



**FRONTLINE SERVICE: RURAL HEALTH UNIT – II Buenlag, Calasiao**

**A. PROVISION OF OUT- PATIENT CONSULTATION**

This provides medical assistance to any individual who needs medical attention. This aims to diagnose and treat illnesses and to provide appropriate medical assistance.

STEPS/PROCESSES					
CLIENT	REQUIREMENTS / DOCUMENTS NEEDED	OFFICE AREA	RESPONSIBLE PERSON/S	DURATION	FEEES and CHARGES
<p>1. Approach the Information/Admission Area</p> <p>a) Get a service number from the Public Assistance and Compliance Desk staff-in-charge and guide the clients to their respective health service areas.</p> <p>b) Senior citizens and PWDs are given priority in the queue</p> <p>c) Pregnant women referred for laboratory services are referred to the Clinical Laboratory RHU-I laboratory.</p> <p>d) Family Planning Counseling services are referred to the Municipal Birthing Clinic/Poblacion BHS (Every Thursday; 3 P.M.)</p>	<p>Service number card</p> <p>Logbook for Senior Citizens/ other clients</p>	Information/ Admission Area	<p>Ivy Layda Vivian Quinto Roselle Bulatao Raquel Saplan Charity. De Vera Roselle Bulatao Assisting Staff</p>	2 Minutes	
<p>2. Medical history, vital signs and other findings will be recorded on the Individual Treatment Record (ITR) and encoded into the Wireless Access for Health (WAH) Terminals</p> <p>a) For patients, who are residents of the catchment area, retrieve folder from ITR files. Present Philhealth MDR, if any</p> <p>b) For referred patients from other catchment areas, present referral letter/ITR from referring BHS. Present, Philhealth MDR, if any.</p> <p>c) For walk-in patients not residents of the catchment area, the staff will provide ITR. Present Philhealth MDR, if any</p>	<p>Individual Treatment Record (ITR)/ NCD Form</p> <p>Philhealth MDR</p> <p>Referral Form</p>	Information/ Admission Area	<p>Ivy Layda Vivian Quinto Roselle Bulatao Raquel Saplan Charity. De Vera Roselle Bulatao Assisting Staff</p> <p>Ma. Jesusa Rosal Kristine Soriano Medical Services Staff</p>	5 Minutes	
<p>3. If the staff can manage the patient's condition, treatment and medicine/s is/are given, or prescribed if medicine/s is/are not available. If medicines are dispensed, clients are informed of the proper usage of the medicines and asked to sign the Drug Recipient's/ NCD CTPs logbook.</p>	<p>Drug Recipient's/ NCD CTPs logbook</p> <p>Prescription Form</p>	Information/ Admission Area	<p>Ma. Jesusa Rosal Kristine Soriano Medical Services Staff</p>	10 Minutes	
<p>4. If the patient's condition requires laboratory test, the staff fills up a Request form and client proceeds to the laboratory for test/s, waits for the result/s, and returns to the Admission Area with the result/s.</p> <p>Note: Only DSSM, GCU lab tests can be done at RHU-II and <u>schedule is every Tuesdays and Thursdays</u>. For other tests and if consultation is done during MWF, patients are referred to the RHU - I Clinical Laboratory.</p>	<p>Individual Treatment Record (ITR)/ NCD Form</p> <p>Lab Request Form</p> <p>Order of Payment</p> <p>Laboratory Results</p>	Laboratory	<p>Max Andrada Medical Tech Assistant</p>	10 minutes	
<p>5. If patients seen by the staff require further assessment and management or are referred patients from BHSs, they are directed to the Doctor's Room for consultation. Patients are then referred back to the Information/Admission Area for their medicines and further instructions on their treatment.</p>	<p>Individual Treatment Record (ITR)/ NCD Form</p> <p>Laboratory Results</p>	Doctor's Office	<p>Dr. Cristina P. Estrada Rural Health Physician</p>	10-15 minutes	
<p>Referred patients and walk-in patients not residents of the catchment area will be asked to bring their ITR and submit it to their respective BHS midwife.</p>					
TOTAL RESPONSE TIME:				30 - 45 minutes	

## B. PROVISION OF WELL- BABY SERVICES

One of the objectives of LGU's health program is to immunize children based on the Expanded Program of Immunization (EPI) of the Department of Health. The service is offered every third Wednesday of each month to avoid contamination of communicable diseases from other patients. The Rural Health Midwife, assisting medical staff and the BHWs are in charge of this service.

NOTE: Vaccines/syringes are free of charge.

Vaccines Available:

- a) BCG/Hepa1 at birth
- b) Pentavalent Vaccine
- c) OPV1, OPV2, OPV3, IPV
- d) Measles/ Measles Rubella Vaccine

STEPS/PROCESSES					
CLIENT	REQUIREMENTS / DOCUMENTS NEEDED	OFFICE AREA	RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
1. Go to the Information/Admission Area. Health staff will guide the mother/ guardian with the infant to the immunization area if he/she is a resident of the catchment area, If not, referred to their respective BHSs for the child's immunization.		Information/ Admission Area	<b>Raquel Saplan Charity. De Vera</b> Assisting Staff / BHWs	2 Minutes	
2. At the Information/Admission Area: a) For new clients, Immunization Card will be provided and filled up by the BHWs after an interview b) For old clients, Immunization Card will be filled up by the staff c) Lecture on FP and ANC4 for the mother	Immunization Card	Information/ Admission Area	<b>Raquel Saplan Charity. De Vera</b> Assisting Staff / BHWs  <b>Kristine Soriano</b> Midwife	12 Minutes	
3. When the infant's turn comes up: a) Infant will be weighed and the height measured. Immunization Card will be filled up with the data and other pertinent findings. b) Infant will be immunized c) Midwife will give post-immunization instructions. If needed, infant will be referred to the PHN or RHP.	Immunization Card	RHM Room	<b>Raquel Saplan Charity. De Vera</b> Assisting Staff / BHWs  <b>Kristine Soriano</b> Midwife	15-30 minutes	
<b>TOTAL RESPONSE TIME: 30 - 45 Minutes</b>					

## C. PROVISION OF PRE-NATAL MATERNAL CARE SERVICES

The LGU's health program also includes the program that provides maternal health care services to pregnant, parturient, and lactating mothers for comprehensive maternal care.

STEPS/PROCESSES					
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA	RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
1. Go to the Information/Admission Area a) Health staff will guide the pregnant woman for pre-natal check-up		Information/ Admission Area	<b>Ivy Layda Vivian Quinto Roselle Bulatao Raquel Saplan Charity. De Vera Roselle Bulatao</b> Assisting Staff / BHWs	2 minutes	
2. At the Information/Admission Area: a) The Health Staff, RHM and/or BHWs will accomplish your Home Based Maternal Record (HBMR)/ Pink Card b) For new clients, staff will issue HBMR, Maternal Tracking form and Birth Plan form c) Weighing, get Vital Signs d) Staff will fill-up the HBMR	Home Based Maternal Record (HBMR) Pink Card  Birth Plan Form  Maternal Tracking Form	Information/ Admission Area	<b>Raquel Saplan Charity. De Vera</b> Assisting Staff / BHWs  <b>Kristine Soriano</b> Midwife	10 Minutes	
3. When the client's turn comes up, proceed to the Consultation Room, where she will be receiving the following services: a) Abdominal Examinations b) Tetanus Toxoid vaccines will be given as scheduled c) Ferrous Capsule/Tablet will be dispensed with health info and instructions on dosage.	Home Based Maternal Record (HBMR) Pink Card  Maternal Tracking Form  Birth Plan Form	Consultation Room	<b>Raquel Saplan Charity. De Vera</b> Assisting Staff / BHWs  <b>Kristine Soriano</b> Midwife	20-30 Minutes	

<p>d) Health Education on Proper Nutrition and Maternal Care</p> <p>e) Midwife will fill-up the HBMR with the data, Birth Plan and Maternal Tracking Forms and other pertinent findings</p> <p>f) Midwife will give post-examination instructions. Pregnant client will be referred to the PHN or RHP for any complications noted.</p>			<p><b>Kristine Soriano</b> Midwife</p> <p><b>Milrose U. Caburian</b> Public Health Nurse</p> <p><b>Dr. Cristina P. Estrada</b> Rural Health Physician</p>		
<b>TOTAL RESPONSE TIME: 30 - 40 Minutes</b>					

#### D. PROVISION OF FAMILY PLANNING SERVICES

The office provides comprehensive family planning services both Natural and Artificial methods. The Rural Health Midwife, the assisting medical staff and the BHWs are in charge of this service.

STEPS/PROCESSES					
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA	RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
<p>1. Go to the Information/Admission Area</p> <p>a) Health staff will guide the interested client/couple to the Information/ Admission Area if she/they is/are a resident of the catchment area.</p> <p>b) If the interested client/couple is not a resident of the catchment area, she/they will be provided initial information on Family Planning and will be referred back to their corresponding catchment area/s and be informed of its FP services schedule.</p>		Information/ Admission Area	<p><b>Ivy Layda</b> <b>Vivian Quinto</b> <b>Roselle Bulatao</b> <b>Raquel Saplan</b> <b>Charity. De Vera</b> <b>Roselle Bulatao</b> Assisting Staff / BHWs</p>	3 Minutes	
<p>2. Go to the RHM Room/Consultation Area for an interview on your personal data, medical examination and for the issuance and filling-up of the FP Service Record Form</p>	FP Service Record Form	RHM Room/ Consultation Area	<p><b>Raquel Saplan</b> <b>Charity. De Vera</b> Assisting Staff / BHWs</p> <p><b>Kristine Soriano</b> Midwife</p>	20 minutes	
<p>3. Undergo Family Planning counseling. If client/couple decides on using an FP method, proper information will be given regarding the chosen method of Family Planning (Informed Consent) and services/commodity will be provided.</p>	FP Service Record Form	Consultation Area	<p>Assisting Staff / BHWs</p> <p><b>Kristine Soriano</b> Midwife</p>	20 Minutes	
<b>TOTAL RESPONSE TIME: 40 Minutes</b>					

#### E. LABORATORY SERVICES

Only DSSM and Glucose Cholesterol Uric Acid GCU lab tests can be done at RHU-II and the schedule is every Tuesdays and Thursdays. For other tests and if consultation is done during MWF, patients are referred to the Clinical Laboratory/ RHU-I laboratory. DSSM services are provided for free while the GCU tests are free for indigent patients.

STEPS/PROCESSES					
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA	RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
<p>1. Approach the Information/Admission Area</p> <p>a) Walk-in clients who are suffering from illnesses and who wish to have laboratory tests will be first admitted to determine the need for DSSM and GCU lab tests</p>	Individual Treatment Record Philhealth MDR Referral/Laboratory Test Request Form Logbook for clients	Information/ Admission Area	<p><b>Ivy Layda</b> <b>Vivian Quinto</b> <b>Roselle Bulatao</b> <b>Raquel Saplan</b> <b>Charity. De Vera</b> <b>Roselle Bulatao</b> Assisting Staff</p>	1 minute	
<p>2. Health staff will examine, get the history and vital signs of the client</p> <p>a) If needed, patient is referred to the Doctor for further assessment and if found necessary, laboratory test/s is/are requested</p>	Individual Treatment Record Philhealth MDR Laboratory Request Form	Information/ Admission Area	<p><b>Ma. Jesusa Rosal</b> <b>Kristine Soriano</b> Medical Services Staff</p>	5 Minutes	
<p>b) Go to the Laboratory for the conduct of the Laboratory Examinations</p>	Laboratory Request Form	Laboratory	<p><b>Max Andrada</b> Medical Tech Assistant</p>	10 Minutes	

<i>Note: DSSM and Glucose Cholesterol Uric Acid GCU lab tests only.</i>	Clients' Logbook				
3. Get the laboratory results	Clients' Logbook Laboratory Results Form	Laboratory	<b>Max Andrada</b> Medical Tech Assistant	3 minutes	
4. Bring results back to the ; a) Admission Area or to the Doctor for assessment, diagnosis and management b) Referring Rural Health Midwives or private MDs	Laboratory Results Form  Issuance of drugs  Prescription	Information/ Admission Area or Doctor Office	Medical Services Staff  <b>Milrose U. Caburian</b> Public Health Nurse  <b>Dr. Cristina P. Estrada</b> Rural Health Physician	10 Minutes	
TOTAL TIME AVAILING SERVICES: 30 Minutes					

#### F. PROVISION OF MEDICO-LEGAL SERVICES (Physical Injury)

This service provides medico-legal examination and treatment for victims of abuse and accidents. Medico-legal services are free.

STEPS/PROCESSES			RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA			
1. Go to the Information/Admission Area	Logbook for clients	Information/ Admission Area	<b>Vivian P. Quinto</b> <b>Roselle C. Bulatao</b> Assisting Staff	2 Minutes	
2. Health staff will obtain the Medico-legal Request Form from the PNP or other investigating agency from the client/complainant and the victim is directed to the examination room	Medico-legal Request Form from the PNP or other investigating agency	Information/ Admission Area	<b>Ma. Jesusa Rosal</b> <b>Kristine Soriano</b> Medical Services Staff	5 Minutes	
3. Go to the examination room for physical injury examination and treatment, if necessary.	Medico-legal Request Form from the PNP or other investigating agency	Examination Room	<b>Ma. Jesusa Rosal</b> <b>Kristine Soriano</b> Medical Services Staff	15-20 Minutes	
4. Proceed to the Doctor's Office a) Doctor will make the examination and assessment. b) Doctor will issue Medico Legal Report and prescribed corresponding medications	Medico-legal Report Form  Prescription	Doctor's Room	<b>Dr. Cristina P. Estrada</b> Rural Health Physician	10 minutes	
TOTAL RESPONSE TIME: 30- 45 Minutes					

#### G. PROVISION OF ANTI-TUBERCULOSIS DRUGS

This service provides free anti-tuberculosis drugs based on the TB-DOTS SCC program. It is available for cases diagnosed with pulmonary tuberculosis (PTB). TB-DOTS drugs are given free to patients.

STEPS/PROCESSES			RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA			
1. Approach Information/Admission Area a) Clients who are suffering from cough of long duration or who have a referral form from their Rural Health Midwife, government health institutions, private MDs or partner Community-Based Organizations (CBOs) are admitted b) For old cases who are to get their TB drugs, proceed directly to the PHN.	Individual Treatment Record  Philhealth MDR  Referral/DSSM Request Form  Logbook for clients	Information/ Admission Area	<b>Ivy Layda</b> <b>Vivian Quinto</b> <b>Roselle Bulatao</b> <b>Raquel Saplan</b> <b>Charity. De Vera</b> <b>Roselle Bulatao</b> Assisting Staff/BHWs  <b>Ma. Jesusa Rosal</b> <b>Kristine Soriano</b> Medical Services Staff	1 Minute	
2. Proceed to the PHN Room, where vital signs and other findings (X-ray results) will be recorded on the Individual Treatment Record (ITR)	Individual Treatment Record  X-ray film and result, if any	PHN Room	<b>Milrose U. Caburian</b> Public Health Nurse	10 Minutes	
3. The patient is then referred to the Doctor for medical assessment and to determine if patient can be diagnosed as TB or will require Direct Sputum Smear Microscopy (DSSM),	Individual Treatment Record  DSSM Request Form	Doctor's Office	<b>Dr. Cristina P. Estrada</b> Rural Health Physician	20 Minutes	

4. If client requires Direct Sputum Smear Microscopy (DSSM), he/she is referred to the laboratory area where sputum cups will be provided with proper instructions.	Individual Treatment Record DSSM Request Form	Laboratory Area	<b>Max Andrada</b> Medical Tech Assistant	5-7 Minutes	
5. DSSM result: a) If sputum is positive -treatment will immediately be started b) If sputum is negative and client has no x-ray result, refer patient for x-ray examination and instructions to immediately come back with the x-ray result. c) If sputum is negative, x-ray results is either positive or negative, patient will be referred to TBDC d) Go back to RHU-II after securing the result of TBDC referral. if treatment is needed based on the TBDC recommendation, patient is registered and treatment will be immediately started. e) Instructions on the treatment, when to get TB Drugs and health information on TB and drug interactions and side effects are provided for the patients.	Individual Treatment Record Result of sputum exam  TBDC Referral Form  NTP Registry  NTP Treatment Card  IEC Materials	TB-DOTS Clinic	<b>Max Andrada</b> Medical Tech Assistant  <b>Milrose U. Caburian</b> Public Health Nurse	20 Minutes to 2 weeks	
<b>TOTAL RESPONSE TIME: 35 - 45 Minutes to 2 weeks</b>					

#### H. PROVISION OF ANTI-LEPROSY DRUGS

This service identifies and treats patients with leprosy. Leprosy drugs are given to patients free of charge.

STEPS/PROCESSES					
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA	RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
1. Approach the Information/Admission Area a) Clients who are suffering from skin disease or who have a referral form from government health institutions or private MDs are directly referred to the PHN Room b) For Old Cases who are to get their leprosy drugs, proceed directly to the PHN Room.	Individual Treatment Record Philhealth MDR Referral/Skin Smear Test Result Logbook for clients	Information/ Admission Area	<b>Ivy Layda</b> <b>Vivian Quinto</b> <b>Roselle Bulatao</b> <b>Raquel Saplan</b> <b>Charity. De Vera</b> <b>Roselle Bulatao</b> Assisting Staff/BHWs	1 minute	
2. Proceed to the PHN Room, where vital signs and other findings (X-ray results) will be recorded on the Individual Treatment Record (ITR)	Individual Treatment Record Referral/Skin-Slit Smear Test Result	PHN Room	<b>Ma. Jesusa Rosal</b> Medical Services Staff  <b>Milrose U. Caburian</b> Public Health Nurse	5 minutes	
3. The patient is then referred to the Doctor's Office: a) Patient undergoes medical assessment for the skin lesions and symptoms or signs of nerve damage. b) Doctor may refer patient for skin test or biopsy if required c) If patient is diagnosed as positive for leprosy, he/she is started with his/her drug treatment. d) For old cases, Doctor will re-assess patient's condition.	Individual Treatment Record Referral/Skin Smear Test Result  Treatment Form for Leprosy	Doctor's Office	<b>Ma. Jesusa Rosal</b> Medical Services Staff  <b>Dr. Cristina P. Estrada</b> Rural Health Physician	20 Minutes	
4. Proceed to the PHN Room for enrollment of new cases. Issue free Leprosy Drugs for old cases and new cases. Patient will be given instructions on leprosy drugs intake, drug interactions and side effects and be instructed for follow up check up.	Treatment Form for Leprosy	Nurse's Room	<b>Ma. Jesusa Rosal</b> Medical Services Staff  <b>Milrose U. Caburian</b> Public Health Nurse	10 Minutes	
<b>TOTAL RESPONSE TIME: 35 - 40 Minutes</b>					

## I. MANAGEMENT OF ANIMAL BITES

The center only provides first-aid medical services for victims of animal bites and the patients are referred to animal bite centers if necessary.

STEPS/PROCESSES			RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA			
1. Approach the Information/Admission Area a) Clients who are suffering from animal bites or who have a referral form from the Rural Health Midwife or private MDs are brought to the Treatment Room	Individual Treatment Record Philhealth MDR Referral Form Logbook for clients	Information/ Admission Area	<b>Ivy Layda</b> <b>Vivian Quinto</b> <b>Roselle Bulatao</b> <b>Raquel Saplan</b> <b>Charity. De Vera</b> <b>Roselle Bulatao</b> Assisting Staff/BHWs	3 Minutes	
2. Proceed to the Treatment Area a) vital signs and other findings will be recorded on the Individual Treatment Record (ITR) b) wound cleaning and assessment of wounds/lecture on animal bite wound care	Individual Treatment Record	Treatment Area	<b>Ma. Jesusa Rosal</b> Medical Services Staff <b>Milrose U. Caburian</b> Public Health Nurse	15 Minutes	
3. Go to Doctor's Room for evaluation, for further treatment if necessary, and for instructions. If patient, after evaluation, is deemed necessitating anti-rabies vaccination, patient will be referred to an Animal Bite Center	Individual Treatment Record Referral letter to Animal Bite Center, Prescription	Doctor's Room	<b>Dr. Cristina P. Estrada</b> Rural Health Physician	15 Minutes	
4. Go to the Treatment Area/Nurse's Room for drug dispensing and for further instructions and services.	Individual Treatment Record Drug Recipient's logbook /Drug Prescription	Treatment Area/Nurse's Office	<b>Ma. Jesusa Rosal</b> Medical Services Staff <b>Milrose U. Caburian</b> Public Health Nurse	5 Minutes	
<b>TOTAL RESPONSE TIME: 35-40 Minutes</b>					

## J. ISSUANCE OF DEATH CERTIFICATES

Death Certificates are forms to determine the cause/s of death of a deceased person who died within the jurisdiction of the Municipality of Calasiao. These forms come from the Local Civil Registry and are issued to relatives or guardians of the deceased.

STEPS/PROCESSES			RESPONSIBLE PERSON/S	DURATION	FEES and CHARGES
CLIENT	REQUIREMENTS/ DOCUMENTS NEEDED	OFFICE AREA			
1. Proceed to the Admission Area a) Client must have with them the Death Certificate already filled-up by the Local Civil Registrar's Office on general data of the deceased b) The embalmer should have accomplished pertinent data and signed at the back of the Death Certificate c) The client/informant should have paid the appropriate fee for the Death Certificate d) The staff will interview client/informant on the probable cause/s of the death of the deceased and will fill up the Death Certificate e) If there are questionable concerns regarding the cause/s of the death of the deceased, the staff will refer the matter to the Doctor	Logbook for clients Death Certificate Medical abstract or records for verification of medical history as basis for determining the cause of death Official Receipt	Information / Admission Area	<b>Ivy Layda</b> <b>Vivian Quinto</b> <b>Roselle Bulatao</b> <b>Raquel Saplan</b> <b>Charity. De Vera</b> <b>Roselle Bulatao</b> Assisting Staff/BHWs <b>Ma. Jesusa Rosal</b> Medical Services Staff <b>Milrose U. Caburian</b> Public Health Nurse	10-15 Minutes	
1. Go to the Doctor's Office a) If necessary, the Doctor will ask other information from the client/informant on the probable cause/s of the death of the deceased or will ask the client/informant to provide other documents to support the entries on the Death Certificate b) Doctor will sign the Death Certificate	Medical abstract or records for verification of medical history as basis for determining the cause of death	Doctor's Room	<b>Dr. Cristina P. Estrada</b> Rural Health Physician	10 -15 minutes	
<b>TOTAL RESPONSE TIME: 20-30 Minutes</b>					