LICENSING REQUIREMENTS FOR
LEVEL 2 HOSPITAL

SERVICE CAPABILITY

___ 1. Administrative Service
    ___ 1.1. Personnel
    ___ 1.2. Accounting
        ___ 1.2.1. Bookkeeping
        ___ 1.2.2. Cashiering
        ___ 1.2.3. Billing
        ___ 1.2.4. Collection
    ___ 1.3. Medical Records
    ___ 1.4. Supply
    ___ 1.5. Housekeeping
    ___ 1.6. Laundry and Linen
    ___ 1.7. Maintenance
    ___ 1.8. Patient Transport Service
    ___ 1.9. Security
    ___ 1.10. Dietary
    ___ 1.11. Social Service

___ 2. Clinical Service
    ___ 2.1. General Clinical Care
        ___ 2.1.1. Medicine
        ___ 2.1.2. Pediatrics
        ___ 2.1.3. Obstetrics and Gynecology
        ___ 2.1.4. Surgery and Anesthesia
    ___ 2.2. Emergency Service
    ___ 2.3. Outpatient Service

___ 3. Nursing Service
    ___ 3.1. Intermediate Care and Management
    ___ 3.2. Health Education and Counseling

___ 4. Ancillary Service
    ___ 4.1. Secondary Clinical Laboratory
    ___ 4.2. Radiology – 1st Level
    ___ 4.3. Pharmacy

___ The service may be contracted out. A contract of service or memorandum of agreement with a service provider should be secured as a prerequisite for license to operate.
___ The service may be contracted out but subject to infection control mechanism. A contract of service or memorandum of agreement with a service provider should be secured as a prerequisite for license to operate.
___ The service may be contracted out but available for 24 hours 7 days a week. A contract of service or memorandum of agreement with a service provider should be secured as a prerequisite for license to operate.
___ A primary clinical laboratory may be considered; provided that a contract of service or memorandum of agreement with a secondary clinical laboratory located within the locality be secured, and results for emergency cases be transmitted within one hour.
___ Secure license from the Bureau of Health Devices and Technology.
___ Secure license from the Bureau of Food and Drugs.
LICENSING REQUIREMENTS FOR
LEVEL 2 HOSPITAL

PERSONNEL
___ 1. Administrative Service
   ___ 1.1. Chief of Hospital / Administrative Officer 1
   ___ 1.2. Clerk (pool) 1:50 beds
   ___ 1.3. Clerk (accounting) 1
   ___ 1.4. Medical Records Clerk 1:50 beds
   ___ 1.5. Storekeeper / Linen Custodian 1
   ___ 1.6. Utility Worker 1/shift
   ___ 1.7. Driver 1
   ___ 1.8. Nutritionist / Dietitian 1
   ___ 1.9. Cook / Food Service Worker 1
   ___ 1.10. Medical Social Worker 1
___ 2. Clinical Service
   ___ 2.1. Physician 1:20 beds at any time
       plus 1 reliever
   ___ 2.2. Physician (On Call) 1
___ 3. Nursing Service
   ___ 3.1. Chief Nurse / Supervising Nurse 1
   ___ 3.2. Staff Nurse 1:12 beds at any time
   ___ 3.3. Nursing Attendant / Midwife 1:24 beds at any time

1 The personnel may be contracted out. A contract of service or memorandum of agreement with a service provider should be secured as a prerequisite for license to operate.
2 The nutritionist / dietitian may be contracted out but residing within the locality. A contract of service or memorandum of agreement with a service provider should be secured as a prerequisite for license to operate.
3 In the absence of a medical social worker, patients may be referred to the municipal/city/provincial social worker. A memorandum of agreement between the hospital and the local government unit should be secured as a prerequisite for license to operate.
4 The physician must not go on continuous duty for more than forty-eight (48) hours.
5 The number of nurses supervised must not exceed fifteen (15). Otherwise, one (1) chief nurse and one (1) supervising nurse are required.
6 For every three (3) nurses, there must be one (1) reliever.
7 Nursing attendant / midwife is optional if the authorized bed capacity (ABC) is less than twenty-four (24) beds. If the ABC is 24 beds and above, the ratio will apply. For every three (3) nursing attendants / midwives, there must be one (1) reliever.
LICENSING REQUIREMENTS FOR
LEVEL 2 HOSPITAL

EQUIPMENT / INSTRUMENT

___ 1. Administrative Service
    ___ 1.1. Computer / Typewriter 1
    ___ 1.2. Fire Extinguisher 2
    ___ 1.3. Standby Generator 1
    ___ 1.4. Food Conveyor (closed type) 1
    ___ 1.5. Refrigerator / Freezer 1
    ___ 1.6. Stove 1
    ___ 1.7. Transport Vehicle 1

___ 2. Clinical Service
    ___ 2.1. Emergency Room and Outpatient Department
        ___ 2.1.1. Ambu Bag
            ___ 2.1.1.1. Adult 1
            ___ 2.1.1.2. Pediatric 1
        ___ 2.1.2. Clinical Weighing Scale 1
        ___ 2.1.3. EENT Diagnostic Set 1
        ___ 2.1.4. Emergency Cart 1
        ___ 2.1.5. Examining Table 1
        ___ 2.1.6. Gooseneck Lamp / Examining Light 1
        ___ 2.1.7. Instrument Table 1
        ___ 2.1.8. Medicine Cabinet 1
        ___ 2.1.9. Minor Surgery Instrument Set 1
        ___ 2.1.10. Nebulizer 1
        ___ 2.1.11. Neurological Hammer 1
        ___ 2.1.12. Oxygen Unit 1
        ___ 2.1.13. Sphygmomanometer
            ___ 2.1.13.1. Adult Cuff 1
            ___ 2.1.13.2. Pediatric Cuff Set 1
        ___ 2.1.14. Stethoscope 1
        ___ 2.1.15. Suction Apparatus 1
        ___ 2.1.16. Suturing Set 1
        ___ 2.1.17. Vaginal Speculum Set 1
        ___ 2.1.18. Wheelchair 1
        ___ 2.1.19. Wheeled Stretcher 1
    ___ 2.2. Surgical and Obstetrical Service
        ___ 2.2.1. Air-conditioning Unit 1
        ___ 2.2.2. Anesthesia Machine 1
        ___ 2.2.3. Bassinet 1
        ___ 2.2.4. C/S Set 1
        ___ 2.2.5. D/C Set 1
        ___ 2.2.6. Delivery Set 1
        ___ 2.2.7. DR Light 1
        ___ 2.2.8. DR Table with Stirrup 1

1 Available for 24 hours 7 days a week.
2 Or its equivalent.
LICENSING REQUIREMENTS FOR LEVEL 2 HOSPITAL

___ 2.2.9. Infant Weighing Scale 1
___ 2.2.10. Instrument Table 1
___ 2.2.11. Kelly Pad 1
___ 2.2.12. Laparotomy Set 1
___ 2.2.13. Laryngoscope with Blades 1
___ 2.2.14. Major Surgical Instrument Set 1
___ 2.2.15. OR Light 1
___ 2.2.16. OR Table 1
___ 2.2.17. Oxygen Unit 1
___ 2.2.18. Sphygmomanometer
   ___ 2.2.18.1. Adult Cuff 1
   ___ 2.2.18.2. Pediatric Cuff Set 1
___ 2.2.19. Spinal Set 1
___ 2.2.20. Stethoscope 1
___ 2.2.21. Suction Apparatus 1
___ 2.2.22. Wheeled Stretcher 1

___ 2.3.1. Ambu Bag
   ___ 2.3.1.1. Adult 1/nursing unit
   ___ 2.3.1.2. Pediatric 1/nursing unit
___ 2.3.2. Bedside Table
___ 2.3.3. Clinical Weighing Scale 1/nursing unit
___ 2.3.4. Emergency Cart 1/nursing unit
___ 2.3.5. Patient Bed
___ 2.3.6. Nebulizer 1/nursing unit
___ 2.3.7. Oxygen Unit 1/nursing unit
___ 2.3.8. Sphygmomanometer
   ___ 2.3.8.1. Adult Cuff 1/nursing unit
   ___ 2.3.8.2. Pediatric Cuff Set 1/nursing unit
___ 2.3.9. Stethoscope 1/nursing unit
___ 2.3.10. Suction Apparatus 1/nursing unit

___ 2.4. Central Sterilizing and Supply Room
   ___ 2.4.1. Autoclave 1

The number depends on authorized bed capacity (ABC).
LICENSING REQUIREMENTS FOR
LEVEL 2 HOSPITAL

PHYSICAL PLANT

___ 1. Administrative Service

___ 1.1. Lobby
   ___ 1.1.1. Waiting Area
   ___ 1.1.2. Information and Reception Area
   ___ 1.1.3. Toilet

___ 1.2. Business Office

___ 1.3. Medical Records Room

___ 1.4. Office of the Chief of Hospital

___ 1.5. Laundry and Linen Area

___ 1.6. Maintenance and Housekeeping Area

___ 1.7. Parking Area for Transport Vehicle

___ 1.8. Supply Room

___ 1.9. Waste Holding Room

___ 1.10. Dietary
   ___ 1.10.1. Dietitian Area
   ___ 1.10.2. Supply Receiving Area
   ___ 1.10.3. Cold and Dry Storage Area
   ___ 1.10.4. Food Preparation Area
   ___ 1.10.5. Cooking and Baking Area
   ___ 1.10.6. Serving and Food Assembly Area
   ___ 1.10.7. Washing Area
   ___ 1.10.8. Garbage Disposal Area
   ___ 1.10.9. Dining Area
   ___ 1.10.10. Toilet

___ 1.11. Cadaver Holding Room

___ 2. Clinical Service

___ 2.1. Emergency Room
   ___ 2.1.1. Waiting Area
   ___ 2.1.2. Toilet
   ___ 2.1.3. Nurse Station
   ___ 2.1.4. Examination and Treatment Area with Lavatory/Sink
   ___ 2.1.5. Observation Area
   ___ 2.1.6. Equipment and Supply Storage Area
   ___ 2.1.7. Wheeled Stretcher Area

___ 2.2. Outpatient Department
   ___ 2.2.1. Waiting Area
   ___ 2.2.2. Toilet
   ___ 2.2.3. Admitting and Records Area
   ___ 2.2.4. Examination and Treatment Area with Lavatory/Sink
   ___ 2.2.5. Consultation Area

When the services are contracted out, these areas are not required. However, a contract of service or memorandum of agreement with a service provider should be secured as a prerequisite for license to operate.

When OPD and ER are combined, only this area under OPD is required.
LICENSING REQUIREMENTS FOR
LEVEL 2 HOSPITAL

2.3. Surgical and Obstetrical Service
   2.3.1. Major Operating Room
   2.3.2. Delivery Room
   2.3.3. Sub-sterilizing Area/Work Area
   2.3.4. Sterile Instrument, Supply and Storage Area
   2.3.5. Scrub-up Area
   2.3.6. Clean-up Area
   2.3.7. Dressing Room
   2.3.8. Toilet
   2.3.9. Nurse Station/Work Area
   2.3.10. Wheeled Stretcher Area
   2.3.11. Janitor’s Closet

2.4. Nursing Unit
   2.4.1. Patient Room
   2.4.2. Toilet
   2.4.3. Isolation Room with Toilet
   2.4.4. Nurse Station
   2.4.5. Treatment and Medication Area with Lavatory/Sink

2.5. Central Sterilizing and Supply Room
   2.5.1. Receiving and Releasing Area
   2.5.2. Work Area
   2.5.3. Sterilizing Area
   2.5.4. Sterile Supply Storage Area

2.6. Nursing Service
   2.6.1. Office of the Chief Nurse

3. Ancillary Service
   3.1. Secondary Clinical Laboratory
      3.1.1. Clinical Work Area with Lavatory/Sink
      3.1.2. Pathologist Area
      3.1.3. Toilet
   3.2. Radiology – 1st Level
      3.2.1. X – Ray Room with Control Booth, Dressing Area and Toilet
      3.2.2. Dark Room
      3.2.3. Film File and Storage Area
      3.2.4. Radiologist Area
   3.3. Pharmacy

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3 A minimum of 20 square meters in clinical work area is required (excluding toilet, extraction and reception area).
2 A minimum of 15 square meters in floor area is required.