



## SOFTWARE APPLICATION MANUAL

<b>System:</b>	Human Resource Information System	<b>Date:</b>	June 2025
<b>Portal URL</b>	<a href="https://employee.hris-in-powermaccenter.com/">https://employee.hris-in-powermaccenter.com/</a>	<b>Name:</b>	Safety & Health Guide

# How to setup Safety & Health in HRIS

**Step 1:** Log in HRIS Account, then go to Safety & Health > OSH Setup > Classification of Accidents or Injury, Medical Requirements, Diagnosis, Diagnosis Exam, HMO Provider, Medical Provider, Company Configuration (need to complete the setup here first)

The screenshot shows the HRIS dashboard with the following elements:

- Left Sidebar (OSH Set Up):** Contains links for Classification of Accidents or Injury, Medical Requirement, Diagnosis, Diagnostic Exam, HMO Provider, Medical Provider, and Company Configuration.
- Dashboard Metrics:** 53 Open Requests, 2 Documents Processed (YTD), 4 Document for Claiming.
- Manpower Complement:** A bar chart showing employee counts across different categories.
- Headcount by Employee Type:** A horizontal bar chart showing headcount by employee type.
- Headcount by Length of Service:** A pie chart showing the distribution of employees by length of service.
- Right Sidebar:** Memorandum and Announcement (NOTICE ON MEDICARD DEPENDENT DEDUCTIONS, INFINITE MOBILE APP FAQS), Task List (Employee Assignment, Profile Update Request, Training Request, etc.).

**Step 2:** Add data in OSH Setup. For starters, the system already provides the common data in sub module **OSH Setup** that will be used across the different record transactions in this module.

## • OSH Setup - Classification of Accidents or Injury

Safety and Health > List of Classification of Accidents or Injury

List of Classification of Accidents or Injury »

Basis	Classification Code	Short Description
Bodily Location of Injury	A	Head
Bodily Location of Injury	B	Neck
Bodily Location of Injury	C	Back
Bodily Location of Injury	D	Trunk or Internal Organs
Bodily Location of Injury	E	Upper Extremities
Bodily Location of Injury	F	Lower Extremities
Bodily Location of Injury	G	Whole Body or Multiple Sites Equally Injured
Bodily Location of Injury	H	Others
Commuting accident	A	Pavement, pedestrian mall
Commuting accident	B	Cycleway
Commuting accident	C	Motorway
Commuting accident	D	Public road outside
Commuting accident	E	Public road inside

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To add Classification

Step 1: Click the + button if you want to add new classification or you may edit the existing classification by clicking the edit button.

Step 2: Select the basis of classification and input classification code, short description and long description.

Safety and Health > List of Classification of Accidents or Injury

List of Classification of Accidents or Injury »

Basis	Classification Code	Short Description
Bodily Location of Injury	A	
Bodily Location of Injury	B	
Bodily Location of Injury	C	
Bodily Location of Injury	D	
Bodily Location of Injury	E	
Bodily Location of Injury	F	
Bodily Location of Injury	G	
Bodily Location of Injury	H	
Commuting accident	A	
Commuting accident	B	
Commuting accident	C	
Commuting accident	D	
Commuting accident	E	

Classification of Accidents or Injury

Basis of Classification: Bodily Location of Injury

Classification Code: H

Short Description: Others

Long Description: Others

Save Close

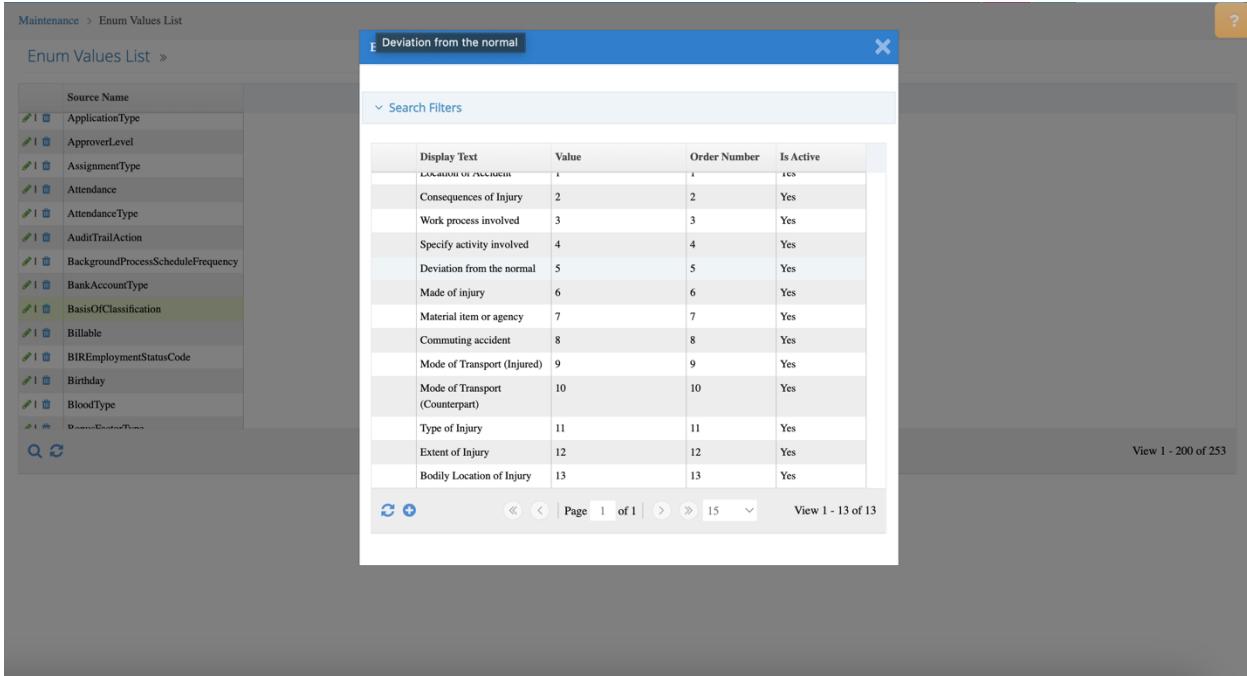
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Step 3: Click the save button once done.

Note: You may also add new Basis of Classification. Go to Maintenance > Others > Enum Value List > Then search BasisOfClassification then click Edit button.

Maintenance > Others > Enum Values List	
BankAccountType	
Enum Values List »	
	BankAccountType
	BasisOfClassification
	Billable
	BIREmploymentStatusCode
	Birthday
	BloodType
	BonusFactorType
	CashIssuanceType
	ChangeWorkScheduleReason
	ChargeCode
	CivilStatus
	CJI_DueTo
	CleansingDurationType

Click the  button to add new list.



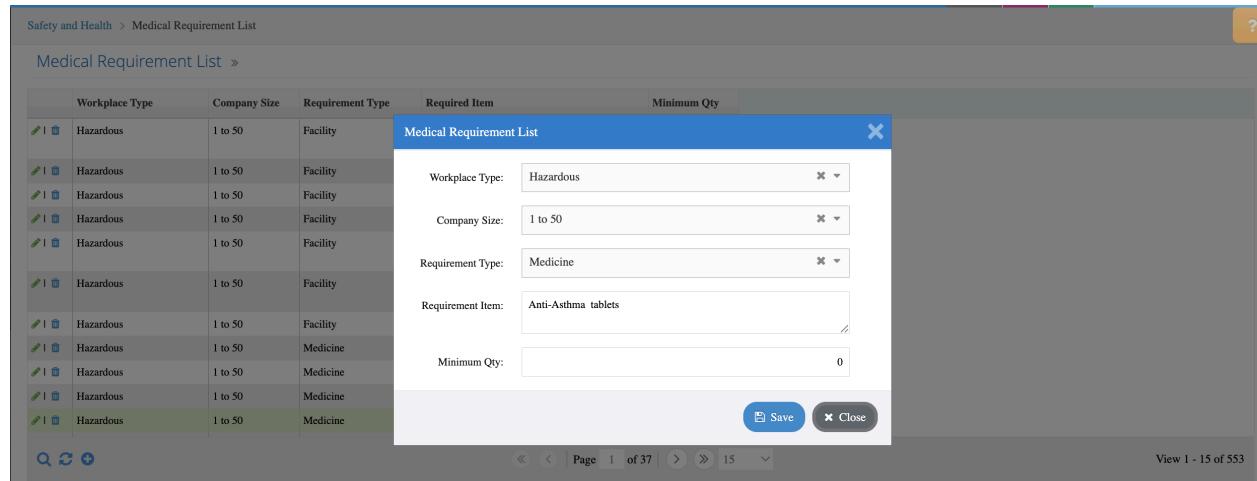
The screenshot shows the 'Enum Values List' page under 'Maintenance'. A modal dialog titled 'Deviation from the normal' is open, displaying a table of injury types. The table has columns: Display Text, Value, Order Number, and Is Active. The data includes:

Display Text	Value	Order Number	Is Active
LOCATION OF ACCIDENT	1	1	Yes
Consequences of Injury	2	2	Yes
Work process involved	3	3	Yes
Specify activity involved	4	4	Yes
Deviation from the normal	5	5	Yes
Made of injury	6	6	Yes
Material item or agency	7	7	Yes
Commuting accident	8	8	Yes
Mode of Transport (Injured)	9	9	Yes
Mode of Transport (Counterpart)	10	10	Yes
Type of Injury	11	11	Yes
Extent of Injury	12	12	Yes
Bodily Location of Injury	13	13	Yes

## • OSH Setup – Medical Requirements

Step 1: Click the  button if you want to add new classification or you may edit the existing classification by clicking the  edit button.

Step 2: Select the workplace type, company size, requirement type and input requirement item and minimum qty.



The screenshot shows the 'Medical Requirement List' page under 'Safety and Health'. A modal dialog titled 'Medical Requirement List' is open, showing fields for Workplace Type, Company Size, Requirement Type, Requirement Item, and Minimum Qty. The data is as follows:

Workplace Type	Company Size	Requirement Type	Required Item	Minimum Qty
Hazardous	1 to 50	Facility		
Hazardous	1 to 50	Facility		
Hazardous	1 to 50	Facility		
Hazardous	1 to 50	Facility		
Hazardous	1 to 50	Facility		
Hazardous	1 to 50	Facility		
Hazardous	1 to 50	Medicine		
Hazardous	1 to 50	Medicine		
Hazardous	1 to 50	Medicine		
Hazardous	1 to 50	Medicine		

The modal dialog contains the following fields:

- Workplace Type: Hazardous
- Company Size: 1 to 50
- Requirement Type: Medicine
- Requirement Item: Anti-Asthma tablets
- Minimum Qty: 0

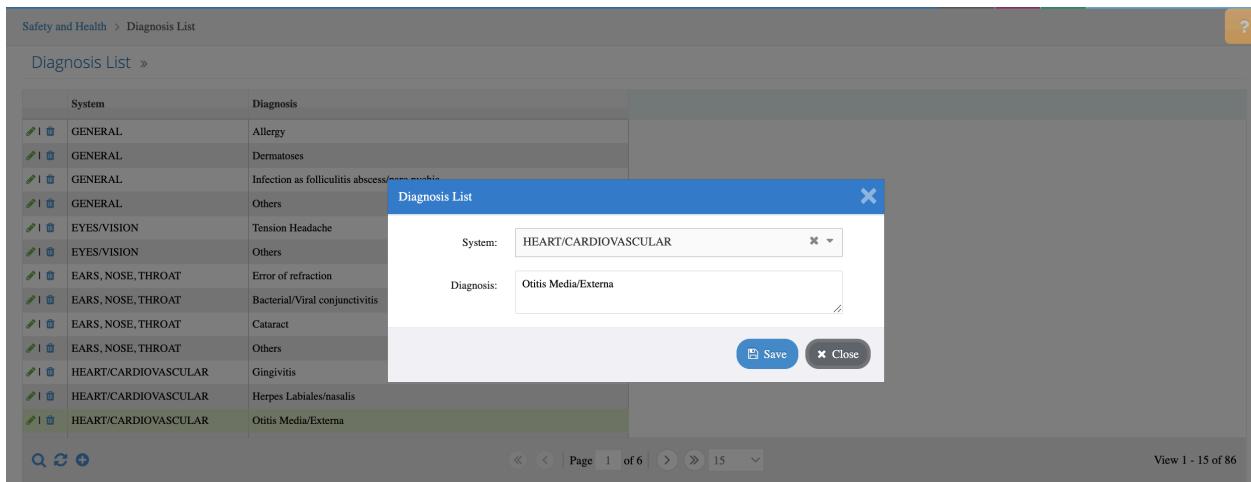
Step 3: Click the save button once done.

Note: You may also add new Workplace Type, Company Size, Requirement Type. Go to Maintenance > Others > Enum Value List > Then search new Workplace Type, Company Size, Requirement Type.

- **OSH Setup – Diagnosis**

Step 1: Click the  button if you want to add new classification or you may edit the existing classification by clicking the  edit button.

Step 2: Select the System and input Diagnosis.



Step 3: Click the save button once done.

Note: You may also add new System. Go to Maintenance > Others > Enum Value List > Then search System.

- **OSH Setup – Diagnosis Exam**

Step 1: Click the  button if you want to add new classification or you may edit the existing classification by clicking the  edit button.

Step 2: Select the System and input Diagnosis.

The screenshot shows a table of diagnostic exams with columns for Code and Description. A modal dialog box is open over the table, titled 'Diagnostic Exam List'. It contains fields for 'Code' (Pap Smear) and 'Description' (Pap Smear (covered for member 35 years old and above)). At the bottom of the dialog are 'Save' and 'Close' buttons.

Code	Description
Chest X-ray	Chest X-ray
Urinalysis	Urinalysis
Fecalysis	Fecalysis
Complete Blood Count	Complete Blood Count
ECG	Electrocardiogram (covered for members 35 years old and above)
PE	Physical Exam
Eye Refraction	Eye Refraction
Fasting Blood Sugar and Cholesterol	Fasting Blood Sugar and Cholesterol (covered for member 35 years old and above)
Pap Smear	Pap Smear (covered for member 35 years old and above)

View 1 - 9 of 9

Step 3: Click the save button once done.

- **OSH Setup – HMO Provider**

Step 1: Click the button if you want to add new classification or you may edit the existing HMO Provider by clicking the edit button.

Step 2: Input the details: HMO Provider, Address, Contact #, Contact Person and Email.

The screenshot shows a table of HMO providers with columns for HMO Provider, Address, Contact No., Contact Person, and Email Address. A modal dialog box is open over the table, titled 'HMO Provider'. It contains fields for 'HMO Provider' (Philcare), 'Address' (Marikina City), 'Contact No.' (099999999), 'Contact Person' (Juan Jose Del Monte), and 'Email' (customersservice@philcare.com). At the bottom of the dialog are 'Save' and 'Close' buttons.

HMO Provider	Address	Contact No.	Contact Person	Email Address
Medicard	Makati City			

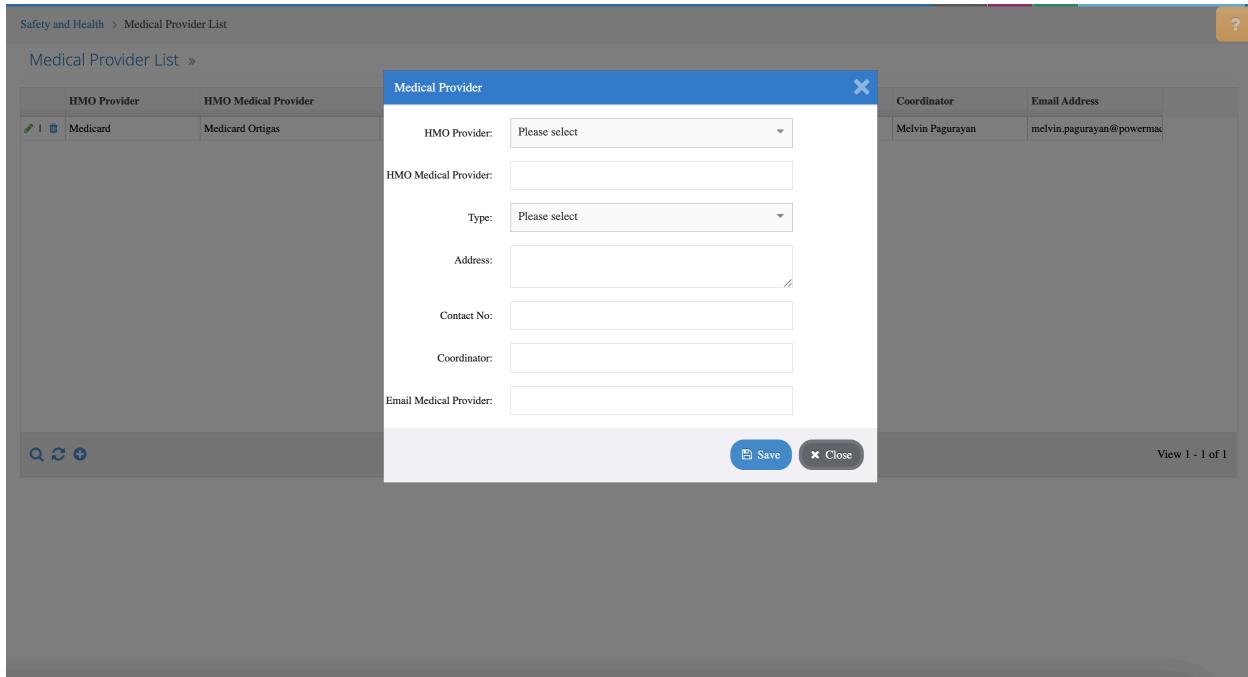
View 1 - 1 of 1

Step 3: Click the save button once done.

- **OSH Setup – Medical Provider**

Step 1: Click the  button if you want to add new classification or you may edit the existing HMO Provider by clicking the  edit button.

Step 2: Select HMO Provider and type. Input the details in HMO Medical Provider, Address, Contact No, Coordinator and Email Medical Provider.



The screenshot shows a software interface for managing medical providers. At the top, there's a navigation bar with 'Safety and Health' and 'Medical Provider List'. Below it is a table with columns 'HMO Provider' and 'HMO Medical Provider'. A row in the table shows 'Medicard' and 'Medicard Ortigas'. A modal dialog box titled 'Medical Provider' is open over the table. It contains fields for 'HMO Provider' (a dropdown menu with 'Please select'), 'HMO Medical Provider' (an input field), 'Type' (a dropdown menu with 'Please select'), 'Address' (an input field), 'Contact No.' (an input field), 'Coordinator' (an input field), and 'Email Medical Provider' (an input field). At the bottom of the modal are 'Save' and 'Close' buttons. In the background, the table has a row for 'Melvin Pagurayan' with the email 'melvin.pagurayan@powermac'. The bottom right corner of the screen says 'View 1 - 1 of 1'.

Step 3: Click the save button once done.

Note: You may also add new Type. Go to Maintenance > Others > Enum Value List > Then search MedicalProviderType.

- **OSH Setup – Company Configuration**

Step 1: Click the  button if you want to add new classification or you may edit the existing HMO Provider by clicking the  edit button.

Step 2: Select HMO Provider and type. Input the details in HMO Medical Provider, Address, Contact No, Coordinator and Email Medical Provider.

Safety and Health > OSH Configuration List

OSH Configuration List »

Company	Company Size	Workplace Type
EVOLVE TECH LIFESTYLE, INC.	601 to 2000	Non Hazardous
POWER MAC CENTER, INC.	601 to 2000	Non Hazardous

Company Configuration List

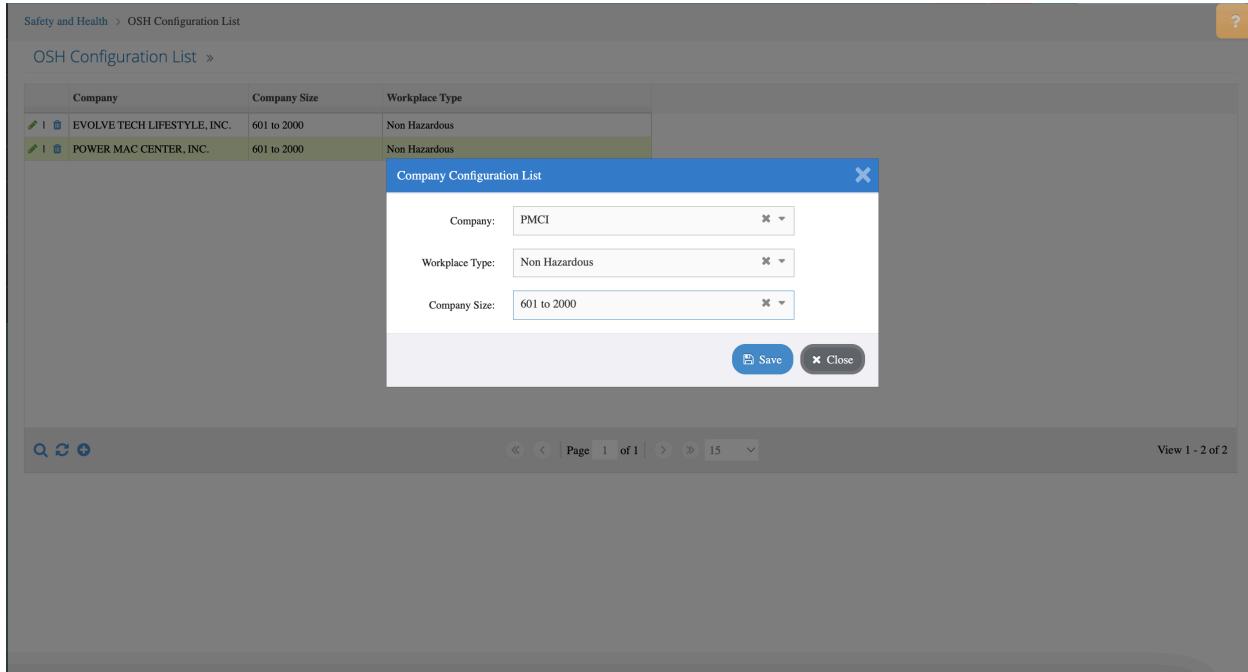
Company: PMCI

Workplace Type: Non Hazardous

Company Size: 601 to 2000

Save Close

View 1 - 2 of 2



Step 3: Click the save button once done.

Step 4: You may also add new Type. Go to Maintenance > Others > Enum Value List > Then search CompanySize, WorkplaceType and to add new company, go to Maintenance > Organization > Company.

# How to create Accident/Injury in HRIS

The screenshot shows the HRIS dashboard with the following key elements:

- Left Sidebar:** A navigation menu under "Safety & Health" with a red box around the "Accident/Injury Report" link.
- Top Bar:** Includes icons for Talent Acquisition, Onboarding, Employee 201, HR Services, Personnel Development, Performance Management, Employee Relations, Safety & Health, OSH Set Up, Classification of Accidents or Injury, Medical Requirement, Diagnosis, Diagnostic Exam, HMO Provider, Medical Provider, Company Configuration, Accident/Injury Report (highlighted), Drug Test, and Medical Examination.
- Dashboard Metrics:** Three cards: "53 Open Requests", "2 Documents Processed (YTD) Jan 1 - Jun 25", and "4 Document for Claiming".
- Manpower Complement:** A bar chart showing employee counts across different categories.
- Headcount by Employee Type:** A horizontal bar chart showing headcount by employee type.
- Headcount by Length of Service:** A pie chart showing the distribution of employees by length of service.
- Memorandum and Announcement:** A list of notifications including "NOTICE ON MEDICARD DEPENDENT DEDUCTIONS" and "INFINITE MOBILE APP FAQ".
- Task List:** A list of tasks with their status and creation time.

Step 1: Log in HRIS Account, then go to Safety & Health > Accident/Injury Report

Step 2: Click the button to add.

Step 3: Click the 3 dot to select the employee.

The screenshot shows the "Accident/Injury Report" form with the following fields:

- Header:** Accident/Injury Report, Report Date: 06/26/2025.
- Employee Selection:** A dropdown menu with a red box around it, labeled "Injured/Ill Person: ...".
- Address and Position:** Address: Less than a day, Length of Service prior to Accident: None.
- Dependents:** No. of Dependent(s): None.
- Section Headers:** Accidents/Illness, Nature & Extent of Injury, Cause of Accident, Accident Cost.
- Form Fields:**
  - Date of Accident:
  - Time of Accident:
  - The accident involved:
    - Personal Injury:
    - Property Damage:
  - Commuting Accident?:  NO
  - Location of Accident:
  - Mode of Transport:
  - Counterpart's Transport:
  - Work Process Involved:
  - Specific Activity Involved:
  - Deviation from the normal:
  - Description:
  - Attachment:  No File ...
- Buttons:** Save, Close.

Step 4: Search the employee by clicking the magnifying glass.

Select Employee				
	Employee No	Employee Name	Department	Branch
+	2281	ABALO, APRIL	APPLE AUTHORIZED SERVICE PROVIDER	APPLE AUTHORIZED SERVICE PROVIDER
+	275	ABANILLA, DRANREB PESIGAN	RBT OPERATIONS	RETAIL BUSINESS TEAM
+	224	LEONORAS, CRONICA CERYL ABANTO	Finance	Pasig Head Office
+	180	ABENOJA, TESSIE ASIÑERO	RBT OPERATIONS	RETAIL BUSINESS TEAM
+	666	ABLE, JOHN MARK TORRES	RBT OPERATIONS	RETAIL BUSINESS TEAM
+	169	AGARIN, MARY GRACE RAMOS	BASECAMP	PMC BUSINESS SYSTEMS. INC.
+	44	AGREDA, LERNA AZARCON	ADMINISTRATION AND CORPORATE SERVICES	Pasig Head Office
+	775	AGUSTIN, RAY ROBIN ZABLAN	RBT OPERATIONS	RETAIL BUSINESS TEAM
+	2280	ALCARAZ, MARCELINO TARUNAS	RBT OPERATIONS	RETAIL BUSINESS TEAM
+	704	ALCAZAR, ANJO ONIFA	APPLE AUTHORIZED SERVICE PROVIDER	Service Center

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✖ Close

Step 5: Filter the employee by selecting Employee Name, contains, then input the name or last name of the employee then click Find.

Select Employee				
	Employee No	Employee Name	Department	Branch
+	3966	PAGURAYAN, MELVIN DEMETRIAL	MANAGEMENT INFORMATION SYSTEM	Pasig Head Office -ETLI

Search... ✖all Employee Name contains pagurayan -ResetFind

 Page  of 1 | < > >> 15 ▾View 1 - 1 of 1

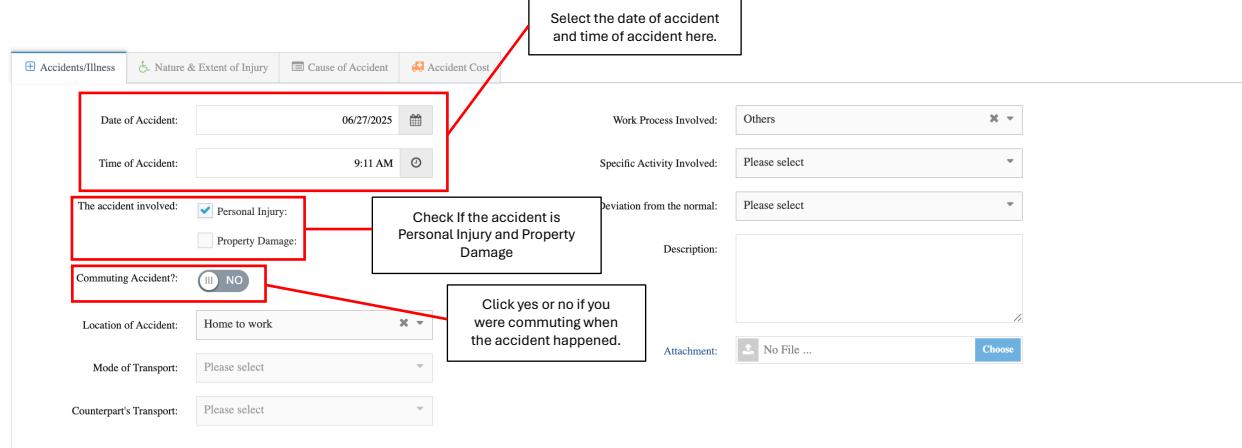
✖ Close

Step 6: Click the  button to select the employee. Once selected, Address and Position will automatically show.

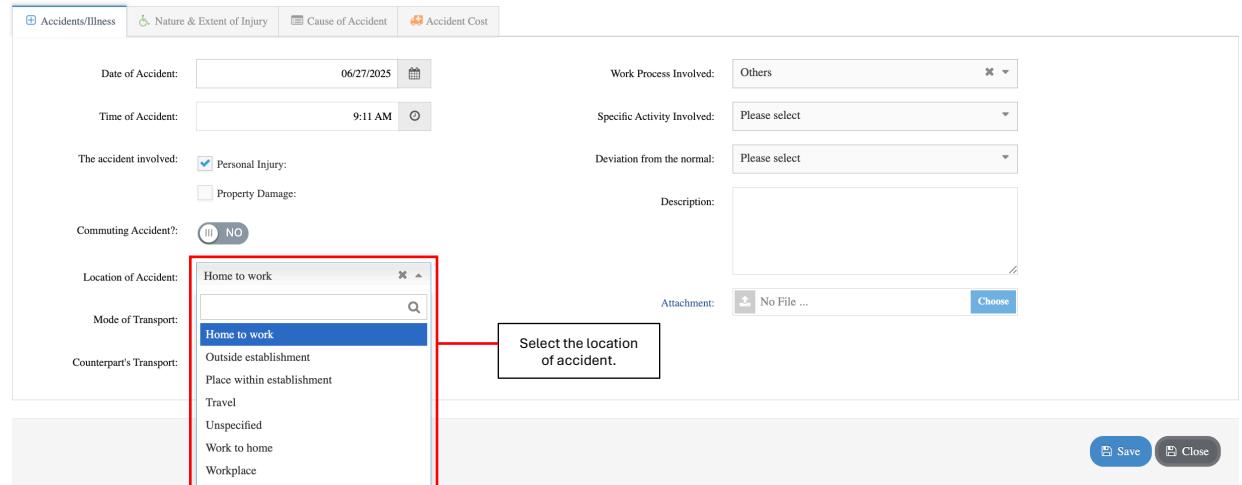


The screenshot shows a web-based form for an accident report. At the top, there's a navigation bar with a back arrow and the text "Accident/Injury Report". Below it, a sub-navigation bar says "Accident/Injury Report »". The main form area has fields for "Injured/Ill Person" (set to "PAGURAYAN, MELVIN DEMETRIAL") and "Report Date" (set to "06/26/2025"). A red box highlights the "Address" field, which contains "#6 DAP-DAP ST., BRGY MALANDAY, MARIKINA CITY". To its right, the "Position" field is set to "APPLICATION SPECIALIST". Below these, "Length of Service prior to Accident" is listed as "1 year". Under "Dependent(s)", it says "None".

Step 7: Fill up all the necessary field.



This screenshot shows the "Nature & Extent of Injury" tab of the form. It includes fields for "Date of Accident" (06/27/2025) and "Time of Accident" (9:11 AM). A callout box points to these fields with the text "Select the date of accident and time of accident here.". Below these, under "The accident involved:", there are two checkboxes: "Personal Injury" (checked) and "Property Damage". A callout box points to this area with the text "Check if the accident is Personal Injury and Property Damage". Further down, "Commuting Accident?" is set to "NO". A callout box points to this with the text "Click yes or no if you were commuting when the accident happened." Other fields include "Work Process Involved" (Others), "Specific Activity Involved" (Please select), "Deviation from the normal" (Please select), "Description" (empty), and an "Attachment" section with a "Choose" button.



This screenshot shows the "Nature & Extent of Injury" tab again, focusing on the "Location of Accident" field. A dropdown menu is open, showing options like "Home to work", "Outside establishment", "Place within establishment", "Travel", "Unspecified", "Work to home", and "Workplace". The "Home to work" option is highlighted with a red box. A callout box points to this menu with the text "Select the location of accident.". At the bottom right of the screen, there are "Save" and "Close" buttons.

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

Date of Accident:	06/27/2025	Work Process Involved:	<input type="text" value="Please select"/>
Time of Accident:	9:11 AM	Specific Activity Involved:	<input type="text" value="Agricultural"/>
The accident involved:	<input type="checkbox"/> Personal Injury: <input type="checkbox"/> Property Damage:	Deviation from the normal:	<input type="text" value="Construction&lt;br/&gt;General&lt;br/&gt;Others&lt;br/&gt;Others&lt;br/&gt;Production&lt;br/&gt;Production-related&lt;br/&gt;Services"/>
Commuting Accident?:	<input checked="" type="radio"/> NO	Description:	
Location of Accident:	Home to work	Attachment:	
Mode of Transport:	Please select		
Counterpart's Transport:	Please select		

Select Work Process Involved (Required Field):  
 - **Agricultural:** Incidents related to farming or agriculture.  
 - **Construction:** Incidents occurring on a construction site.  
 - **General:** A broad category for work processes not specific to the others.  
 - **Others:** Serves as a generic option.  
 - **Production:** Incidents in a manufacturing or production environment.  
 - **Production-related:** Similar to production, possibly for supporting activities.  
 - **Services:** Incidents in a service-oriented industry.

This section helps in classifying the incident by the nature of the work being performed.

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

Date of Accident:	06/27/2025	Work Process Involved:	<input type="text" value="Others"/>
Time of Accident:	9:11 AM	Specific Activity Involved:	<input type="text" value="Hand-Held Tools"/>
The accident involved:	<input type="checkbox"/> Personal Injury: <input type="checkbox"/> Property Damage:	Deviation from the normal:	<input type="text" value="Manual Handling&lt;br/&gt;Manual Transportation&lt;br/&gt;Movement&lt;br/&gt;Operating Machines&lt;br/&gt;Operating/Passenger on Transport Equipment&lt;br/&gt;Presence"/>
Commuting Accident?:	<input checked="" type="radio"/> NO	Description:	
Location of Accident:	Home to work	Attachment:	
Mode of Transport:	Please select		
Counterpart's Transport:	Please select		

Select Specific Activity Involved (Required Field):  
 - **Hand-Held Tools:** Incident while using hand tools.  
 - **Manual Handling:** Incident while lifting, carrying, pushing, or pulling manually.  
 - **Manual Transportation:** Incident while manually moving goods or equipment.  
 - **Movement:** General movement activity.  
 - **Operating Machines:** Incident while operating machinery.  
 - **Operating/Passenger on Transport Equipment:** Incident involving being a driver or passenger on transport equipment (e.g., forklift, company vehicle).  
 - **Presence:** This option might be for incidents that occurred simply due to being in a certain place, without active engagement in a task (e.g., being hit).

This section helps pinpoint the precise activity the individual was undertaking at the moment of the incident, which is vital for root cause analysis.

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

Date of Accident:	06/27/2025	Work Process Involved:	<input type="text" value="Others"/>
Time of Accident:	9:11 AM	Specific Activity Involved:	<input type="text" value="Movement"/>
The accident involved:	<input type="checkbox"/> Personal Injury: <input type="checkbox"/> Property Damage:	Deviation from the normal:	<input type="text" value="Body movements (person in movement)&lt;br/&gt;Body movements (person stationary)&lt;br/&gt;Breakages, fractures, bursting, deformations, slips, falls, collapse of elements&lt;br/&gt;Deviation caused by overflow, overturn, leak, flow, vaporization, emission&lt;br/&gt;Deviations caused by electricity, explosion or fire&lt;br/&gt;Falls of persons&lt;br/&gt;Loss of control of machines, tools, means of transport, means of&lt;br/&gt;Others"/>
Commuting Accident?:	<input checked="" type="radio"/> NO	Description:	
Location of Accident:	Home to work	Attachment:	
Mode of Transport:	Please select		
Counterpart's Transport:	Please select		

Select Deviation from the normal (Required Field):  
 - **Body movements (person in movement):** Incident related to how a person moved while in motion (e.g., slipped while walking).  
 - **Body movements (person stationary):** Incident related to how a person moved while still (e.g., strained back while lifting something heavy from a stationary position).  
 - **Breakages, fractures, bursting, deformations, slips, falls, collapse of elements:** Covers physical damage to objects or structures, as well as common accidents like slips and falls.  
 - **Deviation caused by overflow, overturn, leak, flow, vaporization, emission:** Environmental or containment issues (e.g., a chemical spill, a gas leak).  
 - **Deviations caused by electricity, explosion or fire:** Incidents involving specific high-hazard energy sources.  
 - **Falls of persons:** Specifically for incidents where a person falls.  
 - **Loss of control of machines, tools, means of transport, means of:** Incidents where equipment or vehicles become uncontrollable.  
 - **Others:** A general category for anything that doesn't fit the above.

This section helps pinpoint the immediate cause or type of abnormal event.

## Next Tab: Nature & Extent of Injury

Select Nature of Injury (Required Filed) :

- **Acute Poisonings and Infections:** Injuries or illnesses caused by toxic substances or pathogens.
- **Burns, Corrosions, Scalds and Frostbites:** Injuries due to extreme temperatures or corrosive substances.
- **Concussions and Internal Injuries:** Injuries to the brain (without external wound) or internal organs.
- **Dislocations, Sprains and Strains:** Musculoskeletal injuries common from overexertion or sudden movements.
- **Foreign Body in the Eye:** Self-explanatory, presence of an foreign object in the eye.
- **Fractures:** Broken bones.
- **Others:** A general category for injury types not explicitly listed.
- **Superficial Injuries and Open Wounds:** Minor cuts, abrasions, lacerations, etc.
- **Traumatic Amputations:** Loss of a body part due to trauma.

This field is used to categorize the *type or character of the injury itself*, describing what medically happened to the person.

Select Bodily Location of Injury (Required Field) :

- **Back:** Injury to the back.
- **Head:** Injury to the head.
- **Lower Extremities:** Injuries to legs, feet, etc.
- **Neck:** Injury to the neck.
- **Others:** For locations not specifically listed.
- **Trunk or Internal Organs:** Injuries to the torso or internal organs.
- **Upper Extremities:** Injuries to arms, hands, etc.
- **Whole Body or Multiple Sites Equally Injured:** For widespread injuries or injuries affecting multiple areas with similar severity.

This field is used to specify *which part of the body was injured*.

Select Extent of Injury (Required Field) :

- **Fatal:** The injury resulted in death.
- **Medical Treatment:** The injury required medical attention but might not lead to permanent disability or long-term absence.
- **Permanent Partial:** The injury caused a permanent impairment to a part of the body, but not total disability.
- **Permanent Total:** The injury caused permanent and complete disability.
- **Temporary Total:** The injury caused temporary, complete inability to perform work.

This field asks about the *medical classification or severity level* of the injury.

Accidents/Illness    Nature & Extent of Injury    Cause of Accident    Accident Cost

Nature of Injury:	Others	Start Date:	06/30/2025
Bodily Location of Injury:	Others	Date Returned to Work:	07/02/2025
Extent of Injury:	Medical Treatment	# of Days Lost:	2 days
Consequences of Injury:	1 to 3 days <input type="button" value="1 to 3 days"/> <span style="border: 1px solid #ccc; padding: 2px;">1 to 3 months</span> 15 to 21 days 22 days to 1 month 3 to 6 months 4 to 7 days 6 to 12 months 8 to 14 days Consequences Fatal		

**Select Consequences of injury (Required Field):**  
 - This section helps in assessing the severity of the injury based on the expected downtime or outcome.

Save Close

Expected duration of recovery or absence from work due to the injury. It quantifies the impact in terms of time.

Accidents/Illness    Nature & Extent of Injury    Cause of Accident    Accident Cost

Nature of Injury:	Others	Start Date:	06/30/2025
Bodily Location of Injury:	Others	Date Returned to Work:	07/02/2025
Extent of Injury:	Medical Treatment	# of Days Lost:	2 days
Consequences of Injury:	1 to 3 days	Start Date / Date Returned to Work / # of Days Lost (Required Field): These fields are for tracking the duration of absence from work due	

Save Close

## Next Tab: Cause of Accident

**Select Agency Involved (Required Filed):**

- Agents, substances, materials, objects, component parts of machines: A very broad category encompassing most physical items or substances that could be involved in an accident.
- **Buildings at depth:** Refers to incidents occurring in subterranean parts of buildings (e.g., basements, underground structures).
- **Buildings at height:** Refers to incidents occurring at elevated parts of buildings (e.g., roofs, upper floors during construction/maintenance).
- **Buildings on the same level:** Incidents within the main, ground-level parts of buildings.
- **Chemical substances:** Accidents directly involving chemicals.
- **Engines, prime movers, transmission devices:** Machinery components that generate or transmit power.
- **Land vehicles:** Accidents involving vehicles on land (cars, trucks, forklifts, etc.).
- **Living organisms:** Incidents involving animals or other living beings (e.g., dog bite, insect sting).
- **Manual hand tools:** Accidents involving hand-operated tools (e.g., hammer, wrench, knife).
- **Means of conveying, transporting, storing:** Equipment for moving or holding items (e.g., conveyors, forklifts, racks).
- **Means of distribution of materials:** Systems for distributing goods within a facility (e.g., automated sorting).

This dropdown helps to pinpoint the tangible "thing" or environmental aspect that played a direct role in the accident.

**Agency Part Involved (Required Field) :** This field likely be used to specify a particular component or part of the "Agency Involved" if applicable (e.g., if "Land vehicles" is chosen, this might be "wheel" or "engine").

**Accident Type (Required Field):** This field would categorize the nature of the event itself (e.g., "Fall from height," "Struck by," "Caught in/between," "Contact with electricity").

**Unsafe Mechanical or Physical Condition (Not Required Field):** This is a text box where the user can describe any hazardous conditions related to equipment, tools, environment, etc., that contributed to the accident. This is about the physical state of things.

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

Agency Involved: Others

Agency Part Involved:

**Unsafe Act Contributing Factor (Not Required Field)** : This is a text box where the user can describe any human errors or unsafe behaviors that contributed to the accident. This is about the actions of individuals.

Unsafe Mechanical or Physical Condition:

Unsafe Act Contributing Factor:

## Next Tab: Accident Cost

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

**MANPOWER COST**

Compensation: [ ] hrs [ ] mins

Medical & Hospitalization: [ ] hrs [ ] mins

Burial: [ ] hrs [ ] mins

TOTAL: [ ] hrs [ ] mins

**MANPOWER COST (Not Required Field)** : This section specifically deals with costs related to the human element involved in the accident, primarily concerning the injured individual.

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

> MANPOWER COST

< MACHINERY & TOOLS COST

Damage to Property: [ ] hrs [ ] mins

Cost of Repair/Replacement: [ ] hrs [ ] mins

Cost of Production Time Lost: [ ] hrs [ ] mins

TOTAL: [ ] hrs [ ] mins

**MACHINERY & TOOLS COST (Not Required Field)** : This section is specifically for recording the costs associated with damage to production-specific machinery, power tools, or specialized hand tools that are integral to the operational process. This category typically covers the more expensive and critical assets directly involved in production or maintenance.

**Example:** A machine malfunction causes critical parts of a production line to break, or a hand tool is destroyed in an explosion.

Accidents/Illness Nature & Extent of Injury Cause of Accident Accident Cost

> MANPOWER COST

> MACHINERY & TOOLS COST

< MATERIALS

Damage to Property: [ ] hrs [ ] mins

Cost of Repair/Replacement: [ ] hrs [ ] mins

Cost of Production Time Lost: [ ] hrs [ ] mins

TOTAL: [ ] hrs [ ] mins

**MATERIALS (Not Required Field)** : This section is for recording the costs associated with damage to raw materials, work-in-progress, finished goods, or any other consumable materials that were damaged or lost as a direct result of the accident.

**Example:** A fire destroys a batch of fabric, or a spill contaminates a shipment of food ingredients.

**EQUIPMENT (Not Required Field) :** This section is for recording the costs associated with damage to general equipment, which might include office equipment, facility infrastructure components, non-production specific tools, or ancillary devices that are not necessarily "machinery" in a manufacturing sense. This could also encompass furniture, fixtures, or IT equipment.

**Example:** A water leak damages office computers, or a power surge fries network equipment.

Damage to Property:	
Cost of Repair/Replacement:	hrs
Cost of Production Time Lost:	mins
TOTAL:	

Step 8: Once all field is filled up, click the Save button then Click Yes button.

Address: #6 DAP-DAP ST., BRGY MALANDAY, MARIKINA CITY

Length of Service prior to Accident: 1 year

Position: APPLICATION SPECIALIST

No. of Dependent(s): None

**Accident Cost**

- > MANPOWER COST
- > MACHINERY & TOOLS COST
- > MATERIALS
- > EQUIPMENT

**Message**

Do you want to save this record?

**Yes** **No**

Step 9: All new request will be shown in Accident/Injury Report List.

Employee	Position	Department	Nature of Injury	Date of Report	Date of Accident
MELVIN PAGURAYAN	APPLICATION SPECIALIST	MANAGEMENT INFORMATION SYSTEM	Others	01/02/2025	01/02/2025
MELVIN PAGURAYAN	APPLICATION SPECIALIST	MANAGEMENT INFORMATION SYSTEM	Fractures	01/07/2025	01/06/2025
MELVIN PAGURAYAN	APPLICATION SPECIALIST	MANAGEMENT INFORMATION SYSTEM	Fractures	01/07/2025	01/06/2025
MELVIN PAGURAYAN	APPLICATION SPECIALIST	MANAGEMENT INFORMATION SYSTEM	Others	06/30/2025	06/30/2025

# Drug Test List

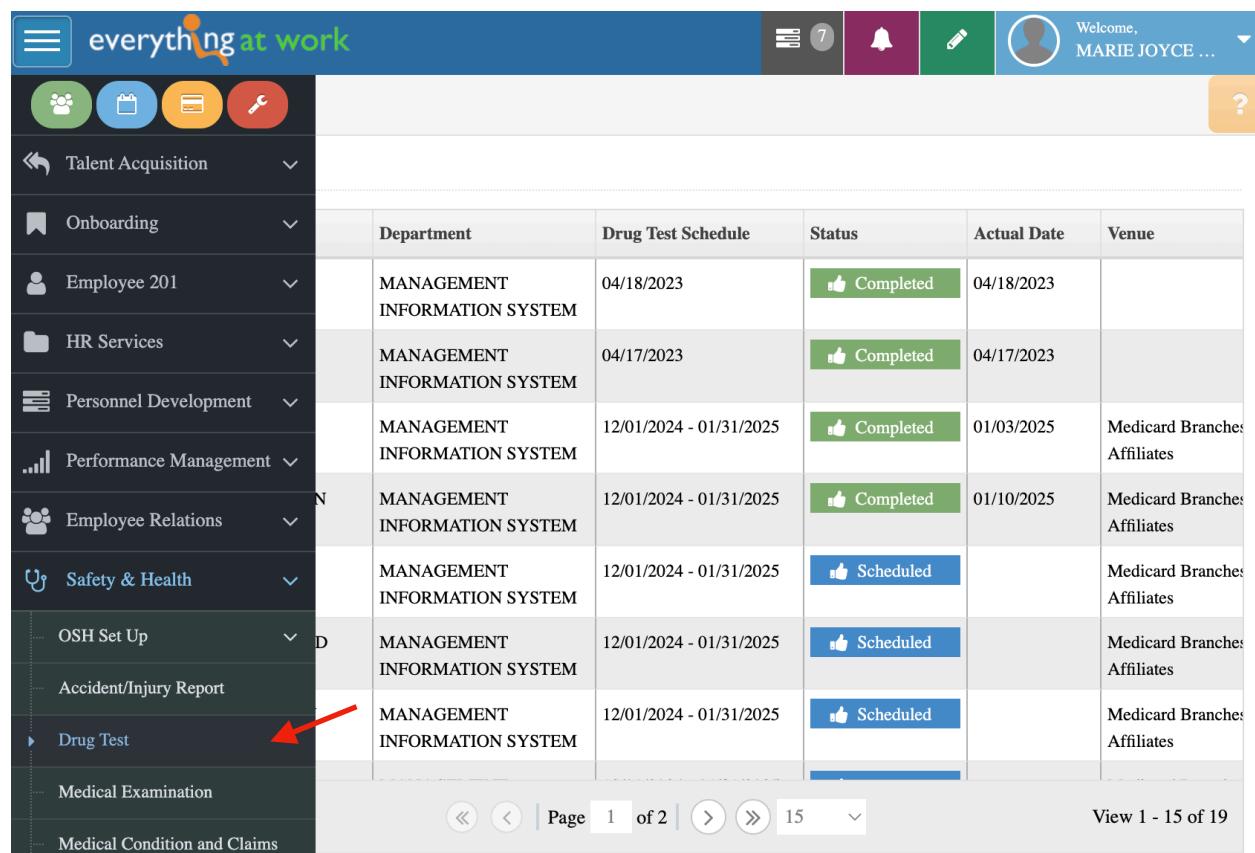
(This section allows you to schedule, track, and update drug testing activities for employees.)

You can add records in two ways:

- **Option 1** – Add records one by one
- **Option 2** – Upload a batch of records using Excel

## Option 1: Add Drug Test Record (Single Entry)

1. Log in to the HRIS Portal.
2. Go to the **main menu (≡)** and navigate to:  
**Safety and Health > Drug Test List**



The screenshot shows the 'Drug Test List' page within the 'Safety and Health' module of the HRIS Portal. The left sidebar lists various modules: Talent Acquisition, Onboarding, Employee 201, HR Services, Personnel Development, Performance Management, Employee Relations, Safety & Health, OSH Set Up, Accident/Injury Report, Drug Test (which has a red arrow pointing to it), Medical Examination, and Medical Condition and Claims. The main content area displays a table with columns: Department, Drug Test Schedule, Status, Actual Date, and Venue. There are five rows of data, all related to the 'MANAGEMENT INFORMATION SYSTEM'. The first four rows show 'Completed' status, while the fifth row shows 'Scheduled'. The 'Actual Date' column for the first four rows is '04/18/2023', for the fifth row it is '01/10/2025'. The 'Venue' column for the first four rows is 'Medicard Branches Affiliates', and for the fifth row it is also 'Medicard Branches Affiliates'. The bottom of the page shows pagination controls and a message 'View 1 - 15 of 19'.

Department	Drug Test Schedule	Status	Actual Date	Venue
MANAGEMENT INFORMATION SYSTEM	04/18/2023	Completed	04/18/2023	
MANAGEMENT INFORMATION SYSTEM	04/17/2023	Completed	04/17/2023	
MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/03/2025	Medicard Branches Affiliates
MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled	01/10/2025	Medicard Branches Affiliates
MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates

3. Click the **Plus (+) icon** at the bottom-left to open the drug test form.

	Employee	Department	Drug Test Schedule	Status	Actual Date	Venue
	BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/18/2023	Completed	04/18/2023	
	BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/17/2023	Completed	04/17/2023	
	BASCO, ANGELA QUITA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/03/2025	Medicard Branches Affiliates
	TABIILLA, KARL EIREANN MEDINA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/10/2025	Medicard Branches Affiliates
	DE AUSEN, DAISY ANN SERRANO	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
	ECLE, RAFAEL RAYMOND QUINTANS	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
	FERRERO, FRANZ ALVIN ORQUIA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates

4. Fill in the required fields:

- **Schedule Date** – When the drug test will happen
- **Venue** – Where the test will be conducted
- **Purpose** – Example: Pre-employment e.g.
- **Test Type** – Choose from the dropdown:

- Drug Test
- Confirmatory Test

Safety & Health > Drug Test

Drug Test »

Set a schedule for the selected employees to undergo drug test:

Schedule Date:

-


Venue:

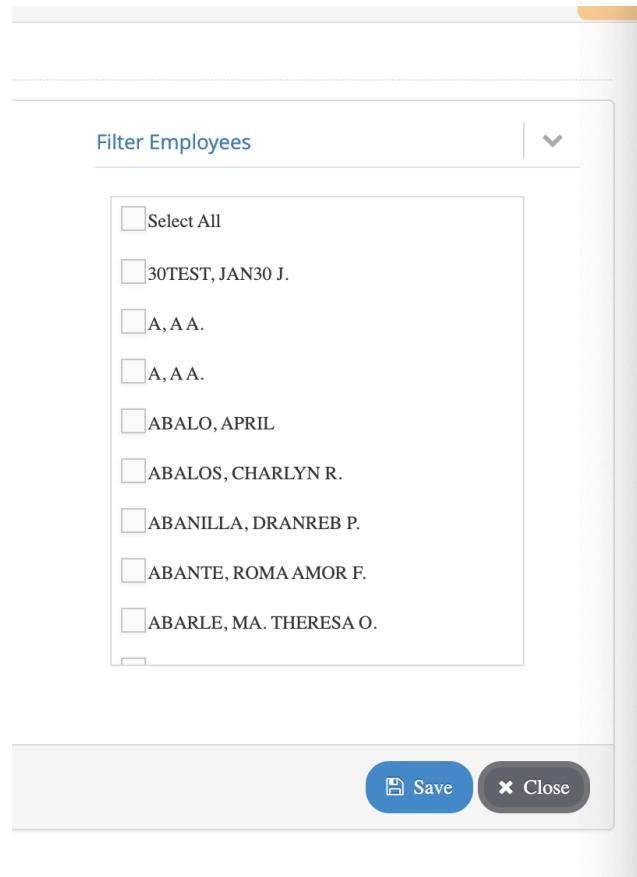
Purpose:

Test Type:

Please select

5. In the employee selector, search and select the employee(s) who will take the test.

- You can select one or more employees.



6. Once all fields are completed, click **Save**.

- The new record will appear in the **Drug Test List**.

The screenshot shows the 'Drug Test' form. At the top left, there's a breadcrumb navigation: Safety & Health > Drug Test. Below it is a link 'Drug Test >'. On the left, a section titled 'Set a schedule for the selected employees to undergo drug test:' contains fields for 'Schedule Date' (07/01/2025 - 07/05/2025), 'Venue' (Hi-Precision Diagnostics), 'Purpose' (APE), and 'Test Type' (Drug Test). To the right is the 'Filter Employees' modal window from the previous step, showing the same list of employees with checkboxes. Two checkboxes for '30TEST, JAN30 J.' and 'A, AA.' are checked. A red arrow points from the bottom right of the modal area towards the 'Save' button at the bottom right of the main form. At the bottom right of the main form are 'Save' and 'Close' buttons.

## Option 2: Add Drug Test Records (Batch Upload)

- From the **Drug Test List** page, click the **Upload icon**.

Safety & Health > Drug Test List

Drug Test List »

	Employee	Department	Drug Test Schedule	Status	Actual Date	Venue
	BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/18/2023	Completed	04/18/2023	
	BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/17/2023	Completed	04/17/2023	
	BASCO, ANGELA QUITA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/03/2025	Medicard Branches Affiliates
	TABILLA, KARL EIREANN MEDINA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/10/2025	Medicard Branches Affiliates
	DE AUSEN, DAISY ANN SERRANO	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
	ECLE, RAFAEL RAYMOND QUINTANS	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
	FERRERO, FRANZ ALVIN ORQUIA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates

View 1 - 15 of 19

- Click **Download Template** to get the Excel format required for uploading.

hr-test.hris-in-powermaccenter.com/Home

DrugTest (1).xlsx  
31.2 KB • Done

Import File

Upload File: No File ...

Employee	Department	Drug Test Schedule	Status	Actual Date	Venue
BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/18/2023	Completed	04/18/2023	
BEDUYA, MARY CLAIRE CARBONE	MANAGEMENT	04/17/2023	Completed	04/17/2023	
BASCO, ANGELA QUITA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/03/2025	Medicard Branches Affiliates
TABILLA, KARL EIREANN MEDINA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Completed	01/10/2025	Medicard Branches Affiliates
DE AUSEN, DAISY ANN SERRANO	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
ECLE, RAFAEL RAYMOND QUINTANS	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates
FERRERO, FRANZ ALVIN ORQUIA	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Scheduled		Medicard Branches Affiliates

3. Open the file and input the following for each employee:

- Schedule Date From - To
- Employee No.
- Actual Date Taken
- Drug Test Result
- Status
- Remarks

The screenshot shows a Microsoft Excel spreadsheet with a header row containing columns labeled A through G. The first column is 'Schedule Date From'. Row 2 contains data entries. Row 3 is the first row where a validation error is present. The 'Schedule Date From' cell in row 3 is highlighted with a green border, and a yellow tooltip box with the text 'Enter a valid date or time' is positioned over it. The rest of the table rows are empty.

A	B	C	D	E	F	G
1	Schedule Date From	Schedule Date To	Employee No.	Actual Date Taken	Drug Test Result	Status
2						
3						
4		Enter a valid date or time				
c						

4. Save the completed Excel file.

5. Return to the portal and upload the file.

6. If successful, the new entries will show up in the list.

- If errors are detected, the system will tell you which rows or fields need fixing.

## How to Monitor or Update Drug Test Status

1. On the **Drug Test List**, locate the employee record you want to update.

2. Click the **Pencil (✎)** icon beside the entry to edit.

Safety & Health > Drug Test List

Drug Test List »

The screenshot shows a web-based application interface for managing drug test records. At the top left, there's a breadcrumb navigation: 'Safety & Health > Drug Test List'. Below this is a header with the title 'Drug Test List' followed by a '»' symbol. The main content area displays a table with the following data:

	Employee	Department	Drug Test Schedule	Status
	BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/18/2023	Completed
	BEDUYA, MARY CLAIRE CARBONELL	MANAGEMENT INFORMATION SYSTEM	04/17/2023	Completed

3. Update the following details:

- **Status** – Choose from:
  - Completed
  - Not Taken
- **Date Taken** – Enter the actual date the test was done
- **Test Result** – Choose from:
  - Positive
  - Negative

> Drug Test List

List »

Drug Test

X

Employee	Employee Name:	Department:	Schedule Date:	Status:	Actual Date Taken:	Venue:	Purpose:	Test Type:	DrugTestResult1 :	DrugTestResult2 :	Remarks:	Save	Close
YEA, MARY CL ONELL	DE AUSEN, DAISY ANN SERRANO	MANAGEMENT INFORMATION SYSTEM	12/01/2024 - 01/31/2025	Please select	Completed	Not Taken	ANNUAL PHYSICAL EXAM	Drug Test	Please select	Please select			
O, ANGELA Q													
LIA, KARL EII NA													
USEN, DAISY A ANO													
, RAFAEL RAY TANS													
ERO, FRANZ A IIA													

Employee Name: DE AUSEN, DAISY ANN SERRANO

Department: MANAGEMENT INFORMATION SYSTEM

Schedule Date: 12/01/2024 - 01/31/2025

Status: Please select

Actual Date Taken: Completed

Venue: Not Taken

Purpose: ANNUAL PHYSICAL EXAM

Test Type: Drug Test

DrugTestResult1 : Please select

DrugTestResult2 : Please select

Remarks:

Save Close

4. After updating, click **Save** to apply changes.
  - These updates will help track completion and result monitoring accurately.

## Section 2: Medical Examination

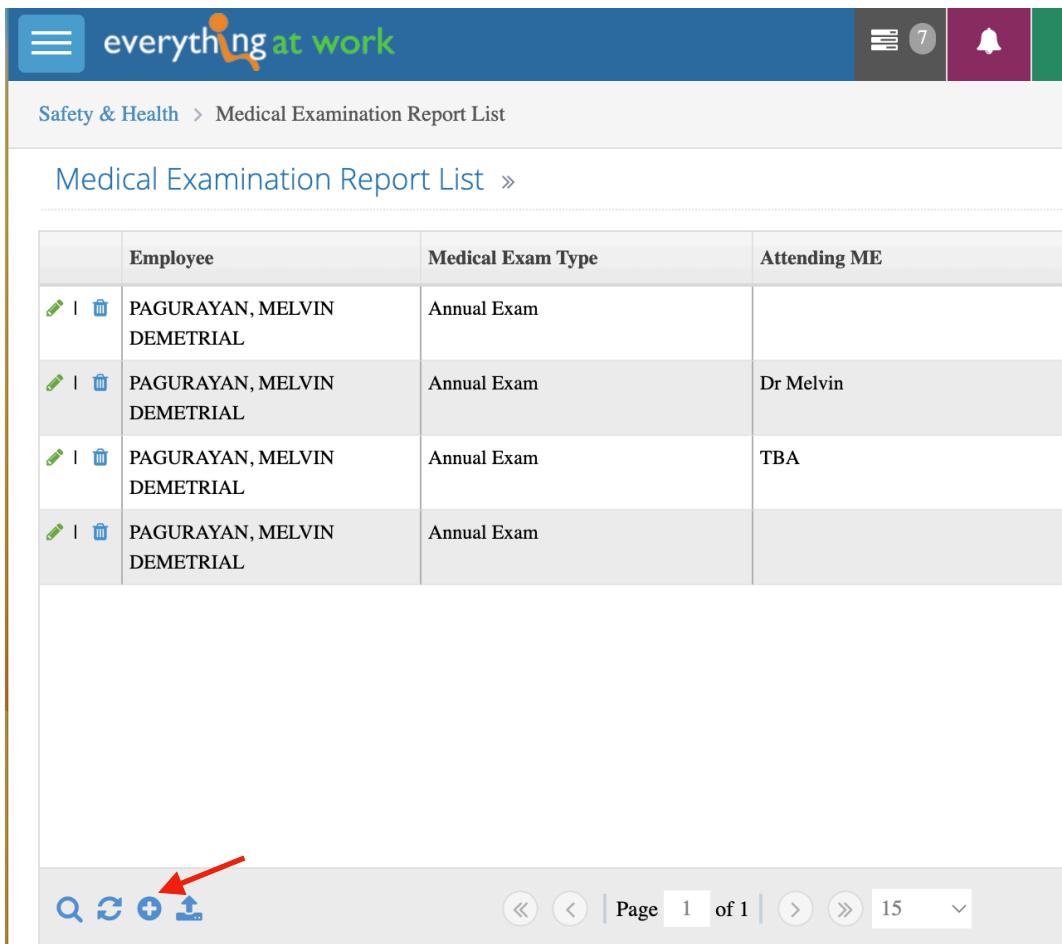
This section lets you **record, upload, and track** employee medical exam results and health histories.

You can add records via:

- **Option 1** – Add single medical report
- **Option 2** – Upload multiple reports using Excel

### Option 1: Add Medical Exam Record (Single Entry)

1. Log in to the HRIS Portal.
2. Navigate to:  
**Safety and Health > Medical Examination Report List**
3. Click the **Plus (+) icon** to open the form.



The screenshot shows the 'Medical Examination Report List' page. At the top, there's a header with the 'everything at work' logo and navigation icons. Below the header, the breadcrumb navigation shows 'Safety & Health > Medical Examination Report List'. The main content area displays a table with four rows of medical examination records. Each row includes columns for Employee name (PAGURAYAN, MELVIN DEMETRIAL), Medical Exam Type (Annual Exam), and Attending ME (Dr Melvin or TBA). The first row has edit and delete icons. The last row also has edit and delete icons. At the bottom of the page is a navigation bar with icons for search, refresh, and other functions, and a page number indicator showing 'Page 1 of 1'.

	Employee	Medical Exam Type	Attending ME
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	Dr Melvin
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	TBA
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	

4. Fill in the basic information:

- Employee Name
- Medical Exam Type (Select one):
  - Annual Exam
  - In-house Clinic
  - Outpatient
  - Pre-employment
- Attending Medical Examiner (optional)
- Exam Date
- Expiry Date of medical exam

The screenshot shows the 'everything at work' software interface. At the top, there is a blue header bar with the logo, a notifications icon (7), a bell icon, a green pencil icon, and a user profile for 'Welcome, MARIE JOYCE ...'. Below the header, a navigation bar shows 'Medical Examination Report >'. The main content area is titled 'Medical Examination Report >'. It contains five input fields: 'Name:' with a placeholder '...', 'Medical Exam Type:' with a dropdown menu showing 'Please select', 'Attending Medical Examiner:' with a blank input field, 'Exam Date:' with a calendar icon, and 'Expiry Date:' with a calendar icon.

5. Complete each of the medical sections (tabs):

The screenshot shows the 'Medical Examination Report' interface with several tabs at the top: 'Medical History' (selected), 'Family History', 'Personal & Social History', 'Review of Systems', 'Physical Examination', and 'Laboratory & Diagnostic Exams'. The 'Medical History' tab is currently active, indicating where the user should start filling out the report.

## A. Medical History

- Answer health-related questions:
    - Any known illnesses? (e.g., allergies)
    - History of surgeries or hospitalization?
  - Select **Yes/No** and provide **remarks** (e.g., Appendectomy in 2019)

Medical History	Family History	Personal & Social History	Review of Systems	Physical Examination
Laboratory & Diagnostic Exams				
Illness	Yes/No	Remarks		
Allergy	<input type="checkbox"/>			
Dermatoses	<input type="checkbox"/>			
Infection as folliculitis abscess/paronychia	<input type="checkbox"/>			
Tension Headache	<input type="checkbox"/>			
Error of refraction	<input type="checkbox"/>			
Bacterial/Viral conjunctivitis	<input type="checkbox"/>			
Cataract	<input type="checkbox"/>			
Gingivitis	<input type="checkbox"/>			
Herpes Labiales/nasalis	<input type="checkbox"/>			
Otitis Media/Externa	<input type="checkbox"/>			

## B. Family History

- Indicate any family medical problems (e.g., cancer, diabetes, heart disease)
- For each condition, select Yes/No and which family member (e.g., Father, Mother)

Medical Problem	Yes/No	Remarks (Indicate details and the Family Member affected by this medical condition)
Alcohol/Drug Abuse	<input type="checkbox"/>	
Asthma	<input type="checkbox"/>	
Cancer	<input type="checkbox"/>	
Emphysema (COPD)	<input type="checkbox"/>	
Depression/Anxiety	<input type="checkbox"/>	
Bipolar/Suicidal	<input type="checkbox"/>	
Diabetes	<input type="checkbox"/>	
Heart Disease	<input type="checkbox"/>	
High Cholesterol	<input type="checkbox"/>	
Hypertensive	<input type="checkbox"/>	

## C. Personal and Social History

- Answer questions like:
  - Do you smoke cigarettes?
  - Do you drink alcohol?
- Select **Yes/No** and enter details in the **Remarks** (e.g., Occasionally)
- For **female employees**, input **Last Menstrual Period (LMP)**

Medical History	Family History	Personal & Social History	Review of Systems	Physical Examination
Laboratory & Diagnostic Exams				
Question	Yes/No	Remarks		
Do you smoke tobacco cigarettes? If yes, how many packs/day?	<input type="checkbox"/>			
Do you use e-cigarettes?	<input type="checkbox"/>			
Do you drink alcohol? If yes, how many drinks do you have per week?	<input type="checkbox"/>			
Do you use recreational drugs?	<input type="checkbox"/>			
Do you exercise regularly? If yes, how many times a week do you exercise? Indicate how long do you exercise per session.	<input type="checkbox"/>			
Do you have a healthy diet? If you answered No, indicate the reason why you consider it as such.	<input type="checkbox"/>			
<span>🔍</span> <span>⟳</span>   Page 1 of 1   <span>›</span> <span>››</span> 15 <span>▼</span> View 1 - 6 of 6				
For females: Are you pregnant? <span>☰ NO</span>				
Last Menstrual Period: <input type="text"/> <span>📅</span>				

## D. Review of Systems

- Go through body systems like:
  - General health
  - Eyes/Vision
  - ENT, etc.
- Select **Yes/No** and add remarks for each if applicable

Medical History		Family History		Personal & Social History		Review of Systems		Physical Examination	
GENERAL		Recent weight loss				<input type="checkbox"/>			
GENERAL		Appetite Loss				<input type="checkbox"/>			
GENERAL		Fatigue				<input type="checkbox"/>			
GENERAL		Fever				<input type="checkbox"/>			
GENERAL		Chills				<input type="checkbox"/>			
GENERAL		Sweats				<input type="checkbox"/>			
GENERAL		Headache				<input type="checkbox"/>			
EYES/VISION		Visual Changes				<input type="checkbox"/>			
EYES/VISION		Blurriness				<input type="checkbox"/>			
EYES/VISION		Dryness				<input type="checkbox"/>			

View 1 - 15 of 68

## E. Physical Examination

- Record vital signs and physical results:
  - Height, Weight
  - Blood Pressure, Pulse Rate
  - Other observations

<input type="checkbox"/> Medical History	<input type="checkbox"/> Family History	<input type="checkbox"/> Personal & Social History	<input type="checkbox"/> Review of Systems	<input checked="" type="checkbox"/> Physical Examination
<input type="checkbox"/> Laboratory & Diagnostic Exams				

**Vital Signs**

Temperature:

°c

Blood Pressure:

mmHg

Pulse rate:

bpm

Height:

cm

Weight:

kg

Findings:

Pulse:

## F. Laboratory and Diagnostic Exams

- Upload scanned copies of results by clicking the **Upload icon**
- You may **download** uploaded files later if needed using the **Download icon**

Medical History		Family History		Personal & Social History		Review of Systems		Physical Examination	
<b>Laboratory &amp; Diagnostic Exams</b>									
	Description	Yes/No	Remarks						
   	Chest X-ray	<input type="checkbox"/>							
   	Urinalysis	<input type="checkbox"/>							
   	Fecalysis	<input type="checkbox"/>							
   	Complete Blood Count	<input type="checkbox"/>							
   	Electrocardiogram (covered for members 35 years old and above)	<input type="checkbox"/>							
   	Physical Exam	<input type="checkbox"/>							
   	Eye Refraction	<input type="checkbox"/>							
   	Fasting Blood Sugar and Cholesterol (covered for members 35 years old and above)	<input type="checkbox"/>							

6. Once all fields and tabs are completed, click **Save**

- The record will appear in the **Medical Examination Report List**

## Option 2: Add Medical Exam Records (Batch Upload)

- From the **Medical Examination Report List** page, click the **Upload icon**.

Safety & Health > Medical Examination Report List

Medical Examination Report List »

	Employee	Medical Exam Type	Attending ME	Exam Date	Expiry Date
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam		01/06/2025	12/25/2025
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	Dr Melvin	01/02/2025	12/31/2025
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	TBA	01/02/2025	01/31/2025
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam		12/30/2024	01/31/2025

View 1 - 4 of 4

Toolbar icons: Search, Refresh, Add, Upload (highlighted with a red arrow), and Print.

- Download the **Excel Template** provided by the system.

Safety & Health > Medical Examination Report List

Medical Examination Report List »

	Employee	Medical Exam Type	Attending ME	Exam Date	Expiry Date
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam		01/06/2025	12/25/2025
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam	Dr Melvin	01/02/2025	12/31/2025
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam			01/31/2025
	PAGURAYAN, MELVIN DEMETRIAL	Annual Exam			01/31/2025

Import File dialog:

- Upload File:
- Download Template
- Upload
- Cancel

File download notification: MedicalExamReport (1).xlsx  
20.7 KB • Done

3. Fill out the required details in the Excel file, following the same format as the single entry:

- Employee info
- Exam details
- Health data fields

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W
Medical Information																						
Employee Number	Employee Name	Medical Exam Type	Attending Medical Examiner	Exam Date	Expiry Date	Allergy	Dermatoses	Infection as folliculitis abscess/paronychia	Tension Headache	Error of refraction	Bacterial/Viral conjunctivitis	Cataract	Gingivitis	Herp Labialis/								
						Yes/No	Remarks	Yes/No	Remarks	Yes/No	Remarks	Yes/No	Remarks	Yes/No	Remarks	Yes/No	Remarks	Yes/No	Remarks	Yes/No	Remarks	
4																					R	
5																						
6																						
7																						

4. Save and upload the file back to the HRIS.

5. If successful, the data will reflect in the list.

- If there are issues, the system will show you the specific rows and errors to fix.

## Section 3: Medical Condition and Claims Report List

**(This section allows you to log and manage employees' medical conditions and claims for proper documentation and approval.)**

### How to Add an Employee

You can add entries **individually (Single Entry)** or **in bulk (Batch Upload)** depending on the number of reports to be submitted.

#### Option 1: Single Entry

To submit a medical claim or report individually:

1. Click the plus (+) icon at the lower-left corner of the screen.

The screenshot shows the SAP Fiori interface for Safety and Health. The left sidebar navigation includes Talent Acquisition, Onboarding, Employee 201, HR Services, Personnel Development, Performance Management, Employee Relations, Safety & Health (selected), OSH Set Up, Accident/Injury Report, Drug Test, Medical Examination, Medical Condition and Claims Report (selected), and Medical Service Schedule. The main content area displays the 'Medical Condition and Claims Report List'. The table has columns for Employee (with icons for edit and delete), Employee Number, Department, and Unit. Three rows are listed: PAGURAYAN, MELVIN DEMETRIAL (Employee Number 15002, Department MANAGEMENT INFORMATION SYSTEM), PAGURAYAN, MELVIN DEMETRIAL (Employee Number 15002, Department MANAGEMENT INFORMATION SYSTEM), and BEDUYA, MARY CLAIRE CARBONELL (Employee Number 3291, Department MANAGEMENT INFORMATION SYSTEM). At the bottom of the page, there is a toolbar with icons for search, refresh, add (plus sign), and upload, with a red arrow pointing to the add icon.

	Employee	Employee Number	Department	Unit
	PAGURAYAN, MELVIN DEMETRIAL	15002	MANAGEMENT INFORMATION SYSTEM	
	PAGURAYAN, MELVIN DEMETRIAL	15002	MANAGEMENT INFORMATION SYSTEM	
	BEDUYA, MARY CLAIRE CARBONELL	3291	MANAGEMENT INFORMATION SYSTEM	

2. A new form will appear. Fill out the required details:

- **Record Type:**  
Click the dropdown and choose one of the following:
  - Consultation
  - PEME (Pre-Employment Medical Exam)
  - Sent Home
- **Attending Physician:**  
Input the name of the attending doctor.
- **Date of Claim:**  
Select the date the medical service or consultation was rendered.
- **Chief Complaint:**  
Describe the main concern or reason for the medical consultation.
- **Diagnosis:**  
Click the dropdown and select the diagnosis from the available list.
- **Assessment:**  
Provide additional findings or evaluations from the physician.
- **Prescription:**  
Indicate any medications or treatments prescribed.
- **Procedure:**  
Mention any medical procedures done (if applicable).
- **HMO Provider:**  
Select the name of the HMO (e.g., Maxicare, Intellicare).
- **HMO Number:**  
Enter the corresponding HMO card number or member ID.
- **Medical Provider:**  
Input the hospital, clinic, or facility where the service was done.
- **Utilization Type:**  
Choose from the dropdown:
  - Dental
  - In-patient
  - Optical
  - Out-patient
- **Utilization Amount:**  
Enter the total amount utilized/claimed.

- **Submission Date:**  
Select the date you are submitting this report in the system.
- **Attachment:**  
Upload supporting documents (e.g., medical certificate, receipts, prescriptions).  
Accepted file types: PDF, JPG, PNG.
- **HR Notes/Remarks**

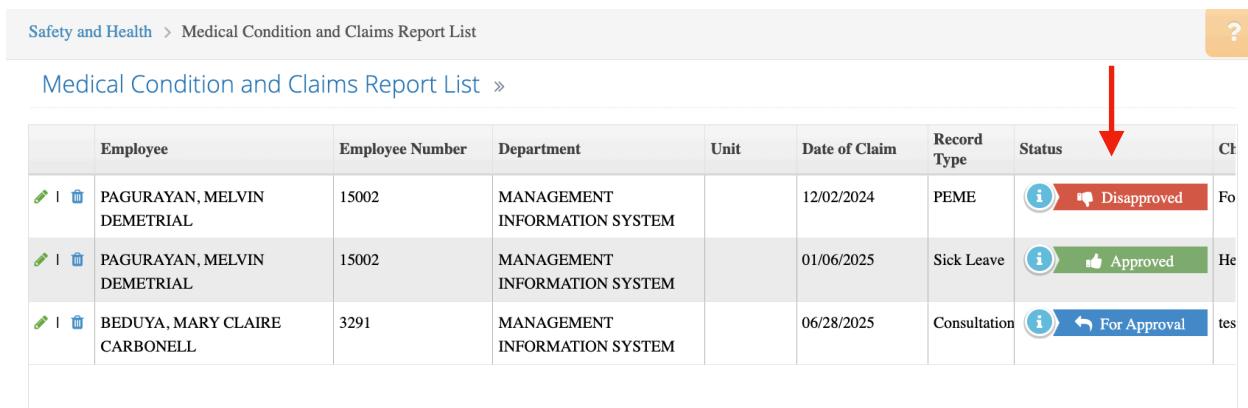
Safety and Health > Medical Condition and Claims Report ?

Medical Condition and Claims Report »

Employee Name:	<input type="text"/>	...	Unit:	<input type="text"/>	
Employee Number:				Team:	<input type="text"/>
Date Hired:				Status:	<span style="border: 1px solid #ccc; padding: 2px;">Draft</span>
<span style="border: 1px solid #ccc; border-radius: 50%; padding: 5px 10px; margin-right: 10px;">Submit</span> <span style="border: 1px solid #ccc; border-radius: 50%; padding: 5px 10px; margin-right: 10px;">Save</span> <span style="border: 1px solid #ccc; border-radius: 50%; padding: 5px 10px;">Close</span>					
Record Type:	<input type="text" value="Please select"/>		Prescription:	<input type="text"/>	
Attending Physician:	<input type="text"/>		Procedure:	<input type="text"/>	
Date of Claim:	<input type="text"/>		HMO Provider:	<input type="text" value="Please select"/>	
Chief Complaint:	<input type="text"/>		HMO Number:	<input type="text"/>	
Diagnosis:	<input type="text" value="Please select"/>		ECU Package:	<input type="text"/>	
<input type="text" value="Enter details of diagnosis"/>			Medical Provider:	<input type="text" value="Please select"/>	
Assessment:	<input type="text"/>		Utilization Type:	<input type="text" value="Please select"/>	
			Utilization Amount:	<input type="text" value="0.00"/>	
Submission Date: <input type="text"/> <span style="border: 1px solid #ccc; border-radius: 50%; padding: 5px 10px; margin-right: 10px;">Choose</span>					
HR Notes/Remarks: <input type="text"/>					

- Once all fields are completed, click the "Submit" button.

After submission, the report will be tagged as "Pending for Approval." Once reviewed, it will reflect as either "Approved" or "Disapproved" in the status column.



	Employee	Employee Number	Department	Unit	Date of Claim	Record Type	Status	Ch
	PAGURAYAN, MELVIN DEMETRIAL	15002	MANAGEMENT INFORMATION SYSTEM		12/02/2024	PEME	Disapproved	Fo
	PAGURAYAN, MELVIN DEMETRIAL	15002	MANAGEMENT INFORMATION SYSTEM		01/06/2025	Sick Leave	Approved	He
	BEDUYA, MARY CLAIRE CARBONELL	3291	MANAGEMENT INFORMATION SYSTEM		06/28/2025	Consultation	For Approval	tes

## Option 2: Batch Upload

For uploading multiple reports at once:

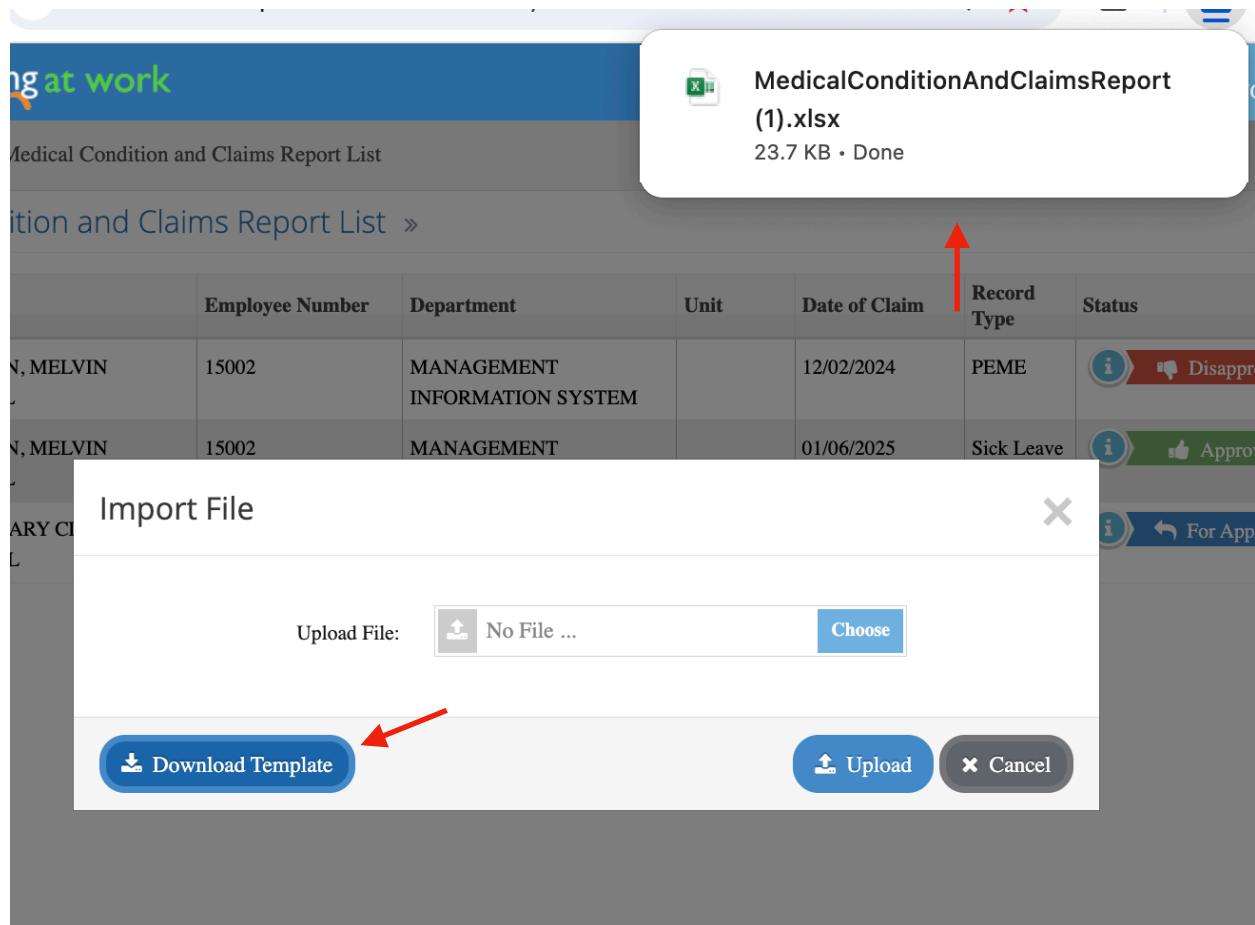
- Click the "Batch Upload" button.



	Employee	Employee Number	Dep
	PAGURAYAN, MELVIN DEMETRIAL	15002	MA INF
	PAGURAYAN, MELVIN DEMETRIAL	15002	MA INF
	BEDUYA, MARY CLAIRE CARBONELL	3291	MA INF

Batch Upload

- Download the **template file** provided (usually in Excel format).



- Fill out the necessary details for each entry based on the format.

Employee No.	Employee Name	Record Type	Attending Physician	Date of Claim	Chief Complaint	Diagnosis Description	Details of Diagnosis	Assessment	Prescription	Procedure	Status
N, MELVIN	15002	MANAGEMENT INFORMATION SYSTEM		12/02/2024	PEME	i Disapprove					

- Once completed, upload the filled-out file back into the system.

- Click **Submit** to process all entries.

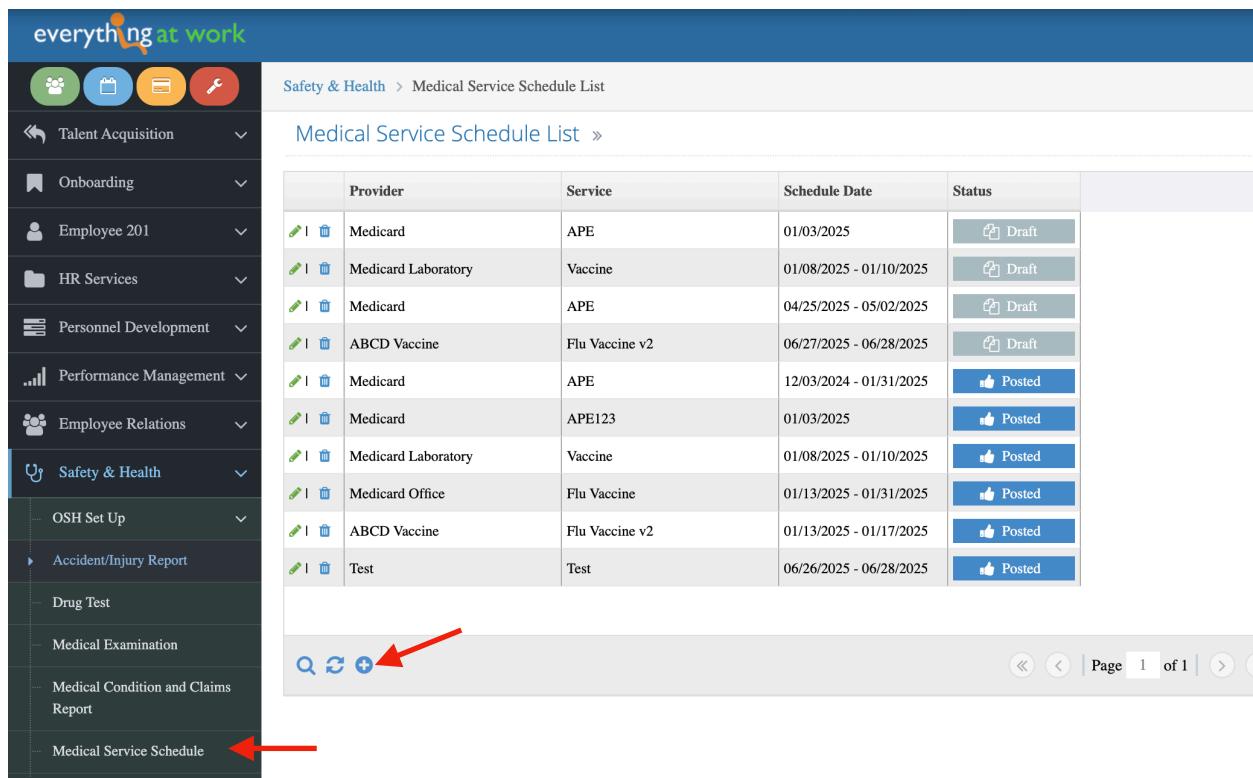
*Note: Ensure the file follows the required format to avoid errors during upload.*

## Section 4: Medical Service Schedule

**(This section allows you to set and manage medical service schedules like APEs, vaccinations, and more.)**

### How to Add a Medical Service Schedule:

1. Click the “+” (plus) button at the bottom left.



The screenshot shows the 'everything at work' software interface. The left sidebar contains navigation links for Onboarding, Employee 201, HR Services, Personnel Development, Performance Management, Employee Relations, Safety & Health (which is currently selected), OSH Set Up, Accident/Injury Report, Drug Test, Medical Examination, Medical Condition and Claims Report, and Medical Service Schedule. The main content area displays a table titled 'Medical Service Schedule List' with the following data:

	Provider	Service	Schedule Date	Status
	Medicard	APE	01/03/2025	Draft
	Medicard Laboratory	Vaccine	01/08/2025 - 01/10/2025	Draft
	Medicard	APE	04/25/2025 - 05/02/2025	Draft
	ABCD Vaccine	Flu Vaccine v2	06/27/2025 - 06/28/2025	Draft
	Medicard	APE	12/03/2024 - 01/31/2025	Posted
	Medicard	APE123	01/03/2025	Posted
	Medicard Laboratory	Vaccine	01/08/2025 - 01/10/2025	Posted
	Medicard Office	Flu Vaccine	01/13/2025 - 01/31/2025	Posted
	ABCD Vaccine	Flu Vaccine v2	01/13/2025 - 01/17/2025	Posted
	Test	Test	06/26/2025 - 06/28/2025	Posted

At the bottom of the screen, there is a toolbar with several icons: a magnifying glass, a refresh symbol, a plus sign (+), and other navigation controls. A red arrow points to the plus sign (+) icon, indicating where to click to add a new service schedule.

2. Fill in the following fields under “Service Details”:

- **Period Date** – Select the valid schedule period.
- **Branch** – Click the dropdown and choose the branch.
- **Medical Provider** – e.g., Medicare, Maxicare, etc.
- **Medical Service** – e.g., Annual Physical Exam (APE), Flu Vaccine.
- **Venue** – Indicate the location of the service.
- **Time** – Input the time of the service.
- **Deadline for Cancellation** – Set the last day to cancel.
- **Cost** – Indicate the price.

3. Click “Post” at the lower left to save the schedule.

The screenshot shows a web-based application for scheduling medical services. At the top, there's a navigation bar with "Safety & Health" and "Medical Service Schedule". Below the navigation is a header "Medical Service Schedule »". The main area contains two tabs: "Service Details" (selected) and "Enrollees". The "Service Details" tab has the following fields:

- Period Date: A date range from 01/03/ to 01/03/
- Branch: Pasig Head O... (dropdown menu)
- Medical Provider: Medicard
- Medical Service: APE
- Venue: Medical Branches
- Time: 1:00 PM – 6:00 PM
- Deadline for Cancellation: 01/02/2025 (with a calendar icon)
- Cost: 0.00
- Status: Draft (with a document icon)

At the bottom of the form, there are three buttons: a yellow "Post" button with a red arrow pointing to it, a blue "Save" button, and a grey "Close" button.

## Enrolling Employees:

1. Go to the “**Enrollees**” tab.
2. Click the “**+**” (plus) icon to add participants.

The screenshot shows a software application window titled "Safety & Health > Medical Service Schedule". At the top, there are two tabs: "Service Details" and "Enrollees". The "Enrollees" tab is highlighted with a blue background and has a purple icon of two people. Below the tabs is a table header row with columns: Employee, Enrollee Type, Payment Type, and Status. A red arrow points to the "Employee" column header. At the bottom of the screen, there is a toolbar with icons for search, refresh, and navigation, followed by a page navigation bar showing "Page 1 of 1" and a dropdown for "15". The message "No records to view" is displayed at the bottom right.

3. Fill in the prompted details:

- **Enrollee Type:** Choose between **Employee** or **Dependent**.
  - For **Dependent**: Input **Name** and **Relationship**.

Enrollee Type: Dependent X ▾

Employee: ...

Payment Type: Please select ▼

**Dependents**

	Relationship	Name	
<span style="border: 1px solid orange; padding: 2px;">Delete</span>	Parent <span style="border: 1px solid orange; padding: 2px;">▼</span>	<input type="text"/>	

- For **Employee**: Click the **three dots (..)** to view and search from the employee list.

4. Select **Payment Type**: Choose from **Cash**, **Company Expense**, or **Salary Deduction**.
5. Click “**Enroll**” to add the person to the schedule.

Enrollees X

Enrollee Type: Employee X ▾

Employee: SEPT11, MELVIN TEST ...

Payment Type: Company Expense X ▾

→ Enroll Close

## Other Options:

- **Cancel Schedule:** Use the “**Cancellation**” icon at the lower left if needed.

[Medical Service Schedule »](#)

The screenshot shows a software interface for managing medical service schedules. At the top, there are two tabs: "Service Details" and "Enrollees". The "Enrollees" tab is selected, showing a table with one row of data. The columns are: a checkbox, an edit icon, a trash icon, Employee name (BEDUYA, MARY CLAIRE CARBONELL), Enrollee Type (Employee), Payment Type (Company Expense), and Status (Enrolled). Below the table is a toolbar with icons for search, refresh, add, and cancel. A red arrow points to the "cancel" icon. At the bottom, there are navigation links for first, previous, next, last, and a page number indicator (Page 1 of 1) followed by a dropdown for selecting a page (15). To the right, it says "View 1 - 1 of 1".

- Once everything is complete, click “**Save**”. The schedule will now appear in the **Schedule List**.

## Section 5: Medical Service Calendar

### (View All Scheduled Medical Services)

This calendar displays all the medical service schedules created in the system.

- Employees can also view these in their **personal calendar** on the portal.
- **Tip:** Hover your cursor over the **gray tab** on a date to view more details about that schedule.

The screenshot shows the Safety and Health module interface. On the left, a vertical sidebar lists various HR and safety modules. A red arrow points to the 'Medical Service Calendar' link under the 'Safety & Health' section. The main area displays a monthly calendar for June 2025. A gray bar spans across the dates from June 25 to June 28, with the text '10:14a Test' written on it. A yellow tooltip box is overlaid on this bar, providing detailed information about the scheduled test:

**Test**  
Test by Test  
Venue: Test  
Time: 10:14 am - 10:14 pm  
Cost: 3,000.00

## Section 6: Medical Requirements

**(View and Monitor DOLE-Compliant Medical Kits per Company Profile)**

This section displays the minimum required **medicine, medical supplies, equipment, and facilities** based on the company's:

- **Company Name**
- **Company Size** (e.g., 601 to 2000 employees)
- **Workplace Type** (e.g., Non-Hazardous)

Items are grouped into three categories:

- **Medicine** (e.g., Advil, Antacids, Anti-diarrheal)
- **Supplies & Equipment** (e.g., First Aid Box, Bandage Scissors, Safety Pins)
- **Facility** (for future use)

Each item listed has a **Minimum Quantity** required to maintain DOLE compliance. Indicate required items where quantity depends on specific guidelines.

This page is for **viewing purposes only** and helps your safety officer ensure your medical kits meet regulatory standards. To modify it just go to OSH Set up > Medical Requirement

The screenshot shows the Safety and Health application interface. The left sidebar contains various menu items: Talent Acquisition, Onboarding, Employee 201, HR Services, Personnel Development, Performance Management, Employee Relations, Safety & Health, OSH Set Up, Accident/Injury Report, Drug Test, Medical Examination, Medical Condition and Claims Report, Medical Service Schedule, Medical Service Calendar, and Medical Requirements. The 'Medical Requirements' link is highlighted with a red arrow. The main content area is titled 'Medical Requirement'. It shows a search bar with 'Company Name: PMCI' and dropdown arrows. Below it, there are three tabs: 'Medicine', 'Supplies & Equipment', and 'Facility'. Each tab has a table with 'Required Item' and 'Minimum Qty' columns. The 'Medicine' tab lists items like Advil (100), Analgesic/Antipyretic, tablets (30), Anesthetic preparation, cc. (0), Antacid tablets (30), Anti-Asthma tablets (20), Anti-diarrhea tablets (30), Anti-hemorrhagic tablets (20), and Anti-histaminic tablets (30). The 'Supplies & Equipment' tab lists items like Absorbent cotton (\*), Adhesive tape, roll (1), Bandage scissors (1), First Aid pamphlet (1), First Aid box (1), Gauze bandage, roll (2), Safety pins (\*), and Spynamometer (1). The 'Facility' tab is currently empty. At the top right, it shows 'Company Size: 601 to 2000' and 'Workplace Type: Non Hazardous'.

## Section 7: Employee Vaccine Records

**(Add and Track Employee Vaccination Records for Health Monitoring and Compliance)**

You can add employee vaccination records either **one by one** or in **bulk**.

**Single Entry:**

1. Click the “+” (plus) icon at the lower left.

The screenshot shows the 'Employee Vaccine Records' page within a larger application interface. On the left is a vertical navigation menu with categories like Talent Acquisition, Onboarding, Employee 201, HR Services, Personnel Development, Performance Management, Employee Relations, Safety & Health, OSH Set Up, Accident/Injury Report, Drug Test, Medical Examination, Medical Condition and Claims Report, Medical Service Schedule, Medical Service Calendar, Medical Requirements, and Employee Vaccine Records. The 'Employee Vaccine Records' item is highlighted. The main content area displays a table of employee vaccination records with columns for Employee Number, Employee Name, Vaccine Type, Date of Last Dose, Dosage Count, Job Position, and Department. The last row, which includes a plus sign (+) icon in its toolbar, is highlighted with a red arrow. The toolbar also includes icons for search, refresh, and other actions.

	Employee Number	Employee Name	Vaccine Type	Date of Last Dose	Dosage Count	Job Position	Department
	3291	MARY CLAIRE BEDUYA	COVID-19 Vaccine	02/01/2023	First Booster	SUPERVISOR	MANAGERS INFORM
	3308	HILLARY EVIAN CASTRO	COVID-19 Vaccine	06/30/2021	Second Dose	Senior Application Specialist	MANAGERS INFORM
	3351	DAISY ANN DE AUSEN	COVID-19 Vaccine	09/28/2021	Second Dose	APPLICATION SPECIALIST	MANAGERS INFORM
	937	MARILOU BERNARDINO	COVID-19 Vaccine	07/29/2021	Second Dose	ASSISTANT MANAGER	PEOPLE ORGANIZATION
	959	RYAN CUSTODIO	COVID-19 Vaccine	01/26/2022	First Booster	MAC EXPERT	RBT OPERATIONS
	3428	JULIET BALES	COVID-19 Vaccine	03/24/2023	First Booster	ADMINISTRATIVE ASSISTANT	Product Management
	2271	LEO ANGELO LUCEROS	COVID-19 Vaccine	01/25/2022	First Booster	ASSISTANT STORE SUPERVISOR	RBT OPERATIONS
	3360	MARILYN CORDON	COVID-19 Vaccine	12/23/2021	First Booster	Finance Officer	Prestige AIRLINES
	2292	MARC EDWIN BATALLA	COVID-19 Vaccine	01/11/2022	First Booster	WAREHOUSE STAFF	WAREHOUSE

2. Fill in the required fields:

- Employee**
- Branch**
- Job Position**
- Department**
- Vaccine Type**

The screenshot shows a web-based application for managing employee vaccine records. At the top, there's a navigation bar with links for Safety & Health and Employee Vaccine Records. Below the navigation is a header titled "Employee Vaccine Records".

On the left, there are four input fields: Employee (MARY CLAIRE BEDU), Department (MANAGEMENT INFORMAT.), Branch (Pasig Head Office -ETLI), and Vaccine Type (COVID-19 Vaccine). Below these are two tabs: "Vaccine Detail" (selected) and "Attachment".

The main area displays a table of vaccination details:

Dosage Count	Date of Vaccine	Brand/Manufacturer	Vaccinator Name	Vaccine Type
First Dose	08/26/2021	Sinovac	DOH CALABARZON	QUEZO
Second Dose	09/23/2021	Sinovac	DOH CALABARZON	QUEZO
First Booster	02/01/2023	Sinovac	sample	sample

3. Under “**Vaccine Details**”, click the “+” to add vaccine information.

- A **green tab** will appear where you can enter the details.

The screenshot shows a table titled "Vaccine Detail" with several rows of vaccination data. The columns are labeled: Dosage Count, Date of Vaccine, Brand/Manufacturer, Vaccinator Name, and Vaccination Location. The rows contain entries for First Dose, Second Dose, and First Booster. A green row at the bottom is highlighted with a dropdown menu icon and a red arrow pointing to it. At the bottom of the table, there is a toolbar with icons for search, refresh, and a blue plus sign. The page number is 1 of 1, and there are 15 items per page. The text "View 1 - 4 of 4" is also visible.

Dosage Count	Date of Vaccine	Brand/Manufacturer	Vaccinator Name	Vaccination Location
First Dose	08/26/2021	Sinovac	DOH CALABARZON	QUEZON CITY
Second Dose	09/23/2021	Sinovac	DOH CALABARZON	QUEZON CITY
First Booster	02/01/2023	Sinovac	sample	sample
<input type="button" value="▼"/>				

View 1 - 4 of 4

4. Under the “**Attachment**” tab (next to Vaccine Details), you can upload files:

- Click the “+” icon to attach documents (e.g., Vaccine Card, DOH Certificate).

Vaccine Detail Attachment

Attachment Name	
	IMG_1042.jpg
	WFA 2023 - BIT.pdf

Page  of 1 | 15 
View 1 - 2 of 2

## Batch Upload:

- Click the **Upload icon** at the lower left.

Safety and Health > Employee Vaccine Records

Employee Vaccine Records »

	Employee Number	Employee Name	Vaccine Type	Date of Last Dose	Dosage Count	Job Title
	3291	MARY CLAIRE BEDUYA	COVID-19 Vaccine	02/01/2023	First Booster	SU
	3308	HILLARY EVIAN CASTRO	COVID-19 Vaccine	06/30/2021	Second Dose	Se
	3351	DAISY ANN DE AUSEN	COVID-19 Vaccine	09/28/2021	Second Dose	Al SF
	937	MARILOU BERNARDINO	COVID-19 Vaccine	07/29/2021	Second Dose	As
	959	RYAN CUSTODIO	COVID-19 Vaccine	01/26/2022	First Booster	M
	3428	JULIET BALES	COVID-19 Vaccine	03/24/2023	First Booster	Al As
	2271	LEO ANGELO LUCEROS	COVID-19 Vaccine	01/25/2022	First Booster	As SU
	3360	MARILYN CORDON	COVID-19 Vaccine	12/23/2021	First Booster	Fi
	2292	MARC EDWIN BATALLA	COVID-19 Vaccine	01/11/2022	First Booster	W

Page  of 1 | 15 
View 1 - 11 of 11

- Download the template, fill it out with the required data.

The screenshot shows a web application interface for managing employee vaccine records. At the top, there's a navigation bar with the 'everything at work' logo. Below it, the page title is 'Employee Vaccine Records'. A sub-menu item 'Employee Vaccine Records' is highlighted. A search bar labeled 'Search Filters' is present. On the left, a table lists employee numbers (3291, 3308, 3351, 937, 959, 3428) and names (MARY CLAIRE BEDUYA, LEO ANGELO LUCEROS, MARILYN CORDON, MARC EDWIN BATALLA). A modal dialog titled 'Import File' is open over the table. It contains an 'Upload File:' input field with a placeholder 'No File ...' and a 'Choose' button. Below this are 'Download Template' and 'Upload' buttons, followed by a 'Cancel' button. A red arrow points from the text 'Once completed, upload the filled-out file back into the system.' to the 'Upload' button. A second red arrow points from the text 'Once completed, upload the filled-out file back into the system.' to the 'Choose' button. At the bottom of the dialog, there's a preview of an Excel spreadsheet with columns: Employee Number, Vaccine Type, Name of Vaccinator, Dosage Count, Date of Vaccine, Brand or Manufacturer, Vaccination Site, and Side Effects. The first row is a header.

	Employee Number	Employee Name	Vaccine Type	Date of Last Dose	Dosage Count	Job Title	Join Date	Location
	3291	MARY CLAIRE BEDUYA	COVID-19 Vaccine	02/01/2023	First Booster	Sales Associate	2023-01-15	Seattle, WA
	3308					Sales Associate	2023-01-15	Seattle, WA
	3351					Administrative Assistant	2023-01-15	Seattle, WA
	937					Administrative Assistant	2023-01-15	Seattle, WA
	959					Marketing Associate	2023-01-15	Seattle, WA
	3428					Administrative Assistant	2023-01-15	Seattle, WA
	2271	LEO ANGELO LUCEROS	COVID-19 Vaccine	01/25/2022	First Booster	Administrative Support	2023-01-15	Seattle, WA
	3360	MARILYN CORDON	COVID-19 Vaccine	12/23/2021	First Booster	Financial Analyst	2023-01-15	Seattle, WA
	2292	MARC EDWIN BATALLA	COVID-19 Vaccine	01/11/2022	First Booster	Warehouse Worker	2023-01-15	Seattle, WA

A1    Employee Number

A	B	C	D	E	F	G	H
Employee Number	Vaccine Type	Name of Vaccinator	Dosage Count	Date of Vaccine	Brand or Manufacturer	Vaccination Site	Side Effects

- Once completed, upload the filled-out file back into the system.

## Section 8: Quarantine Monitoring

*(Track and Record Employee Quarantine Events)*

**How to Add a Quarantine Record:**

1. Click the “+” (plus) icon at the lower left.

The screenshot shows the 'Quarantine Monitoring List' page within the 'Safety and Health' module of the software. The left sidebar lists various HR and safety categories. The main area displays a table with two rows of employee data. At the bottom of the screen, there is a toolbar with three icons: a magnifying glass (Search), a circular arrow (Refresh), and a plus sign (+). A red arrow points to the plus sign icon, indicating where to click to add a new record. Another red arrow points to the 'Quarantine Monitoring' link in the sidebar.

	Employee	Position	Branch
	PAGURAYAN, MELVIN DEMETRIAL	APPLICATION SPECIALIST	Pasig Head Office -ETLI
	BUGAS, MARIE JOYCE	APPLICATION SPECIALIST	EVOLVE TECH LIFESTYLE, INC.

2. The **Quarantine Form** will appear.

3. Fill out the required information:

- Select the **Employee** (other fields will auto-fill: Branch, Job Position, Department).
- **Reason for Quarantine** – Select from options like Chickenpox, Ebola, COVID-19.
- **Location** – Indicate where the quarantine is taking place.
- **Quarantine Start Date and End Date**
- **Return to Work Date**
- **Attachment** – Use this to upload any related documents (e.g., medical certificate).

The screenshot shows a form titled "Quarantine Form" under "Safety & Health". The form contains the following fields:

Employee:	BUGAS, MARIE JOYCE	...	Quarantine Start Date:	06/28/2025	<input type="button" value="..."/>
Branch:	EVOLVE TECH LIFESTYLE, INC.		Quarantine End Date:	06/30/2025	<input type="button" value="..."/>
Job Position:	APPLICATION SPECIALIST		Return to Work Date:	07/02/2025	<input type="button" value="..."/>
Department:	MANAGEMENT INFORMATION SYSTEM		Attachment:	<input type="button" value="No File ..."/> <input type="button" value="Choose"/>	
Reason:	Chickenpox	<input type="button" value="X"/>	Remarks:	<input type="text"/>	
Location:					

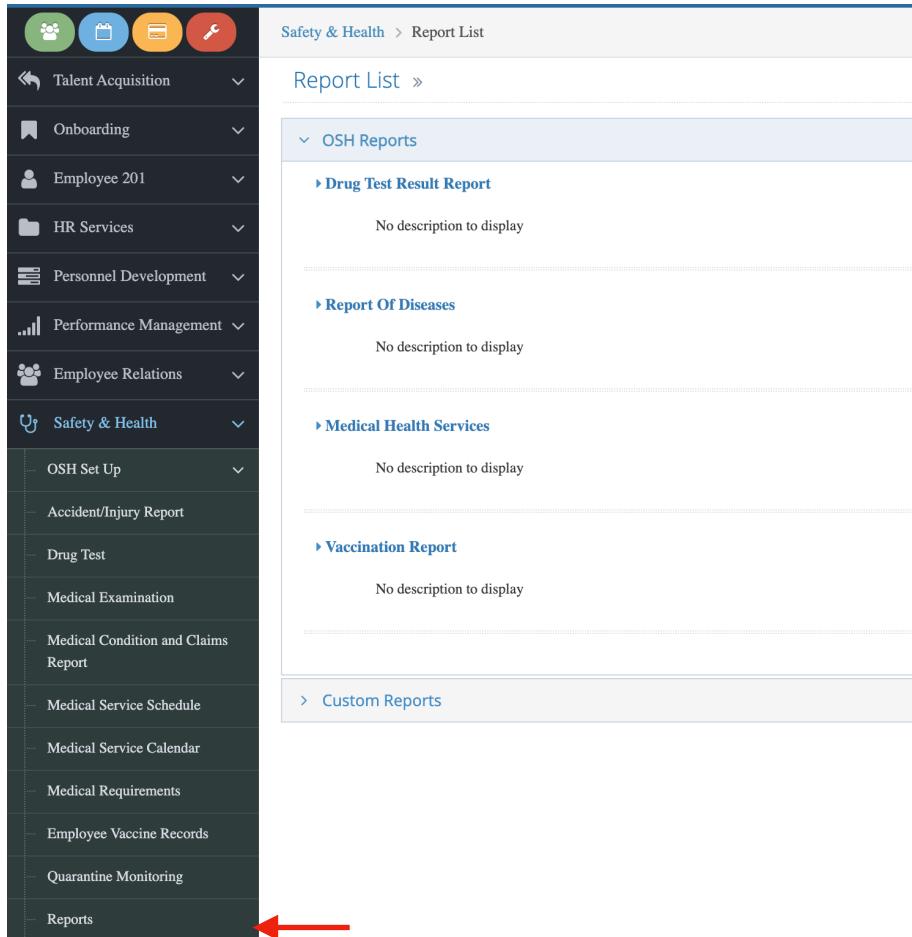
At the bottom right are two buttons: "Save" and "Close".

4. Click “**Save**”. The quarantine details will now be visible in the list.

## Section 7: Safety & Health Reports

**(View and Generate Standardized OSH Reports for Monitoring and Compliance)**

This section provides access to pre-defined Occupational Safety and Health (OSH) reports that help monitor employee health, workplace incidents, and regulatory compliance. Reports are automatically generated based on the data encoded into the system and are grouped under the following categories:



The screenshot shows a navigation sidebar on the left with various icons and dropdown menus. The 'Safety & Health' menu is expanded, showing sub-options like 'OSH Reports', 'Drug Test Result Report', 'Report Of Diseases', 'Medical Health Services', 'Vaccination Report', and 'Custom Reports'. At the bottom of the sidebar, there is a link labeled 'Reports' with a red arrow pointing to it.

This section is **for viewing and printing purposes only**. All report data is based on inputs. Use these reports for compliance audits, incident tracking, or internal health reviews.

To update or encode the data reflected in these reports, go to the relevant modules (e.g., **Drug Test**, **Employee Vaccine Records**).