**Internal/External**

**17. SERVICENAME: HEALTHY LIFESTYLE DISEASES**

**Description of the Service:** To Provide free Geriatric screening

| | |
|---|---|
| **Office or Division:** | City Health Office |
| **Classification:** | Simple |
| **Type of Transaction:** | Government Citizens/Client |
| **Who may avail:** | ALL |

| CHECKLIST OF REQUIREMENTS | WHERE TO SECURE |
|---|---|
| **For New Patient**<br>1. Individual Treatment Record (ITR)<br><br>**For Old Patient**<br>1.VIA Result<br>2. Individual Treatment Record (ITR) | 1. Hospital, CHO, Physician<br>2.CHO, NCD Program Coordinator |

| CLIENT STEPS | AGENCY ACTION | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
|---|---|---|---|---|
| 1. Sign in the client logbook at the information desk & get the number to be called. | Interview Patient/Client and register to logbook | None | 1 minute | **Wilson Alamo**<br>Admin Aide III<br><br>**Johnny Peralta**<br>Admin Aide I<br>or<br>Guard on Duty |
| 2. Proceed to the admission & vital signs area | Interview Patient/Client, | None | 5 minutes | **Janica P. Catipay**<br>Administrative Aide I |

| | | | | |
|---|---|---|---|---|
| | Vital signs taken and recorded | | | |
| 3. Proceed to the program coordinator for geriatric screening | Interview Patient, assess using geriatric screening form | None | 15 minutes | **Maidie Villa** Nurse I |
| 4. Proceed to the doctor's room for consultation. | Interview Patient/Client, assess and diagnosed Patient | None | 5 minutes | **Dr. Red G. Cachapero** OIC-CHO City Health Office |
| 5. Get your prescribed medicine to Pharmacy | dispense medicine to the client | None | 2 minutes | **Maria Theresa Amurao** Pharmacist City Health Office |
| | TOTAL | | 28 minutes | |