DR. PABLO O. TORRE MEMORIAL HOSPITAL
B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100

Document Code:	DPOTMH-E-63-P07
Effective Date:	07-31-2022
Document Type:	Policy
Page Number:	1 of 3
Department/Section:	Department of Imaging Sciences
Document Title:	**ASSESSMENT, SERVICE TO CLIENTS, MONITORING OF TURN AROUND TIME AND "IN CARE OF" REQUESTS**

PURPOSE:

To provide guidelines in the efficient flow of giving service to clients and in the monitoring of the Turn-Around Time (TAT) in the Department of Imaging Sciences.

LEVEL:

Reception Clerks, Cashiers, Releasing Clerks, Encoders, Radiologic Technologist, Checker, Radiologists.

POLICY:

1 It is the policy of the Department that efficient service shall be given to all our clients through a systematic flow of operation in the Department.

2 The following shall be the Turn-Around Time in the releasing of results from the time the examination is **completely done**:
- 2.1 Within 4 hours, all X – Rays;
- 2.2 Within 12 hours, Ultrasound
- 2.3 Within 24 hours for MRI, and CT Scan, Mammography results;
- 2.4 Within three (3) working days, DEXA results

3 For all "in care of" reading, Radiologists shall observe the same TAT for regular examinations.

4 Examinations that were not fully accomplished due to a variety of reasons specifically for Mammogram, CT Scan, and MRI patients (e.g. waiting for outside and/or previous results) will be read "As is" (No comparison) after 24 hours by the Radiologist decked with the said patient examination if such required document is not submitted to the DIS within the specified allowance.
A follow up within the 24 hours allowance shall also be done by the Radiologic Technologist on duty thereby also informing the patient of our policy.

Unauthorized duplication of this document in any form is strictly prohibited.

5 The monitoring of DIS results shall be done daily with a cut-off time of 4:00 o'clock in the afternoon by the assigned Releasing Clerk of the Department.

6 The Daily Performance and Monitoring Report (DPMR) shall be submitted to the DIS Manager for verification. A copy of this report shall be given to the Chair of the Radiologists and Radiologic Head. The same DPMR shall be regularly discussed in weekly/monthly meeting of the department.

DOCUMENTATION:

Revised Policy

DISSEMINATION:

Policies and Procedures Manual

Unauthorized duplication of this document in any form is strictly prohibited.

APPROVAL:

	Name/Title	Signature	Date
Prepared by:	**PARKE KIMBERT S. JUANGA** Radiology Section Head		7.7.22
	BONIFACIO C. SEPICO, RMT Department of Imaging Sciences Manager		7/7/22
Reviewed:	**DENNIS C. ESCALONA, MN, FPSQua, FPCHA** Quality Assurance Supervisor		07-07-2022
Recommending Approval:	**ROSARIO D. ABARING, MN, MBA-HA, PhD, FPCHA** Ancillary Services Division Officer		07.07.2022
	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/8/22
Approved:	**GENESIS GOLDI D. GOLINGAN** President and CEO		7/21/22

Unauthorized duplication of this document in any form is strictly prohibited.

DR. PABLO O. TORRE MEMORIAL HOSPITAL
B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100

Document Code:	DPOTMH-E-63-P07-S01
Effective Date:	07-31-2022
Document Type:	Standard Operating Procedure
Page Number:	1 of 3
Department/Section:	Department of Imaging Sciences
Document Title:	**ASSESSMENT, SERVICE TO CLIENTS, MONITORING OF TURN AROUND TIME AND "IN CARE OF" REQUESTS**

PURPOSE:

To provide guidelines for the health care professionals in providing prompt response to Emergency Room (ER).

SCOPE:

Applies to all Department of Imaging Sciences (DIS) and Department of Emergency Medicine Staff of Dr. Pablo O. Torre Memorial Hospital

PERSON RESPONSIBLE:

DIS Reception Clerk, Radiologic Technologist, Releasing Clerk, DIS Manager

PROCEDURE:

For Scheduling and Assessment of Procedure/s Proper

1. Client proceeds to the Reception Area.
2. Client fills in the Registration Form.
3. The Reception Clerk at the Central Registration Area makes assessment, schedules client, and encodes client's data in the computer.
4. The Central Registration Clerk offers the Patient Health Card to client and its corresponding charges.
5. The Central Registration Reception Clerk instructs the client to pay to the cashier; and proceed to the DIS Area after payment for rendering of the services.
6. The Cashier further instructs the client to bring his Patient Health Card to the DIS Area together with the printed Assessment Form and Receipt.
7. Client proceeds to the DIS Area to get his/her Priority Number.
8. Client waits for his/her number to be called.
9. The DIS Reception Clerk calls the patient priority number and processes the request.
10. The DIS Reception Clerk renders the request and forwards it to Radiologic Technologist to carry out the procedure.

Unauthorized duplication of this document in any form is strictly prohibited.

11. Client waits for his/her name to be called for the procedure/s by the Radiologic Technologist. The latter escorts the client to the designated room for the procedure/s.
12. The Radiologic Technologist gives instructions before, during, and after the procedure/s including instructions as to how and when the client can claim his/her result.

For Repeat Client/ With Patient Health Card.

1. Client gets his Priority Number at the DIS Unit.
2. Client waits for his number to be called.
3. Once the number is called, the client presents his Doctor's Request, Assessment form and Receipt.
4. Client waits for his name to be called for the procedure/s by the Radiologic Technologist. The latter escorts the client to the designated room for the procedure/s.
5. The Radiologic Technologist gives instructions before, during and after the procedures including instructions as to how and when the client can claim his/her result/s.

Monitoring of Turn-Around Time

1. The Releasing Clerk prepares the DAILY PERFORMANCE AND MONITORING REPORT (DPMR) of the Department properly observing the cut-off time of 4:00 PM daily.
2. The said DPMR is submitted to the DIS Manager every 5:00 PM daily for verification. A copy of the said report is given to the Chair of the Radiologists and the Radiologic Head and them same reported is being copy furnished to the Ancillary Officer.
3. The DIS Manager cascades the said performance report to the unit during its weekly/monthly Department Meeting for corrective actions should there be deviations.

Unauthorized duplication of this document in any form is strictly prohibited.

APPROVAL:

	Name/Title	Signature	Date
Prepared by:	**PARKE KIMBERT S. JUANGA** Radiology Section Head		7.7.22
	BONIFACIO C. SEPICO, RMT Department of Imaging Sciences Manager		7/7/22
Reviewed:	**DENNIS C. ESCALONA, MN, FPSQua, FPCHA** Quality Assurance Supervisor		07.07.2022
Recommending Approval:	**ROSARIO D. ABARING, MN, MBA-HA, PhD, FPCHA** Ancillary Services Division Officer		07.07.2022
	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/8/22
Approved:	**GENESIS GOLDI D. GOLINGAN** President and CEO		7/28/22

Unauthorized duplication of this document in any form is strictly prohibited.

DR. PABLO O. TORRE MEMORIAL HOSPITAL

B.S. Aquino Drive,
Bacolod City,
Negros Occidental,
6100

Document Code:	DPOTMH-E-63-P07-WI01
Effective Date:	07-31-2022
Document Type:	Work Instruction
Page Number:	1 of 3
Department/Section:	Department of Imaging Sciences
Document Title:	**ASSESSMENT, SERVICE TO CLIENTS, MONITORING OF TURN AROUND TIME AND "IN CARE OF" REQUESTS**

KEY TASK	PERSON RESPONSIBLE
Scheduling and Assessment of Procedure/s Proper	
1. Proceeds to the Reception Area.	Patient
2. Fills in the Registration Form.	
3. Makes assessment, schedules client, and encodes client's data in the computer.	Reception Clerk
4. Offers the Patient Health Card to client and its corresponding charges.	
5. Instructs the client to pay to the cashier; and proceeds to the DIS Area after payment for rendering of the services.	
6. Instructs the client to bring his Patient Health Card to the DIS Area together with the printed Assessment Form and Receipt.	Cashier
7. Proceeds to the DIS Area to get his/her Priority Number.	Patient
8. Renders the request and forwards it to Radiologic Technologist to carry out the procedure.	DIS Reception Clerk
9. Gives instructions before, during, and after the procedure/s including instructions as to how and when the client can claim his/her result.	Radiologic Technologist

Unauthorized duplication of this document in any form is strictly prohibited.

For Repeat Client/ With Patient Health Card	
1. Gets his Priority Number at the DIS Unit.	Patient
2. Waits for his number to be called.	
3. Presents his Doctor's Request, Assessment form and Receipt.	
4. Gives instructions before, during and after the procedures including instructions as to how and when the client can claim his/her result/s.	Radiologic Technologist
Monitoring of Turn-Around Time	
1. Prepares the DAILY PERFORMANCE AND MONITORING REPORT (DPMR) of the Department properly observing the cut-off time of 4:00 PM daily.	Releasing Clerk
2. Submits the DPMR to the DIS Manager every 5:00 PM daily for verification.	
3. Cascades the said performance report to the unit during its weekly/monthly Department Meeting for corrective actions should there be deviations.	

Unauthorized duplication of this document in any form is strictly prohibited.

DR. PABLO O. TORRE MEMORIAL HOSPITAL B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100	Document Code:	DPOTMH-E-63-P07-WI01
	Effective Date:	07-31-2022
	Document Type:	Work Instruction
	Page Number:	3 of 3
	Department/Section:	Department of Imaging Sciences
	Document Title:	**ASSESSMENT, SERVICE TO CLIENTS, MONITORING OF TURN AROUND TIME AND "IN CARE OF" REQUESTS**

APPROVAL:

	Name/Title	Signature	Date
Prepared by:	**PARKE KIMBERT S. JUANGA** Radiology Section Head		7-7-22
	BONIFACIO C. SEPICO, RMT Department of Imaging Sciences Manager		7/7/22
Reviewed:	**DENNIS C. ESCALONA, MN, FPSQua, FPCHA** Quality Assurance Supervisor		07-07-2022
Recommending Approval:	**ROSARIO D. ABARING, MN, MBA-HA, PhD, FPCHA** Ancillary Services Division Officer		07.07.2022
	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/8/22
Approved:	**GENESIS GOLDI D. GOLINGAN** President and CEO		7/21/22

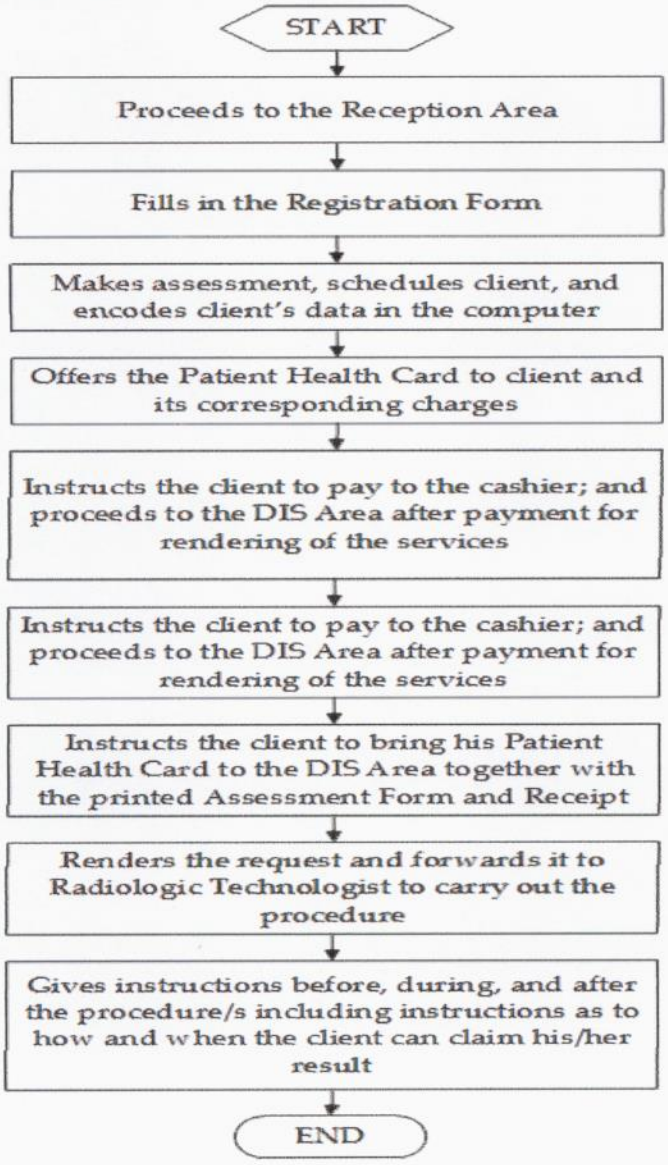
Unauthorized duplication of this document in any form is strictly prohibited.

DR. PABLO O. TORRE MEMORIAL HOSPITAL
B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100

Document Code:	DPOTMH-E-63-P07-WI01
Effective Date:	07-31-2022
Document Type:	Flowchart
Page Number:	1 of 4
Department/Section:	Department of Imaging Sciences
Document Title:	**ASSESSMENT, SERVICE TO CLIENTS, MONITORING OF TURN AROUND TIME AND "IN CARE OF" REQUESTS**

FLOWCHART

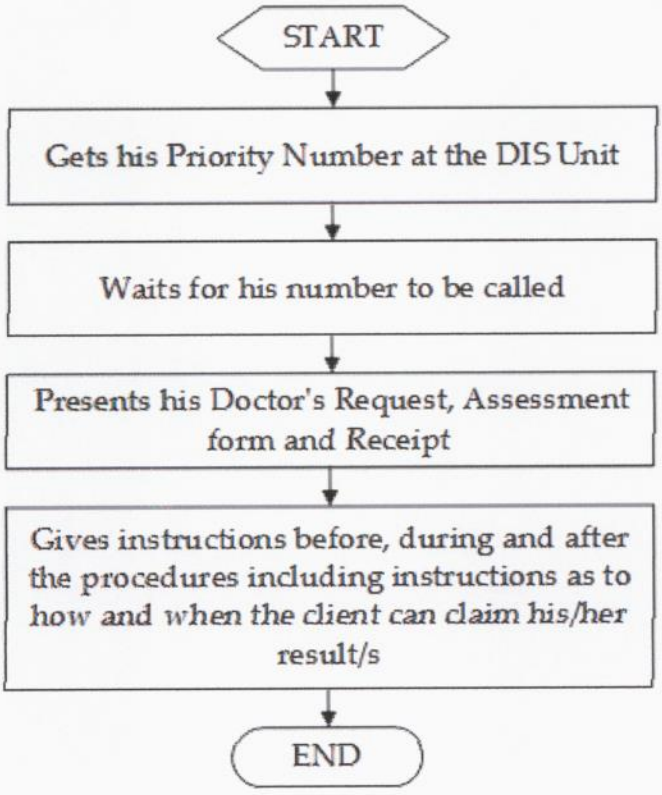
Scheduling and Assessment of Procedure/s Proper



Unauthorized duplication of this document in any form is strictly prohibited.

FLOWCHART

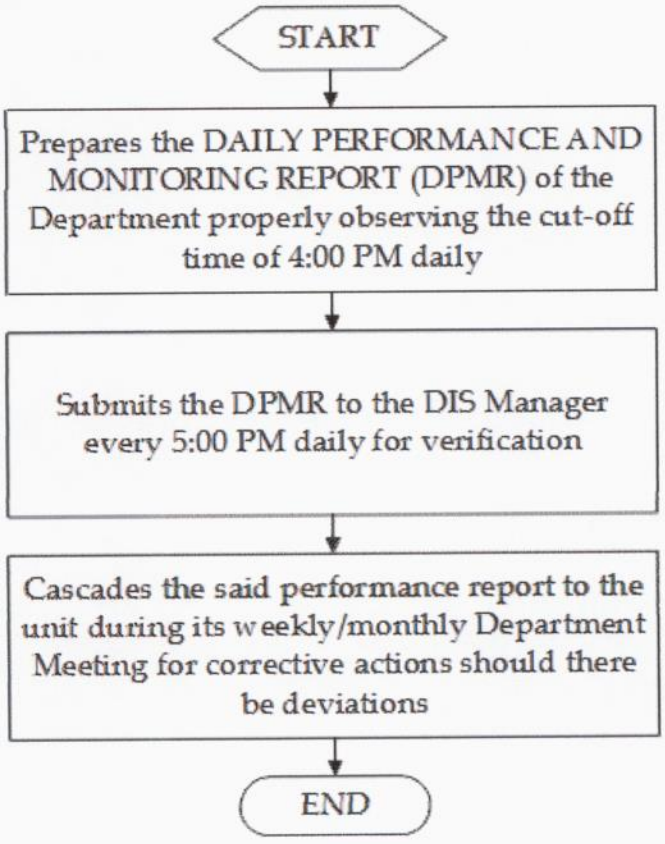
For Repeat Client/ With Patient Health Card



Unauthorized duplication of this document in any form is strictly prohibited.

FLOWCHART

Monitoring of Turn-Around Time



Unauthorized duplication of this document in any form is strictly prohibited.

APPROVAL:

	Name/Title	Signature	Date
Prepared by:	**PARKE KIMBERT S. JUANGA** Radiology Section Head		7.7.22
	BONIFACIO C. SEPICO, RMT *Department of Imaging Sciences Manager*		7/7/22
Reviewed:	**DENNIS C. ESCALONA, MN, FPSQua, FPCHA** Quality Assurance Supervisor		07-07-2022
Recommending Approval:	**ROSARIO D. ABARING, MN, MBA-HA, PhD, FPCHA** Ancillary Services Division Officer		07.07.2022
	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/8/22
Approved:	**GENESIS GOLDI D. GOLINGAN** President and CEO		7/21/22

Unauthorized duplication of this document in any form is strictly prohibited.