



Gat Andres Bonifacio Memorial Medical Center



I. Mandate:

Gat Andres Bonifacio Memorial Medical Center (GABMMC) was established to provide a hospital for the least fortunate residents of all Districts of Manila. By virtue of City Ordinance No. 7947, a seven story-building was erected at 8001 Delpan Street, Tondo, Manila, District I, at the very heart of the City's most depressed and thickly populated area. This was the 4th hospital in the city built for that purpose. Its catchment area has 137 barangays inclusive of Parola, Smokey Mountain, Recto, Divisoria, Balut, Velasquez and Vitas. On April 30, 1998, GABMMC opened its doors to its employees and staff for planning and organization.

The Out-Patient Department was soon opened to the public and was followed by the Emergency Room and Wards making the hospital fully operational on February 1999. The hospital has a total of 150 bed capacity. It offers services and subspecialties such as Medical, Pediatric, Surgical services, OB-Gyne, Eye Center, Dental, TB-DOTS and Diabetic Clinic. GABMMC has also Ancillary Services, Laundry, Laboratory, Blood Bank, Radiology, Heart Station and Pharmacy.

In 2010, the Radiology Department was renovated and had an expansion to give way for the newly acquired CT-scan Machine.

On June 2011, GABMMC was chosen to be a SATELLITE TREATMENT CENTER in Manila to cater Multi-Drug Resistant (MDR) TB patients and was recognized as OUTSTANDING TB Diagnostic Committee (TBDC) for the 4th Manuel L. Quezon Achiever Award.

On December 8, 2014, the Manila Dialysis Center was established through the Joint Venture Agreement between the City of Manila and B. Braun Avitum Philippines, Inc. as provided for under Manila City Council Ordinance No. 8346. This facility provides Renal Care of the highest standards to indigent Manilans FREE OF CHARGE. A total of Twenty-six (26) machines (Phase I) were made available at the ground floor of the Dialysis Center to be utilized for providing totally free hemodialysis treatments to indigent residents of Manila with kidney disease.

In 2016, the Eye Center of GABMMC was inaugurated to provide quality and exceptional eye care services, new instruments were acquired to modernize the operating capabilities for cataract surgery and various eye procedures.

II. Vision:

The Gat Andres Bonifacio Memorial Medical Center is a leading health care institution in the City of Manila, committed to provide excellent care and service responsive to the needs of our patients.

III. Mission:

To enhance lives and preserve the health of the residents of the City of Manila, enabling access to a fully integrated network of specialty services, delivered with utmost integrity, compassion and professionalism.

IV. Service Pledge:

We commit to provide quality health care and exemplary public service to our stakeholders with Integrity, Honest, Diligence, Humility, Concern, Compassion and Spirituality.



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Emergency Department

External Services



1. Consultation for New Patients

The Emergency Department is open 24/7 to cater the patients in need of urgent medical attention.

| Office of Division: | Emergency Department | | | |
|--|--|-----------------|-----------------|---|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| None | | N/A | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Relative/s or Patient fills up hospital card and sign consent form | 1.1 Admitting Clerk interviews patient or relative/s | None | 5 Minutes | <i>Admitting Clerk</i> (Admitting and Discharge Section) |
| | 1.2 Triage officer directs patient to department concerned | None | 5 Minutes | <i>Nurse</i> (Emergency Department) |
| | 1.3 MO treats patient and gives prescription to those patient to be sent home and issues admitting order for admission | None | 30 Minutes | <i>Medical Officer</i> (Emergency Department) |
| | TOTAL: | None | 40 Minutes | |

2. Consultation for Old Patients

The Emergency Department is open 24/7 to cater the patients in need of urgent medical attention.

| Office of Division: | Emergency Department | | | |
|--|---|-----------------------|-----------------|---|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital Card | | Patient or Relative/s | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Relative/s or Patient signs the consent form | 1.1 Admitting Clerk interviews patient or relative/s | None | 5 Minutes | <i>Admitting Clerk</i> (Admitting and Discharge Section) |
| | 1.2 Triage officer directs patient to department concerned | None | 5 Minutes | <i>Nurse</i> (Emergency Department) |
| | 1.3 MO treats patient and gives prescription to those patient to be sent home | None | 30 Minutes | <i>Medical Officer</i> (Emergency Department) |
| | TOTAL: | None | 40 Minutes | |



3. Patient for Admission

Patients are admitted at the Emergency Department.

| | | | | |
|--|---|------------------------|------------------------|---|
| Office of Division: | Emergency Department | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Notice of Admission | | ER Nurse | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Relative/s or Patient fills up hospital card and sign consent form | 1.1 Admitting Clerk interviews patient or relative/s | None | 5 Minutes | <i>Admitting Clerk</i> (Admitting and Discharge Section) |
| | 1.2 Triage officer directs patient to department concerned | None | 5 Minutes | <i>Nurse</i> (Emergency Department) |
| | 1.3 Medical Officer treats patient and issues admitting order for admission | None | 30 Minutes | <i>Medical Officer</i> (Emergency Department) |
| | 1.4 ER Nurse carry out orders of the Medical Officers | None | 30 Minutes | <i>Nurse</i> (Emergency Department) |
| | 1.5 ER Nurse on duty to accompany patient to ward | None | 30 Minutes | <i>Nurse</i> (Emergency Department) |
| | TOTAL: | None | 1 Hour, 40 Minutes | |



Out-Patient Department

External Services



1. Consultation for New Patients

| Office of Division: | Out-Patient Department | | | |
|--|--|--|-----------------|--|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Barangay Certificate | | Barangay Hall | | |
| Any Government-issued Identification Card | | GSIS, SSS, UMID , Driver's License, Voter's ID or Voter's Certification or Master List of Voter from Barangay certified by Chairman/ Kagawad/ Barangay secretary | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Relative/s or Patient fills up hospital card and sign consent form | 1.1 OPD Triage interviews and registers the patient | None | 3 Minutes | age Nurse/ Nursing Aide (Out-patient Department) |
| | 1.2 Medical Officer examines the patient and gives prescription to those patient to be sent home | None | 15 Minutes | Medical Officer (OPD Section) |
| | TOTAL: | None | 18 Minutes | |

Out-patient Medical Consultation for New Patients

2. Consultation for Old Patients

Out-patient Medical Consultation for Old Patients

| Office of Division: | Out-Patient Department | | | |
|--|--|-----------------------|-----------------|--|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital Card | | Patient or Relative/s | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Relative/s or Patient signs consent form | 1.1 OPD Triage interviews and registers the patient | None | 3 Minutes | age Nurse/ Nursing Aide (Out-patient Department) |
| | 1.2 Medical Officer examines the patient and gives prescription to those patient to be sent home | None | 15 Minutes | Medical Officer (OPD Section) |
| | TOTAL: | None | 18 Minutes | |



Medical Social Services

External Services



1. Securing Social Classification Stamp of Hospital Card

The Social Classification Stamp of Hospital Card serves as the basis of patient eligibility for Medical Social Service in accordance with the DOH AO 51-A s.2001. Patient classification provides safety net in order that the certified indigents in a health facility will be given the rightful share in embracing services which has been created for them. The patient classification shall be stamped on the OPD & ER Hospital Card and /or on the Notice of Admission Sheet for the In-Patient. The Classification Stamp contents are as follows: 1) Classification Category: Class A, B, C-1, C-2, C-3 and Class D; 2) PhilHealth Category Membership (with or without); 3) Residency Category: Manila or Non-Manilan.

| Office of Division: | Medical Social Services | | | |
|--|---|--|-----------------|--|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Primary: Any two (2) of the following: | | | | |
| Voter's ID or Voter's Certification | | COMELEC | | |
| Master List of Voters certified by Brgy. Chairman, Kagawad or Brgy. Secretary | | Barangay Hall | | |
| Proof of billing under the name of patient/ bread winner/family head | | Meralco, Maynilad, PLDT | | |
| Government-issued Identification | | GSIS, SSS, UMID , Driver's License, Voter's ID or Voter's Certification or Master List of Voter from Barangay certified by Chairman/ Kagawad/ Barangay secretary | | |
| Proof of PhilHealth Active membership (MDR; Contribution Receipt) for pregnant | | PhilHealth | | |
| Secondary: | | | | |
| Barangay Certificate or ID | | Barangay Hall | | |
| Birth Certificate for minor | | PSA, Municipal Local Civil Registry | | |
| Marriage Contract | | PSA, Municipal Local Civil Registry | | |
| Social Case Study Report | | Local DSWD | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient presents documentary requirements | 1.1 Social Worker conducts intake interview / assessment and classification | None | 5 Minutes | <i>cial Welfare Officer</i> (Medical Social Service Section) |
| | 1.2 Social Worker orients patient of Basic Hospital Program / services and policies | None | 5 Minutes | <i>cial Welfare Officer</i> (Medical Social Service Section) |
| | 1.3 Social Worker issues hospital card/or extend necessary psychological intervention / assistance enrolment to sponsored Philhealth and Point of Service | None | 7 Minutes | <i>cial Welfare Officer</i> (Medical Social Service Section) |
| | 1.4 Social Worker Office stamped classification to card and issue MSS card if necessary. | None | 3 Minutes | <i>cial Welfare Officer</i> (Medical Social Service Section) |
| | TOTAL: | None | 20 Minutes | |



2. Seeking Medical Social Service Assistance/ Intervention

The Medical Social Workers primarily helping people become more self- sufficient preventing dependency; increase their capabilities for problem solving and coping, strengthening family relationship; and restoring individuals, families, and groups to successful social functioning. Help them obtain adequate resources to address their needs. evaluating the capabilities to care themselves, for children, or other dependents; counselling and psychosocial therapy; referral and channelling; mediation; advocating for social causes; informing organizations of their obligations to individuals, facilitating health care provisions and linking clients/ patients to resources.

| Office of Division: | Medical Social Services | | | |
|---|--|--|-----------------|---|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital Card with Classification | | Medical Social Services | | |
| Prescription of needed Medicines/ Diagnostic/ Laboratory procedures with Doctor's Printed Name, Signature & license Number approved by Medical Specialist | | Ward Nurse | | |
| Proof of billing under the name of patient/ bread winner/family head | | Meralco, Maynilad, PLDT | | |
| Medical Certificate for OPD/In-patient/ER | | Medical Officer of the Concerned Ward | | |
| Clinical Abstract for admitted patient (needed medicines/ procedures must be indicated) | | Medical Officer of the Concerned Ward | | |
| Any Two (2) Valid Government Issued ID | | GSIS, SSS, UMID , Driver's License, Voter's ID or Voter's Certification or Master List of Voter from Barangay certified by Chairman/ Kagawad/ Barangay secretary | | |
| Barangay Certificate of Residency/Indigency (when necessary) | | Barangay Hall | | |
| Social Case Study Report (for OPD)/Social Case Abstract (In-Patient) | | Local DSWD | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient presents documentary requirements | 1.1 Social Worker conducts intake interview / assessment and classification | None | 5 Minutes | cial Welfare Officer (Medical Social Service Section) |
| | 1.2 Social Worker orients patient of Basic Hospital Program / services and policies | None | 5 Minutes | cial Welfare Officer (Medical Social Service Section) |
| | 1.3 Social Worker extends necessary psychological intervention / Social case management that includes resource mobilization to address immediate needs/ problems | None | 7 Minutes | cial Welfare Officer (Medical Social Service Section) |
| | 1.4 Social Worker conducts ward rounds and/ or Home visit whenever necessary | None | 3 Minutes | cial Welfare Officer (Medical Social Service Section) |
| | TOTAL: | None | 20 Minutes | |



Medical Records Section

External Services



1. Registration of Certificate of Live Birth (for Muslim Parents)

Registration of Certificate of Live Birth for Muslim Parents

| | | | | |
|--|--|-------------------------|------------------------|--|
| Office of Division: | Medical Records Section | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Properly filled-up Muslim Form | | Medical Records Section | | |
| Marriage Certificate signed by the Imam | | | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Parents of the baby will proceed to the Medical Records Section and present the documentary requirements | 1.1 Interview patient | None | 15 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.2 Preparation of COLB | None | 10 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.3 Release of Xerox Copy of typed COLB (NHIP Members) | None | 5 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | TOTAL: | None | 30 Minutes | |



2. Registration of Certificate of Live Birth (if married)

Registration of Certificate of Live Birth if the parents are married.

| | | | | |
|--|--|-------------------------------------|------------------------|--|
| Office of Division: | Medical Records Section | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Marriage Contract | | PSA, Municipal Local Civil Registry | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Father and Mother will proceed to the Medical Records Section and present documentary requirements | 1.1 Interview patient | None | 15 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.2 Preparation of COLB | None | 10 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.3 Release of Xerox Copy of typed COLB (NHIP Members) | None | 5 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | TOTAL: | None | 30 Minutes | |



3. Registration of Certificate of Live Birth (if not married, legal age)

Registration of Certificate of Live Birth if the parents are not married but are of legal age.

| | | | | |
|---|--|-------------------------|------------------------|--|
| Office of Division: | Medical Records Section | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Affidavit to Use the Surname of Father (AUSF) filled-up by the mother of the baby | | Medical Records Section | | |
| Affidavit of Acceptance of Paternity (AAP) or Personal Handwritten Instrument (PHI) signed by the parents of the baby | | Medical Records Section | | |
| Cedula or SSS ID of the parents of the baby (1 photocopy) | | Barangay Hall, SSS | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Parents of the baby will proceed to the Medical Records Section and present documentary requirements | 1.1 Interview patient | None | 15 Minutes | Medical Records Clerk (Medical Record Section) |
| | 1.2 Preparation of COLB | None | 10 Minutes | Medical Records Clerk (Medical Record Section) |
| | 1.3 Release of Xerox Copy of typed COLB (NHIP Members) | None | 5 Minutes | Medical Records Clerk (Medical Record Section) |
| | TOTAL: | None | 30 Minutes | |



4. Registration of Certificate of Live Birth (if not married, both minors)

Registration of Certificate of Live Birth if parents are not married and are both minors.

| | | | | |
|---|--|-------------------------|------------------------|--|
| Office of Division: | Medical Records Section | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Cedula or SSS ID of the parents of the baby (1 photocopy) | | Barangay Hall, SSS | | |
| Affidavit of Acceptance of Paternity (AAP) or Personal Handwritten Instrument (PHI) signed by the parents of the baby with their guardian's signature | | Medical Records Section | | |
| Cedula or SSS ID of the guardian of the baby's parents (1 photocopy) | | Barangay Hall, SSS | | |
| Affidavit to Use the Surname of Father (AUSF) signed by the mother of the baby with her guardian's signature | | Medical Records Section | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Parents of the baby accompanied by their guardians will proceed to the Medical Records Section and present the documentary requirements | 1.1 Interview patient | None | 15 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.2 Preparation of COLB | None | 10 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.3 Release of Xerox Copy of typed COLB (NHIP Members) | None | 5 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | TOTAL: | None | 30 Minutes | |



5. Request for Registered Certificate of Live Birth (COLB)

Request for Registered Certificate of Live Birth

| | | | | |
|--|---|------------------------|------------------------|--|
| Office of Division: | Medical Records Section | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | | WHERE TO SECURE | |
| Cedula or SSS ID of the parents of the baby (1 photocopy) | | | Barangay Hall, SSS | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Parents will proceed to the Medical Records Section and present documentary requirements | 1.1 Counter checking for the availability | None | 20 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | 1.2 Release of registered COLB | None | 10 Minutes | <i>Medical Records Clerk</i> (Medical Record Section) |
| | TOTAL: | None | 30 Minutes | |



Pharmacy Section

External Services



1. Availing of Free Medicines (Filling of Prescription)

Patients may avail of free medications after their consultation at the Pharmacy.

| | | | | |
|--|---|------------------------|--------------------------------|---|
| Office of Division: | Pharmacy Section | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | | WHERE TO SECURE | |
| Hospital Card with Classification | | | Medical Social Services | |
| Prescription Form | | | Medical Officer from OPD or ER | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient, relative/s or guardian will proceed to the Pharmacy Section with the documentary requirements | 1.1 Pharmacist receives properly filled up prescription order in duplicate copies | None | 5 Minutes | <i>Pharmacist</i> (Pharmacy Section) |
| | 1.2 Pharmacist dispenses the medication | None | 5 Minutes | <i>Pharmacist</i> (Pharmacy Section) |
| | TOTAL: | None | 10 Minutes | |



Pathology Department

External Services



1. Availing of Free Blood Chemistry for In-patients and Emergency Patients

Patients may avail of free laboratory procedures of the hospital.

| | | | | |
|---|--|------------------------|--------------------------------|--|
| Office of Division: | Pathology Department | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | | WHERE TO SECURE | |
| Hospital Card with Classification | | | Medical Social Services | |
| Laboratory Request Form | | | Medical Officer from OPD or ER | |
| Charge Form | | | ER Nurse | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient, relative or guardian will proceed to the Laboratory Reception Area with the documentary requirements | 1.1 Clerk receives the laboratory request | None | 10 Minutes | Laboratory Clerk (Laboratory Section) |
| | 1.2 Extraction | None | 15 Minutes | Medical Technologist (Laboratory Section) |
| | 1.3 Processing of applicable procedures/ examinations and release of official results to Nurse/Nursing Aide. | None | 6 Hours | Medical Technologist (Laboratory Section) Nurse/Nursing Aide (ER) |
| | TOTAL: | None | 6 Hours, 25 Minutes | |



2. Availing of Free Blood Chemistry for Out-patients

Patients may avail of free laboratory procedures of the hospital.

| | | | | |
|---|--|--------------------------------|------------------------|---|
| Office of Division: | Pathology Department | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C – Government to Client | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital Card with Classification | | Medical Social Services | | |
| Laboratory Request Form | | Medical Officer from OPD or ER | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient will proceed to the Laboratory Reception Area with the documentary requirements | 1.1 Clerk receives the laboratory request | None | 10 Minutes | Laboratory Clerk (Laboratory Section) |
| | 1.2 Extraction | None | 15 Minutes | Medical Technologist (Laboratory Section) |
| | 1.3 Processing of applicable procedures/ examinations and release of official results to Nurse/Nursing Aide. | None | 1 Day | Medical Technologist (Laboratory Section) Nurse/Nursing Aide (OPD) |
| | TOTAL: | None | 1 Day, 25 Minutes | |



3. Availing of Free Routine Laboratory Tests (CBC, Urinalysis, Fecalysis) for Out-patients

Patients may avail of free laboratory procedures of the hospital.

| | | | | |
|---|--|--------------------------------|------------------------|---|
| Office of Division: | Pathology Department | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital Card with Classification | | Medical Social Services | | |
| Laboratory Request Form | | Medical Officer from OPD or ER | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient will proceed to the Laboratory Reception Area with the documentary requirements | 1.1 Clerk receives the laboratory request | None | 10 Minutes | Laboratory Clerk (Laboratory Section) |
| | 1.2 Extraction | None | 15 Minutes | Medical Technologist (Laboratory Section) |
| | 1.3 Processing of applicable procedures/ examinations and release of official results to Nurse/Nursing Aide. | None | 1 Day | Medical Technologist (Laboratory Section) Nurse/Nursing Aide (OPD) |
| | TOTAL: | None | 1 Day, 25 Minutes | |



4. Availing of Free Routine Laboratory Tests (CBC, Urinalysis, Fecalysin) for In-patients and Emergency Patients

Patients may avail of free laboratory procedures of the hospital.

| | | | | |
|---|--|------------------------|--------------------------------|--|
| Office of Division: | Pathology Department | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | | WHERE TO SECURE | |
| Hospital Card with Classification | | | Medical Social Services | |
| Laboratory Request Form | | | Medical Officer from OPD or ER | |
| Charge Form | | | ER Nurse | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient, relative or guardian will proceed to the Laboratory Reception Area with the documentary requirements | 1.1 Clerk receives the laboratory request | None | 10 Minutes | Laboratory Clerk (Laboratory Section) |
| | 1.2 Extraction | None | 15 Minutes | Medical Technologist (Laboratory Section) |
| | 1.3 Processing of applicable procedures/ examinations and release of official results to Nurse/Nursing Aide. | None | 2 Hours | Medical Technologist (Laboratory Section) Nurse/Nursing Aide (ER) |
| | TOTAL: | None | 2 Hours, 25 Minutes | |



Radiology Department

External Services



1. Availing of Free Radiologic Procedures

Patients may avail of free laboratory procedures of the hospital.

| | | | | |
|--|---|-------------------------|------------------------|---|
| Office of Division: | Radiology Department | | | |
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Patient's Chart | | Nurse or Nursing Aide | | |
| Birth Certificate | | Medical Records Section | | |
| Charge Form | | Nurse | | |
| Discharge Summary | | Nurse | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient, relative/s or guardian will proceed to the Radiology Reception Area with the documentary requirements | 1.1 Rad tech receives request / referral from OPD, OR, ER and wards | None | 15 Minutes | <i>Radiologic Technologist (Radiology Department)</i> |
| | 1.2 Rad Tech performs the procedures and advices patient / relatives to return to get the official result | None | 3 Days | <i>Radiologic Technologist (Radiology Department)</i> |
| | TOTAL: | None | 3 Days, 15 Minutes | |



Billing and Philhealth Section

External Services



1. For Philhealth and Discharge of Patients

Patients must submit all documents at the Billing and Philhealth Section prior to their discharge.

| Office of Division: | Billing and Philhealth Section | | | |
|--|--|-------------------------|-----------------|---|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Discharge Slip | | Ward | | |
| Discharge Summary | | Ward | | |
| Availment Form | | Ward | | |
| Properly filed-up Philhealth Forms | | Medical Social Services | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient, relative/s or guardian will proceed to the Billing and Philhealth Section with the documentary requirements | 1.1 Prepare necessary bills and print final statement of account for Philhealth purposes | None | 15 Minutes | Billing and Philhealth Clerk (Billing and Philhealth Section) |
| | 1.2 Inform patient to submit Philhealth forms and other documents | None | 15 Minutes | Billing and Philhealth Clerk (Billing and Philhealth Section) |
| | TOTAL: | None | 30 Minutes | |



Flora V. Valisno De Siojo Dialysis Center

External Services



1. Free Hemodialysis Treatment for Out-Patients

The Flora V. Valisno de Siojo Dialysis Center provides totally free hemodialysis treatments for kidney disease-stricken patients.

| Office of Division: | Flora V. Valisno De Siojo Dialysis Center | | | |
|--|--|-----------------|-----------------|---|
| Classification: | Simple | | | |
| Type of Transaction: | G2C | | | |
| Who may avail: | All | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Social Case Study | Local DSWD | | | |
| Latest Clinical Abstract | Current Dialysis Center Where Patient is Enrolled | | | |
| Latest Laboratory Result | Current Dialysis Center Where Patient is Enrolled | | | |
| Latest Hepatitis Profile | Current Dialysis Center Where Patient is Enrolled | | | |
| Last Three (3) Hemodialysis Flow Sheet | Current Dialysis Center Where Patient is Enrolled | | | |
| Voter's ID or Voter's Certification | COMELEC | | | |
| Two (2) Government-issued IDs | GSIS, SSS, UMID , Driver's License, Voter's ID or Voter's Certification or Master List of Voter from Barangay certified by Chairman/ Kagawad/ Barangay secretary | | | |
| PhilHealth MDR | PhilHealth | | | |
| PhilHealth Consumption Certificate | Current Dialysis Center Where Patient is Enrolled | | | |
| Barangay Certificate of Indigency | Barangay Hall | | | |
| Hospital Card with Classification | Medical Social Services | | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Patient, relative/s or guardian will proceed to the Medical Social Services to submit requirements | 1.1 Social Worker conducts intake interview / assessment and classification | None | 5 Minutes | Social Welfare Officer (Medical Social Service Section) |
| | 1.2 Social Worker orients patient of Basic Services and Policies of the Dialysis Center | None | 5 Minutes | Social Welfare Officer (Medical Social Service Section) |
| | 1.3 Social Worker issues hospital card/ | None | 7 Minutes | Social Welfare Officer (Medical Social Service Section) |
| | 1.4 Social Worker Office stamped classification to card and labels the card as Dialysis Patient enrolled at the center. | None | 3 Minutes | Social Welfare Officer (Medical Social Service Section) |
| | TOTAL: | None | 30 Minutes | |



VI. Feedback and Complaints

| FEEDBACK AND COMPLAINTS MECHANISM | |
|---|---|
| How to send feedback | Answer the client feedback form and drop it at the designated box in front of the Admitting and Discharge Section of this hospital. |
| How feedback is processed | <p>Every day, the Administrative Clerks opens the drop box and compiles and records all feedback submitted. At the same time, Patient Satisfaction Survey is tallied, compiled and recorded daily. Feedbacks regarding a specific area are forwarded to the concerned division for their disposition.</p> <p>All feedbacks are forwarded to the Hospital Director.</p> <p>For inquiries and follow-up, you may contact +2 8 243-8845 local 2009.</p> |
| How to file a complaint | <p>The complainant shall proceed to the Patient Care Assistance Officer or Complaint Desk.</p> <p>The PCAO shall interview the complainant and request for a written complaint addressed to the Hospital Director.</p> <p>The complainant may also file a complaint through phone call.</p> <p>The complaint must include:</p> <ul style="list-style-type: none"> - Name or Description of the Person being complained - Place, Date and Time of the Incident - Incident - Full name, Signature and Contact Number of the Complainant <p>For inquiries and follow-up, you may contact +2 8 243-8845 local 2009.</p> |
| How complaints are processed | <p>The PCAO shall receive the written complaint.</p> <p>The PCAO will forward the complaint to the Hospital Director.</p> <p>The Hospital Director calls the attention of the concerned Division Head.</p> <p>The Division Head will initiate investigation and will submit a report to the Hospital Director.</p> <p>The PCAO will give the feedback to the client.</p> <p>For inquiries and follow-up, you may contact +2 8 243-8845 local 2009.</p> |
| Contact Information of GABMMC, CCB, PCC, ARTA | <p>GABMMC: gatandresbonifaciommc@ymail.com : facebook.com/gabmmcofficial : twitter.com/gabmmcofficial : instagram.com/gabmmcofficial : +2 8 243-8845 local 2009</p> <p>PCC: 8888 CCB: 0908 881-6565 (SMS) ARTA: complaints@arta.gov.ph : 1-ARTA (2782)</p> |



VII. List of Offices

| Office | Address | Contact Information |
|---|--------------------------------|------------------------|
| Director's Office | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2009 |
| Chief of Clinics | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2009 |
| Nursing Service Division | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2009 |
| Administrative Division | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2009 |
| ER Department | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2001 |
| Medical Social Services | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2006 |
| Medical Records Section | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2007 |
| Pharmacy Section | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2020 |
| Laboratory | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2004 |
| Radiology | 8001 Delpan St., Tondo, Manila | +2 8 243-8845 loc 2003 |
| Billing and Philhealth Section | 8001 Delpan St., Tondo, Manila | +2 8 247-1261 |
| Flora V. Valsino De Siojo Dialysis Center | 8001 Delpan St., Tondo, Manila | 0917 515-3647 |



OSPITAL NG MAYNILA MEDICAL CENTER



I. MANDATE:

Ospital ng Maynila Medical Center is mandated to provide quality medical service to all residents of Manila and any person needing medical care and to provide a training ground for future medical and paramedical professionals.

II. MISSION:

To deliver quality health services to Manilans in particular and provide excellent education, through training and research, with utmost professionalism.

III. VISION:

To be locally responsive, nationally recognized and globally competitive medical center of excellence in providing health care services, training and research.

IV. SERVICE PLEDGE:

Ospital ng Maynila Commits to;

1. Perform service with utmost knowledge and skills keeping in mind the welfare of the general public.
2. Excel in patient focused care, public information, education and training, and research.
3. Ensure the best service rendered at the shortest given time with integrity, compassion and respect

CORE VALUES

O – Optimum services

M – Motivated

M – Morally upright

C – Compassionate



LIST OF SERVICES

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1. ADMISSION OF PATIENTS (ELECTIVE)

| | | | | |
|--|--|------------------------|---------------------------------------|---------------------------|
| Office/Division | Admitting and Discharge Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Patients needing confinement | | | |
| CHECKLIST OF REQUIREMENTS | | | WHERE TO SECURE | |
| Notice of admission Admitting chart of patient Patient hospital card | | | ER staff nurse Attending physician | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present notice of admission, Patient hospital card | Accepts documents and coordinates with ward nurse for availability/assignment of room/bed. | None | 5 minutes | Admitting clerk |
| Fills up patient data sheet | Assists/interviews patient/relative in filling-up data sheet. Encodes patient's data and prints Patient Data Sheet | None | 10 minutes | Admitting clerk |
| Cooperate with Admitting personnel for escort to their Ward/room | Accompanies patient to designated ward/room. Endorses patient to the ward nurse on duty | None | 15 minutes | Admitting clerk |
| TOTAL | | None | 30 minutes | |



2. ADMISSION OF PATIENT'S (EMERGENCY)

| | | | | |
|--|---|---------------------------------------|------------------------|---------------------------|
| Office/Division | Admitting and Discharge Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Patients needing confinement | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Notice of admission Admitting chart of patient Patient hospital card | | ER staff nurse Attending physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present notice of admission, Patient hospital card(old patients) | Accepts documents Issues hospital card (new patient) | None | 5 minutes | Admitting clerk |
| Fills up patient data sheet | Assists/interviews patient/relative in filling-up data sheet. Encodes patient's data and prints Patient Data sheet | None | 10 minutes | Admitting clerk |
| TOTAL | | None | 15 minutes | |



3. REPLACEMENT OF LOST HOSPITAL CARD

| | | | | |
|---|---|--|------------------------|---------------------------|
| Office/Division | Admitting and Discharge Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Patients with lost hospital card/ID | | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| ID of Client | | COMELEC, School, Barangay, Post Office, PRC, LTO | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present valid ID and informs of last known date of confinement/consultation | Accepts documents Verifies patient data Issues new hospital ID/Card | None | 15 minutes | Admitting clerk |
| TOTAL | | None | 15 minutes | |



4. ISSUANCE OF DEATH CERTIFICATE

| | | | | |
|--|---|---|------------------------|---------------------------|
| Office/Division | Admitting and Discharge Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Relative of deceased patient | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Valid ID of nearest kin (School or Company ID, Driver's License, Voter's ID, Postal ID, Passport) Authorization letter from next of kin | | School or company, corresponding government offices | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Fill -up the draft death certificate form with information on the deceased | Assist relative of deceased patient to fill-up the draft death certificate form | None | 5 minutes | |
| | Types the Death Certificate form and issues 3 copies to the nearest relative of deceased or authorized representative | None | 15 minutes | Admitting clerk |
| TOTAL | | None | 20 minutes | |



5. ISSUANCE OF CERTIFICATE OF LIVE BIRTH

| | | | | |
|--|---|--|---------------------------|---------------------------|
| Office/Division | Medical Records Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Parents of neonates born in the hospital | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Index card of neonate Valid ID (Government issued ID, company ID or school ID) Community Tax Certificate [CTC](for neonates whose parents are not married) Photocopy of marriage contract If either parent is a minor, parent or guardian of minor with CTC and Valid ID | | OB Ward staff nurse School, office or corresponding government agencies City hall where parents reside Local civil registry concerned/PSA | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card of neonate | Issue a draft Certificate of Live Birth to be filled up by the parent | None | 5 minutes | Medical Records Clerk |
| Fill-up the draft Certificate of Live Birth and present to MR clerk on duty along with the requirements | Inspects the filled-up Certificate of Live Birth for correctness and completeness. Prepares the Affidavit to use the Surname of the Father (where applicable) | None | 30 minutes | Medical Records Clerk |
| Signs the draft Certificate of Live Birth, the blank forms and the Affidavit to use the Surname of the Father (where applicable) | Accepts the signed Certificate of Live Birth and types the triplicate copy. Have the attending physician sign the typed Certificate of Live Birth | None | 30 minutes | Medical Records Clerk |
| | Prepares the letter of transmittal | None | 1 hour | Medical Records Clerk |
| | Submits the completed Certificate of Live Birth to the Office of the Local Civil Registrar | None | 1 day | Medical Records Clerk |
| TOTAL | | None | 1 day 2 hours & 5 minutes | |



6. ISSUANCE OF CERTIFICATE OF LIVE BIRTH (DELAYED, >30 DAYS)

| | | | | |
|---|---|---|---------------------------|---------------------------|
| Office/Division | Medical Records Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Parents of neonates born in the hospital | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Index card of neonate Valid ID (Government issued ID, company ID or school ID) Community Tax Certificate [CTC](for neonates whose parents are not married) Photocopy of marriage contract Certificate of No Record of Birth If either parent is a minor, parent or guardian of minor with CTC and Valid ID | | OB Ward staff nurse School, office or corresponding government agencies City hall where parents reside Local civil registry concerned/PSA Local Civil Registry Manila City Hall (if less than 6 months) Philippine Statistics Authority (if >6 months) | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card of neonate | Issue a draft Certificate of Live Birth to be filled up by the parent | None | 5 minutes | Medical Records Clerk |
| Fill-up the draft Certificate of Live Birth and present to MR clerk on duty along with the requirements | Inspects the filled-up Certificate of Live Birth for correctness and completeness. Prepares the Affidavit to use the Surname of the Father (where applicable) | None | 30 minutes | Medical Records Clerk |
| Signs the draft Certificate of Live Birth, the blank forms and the Affidavit to use the Surname of the Father (where applicable) | Accepts the signed Certificate of Live Birth and types the triplicate copy. Have the attending physician sign the typed Certificate of Live Birth | None | 30 minutes | Medical Records Clerk |
| | Prepares the letter of transmittal | None | 1 hour | Medical Records Clerk |
| | Submits the completed Certificate of Live Birth to the Office of the Local Civil Registrar | None | 1 day | Medical Records Clerk |
| TOTAL | | None | 1 day 2 hours & 5 minutes | |



7. ISSUANCE OF MEDICAL CERTIFICATE/CERTIFICATE OF CONFINEMENT

| | | | | |
|---|---|---|----------------------------|---------------------------|
| Office/Division | Medical Records Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Patients who have consulted(ER/OPD) or were confined at OMMC and/or authorized representative | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital card of patient requesting the medical certificate Valid ID (Government issued ID, company ID or school ID) For authorized representative: Letter of authority Valid ID of patient and photocopy Valid ID of representative and photocopy | | Issued upon consultation/admission by OPD or Admitting Section School, office or corresponding government agencies | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present to Window 2 of the Medical Records Section | Assigned personnel ascertains what the client needs and asks for the needed requirements. | None | 5 minutes | Medical Records Clerk |
| Wait while the records are being retrieved | Looks for/retrieves the patient's record of consultation | None | 30 minutes | Medical Records Clerk |
| Accepts a claim slip | Issues a claim slip and instructs the patient to come back. In case of representative, bring with the letter of authority | None | 10 minutes | Medical Records Clerk |
| | Types the medical certificate | None | 30 minutes | Medical Records Clerk |
| Follow-up, present claim slip at Medical Records Section | Checks if the Medical Certificate is complete and signed by the attending physician | None | 3 days | Medical Records Clerk |
| Accept the Medical Certificate and sign in the logbook acknowledging receipt of document | Releases the document to the patient/authorized representative | None | 1 day | Medical Records Clerk |
| TOTAL | | None | 4 days 1 hour & 15 minutes | |



8. ISSUANCE OF CERTIFIED TRUE COPY OF MEDICAL RECORDS

| | | | | |
|---|---|---|------------------------|---------------------------|
| Office/Division | Medical Records Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Patients who are confined at OMMC and/or authorized representative | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital card of patient requesting the medical certificate Valid ID (Government issued ID, company ID or school ID) For authorized representative: Letter of authority Valid ID of patient and photocopy Valid ID of representative and photocopy | | Issued upon consultation/admission by OPD or Admitting Section School, office or corresponding government agencies | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present to Window 2 of the Medical Records Section | Assigned personnel ascertains what the client needs and asks for the needed requirements. | None | 5 minutes | Medical Records Clerk |
| Wait while the records are being retrieved | Ascertains that the patient is still confined at OMMC | None | 30 minutes | Medical Records Clerk |
| | Types the certificate of confinement | None | 30 minutes | Medical Records Clerk |
| Receives the Certificate and signs the logbook acknowledging receipt | Issues the certificate of confinement | None | 5 minutes | Medical Records Clerk |
| TOTAL | | None | 1 hour & 10 minutes | |



9. RELEASING OF LABORATORY RESULTS

| | | | | |
|--|---|--|------------------------|---------------------------|
| Office/Division | Medical Records Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Patients who had laboratory examinations done at the ER or as Out-Patients | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital card of patient requesting the medical certificate Claim stub issued by Laboratory For authorized representative: Letter of authority Valid ID of patient and photocopy Valid ID of representative and photocopy | | Issued upon consultation/admission by OPD or Admitting Section Department of Pathology & Laboratory School, office or corresponding government agencies | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present to Window 2 of the Medical Records Section | Assigned personnel ascertains what the client needs and asks for the needed requirements. | None | 5 minutes | Medical Records Clerk |
| Waits while the records are being retrieved | Ascertains that the patient is still confined at OMMC | None | 30 minutes | Medical Records Clerk |
| | Types the certificate of confinement | None | 30 minutes | Medical Records Clerk |
| Receives the Certificate and signs the logbook acknowledging receipt | Issues the certificate of confinement | None | 5 minutes | Medical Records Clerk |
| TOTAL | | None | 1 hour & 10 minutes | |



10. OUT-PATIENT PHARMACY DISPENSING

| | | | | |
|---|---|--|------------------------|---------------------------|
| Office/Division | Pharmacy Section | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | OPD Patients | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital card of patient | | Issued upon consultation/admission by OPD or Admitting Section | | |
| Prescription/s from OMMC physician | | Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present to Pharmacy Window | Pharmacist on duty examines prescription and determines if the prescribed medication is available | None | 10 minutes | Pharmacist on duty |
| Wait while the prescribed medicine are gathered | Dispenses the prescribed medicines and gives instructions on how they are to be taken | None | 5 minutes | Medical Records Clerk |
| TOTAL | | None | 15 minutes | |



11. OUT-PATIENT CONSULTATION (OLD PATIENT)

| | | | | |
|---|--|--|------------------------|---|
| Office/Division | Out-Patient Department | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Residents of Manila seeking medical services | | | |
| CHECKLIST OF REQUIREMNET | | WHERE TO SECURE | | |
| Hospital card of patient requesting the medical certificate(Old Patients) | | Issued upon consultation/admission by OPD or Admitting Section | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RRESPONSIBLE |
| Get a number from the guard assigned at the OPD Entrance | Guard/CSF personnel gives a queue number to the patient | None | 5 minutes | Guard/CSF personnel assigned at the OPD |
| Submits Hospital Card | Guard/CSF personnel gets card and hands it to the OPD Medical Records personnel on duty | None | 2 minutes | Guard/CSF Personnel |
| Wait while the records are being retrieved | Records are retrieved from file and queued in the corresponding Medical Service | None | 30 minutes | OPD Medical Records Personnel |
| Wait for name to be called | Physician assigned at the corresponding service where patient seeks consult calls for the patient according to the queue | None | 1 hour | Physician assigned at the corresponding service where patient seeks consult |
| Proceeds inside OPD for consult once name is called | Directs patient to the correct cubicle | None | 2 minutes | OPD personnel Guard on duty |
| Cooperates when consultation is conducted | Physician interviews patient and conducts a physical examination | None | 30 minutes | Physician assigned |
| TOTAL | | None | 2 hours & 9 minutes | |



12. OUT-PATIENT CONSULTATION (NEW PATIENT)

| | | | | |
|--|---|---|------------------------|--|
| Office/Division | Out-Patient Department | | | |
| Classification | Simple | | | |
| Type of Transaction | G2C – Government to Client | | | |
| Who may avail | Residents of Manila seeking medical services | | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Valid ID (Government issued ID, company ID or school ID) | | School, office or corresponding government agencies | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Get a number from the guard assigned at the OPD Entrance | Guard/CSF personnel gives a queue number to the patient | None | 5 minutes | Guard/CSF personnel assigned at the OPD |
| Informs OPD personnel that he/she is a new patient and the chief complaint | Interview patient and assigns what department he/she will be queued OPD personnel gives the patient a blank Patient Information Sheet that he/she will fill up | None | 2 minutes | OPD Triage staff Guard/CSF Personnel |
| Fills up the Patient Information Sheet and submit it when done | Receives the filled up Patient Sheet and checks it for completeness and asks patient to wait | None | 30 minutes | OPD Medical Records Personnel |
| Wait for name to be called | Queues the patient in the corresponding medical service | None | 1 hour | OPD Medical Records Personnel |
| Proceeds inside OPD for consult once name is called | Directs patient to the correct cubicle | None | 2 minutes | OPD personnel Guard on duty |
| Cooperates when consultation is conducted | Physician interviews patient and conducts a physical examination | None | 1 hour | Physician assigned |
| TOTAL | | None | 2 hours & 39 minutes | |



13. EMERGENCY ROOM CONSULTATION

| Office/Division | | Emergency Room | | |
|---|---|---|------------------------|--|
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Residents of Manila seeking medical services | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital Card (for old patients) Valid ID (Government issued ID, company ID or school ID) | | OPD or Admitting section School, office or corresponding government agencies | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Presents to Triage area | Triage nurse or physician ask for complaint, takes vital signs, directs the patient's companion to the Palistahan and assesses the needs of the patient so he can be properly triaged | None | 3 minutes | Triage nurse or physician |
| Fill out the patient's information in the Patient Data Sheet | Admitting personnel assists the patient's companion in filling up the Patient Data Sheet | None | 5 minutes | Admitting personnel assigned at Palistahan |
| Presents to the area concerned | Directs or assists the patient in going to the area where the patient is to be assessed and treated (i.e. Pediatrics if patient is a child, Surgery if the patient is a victim of trauma) | None | 5 minutes | Triage nurse or physician |
| Cooperates in the history taking and physical examination | Interview to know the history of illness, Conducts physical examination | None | 15 minutes | Attending Physician |
| Cooperates in intervention/s needed | Physician orders necessary diagnostics and therapeutics ER Nurse carries out the physician's orders | None | 1 hour | Attending physician and ER nurse |
| Wait while physician observes for response to treatment or determines if patient needs to be admitted | Observes patient and interpret results of diagnostics Determines if patient can be discharged or needs to be admitted | None | 2 hours | Attending physician |
| If for Discharge: gets prescription and schedule for follow-up | Explains diagnosis and treatment plan, makes prescription, advises patient of when to follow up | None | 30 minutes | Attending Physician |
| TOTAL | | None | 3 hours & 58 minutes | |



14. LABORATORY EXAMINATIONS (Hematology, Clinical Chemistry, Immunology/Serology)

| | | | | |
|--|--|---|------------------------|------------------------------------|
| Office/Division | | Laboratory | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient needing Chemistry work-up | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| ER - Index card with patient detail Request Form OPD - Index card with patient detail Request form with stamp of Social Service Ward – Index card with patient detail Availment form Request form | | Admitting section Attending Physician OPD Triage Attending Physician Social service Admitting section Ward staff nurse Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present : ER - Index card with patient detail, Request Form with collected specimen OPD - Index card with patient detail, Request form with stamp of Social Service with collected specimen Ward – Index card with patient detail, Availment form, Request form with collected specimen | Screens request for completeness of data and information and checks specimen for adequacy and appropriateness. | None | 10 minutes | Medical Technologist staff on duty |
| Presents to extraction area if blood is to be drawn | Medical technologist draws blood for examinations | None | 5 minutes | Medical Technologist staff on duty |
| Wait while laboratory personnel logs the specimen | Logs receipt of specimen | None | 5 minutes | Medical Technologist staff on duty |
| Accepts claim stub | Issues claim stub to the patient and instructs them as to when the results can be claimed | None | 5 minutes | Medical Technologist staff on duty |
| TOTAL | | None | 25 minutes | |



15. LABORATORY EXAMINATIONS (Clinical Microscopy)

| | | | | |
|--|--|--|------------------------|------------------------------------|
| Office/Division | | Laboratory | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient needing Chemistry work-up | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| ER - Index card with patient detail Request Form | | Admitting section Attending Physician | | |
| OPD - Index card with patient detail Request form with stamp of Social Service | | OPD Triage Attending Physician Social service | | |
| Ward – Index card with patient detail Availment form Request form | | Admitting section Ward staff nurse Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present : ER - Index card with patient detail, Request Form with collected specimen OPD - Index card with patient detail, Request form with stamp of Social Service with collected specimen Ward – Index card with patient detail, Availment form, Request form with collected specimen | Screens request for completeness of data and information and checks specimen for adequacy and appropriateness. | None | 10 minutes | Medical Technologist staff on duty |
| Submission of collected specimen(urine or stool) | Laboratory personnel receives specimen | None | 5 minutes | Medical Technologist staff on duty |
| Wait while laboratory personnel logs the specimen | Logs receipt of specimen | None | 5 minutes | Medical Technologist staff on duty |
| Accepts claim stub | Issues claim stub to the patient and instructs them as to when the results can be claimed | None | 5 minutes | Medical Technologist staff on duty |
| TOTAL | | None | 25 minutes | |



16. BLOOD BANK NET-OUT

| | | | | |
|---|--|-------------------------------|------------------------|------------------------------------|
| Office/Division | | Laboratory/Blood Bank section | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Sister Hospital | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| Blood Request form | | From the Sister Hospital | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present : Blood request form from the sister Hospital | Screens request for completeness of data and information | None | 30 minutes | Medical Technologist staff on duty |
| Received Blood/Blood Components | Prepare and release blood/blood Components | None | 10 minutes | Medical Technologist Staff on duty |
| TOTAL | | None | 40 minutes | |



17. SCREENING FOR BLOOD DONATION

| | |
|---|---|
| Office/Division | Laboratory/ Blood Bank Section |
| Classification | Simple |
| Type of Transaction | G2C – Government to Client |
| Who may avail | Patient needing Immunology/Serology work-up |
| Schedule time of availability of service | 8:00 AM to 3:00 PM (Monday to Friday only) |

CHECKLIST OF REQUIREMENT

Valid ID

Donor Criteria: 18-60 years old at least 50 kg, no medicine intake, no recent alcohol intake for 24 hours, should have at least 8 hours of sleep, female donor (no menstrual period for 3 weeks)

| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
|---------------------------------------|--|-----------------|----------------------|---|
| Present requirement | Receive requirement an issue applicable form for fill out | None | 1 minute | Blood Bank section/Medical technologist staff |
| Fill out blood donor form | Issue and assist blood donor in filling out of form | None | 2 minute | Blood Bank section/Medical technologist staff |
| Submit form | Receive/Check and donor interview/ Physical examination | None | 10 minutes | Blood Bank section/Medical Technologist staff |
| Wait for screening and pre counseling | Log donor and call donor for screening/ pre counseling / Extraction | None | 1 hour to 30 minutes | Blood Bank section/Medical Technologist staff |
| Actual blood donation (450ml) | Prepare blood bags and do aseptic collection of blood donors (450ml) | None | 30 minutes | Blood Bank section/Medical Technologist staff |
| Rest after donation | Post donation counseling | None | 15 minutes | Blood bank section/Bleeding area |
| TOTAL | | None | 1 hour & 58 minutes | |



18. HISTOPATHOLOGY SURGICAL

| Office/Division | | Laboratory | | |
|--|--|---|---|--|
| Classification | | | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient needing Histopathology work -up | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| ER - Index card with patient detail Request Form OPD - Index card with patient detail Request form Ward – Index card with patient detail Availment form Request form | | Admitting section Attending Physician OPD Triage Attending Physician Admitting section Ward staff nurse Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present : ER - Index card with patient detail, Request Form with collected specimen OPD - Index card with patient detail, Request form with stamp of Social Service with collected specimen Ward – Index card with patient detail, Availment form, Request form with collected specimen | Screens request for completeness of data and information and checks specimen for adequacy and appropriateness. | None | 30 minutes | Medical Technologist staff on duty/Resident in charges |
| Submission of the specimen | Processing of specimen. | None | Surgical specimen : 1-2 days Cytology: 1-2 days Pap smear: 1-2 days | Medical Technologist staff on duty/Resident in charge |
| | Interpretation/Evaluation of slides | None | Surgical specimen: 1-2 weeks Cytology: 1-2 days Pap smear: 1-2 days | Resident in charge |
| Waiting for the Releasing of results | Logging of result in the log book | None | 30 minutes | Medical Technologist staff on duty |
| Received final Results | For in-patients and OPD/ER patients, results are charted to the Medical Records | None | | Medical Technologist staff on duty |
| TOTAL | | None | | |



19. BACTERIOLOGY CULTURE AND SENSITIVITY

| | | | | |
|--|---|---|------------------------|------------------------------------|
| Office/Division | | Laboratory | | |
| Classification | | | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient needing Culture and Sensitivity work-up | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| ER - Index card with patient detail, Request Form with ICC (Infection Control Committee) form duly signed by authorized member | | Admitting section Attending Physician Infection control committee | | |
| OPD - Index card with patient detail, Request form with stamp of Social Service and ICC (Infection Control Committee) form duly signed by authorized member and | | OPD Triage Attending Physician Infection control committee | | |
| Ward – Index card with patient detail, Availment form, Request form with ICC (Infection Control Committee) form duly signed by authorized member | | Admitting section Ward staff nurse Attending Physician Infection control committee | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present : ER - Index card with patient detail, Request Form with ICC (Infection Control Committee) form duly signed by authorized member OPD - Index card with patient detail, Request form with stamp of Social Service and ICC (Infection Control Committee) form duly signed by authorized member Ward – Index card with patient detail, Availment form, Request form with ICC (Infection Control Committee) form duly signed by authorized member | Screens request for completeness of data and information and checks specimen for adequacy and appropriateness. | None | 30 minutes | Medical Technologist staff on duty |
| Submission of the collected specimen | Checking and logging of specimen submitted | None | 30 minutes | Medical Technologist staff on duty |
| Waiting for the Releasing of results | Processing and examination of the specimens | None | 3-5 days | Medical Technologist staff on duty |
| Received final Results | For in-patients and OPD/ER patients, results are charted to the Medical Ward and Medical Records, respectively. | None | | Medical Technologist staff on duty |
| TOTAL | | None | 3 days & 1 hour | |



20. RELEASE OF DEAD BODY

| | | | | |
|--|--|---|------------------------|---------------------------|
| Office/Division | | Pathology Department/Morgue Attendant | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Nearest kin of deceased patient | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| ID of claimant/Next of kin Proof of Relationship (Marriage Contract, Birth Certificate, Barangay Certificate) ID of Representative of Funeral Service Letter of Authority (in case claimant is representative of next of kin) | | Corresponding government agencies, School/Company PSA, local Civil Registry, Barangay official Funeral Parlor Next of kin | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present ID of claimant, Proof of relationship, ID of funeral service Letter of authority | Inspects the submitted requirements for authenticity | None | 5 minutes | Morgue attendant |
| Wait while staff opens the morgue and prepares the body of the deceased for release | Prepares the body for release | None | 15 minutes | Morgue attendant |
| Confirms that the body to be claimed is their next of kin | Allows the claimant to view the body of the deceased | None | 10 minutes | Morgue attendant |
| Signs the releasing logbook as proof that the body of the deceased has been released to them and their chosen funeral service | Have the claimant sign the releasing logbook and releases the body of the deceased | None | 10 minutes | Morgue attendant |
| TOTAL | | None | 40 minutes | |



21. RADIOLOGY/X-RAY PROCEDURES – OPD

| Office/Division | | Radiology Department | | |
|---|---|-----------------------------------|------------------------|---------------------------|
| Classification | | Complex | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient needing x-ray procedures | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Request form | | OPD Triage Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card with patient detail, Request form | Screens request for completeness of data and information | None | 10 minutes | Radiology staff on duty |
| Wait for schedule | Checks availability of slot and schedules patient for next available slot for the requested procedure | None | 10 minutes | Radiology staff on duty |
| Accepts schedule | Note the schedule down in the patient's hospital card and explains the procedure as well as the preparation needed if any | None | 10 minutes | Radiology staff on duty |
| Returns on day of scheduled procedure | Checks correctness of appointment and queues the patient | None | 5 minutes | Radiology staff on duty |
| Wait for his turn | Makes sure the machine is ready and calls the patient when it is his/her turn | None | 20 minutes | Radiology staff on duty |
| Cooperates while the radiologic procedure is being performed | Performs the requested procedure | None | 10 minutes | Radiology staff on duty |
| Wait while the x-ray film is processed and reviewed for acceptability | Develops the film and review if it is acceptable | None | 10 minutes | Radiology staff on duty |
| Accepts claim stub | Issues a claim stub for the issuance of the official result of the x-ray procedure | None | 5 minutes | Radiology Staff on duty |
| TOTAL | | None | 1 hour & 20 minutes | |



22. CT-SCAN AND MRI PROCEDURES

| | | | | |
|---|---|-----------------------------------|------------------------|---------------------------|
| Office/Division | | Radiology Department | | |
| Classification | | Complex | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient needing CT-Scan or MRI | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Request form, Clinical Abstract Approval from Director's Office | | OPD Triage Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card with patient detail, Request form and Clinical Abstract | Screens request for completeness of data and information | None | 10 minutes | Radiology staff on duty |
| Wait for schedule | Checks availability of slot and schedules patient for next available slot for the requested procedure | None | 10 minutes | Radiology staff on duty |
| Accepts schedule | Note the schedule down in the patient's hospital card and explains the procedure as well as the preparation needed if any | None | 10 minutes | Radiology staff on duty |
| Returns on day of scheduled procedure | Checks correctness of appointment and queues the patient | None | 5 minutes | Radiology staff on duty |
| Wait for his turn | Makes sure the machine is ready and calls the patient when it is his/her turn | None | 20 minutes | Radiology staff on duty |
| Cooperates while the CT Scan or MRI procedure is being performed | Performs the requested procedure | None | 10 minutes | Radiology staff on duty |
| Accepts claim stub | Issues a claim stub for the issuance of the official result of the x-ray procedure | None | 5 minutes | Radiology Staff on duty |
| TOTAL | | None | 1 hour & 10 minutes | |



23. ULTRASOUND PROCEDURES

| | | | | |
|--|---|-----------------------------------|------------------------|--------------------------------|
| Office/Division | | Radiology Department | | |
| Classification | | Complex | | |
| Type of Transaction | | G2C - Government to Client | | |
| Who may avail | | Patient needing Ultrasound | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Request form | | OPD Triage Attending Physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card with patient detail, Request form | Screens request for completeness of data and information | None | 10 minutes | Radiology staff on duty |
| Wait for schedule | Checks availability of slot and schedules patient for next available slot for the requested procedure | None | 10 minutes | Radiology staff on duty |
| Accepts schedule | Note the schedule down in the patient's hospital card and explains the procedure as well as the preparation needed if any | None | 10 minutes | Radiology staff on duty |
| Returns on day of scheduled procedure | Checks correctness of appointment and queues the patient | None | 5 minutes | Radiology staff on duty |
| Wait for his turn | Makes sure the machine is ready and calls the patient when it is his/her turn | None | 20 minutes | Radiology staff on duty |
| Cooperates while the CT Scan or MRI procedure is being performed | Performs the requested procedure | None | 20 minutes | Radiologist/Sonologist on duty |
| Accepts claim stub | Issues a claim stub for the issuance of the official result of the x-ray procedure | None | 5 minutes | Radiology Staff on duty |
| TOTAL | | None | 1 hour & 20 minutes | |



24. RELEASE OF RESULTS OF PROCEDURES DONE AT THE RADIOLOGY DEPARTMENT

| | | | | |
|--|--|---|------------------------|---------------------------|
| Office/Division | | Radiology Department | | |
| Classification | | Complex | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient who had procedures done at the radiology department | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Claim stub, letter of authority if claimant is not the patient | | Radiology department (given on day of procedure) | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card with patient detail, Claim stub, letter of authority | Inspects the patient card and claim stub and checks if date is correct | None | 5 minutes | Radiology staff on duty |
| Wait while staff reviews the claim stub and looks for the results | Checks if the result is already available | None | 15 minutes | Radiology staff on duty |
| Accepts official result and signs logbook as evidence of receipt | Hands the official receipt to the patient/representative and has him/her sign in the releasing logbook | None | 10 minutes | Radiology staff on duty |
| TOTAL | | None | 30 minutes | |



25. ECG/2-D ECHOCARDIOGRAPHY

| Office/Division | | Heart Station | | |
|---|--|---|---------------------|---------------------|
| Classification | | Complex | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient who needs ECG and/or 2-D Echocardiography | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Request form | | OPD Triage, Attending physician | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card with patient detail, Request form | Screens Patient Card and request for completeness of data and information | None | 5 minutes | Heart station nurse |
| Wait while staff checks for availability of slot/schedule and logs the patient data | Checks for availability of schedule and logs the patient data in schedule logbook | None | 15 minutes | Heart station nurse |
| Accepts official result and signs logbook as evidence of receipt | Hands the official receipt to the patient/representative and has him/her sign in the releasing logbook | None | 10 minutes | Heart station nurse |
| Returns on day of scheduled procedure | Checks correctness of appointment and queues the patient | None | 5 minutes | Heart station nurse |
| Wait for his turn | Make sure the machine is ready and calls the patient when it is his/her turn | None | 20 minutes | Heart station nurse |
| Cooperates while the ECG or 2-D echocardiography is being performed | Performs the requested procedure | None | 20 minutes | Heart station nurse |
| Accepts claim stub | Issues a claim stub for the issuance of the official result of the x-ray procedure | None | 5 minutes | Heart station nurse |
| TOTAL | | None | 1 hour & 20 minutes | |



26. RELEASE OF ECG OR 2-D ECHOCARDIOGRAPHY

| | | | | |
|--|---|--|------------------------|---------------------------|
| Office/Division | | Heart Station | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient who had procedures done at the Heart Station | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Claim stub, letter of authority if claimant is not the patient | | Heart Station (given on day of procedure) | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Present Index card with patient detail, Claim stub, letter of authority | Inspects the patient card and claim stub and checks if date is correct | None | 5 minutes | Heart station nurse |
| Wait while staff reviews the claim stub and looks for the results | Checks if the result is already available | None | 15 minutes | Heart station nurse |
| Accepts official result and signs logbook as evidence of receipt | Hands the official receipt to the patient/representative and have him/her sign in the releasing logbook | None | 10 minutes | Heart station nurse |
| TOTAL | | None | 30 minutes | |



27. CARDIO-PULMONARY CLEARANCE

| | | | | |
|---|---|---|------------------------|-----------------------------|
| Office/Division | | OPD -Internal Medicine Department | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient who needs C-P clearance prior to a surgical procedure | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Request form, Laboratory exam request, ECG result, chest x-ray result | | OPD Triage, Attending physician. Departments of Laboratory and Radiology and Heart Station [procedures may be done in another institution in which case, secure official results from these institutions when applicable] | | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Obtains a queueing number | Gives a number to patient for queueing | None | 5 minutes | OPD guard/staff on duty |
| Present Index card with patient detail, Request form to OPD Triage | Screens Patient Card and request for completeness of data and information | None | 5 minutes | OPD triage staff |
| Wait for his number to be called | Retrieves patient chart and queues it in the IM department cubicle | None | 15 minutes | OPD medical records staff |
| Cooperates while he/she is being interviewed and examined by IM physician | Interviews and examines patient to ascertain fitness to undergo contemplated surgical procedure | None | 30 minutes | Internal Medicine Physician |
| Wait while physician notes his observations and makes his recommendation | Note down his recommendations on the patient's chart and explains the same to the patient | None | 10 minutes | Internal Medicine Physician |
| TOTAL | | None | 1 hour & 5 minutes | |



28. HEMODIALYSIS PROCEDURE

| | | | | |
|---|--|---|------------------------|---------------------------|
| Office/Division | | Hemodialysis Unit | | |
| Classification | | Complex | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient who needs hemodialysis | | |
| CHECKLIST OF REQUIREMENT | | WHERE TO SECURE | | |
| OPD - Index card with patient detail, Request form, Laboratory result, Hepatitis profile | | OPD Triage, Attending physician. OMMC Laboratory Department or any laboratory Departments of Laboratory and Radiology and Heart Station [procedures may be done in another institution in which case, secure official results from these institutions when applicable] | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Obtains a queueing number | Gives a number to patient for queueing | None | 5 minutes | Hemodialysis unit staff |
| Present Index card with patient detail, Request form, Laboratory and hepatitis profile result | Screens Patient Card and request for completeness of data and information | None | 5 minutes | Hemodialysis unit staff |
| Wait for his number to be called or fill up a patient information sheet | Retrieves patient record (in case of old patient) or gives the patient a Patient Information Sheet | None | 15 minutes | Hemodialysis unit staff |
| Cooperates in the procedure and termination of treatment | Conduct initial assessment, monitor treatment process and post dialysis assessment | None | 5 hours | Hemodialysis nurse |
| Get an appointment for the next treatment session | Sets the next appointment | None | 10 minutes | Hemodialysis unit staff |
| TOTAL | | None | 5 hours & 35 minutes | |



29. BILLING/DISCHARGE

| | | | | |
|--|---|---|------------------------|---------------------------|
| Office/Division | | Billing and Philhealth Section | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Companion/Relative of Patient who has been admitted | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| “May go Home” order from attending physician Patient Hospital Card Philhealth ID of patient or principal member (if Philhealth member) | | Ward Nurse where patient is admitted OPD or Admitting Section Philhealth Office | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Gets Discharge slip | Gives discharge slip to patient relative/companion | None | 5 minutes | Ward Nurse |
| Present Discharge slip and Philhealth ID (if member) to Billing Section Personnel | Inspects the Discharge slip and confirm discharge order with ward nurse; Verifies Philhealth membership | None | 10 minutes | Billing Personnel |
| Wait while the patient’s medical record is retrieved from the ward | Requests ward nurse to forward the medical record of the patient to the Billing section | None | 15 minutes | Billing personnel |
| Wait while the Charges in the Medical Record matches those recorded in the availment form and the computer records | Compares the orders in the medical record (medicines, diagnostics, etc.) matches those recorded in the availment form and computer records of the patient | None | 30 minutes | Billing Personnel |
| Accepts discharge slip | Stamps chart/medical record and discharge slip with “OK” | None | 2 minutes | Billing Personnel |
| Returns to the ward and presents discharge slip stamped “OK” | Issued with Exit Pass | None | 5 minutes | Ward Nurse |
| TOTAL | | None | 1 hour & 7 minutes | |



30. SOCIAL SERVICE ASSISTANCE

| | | | | |
|---|--|---|------------------------|---------------------------|
| Office/Division | | Social Service Section | | |
| Classification | | Simple | | |
| Type of Transaction | | G2C – Government to Client | | |
| Who may avail | | Patient of OMMC (OPD or In-patient) Relative | | |
| CHECKLIST OF REQUIREMENTS | | WHERE TO SECURE | | |
| Hospital ID Card Barangay Certificate of Indigency Valid ID of patient or nearest kin of patient Community Tax Certificate | | OPD Triage (OPD Patient) or Admitting Section (Admitted Patient) Corresponding government units City Hall | | |
| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| Gets queue number | Gives queue number | None | 5 minutes | Social Service staff |
| Presents requirements when queue number is called | Inspects the requirements for completeness and authenticity | None | 10 minutes | Social service personnel |
| Cooperates when the social service staff conducts the interview | Interviews the patient or companion/relative and determines if eligible for any assistance | None | 20 minutes | Social service personnel |
| Waits while Social Service personnel completes a report | Completes the social case study for the patient | None | 30 minutes | Social service personnel |
| TOTAL | | None | 1 hour & 5 minutes | |