



**SERVICE STANDARD**  
**Admitting Section**



**VISION:** To provide quality health care to the people of the City of Manila.

**MISSION:** To become one of the best providers of quality health care services in the City of Manila.

Type of front line service	Documentary Requirements	Client /Requesting Party	Office/Person Responsible	Steps/ Procedures	Form to Fill-up	Fee	Processing Time
<b>OPD</b>	Hospital Card Barangay Certificate/ID	Relative of the patient /patient	Admitting Clerk	1. Kunin muna ang <b>RESULTA</b> ng <b>X-Ray/Laboratory</b> bago po pumila sa <b>OPD</b>		No fees to be collected (Walang kaukulang bayad)	5minutes ( <u>5 minuto</u> )
			Admitting Clerk	2. Ang Oras ng pagpapalista at Pagbibigay ng Numero sa Admitting Section. <b>SA UMAGA 6:00AM</b> <b>SA HAPON 11:30AM</b> <b>PAALALA</b> sa Oras ng Pagtawag at pagbibigay ng NUMERO pumila tayo at paunahin po natin ang mga <b>MATANDA</b> at yung <b>may DISABILITY</b>		No fees to be collected (Walang kaukulang bayad)	5minutes ( <u>5 minuto</u> )
				3. Ibigay ang Registration Card at sabihin kung ano ang iyong <b>PATITIGNAN</b> at kailan ang huling <b>konsulta</b> .			5minutes ( <u>5 minuto</u> )
				4. Ang inyong <b>RECORD</b> ay dadalhin ng <b>OPD STAFF</b> sa kinauukulang kwarto ng <b>DOKTOR</b> para sa konsultasyon at Doon Hintayin Tawagin ang inyong Pangalan o Numero			5minutes ( <u>5 minuto</u> )

For inquiries, suggestion, comment and recommendation, please call at telephone nos. **2523942** and/or send it to our email address **ospitalngtondo\_ont@yahoo.com**

**ISAIAS R. CANDO JR., M.D.**  
Hospital Director