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	Document Title:	DOCUMENT CODING

PURPOSE:

1. To provide specific guidelines on the coding system for documents and records within Dr. Pablo O. Torre Memorial Hospital.

LEVEL:

Policy applies to all Dr. Pablo O. Torre Memorial Hospital (DPOTMH) staffs. Covered by these guidelines are new, as well as existing, documents and records.

DEFINITION OF TERMS:

1. Documentation Control Staff – this refers to the person/s responsible for the control of all documents and data of DPOTMH.
2. Internal Documents – documents internally generated/originated in DPOTMH.
3. External Documents – documents, specifications, requirements and other written information from suppliers, clients, government and system standards which are not created in DPOTMH.
4. Checklist – a list of items (tasks, steps) to be checked or consulted.
5. Form – a document with blanks for the insertion of details or information.
6. Distribution – issuance of approved documents for the implementation of Quality Management System.
7. Originator – author of the documents
8. DPOTMH – Dr. Pablo O. Torre Memorial Hospital

POLICY:

All DPOTMH documents that are used to define, direct and control activities that the Quality Management System and healthcare service shall:

1. Be controlled
2. Clearly communicate the rule and provide instructions; and
3. Accurately reflect standards, regulations, and practices.

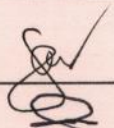

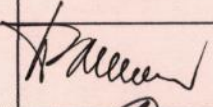




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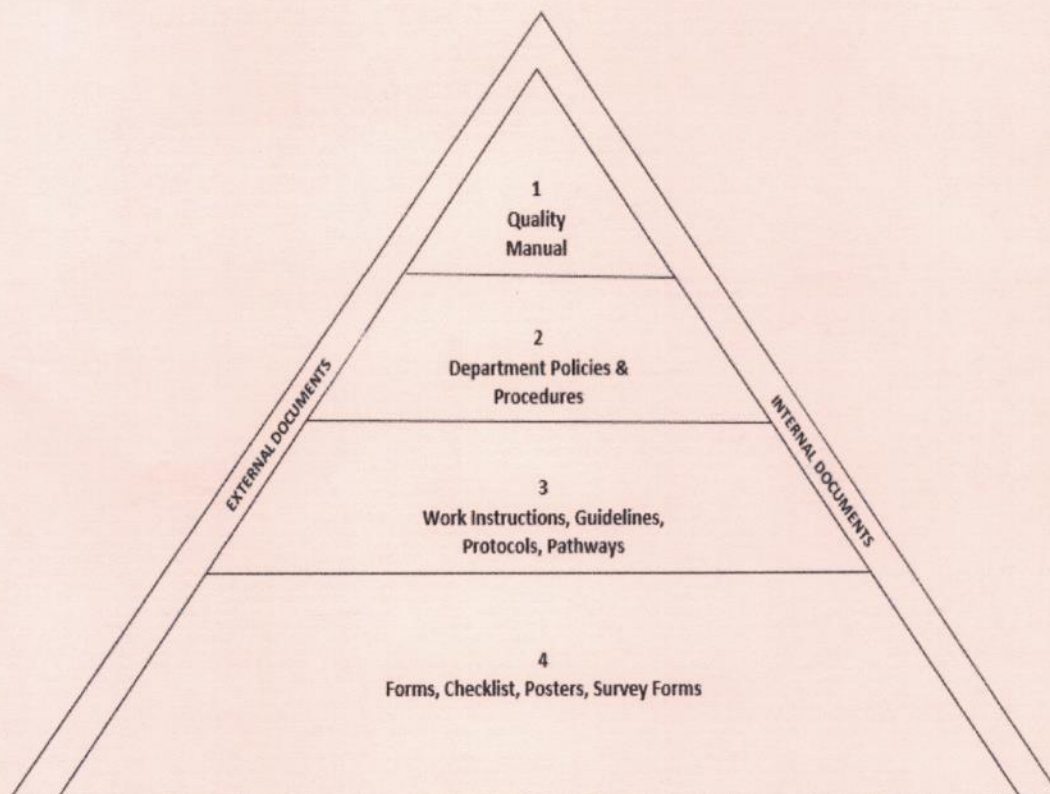
APPROVAL:

	Name/Title	Signature	Date
Prepared by:	AMY E. MORDEN, RN Accreditation & Documentation Supervisor		03-02-2020
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA Quality Assurance Supervisor		03-02-2020
Recommending Approval:	HENRY F. ALAVAREN, MD, FPSMID Total Quality Division Officer		3/2/20
Final approval:	GENESIS GOLDI D. GOLINGAN President and CEO		3/4/2020

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PROCEDURE:

1. All forms of communications and records shall be coded prior to distribution and dissemination. For level of documents:



CLASSIFICATION CODE:

LEVEL 1 -	QUALITY MANUAL
LEVEL 2 -	POLICIES AND PROCEDURES
LEVEL 3 -	STANDARD OPERATING PROCEDURES, WORK INSTRUCTIONS AND GUIDELINES
LEVEL 4 -	FORMS, RECORDS, MEMOS, AND OTHER REFERENCE DOCUMENTS

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2. **Total Quality Manual.** The Total Quality Manual shall be identified by the following code:

DPOTMH-TQD-AAA-001 where,

DPOTMH – Dr. Pablo O. Torre Memorial Hospital

TQD – Total Quality Division

AAA- Section

001- Document number

3. **Hospital-Wide Policy.** The Hospital-Wide Policy are documents describing the multidisciplinary approach to providing safe and effective healthcare services applicable to all hospital staffs.

All documents under this shall be identified by the following code:

DPOTMH-HW-P000 where,

DPOTMH – Dr. Pablo O. Torre Memorial Hospital

HW – Hospital-Wide

001- Document number

4. **Documents from Process Owners.** All documents under the different Sections , Departments, Divisions and Sections shall be identified by the following codes:


DPOTMH-AAA-BBB-P000 where,

DPOTMH – Dr. Pablo O. Torre Memorial Hospital

AAA – Division

BBB – Department owner

000 – Document Number

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5. **Forms and written communication.** All forms will be identified by the following codes:

DPOTMH-AAA-F000-0000 where,

DPOTMH – Dr. Pablo O. Torre Memorial Hospital

AAA – Department/ Section

F000- Document number

0000 – Effectivity Year

6. Communications

- A) **Memorandum.** All memoranda entered in DPOTMH's hospital communicator shall be automatically assigned the following codes:

DPOTMH - AAA-BBB-M:000-0000 where:

DPOTMH – Dr. Pablo O. Torre Memorial Hospital

AAA - Originator's Code (Departments, Divisions and Sections)

M - Memorandum (Memo)

000 - Document Number

0000 - Year Issued

- B) **Minutes of the Meeting.** All minutes of the meeting will be identified by the following codes:

DPOTMH-AAA-BBB-MOM-000-0000, where:

DPOTMH – Dr. Pablo O. Torre Memorial Hospital

AAA - Division

BBB - Department /Committee

MOM - Minutes of the Meeting



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000 - Document Number

0000 - Year of Issuance

7. **Job Order.** All requests entered in DPOTMH's online Job Order System shall be automatically assigned a code.
8. **Purchase Request and Purchase Order.** All Purchase Requests and Orders are assigned codes by the Materials Management Department.

9. List of Section/Department with the corresponding codes:

Admitting	-	ADMTG
Ancillary Division	-	ANC
Billing	-	BILL
Budget and Cost	-	BDGT
Cashier	-	CASH
Central Sterile Supply Room	-	CSSR
Civilian Relations Office	-	CRO
Corporate Finance Officer	-	CFO
Credit and Collection	-	CC
Data Privacy Office	-	DPO
Delivery Room	-	DR
Department of Emergency	-	DEM
Department of Imaging Science	-	DIS
Dietary	-	DIET
Documentation	-	DOC
Electronic Data Processing	-	EDP
Employees Compensation Services	-	ECS
Facilities Management	-	FM
Finance Audit	-	FIN
General Accounting	-	ACCTG
Hemodialysis Unit	-	HEMO




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Housekeeping	-	HSKPG
Human Resource Development	-	HRD
Infection Prevention and Control Unit	-	IPCU
Information Technology Department	-	ITD
Intensive Care Unit	-	ICU
Inventory and Cost	-	INC
Laboratory	-	LAB
Licensing	-	LIC
Linen	-	LINE
Maintenance and Engineering	-	MEN
Marketing	-	MKTG
Materials Management	-	MAT
Medical Arts Building	-	MAB
Medical Records	-	MRS
Medical Social Services	-	MSS
Neonatal Intensive Care Unit	-	NICU
Non-Invasive Cardio-Imaging Sciences	-	NICIS
Nursing Service Department	-	NSD
Office of the Chief Risk Officer	-	RISK
Office of the President	-	EXEC
Office of the Medical Director	-	MD
Operating Room	-	OR
Out-Patient Department	-	OPD
Post Anesthesia Care Unit	-	PACU
Pharmacy	-	PHARMA
PHIC	-	PhilHealth
Physical and Medical Fitness Center	-	PMFC
Pediatric Intensive Care Unit	-	PICU
Programmatic Management of Drug Resistant Tuberculosis	-	PMDRT
Quality Assurance	-	QA

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Respiratory Therapy Services	-	RTS
Total Quality Division	-	TQD
UK	-	Una Konsulta
Wellness Clinic	-	WELL

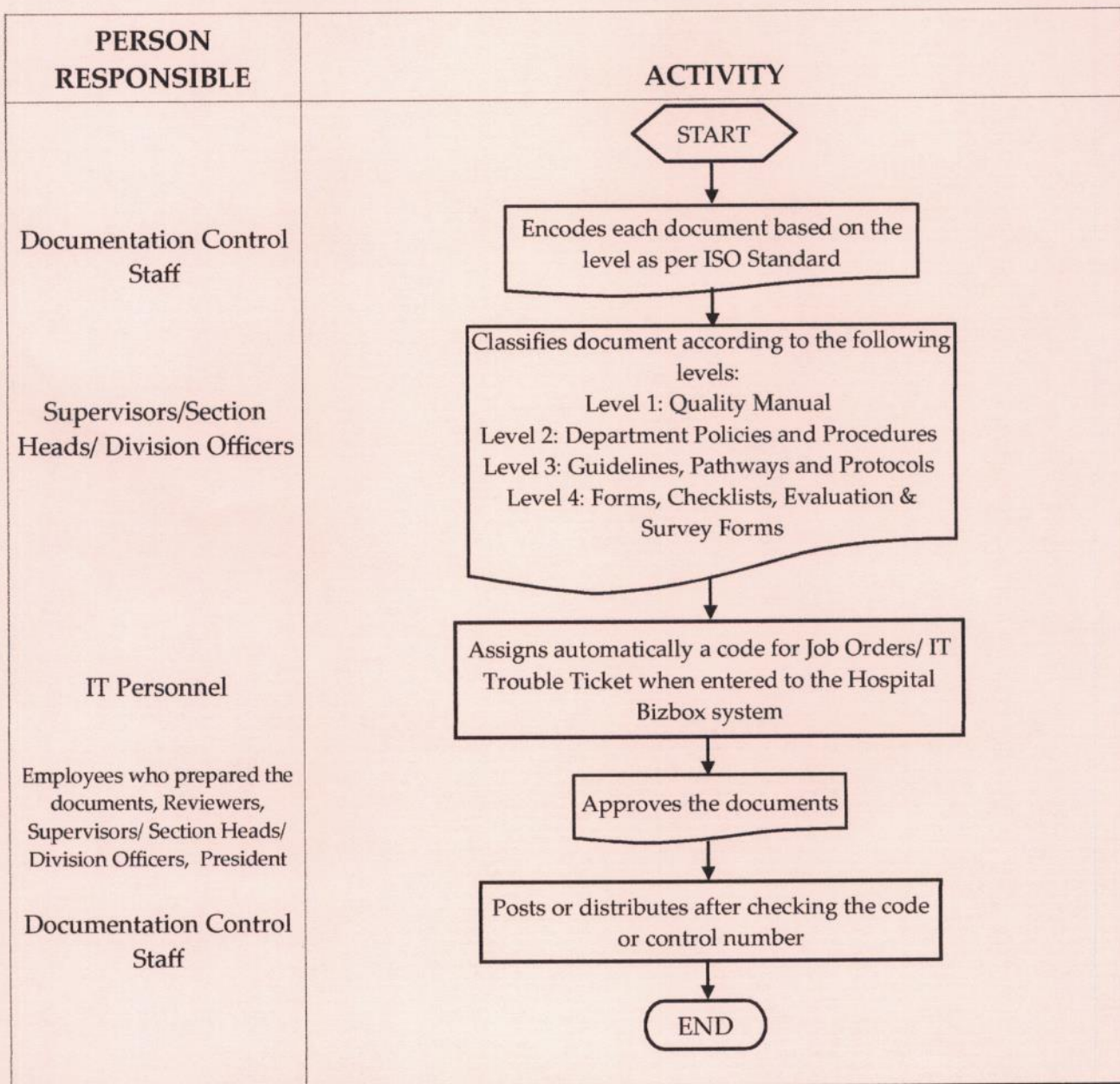



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FLOWCHART



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WORK INSTRUCTION:

1. Every concerned Process Owner (Policy-maker) who will create a new document or record and/or use an existing document or record shall be responsible for the implementation of these guidelines.

DOCUMENTATION:

New policy

DISSEMINATION:

Through Intranet and Unit Meeting or Orientation

REFERENCES:

1. <https://www.samhealth.org/-/media/SHS/Documents/English/003-General-SHS-Admin-Other/Professional%20Development/Provider%20Orientation/Policies/ISO-Control-of-Documents-003.pdf?la=en>