

OFFICE OF THE RURAL HEALTH

External Services



1. General Consultation

This program provides preventive and curative clinical services who are residents of Alaminos, Laguna and neighboring municipalities.

OFFICE / DIVISION	Office of the Rural Health				
CLASSIFICATION	Simple				
TYPE OF					
TRANSACTION	G2C - Government to C	lient			
WHO MAY AVAIL	All				
CHECKLIST OF REQUIREMENTS			WHEDE T	O SECURE	
Laboratory Test (If any)			Laboratory Clini		
Family Record			RHU	0	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Proceed Patient/Client to the Municipal Health Office	1.Interview the patient	None	3 mins	Barangay Health Worker(s)	
Proceed to the Medical Records to obtain family record	Recording of Vital Signs and interview	None	3 mins	Nurse /Midwife	
	2.1 Refer to Municipal Health Officer for consultation	None	5 mins.	Dr. Jelidora B. Refrea, MD	
	2.2 Laboratory Procedure to be done (If needed)	fees vary depends on laboratory test to be done	15 mins	Med. Tech.	
	2.3 For Treatment/Medication	None	10 mins	Dr. Jelidora B. Refrea, MD /Nurse/ Midwife	
	2.4 . Referral to higher level of care when necessary	None	5 mins	RHP / PHN	
	2.5. Recording/reporting of case	None	3 mins	Public Health Assistant (PHA), Nurse Encoder	
	TOTAL:		44 mins		

2. Laboratory Services

This is where tests are usually done on specimens to get information about the health of the patients. The services are provided to clients who are in need of laboratory examination to confirm their illnesses. These includes - CBC, Hgb determination, Platelet Count, Urinalysis, Fecalysis, and Sputum.

OFFICE / DIVISION	Office of the Rural Health
CLASSIFICATION	Simple
TYPE OF	G2C - Government to Client

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TRANSACTION				JAN N
WHO MAY AVAIL	All			
CHECKLIST OF REQUIREMENTS			WHERE TO SE	CURE
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBL E
Submit Laboratory request order by Municipal Health Officer	1. Receive specimen for Actual laboratory test and procedureUrinalysis -Fecalysis -Sputum microscopy -Complete Blood Count/Platelet Count -Pregnancy Test -Fasting Blood Sugar/Random Blood Sugar/Random Blood Sugar -Blood Typing -HB Screening -NS1 Malaria Smear -HIV Testing	Urinalysi s P 40.00 Fecalysis P 40.00 CBC P100.00 Preg. Test P 50.00 Blood Typing P 20.00 HGb & Het P 40.00	20 minutes	Ms. Iralyn Robles Med. Tech.
	1.1 Result presented to MHO	NONE	2 minutes	Ms. Iralyn Robles
	1.2 For prescription and Treatment	NONE	10 minutes	Dr. Jelidora B. Refrea, MD
	TOTAL:		32 minutes	

3. Maternal Neonatal Child Health and Nutrition

This service caters all pregnant women regardless of number of pregnancies and age of gestation from Alaminos, Laguna. Vaccination and Iron supplementation are provided; at least four pre-natal check-ups are done to each pregnant women.

CHECKLIST OF REQUIREMENTS		WHERI	E TO SECURE	
WHO MAY AVAIL	All	All		
TRANSACTION	G2C - Government to Client			
TYPE OF	Simple			
CLASSIFICATION	Simple			
OFFICE / DIVISION	Office of the Rural	Office of the Rural Health		

FEES TO PROCESSING **AGENCY** PERSON CLIENT STEPS **BE PAID** ACTION TIME **RESPONSIBLE** None 1. PRE NATAL CARE 1.1 Interview Proceed to Maternal Care Barangay Health the pregnant None 30 mins Facility Worker women for

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	registration			
	1.2 Get the Vital Signs, Physical Assessment and Examination		10-15 mins	
	1.3. For diagnostic test; Pregnancy Test, Complete Blood Count, Urinalysis, Ultrasound	PTest P50.00 CBC P100.00 Urinalysis P 40.00	5-10 mins	Nurse/Midwife
	1.4. Referral to Municipal Health Officer for consultation		5 mins	Nurse/Midwife
	1.5. Giving of Tetanus Toxoid injection as per schedule and giving ferrous sulfate tablet	None	5-10 mins	Nurse/Midwife
	1.6 Management of complicated cases and referral to higher facility		10 mins	Service Delivery Network Point Person/ Dr. Jelidora B. Refrea, MD
2. POSTPARTUM				
Proceed to Maternal Care Facility	2.1 Home visit		10 mins	
	2. 2 Clinic Visit		10 mins	Barangay Health
	2.3 Supplementation of Vitamin A and Iron tablets	None	5 mins	Worker/ Midwife/ Nurse
	2.4 Initiation to Family Planning (Exclusive breast feeding and postpartum IUD insertion)		10mins	Midwife, Nurse, Municipal Health Officer
3. NEW BORN CARE				
Proceed to Maternal Care Facility	3.1 Umbilical cord care		30-45 mins	
	3.2 Hepa B injection		30-45 mins	
	3.3 Vita K injection		30-45 mins	Nurso Midwife Marrisin - I
	3.4 Eye care	None	30-45 mins	Nurse/Midwife/Municipal Heath Officer
	3.5 New Born Screening		30-45 mins	
	3.6 Hearing Test		30-45 mins	
	3.7 Follow up, routine		30-45 mins	

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	immunization			AN NG	
	3.8 Weighing		30-45 mins	-	
4. FAMILY PLANNING PROGRAM	o.o moigrinig				
Proceed to Maternal Care Facility	1. Registration of Women of Reproductive Age (15-45 yrs old) with unmet needs		10 mins	Barangay Health Worker, Midwife	
	2. Health Education to all Family Planning acceptor	None	15mins	Midwife, Nurse	
	3. Introduction to Family Planning method		20 mins	Muncipal Health Officer, Midwife, Nurse	
	4. Schedule of follow up visit		20 mins	- iviidwiie, ivuise	
5. PRE MARITAL COUNSELING					
Proceed to Rural Health Unit	1. Couple-to-be to Rural Health Unit		3 mins	Barangay Health Worker, Midwife	
	Registration to Logbook		1 hr		
	3. Lecture on Family Planning and Responsible Parenthood	None	3 mins	Muncipal Health Officer,	
	4. Signing and Issuance of Medical Certificate			Midwife, Nurse	
6. NUTRITION PROGRAM					
Proceed to Rural Health Unit	1. Weighing of children ages 0-71 months		5 mins	Barangay Health Worker	
	2. Micronutrient supplementation of Vitamin A, Iron and Deworming	None	Twice year during GP	Muncipal Health Officer, Midwife, Nurse	
	TOTAL:		processing time vary depends on the program		

4. National Immunization Program

This service provides vaccination for 0 - 12 months babies. Vaccination gives protection against immunizable diseases. The following are the vaccines that are given to babies: BCG, OPV, Penta, PCV, Measles, and IPV.



OFFICE / DIVISION	Office of the Rural Health
CLASSIFICATION	Simple
TYPE OF	
TRANSACTION	G2C - Government to Client
WHO MAY AVAIL	All

CHECKLIST OF REQUIREMENTS			WHERE T	O SECURE
Family Health Card			Rural Health U	nit
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Proceed - Parent/Baby to Municipal Health Officer	1.1 Register for medical records		3 min	Nurse/Midwife
	1.2. Review of Records		3 mins	Midwife
	1.3. Refer to Municipal Health Officer for consultation	None	10 minutes	Municipal Health Officer
	1.4. Immunization by Rural Health Midwife		3 minutes	Barangay Health Midwife
	1.5.Observation for Adverse event following Immunization		20 mins	Midwife
	1.6. Advised of Schedule of next visit/Follow-up		2 minutes	Midwife
	1.7. Recording / Master listing		2 minutes	Clerk

SCHOOL BASED IMMUNIZATION

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CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Present parent's Consent/Assessment prior to vaccination	2.1 Information Education Campaign to School teachers and parents	None	30 mins	School Nurse	
	2.2 Master listing	None	2 minutes	School Nurse/ PH Midwife	
	2.3. Actual immunization to Grade 1 & 7 - Measles/Tetanus Diptheria Grade 4 girls only - Human Papilloma Virus	None	5 mins	Rural Health Unit Nurse	



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C. COMMUNITY BASED IMMUNIZATION - Given during outbreak of communicable diseases					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
3. (Measles and Polio) House to House Immunization	(Measles and Polio) House to House Immunization	None	5 mins	PH Midwife/Nurse	
D. MAS	TERLISTING OF SENIO	R CITIZEN AN	ID SCREENING		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Proceed to RHU for registration	Review masterlist of Senior Citizen		5 mins	PH Midwife	
	3. Screening of Senior Citizen		15 mins	Ms. Maricel C. Maglalang	
	4. Actual Vaccination of Pneumonia vaccine and Flu vaccine		2 minutes	Ms. Nicon D. Castillo	
	5. Recording and reporting		3 minutes	Clerk	
	Total :		25 minutes		

5. Epidemiology and Surveillance

OFFICE / DIVISION	Office of the Rural Health				
CLASSIFICATION	Simple				
TYPE OF					
TRANSACTION	G2C - Government to C	lient			
WHO MAY AVAIL	All				
CHECKLIS	T OF REQUIREMENTS		WHERE T	O SECURE	
Family Health Record					
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
	A1.Case Investigation to suspected/confirmed case affected with communicable disease		30 mins	Municipal Health Officer	
A1 Proceed to RHU	1.1 Treatment/Referral	None	10-15 mins	Municipal Epidemeology Surveillance Unit	
	1.2 Regular follow-up			Sanitary Inspector	

. In times of outbreak

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CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Report the case of outbreak to Rural Health Unit	1.Case holding		30 mins	Sanitary Inspector

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1.1 Health Advocacy		30 mins	Rural Health Midwife
1.3 Environmental Management		30 mins-1hr	Public Helath Nurse
Monitoring and	d Evaluation		_
Recording and Encoding			Surveillance Unit
Reportable Diseases within 24 hrs			Encoder
	1.3 Environmental Management Monitoring and Recording and Encoding Reportable Diseases	1.3 Environmental Management Monitoring and Evaluation Recording and Encoding Reportable Diseases	1.3 Environmental Management Monitoring and Evaluation Recording and Encoding Reportable Diseases

6. Child Prevention Injury

This service provides injury prevention strategies need to take into account child development in different and sometimes changing contexts.

Total:

25 minutes

OFFICE / DIVISION	Office of the Rural Health					
CLASSIFICATION	Simple					
TYPE OF						
TRANSACTION	G2C - Government t	G2C - Government to Client				
WHO MAY						
AVAIL	All citizens residing i	n Alaminos	, Laguna			
CHECKLIST OF REQUIREMENTS			WHERE	TO SECURE		
Family Health Record			Rural Health Un	it		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Patient/Client to Municipal Health Office	1.1 Interview for Record Purposes	None	5 mins	Barangay Health Worker		
	1.2 Triage/Nurse/Rural Health Midwife medical interview and recording of vital signs	None	3 mins	Nurse, Midwife		
	1.3 Refer to Municipal Health Office for consultation and treatment	None	5 mins	Nurse, Midwife		
	1.4 Referral to high level of care if referable	None	5 mins	Municipal Health Officer		
	1.5. Referral to Child Prevention Unit for abused cases	None	10 mins	Municipal Health Officer		
	1.6. Counseling	None	30 mins	MSWDO		



TOTAL : 58 mins

7. Control of Diarrhea Diseases

This service aims to prevent dehydration due to fluid loss.

OFFICE / DIVISION	Office of the Rural Health					
CLASSIFICATION	Simple	Simple				
TYPE OF TRANSACTION	G2C - Government to Client					
WHO MAY AVAIL	All citizens resid	All citizens residing in Alaminos, Laguna				
CHECKLIST OF REQUIREMENTS			WHERE	TO SECURE		
Family Health Record			Rural Health Uni	t		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Patient/Client to Municipal Health Office	1.1 Interview and recording of the patients chief complaints	None	5 mins	Nicon D. Castillo		
	1.2 Taking and recording of vital signs	None	10 mins	Nicon D. Castillo		
	1.3 Patients referred to Municipal Health Officer for consultation	None	3 mins	Dr. Jelidora B. Refrea, MD		
	1.4 Actual consultation and physical assessment	None	5 mins	Dr. Jelidora B. Refrea, MD		
	1.5 Municipal Health Officer orders medication according to Control Diarrhea Diseases treatment plan	None	3 mins	Dr. Jelidora B. Refrea, MD		
	1.6 Instruction on the above medication and home care	None	5 mins	Dr. Jelidora B. Refrea, MD		
	1.7 Medication carries out	None	3 mins	Lelita D. Flores		
	1.8 If needed:	None		Dr. Jelidora B. Refrea, MD		



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- The Rural Health Physician requesting The patient for stool examination	None	3 mins	Dr. Jelidora B. Refrea, MD
- Patients referred to Laboratory	None	3 mins	Iralyn M. Robles
-Actual stool examination procedure	None	15 mins	Iralyn M. Robles
-Result presents to Rural Health Physician	None	3 mins	Dr. Jelidora B. Refrea, MD
Rural Health Physician prescribes medication and treatment	None	10 mins	Dr. Jelidora B. Refrea, MD
-Instruction on the above medication	None	3 mins	Dr. Jelidora B. Refrea, MD
-Carries out doctor's order	None	5 mins	Public Health Nurse
Referral of complicated cases to next higher level of care	None	3 mins	Dr. Jelidora B. Refrea, MD
TOTAL :		34 mins to 1 day if necessary	

8. Rabies Control Program

This service aims to eliminate rabies as public health problem with absences of indigenous case for human and animal.

OFFICE / DIVISION	Office of the Rural Health					
CLASSIFICATION	Simple	Simple				
TYPE OF						
TRANSACTION	G2C - Governm	ent to Client				
WHO MAY AVAIL	All citizens resid	ling in Alamino	s, Laguna			
CHECKLIST OF REQUIREMENTS			WHERE	TO SECURE		
Formily Hoolth Doored	Rural Health Unit					
Family Health Record			Rural Health Un	it		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	Rural Health Un PROCESSING TIME	PERSON RESPONSIBLE		

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1.2 Physica examination bite cases		5-10 mins	Dr. Jelidora B. Refrea, MD
1.3 Injection Anti-Rabies Vaccine as per categor	None	30 mins	Dr. Jelidora B. Refrea, MD
1.4 Referral Animal Bite Treatment Center facil for category and complicated cases	ty None	5 mins	Dr. Jelidora B. Refrea, MD
ТОТА	AL:	50 mins	

9. Non Communicable Disease

This service aims to lessen the impact on individuals and the community.

OFFICE / DIVISION	Office of the Rural Health					
CLASSIFICATION	Simple					
TYPE OF TRANSACTION	G2C - Governm	G2C - Government to Client				
WHO MAY AVAIL	All citizens resid	ding in Alamino	s, Laguna			
CHECKLIST OF REQUIREMENTS	Family Health Record	WHERE TO SECURE	Rural	Health Unit		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE		
Patient/Client to Municipal Health Office	1.1 Registration and Master listing of All citizens residing in Alaminos, Laguna ages old and above	None	10-15 mins	Midwife, Nurse		
	1.2 Screening for Hypertension, Cardio Vascular Disease, Diabetes Mellitus, Liver Disease and Mental Health	None	10-15 mins	Municipal Health Officer		
	1.3 Laboratory Procedures and Rescue	Depends on	10 mins	Midwife, Nurse		
	4. Appropriate Treatment	None	10 mins	Medical Technologist		

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E L D S	i. Health Education of Life Style Disease and Smoking Dessation	None	10 mins	Nurse
6	i. Referral	None	10-20 mins	Dr. Jelidora B. Refrea, MD
	TOTAL :		approximately 1 day and 20 mins	

10. National Tuberculosis Program

OFFICE / DIVISION Office of the Rural Health

This program caters children and adult residents of Alaminos, Laguna who have cough for 2 weeks or more and with or without other signs and symptoms of tuberculosis and are manageable by DOTS. The program also caters patients with positive result on sputum exam from public and private hospitals and private clinics.

CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Client				
WHO MAY AVAIL	All citizens residing in A	laminos, L	_aguna		
CHECKLIST OF REQUIREMENTS			WHERE '	TO SECURE	
Family Health Record			Rural Health Un	it	
Referral Slip	w N diamaga a a a a a		Rural Health Unit, Private Physician, Hospital Physician Referring Hospital or private		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Patient/Client to the Municipal Health Ofice	1.1 Interview by BARANGAY HEALTH WORKER New-accomplish new record Old- Triage Nurse/Rural Health Midwife for vital signs and medical interview	None	5 mins	Barangay Health Worker Public Health Nurse/Midwife	
	1.2.Refer to Municipal Health Officer for consultation	None	3 mins	Nurse	
	1.3 For Direct Sputum Smear Microscopy/Genexpert X-ray	None	5 mins	Medical Technologist	

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e Tuberculosis Coordinator	
nicipal Health	

1.4 Release of result from medical technologist	None	1day	Nurse Tuberculosis Coordinator
1.5 Refer to Municipal Health Officer for consultation of laboratory result	None	5 mins	Municipal Health Officer
1.6 Information Education Campaign/Provider Initiative Counseling and Testing	None	10 mins	Medical Technologist
1.7 Treatment/DIRECTLY OBSERVED TREATMENT SHORT COURSE	None	6 mos	Nurse Tuberculosis Coordinator
1.8 Referred of MULTIDRUG RESISTANT TUBERCULOSIS Cases	None	5 mins	Municipal Health Officer
1.9 For schedule of follow up 2nd Month, 3rd Month 5th Month and 6th Month	None	2 mins	Municipal Health Officer National Tuberculosis Coordinator
1.10 Recording/reporting and encoding	None	3 mins	Encoder
TOTAL :		1 day & 38 mins up to 6 mos	

11. National Leprosy Program

This service caters residents who has leprosy and other skin problems who needs assessment, diagnosis, treatment, and are manageable by primary health care facility

OFFICE / DIVISION	Office of the Rural Health				
CLASSIFICATION	Simple				
TYPE OF					
TRANSACTION	G2C - Government to Client				
WHO MAY AVAIL	All				
CHECKLIST OF					
REQUIREMENTS		WHERE TO SECURE			
Letter of Request		Patient/Relatives			

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CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBL E
The Client/Patient will proceed to the	1.1 Interview of patient		3 mins	Nicon D. Castillo
Rural Health Unit for interviews and necessary check ups.	1.2. Physical assessment and physical examination of patient	None	5-10 mins	Dr. Jelidora B. Refrea, MD
	1.3. Referral of patient to skin clinic for drugs allocation		3 mins	Dr. Jelidora B. Refrea, MD
2. The Client/Patient will return to the RHU for follow ups and to monitor the case.	2. Follow up and monitoring of cases	none	Monthly	Rural Health Midwife Public Health Nurse Municipal Health Officer
	TOTAL:		minimum of 16 mins	

12. Malaria Control Program

To strengthen governance and Human Resources capacity at all level to manage and implement malaria prevention

OFFICE / DIVISION	Office of the Rural Health				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government	to Client			
WHO MAY AVAIL	All				
CHECKLIST OF REQUIREMENTS			WHERE	TO SECURE	
Letter of Request			Clien	t/Relatives	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Interview of patient	1.1 Physical assessment/ examination of patient		5 mins	Nicon D. Castillo and/or Dr. Jelidora B. Refrea	
	1.2 Request for Laboratory exam (for suspect cases)		2 mins	Dr. Jelidora B. Refrea, MD	
	1.3. Blood smearing			Iralyn M. Robles	
	1.4 Reading of results by microscopy		5 mins	Dr. Jelidora B. Refrea, MD	
	1.5. Orders giving of medicines		2 mins	Lesiurelly A. Banzuela	
	1.6 Giving of anti- malarial drugs		2 mins	Lesiurelly A. Banzuela	
	1.7 Case follow up			Midwife	

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Barangay Health Worker/ Barangay Officials	
Barangay Health Worker/ Barangay Officials.	

2. The Barangay will go directly to the Rural Health Unit or to their respective Barangays for	2.1 The RHU staff will cater and receive the request.	3 mins	Barangay Health Worker/ Barangay Officials
request.	2.2 . Environmental control measures *House Spraying *Bed nets treated/ distribution *Stream clearing *Health Education *Monitoring		Barangay Health Worker/ Barangay Officials, Leisurelly A. Banzuela and midwife
	TOTAL :	minimum of 19 mins	

13. Medico-Legal

This service caters residents of and nearby municipalities who needs medical attention and certificate for legal purposes for Senior Citizen and Persons with Disability for their claim of ID's so as to avail of their benefits.

OFFICE / DIVISION	Office of the Rural Health				
CLASSIFICATION	Simple				
TYPE OF TRANSACTION	G2C - Government to Citizen				
WHO MAY AVAIL	Residents of and nearby	Municipaliti	es		
CHECKLIST OF REQUIREMENTS				TO SECURE	
Police Report			Police Station		
Letter of Request			Relative/Neare	est Kin	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSIN G TIME	PERSON RESPONSIBLE	
	AUTO	PSY			
1. The relative or nearest kin will go directly to the police station for a written request to autopsy.	2. Written consent to perform autopsy from the nearest kin or relative		3 mins	Relative	
	1.Issuance of written request to Municipal Health Officer from the Philippine National Police Officer		5-10 mins	Philippine National Police Officer	
	3. Actual autopsy		30 mins to 1 hr	Dr. Jelidora B. Refrea, MD	
	4. Completion of report and submission to Philippine National Police Office		45 mins	Dr. Jelidora B. Refrea, MD	



Court Appearance	1.Delivery of subpoena from the Court to the Municipal Health Officer	20-30 mins	Court Personnel, Municipal Health Officer
	Testify as ex-officio Medico-Legal Officer		Dr. Jelidora B. Refrea, MD /PNP Officer

B. MEDICAL EXAMINATION OF PHYSICAL INJURIES: SLIGHT, LESS SERIOUS, SERIOUS PHYSICAL INJURY.

The relative will acquire the written letter of request	Issuance of written request from Philippine National Police Officer	5 mins	Philippine National Police Officer
2. The relative will give the letter of request to the Municipal Rural Health Unit.	2.1 RHU stafff will receive the letter of request.		RHU Staff
	2.2. Physical Examination	15 mins	Dr. Jelidora B. Refrea, MD
	2.3. Prescription of Medication and treatment	5 mins	Dr. Jelidora B. Refrea, MD
	2.4. Follow up	5 mins	Dr. Jelidora B. Refrea, MD
	2.5. Completion of report and submission to Philippine National Police	30 mins	Dr. Jelidora B. Refrea, MD /PNP Officer

C. OTHERS

-MEDICAL EXAMINATION OF EMPLOYEES, DETAINEES, STUDENTS, PERSON WITH DISABILITY AND PERSON USING DRUGS

FOR EMPLOYEES:				
Go directly to the Rural Health Unit.	Physical Examination of employees	None	30 mins	Dr. Jelidora B. Refrea, MD
	2. Issuance of Medical Certificate			
FOR DETAINEES:				



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Present written request from Philippine National Police Officer	Receive the letter of request and arrange the physical examination	5 mins	RHU Staff
	2. Physical Examination	30 mins	Dr. Jelidora B. Refrea, MD
	3. Completion of report and submission to Philippine National Police	15-30 mins	Dr. Jelidora B. Refrea, MD
FOR STUDENTS:			
Verbal or written request from Department of Education/Teacher	Receive the letter of request and arrange the physical examination	5 mins	Teacher RHU staff
	Physical Examination of students	5-10mins	Dr. Jelidora B. Refrea, MD
	3. Completion of forms and record.	5 mins	Dr. Jelidora B. Refrea, MD
	FOR PERSON WIT	TH DISABILITY:	
Go directly to the Rural Health Unit	Physical Examination of person with disability	30 mins	Dr. Jelidora B. Refrea, MD
	2. Issuance of Medical certificate	15-30 mins	RHU Staff and/or Dr. Jelidora B. Refrea, MD
	FOR PERSON US	SING DRUGS:	
Go directly to the Rural Health Unit	Physical Examination of person who are using drugs	15-30 mins	Dr. Jelidora B. Refrea, MD
	2. Issuance of Medical certificate	15-30 mins	Dr. Jelidora B. Refrea, MD
	Total		
<u> </u>			1

14. Inspection of Notebook Form

OFFICE / DIVISION	Office of the Rural Health			
CLASSIFICATION	Simple			
	G2C -			
TYPE OF	Government to			
TRANSACTION	Client			
WHO MAY AVAIL	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CHECKLIST OF REQUIR	EMENTS	1	WHERE TO SEC	CURE
CHECKLIST OF REQUIR Letter of Complaint	EMENTS	\	WHERE TO SEC	
	EMENTS	\		
Letter of Complaint	EMENTS	\	Complaint	

AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1. Inspection of water supply sources		10-15 mins	Ms. Leisurelly A. Banzuela
1.2. Water samples collection		20 mins	Ms. Leisurelly A. Banzuela
1.3. Water sources disinfection		20 mins	Ms. Leisurelly A. Banzuela
1.4. Container disinfection of drinking water for Population/houses served by doubtful sources		20 mins	Ms. Leisurelly A. Banzuela
1	RY TOILET	FACILITIES	<u> </u>
1.1. Inspection Of Household with salary toilet to follow up proper use and maintenance		10-15 mins	Ms. Leisurelly A. Banzuela
1.2. Inspection of household sanitary toilet to campaign for construction		10-15 mins	Ms. Leisurelly A. Banzuela
FOOD SAI	NOITATION	,	,
1.1 Food Establsihment Inspection		10-15 mins	Ms. Leisurelly A. Banzuela
1.2. Issuance of Sanitary Order		3-5 mins	Dr. Jelidora B. Refrea, MD
1.3. Sanitary Permit Issuance		3-5 mins	Ms. Leisurelly A. Banzuela
1.4. Health Certificate Issuance		3-5 mins	Dr. Jelidora B. Refrea, MD
	PROVISION OF SAF 1.1. Inspection of water supply sources 1.2. Water samples collection 1.3. Water sources disinfection 1.4. Container disinfection of drinking water for Population/houses served by doubtful sources OVISION OF SANITA 1.1. Inspection Of Household with salary toilet to follow up proper use and maintenance 1.2. Inspection of household sanitary toilet to campaign for construction FOOD SAI 1.1 Food Establsihment Inspection 1.2. Issuance of Sanitary Order 1.3. Sanitary Permit Issuance 1.4. Health Certificate	PROVISION OF SAFE WATER S 1.1. Inspection of water supply sources 1.2. Water samples collection 1.3. Water sources disinfection of drinking water for Population/houses served by doubtful sources OVISION OF SANITARY TOILET 1.1. Inspection Of Household with salary toilet to follow up proper use and maintenance 1.2. Inspection of household sanitary toilet to campaign for construction FOOD SANITATION 1.1 Food Establsihment Inspection 1.2. Issuance of Sanitary Order 1.3. Sanitary Permit Issuance 1.4. Health Certificate	PROVISION OF SAFE WATER SUPPLY 1.1. Inspection of water supply sources 1.2. Water samples collection 1.3. Water sources disinfection 1.4. Container disinfection of drinking water for Population/houses served by doubtful sources OVISION OF SANITARY TOILET FACILITIES 1.1. Inspection Of Household with salary toilet to follow up proper use and maintenance 1.2. Inspection of household sanitary toilet to campaign for construction FOOD SANITATION 1.1 Food Establsihment Inspection 1.2. Issuance of Sanitary Order 1.3. Sanitary Permit Issuance 1.4. Health Certificate 10-15 mins 10-15 mins 10-15 mins 10-15 mins 3-5 mins