



Republic of the Philippines
Department of Health
Center for Health Development Davao Region
SOUTHERN PHILIPPINES MEDICAL CENTER
JP Laurel Avenue, Bajada, Davao City
Trunkline: 082-227-2731 Faxline: 082-221-7029



21 March 2019

HOSPITAL MEMORANDUM

No. 73-A s. 2019

TO : ALL CONCERNED

SUBJECT : Compliance with CF4 Requirement for ER and In-Patients

Effective immediately, all in-patients admitted starting March 1, 2019 should have a CF4 attached to the chart. The manual forms are available in the respective nurses' station.

In order to ensure the completeness of the forms, the table below lists the parts of the form to be accomplished and the hospital staff responsible:

Part of the form	Hospital staff	What to encode
Part II nos. 1, 3-7; III nos. 1-5; IV, VI and VII	Attending physician in-charge (resident or intern)	Full information required and may click and complete others for details not in the choice
Part V for medications used in the wards purchased in the Pharmacy	Nurses	Dosage, frequency, route include fluids
Part V for medications used in the wards purchased outside / donated	Nurses	Dosage, frequency, route, quantity, and cost from receipt Put "0" in cost if donated
Part V for medications used in the OR	Circulating Nurses / Anesthesiologists	Include dosage, frequency, route, quantity, including fluids used for washing
Part V cost of medicines, Part II nos. 2, 10a-10b	Billers	Cost of quantity of meds and fluids from the Pharmacy Cost of meds outside when there is no receipt
CF4 as a whole, Part II 8a-8b	Medical evaluators	Correction of entries, non-PNDF drugs, and ICD codes

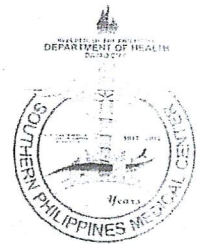
Billing of the patient will not commence without the attached printed and accomplished CF4 form.

For strict compliance.


LEOPOLDO J. VEGA, MD, FPCS, FPATACSI, MBA-H
Medical Center Chief II



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26 March 2019

HOSPITAL MEMORANDUM

No. 79 s. 2019

TO : ALL CONCERNED

SUBJECT : Compliance with CF4 Requirement for Out-Patient Department

Effective immediately, all out-patients with PHIC claims should have a CF4 attached to the chart. The manual forms are available in the respective nurses' station.

In order to ensure the completeness of the forms, the table below lists the parts of the form to be accomplished and the hospital staff responsible:

A. For clinic-based PHIC chargeable procedures

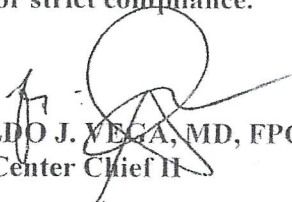
Part of the form	Hospital Staff	What to encode
Part II nos. 1, 3 to 7, III nos. 1 to 5, IV, VI, VII	Attending physician in-charge (resident or PGI)	Full information needed on CF4
Part V (Medications needed in the clinic)	Nurses	Dosage, frequency route include fluids
Part V (Medications used in the clinic included)	Billers	Cost and quantity
Part II nos. 2, 10a to 10b		

B. For ASU procedures

Part of the form	Hospital Staff	What to encode
Part II nos. 1, 3 to 7, III nos. 1 to 5	Resident or PGI in-charge at OPD where patient was first seen	Full information needed on CF4
Part IV, VI, VII	Resident / PGI at ASU	Full information needed on CF4
Part V (Medications used in ASU)	Nurses / Anesthesiologist	Dosage, frequency route include fluids
Part V (Medications)	Billers	Cost and quantity

Billing of the patient will not commence without the attached printed and accomplished CF4 form.

For strict compliance.


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