9. HEALTH OFFICE EXTERNAL SERVICE

A. ANIMAL BITE TREATMENT



Clerk (MHO)

Nurse on Duty

(MHO)

Patient needing post- exposure prophylaxis for rabies

3. Interview the

4. Record and

initiate treatment

TOTAL:

patient

Office or Division:		MUNICIPA	L HEALTH OFFICE			
Classification:	Classification: Si					
Type of Transact	Type of Transaction:		vernment to Client			
Who may avail:		All Citizens	of Pulilan			
CHECKLIST OF	REQUIR	EMENTS		WHERE TO SE	CURE	
Brgy Indigency (O	riginal Co	py)	Barangay	Hall		
1 Valid ID (gov't issued) w/ address (1 Photocopy)						
CLIENT STEPS	_	ENCY TIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
CLIENT STEPS 1. Register in the log book	1. Check	TIONS	то ве			

none

none

none

3 minutes

3 minutes

9 Minutes

B. BURIAL PERMIT AND DEATH CERTIFICATE PROCEDURE

For issuance of burial permit and certification death.

Office or Division:		MUNICIPAL H	EALTH OF	FICE		
Classification:		Simple				
Type of Transactio	n:	G2C – Governr	ment to Client			
Who may avail:		All Citizens of F	Pulilan			
CHECKLIST OF REQUIREMENTS				WHERE TO SE	CURE	
Accomplished form of Death Certificate (1 Phootocopy)		LCR or Hospital				
CLIENT STEPS	CLIENT STEPS AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Present the Death Certificate	Receive and verify the documents presented		none	3 minutes	Midwife / Clerk (MHO)	
	2. Interview the immediate relative if the person die at home.		none	15 minutes	SMART VA Coordinator and Physician (MHO)	
	3. Fill up the burial permit		none	5 minutes	Midwife / Clerk (MHO)	
	4. Signature of MHO or RHP		none	5 minutes	MHO / RHP (MHO)	
5. Record the Death Certificate in the log book		none	3 minutes	Midwife / Clerk (MHO)		
		TOTAL:	none	31 minutes		

C. DENTAL SERVICES

Dental Services is one of the services given by MHO which includes promotive, preventive curative and rehabilitative Treatment which the residents of Pulilan can avail which is FREE OF CHARGE

Office or Division:	MUNICIPAL HEAL	MUNICIPAL HEALTH OFFICE						
Classification:	Simple	Simple						
Type of	G2C – Governmen	G2C – Government to Client						
Transaction:	A II O''							
Who may avail:	All Citizens of Pulila	an	WILEDE TO OF	CUDE				
	REQUIREMENTS		WHERE TO SE	CURE				
Any Governm	nent Issued ID							
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PERSON RESPONSIBLE					
Secure cuing number	1.Give cuing number	none	1 min	Dentist Midwife (MHO)				
	2. Take and record vital signs.	none	3 mins	Dentist Midwife (MHO)				
	3. Conduct Oral Examination	none	5 mins	Dentist (MHO)				
	4. Record patient's information in Individual Patient Treatment Record (IPTR)	none	5 mins	Dentist (MHO)				
	5. Conduct Dental Treatment procedures and chair side dental education to patient.	none	30 mins	Dentist (MHO)				
	6. Give proper medications and instructions / advice given to patient	none	5 mins	Dentist (MHO)				
	TOTAL:	none	49 Minutes					

D. HEALTH CERTICATE AND HEALTH ID FOR EMPLOYMENT

Office or Division:	MUNICIPAL HEA	ALTH OFFI	CF			
Classification:	Simple	<u> </u>	<u></u>			
Type of Transactio	<u> </u>	rnment to Client				
Who may avail:	All Citizens of Pu					
	REQUIREMENTS		WHERE TO SE	CURE		
Working Permit (Ori	ginal Copy)	Municipal	Treasurer's Office			
Medical Laboratory Copy)	Result (Original	Laboratory				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Present requirements	Evaluate the Requirements presented	none	2 mins	Sanitary Inspector I/ Clerk (MHO)		
	2. Encode Applicant's Data		3 mins	Sanitary Inspector I/ Clerk (MHO)		
3. Issuance of Health ID and Certificate		none	2 mins	Sanitary Inspector I/ Clerk (MHO)		
	TOTAL:	none	7Minutes			

E. INFANT IMMUNIZATION

Routine Vaccination of 0-59 mos to prevent the outbreak of Vaccine Preventable Disease (VAPD) and Reemerging disease.

Office or Divisio	n:	MUNICIPAL I	HEALTH (OFFICE		
Classification:		Simple				
Type of Transac	tion:	G2C – Goveri	rnment to Client			
Who may avail:		All Citizens of	Pulilan			
CHECKLIST (OF REQUIP	REMENTS		WHERE TO SE	CURE	
Newborn – Recor	d if Immuni	zation	Lying in o	or Hospital		
Baby Book / Imm	unization		Lying in o	or Hospital		
CLIENT STEPS	AGENCY ACTIONS		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Log in the record book	1. Regist	er the patient	none	3 mins	Midwife (MHO)	
	2. Check	vital signs	none	5 mins	BHW (MHO)	
	Record the vital signs to individual treatment record		none	5 mins	Midwife (MHO)	
	4. Record the client information in the Treatment Client List (Treatment Record)		none	5 mins	Nurse / Midwife (MHO)	
	5. Give Immunization to the Baby		none	10 mins	Nurse / Midwife (MHO)	

none

TOTAL:

28 Minutes

F. LABORATORY SERVICES

Laboratory Services are under the DOH program which is accessible and available for all constituent of Pulilan and Free of Charge

Office or Division:		MUNICIPAL HEALTH OFFICE				
Classification:		Simple				
Type of Transactio	n:	G2C – Government to Client				
Who may avail:		All Citizens of Pulilan				
CHECKLIST OF	REQL	JIREMENTS		WHERE TO SE	ECURE	
Lab Request Copy)	Form	(Original		al Health Office		
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Present Lab Request form to the Laboratory	1.Performs the Lab Request:					
	Hematology Hemoglobin / Hematocrit		none	25 mins	Medtech (MHO)	
	Bloo	d Typing	none	5 mins	Medtech (MHO)	
	Gene	Expert		4 hours	Medtech (MHO)	
	Deng	gue Test	none	1 hour		
	HIV	Гest		1hour		
	HBS	AG Screening		1 hour	Medtech (MHO)	
	Urina	alysis	none	30 mins		
	Gram Stain			1 hour		
	Record and release the result of Lab Test		none	3 mins	Medtech (MHO)	
	TOTAL:		none	depends on the lab procedure conducted		

G. MEDICAL CERTIFICATE

For those who were absent and ready to go back to work (FIT to Work)

Municipal Healt Office	h	MUNICIPAL HEALTH OFFICE					
Simple		Simple					
G2C – Governn	nent	G2C – Governme	ent to Client				
to Client							
All Citizens of		All Citizens of Pul	ilan				
Pulilan			211				
		EQUIREMENTS		CKLIST OF REQI	JIREMENIS		
Barangay Clear	ance (Original Copy)	Baı	rangay Hall			
Any Governme	nt Issu	ed ID					
CLIENT STEPS	AGI	ENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Register in the log book.	ра	egister the tients and give euing number	none	3 mins	Clerk (MHO)		
	2. Ex	amine patient.	none	15 mins	Nurse / Doctor (MHO)		
2. Pay amount due		eceive Payment d Issue OR	P 50.00 (Health Cert Fee)	3 mins	Revenue Collection Clerk (Treasury Office)		
3. Present Proof of payment		epare Medical ertificate	none	3 mins	Clerk (MHO)		
	5. Record and release of Medical Certificate		none	3 mins	Clerk (MHO)		
	TOTAL:		P 50.00 (Health Cert Fee)	27 minutes			

H. PATIENT AND PREGNANT WOMEN CONSULTATION (ORDINARY CASES)

Provide check up to patients and pregnant women and to prevent the spread of disease through the promotion of health and treatment of illness

Office or Division:	MUNICIPAL HEA	LTH OFFIC	E			
Classification:	Simple	•				
Type of Transaction	n: G2C – Governme	ernment to Client				
Who may avail:	All Citizens of Puli	lan				
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE		
Patient Record (Orig	ginal Copy)	Municipal	Health Office			
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Register in the log book.	Register the Patients	none	1 min	Clerk (MHO)		
	2. Take vital sign.	none	2 mins	BHW / Midwife (MHO)		
	3. Check-up patients and prescribe medicine		10 mins	Nurse / Midwife / Doctor (MHO)		
Present the Prescription to the Pharmacy	4. Check prescription and give prescribed medicines	none	5 mins	Clerk (MHO)		
Return to the consulting Health Staff	5. Check the medicine given.	none	2 mins	Nurse / Midwife / Doctor (MHO)		
	TOTAL:	none	10 Minutes			

I. SANITARY PERMIT

Issuance of Sanitary Permit to operate for Business Establishment

Office or Division:		MUNICIPAL HEALTH OFFICE						
Classification:		Simple	Simple					
Type of Transaction	Type of Transaction: G2C – Governm			rnment to Client				
Who may avail:		All Citizens of P	of Pulilan					
CHECKLIST OF	REQ	UIREMENTS		WHERE TO SE	CURE			
Brgy Business Clea Copy)	rance	(Original	Barangay	Hall				
DTI (Original Copy)								
Cedula for Business	(Orio	ginal Copy)	Municipal	Treasurers Office				
CLIENT STEPS		AGENCY ACTIONS	FEES TO BE PAID PROCESSING PERSON RESPONSIB					
Present requirements	Req	valuate the uirements ented	none	5 mins	RSI CLERK (MHO)			
	2. Encode Applicant's Data		none	3 mins	RSI CLERK (MHO)			
3.Issuance of Sanitary Permit		none	2 min	RSI CLERK (MHO)				
TOTAL:			none	10 Minutes				

J. TB DOTS SERVICES

Patient needing treatment for Tuberculosis

Office or Division:	MUNICIPAL HEAL	MUNICIPAL HEALTH OFFICE					
Classification:	Simple	Simple					
Type of	G2C – Governmen	G2C – Government to Client					
Transaction:							
Who may avail:		All Citizens of Pulilan					
CHECKLIST OF	REQUIREMENTS		WHERE TO SE	CURE			
Sputum / gene Expe Copy)	rt Result (Original	Municipal	Health Office				
Chest Xray (If Availa	ble) (Original Copy)	Any Labor	ratory				
Laboratory Result (0	Original Copy)	Municipal	Health Office				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID PROCESSING PERSON RESPONSIB					
Submit required documents	Receive and verify documents submitted.	none	7 minutes	Med Tech (MHO)			
	Conduct Laboratory Examination	none	3 hours	MedTech (MHO)			
	3. Present laboratory result to the MHO/RHP for his assessment.		10 mins	Doctor on Duty (MHO)			
	4. Record and initiate Treatment	none	5 mins	Doctor on Duty (MHO)			
	TOTAL	none 3 hours and 22 Minutes					