

San Carlos City Hospital



Admission of Patients

Hospital admission involves staying at a hospital for at least 24 HOURS or more

Office or Division:	SCCH Medical Section								
Classification:	Simple	Simple							
Type of Transaction:	G2C – Transacting Public								
Who may Avail:	All								
CHECKLIST OF	REQUIREMENTS	WHERE TO SECURE							
OB Patient – Referral	Form/Mother-Child (MC)	Barangay	Health Center						
Booklet									
Hospital ID		SCCH OPD)						
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE					
1.Proceeds to	Receives patient, records		5 minutes	ER Nurse/Attendant					
Emergency room	information, take vital								
Present requirements	signs								
Provides information	Fills out patient's chart,								
	issue new hospital ID								
	(new patient), give								
	watcher's ID, ask for								
	referral form	None							
	Take medical history, perform physical exams, writes medical order, issues laboratory/x-ray request, prescribe medications and other medical supplies		10 minutes	ER Physician					
2.Submits to physical	Performs needed		20 minutes	ER Physician					
assessment,	treatment			ER Nurse/Attendant					
laboratory/x-ray	Administer medication								
exams, presents	and other medical	none							
prescription to	supplies	none							
pharmacy	Carry out medical orders								
	Transport patient to room assign								
3.Occupies the room	Receive patient		5 minutes	Ward Nurse					
	endorsement								
	TOTAL:		40 minutes						
	End of Tra	nsaction							



Consultation Service

A service that involves communication between two or more doctors or other professionals to evaluate the nature and progress of an illness or disease in a particular patient in order to establish a diagnosis, prognosis or recommendation for treatment.

Office or Div	Division: SCCH MEDICAL Section								
Classificatio	n:	Simple							
Type of Trar	nsaction:	G2C – Transacting Pub	lic						
Who may Av	vail:	All							
СН	IECKLIST OF R	EQUIREMENTS	WHERE TO SECURE						
	old and new o		SCCH OPD						
	- Referral Forr	n/Mother-Child Bookle		alth Center					
CLIENT STEPS	AGE	NCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE				
1.Request for consultati on	Make new C patient) Takes vital si and records. to respective Dental: Dent Prenatal: Far Dispensary: I Admission: E Consultation TB DOTS: TB	al Clinic nily Planning Clinic minor operation mergency Room : OPD Clinic Dots Clinic	none	10 minutes	OPD Personnel				
2.Receives chart, submits to needed care	Performs necessary assessments. Prescribe medicines. Issues laboratory/x-ray request. Instructs to return to respective clinics when lab/x-ray result in. Instructs to pay fee needed procedure		none	20 minutes	Respective Clinic Physicians (Dental/Dispensary)				
3.Pays fee and present to requesting clinics	procedure	R, performs needed	SCC Resident/ Non-SCC Resident Consultation free/100	2 minutes	Respective Clinic Physician/Nurse				
		TOTAL:		36–56					
				minutes					
		End of	Transaction						



City Indigency Program

City Indigence program is a service to avail of financial assistance from charitable institutions, government and non-government organizations and institutions.

Office or Division:	SCCH Social Service Sec		5411241011			
Classification:	Simple					
Type of Transaction:	G2C – Transacting Publ	G2C – Transacting Public				
Who may Avail:	All					
CHECKLIST OF R	EQUIREMENTS WHERE TO SECURE					
Resident Certificate (CED	ULA)	Baran	gay Hall			
Birth Certificate (minor)		Local (Civil Registry	,		
Voter's ID		COME	LEC			
Marriage Contract		Local (Civil Registry	1		
Medical Certificate of Dis	ability (age over 21)	City H	ealth Office			
Certificate of Indigence		Baran	gay Capitan			
CLIENT STEPS	AGENCY ACTIONS	5	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Requests Social Worker personnel for evaluation to qualify Indigence Assistance With the requirements, discharge order, statement of account	Receives and checks completeness of requirements, interviews for screening and evaluates patient who seek medical and surgical care Let patient sign and other nospital staff Records the bill of the Patient and instructs client to go to the Mayor's Office for Approval. If Bill exceeds P5,000.00 refers to: Women and Children's Affair, Senior Citizen's Affairs, Congressional Indigence Fund, AICS (DSWD), MAP (DOH).		none	5 minutes	Social Worker	
2.Proceeds to the Mayor's office for approval of the Application for hospitalization form or	Approves the Indigence Application Instruct to go back to He		none	5 minutes	City Mayor's Office	



nt		
none	2 minutes	Billing Personnel
AL:	20 minutes	
	none nt none	none 3 minutes nt none 2 minutes



Billing Process for In-Patients (PHILHEALTH)

Office or Division:		SCCH Finance Section		·			
Classification:		Simple					
Type of Transaction	n:	G2C – Transacting F	Public				
Who may Avail:		Those with Qualifie	d Phil	health Insurance	Benefits		
CHECKLI	CHECKLIST OF REQUIREMENTS WHERE TO SECURE						
Phil health ID and the Patient/Client i		documents certifying I health Member	g that	that Phil health Office (market 2 nd Floor)			
Physician's Dischar	ge Ord	er		Station Ward			
CLIENT STEPS	A	GENCY ACTIONS	FEE	S TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1.Submits Phil health requirements and	requi Physi	ves Phil health rements and cian's order for a			2 minutes	Phil health Personnel	
Physician's order for a procedure Submits for a procedure		edure ucts to go to SCCH lealth office		none	Procedure is variable	Surgeon Dispensary Nurse	
2.Completion of Phil health Claim Form	and s	CD-10 distribution igning ucts to process bill bay		none	5 minutes	Respective Hospital Sections Phil health personnel	
3.Pays account	Rece	Billing Account eive payment and es OR	Exces	ss to Phil health Coverage	5 minutes	Billing Personnel Cashier	
4.Presents the OR to Billing Section	Give	the Gate Pass		none	1 minute	Billing Personnel	
		TOTAL:			13 minutes		
		End	of Tra	nsaction			



Billing Process for In-Patients (Point of Service)

Office or Division:	SCCH Finance Section						
Classification:	Simple	Simple					
Type of Transaction:	G2C – Transacting Public	G2C – Transacting Public					
Who may Avail:	Those with Qualified Phil	l he	alth Insurance	Benefits			
CHECKLIST O	F REQUIREMENTS		W	HERE TO SECU	IRE		
	r documents certifying that	Ph	il health Office	(Market 2 nd Fl	oor)		
the Patient/Client is a F	Phil health Member						
Physician's Order for N	linor Operation	-	equesting Docto				
Hospital ID		SC	CH Out Patient	Section			
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE	PROCESSIN	PERSON		
CEIEIT STELS			PAID	G TIME	RESPONSIBLE		
1.Submits Phil health	Receives Phil health			2 minutes	Phil health		
requirements and	requirements/Physician's				Personnel		
Physician's	procedure order and writes	5					
procedure order	surgical memo		none				
				Procedure	Surgeon		
Submits to procedure	Instructs to go to SCCH Phil health Office			is variable	Dispensary nurse		
2.Completion of Phil	For ICD-10 distribution and			E minutes			
health Claim Form	signing			5 minutes	Phil health		
			none		personnel		
	Instruct to go to Billing						
3.Proceeds to Billing	Process bill and instructs to		Charge to	2 minutes	Billing		
	рау		Point of		Personnel		
Pay account			Service				
	Receives payment		Service	2 minutes	Cashier		
	TOTAL			l minutes exclu	-		
				ration of proce	edure (variable)		
	End of Tra	ans	action				



Billing Process for Out-Patients (PHILHEALTH)

Office or Division: SCCH Finance Section						
Classification:		Simple				
Type of Transaction:		G2C – Transacting Publ	ic			
Who may Avail:		Those with Qualified Pl		health Insurance	Benefits	
		REQUIREMENTS			WHERE TO SEC	URE
Phil health ID and other documents certifying that Phil health Of					ce (Market 2 nd	Floor)
the Patient/Client is a	a Phi	health Member				
Physician's Order for	Min	or Operation		Requesting Doc	tor	
Hospital ID				SCCH Out Patie	nt Section	
CLIENT STEPS		AGENCY ACTIONS	F	EES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE
1.Submits	Per	forms Minor operation			2minutes	
requirements and physician's order for minor operation Submits for operation 2.Completion of	me Inst hea	l writes surgical morandum ruct to go to Phil Ith ICD-10 distribution		none	Duration of procedure or operation is variable 5 minutes	Surgeon Dispensary Nurse Phil health
Phil health Claim Form	and Inst	l signature ruct to proceed to ng and pay		none	2 minutes	Personnel Billing Personne
3.Pays account		eives payment and les OR	d	Excess bill after eduction of Phil nealth coverage	5 minutes	Cashier
4.Present OR to Dispensary Room	pre me Set	eives OR and releases scription of dication next schedule of ck-up		none	5 minutes 2 minutes	Phil health Personnel Billing Personnel
		TOTAL			21 minutes e the duration (variable)	-



Billing Process for Out-Patients (Point of Service)

Office or Division:	Office or Division: SCCH Finance Section								
Classification:	Simple	Simple							
Type of Transaction:	G2C – Transacting Pub	G2C – Transacting Public							
Who may Avail: Those without Qualified Phil health Insurance Benefits									
CHECKLIST OF F	REQUIREMENTS	WH	ERE TO SECURE						
Phil health Form 1 and Fo	orm2	Billing Office							
Physician's Order		Doctor who request	ed						
Phil health Claim Form 1	and 2	Billing Office							
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE					
1.Submits Physician's discharge order with complete clearance Submit for minor procedure/operation	Provides Physician Discharge order and clearance Performs procedure and writes surgical memorandum Instructs to go to Phil health	none	15 minutes Duration of procedure or operation is variable	Surgeon Dispensary Nurse					
2.Pay the account and submits order to pay	Receives payment	Fees varies depends on the surgical procedure Charge to Point of Service	3 minutes	Cashier					
3.Presents official receipt and wait for the release of gate pass	Releases Gate Pass	none	2 minutes	Billing Staff					
	TOTAL: 7 minutes exc		f operation (var	iable)					
	End of	Transaction							



PHILHEALTH Refund Procedure

An unclaimed refund is a benefit payment that must be reimbursed by the accredited hospital to the member for a specific confinement period. The refund results from either an under-deduction or non-availment of benefits at point-of-service due to various circumstances at the time of hospitalization, and these have remained unclaimed by the members for some time now. The unclaimed refunds have been retrieved by Phil Health from the accredited hospitals for immediate return to the concerned members.

Office or Division:	SCCH Phil Health Section						
Classification:	Simple						
Type of Transaction:	G2C – Transacting Public						
Who may Avail:	Phil health Members						
CHECKLIST OF F	REQUIREMENTS		V	WHERE TO SECUE	RE		
Proof of Refund Notice/Tr	ansmittal for refund	Phil	health				
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Present the refund notice and date of confinement	Receives the transmittal and request a photocopy	,	none	5 minutes	-		
2.Photocopy the transmittal and returns it back	Receives the photocopy transmittal and make a Disbursement Vouched for refund duly signed by the 1. signatories		none	5 minutes	Phil health Personnel		
Accepts the disbursement voucher Proceeds to City Hall to claim refund	Give the disbursement voucher and request the member to sign the logbook Instruct to go to City Hall to claim refund			5 minutes	City Hall Accounting Office personnel		
	TOTAL:			10 minutes			
	End of Tra	nsac	tion				



Request for Medical Certificate

A written statement from a or another medically qualified <u>health care provider</u> which attests to the result of a <u>medical examination</u> of a patient. It can serve as a documentation that an employee is unfit for work or evidence of a health condition.

	it di	an employee is unfit for work or evidence of a health condition.						
Office or Division:		SCCH Medical Records Section						
Classification:		Simple						
Type of Transaction:		G2C – Transacting F	Publi	С				
Who may Avail:		All						
CHECKLIST	OF R	EQUIREMENTS		W	HERE TO SECUR	E		
Present any Governm	nent	-						
Medico-legal: Notice	e fron	n police and subpoer	Police Departmer	nt				
Medical Record: Req	uest	from the Physician		Doctor's request				
CLIENT STEPS	А	GENCY ACTIONS	F	EES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Submits requirements	sub req Ins	eives and checks mitted uirements structs to pay at e Cashier			2 minutes	Records Personnel		
2.Pays fee		eives payment and es Official Receipt	SCC Resident/Non- SCC Resident Medical Certificate –75/100 Medico Legal – 100/125		2 minutes	Cashier		
3.Presents OR to Record Section Returns as scheduled (after a week) or If to wait an hour, accepts a copy and signs log book Leaves one (1) copy and signs the logbook	Mea a.) I retr Cha b.) (Ret Refe not retu afte (de)	eives OR: dical Certificate: n-patient – rieves Patient's art Dut-patient- rieves OPD record. ers to Physician for es. Instruct to urn an hour or er a week pending on the e of record)		none	1 Hour (Newly admitted) 3 days (Admitted more than 4 months)	Records Personnel Record Personnel		



	Medico-legal:		20 minutes						
	Retrieves record from								
	ER								
	Instructs to wait while								
	encoding details								
	Release 3 medico-								
	legal copies								
	Describe to technol								
	Records to logbook								
	and files one copy								
4.For	returned Receives photocopied		2 minutes	Record					
Authentication:	document		2 minutes	Personnel					
Photocopy the	document			reisonner					
document									
Pays for	Issues Official receipt	Authentication fee	2 minutes	Cashier					
authentication		(Certified True Copy)							
		P75.00/page							
Presents official	Certifies								
receipt	authentication of		5 minutes	Records					
	photocopy and signs.			Personnel					
	Releases copy and								
	gets one for file.								
	TOTAL		Medical certific						
	1 hour and 4 minutes								
	up to 3 days Medico								
	Legal 24 minutes Authentication 9 minutes								
	Fnd	of Transaction	Authentication	minutes					
	End	or mangaction							



Request for Birth Certificate

A vital record that documents the birth of a person

Office or Division:	SCCH Medical Records Section						
Classification:	Simple						
Type of Transaction:	G2C – Transacting Public	G2C – Transacting Public					
Who may Avail:	All						
	REQUIREMENTS	۱	WHERE TO SECUR	RE			
If Married: Marriage Con		Local Civil Regis	stry (LCR)				
If Not Married: Birth Cert		LCR					
If Late Request: (More certificate and Birth Cert	than a month) Residence	e LCR					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1.Secures Draft Form and Blank Form of Birth Certificate (BC) at the Delivery Room (DR)	Fills out a Draft form while requester is interviewed Instruct to pay fee Blank and Draft Form of Birth Certificate	none	10 minutes	Delivery Room Personnel			
2.Pays the Fee	Receives payment and Issue Official Receipt (OR) Instructs to go back to DR	P75.00 (SCC Residents) P75.00 (outside SCC)	2 minutes	Cashier			
3.Presents the OR Verify Correctness of	Receives the OR and makes the Final Birth certificate Instruct to verify		5 minutes	Delivery Room Personnel;			
information and Signs Final Birth Certificate	correctness	none	2 minutes	Records Personnel			
Receives the Final Birth Certificate and submit BC to LCR	Releases copy and leave a file copy Registers BC		(Refer to LCR)	Local Civil Registrar's Office			
	TOTAL		19 minutes				
		ansaction					



Request for Death Certificate

A document issued by a medical practitioner certifying the deceased state of a person or that declares the date, location and cause of a person's death

	uute,	ale, location and cause of a person's death					
Office or Division:		SCCH Medical Records Sec	tion				
Classification:		Simple					
Type of Transaction	า:	G2C – Transacting Public					
Who may Avail:		All					
CHECKLIS	ST OF I	REQUIREMENTS		WHERE TO SECUR	E		
Any government ID	for Ide	entification	S-				
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Inform Records Section the need for issuance of Death Certificate (DC)	and v	/ that diagnosis is complete erify other information ict Patient to go to Phil h for billing process	none	10 minutes	Records Personnel		
2.Complete billing process and issuance of gate pass	gate j Make	outes the bill and releases bass the DC and have it signed e Physician	none	40 minutes	Billing personnel Records Personnel Physician		
3.Pay the fee Presents OR and gate pass	Receive payment and issue OR Receives OR and gate pass Attach gate pass to DC Releases DC to the informant Get one (1) copy file and log		Death Certificate fee: P75.00 (SCC and Non-SCC residents)	2 minutes	Cashier Records Personnel		
4.Proceed to Funeral Homes, City Health, Local Civil Registrar	-		none	Funeral Homes City Health Office Local Civil Registrar	none		
TOTAL 36 – 56 minutes							
End of Transaction							



Request for Patient's Record (Out-Patient)

Medical practices frequently receive medical record release requests from multiple sources, including subpoenas, attorney letters, and patients themselves.

Classification: Type of Transaction: Who may Avail: CHECKLIS Patient written requ CLIENT STEPS	T OF I	All	Public						
Who may Avail: CHECKLIS Patient written requ	T OF I	G2C – Transacting All	Public						
Who may Avail: CHECKLIS Patient written requ	T OF I	All		ansaction: G2C – Transacting Public					
Patient written requ				il: All					
		REQUIREMENTS			WHERE TO SEC	CURE			
CLIENT STEPS	est			Personal					
	Α	GENCY ACTIONS		S TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE			
1.Request for Out Patient's record for Disability Claim to GSIS/SSS/Insuranc e Claim		Receives request Instructs to pay fee		ione	1 minute	Records Personnel			
2.Pays to the Cashier	issue (OR) Instr	Receive payments and issues Official receipt (OR) Instruct to go back to record Section		henticati on: .00/page and Non- esidents)	2 minutes	Cashier			
3.Shows OR to Record Personnel	retri Instr	Receives OR and retrieves Chart Instructs to return as scheduled		none	1 hour – newly admitted 3 days – admitted more than 4 months	Record Personnel			
4.Returns to claim the document	docu	ocopy the iment and seal ified true copy	none		5 minutes	Record Officer			
TOTAL: Newly admitted: 1 hour and 8 minutes 4 months and above admission :3 days End of Transaction									



Referral of Patients

A process in which a health worker at a one level of the health system, having insufficient resources (drugs, equipment, skills) to manage a clinical condition, seeks the assistance of a better or differently resourced facility at the same or higher level to assist in, or take over the management of, the client's case. Key reasons for deciding to refer either an emergency or routine case include: *to seek expert opinion regarding the client *to seek additional or different services for the client *to seek admission and management of the client *to seek use of diagnostic and therapeutic tools

Office or Division:	SCCH Medical Section	SCCH Medical Section					
Classification:	Complex						
Type of Transaction:	G2C – Transacting Public						
Who may Avail:	All	All					
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE				
Phil health Form 1 and	l Form2	Billing Office					
Physician's Order		Doctor who requested					
Phil health Claim Form and 2			Billing Office				
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		

CLIENT STEPS	AGENCY ACTIONS	BE PAID	TIME	RESPONSIBLE
1.From the ER:	Advise patient and patient's	None	2 minutes	Attending
Receives	watcher about the referral			Physician
information on medical advice for	order.			
referral to another institution	Admits the patient and records in the patient's chart.		5 minutes	Admitting clerk
	Discharge admitted patient to be referred. Instructs to wait for the Ambulance Nurse.		5 minutes	Attending Physician
	Fills out the referral form and records in the out-going referral registry logbook.		2 minutes	ER/Ambulance Nurse



2.From the Station	Advises patient and patient's	None	2 minutes	Attending
Ward:	watcher about the referral			Physician
Receives	order.			
information on				
medical advice for	Discharge patient to be referred			
referral to another	and records in the patient's			
institution	chart.			
	Prepares clearance slip and		10 minutes	Attending
Waits and accepts	instructs for signing to			Physician
Clearance form	respective hospital areas.			
			20 minutes	Station Ward
Proceeds to	Instructs the patient's watcher			Nurse
respective hospital	to claim gate pass from the			
areas for clearance	Billing Section after all is cleared			
and lastly claims the	and return to Station ward.			
Gate Pass				
	Gives the gate Pass. Instructs to			
	wait for the Ambulance nurse.			
				Billing Section
	Fills out the referral form and			Staff
	records in the out-going referral			
	registry logbook.			
*For emergency	Presents promissory note	Signed		
need to transfer:	signature.	Promiss		
Billing process can		ory note		
be delayed by		,	3 minutes	Billing Staff
signing a promissory				
note				
	* NOTE:			
	Brings the referral form to the			
	Referred Institution and			
	submits to the Medical			Ambulance
	Personnel.			Nurse
	Claims Return Slip for hospital			
	сору			
	TOTAL From ER:	14 n	ninutes From th	e Station
		war	d:32 minutes Fo	r Emergency
		Trar	nsfer: 15 minute	S
	End of Transac	tion		



Pharmacy Service

A health care service, which provide medications for the hospitalized patients. The service comprises the art, practice, and profession of choosing, preparing, storing, compounding, and dispensing medicines, and advising healthcare professionals and patients on their safe, effective and efficient use.

Office or Division: SCCH Ancillary Section							
Classification:	Simple	Simple					
Type of Transaction:	G2C – Transacting Publ	ic					
Who may Avail:	All Admitted Patients						
CHECKLIST OF F	REQUIREMENTS		W	HERE TO SECURE			
Physician's Order		Docto	r who reque	sted			
CLIENT STEPS	AGENCY ACTIONS	;	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.For In-Patient Transaction: Present Prescription to the Pharmacy Accepts the medicine/s and proceed to Station Ward	Receives the prescription and encodes the medicine/s requested Dispenses the medicine/s and instruct to give to the Station		none	5 minutes	Pharmacy Staff Pharmacist		
2.For Cash transaction: Present Prescription to the Pharmacy Pays to the Cashier and returns to Pharmacy Accepts the medicine/s	Ward Nurse Receives the prescription and encodes the medicine/s requested. Releases the order of payment and instruct to proceed to Cashier. Receives order of payment and issues official receipt and instructs to return to pharmacy Dispenses the medicine/s		Price of medicine /s varies	5 minutes	Pharmacy Staff Cashier Pharmacist		
TOTAL 5 minutes each transaction							
	End of Transaction						



Dispensary Services

A place for dispensation of free or low-cost medical treatment.

Office or Divi			SCCH Ancillary Section /Finance Section					
Classification	:	Simple	Simple					
Type of Trans	action:	G2C – 1	C – Transacting Public					
Who may Ava	ail:	All and	those without Qua	lified Phi	I health Insurance Be	nefits		
СН	ECKLIST OF	REQUIRE	MENTS		WHERE TO SEC	CURE		
Hospital ID				SCCH Ou	ut Patient Section			
CLIENT STEPS	AGEN ACTIO	NS	FEES TO BE P	AID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Go to OPD	Retrieve O chart, take record vita and compla	and I sign			5 minutes	OPD Nurse		
2.Proceed to Dispensary Room and submits for surgical procedure	Evaluate Pa for Surgica Performs necessary s procedure	atient I needs			2 minutes Variable time: Surgical Consultation- 5mins Casting – 30 mins Removal of cyst- 5 mins I&D – 30 mins Removal of cast- 10 mins Plain Dressing only- 5 minutes Insertion of Urinary Catheter 15 mins	Surgeon Dispensary Nurse		
3.Pay necessary surgical fees	Receives payment a issue Offici Receipt (O	al	SCC Rate / Non-Se Consultation – fre Removal of cyst – rate Removal of cast – 100/150 Dressing, large – I&D – PHIC Rate/ Rate	ee/100 • PHIC •	2 minutes	Cashier		



		Casting – PHIC Rate/					
		PHIC Rate					
		Insertion Urine Cath					
		150/200					
4.Present	Receives OR and						
OR to	releases						
Dispensary	prescription of			Diamanaamu			
Room	medication		5 minutes	Dispensary			
	Set next			Personnel			
	schedule of						
	check-up						
	TOTAL		14 Minutes plus				
	Surgical procedure time (variable)						
End of Transaction							



Laboratory Services

A hospital laboratory performs clinical pathology tests that are carried out on clinical specimens to obtain information about the health of a patient to aid in diagnosis, treatment, and prevention of disease.

Office or Division	n:	SCCH Ancilla	CH Ancillary Section			
Classification:		Highly Techn	ly Technical			
Type of Transact	ion:	G2C – Transa	nsacting Public			
Who may Avail:		All				
CHECK	LIST OF	REQUIREMEN	TS	W	HERE TO SECUR	E
Physician's Reque	est Form	/ Prescription		Doctor who requ	ested	
Official Receipt				SCCH Cashier		
Blood Donor Card	d and Blo	od Certificatio	on Form	SCCH City Health		
CLIENT STEPS	AGEN	CY ACTIONS	FEES	TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Presents Physician's laboratory request	Receives the Physician's laboratory request Instruct to proceed to Cashier			none	2 minutes	Laboratory Staff
2.Presents the order of payment Pay the bill of the laboratory test fee	of payr issues o receipt	t to return	SCC RATE / NON-SCC RESIDENT RATE CBC-120/130 Lipid Profile 600/650 Urinalysis 80/85 SGPT 150/160 Stool Exam 50/60 Triglyceride 150/160 Pregnancy Test 100/110 TROPI – 600/650 FBS 130/140 Drug Testing Kit 300/350 Newborn Hearing Screening - PHIC RATE+150 / PHIC RATE +2200		2 minutes	Cashier
3.Submits to laboratory test Returns for the result					5 minutes 30 minutes	Med Tech



4.Request for	Receives Blood	2 minutes	Laboratory		
Blood:	Donor's card and		Staff		
Present blood	Blood Certification				
certification	Form issued by City				
form and blood	Health Office				
donor card		5 minutes			
	Releases blood for				
	in-patient to				
	Station Ward Nurse				
	TOTAL 46 minutes				
End of Transaction					



Dental Services

The Dental Section provides dental consultation, oral examinations, preventive, promotive, curative dentistry.

promotive, curative dentistry.								
Office or Division:	SCCH Dental Section							
Classification:		Highly Technical						
Type of Transaction	:	G2C – Transacting Public	ting Public					
Who may Avail:		All						
CHECKLIS	T OF I	REQUIREMENTS	WHERE TO SECURE					
Hospital ID (old and	new d	clients)	SCCH OPD					
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE	PROCESSING	PERSON			
			PAID	TIME	RESPONSIBLE			
1.OPD Section:		ieves OPD Chart and		5 minutes				
Requests for		or hospital ID (old						
dental	•	ents).						
consultation and		ucts to have vital signs						
present hospital ID		n and release						
(if with hospital		ultation form.		7 minutes	OPD Personnel			
ID)		ucts to proceed to						
Submits for vital	dent	al Clinic						
signs taking	الم ما	wate to have witel signs						
If no ID (now		ucts to have vital signs						
If no ID (new patient), request		ng and release sultation form.						
•								
hospital ID		ucts to proceed to al clinic.						
2.Gives the		orms dental		10 minutes				
consultation form		ssment and advices		10 minutes				
to dental		al procedure			Dentist			
personnel		ucts to pay dental			Dental staff			
Submits to dental		edure and anesthesia			Dentarotan			
consultation	•	ication						
3.Pays the dental		eives payment and	SCC/Non-SCC	2 minutes	Cashier			
extraction		es Official receipt (OR)	Residents					
Pays the prescribe		eives payment and	Cleaning					
medicines	issue	es OR	350/400					
	Instr	ucts to claim the	Extraction					
	med	icine at the Pharmacy	200/250	2 minutes	Pharmacy			
	Rece	eives the Official receipt	Filling 300/350		Personnel			
	and	checks	X-ray 300/350					
Presents the	Retu	irns the OR						
Official receipt	Disp	enses the medicines						



4.Presents the Official receipt Submits the medicine	Checks the official receipt. Accepts the medicine. Administer the medicines. Performs the dental procedure	10-20 minutes (depends on the dental procedure and the effect of the anesthetic medication)	Dental Physician			
TOTAL 36 – 56 minutes						
End of Transaction						



Cashier Services

A service in the hospital that is responsible for receiving and disbursing money.

Office or Division:	SCCH Finance Section						
Classification:	Simple						
Type of Transaction:	G2C – Transacting Publ	G2C – Transacting Public					
Who may Avail:	All						
CHECKLIST OF	REQUIREMENTS		V	VHERE TO SECUE	RE		
Prescription or Order of Payment			Requesting Office				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID		PROCESSING TIME	PERSON RESPONSIBLE		
1.Present order of payment and pays the fee	Receives order of payment. Receives payment and issues OR.	none		2 minutes	Cashier (Finance)		
	TOTAL 2 Minutes						
End of Transaction							



Radiology Services

It is the facility in the hospital where radiological examinations of patients are carried out, using the X-ray to diagnose and treat diseases seen within the body

Office or Division: SCCH Ancillary Section								
Classification: Highly Technical			l					
Type of Transaction: G2C – Transacti			ng Public					
Who may Avail: All								
CHECKLIST	T OF I	REQUIREMENTS		WHERE TO SECURE				
Physician's Request I	Form,	/ Prescription		Doctor who requested				
Order of Payment				SCCH Radiology Clinic				
CLIENT STEPS	AGI	ENCY ACTIONS	FEES TO	O BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
1.Presents Physician's X-ray request	Phys requ Inst	eives the sician's X-ray lest none cruct to ceed to Cashier		one	2 minutes	Radiology Staff		
2.Presents the order of payment Pay the bill of the X-ray examination fee	Rece of pa issue rece Inst	vives the order ayment and es official	RESIDEN Chest A- Abdomen 375/425 Skull AP- Shoulder 220/270 Cervical S 690/740	P 220/270 n AP- 310/360	2 minutes	Cashier		
3.Submits to X-ray Exam Returns for the result	exan	ducts X-ray nination ases result	none		15 minutes 30 minutes	Radiology Technician		
		TOTAL	I		49 minutes			
End of Transaction								



Ambulance Service

A medically equipped vehicle which transports patients to treatment facilities, such as hospitals. Typically, out-of-hospital medical care is provided to the patient.

Office or Division: SCCH Admin Section								
Classification:	Simple							
Type of Transaction:	G2C – Transacting Public							
Who may Avail:	All	All						
CHECKLIST OF REQUIREMENTS				WHERE TO SECURE				
Clearance Slip/Form (in-pa	atient)		SCCH Statio	on Ward			
Order of payment (fro	om t	he ER)		ER Staff				
CLIENT STEPS	А	GENCY ACTIONS	ICY ACTIONS FEES TO BE PAID		PROCESSING TIME	PERSON RESPONSIBLE		
1.Presents Clearance Slip/Order of Payment Pays the fee	/ or Rec	epts clearance slip der of payment eives the payment and issues official eipt	SCC Amb	SCC dent/Non- Resident ulance Fee 00/3,900	2 minutes	Cashier		
2.Presents Official Receipt	rece	cks the official eipt and prepares oulance for travel			2 minutes	Station Ward Nurse (in-patient) ER Nurse (For ER patient)		
3.Fills out client satisfactory ambulance survey	clie	uest to fill out nt satisfactory pulance survey			2 minutes	Ambulance Nurse		
	TOTAL		6 minutes					
End of Transaction								



Triage Service

The sorting of and allocation of treatment to patients according to the urgency of their need for care. This service is intended for receiving or preparing to receive patients with suspected or confirmed coronavirus disease 2019 (COVID-19).

SCCH is providing inpatient or outpatient service, thus, this will guide in the implementation of procedures at the triage area that can be effective at preventing transmission of SARS-CoV-2 (COVID-19 virus) to patients and healthcare workers (HCWs).

Office or Division	n:	SCCH Medical Section							
Classification:		Complex							
Type of Transacti	ion: G2C – Government to Citizen								
Who may Avail:		All (No Entry without pass	sing	this area).					
		Those who seeks consulta	ation	and admis	sion only can en	ter the hospital			
		compound.							
		No Visitors Allowed during COVID 19 Pandemic.							
		Strictly 1 watcher per patient only.							
CHECK	LIST OF	REQUIREMENTS			WHERE TO SEC	URE			
Face Mask (NO M		,	Per	rsonal					
Identification Car	d (any w	vith name and address)	An	y governm					
CLIENT STEPS		AGENCY ACTIONS		FEES TO	PROCESSING	PERSON			
				BE PAID	TIME	RESPONSIBLE			
1.Submit to		ns triage protocol: footbath	h,						
triage protocol		anitizer/alcohol,			2 minutes	Triage Staff			
	-	rature check, and social							
Submits for	distanc	ing be strictly observed		none					
further medical									
check-up		presenting symptoms,			10 minutes	Triage Physician			
Stays at the		te the person and refer to							
waiting area	-	Physician							
2.Submit to		st to show ID and answer							
answering		rdized triage questionnaire	:		a	- · · · ·			
questions and		Il determine if the patient		none	2 minutes	Triage Nurse			
shows ID		the COVID-19 case definitio	on						
3.Logs in the	-	st to log-in and indicate							
visitor's log- book	purpos	e							
Proceeds inside	Appro	ves entrance inside the		none	2 minutes	Triage Staff			
the hospital	hospit								
		TOTAL	I		6 minutes				
End of Transaction									



Triage Service

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SCCH is providing inpatient or outpatient service, thus, this will guide in the implementation of procedures at the triage area that can be effective at preventing transmission of SARS-CoV-2 (COVID-19 virus) to patients and healthcare workers (HCWs).

Office or Division:	SCCH Medical Section	SCCH Medical Section						
Classification:	Complex	Complex						
Type of Transaction:	G2C – Government to Citi	G2C – Government to Citizen						
Who may Avail:	All (No Entry without pass	All (No Entry without passing this area).						
	Those who seeks consulta	ation	and admiss	sion only can en	ter the hospital			
	compound.							
	No Visitors Allowed durin	No Visitors Allowed during COVID 19 Pandemic.						
	Strictly 1 watcher per pat	ient o	only.					
CHECKLIST	OF REQUIREMENTS			WHERE TO SEC	URE			
Face Mask (NO MASH	(NO ENTRY)	Per	sonal					
Identification Card (a	ny with name and address)	Any	/ governme	nt ID				
CLIENT STEPS	AGENCY ACTIONS		FEES TO	PROCESSING	PERSON			
			BE PAID	TIME	RESPONSIBLE			
1.Submit to triage	Performs triage protocol:							
protocol	footbath, hand sanitizer/alcoh			2 minutes	Triage Staff			
	temperature check, and social							
	distancing be strictly observed	1	none					
Submits for further	if with an experiments are the			10 minutes	Triago Dhusisian			
medical check-up	if with presenting symptoms, separate the person and refer	t 0		10 minutes	Triage Physician			
Stays at the	Triage Physician	10						
waiting area 2.Submit to	Request to show ID and answe)r						
answering	standardized triage questionn							
questions and	that will determine if the patie		none	2 minutes	Triage Nurse			
shows ID	meets the COVID-19 case		none	2 minutes	indge ivanse			
	definition							
3.Logs in the	Request to log-in and indicate							
visitor's log-book	purpose							
-								
Proceeds inside the	Approves entrance inside the		none	2 minutes	Triage Staff			
hospital	hospital							
	TOTAL			6 minutes (n	o symptoms)			
End of Transaction								