
 <b>OSPITAL NG PARANAQUE</b> 		Document Code: OSPAR-ADS-PTRM-0016
<b>ANCILLARY DIVISION HOSPITAL POLICIES AND PROCEDURES MANUAL APPROVAL MATRIX</b>		Issue Date:
<b>Policy Title:</b> <b>CHARTING FORMS</b>		Page No. of
		Section / Department <b>PT AND REHABILITATION MEDICINE</b>
<b>Prepared By:</b>  <b>Nico Ryan V. Dayao, PTRP</b> Chief PT, Rehabilitation Medicine	<b>Reviewed By:</b>  <b>Redentor P. Alquiroz, MD</b> Head, Medical & Ancillary Services  <b>Darius S. Sebastian, MD, MPH, PHSAE</b> Hospital Administrator, Ospital ng Paranaque	<b>Approved by:</b>  <b>Jefferson R. Pagsisihan, MD, MHM</b> Hospital Director, Ospital ng Paranaque

## I. Statement of Policy

All charting forms must be properly checked and noted by the head of the Ancillary Division and approved by the Hospital Director and Hospital Administrator.

## II. Charting Forms

- a. Medical Consultation Form
- b. Consent Form
- c. Initial/ Re- Evaluation Form
- d. SOAP Form
- e. Neurology Assessment Form
- f. In- patient PT Notes Form
- g. ROM Form
- h. MMT Form
- i. COVID19 Screening Form

## III. Other Forms

- a. Consultation Leaflet
- b. Daily Attendance Sheet

**SEE ANNEXES**