p>	3.1.Receives the patient's green card and other required documents.	None	1 minute	<i>Philhealth Officer</i> Malasakit Center
	3.2.Reviews correctness and completeness of the submitted requirements and performs necessary action.	None	6 minutes	<i>Philhealth Officer</i> Malasakit Center
	3.3.Receives the Final Hospital Bill/Charge Slip/Prescription and other required documents.	None	8 minutes	<i>PCSO Social Worker</i> Malasakit Center
	3.4.Reviews correctness and completeness of the submitted requirements and performs necessary action.	None	7 minutes	<i>DSWD Social Worker</i> Malasakit Center
	3.5.Endorses to the next participating agency.	None	1 minute	<i>DSWD Social Worker</i> Malasakit Center
<p>4. 4. Proceeds to the Medical Social Worker and presents the required documents.</p> <p>Pays attention with the final assessment about the coverage of assistance provided by the Malasakit Center and make some queries if there is any.</p>	<p>4.1.Renders other social services or helping activities: Individual/Family Counseling Discharge Planning Psycho-social Crisis Intervention Referral, if needed</p> <p>4.2.Summarizes the financial assistance received/granted and indicates the same at the Final Hospital Bill/Charge Slip/Prescription.</p>	None	8 minutes	<i>Medical Social Worker</i> Malasakit Center



6 5. For In-Patients: Receives the signed Watcher's Pass and other documents. For Out-Patients: Receives the signed documents.	5.1.Signs for clearance and records data at the HOMIS and EWEBPAIS.	None	1 minute	<i>Medical Social Worker Malasakit Center</i>
	5.2.Files documents/require ments needed for reporting.	None	1 minute	<i>Medical Social Worker Malasakit Center</i>
6. Proceeds to the Cashier Section.	6.Receives the payment for the remaining balance and carry out clearance and necessary recordings.	None	2 minutes	<i>Administrative Officer I Cashier Section</i>
	TOTAL FEES: None		TOTAL TIME: 40 minutes	



Nutrition and Dietetics

External Services



1. Availment of Diet Counseling

Nutrition and Dietetics Service offers Diet Counseling for both employees and patients. Counseling services are available daily, 8:00 am to 5:00 pm except Saturdays/Sundays and during holidays.

OFFICE OR DIVISION:	Nutrition and Dietetics			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C- Government to Citizens/ G2G- Government to Government			
WHO MAY AVAIL:	Employees and Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
First Visit: <ul style="list-style-type: none">Physicians Referral Form with diagnosis and diet prescription (1 original copy)Latest laboratory results and anthropometric measurements, if possible (1 original copy)		Attending Physician Out-Patient Department Clinic Employees Clinic		
Second Visit: <ul style="list-style-type: none">Meal Plan (previous visit) (1 original copy)Latest laboratory results, if any				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents the Referral Form with diagnosis and diet prescription	1. Check the completeness of data	None	1 minute	Nutritionist-Dietitian II (Clinical) Nutrition and Dietetics Office
2. Submits for Nutrition Screening and Assessment	2. Conduct Nutrition Screening and Assessment:			
	2.1 Get the height and weight of the client	None	1 minute	Nutritionist-Dietitian II (Clinical) Nutrition and Dietetics Office
	2.2 Ask for the usual food intake (kind, type and amount), frequency of intake and the typical physical activity within the day.	None	10 minutes	Dietitian II (Clinical) Nutrition and Dietetics Office



	2.3 Interpret the results of the Body Mass Index (BMI), Waist-Hip Ratio (WHR) and laboratory values	None	1 minute	<i>Dietitian II (Clinical)</i> Nutrition and Dietetics Office
3. Waits for the meal plan and handouts	3. Prepare the meal plan and other handouts needed	None	5 minutes	<i>Nutritionist-Dietitian II (Clinical)</i> Nutrition and Dietetics Office
4. Receives instructions and a copy of the meal plan and/or other handouts based on the nutritional assessment done	4. Provide Diet Instruction: 4.1 Explain the results of the nutritional assessment and discuss the meal plan and other concerns	None	5 minutes	<i>Nutritionist-Dietitian II (Clinical)</i> Nutrition and Dietetics Office
	4.2 Provide a copy of the meal plan and/or handouts	None	5 minutes	<i>Nutritionist-Dietitian II (Clinical)</i> Nutrition and Dietetics Office
	4.3 Set and arrange the date for those clients who needs to follow up	None	5 minutes	<i>Nutritionist-Dietitian II (Clinical)</i> Nutrition and Dietetics Office
	4.4 Remind the client to bring the needed requirements on the next follow up visit	None	5 minutes	<i>Nutritionist-Dietitian II (Clinical)</i> Nutrition and Dietetics Office
	TOTAL FEES: None		TOTAL TIME: 38 minutes	



Out Patient Department

External Services



1. Availment of OPD Consult

Consultation of out-patients to the different clinics of Out Patient Department: Internal Medicine, Programmatic Management Drug-Resistant TB (PMDT), NTP/ TB DOTS, Sub-Specialty, Smoking Cessation, Pediatrics, Obstetrics & Gynecology, Family Planning, Teen Wellness Center/ AYRH, Orthopedics, Industrial, BMC Employees' Clinic, Senior Citizen Clinic, Integrative & Acupuncture Clinic, Ambulatory Surgical Clinic, Animal Bite Treatment Center (ABTC), Ears-Nose-Throat (ENT), Ophthalmology, Urology, Surgery, Dental, Dermatology & Phototherapy. Examination of patients, necessary treatments or procedures and follow up check up are advised to clients as needed.

All Out-Patient Department (OPD) services are available from Monday to Friday, 8:00 AM to 5:00 PM.

Triage Times are as follows:

- ☐ AM Clinics: 7:00 AM to 10:00 AM
- ☐ PM Clinics: 12:00 NN to 3:00 PM
- ☐ Whole day Clinics: 7:00 AM to 3:00 PM

Some clinics are available Saturday morning: Internal Medicine, Pedia, Gyne, Surgery, Animal Bite Treatment Center are open from 8:00 AM to 12:00 NN. Triage Time is from 7:00 AM to 10:00 AM only.

OFFICE OR DIVISION:	Out-Patient Department	
CLASSIFICATION:	Simple	
TYPE OF TRANSACTION:	G2C – Government to Citizen	
WHO MAY AVAIL:	All patients needing out-patient services	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
For Old patients: <ul style="list-style-type: none"> Hospital Record ID (Green Card) (1 original copy) Official Receipt (1 original copy) 		Out-Patient Department - HIMS (Window 1 or 2) Cashier Section
For follow-up patients who was admitted : <ul style="list-style-type: none"> Hospital Record ID (Green Card) (1 original copy) Official Receipt (1 original copy) Discharge Summary or Tagubilin (1 original copy) Referral letter form from Health Center o doctor (optional) (1 original copy) 		Out-Patient Department - HIMS (Window 1 or 2) Cashier Section BMC or from Hospital previously admitted Hospital / Health Center / doctor (optional)
For follow-up patients who were NOT admitted : <ul style="list-style-type: none"> Hospital Record ID (Green Card) (1 original copy) Official Receipt (1 original copy) Results from: Laboratory, Bacteriology, Radiology, Heart Station (1 original copy) 		Out-Patient Department - HIMS (Window 1 or 2) Cashier Section Laboratory, Bacteriology, Radiology, Heart Station



<ul style="list-style-type: none"> Referral form (optional) (1 original copy) 		Hospital / Health Center / doctor (optional)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Falls in line at Step 1 (Information/Screening) Ask for instructions or queuing number.	1. Guard on-duty shall take client's temperature. Directs client to dispense alcohol. Directs client to the Information/ Screening Area.	None	None	BMC Watchman Out-Patient Department
	1.1 Interview and refer client based on "Patient Screening Checklist for COVID-19"	None	5 minutes	Information Officer (Nurse I/ II/ III or Nursing Attendant) Out-Patient Department
	1.2 Identifies & queues client according to: a. General Public b. Priority Lane (Person with Disability, Senior Citizen, Pregnant Woman, Tumor Patients, BMC employee, Suspected Dengue patients)	None	3 minutes	Information Officer (Nurse I/ II/ III or Nursing Attendant) Out-Patient Department
	1.3. Gives client the following forms: Personal Information Sheet (PIS), Charge Slip & Consultation Process Flow (for clients without BMC Patient Health ID (Green Card)) (Issuance of number is temporarily suspended, instead, the Information Officer directs patient to its designated lane and gives instruction.)	None	2 minutes	Information Officer (Nurse I/ II/ III or Nursing Attendant) Out-Patient Department
2. Falls in line at Step 2 and vital signs taken.	2. Takes vital signs of client. 2.1. Refers to physician if the client needs emergent care.	None	10 minutes	Nurse/Nursing Attendant Out-Patient Department



<p>3. Falls in line or waits for queuing number to be called at Step 3 (Triage)</p> <ul style="list-style-type: none"> • With Green Card: Shows green card to Triage Officer and state your health concerns. • With PIS Form: Fills out PIS form while waiting. 	<p>3. Calls for the next in line or number.</p> <ul style="list-style-type: none"> • With BMC Patient Health ID (Green Card) Verifies the Green Card Asks client of his/her chief complaint Writes information at Triage Form and forwards to HIMS-OPD Gives Charge Slip, Consultation Process flow where assigned clinic is written and gives further instructions. • With Personal Information Sheet (PIS) Asks client of his/her chief complaint Writes queuing number for HIMS-OPD at the top part of the form, clinic assignment and gives further instructions. 	None	30 minutes	Triage Officer (Nurse I/ II/ III or Medical Officer) Out-Patient Department
<p>4. With PIS Form: Waits for number to flash in the monitor at Step 4 (HIMS-OPD).</p> <p>Proceeds to Window 1 or 2. 4.1. Gives the PIS Form.</p>	<p>4.1 Receives the Patient Information Sheet (PIS). 4.2. Encodes patient's information in the PIS, let the client checks and verifies the encoded information. 4.3. Issues Hospital Record ID (Green Card) for new clients or clients who lost their ID. 4.4. Directs client to Cashier and reiterates clinic assignment.</p>	None	50 minutes	HIMS Personnel (Administrative Aide/ Administrative Assistant) Out-Patient Department
<p>5. **Needs Financial assistance?</p> <ul style="list-style-type: none"> • If YES, proceeds to Medical Social Service at Malasakit Center. 	<p>5. **For financial assistance, conducts proper assessment, interviews and classifies client, stamps classification at the Hospital Record ID (Green Card) with date</p>	None	10 minutes	Medical Social Worker Out-Patient Department



• If NO, proceed to Cashier.	stamped and date of validity (1 year validity)			
6. Proceeds to Step 5 (Cashier) 6.1. Gives charge slip and pays the User's Fee. 6.1. Asks for receipt.	6.1. Receives charge slip and payment. 6.2 Checks ID of persons with disability and senior citizen to avail the 20% discount for the user's fee. 6.3. Issues official receipt.	User's fee: PHP 50.00 / PHP 40.00 (discounted)	30 minutes	<i>Administrative Officer I</i> Ground Floor, Out-Patient Department Building
7. Proceeds to assigned clinic. Waits for name to be called.	7.1 Calls patient's name according to 1st chart, 1st call basis. 7.2 Writes vital signs and asks for receipt. 7.3 Performs initial assessment and writes all the details in the patient's chart.	None	20 minutes (waiting time depends on the number of patients for consultation at the clinic)	<i>Nurse I/ II/ III</i> Out-Patient Department
7. Sees physician for consultation. Undergoes examination or treatment.	7. Conducts and records thorough history taking and physical examination. Arrives at a diagnosis/ diagnoses, documents and explains treatment plan	None	1 hour	<i>Medical Officer</i> Out-Patient Department
8. Receives and understands instructions carefully from the doctor on take home medications, laboratory requests and other procedures , follow-up check-up and health teachings	8.1 Gives Disposition: (a) Admission (b) Referral (c) Send Home 8.2 Instructs client on the following: (a) Take home medications (b) Laboratory requests and other procedures, if any. (c) Follow-up check up (d) Health teaching (e) Give further instructions if for referral to other clinics or for Admission.	None	20 minutes	<i>Medical Officer</i> Out-Patient Department
	TOTAL FEES: User's Fee - PHP 50.00 or PHP 40.00 - discounted rate for PWD & Senior Citizen)		TOTAL TIME: 4 hours	



Out Patient Department

Internal Services



1. Procedure on Employees' Clinic Consultation

Offers services to promote, protect and restore each employee's health to facilitate optimal quality of life and maximum productivity in the workplace such services are as follows: General health examinations, pre-assignment or pre-employment health examinations, transfer examination, return to work examination, periodic examination, pre-participation physical evaluation or pre-sports evaluation and wellness activities.

Clinic Hours: Monday to Friday 1:00PM-4:00PM and Saturday 8:00AM-12:00NN.

OFFICE OR DIVISION:	Out-Patient Department			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G - Government to Government			
WHO MAY AVAIL:	Bicol Medical Center Employees (Permanent Status)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
For Old patients: Hospital Record ID (Green Card) Official Receipt (original copy)		Out-Patient Department-HIMS (Window 1 or 2), Out-Patient Department-Cashier window		
For follow-up patients who was not admitted : Hospital Record ID (Green Card) laboratory results (original copy) and/or Referral form (optional)		Out-Patient Department-HIMS (Window 1 or2) Laboratory, Bacteriology, Radiology, and Heart Station		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
For Old Clients: Falls in line at Step 1 (Information) and asks for a queuing number.	1. For Old Clients: -gives queing number	None	10 minutes	<i>Nurse III</i> Out-Patient Department
For New Clients: -Fills out Personal Information Sheet (PIS)	For New Clients: -gives queing number and PIS form			
1. Falls in line at Step 2 and have your vital signs taken.	2. Takes Vital signs of Client	none	10 minutes	<i>Nursing Attendant</i> Out-Patient Department
3. Waits for your queuing number to be called at Step 3 (Triage) ● With green card:	3.1. For old clients: -asks for chief complaint and checks health record ID for verification 3.2. For new clients:	none	30 minutes	<i>Nurse I / Nurse II / Nurse III</i> Out-Patient Department



Presents green card to Triage Officer and informs of chief complaint ● With PIS form: Submits PIS form	-Verifies Data or PIS form & issues Health Record Number			
4. For new clients: Proceeds to HIMS OPD window 1 or 2 and submits accomplished PIS form	4. For new clients: Encodes personal data of employee and issues Health Record ID 4.1. Directs employee to clinic assignment	none	50 minutes	<i>Administrative Aide, Administrative Assistant Out-Patient Department</i>
5. Proceeds to clinic and waits for name to be called.	5. First chart, first call basis -performs initial assessment	None	20 minutes	<i>Nurse I/Nurse II Out-Patient Department</i>
6. Sees physician & undergoes examination & treatment	6. Conducts& records thorough history taking and PE 6.1. arrives at diagnosis, documents& explains treatment plan 6.2. directs to either to laboratory, radiology department or heart station	None	1 hour	<i>Medical Specialist/ Officer Out-Patient Department</i>
7. Receives instruction on treatment.	7.Disposition: a. Referral to ER/other clinics b. Sent home;gives prescription with instruction	None	20 minutes	<i>Medical Specialist/ Officer Out-Patient Department</i>
	TOTAL FEES: None	TOTAL TIME: 3 hours & 20 minutes		



Pay Wards

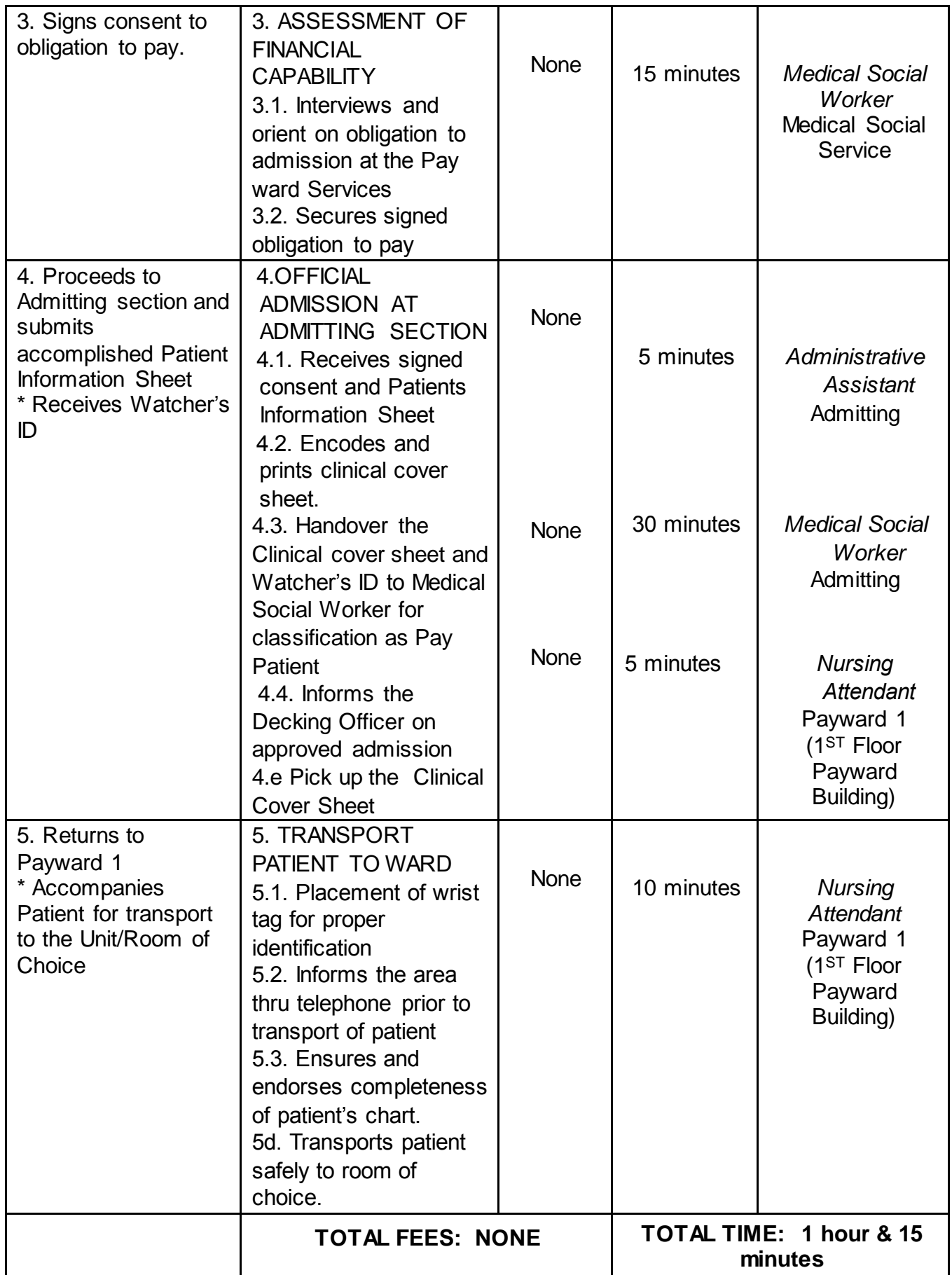
External Services



1. Procedure on Direct Admission to Payward

Direct admission to payward can be availed of pay patients with admitting orders from their Attending Physician. Patient will go directly to the Payward instead of registering at the Emergency Room. Services can be availed 24/7.

OFFICE OR DIVISION:		Nursing Service Division- Payward Services		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C - Government to Citizen		
WHO MAY AVAIL:		Patients for admission		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Hospital Record ID (GREEN CARD) Emergency Room Record (original copy) Doctors Admitting Order with diagnosis (original copy) REFERRAL FORM (if referred from other hospital) (original copy) Consent for Admission to Payward (original copy) LABORATORY RESULT (Optional)(original copy) Watcher's ID (original copy)		Admitting Area (ER) Emergency Room (New/ Old ER) Consultant- Attending Physician Referring Institution Medical Social Worker Referring Institution/OPD-BMC Emergency Room Admitting Area (Ground floor)		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquires on Room availability.	6. DECKING 1.a Check on room availability - IHOMIS census - Calls the area/ unit of vacant rooms If Room not available: Decks according to hospital policy If Room is available: Proceed to step 2	None	5 minutes	<i>Nursing Attendant Payward 1 (1ST Floor Payward Building)</i>
2. Presents Doctors admitting order with diagnosis and accomplishes Patient Information Sheet.	2. PATIENT ADMITTING ORDER 2.1. Verifies admitting order 2.2. Assists in filling up of Patients Information Sheet 2.3. Directs to the Medical Social Worker	None	5 minutes	<i>Nursing Attendant Payward 1 (1ST Floor Payward Building)</i>





Pharmacy

External Services



1. Availment of Medicines at the Pharmacy

Availment of medicines at the pharmacy is for all inpatients, outpatients, BMC personnel and the general public. The Pharmacy section is open 24 hours a day 7 days a week.

OFFICE OR DIVISION:	Pharmacy Section			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	Out-Patient			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Prescriptions (original copy) Yellow Rx (For Regulated Drugs and Medicines)(original copy) BMC Personnel Health Ledger (original copy) Hospital Record ID (Green Card) Senior Citizen / PWD ID (1 original copy) Authorization Letter for representative of Senior Citizen member (1 original copy)		Attending Physician/s Attending Physician/s Industrial Clinic / Human Resource Department Emergency Room/Admitting section Senior Citizen Office/ PWD Office Senior Citizen Patient		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents completely filled out and correct Prescriptions to the Pharmacy with the BMC Hospital Record ID (Green Card)	1. Receives and validates prescription (Rx)	None	10 minutes	<i>Pharmacist II / Administrative Assistant II Pharmacy section</i>
2.Waits for the verification of prescriptions as to availability of medicines / supplies and charging of medicines at the HOMIS	2. Verifies the received prescription as per availability	none	5 minutes	<i>Pharmacist II / Administrative Assistant II Pharmacy section</i>
2.a if BMC personnel, present the BMC Personnel Health Ledger	2a. Encodes medicines & Charge Slip No.at HOMIS	Refer to attached Annex A table of prices for available drugs and medicines	10 minutes	<i>Pharmacist II / Administrative Assistant II Pharmacy section</i>
2.b If Senior Citizen (SC) / Persons With Disability (PWD) present SC / PWD ID and /or authorization letter for	2.b. Indicate the 20% discounted price on the prescription	None	5 minutes	<i>Pharmacist II / Administrative Assistant II Pharmacy section</i>



representatives of Senior Citizen member				
2.c.If outpatient, Pays the amount due at the Cashier Section then present official receipt to the Pharmacy	2.c. Writes amount of medicines in the prescription and directs patient/ watcher to Cashier to pay prescribed amount	Refer to attached Annex A table of prices for available drugs and medicines	30 minutes	<i>Collecting Officer</i> Cashier section
2.d. If in patient, submits prescription to the pharmacy & waits for further instructions	2.d. Verifies the prescription and checks for availability; if available proceed to step 3 & encodes charges to HOMIS; if not available, informs Nurse on duty thru telephone call, returns prescription to the patient/ watcher	none	5 minutes	<i>Pharmacist II / Administrative Assistant II</i> Pharmacy section
3. Receives the medicines and signs on the Acknowledgement receipt	3. Prepares the prescribed medicines and prints an acknowledgement receipt	none	5 minutes	<i>Pharmacist II / Administrative Assistant II</i> Pharmacy section
4. Receives and understand instructions on the medication	4. Gives instruction on the medicines issued	none	10 minutes	<i>Pharmacist II / Administrative Assistant II</i> Pharmacy section
	TOTAL FEES: Vary on the kind of medicines purchased (refer to Annex A for price list)	TOTAL TIME: *If SC/ PWD- 35 minutes; *If Outpatient- 60 minutes; *If in patient- 35 minutes; *If BMC Personnel- 40 minutes		



ANNEX A. TABLE OF PRICES FOR AVAILABLE DRUGS

ITEM DESCRIPTION	UNIT	SELLING PRICE (in PHP)
Acetazolamide 250mg	tab	26.00
Acetylcysteine 600mg effervescent	tab	19.50
Acetylcysteine 200mg/mL, 25mL (IV Infusion)	vial	1,950.00
Aciclovir 400mg	tab	16.25
Aciclovir 250mg	vial	1,270.00
Adenosine 3mg/ml 2ml (IV)	vial	287.70
All-in- One Admixtures(3in1 or dual energy soln.)Kcal: 1400-1600 Volume: 1800-2000ml	bag	2,177.50
Allopurinol 100mg	tab	5.20
Amikacin Sulfate 250mg/ml, 2ml (IM,IV)	vial/amp	35.50
Amino Acid Crystalline Standard 6% (IV Infusion) 100 mL	bot	468.00
Amlodipine besilate 10mg	tab	0.75
Amoxicillin trihydrate 500mg	cap	1.75
Amphotericin B (Non-Lipid Complex) 50mg Lyophilized	vial	2,210.00
Ampicillin + Sulbactam 500mg ampicillin + 250mg Sulbactam as sodium (IM,IV)	vial	24.65
Ampicillin + Sulbactam 1000mg ampicillin + 500mg Sulbactam as sodium (IM,IV)	vial	37.50
Ampicillin as Sodium salt 250mg (IM, IV)	vial	11.50
Ampicillin as Sodium salt 500mg (IM, IV)	vial	10.60
Anti-rabies serum (equine) 200 IU/ml, 5ml (1M)	vial	1,571.00
Anti-tetanus Serum 1,500 IU/ml, 1ml (IM)	vial/amp	54.45
Aspirin 80 mg	tab	0.90
Atorvastatin Calcium 80mg	tab	27.25
Atracurium Besilate 10mg/ml, 2.5ml (IV)	amp	77.00
Azithromycin dihydrate 500mg	tab	11.50
Balanced Multiple Maintenance Solution with 5% dextrose 500ml for Infants soln.	bag/bot	41.45
Balanced Multiple Maintenance Solution with 5% Dextrose 1 L (Children and Adults)(IV Infusion)	bag/bot	63.70
Beractant 25mg/ml 4ml	vial	14,391.00
Bisacodyl 10mg	supp	18.50
Budesonide 250mcg/ml, 2ml (unit dose)	neb	47.50
Bupivacaine Hydrochloride 0.5% 10ml(local infiltration)	amp/vial	125.00
Bupivacaine Hydrochloride 0.5% 4ml(spinal) w/ 8% dextrose	amp	120.00
Butamirate Citrate 50mg	tab	16.50
Calcium Gluconate 10% 10mL (IV)	amp/vial	25.00
Carvedilol 6.25mg	tab	1.50
Cefazolin Sodium 1g (IM,IV)	vial	21.00
Cefixime 200mg	cap	16.25
Cefoxitin sodium 1g (IM,IV)	vial	88.70



ITEM DESCRIPTION	UNIT	SELLING PRICE (in PHP)
Ceftazidime pentahydrate 1g (IM, IV)	vial	44.00
Cefuroxime Axetil 500mg	tab	11.50
Cefuroxime sodium 750mg (IM, IV)	vial	22.50
Celecoxib 400mg	cap	21.25
Ciprofloxacin hydrochloride 500mg	tab	1.70
Clarithromycin 500mg base	tab	15.50
Clopidogrel 75mg	tab	1.45
Co-amoxiclav 500mg Amoxicillin trihydrate + 125mg Pot. Clavulanate	tab	10.25
Co-amoxiclav 200mg Amoxicillin trihydrate + 28.5mg Pot. Clavulanate	bot	260.00
Cobra-Antivenin 800iu/mL, 5mL	amp	1,690.00
Cotrimoxazole 800mg Sulfamethoxazole + 160mg Trimethoprim	tab	2.50
Diazepam 5mg/ml, 2ml.(IM,IV)	amp	107.00
Diclofenac sodium 25mg/ml, 3ml (IM,IV)	amp	21.25
Digoxin 250mcg/ml, 2ml (IM, IV)	amp	161.50
Diphenhydramine Hydrochloride 50mg/mL, 1mL	amp	27.75
Diphenhydramine (as Hydrochloride) 12.5mg/5mL, 60mL syrup	bot	33.50
Enoxaparin sodium 100mg/ml, 0.4ml prefilled syringe (SC)	syringe	256.25
Enoxaparin sodium 100mg/ml, 0.6ml prefilled syringe (SC)	syringe	372.80
Epinephrine hydrochloride 1mg/ml, 1ml (IM, SC)	amp	27.60
Erythromycin 0.5% Eye ointment 3.5g	tube	167.40
Fentanyl citrate 50mcg/ml, 2ml (IV) preservative free	amp	56.00
Ferrous Salt + Folic Acid 60mg elemental iron + 400mcg folic acid	tab/cap/film coat	1.00
Fluconazole 2mg/mL, 100mL	vial	159.00
Fluticasone+ Salmeterol MDI 125mcg fluticasone(as propionate)+ 25mcg Salmeterol(as xinafoate)x 120 doses	inh	232.50
Fluticasone+Salmeterol MDI 250mcg fluticasone (as propionate)+ 25mcg salmeterol (as xinafoate) x 120 doses	inh	286.50
Folic Acid 5mg	tab	4.40
Fondaparinux 2.5mg/0.5ml Solution (as sodium salt)	pre-filled syringe	1,430.00
Furosemide 40mg	tab	2.25
Furosemide 10mg/ml, 2ml	amp	5.10
Gentamicin sulfate 40mg/ml, 2ml (IM IV)	amp/vial	5.65
Glucose (Dextrose) 50% 50ml (IV)	vial	31.25
Heparin Sodium Unfractionated 1000iu/ml 5ml (IV, SC, IV Infusion)	vial	55.00
Heparin sodium Unfractionated 5000iu/ml, 5ml (IV, SC, IV Infusion)	vial	193.00
Hepatitis B (recombinant DNA) 20mcg/ml, monodose vial (IM) Adult Vaccine	vial	217.50
Hepatitis B (recombinant DNA) 10mcg/0.5ml, (Pediatric) Monodose (IM) Vaccine	vial	168.15



ITEM DESCRIPTION	UNIT	SELLING PRICE (in PHP)
Hydralazine hydrochloride 20mg/ml, 1ml (IM,IV)	amp	34.00
Hydrocortisone sodium succinate 100mg powder (IV)	vial	21.25
Hydrocortisone sodium succinate 250mg powder (IV)	vial	55.60
Hydroxyethyl starch 6% solution, 500ml (IV Infusion)	bot	544.00
Ibuprofen 100mg/5ml susp. 60ml	bot	49.00
Iodixanol 652mg/mL equiv. to 320mg/mL, 100 mL	vial	7,913.00
Iodixanol 652mg/mL equiv. to 320mg/mL, 50 mL	vial	4,295.00
Iopamidol 755mg/ml equiv. to 370mg iodine 100mL	vial	3,307.00
Iopamidol 755mg/ml equiv. to 370mg iodine 50ml	vial	2,099.50
Ipratropium+ Salbutamol 500mcg ipratropium(as bromide anhydrous)+2.5 mg Salbutamol as base x 2.5ml (unit dose)	neb	12.25
Iron Sucrose 20mg/mL, 5mL IV	amp	141.50
Isophane Insulin Human (recombinant DNA) 100iu/mL, 10mL	vial	429.00
Ketorolac Tromethamol 30mg/ml 1ml (IM IV)	amp	17.50
Lactated Ringers Solution 1L (IV Infusion)	bag/bot	51.00
Levofloxacin 5mg/mL, 100mL solution for IV infusion	vial	121.00
Levofloxacin 500mg	tab	11.50
Levofloxacin 750mg	tab	26.00
Lidocaine 2%, 1.8 ml (w/ epinephrine local filtration)	carpule	27.25
Lidocaine hydrochloride 2%, 50ml (epidural, local infiltration)	vial	49.40
Lidocaine hydrochloride spray 10%, 50mL	bot	2,560.00
Loratadine 10mg	Tab	1.90
Mannitol 20%, 500ml (IV)	bot	92.50
Mefenamic Acid 500mg	tab/cap	5.25
Meropenem trihydrate 1g powder (IV)	vial	196.50
Meropenem trihydrate 500mg powder (IV)	vial	127.50
Metformin hydrochloride 500mg tablet	tab	0.65
Methylethergometrine maleate 200mcg/ml, 1ml (IV, IM)	amp	22.65
Metronidazole 125mg /5ml 60ml	susp	37.00
Metronidazole 500mg	tab	2.15
Metronidazole 5mg/ml, 100ml (IV Infusion)	vial	16.60
Montelukast sodium 4mg Chewable Tablet (as Sodium Salt)	tab	15.50
Mupirocin Ointment 2%, 5g	tube	51.75
Nalbuphine hydrochloride 10mg/ml, 1ml (IM, IV, SC)	amp	66.50
Nicardipine hydrochloride 1mg/ml, 10ml (IV)	amp	231.75
Norepinephrine Bitartrate 1mg/mL, 4mL	amp	191.50
Norepinephrine Bitartrate 1mg/mL, 10mL	amp	856.70
Omeprazole 20mg	cap	1.00
Omeprazole 40mg	cap	11.00
Omeprazole powder 40mg+ 10ml solvent amp (IV)	vial	31.50
Oral Rehydration Salts Composition of reduced osmolarity ORS/L of water (WHO recommended)	sachet	4.85



ITEM DESCRIPTION	UNIT	SELLING PRICE (in PHP)
Oxacillin sodium 500mg (IM, IV)	vial	22.40
Oxytocin 10 UI/ml, 1ml (IM, IV)	amp	9.25
Paracetamol 10mg/ml 100ml soln. for infusion (IV)	vial	160.00
Paracetamol 150mg/ml 2ml soln. for injection (IM,IV)	amp	5.15
Paracetamol 500mg	tab	0.50
Penicillin G Crystalline Sodium 5,000,000 units (IM,IV)	vial	22.75
Penicillin G Crystalline Sodium 1,000,000 units (IM,IV)	vial	10.25
Pethidine (Meperidine) Hydrochloride 50mg/mL, 2mL	amp	329.90
Phenytoin sodium 50mg/ml, 2ml (IV)	amp	122.50
Phytomenadione 10mg/ml, 1ml (IM,IV)(as aqueous colloidal soln. w/benzyl alcohol)	amp	26.00
Piperacillin+ Tazobactam Sodium 4g Piperacillin+ 500mg Tazobactam (IM, IV Infusion)	vial	148.75
Piperacillin+Tazobactam sodium 2g piperacillin+250mg Tazobactam (IM,IV Infusion)	vial	116.75
Potassium Chloride 2 mEq/ml, 20ml (IV Infusion)	vial	29.00
Propofol 10mg/ml, 20ml (IV)	amp	67.50
Propranolol hydrochloride 40mg	tab	10.25
Ranitidine hydrochloride 25mg/ml, 2ml (IM,IV,IV Infusion)	amp/vial	4.00
Remifentanyl 1g lyophilized powder (IV infusion)	vial	1,950.00
Rocuronium Bromide 10mg/mL, 5mL	amp/vial	194.75
Rosuvastatin 10mg(as calcium salt)	tab	3.00
Sacubitril/Valsartan 50mg	tab	73.00
Salbutamol Sulfate 1mg/mL, 2.5mL	neb	9.50
Salbutamol Sulfate MDI 100mcg/dose x 200doses	piece	83.50
Sodium Bicarbonate 1mEq/ml, 50ml (adult) (IV Infusion)	amp/vial	128.50
Sodium chloride 2.5mEq/ml, 20ml	vial	49.25
Somatostatin 3mg	amp	6,235.00
Spironolactone 25mg	tab	11.50
Streptokinase 1,500,000iu	vial	5,330.00
Succinylcholine(suxamethonium) chloride 20mg/ml 10ml(IV)	vial	158.90
Tetanus Toxoid 0.5ml (IM)	amp	37.40
Tramadol hydrochloride 50mg/ml, 2ml (IM, IV)	amp	10.00
Tranexamic Acid 100mg/ml, 5ml (IM, IV)	amp	17.30
Trimetazidine Hydrochloride 35mg	tab	4.00
Valaciclovir hydrochloride 500mg	tab	41.00
Vancomycin Hydrochloride 500mg (IV)	vial	244.50
Vitamin B1 B6 B12 100mg + 5mg + 50mcg	tab/cap	1.75
Vitamin B1 B6 B12 100mg+100mg + 1mg 3ml(IV)	amp	63.00
Zinc Sulfate monohydrate solution (equiv. to 10mg elemental zinc/ml) drops	bot	52.00
Zinc Sulfate monohydrate solution (equiv. to 20mg elemental zinc/ 5ml) 60ml	bot	45.25
0.9% Sodium Chloride 1L solution for Irrigation	bottle	42.75



ITEM DESCRIPTION	UNIT	SELLING PRICE (in PHP)
0.9 % Sodium Chloride 1L (IV Infusion)	bag/bot	32.25
10% Dextrose in water 500ml (IV Infusion)	bag/bot	49.25
5% Dextrose in 0.3% Sodium Chloride 500ml (IV Infusion)	bot	55.75
5% Dextrose in 0.9% Sodium Chloride 1L (IV Infusion)	bot	45.25
5% Dextrose in Lactated Ringers 1L (IV Infusion)	bag/bot	37.00
5% Dextrose in Water 1L(IV Infusion and as vehicle for IV Medications)	glass bottle	109.20
0.9% Sodium Chloride 20mL	vial	26.00



Philhealth Processing Unit

External Services



1. Availment of Online Portal Verification

The Philhealth Claims Processing Section validates the Philhealth Eligibility of the Philhealth Member. Services are available from 7am to 8pm from Monday to Friday including Saturdays, Sundays and Holidays.

OFFICE OR DIVISION:	Philhealth Room 8/ OB – ER (Finance Division)			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	In patients and Out patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Hospital Record ID (Green Card)		Room 7 - Admitting Section (HIMS)		
Membership Data Record (MDR) (1 original copy)		Philhealth Office or BMC at “Malasakit Center”		
Official Receipt of PREMIUM PAYMENT (If needed) (original copy)		LHIO, Magsaysay, Naga City/Accredited Agent Banks		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits updated MDR (including the Name of patient)	1.1.Verifies philhealth of the member/ patient in the PORTAL, if the eligibility is YES but with remarks , submit the following: <ul style="list-style-type: none"> • If Self Employed – submit updated receipt • If Employed: Gov’t / Private – Submit CSF with the signature of the Employer • If INDIGENT MEMBER of 4p’s –submit CE1 from Philhealth as per advised by PCARES; • If the patient has no philhealth membership after verifying with the Philhealth clerk/PCares – 	None	2 minutes	<i>Administrative Aide II</i> Philhealth Room 8



	<p>proceed to POS (POINT-of-SERVICE) for enrolment.</p> <p>1.2. Prints PORTAL CEWS and tag the Qualified patient in HOMIS and issues color coded checklist & Philhealth Slip.</p>	None	5 minutes	<i>Administrative Aide II</i> Philhealth Room 8
2. Receives Color Coded checklist and Philhealth slip	2. Instructs client to proceed to Nurse Station	None	1 minute	<i>Administrative Aide II</i> Philhealth Room 8
	TOTAL FEES: None		TOTAL TIME: 8 minutes	



2. Procedure on Philhealth Processing Claims

Philhealth office ensures timely processing of Philhealth claims of clients with complete requirements. Services are available daily from 7am to 8pm including Saturdays, Sundays and Holidays.

OFFICE OR DIVISION:	Philhealth Processing Office- Room 10 – Finance Division			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C – Government to Citizen			
WHO MAY AVAIL:	All patients with Philhealth Membership			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Patient Discharge Clearance (original copy)		Room 7- Admitting Section (HIMS)		
Statement of Account (SOA) (original copy)		Billing Section		
Valid ID of representative (if member is incapacitated or expired) (original copy)		Interested party		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits Discharge Clearance	1. Receives Patient's Discharge Clearance and search the patient's jacket;	None	5 minutes	Administrative Aide Philhealth Processing Office
2. Signs the CSF, SOA and PORTAL	2. Verifies the patient's name in computer HOMIS, checks the completeness of the CF4/CF3 and edit CF2 data; Prints the CSF.	None	5 minutes	Administrative Aide Philhealth Processing Office
	2.1. Asks the Member to sign the CSF, SOA and PORTAL . If the member is not available to sign, ask for immediate family as representative to sign with a photo copy of his valid ID.	None	2 minutes	Administrative Aide Philhealth Processing Office
	2.2. Instruct clients to give the signed discharged	None	1 minute	Administrative Aide Philhealth Processing Office



	clearance to Nurse on Duty			
3. Forwards the Signed Patient's Discharge Clearance to the Nurse Station for final clearance.	3. Signs the discharge clearance	None	2 minutes	<i>Nurse on Duty Ward</i>
	TOTAL FEES: None		TOTAL TIME: 15 minutes <u>Note:</u> <i>Processing of Philhealth thru E-claims is 45 days (Legaspi City) Member will receive a notice from PHIC, Legaspi informing the patient's hospitalization that has been paid.</i>	



Procurement Section

External Services



1. Request for the Issuance of Bidding Documents

As provided for under RA 9184 and its 2016 Revised Implementing Rules and Regulations (IRR), the prospective bidders should purchase the bidding documents to be able to participate in the competitive bidding. The Procurement Section receives and processes requests for the issuance of bidding documents no later than the date and time of bid opening on a daily basis, 8:00AM to 5:00PM except weekends and holidays.

OFFICE OR DIVISION:		Procurement Section/Hospital Operations and Support Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2B – Government to Business		
WHO MAY AVAIL:		All Prospective Bidders		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Government-issued ID (1 original copy) 3. Charge Slip (1 Original copy) 4. Official Receipt (1 original copy) 5. Bidding Documents (1 original copy)		Authorized representative of the prospective bidder Procurement Section Cash Operations Procurement Section		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1.1 Presents government-issued ID	1.1 Checks the documents presented	None	5 minutes	Administrative Assistant Procurement Section
1.2 Receives charge slip	1.2 Issues charge slip	None	5 minutes	
1.3 Proceeds to Cash Operations for payment of fee	1.3 Advises client to pay to the Cash Operations and return to Procurement Section once settled	None	5 minutes	
2.1 Pays required fee at the Cash Operations 2.2 Receives Official Receipt 2.3 Returns to the Procurement Section Note: Makes sure to get Official Receipt	2.1 Collects required fee 2.2 Issues Official Receipt	Refer to Table 1 (Standard Rates) as indicated in the Invitation to Bid	30 minutes	Administrative Officer I located at Cash Operations Section at Main Building (11:30am-10pm)
3.1 Presents Official Receipt 3.2 Acknowledges receipt of bidding documents	3.1 Checks amount paid in the Official Receipt 3.2 Provides bidding documents and	None	15 minutes	Administrative Assistant Procurement Section



	requests client to acknowledge receipt of documents			
	TOTAL FEES: Refer to Table 1 (Standard Rates) as indicated in the Invitation to Bid		TOTAL TIME: 1 hour	

Table 1: Standard Rates

The cost of bidding documents shall correspond to the Approved Budget for the Contract (ABC) range as indicated in the table below. This shall be the maximum amount of fee set for the acquisition of bidding documents.

Approved Budget for the Contract	Maximum Cost of Bidding Documents (in Philippine Pesos)
500,000 and below	500.00
More than 500,000 up to 1 Million	1,000.00
More than 1 Million up to 5 Million	5,000.00
More than 5 Million up to 10 Million	10,000.00
More than 10 Million up to 50 Million	25,000.00
More than 50 Million up to 500 Million	50,000.00
More than 500 Million	75,000.00



2. Request for the Issuance of Copies of the Abstract of Bids as Read and/or Minutes of Bid Opening

The abstract of bids as read and/ or the minutes of bid opening are available to the public upon written request and payment of a specified fee to recover cost of materials. The Procurement Section receives and processes requests for the issuance of copies of the Abstract of Bids as Read and Minutes of Bid Opening on a daily basis, 8:00AM to 5:00PM except weekends and holidays.

OFFICE OR DIVISION:		Procurement Section/Hospital Operations and Support Division		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2B – Government to Business		
WHO MAY AVAIL:		Public		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Written request (1 original copy) 2. Government-issued ID (1 original copy) 3. Charge Slip (original copy) 4. Official Receipt (original copy) 5. Abstract of Bids as Read (original copy) 6. Minutes of Bid Opening (original copy)			Interested party Interested party Procurement Section Cash Operations Section Procurement Section Procurement Section	
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1.1 Presents written request and government-issued ID	1.1 Checks the documents presented	None	5 minutes	<i>Administrative Assistant</i> Procurement Section <i>Administrative Assistant</i> Procurement Section
1.2 Receives charge slip	1.2 Issues charge slip	None	5 minutes	
1.3 Proceeds to Cash Operations for payment of fee	1.3 Advises client to pay to the Cash Operations and return to Procurement Section once settled.	None	5 minutes	
2.1 Pays required fee at the Cash Operations 2.2 Receives Official Receipt 2.3 Returns to Procurement Section Note: Make sure to get Official Receipt	2.1 Collects required fee 2.2 Issues Official Receipt	PHP 10.00 per page	30 minutes	<i>Administrative Officer I</i> located at: Cash Operations Section at Main Building (11:30am-10pm)
3.1 Presents Official Receipt 3.2 Acknowledges receipt of copies of the	3.1 Checks amount paid in the Official Receipt	None	15 minutes	<i>Administrative Assistant</i> Procurement Section



Abstract of Bids as Read and Minutes of Bid Opening	3.2 Provides copies of the Abstract of Bids as Read and Minutes of Bid Opening 3.3 Requests client to acknowledge receipt of copies of the Abstract of Bids as Read and Minutes of Bid Opening			
	TOTAL FEES: PHP 10.00 per page		TOTAL TIME: 1 hour	



Professional Education, Training and Research Unit

External Services



1. Processing Request of External Clients to Conduct Research at Bicol Medical Center

This process involves the management of documentary requirements for review & evaluation of research protocol submitted by any individual who are not employees of BMC, a group, or organization who intends to do research in this institution either through availment of data, management system, facilities or actual involvement of patients, employees or other clients of the institution.

The process starts at the Professional Education Training and Research Unit (PETRU) for documentary review, evaluation by the Research Technical Review Committee (RTRC) and Research Ethics Committee (REC) for technical and ethical soundness respectively and ends with feed backing from the researcher.

OFFICE OR DIVISION:	PROFESSIONAL EDUCATION TRAINING & RESEARCH UNIT (PETRU) , RESEARCH TECHNICAL REVIEW COMMITTEE (RTRC) RESEARCH ETHICS COMMITTEE
CLASSIFICATION:	Highly Technical
TYPE OF TRANSACTION:	G2C – Government to Citizen / G2G – Government to Government / G2B – Government to Business
WHO MAY AVAIL:	Undergraduate students, Post graduate students, National Government Agencies, Non-Government Organizations, Business entity
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
<p>1. Letter of intent to conduct research at Bicol Medical Center addressed to the Medical Center Chief through the Chief Training Officer and Data Privacy Officer signed by the: researcher/ investigator and recommended by:</p> <p>For Undergraduate & Post Graduate students: Adviser & Dean or Head of School</p> <p>For Medical Residents (External) : Department Chair & Head of the Agency</p> <p>For other requesting agencies : Head of the Agency / Organization/ Business entity</p>	<ul style="list-style-type: none"> Researcher/ Investigator
<p>2. Certification that the research protocol has been reviewed</p> <p>For Undergraduate & Post Graduate students: Certification from the Dean or Head of School reviewed by the adviser and panel</p>	<ul style="list-style-type: none"> Respective School



<p>For Medical Residents (External) : Endorsement from the Department Chair ; Reviewed by the Adviser, Department Research Coordinator & Division Training Officer</p>	<ul style="list-style-type: none"> Respective Hospital
<p>3. Three (3) hard copies of Research Protocol (indicate version number on the cover)</p> <p>For Undergraduate, Post Graduate students and other agencies : Chapter 1 - Introduction , Chapter 2 – Review of Related Literature , Chapter 3 – Methodology to include copy of questionnaire (English/Tagalog or language that is comprehensible to the respondents)</p> <p>For Medical Residents: Introduction, Literature Search, Methodology</p> <p><u>and</u></p> <p>a. Informed Consent / Assent form For respondents 18 y/o & above - Consent form For respondents 17 y/o & below - Assent form</p> <p>b. Curriculum Vitae of the Researcher /Principal Investigator/s</p> <p>c. Curriculum Vitae of Co-Author/s</p> <p>d. Research timeline/ Gantt Chart</p> <p>e. Soft copy of research protocol / study to be sent to bmc.recom@gmail.com</p>	<ul style="list-style-type: none"> Researcher/ Investigator
<p>4. a. Filled out form 2.1 APPLICATION FOR INITIAL REVIEW</p> <p>b. Filled out form 2.2 PROTOCOL SUMMARY SHEET</p>	<ul style="list-style-type: none"> Downloadable forms available at http://bmc.doh.gov.ph/research-ethics/downloadable-forms Downloadable forms available at http://bmc.doh.gov.ph/research-ethics/downloadable-forms
<p>5. Copy of accredited research ethics review clearance / certification (if research protocol has been reviewed by other institution)</p>	<p>Accredited Ethics Review board / Committee where the ethics review/ clearance was done</p>
<p>6. Copy of GCP training certificate (for vulnerable human subjects or as deemed necessary)</p>	<ul style="list-style-type: none"> Researcher/ Investigator
<p>7. Memorandum of Agreement between BMC and researcher / investigator (Signed by the researcher/investigator only)</p>	<ul style="list-style-type: none"> Downloadable forms available at http://bmc.doh.gov.ph/petru/downloadable-forms
<p>8. Filled –out Confidentiality Undertaking form</p>	<ul style="list-style-type: none"> Available @ PETRU



CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits the required documents based on the requirements checklist	1. Receives & performs preliminary assessment of the required documents based on the requirements checklist	NONE	None	<i>Administrative Aide</i> PETRU
<i>If documents are incomplete :</i>	<i>If documents are incomplete :</i>	NONE	5 minutes	<i>Administrative Aide</i> PETRU
1.1 Receives back documents with list of requirements for completion	1.1 Returns document and informs to complete the deficiencies	NONE	15 minutes	<i>Administrative Aide</i> PETRU
<i>If with complete requirements:</i>	<i>If with complete requirements:</i>			
	1.2 Accepts documents, prints the following: name of office, date & time received, person receiving the documents and records in appropriate logbook			
	1.3 Informs researcher to expect a notice through text message or email from the PETRU on the status of the request			
2. Receives notice from PETRU through but not limited to: text message or email on the status of the request like deficiencies, if any	2. Evaluates submitted documents and informs researcher if with deficiencies	NONE	3 days	<ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Training Specialist</i> • <i>Nurse</i> <p><i>{Division Training Officer Concerned }</i> PETRU</p>
	<i>If without deficiencies</i>			
	2.1 Forwards documents to the			



	<p>Research Technical Review Committee (RTRC)</p> <p>2.2 Evaluates for technical soundness (Refer to RTRC citizen's charter)</p> <p>2.3 Evaluates for ethical soundness (if without clearance yet from single joint review ethics board or from other PHREB accredited institutions) (Refer to REC citizen's charter)</p> <p>2.4 Recommends for approval of the request (if technically & ethically sound) and signs the MOA</p> <p>2.5 Approves request (if technically & ethically sound) and signs the MOA</p>	<p>NONE</p> <p>NONE</p> <p>NONE</p> <p>NONE</p>	<p>14 working days</p> <p>60 days (Full Board)</p> <p>30 days (Expedited)</p> <p>1 day</p> <p>1 day</p>	<ul style="list-style-type: none"> Medical Specialist Nurse Medical Technologist <p>{Research Technical review Committee} (RTRC)</p> <ul style="list-style-type: none"> Medical Specialist Nurse Non-institutional member <p>{Research Ethics Committee} (REC)</p> <p>Medical Specialist</p> <p>{Chief Training Officer} PETRU</p> <p>Medical Center Chief MCC Office</p>
<p>3.Receives notification on the status of the request</p> <p>If request is Disapproved:</p>	<p>3. Notifies researcher on the approval or disapproval of the request</p> <p>3.1 Informs researcher the reasons for disapproval</p>	NONE	20 minutes	<ul style="list-style-type: none"> Medical Specialist Training Specialist Nurse <p>Division Training Officer concerned PETRU</p>



<p><i>If request is approved :</i></p> <p>4. Proceeds to PETRU to :</p> <ul style="list-style-type: none"> a) Attend one-on-one pre-conduct of research orientation b) Receive MOA for notarization c) Receive an endorsement slip d) Receive temporary ID 	<p>4. Conducts orientation & notifies office concerned such as but not limited to : name of researcher, needed data, respondents, date, time of the conduct of research</p>	<p>NONE</p>	<p>1 hour</p>	<ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Training Specialist</i> • <i>Nurse</i> <p>(Division Training Officer) PETRU</p>
<p>5. Proceeds to area concerned to conduct research/ data gathering on the specified dates only</p>	<p>5. Monitors the researcher on the conduct of research at Bicol Medical Center</p>	<p>NONE</p>	<p>Specified dates in the MOA</p>	<ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Training Specialist</i> • <i>Nurse</i> <p>(Division Training Officer) PETRU</p>
<p>6. Reports back to PETRU for :</p> <ul style="list-style-type: none"> a. Feedbacking b. Return the issued ID 	<p>6. Conducts post activity evaluation/survey</p>	<p>NONE</p>	<p>30 minutes</p>	<ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Training Specialist</i> • <i>Nurse</i> <p>(Division Training Officer) PETRU</p>
	<p>TOTAL FEE: None</p>		<p>TOTAL TIME: 2 months, 19 days, 2 hours & 5 minutes</p>	



Professional Education Training and Research Unit

Internal Services



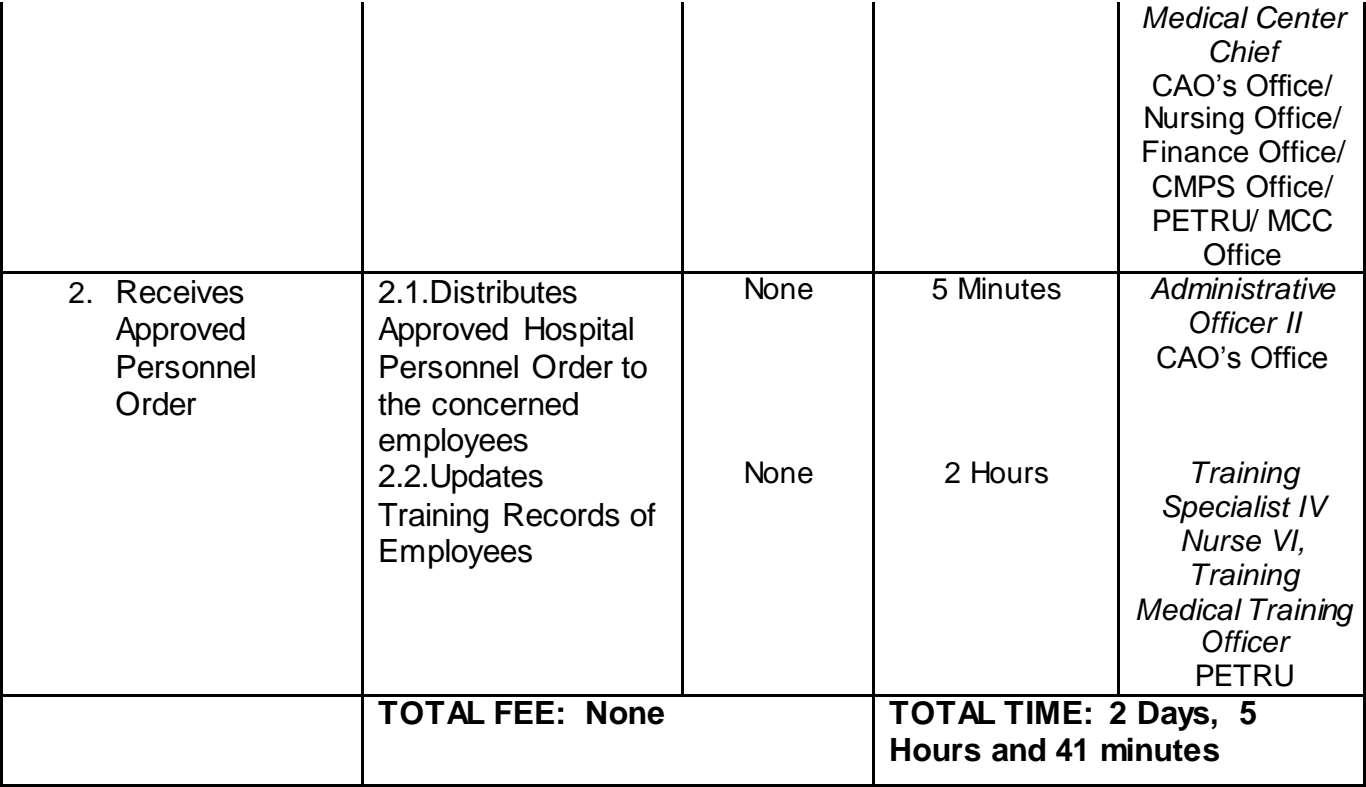
1. Processing Application for External Trainings

The Professional Education, Training, and Research Unit supports the Bicol Medical Center personnel with Plantilla position to attend Learning and Development Interventions in order to equip them with the necessary and required competencies for his/ her position.

OFFICE OR DIVISION:		Professional Education, Training and Research Unit		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		Personnel with Plantilla Position		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Request form for Training/ Seminar/ Conference/ Convention (BMC-F-PETU-001) (1 original copy)		Training Staff		
2. Program/ Invitation letter from the conducting group/ health facility/ agency (1 copy)		Organizing Agency		
3. Justification/ endorsement letter(If requesting for OB) (original copy)		Immediate Head		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits filled-out application form (BMC-F-PETU-001) with attached supporting documents	1.1. Receives documents from the applicant and check the completeness of the documents submitted. Application whose start of the seminar/ convention/ falls on the deadline date or beyond shall be considered late and shall not be accepted	None	5 Minutes	<i>Administrative Aide</i> PETRU
	1.2. Records received training application to the database and assigns a permanent code.	None	5 Minutes	<i>Administrative Aide</i> PETRU
	1.3. Conducts Personnel Development Committee (PDC) Meeting every Thursday to deliberate all training applications	None	2 Hours	<i>Chief Training Officer</i> <i>Head, Human Resource Management Training Specialist IV</i> <i>Nurse VI, Training</i>



	received before the deadline date.			<i>Representatives , Levels I and II Representatives , Employees Union Training Specialist PETRU</i>
	1.4.Prepare Minutes of Meeting	None	1 Hour	
	1.5.Signs the Minutes of Meeting	None	15 Minutes	<i>Chief Training Officer Head, Human Resource Management Training Specialist IV Nurse VI, Training Representatives , Levels I and II Representatives , Employees Union</i>
	1.6. Forwards to the Medical Center Chief for approval.	None	5 Minutes	<i>Administrative Aide/ Training Assistant PETRU</i>
	1.6. Forwards to the Medical Center Chief for approval.	None	5 Minutes	<i>Administrative Aide/ Training Assistant PETRU</i>
	1.7.Approves the Minutes of Meeting	None	1 Day	<i>Medical Center Chief MCC Office</i>
	1.8.Prepare Hospital Personnel Order	None	3 Minutes	<i>Administrative Officer II CAO's Office</i>
	1.9. Forwards to the Chief Administrative Officer for review and recommends approval.	None	3 Minutes	<i>Chief Admin Officer CAO's Office</i>
	1.10. Endorses to the Division Head and Chief Training Officer for signature and MCC for approval.	None	1 Day	<i>Chief Admin Officer/ Chief Nurse/ Finance Officer/ Chief of Medical & Professional Staff/ Chief Training Officer/</i>





2. Processing Request of Internal Clients to Conduct Research at Bicol Medical Center

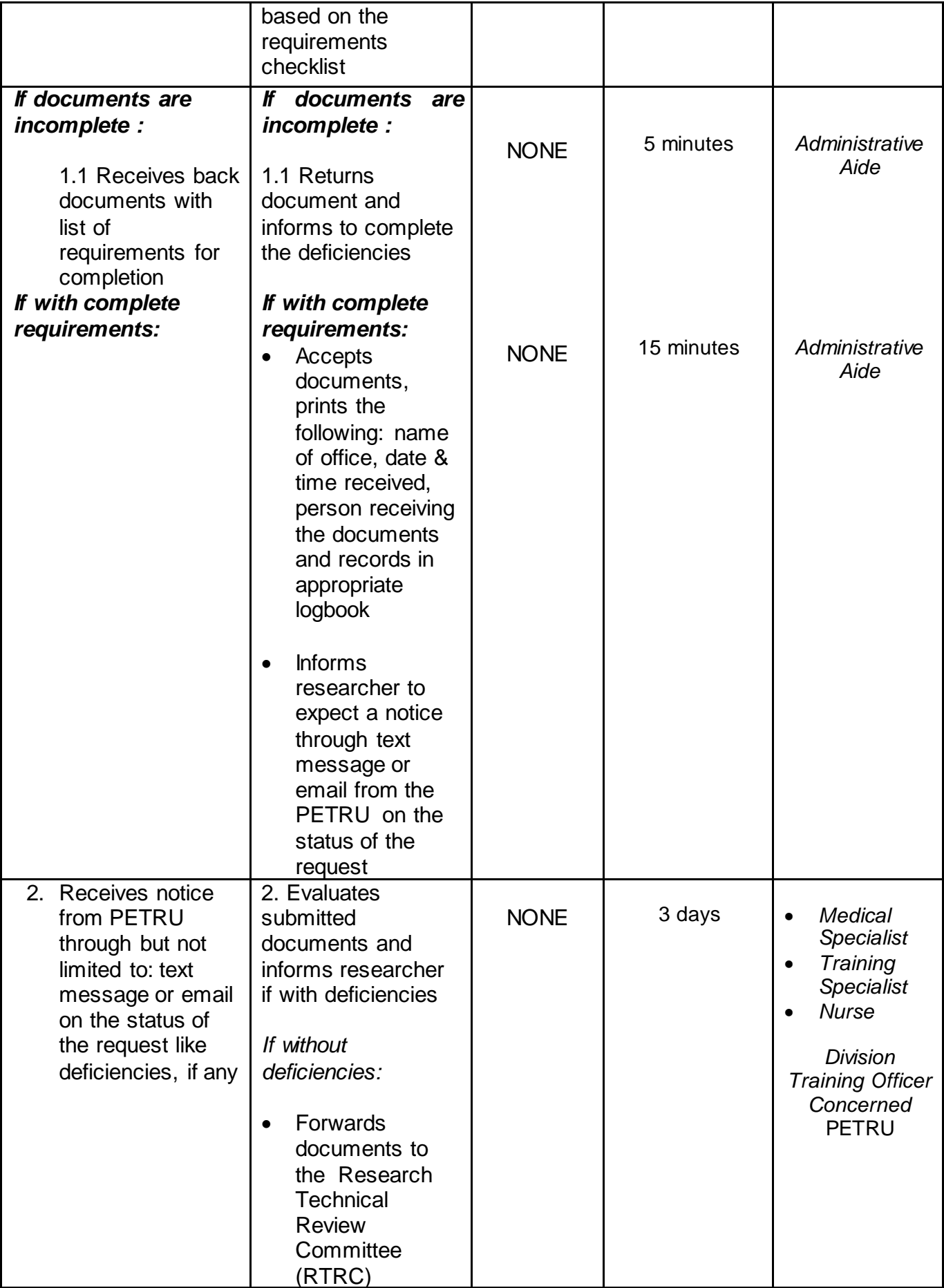
This process involves the management of documentary requirements for review & evaluation of research protocol submitted by any individual who are employees of BMC who intends to do research in this institution either through availment of data, management system, facilities or actual involvement of patients, employees or other clients of the institution.

The process starts at the Professional Education Training and Research Unit (PETRU) for documentary review, evaluation by the Research Technical Review Committee (RTRC) and Research Ethics Committee (REC) for technical and ethical soundness respectively and ends with feed backing from the researcher.

OFFICE OR DIVISION:	PROFESSIONAL EDUCATION TRAINING & RESEARCH UNIT (PETRU) , RESEARCH TECHNICAL REVIEW COMMITTEE (RTRC) RESEARCH ETHICS COMMITTEE	
CLASSIFICATION:	Highly Technical	
TYPE OF TRANSACTION:	G2C – Government to Citizen	
WHO MAY AVAIL:	Employees of BMC	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
1) Letter of intent to conduct research at Bicol Medical Center addressed to the Medical Center Chief through the Chief Training Officer and Data Privacy Officer signed by the researcher/ investigator and recommended by: <i>For Medical Officers (Internal) :</i> Department Chair <i>For other employees (Internal) :</i> Division Head		<ul style="list-style-type: none"> Researcher/ Investigator
2) Certification that the research protocol has been reviewed (If done) <i>For Medical Officers (Internal) :</i> Department Adviser noted by Department Research Coordinator <i>For other employees (Internal) :</i> Adviser and Division Head		<ul style="list-style-type: none"> Department Adviser noted by Department Research Coordinator
3) Three (3) hard copies of Research Protocol (indicate version number on the cover) <i>For other employees (Chapter 1 - Introduction , Chapter 2 – Review of Related Literature , Chapter 3 –</i>		<ul style="list-style-type: none"> Researcher/ Investigator



<p>Methodology) to include copy of questionnaire (English/Tagalog or language that is comprehensible to the respondents)</p> <p>For Medical Officers : Introduction, Literature Search, Methodology</p> <p>and</p> <p>f. Informed Consent / Assent form For respondents 18 y/o & above - Consent form For respondents 17 y/o & below - Assent form</p> <p>g. Curriculum Vitae of the Researcher /Principal Investigator/s</p> <p>h. Curriculum Vitae of Co-Author/s</p> <p>i. Research timeline/ Gantt Chart</p> <p>j. Soft copy of research protocol / study to be sent to bmc.recom@gmail.com</p>				
<p>4) a. Filled out form 2.1 APPLICATION FOR INITIAL REVIEW</p> <p>b. Filled out form 2.2 PROTOCOL SUMMARY SHEET</p>		<ul style="list-style-type: none"> Downloadable forms available at http://bmc.doh.gov.ph/research-ethics/downloadable-forms Downloadable forms available at http://bmc.doh.gov.ph/research-ethics/downloadable-forms 		
<p>5) Copy of research ethics review clearance / certification (if research protocol has been reviewed by single joint review ethics board or other PHREB accredited institution)</p>		<ul style="list-style-type: none"> PHREB accredited Ethics Review board / Committee where the ethics review/ clearance was done Researcher/ Investigator 		
<p>6) Copy of GCP training certificate (for vulnerable human subjects or as deemed necessary)</p>		<ul style="list-style-type: none"> Researcher/ Investigator 		
<p>7) Memorandum of Agreement between BMC and researcher / investigator (Signed by the researcher/investigator only)</p>		<ul style="list-style-type: none"> Downloadable forms available at http://bmc.doh.gov.ph/petru/downloadable-forms 		
<p>8) Filled –out Confidentiality Undertaking form</p>		<ul style="list-style-type: none"> Available @ PETRU 		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits the required documents	1. Receives & performs preliminary assessment of the required documents	NONE	none	Administrative Aide PETRU





	2.1 Evaluates for technical soundness (Refer to RTRC citizen's charter)	NONE	14 working days	<ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Nurse</i> • <i>Medical Technologist</i>
	2.2 Evaluates for ethical soundness (if without clearance yet from single joint review ethics board or from other PHREB accredited institutions)	NONE	60 days (Full Board) 30 days (Expedited)	{Research Technical review Committee} (RTRC) <ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Nurse</i> • <i>Non-institutional member</i>
	(Refer to REC citizen's charter) 2.3 Recommends for approval of the request (if technically & ethically sound) and signs MOA	NONE	1 day	<i>Medical Specialist</i> (Chief Training Officer) PETRU
	2.4 Approves request if technically & ethically sound and signs the MOA	NONE	1 day	<i>Medical Center Chief</i> MCC Office
	2.5 Recommends for approval of the request (if technically & ethically sound) and signs MOA	NONE	1 day	<i>Medical Specialist</i> (Chief Training Officer) PETRU
	2.6 Approves request if technically & ethically sound and signs the MOA	NONE	1 day	<i>Medical Center Chief</i> MCC Office
3. Receives notification on the status of the request <i>If request is Disapproved:</i>	3. Notifies researcher on the approval or disapproval of the request	NONE	10 minutes	<ul style="list-style-type: none"> • <i>Medical Specialist</i> • <i>Training Specialist</i> • <i>Nurse</i>
	3.1 Informs researcher the	None	10 minutes	<i>Division Training Officer</i> <i>concerned</i>



	reasons for disapproval			PETRU
<i>If request is approved :</i>				
4. Proceeds to PETRU to : e) Attend one-on-one pre-conduct of research orientation f) Receive MOA for notarization g) Receive an endorsement slip	4. Conducts orientation & notifies office concerned such as but not limited to : name of researcher, needed data, respondents, date, time of the conduct of research	NONE	1 hour	<ul style="list-style-type: none"> • Medical Specialist • Training Specialist • Nurse (Division Training Officer) PETRU
5. Proceeds to area concerned to conduct research/ data gathering on the specified dates only	5. Monitors the researcher on the conduct of research at Bicol Medical Center	NONE	Specified dates in the MOA	<ul style="list-style-type: none"> • Medical Specialist • Training Specialist • Nurse Division Training Officer PETRU
6. Reports back to PETRU for : c. Feedbacking	6. Conducts post activity evaluation/survey	NONE	30 minutes	<ul style="list-style-type: none"> • Medical Specialist • Training Specialist • Nurse Division Training Officer PETRU
	TOTAL FEES: None		TOTAL TIME: 2 months, 19 days, 2 hours & 5 minutes	



Public Assistance and Complaint Desk Unit External Services



1. Public Assistance and Complaint Desk(PACD) Services

The Public Assistance and Complaint Desk Office is responsible in carrying out the process in providing resolution of complaint filed in the office by the external client. The office is open Monday to Friday from 8:00 am to 5:00 pm, except holidays.

OFFICE OR DIVISION:	Hospital Operations and Patient Support Division/Public Assistance and Complaint Desk Unit			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2C - Government to Citizen			
WHO MAY AVAIL:	In-Patient/Out-Patient/Visitors			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Hospital Record ID (Green Card) (1 original copy) 2. Complaint letter/complaint form (original copy)		OPD-HIMS First Floor Public Assistance and Complaint Desk		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents the Hospital Record ID (Green Card) and /or Valid Identification Card	1.1 Verifies/check information of the complainant to rule out veracity of the complaint; 1.2 Provides the complaint form and gives the appropriate instructions	none	5 minutes	<i>Unit Head/ Supervising Administrative Officer of the day PACDU</i>
2. Fills out the complaint form	2.1 Verifies the completeness of the information given;	None	40 minutes	<i>Unit Head/ Supervising Administrative Officer of the day PACDU</i>
	2.2 Instructs the complainant to wait for further instructions thru text or SMS message regarding the action taken on the complaint;	None	10 minutes	
	2.3 Forwards complaint to the concerned office	None	10 minutes	<i>Unit Head/ Supervising Administrative Officer of the day PACDU</i>



3. Waits for further instruction thru text message that will be sent by PACD	3. Coordinates with the concerned office/department/division Head regarding progress of investigation and resolution to the complaint	none	21 hours & 55 minutes	<i>Unit Head/Supervising Administrative Officer of the day / Concerned office staff PACDU</i>
4. Receives feedback regarding complaint filed	4. Informs the client of the resolution to the complaint raised	none	1 hour	<i>Unit Head/Supervising Administrative Officer of the day PACDU</i>
TOTAL FEES: None		TOTAL TIME: 24 hours		



Public Health Unit

External Services



1. Issuance of Information, Education, Communication (IEC) Materials

IEC materials are useful in health promotion and disease prevention advocacies. The Public Health Unit is open daily from Mondays thru Fridays to assist all clients, public or private in the promotion of health thru provision of Information, Education and Communication (IEC) materials.

OFFICE OR DIVISION:		Public Health Unit		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2C – Government to Citizen / G2B – Government to Business / G2G – Government to Government		
WHO MAY AVAIL:		All		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Proceeds to Public Health Unit and request for the needed IEC materials.	1. Verifies for the availability of IEC materials. 1.1. If available, issues IEC material to the requesting party	None	5 minutes	<i>Health Education & Promotion Officer</i> Public Health Unit
2. Writes the title of the IEC material & name/agency of the requesting party.	2. Records the quantity of IEC materials issued in the logbook	None	5 minutes	<i>Health Education & Promotion Officer</i> Public Health Unit
TOTAL FEES: None		TOTAL TIME: 10 minutes		



Quality Management System

Internal Services



1. Control of New Documents

Control of new documents as part of the maintenance of the Quality Management System (QMS) in accordance with the International Standard.

QMS office is open daily from Monday until Friday, 8:00 am to 5:00pm.

OFFICE OR DIVISION:		MCC/Quality Management System Office (QMS)		
CLASSIFICATION:		Simple		
TYPE OF TRANSACTION:		G2G – Government to Government		
WHO MAY AVAIL:		BMC Employee (Process Owners)		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Approved Document (original copy) • DCN (If applicable) (original copy) 		Process Owner Process Owner		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Presents the new document.	1.1 Receives the new document and review its completeness.	None	3 minutes	<i>Document Control Officer</i> QMS
	1.2 Stamps "CONTROLLED" the new documents on first page.	None	1 minute	<i>Document Control Officer</i> QMS
	1.3 3. Includes/ records in the Masterlist of documents.	None	2 minutes	<i>Document Control Officer</i> QMS
2. Receives the controlled document.	2. Gives copy of the controlled document to the process owner.	None	1 minute	<i>Document Control Officer</i> QMS
TOTAL FEES: None		TOTAL TIME: 7 minutes		



Inspection Committee

External Services

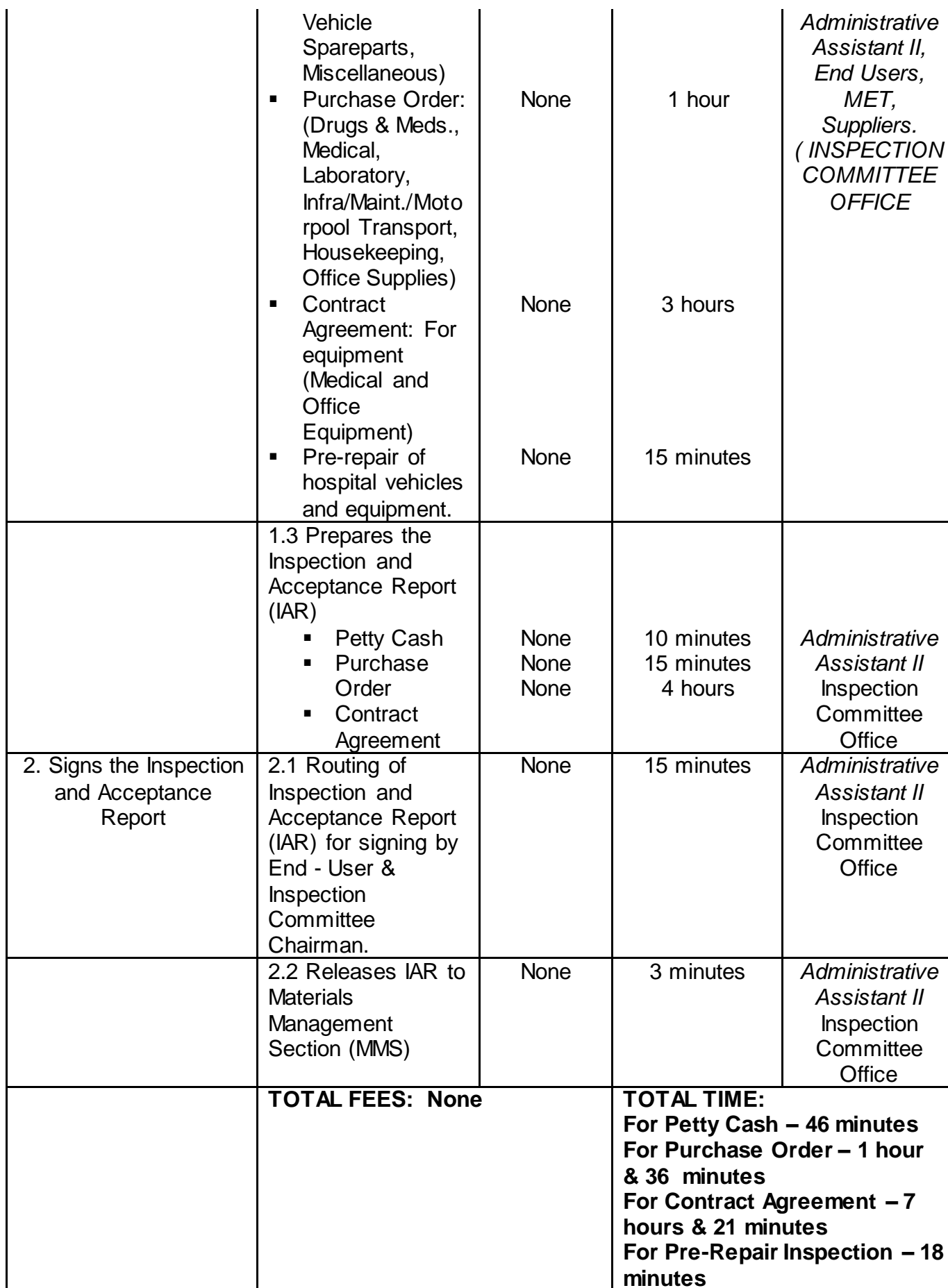


1. Inspection of Supplies and Equipment

Inspection Committee (IC) check the conformity of the specifications and terms and conditions stated in the Purchase Order (P.O.), Schedule of Requirements of the Contract Agreement (C.A.) and Purchase Request through Petty Cash.

Inspection Committee (IC) services are available from Monday to Friday, 7:30AM to 5:30AM except Saturday, Sunday and Holidays.

OFFICE OR DIVISION:	Inspection Committee			
CLASSIFICATION:	Simple			
TYPE OF TRANSACTION:	G2G – Government to Government G2B – Government to Business			
WHO MAY AVAIL:	Employees, End-Users, MET and Suppliers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Delivery Receipts, Sales Invoice together with the approved Contract Agreement (C.A.), Purchase Order (P.O.) and Purchase Request (P.R.) (1 original copy)		Materials Management Section		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSONS RESPONSIBLE
1. Submits complete documents for inspection to the Inspection Committee (receiving personnel).	1.1 Receives and records documents for inspection and forwards to chairperson of committee on inspection.	None	3 minutes	<i>Administrative Assistant II</i> Inspection Committee Office
	1.2 Conducts inspection with the End-Users/representative, MET and Suppliers of delivered items, checks the conformity of specification based in the Schedule of Requirements for Contract Agreement, Purchase Order and Purchase Request of Petty Cash.	None	None	<i>Chairman, Administrative Assistant III, Administrative Assistant II, End Users, MET, Suppliers.</i> (INSPECTION COMMITTEE OFFICE)
	▪ Petty Cash (Drugs & Meds, Dietary, Hospital	None	15 minutes	<i>Chairman, Administrative Assistant III,</i>





FEEDBACK AND COMPLAINTS MECHANISM	
How to send feedback	<p>Clients send their feedback thru the following:</p> <ol style="list-style-type: none"> 1. <u>Feedback thru Suggestion box:</u> All wards and offices have their own suggestion box placed in the area accessible to transacting clients. Client writes feedback on a piece of paper and drop on a suggestion box. The suggestion box displayed the contact numbers of the Customer Satisfaction Committee (CSC) at 09271275765, the designated responsible unit to handle feedback of clients. 2. <u>Feedback thru Customer Satisfaction Digital Survey:</u> Client inputs feedback in the digital survey during survey activity conducted by CSC. At the end of the survey, the contact numbers of the CSC, the unit in charge to handle feedback is displayed for the information of the client.
How feedbacks are processed	<p>The office/ committee in charge of handling feedback is the Customer Satisfaction Committee (CSC). The CSC collects and processes feedback as follows:</p> <ol style="list-style-type: none"> 1. <u>Feedback from suggestion box</u> Every Friday, the CSC collects, compiles and records all feedback taken from the suggestion box. Relevant feedback (s) will be validated and verified. Feedback requiring appropriate action will be forwarded to concerned office/unit thru the Request for Action form (RFA). RFA will be acted upon within 3 days upon issuance. Implementation of action will be verified for effectiveness by the concerned Division Head. 2. <u>Feedback from Digital survey</u>



	<p>The CSC checks feedback from the Digital survey weekly and conducts verification to relevant findings. Feedback requiring appropriate action will be forwarded to concerned office/unit thru the Request for Action form (RFA). RFA will be acted upon within 3 days upon issuance. Implementation of action will be verified for effectiveness by the concerned Division Head.</p>
How to file a complaint	<p>Client files complaint as follows:</p> <ol style="list-style-type: none"> 1. <u>Complaints via Public Assistance and Complaint Desk (PACD)</u> Client proceeds to the PACD and fills out complaint form. PACD is located in the 3 areas of the hospital: (a) watcher's entrance gate, main building; (b) watcher's entrance gate, upper ground floor, 8th storey building and (c) OPD lobby, OPD building. 2. <u>Complaints via text hotline (093008263426)</u> Client may also send complaints thru the text hotline at the office of PAU (Public Assistance Unit). 3. <u>Complaints via 8888</u> Client may send complaints thru the 8888 at the Citizen's Complaint Center, Office of the President.
How complaints are processed	<p>The office in charge of processing complaints of client is the Public Assistance Unit (PAU).</p> <ol style="list-style-type: none"> 1. <u>Complaints via Public Assistance and Complaint Desk (PACD)</u> The complaint form filed by the client will be forwarded to PAU's office. After recording in the PAU's logbook, the complaint will then be forwarded to the concerned division Head. The concerned division Head conducts investigation, makes narrative report and issues Request for Action (RFA)



	<p>to the concerned personnel or unit. RFA will be acted upon within 3 days upon issuance. Implementation of action will be verified for effectiveness by the concerned Division Head.</p> <p>2. <u>Complaints via text hotline (093008263426)</u></p> <p>All complaints received via text hotline of the PAU's office will be printed and recorded in the PAU's logbook. The printed complaint will then be forwarded to the concerned division Head. The concerned division Head conducts investigation, makes narrative report and issues Request for Action (RFA) to the concerned personnel or unit. RFA will be acted upon within 3 days upon issuance. Implementation of action will be verified for effectiveness by the concerned Division Head.</p> <p>3. <u>Complaints via 8888</u></p> <p>All complaints received via 8888 at the office of the Medical Center Chief (MCC) will be printed and forwarded to the PAU's office for appropriate action. After recording in the PAU's logbook, the complaint will then be forwarded to the concerned division Head. The concerned division Head conducts investigation, makes narrative report and issues Request for Action (RFA) to the concerned personnel or unit. RFA will be acted upon within 3 days upon issuance. Implementation of action will be verified for effectiveness by the concerned Division Head.</p>
Contact Information of CCB, PCC, ARTA	<p>CCB: 0908 881 6565 (SMS) CSC (Region V): 052-482-0314 CSC(Cam Sur Field office): 054-4802332 PCC : 02- 8736-8645 / 02-8736-8603 02-8736-8629 / 02-8736-8621 ARTA: 02-8478-5091 / 02-8478-5093 02-8478-5099</p>



LIST OF OFFICES

Office	Address	Contact Information
Bicol Medical Center	Concepcion Pequena Naga City	(054)-472-6125 to 6130 bmc.nagacity@gmail.com