

### **MUNICIPALITY OF TUBIGON**

# CITIZEN'S CHARTER





# TUBIGON COMMUNITY HOSPITAL

**ADMINISTRATIVE SERVICES** 





### Schedule of Availability of Service:

7:00am – 5:00pm Daily

#### Who May Avail of the Service:

Anybody to facilitate the doctors determine a diagnosis, plan treatment, check to see if treatment is working, or monitor the disease over time.

### What are the Requirements:

- 1. Laboratory Request Form
- 2. Official Receipt
- 3. Specimen

**Duration:** 30 minutes to 70 minutes

Step	Applicant/Client	Action Officer	Duration of Activity (Under Normal Circumstances)	Person in Charge	Fees	Form
1.	Approach PACD for inquiries and registration  Present laboratory request.	Receive laboratory request  Instruct to pay for laboratory request  Give specimen bottle if needed	1-3 minutes	Krizia F. Manigo / Chielo Legaspi		
	For new patients with laboratory request: Fill out applicable forms.	Assist patient in filling out applicable forms  Process registration for new patients	3-5 minutes	Krizia F. Manigo / Chielo Legaspi		
	For patients without laboratory request: Advised to consult a doctor for desired laboratory test.	Advice client to seek consultation first for desired laboratory test.				
2	Pay desired laboratory test:  Anti-Treponema Pallidum/Syphillis Ab Testing  Blood Chemistry  Blood Uric Acid (BUA)  Cardiac Panel  CBS  Creatinine  Fasting Blood Sugar (FBS)  HbA1C  HDL  LDL  Potassium  RBS  Serum Albumin Test  Serum Chloride Test  Serum ionized	Receive Laboratory Request and payment	1-2 minutes	Cashier	250.00 190.00 1,783.00 110.00 150.00 140.00 600.00 195.00 78.00 300.00 140.00 200.00 300.00 300.00	Laboratory Request Form

						Opp Topos				
	Calcium Test  Sodium  Triglycerides  Total Cholesterol				300.00 250.00 190.00					
	<ul> <li>❖ Clinical Microscopy Test:</li> <li>➤ Fecalysis/Stool Examination</li> <li>➤ Routine Urinalysis</li> <li>➤ 50 grams OGCT</li> <li>➤ 75 grams OGTT without Urine Test</li> <li>➤ 75 grams OGTT with Urine Test</li> </ul>				70.00 70.00 490.00 490.00 620.00					
	<ul> <li>Hematology:</li> <li>Complete Blood</li> <li>Count (CBC)</li> <li>CBC with Platelet</li> <li>Count (Automation)</li> </ul>				100.00 170.00					
	<ul> <li>Hemoglobin &amp;         Hematocrit</li> <li>Hematocrit</li> <li>Platelet Count</li> </ul>				110.00 75.00 100.00					
	<ul> <li>Newborn Screening</li> <li>Peripheral Smear</li> <li>Pregnancy Test</li> </ul>				660.00 165.00 200.00					
	<ul> <li>❖ Serology:</li> <li>➢ Blood Typing (A,B,O)</li> <li>➢ Dengue IgG/IgM</li> <li>➢ Dengue Ns1Ag</li> <li>➢ HBsAg</li> <li>Determination</li> <li>➢ HDbsAg</li> <li>➢ IgG/IgM for Samonella Typhi</li> </ul>				330.00 550.00 550.00 200.00 200.00 390.00					
3	Proceed to Laboratory and present Laboratory request and Official Receipt	Receive Laboratory Request form and O.R and instruct patient for the procedure	1-3 minutes	John mark Ochavillo, RMT/ Madelyn Piezas, RMT/ Mar Aquiles, Lab Tech		Laboratory Request Form Official Receipt				
4.	Give specimen or cooperate with the procedure	Receive specimen and perform procedure.	3-5 minutes	MedTech/ LabTech						
5.	Wait for the laboratory result	Process laboratory tests	30-60 minutes	MedTech/ LabTech						
6.	Receive the Laboratory results.	Release laboratory result.	1-3 minutes	MedTech/ LabTech		Official Receipt				
Fill-out the Client Satisfaction Rating Form										
END OF TRANSACTION										