

Republic of the Philippines Department of Health

DR. JOSE FABELLA MEMORIAL HOSPITAL

Lope de Vega St., Sta. Cruz, Manila Telephone Nos.: 734-5561 to 65; 733-8536 to 44



Health Information Management Department (HIMD) CITIZEN'S CHARTER PROCEDURE IN REQUESTING MEDICAL CERTIFICATE/MEDICAL ABSTRACT

Services Provided to: Patients, Clients

Days/Hours: Monday to Friday: Application: 8:00a.m. -5:00p.m.(NO NOON BREAK)

Releasing: 8:00a.m.-12:00n.n.

Duration: 4 Days

Service Applied for	Who May Avail	Documentary Requirements	Detailed Steps and Duration	Processing Time	Processing Fee in PhP	Person in Charge Position, Unit/ Division
Requesting		Patient -Valid photo ID Authorized nearest kin of legal age -Authorization Letter duly signed by the patient; valid photo ID of the patient and the authorized nearest kin; Request Form	I. Go to the "Officer of the Day" (OOTD) to check requirements for requesting medical certificate or medical abstract. A Request Form and a number will be given to you. Fill-out the Request Form. Wait for your number to be called.	15 minutes	None	OOTD (Admin. Asst, I)
Medical Certificate/ Medical Abstract	Patients and Clients	Request Form	2. Once your number is called, go to WINDOW 3 for interview to establish your identity & submit the Request Form.	29 minutes	None	Frontline Service Staff (Admin. Aide IV)
		Order of Payment	3. Get the Order of Payment and pay at the Cashier.	55 minutes	P50.00	Frontline Service Staff (Admin. Aide IV)
		Official Receipt	4. Go back to the WINDOW 3 to submit Official Receipt to be attached to the Request Form and wait for the Claim Stub indicating schedule of release (with documentary requirements at the back) to be given to you .	5 minutes	None	Frantline Service Staff (Admin. Aide IV)
		Claim Stub	Prepare all the documentary requirements indicated at the back of the Claim Stub to be used when claiming the requested document.	3 days, 1 hour & 21 minutes		



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Service Applied for	Who May Avail	Documentary Requirements		Maximum Processing Time	Processing Fee in PhP	Person in Charge Position, Unit/ Division			
		Patient -Valid photo ID & Claim Stub with Official Receipt Authorized nearest kin of legal age -Authorization Letter duly signed by the patient; valid photo ID of the patient and the authorized nearest kin; Claim Stub with Official Receipt	5. Go back to the OOTD on the scheduled date of release and give your Claim Stub then a number will be given to you. Wait for your number to be called.	1 hour 8 19 minutes	None	OOTD (Admin. Asst, I)			
		None	 Once your number is called, go to the WINDOW 3 to claim and check the requested document then sign in the Releasing Logbook. 	5 minutes	None	Frontline Service Staff (Admin. Aide IV)			
		Customer Satisfaction Survey Form	7. Fill-out the Customer Satisfaction Survey Form.	5 minutes	None	Frontline Service Staff			
	END OF TRANSACTION								