

### City Health Office – Rural Health Unit 1 & 2

#### **External Services**





#### 1. Out-patient Consultation (for New Patient)

The out-patient department is designed for the treatment of outpatients, people with health problems who visit the hospital for diagnosis or treatment, but do not at this time require a bed or to be admitted for overnight care

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Office or	City Health Office – RHU 1 & 2					
Division:						
Classification:	Simple					
Type of	G2C					
Transaction:						
Who may avail:	Individuals seeking	medical cons	sultation			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE		
None		N/A				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE		
1. Secure queuing number and provide information for Individual Patient Record (IPR)	Issue queuing number and prepare patient's record	None	3 minutes	Nursing Attendant CHO-RHU I		
2. Proceed to the nurse/midwife for initial assessment	2. Conduct assessment, interview, and vital signs	None	5 minutes	Registered Nurse CHO-RHU I		
3. Proceed to consultation room and submit self for examination	3. Refer for consultations, issuance of prescription and giving follow up instructions	None	30 minutes	Medical Officer III CHO-RHU I		
	TOTAL:	None	38 Minutes			





#### 2. Out-patient Consultation (for Old Patient)

The out-patient department is designed for the treatment of outpatients, people with health problems who visit the hospital for diagnosis or treatment, but do not at this time require a bed or to be admitted for overnight care.

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Office or	City Health Office – RHU 1 & 2				
Division:					
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Individual seeking n	nedical const	ultation		
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
None					
OLIENT OTERO	AGENCY	FEES TO	PROCESSIN	PERSON	
CLIENT STEPS	ACTIONS	BE PAID	G TIME	RESPONSIBLE	
1. Secure queuing	1. Retrieve of	None	3 minutes	Nursing Attendant	
number and	Individual Patient			CHO	
present IPR to	Record (IPR) and				
OPD personnel.	update data				
2. Proceed to the	2. Conduct	None	5 minutes	Nurse	
nurse/midwife for	assessment,			CHO	
assessment.	interview, and vital				
	signs				
3. Proceed to	3. Refer for	None	30 minutes	Medical Officer	
consultation and	consultations,			CHO	
submit self for	issuance of				
examination.	prescription and				
	giving follow up				
	instructions				
	TOTAL:	None	38 Minutes		





#### 3. Animal Bite Treatment

Animal Bite Treatment is done at the Animal Bite Treatment Center (ABTC) to protect those who are at risk of exposure to rabies, i.e. pre-exposure vaccination and prevent the development of clinical rabies after exposure has occurred, usually following the bite of an animal suspected of having rabies, i.e. post-exposure prophylaxis.

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Office or	City Health Office – RHU 1				
Division:					
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Individual seeking medical consultation				
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
None					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Secure queuing number and present Individual Patient Record (IPR) to ABTC personnel.	1. Record and retrieve IPR; assess patient for vital signs and other essential data needed.	None	6 minutes	Nursing Attendant CHO	
2. Wait for your number to be called and proceed to the physician for consultation.	2. Assess, treat and manage based on category then give to nurse for injection	None	10 minutes	Medical Officer CHO	
3. Proceed to the vaccination room for administration of vaccine.	3. Administer vaccine based on treatment for Category II & III patients; Provide health teachings; Give follow-up schedule of succeeding anti- rabies vaccine	None	35 minutes	Nurse CHO	
	TOTAL:	None	51 Minutes		





#### 4. Pre-Natal Care Services (For New Patient)

Women are closely monitored from first week of her conception until the date of her delivery. Patient will undergo History taking, Physical assessment, laboratory examination, tetanus toxoid vaccination and giving medication as needed.

Office or	City Health Office –	Barangay H	ealth Station	
Division:				
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	Pregnant Women			
	REQUIREMENTS		WHERE TO SE	CURE
None		N/A		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Secure queuing number and present Individual Patient Record (IPR) to healthcare worker.	Prepare patient record, interview patient and assign IPR	None	1 minute	Barangay Health Worker BHS
2. Proceed to nurse/midwife for examination.	2. Assess patient's vital signs and obstetric history	None	30 minutes	Nurse Or Midwife BHS
	2.1 Conduct physical examination, fetal heart tone, fundic height.	None		Nurse Or Midwife BHS
	2.3 Conduct consultation/s and prepare appropriate vaccine/s (tetanoid toxoid) and medicine/s.	None		Nurse Or Midwife BHS
	2.4 Advise return for follow-up; refer to OB-GYNE if needed.	None		Nurse Or Midwife BHS
	TOTAL:	None	31 Minutes	





#### 5. Pre-Natal Care Services (For Old Patient)

Pre-natal care Services women is closely monitored from first week of her conception until the date of her delivery. Patient will undergo History taking, Physical assessment, laboratory examination, tetanus toxoid vaccination and giving medication as needed.

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Office or Division:	City Health Office –	ваrangay не	eaith Station	
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	Pregnant Women			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
None		N/A		
CLIENT CTERS	AGENCY	FEES TO	PROCESSIN	PERSON
CLIENT STEPS	ACTIONS	BE PAID	G TIME	RESPONSIBLE
1. Secure queuing number and present IPR to healthcare worker provider	1. Retrieve IPR	None	1 minute	Barangay Health Worker BHS
2. Proceed to nurse/midwife for examination.	2. Assess patient's vital signs and obstetric history.	None	25 minutes	Nurse Or Midwife BHS Nurse Or Midwife
	2.1 Conduct physical examination, fetal heart tone, fundic height.	None		BHS
	2.3 Conduct consultation/s and prepare appropriate vaccine/s (tetanus toxoid) and medicines.	None		Nurse Or Midwife BHS
	2.4 Advise return for follow-up; Refer to OB-GYN if needed.	None <b>None</b>	26 Minutes	Nurse Or Midwife BHS
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#### 6. National Immunization Program (For New Patient)

Originally focused on preventing vaccine – preventable diseases such as Tuberculosis, Measles, Diptheria, Pertusis, Tetanus, Poloimyelitis and Pnuemonia to all 0-59 months children.

Office or	City Health Office -	Barangay He	alth Station	
Division:		0 ,		
Classification:	Simple			
Type of	G2C			
Transaction:				
Who may avail:	Children 0-59 months			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE
None		N/A		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1. Secure queuing number and present Individual Patient Record (IPR) to healthcare worker provider.	1. Record patient's data, interview and issue immunization card number.	None	1 minute	Barangay Health Worker BHS
2. Proceed to immunization room.	2. Perform assessment and record eligible children according to age and immunization record.	None	10 minutes	Nurse Or Midwife BHS
3. Prepare child for immunization and listen to health teaching noting the next immunization schedule.	3. Perform immunization to child, provide health teaching and follow-up schedule for next vaccination.	None	30 minutes	Nurse Or Midwife BHS
	TOTAL:	None	41 Minutes	





#### 7. National Immunization Program (For Old Patient)

Originally focused on preventing vaccine – preventable diseases such as Tuberculosis, Measles, Diptheria, Pertusis, Tetanus, Poloimyelitis and Pnuemonia to all 0-59 months children.

Office	City ( Lip olitic Office	D D	avel la alti- Ot-1	_	
Office or	City Health Office – Per Barangay Health Station				
Division:	0				
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Children 0-59 months				
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
None					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Secure queuing number and present Individual Patient Record (IPR) to healthcare worker provider.	1. Record patient's data, interview and issue immunization card number.	None	1 minute	Barangay Health Worker BHS	
2. Proceed to immunization room.	2. Perform assessment and recording. Identify vaccine to eligible children according to age and immunization record.	None	10 minutes	Nurse Or Midwife BHS	
3. Prepare child for immunization	3. Administer appropriate vaccine, provide health teaching and follow-up schedule for next vaccination.	None	30 minutes	Nurse Or Midwife BHS	
	TOTAL:	None	41 Minutes		



### 8. TBDOTS (Directly Observed Treatment Short Course) Consultation

TBDOTS Program has five elements (a) availability of quality assured sputum microscopy, (b) uninterrupted supply of anti – TB drugs, (c) supervised treatment, (d) patient and program monitoring, and (e) Political will.

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Office or	City Health Office – RHU 1 & 2				
Division:					
Classification:	Simple	· · · · · · · · · · · · · · · · · · ·			
Type of	G2C				
Transaction:					
Who may avail:	Identified tuberculosis patients				
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
None		N/A			
CLIENT CTERS	AGENCY	FEES TO	PROCESSIN	PERSON	
CLIENT STEPS	ACTIONS	BE PAID	G TIME	RESPONSIBLE	
1. Proceed to	1. Receive patient	None	15 minutes	Nurse	
nurse for	and perform initial			CHO	
recording and	assessment.				
self-examination.					
	1.1 Get vital signs.				
	1.2 Record and				
	prepare referral				
2. Proceed to	2. Conduct	None	10 minutes	Medical Officer	
TBDC and submit	consultation and			CHO	
self for	advise patient				
examination	based on				
	diagnosis.				
3. Return to TB-	3. Provide	None	5 minutes	Nurse	
DoTS Clinic for	schedule for			CHO	
instruction	GenXpert and				
	give instructions				
	for proper				
	collection of				
	sputum.				
	TOTAL:	None	30 Minutes		





## 9. TBDOTS (Directly Observed Treatment Short Course) - GeneXpert (New)

TBDOTS Program has five elements: (a) availability of quality assured sputum microscopy, (b) uninterrupted supply of anti – TB drugs, (c) supervised treatment, (d) patient and program monitoring, and (e) Political will.

Office or Division:	City Health Office –	RHU 1 & 2				
Classification:	Simple					
Type of	G2C					
Transaction:						
Who may avail:	Identified tuberculos	Identified tuberculosis patients				
	REQUIREMENTS	•	WHERE TO SE	CURE		
None		N/A				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE		
1. Submit sputum	1. Receive and	None	2 hours	Dental Aide		
specimen to	inspect sputum			I/Smearer		
sputum	specimen.			CHO		
microscopy	445 (			Davidal Aida		
laboratory.	1.1 Perform GeneXpert	None		Dental Aide I/Smearer		
	Examination.			CHO		
	LXamination.			CHO		
	1.2 Prepare result	None		Dental Aide		
	and advise patient			I/Smearer		
	when to come			CHO		
	back to Barangay					
	Health Station					
	(BHS).					
	1.3 Release result	None	1 day	Dental Aide		
	1.5 Release result	INOTIC	i day	I/Smearer		
				CHO		
2. Proceed to	2. Give results	None	5 minutes	Nurse Or Midwife		
Barangay Health	and instructions			assigned per BHS		
Station for the	for initiation date.					
result.						
3. Return to	3. Initiate	None	2 hours	Nurse Or Midwife		
TBDOTS clinic	treatment and			CHO		
	provide health teachings.					
	TOTAL:	None	1 Day, 4			
	I VIAL	110110	Hours and 5			
			Minutes			





# 10. TBDOTS (Directly Observed Treatment Short Course) – DSSM (Follow-up)

TBDOTS Program has five elements: (a) availability of quality assured sputum microscopy, (b) uninterrupted supply of anti – TB drugs, (c) supervised treatment, (d) patient and program monitoring, and I Political will.

Office or Division:	City Health Office – RHU 1 & 2				
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Enrolled tuberculos	is patients			
	REQUIREMENTS		WHERE TO SE	CURE	
None		N/A			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1. Submit sputum	1. Receive	None	1 hour	Dental Aide	
specimen to	sputum and give			I/Smearer	
sputum	instruction to the			CHO	
microscopy	patient.				
laboratory.				5 ( ) 4: (	
	1.1 Smear and	None		Dental Aide	
	stain the			<i>I/Smearer</i> CHO	
	specimen.			СПО	
	1.2 Examine	None		Dental Aide	
	specimen under	1,101.10		I/Smearer	
	microscope.			CHO	
	,				
	1.3 Prepare result	None	1 minute	Nurse Or Midwife	
	and send to BHS.			assigned per BHS	
2. Proceed to	2. Advise patient	None	5 minutes	Nurse Or Midwife	
Barangay Health	to come back for			assigned per BHS	
Station for the	initiation.				
result.	0.0	NI	NI	Norman On Minhorita	
3. Return to BHS for initiation and	3. Conduct	None	None	Nurse Or Midwife	
issuance of	continuous weekly distribution of			assigned per BHS	
medicine.	medications for				
medionie.	succeeding				
	periods of				
	medication.				
	TOTAL:	None	1 Hour and 6		
			Minutes		





#### 11. TBDOTS (Directly Observed Treatment Short Course)

TBDOTS Program has five elements (a) availability of quality assured sputum microscopy, (b) uninterrupted supply of anti – TB drugs, (c) supervised treatment, (d) patient and program monitoring, and (e) Political will.

Office or	City I loolth Office	DIIII 4 0 0			
Office or Division:	City Health Office –	RHU 1 & Z			
Classification:	Simple				
Type of	G2C				
Transaction:					
Who may avail:	Enrolled tuberculos	is patients			
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE	
None		N/A			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
1.Present PPD request to TB DOTS Clinic	1. Validate request and proper initial assessment.	None	5 minutes	<i>Midwife</i> CHO	
	1.1 Record and provide instruction, refer to RHU I	None		Midwife CHO-RHU I	
	1.2 Administer PPD and advice client when to come back for reading.	None	5 minutes	Nurse CHO-RHU I	
2. Proceed to Barangay Health Station for the	2. Read the result of PPD	None	2 minutes	Nurse CHO	
result.	2.1. If positive, submit patient to BHS for treatment and instructions.	None		Nurse Or Midwife assigned per BHS	
	2.2 If negative, submit patient to BHS for Isoniazid Preventive Therapy per doctor's order.	None		Nurse Or Midwife assigned per BHS	
	TOTAL:	None	12 Minutes		