



TARLAC STATE UNIVERSITY
MEDICAL SERVICES OFFICE

MEDICAL SERVICES MANUAL

Document No.:	TSU-MSO-OM-01
Revision No.:	00
Effective Date:	February 1, 2022

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Chapter I: Goal and Objective

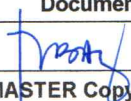
GOAL


The University Medical Services (MSO) aims to provide an integrated health care system which is efficient, effective, timely and patient-centered.

OBJECTIVE

Specifically the unit has the objective of strengthening medical services as part of the core benefits of students, academic and non – academic personnel through a well-integrated health care program.

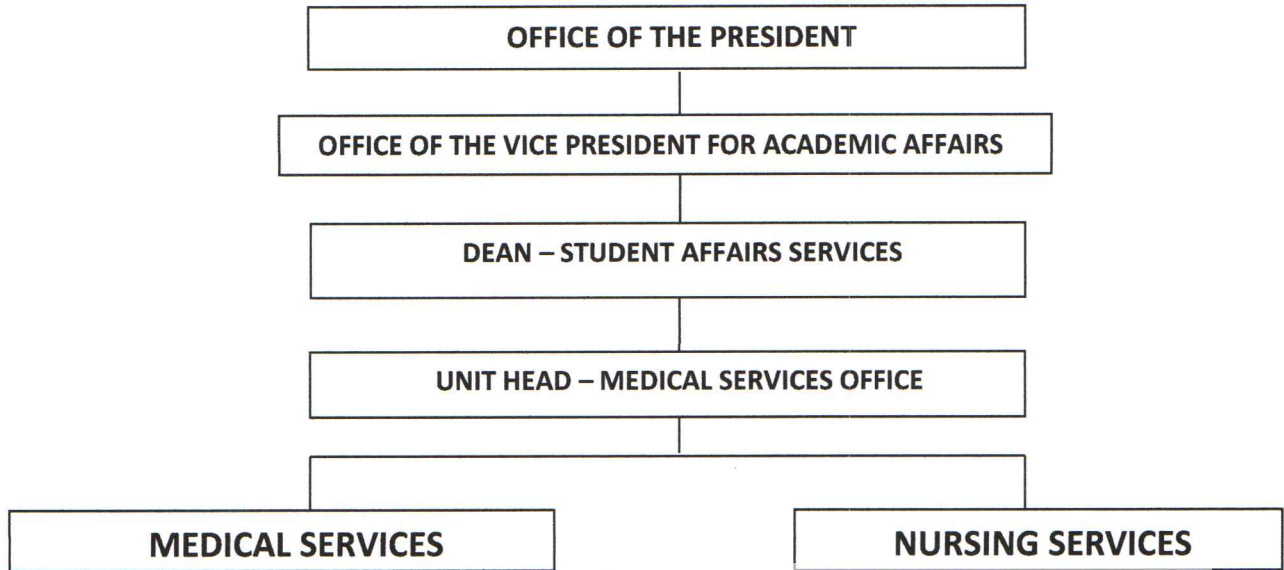


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Chapter II: Functional Structure

MEDICAL SERVICES OFFICE



FUNCTIONS:

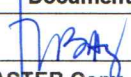
MEDICAL SECTION


1. Identifies medical conditions and formulate methods of primary and secondary prevention
2. Plans and directs all aspects of medical policies and programs
3. Oversees all aspects of triage program
4. Ensures performance of clinical staff remains within the scope of existing clinical practice
5. Reviews and approves clinical decision support tools and all protocol revisions
6. Performs annual review of annual physical examination of employees and recommends based on their health stratification
7. Submits from time to time reports on emergency cases/availments
8. Reviews competency of clinical staff and sees to it that service rendered is consistently at par with expected competency standards
9. Participates in health education lectures as a resource person for the community

NURSING SECTION

1. Increases health awareness that will impact healthier lifestyle and eventually result to better health habits of each member of the university
2. Provides wellness lectures based on prevalent medical conditions in the community
3. Assesses, plans, and implements care, evaluate patients response to plan, make changes in plans as appropriate
4. Advises patients on available and appropriate medical and social services
5. Keeps accurate patients records and maintain confidentiality at all times

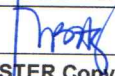



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6. Compiles and submits necessary medical/statistical reports and data
7. Participates in quality nursing improvement activities
8. Participates with the multi-disciplinary team in identification of health care needs and coordination of health care services
9. Provides medical assistance to university events and programs
10. Promotes primary prevention for healthy individuals and secondary prevention for those with existing medical conditions/diseases
11. Gathers data thru medical history taking and vital signs monitoring
 - ✓ Medical history taking
 - ✓ Past medical history
 - ✓ Previous medical conditions, e.g., confinements
 - ✓ Existing medical conditions
 - ✓ Previous surgeries
12. Monitors vital signs:
 - ✓ Blood pressure monitoring
 - ✓ Heart rate monitoring
 - ✓ Respiratory rate monitoring
 - ✓ Temperature taking
 - ✓ Height, weight and body mass index (BMI)
13. Provides counseling, education and information to patients regarding their illness
14. Coordinates health programs with outside organizations



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Chapter III: Responsibilities


PHYSICIAN


- Helps the facility obtain and maintain a timely and appropriate medical care.
- Assures that medical care support and health care needs, is consistent with current standards of practice, and helps the facility meet regulatory requirements
- Reviews and evaluates aspects of physician care and practitioners services
- Helps the facility identify, evaluate, and address health care issues related to the quality of care and quality of life.
- Addresses issues related to coordination of medical care or other care issues.
- Reviews all vital signs on chart
- Conducts physical examination of patient
- Gives clinical impression
- Prescribes of diagnostics (laboratory tests, X-rays), if needed
- Prescribes medicines, if needed
- Sutures minor wounds as in the cases of minor lacerations
- Gives referral to tertiary hospital, if warranted
- Coordinates fast and efficient emergency care
- Refers back to the nurse for final instructions of medicines to patient

NURSES

- Gather General Information of patients coming in for consultation:
Complete name, complete address, Age, Religion, Past Medical history, Present medications if under medication
- Monitor Vital signs of Patients:
Blood pressure taking, Heart rate, Respiratory rate, Temperature, Height and weight and Compute for BMI (Body Max Index)
- Refer patients who are in need for consultation to the University Physician
- Assist in minor surgical procedures done in the clinic (Incision and Drainage, suturing of minor lacerations)
- Promote wellness programs such as Health Information Campaign thru Lectures, vaccination and monthly information drive thru the Health Bulletin boards which are in line with the DOH Programs
- Serve as Medical Personnel during University activities such as SCUAA, Intramurals, SCUFAR and other activities necessitating medical personnel.
- Keep and update Medical records of patients for future used
- Respond to emergency cases and refer them to University Physician
- Dispense over the counter medicines to patients with prescription and as ordered
- Assist regular nurses in the data gathering for census which is submitted monthly
- Endorse to in-coming duty nurses necessary information related to the area
- Endorse patient to physician



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Chapter IV: Policies and Procedures


INSTITUTIONAL POLICIES


1. All employees (permanent, part-time, job orders) are required to undergo physical examination to assess the general well being/health status of each individual
2. Physical examination would include laboratory tests (CBC, chest x-ray, urinalysis, fecalalysis)
 - ****laboratory tests would not be limited to the above mentioned tests as this would depend on the type of work that an employee might have in the university. The Physician may recommend other tests to evaluate the health status of an individual as deemed necessary.
3. All physical exam results and laboratory tests are submitted to HR. The HR Office forwards all results to Medical Office for review and recommendations as follow
4. All employees are required to at least have a health care provider
5. The director for medical service may recommend other tests to evaluate the health status of an individual as deemed necessary

POLICIES AND PROCEDURES

1. The Unit Head of the Medical Services Office (MSO) shall oversee all operating functions of the university clinic with regards to:
 - a. Medical Staff – each campus clinic to have at least two (2) competent and licensed nurses
 - b. Medical service rendered – quality nursing functions such as vital signs monitoring, issuance of health updates and respond to all emergency cases in their designated campuses. They shall directly coordinate with the unit head for all emergency cases.
 - c. The Unit Head shall assess all emergency cases and refer them to tertiary hospitals if deemed necessary.



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Chapter V: Workflow

I – PATIENT

- 1.1. Visits clinic

II – NURSE

- 2.1. Screen patient, information gathering

- ✓ General information (name, age, sex, civil status, religion, department)

- 2.2. Take and assess for Medical history

- ✓ Previous hospitalization, allergies
- ✓ Personal history (smoker, alcohol beverage drinker)

- 2.3. Monitor vital signs

- ✓ BP monitoring, heart rate, respiratory rate, temperature, weight, height and BMI computation

- 2.4. Endorse to physician

III – PHYSICIAN

- 3.1. Reviews all vital signs on chart

- 3.2. Performs physical examination of patient

- 3.3. Makes clinical impression

- 3.4 Prescribes diagnostics test (laboratory tests, x-rays) if needed

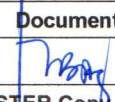
- 3.5 Prescribes medicines if needed. Suturing of minor wounds as in the case of minor lacerations.


- 3.6. Refers to tertiary hospital if warranted; coordinates fast and efficient emergency care.

- 3.7. Refers back to nurse for final instructions of medicines to patients and filing of patients records.

IV – Flow Chart (see Appendix A)



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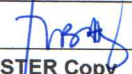
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Chapter VI: Development Plan

Development Plan

1. Develop a 10-bed capacity infirmary divided into the following areas: Medical clinic, Doctor's room, Nurse's station, and treatment area, 5-beds ward for female patients and 5-beds ward for male patients, breastfeeding room, comfort room, records room / stock room, and a waiting room to every campus. Each area is furnished with equipment and materials necessary for better health care delivery.
2. Application to construct an Infirmary Clinic with a Clinical Laboratory for minor test, e.g. CBC, Urine test, Ultrasound, and X-ray room, specifically for incoming freshmen students, nursing students medical examination as well as for faculty and personnel's routine and annual physical exam.
3. Promotion of Physician and Nurses Staff and additional creation of plantilla positions for the Job Order Nurses.
4. Hiring of additional Nurse with a shifting schedule as the need arises due to COVID19 Response Team
5. Benchmarking of the Medical staff to different SUC's for staffing pattern and other guidelines.
6. Attending seminars, trainings, and annual convention via zoom or face to face.
7. Continuing education for the Medical Staff.
8. Stand by Emergency vehicle in every Campus Clinic and procure one (1) additional New Medical Ambulance.
9. Set-up an Triage area for critical Assessment and Isolation Area for isolating communicable diseases and COVID19 Cases.
10. Procuring of Medical Essentials and Equipment to be use for emergency, disaster, and Pandemic response



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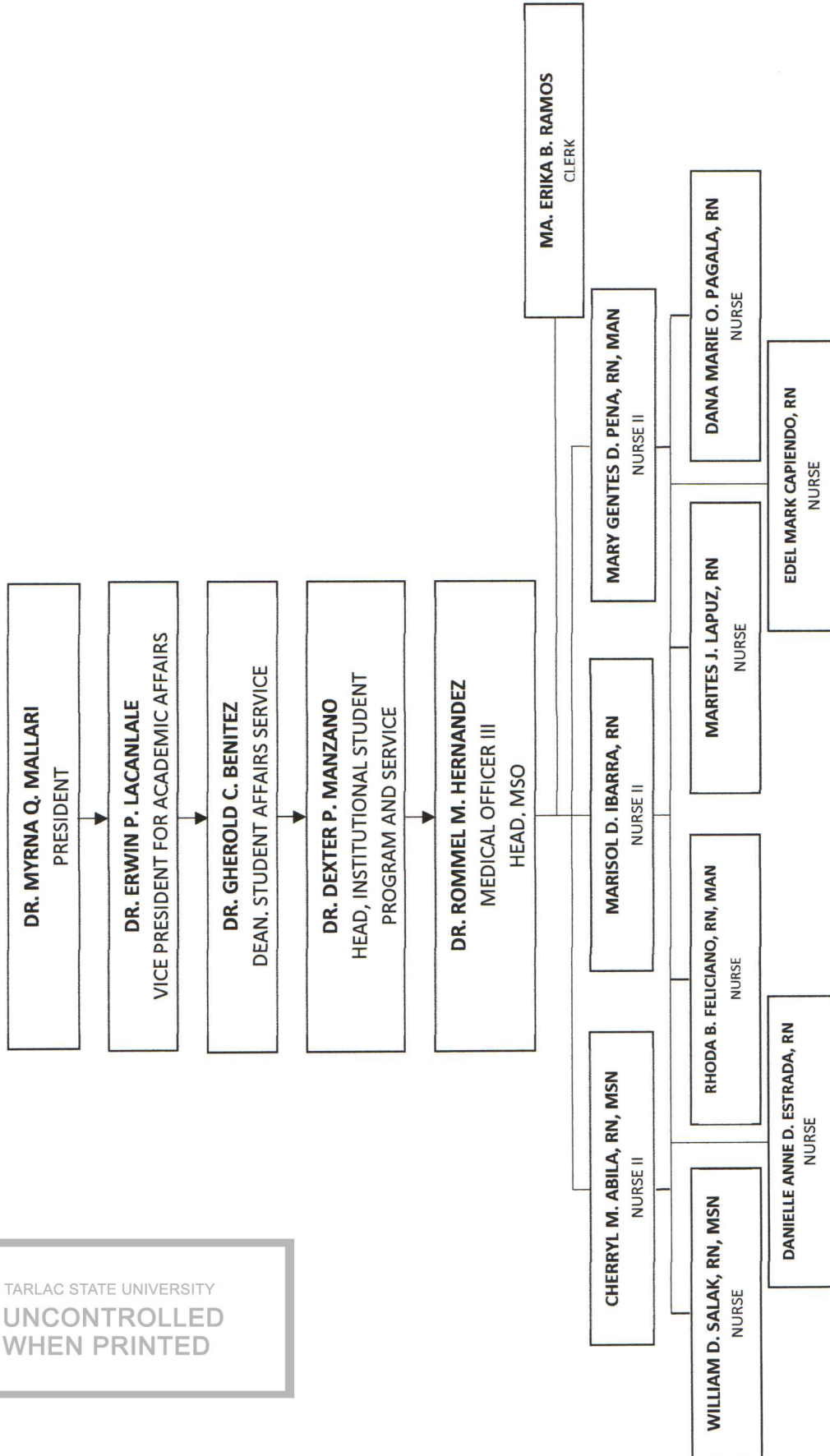


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Chapter VII: Organizational Chart

**MEDICAL SERVICES OFFICE
 ORGANIZATIONAL STRUCTURE**



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Chapter VIII: MSO QEHS Policy and Objective

MEDICAL SERVICES OFFICE

QUALITY, ENVIRONMENT, AND HEALTH AND SAFETY (QEHS) POLICY

The Medical Service recognizes its responsibility to provide a safe and healthy environment for staff, students, contractors, and visitors to the premises and will take all reasonably practicable steps within its power to fulfill this responsibility.

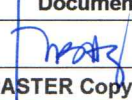
The long-term plan of MSO depends on our ability to continually improve the quality of our services, emphasis must be placed on ensuring human health, operational safety, environmental protection, quality enhancement, and community goodwill. This commitment is in the best interests of our customers, our employees, and our stockholders. We are committed to


- Protect, and strive for improvement of, the health, safety and security of our people at all times;
- Meet specified patients need and ensure continuous customer satisfaction;
- A safe place of work and a safe working environment;
- Apply our knowledge and skills to all Health Safety and Environment aspects and communicate openly with stakeholders and ensure an understanding of our QEHS policies;
- Assessment of all significant risks associated with work processes, and the adoption of appropriate precautions;
- the provision of adequate information, instruction, training and supervision;
- adequate consultation with staff on all matters relating to health and safety, and the fostering of a positive safety culture in the school;
- Annual review of safety policy.

QUALITY, ENVIRONMENT, AND HEALTH AND SAFETY (QEHS) OBJECTIVES

1. Ensure that Risk Assessments are in place for work activities with significant risk and that these Risk Assessments are reviewed at least annually, following any related incidents/near misses or when any significant changes to processes or activities are to be made;
2. Ensure that where risk cannot be completely managed through the use of engineering controls alone that safe systems of work are documented, communicated, implemented and complied;
3. Ensure that actions identified through the investigation of accidents, incidents, near misses, ill-health etc. are closed out within agreed timescales;
4. Ensure that all mandatory Health and Safety training (as identified within the University and Health and Safety Programs) is attended and delivered;



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Chapter IX: Flexible Services Amidst Pandemics

Flexible Health Services Amidst Pandemic

The following are the flexible services provided in this time of Pandemic. And this services and activities of the Medical Services Office tend to be the most common and very important aspect to observe for Covid-19.

I- General Guidance for All Employees

For all employees, regardless of specific exposure risks, it is always a good practice to:

- Wear facemask at a minimum, and always when around coworkers or the general public.
- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are not immediately available, use 70% alcohol or an alcohol-based hand sanitizer with at least 70% isopropanol as active ingredients and rub hands together until they are dry. Always wash hands that are visibly soiled.
- Use Face shield for extra and added protection
- Frequent disinfection of the offices and rooms. And individual disinfection of the working area.
- Temperature check before and after entering the premises.
- QR scanning for every visit to any office for contact tracing
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Practice good respiratory etiquette, cover mouth when coughing/sneezing into your elbow/upper sleeve.
- Avoid close contact with people who are visibly sick and practice physical distancing with coworkers and the public.
- Stay home if sick. And notify the Medical Service Office for strict monitoring and guidance during the implementation of the 14 days quarantine. Report any signs and symptoms if present, for RT-PCR test if needed.

II-Screening and Assessment

Screening and assessment for COVID-19 signs and/or symptoms (such as temperature checks) is one of the health protocols that is being implemented and observed at times. Those who may have been infected or exposed with the virus may not show any signs or symptoms, thus screening and monitoring may have limitations. The complexity of screening will depend on the days of quarantine, type and cause of exposure at work site and the risk of contracting the virus among the staff, and should include:

- Protocols for screening workers before entry into the workplace (which may entail to show the result of the RT-PCR test and a certificate coming from the LGU, Hospital and other agencies. Asking the employee for a clearance, a self-screening measure before reporting back to work.
- Protocols for the Covid-19 positive case employee (including asymptomatic who have tested positive and have not yet been cleared.
- Criteria for return to work of exposed and recovered employees (those who have had signs or symptoms of COVID-19 but have gotten better).

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III-Identify and Isolate Suspected Cases

In workplaces where exposure to the virus may occur, prompt identification and isolation of potentially infectious individuals is a critical step in protecting workers, visitors, and others at the work site.

- Wherever feasible, keep infectious people out of the workplace, to report if they are sick or have symptoms of COVID-19 or using screening measures, as described above.
- If a worker develops signs or symptoms of COVID-19 at the workplace, send the person home seek medical care to avoid infecting others.
- If the person cannot immediately leave the workplace, isolate the individual in a location away from workers, customers, and other visitors and with a closed door (e.g., in a single occupancy restroom), if possible, until they can go home or leave to seek medical care.

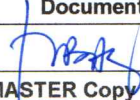
IV-Safe Work Practices


Policies and procedures on how workers perform job duties to ensure work activities are conducted safely:

- Limiting the number of workers assigned to a shift (Skeletal duty) in the office and ensuring workstations are spaced at least 6 feet apart.
- Posting signage, stickers for the employee to see and read, reminding to maintain a distance of at least 6 feet between one another and to practice regular hand hygiene.
- Increasing the frequency of cleaning and disinfection within the work site.
- Remind to wear facemask and face shield
- And the use of PPE's e.g. gloves, gown, shoe cover and a lot more
- Schedule patient for consultation to avoid overcrowding and exposure
- Virtual consultation at times is implemented as the need arises.


V- Virtual Attendance to meetings and webinars



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Chapter X: Appendix A

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	CONSULTATION/WALK-IN	TSU-MSO-SP-01	EFFECTIVITY DATE: October 28, 2019
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			REVISION NO: 01

1.0 OBJECTIVE

This procedure details the methods on consultation.

2.0 SCOPE

Evaluation of general health status of Students, Teaching and Non-Teaching Personnel.

3.0 RESPONSIBILITY

- PT
- NOD
- MD

4.0 DEFINITION OF TERMS

MD - Medical Doctor
NOD - Nurse on Duty
NT - Non-Teaching
PE - Physical Examination
PT - Patient

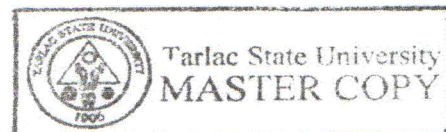
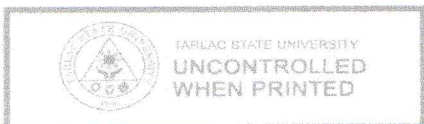
5.0 RELATED PROCEDURE

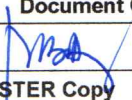
ECG Taking (TSU-MSO-WI-03)
Bandaging (TSU-MSO-WI-04)
Nebulization (TSU-MSO-WI-05)
Oxygenation (TSU-MSO-WI-07)
Wound Dressing (TSU-MSO-WI-08)
Data Gathering (TSU-MSO-WI-01)
Physical Examination (TSU-MSO-GL-01)
Medication (TSU-MSO-GL-02)

6.0 DOCUMENTATION AND RECORDS

- Consultation form (TSU-MSO-SF-01)
- Medical Certificate (TSU-MSO-SF-03)
- Walk-in Logbook (TSU-MSO-SF-10)
- Consultation Logbook (TSU-MSO-SF-11)

Prepared by: William D. Salak Nurse	Reviewed by: Dr. Rommel M. Hernandez Unit Head, Medical Service Office	Approved by: Prof. Fabian P. Jegunra Dean, Student Affairs Services
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Responsible	Flowchart	Procedure
PT		
PT		PT will fill-up Client Request Form Refer to TSU-MSO-SF-04
NOD		Gather necessary data needed Refer to TSU-MSO-WI-01
NOD		NOD will Evaluate the data gathered
NOD		If need for consultation proceed to prepare for Consultation
NOD		If no or the doctor is not available Give proper intervention needed by the PT. Refer to TSU-MSO-GL-02 TSU-MSO-WI-03 TSU-MSO-WI-04 TSU-MSO-WI-05 TSU-MSO-WI-07 TSU-MSO-WI-08
NOD		NOD will Evaluate the intervention given to PT.
NOD		If need for consultation proceed to prepare Consultation form
NOD		if the PT is cured or accepted the intervention provided

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Responsible	Flowchart	Procedure
NOD	<pre> graph TD B{{B}} --> B1[Document on logbook] B1 --> B2[Health Teaching] B2 --> B3[Signature of PT] B3 --> B4((End)) A{{A}} --> A1[Prepare for Consultation] A1 --> A2{Consultation Form} A2 --> A3[For new PT prepare new form] A2 --> A4[For old PT check control number] A3 --> A5[Give Control Number] A4 --> A6[Find form on the filling box] A5 --> A7[Complete data needed] A6 --> A7 A7 --> C{{C}} </pre>	Document the data needed, complaint and the intervention given to the PT on Walk in Logbook (TSU-MSO-SF-10)
NOD		Give health teaching to the PT
PT		PT will sign on the Walk-in Logbook (TSU-MSO-SF-10)
NOD		Prepare for consultation
NOD		Ask patient if he/she already have record
NOD		For New PT Prepare new Consultation form For Old PT check the control number
NOD		For New PT give control number to the Consultation Form For Old PT find the record on the filling box
NOD		Complete data needed in the form

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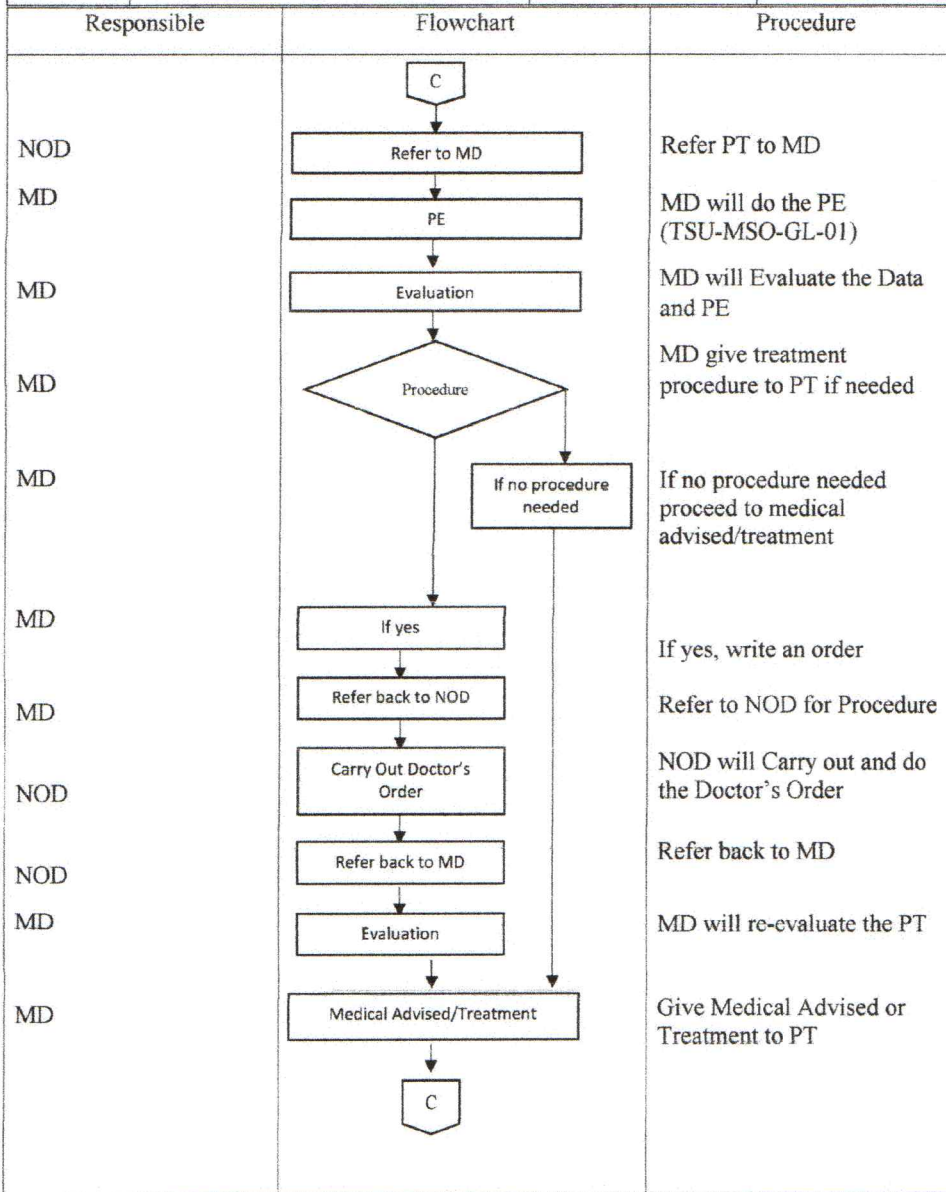
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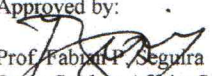
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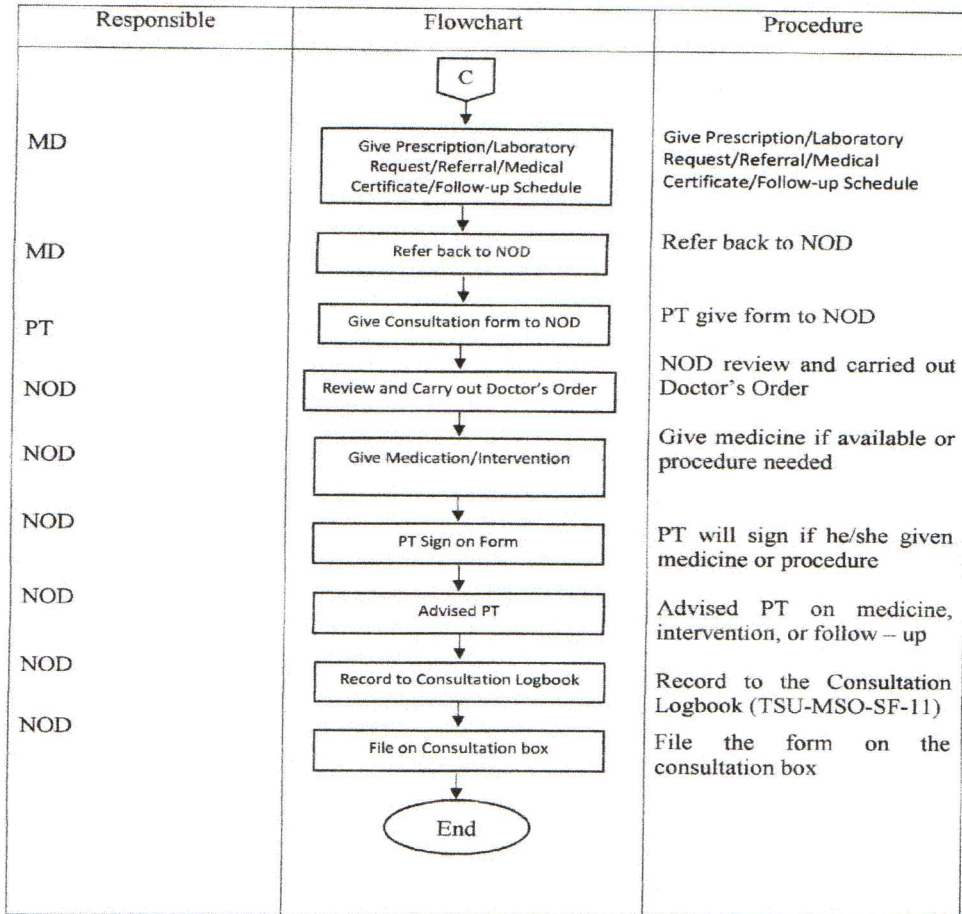
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