

2. WELL BABY

Description of the Service: TO RENDER PACKAGE OF HEALTH INTERVENTIONS AND SERVICES TO NEWBORN AND INFANTS WHICH INCLUDES EXCLUSIVE BREASTFEEDING, IMMUNIZATION AND MONITORING OF GROWTH AND DEVELOPMENT.

Office or Divisions:	CITY HEALTH OFFICE- II			
Classification:	SIMPLE			
Type of Transactions:	GOVERNMENT TO CITIZEN			
Who may avail:	AGES 0-12 MONTHS			
CHEKCLIST OF REQUIRMENTS		WHERE TO SECURE		
EARLY CHILDHOOD CARE AND DEVELOPMENT (ECCD CARD)		- MIDWIFE IN CHARGED CITY HEALTH OFFICE-II		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.) SIGN IN TO CLIENT LOGBOOK AND GET NUMBER, PROCEED TO WAITING AREA.	PATIENT LOGGED IN AND NUMBER GIVEN.	NONE	1 MIN.	JOAN LAGGUI,RN NURSE INCHARGED
2.) GO TO THE ADMISSION AREA FOR VITAL SIGNS AND ISSUANCE OF ECCD CARD FOR NEW CLIENTS.	PATIENT ADMITTED, ECCD CARD ISSUED AND PROPERLY FILLED UP FOR NEW CLIENT.	NONE	3MINS.	DIVIE BARCENA,RM MIDWIFE I
3.) PROCEED TO CHILD CARE ROOM FOR COUNSELLING.	COUNSELLED AND ENDORSED TO RESPECTIVE MIDWIFE	NONE	15MINS.	SARAH JANE NORIEGA,RN EPI AND IMCI COORDINATOR
TOTAL:			18 minutes	
<i>(please use additional sheet/s if necessary)</i>				