



I. OUT-PATIENT MEDICAL & PEDIATRIC CONSULTATION

This service is given to all citizens seeking medical consultation based on the presenting signs and symptoms. In case that the client condition in need of thorough medical evaluation and management, the agency must assist the client for referral to a higher facility.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Must follow referral protocol of Restructured Health Care Delivery System (RHCDS)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Clients with medical & pediatric problems seek consultation to Main Health Center	1. Ask patient's family number and get family record envelope	no fees required	1 min	<i>Midwife II</i>
	2. Get data and reason for consultation		2 mins	<i>Midwife III</i>
	3. Assessment and taking of vital signs		5 mins	<i>Midwife III</i>
	4. Management of simple cases /give medicine if available		2 mins	<i>Midwife II</i>
	5. Preparation and issuance of referral of complicated cases to physician		5 mins	<i>Nurse II</i>
	with referral from lower or higher level of health facilities		1. Elicit chief complain, history of present illness, past. 2. medical history, family history & other relevant	5 mins



<p>A.2 Clients with minor surgical problems e.g. wounds for suturing & debridement</p>	<p>information to arrive at a diagnosis</p> <ol style="list-style-type: none"> 3. Conduct physical examination 4. Formulate Impression 5. Request necessary laboratory examinations if needed 6. Give treatment: fill-up prescription, explain treatment and home care to client 7. Advice subsequent follow-up or give referral if necessary 8. Record transaction to patient folder <ol style="list-style-type: none"> 1. Elicit chief complain, history of present illness, past medical history, family history & other relevant information to arrive at a diagnosis 2. Conduct physical examination 3. Formulate Impression 4. Prepare patient & equipment 5. Perform Surgical Operation 6. Advice subsequent follow-up or give 	<p>Small: 30; Medium: 60; Large: 90</p>	<p>10 mins</p> <p>5 mins</p> <p>5 mins</p> <p>5 mins</p> <p>15 to 60 mins</p>	<p><i>Physician</i></p>
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<p>Uncircumcised young males</p> <p>A.3 Clients Availing Civic-Action Medical & Pediatric Consultation</p>	<p>referral if necessary</p> <p>7. Record transaction to patient folder</p> <p>1. Interview client to get data</p> <p>2. Prepare the patient</p> <p>3. Circumcision</p> <p>4. Dressing of incision</p> <p>5. Post-surgical instructions</p> <p>1. Elicit chief complain, history of present illness, past medical history, family history & other relevant information to arrive at a diagnosis</p> <p>2. Conduct physical examination</p> <p>3. Formulate Impression</p> <p>4. Give Treatment-write prescription and give advices, request laboratories & referral if necessary</p>	<p>465.00</p>	<p>5 mins</p> <p>5 mins</p> <p>30 mins</p> <p>5 mins</p> <p>5 mins</p> <p>5 mins</p> <p>10 mins</p> <p>5 mins</p>	<p><i>Physicians</i></p> <p><i>Physicians</i></p>
<p>END OF TRANSACTION</p>				



II. MATERNAL CARE

All health worker and volunteers have the responsibility to tracked all pregnant woman in the municipality and should be given appropriate, complete and quality antenatal care.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizen			
Who may avail:	All pregnant woman			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HBMR/Pink Card				
2. Referrals Slip				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
PRENATAL: Pregnant women approach the health personnel	1. Interview client to obtain obstetrical data to be filled-up in the HBMR	None	10 mins	<i>Nurses and Midwives</i>
	2. Weighing, assessment and physical examination		5 mins	
	3. Take and record vital signs		5 mins	
	4. Abdominal examination and inform client of the findings		5 mins	
	5. Give Tetanus Toxoid Immunization as scheduled		5 mins	
	6. Give Ferrous Sulfate tablet and other		3 mins	



	<p>micronutrient supplementation if available,</p> <p>7. Provide Health Education on maternal care and preparations for delivery</p> <p>8. Referral of complicated cases</p>		<p>5 mins</p> <p>5 mins/ ASAP</p>	<p><i>Physicians, Nurses and Midwives</i></p>
<p>ATTEND TO NORMAL DELIVERY: Relative of pregnant woman or BHW accompanies the pregnant woman with signs of labor in RHU1 Calabanga Birthing Facility.</p>	<p>1. Check the signs of labor and Fetal Heart Tone</p> <p>2. Assessed vital signs.</p> <p>3. Assessed for dangers of pregnancy</p> <p>4. Attend to normal delivery</p> <p>5. Repair of laceration</p> <p>6. Referral of complicated cases to the hospital</p>	<p>4,600.00 (Non-Philhealth Patient)</p> <p>Free (For Philhealth Client)</p>	<p>10 mins</p> <p>2 mins</p> <p>2 mins</p> <p>1-2 hrs</p> <p>30 mins</p> <p>10 mins/ ASAP</p>	<p><i>Physicians</i></p> <p><i>Nurses and Midwives</i></p>
<p>POSTPARTUM CARE (HOMEVISIT)</p>	<p>1. Assess maternal well-being including vital signs, uterine contraction, vaginal bleeding</p>		<p>10 mins</p> <p>10 mins</p>	



POSTPARTUM CARE (CLINIC VISIT)	<ol style="list-style-type: none"> 2. Initiate breastfeeding 3. Provide health teachings on proper nutrition, hygiene family planning and micronutrient supplementation 4. Refer abnormal findings 5. Give instruction for the clinic visits 		10 mins	<i>Nurses and Midwives</i>
	<ol style="list-style-type: none"> 1. Take vital signs 2. Give Vitamin A 200,000 iu if available 3. Give health teachings 		5 mins/ ASAP 5 mins	
END OF TRANSACTION				

III. NATIONAL IMMUNIZATION PROGRAM

National Immunization Program ensures that all infants/ children, school aged mothers have access to routinely recommended infant/ childhood vaccines.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER	
Classification:	Simple	
Type of Transaction:	Government to citizens	
Who may avail:	All eligible clients	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
1. Discharge Summary, for newborn		
2. Immunization Card, for transferred patient, school aged children		
3. Certificate of Immunization for school aged children		



4. Attending Physician's written request, if applicable for senior citizens				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
IMMUNIZATION Father/Relative/BH W informs the health personnel about the newborn OR Mother/Guardian seek newborn care services to the BHS SCHOOL AGED CHILDREN Through School Based Immunization, Grade 1, Grade 4(female only) and Grade 7	1. Obtain data of the newborn and register in the TCL 2. Give vaccines as scheduled 3. Provide newborn care 4. Inform the mother of the next immunization schedule	30.00	5 mins	<i>Midwives</i>
	1. Obtain certificate or record of immunization, whichever is available to ensure eligibility of the children. 2. Obtain inform consent completely filled up and signed by children's guardian. 3. Vaccinate as scheduled. 4. Inform next dose.		10 mins 15 mins 2 mins 5 mins 5 mins 5 mins 5 mins	



SENIOR CITIZEN (Flu and Pneumo vaccination)	1. Obtain history of immunization or physician's request		5 mins	<i>Midwives, Nurses</i>
	2. Record information in TCL		5 mins	
	3. Vaccinate as schedule and record in TCL.		5 mins	
	4. Inform next dose.		5 mins	
END OF TRANSACTION				

IV. NUTRITION PROGRAM

Pregnant woman and preschool age children (0-71 mos. old) are routinely assessed for nutritional status and given micronutrient supplementation and services as needed.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizens			
Who may avail:	Pregnant woman and children 0-59 mos.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
OPERATION TIMBANG (WEIGHING) Children ages 0-71 months	Conduct weighing of children	None	2 mins	<i>Midwives MNAO Designate</i>



<p>MICRONUTRIENT SUPPLEMENTATION 6-71 months old children DEWORMING 12-71 months old children</p>	<ol style="list-style-type: none"> 1. Provide health teaching on Vitamin A and diseases from deficiency 2. Give Vit. A capsule 100,000 IU to 6-11 months old and 200,000 IU to 12-71 months old 3. Give deworming tablets to 12-71 months old children 4. Provide health teaching on proper hygiene to prevent and avoid transmission of soil transmitted helminthiasis or worms 		<p>5 mins</p> <p>1 min</p> <p>2 mins</p> <p>5 mins</p>	<p>Midwives</p>
<p>END OF TRANSACTION</p>				



V. MODERN FAMILY PLANNING

All woman of reproductive aged who seeks services for modern family planning shall be given efficient, quality and safe method.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER				
Classification:	Simple				
Type of Transaction:	Government to citizens				
Who may avail:	All citizens				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
1. FP Form 1					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Couple who desires birth spacing approaches the health personnel (NEW ACCEPTOR)	1. Interview to obtain data to be filled-up in the Family Planning Service Record	None	5 mins	<i>Midwives</i>	
	2. Family Planning Counselling: discussion of responsible parenting; male and female reproductive organs; fertility awareness; different family methods, its advantages and disadvantages, side effects		20 mins		
	3. Taking of medical/gene history and physical examination		15 mins		<i>Trained on DMPA Administration:</i>
	4. Breast examination;				<i>Trained on DMPA Administration:</i>



	check vital signs		2 mins	
2. Client decides the method to be used	<ol style="list-style-type: none"> 1. Check appropriateness of the method to the acceptor using the eligibility checklist 2. Provision of available family planning supplies per couple's choice with detailed instruction on how to use the method and advise when to come back 3. Issue Family Planning Service Record 4. Instruct couple when and where to purchase chosen FP commodity if not available in the health center 5. Referral of abnormal findings 		10 mins	
			1 min	
			1 min	
			3 mins	
3. Client returns to the clinic for her next appointment as scheduled (CURRENT ACCEPTOR)	<ol style="list-style-type: none"> 1. Validate the date of the appointment 2. Ask client about the effectiveness 		1 min	
			1 min	
				Midwives



	of the chosen method		1 min	
	3. If no medical complications, available FP supply will be provided/administered		1 min	
	4. If not available, give instruction where to purchase the supply		5 mins	
	5. Refer abnormal findings			
END OF TRANSACTION				

VI. CASEFINDING AND CASEHOLDING OF PATIENTS WITH TUBERCULOSIS

Tuberculosis is a contagious disease that is a public health threat that shall be given priority. All clients with sign and symptoms of the disease shall undergo necessary laboratory and other diagnostic examinations. The agency shall follow the Department of Health standard of procedure on National Tuberculosis Program.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Official Receipt				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Patients with signs and symptoms of	1. Get the data of the patient and conduct assessment	None	5 mins	<i>Midwives/ Nurses</i>



PTB consults the health personnel	2. Refer to the physician			
2. Patient seek consultation to physician	1. Examination of patient		5 mins	<i>Physicians</i>
	2. Issuance of request for sputum exam		1 min	
	3. Refer to the laboratory for the collection of specimens		1 min	
3. Patient will proceed to the Laboratory	1. Interview patient		10 mins	<i>Registered Medical Technologist</i>
Present the request for sputum exam	2. Explain the importance of 3 sputum exams and the NTP Program		15 mins	
	3. Give 1 sputum cup and instruct the patient for proper specimen collection		5 mins	
	4. Give 2 sputum cups and instruct the patient the proper sputum collection & to bring back the specimens 8:00 AM the following day		5 mins	<i>Registered Medical Technologist</i>
4. Pay the sputum exam fee	1. Receive the specimen;	P100.00/ specimen	5 mins	<i>Physicians</i>



<p>Return the ff. day with the 2nd sputum specimen; Present the official receipt</p>	<p>get the OR and advise to come back the following day to get the result</p>	<p>except for indigent patients</p>		
<p>5. Get the result of the sputum exam Bring the result to the physician</p>	<ol style="list-style-type: none"> 1. Give the result and instruct to bring it to the requesting physician 2. Examine the patient and order for initiation of treatment for sputum positive patients 3. Refer to the Rural Health Nurse 4. Request for Chest Xray for sputum negative patient 5. Advise to come back with the Chest x-ray result 		<p>10 mins</p> <p>1 min</p> <p>5 mins</p> <p>1 min</p> <p>1 to 2 weeks</p>	<p><i>Nurses</i></p>
<p>6. Sputum negative patient bring the Chest XRay result to the physician</p>	<ol style="list-style-type: none"> 1. Refer the Patient to the TBDC 1. Inform the patient when TBDC recommenda 		<p>5 mins</p> <p>15 mins</p>	<p><i>Nurses</i></p>



<p>7. Wait for the result of the TBDC Recommendation</p>	<p>tion is received</p> <ol style="list-style-type: none"> 2. Instruct patient of the TBDC recommendation 1. Get the patients data and record in the Treatment Card 2. Conduct information and education campaign about TB and NTP Protocols 3. Initiation of treatment 4. Assign treatment partner and give instructions where to report for the daily intake of medicine and the importance and schedule of ff-up sputum exam 5. Administration of Anti-TB Medicines 		<p>10 mins</p> <p>5 mins</p> <p>2 mins</p> <p>1 min</p> <p>1 min</p> <p>5 mins</p>	<p><i>Midwives</i></p> <p><i>Registered Medical Technologist and Nurses</i></p>
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8. Sputum positive patient approaches the Rural Health Nurse	<ol style="list-style-type: none"> 1. Check the schedule and give the medicine 2. Advice and remind patient of the schedule of ff-up exam 3. Weigh patient every 2 months 4. Assess for major side effects and refer to physician 5. Follow-up defaulters 	P 100.00	5 mins	<i>Registered Medical Technologist</i>
			2 mins	<i>Nurses</i>
9. Get anti-TB drugs	<ol style="list-style-type: none"> 1. Give 1 sputum cup and instruct the patient for proper sputum collection and tell the patient to bring the specimen the following day @ 8am 			
10. Get sputum cup	<ol style="list-style-type: none"> 1. Receive the specimen 2. Get the official receipt 			
11. Patient undergoing treatment submit sputum	<ol style="list-style-type: none"> 1. Inform patient 			



specimen for ff-up exam Pay the sputum exam Fee				
12. Report to the Rural Health Nurse				
END OF TRANSACTION				

VII. ENVIRONMENTAL HEALTH SERVICES (Issuance of Sanitary Permit)

All business establishment in the municipality shall be required to acquired sanitary permits.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Client files O.R. (New Business Operators) * Photocopy of Barangay Business Clearance, Application form & O.R. with payment of Sanitary Permit, Health Clearance and Sanitary Inspection				
2. Laboratory Result				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register in the client's logbook (New/Renewal) 2. Business operator submits complete requirements	1. Reviews requirements & checks record 2. Records data	None	10 mins 3 mins 10 mins	<i>Sanitary Inspectors</i> <i>Sanitary Inspectors</i>



<p>(Food Establishment Operators with complete documentary requirements)</p> <p>1. Undergoes Laboratory Exams</p> <p>a. Food Handlers with positive laboratory results</p>	3. Prepares Sanitary Permit and Health Certificate		2 mins	Sanitary Inspectors
	4. Releases Sanitary Permits and Health Certificate			Sanitary Inspectors
	A. Reviews requirements & checks record on file		10 mins	Sanitary Inspectors
	B. Advices client to submit for laboratory requirement for food handlers		3 mins	
	C. Collects & examines specimen		10 mins	Sanitary Inspectors, Registered Medical Technologist
	a. Prepares food handler's data and refers to the Municipal Health Officer		2 mins	Sanitary Inspectors
	a1. Conducts client examination and prescribes medicines		2 mins	Sanitary Inspectors
	a2. Instructs and Schedules repeat of laboratory examination week after		10 mins	Physician
				Physician



b. Food Handlers with negative laboratory results (repeat Exam) and waits for the approved permits	the treatment b. Records data, Prepares permit and certification and releases documents to client			<i>Sanitary Inspectors</i>
END OF TRANSACTION				

VIII. INSPECTION OF BUSINESS ESTABLISHMENT (NEW ESTABLISHMENTS)

All business establishment who seek for sanitary permit shall be inspected beforehand- by the sanitary inspectors.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizens			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Client files with necessary requirements.				
Official receipt.				
Attachments: Photocopy of Barangay Business Permit, Application Form				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Applicant/owner of new business establishment	1. Review requirements & checks record on file	None	10 mins	<i>Sanitary Inspector</i>
	2. Advises client to wait		1 min (1-2 hrs)	<i>Sanitary Inspector</i>



	<p>for actual inspection * Inspection conducted on later time</p> <p>3. Conducts actual inspection with the presence of the operator/manager of establishment using the Environmental Health Services form 103-A of 20 parameters</p> <p>4. Prepares in duplicate copy findings of the inspection and furnish 1 copy to the operator</p> <p>5. Refer inspection findings to the Municipal Health Officer for recommendation and corrective measures</p> <p>6. Review requirement</p> <p>7. Review of inspection report</p>		<p>(travel hr)</p> <p>30 mins</p> <p>5 mins</p> <p>5 mins</p> <p>3 mins</p> <p>3 mins</p>	<p><i>Sanitary Inspector</i></p> <p><i>Sanitary Inspector</i></p> <p><i>Sanitary Inspector</i></p> <p><i>Physicians</i></p>
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	conducted by Sanitary Inspectors 8. Give instructions or recommendations when necessary for issuance of sanitary order		10 mins	
END OF TRANSACTION				

IX. ENVIRONMENT HEALTH SERVICES (Issuance of Sanitary Order)

To ensure sanitation, business establishments are randomly inspected. Non-compliant business establishments shall be given sanitation order to comply on a given period of time. Failure to comply may result to foreclosure.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	INSPECTION OF BUSINESS ESTABLISHMENT (NEW ESTABLISHMENTS)			
Who may avail:	All business establishments			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
DTR and/or Accomplishment Report				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
* Non-compliant establishment after the inspection made *Establishment with positive result of Bacteriological Water Analysis	1. Prepares Sanitary Order as per recommendation of the Municipal Health Officer	None	30 mins	<i>Sanitary Inspectors, Physician</i>
			5 mins	



<p>* Non-Compliant establishment after re-inspection of the first Sanitary Order issued</p>	<p>2. Serves Sanitary Order</p>	<p>(exclusive of travel time)</p>	<p>Sanitary Inspector</p>
	<p>3. Informs the client about the duration of the compliance to the corrective measures and re-inspection schedule</p>	<p>5 mins</p>	<p>Sanitary Inspector</p>
	<p>4. Conducts reinspection</p>	<p>30 mins</p>	<p>Sanitary Inspector</p>
	<p>5. Refers to the Municipal Health Officer the re-inspection findings</p>	<p>5 mins</p>	<p>Sanitary Inspector</p>
	<p>1. Prepares Sanitary Order as per recommendation of the Municipal Health Officer</p>	<p>30 mins</p>	<p>Sanitary Inspector</p>
	<p>2. Serves Sanitary Order</p>	<p>5 mins (exclusive of travel time)</p>	<p>Sanitary Inspector</p>
	<p>3. Informs the client about the duration of the compliance to the corrective measures and re-</p>	<p>5 mins</p>	<p>Sanitary Inspector</p>
	<p></p>	<p></p>	<p></p>
	<p></p>	<p></p>	<p></p>
	<p></p>	<p></p>	<p></p>



	inspection schedule			
END OF TRANSACTION				

X. ENVIRONMENT HEALTH SERVICES (Settling of Sanitary Complaint)

All citizens have the right to submit complaints against a business establishment. The agency is responsible for the verification of complain, likewise the issuance of recommendations.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizens			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Verified/ notarized complaint				
2. Inspection Report				
3. Official Receipt				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Register in the client's logbook Submits a verified/notarized complaint and with OR as payment for the filing fee	1.Receives complaint & interviews client for details of the complaint with sketch	None	10 mins	<i>Sanitary Inspector</i>
	2. Refers complete data to Mun. Health Officer		15 mins	<i>Sanitary Inspector</i>
	3. Issuance of Mission Order		15 mins (Exclusive of travel time)	<i>Physician</i>
	4.Inspection of complaint site		30 mins	<i>Sanitary Inspector</i>
	5.Accomplished inspection report & submit		1 hr	<i>Physician</i>



<p>* If MHO recommends issuance of Sanitary Order</p> <p>* If owner of the establishment did not comply with the first SO</p>	to Municipal Health Officer		1 hr	<i>Sanitary Inspector</i>
	6. MHO assesses report & recommends Sanitary Order or letter for appearance in the Health office for settlement of both parties			
	7. Prepares Sanitary Order & serves it to the owner of the establishment		30 mins	<i>Sanitary Inspector, Physician</i>
	8. Gives instructions and explains about Sanitary Order and follow up inspection		15 mins	<i>Sanitary Inspector, Physician</i>
	9. Reinspects and refers recommends and issues second Sanitary Order until recommendation is complied		45 mins	<i>Sanitary Inspector, Physician</i>
	10. Municipal Health Officer recommends letter of appearance		1 min	<i>Sanitary Inspector</i>
	11. Prepares letter (notice of hearing) for appearance in the Municipal Health Office		10 mins	<i>Sanitary Inspector</i>
	12. Serves letter to both parties concerned		20 mins	



Concerned parties attend the meeting	13.Settling of complaint 14.If resistant, submit to SB for legislative purposes and to the Mayor to implement recommendation e.g. judicial abatement 15.If private nuisance advice complaining party to file for judicial abatement		1 hr	
END OF TRANSACTION				

XI. ENVIRONMENTAL HEALTH SERVICES: ISSUANCE OF HEALTH CERTIFICATE TO TRIMOBILE AND PEDICAB DRIVER

All trimobile and pedicab drivers are to secure health certificate as part of the requirements in securing franchise and permit.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to citizen			
Who may avail:	All trimobile and pedicab drivers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. O. R. as Payment of Health Certificate, CTN (New)				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Pedicab/ Trimobile driver signs in the logbook and requests Health Certificate	1. Reviews documents	None	1 min	<i>Sanitary Inspectors</i>
	2. Takes Driver's vital signs and physical assessment		2 mins	<i>Sanitary Inspectors</i>
			1 min	<i>Sanitary Inspectors</i>



<p>* Drivers with high blood pressure</p>	<p>3. Records data and prepares Health Certificate 4. Forwarded to the Municipal health Officer for approval and signature 5. Releases Health Certificate</p> <p>* Refers to the Municipal Health Officer for thorough health examination</p>		<p>2 mins</p> <p>1 min</p> <p>3 mins</p>	<p><i>Sanitary Inspectors Physicians</i></p> <p><i>Sanitary Inspectors</i></p> <p><i>Physician</i></p>
<p>END OF TRANSACTION</p>				



XII. ENVIRONMENTAL HEALTH SERVICES: INSPECTION OF WATER SOURCES

Routine inspection of all water sources to ensure sanitation. Results will be both known by two parties. Positive findings shall be acted immediately.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
CAWADI Barangay officials/care taker/BWSA	1. Inspects all L3 water sources to monitor safety of drinking water of consumers	None	30 mins	<i>Sanitary Inspectors CAWADI Representative</i>
	2. Inspects all L2 water sources to monitor the safety of drinking water in the barangay		30 mins	<i>Sanitary Inspectors</i>
	3. For the construction of chlorinator, motivates the worker by recommending corrective measures for any findings that may contaminate		15 mins	<i>Sanitary Inspectors</i>



	<p>the water source</p> <p>4. Inspects and monitors if these sources are properly disinfected and maintained and gives sanitary and health instruction or health education</p>			<p><i>Sanitary Inspectors</i></p>
END OF TRANSACTION				

XIII. ENVIRONMENTAL HEALTH SERVICES: COLLECTION OF WATER SAMPLES

Routine collection of water samples to be sent for bacteriological analysis shall be the responsibility of the agency. Payments for government owned/ maintained sources shall be taken care of LGU. Results shall be known by both parties. Positive findings call for immediate actions.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. CAWADI, Barangay Officials/ Caretaker/BWSA	1. Prepares sterile bottles & requests forms for bacteriological analysis from Provincial	None	15 mins	<i>Sanitary Inspectors</i>



	<p>Health Office in Bula or MNWD in Naga City</p> <p>2. Opens manhole of reservoir or intake box</p> <p>3. In conducting collection of water sample, ties bottle with sterile string then drops it into the water & fill bottle until to the prescribe level then pull it out of the reservoir then immediately put the stopper and indicate label such as time and date of conducting water sample in a target area</p> <p>4. Return reservoir cover and fills up bacteriological form</p> <p>5. Submit water sample to PHO Laboratory & request form for bacteriological test</p>		<p>5 mins</p> <p>5-10 mins</p> <p>5 mins</p> <p>30 mins</p>	<p><i>Caretaker/ Guide/ BWSA President</i></p> <p><i>Sanitary Inspectors</i></p> <p><i>Sanitary Inspectors Caretaker/ Guide/ BWSA President Barangay Official</i></p> <p><i>Sanitary Inspectors</i></p>
END OF TRANSACTION				



XIV. ENVIRONMENTAL HEALTH SERVICES: WATER SAMPLE AT THE FOOD ESTABLISHMENTS

Part of ensuring sanitation and avoiding food borne disease, water sampling shall be done in all food establishments. Payment should be taken care of by business establishment owners. Positive findings call for immediate action.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Owners of Food Establishments	1. Prepares sterile bottles & requests forms for bacteriological analysis from Provincial Health Office in Bula or MNWD in Naga City	None	15 mins	<i>Sanitary Inspectors</i>
	2. Heat faucet/mouth of pump well to kill any bacteria and flush water from faucet or pump well for 3 mins.		5 mins	
	3. Removes cover and collect to prescribe level & immediately cover the bottle		3 mins	
	4. Labels the bottle and fills up requested		30 mins 1 week <i>(for the result)</i>	
		150.00		



<p>* Bacteriological Analysis with Negative Results</p>	<p>form and submit them to PHO for bacteriological exam and get result after a week</p> <p>5. Distributes result/OR to concerned owners</p>		<p>5 mins</p>	<p><i>Physicians</i></p>
<p>* Bacteriological Analysis with Positive Results</p>	<p>1. Refers to Municipal Health Officer</p>		<p>5 mins</p>	<p><i>Physicians</i></p>
	<p>2. MHO recommends corrective measures & issuance of Sanitary Order</p>		<p>15 mins</p>	<p><i>Sanitary Inspectors</i></p>
	<p>3. Prepares Sanitary Order & serves to the concerned establishments</p>		<p>15 mins</p>	<p><i>Sanitary Inspectors</i></p>
	<p>4. Gives instruction and advice for repeat water sample collection after compliance of corrective measures on the given time</p>		<p>40 mins</p>	<p><i>Sanitary Inspectors</i></p>
	<p>5. Repeats water sample collection and undergo the same procedures</p>	<p>150.00</p>	<p>20 mins</p>	<p><i>Sanitary Inspectors</i></p>
	<p>6. Get results and distributes</p>			



	bacteriological analysis results			
END OF TRANSACTION				

XV. ENVIRONMENTAL HEALTH SERVICES: TECHNICAL ASSISTANCE TO BARANGAY OFFICIALS, OWNER OF PUBLIC ESTABLISHMENTS AND RHM (TOILET CONSTRUCTION)

The Department of Health emphasizes the guidelines in constructing sanitary toilets to ensure no leakage and avoid contaminations to water sources thereby preventing water and food- borne diseases.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Written request				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Barangay Officials/owner of public establishments/ RHM	1. Gives instruction, sketch for sanitary requirements, rules and regulations for toilet construction	None	3 mins	<i>Sanitary Inspectors</i>
	2. Inspection of site if necessary, to see to it that the Sanitary Rules and regulations/ Require are complied		20 mins	<i>Sanitary Inspectors</i>



XVI. ENVIRONMENTAL HEALTH SERVICES: HEALTH EDUCATION; BARANGAY/ COMMUNITY/ ASSEMBLIES

Vital part of health services as a primary care provider is to ensure all citizens are educated in different health services and possible health threats in the community. With health promotion, the community is empowered.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government/ Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Written request				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
	1. Comply to the invitation/ request to be a resource speaker on health Sanitation topics	None	30 mins- 1 hr 20 mins	<i>Sanitary Inspectors</i>
END OF TRANSACTION				



XVII. ENVIRONMENTAL HEALTH SERVICES: EPIDEMIOLOGICAL INVESTIGATION OF CASES

In some cases, epidemiological investigation shall be implemented to ensure public health safety, untoward results shall call for immediate actions.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER				
Classification:	Simple				
Type of Transaction:	Government to Citizen				
Who may avail:	All citizens				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
Discharge Summary					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
1. Reported cases of diseases related/ affected by Environmental Sanitation Factor	1. Ask for discharge summary to confirm final diagnosis of the case reported	None	1 min	<i>Sanitary Inspectors BHW/ Rural Health Midwives</i>	
	2. Interview and contact tracing		20 mins		<i>Sanitary Inspectors</i>
	3. Inspection of house hold premises to identify possible cause		10 mins		<i>Sanitary Inspectors</i>
	4. IEC on health education		5 mins		<i>Sanitary Inspectors</i>
2. Family Members animal bite victims reported to health center	1. Assess site of bite		2 mins	<i>Sanitary Inspectors</i>	
	2. Interview what precautionary measure was done		3 mins		
	3. Get data & motivate, advice for vaccination to Animal Bite Center		10 mins		



	4. Refers to RHM/PHN for referral form accomplishment		3 mins	
END OF TRANSACTION				

XVIII. ENVIRONMENTAL HEALTH SERVICES: ISSUANCE OF TRANSFER CADAVER

In compliance with code of sanitation, the agency shall be responsible in ensuring the public health, hence all cadaver who comes and leave the premises of the municipality shall be made known and must acquire permits.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Death Certificate with cause of death Signature				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Relatives of deceased	1. Asks client for the copy of Death Certificate with the cause of death	None	1 min	<i>Sanitary Inspectors</i>
	2. Interviews and records data	156.00	1 min	<i>Personnel- in-charge</i>
	3. Advice client to pay Transfer of Cadaver fee at the MTO		1 min	<i>Sanitary Inspectors</i>
	4. Prepares the Permit to Transfer Cadaver		5 mins	<i>Physicians</i>



	5. Signs and approves the permit		1 min	
	6. Releases the permit		1 min	
END OF TRANSACTION				

XIX. LABORATORY EXAMINATIONS

Basic laboratory services are provided by the agency. Medical Technologist process the request by the physicians and issues results.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Laboratory request Fee				
Laboratory request Fee Specimen				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
CBC: 1. Give the laboratory request 2. Pay for the laboratory exam 3. Give the official receipt 4. Wait for the result	1. Receive the request 2. Tell patient to pay the corresponding lab fees 3. Receive the OR 4. Prepare the patient and explain the procedure	170.00	1 min 5 mins 5-10 mins	<i>RMT</i>



<p>5. Give the result to the requesting physician</p>	<p>5. Collect & examine the specimen 6. Prepare and Release the result and tell patient to bring 7. the result to the requesting physician</p>		<p>5 mins</p>	
<p>URINALYSIS/ FECALYSIS:</p>		<p>50.00</p>	<p>1 min</p>	<p><i>RMT</i></p>
<p>1. Submit the laboratory request from physician 2. Pay for the laboratory exam 3. Give the official receipt 4. Submit the specimen 5. Wait for the result 6. Give the result to the requesting physician</p>	<p>1. Receive physician's request 2. Tell patient to pay the corresponding lab fees 3. Receive the OR 4. Instruct proper collection of specimens 5. Receive and examine the specimen 6. Prepare and Release the result and tell patient to bring the result to the requesting physician</p>		<p>5 mins 5-10 mins 5 mins</p>	
<p>BLOOD TYPING: Patients who want to know their blood type or potential blood donors</p>	<p>1. Interview patient and record data in the logbook 2. Prepare the patient</p>		<p>3 mins</p>	<p><i>RMT</i></p>
			<p>2 mins 3 mins</p>	



	3. Collect and examine the specimen 4. Prepare. Record and release result		1 min	
END OF TRANSACTION				

XX. ISSUANCE OF CERTIFICATES

Certificates is issued upon the request of the client. Official receipt is required in releasing and processing of the request.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Death Certificate Form Informant knowledge able on the history of the deceased Clinical Abstract of last attending physician or hospital				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
MEDICAL CERTIFICATE Applicants for working permits	1. Interview client for data 2. Take vital signs 3. Examination of Patient 4. Issuance of Medical Certificate	80.00	5 mins 5 mins 10 mins 5 mins	<i>Physicians</i>



<p>IMMUNIZATION CERTIFICATE Mothers of children who will apply for late registration of birth/ enroll children in school</p>	<ol style="list-style-type: none"> 1. Ask the data of the child 2. Check the record in the TCL 3. Preparation and issuance of immunization certificate 	62.00	<p>1 min</p> <p>2 mins</p> <p>10 mins</p>	<i>Midwives</i>
<p>DEATH CERTIFICATE Nearest kin of the deceased or barangay official secure death certificate form from the Mun. Civil Registrar's Office and give to the midwife assigned in the barangay where the death occurred</p>	<ol style="list-style-type: none"> 1. Interview informant to obtain and validate data of the dead person 2. Prepare and sign the death certificate. Let the informant sign 	None	<p>3 mins</p> <p>7 mins</p>	<i>Midwives</i>
<p>Bring the death certificate to the physician</p>	<ol style="list-style-type: none"> 1. Review entries to the Death Certificate Form 2. Interview client, if hospitalized ask for the discharge summary, if seen by private physician within 5 days prior to death advice that the concerned physician must sign the cause of death 		<p>5 mins</p> <p>15 mins</p>	<i>Nurses Physicians</i>



	3. If suspects a foul play report to an inquest officer for autopsy 4. If found to be in order sign and issue the death certificate		3 mins	
END OF TRANSACTION				

XXI. MEDICO-LEGAL SERVICES

Physicians of this agency shall conduct physical assessment upon the request of the client and presented requirement. Official receipt is needed for processing and issuance of result assessment.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Government			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Court Order or Written request of Police Authority				
written request of legal counsel/ attorney or requesting gov't. authority O.R. as payment for the certification fee				
written request from Police authority or Barangay Chairman; O.R. as payment for the certification fee				
subpoena from court to attend court hearing				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
DRUG DEPENDENCE EXAMINATION		RTO	2 mins	



<p>pursuant to RA 9165 (Comprehensive Dangerous Drug Act of 2002)</p>	<ol style="list-style-type: none"> 1. Review and receive Court Order 2. Interview Patient and conduct physical examination 3. Interview relatives 4. Document to patient record 5. Refer client to other Medical Specialty if necessary and advice to get the certificate after 3 days 		<p>40 mins</p> <p>10 mins</p> <p>5 mins</p> <p>2 mins</p>	<p><i>Accredited Physicians</i></p>
<p>Conduct of Autopsy/Post-Mortem Examination to bodies killed or found within catchment area.</p>	<ol style="list-style-type: none"> 1. Receive the Court Order or Written Request of Police Authority 2. If possible, conduct crime scene investigation 3. Ensure the identity of the deceased, interview nearest kin 4. Conduct autopsy/post mortem examination and record findings 5. Make the written report and submission to the 	<p>None</p>	<p>2 mins</p> <p>2 hrs excluding travel time</p> <p>10 mins</p> <p>2 hrs excluding travel time</p> <p>5 mins</p>	<p><i>Physicians assisted by Mortician</i></p>



<p>Relative of the deceased request for a copy of autopsy/post mortem report with written request of legal counsel/ attorney or requesting gov't authority and O.R. as payment for the certification fee</p>	<p>requesting Authority within 3 days</p> <ol style="list-style-type: none"> 1. Receive the official request 2. Advice to return for the issuance of a copy of the report within 5 days 3. Issuance of report after noting in the logbook 	<p>RTO 80.00</p>	<p>2 mins 2 mins 2 mins</p>	<p><i>Physicians</i></p>
<p>Examination of Physical Injuries Client with written request from Police Authority or Barangay Chairman requesting examination and issuance of medico-legal certificate; with O.R. as payment for the Certification Fee</p>	<ol style="list-style-type: none"> 1. Receive the written request 2. Conduct interview and physical examination 3. Give treatment: prescription, laboratory request or referral if needed 4. Document to patient record 	<p>RTO 80.00</p>	<p>2 mins 15 mins 5 mins</p>	<p><i>Physicians</i></p>
<p>Attendance of Court Hearings/Acts as Medico-Legal Expert</p>	<ol style="list-style-type: none"> 1. Receive subpoena 2. Schedule and prepare for the court hearing attend to the court hearing 3. secure court appearance 		<p>2 mins 2 to 4 hrs excluding travel time</p>	<p><i>Physicians</i></p>
<p>END OF TRANSACTION</p>				



XXII. WOMENS' HEALTH SERVICES

One of all leading cause of death among women is cervical cancer, as an early detection, visual inspection using acetic acid may be done and result that will took only 5 minutes. All woman symptomatic or not may not request the series, trained personnel shall conduct the procedure.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
VISUAL INSPECTION USING ACETIC ACID All female ages 25 and above inquire about VIA Go to the health center on the schedule of Visual inspection Using Acetic Acid Wait for the result	1. Set and inform client of schedule. 2. Instruct client of necessary preparations prior to the proceed.	None	10 mins	Physician
	1. Interview Client to get data 2. Conduct information and education campaign about 3. Sexually Transmitted Diseases/Cervical Cancer Prevention 4. Visual Inspection		20 mins	



<p>Client w/ abnormal findings will bring the result to the physician</p>	<p>5. Issuance of result (5 minutes after the VIA)</p> <p>1. Referral of client with abnormal findings to the MHO for treatment</p> <p>2. Counselling of client with abnormal findings and prescription of medicine</p>		<p>2 mins</p> <p>5 mins</p> <p>15 mins</p>	<p><i>Physician</i></p>
<p>Bring result to the physician</p>	<p>1. Referral of client with abnormal findings to the MHO for treatment</p> <p>2. Counselling of client with abnormal findings</p> <p>3. Referral to higher facility if needed</p>		<p>5 mins</p> <p>15 mins</p> <p>5 mins</p>	<p><i>Nurses</i></p> <p><i>Physician</i></p>
<p>END OF TRANSACTION</p>				



XXIII. ATTEND TO QUERRIES

Queries related to health is the responsibility of the agency. Designated personnel will response to queries upon request of client and presented requirements.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER				
Classification:	Simple				
Type of Transaction:	Government to Citizen				
Who may avail:	All citizens				
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE		
Approved Letter Request by the LCE					
Endorsement Letter					
Brochures					
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE	
Clients and students requesting data from the Municipal Health Office must state the purpose/use of the data	1. Interview the client	None	3 mins	<i>Nurses</i>	
	2. Refer to MHO/RHP		5 mins		
	3. Check the file		5 mins		
	4. Provide the data needed		5 mins		
Nursing/Midwifery students needing delivery/cord dressing/minor surgical cases must present an indorsement from the school	1. Ask for the indorsement letter		2 mins	<i>Nurses</i>	
	2. Refer to MHO/RHP for approval of request		5 mins		
	3. Give instructions/requirements to get cases		10 mins		
	4. Indorse to midwives who are handling		5 mins		



<p>ADVOCACY: Community</p>	<p>normal deliveries</p> <ol style="list-style-type: none"> 1. Registration of client 2. Discuss items included in the brochures 3. Answer questions from the audience List prospective donors 4. Advise barangay captain of the Mass Blood Donation schedule and the process 		<p>30 mins</p> <p>30 mins</p>	<p><i>Nurse</i></p>
<p>MASS BLOOD DONATION Prospective Donors/Repeat Donors for interview and examination</p>	<ol style="list-style-type: none"> 1. Interview donor; take vital signs 2. Examine hemoglobin and blood type of donor and decide if donor is qualified to donate 3. Explain the procedure 4. Blood collection 5. Give snacks 		<p>10 mins</p> <p>15 mins</p> <p>15 mins</p> <p>5 mins</p> <p>15 mins</p>	<p><i>Nurse</i></p> <p><i>BMC Staff</i></p>
<p>END OF TRANSACTION</p>				



XXIV. HEALTH EDUCATION AND PROMOTION

Health education is a basic service of a primary care provider. It aims to promote health and avoid sickness for the welfare of the public.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Marriage License Application				
IEC materials Computer/ Printer				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
PRE-MARRIAGE COUNSELLING Applicants for marriage license proceed to the Municipal Health Office after Register in the logbook Attend the pre-marriage counselling Get the PMC Certificate	1. Interview to get the data 2. Conduct pre-marriage counselling 3. Issue Pre-Marriage Counselling Certificate	None	2 mins 3 hrs 5 mins	<i>Nurses</i>
RESPONSIBLE PARENTHOOD AND NATURAL FAMILY PLANNING SEMINAR Newly wedded couples (20 per barangay) attend the seminar	1. Conduct of RPM- NFP Seminar		8 hrs (8am-5pm) (based on sched &	<i>RPM- NFP Team</i> <i>Doctor and Nurses</i>



<p>HEALTHY LIFESTYLE CAMPAIGN TO THE GENERAL PUBLIC LGU Personnel/NGOs/N GAs/Schools/ Barangays confirm or signify if they would like to undergo seminar on healthy lifestyle attend seminar on healthy lifestyle practice healthy lifestyle</p>	<ol style="list-style-type: none"> 1. Inform & coordinate with concerned agencies about administrative orders from DOH & Civil Service Comm. on Healthy Lifestyle 2. Prepare the topics for seminar workshop on HL 3. Conduct Seminar 		<p>availability of funds)</p> <p>2 days</p>	
<p>INFORMATION & EDUCATION CAMPAIGN TO THE GENERAL PUBLIC Walk in patients, barangays, health workers will be given IEC materials Application to their daily lives</p>	<ol style="list-style-type: none"> 1. Prepare/reproduce IEC Materials and distribute to clients 		<p>Case- to- case basis when necessary</p>	<p>HEALTH PERSONNEL</p>
<p>END OF TRANSACTION</p>				



XXV. REGISTRATION- CERTIFICATE OF LIVE BIRTH (COLB)

In case the party seeking late registration of the birth of an illegitimate child is not the mother, the party shall, in addition to the foregoing facts, declare in sworn statement the present whereabouts of the mother.

Office or Division:	OFFICE OF THE MUNICIPAL HEALTH OFFICER			
Classification:	Simple			
Type of Transaction:	Government to Citizen			
Who may avail:	All citizens			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
(Registration within 30 days) * Certificate of Tree Planting * Marriage Contract of Parents				
(Optional) * CTC of parents - if not married				
(Delayed Registration) * Negative result from NSO * Documents like supporting date and place of birth (at least two) * Baptismal Certificate * Immunization Card * Form 137 School Record * Service Record * Voter certification * Marriage Contract (if married) * Joint affidavit of two disinterested persons * CTC of informant (legitimate child) * CTC of parents (illegitimate child) * Affidavit of whereabouts of mother				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client asks for Certificate of Live Birth form and requirements	Certificate of Live Birth form and requirements for registration are given to clients	None	3-5 minutes	MCRO Staff



<p>2. Certificate of Live Birth and requirements are presented for registration</p>	<p>Certificate of Live Birth and requirements are examined if correct and complete. Client is interviewed for data entry. Requirements and data are completed, the client is requested to pay required fee/s at the MTO.</p>	<p>Timely Registered P 10.30</p>	<p>10-15 minutes</p>	<p>Registration Officer I</p>
<p>3. Required fee/s paid at the MTO, client presents the O.R. to MCRO staff.</p>	<p>Certificate of Live Birth, requirements and O.R. are received for registration and client is given schedule for the release of registered COLB</p>	<p><u>Late Registration</u> * Below 1year P103.00</p>	<p>5-10 minutes</p>	<p>Registration Officer III Office Assistant/s MCRO</p>
<p>4. * For timely registration, Certificate of Live Birth may be released to client within 3 hours. (Length of time varies depending upon the number of clients) *For late registration, Certificate of Live Birth will be released after 10 days publication period.</p>	<p>Preparation of Certificate of Live Birth *For timely registration, Certificate of Live Birth is assigned a registry number upon preparation and submitted to MCR for signature. *For late registration, Certificate of Live Birth is</p>	<p>* 1 year & above P 154.50</p>	<p>20-25 minutes</p>	<p>Municipal Civil Registrar Registration Officer III Office Assistant/s-MCR</p>



	assigned a registry number after 10 days publication then submitted to MCR for signature.			
5. Client claims registered document	MCRO staff release owner's/ attendant's copy of registered document to client	None	5-10 minutes	<i>Registration Officer III</i>
	Document is coded and MCRO copy and OCRG copy are filed separately		5-10 minutes	<i>Municipal Civil Registrar Registration Officer III</i>
	Document is recorded in the register of births		5-10 minutes	<i>Municipal Civil Registrar Registration Officer III</i>
	Data is encoded to the NSO-CRIS program		5 - 10 minutes	<i>Registration Officer III</i>
END OF TRANSACTION				