



## NOVALICHES DISTRICT HOSPITAL CITIZEN'S CHARTER



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## AGENCY PROFILE

### Mandate

Novaliches District Hospital (NDH) by virtue of Ordinance Number SP-997, Series of 2001 was established to render health services to District 5 as well as the neighboring communities.

### Vision

By 2025, NDH shall be a level 2 hospital providing quality and modern health services embracing the ideals of Universal Health Care.

### Mission

To provide excellent patient care through upgraded health facilities and services, and by maintaining zealous dedication, competence, and professionalism among its personnel.

### Service pledge

The Novaliches District Hospital is committed to provide quality healthcare that is readily available, accessible and affordable to the public in compliance with all regulatory standards set by the national and local government. We also conform to ethical standards, best practices in patient care, safety and ISO 9001:2015.

We continually improve our processes with the goal of delivering total quality services to all our clients.

**LUZVIMINDA S. KWONG, MD, DPBPM, FPSA, FPSO**  
**Officer-In-Charge, Novaliches District Hospital**



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## PROCESSING OF NDH EMPLOYEES' PAYROLL FOR FRINGE BENEFITS

Payroll for Fringe Benefits covering benefits for qualified employees regular or plantilla, contract of service, consultants, and other benefits as remuneration for services rendered. This process is carried out from Monday to Friday excluding holidays (8:00 a.m. – 5:00 p.m.)

Office or Division	Hospital Operations and Patient Support Services Division - Accounting Section	
Classification	Complex	
Type of Transaction	G2G – for government services whose client is a government employee or another government agency	
Who may avail	Eligible NDH Employees (Plantilla, Contract of Service and Consultants)	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Authority to Collect (1 original copy)		Accounting Section
Obligation Request Slip (OBR) (3 original copy)		Accounting Section
Disbursement Voucher (3 original copy)		Accounting Section
Payroll (3 original copy)		Accounting Section
Daily Time Record (1 original copy)		Personnel Section
Certification of Entitlement from DOH (1 photocopy)		Accounting Section
Employees’ Justification for Entitlement of Fringe Benefit (1 photocopy/each employee)		Personnel Section
Joint Circulars/Memos/Guidelines Supporting the Entitlement of the Fringe Benefit (1 photocopy)		Accounting Section
Attendance Report (1 original copy)		Personnel Section
Accomplishment Report (1 original copy)		Personnel Section
Collection List (1 original copy)		Accounting Section



CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Personnel Section Staff submits the attendance report, original DTRs, Accomplishment Report and other attachments to process payroll for fringe benefits to the Accounting Section.	1.1 Accounting Section Staff checks the attendance report based on the DTRs, Accomplishment Report and other attachments.	None	5 days	Accounting Section Staff
	1.2 Process the authority to collect of Fringe Benefit.	None	10 days	Bookkeeper
	1.3 Process the payroll, OBR & Disbursement Voucher for Fringe Benefits	None	1 days	Bookkeeper
	1.4 Submit to City Accounting for fiscal control; to City Budget for funding; City Treasury for funds availability; City HRMD for certification of valid appointments and approval of ACA for Fiscal Affairs. After completion, benefits can be disbursed to qualified employees.	None	14 days	Liaison Officer
<b>TOTAL:</b>		<b>NONE</b>	<b>30 DAYS</b>	





## PREPARATION OF MEDICAL ASSISTANCE FUND UTILIZATION REPORT

Report on the utilization of the Medical Assistance through cash advance and for submission to City Accounting Department - Fiscal Management and Control Division (FMCD) for review and pre-audit.

Office or Division	Hospital Operations and Patient Support Services Division - Accounting Section		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
2Who may avail	Authorized Special Disbursing Officer		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Accomplished Patient’s Intake Sheet (2 original copy)		Medical Social Service Section (Malasakit Center)	
Certificate of Indigency (1 original copy & 1 photocopy)		Barangay Hall where the patient resides	
Statement of Account (2 original copy)		Billing and Claims Section	
Transmittal Summary (3 original copy)		Medical Social Service Section (Malasakit Center)	
Liquidation Report (3 original copy)		Accounting and Finance Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Medical Social Service (Malasakit Center) to submit summary of beneficiaries who availed financial assistance including other relevant documents.	1.1 Receives, checks and verifies the summary of beneficiaries who availed medical assistance including other relevant documents.	None	25 days	Accountant



	<b>1.2</b> Processes and submits liquidation report and other supporting documents to City Accounting for pre-audit.	None	4 days	Bookkeeper
	<b>1.3</b> Receives the Fund Utilization Report certified correct by the City Accountant; approved by the City Mayor and stamped received by the resident Auditor (COA)	None	Time may vary depending on the processing time of City Accounting and City Mayor*	City Accountant, City Mayor and Commission on Audit (COA)
	<b>1.4</b> Submits Fund Utilization Report of /Medical Assistance to the Funding Agency.	None	1 day	Bookkeeper
<b>TOTAL:</b>		<b>NONE</b>	<b>30 DAYS*</b>	

\* Time may vary depending on the processing time of City Accounting Department.



## ADMISSION REGISTRATION PROCESS

To register patients for admission. This service is open from Monday to Sunday, 24 hours. Length of Service: 30 minutes depending on the number of patients being served.

<b>Office or Division</b>	Hospital Operations and Patient Support Services - Admitting Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public	
<b>Who may avail</b>	All patient for admission	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Admission and Discharge Record with Doctor's Order		Emergency Room Department / Out Patient Department
Patient Information Form (1copy original)		Admitting Section
Consent to Hospital Care (1copy original)		Admitting Section
Hospital Card (1copy original)		Patient
Valid Government Issued ID (1copy original)		Government Agencies

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Admission and Discharged Form from Emergency Department / Out Patient Department	1. Receives Admission and Discharge Record with Doctor's order and check for completeness then Check the availability of rooms	None	3 minutes	Admitting Clerk
2. Patient / relative / companion to fill up the	2. Instruct patient / relative / companion to fill up	None	25 minutes	Admitting Clerk



Patient's Information form and sign relevant documents	Patient's Information form and process admission documents			
<b>3.</b> Receives Patient Reminders form.	<b>3.</b> Issue Patient Reminders form	None	1 minute	Admitting Clerk
<b>4.</b> Proceed to the assigned nurse on duty for further instructions	<b>4.</b> Forward Admission and Discharge Record to ER Department / OPD	None	1 minute	Admitting Clerk
<b>TOTAL:</b>		<b>NONE</b>	<b>30 MINUTES</b>	



## EMERGENCY ROOM REGISTRATION

Emergency Room Consultation Registration process. This service is open from Monday to Sunday, 24 hours. Length of Service: 10 – 16 minutes depending on the number of patients being served.

Office or Division	Hospital Operations and Patient Support Services - Admitting Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All patient seeking emergency care		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card (1 copy original)		Admitting Clerk	
Valid Government Issued ID (1copy original)		Government Agencies	
Emergency Room Stub (1 copy original)		Triage Nurse	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient / relative / companion will present Emergency Room Stub from triage	1. Received Emergency Room Stub	None	1 minute	Admitting Clerk
2. Fill up the Patient Information Form and present hospital card for old patient together with patient's valid ID. For new patient, accepts hospital card.	2. Instruct patient / relative / companion to fill up Patient Information form and process patient's ER record. For new patient, issue hospital card.	None	18 minutes	Admitting Clerk



3. Proceed to Emergency Room patient waiting area	3. Forward ER record to the ER Nurse on Duty.	None	1 minute	Admitting Clerk
<b>TOTAL:</b>		<b>NONE</b>	<b>20 MINUTES</b>	



## PREPARATION OF STATEMENT OF ACCOUNT (SOA)

This process is to ensure the release of Statement of Account to patients with accurate computation at the right time. Service available during Monday – Sunday from 8:00 a.m. to 5:00 p.m.

Office or Division	Hospital Operations and Patient Support Services Division - Billing and Claims Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All admitted patients at NDH		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card (1 copy original)		Admitting Clerk	
Valid Government Issued ID (1copy original)		Government Agencies	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Go to the Billing and Claims Section window and request for Statement of Account (SOA)	1. Check availability of SOA and process according to the request.	None	30 minutes	Billing Clerk
2. Accept the printed SOA	2. Issue the printed SOA	None	5 minutes	Billing Clerk
<b>TOTAL:</b>		<b>NONE</b>	<b>35 MINUTES</b>	



## ISSUANCE OF OFFICIAL RECEIPT

The cashier is responsible for collecting hospital fees, pharmacy sales, and central supply items, laboratory fees, radiology fees, ultrasound fees and other medical costs that are charged and billed using order of payment, statement of accounts, order forms and similar documents. The cashier is located at the Cash Operations Section Office and is available 24/7 Mondays to Sunday including Holidays.

<b>Office or Division</b>	Hospital Operations and Patient Support Services Division - Cash Operations Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public G2B – for government services whose client is a business entity G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	Patients or their Representatives, Affiliate Schools, Government Agencies.	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Order of Payment		Cost center where service was rendered (e.g., Emergency Department, OPD, Pharmacy, Laboratory, Radiology, Central Supply Room, etc.)
Statement of Account (SOA)		Billing and Claims Section
Auto-Credit Payment Notice		Philhealth - NCR

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the window and present required document.	1. Receive document, such as: order of payment / statement of account (SOA)	None	1 minute	Cashier
2. Give cash or check payment	2. Receive cash or check from clients / creditors and Issue	Amount in the order	2 minutes	Cashier





	official receipt/s (OR) for payment from clients	of payment, SOA, ACPN		
<b>3.</b> Receive Official Receipt and clearance	<b>3.</b> Clear hospital bill and give instruction to the client as needed	None	2 minutes	Cashier
<b>TOTAL:</b>		<b>NONE</b>	<b>5 MINUTES</b>	



### MANAGEMENT OF MEDICAL SUPPLIES

Central Supply Room is responsible for managing medical supplies, this process mainly tackles on how each area requests medical supplies to be used during every shift.

<b>Office or Division</b>	Nursing Service Division - Central Supply Room
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency
<b>Who may avail</b>	All Employees needing medical supplies
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Requisition Logbook	Central Supply Room

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Proceed to CSR and request the needed supplies.	1. Accepts request and checks availability of supplies then prepares and documents supplies for releasing.	None	10 minutes	CSR Personnel Central Supply Room
2. Receives the requested supplies and follows the documentation process.	2. Releases the requested supplies and follows the documentation process.	None	5 minutes	CSR Personnel Central Supply Room
<b>TOTAL:</b>		<b>NONE</b>	<b>15 MINUTES</b>	



### STERILIZATION, STORAGE AND DISTRIBUTION

Instruments will be sterilized at Central Supply Room until the instruments will be brought back to its respective area for usage.

<b>Office or Division</b>	Nursing Service Division - Central Supply Room
<b>Classification</b>	Simple
<b>Type of Transaction</b>	<b>G2G</b> – for government services whose client is a government employee or another government agency
<b>Who may avail</b>	Offices using sterilized instruments
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Requisition Logbook	Central Supply Room

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Instruments for autoclaving will be brought to CSR with autoclave logbook per unit.	1.1 Receives, checks and document instruments for autoclaving.	None	6 minutes	CSR Personnel
	1.2 Maintenance will autoclave the instruments.	None	2 hours	CSR Personnel
2. Receives instruments with proper documentation.	2. Once done, CSR personnel will sign logbook and will be released with proper documentation.	None	4 minutes	CSR Personnel
<b>TOTAL:</b>		<b>NONE</b>	<b>2 HOURS AND 10 MINUTES</b>	



## PROCESSING OF CLIENT'S FEEDBACK

Public Assistance and Help Desk process of assistance to hospital clients who want to file / give feedback (complaint or commendation) towards an office, hospital service or personnel.

Office or Division	Special Unit - Continuous Quality Improvement Unit		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All Client availing service/s from NDH		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Client Experience Survey (HCES) Form		NDH Public Assistance & Complaint Desk Also available in all office reception window	
Government Issued ID		Government Offices	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits written feedback using the HCES form.	1.1 PRO receives feedback (HCES form) and check for completeness of data.	None	5 minutes	Patient Relation Officer (PRO)
	1.2 PRO Refers feedback (complaint or commendation) to the concerned department.  For complaints: PRO shall escalate concern to	None	5 minutes	Patient Relation Officer (PRO)



	CQI Unit or Director's Office for appropriate complaint management and resolution.			
<b>2.</b> Client may opt to wait for feedback resolution or may give contact details for feedback updates.	<b>2.</b> PRO to follow-up feedback resolution and conduct proper documentation.	None	5 minutes	Patient Relation Officer (PRO)
<b>TOTAL:</b>		<b>NONE</b>	<b>15 MINUTES*</b>	

\*Processing time may vary depending on the complexity of feedback.



## CONDUCT OF HOSPITAL CLIENT EXPERIENCE SURVEY

This procedure specifically aims to measure organizational performance in terms of customer satisfaction and ensure that the Patient feedback will be observed to develop measures and approaches to continuously improve the quality, efficiency, and effectiveness of the system in the delivery of healthcare services to the public.

<b>Office or Division</b>	Special Unit - Continuous Quality Improvement Unit
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public
<b>Who may avail</b>	All Client availing service/s from NDH
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Hospital Client Experience Survey (HCES) Form	NDH Public Assistance & Complaint Desk Also available in all office reception window

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Get and answer the HCES form.	1. Ask the client to answer an HCES form and guide them on how to answer the form and then check for completeness.	None	5 minutes	Patient Relation Officer
2. Drop the completed HCES form into the Client Survey Box located at each reception window.	2.1 Collect completed HCES forms from the survey boxes and enter the data into the HCES Online Report generator.	None	1 day	Patient Relation Officer



	<b>2.2</b> Review any feedback indicating complaints that need resolution.	None	5 minutes	
	<b>2.3</b> Coordinate the feedback with the relevant office for appropriate resolution.	None	5 minutes	Patient Relation Officer
	<b>2.4</b> The PRO (Public Relations Officer) should follow up on feedback resolution and communicate with the client if necessary.	None	5 minutes	Patient Relation Officer
<b>TOTAL:</b>		<b>NONE</b>	<b>1 DAY AND 20 MINUTES*</b>	

\*Processing time may vary depending on the complexity of feedback.



## NOVALICHES DISTRICT HOSPITAL OCCURRENCE VARIANCE REPORTING (NOVR)

Promotes open communication for reporting occurrence variance without fear and provides NDH personnel the opportunity to address issues and further improve public service.

<b>Office or Division</b>	Special Unit - Continuous Quality Improvement (CQI) Unit				
<b>Classification</b>	Simple				
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency				
<b>Who may avail</b>	All Novaliches District Hospital Personnel including Outsource Services				
<table> <tr> <th>CHECKLIST OF REQUIREMENTS</th><th>WHERE TO SECURE</th></tr> <tr> <td>NDH Occurrence Variance Reporting (NOVR) Form</td><td>Available in every Department / Section / Unit / CQI Unit</td></tr> </table>		CHECKLIST OF REQUIREMENTS	WHERE TO SECURE	NDH Occurrence Variance Reporting (NOVR) Form	Available in every Department / Section / Unit / CQI Unit
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE				
NDH Occurrence Variance Reporting (NOVR) Form	Available in every Department / Section / Unit / CQI Unit				

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill – up all details in the NOVR Form.	1. Receive and review the NOVR form.	None	5 minutes	CQI Unit Staff
2. Receive feedback about the created NOVR.	2. Transmit feedback form to the respective Department / Section / Unit / Committee and others if applicable.	None	5 minutes	CQI Unit Staff
3. Sign in the NOVR logbook.	3. Request to write and sign in the NOVR logbook.	None	5 minutes	CQI Unit Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>15 MINUTES</b>	





### CONTROL OF DOCUMENTS (PROCEDURE / FORM / MANUAL)

Procedure for control of documents for procedure, form or other administrative and institutional policy.

Office or Division	Special Unit - Continuous Quality Improvement (CQI) Unit		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	All Division / Department / Section / Unit who may avail approval and control of documents. (Procedures / Forms / Manual)		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Draft / Proposed document/s (1 original copy)		CQI Unit (NDH Multipurpose Hall, Third Floor)	
DRAR (Document Review and Approval Request)		CQI Unit (NDH Multipurpose Hall, Third Floor)	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit draft / proposed document/s with accomplished DRAR form.	1.1 Receive proposed document/s and accomplished DRAR form.	None	5 minutes	CQI Staff
	1.2 Process document/s for coding	None	1 day	CQI Staff
2. Receives approved and controlled document.	2. Issue approved and controlled document	None	5 minutes	CQI Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>1 DAY AND 10 MINUTES</b>	



## DENTAL CARE MANAGEMENT

Procedures for Oral Examination, Tooth Extraction, Oral Prophylaxis, and Tooth Restoration.

Office or Division	Ancillary Services Division - Dental Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All OPD patients seeking dental care management		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
For NEW PATIENT: <ul style="list-style-type: none"><li>- OPD Patient Information Form</li><li>- Valid Government ID / QC ID</li></ul>		<ul style="list-style-type: none"><li>- OPD Triage</li><li>- Government Offices / QC Hall</li></ul>	
For OLD PATIENT: <ul style="list-style-type: none"><li>- Hospital Card</li><li>- Valid Government ID / QC ID</li></ul>		<ul style="list-style-type: none"><li>- OPD Triage</li><li>- Government Offices / QC Hall</li></ul>	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1. Register at the OPD triage area.</b>  For New patient: Accomplish OPD Patient Information Form.  For Old patient: Present NDH Hospital Card.	<b>1. Follow OPD process</b>	Outpatient Department Consultation fee:  Old patient PHP 50.00  New patient PHP 100.00	10 minutes	OPD Nurse



2. Undergo dental assessment	2. Evaluate the medical history, vital signs and make a Dental Record of the patient and formulate a treatment plan.	None	10 minutes	Dentist
3. For procedures, get Order of Payment, pay and present Receipt.	3. Dental Aide shall issue Order of Payment and instruct client to proceed to cashier for necessary payment.	See pricelist	15 minutes	Dental Aide
4. Receive treatment, home care instructions, and prescription.	4. Receive and verify Official Receipt. Proceed to the necessary dental care management. Issue prescription and instruct patient regarding home medication instructions.		30 min to 1 hour	Dental Aide / Dentist
<b>TOTAL:</b>		<b>SEE PRICE LIST</b>	<b>1 HOUR AND 10 MINUTES</b>	

### DENTAL PROCEDURE PRICELIST

- **Consultation**

- New Patient – PHP 100.00
- Hospital Card – PHP 50.00
- Old Patient – PHP 50.00



- **Tooth Extraction**
  - Simple – PHP 150.00
  - Complicated – PHP 200.00
- **Tooth Restoration**
  - Temporary – PHP 75.00
  - Composite with curing – PHP 150.00 per cavity
- **Oral Prophylaxis**
  - Mild – PHP 125.00
  - Moderate – PHP 125.00
  - Heavy (Severe) – PHP 200.00
- **Others:**
  - Prophylaxis with fluoride (oral) – PHP 200.00
  - Oral Examination – PHP 40.00
  - Pits and Fissure Sealant – PHP 300.00

## KANGAROO-MOTHER CARE PROCESS

Kangaroo mother care is a method of care of preterm infants. The method involves infants being carried, usually by the mother, with skin-to-skin contact.

<b>Office or Division</b>	Clinical Services Division – Department of Pediatrics
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C - for government services whose client is transacting public



<b>Who may avail</b>	Newborn weighing less than 2500 grams
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Consent for KMC (1 original & 1 xerox copy)	Second floor – Nurse Station
KMC form (1 original copy)	Second floor – Nurse Station
Patient Chart (1 original copy)	Second floor – Nurse Station
Consultation Record (1 original copy)	Second floor – Nurse Station
Mother-Baby Dyad Monitoring Sheet (1 original copy)	Second floor – Nurse Station

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<b>1. None</b>	<b>1.1</b> Receives patient's Chart from OR/DR and identify babies for KMC	None	15 minutes	Delivery Room Nurse Pediatrician
	<b>1.2</b> Admits patient	None	1 hour	Pediatrician
<b>2. Give consent for KMC enrollment</b>	<b>2.1</b> Explains the benefits of KMC and secures consent for KMC then Informs Social Worker of the KMC enrollee.	None	1 hour	Pediatrician Nurse on duty Social Worker
	<b>2.2</b> Accompanies and Endorses patients to the ward.	None	30 minutes	Delivery Room Nurse
<b>3. Follow doctor's advice and orders.</b>	<b>3.</b> Patients are received by the Ward nurse on duty who then informs the Consultant on duty.	None	30 minutes	Ward Nurse Pediatrician



4. Learn to perform Kangaroo Mother Care.	4. Orients mother regarding KMC and how to perform it.	None	30 minutes	Pediatrician
5. Perform Kangaroo Mother Care.	5. Daily rounds by consultant on duty and monitor patients including KMC performance	None	30 minutes	Pediatrician Ward Nurse
6. Follows doctor's discharge orders and advice.	6. Consultant discharges patient once stable with adequate weight gain and also when mother is able to perform KMC  Nurses on duty reiterates instructions to the mother & involved relatives then informs SWA of the discharge who then interviews the family.	None	1 hour	Pediatrician Ward Nurse Social Worker
<b>TOTAL:</b>		<b>NONE</b>	<b>5 HOURS AND 15 MINUTES</b>	

### NEWBORN SCREENING

Performance of NBS. -NBS shall be performed after twenty- four (24) hours of life but not later than three (3) days from complete delivery of the newborn. A newborn placed in intensive care in order to ensure survival may be exempted from the three (3) day requirement but should be tested by seven (7) days of age.

<b>Office or Division</b>	Clinical Services Division – Department of Pediatrics
<b>Classification</b>	Simple



<b>Type of Transaction</b>	G2C - for government services whose client is transacting public
<b>Who may avail</b>	All newborn inborn and out born at Novaliches District Hospital
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Newborn Hospital Card	Newborn Screening Section
Newborn Screening Filter	Newborn Screening Section
Doctor's Order Chart	Newborn Screening Section
Order of Payment	Newborn Screening Section
Identification Card	Newborn Screening Section

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For patients delivered at the hospital and admitted.	1. Verify the chart of the baby for doctor's order of Newborn Screening. Then receive the baby card or baby book with doctor's signature.	None	2 minutes	Newborn Screener
2. A corresponding fee is given for those patients delivered from other hospital.	2. Give the Coded Detached Slip Filter at the Billing Section. Provide order of payment and instruct to go at Cashier Section	None	2 minutes	Newborn Screener
3. Show the order of payment and pay for the corresponding fee. Official receipt will be given	3. Receive the order of payment and corresponding fee and issue official receipt.	PHP 1,750.00	2 minutes	Cashier



4. Give the official receipt to the Newborn Screener and wait to be called for screening.	4. Verify the official receipt and call the name of the patient to be screened.	None	2 minutes	Newborn Screener
5. Enter the Newborn Screening Room to be screened and wait for the advice for claiming the result.	5. Call the name of the patient to be screened at the Newborn Screening Room and advise when to claim the official result  If NO findings: Claim the official result after 3-4 weeks.  If WITH findings: A call and advise will be received on provided phone number within 7-14 days.	None	10 minutes	Newborn Screener
6. Claiming of result: Present the Hospital Card of the baby, Valid ID of the mother before claiming the official screening result.	6. Verify the hospital card of the baby and valid ID of the mother. Check the stamp at the back of the hospital card of the baby when screening was done. The mother will sign on the logbook as proof that the official result was already claimed.	None	2 minutes	Newborn Screener
<b>TOTAL:</b>		<b>PHP 1,750.00</b>	<b>20 MINUTES</b>	





## NEWBORN HEARING SCREENING

The newborn hearing screening test helps identify babies who have permanent hearing loss as early as possible. This means parents can get the support and advice they need right from the start.

<b>Office or Division</b>	Clinical Services Division – Department of Pediatrics
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C - for government services whose client is transacting public
<b>Who may avail</b>	All newborn after 24 hours of life



CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Hospital Card	Newborn Hearing Screening Section
Newborn Hearing Screening Registry Card	Newborn Hearing Screening Section
Otoacoustic Emission Machine	Newborn Hearing Screening Section
Order of payment	Newborn Hearing Screening Section
Official receipt	Newborn Hearing Screening Section
Newborn Hearing Screening Official Result	Newborn Hearing Screening Section

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Go to the Newborn Hearing Section together with the baby with 24 hours of life and their hospital card.	1. Let the mother and baby enter the Newborn Hearing Screening Sound Proof Room. Verify if the baby is more than 24 hours old using the Hospital card details.	None	2 minutes	Newborn Hearing Screener
2. Give details needed for the Newborn Hearing Screening Registry Card.	2. Ask the mother regarding the information needed to fill up the Newborn Hearing Screening Registry Card. Write the information given by the mother regarding details needed in the Registry Card.	None	3 minutes	Newborn Hearing Screener



<p><b>3.</b> Maintain a quiet environment inside the Newborn Hearing Screening Room.</p>	<p><b>3.</b> Inspect the ears of the baby if there is any dirt or any physical deformity. Set the Otoacoustic Emission Machine in correct date and time. Place the probe in the baby’s right or left ear and start the screening. Print the result. Do the same procedure in the other ear.</p>	<p>None</p>	<p>8 minutes</p>	<p>Newborn Hearing Screener</p>
<p><b>4.</b> Wait for the result after the screening. For babies delivered in other hospital and lying-in/birth clinic. After screening the baby, the screener will give order of payment to be paid at the hospital cashier. After paying the corresponding fee, return to the Newborn Hearing Screening Room at present the official receipt to the screener.</p>	<p><b>4.</b> Stamp the back of the hospital card of the baby and write the initial result, date and time screened, and name and signature of the screener. For babies delivered in other hospital and lying-in/birth clinic. Give a copy of order of payments to the mother and instruct to go to the Cashier Section to pay for the corresponding fee. Verify if the patient paid the correct fee and other details in the receipt. Return the Hospital Card to the mother and give details for claiming of result.</p>	<p>PHP 400.00</p>	<p>7 minutes</p>	<p>Newborn Hearing Screener At Cashier</p>



5. For babies with Refer result: Remember the details for second screening	5. Provide and instruct the mother when to return for the second screening regarding the Refer result of the first screening.	None	3 minutes	Newborn Hearing Screener
6. Wait for the Official result of Newborn Hearing Screening.	6. Advice the mother to get the official result of the Newborn Hearing Screening and bring the Newborn Hospital Card. For the representative: Newborn Hospital Card with Valid ID of representative.	None	2 minutes	Newborn Hearing Screener
<b>TOTAL:</b>		<b>PHP 400.00</b>	<b>25 MINUTES</b>	

### ELECTIVE OPERATION

Process of scheduling of non-urgent, non-life-threatening operations. This includes minor and major operations.

<b>Office or Division</b>	Clinical Services Division - Department of Surgery
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public



<b>Who may avail</b>	Patients in need of Elective Operation
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Patient’s Hospital Card	Out-Patient Department / Emergency Room
Patient’s Chart	Records Section / Out-Patient Department
Philhealth Membership	Philhealth Offices / Malasakit Center
Operation Proposal	Surgery Specialty Clinic
Risk Stratification	Out-Patient Department

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present Patient Hospital Card at the OPD	1. Verify the Patient Hospital Card and retrieve the patient chart	None	20 minutes	OPD Nurse Record Section Personnel
2. Proceed to OPD for Consultation	2.1 Examination of the Patient 2.2 Checking of Risk Stratification 2.3 Checking of Philhealth Membership	OPD Consultation Fee  New Patient PHP 100.00 Old Patient PHP 50.00	20 minutes	Surgeon OPD Nurse
3. Finalize admission date and operation date	3. Preparation of operation proposal and forwarding to Operating Room	None	20 minutes	OPD Nurse Operating Room Nurse
<b>TOTAL:</b>		<b>PHP 50.00 / PHP 100.00</b>	<b>1 HOUR</b>	

\*Time may vary depending on the severity of case.



## EMERGENCY OPERATION

Process of scheduling of urgent and life-threatening operations. This includes minor and major operations.

<b>Office or Division</b>	Clinical Services Division - Department of Surgery
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public



<b>Who may avail</b>	Patients in need of Emergency Operation
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
In-Patient Chart	Admitting Section
Operation Proposal	Emergency Room
Risk Stratification	Emergency Room/Ward

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure Admitting Chart	1. Verify the Patient Data and retrieve the Patient Chart	None	5 minutes	ER Nurse Admitting Section Personnel
2. Patient Preparation	2. Examination of the Patient then explain Patient condition and Operation to be performed.	None	30 minutes	Surgeon IM Physician ER Nurse
3. Finalize Admission Date and Operation Date	3. Preparation of Emergency Operation Proposal and forwarding to Major Operating Room	None	5 minutes	ER Nurse Surgeon Operating Room Nurse
<b>TOTAL:</b>		<b>NONE</b>	<b>40 MINUTES</b>	

#### DISPOSITION OF COMMUNICATION AND CORRESPONDENCE (INCOMING DOCUMENTS)

The disposition of Communication and Correspondence (Incoming Documents) service efficiently manages and responds to received messages and documents. It ensures timely actions, including replies, forwarding, and appropriate filing, contributing to effective communication within the organization.

<b>Office or Division</b>	Office of the Hospital Director
<b>Classification</b>	Simple



<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public G2B – for government services whose client is a business entity G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	ALL	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Communication Letter addressed to the ff: <ul style="list-style-type: none"> <li>• Novaliches District Hospital</li> <li>• Director of Novaliches District Hospital</li> </ul> Addressee: Hospital Director Address: Novaliches District Hospital #683 Qurino Highway Barangay San Bartolome Novaliches, Quezon City, 1116 Email: NDH@quezoncity.gov.ph		Client

CLIENTS' STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send the desired document thru the official address, email and other channels.	<b>1.1</b> Receive documents - Collect all incoming documents via email, mail, or other channels.	None	5 minutes	Executive Secretary
	<b>1.2</b> Review and prioritize - Quickly review documents to determine their importance and urgency.	None	5 minutes*	Executive Secretary Special Assistant to the Hospital Director for Administrative and Legal matters
	<b>1.3</b> Assign responsibility - Assign each document	None	5 minutes*	Hospital Director





	to the appropriate person or department for handling.			
2. Receive response (if only applicable)	2.1 Action and response - Take necessary actions, such as replying to emails, or forwarding important documents.	None	1 day*	Hospital Director
	2.2 File or Archive - File documents securely for future reference or archive as needed.	None	5 minutes	Executive Secretary
	2.3 Communication - Keep stakeholders informed of progress or updates when necessary.	None	5 minutes	Executive Secretary
<b>TOTAL:</b>		<b>NONE</b>	<b>1 DAY AND 25 MINUTES*</b>	

\* The time frame could be subject to change based on the hospital director's availability.

\* The time frame could be adjusted based on the document's degree of complexity.

### DISPOSITION OF COMMUNICATION AND CORRESPONDENCE (OUTGOING DOCUMENTS)

The Disposition of Communication and Correspondence (Outgoing Documents) service handles outgoing messages and documents with efficiency. This service ensures proper responses, forwarding, and filing, contributing to effective communication within the organization and beyond.

<b>Office or Division</b>	Office of the Hospital Director
<b>Classification</b>	Simple



<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public G2B – for government services whose client is a business entity G2G – for government services whose client is a government employee or another government agency
<b>Who may avail</b>	Patients / their representatives, employees, local government units, national government agencies, private agencies.
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Cover Letter and attached Document	Liaison Officer
Copy Recipients	Executive Assistant

CLIENTS' STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. None	1.1 Create Document - Generate the outgoing document, which can be an email, letter, memo, or any other form of communication.	None	Not applicable	Hospital Director Executive Assistant Executive Secretary
	1.2 Review and Approval – Review the document for accuracy, clarity, and compliance with policies. Obtain necessary approvals if required.	None	5 minutes	Hospital Director Special Assistant to the Hospital Director for Administrative and Legal matters Executive Assistant Executive Secretary
2. Accept and acknowledge the document being sent.	2. Send Document - Transmit the document through the appropriate channel (email, mail,	None	5 minutes	Executive Secretary Liaison Officer



	fax, etc.) to the intended recipient(s).			
<b>3. Respond (If applicable)</b>	<b>3.1</b> Track and confirm - Keep a record of the sent document, including date and recipient(s). Confirm receipt, if possible, especially for critical communications.	None	5 minutes	Executive Secretary Liaison Officer
	<b>3.2</b> Archive or file - Store a copy of the outgoing document for future reference or compliance purposes.	None	5 minutes	Executive Secretary
<b>TOTAL:</b>		<b>NONE</b>	<b>20 MINUTES*</b>	

\* The time frame could be subject to change based on the hospital director's availability.

\* The time frame could be adjusted based on the document's degree of complexity.

### FORMULATION AND REVISION OF HOSPITAL POLICIES AND PROCEDURES

The Formulation and Revision of Hospital Policies and Procedures service involves the creation, updating, and refinement of the hospital's operational guidelines. This service ensures that policies are comprehensive, aligned with industry standards, and reflective of best practices. By continually evaluating and adapting procedures, this service enhances the hospital's efficiency, compliance, and overall quality of care.

<b>Office or Division</b>	Office of the Hospital Director
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<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency
<b>Who may avail</b>	All NDH Offices / Division / Department / Section / Unit / Committee
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Policies with complete signature from concern committee	Committee Secretary / Concern Department

CLIENTS' STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the documents	1.1 Receive and record	None	3 minutes	Executive Assistant
	1.2 Submission of document to Legal Officer document review and recommendation	None	2 days	Special Assistant to the Hospital Director for Administrative and Legal matters Executive Assistant
	1.3 Review and approval of the documents	None	1 day	Hospital Director
	1.4 Signing of Document.	None	2 minutes	Hospital Director
	1.5 Recording of received document	None	5 minutes	Executive Assistant
	1.6 Distribution of recorded documents.	None	3 minutes	Executive Assistant
	1.7 Receipt of documents by the corresponding Unit/Section/Office/Department	None	2 minutes	Committee Secretary Concerned Office



<b>TOTAL:</b>	<b>NONE</b>	<b>3 DAYS AND 15 MINUTES</b>	
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## SETTING AN APPOINTMENT (WALK-IN AND ONLINE)

The Setting an Appointment service at the Office of the Hospital Director facilitates streamlined scheduling for various administrative matters, optimizing convenience and efficiency.

<b>Office or Division</b>	Office of the Hospital Director
<b>Classification</b>	Simple



<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public G2B – for government services whose client is a business entity G2G – for government services whose client is a government employee or another government agency
<b>Who may avail</b>	General Public, Private Sector, Government Instrumentalities
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Government Issued ID	Client

CLIENTS' STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>A. WALK-IN CLIENT</b>				
<b>1.</b> All clients are directed to the Hospital Director's Office entrance where they encounter the Security Guard.	<b>1.</b> The Security Guard performs identification procedures and other necessary security checks for the incoming clients.	None	4 minutes	Security Guard
<b>2.</b> Clients are requested to complete the CSM form, indicating the nature of their request.	<b>2.</b> The Security Guard provides the clients with the Customer Satisfaction Measurement (CSM) form.	None	4 minutes	Security Guard
<b>3.</b> The client should indicate the purpose of their visit and furnish a	<b>3.1</b> The security personnel accurately record clients' relevant information, including name and purpose	None	3 minutes	Security Guard



valid identification card for the purposes of documentation and security.	of visit, in the security logbook.			
	<b>3.2</b> Clients are then referred to the Executive Assistant of the Hospital Director.	None	2 minutes	Security Guard Executive Assistant
	<b>3.3</b> The Executive Assistant handles appointment scheduling and further assistance.  <b>3.4</b> The Executive Assistant inquiries about the purpose of the client's visit and the desired appointment date and time.	None	8 minutes	Executive Assistant
<b>4.</b> The client provides designated time and date for the appointment.	<b>4.</b> The Executive Assistant checks the availability of appointment slots in line with the client's preferences. If disapproved, notify client through email or txt message	None	2 minutes	Executive Assistant
<b>5.</b> The client is to receive the official confirmation of the appointment.	<b>5.1</b> Upon confirming an available slot, the Executive Assistant confirms the appointment details, including the appointment's date, time, and nature.	None	8 minutes	Executive Assistant



	<b>5.2</b> A formal appointment confirmation containing relevant details is provided to the client.			
	<b>5.3</b> If necessary, a reminder message is sent closer to the appointment date, ensuring client preparedness.	None	2 minutes	Executive Assistant
	<b>5.4</b> At the appointed day, the security personnel will validate and perform security procedures on the client.  <b>5.5</b> Subsequently, the client will be guided to the Executive Assistant, who will provide necessary support in meeting the Hospital Director.	None	8 minutes	Security Guard Executive Assistant
	<b>5.6</b> On the scheduled date and time, clients meet with the Hospital Director as per their confirmed appointment.	None	20 minutes	Executive Assistant Hospital Director
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR</b>	

#### B. Appointment via Email or other communication platform

Clients' steps	Agency action	Fees to be paid	Processing time	Person responsible
<b>1.</b> The client emails the Hospital Director's Office with a subject line "Appointment Request -	<b>1.1</b> Acknowledges the receipt of the client's email.	None	5 minutes	Executive Assistant





[Client Name]," providing their full name, purpose of appointment, preferred dates, and contact details for a prompt response.				
	<b>1.2</b> Reviews the requested appointment dates and times, checking for availability. If a suitable slot is available, the Executive Assistant confirms the appointment and communicates the finalized date and time. If disapproved, notify client through email.	None	5 minutes	Executive Assistant
	<b>1.3</b> The Executive Assistant sends a formal confirmation email to the client, outlining the appointment details and any pertinent instructions. Closer to the appointment date, a reminder email is sent to the	None	5 minutes	Executive Assistant



	client to ensure preparedness.			
2. All clients are directed to the Hospital Director's Office entrance where they encounter the Security Guard.	2. The Security Guard performs identification procedures and other necessary security checks for the incoming clients. Subsequently, the Executive Assistant will accompany and guide the clients to the Hospital Director for their meeting.	None	5 minutes	Security Guard Executive Assistant
3. On the scheduled date and time, the client arrives at the Hospital Director's Office for the appointed discussion.	3. Meet with the client.	None	40 minutes	Hospital Director
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR</b>	

### EMERGENCY ROOM CONSULTATION PROCESS

Steps for patients seeking consultation in the Emergency Room. The Emergency Department is a 24-hour service department dedicated to immediate and competent first contact care of patients whose conditions require prompt attention.

<b>Office or Division</b>	Nursing Service Division – Emergency Room
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Classification:	Simple		
Type of transaction:	G2C – for government services whose client is transacting public		
Who may avail:	All		
CHECKLIST OF REQUIREMENTS		WHERE TO AVAIL	
Hospital Card		Admitting Section (ER Registration)	
Government Issued ID / Quezon City ID		Government Offices / QC Hall	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Go to ER Satellite for Triaging and Registration for Vital Signs, interview & Physical exam	1. Interview / Triaging / Registration and Vital signs taking then Assessment of Doctor and orders will be carried out by Nurses	None	40 minutes	Nurse on Duty GP on Duty Admitting Personnel
2. Laboratory Requests and Prescription will be submitted at Laboratory and Pharmacy	2. Relative will go to Laboratory and Pharmacy as instructed then medication will be administered as ordered	See Revenue Code	20 minutes	Nurse on Duty
	Patient must have disposition within the set period	None	4 hours maximum	Nurse on Duty Doctor on Duty
FINAL DISPOSITION				
3.1 Relative will accomplish clearance form.	3.1 Patients for <b>Discharge / May Go Home:</b>	None	30 minutes	Nurse on Duty



	Clearance form must be accomplished before discharge. Referral to SWA if unable to pay. Discharge instructions will be given			
<b>3.2</b> Relative and or patient will listen to THOC instructions.	<b>3.2</b> Patients for <b>Transfer to Hospital of Choice:</b>  Doctor on Duty will give and explain the THOC form before discharge.	None	15 minutes	Doctor on Duty
<b>3.3</b> Relative or patient must process admission.	<b>3.3</b> Patients for <b>Admission:</b>  (Refer to admission process)	None	30 minutes	Doctors on Duty Nurse on Duty
<b>TOTAL:</b>		<b>*PHP 100.00 / 150.00</b>	<b>6 HOURS</b>	

Time may vary depending on the number of patients being served and complexity of clinical cases being managed.

**\*CONSULTATION FEE BASED ON THE REVENUE CODE:**

- Emergency Room Consultation Fee – PHP 100.00
- Medico Legal – PHP 150.00 (No charges if patient will be sent to precinct)

**EMERGENCY ROOM ADMISSION PROCESS**

This process marks the start of continuity of care of patients, this starts at OPD and ER where doctors on duty assess and makes a disposition that patient needs to get admitted. At the Emergency Room, patients who need intensive medical care are being admitted while in the OPD, patients who are scheduled for operation are usually being admitted



<b>Office or Division</b>	Nursing Service Division – In Patient Ward
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public
<b>Who may avail</b>	All patients for admission
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Hospital Card (1 copy original)	Client
Government Issued ID / Quezon City ID (1 copy original)	Government Offices / QC Hall
Doctor's Order for Admission (1 copy original)	ER Department / Outpatient Department

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<b>1.</b> Submit Self to treatment / management	<b>1.1</b> Doctor will inform patient or relative regarding the need for admission	None	5 minutes	Doctor on Duty Nurse on Duty
	<b>1.2</b> Supervisor will be informed and Admitting Officer for bed availability by ER NOD	None	2 minutes	Nurse on Duty
	<b>1.3</b> Doctor will handover accomplished chart with orders to Nurse	None	12 minutes	Doctor on Duty Nurse on Duty
	<b>1.4</b> Nurse on will carry-out doctor's orders	None	20 minutes	Nurse on Duty
<b>2.</b> Patient will sign consent form	<b>2.1</b> Admitting officer will accomplish front page and consent form	None	3 minutes	Nurse on Duty



	<b>2.2</b> Ward Nurse will be informed	None	3 minutes	ER / OPD Nurse on Duty
	<b>2.3</b> Once chart has been accomplished, Patient will be transferred to ward with Nurse and IW. If intubated, Doctor will accompany the patient as well. When the chart has been accomplished by ER / OPD nurse, nurse on duty will request for Institutional workers' assistance	None	15 minutes	ER / OPD Nurse on Duty Institutional Worker
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR</b>	

\*Time posted may vary depending on the number of patients / clients being served

### REPAIR AND MAINTENANCE OF EQUIPMENT AND FACILITIES

Provides services for NDH Repair and Maintenance of Equipment and Facilities. Repairs are restoration work for when an asset breaks, gets damaged, or stops working. Maintenance refers to routine activities and/or corrective or preventive repair done on assets to prevent damage and prolong the life expectancy.



<b>Office or Division</b>	Hospital Operations and Patient Support Services Division - Engineering and Facility Management Section						
<b>Classification</b>	Simple, Complex and Highly Technical						
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency						
<b>Who may avail</b>	All Novaliches District Hospital (NDH) Employees/ Offices						
<table> <tr> <th>CHECKLIST OF REQUIREMENTS</th><th>WHERE TO SECURE</th></tr> <tr> <td>Job Request Form (For Non-medical Equipment/ Facility)</td><td>Engineering and Facility Management Section</td></tr> <tr> <td>Medical Equipment Job Request Form (For Medical Equipment)</td><td>Biomed Section</td></tr> </table>		CHECKLIST OF REQUIREMENTS	WHERE TO SECURE	Job Request Form (For Non-medical Equipment/ Facility)	Engineering and Facility Management Section	Medical Equipment Job Request Form (For Medical Equipment)	Biomed Section
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE						
Job Request Form (For Non-medical Equipment/ Facility)	Engineering and Facility Management Section						
Medical Equipment Job Request Form (For Medical Equipment)	Biomed Section						

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1. Fill-out Request Form</b>  a. For non-medical equipment / facility - Job Order Request Form b. For medical equipment - Medical Equipment Job Request	<b>1. Receive the Job Order Request Form</b>  Classify if the Job Order is for (Biomedical, Building and Facilities, Electrical, Mechanical, Plumbing or Others	None	5 minutes	Engineer / Maintenance Personnel
<b>2. Submit to Engineering Section</b>	<b>2. If materials are available, perform necessary works.</b>	None	<3 Days (Simple)  3 - 7 Days (Complex)	Maintenance Personnel



			>8 Days (Highly Technical)	
3. Acknowledge Job Order for Completion of Project	3. Upon completion present Job Order to Acknowledge the Completion	None	5 minutes	Maintenance Personnel
TOTAL:		NONE	<3 DAYS / 3 - 7 DAYS / >8 DAYS	

\*Processing time may vary depending on the nature of repair or maintenance work requested.

### MOTOR POOL SERVICE

Provides Transport Services for NDH Employees and Clients. Motor Pool means a facility used to keep, maintain and services vehicles owned by the Hospitals. This service is available 24/7 (Monday to Sunday).





Office or Division	Hospital Operations and Patient Support Services Division - Engineering and Facility Management Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public G2G – for government services whose client is a government employee or another government agency		
Who may avail	All Novaliches District Hospital (NDH) Employees and Clients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Official Travel / Trip Ticket Form (1 original copy)		Engineering and Facility Management Section	

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Fill-out manually the Official Travel / Trip Ticket Form	<p>1. Receive the Official Travel / Trip Ticket Form</p> <p>Classify if it is a:</p> <p>a. NDH to other Government or Private Agencies (For Employees)</p> <p>b. Hospital to Hospital Patient Transfer (For Clients / Patient)</p> <p>c. Hospital to Other Medical Facility, Laboratory or</p>	<p>₱500.00 for 1<sup>st</sup> KM</p> <p>₱100.00 for additional KMs</p>	10 minutes	Engineer / Driver



	Clinic (For Clients / Patient)			
2. Submit to Engineering and Facility Management Section for signing and approval	2. Approve the form and set schedule the official travel.	None	5 minutes	Engineer Weekdays 8:00AM – 5:00 PM  Senior House Officer or Requesting MD Weekends and Non-Office Hours  Hospital Director For Outside Metro Manila
3. Submit to Guard the Guard's copy	3. Perform the authorized travel / trip.	None	5 minutes	Driver
<b>TOTAL:</b>		<b>PHP 500.00*</b>	<b>20 MINUTES</b>	

\*Price List: ₱500.00 for 1<sup>st</sup> KM and ₱100.00 for additional KMs

## LAUNDRY SERVICE



Provides Laundry Services for NDH patient care areas. Hospital laundry services provide a range of services for our hospital. They include sorting, cleaning, sanitizing, and disinfecting used linen. This ensures that patients' bed sheets and other linen items remain fresh and clean. This service is available Monday to Sunday.

Office or Division	Hospital Operations and Patient Support Services Division - Engineering and Facility Management Section		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	All Novaliches District Hospital (NDH) Employees		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Receiving Logbook		Engineering and Facility Management Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Endorse linen to laundry worker.	1. Receive and weigh the linen.	None	30 minutes	Laundry Worker
2. Counter sign the logbook of laundry load.	2.1 Countercheck the linen pieces / kilogram and record in logbook.	None	30 minutes	Laundry Worker
	2.2 Proceed to laundry works.	None	1 day	Laundry Worker
3. Acknowledge completion of laundry.	3. Endorse linen to Central Supply Room.	None	5 minutes	Laundry Worker
<b>TOTAL:</b>		<b>NONE</b>	<b>1 DAY AND 65 MINUTES</b>	

## REGISTRATION AND ISSUANCE OF LIVE BIRTH CERTIFICATE



Steps for clients requesting for Live birth certificate registration. A certificate of live birth is the first unofficial document issued upon a baby's live birth and is used for record-keeping and data entry. Once that document is processed, the government will issue the official legal document called a birth certificate.

<b>Office or Division</b>	Ancillary Services Division - Health Information Management Section (Medical Records Section)	
<b>Classification</b>	Highly Technical	
<b>Type of Transaction</b>	G2C - for government services whose client is the transacting public G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	Patients who gave birth at Novaliches District Hospital	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Live Birth Certificate Form Tool (1 original copy)		Midwife
Live Birth Certificate Form (4 original copies)		Health Information Management Section
QC ID or any Government issued ID		Quezon City Hall or Government Agency
Representative's QC ID or any Valid ID (1 photocopy)		Quezon City Hall or Government Agency
Cedula (1 original copy)		Barangay Hall or Quezon City Hall
Affidavit of Using Surname of the Father (4 original copies)		Midwife
Authorization Letter (1 original copy)		Patient
Marriage Certificate (1 photocopy) if married		Philippine Statistics Authority
Waiver for Notary of Live Birth Certificate (1 original copy)		Health Information Management Section
Official Receipt (1 original)		Cashier
Order of Payment		Health Information Management Section



CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<p>1. For married parents, undergo Interview and submit a copy of marriage certificate to the midwife.</p> <p>a. For married parents, skip step 2 and 3.</p> <p>b. For unmarried parents, undergo interview c/o midwife.</p>	<p>1. For married parents, undergo Interview and accomplish Live Birth Certificate form with tool form and attach a copy of marriage certificate and valid ID of both parents.</p> <p>For unmarried parents, undergo interview and accomplish Live Birth Certificate Form with Tool Form, leave father’s details blank. Attach Affidavit of using Surname of Father (AUSF) and valid ID of both parents.</p>	None	10 minutes	Midwife
<p>2. For unmarried parents, father or relative will be given further instructions.</p>	<p>2. Give instructions to the father to proceed to the Medical Records Section.</p>	None	5 minutes	Midwife
<p>3. For unmarried parents, Father of new born will proceed to the medical records section, answer</p>	<p>3. Check the Valid ID or Cedula, instruct how to answer Live Birth Certificate Form with Tool Form and Affidavit</p>	None	30 minutes	Medical Records Clerk / Medical Records Officer



Live Birth Certificate Form with Tool form and Affidavit of using Surname of Father (AUSF).  Issuance of waiver for the notary of Live Birth Certificate.	of using Surname of Father (AUSF).  Instruct the father to notarized the Certificate of Live Birth (COLB) and return the COLB to Medical Records Section.			
4. For married and unmarried parents, they will receive instructions on when to claim the registered live birth certificate.	4. Instruct to comeback after 1 month to claim the registered live birth certificate.	None	5 minutes	Medical Records Clerk / Medical Records Officer
5. For claiming the certificate married and unmarried parents, must present a valid ID. For parents who cannot come to claim the certificate, authorized representative must have the following documents:  <ul style="list-style-type: none"> <li>• Authorization letter</li> <li>• Copy of Mother and Father's ID</li> <li>• Copy of Representative ID</li> </ul>	5. Verify valid ID of parents, authorization letter in the absence of parents, official receipt from cashier section and release the registered live birth certificate.	50.00	5 minutes	Medical Records Clerk / Medical Records Officer
<b>TOTAL:</b>		<b>PHP 50.00</b>	<b>55 MINUTES</b>	

#### ISSUANCE OF PATIENT’S MEDICAL RECORDS



Steps when requesting a certified true copy of anesthesia record / operating room technique / discharge summary / clinical abstract for discharged patients. Medical records are the document that explains all detail about the patient's history, clinical findings, diagnostic test results, pre and postoperative care, patient's progress and medication.

Office or Division	Ancillary Services Division - Health Information Management Section (Medical Records Section)		
Classification	Complex		
Type of Transaction	G2C - for government services whose client is the transacting public G2B – for government services whose client is a business entity G2G - for government services whose client is a government employee or another government agency		
Who may avail	All admitted patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Authorization Letter (1 original copy)		Patient	
QC ID or any Government issued ID		Quezon City Hall or Government Agency	
Representative’s QC ID or any Valid ID (1 photocopy)		Quezon City Hall or Government Agency	
Official Receipt (1 original copy)		Cashier Section	
Request Form (1 original copy)		Health Information Management Section	
Order of Payment		Health Information Management Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the Request form and present a valid ID.	1. Accept Request Form, Valid ID and Authorization Letter.	None	5 minutes	Medical Records Clerk / Medical Records Officer



For patient representative the following document are required:				
<ul style="list-style-type: none"> <li>• Authorization letter</li> <li>• Copy of patient's valid ID</li> <li>• Copy of representative valid ID</li> </ul>				
<b>2.</b> Will receive instructions on when to claim the document.	<b>2.</b> Give instructions to comeback after seven (7) working days for the release of requested document.	None	5 minutes	Medical Records Clerk / Medical Records Officer
<b>3.</b> Will receive an order of payment and proceed to the cashier section for payment.	<b>3.</b> Give an order of payment and instruct to proceed to the cashier section for payment.	None	5 minutes	Medical Records Clerk / Medical Records Officer
<b>4.</b> Present Order of payment and pay indicated amount. Will receive an official receipt.	<b>4.</b> Accept order of payment. Issue an official receipt.	PHP 50.00 / document	10 minutes	Cashier Clerk Cash Section
<b>5.</b> To claim the document:  Present the official receipt and the duplicate copy of the request form to the medical records section.	<b>5.</b> Verify official receipt and valid IDs. Release the requested document and log to logbooks.	None	5 minutes	Medical Records Clerk / Medical Records Officer
<b>TOTAL:</b>		<b>PHP 50.00</b>	<b>30 MINUTES</b>	





### RETRIEVAL OF PATIENT'S OLD CHART

Steps the retrieve old patients / discharged patient's chart. Typically, patient charts include vitals, medications, treatment plans, allergies, immunizations, test results, patient demographics, diagnoses, progress notes and reports. All information in patient charts comes from nurses, lab technicians, physicians and other practitioners involved in the patient's care.

Office or Division	Ancillary Services Division - Health Information Management Section (Medical Records Section)		
Classification	Simple		
Type of Transaction	<b>G2C</b> - for government services whose client is the transacting public <b>G2G</b> - for government services whose client is a government employee or another government agency		
Who may avail	All Out-patients, ER patients, In-patients and employees.		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital card		Health Information Management	
Information Data Sheet		Out-Patient Department	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Hospital card at the Out-patient Department. If lost card answer Information data sheet and hand it to the nurse-on-duty.	1. Accept and verify patient's hospital card.	None	3 minutes	Medical Records Clerk / Medical Records Officer
2. Wait for your name to be called.	2. Retrieve patient's old chart and released at OPD nurse-on-duty.	None	12 minutes	Medical Records Clerk / Medical Records Officer
<b>TOTAL:</b>		<b>None</b>	<b>15 minutes</b>	



## DEATH CERTIFICATE RELEASING PROCESS

Steps for clients requesting for Death Certificate. A Death Certificate is an official document setting forth particulars relating to a dead person, including the name of the individual, the date of birth and the date of death.

Office or Division	Ancillary Services Division - Health Information Management Section (Medical Records Section)		
Classification	Simple		
Type of Transaction	G2C - for government services whose client is the transacting public		
Who may avail	Relatives of expired patient of Novaliches District Hospital		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Death Certificate Form Tool (4 original copy)		Health Information Management Section	
QC ID or any Government Valid ID (1 original copy)		Quezon City Hall or Government Agency	
Representative's QC ID or any Valid ID (1 photocopy)		Quezon City Hall or Government Agency	
Authorization Letter (1 original copy)		Next of kin	
Official Receipt (1 original copy)		Cashier Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Authorized next-of-kin / Informant should provide patient's information for the preparation of the Death certificate.	1. Interview the authorized next-of-kin for needed information for death certificate.  Complete pre-form by the attending physician affixes his/her signature	None	10 minutes	Nurse-on-Duty / Attending Physician



	on the four copies of official Death Certificate forms. Re-check the information recorded in the document before forwarding it to the medical records.			
<b>2.</b> Request for Death Certificate at HIM.	<b>2.</b> Transcribe the data into the Official Death Certificate form. Check information and medical terms on the official death certificate.	None	10 minutes	Medical Records Clerk / Medical Records Officer
<b>3.</b> For Next-of-kin / Informant of the following are required: <ul style="list-style-type: none"> <li>- Valid ID of Next-of-kin</li> <li>- Valid ID of the deceased</li> </ul> For authorized representative the following are required: <ul style="list-style-type: none"> <li>- Valid ID of next-of-kin</li> <li>- Valid ID of representative</li> <li>- Authorization Letter</li> </ul>	<b>3.</b> Identify the next-of-kin / informant before releasing the four (4) copies of the official death certificate.	None	5 minutes	Medical Records Clerk / Medical Records Officer
<b>4.</b> Will receive an order of payment and proceed to the Cashier Section for payment.	<b>4.</b> Give an order of payment and instruct to proceed to the cashier section for payment.	None	5 minutes	Medical Records Clerk / Medical Records Officer



<b>5.</b> Present order of payment and pay indicated amount. Will received an official receipt.	<b>5.</b> Accept order of payment and issue official receipt.	PHP 50.00	5 minutes	Cashier Clerk Cashier Section
<b>6.</b> Present the official receipt to the medical records section and sign in the releasing logbook.	<b>6.</b> Get the official receipt and valid ID of the next-of-kin / Informant. Release the official death certificate form.	None	5 Minutes	Medical Records Clerk / Medical Records Officer
<b>TOTAL:</b>		<b>PHP 50.00</b>	<b>40 MINUTES</b>	



## 2-D ECHOCARDIOGRAM

Steps for patients for 2-D Echocardiogram procedure requested by the doctor. Open / Available Monday to Friday except Holidays (8:00 a.m. to 5:00 p.m.)

Office or Division	Ancillary Services Division - Heart Station		
Classification:	Simple		
Type of transaction:	G2C – for government services whose client is transacting public		
Who may avail:	All patients of NDH (Out-patient and Inpatient)		
CHECKLIST OF REQUIREMENTS		WHERE TO AVAIL	
Hospital Card (1 original copy)		Health Information Management Section	
Request signed by the Doctor (1 original copy)		First Floor, Heart Station	
Valid ID or Quezon City ID (1 original copy)		Government Offices / Quezon City Hall	
Order of Payment (1 original copy)		First Floor, Heart Station	
Official receipt (1 original copy)		Cash Operation Section	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1.</b> Present the hospital card and Heart Station request form signed by the doctor.  For patients with request from other hospitals, they will be	<b>1.</b> Accept the Heart Station request form and give instructions depending on the requested procedure / examination. Schedule will depend on the number of patients.	None	3 minutes	Nurse Sonographer / Clerk



instructed to go to the Out-patient Department to have a hospital record and change the outside request to the hospital's Heart Station request form.				
<b>2.</b> Will receive order of payment and proceed to the cashier section for payment.	<b>2.</b> Give order of payment and instruct patient to proceed to cashier section for payment.	2D ECHO Plain / 2D ECHO with DS PHP 2,500.00	3 minutes	Nurse Sonographer / Clerk
<b>3.</b> Present the order of payment and pay the indicated amount at the cashier. Patient will be given an official receipt.	<b>3.</b> Accept order of payment and give Official receipt after payment.	None	3 minutes	Cashier
<b>4.</b> Present the official receipt at the Heart Station.	<b>4.</b> Verify the official receipt and instruct the patient to wait for their name to be called.	None	3 minutes	Nurse Sonographer / Clerk
<b>5.</b> Proceed to the procedure room for the procedure and listen to the instructions. After the procedure, the patient will be instructed when the official result will be available.	<b>5.</b> Call the patient and proceed to the procedure room for the procedure. Give instructions to the patient and that the official result will be	None	1 hour*	Nurse Sonographer / Cardiologist



	available after 7 working days.			
<b>6.</b> To claim result, present hospital card, valid ID and official receipt.	<b>6.</b> Verify Hospital card, valid ID or Official receipt and release official examination result.	None	3 minutes	Nurse Sonographer / Clerk
<b>TOTAL:</b>		<b>PHP 2,500.00</b>	<b>1 HOUR AND 15 MINUTES*</b>	

\*Time may vary depending on the clinical case.



## ELECTROCARDIOGRAM

Steps for patients for Electrocardiogram procedure requested by the doctor. Open / Available Monday to Friday except Holidays (8:00 a.m. to 5:00 p.m.)

Office or Division	Ancillary Services Division - Heart Station		
Classification:	Simple		
Type of transaction:	G2C – for government services whose client is transacting public		
Who may avail:	All patients of NDH (Out-patient)		
CHECKLIST OF REQUIREMENTS		WHERE TO AVAIL	
Hospital Card (1 original copy)		Health Information Management Section	
Request signed by the Doctor (1 original copy)		First Floor, Heart Station	
Valid ID or Quezon City ID (1 original copy)		Government Offices / Quezon City Hall	
Order of Payment (1 original copy)		First Floor, Heart Station	
Official receipt (1 original copy)		Cash Operation Section	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1.</b> Present the hospital card and Heart Station request form signed by the doctor.  For patients with requests from other hospitals, they will be	<b>1.</b> Accept the Heart Station request form and give instructions depending on the requested procedure / examination.	None	3 minutes	Nurse Sonographer / Clerk





instructed to go to the Out-patient Department to have a hospital record and change the outside request to the hospital's Heart Station request form.				
<b>2.</b> Will receive order of payment and proceed to the cashier section for payment.	<b>2.</b> Give order of payment and instruct the patient to proceed to the cashier section for payment.	PHP 300.00	3 minutes	Nurse Sonographer / Clerk
<b>3.</b> Present the order of payment and pay the indicated amount at the cashier. Patients will be given an official receipt.	<b>3.</b> Accept order of payment and give Official receipt after payment.	None	3 minutes	Cashier
<b>4.</b> Present the official receipt at the Heart Station.	<b>4.</b> Verify the official receipt and instruct the patient to wait for their name to be called. Verify the official receipt and instruct the patient to wait for their name to be called.	None	3 minutes	Nurse Sonographer / Clerk
<b>5.</b> Proceed to the procedure room for the procedure and listen to the instructions. After the procedure, the patient will be instructed	<b>5.</b> Call the patient and proceed to the procedure room for the procedure. Give instructions to the patient and that the	None	5 minutes*	Nurse Sonographer / Cardiologist



when the official result will be available.	official result will be available after 7 working days.			
<b>6.</b> To claim the result, present a hospital card, valid ID and official receipt.	<b>6.</b> Verify Hospital card, valid ID or Official receipt and release official examination result.	None	3 minutes	Nurse Sonographer / Clerk
<b>TOTAL:</b>		<b>PHP 300.00</b>	<b>20 MINUTES*</b>	

\*Time may vary depending on the clinical case.



## PROVISION OF PASTEURIZED HUMAN MILK (OUT BORN RECIPIENT)

This service is provided to infants who are not admitted to the Novaliches District Hospital and whose mother's milk supply is insufficient or who cannot breastfeed due to medical reasons. Schedule of Operation: 8:00 a.m. to 5:00 p.m. Monday – Sunday

<b>Office or Division</b>	Special Unit - Human Milk Bank Unit	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is transacting public	
<b>Who may avail</b>	Out-Patient	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Hospital Card		Health Information Management Section (Medical Records)
Prescription		Attending Physician
Clinical Abstract		Attending Physician
Cooler with gel type icepacks		Pharmaceutical Store
Official Receipt for processing fee and bottle deposit		Cash Operations Section (Cashier)
Kasunduan sa paggamit ng pasteurized donor milk		Human Milk Bank Unit
Waiver sa pagtanggap ng pasteurized donor milk para sa mga out born recipient		Human Milk Bank Unit

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1. Present requirements:</b> <ul style="list-style-type: none"> <li>Hospital Card</li> <li>Prescription</li> </ul>	<b>1.1</b> Receive and review the requirement accordingly. <b>1.2</b> Check the integrity of cooler and gel type icepacks.	None	5 minutes	Human Milk Bank Personnel



<ul style="list-style-type: none"> <li>Clinical Abstract</li> <li>Cooler with gel type icepacks</li> </ul>	1.3 Provide order of Payment			
2. Pay to Cashier	2. Receive payment and issue official receipt.	PHP 220.00 / 100ml  PHP 280.00 / bottle	3 minutes	Cashier
3. Present official receipt to Human Milk Bank Unit then receives and accomplish Kasunduan sa paggamit ng pasteurized donor milk and Waiver sa pagtanggap ng pasteurized donor milk para sa mga out born recipient.	3. Accept official receipt. Then provide and receive accomplished Kasunduan sa paggamit ng pasteurized donor milk and Waiver sa pagtanggap ng pasteurized donor milk para sa mga out born recipient.	None	5 Minutes	Human Milk Bank Personnel
4. Receive orientation about pasteurized human breast milk and lactation.	4. Provide orientation about pasteurized human milk and lactation.	None	10 minutes	Human Milk Bank Personnel
5. Receive pasteurized human Breast milk.	5. Give pasteurized human milk inside the cooler with gel type icepack.	None	2 minutes	Human Milk Bank Personnel
<b>TOTAL:</b>		<b>PHP 500.00</b>	<b>25 MINUTES</b>	



## PROVISION OF PASTEURIZED HUMAN MILK (IN-PATIENT)

This service is provided to infants admitted to the Novaliches District Hospital and whose mother's milk supply is insufficient or unable to breastfeed due to medical reasons. Schedule of Operation: 08:00 a.m. to 05:00 p.m. Monday – Sunday

Office or Division	Special Unit - Human Milk Bank Unit		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is transacting public		
Who may avail	In-Patient		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card		Health Information Management Section (Medical Records)	
Prescription		Attending Physician	
Clinical Abstract		Attending Physician	
Cooler with gel type icepacks		Human Milk Bank Unit	
Charge Slip		Human Milk Bank Unit	
Kasunduan sa paggamit ng pasteurized donor milk		Human Milk Bank Unit	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1. Present Requirements:</b> <ul style="list-style-type: none"> <li>Hospital Card</li> <li>Prescription</li> <li>Clinical Abstract</li> </ul>	<b>1. Review documents and evaluate accordingly. Issue Charge Slip and forwards to Billing and claims at the end of the shift.</b>	PHP 220.00 / 100ml  PHP 280.00 / bottle	5 minutes	Human Milk Bank Personnel



2. Receive and accomplish Kasunduan sa paggamit ng pasteurized donor milk.	2. Provide and receive accomplished Kasunduan sa paggamit ng pasteurized donor milk.	None	5 minutes	Human Milk Bank Personnel
3. Receive orientation about Pasteurized Human Milk and Lactation.	3. Provide orientation about Pasteurized Human Milk and Lactation.	None	10 minutes	Human Milk Bank Personnel
4. Receive Pasteurized Human Milk.	4. Give Pasteurized Human Milk inside the cooler with gel type icepack.	None	5 minutes	Human Milk Bank Personnel
<b>TOTAL:</b>		<b>PHP 500.00</b>	<b>25 MINUTES</b>	



## PROCESS OF DONATING HUMAN BREAST MILK

This service is provided to potential donors who are willing to donate their extra breast milk to the Human Milk Bank Unit.

Schedule of Operation: 08:00 a.m. to 05:00 p.m. Monday – Sunday

Office or Division	Special Unit - Human Milk Bank Unit		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is transacting public		
Who may avail	Outpatient and In-Patient		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card		Human Milk Bank Unit Ground Floor	
Serological test within six (6) months (Hepatitis B, VDRL – Syphilis and HIV Screening)		NDH Laboratory / Laboratory results done outside	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Inquire about Donation of Breast Milk.	1. Explain the requirements for breast milk Donors.	None	3 minutes	Human Milk Bank Personnel
2. Present Requirements: <ul style="list-style-type: none"> <li>Hospital Card</li> <li>Serological test result valid within the last six (6) months (Hepatitis B, VDRL – Syphilis and HIV Screening)</li> </ul>	2. Screen and conduct serological test if beyond 6 months.  Classify donors if: <ul style="list-style-type: none"> <li>Accepted</li> <li>Temporary deferred</li> <li>Permanently deferred</li> </ul>	None	20 minutes	Human Milk Bank Personnel



3. Receive orientation about Human Milk Banking and Lactation.	3. Provide orientation about Human Milk Banking and Lactation.	None	10 Minutes	Human Milk Bank Personnel
4. Expression of breast milk.	4. Receive expressed human breast milk.	None	2 minutes	Human Milk Bank Personnel
<b>TOTAL:</b>		<b>NONE</b>	<b>35 MINUTES</b>	





### MONITORING OF HEALTH CARE ASSOCIATED INFECTION

Infection prevention and control effects all aspects of health care, including hand hygiene, surgical site infections, injection safety, antimicrobial resistance and how hospitals operate during and outside of emergencies.

<b>Office or Division</b>	Special Unit – Infection Prevention and Control Unit			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2G – for government services whose client is the transacting public			
<b>Who may avail</b>	NDH Employees			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Healthcare Associated Infection Form		Infection Prevention and Control Unit Office		
<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. HAI notice, verification and coordination with concerned department.	1. Receive notice from patient care area for suspected HAI patients using HAI form. Verify case and request for culture and sensitivity test if applicable.  Check Medicine ward census and nurse on duty interview looking for other patients with central line, catheter and ventilator or possible HAI cases.	None	20 minutes	Nurse on Duty IPCU Nurse IPCU Staff
2. Investigate and Monitor cases.	2. Monitor if above mentioned patient will	None	20 minutes	IPCU Staff



	develop UTI or pneumonia. Investigate cases that have developed infection. Follow up and verify the culture and sensitivity result if applicable.			
3. Document findings	3. Compile HAI and daily monitoring forms and encode HAI cases in the Google sheet.	None	20 minutes	IPCU Nurse IPCU Staff
4. Meeting with the IPCU chair and vice chair.	4. Reporting and feedback regarding documented HAI cases and further recommendation. Document feedback and recommendation.	None	60 minutes	IPCU Chair IPCU Vice Chair IPCU Nurse
<b>TOTAL:</b>		<b>NONE</b>	<b>2 HOURS</b>	



### EMPLOYEE'S VACCINATION SERVICES

Vaccinations are one of the most important ways an organization can cut health care costs and reduce employee absenteeism due to illness. By prioritizing immunization programs, organizations can protect their workforce, enhance employee health, and contribute to a healthier society.

Office or Division	Special Unit – Infection Prevention and Control Unit		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is the transacting public		
Who may avail	NDH Employees		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Pre- vaccination form		Infection Prevention and Control Unit Office	
Employee’s Vaccination form		Infection Prevention and Control Unit Office	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Registration	1. Registration (for multiple employee's vaccination activity)	None	3 minutes	IPCU, Any NDH staff
2. Filling out of forms	2. Filling out of necessary forms (Pre-vaccination form, employee vaccination etc.)  May ask for Hepatitis-B titer result if employee is for Hepatitis Vaccine.	None	10 minutes	Any NDH staff



3. Vital signs	3. Taking of vital signs if employee is eligible for vaccination	None	5 minutes	Nurse/ nursing attendant
4. Screening	4. Health screening if employee is eligible for vaccination	None	5 minutes	Screening physician
5. Request for vaccines	5. Request for exact number of vaccines needed and delivery from the Pharmacy section	None	15 minutes	IPCU, Pharmacy Section
6. Vaccination	6. Administration of vaccine (Flu, pneumonia, Hepatitis-B, Covid-19)	None	2 minutes	IPCU Nurse, Nurse Vaccinator, Pharmacy
7. Observation	7. Observation for any adverse reaction post vaccination	None	30 minutes	IPCU nurse Nurse, Vaccinator
8. Documentation	8. Record and encode vaccination documents	None	60 minutes	IPCU
<b>TOTAL:</b>		<b>NONE</b>	<b>2 HOURS AND 10 MINUTES</b>	



## EDUCATION ON INFECTION PREVENTION AND CONTROL

Incorporating infection prevention and control education into your daily practice improves compliance, encourages open dialogue, and supports optimal infection prevention and control outcomes. Teaching strategies should be specific to your client and their learning needs.

<b>Office or Division</b>	Special Unit – Infection Prevention and Control Unit
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2G – for government services whose client is the transacting public
<b>Who may avail</b>	Government Agencies (Regulatory or Statutory) / Health related societies / Hospital Employees
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Communication letter / Department Order / Memorandum / Issuances	Client

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send request letter requiring implementation / information dissemination.	1.1 Receives Communication letter / issuances and Create letter for approval of proposed activity.	None	30min	IPCU Chair
	1.2 Forward finalized plan and letter to the personnel section pending approval of the Director's Office.	None	30 minutes	IPCU Staff/ Personnel Section/ Director's Office
	1.3 Upon receipt of approval, coordinate with concerned department.	None	2 days	IPCU/ Any concerned department



	<b>1.4</b> Carry out planned activity.	None	2hrs	IPCU
	<b>TOTAL:</b>	<b>NONE</b>	<b>2 DAYS AND 3 HOURS</b>	



### INFORMATION AND COMMUNICATION TECHNOLOGY JOB ORDER

Information and Communication Technology (ICT) technical assistance services is a broad term that encompasses various technologies, systems, and tools used for the acquisition, storage, processing, analysis, and dissemination of information. Service available Monday to Friday 8:00 a.m. to 5:00 p.m. except holidays.

<b>Office or Division</b>	Hospital Operations and Patient Support Services Division - Information Technology Section			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency			
<b>Who may avail</b>	All Novaliches District Hospital (NDH) Employees			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Job Order Request Form		Available in all offices at NDH		
<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Fill up Job Order Request Form and Submit to Information Technology Office.	1.1 Receive Job Order Request Form and record on the Log Book.	None	2 minutes	Information Technology Section Staff
	1.2 Perform the task ordered by requesting department if materials are available perform necessary works.	None	1 day*	Information Technology Section Staff
2. Acknowledge completion of the Job Order Request Form.	2. Upon completion, endorse to end-user and present Acknowledgement Report.	None	2 minutes	Information Technology Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>1 DAY AND 4 MINUTES*</b>	

\*Time may vary depending on the nature of requested job order



## LABORATORY PROCEDURES

These shall apply to all OPD, ER and admitted patients in Novaliches District Hospital that warrant a laboratory test by the ordering physician. This procedure likewise, applies to all units of the laboratory section, particularly, hematology, microbiology, clinical chemistry and microscopy. Further, this procedure is limited within the bounds of the current level of laboratory services.

Office or Division	Ancillary Services Division - Laboratory Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All OPD, ER and admitted patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Laboratory Request Form		OPD, ER, ward stations	
Valid Government issued ID or Quezon City ID		Quezon City Hall or other government issuing agency	
Order of Payment (OPD and ER patients) Charge Slip (Admitted patients)		Laboratory Section reception area, first floor	
Official Receipt		Cash Operations Section (Cashier)	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the laboratory request at the reception window.	1. Receive and check laboratory request form. Prepare charge slip / order of payment.	None	3 minutes	Lab Aide / MedTech
2. Accept order of payment.	2. Issue order of payment and advise to pay at cashier.	See Price List	3 minutes	Lab Aide / MedTech





3. Proceed to cashier for payment.	3. Accept payment. Issue Official Receipt.	None	3 minutes	Cashier
4. Present Official Receipt to laboratory reception area.	4. Check official receipt and record to accession logbook.	None	3 minutes	Lab Aide / MedTech
5. Specimen collection.	5. Collect / receive specimen.	None	5 minutes	Phlebotomist / MedTech
6. Wait for releasing time.	6. Processing of specimen then verification and signing of Official results.	None	2 hours (OPD) 1 hour / STAT (ER) 1 hour (Inpatient)	MedTech / Pathologist
7. Receive official results.	7. Release of Official Results. Document to accession logbook.	None	5 minutes	Lab Aide / MedTech
<b>TOTAL:</b>		<b>SEE PRICE LIST</b>	<b>2 HOURS (OPD) 1 HOUR / STAT (ER) 1 HOUR (INPATIENT)</b>	



**COST OF PROCEDURES AS APPROVED BY  
ORDINANCE NUMBER SP - 3226 SERIES OF 2023**

UNIT	PROCEDURE	FEES
Hematology	CBC / PLATELET COUNT	PHP 180.00
	ESR	PHP 70.00
	PERIPHERAL BLOOD SMEAR	PHP 100.00
	CLOTTING TIME	PHP 65.00
	BLADING TIME	PHP 65.00
Serum Electrolytes	SODIUM (NA)	PHP 160.00
	POTASSIUM (K)	PHP 160.00
	CLORIDE (CL)	PHP 160.00
Clinical Chemistry	FBS	PHP 140.00
	AST / SGOT	PHP 263.00
	ALT / SGPT	PHP 263.00
	BLOOD URIC ACID	PHP 135.00
	BUN	PHP 122.00
	CREATININE	PHP 134.00
	LIPID PROFILE (CHOLESTEROL, TRIGLYCERIDES, HDL, LDL / VLDL)	PHP 776.39
Clinical Microscopy	URINALYSIS	PHP 65.00
	PREGNANCY TEST (URINE)	PHP 112.00
	FECALYSIS	PHP 65.00
	OCCULT BLOOD	PHP 143.00
Serology / Immunology	ABO	PHP 607.00
	HBsAG	PHP 350.00
	RPR	PHP 350.00
	DENGUE DUO IgM / IgG	PHP 600.00
	NS1Ag	PHP 900.00
	FT3	PHP 500.00



Other Services Offered	FT4	<b>PHP 500.00</b>
	TSH	<b>PHP 500.00</b>
	HIV	<b>PHP 1,100.00</b>
	Antigen Test	<b>None</b>
	RT-PCR Test (swabbing only)	<b>None</b>



### BLOOD STATION PROCEDURE

These shall apply to all admitted patients in Novaliches District Hospital that warrant a blood request by the ordering physician. This procedure likewise, applies to the unit of the laboratory section, particularly in blood station. Further, this procedure is limited within the bounds of the current level of laboratory services.

Office or Division	Ancillary Services Division - Laboratory Section (Blood Station)		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All OPD, ER and admitted patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Blood Request Form		OPD, ER, ward stations	
Valid Government issued ID or Quezon ID		Quezon City Hall or other government issuing agency	
Order of Payment (OPD and ER patients) Charge Slip (Admitted patients)		Laboratory Section reception area, first floor	
Official Receipt		Cashier, window 3, first floor	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the blood request at the laboratory reception area.	1. Receive and check blood request form. Prepare charge slip / order of payment.	None	3 minutes	Lab Aide / MedTech
2. Accept order of payment.	2. Issue order of payment and advise to pay at cashier.	See Price List	3 minutes	Lab Aide / MedTech



3. Proceed to cashier for payment.	3. Accept payment. Issue Official Receipt.	None	3 minutes	Cashier
4. Present Official Receipt to laboratory reception area.	4. Check official receipt and record to accession logbook.	None	3 minutes	Lab Aide / MedTech
5. Blood sample for testing.	5. Extract blood sample. Institute blood bank procedures.	None	5 minutes	MedTech
6. Receive blood unit.	6. Issuance of blood unit. Document to blood station logbook.	None	1 hour	MedTech
<b>TOTAL:</b>		<b>SEE PRICE LIST</b>	<b>1 HOUR AND 17 MINUTES</b>	

**BLOOD STATION PRICE LIST**

<b>BLOOD STATION PROCEDURES</b>	<b>FEES</b>
Crossmatching	PHP 1,315.00
Type Specific	PHP 100.00

**SEND-OUT PROCEDURES**

<b>BLOOD STATION PROCEDURES</b>	<b>FEES</b>
Packed RBC (LR)	PHP 1,800.00
Packed RBC	PHP 1,500.00
Whole Blood	PHP 1,800.00
Platelet Concentrate	PHP 1,000.00
Platelet Concentrate (LR)	PHP 1,200.00
Fresh Frozen Plasma	PHP 1,000.00
Fresh Frozen Plasma (LR)	PHP 1,200.00
Aliquot	PHP 242.00
Crossmatching	PHP 1,315.00
Type Specific	PHP 100.00



### DRUG TESTING PROCEDURE (FOR NDH EMPLOYEES)

These shall apply to all current employees and applicants in Novaliches District Hospital that warrant a drug testing request. This procedure likewise, applies to the unit of the laboratory section, particularly in Drug Testing Unit. Further, this procedure is limited within the bounds of the current level of laboratory services.

<b>Office or Division</b>	Ancillary Services Division - Laboratory Section (Drug Testing)	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	All NDH employees and applicants	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Laboratory Request Form (1 copy original) Drug Testing Laboratory (DTL) Form (1 copy original)		Drug Testing Laboratory (DTL) Unit (first floor)
Valid Government ID / Quezon City (QC) ID (for applicants)		Government Offices / Quezon City Hall

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the laboratory request at the DTL reception area.	1. Receive and check laboratory request form. Issue DTL / CCF form to fill up by client.	None	5 minutes	Authorized Specimen Collector (ASC) / Drug Analyst
2. Fill up DTL / CCF form.	2. Receive and check DTL / CCF form.	None	5 minutes	Authorized Specimen Collector (ASC) / Drug Analyst



3. Collect urine sample for testing.	3. Accompany client to the designated collection room for urine sample.	None	20 minutes	Authorized Specimen Collector (ASC)
4. Present valid government ID. Prepare for biometrics. (Fingerprint and Picture)	4. Confirm identity through valid ID with DTL form. Assist the client in biometrics process.	None	5 minutes	Drug Analyst
5. Wait for releasing time.	5. Process specimen and encode data to the DTL system.	None	20 minutes	Drug Analyst
6. Receive drug testing result. Sign at the DTL logbook.	6. Record to DTL logbook an	None	5 minutes	Authorized Specimen Collector (ASC) / Drug Analyst
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR</b>	





## ENROLLMENT OF QUALIFIED ADMITTED PATIENT TO POINT OF SERVICE (POS)

This process Aims to assess patient's Philhealth Status and financial capability, classify and enrolled qualified patient to Point of Service POS. The service operates 6 a.m. to 6 p.m. during Monday to Friday, and 8 a.m. to 4 p.m. during Saturday, Sunday and Holidays.

<b>Office or Division</b>	Ancillary Services Division - Medical Social Service Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public	
<b>Who may avail</b>	All NDH Patients	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Hospital Card (1 original copy)		OPD/ER Section
Birth certificate / Marriage Certificate (1 Photo copy)		Philippine Statistic Authority
Valid ID (1 original copy)		Any Government Issued ID
PMRF (1 original copy)		Malasakit Center Office
Unified Intake Sheet (1 original copy)		Malasakit Center Office
POS Certification		Malasakit Center Office
POS Patient Information		Malasakit Center Office
MSS Card		Malasakit Center Office

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client receives text messages and call from	1. Receives list of admitted patient from Admitting	None	2 minutes	Medical Social Service Section Staff



the Social Welfare Officer.	Section. Call and text patient contact number.			
<b>2.</b> Client presents the hospital card / Valid ID of the patient. Then client fills up the Unified Intake Sheet (UIS) and proceed for interview.	<b>2.</b> Check the Philhealth Status of the patient using information from the Hospital Card/Valid ID. Give Unified Intake Sheet. Then interview, assess and evaluate patient classification and give the MSS Card.	None	22 minutes	Medical Social Service Section Staff
<b>3.</b> Receive and fill up the PMRF and complete the requirements.	<b>3.</b> Give instruction to fill up the PMRF and complete the requirements.	None	3 minutes	Medical Social Service Section Staff
<b>4.</b> Returned the PMRF together with the birth certificate and marriage certificate (for married patient).	<b>4.</b> Received, check and verify the document submitted.	None	10 minutes	Medical Social Service Section Staff
<b>5.</b> Patient enrolled to POS and receives POS certification, POS patient Information slip and proceed to Billing / Philhealth Window.	<b>5.</b> Enroll patient to POS. Provide POS certification, POS patient Information slip and instruct relative to proceed to Billing / Philhealth Window.	None	3 minutes	Medical Social Service Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>40 MINUTES</b>	



## DOH MAIFIP MEDICAL ASSISTANCE

This process Aims to assess patient’s classification and provides the medical assistance needed through DOH MAIFIP Fund. The service operates 6 a.m. to 6 p.m. during Monday to Friday, and 8 a.m. to 4 p.m. during Saturday, Sunday and Holidays.

<b>Office or Division</b>	Ancillary Services Division - Medical Social Service Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public	
<b>Who may avail</b>	All NDH Patients	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Hospital Card (1 original copy)		OPD / ER Section
Valid ID (1 original copy)		Any Government Issued ID
Unified Intake Sheet (1 original copy)		Malasakit Center Office
Statement of Account (SOA) (1 original copy)		Billing / Philhealth Section
Order of Payment (1 original copy)		Ancillary Section
Medical Certificate (1 original copy)		OPD / ER Section
Discharge Summary / Clinical Abstract (1 original copy)		Hospital Ward
MSS Certificate of Indigency / Eligibility (1 original copy)		Malasakit Center Office
MSS Card (1 original copy)		Malasakit Center Office
Barangay Indigency (1 original copy)		Barangay Hall



CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client present Statement of Account (Admitted) / Order of Payment (OPD / ER)	1. Receives, Statement of Account (Admitted) or Order of Payment (OPD / ER)	None	2 minutes	Medical Social Service Section Staff
2. Present the Hospital Card / Valid ID (OPD / ER patient) / additional MSS Card (Admitted patient).	2. Received the Hospital Card / Valid ID (OPD / ER patient) / additional MSS Card (Admitted patient).	None	2 minutes	Medical Social Service Section Staff
3. For OPD / ER Patient fill up the Unified Intake Sheet (UIS) and proceed for interview. Receives list of requirements and instruction. For Admitted Present the MSS Card	3. For OPD / ER Interview, assess and evaluate patient classification with the use UIS. Provide and instruct patient / patient's relative to complete the list of requirements For Admitted ask for the MSS Card	None	20 minutes	Medical Social Service Section Staff
4. Client submits the requirements. Receives the SOA (Admitted) / order of Payment (OPD / ER) with corresponding stamp and signature and proceed to corresponding Section	4. Check the authenticity of the Documents and completeness of the requirements. Stamp and signed the SOA (Admitted) Order of payment (OPD / ER) and instruct to proceed to corresponding Section.	None	6 minutes	Medical Social Service Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>30 MINUTES</b>	



## MEDICAL AND FINANCIAL ASSISTANCE TO WELFARE AGENCIES

This process aims to assess patient's classification and provides the medical and financial assistance needed through referral to Welfare Agencies. The service operates 6am to 6pm during Monday to Friday, and 8 a.m. to 4 p.m. during Saturday, Sunday and Holidays.

<b>Office or Division</b>	Ancillary Services Division - Medical Social Service Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public	
<b>Who may avail</b>	All NDH Patients	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Hospital Card (1 original copy)		OPD / ER Section
Valid ID / QC ID (1 original copy)		Government Offices / Quezon City Hall
Unified Intake Sheet (1 original copy)		Malasakit Center Office
Statement of Account (SOA)		Billing/Philhealth Section
Order of Payment		Ancillary Services
Medical Certificate		OPD / ER Section
Discharge Summary/Clinical Abstract		Hospital Ward
MSS Certificate of Indigency/Eligibility		Malasakit Center Office
MSS Card		Malasakit Center Office
Barangay Indigency		Barangay Hall
Prescription		OPD / ER/WARD
Laboratory Request		NDH Attending Physician



Special Procedure Request	NDH Attending Physician
Radiology Request	NDH Attending Physician
Quotation	Diagnostic Center/Bone Implant Supplier
Social Case Study	Malasakit Center Office/Local MSWD
Inter-Agency Referral	Malasakit Center Office
Referral Letter	Malasakit Center Office

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client present Laboratory / special procedure request, prescription and Statement of Account (Admitted and OPD / ER patient).	1. Receives Laboratory / special procedure request, prescription and Statement of Account (Admitted and OPD / ER patient).	None	2 minutes	Medical Social Service Section Staff
2. Present the Hospital Card / Valid ID (OPD / ER patient) / additional MSS Card (Admitted patient).	2. Received the Hospital Card / Valid ID (OPD / ER patient) / additional MSS Card (Admitted patient).	None	2 minutes	Medical Social Service Section Staff
3. For OPD Patient Received and fill up the Unified Intake Sheet (UIS) and proceed for interview. For Admitted Present the MSS Card. Client	3. For OPD give Unified Intake Sheet. Then interview, assess and evaluate patient classification. For Admitted ask for the MSS Card Provide and	None	20 minutes	Medical Social Service Section Staff



receives list of requirements and instruction.	instruct patient / patient's relative to complete the list of requirements.			
<b>4.</b> Client submits the requirements, received instruction and proceed to corresponding Welfare Agency.	<b>4.</b> Check the authenticity of the Documents and completeness of the requirements. Properly instruct patient or relative to proceed to identified Welfare Agency.	None	5 minutes	Medical Social Service Section Staff
<b>5.</b> Received the appropriate assistance needed through Cash, Medicines or Guarantee Letter from the welfare Agency.	<b>6.</b> To guide and facilitate the release of the assistance needed through Cash, Medicines or Guarantee Letter from the Welfare Agency.	None	5 minutes	Medical Social Service Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>35 MINUTES</b>	



## ASSISTING ABANDONED / NEGLECTED AND PATIENT WITHOUT RELATIVE / COMPANION

This process aims to assist abandoned/ neglected and patient without relative/companion and facilitate the assistance needed. The service operates 6 a.m. to 6 p.m. during Monday to Friday, and 8 a.m. to 4 p.m. during Saturday, Sunday and Holidays.

<b>Office or Division</b>	Ancillary Services Division - Medical Social Service Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public	
<b>Who may avail</b>	All NDH Patients	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Hospital Card (1 original copy)		OPD/ER Section
Valid ID (1 original copy)		Any Government Issued ID
Unified Intake Sheet (1 original copy)		Malasakit Center Office
Clinical Abstract (1 copy original)		Ward
Medical Certificate (1 copy original)		OPD/ER Section
MSS Certificate of Indigency/Eligibility (1 copy original)		Malasakit Center Office
Barangay Indigency (1 copy original)		Barangay Hall
Social Case Study		Malasakit Center Office
Referral Letter		Malasakit Center Office
Barangay Report/Blotter		Barangay Hall
Police Report		Police Station
Certificate of Abandonment		Malasakit Center Office





CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Hospital Card and Valid ID.	1. Receives Hospital Card and Valid ID.	None	5 minutes	Medical Social Service Section Staff
2. Provide complete information of relative and answer correctly the interview of the SWO.	2. Interview, assess and evaluate patient with the used of UIS.	None	20 minutes	Medical Social Service Section Staff
3. Cooperate with the SWO.	3. Contact the relative and coordinate with the barangay.	None	10 minutes	Medical Social Service Section Staff
4. For no companion and order for discharge, prepare his/her self to go home.  For Abandoned / neglected patient and order for discharge. Wait for the SWO further notice.	4. Coordinate with the ambulance driver, to facilitate patient home conduction.  Coordinate with the Welfare Agencies for temporary Shelter and provides the documentary requirements.	None	5 Minutes  Depends on the availability of Temporary Shelter*	Medical Social Service Section Staff
5. Ride the ambulance.	6. Conduct home conduction/ Temporary Shelter.	None	4 hours	Medical Social Service Section Staff Ambulance Driver
<b>TOTAL:</b>		<b>NONE</b>	<b>4 HOURS AND 40 MINUTES</b>	

\*Depends on the availability of Temporary Shelter



## ASSISTING PATIENT FOR BASIC PSYCHOSOCIAL COUNSELING

This process aims to provide compassionate and professional basic psychosocial counseling services. The service operates 6 a.m. to 6 p.m. during Monday to Friday, and 8 a.m. to 4 p.m. during Saturday, Sunday and Holidays.

Office or Division	Ancillary Services Division - Medical Social Service Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	All NDH Patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card (1 original copy)		OPD/ER and Admitted Section	
Valid ID (1 original copy)		Any Government Issued ID	
Unified Intake Sheet (1 original copy)		Malasakit Center Office	
Incident Record Form		Malasakit Center Office	
VAWC Referral Form		Malasakit Center Office	
Barangay Referral form		Barangay Hall	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Hospital Card and Valid ID.	1. Receives Hospital Card and Valid ID.	None	2 minutes	Medical Social Service Section Staff
2. Provide complete information of relative and answer correctly the interview of the Social Worker.	2. Interview, assess and evaluate patient with the used of UIS, VAWC referral form and Incident Barangay Referral Form.	None	20 minutes	Medical Social Service Section Staff



3. Cooperate with the Social Worker.	3. Contact the relative and coordinate with the barangay.	None	8 minutes	Medical Social Service Section Staff
4. Actively participate and response with the Social Worker.	4. Facilitate patient/relative to enlighten their perspective and guide them in their decision making.	None	20minutes	Medical Social Service Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>50 MINUTES</b>	



### LABOR AND DELIVERY ROOM: RECEIVING OF PATIENT FOR NORMAL SPONTANEOUS DELIVERY

The labor room and delivery room are integral components of maternity care, serving distinct yet interconnected roles in supporting women through the stages of labor and facilitating safe and comfortable childbirth.

Office or Division	Nursing Service Division – OR / DR / LR / NICU Complex		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	Patients from the Department of Obstetrics and Gynecology		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Nurse Station	
Diagnostic Tests		Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient will state her name, age, sex, and date of birth.	1.1 Validation of patients data and patient's stage of labor.	None	5 minutes	OR / DR / LR / NICU Nurses
	1.2 Transfer patient to Labor room, Check equipment and supplies needed.	None	6 minutes	OR / DR / LR Nurses and Midwives
	1.3 Hook to fetal monitor .	See Revenue Code	5 minutes	OR / DR / LR Nurses and Midwives
	1.4 Inform NICU nurse regarding admission	None	1 minute	OR / DR / LR Nurses and Midwives



	<b>1.5</b> Prepare equipment in Delivery room	See Revenue Code	5 minutes	OR / DR / LR Nurses and Midwives
	<b>1.6</b> Transfer to delivery room and inform NICU nurse	None	4 minutes	OR / DR / LR Nurses and Midwives
	<b>1.7</b> Prepare patient for delivery; Delivery of the baby	See Revenue Code	15 minutes	OR / DR / LR / NICU Nurses and Midwives
	<b>1.8</b> EINC then Proper and correct double tagging of baby	None	92 minutes	OR / DR / LR / NICU Nurses and Midwives
	<b>1.9</b> Render post-partum care then transfer to Recovery Room	See Revenue Code	18 minutes	OR / DR / LR Nurses and Midwives
	<b>1.10</b> Prepare recovery room	See Revenue Code	3 minutes	OR / DR / LR Nurses and Midwives
	<b>1.11</b> Transfer patient to recovery room	None	3 minutes	OR / DR / LR Nurses and Midwives
<b>TOTAL:</b>		<b>SEE REVENUE CODE</b>	<b>2 HOURS AND 40 MINUTES*</b>	

\*Time may vary depending on the number of patients being served and complexity of clinical cases being handled.



## LABOR AND DELIVERY ROOM: RECEIVING OF PATIENT FOR DILATATION & CURETTAGE/ COMPLETION CURETTAGE

The labor room and delivery room are integral components of maternity care, serving distinct yet interconnected roles in supporting women through the stages of labor and facilitating safe and comfortable childbirth.

Office or Division	Nursing Service Division – OR / DR / LR / NICU Complex		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	Patients from the Department of Obstetrics and Gynecology		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Nurse Station	
Diagnostic Tests		Nurse Station	
Emergency Room Proposal Form		Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient will state her name, age, sex and date of birth.	1.1 Receives and validation of patient's data and chart.	None	10 minutes	OR / DR / LR Nurses
	1.2 Prepare delivery room with needed supplies for operation.	See Revenue Code	20 minutes	OR / DR / LR Nurses and Midwives
2. Sign consent if not yet signed.	2.1 Check consent for anesthesia and procedure to be done	None	6 minutes	OR / DR / LR Nurses and Midwives



	then assist patient to delivery table.			
	<b>2.2</b> Set-up sterile field before procedure by OB COD.	See Revenue Code	70 minutes	OB COD, OR / DR / LR Nurses and Midwives
	<b>2.3</b> Close monitoring during procedure.	None	60 minutes	OR / DR / LR Nurses and Midwives
	<b>2.4</b> Secure specimen to be taken.	See Revenue Code	3 minutes	OR / DR / LR Nurses and Midwives
	<b>2.5</b> Render post curettage care.	See Revenue Code	5 minutes	OR/ DR/ LR nurses and midwives
	<b>2.6</b> Prepare recovery room then transfer patient.	See Revenue Code	6 minutes	OR/ DR/ LR nurses and midwives
<b>TOTAL:</b>		<b>SEE REVENUE CODE</b>	<b>3 HOURS*</b>	

\*Time may vary depending on the number of patients being served and complexity of clinical cases being handled.



### OPERATING ROOM: EMERGENCY SURGICAL PROCEDURE

An operating room is a sterile and highly controlled environment within a hospital where surgical procedures are conducted. It features specialized equipment, surgical instruments, and a team of healthcare professionals dedicated to ensuring the safety and success of surgeries while maintaining aseptic conditions.

Office or Division	Nursing Service Division – OR / DR / LR / NICU Complex		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	Patients from the Department of Obstetrics and Gynecology Patients from the Department of Surgery		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Nurse Station	
Diagnostic Tests		Nurse Station	
Emergency Proposal Form		Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient will state her name, age, sex and date of birth.	1.1 Receives and validates patient's data with confirmation of procedure to be done including anesthesia and doctors who will perform	None	8 minutes	OR / DR / LR Nurses
	1.2 Review of the patient chart and record (Patient's data,	None	3 minutes	OR / DR / LR Nurses





	procedure, Operative site, Consent).			
	<b>1.3</b> Prepare Operating room and anesthesia.	See Revenue Code	20 minutes	OR / DR / LR Nurses and Midwives
	<b>1.4</b> Intra-Operative care: Setup sterile field.	None	10 minutes	OR / DR / LR Nurses and Midwives
	<b>1.5</b> Pre - Counting of Instruments, Needles, and Sponges.	None	5 minutes	OR Scrub and Circulating Nurse
<b>2.</b> Verbally responds to the checklist as requested by the nurse.	<b>2.1</b> Accomplished Surgical safety checklist.	None	5 minutes	OR / DR / LR Nurses and Midwives
	<b>2.2</b> Start Procedure by OR team then specimen must be secured.	See Revenue Code	4 minutes	OR Team (Anesthesiologist, Surgeon, Scrub Nurse, Circulating Nurse, Midwives)
	<b>2.3</b> Initial and Final counting of instruments, needles, and sponges.	None	5 minutes	OR Scrub and Circulating nurse
	<b>2.4</b> Render Post OP care then transfer to Recovery Room.	See Revenue Code	21 minutes	OR / DR / LR Nurses and Midwives
<b>TOTAL:</b>		<b>SEE REVENUE CODE</b>	<b>1 HOUR AND 21 MINUTES</b>	

\*Time may vary depending on the number of patients being served and complexity of clinical cases being handled.



### OPERATING ROOM: RECEIVING OF ELECTIVE SURGICAL PROCEDURE

An operating room is a sterile and highly controlled environment within a hospital where surgical procedures are conducted. It features specialized equipment, surgical instruments, and a team of healthcare professionals dedicated to ensuring the safety and success of surgeries while maintaining aseptic conditions.

Office or Division	Nursing Service Division – OR / DR / LR / NICU Complex		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	Patients from the Department of Obstetrics and Gynecology Patients from the Department of Surgery		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Nurse Station	
Diagnostic Tests		Nurse Station	
Elective Proposal Form		Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient will state his / her name, age, sex, and date of birth, sign consent for anesthesia and procedure.	1.1 Pre – OP Visit: Identify patient and review of the patient chart and record (Patient's data, procedure, Operative site, Consent, CP Clearance, and pre- OP checklist).	None	30 minutes	OR / DR / LR Nurses



	<b>1.2</b> Pre – OP Visit: Check for supplies needed for procedure.	None	10 minutes	OR / DR / LR Nurses
<b>2.</b> Patient will validate her name, age, sex, and date of birth.	<b>2.1</b> Receive and validates patients' data (Name, Age, Date of birth)	None	5 minutes	OR / DR / LR Nurses
	<b>2.2</b> Check type of procedure to be done, type of anesthesia, surgeon, and anesthesiologist who will perform the procedure.	None	3 minutes	OR / DR / LR Nurses
	<b>2.3</b> Review of the patient chart and record (Patient's data, procedure, Operative site, Consent).	None	3 minutes	OR / DR / LR Nurses
	<b>2.4</b> Prepare Operating room (Instruments, Major pack, Equipment, Supplies needed).	See Revenue Code	10 minutes	OR / DR / LR Nurses and Midwives
	<b>2.5</b> The induction of anesthesia follows.		10 minutes	OR / DR / LR Nurses and Midwives
	<b>2.6</b> Intra- Operative care: Setup sterile field	None	10 minutes	OR / DR / LR Nurses and Midwives
	<b>2.7</b> Pre - Counting of Instruments, Needles, and Sponges.	None	5 minutes	OR Scrub and Circulating nurse
<b>3.</b> Verbally responds to the checklist as requested by the nurse.	<b>3.1</b> Accomplished Surgical safety checklist.	None	5 minutes	OR / DR / LR Nurses and Midwives



	<b>3.2</b> Start Procedure by OR team.	See Revenue Code	1 minute	OR Team (Anesthesiologist, Surgeon, Scrub Nurse, Circulating Nurse, Midwives)
	<b>3.3</b> Secure Specimen.	None	3 minutes	OR / DR / LR Nurses and Midwives
	<b>3.4</b> Initial and Final counting of instruments, needles, and sponges.	None	5 minutes	OR Scrub and Circulating nurse
	<b>3.5</b> Render Post OP care.	See Revenue Code	15 minutes	OR / DR / LR Nurses and Midwives
	<b>3.6</b> Prepare Recovery room.	None	3 minutes	OR / DR / LR Nurses and Midwives
	<b>3.7</b> Transfer patient to Recovery room.	None	2 minutes	OR / DR / LR Nurses and Midwives
<b>TOTAL:</b>		<b>SEE REVENUE CODE</b>	<b>2 HOURS</b>	

\*Time may vary depending on the number of patients being served and complexity of clinical cases being handled.



### TRANSFER OF PATIENT FROM ONE UNIT TO ANOTHER

Transfer of patient from one unit to another is part of routine in nursing service, this starts from admission and may possibly happen again in the ward depending on the course of medical management of the patient, patients utmost care must be observed to avoid incidence of fall.

Office or Division	Nursing Service Division – In Patient Ward		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	All Admitted Patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Transferring Nurse Station	
Kardex		Transferring Nurse Station	
Medication Card		Transferring Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Receive patient	1.1 Patient will be transferred from (ER / OPD / OR / DR / NICU / WARD).	None	3 minutes	Nurse on duty Doctors on duty Nurse supervisor Institutional worker
	1.2 Patient will be carefully transferred from stretcher to bed.	None	2 minutes	Nurse on duty Doctors on duty Nurse supervisor Institutional worker



	<b>1.3</b> Patient will be assessed by NOD.	None	10 minutes	Nurse on duty
	<b>1.4</b> Chart will be checked.	None	5 minutes	Nurse on duty
<b>TOTAL:</b>		<b>NONE</b>	<b>20 MINUTES*</b>	

\*Time posted may vary depending on the number of patients / clients being served.



### HAND-OVER ENDORSEMENT

Hand-over endorsement happens every shift and being done by out-going nursing staff personnel and incoming nursing staff personnel.

Office or Division	Nursing Service Division – In Patient Ward		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	Incoming Nurse/s and Outgoing Nurse/s		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Nurse Station	
Kardex		Nurse Station	
Medication Card		Nurse Station	
Admission / Discharge Logbook		Nurse Station	
Pending Laboratory Request		Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Receive endorsement.	1.1 Patients will be endorsed utilizing complete Kardex and logbooks at nurses' station.	None	25 minutes	Incoming Nurse Outgoing Nurse
	1.2 Bedside Endorsement must be practiced.	None	15 minutes	Incoming Nurse Outgoing Nurse Nursing Aide



	<b>1.3</b> Instruments must be properly endorsed.	None	10 minutes	Incoming Nurse Outgoing Nurse Nursing Aide
<b>TOTAL:</b>		<b>NONE</b>	<b>45 MINUTES*</b>	

\*Time posted may vary depending on the number of patients / clients being served





### CARRYING OUT OF DOCTORS ORDERS

Another process that the Nursing Service identified is Carrying-out of Doctors' orders, Nurses will carry out orders based on what was ordered, this process will show you how each nurses execute continuity of care for each patient, from patients' diagnostics all the way to diet of each patient.

<b>Office or Division</b>	Nursing Service Division – In Patient Ward	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	NDH's Doctors	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Patient's Chart		Nurse Station

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Give order/s.	1.1 Will read on Doctors' orders and sign at the bottom if orders.	None	5 minutes	Nurse on Duty
	1.2 Orders will be carried out and transcribed.	None	20 minutes	Nurse on Duty
	1.3 Accomplished forms will be submitted to respective units/section.	None	10 minutes	Nurse on Duty Nursing Aide
<b>TOTAL:</b>		<b>NONE</b>	<b>35 MINUTES*</b>	

\*Time posted may vary depending on the number of patients / clients being served



## MEDICATION ADMINISTRATION

Nursing personnel administers medication in coordination with doctors’ orders following the 14 rights of medication administration.

<b>Office or Division</b>	Nursing Service Division – In Patient Ward
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public
<b>Who may avail</b>	All Admitted Patients
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Patient’s Chart	Nurse Station
Kardex	Nurse Station
Medication Card	Nurse Station

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1 Follow instructions as instructed.	1.1 Medications must be verified through Doctor’s orders.	None	5 minutes	Nurse on Duty
	1.2 Signed prescription will be submitted to Pharmacy.	None	10 minutes	Nurse on Duty
	1.3 Medication will be administered accordingly.	None	20 minutes	Nurse on Duty
	1.4 Medication sheet must be signed by Nurse.	None	5 minutes	Nurse on Duty
<b>TOTAL:</b>		<b>NONE</b>	<b>40 MINUTES*</b>	

\*Time posted may vary depending on the number of patients / clients being served



### DISCHARGE PROCESS FOR ADMITTED PATIENTS

Discharge marks the end of continuity of care of an admitted patient, nursing personnel assists relatives on how their patient will be discharged and gives instructions about follow-up.

<b>Office or Division</b>	Nursing Service Division – In Patient Ward
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public
<b>Who may avail</b>	All Admitted Patients
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Patient's Chart	Nurse Station

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Receive instructions	1. Documents will be prepared and patient will be informed on MGH.	None	5 minutes	Nurse on Duty
2. Relative must settle patient's bill	2. Discharge notice will be brought to Billing office and relative will be given instructions.	None	5 minutes	Nurse on Duty
3. Relative will receive needed documents.	3. Needed documents will be given to relative and clearance will be given to Guard & patient will be accompanied by NOD or NA.	None	10 minutes	Nurse on Duty Relative of Patient
<b>TOTAL:</b>		<b>NONE</b>	<b>20 MINUTES*</b>	

\*Time posted may vary depending on the number of patients / clients being served



### ADMISSION PROCESS (IN-PATIENT WARD)

This process marks the start of continuity of care of patients, this starts at OPD and ER where doctors on duty assess and makes a disposition that patient needs to get admitted.

<b>Office or Division</b>	Nursing Service Division – In Patient Ward
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public
<b>Who may avail</b>	All patients for admission
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Patient's Chart	Nurse Station

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Cooperate with the given admission instructions.	1.1 Doctor will inform patient or relative regarding the need for admission.	None	5 minutes	Doctor on Duty Nurse on Duty
	1.2 Supervisor will be informed and Admitting Officer for bed availability by ER NOD.	None	2 minutes	Nurse on Duty
	1.3 Doctor will handover accomplished chart with orders to Nurse.	None	12 minutes	Doctor on Duty Nurse on Duty
	1.4 Nurse on will carry-out doctor's orders.	None	20 minutes	Nurse on Duty



2. Patient will sign consent form.	2.1 Admitting officer will accomplish front page and consent form.	None	3 minutes	Nurse on Duty
	2.2 Ward Nurse will be informed.	None	3 minutes	ER / OPD Nurse on Duty
	2.3 Once chart has been accomplished, Patient will be transferred to ward with Nurse and IW. If intubated, Doctor will accompany the patient as well. When the chart has been accomplished by ER / OPD nurse, nurse on duty will request for Institutional workers' assistance.	None	15 minutes	ER / OPD Nurse on Duty Institutional Worker
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR</b>	

\*Time posted may vary depending on the number of patients / clients being served



### NUTRITION AND DIETETIC COUNSELING

Process to improve the health of patients with various diseases or clinical condition rendering nutrition guidance and counseling according to doctor's prescription. Availability of the service is from Monday to Friday 8:00 a.m. to 5:00 p.m.

Office or Division	Ancillary Services Division - Nutrition and Dietetics Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is the transacting public		
Who may avail	NDH Admitted and OPD patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card		Patient	
Counseling referral slip		Patient	
Latest laboratory result		Patient	
Patient Chart		Nurse On Duty at OPD	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present counseling referral slip, hospital card, and laboratory result.	1. Accept referral slip, hospital card, laboratory result (if any).	None	3 minutes	Nutritionist - Dietitian
2. Nutritional Assessment	2. Interview patient's eating habits, medical history and other information regarding patient's diet.	None	27minutes	Nutritionist - Dietitian
3. Intervention and Counseling	3. Implementation of nutritional care plan based	None	27 minutes	Nutritionist - Dietitian



	on the clinical status of the patient.			
<b>4.</b> Recording of Patient's Data.	<b>4.</b> ND secure patient's information on the diet counseling logbook.	None	3 minutes	Nutritionist - Dietitian
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR</b>	



### OUTPATIENT DEPARTMENT ONLINE BOOKING FOR CONSULTATION PROCESS

For all patients who seek consult at the Out-Patient Department Online Appointment Booking for Consultation Page.

Office or Division	Clinical Services Division - Out-Patient Department		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is transacting public		
Who may avail	All patient seeking for non-emergency medical consult		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Hospital Card (1 original copy)		Health Information Management Section	
Valid Government ID / QC ID (1 original copy)		Government Offices / QC City Hall	
Consent Form (with signature)		NDH Out-Patient Department Online Page	
PDF Out-Patient Record		NDH Out-Patient Department Online Page	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send message to NDHQC Out-Patient Department Facebook Online Account for queuing and appointment.	1.1 Log into Out-Patient Department's Facebook Online page inbox. 1.2 Triage according to respective medical department.	None	15 minutes	NDH OPD Telemedicine Nurse
2. Fill up the Patient Information Sheet (Google form)	2.1 Verifies the data in the Patient List (google sheet).	None	20 minutes	Consultant on Duty NDH OPD Telemedicine





	<p><b>2.2</b> If for face-to-face, queues the patient for appointment date and time of consultation</p> <p><b>2.3</b> If for telemedicine consultation patient will be requested to proceed to Telemed online platform link given</p> <p><b>2.4</b> Verifies Telemed Consent and DPA Agreement form.</p> <p><b>2.5</b> Verifies google sheet registry and Patient’s ID.</p> <p><b>2.6</b> Consultant on Duty initiates Video call consultation.</p>			
<p><b>3.</b> Initiates Viber call thru Consultant on Duty’s viber number or any secured encrypted platform agreed upon with the Consultant on Duty. Patients will send laboratory results to the Consultant on Duty thru email or viber.</p>	<p><b>3.</b> Intervention and management. Consultant on Duty will assess the patient if physical check-up is necessary.</p> <p><b>3A.</b> If Yes, Consultant on Duty will ask the patient to go to Emergency Room (ER) or urgent management or will be given a slot on the scheduled</p>	None	25 minutes	Telemedicine Consultant on Duty



	<p>dates for physical OPD consults.</p> <p><b>3B.</b> If No, Consultant on Duty proceeds with teleconsult via viber video call or secured / encrypted platform will give needed laboratory request and prescription. Pictures will be sent to the patient thru COD's viber account.</p> <p><b>3C.</b> Schedule follow-up dates and time accordingly (face-to-face or Telemed)</p>			
<b>4.</b> Acknowledges the appointment date and time.	<p><b>4.</b> Confirmation of follow-up dates and time accordingly.</p> <p>All patients' charts are logged, recorded, and sent thereafter to NDHQC OPD email and NDH Medical Records Section for safe keeping.</p>	None	15 minutes	<p><i>Consultant on Duty</i> NDH OPD Telemedicine</p>
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR 15 MINUTES*</b>	

\* Depending on the stability of internet connection & computer literacy



### OUT-PATIENT DEPARTMENT FACE-TO-FACE CONSULTATION PROCESS

For all patients who seek consult at the Out-Patient Department for face-to-face consultation.

<b>Office or Division</b>	Clinical Services Division - Out-Patient Department	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is transacting public	
<b>Who may avail</b>	All	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Hospital Card (1 original copy)		Health Information Management Section
Valid Government ID / QC ID (1 original copy)		Government Offices / QC City Hall
Out-Patient Record		NDH Out-Patient Department

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1.</b> Obtains general queue number for Triage  Proceed to OPD triage and present the Hospital card or proof of appointment (accomplished Health Declaration Form, if applicable or according to relevance of Infection Control protocols)	<b>1.</b> Verify the Hospital card appointment. Triage patient if COVID or NONCOVID Case; Senior citizen, PWD or Pregnant & take vital signs.  If with history of cough, fever, diarrhea, history of travel or contact with COVID suspect or confirmed, patients will be	New ₱ 100.00  Follow-up ₱ 50.00	5 minutes	Security Guard Nurse on Duty



Allow the OPD staff to get vital sign.	directed to the NDH Emergency Room Department for further evaluation and management.			
2. Signs consent for treatment then prepare self to answer questions regarding illness and physical examination.	2. Interview patient / patient's relative.	None	5 minutes	Nurse on Duty
3. Submits self to consultation.	3. Examines the patient.	None	5 minutes	Consultant on Duty
4. Follows instructions given by the OPD staff for next follow-up schedule. (Telemed face to face)	4. Patient for discharge / may go home: Instruct patient / patient's relative on the home instructions and follow-up check-up if needed.	None	15 minutes	Consultant on Duty
<b>TOTAL:</b>		<b>PHP 50.00 / 100.00</b>	<b>35 MINUTES*</b>	

\* Time posted may vary depending on the number of patients and the complexity of the clinical cases being handled.

## Consultation Fees:

- New Consultation - PHP 100.00
- Follow-up Consultation - PHP 50.00



## RENEWAL OF CONSULTANCY / CONTRACT OF SERVICE (COS)

Renewal of Consultancy / Contract of Service (COS) refers to the process of extending the terms and duration of an existing consultancy or service contract between two parties.

<b>Office or Division</b>	Hospital Operation and Patient Support Services Division - Personnel Section	
<b>Classification</b>	Complex	
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	Contract of Service / Consultants	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Recommendation Letter from the Department/ Section Heads for Renewal		From Department / Section Heads
Personal Data Sheet with Picture (Version 2017)		Civil Service Commission Online Website
Contractual Appraisal Form		From Department / Section Heads
Drug Test result		From an accredited Drug Testing Facility / Diagnostic center
Panunumpa and Actual Duties		From Personnel Section



CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the recommendation and requirements to the receiving desk of Personnel Section.	1.1 Receives, review and check documents as to completeness, and records application.	None	20 minutes / Applicant	Personnel Staff
	1.2 Prepare the summary of recommendations for renewal, Panunumpa and Statement of Actual Duties.	None	2 days	Personnel Staff
2. Sign the Contract	2.1 Employees for renewal will sign the Panunumpa and Statement of Actual Duties.	None	5 days*	Contract of Service / Consultants
	2.2 Upon completion of attachments, the Hospital Director will sign the recommendation, Panunumpa and Statement of Actual Duties and transmit relevant documents to City HRMD.	None	2 days*	Hospital Director
<b>TOTAL:</b>		<b>NONE</b>	<b>9 DAYS AND 20 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies



## RETIREMENT AND RESIGNATION PROCESS (FOR PLANTILLA ONLY)

For plantilla employees, both retirement and resignation involve notifying the employer, submitting necessary documentation, settling any outstanding obligations, finalizing benefits, and completing exit procedures.

Office or Division	Hospital Operation and Patient Support Services Division - Personnel Section		
Classification	Complex		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	Permanent / Plantilla Personnel		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Letter Application for Retirement / Resignation		From Applicant/Employee	
Application for Terminal Leave (CS Form no.6)		From Personnel Section	
Office Clearance		From Personnel Section	
Certificate of Appointment (Certified true copy)		From Personnel Section	
2 pcs. 1 x 1 ID picture with white background		From Applicant/Employee	
PSA copy of Birth Certificate		From Applicant/Employee	
Metropolitan Trial Court clearance (MTC)		From Applicant/Employee (MTC)	
Regional Trial Court clearance (RTC)		From Applicant/Employee (RTC)	
Certificate of No Pending Administrative Case		From City Legal Department (request by the employee)	
Service Record		From City HRMD (request by the employee)	
Certificate of Leave credits		From Personnel Section	
Leave Card with leave credits computation		From Personnel Section	



Last notice of Salary Adjustment (last step increment)	From Personnel Section
GSIS clearance of payment of Terminal Leave	From Personnel Section
Affidavit to deduct all financial obligations with the employer/agency (notarized)	From Applicant/Employee
General Clearance	From Personnel Section
Sworn Statement of Assets, Liabilities, and Net Worth (SALN latest)	From Applicant/Employee

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the application and documentary requirements to the receiving desk of Personnel Section.	1.1 Receives letter with other documentary attachments and check affixation of signatures from department / section heads, verify, and records application.	None	15 minutes	Personnel Section Staff Concerned Department Heads
	1.2 Forwards Resignation letter to the Director's Office for acceptance of application.	None	2 days*	Hospital Director
	1.3 computes leave credits assesses, validates, and checks completion of requirements and affixes signatures on leave application.	None	1 day	Personnel Section Staff
	1.4 File the copy to employees 201 file and	None	1 hour	Personnel Section Staff





	transmit relevant documents to City HRMD.			
	<b>TOTAL:</b>	<b>NONE</b>	<b>3 DAYS AND 75 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies



### PREPARATION OF DAILY TIME RECORD AND ATTENDANCE REPORT

The Administrative Code of 1987 and the pertinent laws, rules, and regulations of the Civil Service Commission as reinforced by the Quezon City Government Employees' Manual shall govern the attendance of all hospital personnel, in the spirit of the Code of Ethics for Public Officials (RA 6713).

Office or Division	Hospital Operation and Patient Support Services Division - Personnel Section		
Classification	Complex		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	All NDH personnel		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Daily Time Record - DTR Form (CS Form No. 48)		Personnel Section	
Leave Form (CS Form No. 6)		Personnel Section	
Individual Accomplishment Report Form		COS / Consultants	
Attendance report		Personnel Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements to the receiving desk of Personnel Section.	1.1 Receives accomplished forms as to completeness, validates affixation of initials, and records application.	None	20 minutes per personnel	Personnel Section Staff
	1.2 Checks and computes leave of absence, tardiness and undertimes.	None	25 minutes per personnel	Personnel Section Staff



	<b>1.3</b> Hospital Director sign the Daily Time Records.	None	2 days*	Hospital Director
	<b>1.4</b> Prepare Attendance Report then sign by the Director and transmit relevant documents to City HRMD.	None	2 days*	Hospital Director Head, Personnel Section Personnel Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>4 DAYS AND 45 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies.



### ISSUANCE OF CERTIFICATE OF EMPLOYMENT (COE)

The issuance of a Certificate of Employment (COE) involves providing a formal document by an employer to verify an individual's employment history, including dates of employment, job position, and any relevant responsibilities or achievements.

<b>Office or Division</b>	Hospital Operation and Patient Support Services Division - Personnel Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	All NDH personnel	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Request form		Personnel Section
Request letter (if employee resigned)		From Applicant
Certificate of Employment (COE)		Personnel Section
Certificate of Employment and Compensation		Personnel Section

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the request.	1.1 Receives verified request form or with letter.	None	10 minutes	Personnel Section Staff
	1.2 Prepare certification (COE) and affix necessary signature.	None	15 minutes	Head, Personnel Section
2. Issuance of request.	2. Record and release the Certificate of Employment.	None	5 minutes	Personnel Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>30 MINUTES</b>	



## LEAVE APPLICATION (SICK LEAVE, VACATION LEAVE / FORCED LEAVE, SPECIAL PRIVELGE LEAVE)

Uniform interpretation and implementation of the rules set by the Civil Service Commission on the grant of leave and provides the guidelines for the procedure of availing of leave privileges.

<b>Office or Division</b>	Hospital Operation and Patient Support Services Division - Personnel Section
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2G – for government services whose client is a government employee or another government agency
<b>Who may avail</b>	Plantilla / Permanent Personnel
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Vacation Leave application form	From Applicant
Sick Leave application form	From Applicant
Medical Certificate / Medical Abstract if SL 5 days and more	From Applicant

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit the Leave application and documentary requirements to the receiving desk of Personnel Section.	1.1 Receives accomplished forms as to completeness and affixation of initials, verify, and records application.	None	10 minutes	Personnel Section Staff  Concerned Department Heads
	1.2 computes leave credits assesses, validates, checks, and affixes signatures on leave application.	None	30 minutes	Personnel Section Staff



	<b>1.3</b> Hospital Director sign the leave application.	None	2 days*	Hospital Director
	<b>1.4</b> Attach leave form to DTR and transmit relevant documents to City HRMD.	None	1 day	Personnel Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>3 DAYS AND 40 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies



## PRE-HIRING OF CONTRACT OF SERVICE (COS) PERSONNEL

Hiring of personnel shall be open to all applicants in accordance with the instructions and policies of the city human resources management and development department and of applicable CSC qualification standards.

Office or Division	Hospital Operation and Patient Support Services Division - Personnel Section		
Classification	Complex		
Type of Transaction	G2C – For government services whose client is the transacting public		
Who may avail	Walk-In Applicants/ Online Applicants		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Letter of Application		From Applicant	
Personal Data Sheet with Picture (Version 2017)		Civil Service Commission Online Website	
Transcript of Records		From Applicant’s Alma Mater	
Diploma		From Applicant’s Alma Mater	
Certificate of Eligibility (PRC license, board rating, board certificate, CSC)		From PRC or CSC or TESDA	
Training and Seminars		From Applicant	
NBI Clearance		NBI Clearance Branches, Office, & Outlet	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements to the receiving desk of Personnel Section.	1.1 Receives, verify, and records application.	None	20 minutes per applicant	Personnel Section Staff



	1.2 Evaluate and indorses the letter of the applicant to the department / section where his / her qualifications are suited.	None	10 minutes	Head, Personnel Section
2. Receives notice of interview.	2. Inform the applicant through Email / SMS of the schedule of the interview.	None	10 minutes per applicant	Personnel Section Staff
3. Interview schedule.	3. Facilitate Applicant's interview.	None	3 days*	Department Head / Assistant Director / Hospital Director
4. Receives notice of results.	4. For applicants who passed the interview, notify the submission of final requirements.	None	10 minutes per applicant	Applicant
5. Sign the Contract.	5. Upon completion of final requirements, the preparation and applicant signing of contract.	None	1 day	Applicant
6. Wait for further instructions.	6. Director signs the contract and transmit relevant documents to City HRMD.	None	2 days*	Hospital Director Personnel Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>6 DAYS AND 50 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies





### REQUEST FOR TRAINING / SEMINAR

This procedure covers all the activities from receiving requests/invitations and identifying training needs up to the preparation of an Office Order that signifies and authorizes the attendance of personnel.

Office or Division	Hospital Operation and Patient Support Services Division - Personnel Section		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	Plantilla/Permanent Personnel		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Request Letter		From Applicant	
Invitation to Training or seminar		From Society or Association	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the request and documentary requirements to the receiving desk of Personnel Section	1.1 Receive and review the request letter and invitation and records application to logbook	None	20 minutes	Personnel Section Staff
	1.2 Forward the letter to the Director's Office for Approval of Official Business or Official Time	None	2 days*	Hospital Director
	1.3 Released of signed request in preparation for	None	30 minutes	Personnel Section Staff



	Office Order and signed by the Director			
2. Receipt of request	2. Release of the Office Order to the requesting personnel	None	5 minutes	Personnel Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>2 DAYS AND 55 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies



### RESIGNATION PROCESS

An act of an official or employee by which he / she voluntarily relinquishes in writing his / her position effective on a specific date which shall not be less than thirty (30) days from the date of such notice or earlier as mutually agreed upon by the employee and the appointing officer / authority.

Office or Division	Hospital Operation and Patient Support Services Division - Personnel Section		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	All NDH Personnel		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Resignation letter of employee		From Applicant	
Exit interview form		From Personnel Section	
Office Clearance		From Personnel Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the application and documentary requirements to the receiving desk of Personnel Section.	1.1 Receives accomplished exit interview form and affixation of signatures from department/section heads, verify, and records application.	None	15 minutes	Personnel Section Staff Concerned Department Heads
	1.2 Forwards Resignation letter to the Director's	None	2 days*	Hospital Director



	Office for acceptance and signature.			
	<b>1.3</b> File the copy to employees 201 file and transmit relevant documents to City HRMD.	None	1 day	Personnel Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>3 DAYS AND 15 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies



### SELECTION AND PROMOTION OF PLANTILLA / CONTRACT OF SERVICE (COS) PERSONNEL

Provide guidelines for the selection and promotion of permanent or contract of service personnel, for the attainment and retention of an adequate workforce who will meet the qualification standard set forth by the Civil Service Commission.

Office or Division	Hospital Operation and Patient Support Services Division - Personnel Section		
Classification	Complex		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	Recommendation from the Department / Section Heads for Appointment / Promotion of their respective Personnel		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Personal Data Sheet (CS Form No. 212 Revised 2017) with passport size picture		Civil Service Commission Online Website	
Transcript of Records		From Applicant’s Alma Mater	
Diploma		From Applicant’s Alma Mater	
Certificate of Eligibility (PRC license, board rating, board certificate, CSC)		From PRC or CSC or TESDA (authenticated copies)	
Training and Seminar Certificates		From Applicant	
Birth Certificate			
Marriage Certificate (if applicable)			
Medical Certificate (CS Form 211)			
SPMS Performance Rating (at least Very Satisfactory (4-4.99) Rating in the last rating period			
NBI Clearance		NBI Clearance Branches, Office, & Outlet	



CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the requirements to the receiving desk of Personnel Section.	1.1 Receives, verify, and records application	None	20 minutes per applicant	Personnel Section Staff
	1.2 Evaluate documents for qualifications and prepare the Comparative Assessment Forms for the Screening Committee	None	1 hour per applicant	Personnel Section Staff
	1.3 Schedule the date of the Screening of candidates (for approval by the Chairman and members) and approve the agenda of the positions to be screened.	None	30 minutes	Head, Personnel Section
2. Notify for schedule of interview	2. Inform the applicant through written notice / SMS of the schedule of the interview	None	10 minutes per applicant	Personnel Section Staff
3. Interview of Screening Committee	3.1 Facilitate Applicant/contenders interviews. Personnel staff will act as secretariat during the NDH Screening of Candidates	None	2 days*	Department Head / Assistant Director / Hospital Director/ Screening Committee
	3.2 Compute the scores and prepare recommendations	None	3 days*	Head, Personnel Section



	for the signature of the committee			
<b>4.</b> Notification of final requirements	<b>4.1</b> For applicants who passed the interview, notify the submission of final requirements.	None	10 minutes per applicant	Applicant / Candidate
	<b>4.2</b> Upon completion of final requirements, the Signing of recommendations by the Hospital Director	None	2 days*	Hospital Director
	<b>4.3</b> Transmit relevant documents to City HRMD for checking	None	1 day	Personnel Section Staff
	<b>4.4</b> Wait for the schedule of PSB	None		Personnel Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>8 DAYS AND 130 MINUTES*</b>	

\*Posted time may vary depending on the availability of the Concerned Signatory/ies and the bulk of documents for checking.



## DISPENSING OF DRUGS AND MEDICINES TO IN-PATIENT

The Novaliches District Hospital Pharmacy shall provide safe, effective and good quality drugs with correct dosage, form and appropriate number of doses to In Patient. This section is open twenty-four (24) hours a day for seven (7) days a week.

<b>Office or Division</b>	Ancillary Services Division - Pharmacy Section	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public G2G – for government services whose client is a government employee or another government agency	
<b>Who may avail</b>	All In-Patients	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Valid Prescribed Prescription		Prescribing Doctor
NDH Hospital Card		OPD
Official Receipt		Cashier
MSS Approval / Acknowledgement		Medical Social Worker

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present valid prescription	1.1 Receive prescription from the Nurse / Nursing Attendant	None	2 minutes	Pharmacist
	1.2 Prepares and Recording Prescription	None	5 minutes	Pharmacist
2. Sign the logbook with printed name and date received.	2.1 Release of Drugs and medicines to the Nurse/ Nursing Attendant.	See price list	3 minutes	Pharmacist





	<b>2.2</b> Write the appropriate price of drugs and medicines in the charge slips and forward to the Billing and Claims Section	None	2 minutes	Pharmacist
	<b>2.3</b> Documentation files prescription filled and duplicate copy of charge slips.	None	1 minute	Pharmacist
<b>TOTAL:</b>		<b>SEE PRICE LIST</b>	<b>12 MINUTES</b>	

Attachment: Updated Price List



## DISPENSING OF DRUGS AND MEDICINES TO OUT PATIENTS AND EMERGENCY ROOM PATIENT

The Novaliches District Hospital Pharmacy shall provide safe, effective and good quality drugs with correct dosage, form and appropriate number of doses to Out Patient and Emergency Room Patient. This section is open twenty-four (24) hours a day for seven (7) days a week.

Office or Division	Ancillary Services Division - Pharmacy Section		
Classification	Simple		
Type of Transaction	Government to Citizen, Government to Government		
Who may avail	All Out Patients, Emergency Room patients and Employees		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Valid Prescription		Prescribing Doctor	
NDH Hospital Card		OPD	
Official Receipt		Cashier	
MSS Approval/ Acknowledgement		Medical Social Worker	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present valid prescription and NDH hospital Card.	1. Receive prescription from the patient	None	3 minutes	Pharmacist
2. Receive Order of Payment	2. Issue Order of Payment and advise patient or companion to pay the necessary amount to Cashier Section	See price list	5 minutes	Pharmacist
3. Present official receipt	3. Verify the validity of Official Receipt	None	2 minutes	Pharmacist



4. Claim Drugs and medicines	4. Issue medicine with clear instructions and advice through medication counseling on the proper way of taking the medicines. Affix the patient's signature over printed name or thumb mark for illiterate to receiving logbook.	None	5 minutes	Pharmacist
<b>TOTAL:</b>		<b>SEE PRICE LIST</b>	<b>15 MINUTES</b>	

Attachment: Updated Price List



### FLOOR STOCK / WARD STOCK SYSTEM

This procedure covers all the activities from receipt Requisition, Pharmacy Issuances, Replenishment, Monitoring and Documentation.

Office or Division	Ancillary Services Division - Pharmacy Section		
Classification	Highly Technical		
Type of Transaction	G2C – for government services whose client is the transacting public G2G – for government services whose client is a government employee or another government agency		
Who may avail	Ward Station, End-users		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Pharmacy Requisition Slip (PRS)		Pharmacy Section	
Approved Pharmacy Issuance Slip (PIS)		Pharmacy Section	
Requisition Sheets		Pharmacy Section	
Controlled Drug Administration Sheet		Pharmacy Section	
Valid Prescribed Prescription		Prescribing Doctor	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit approved Pharmacy requisition Slip (PRS)	1.1 Receive approved Pharmacy Requisition Slip (PRS) from the Nurse in-charge/ end-users	None	2 minutes	Pharmacist
	1.2 Prepare the requested drugs and medicines.	None	10 minutes	Pharmacist



	<b>1.3</b> Prepare two copies of Pharmacy Issuances Slip (PIS).	None	10 minutes	Pharmacist
<b>2.</b> Receive and sign requested drugs and medicines	<b>2.</b> Issue Drugs and medicines to the Nurse In-Charge. For Dangerous drugs issue: Dangerous Drug Preparation with Controlled Drug Administration Sheet (CDAS).	None	2 minutes	Pharmacist
<b>3.</b> Submit prescribed prescription with duplicate copy of charge slips. For Dangerous Drugs submit accomplished CDAS	<b>3.2</b> Replenishment <ul style="list-style-type: none"> <li>• Checks and verify the prescription</li> <li>• Fills the prescription and record to replenishment logbook</li> <li>• For Dangerous Drugs:</li> <li>• Receive accomplished CDAS and filled up new Requisition Sheets for Replenishment</li> </ul>	None	5 minutes	Pharmacist
	<b>3.3</b> Monitoring - Conduct inventory every 4 <sup>th</sup> day of the month witnessed by Nurse on duty, pulled out the near expiry Three (3) months before the expiration date, prepares Monthly inventory Report, reconciles discrepancy,	None	2 days	Pharmacist and Pharmacy Aide



	prepare summary of available of medicines for emergency treatment and forward final inventory report to the Chief Pharmacist.			
	<b>3.4</b> Check the final inventory report and prepare communication letter to ward department regarding the inventory report.	None	30 minutes	Chief Pharmacist
<b>4.</b> Receive communication letter from Pharmacy and Inventory Report	<b>4.</b> Issue the communication letter with inventory report	None	2 minutes	Pharmacist
<b>5.</b> Submit prescribed prescription with duplicate copy Charge Slip no. / Order of payment from date used (Within seven (7) days upon receipt of letter from Pharmacy).	<b>5.1</b> Check and receive the prescribed prescription with duplicate copy of charge slips number. Prepare Reconciliation Report of variance then submit Reconciliation Report of variance to Chief Pharmacist.	None	10 minutes	Pharmacist
	<b>5.2</b> Check the Reconciliation Report of variance	None	5 minutes	Chief Pharmacist
<b>6.</b> Receive reconciliation report of variance	<b>6.1</b> Issue reconciliation report of variance	None	2 minutes	Pharmacist
	<b>6.2</b> Documentation <ul style="list-style-type: none"> <li>Pharmacy Requisitions Slips</li> <li>Pharmacy Issuance Slips</li> </ul>	None	3 minutes	Pharmacist



	<ul style="list-style-type: none"> <li>• Requisition Sheets</li> <li>• CDAS</li> <li>• Pharmacy Pull-Out Slip</li> <li>• Summary of ward inventory report</li> <li>• Reconciliation Report of variance.</li> <li>• Summary of available medicine for emergency treatment</li> </ul>			
<b>TOTAL:</b>		<b>NONE</b>	<b>10 DAYS AND 16 MINUTES</b>	

Attachment: Updated Price List



### PHYSIATRIST CONSULTATION

Patient that needs physical therapy treatment will undergo Physiatrist consultation for evaluation and assessment. Consultation is every Tuesday at 9 a.m. to 4 p.m. with cut-off time at 3 p.m.

Office or Division	Ancillary Services Division - Physical Therapy and Rehabilitation Medicine		
Classification:	Simple		
Type of transaction:	G2C – for government services whose client is transacting public		
Who may avail:	All		
CHECKLIST OF REQUIREMENTS		WHERE TO AVAIL	
Hospital Card (1 original copy)		Outpatient Department	
Referral from attending physician (1 original or photocopy)		Outpatient Department	
Vaccination Card (1 original, photocopy or screenshot copy)		Outpatient Department	
Valid ID (1 original copy or photocopy)		Outpatient Department	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach the physical therapist staff and present the written referral from the referring doctor.	1. Interview the patient, relative or representative	None	1 minute	Physical Therapist
2. Proceed to Registration.	2. Classify the patient if Senior citizen, PWD or regular patient for Consultation fee.	None	10 minutes	Physical Therapist OPD Staff/Nurse





<ul style="list-style-type: none"> <li>With hospital card - (Patient fill's out the Physical Therapy Patient Information Consultation Form)</li> <li>Without hospital card - (Proceed to the Outpatient Department)</li> </ul>				
3. Proceed to Payment	3. Issues an order of payment.	Consultation Fee  New Patient 100.00  Follow-Up 80.00	10 minutes	Physical Therapist Social Worker Cashier
4. Proceed to Consultation.	4. Patients are arranged on a first come first serve basis.	None	1 minute	Physical Therapist
5. Wait for the Consultant on Duty.	5. Consultant on Duty is the Physiatrist / Rehabilitation Medicine Doctor.	None	10 minutes	Physiatrist



6. Patient comes in for check-up / consultation.	6. Physiatrist reviews the referral, laboratory results and other pertinent documents related to the patient's condition prior to examination. Explain outcome of diagnosis or plan of care to patient and relative.	None	15 minutes	Physiatrist Consultation Area
7. If for Physical Therapy – receive therapy instructions.  If for Diagnostic procedure – patient proceeds to the diagnostic department  If for Discharged - Receive prescriptions and home instructions.	7. Explain and gives instructions on therapy schedule.	None	3 minutes	Physiatrist on Duty Consultation Area
<b>TOTAL:</b>		<b>PHP 80.00 – PHP 100.00</b>	<b>50 MINUTES</b>	



### PHYSICAL THERAPY OUTPATIENT TREATMENT PROCESS

Physical therapy sessions are scheduled and is open daily from Monday to Friday 8am to 5pm with cut-off time at 4pm.

<b>Office or Division</b>	Ancillary Services Division - Physical Therapy and Rehabilitation Medicine	
<b>Classification:</b>	Simple	
<b>Type of transaction:</b>	G2C – for government services whose client is transacting public	
<b>Who may avail:</b>	All	
CHECKLIST OF REQUIREMENTS		WHERE TO AVAIL
Patient Written Referral (1 original copy)		Outpatient Department
Hospital Card (1 original copy)		Outpatient Department
Vaccination Card (1 original copy)		Outpatient Department
Valid ID (1 original copy)		Outpatient Department
Valid ID (1 original copy)		Outpatient Department
Patient Consent Form (1 original copy)		Outpatient Department
Vaccination Waiver for unvaccinated patients (1 original copy)		Outpatient Department

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>1.</b> Approach the physical therapy staff.  If the patient had consulted from other institution, hospital or	<b>1.</b> Interviews the patient for chief complaint.  If the patient consulted at NDH the physical therapist will get the patients chart to	None	2 minutes	Physical Therapist



clinic the patient/relative or representative will present the written referral/endorsement letter to the physical therapist.	confirm the referral and management.			
<b>2.</b> Proceed to Registration.	<b>2.</b> Accepts the hospital card to check the hospital number and write it in the log book.	None	5 minutes	Physical Therapist Outpatient Department Staff
<b>3.</b> Proceed to Physical Therapy Department then patient fills out and signs the patient consent form.	<b>3.</b> Gives to patient the forms to be filled out.	None	3 minutes	Physical Therapist
<b>4.</b> Proceed to Treatment Area	<b>4.</b> Reviews the patient's chart for the management of the chief complaint. Places the patient in a comfortable position and checks the vital signs.	None	10 minutes	Physical Therapist ER or OPD staff
<b>5.</b> Physical Therapy Treatment	<b>5.</b> Prepares the required machine/modalities then executes the physiatrist's prescribed management.	None	2 hours	Physical Therapist
<b>6.</b> Proceed to Payment	<b>6.</b> Prepares the order of payment and instructs the patient to settle the payment.	See price list	10 minutes	Physical Therapist Social Worker
<b>7.</b> Home Instructions	<b>7.</b> After the treatment procedure and payment, gives home and schedule instructions for the	None	1 minute	Physical Therapist



	succeeding treatment procedures.			
	<b>TOTAL:</b>	<b>SEE PRICE LIST</b>	<b>2 HOURS AND 30 MINUTES</b>	



### RECEIVING OF GOODS / DELIVERIES (SUPPLIES AND EQUIPMENT)

This procedure covers the receipt of notice from supplier, notification of end-user and biomedical personnel, conduct of inspection, preparation and issuance of certificate of acceptance and documentation.

Office or Division	Hospital Operations and Patient Support Services Division - Property and Supply Section		
Classification	Simple		
Type of Transaction	G2B – for government services whose client is a business entity G2G – for government services whose client is a government employee or another government agency		
Who may avail	Suppliers / Contractors		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Notice of Delivery (1 photocopy)		QC Bidding and Awards Committee	
Delivery Receipts / Sales Invoice (1 original copy and 3 photocopies)		Suppliers / Contractors	
Approved Purchase Orders (3 photocopies)		QC Bidding and Awards Committee	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Supplier to submit Notice of Delivery with the following attachments:  a. Notice of Delivery b. Approved Purchase Order	1.1 Received notice of delivery for verification of documents and inform the end user / requesting section regarding the delivery.	None	3 minutes	Property and Supply Section Head



c. Delivery Receipts / Sales Invoice				
	<b>1.2</b> Check specifications / expiration / quality and count quantity.	None	30 minutes*	Property and Supply Section Head / Property and Supply Section Staff
	<b>1.3</b> If the delivery of goods is complete and the specifications is conformance in the Purchase Order (P.O.) Sign received portion of Delivery Receipt (DR)/Sales Invoice (SI) and issue Certificate of Acceptance	None	2 minutes	Property and Supply Section Head / Property and Supply Section Staff
	<b>1.4</b> Prepares request for inspection by the Technical Inspection Section of CGSD	None	10 minutes	Property and Supply Section Head
	<b>1.5</b> Items received shall now be recorded to Property and Supply Stock card and Inventory of Movable Assets.	None	15 minutes	Property and Supply Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>1 HOUR*</b>	

\* Time may vary depending on the volume of delivery



### ISSUANCE OF SUPPLIES AND EQUIPMENTS

This procedure covers all the activities from receipt of request, checking availability of supplies / equipment, signing documents, issuance to the end-user and documentation

Office or Division	Hospital Operations and Patient Support Services Division - Property and Supply Section		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	All NDH Offices and Employees		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Requisition and Issue Slip (RIS) (1 original copy and 1 photocopy)		Property and Supply Section	
Memorandum Receipt (MR) (1 original copy and 1 photocopy)		Property and Supply Section	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out and submit duly accomplished Requisition Issue Slip form.	1.1 Check completeness of information provided in the RIS form and sign approved by in the RIS portion	None	1 minute	Property and Supply Section Head
	1.2 Check availability of supplies in stock card	None	4 minutes	Property and Supply Section Staff





	<b>1.3</b> Release supplies requested and fill up the issuance portion in the RIS	None	10 minutes	Property and Supply Section Staff
	<b>1.4</b> Sign RIS form	None	1 minute	Property and Supply Section Staff
	<b>1.5</b> Record RIS to stock card and update report of supplies and materials issue (RSMI)	None	1 minute	Property and Supply Section Staff
	<b>1.6</b> File RIS, stock card and RSMI	None	1 minute	Property and Supply Section Staff
	<b>1.7</b> Check Project Procurement Management Plan (PPMP)	None	1 minute	Property and Supply Section Staff
	<b>1.8</b> Check completeness of accessories	None	1 minute	Property and Supply Section Staff
<b>2.</b> Request memorandum receipt for delivered equipment included in the approved PPMP	<b>2.1</b> Prepare the document needed for accountability	None	3 minutes	Property and Supply Section Head
	<b>2.2</b> Sign the receiving portion of the memorandum receipt	None	1 minute	End-User
	<b>2.3</b> Released the machine / equipment	None	3 minutes	Property and Supply Section Staff



	<b>2.4</b> File MR / Update the inventory of movable asset	None	1 minute	Property and Supply Section Staff
<b>TOTAL:</b>		<b>NONE</b>	<b>30 MINUTES</b>	



### TRANSFER OF ADMITTED PATIENT FROM NDH TO SECONDARY OR TERTIARY HOSPITAL

This process mainly caters to admitted patients who need to be transferred to a different hospital due to the need of more specialized care. The NDH doctors on duty will coordinated with the PHU coordinator on duty regarding the transfer and the PHU coordinator will coordinate with the PHU coordinator from the hospital where patient will be coordinated to. PHU coordinator will update NDH doctor on duty regarding the progress of coordination regardless of the disposition of the receiving hospital.

Office or Division	Special Unit - Public Health Unit		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is the transacting public		
Who may avail	NDH Doctors On Duty who will transfer admitted Patients Via Public Health Unit		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Patient’s Chart		Nurse Station	
Diagnostic Tests		Nurse Station	
Clinical Abstract		Nurse Station	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Doctor on duty will inform PHU coordinator on duty regarding transfer	1.1 The on duty Public Health Unit coordinator will receive a call or message from NDH consultant referring a patient for transfer to a different hospital	None	1 minute	Doctor on Duty Public Health Unit Personnel



	<b>1.2</b> The PHU on duty will ask for the basic information of the patient for transfer	None	1 minute	Doctor on Duty Public Health Unit Personnel
<b>2.</b> NDH consultant will give clinical abstract and diagnostic results of patient to be transferred to PHU on duty	<b>2.1</b> The PHU on duty will ask the NDH consultant for the patient’s clinical abstract and diagnostic results to be scanned	None	10 minutes	Doctor on Duty Public Health Unit Personnel
	<b>2.2</b> The PHU on duty will inform the NDH consultant that he needs to be on stand by if ever there is a need for him to talk to the consultant from the other hospital	None	1 minute	Public Health Unit Personnel
	<b>2.3</b> PHU will coordinate with other PHU coordinator from the hospital where patient will be referred to	None	2 minutes	Public Health Unit Personnel
<b>3.</b> NDH consultant will answer the needed information sent by the receiving hospital	<b>3.1</b> The PHU on duty will ask the NDH consultant on duty to answer the needed information asked by the corresponding hospital, usually via E-MAIL, if not through phone call	None	10 minutes	Doctor on Duty Public Health Unit Personnel
	<b>3.2</b> The PHU on duty will send the answered questionnaire and scanned documents	None	2 minutes	Public Health Unit Personnel



	to the e-mail address of the receiving hospital			
	<b>3.3</b> The PHU on duty will call the receiving hospital and will inform the NDH on duty doctor for update every after 30 minutes	None	10 minutes	Public Health Unit Personnel
	<b>3.4</b> The PHU on duty will log all details of transfer in Google sheet and logbook meant for PHU regardless of outcome	None	2 minutes	Public Health Unit Personnel
<b>TOTAL:</b>		<b>NONE</b>	<b>39 MINUTES*</b>	



### INCOMING CALL FROM REFERRING HOSPITAL FOR TRANSFER / CONSULT

This process mainly caters transfer / consult of patients from a different hospital to Novaliches District Hospital.

Office or Division	Public Health Unit		
Classification	Simple		
Type of Transaction	G2G – for government services whose client is a government employee or another government agency		
Who may avail	Doctors from other hospital who will refer patients for transfer in NDH		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Clinical Abstract		Public Health Unit	
Diagnostic Results		Public Health Unit	
Accomplished patients’ data form via google link		Public Health Unit	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Caller from referring hospital must give needed information	1. The on duty Public Health Unit Coordinator will receive a call from a referring hospital and will ask the case.	None	2 minutes	Coordinator from referring hospital PHU on duty
2. Caller must give his contact details	2. The Public Health Unit Coordinator will coordinate with Consultant on Duty. If for OPD, PHU will ask for contact number for call back	None	5 minutes	PHU on duty Doctor on duty Coordinator from referring hospital



<b>3.</b> Caller from referring hospital will send needed documents	<b>3.</b> If as Emergency an Email adress will be given (phu.ndh@quezoncity.gov.ph) for the referring hospital to send need documents	None	5 minutes	PHU on duty Coordinator from referring hospital
<b>4.</b> Referring hospital must answer patients' information needed by doctors on duty	<b>4.</b> PHU on duty will give QR code via viber or if not available, give the google link ( <a href="https://tinyurl.com/PHU2023">https://tinyurl.com/PHU2023</a> ) to answer details via txt message to be answered and will be read by consultant on duty for disposition	None	15 minutes	PHU on duty Coordinator from referring hospital
<b>5.</b> none	<b>5.</b> Every after 30 minutes, if with no disposition still, PHU will inform the referring hospital / person via given contact details until disposition is available	None	3 minutes	PHU on duty
<b>TOTAL:</b>		<b>None</b>	<b>28 minutes*</b>	

**INCENTIVE SPIROMETRY**

Incentive Spirometry is a medical device used to help improve lung function and to prevent respiratory complications after surgery or illness. This procedure covers activities of all In-Patients. Operation Time: Monday to Sunday (24 hours)

<b>Office or Division</b>	Ancillary Services Division - Pulmonary Unit	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	<b>G2C</b> – for government services whose client is the transacting public	
<b>Who may avail</b>	All In-Patients	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Pulmonary Unit Request Form		Nurse on Duty

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Request of Procedure.	1. Receive and check request form.	None	3 minutes	Nurse on Duty/ Respiratory Therapist
2. Proceed with the Procedure	2. Instruct the patient	None	5 minutes	Respiratory Therapist
3. None	3. Documentation	None	2 minutes	Respiratory Therapist
<b>TOTAL:</b>		<b>NONE</b>	<b>10 MINUTES</b>	





### MACHINES (MECHANICAL VENTILATOR, HI- FLOW AND BIPAP)

Medical devices designed to provide support to patients who have difficulty breathing or are unable to breathe on their own.

Operation Time: Monday to Sunday (24 hours)

<b>Office or Division</b>	Ancillary Services Division - Pulmonary Unit	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public.	
<b>Who may avail</b>	All In-Patients	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Pulmonary Unit Request Form		Nurse on Duty

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request of Procedure.	1. Receive and check request form and Inform patient about the procedure	None	3 minutes	Nurse on Duty/ Respiratory Therapist
2. Wait for the Procedure	2. Fill up Charge Slip to be given at billing section	See price list	3 minutes	Respiratory Therapist / Billing Section
3. Wait for mechanical ventilator hooking	3. Prepare equipment and materials needed and bring mechanical ventilator to patient's room	None	16 minutes	Respiratory Therapist
4. None	4. Documentation	None	3 minutes	Respiratory Therapist
<b>TOTAL:</b>		<b>SEE PRICE LIST</b>	<b>25 MINUTES</b>	



## **USE OF MACHINES PRICE LIST (MECHANICAL VENTILATOR, HI- FLOW AND BIPAP)**

- Machines (Mechanical Ventilator, Hi- Flow and Bipap) - PHP 650.00
- Mechanical Ventilator Tubing (Adult, Pedia, Neonatal) – PHP 950.00
- Bacterial Filter - PHP 200.00
- Heat Moisture Exchange - PHP 280.00



### AEROSOL THERAPY

Aerosol therapy is a medical treatment that involves delivering medication to the lungs and respiratory system in the form of tiny airborne particles or droplets. This procedure covers activities of patients from ER and In-Patients. Operation Time: Monday to Sunday (24 hours)

<b>Office or Division</b>	Ancillary Services Division - Pulmonary Unit
<b>Classification</b>	Simple
<b>Type of Transaction</b>	<b>G2C</b> – for government services whose client is the transacting public.
<b>Who may avail</b>	All NDH ER and In-Patients
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Pulmonary Unit Request Form	Nurse on Duty

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request of Procedure.	1. Receive and check request form.	None	3 minutes	Nurse on Duty/ Respiratory Therapist
2. Wait for the treatment	2. Give Charge Slip / Order of Payment. For ER patient order of payment will be given to the NOD. For In-Patient charge slip will be given directly to the billing section.	See price list	3 minutes	Respiratory Therapist/ Nurse on Duty/ Billing Section
3. Proceed to Treatment	3. Administer Aerosol Treatment	None	5 minutes	Respiratory Therapist
4. None	4. Documentation	None	2 minutes	Respiratory Therapist



TOTAL:	SEE PRICE LIST	13 MINUTES	
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## Aerosol Therapy Price List

- Nebulization Kit - PHP 85.00
- Nebulization procedure only - PHP 40.00

**PEAK EXPIRATORY FLOW RATE**

It is used to monitor lung function and airflow. It can help identify worsening symptoms of asthma attacks. This procedure covers activities of all In-Patients. Operation Time: Monday to Sunday (24 hours)

<b>Office or Division</b>	Ancillary Services Division - Pulmonary Unit
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2C – for government services whose client is the transacting public
<b>Who may avail</b>	All In-Patients
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Pulmonary Unit Request Form	Nurse on Duty

<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Request of Procedure.	1. Receive and check request form.	None	3 minutes	Nurse on Duty/ Respiratory Therapist
2. Proceed to the procedure	2. Instruct the patient	None	5 minutes	Respiratory Therapist
3. None	3. Documentation	None	2 minutes	Respiratory Therapist
<b>TOTAL:</b>		<b>NONE</b>	<b>10 MINUTES</b>	



### PULMONARY FUNCTION TEST PROCESS

Is a non-invasive test that measure how well your lungs work. These tests provide information about your lung capacity, airflow and the efficiency of gas exchange in your lungs. This procedure covers activities of patients from OPD and In-Patients.  
Operation Time: Monday to Friday (8 a.m. – 5 p.m. No Noon Break)

Office or Division	Ancillary Services Division - Pulmonary Unit		
Classification:	Simple		
Type of transaction:	G2C – for government services whose client is the transacting public.		
Who may avail:	All OPD and In-Patients		
CHECKLIST OF REQUIREMENTS		WHERE TO AVAIL	
Hospital Card (1 original copy)		Pulmonary Unit	
Pulmonary request signed by the Doctor (1 original copy)		Pulmonary Unit	
Valid ID (1 original copy)		Pulmonary Unit	
Order of Payment (1 original copy)		Pulmonary Unit	
Official receipt (1 original copy)		Pulmonary Unit	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the hospital card and pulmonary request form signed by the doctor. For patients with request from other hospitals, they will be instructed to go to the Out-patient Department	1. Accept the pulmonary request form and give instructions depending on the requested procedure / examination.	PHP 500.00	3 minutes	Respiratory Therapist



to have a hospital record and change the outside request to the hospital's pulmonary request form.	Schedule will depend on the number of patients.			
<b>2.</b> Will receive order of payment and proceed to the cashier section for payment.	<b>2.</b> Give order of payment and instruct patient to proceed to cashier section for payment.	None	3 minutes	Respiratory Therapist
<b>3.</b> Present the order of payment and pay the indicated amount at the cashier. Client will be given an official receipt.	<b>3.</b> Accept order of payment and give Official receipt after payment.	None	3 minutes	Cashier
<b>4.</b> Present the official receipt at the pulmonary unit.	<b>4.</b> Verify the official receipt and instruct patient to wait.	None	3minutes	Respiratory Therapist
<b>5.</b> Proceed to the pulmonary unit for the procedure and listen to the instructions. After the procedure, patient will be instructed when the official result will be available.	<b>5.</b> Call the patient and proceed to the examination room for the procedure. Give instructions to the patient and that the official result will be available after 7 working days.	None	1 hour	Respiratory Therapist
<b>6.</b> To claim result, present hospital card, valid ID and official receipt.	<b>6.</b> Verify Hospital card, valid ID or Official receipt and release official examination result.	None	3 minutes	Respiratory Therapist
<b>TOTAL:</b>		<b>PHP 500</b>	<b>1 HOUR AND 15 MINUTES</b>	



### WEANING T-TUBE

Weaning T-Tube typically refers to the gradual process of reducing the patient's reliance on machines. This procedure covers activities of all In-Patients hooked to machines. Operation Time: Monday to Sunday (24 hours)

<b>Office or Division</b>		Ancillary Services Division - Pulmonary Unit		
<b>Classification</b>		Simple		
<b>Type of Transaction</b>		G2C – for government services whose client is the transacting public		
<b>Who may avail</b>		All In-Patients		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Pulmonary Unit Request Form			Nurse on Duty	
<b>CLIENTS STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Request of Procedure.	1. Receive and check request form.	None	3 minutes	Nurse on Duty/ Respiratory Therapist
2. Proceed with the procedure.	2. Hooked to T-Tube	None	10 minutes	Respiratory Therapist
3. End of Client Step	3. Documentation	None	2 minutes	Respiratory Therapist
<b>TOTAL:</b>		<b>NONE</b>	<b>10 MINUTES</b>	





### RADIOLOGIC IMAGING SERVICES

Radiologic imaging service is available 24/7 for In-Patients and Emergency patients. For Out-patients, the service is available 8:00 a.m. to 5:00 p.m., from Mondays to Fridays. The results will be available two (2) working days for out-patient and within twenty-four (24) hours for in-patients

Office or Division	Ancillary Services Division – Radiology Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is transacting public		
Who may avail	All NDH patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Radiology Request (1 original copy)		NDH Radiology Section	
Official Receipt (1 original copy)		Cash Operation Section (Cashier)	
Hospital Card (1 original copy)		Health Information Management Section (Medical Records)	
Authorization letter (if patients is relative/proxy will receive the patient’s result)		Client/ Patient	
Valid Government ID / QC ID		Government Offices / Quezon City Hall	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present the radiology request.	1. Receive the radiology request and verify patient's data written on the request with the following: <ul style="list-style-type: none"> <li>• Patient's ID card</li> <li>• Hospital card</li> </ul>	None	3 minutes	X-ray Technologist / Radiologic Technologist / Radiology Aide



2. Receive Order of Payment for the x-ray fees.	2. Give order of payment to the patient.	None	3 minutes	X-ray Technologist / Radiologic Technologist / Radiology Aide
3. Pay the radiology procedure at the cashier.	3. Receive the order of payment and payment. Give official receipt.	see pricelist	3 minutes	Cashier
4. Present the official receipt to radiology department.	4. Verify the official receipt and instruct the patient to wait.	None	1 minute	X-ray Technologist / Radiologic Technologist / Radiology Aide
5. Proceed to the Xray room for the examination and receive instruction when to claim the results	5. Call the patient for the procedure. Perform the procedure then instruct the patient when to claim the result: <ul style="list-style-type: none"> <li>• 2 working days for out-patients</li> <li>• 1 hour (initial chest reading)</li> <li>• Within 24 hours for in-patients.</li> </ul>	None	15 minutes*	X-ray Technologist / Radiologic Technologist
6. In order to claim the result, present the official receipt and hospital card of the patient. In case the patient is unable to personally claim the result, a proxy or relative may claim as	6. Check the official Receipt and Hospital card of the patient. Give the official result to the patient and let the patient sign on the receiving logbook.	None	5 minutes	X-ray Technologist / Radiologic Technologist / Radiology Aide



long as the following are presented: <ul style="list-style-type: none"> <li>• Official receipt</li> <li>• Hospital card</li> <li>• Authorization letter of the patient</li> <li>• Photocopies of valid ids of the patient and the proxy or relative</li> </ul>				
<b>TOTAL:</b>	<b>SEE PRICELIST</b>	<b>35 MINUTES*</b>		

\*Time may vary depending on the requested procedure.

## RADIOLOGIC IMAGING SERVICES PRICELIST

X-RAY EXAMINATION	PRICES
Chest PA view	300
Chest PA/L views	400
Chest apicolordotic / coned down views	250
Chest lateral decubitus view	250
Chest (portable)	315
Ribs / Thoracic cage AP / Oblique views	400
Skull AP / L / Series views	400
Mandible AP / O views	700
Mastoid Series	500
Temporo-mandibular joint	600
Water’s view	300
Paranasal sinuses	450
Submentovertex / Towne’s view	250



Orbits	450
Nasal bone / soft tissue lateral view	500
Cervical spine AP / L / Oblique views	550
Thoracic spine AP / L views	450
Lumbosacral spine AP / L / Oblique views	550
Scoliotic study	900
Abdomen upright / supine views	500
Abdomen (portable)	375
Pelvic AP / frog leg views	300
Shoulder AP view	300
Elbow AP / L views	350
Ankle foot AP / L / Mortise view	350
Humerus AP / L views	350
Femur AP / L views	350
Leg AP / L views	350
Hand AP / O views	350
Wrist AP / L views	350
Intravenous pyelography/retrograde pyelogram	1500
Hysterosalpingography	1500
T-tube cholangiogram	1000
Fistulogram	700
Barium swallow / esophagogram	1500
Barium enema / colon gram	1500
Upper / lower GI series	1500



## ULTRASOUND IMAGING SERVICES

Ultrasound imaging service is available 8:00 a.m. to 5:00 p.m., from Mondays to Fridays (in-patients, emergency and out-patients). The results will be available one (1) working day for out-patient and within 30 minutes to 1 hour for in-patients and emergency patients.

Office or Division	Ancillary Services Division – Radiology Section		
Classification	Simple		
Type of Transaction	G2C – for government services whose client is transacting public		
Who may avail	All NDH patients		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Radiology Request (1 original copy)		NDH Radiology Section	
Official Receipt (1 original copy)		Cash Operation Section (Cashier)	
Hospital Card (1 original copy)		Health Information Management Section (Medical Records)	
Authorization letter (if patients is relative/proxy will receive the patient’s result)		Client/ Patient	
Valid Government ID / QC ID		Government Offices / Quezon City Hall	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach radiology department window and present the radiology request.	1. Receive the radiology request and verify patient's data written on the request with the following: <ul style="list-style-type: none"> <li>• Patient's ID card</li> <li>• Hospital card</li> </ul>	None	3 minutes	X-ray Technologist / Radiologic Technologist / Radiology Aide



2. Receive instruction for the ultrasound procedure.	2. Classify the patient: <ul style="list-style-type: none"> <li>• In-Patient</li> <li>• Out patient</li> <li>• Emergency patient</li> </ul> Instruct the patient the preparations for the requested ultrasound procedure	None	5 minutes	X-ray Technologist / Radiologic Technologist / Radiology Aide
3. Receive Order of Payment for the ultrasound fees.	3. Give order of payment to the patient.	None	3minutes	X-ray Technologist / Radiologic Technologist / Radiology Aide
4. Pay the ultrasound procedure at the cashier.	4. Receive the order of payment and payment. Give official receipt.	see pricelist	3 minutes	Cashier
5. Present the official receipt to radiology department.	5. Verify the official receipt and instruct the patient to wait	None	1 minute	X-ray Technologist / Radiologic Technologist / Radiology Aide
6. Proceed to the ultrasound room for the examination and receive instruction when to claim the results.	6. Call the patient for the procedure. Perform the procedure then instruct the patient when to claim the result: <ul style="list-style-type: none"> <li>• 1 working day for ultrasound</li> </ul>	None	1 hour*	Radiologic Technologist/Radiologis t/ Sonologist
7. In order to claim the result, resent the official receipt and hospital card of the patient.	7. Check the official Receipt and Hospital card of the patient. Give the official result to the patient and let	None	5 minutes	X-ray Technologist/Radiologic Technologist/ Radiology Aide



<p>In case the patient is unable to personally claim the result, a proxy or relative may claim as long as the following are presented:</p> <ul style="list-style-type: none"> <li>• Official receipt</li> <li>• Hospital card</li> <li>• Authorization letter of the patient</li> <li>• Photocopies of valid ids of the patient and the proxy or relative</li> </ul>	<p>the patient sign on the receiving logbook.</p>			
<b>TOTAL:</b>		<b>SEE PRICELIST</b>	<b>1 HOUR AND 20 MINUTES*</b>	

\*Time may vary depending on the requested procedure.



### ULTRASOUND IMAGING SERVICES PRICELIST

ULTRASOUND EXAMINATION	PRICES
1 organ (including right lower quadrant)	800
Hepatobiliary tract	1000
Upper abdomen	1200
Lower abdomen / KUB or KUBP	1200
Whole abdomen	2400
Transrectal (prostate or trans abdomen)	1500
Transvaginal	1500
Pelvic Gyne	1000
Pelvis (OB / biometry)	1200
Biophysical scoring	1500
Breast	1500
Neck / Thyroid	1500
Cranial	950
Scrotal with doppler	1350
Inguinoscrotal with doppler	1500





## FEEDBACK AND COMPLAINT MECHANISM

FEEDBACK AND COMPLAINT MECHANISMS	
How to send feedback?	Answer the client feedback form and drop it at the designated drop box found in all department / section / office window reception or at the public information desk.
How feedback is processed?	Every day, the Public Relations Officer opens the drop box and compiles and records all feedback submitted. Feedback requiring answers are forwarded to the relevant offices and they are required to answer within three (3) days of the receipt of the feedback. The answer of the office is then relayed to the citizen.
How to file complaints?	Answer the client Complaint Form and drop it at the designated drop found in all department / section / office window reception or at the public information desk.
How complaints are processed?	The Complaints Officer opens the complaints drop box on a daily basis and evaluates each complaint. Upon evaluation, the Complaints Officer shall start the investigation and forward the complaint to the relevant office for their explanation. The Complaints Officer will create a report after the investigation and shall submit it to the Head of Agency for appropriate action. The Complaints Officer will give the feedback to the client.
Contact Information of NDH public information and complaint desk.	NDH email address: <a href="mailto:cqi.ndh@quezoncity.gov.ph">cqi.ndh@quezoncity.gov.ph</a> or <a href="mailto:ndh@quezoncity.gov.ph">ndh@quezoncity.gov.ph</a> Or may call: (02) 8931-03-12 local 212 / 183



## DEPARTMENT DIRECTORY

### LUZVIMINDA S. KWONG, MD, DPBA, DPBPM, FPSA, FPSO

*Officer-in-Charge*

683 Quirino Highway, Barangay San Bartolome, Novaliches, Quezon City, 1116

(02) 8931-0312 Local: 211

luz.kwong@quezoncity.gov.ph

DEPARTMENT	OFFICER NAME	OFFICE ADDRESS	CONTACT INFORMATION
<b>Hospital Operations &amp; Patient Support Services Division</b>	<b>William Christian V. Reboton MD, MHA, MPM</b> <i>Assistant Hospital Director / City Government Assistant Department Head III</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 185 NDH@quezoncity.gov.ph
Admitting Section	<b>Ms. Mary Rose S. Bartolome</b> <i>Section Head / Storekeeper II</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 105 / 107 NDH@quezoncity.gov.ph
Billing & Claims Section	<b>Mr. Rolando O. Tanglao</b> <i>Section Head / Credit Officer IV</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 104 / 106 NDH@quezoncity.gov.ph
Cash Operations Section	<b>Ms. Jerlie C. Soledad</b> <i>Section Head / Cashier I</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 101 / 102 NDH@quezoncity.gov.ph
Accounting and Finance Section	<b>Cynthia S. Dolor, CPA</b> <i>In-Charge / Accountant</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 184 / 186 NDH@quezoncity.gov.ph
Engineering and Facility Management Section	<b>Engr. Roberto N. Gonzales</b> <i>Section Head / Engineer III</i>	4th Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 146 / 196 NDH@quezoncity.gov.ph
Information Technology Section	<b>Dennis G. Villanueva, CoE</b> <i>In-Charge / Computer Engineer</i>	4th Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 172 / 216 informationtechnology@quezoncity.gov.ph
Personnel Section	<b>Jo-Ann S. Gutierrez, MGM</b> <i>Section Head / Administrative Officer III</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 141 / 213 personnel.ndh@quezoncity.gov.ph

# NOVALICHES DISTRICT HOSPITAL – CITIZEN'S CHARTER



Property & Supply Section	<b>Mr. Alan N. Birog</b> <i>Section Head / Storekeeper II</i>	4th Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 194 propertyandsupply.ndh@quezoncity.gov.ph
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DEPARTMENT	OFFICER NAME	OFFICE ADDRESS	CONTACT INFORMATION
<b>Ancillary Services Division</b>	<b>Hendrick Klein G. Acosta, MD, FPSGS, MPM-HG</b> <i>Division Head / Medical Officer III</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 188 NDH@quezoncity.gov.ph
Dental Section	<b>Cindy May G. Del Mundo, DMD</b> <i>Section Head / Dentist III</i>	NDH Building, Specialty Clinic	8931-0312 local: 118 NDH@quezoncity.gov.ph
Hospital Information Management Section	<b>Ms. Marivic O. Rombaon</b> <i>Section Head / Record Officer I</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 123 NDH@quezoncity.gov.ph
Heart Station Unit	<b>Jasper Feliciano, MD</b> <i>In-Charge / Cardiologist</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 159 NDH@quezoncity.gov.ph
Laboratory Section	<b>Cecilia G. Ortiz, RMT</b> <i>Section Head / Medical Technologist II</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 158 / 111 laboratory.ndh@quezoncity.gov.ph
Medical Social Service Section	<b>Rosario J. Cruz, RSW</b> <i>Section Head / Social Welfare Officer II</i>	NDH Malasakit Center 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 152 socialservice.ndh@quezoncity.gov.ph
Nutrition & Dietetics Section	<b>Nanette S. Rabino, RND</b> <i>Section Head / Dietician II</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 127 / 155 NDH@quezoncity.gov.ph
Pharmacy Section	<b>Olive S. Bartolome, RPh, MPA</b> <i>Section Head / Pharmacist II</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 125 / 126 NDH@quezoncity.gov.ph
Physical Therapy & Rehabilitation Medicine Section	<b>Florence Bries, MD, DPBRM, FPARM</b> <i>Section Head / Medical Officer III</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 108 NDH@quezoncity.gov.ph

# NOVALICHES DISTRICT HOSPITAL – CITIZEN’S CHARTER



Radiology Section	<b>Merlito S. Viray, RRT</b> <i>Section Head / Rad Tech III</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 109 NDH@quezoncity.gov.ph
Respiratory Therapy Unit	<b>Roland M. Panaligan, MD, FPCP, FPCCP, LLM</b> <i>Unit Head / Medical Specialist II</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 150 NDH@quezoncity.gov.ph

DEPARTMENT	OFFICER NAME	OFFICE ADDRESS	CONTACT INFORMATION
<b>Clinical Services Division</b>	<b>Jehiel L. Fabon, MD, FPCP, MPH, MSc</b> <i>Division Head / Medical Officer III</i>	Specialty Clinic 1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 110 NDH@quezoncity.gov.ph
Department of Internal Medicine	<b>Jehiel L. Fabon, MD, FPCP, MPH, MSc</b> <i>Head / Medical Officer III</i>	Specialty Clinic 1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 110 NDH@quezoncity.gov.ph
Department of Obstetrics & Gynecology	<b>Richard C. Jordias, MD, FPOGS, FPSUOG, FPSMFM</b> <i>Head / Medical Specialist II</i>	Specialty Clinic 1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 122 NDH@quezoncity.gov.ph
Department of Pediatrics	<b>Imelda F. Sevilla, MD, FPPS</b> <i>Head / Medical Officer III</i>	Specialty Clinic 1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 188 NDH@quezoncity.gov.ph
Department of Surgery	<b>Hendrick Klein G. Acota, MD, FPSGS, MPM-HG</b> <i>Head / Medical Officer III</i>	Specialty Clinic 1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 188 NDH@quezoncity.gov.ph
Department of Anesthesiology	<b>Cherryl L. Mendiola, MD, DPBA, FPSA</b> <i>Head / Medical Officer III</i>	OR / DR Complex 2nd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 171 NDH@quezoncity.gov.ph
Emergency Room Department	<b>Arnel F. Lim, MD, FPCP</b> <i>Head / Medical Officer III</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 162 NDH@quezoncity.gov.ph

# NOVALICHES DISTRICT HOSPITAL – CITIZEN’S CHARTER



Outpatient Department	<b>Omega Fralix G. Cruz, MD, FPOGS</b> <i>Head / Medical Officer III</i>	Outpatient Department, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 120 OutpatientDepartment.NDH@quezoncity.gov.ph
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DEPARTMENT	OFFICER NAME	OFFICE ADDRESS	CONTACT INFORMATION
<b>Nursing Service Division</b>	<b>Gina N. Mallari, RN, MAN</b> <i>Division Head / Nurse IV</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 181 / 182 NDH@quezoncity.gov.ph
Operating Room, Delivery Room, and Neonatal Special Care Complex	<b>Joy Gualberto, RN, MAN</b> <i>Head Nurse / Nurse II</i>	2nd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 164 / 165 NDH@quezoncity.gov.ph
Obstetrics & Gynecology Ward	<b>Deborah Tosio, RN, MAN</b> <i>Head Nurse / Nurse II</i>	2nd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 168 / 112 NDH@quezoncity.gov.ph
Pediatric Ward	<b>April Girao, RN</b> <i>Head Nurse / Nurse I</i>	2nd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 168 / 112 NDH@quezoncity.gov.ph
Internal Medicine Ward	<b>Ronald Domingo, RN, MAN</b> <i>Head Nurse / Nurse II</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 176 / 177 NDH@quezoncity.gov.ph
Surgery Ward	<b>Helen Bautista, RN, MAN</b> <i>Head Nurse / Nurse II</i>	2nd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 168 / 112 NDH@quezoncity.gov.ph
Central Supply Room	<b>Sammy Jones Durante, RN, MAN</b> <i>Head Nurse / Nurse II</i>	4th Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 192 NDH@quezoncity.gov.ph

SPECIAL UNIT	OFFICER NAME	OFFICE ADDRESS	CONTACT INFORMATION
Continuous Quality Improvement (CQI) Unit	<b>Omega Fralix G. Cruz, MD, FPOGS</b> <i>Head / Medical Officer III</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 Local: 183 / 212 cqj.ndh@quezoncity.gov.ph

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Data Protection Office	<b>Atty. Maria Katerina G. Bustamante, MD, FPPS</b> <i>Data Protection Officer</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 183 / 212 DPO.NDH@quezoncity.gov.ph
Infection Prevention and Control Unit	<b>Justin O. Ho, MD, DPPS, DPIDSP</b> <i>In-Charge / Medical Specialist</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 187 InfectionControl.NDH@quezoncity.gov.ph
Hospital Epidemiology & Surveillance Unit	<b>Christine Marie C. Bucad, MD</b> <i>In-Charge / Medical Officer</i>	3rd Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 187 InfectionControl.NDH@quezoncity.gov.ph
Human Milk Bank Unit	<b>Grace M. Fabon, MD</b> <i>Unit Head / Medical Officer III</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 168 / 112 NDH@quezoncity.gov.ph
Public Health Unit	<b>Arnel Santos, MD</b> <i>Unit Head / Medical Officer III</i>	1st Floor, 683 Quirino Highway San Bartolome Novaliches Quezon City, 1116	8931-0312 local: 162 NDH@quezoncity.gov.ph