

MUNICIPAL HEALTH OFFICE

VISION

Healthy and empowered community with access to quality primary and secondary health care services through collaborated support of the Local Government Unit and the community itself.

MISSION

It is the mission of the Rural Health Unit of the Municipality of San Rafael to empower the community with adequate, comprehensive, quality, accessible, affordable, efficient, sustainable health services through multi sectoral partnership between and among the Local Government Unit, NGOs, POs and GOs.

PLEDGE OF COMMITMENT

We, the officials and employees of the Municipal Health Office, pledge and commit to demonstrate sensitivity, appropriate behavior and professionalism, respond to complaints and serve with integrity.

SCHEDULE OF SERVICE

Monday to Friday from 8:00 am to 5:00 pm without noon break
(Rural Health Unit III Birthing Station Monday – Sunday 24 hours without
noon break)

For comments, feedback and suggestion please contact

Ma. Cristina S. Vergel de Dios, M.D.
Municipal Health Officer
Telephone number: (044) 761-5556 loc. 125
0917-597-6117

Or you may drop them at the suggestion box located at the lobby of the main
building.

MUNICIPAL HEALTH OFFICE FRONT LINE SERVICES

OUT-PATIENT CONSULTATIONS

Schedule of Availability of Service:

Monday to Friday 8am – 5 pm without noon break
 RHU III Birthing Station : Monday to Sunday 24 hours without noon break

Who May Avail of the Service:

General Public

What are the Requirements:

Pre-Natal and Post-Partum Check-up – Home-Based Mother’s Record (HBMR) /Pink Card or Mother Baby Book
 Expanded Program on Immunization (Bakuna sa Sanggol) – Early Childhood Care and Development (ECCD) Card or Mother Baby Book
 Child Check-up (0-59 months) – ECCD Card
 TB DOTS – sputum examination results
 Rabies Vaccination – immunization card
 Family Planning Services – schedule card for old clients

Duration:

32 minutes

How to Avail of the Service:

Step	Applicant / Client	Provider	Duration of the Activity (Under Normal Circumstances)	Person in Charge	Fees	Form
1	Proceed to the Municipal Health Office and present complete requirements	Assess client Refer to Physician if necessary Issue order of payment for services requiring fees	10 minutes	Midwife/Nurse	None	Order Payment Form
2	Proceed to physician if referred	Assess client	10 minutes	Physician	None	
3	Pay at the Treasurer’s Office	Accept payment and issue Official Receipt (O.R.)	5 minutes	Revenue Collection Clerk II	Urinalysis – Php 30.00 Hemoglobin/Hematocrit – Php 30-.00 Stool examination – Php 30.00 Blood typing – Php 30.00 Pregnancy Test – Php 50.00 Tetanus toxoid –	Accountable Form No. 51/Official Receipt

					Php 20.00 Immunization for Infants – Php 10.00 per antigen Nebulization – Php 20.00 Fasting blood sugar (FBS) – Php 30.00 Pap smear - Php 120.00 Pills - Php 25.00 DMPA – Php 80.00 Condom – Php 10.00/pack	
4	Present OR	Perform corresponding service	5 minutes	Midwife/nurse/Medical Technologist	None	
5	Proceed to nurse	Dispense drugs and medicines	2 minutes	Nurse	None	
END OF TRANSACTION						

ISSUANCE OF MEDICAL/HEALTH CERTIFICATE

Schedule of Availability of Service:

Monday to Friday 8am – 5 pm without noon break

Who May Avail of the Service:

General Public

What are the Requirements:

- 1) Medical Certificate
 - a) For Job Applicants
 - Chest X-ray
 - CBC
 - Urinalysis
 - Neurological examination (in certain cases)
 - Drug test (in certain cases)
 - b) For return to work after absence
 - Previous record of check-up at facility
 - c) For PWD registration
 - Clinical abstract or medical certificate of present medical condition from attending Physician
 - d) For OJT and scholarship purposes
 - Chest X-ray
 - e) For pensioners/veterans
 - Physical presence
- 2) Health Certificate
 - a) For food handlers: Chest x-ray
 - Stool examination
 - Urinalysis
 - b) For non-food handlers : Chest x-ray
 - c) Pink card: Vaginal smear
 - Anti HBsAg

Duration:

17 minutes

How to Avail of the Service:

Step	Applicant / Client	Provider	Duration of the Activity (Under Normal Circumstances)	Person in Charge	Fees	Form
1	Proceed to the Municipal Health Office and present complete requirements	Accept and evaluate submitted requirements Check vital signs and record the findings Refer to Physician Issue order of payment	5 minutes	Midwife/Nurse/ Rural Sanitary Inspector	None	Order Payment Form
2	Proceed to physician	Assess the client	5 minutes	Physician	None	
3	Pay at the Treasurer's Office	Accept payment and issue Official Receipt (OR)	5 minutes	Revenue Collection Clerk II	Medical/Health Certificate Php 50.00	Accountable Form No. 51/Official Receipt
4	Return to the Municipal Health Office Present OR and claim medical/health certificate	Issue medical/health certificate	2 minutes	Midwife/ Nurse/ Rural Sanitary Inspector	None	EHS Form 102-A (for food handlers) EHS Form 102-B (for non-food handlers) Medical Certificate
END OF TRANSACTION						

ISSUANCE OF SANITARY PERMIT

Schedule of Availability of Service:

Monday to Friday 8am – 5 pm without noon break

Who May Avail of the Service:

Owners of Business Establishments

What are the Requirements:

- 1) INDUSTRIAL ESTABLISHMENTS
 - ECC – DENR
 - Pollution Control Officer Contract
 - Sanitary Plan – Drainage (photo)
 - Health Certificate of every personnel (chest x-ray)

- 2) PUBLIC PLACES (Schools/Hotels/Boarding and Lodging Houses/Apartments/Motels/Markets/Supermarkets/Groceries/Department Stores/Malls/Slaughter Houses/Beauty Parlors/Barber Shops/Sauna and Massage Clinics/Spa/Health Clubs/Banks/Financing Institutions/Bus Stations including rest areas/ Computer Shops/Religious Buildings/Hospitals/Clinics/Laboratories/Sports Centers/Resorts/Dancing Halls/Cockpit Arenas/Funeral Parlors/Memorial Parks/Cemeteries)
 - ECC – DENR
 - Photo of sanitary facility
 - Bacteriological examination results of water source
 - First Aid Kit/corner
 - Health Certificate of all personnel (chest x-ray)

- 3) FOOD ESTABLISHMENT/FOOD PROCESSING
 - Bacteriological, Physical and Chemical examination result of drinking water source
 - Photos of sanitary facilities – lavatories/toilets
 - First Aid Kit/Room with medical supplies and first aider
 - Health certificate of all personnel (chest x-ray)

- 4) MEDICAL CLINICS/LYING-IN/MEDICAL LABORATORY/PHARMACY
 - DOH License to Operate
 - Philhealth certificate of accreditation (for Lying-In)
 - Health Certificate of all personnel (Chest x-ray)

Duration:

20 minutes

How to Avail of the Service:

Step	Applicant / Client	Provider	Duration of the Activity (Under Normal Circumstances)	Person in Charge	Fees	Form
1	Proceed to the Municipal Health Office Present complete requirements and properly filed-up EHS Form No. 110	Accept and review submitted requirements and application form Issue order of payment	10 minutes	Rural Sanitary Inspector	None	EHS Form No. 110
2	Pay at the Treasurer's Office	Accept payment and issue Official Receipt (OR)	5 minutes	Revenue Collection Clerk II	Medical/Health Certificate - Php 50.00	Accountable Form No. 51/Official Receipt
3	Proceed to Municipal Health Officer	Evaluate, affix signature and issue sanitary permit	5 minutes	Municipal Health Officer	None	EHS Form No. 101
END OF TRANSACTION						

BIRTHING SERVICES

Schedule of Availability of Service:

RHU III Birthing Station : Monday to Sunday 24 hours without noon break

Who May Avail of the Service:

Pregnant women in active labor

What are the Requirements:

Home-Based Mother's Record (HBMR/Pink card) or Mother Baby Book

18 – 35 years old

2nd to 4th pregnancy =

NO accompanying medical conditions/complications:

Hypertension, heart disease, thyroid disease

Asthma, epilepsy, pre-eclampsia

Obesity, bleeding disorder

Placenta previa

Uterine/ovarian abnormalities

Cephalo-pelvic disproportion

Multiple pregnancies (twins)

Premature contractions

Breech or transverse (suhi)

Previous cesarian section

2 consecutive abortions

Duration:

31 hours 40 minutes

How to Avail of the Service:

Step	Applicant / Client	Provider	Duration of the Activity (Under Normal Circumstances)	Person in Charge	Fees	Form
1	Proceed to the Municipal Health Office and present HBMR (Pink card) or Mother Baby Book	Assess client and record information Admit patient (if necessary)	30 minutes	Midwife/Nurse	None	
2	Proceed to labor/delivery room	Monitor and record progress of labor Assist in normal spontaneous delivery Conduct immediate	7 hours	Midwife/Nurse/Physician	None	

		post-partum and essential newborn care				
3	Proceed to the ward	Monitor mother and baby Provide counseling on nutrition, family planning , breastfeeding Perform newborn screening Prepare birth certificate Issue order of payment	24 hours	Midwife/Nurse/Physician	None	Order Payment Form
4	Pay at the cashier	Accept payment and issue official receipt (OR)	5 minutes	Nurse	Newborn screening- Php 650.00	Accountable Form No. 51/Official Receipt
5	Claim birth certificate and home medications Go home	Issue birth certificate and home medications	5 minutes	Midwife/Nurse	None	
END OF TRANSACTION						