

**SERVICE STANDARD OF THE  
CITY EMPLOYEES CLINIC**  
City Government of Paranaque

**Schedule of Availability of Service:**

Monday - Friday EXCEPT Holidays  
8:00 AM - 5:00 PM (No Noon Break)

**FRONTLINE SERVICES OFFERED**

1 MEDICAL CONSULTATION

**Prepared by:**

**Dr. Ma. Loreleigh S. Obed**  
OIC-City Health Office

**Approved by:**

**Hon. Edwin L. Olivarez**  
City Mayor II

**SERVICE OFFERED:**

**MEDICAL CONSULTATION**

**WHO MAY AVAIL OF THE SERVICE:**

1. Any person employed by the City Government of Paranaque
2. Referred clients / patients outside of the City Hall
3. Client in the City Hall in an Emergency situation

**WHAT ARE THE REQUIREMENTS:**

1. Employees Identification Card
2. Outside Referral Form, if available
3. Laboratory results, if available

**DURATION:**

19 minutes

## How to Avail of the Service:

STEP	APPLICANT/CLIENT	SERVICE PROVIDER	DURATION OF ACTIVITY (UNDER NORMAL CIRCUMSTANCES)	PERSON IN CHARGE	FEES	FORM
1. Enlistment / Registration	Secures QUE card and present requirements	Register client; fills up Client Information Form	2 minutes	Chino R. Buton, Nursing Attendant		Client Information Form
		Records Chief complaint and Vital Signs	2 minutes	Cruz S. Apepe, RN		Client Information Form
2. Consultation	Goes to Doctor's Room	1). Assessment of client's medical condition 2) Writes prescription of medications 3) May request for Diagnostic Tests necessary for further evaluation 4). May refer to Medical Specialists, if necessary	5 minutes	Dr. Dionisio Sabio		Client Information Form, Prescription Pad, Request for Diagnostic Examinations, Referral Form to Medical Specialists
3. Health Education	Goes to the Nurse Room	Conduct health education talks on Non-communicable diseases, as may be required	10 minutes	Cruz S. Apepe, RN		Booklet ni Mommy at ni Baby; Immunization Card
<b>END OF TRANSACTION</b>						
If requiring procedures: nebulization, wound cleaning, etc.	Goes to Treatment Area	Provides required management as per doctor's order	10-15 minutes, depending on the procedure	Cruz S. Apepe, RN		Client Information Form
Re-assessment	Goes back to Doctor's Room	Re-assessment done prior to discharge: <b>Sent Home:</b> Advised of proper health care at home; instruction of follow-up, if necessary. <b>If symptoms exacerbate:</b> Referral to Hospital of Choice; Inform HEMS for ambulance conduction	10 minutes	Dr. Dionisio Sabio and Chino Buton-Nursing Attendant		Client Information Form, Prescription Pad, Referral Form
<b>END OF TRANSACTION</b>						