

LUNG CENTER OF THE PHILIPPINES
CITIZEN'S CHARTER

<p style="text-align: center;">DOH</p> <p style="text-align: center;">VISION</p> <p style="text-align: center;">The leader of health for all in the Philippines.</p> <p style="text-align: center;">MISSION</p> <p style="text-align: center;">Guarantee equitable, sustainable and quality health for all Filipinos, especially the poor and to lead the quest for excellence in health</p>	<p style="text-align: center;">LUNG CENTER OF THE PHILIPPINES</p> <p style="text-align: center;">VISION</p> <p style="text-align: center;">The premier institution for lung and other chest diseases providing quality health care through excellent service, training and research.</p> <p style="text-align: center;">MISSION</p> <ol style="list-style-type: none">1. We provide quality health care through: state-of-the-art facilities by highly competent and compassionate staff for the improvement of quality of life of the Filipino people.2. We provide immediate attention to every individual in need regardless of creed, color, sex, socio-economic status and political affiliations.3. We endeavor to achieve financial stability and long term sustainability.4. We are dedicated to lung health promotion and advocacy.	<p style="text-align: center;">SERVICE PLEDGE</p> <p style="text-align: center;">We, the officials and employees of the Lung Center of the Philippines (LCP), pledge and commit to deliver quality public services as promised in the LCP Citizen's Charter and the ISO 9001:2008 standards.</p> <p style="text-align: center;">We Uphold our shared values of concern and care for patients, employees and institution; responsibility and discipline; commitment and dedication to excellence; respect for individual worth; integrity and honesty; unity and teamwork; and creativity and innovativeness.</p>
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**LUNG CENTER OF THE PHILIPPINES
CITIZEN'S CHARTER**

**SECTION OF RESPIRATORY SERVICES (SRS)
ELECTROCARDIOGRAM (ECG)**

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Receives request	5 mins.	Clerk or RT on duty	Php 365.00	Request from Doctor
2		Registers patient				
3		Prints charge slip				
4		Pays the corresponding fee at the Cashier				
5		Presents Official Receipt	2 mins.	Clerk or RT on duty		
6		Prepares the patient				
		Performs the procedure				
		End of Transactions				

Note: If patient wants to borrow ECG strip, lets patient/relative sign the “borrower by” space on the request form

**SECTION OF RESPIRATORY SERVICES (SRS)
ARTERIAL BLOOD GAS (ABG)**

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Receives request from patient,,	5 mins.	Clerk or RT on duty	Php 680.00	Request from Doctor
2		Registers patient and print charge slip				
3		Lets patient/relative pay at the cashier				
4		Prepares materials for ABG extraction	1 min.	RT		
5		Gives patient/relative print out of initial result for AP	3 mins.	RT		
6		Instructs patient/relative to get official reading of result after 3 working days (if pay patient, official result will be forwarded to AP)	2 mins.	RT		
		End of Transactions				

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
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PULMONARY FUNCTION TEST / SPIROMETRY

1	Patient	Receives request form from patient	5 mins.	Clerk or RT	Php 630.00 to 3,380.00	Request from Doctor
2		Informs the patient about amount of test				
3		Asks if patient had taken broncho dilator				
4		Performs or Schedules Patient				

STRESS / EXERCISE TEST

1	Patient	Received request form from patient	10 mins.	Clerk or Sleep Tech	Php 1,200.00	Request from Doctor
2		Informs the patient about procedure and the amount of the test				
3		Schedules patient				

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
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SPUTUM INDUCTION

1	Patient	Receives requisition from the patient	5 mins.	Clerk of RT	Php 160.00 / procedure + neb kit Php 120.00 + cannister Php 15.00 each = Php 645.00	Request from Doctor
2		Renders patient in the cash transaction				
3		Prints charge slip				
4		Lets patient pay at the cashier				
5		Prepare machine to be use	1 min.	RT		
6		Prepares nebulizer kit and canister for use of the patient	1 min.			
7		After payment, assist patient in the collection area.	1 min.			
8		Instruct patient on how to collect sputum	3 mins.			
9		Performs procedure	15 mins to 1 hr			
10		After collection of sputum in the 3 canister, instructs patient to proceed to the laboratory for AFB smear	3 mins.			

- end of transactions -

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEEES	FORMS NEEDED
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POLYSOMNOGRAPH / SLEEP STUDY

1	Patient	Receives requisition form from patient	10 mins.	Clerk or Sleep Tech	Php 8,000.00 to 15,000.00	Request from Doctor
2		Inform the patient about procedure and the amount of test				
3		Schedule patient				

2D-ECHO

1	Patient	Receives requisition form from patient	10 mins.	2D-echo Tech	Php 2,170.00 to 4,237.50	Request from Doctor
2		Informs the patient about procedure and the amount of test				
3		Schedules patient				

PRE-FLIGHT/HYPOXIA INHALATION TEST

1	Patient	Receives request form from patient		Clerk or RT	Php 2,025.00	Request from Doctor
2		Inform the patient about amount of test				
3		Performs procedure	45 mins.	RT		
4		Types of result for Interpretation	3 mins.	Clerk or RT		
5		Lets doctor sign result	10 mins.			
6		Releases Results				

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LABORATORY SERVICES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	TIME	*FEES	FORMS NEEDED
1	Patient	Get a number card in the rack provided. (Kumuha ng numero na nakasabit sa harap ng bintana ng opisina.)	2 seconds	Med. Tech.	7am-5pm	Schedule of fees is located at the OPD Laboratory Window	
2	Patient	Wait for the number to be called. (Hintayin na matawag ang numero.)	15-20 minutes	Med. Tech.			
3	Patient	Present inquiry or submit laboratory request or specimen to the laboratory staff. (magtanong o magbigay ng laboratory request sa laboratory staff lamang.)	2 seconds	Med. Tech.			Request from the attending physician
4	Patient	Check request/s for completeness of data. (suriin ang lab. request sa mga kinakailangang impormasyon.)	3-5 minutes	Med. Tech.			
5	Patient	Inspect specimen for quality and quantity. (Suriing mabuti ang specimen base sa kalidad at kung sapat para sa examinasyon.)	3-5 minutes	Med. Tech.			Rendered Request form

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	TIME	*FEES	FORMS NEEDED
6		Encode data in the Hospital Information System (BIZBOX). (itype ang impormasyon sa computer.)	5 minutes	Med. Tech.	7AM - 5PM	Schedule of fees is located at the OPD Laboratory Window	Transaction slip form
7	Patient	Pay corresponding fees to the cashier . (Pagbabayad ng kaukulang halaga sa kaheera.)	3-4 minutes	Patient			
8	Patient	Present Official Receipt (OR) to the laboratory (upang maitala.)	1-2 minutes	Patient			Official Receipt form
9	Patient	Extract blood for examination. (Kukuhanan ng dugo ang mga pasyente na may request ng blood examination.)	10 minutes	Med. Tech.			Transaction slip form with corresponding receipt form
10	Patient	Endorse all specimen received to the laboratory section concerned. (Pagdala ng specimen sa loob ng laboratoryo.)	15 minutes	Lab Aide			

*** Schedule of fees is located at the OPD Laboratory Window**

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PROCEDURE- EMERGENCY ROOM

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Directs patient/companion to triage area	1 min.	Security Guard on-duty		
2		Asks patient's name, and chief complaints	2 mins.	Nurse / ER Fellow		ER Patient Service
3		Examines / Assesses patient's condition	5 - 10 mins.	Nurse / ER Fellow		Nursing Assessment/ ER Patient Service/ Risk Fall Assessment
4		Prescribes medicines and/or requests diagnostic procedures	3 mins.	Nurse / ER Fellow		Request form
5		Administers medications	1 min.	Nurse		ER flow sheet
6		Evaluates results of diagnostic procedures	2 mins.	ER Fellow		ER Patient Service
7		Evaluates disposition of patient (admission or out-patient)	2 mins.	ER Fellow		ER Patient Service
8		Gives charge slip for ER fee and other procedures	1 min.	Nurse	ER fee – 325.00	Charge slip
9		Presents official receipt (OR)	5 mins.	Patient/ Companion		Official Receipt
10		Checks and gives instructions on: prescription, further laboratory work-up, referral & follow-up	3 mins.	Nurse/ ER Fellow		Request form/ Prescription/ Appointment slip

PATIENT TO BE ADMITTED

11		Gives admission notice to admitting section	1 min.	ER Fellow		Admission notice
12		Coordinates and transports patient to Ward	5 mins.	Nurse/ N. Aide		Admission chart

PROCEDURE -OUT PATIENT DEPARTMENT - FOLLOW-UP

FOR OLD PATIENTS:

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Gives OPD card & appointment slip	30 mins.	Nurse / N. Aide		OPD Card
2		Verifies appointment	1 min.	Nurse / N. Aide		Appointment slip
3		Registers patient in the hospital database	5 mins.	Nurse / N. Aide		OPD Card
4		Prepares charge slip for the OPD fee	1 min.	Nurse / N. Aide		Charge slip
5		Pays at the Cashier	5 mins.	Patient/ Companion	Php 60.00	Charge slip
6		Accepts payment and issues the Official Receipt (OR)	1 min.	Cashier		Official Receipt
7		Returns to the OPD and presents OR for OPD fee	1 min.	Patient/ Companion		Official Receipt
8		Assesses and examines patient	5 – 10 mins.	Medical Officer		OPD Chart
9		Prescribes or request additional procedures	1 min.	Medical Officer		Request form

10		Checks and gives instructions on: prescription, further laboratory workups, referral & follow-up	5 mins.	Nurse		Request form/ Prescription/ Appointment slip
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REMINDER:

- **Registration time is between 7:00am to 10:00am**
- **Consultation starts at 10:00am**

PROCEDURE - OUT PATIENT DEPARTMENT

FOR NEW PATIENTS:

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Gives out information slip	30 seconds	Nurse / N. Aide		Information Slip
2		Fills out information slip	1 min.	Patient/Companion		Information Slip
3		Collects information slip	5 mins.	Triage Officer		Information Slip
4		Prescribes or request diagnostic procedures	5 mins.	Triage Officer		Request form
5		Registers patient in hospital database	1 min.	Nurse / N. Aide		Information Slip
6		Prepares charge slip	1 min.	Nurse / N. Aide		Charge slip
7		Pays at the cashier	5 mins.	Patient/Companion	Php 70.00	Charge slip
8		Accepts payment and issues Official Receipt (OR) to the patient	1 min.	Cashier		Official Receipt
9		Proceeds to Radiology Dept. and presents OR for the Chest X-ray	10 mins.	Patient/Companion		Request form

10		Undertakes chest x-ray				
11		Returns to the OPD and presents OR for the OPD and Service Card	1 min.	Patient/Companion		Official Receipt
12		Assesses and examines the patient	5 – 10 mins.	Medical Officer		OPD Chart
13		Prescribes or requests additional procedures	1 min.	Medical Officer		Request form
14		Checks and gives instructions on: prescription, further laboratory workups, referral & follow-up	5 mins.	Nurse		Request form/ prescription/ appointment slip

REMINDER:

- **Registration time is between 7:00am to 10:30am (Triage)**
- **Consultation starts at 1:00pm**

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PROCEDURE- ADMITTING PATIENTS

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Presents admitting order to Admitting Clerk	1 min.	Patient / Relative		Admitting Order
2		Checks availability of room preferred by patient's relative. Informs Ward Nurse about the admission	5 mins.	Admitting Clerk		
3		Accomplishes admission sheet and related confinement requirements	10 mins.	Patient / Relative		Admission Sheet
4		Checks data as accomplished by patient or relative. Request for credential/s like ID of person responsible for account. Inquires if patient is a member of Philhealth OSCA, HMO, etc. Explains hospital policies and procedures	5 mins.	Admitting Clerk		Admission Sheet
5		Signs conforme regarding consent of admission and their corresponding responsibilities	1 min.	Patient / Relative		Consent for admission (Pay/Service)
6		Prepares ID tag and admission kit, encodes admission, itemized bills and print Patient Data Sheet for reference purposes.	5 mins.	Admitting Clerk		Charge Slip, PDS

7		Proceeds to Social Service in the case of service patients. For pay patients, they may offer voluntary deposit	5 mins.	Patient / Relative		
8	Patient	Follows-up call to the ward and checks readiness of bed or room. Registers patient in Philhealth Mandatory ledger and prepares name tag.	3 mins.	Admitting Clerk		
9	Patient	Transport patient to the ward Forwards patient data sheet to the Billing, credit and Collection Division	10mins.	Nursing Aide		

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PROCEDURE- DISCHARGING AND ISSUANCE OF CLEARANCE TO PATIENT

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient	Orders discharge of patient	5 mins.	Physician/ Nurse-on-duty		
2		Clears patients from income centers	10 mins.	Nurse-on-duty		Credit adjustments if needed
3		Tags patients as discharge	1 min.	Nurse-on-duty		
4		Prepares patient's bill	15 mins.	Billing Clerk/ PHIC Clerk		Statement of Account (SOA)
5		Receives payment of bills	5 mins.	Collection Officer on duty	Amount of bill, Readers Fee	SOA, Readers Fee, Clearance slip from Drs.
6		Presents completed clearance	1 min.	Watcher / relative of patient		
7		Checks clearance / patient's belongings, instructs patient on home medication follow-up consultation	5 mins.	Nurse-on-duty		
8		Brings down patient to exit	5 mins.	Nursing Aide		
9		Gives clearance to guard	1 min.	Watcher / relative of patient		

**LUNG CENTER OF THE PHILIPPINES
PHARMACY DIVISION**

A. OUT-PATIENT/WALK-IN/GENERAL PUBLIC

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient / Patients Relative	Presents requisition slip or prescription	5 secs.	Pharmacist-on-duty		Requisition slip/Prescription
2		Reads and interprets prescriptions	1 min.	Pharmacist-on-duty		Requisition slip/Prescription
3		Prepares charge slip	30 secs.	Pharmacist-on-duty		Requisition slip/Prescription/ Charge Slip
4		Prepares medicine / Prescription filling	1 min.	Pharmacist-on-duty		Charge Slip
5		Presents Official Receipt (OR)	5 secs.	Pharmacist-on-duty		Charge Slip / O.R.
6		Dispenses Patient Counseling	1 min.	Pharmacist-on-duty		Charge Slip
7		Files charge slip	5 secs.	Pharmacist-on-duty		Charge Slip

B. OUT-PATIENT WITH CERTIFICATE OF MEDICAL ASSISTANCE (CMA)

1	Patient / Patients Relative	Presents prescription and CMA form	5 secs.	Pharmacist-on-duty		Prescription/ Charge Slip
2		Reviews CMA	10 sec.	Pharmacist-on-duty		CMA form
3		Reads and interprets prescription	1 min.	Pharmacist-on-duty		Prescription
4		Prepares of Charge Slip	30 secs.	Pharmacist-on-duty		Prescription/ Charge Slip

5	Patient / Patients Relative	Dispenses / Counsels patient	1 min.	Pharmacist-on-duty		Charge Slip
6		Files Charge Slip	5 secs.	Pharmacist-on-duty		Charge Slip

C. IN-PATIENT

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Nurse-on-duty/ward	Reviewing of request from ward	10 secs.	Pharmacist-on-duty		
2	Nurse-on-duty/ward	Rendering of requisition	10 secs.	Pharmacist-on-duty		
3	Nurse-on-duty/ward	Printing of requisition	10 secs.	Pharmacist-on-duty		Charge Slip
4	Nurse-on-duty/ward	Preparation of medicine / Prescription filling	1 min.	Pharmacist-on-duty		Charge Slip
5	Nursing Aide-on-duty	Dispensing	1 min.	Pharmacist-on-duty		Charge Slip
6		Filing of charge slip	5 secs.	Pharmacist-on-duty		Charge Slip

D. IN-PATIENT WITH CERTIFICATE OF MEDICAL ASSISTANCE

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Nursing Aide-on-duty	Presentation of CMA form	5 secs.	Pharmacist-on-duty		CMA form
2	Nurse-on-duty/ward	Reviewing of request from ward	10 secs.	Pharmacist-on-duty		
3	Nurse-on-duty/ward	Rendering of requisition	10 secs.	Pharmacist-on-duty		
4	Nurse-on-duty/ward	Printing of requisition	10 secs.	Pharmacist-on-duty		Charge Slip
5	Nurse-on-duty/ward	Preparation of medicine / Prescription filling	1 min.	Pharmacist-on-duty		Charge Slip

6	Nursing Aide-on-duty	Dispensing	1 min.	Pharmacist-on-duty		Charge Slip
7		Filing of charge slip	5 secs.	Pharmacist-on-duty		Charge Slip

E. WARD/OTHER DEPARTMENT OR DIVISION

1		Presentation of Requisition and Issue Slip (RIS)	5 secs.	Pharmacist-on-duty		RIS
2		Reviewing of RIS	30 secs	Pharmacist-on-duty		RIS
3		Preparation of medicine/Prescription filling	1 min.	Pharmacist-on-duty		RIS
4		Dispensing	1 min.	Pharmacist-on-duty		RIS

I – Flow for MDRTTB / PMDT Services:

Step	Patient / Client	Activity	Duration	Person in-charge	Fees
Screening	MDRTB Suspect Patient	Assess/Interview patient Collect (2) Sputum specimens Educate Patient re: Prevention of Spread -Give acknowledgment letter back to referring MD/DOTS facility	15-30mins.	Physician/Nurse	Free
	Non MDRTB Suspect Patient	- Refer back to referring MD/DOTS Facility	2-5mins.	- Physician	Free
Enrollment	Confirmed MDRTB Patient	- Collect (2) Sputum specimen -Inform the patient about the possible diagnosis of MDR-TB and the steps to be taken. Give PAUNAWA form	- 2hrs to 2 days - 5-10 mins.	- Nurse/Support Staff -Physician/Nurse	Free
Suspect is not seriously ill	Patient	-Await laboratory results -Release of results: DSSM: Culture: DST: -Inform referring facility of results.	- 4-5 days after the last specimen collection - 3-3.5 months after specimen collection - 4-5 months after specimen collection - once result are released	- Nurse	Free
Suspect is seriously ill	Patient	Refer to Consilium for Emperic treatment	After 1 week	Physician	Free

II- Flow for the Treatment of Patients with MDR-TB

Step	Applicant / Client	Activity	Duration	Person in-charge	Fees
Case Presentation to Consilium	Patient Case	TC Physician Proposes drug regimen to Consilium Consilium approves drug regimen	• Every Tuesday only	Physician	Free
Initial Patient Information at enrollment	Patient and Family	<ul style="list-style-type: none"> • Contact patient for enrollment • Inform the patient on the enrollment procedures • Give the pre-enrollment checklist Completion • Administration of Contract • Social Case Study Report • Residence Verification 	<ul style="list-style-type: none"> • 30 minutes • a day after enrollment (2hours per visit) 	Social Worker	Free
Contact Tracing	Patient and Family	<ul style="list-style-type: none"> • Contact Tracing instructions/interview • Chest X-ray for every household contacts • for positive Chest X-ray, (2) sputum collection will be done 	• Depends with no. of household contacts (15-30mins. Per household contacts)	Nurse	C/o of DST - (Private pt.)
Patient enrollment	Patient and Family	<ul style="list-style-type: none"> • Request baseline laboratory tests • Orient the patient and family on MDR-TB and on the procedures to be done for enrollment after • Provide drug education to patient 	• 30 mins. - 1 hour	Nurse/Support Staff	Free
Start the Treatment	Patient	<ul style="list-style-type: none"> • Supervise the patient during the entire period of treatment • Directly observe each treatment: <ul style="list-style-type: none"> - Administration of injection - Administration of drug 	<ul style="list-style-type: none"> • 18-24 months • 50/70 pts. Per day • 10-30mins each pt. Daily 5-30 mins per pt. 	Nurse/Support Staff	

		<p>regimen</p> <ul style="list-style-type: none"> • Continue providing information about TB and treatment decisions • Monitors the patient for adverse drug reactions • Monitors the progress of treatment by follow-up examination of sputum,x-ray and bld. Chem.. 	<ul style="list-style-type: none"> • Every month • daily • sputum collection monthly • x-ray – every 6 mos. • bld.Chem – every 6 mos. for below 50 yrs old - every 3 mos. For above 50 yrs old – or as needed 		Charge (Private Patients)
MDR-TB patient ongoing treatment	Ongoing patient	<ul style="list-style-type: none"> • Category IV Register Update • Review Charts • Preparation of Report • Support MDR-TB patients everyday as they come in for supervised treatment • Distribution of Enablers • Conduct of Group Discussion • Conduct of General Assembly 	<ul style="list-style-type: none"> • As Needed • monthly • monthly • weekly • weekly • weekly • every month 	<p>Nurse Nurse Nurse Social Worker</p> <p>Social Worker Social Worker Physician / Social Worker /Nurse /Support Staff</p>	Free
Default Tracing	Ongoing Patient	<ul style="list-style-type: none"> • Trace and take necessary actions for a patient who interrupts treatment • Phone call / home visit 	<ul style="list-style-type: none"> • as needed 	Social Worker	Free
Patient Decentralization	Ongoing Patient	<ul style="list-style-type: none"> • Tracking of confirmed patient ready to be decentralize to different Treatment Sites in Metro Manila & CALABARZON • Give Social Preparation for Patient Decentralization (SPPD) 	<ul style="list-style-type: none"> • monthly • 1 hour lecture 	<p>Nurse</p> <p>Nurse & Social Worker</p>	Free

		lecture for patient candidates for patient decentralization • Schedule for monthly patient decentralization • Preparation of drugs and forms for the Treatment sites • Initial Patient Endorsement to Trained Health Center • Dispensing, Recording and Reporting of Drug Consumption • Preparation of Adverse drug experience report • Monitoring and Supervision	• monthly • 1 day • 2 hours / endorsement • every other week	Nurse Pharmacist Nurse Nurse & Pharmacist Nurse Nurse	
Implement treatment decisions	Ongoing patient	• Adverse events - Dose change; drug change; discontinuation of offending agent; drug re-challenge; holding off offending agent temporarily; prescription of ancillary drug; medical referral • Change in DST pattern • Discontinuation of drug; drug or dose • Change to a more appropriate drug or dose • Drug change; dose change; discontinuation of drug; continuation of present regimen • Shift to Continuation Phase • Determine treatment outcome • Provide education at the end of treatment	• as needed	Nurse / Physician	Free

I- Flow for DOTS in Children Services:

Step	Patient / Client	Activity	Duration	Person in-charge	Fees	Forms Needed
1	Mother with her child	a. Initial Interview of mother	2-3 mins	Nurse	Free	NTP Diagnosis Form for children 0 – 9 yrs old X-ray form PPD Test
		b. Get the demographic data of the child including the vital signs and actual height & weight of the child	2-3 mins	Nurse	Free	
		c. Refer to the Pediatrician on duty for consultation & complete medical check-up	2-3 mins	Nurse	Free	
		* The Physician will prescribe appropriate diagnostic procedures like Chest X-ray & or PPD.	10-15 mins	Physician on Duty	Free	
2	Child	a. will do the request of Chest X-ray (PAL)	1 min	Nurse	350.00	Chest x-ray request
		b. Will do the PPD (5TU)	2 mins	Nurse	300.00	PPD request
3	Mother	• Interview for classification and for social case study	5-10 mins	Social Worker	Free	
4	Mother w/ her Child	• Follow-up of child for PPD reading after 72 hours	1 min	Nurse	Free	
5	Mother w/ her Child	• If Chest X-ray has an Official Reading, the mother is advised for follow-up				
6	Mother/Child	• Follow-up of child with the Physician once all diagnostic procedures are in.	10-15 mins	Physician	Free	Patient Chart

7	Mother w/ Child	<ul style="list-style-type: none"> • If child is diagnosed with Primary Kocks Infection (PKI), the child will be enrolled in the program prepare the Tx. Card, register the name at the TB Register for Children 	10-15 mins	Nurse	Free	NTP Treatment card for children NTP ID Card TB Registry
8	Child	<ul style="list-style-type: none"> • If the child lives near to our center (at least 1-2 rides) she/he will be enrolled. 				NTP Treatment card for children NTP ID Card
9	Child Mother/Child	<ul style="list-style-type: none"> • An initial dose of Anti-TB meds will be given, and thereafter. • Health education will be done 	5 mins 10 mins	Nurse Nurse	Free Free	

I – Flow for Plain DOTS Services:

Step	Patient/Client	Activity	Duration	Person in-charge	Fees	Forms Needed
Referral from OPD, DOTS Facility, walk-in or Private MD.	Patient	a. Interview the patient, get the result of sputum smear if it was done.	2-3 mins	Nurse	Lab. Charge for sputum at cost or socialize (Private MC)	Done w/ OPD Intra-Hospital referral form (Blue Form)
		b. Instruct patient for sputum collection 3 times if not yet done (1 spot collection/day)	2-3 mins	Nurse		Lab. request
For Positive Smear Result	Patient New Case with Philhealth coverage (1,500 – 6 to 8 mos	<ul style="list-style-type: none"> • May Enroll patient to our facility if within our catchment area or refer to their nearest Health Center. • Give Health Education on Facts about TB for new enrolled patient. 	3-5 mins 30 mins – 1 hour	Nurse		NTP treatment card NTP Identification card If patient refer to peripheral DOTS Hospital reference form (Yellow form)
Start the Treatment	Patient	<ul style="list-style-type: none"> • Supervise the patient during the entire period of treatment • Directly observed each treatment of daily dose • Administration of injection if necessary. • Continue providing information about TB and treatment decisions 	3 -5 mins	Nurse	Free	Laboratory request for the sputum follow-up

For Negative Smear Result	Patient	<p>* Case is for TB Diagnostic Committee (TBDC):</p> <p>If for Treatment:</p> <ul style="list-style-type: none"> - May Enroll patient to our facility if within our catchment area or refer to their nearest Health Center. <p>If not for Treatment:</p> <ul style="list-style-type: none"> - Refer back to DOTS facility/MD. - Under surveillance 	1 week after, to get the decision from TBDC.	TBDC Committee / Nurse	Free	<p>TBDC Form Claim slip for TBDC</p> <p>If refer patient to HC get Hospital referral form (Yellow Form)</p>
Admitted Patient in the Ward	Patient	<ul style="list-style-type: none"> • Referred to PHDU if TB case • For approval of NTP Coordinator: - if for treatment, give initial dose of TB meds. - Once for discharge, refer to Health Center or may continue the treatment in our DOTS facility. 		Nurse	Free	<p>IntraHospital referral Form (Blue Form)</p> <p>AFB smear request</p> <p>OR Chest x-ray</p>
Recording of all TBDC decision on the Logbook	Patient	<ul style="list-style-type: none"> • If recommended for treatment, for referral to Health Center. • If for surveillance only, for follow-up every 3 months. 	After TBDC every Monday	Nurse	Free	Chest x-ray request

Lung Center of the Philippines

PHYSICAL THERAPY & REHABILITATION

Programs	Steps	Client	Activities	Duration of Activity	Person In Charge	Time	Fees	Forms Needed
COPD Support Group	<ol style="list-style-type: none"> 1. All patients should have referral from their pulmonologist 2. Present the referral to the Staff PT in charge for filling and scheduling 3. All referrals should be collated (a minimum of 8 and maximum of 10 referrals per batch) 4. There will be 4 batches in a year 5. Patients will notified of their respective schedules 	Diagnosed as COPD and currently controlled and medically stable COPD patient	<ol style="list-style-type: none"> 1. Initial Evaluation (6 Minute Walk Test, St George Questionnaire for QOL) 2. Individualized Exercise Program 3. Post Evaluation (6 Minute Walk Test, St George Questionnaire for QOL) 4. Lectures on COPD, Trouble Makers and Medicine, Exercise, Diet, and Intimacy 	6-week Exercise Program (12 sessions)	Staff in Charge Assigned (Rotation Basis)	Twice a week (Tues and Thur) 8:30 am to 12 noon	Quantified Free Service (QFS)	<p>Referral Form from pulmonologist</p> <p>Referral form</p>

In Patient Services	<p>1. Referral from fellows and consultants 2. PT in charge will evaluate and treat the patient</p>	<p>Patients admitted in the Charity and Pay Ward with the following Conditions: Pulmonary diseases, Surgical, Neurologic, Musculoskeletal, Orthopedic, Sports Injuries and Other Medical Conditions</p>	<p>1. Initial Evaluation 2. Individualized Bedside Exercise Program 3. Ward Instructions</p>	<p>Daily, From Initial Referral of Attending Physician or Consultant until discharge from Hospital services.</p>	<p>Staff in charge assigned (Rotation Basis)</p>	<p>Daily</p>	<p>See Separate Sheet for the Recent Pricelist</p>	<p>Referral form from fellows and consultants</p>
Out Patient Services	<p>1. Referral from fellows and consultants. 2. For Employees, referral from Employees physician. 3. PT in charge will evaluate and treat the patient</p>	<p>Patients referred with the following Conditions: Pulmonary diseases, Surgical, Neurologic, Musculoskeletal, Orthopedic, Sports Injuries and Other Medical Conditions</p>	<p>1. Initial Evaluation 2. Individualized Exercise Program 3. Home Exercise Program</p>	<p>As scheduled by staff in charge and as prescribed by physician or Rehab MD (Appointment Basis)</p>	<p>Staff in charge Assigned (Rotation Basis)</p>	<p>Daily</p>	<p>See Separate Sheet for the Recent Pricelist</p>	<p>Referral form from fellows and consultants Referral from Employees Physician</p>

**RADIOLOGY DEPARTMENT
CITIZEN'S CHARTER**

DIAGNOSTIC SECTION

REFERRAL FOR CHEST AND NON CONTRAST PROCEDURES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	FORMS NEEDED
1	Patient	Receives request from patient	5 mins.	Technologist/Clerk at x-ray reception	24/7	Schedule of fees is located at the radiology reception window	X-ray request
2		Prepares charge slip					Charge slip
3		Presents proof of payment					Official Receipt
4		Registers and prepares patient I.D.		X-ray request			
5		Performs the desired x-ray examination	5-20 mins.	X-ray Technologist			X-ray request
6		Develops the exposed films	2 mins.	X-ray Technologist			Exposed film
7		Interprets the films		Radiologist			X-ray result form
8		Brings in-patient back to the ward	3 mins.	Nursing Aide			
9		Informs out-patient of release date of x-ray result	1 min.				Official receipt and ID

**RADIOLOGY DEPARTMENT
CITIZEN'S CHARTER**

DIAGNOSTIC SECTION

REFERRAL FOR CONTRAST PROCEDURE

STEP	CLIENT/ PATIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	
1	Patient	Receives accomplished referral (Request)	5 mins.	Technologist / Clerk at x-ray reception	8am to 5pm	Schedule of fees is located at the radiology reception window	X-ray request
		Gives written instruction for preparation of patient prior to the procedure Schedule the date of patients examination - to ward nurse for in-patient - to patient / relative for out-patient					Patient preparation
2		Proceeds to / Transported to Radiology department on scheduled date of exam	5 mins.	Patient			X-ray request & patient consent form
3		Prepares charge slip on day of exam Registers patient name and prepares film I.D.	3 mins.	Technologist / Clerk at x-ray reception			Charge slip
4		Presents proof of payment	3 mins.	Patient/ companion			Official receipt
5		Performs the desired special procedure	30 to 1 hr.	Radiologist and Radiologist Tech.			X-ray request & patient consent form
6		Develop the exposed films	5 mins.	Radiologist and Radiologist Tech.			
7		Interprets the films		Radiologist			

8		Brings in-patient back to the ward	3 mins.	Nursing Aide			X-ray result form
9		Informs out-patient of release date of x-ray result.	1 min.	Technologist / Clerk			Official receipt

CT SCAN SECTION

REFERRAL FOR CT SCAN CONTRAST AND NON CONTRAST PROCEDURES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	FORMS NEEDED
1	Patient	Receives accomplished referral (Request) Gives verbal instructions for preparation of patient prior to the procedure Schedule the CT Scan patient examination - to ward nurse for in-patient - to patient / relative for out-patient	5 mins.	Technologist / Clerk at CT Scan reception	8am to 5pm	Schedule of fees is located at the radiology reception window	CT Scan request CT Scan schedule slip
2		Proceeds to Radiology Dept. CT Scan section on scheduled date of exam	5 mins.	Patient			CT Scan request
3		Prepares charge slip on the day of exam Checks that the consent, questionnaire and request are accomplished properly	3 mins.	Technologist / Clerk at CT Scan reception			Charge slip & consent form
4		Presents proof of payment	3 mins.	Patient/Relative or companion			Official receipt
5		Checks result of creatinine Performs CT Scan examination	30 mins. To 1 hr.	Radiologist / R.T.			Laboratory request

6		Interprets CT Scan		Radiologist			CT Scan result form
7		Brings in-patient back to the ward	3 mins.	Nursing Aide			
8		Release result of CT Scan examination	1 min.	Technologist / Clerk			Official receipt

CT SCAN SECTION

REFERRAL FOR CT GUIDED INTERVENTION PROCEDURES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	FORMS NEEDED
1	Patient	Receives accomplished referral (request) Gives If CT Scan films are written / Verbal instructions for the preparation of patient prior to the procedure If CT Scan films are available it is referred to radiologist	5 mins.	Technologist / Clerk at CT Scan reception	8am to 5pm	Schedule of fees is located at the radiology reception window	Schedule slip LCP Form No.3007
2		A schedule is given to the patient with RAPID PAPS Out-patients - CT clerk send notice to laboratory In- patients – nurse send notice to laboratory	5 mins.	Technologist / Clerk at CT Scan reception			Lab form #3 Clinical laboratory request
3		Proceeds to / Transported to radiology Dept. CT Scan Section on schedule date of exam Checks the consent, receives result of bleeding time and clotting time Prepares charge Slip on the day of exam Registers patient name	5 mins.	Patient			Lab form No. 41-014 Consent for Hospital diagnosis & care Charge slip

4		Presents proof of payment	3 mins.	Patient/Relative or Companion			Official receipt
5		Performs CT Guided Biopsy	30 mins to 1 hr	Radiologist			Patients chart
6		Sends request / specimen to laboratory	5 mins.	Technologist / Clerk			LCP form #3 Clinical laboratory request & LCP form #21-103 Surgical Pathology

RADIOLOGY DEPARTMENT FRONTLINE ACTIVITIES

ULTRASOUND

REFERRAL FOR ULTRASOUND PROCEDURES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	FORMS NEEDED
1	Patient	Receives accomplished referral (request) Gives verbal instructions for the preparation of patient prior to the procedure Schedule the Ultrasound patient examination - to ward nurse in-patient - to patient / relative for-out patient	5 mins.	Technologist / Clerk at CT Scan reception	8am to 5pm	Schedule of fees is located at the radiology reception window	X-ray / Ultrasound request form
2		Proceeds to / Transported to Radiology Dept. Ultrasound section on scheduled date of exam	5 mins.	Patient			X-ray / Ultrasound request form
3		Prepares charge slip on the day of exam Registers patient name	3 mins.	Technologist / Clerk at CT Scan reception			Ultrasound Transaction form
4		Performs Ultrasound procedures	30 mins to 1 hr	Radiologist and RT			Ultrasound Request form – Outpatient Transaction form – Inpatient Patient's chart

5		Interprets Ultrasound		Radiologist			X-ray result form
6		Brings in-patient back to the ward	5 mins.	Nursing Aide			
7		Release result of Ultrasound examination	1 min.	Technologist / Clerk			Official receipt

REFERRAL FOR ULTRASOUND GUIDED INTERVENTION PROCEDURES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	FORMS NEEDED
1	Patient	Receives accomplished referral (request) Gives written / verbal instructions for the preparation of patient prior to the procedure A schedule is given to the patient Out-patients-U/S Tech. Send notice to laboratory In-patients-nurse send notice to laboratory	5 mins.	Technologist / Clerk at U/S reception	8am to 5pm	Schedule of fees is located at the radiology reception window	X-ray/ Ultrasound request form
2		Coordinates schedule with ward for in patient, patients relative for out-patient	5 mins.	Technologist / Clerk at U/S reception			X-ray/ Ultrasound request form
3		Proceeds to / Transported to Radiology Dept. Ultrasound Section on schedule date of examination Checks the consent receive result of bleeding time and clotting time	5 mins.	Patient			X-ray/ Ultrasound request form Consent form for Hospital Diagnosis & Care Lab request form Out-Patient – Out Patient Service Form

4		Register patient name Prepares charge slip on the day of exam	5 mins.	U / S Tech.		Transaction form or receipt
5		Performs Ultrasound Guided Biopsy	30 mins to 1hr	Radiologist		In Patient – Patient's Chart Out Patient – Progress Notes/ Operative Record
6		Send request / specimen to laboratory Patient are device to follow up result after five (5) working days	5 mins.	Technologist / Clerk		Lab request form Out Patient - Service form & Progress notes In Patient – Patient's Chart

**RADIOLOGY DEPARTMENT
CITIZEN'S CHARTER**

RADIOTHERAPY SECTION

REFERRAL FOR RADIATION TREATMENT PROCEDURES

STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON IN CHARGE	TIME	FEES	FORMS NEEDED
1	Patient	Receives referral		Nurse	7am to 7pm		Referral form
2		Gives information to the patient regarding his/her treatment and treatment cost	10 mins.	Nurse			Verbal
3		Take vital signs	10 mins.	Nurse			Patient's chart
4		Refer to Rad. Oncologist for further evaluation	5 mins.-8 mins.	Nurse/Rad. Tech.			
5		Register patient data		Rad. Tech.			Patient's chart
6		Prepare charge slips and instruct the patient to pay at the cashier	3mins.	Rad. Tech.			Charge slip
7		Presents proof of payment	3 mins.	Patient/Relative or companion			Official receipt
8		Performs the x-ray simulation planning	30 mins.	Rad. Oncologist and Med. Physicist/Rad. Tech.			Evaluation form
9		Prepare immobilization	10 mins.	Rad. Tech.			N/a
10		Mark treatment site using tattoo	2 mins.	Rad. Tech.			CT Scan request
11		If CT-planning, proceed to CT-Scan room	5 mins.	Patient, Rad. Onco. And Med. Physicist			
12		Position the patient at the CT table for scanning	3 mins.	Rad. Tech.			

13		Perform CT Planning	30 mins	Rad. Oncologist and Med. Physicist/Rad. Tech.		
14		Mark the treatment site using tattoo	2 mins.	Rad. Tech.		
15		Return back to radiotherapy building	5 mins.	Patient, Rad. Onco. And Med. Physicist		
16		Prepare molding blocks	30 mins.	Rad. Tech.		
17		Compute daily dose/site using computer planning	10 mins.	Med. Physicist		
18		Prepare the patient for irradiation treatment	2 mins.	Rad. Tech.		
19		Position and set-up the patient at the treatment table	3 mins.	Rad. Tech.		
20		Deliver the desired treatment dose	8 mins.-15 mins.	Rad. Tech.		
21		Give instructions for his/her daily treatment	2 mins.	Rad. Tech.		
22		Patient check up	5 mins.	Nurse/Rad. Oncologist		
23		Patient end of treatment, check-up	5 mins.	Nurse/Rad. Oncologist		

CITIZEN'S CHARTER

PROCEDURE ON PROCESSING CLIENT'S COMPLAINTS

STEP	ACTIVITY	PERSON/PARTY RESPONSIBLE	TIME FRAME
1	Submits a complaint to the Patient's Relations Complaints Desk	Client	1 working day / within 24 hrs.
2	Receives complaint and checks if the complaint meets the following requirements: 1.) Written in vernacular or in English 2.) Complete name and mailing address is clearly spelled out. 3.) Duly signed by the complaint	Patients' Relations Marketing Office (PRMO) STAFF	
3	Logs and refers the complaint to the concerned department/section for written explanation.		
4	Submits to the Public Relations Marketing Office (PRMO) written explanation with supporting document if and when necessary.	CONCERNED DEPT. / SECTION	2 working days / within 48 hrs.
5	Receives and evaluates the written response of concerned department / division / section if the response is: 1) Appropriate : PRMO shall send it to the complaining client at his / her mailing address through registered mail or to e-mail address. Reply should be signed by the head where the PRMO is under. 2) Inappropriate : PRMO may refer the complaint and written response to the Integrity Development Committee (IDC) .	PRMO	1 working day / within 24 hrs.
6	Convenes the IDCF Members.	IDC CHAIRMAN	5 working days / within 120 hrs.
7	Discuss the complaint and written response.	IDC COMMITTEE	
8	Formulates final reply to complainant signed by IDC Chairman and forwards to the PRMO	IDC COMMITTEE	

9	Receives final reply	PRMO	2 working days / within 48 hrs.
10	Sends/Mails final reply to the complainant	PRMO	
11	Furnishes copy of reply to the following offices: a. Director's Office b. Personnel c. Area concerned	PRMO	

- **If within fourteen (14) working days of no reply from the complainant either by mail or e-mail, the reply is deemed appropriate and acceptable.**

CITIZEN'S CHARTER

MEDICAL SOCIAL SERVICE IN PATIENT PROCESS

UPON ADMISSION						
STEP	CLIENT	ACTIVITY	DURATION OF ACTIVITY	PERSON RESPONSIBLE	FEES	FORMS NEEDED
1	Patient/ Relative	<ul style="list-style-type: none"> • Presents Personal Data Sheet (PDS) from the Admitting to Medical Social Service (MSS) 	2 minutes	Relative/ Patient (pt)	N/A	Personal Data Sheet
2		<ul style="list-style-type: none"> • Marks PDS with MSS Inpatient stamp and schedules patient for an interview within 24 hours upon admission 	5 minutes	Medical Social Worker (MSW)		Personal Data Sheet

WARD VISIT & INTAKE INTERVIEW						
1	Patient/ Relative	<ul style="list-style-type: none"> • Conducts room-to-room visit to 3A & 3B and calls MICU & STU to update daily admission • Marks PDS at patient's chart with MSS classification stamp • Schedules relative/s of new patient for an interview at MSS Office • Follows-up "May-Go-Home" patients 	30 – 45 minutes	Medical Social Worker	N/A	Personal Data Sheet

2		<ul style="list-style-type: none"> Goes to MSS office for the scheduled interview 	2 minutes	Relative/s		
3		<ul style="list-style-type: none"> Conducts interview to the relative/s of patient In case patient has no relative, MSW conducts bedside interview Explains and advises to comply MSS requirements to be able to avail services Assess & classifies patient based on the data gathered 	20 – 30 minutes	Medical Social Worker	N/A	<ul style="list-style-type: none"> Photocopy of Updated Cedula Photocopy of any valid ID Barangay Certification Social Case History Treasurer's Certificate Employment Certificate (if employed) Photocopy of Pay Slip

SUBMISSION OF REQUIREMENTS & REFERRALS

SUBMISSION OF REQUIREMENTS & REFERRALS						
1	Patient/Relative	<ul style="list-style-type: none"> Secure the documents needed by MSS Submit complete requirements to MSW 	<p>3 – 5 days</p> <p>15 minutes</p>	Relative/s	N/A	<ul style="list-style-type: none"> Medical Abstract Social Case History Hospital Bill Endorsement letter from Social Worker

2		<ul style="list-style-type: none"> Receives & files submitted requirements Gives relative/s a list of requirements needed for referral to funding agencies 	30 minutes	Medical Social Worker (MSW)	N/A	Medical Abstract Social Case History Hospital Bill Endorsement letter from Social Worker
3	Patient/Relative	<ul style="list-style-type: none"> Submits requirements for referral to funding agencies 	5 minutes	Relative/s		
4		<ul style="list-style-type: none"> Refers patient to different funding agencies 	15 minutes			

UPON DISCHARGE						
1	Patient/Relative	<ul style="list-style-type: none"> Presents discharge notice issued by Nurse-on-duty (NOD) to MSW 	2 minutes	Relative/s	N/A	Discharge Notice
2		<ul style="list-style-type: none"> Apply classification to discount patient's hospital bill Marks classification to action slip which will be attached to the discharge notice Inform the relative to present the notice and slip to NOD, then to Billing Clerk 	20 minutes	Medical Social Worker		Discharge Notice