

**OFFICE OF THE
CITY HEALTH OFFICER
External Services**

1. Delivery of Pregnant Women and New Born Care Services

Manage normal and uncomplicated pregnancy/birth delivery and refer complicated cases to tertiary hospitals.

Office or Division:	Cavite City Iyong - In			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Pregnant women / New Born Child			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Home Base mother record (HBMR) Ultrasound result, CBC, Blood typing, Urinalysis, Hepatitis B, RPR, HIV Barangay Clearance <p>For Birth Certificate</p> <ul style="list-style-type: none"> Marriage Contract (Local Civil Registrar Copy) Cedula for non-marriage 		Cavite City Rural Health Center / Personal Record Hospital / Laboratory Clinic Barangay Local Civil Registrar Treasurer's Office		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Present Home Base Mother Record (HBMR) and result of laboratory exam	1.1. Receive the copy of prenatal-check up	None	2 mins	Nurse on duty
	1.2. Prepare for I.E. and assessment	None	5 mins	Midwife on Duty
	1.3. If for admission, fill up admission chart	None	5 mins	Nurse on Duty
	1.4. If non-admission issued referrals	None	5 mins	Doctor on Duty / Nurse on duty

2. Ask relative to prepare clients and baby's needs and buy the necessary medicine as prescribed by the doctor	2.1. Prescribe medicines and things to prepare	None	5 mins	Doctor on Duty / Nurse on duty
	2.2. Check things prepared and medicines bought	None	5 mins	Nurse on duty
3. After delivery, mother clean nipples and prepare for breast feeding	3. Encourage exclusive breast feeding and discuss its benefits	None	3 mins	Midwife on duty City Lying- in
4. Transfer mother to OB ward	4.1. Monitor vital signs and instruct the mother to call attention of Nurse on Duty for possible bleeding	None	30 mins	Nurse on Duty City Lying- in
5. Take prescribe postpartum medication	5.1. Prescribe Post-partum medications and instruct frequency of intake	None	3 mins	Doctor on Duty
	5.2. Perform perineal care	None	5 mins	Midwife on duty
6. Submit HBMR card request for newborn screening and issuance growth monitoring card	6.1. Accepts HBMR card and issue request for newborn screening and growth monitoring card	None	5 mins	Nurse on duty
	6.2. Discharge mother and newborn if asymptomatic and advise to return after 2 days for the processing of birth certificate	None	1 day	Nurse on duty

Birth Certificate				
7. Two days after discharge, come to City Health Office for processing of Birth Certificate	7.1. Give the draft form for birth certificate	None	1 min	Encoder CHO
8. Fill – up draft form for birth Certificate	8.1. Receive and check draft data form and assure its accuracy	None	5 mins	Encoder CHO
	8.2. After reviewing the draft copies, sign four copies of Birth Certificate.	None	5 mins	
	8.3. Release of Birth Certificate	None	1 min	
9. Accept Birth Certificate	9.1. Advice the Client to proceed to Local Civil Registrar for registration of Birth Certificate	None	1 min	Encoder CHO
TOTAL:		None	1 day, 1 hour, and 26 mins	

2. Issuance of Certified true copy of Laboratory result, Medical Clearance Certificate and Certificate of Quarantine

Office issues certified true copy of positive and negative results of contagious disease (Covid19) to clients or relatives claiming result of swab test. Medical clearance certificate and Certificate of Quarantine issued by the Medical Officer and City Epidemiology and Surveillance Unit Head to requesting client or relatives with complete documentation and requirements.

Office or Division:	City Health office / CESU
Classification:	Simple
Type of Transaction:	G2C – Government to Citizens
Who may avail:	Citizen

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<p>Certified True Copy of Laboratory Result</p> <p>Recommendation for Lockdown of Barangays/Government and Private Offices/Institution.</p> <p>Recommendation for Quarantine of Close Contacts Based in contact tracing investigation</p>		City Epidemiology and Surveillance Unit		
CLIENTS STEPS	AGENCY ACTION	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Log to Contact Tracing log sheet and Client Transaction Logbook	1.1. Give the required documentary requirements before securing any Certified True Copy of Laboratory Result or Clearance	None	10 mins	Sanitation Inspector II, CESU Office
2. Query	2.1. Receive Requirements 2.2. Determine needed request	None	10 minutes	Nurse I and Sanitation Inspector II CESU Office
Submit Requirements				
3. Wait for the processing of Needed Document to be issued	3.1. Case 1 Certified true copy of Laboratory Result	None	10 mins	Nurse I or Sanitation Inspector II CESU Office
	3.2. Case 2 Medical Clearance Certificate	None	10 mins	Medical Specialist III CESU Office

	3.3. Case 3 Certificate of Quarantine			
4. Receive needed Satisfactory document				Nurse I or Sanitation Inspector II CESU Office
TOTAL:		None	40 minutes	

3. Issuance of Death Certificate, Burial Permit and Transfer Permit

To ensure proper observance of hygiene and sanitary procedure in handling of cadaver and opening of grave.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Death Certificate • Burial Permit • Transfer Permit 		Funeral Parlor / City Health Office, 1 st floor, Left wing, city Hall Bldg. City Health Office, 1 st floor, Left wing, city Hall Bldg. Municipality/ City Health Office, 1 st floor, Left wing, city Hall Bldg.		
CLIENTS STEPS	AGENCY ACTION	FEE TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Requirements	1.1. Received Requirements	None	5 mins	Administrative Aide III CHO
	1.2. Issuance of order of payment	None	4 mins	
2. Pay the corresponding fee	2.1. Case 1 (Death Processing Fee and Burial Permit/ transfer permit) <ul style="list-style-type: none"> • If the client died at their house or declare dead on arrival) 	Php 350.00	5 mins	LRCO1 Treasurer's Office

	<p>2.2. Case 2 (burial permit)</p> <ul style="list-style-type: none"> • If the client died at the hospital and to be buried at Cavite City 	Php 200.00	5 mins	
	<p>2.3. Case 3 (transfer permit)</p> <ul style="list-style-type: none"> • If the client will transfer from Cavite City to another town 	Php 200.00	5 mins	
	<p>2.4. Case 4 (cremation permit)</p> <ul style="list-style-type: none"> • If the client chooses to cremate the cadaver 	None	5 mins	
	<p>2.5. Case 5 Lot Rental (construction)</p>	Php 200.00	5 mins	
	<p>2.6. Receive payment</p>	None	1 min	
	<p>2.7. Issuance of Official Receipt</p>	None	2 mins	
3. Submit Official Receipt to CHO staff	<p>3.1. Accept & Verify Official Receipt</p>	None	3 mins	Administrative Aide III CHO
	<p>3.2. Prepare for encoding details for Death Certificate / Burial Permit / Transfer Permit</p>	None	5 mins	
	<p>3.3. Death Certificate</p> <ul style="list-style-type: none"> • Checking the entries 	None	5 mins	

	• Proceed to Local Civil Registrar for registration			
4. Wait for the death certificate to be registered	4.1. Registration of Death Certificate	None	10 mins	Encoder Local Civil Registrar
	4.2. forwarding the registered death certificate to the CHO	None	3 mins	
5. Receiving of Death Certificate/ Burial / Transfer Permit	5.1. Releasing of Death Certificate/ Burial Permit / Transfer Permit	None	2 mins	Administrative Aide III CHO
TOTAL:	Case 1	Php 350.00	1 hour and 5 minutes	LRCO1 Treasurer's Office
	Case 2	Php 200.00		
	Case 3	Php 200.00		
	Case 4	None		
	Case 5	Php 200.00		

4. Issuance of Exhumation, Catacomb and Cremation Permit

To ensure proper observance of hygiene and sanitary procedure in handling of cadaver and opening of grave.

Office or Division:	City Health Office
Classification:	Simple
Type of Transaction:	G2C – Government to Citizens
Who may avail:	Citizen

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Letter of Notice from City Cemetery Administrator Notice to open the grave from City Cemetery Administrator Barangay Clearance 		City Cemetery Administrative office, Brgy 48 M Cavite City City Cemetery Administrative office, Brgy 48 M Cavite City Barangay		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Requirements	1.1. Receive Requirements	None	5 mins	Sanitation Inspector CHO
	1.2. Check and determine the cause of death of the person	None	10 mins	
	1.3. Issuance of order of payment for Exhumation, Lot Rental, Transfer, Cremation and Catacomb Permit	None	5 mins	
2. Pay the corresponding fee	2.1. Receive payment <ul style="list-style-type: none"> Lot Rental Permit Exhumation Permit Transfer Permit Cremation Certificate Catacombs Permit 	Php 200.00 Php 150.00 Php 200.00 Php 130.00 None	20 mins	LRCO1 Treasurer's Office

	2.2. Issuance of Official Receipt		5 mins	
3. Submit Official Receipt to CHO staff	3.1. Accept & Verify Official Receipt	None	5 mins	Sanitation Inspector CHO
	3.2. Prepare for encoding details for Exhumation, Cremation and	None	15 mins	
	3.3. Catacomb Permit	None	15 mins	
	3.4. Record the details on Computer System			
4. Receiving of exhumation permit	4.1. Releasing of Exhumation Permit	None	5 mins	Sanitation Inspector CHO
TOTAL:	Lot Rental Permit	Php 200.00	1 hour and 25 mins	LRCO1 Treasurer's Office
	Exhumation Permit	Php 150.00		
	Transfer Permit	Php 200.00		
	Cremation Certificate	Php 130.00		
	Catacombs Permit	None		

5. Issuance of Medical Certificate

For medical clearance as a requirement in applying for a job or as supporting documents for sick leave application or similar legal circumstance.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Laboratory Result X-ray Result <p>For Employment</p> <ul style="list-style-type: none"> Police Clearance Barangay Clearance Doctor's order for treatment and management 		<p>Laboratory Clinic, P. Paterno St. Cavite City / hospitals Hospitals</p> <p>Police Stations Barangay Cavite City Rural Health Centers / Cavite City Lying-in / City Health Office, 1st Floor, Left wing City Hall bldg..</p>		
CLIENTS STEPS	AGENCY ACTION	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patient's inquire to the staff to secure Medical Certificate	1.1. Taking vital signs	None	5 mins	Casual Worker CHO Nurse III Rural Health Center
	1.2. Make a patient Record	None	5 mins	Nurse on Duty City Lying- In
2. Submit Patient to Medical Officer for Medical Check up	2.1. Assist patient	None	3 mins	Casual Worker CHO Nurse III Rural Health Center Nurse on Duty City Lying- In
	2.2. Prepare for Medical Certificate	None	3 mins	City Health Officer II CHO Medical Officer

	2.3. Accomplished Medical Certificate	None	5 mins	Rural Health Center / Cavite City Lying in
3. Wait for the issuance of the Medical Certificate	3.1. Staff will seal the Medical certificate	None	2 mins	Casual Worker CHO Nurse III Rural Health Center
	3.2. Releasing of Medical Certificate	None	1 min	Nurse on Duty City Lying- In
TOTAL:		None	24 minutes	

6. Issuance of sanitary and Health permits for all business establishments and health permits for personnel of food establishment

To ensure observance of sanitary and health regulations in business operations.

Office or Division:	City Health Office		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizens		
Who may avail:	Citizen		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
For Non-Food Establishment <ul style="list-style-type: none"> • Brgy Clearance • Community Tax Certificate (Cedula) • Picture 1x1 • Sputum Exam or Chest X-Ray Additional Requirements for Food Establishment <ul style="list-style-type: none"> • Urinalysis • Fecalalysis • Hepa B Screening Additional Requirements for Massage Therapist and Restobar <ul style="list-style-type: none"> • Smear Test • HIV Test 		Barangay Treasurer's office Photo Printing Shop Laboratory Clinic Laboratory Clinic Social Hygiene Clinic	

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the data requirement to the Sanitary Inspector	1.1. Receive and Check the requirements	None	5 mins	Sanitation Inspector CHO
	1.2. Interview the client for the issuance of a sanitary / health permit	None	10 mins	
2. Pay the required health card fee at the cashier and get official receipt	<p>2.1. Receive payment</p> <ul style="list-style-type: none"> • Sanitary Permit for food related • For non-food establishment <p>For health certificate Case 1 Non-Food</p> <ul style="list-style-type: none"> • Carwash boy / woman • Gasoline boy / woman • Laundry boy / woman • Life guard • Manicurist • Massage attendant • Refiller • Driver • Sales lady/ boy <p>Food</p> <ul style="list-style-type: none"> • Food handler • Food server • Helper • Kitchen staff 	<p>Php 250.00</p> <p>Php 150.00</p> <p>Renew Php 177.00</p> <p>New Php 522.00</p> <p>Renew Php 177.00</p> <p>New Php 522.00</p>	15 mins	LRCO1 Treasurer's Office

	<p>Case 2</p> <p>Non-Food</p> <ul style="list-style-type: none"> • Cashier • Delivery Rider • Gaffer • Hair dresser • Merchandizer • Store Crew • Tailor • Beautician • Assistant Pharmacist • Barber • Butcher • Foot Spa Attendant <p>Food</p> <ul style="list-style-type: none"> • Assistant Cook • Chief Cook • Cook • Service Crew • Waiter/ waitress • Store Crew • 	<p>Renew Php 239.50</p> <p>New Php 202.00</p>		<p>LRCO1 Treasurer's Office</p>
	<p>Case 3</p> <p>Non-Food</p> <ul style="list-style-type: none"> • Appraiser • Embalmer • Assistant Manager <p>Food</p> <ul style="list-style-type: none"> • Baker • Dietician • Nutritionist 	<p>Renew Php 302.00</p> <p>New Php 252.00</p>		<p>LRCO1 Treasurer's Office</p>
	<p>Case 4</p> <p>Non-Food</p> <ul style="list-style-type: none"> • GRO • Manager • Pharmacist 	<p>Php 302.00</p>		

	<ul style="list-style-type: none"> • Supervisor • Floor Manager, owner/ operator <p>2.2. Issuance of Official Receipt</p>			
3. Submit Official Receipt	3.1. Accept & Verify Official Receipt	None	5 mins	Sanitation Inspector CHO
	3.2. Prepare Health / sanitary permit		15 mins	
4. Wait for the releasing of health/ sanitary permit	4.1. Release Health/ Sanitary Permit	None	5 mins	Sanitation Inspector CHO
TOTAL:	Sanitary Permit <ul style="list-style-type: none"> • Food Related • Non-Food <p>Case 1</p> <p>Case 2</p> <p>Case 3</p>	Php 250 Php 150.00 New Php 177.00 Renew Php 522.00 Renew Php 239.50 New Php 202.00 Renew Php 302.00 New Php 252.00	55 mins	LRCO1 Treasurer's Office

	Case 4	Renew/ New Php 302.00		
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7. Provision of Anti- Tuberculosis Treatment/ Medicines

To ensure that TB diagnostic, treatment and information services are available and accessible to the community and to control TB symptomatic by identifying the TB Patient among individuals with suspected signs and symptoms of TB.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
<ul style="list-style-type: none"> • Family Health Card • Sputum (Gene expert/ DSSM) • Chest X-ray 			Cavite City Rural Health Centers Laboratory Clinic / Hospitals Hospitals	
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure patient number found in the admission table	1.1. Give patient number	None	5 mins	Midwife Health Centers
2. Proceed to assigned midwife in their respective barangay and present family card	2.1. Case 1 (new patient) create patient record / family health card Case 2 (Retreatment) check and update Family Health Card	None None	30 mins 15 mins	Midwife Health Centers
3. Present the three sputum	3.1. Check sputum and chest x-ray	None	10 mins	Nurse III Health Centers

and chest x-ray result	3.2. Submit for Physical check-up and counseling and get the NTP card on TB program	None	40 mins	
4. Take the free initial drug and come back to RHU daily to take the remaining drugs until the completion of the treatment period	4.1. Prepare the initial drug and educate the patient on how to take the medicine.	None	30 mins	Nurse III Health Centers
	4.2. Advise the patient to come back to the RHU for his/her daily medicine until the treatment is complete	None	15 mins	Midwife Health Centers
	Case 3 (Patient is not visiting daily) <ul style="list-style-type: none"> • Locate the patients address and go to the house to give the prescribe medicine 	None	1 hour	Medical Officer Health Center
	4.3. Issue medical certificate clearance	None	5 mins	
TOTAL:	Case 1	None	2 hours and 15 mins	
	Case 2	None	2 hours	
	Case 3	None	2 hours and 45 mins	

8. Provision of Dental Services

To ensure that service is available to pre-school and school age children, pregnant mothers and other adults to prevent treat and mange dental.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • No requirements for new patient • Home Base Mother Record (HBMR) - For pregnant mothers • Pre-school and school age growth monitoring chart 		<p>Rural Health Centers / Personal Record</p> <p>Schools</p>		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Proceed to City Dental Clinic and write the name on the board outside the dental clinic	1.1. Check the board outside the dental clinic	None	5 mins	Dentist II City Dental Clinic
2. Stay in the waiting area and wait for your name to be called	2.1. Call the name of the patient	None	30 mins	Dentist II City Dental Clinic
3. Proceed to dental clinic for appropriate treatment or dental advice	3.1. Interview the patient and create a patient record	None	10 mins	Dentist II City Dental Clinic
	3.2. Take appropriate treatment / dental advice	None	30 mins	

	3.3. Educate the patient on how to take the medicines 3.4. Discharge patient	None	2 mins	Dentist II City Dental Clinic
TOTAL:	Scheduled Clients, Pregnant Women, Pre-School and School Age	None	1 hr and 17 minutes	

9. Provision of DOH health care delivery services

Treatment and Consultation

To diagnose, treat, and manage illnesses and provide appropriate medical attention.

Office or Division:	City Health Office / First Aid & Emergency Facility (Lying-in)			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Growth Monitoring Chart • No requirement for new patient • Home Base Mother Record (HBMR) • Patient Record 		Cavite City Rural Health Centers		
		Cavite City Rural Health Centers		
		Cavite City Rural Health Centers		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach any health personnel at health centers	1.1. Give number and refer to free health personnel	None	2 mins	Nurse Midwife Rural Health Centers Nurse / midwife on duty

				First Aid & Emergency Facility
2. Relay to the staff the reason for consultation	2.1. Secure patient record	None	2 mins	Nurse Midwife Rural Health Centers
	2.2. Take Vital sign	None	3 mins	Nurse / Midwife on duty
	2.3. Interview patient regarding condition ex. Days of symptoms	None	5 mins	First Aid & Emergency Facility
3. Wait for your turn to be called	3.1. Call the patient and assist to doctors' room	None	25 mins	Nurse Midwife Rural Health Centers Nurse / Midwife on duty First Aid & Emergency Facility
4. Go to the doctor's room	4.1. Check and assess the patient	None	15 mins	Medical Officer Rural Health Centers /
	4.2. Prescribe medication and educate the patient	None	10 mins	First Aid & Emergency Facility
	4.3. Advise the patient to give the patient record on the assign midwife	None	5 mins	
5. Give the patient record	5.1. Receive and file the patient record	None	2 mins	Midwife Rural Health Centers Nurse/ Midwife on duty

				First Aid & Emergency Facility
TOTAL:		None	1 hour and 9 mins	

10. Provision of Family Planning Services

To maintain high quality services and ensure quality family planning acceptance, to promote and assist couples in deciding their reproductive behavior.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Family Health Card No requirement for new patients 		Cavite City Rural Health Office		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Secure patient number found in the admission table and wait to be called	1.1. Give patient number	None	5 mins	Midwife Rural Health Centers
	1.2. Interview and Determine if old or new patient	None	15 mins	
2. Give information needed	2.1 A. Case 1 (New Patient) A.1 Interview and create patient record	None	10 mins	Midwife Rural Health Centers
	B. Case 2 (Old Patient) B.1 Check and update Patient Record	None	5 mins	
	A.2 Case 1	None	15 mins	

	Inform the Dr. about the new patient for assessment			
A. Case 1 A.1 Go to the Dr. Office	A.3. Case 1 Interview and Examine the patient	None	15 mins	Medical Officer Rural Health Centers
	A.4 Case 1 Give Prescribe Medicine	None	10 mins	
3. Give the Prescription to the assign midwife	3.1. Prepare prescribe medicine	None	10 mins	Midwife Rural Health Centers
4. Wait for the medicine to be prepare	4.1. Write down the details on the logbook / family planning TCL	None	10 mins	Midwife Rural Health Centers
5. Receive the Medicine	5.1. Give and educate the patient and tell them for their next schedule	None	10 mins	Midwife Rural Health Centers
TOTAL:	Case 1	None	1 hour and 40 mins	
	Case 2	None	55 mins	

11. Provision of Laboratory Services

To deliver free laboratory services populace the city.

Office or Division:	City Health Office	
Classification:	Simple	
Type of Transaction:	G2C – Government to Citizens	
Who may avail:	Citizens of Cavite City	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
<ul style="list-style-type: none"> Medical Request Form 		Cavite City Rural Health Office

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Case 1 Urinalysis, Fecalysis and Sputum 1. Give Medical request form	1.1. Check the medical request form	None	5 mins	Nursing Attendant Job Order Medical Technologist I Laboratory Clinic
	1.2. Ask the patient to write down the name and age on the specimen bottle	None	5 mins	
2. Write down the name and age on the specimen bottle	2.1. Advise the patient to return at 3pm for the results	None	3 mins	Nursing Attendant Job Order Medical Technologist I Laboratory Clinic
	2.2. Process the specimen	None	4 hours	Medical Technologist I Laboratory Clinic
3. Return to the Laboratory clinic on the said time	3.1. Check the name of the patient and look for the result	None	15 mins	Nursing Attendant I Job Order Laboratory Clinic
4. Receive the result	4.1. Give the result to the patient	None	5 mins	Nursing Attendant I Job Order Laboratory Clinic
Case 2 Blood Test 1. Give Medical request form	1.1. Check the medical request form	None	5 mins	Nursing Attendant Job Order Medical Technologist I
	1.2. Advise the patient to wait	None	2 mins	

	1.3. Prepare for the things to be use	None	5 mins	Laboratory Clinic
2. Wait to be extract	2.1. Perform the examination request	None	5 mins	Medical Technologist I Laboratory Clinic
	2.2. After performing the examination request advice the patient to return at 3pm for the result	None	2 mins	Nursing Attendant Job Order Medical Technologist I Laboratory Clinic
	2.3. Processing of Specimens		5 hours	Laboratory Clinic
3. Return to the Laboratory clinic on the said time	3.1. Check the name of the patient and look for the result	None	15 mins	Nursing Attendant I Job Order Laboratory Clinic
4. Receive the result	4.1. Give the result to the patient	None	5 mins	Nursing Attendant I Job Order Laboratory Clinic
TOTAL:	Urinalysis, Fecalysis, Sputum	None	4 hours and 33 mins	
	Chemistry Blood Test		5 hours and 39 minutes	

12. Provision of Leprosy Treatment and Medication

To treat and manage patients with leprosy medicines free of charge.

Office or Division:	City Health Office
Classification:	Complex
Type of Transaction:	G2C – Government to Citizens
Who may avail:	Citizen

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • No requirement for new patient • Medication Card 		Personal / Cavite City Rural Health Center		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Approach any health personnel	1.1. Instruct the patient to get a patient number	None	5 mins	Midwife Rural Health Centers
	1.2. Check vital sign	None	15 mins	
2. Inquire about skin problem	2.1. Interview client's personal information, past medical history and present illness	None	25 mins	Nurse Rural Health Centers
	2.2. Submit for physical examination and further assessment. Request for Slit-skin smear is given	None	15 mins	Medical Officer Rural Health Centers
3. Patient will go to a clinic where slit-skin smear test is done (Skin Clinic)	3.1. Wait for the result	None	5 days	Personnel of Clinic
4. Patient will go to health center to present the result of slit-skin smear	4.1. refer the result to Physician	None	10 mins	Nurse Rural Health Centers
	4.2. Doctor will interpret the result of the test and will decide if the patient will start treatment or not	None	5 mins	Medical Officer Rural Health Centers
5. Patient will present the order of the doctor	5.1 If the test is negative patient will be health educated and will be instructed	None	10 mins	Nurse Rural Health Centers

	to come back if any problem arises 5.2 If the test is positive, patient will start the treatment, health educated and will be instructed to come back every month for 2 years or if any problem arises	None	7 mins	
TOTAL:		None	5 days, 1 hour, and 32 mins	

13. Provision of National Immunization Program Services

- To immunize children 0-11 months old from the common childhood disease, missed opportunity children and defaulter children.
- To immunize pregnant mother for tetanus toxoid in order to prevent the occurrence of Tetanus Neonatorum in infants.

Office or Division:	City Health Office		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizens		
Who may avail:	Citizen		
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE		
<ul style="list-style-type: none"> • Immunization Card • No requirements for new patient 	Personal / Cavite City Rural health Center		

CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Parent will approach any personnel in the Health Center	1.1. Instruct the patient to secure a Patient Number	None	15 mins	Midwife Rural Health Center
	1.2. Check Vital Signs	None	10 mins	Barangay Health Worker Rural Health Centers
	1.3. Interview baby's personal information, past medical history, past immunization history	None	10 mins	Midwife Rural Health Center
2. Client will proceed to the Nurse for immunization	2.1. Nurses will assess the overall health of the baby and post immunization counselling	None	15 mins	Nurse Rural Health Centers
TOTAL:		None	50 minutes	

14. Provision of Pre-Marriage Counselling

To make the prospective couple aware on the importance of reproductive health including the different Family planning methods and responsible parenthood. This is also in compliance with Executive Order 2019 Article 16 Family Code of the Philippines. Prospective couples are required to undergo this counseling for the issuance of their marriage license from the City Civil Registrar Office after 10 Days publication.

Office or Division:	City Health Office
Classification:	Simple
Type of Transaction:	G2C – Government to Citizens
Who may avail:	Citizen

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • Official Receipt of Family Planning Counselling • Birth Certificate • Cenomar (Applicants Above 25 years old) 		<p>Treasurer's Office</p> <p>Local Civil Registrar PSA</p>		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Proceed to City health center	1.1. Approach the client and interview	None	10 mins	Midwife III San Roque Health Center
	1.2. Issuance of order of payment and advice the client to pay it to city treasurer's office and comeback with O.R. (official Receipt)	None	5 mins	Nurse IV City Health Office
2. Pay the corresponding fee	2.1. Receive payment			LRCO1 Treasurer's Office
	<ul style="list-style-type: none"> • Family planning 	Php 150.00	10 mins	
	<ul style="list-style-type: none"> • Pre-marriage Counselling 	Php 100.00	10 mins	
	2.2. Issuance of Official Receipt	None	2 mins	
3. Return to san roque health center	3.1. Lecture on the importance of reproductive health and family planning methods	None	40 mins	Midwife III San Roque Health Center Nurse IV City Health Office
4. Client Receive the Family Planning Certificate and proceed to local civil registrar for filling of	4.1. Give the family planning certificate and advice to proceed to local civil registrar for filling of marriage application	None	10 mins	Midwife III San Roque Health Center Nurse IV City Health Office

marriage application				
TOTAL:	<ul style="list-style-type: none"> • Family Planning • Pre-marriage counselling 	Php 150.00 Php 100.00	1 hour and 27 mins	

15. Provision of Prenatal and Post-Partum Care

Provides a comprehensive maternal care program for all pregnant and post-partum mothers in the city.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Pregnant and Post-partum Mother			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> • No requirement for new patient • Home Base Mother Record (HBMR) 		Cavite City Rural Health Center		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Case 1 Prenatal				
1. Secure number found in the admission table	1.1. Approach and give number	None	5 mins	Midwife Rural Health Centers
	1.2. Take vital sign, temperature and weight	None	5 mins	
2. Proceed to assign midwife	2.1. admission and examination of patient for 1 st check-up and follow up check-up	None	20 mins	Midwife Rural Health Centers
	2.2. Assessment of patients by doing Leopold's maneuver	None	20 mins	

	<p>2.3. Give request for lab, dental check-up and rpr</p> <ul style="list-style-type: none"> • Hiv testing • Pre- natal counselling was given especially to teenage pregnancy 	None	25 mins	
	2.4. Show them what they should do and when to return	None	10 mins	
3. Complete the given request	3.1. Perform the procedure base on the request	None	1 day	<p>Medical Technologist I City Laboratory Clinic</p> <p>Dentist II City Dental Clinic</p> <p>Midwife II City Social Hygiene Clinic</p>
4. Return to the health center once the request is done	4.1. Check and assess the results	None	15 mins	Medical Officer Rural Health Centers
	4.2. Prescribe medicines	None	10 mins	
5. Receive the medicines	5.1. Giving the FeSo4 on the 1 st trimester and schedule for the next visit	None	5 mins	Midwife Rural Health Centers
Case 2 Post-partum				
1. Secure number found in the admission table	1.1. Approach and give number	None	5 mins	Midwife Rural Health Centers

2. Proceed to assigned midwife	2.1. Admit and interview the patient	None	15 mins	Midwife Rural Health Centers
	2.2. Check and update the patient record	None	5 mins	
	2.3. Take vital sign	None	3 mins	
	2.4. Advise the patient to look onto any possible discharges	None	10 mins	
3. Receive Medicine and HBMR	3.1. Give vitamins A on check-up and FeSo4 to the patient	None	5 mins	Midwife Rural Health Centers
	3.2. Advice to return for well-baby schedule	None	5 mins	
	3.3. Advised exclusive breast feeding for 6months	None	5 mins	
	3.4. Introduce Family Planning	None	20 mins	
TOTAL:	Case 1	None	1 day, 1 hr, and 55 mins	
	Case 2	None	1 hr and 13 mins	

16. Provision of Management and Treatment of Animal Bite and Anti-Rabies injection

To prevent and properly treat clients with dogs/cats/rats' bites and strengthen education in accordance with R.A. 9482.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C – Government to Citizens			
Who may avail:	Citizen of Cavite City			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
No requirement				
CLIENTS STEPS	AGENCY ACTION	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client proceeds to city Mayor's office	1.1. Reporting, Verification, monitoring and referral of biting incidents in Cavite City	None	5 mins	Nurse I City Mayors Office
2. Proceed to Animal Bite Treatment Center	2.1. Assessment of Animal Bite patient	None	5 mins	Medical Officer Nurse I Midwife I
	2.2. Treatment and management of Animal Bite Patients <ul style="list-style-type: none"> • Vaccination of Anti- Rabies Vaccine • Vaccination of wound site anti-rabies vaccine • Provision of Anti-Tetanus Vaccine 	None	30 mins	Animal Bite Treatment Center
	2.3. Prescription of Antibiotics and pain management drugs			Medical Officer
	2.4. Reporting and Recording, Filling of	None	30 mins	Nurse I Midwife I

	ABTC patients record 2.5. Post-treatment evaluation and counselling	None	30 mins	Animal Bite Treatment Center
3. Get the animal bite treatment card	3.1. Give animal treatment card and advice the patient to comeback for their next schedule	None	5 mins	Nurse I Midwife I Animal Bite Treatment Center
TOTAL:		None	1 hour and 45 mins	

17. Provision of Covid19 Swabbing Services

Diagnosis of uncomplicated Covid Patients and refer complicated cases to tertiary Covid Facility (City Epidemiology and Surveillance Unit).

Office or Division:	City Epidemiology and Surveillance Unit			
Classification:	Simple			
Type of Transaction:	Government to Citizens			
Who may avail:	Covid Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Valid ID 		Personal Belongings		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Go to Swabbing Facility		None	10 mins	Nurse / Midwife
2. Wait at the waiting area	2.1. Interview / History Taking, note if asymptomatic or symptomatic, 2.2. Secure Consent for Admission	None	5 mins	Nurse / Midwife on Duty on Duty

	2.3 Swabbing of Client		5 mins	Midwife / Nurse on Duty
	2.4. Health Teaching and Advice to go home to isolate		5 mins	
TOTAL:		None	25 minutes	

18. Treatment and Management of Sexually Transmitted/ Reproductive Tract Diseases/ HIV/ AIDS prevention

Identify and treat client for any disease in reproductive tract especially the Guest Relation Officers and other entertainment workers. To widely disseminate awareness of the populace regarding STD/HIV/AIDS

Office or Division:	City Health Office		
Classification:	Simple		
Type of Transaction:	G2C – Government to Citizens		
Who may avail:	Citizen		
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE		
<p>Pregnant Women</p> <ul style="list-style-type: none"> • Prenatal Record • Request of Blood screening test (RPR/VDRL, HBsAg) HIV screening test no need of request – Voluntary • If client is below 15 years old required consent <p>GRO, Receptionist, cashier, waitress/ food server, cook, massage spa/ therapist</p> <ul style="list-style-type: none"> • Need Health Permit • Gram Stain Smear • Xerox copy of business permit of the establishment 	<p>Cavite City Rural Health Center</p> <p>Cavite City Rural Health Center</p> <p>Parent/ relatives / social worker</p> <p>City Health Office, Cavite City Cavite City Social Hygiene Clinic Business Owner</p>		

CLIENTS STEPS	AGENCY ACTION	FEEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Case 1 Smear 1. Go to Cavite City Social Hygiene Clinic	1.1. Patient admission A. For New Patient interview and create patient record, secure consent. B. For Old Patient Check and update patient record	None	20 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
	1.2. Explain the procedure of gram steam	None	15 mins	Midwife II City Social Hygiene Clinic
	1.3. Advice patient to go to examination room	None	2 mins	
	2. Proceed to examination room	2.1. Perform smear test 2.2. Transfer specimen 2.3. Instruct patient to return in the afternoon for the smear result	None None None	5 mins 2 mins 2 mins
3. Return to Facility	3.1. Release of Smear Result	None	5 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
	3.2. Inform the Doctor about the patient	None	2 mins	
4. Proceed to Doctor's office	4.1. Interview and examine the patient	None	20 mins	Medical Officer City Social Hygiene Clinic

	4.2. Prescribe lab test and medicine needed	None	5 mins	
5. Give prescription to assign personnel	5.1. Prepare the prescribe medicine (if available)	None	5 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
6. Wait for the medicines	6.1. Write down the details on the logbook	None	5 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
7. Receive the medicine	7.1. Give and repeat the instruction about the medicines and remind the next visit schedule	None	5 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
Case 2 Pregnant Women				
1. Give Prenatal Record and request of blood screening test	1.1. Accept requirement	None	3 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
	1.2. Instruct to go to conference room for briefing	None	2 mins	
2. Proceed to the conference room	2.1. Explain the blood screening test importance	None	15 mins	Midwife II Medical Officer City Social Hygiene Clinic
	2.2. Provide HIV screening test pre-counseling	None	30 mins	
	2.3. Accomplish form A for HIV screening test	None	15 mins	Midwife II City Social Hygiene Clinic
	2.4. Instruct the patient to go to laboratory for extraction	None	2 mins	

3. Proceed to laboratory	3.1. Advice to return in the afternoon for post counselling of the HIV screening test result and other blood test result	None	3 mins	Midwife II Nursing Attendant I City Social Hygiene Clinic
4. Return to the facility	4.1. Provide post-counselling and release the blood test result	None	15 mins	Midwife II City Social Hygiene Clinic
	4.2. Inform the doctor about the patient		3 mins	
5. Go to the Doctors Office	5.1. Interview and examine the patient	None	20 mins	Medical Officer City Social Hygiene Clinic
	5.2. Prescribe lab test and medicines	None	5 mins	
6. Give prescription to assign personnel	6.1. Prepares prescribe medicine (if available)	None	5 mins	Midwife II City Social Hygiene Clinic
7. Wait for the medicine	7.1. Write down the details on the logbook	None	5 mins	Midwife II City Social Hygiene Clinic
8. Receive medicine	8.1. Give and repeat the instruction about medicines and remind for the next schedule	None	5 mins	Midwife II City Social Hygiene Clinic
TOTAL:	Case 1			
	• New patient	None	1hr and 26 mins	
	• Old patient	None	1 hr and 13 mins	
	Case 2 Pregnant Women	None	2 hrs and 8 mins	

19. Issuance of Requested Health Data and Information

Issuance/release of Health data and information upon the request of public or private sector in accordance Data Privacy Act (RA 10173)

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	G2C-Government to Citizens			
Who may avail:	Requesting Public and Private Sector			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Valid ID Photo Copy of Valid ID 2 Letter of Request (1 receiving copy and 1 for file copy) 				
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Go to City Health Office				
2. Wait at the waiting area			10 minutes	
3. Submit letter of request indicating needed health data or information	3.1 Check Valid ID and Letter of request then stamp for received and attach photocopy of valid ID	None	2 minutes	Administrative Asst. or Administrative Aide City Health Office
	3.2 Letter of request assessed and evaluated by the City Health Officer	None	60 minutes	City Health Officer City Health Office
	3.3. Approval and disapproval of Health Data and information release	None	20 minutes	City Health Officer City health Office
	3.4. Approved letter of request			

	-Transmittal letter -Health Data and Information released 3.5. Disapproved letter of request -letter of disapproval			Supervising Administrative Officer or Administrative Asst. City health Office
4. Received	4. Release of Transmittal Letter and Requested Health Data and Information or letter of disapproval.	None	5 minutes	
TOTAL:			1 hour and 37 minutes	

20. Provision of Drugs and Medicine, Medical, Dental, Laboratory Supplies

Dispensing of Drugs and Medicine, Medical, Dental and Laboratory supplies.

Office or Division:	City Health Office			
Classification:	Simple			
Type of Transaction:	Government to Citizens			
Who may avail:	Clients/Patients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
<ul style="list-style-type: none"> Prescription prescribe by Medical Doctor 		Any Health Facility		
CLIENTS STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Go to City Health Office 2. Wait at the waiting area				

3. Give prescription to Attendant			5 mins	Nursing Attendant /Job Order in-charge of dispensing medicine
4. Verify Prescription and confirm availability needed commodity			2 mins	Nursing Attendant /Job Order in-charge of dispensing medicine
5. Explain and instruct client/patient how to take medication or how to use medical supplies			5 mins	Nursing Attendant /Job Order in-charge of dispensing medicine
6. Send Client/Patient Home				
TOTAL:		None	12 minutes	