



Republic of the Philippines
Department of Education
Region V
SCHOOLS DIVISION OF SORSOGON

January 20, 2026

DIVISION MEMORANDUM
No. 25, s. 2026

2026 SCHOOLS DEWORMING MONTH IMPLEMENTATION

TO: Assistant Schools Division Superintendent
Chiefs, SGOD and CID
Public Schools District Supervisors / OIC – PSDSs
Public Elementary and Secondary School Heads
Division School Nurses and other Health Personnel
All others concerned.

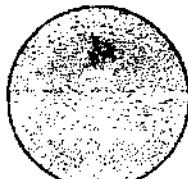
1. In line with the Department of Education's commitment in safeguarding the health of the learners, and in support of Department of Health National Deworming Program, this office hereby announces the conduct of Schools Deworming month starting this **January 21, 2026(2nd round)** and **July 2026(1st round)**
2. This activity aims to cover all enrolled learners from kindergarten to Grade 12.
3. The guidelines on mass deworming administration stipulated in DepEd Memorandum No. 80 s. 2015 must be observed by DepEd and DOH personnel. No child will be dewormed without parents permit. Likewise, learners must be in full stomach before the intake of deworming tablet
4. The schools are enjoined to promote the deworming program through advocacy. RHU personnel will be assisted by the School Health Section personnel to dispense, give assistance and administer proper management of any adverse reaction following deworming.
5. Non-medical staff are not allowed to administer deworming medication to prevent error and untoward incident in the implementation of the program.




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6. This memorandum includes the Regional Memorandum No. 1670 s. 2025 Advisory on the Mandatory Implementation of the IHCP Reporting System, which requires all Registry Form data to be submitted using the new standardized format, hence all schools must coordinate with RHU personnel and Deped Nurses for assistance with the data input process into the STH Registry Form. Attached herewith is the link for STH Bicol Registry 2026 <https://bit.ly/STHBicolRegistry2026>
7. Schools are requested to submit the National School Deworming Month (NSDM) **School Level Reporting Form 2** reports to Schools Division Office of Sorsogon Province, School Health Section.
8. Travel, meals and other incidental expenses incurred in this activity are chargeable to local funds/school MOOE subject to the usual accounting and auditing rules and regulations.
9. This Memorandum shall also serve as an **Official Travel Order**.
10. For information, guidance, and strict compliance of all concerned.


JOSE L. DONCILLO, CESO V
Schools Division Superintendent



Republic of the Philippines
Department of Education
Region V
SCHOOLS DIVISION OF SORSOGON



FORM 2

National School Deworming Month JULY - 1st Dose JANUARY - 2nd DOSE
School Level Reporting Form

Region: V

Province: SORSOGON

Division: SORSOGON

District: _____

Name of School: _____

Grade Level: _____

CONSOLIDATED ELEMENTARY / SECONDARY DEWORMING REPORT

Grade Level	No. of Enrolled Learners			No. of Learners Dewormed			Percentage (%)
	M	F	T	M	F	T	
SPED							
Kinder							
Grade 1							
Grade 2							
Grade 3							
Grade 4							
Grade 5							
Grade 6							
TOTAL							

Accomplished by:

Health Coordinator

Noted by:

School Principal

Date Accomplished:



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Region: V

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Grade Level	No. of Enrolled Learners			No. of Learners Dewormed			Percentage (%)
	M	F	T	M	F	T	
SPED							
Kinder							
Grade 1							
Grade 2							
Grade 3							
Grade 4							
Grade 5							
Grade 6							
TOTAL							

Accomplished by:

Health Coordinator

Noted by:

School Principal

Date Accomplished:



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FORM 2

National School Deworming Month JULY - 1st Dose JANUARY - 2nd DOSE
School Level Reporting Form

Region: V

Province: SORSOGON

Division: SORSOGON

District: _____

Name of School: _____

Grade Level: _____

CONSOLIDATED ELEMENTARY / SECONDARY DEWORMING REPORT

Grade Level	No. of Enrolled Learners			No. of Learners Dewormed			Percentage (%)
	M	F	T	M	F	T	
Grade 7							
Grade 8							
Grade 9							
Grade 10							
Grade 11							
Grade 12							
TOTAL							

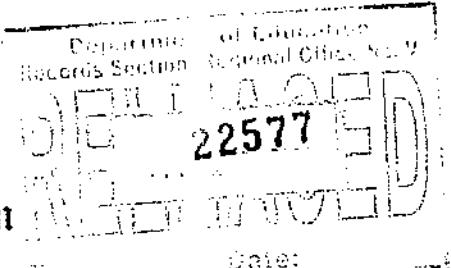
Accomplished by:

Health Coordinator

Noted by:

School Principal

Date Accomplished:



16 December 2025

REGIONAL MEMORANDUM
No. 1670 s. 2025

DOH-BICOL CHD REGIONAL ADVISORIES FOR THE CONDUCT OF THE
SCHOOL-BASED DEWORMING

To : Schools Division Superintendents
SGOD Chiefs
School Health and Nutrition Personnel
All Others Concerned

1. Please be informed of the following enclosed Regional Advisories of the Department of Health-Bicol Center for Health Development regarding the conduct of the school-based deworming (Soil-Transmitted Helminthiasis Mass Drug Administration) across the Bicol Region:
 - Regional Advisory No. 2025-0448 (Mandatory Implementation of the IHCP Reporting System for FY 2026)
 - Regional Advisory No. 2025-0275 (Allowable Interval on the Administration of Two Rounds for STH MDA)
2. For information, wide dissemination, and appropriate action.

GILBERT T. SADSAD
Regional Director

ESSD/dokish-jbbj
12/16/25



Republic of the Philippines
Department of Health
Bicol Center for Health Development
OFFICE OF THE REGIONAL DIRECTOR

BAGONG
BAGONG

REGIONAL ADVISORY

2025

DATE: July 29, 2025

TO: **PROVINCIAL HEALTH OFFICERS**
CITY HEALTH OFFICERS
MUNICIPAL HEALTH OFFICERS
RURAL HEALTH PHYSICIANS
PUBLIC HEALTH NURSES
PROGRAM COORDINATORS ON IHCP/ NTDs
DEPED COORDINATORS
CONCERNED STAKEHOLDERS

RECEIVED
RECORDS SECTION, REGIONAL OFFICE
DEC 11 2025
By: *[Signature]* Date: 12-11-15

FROM: **ROSA MARIA B. REMPILLO, MD, MCHM, CESE**
OIC Director *[Signature]*

SUBJECT: Allowable Interval on the Administration of Two Rounds for Soil – Transmitted Helminthiasis (STH) Mass Drug Administration (MDA)

The World Health Organization (WHO) recommends the annual and biannual conduct of STH MDA. While a six-month interval between rounds has been considered ideal, it is not explicitly mandated. Concerns have been raised regarding the allowable interval, especially in instances where logistical factors or delays in drug delivery impact the adherence to the prescribed MDA schedule.

1. Safety of Albendazole and Mebendazole:

- Currently, there are no studies explicitly demonstrating the safety of Albendazole tablets when administered at intervals less than six months. However, comprehensive drug-safety reviews of both Albendazole and Mebendazole have shown no occurrence of severe adverse events.

2. Rationale for Shortening Intervals:

- Some studies suggest that shortening the interval between MDA rounds may effectively limit the re-establishment of STH species. International experiences, such as those in some countries, include conducting repeated MDAs (2, 3, or 4 times a year) for a total of three years, maintaining a minimum 3-month interval per round.

3. Regional Guidance for Local Healthcare Providers:

- Local healthcare providers within the Bicol Region are advised to assess the feasibility of conducting MDA activities with intervals less than six (6) months to avoid significant readjustments to the prescribed MDA schedule.
- **IMPORTANT:** This flexibility in interval is **ONLY APPLICABLE** when there are unavoidable delays in the delivery of MDA drugs or other logistical constraints that prevent strict adherence to the six-month interval.

Serbisyo ng Salud Bicolano

Legazpi City * Trunk line (052) 742-5555*

Website: <http://www.bicol.doh.gov.ph> * email address: records@bicol.doh.gov.ph



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Bicol Center for Health Development
OFFICE OF THE REGIONAL DIRECTOR



- **Adherence to the prescribed MDA schedule remains highly encouraged** as the primary approach. Any deviation should be carefully considered and justified based on the aforementioned circumstances.

The Department of Health will continue to monitor new evidence regarding the optimal interval for STH MDA rounds. Should new scientific evidence become available, an updated advisory will be issued accordingly.

For any clarifications or assistance, please coordinate with **Mr. Darryl B. Balane**, Regional Integrated Helminth Control Program Manager, through email at darryl.balane@bicol.doh.gov.ph.

Thank you for your continued commitment to public health.

For the information and guidance of all concerned.

Thank you.

Serbisyo ng Salud Bicolano

Legazpi City * Trunk line (052) 742-5555*

Website: <http://www.o8.doh.gov.ph> * email address: records@bicol.doh.gov.ph



December 10, 2025

REGIONAL ADVISORY

No. 2025-20250448

TO: PROVINCIAL, CITY, AND MUNICIPAL HEALTH OFFICERS
PROVINCIAL, CITY, AND MUNICIPAL INTEGRATED HELMINTH CONTROL (IICP) COORDINATORS
DEPARTMENT OF EDUCATION (DEPED) IICP COORDINATOR
BARANGAY HEALTH WORKERS (BHWs)
HUMAN RESOURCES FOR HEALTH (HRH)
PROVINCIAL DOH OFFICERS

FROM: ROSA MARIA B. REMPILLO, MD, MCRM, CESE
OIC-Director IV

For and By the Authority of MSD Chief:

DANTE F. ATENTO
MSD Chief

SUBJECT: Mandatory Implementation of the Integrated Helminth Control Program (IICP) Reporting System for Fiscal Year 2026, Aligned with Field Health Services and Information System (FHSIS) and Department of Health – Central Office (DOH-CO) Directives

This advisory is issued pursuant to the DOH-CO directive on the standardization and integration of health program reporting systems, specifically incorporating updates into the FHSIS. Effective January 1, 2026, all data collection, consolidation, and submission for the IICP, including Mass Drug Administration (MDA) coverage, shall utilize the newly developed reporting form.

Soil-Transmitted Helminthiasis (STH) Registry Form:

<https://tinyurl.com/BicolRegionRegistry2026>

This new system is designed to provide a more accurate and comprehensive view of program coverage, operational efficiency, and disease burden reduction across the region, ensuring that local data is seamlessly integrated into the national health surveillance structure.

1. Mandatory Compliance and Data Quality

A. All required reports must be submitted to the DOH – Regional Office via established channels no later than 15 working days after the end of the reporting period (quarterly).

B. Data entries must reflect accurate and verified figures. All program coordinators are responsible for data validation against physical records, ensuring consistency between collected forms (e.g., tally sheets, consent forms) and the final submitted report.

C. Reports generated from this new system will serve as the official basis for program monitoring, performance evaluation, and future budget and resource allocations from the DOH-CO. Official

Serbisyo ng Solid Bicolion

Legazpi City * Trunk line (052) 742 5555*

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* email address: records@bicol.doh.gov.ph



FHSIS reports shall be extracted solely from this system. Non-compliance or submission of data using obsolete forms will lead to report rejection.

II. Critical Inter-Agency Coordination

Entity	Primary Role in Reporting	Key Action
Provincial, City, and Municipal IICP Coordinators and/or BHWs	Responsible for all Community-Based (CB) clients and overall FHSIS submission.	Input all CB clients directly into the STH Registry sheet. Consolidate school-based reports submitted by DepEd Coordinators into the municipal/city FHSIS report.
DepEd IICP Coordinators	Responsible for all School-Based (SB) clients.	Input all SB clients directly into the STH Registry sheet. Ensure accurate data on MDA coverage and submit the relevant data outputs to the respective Rural Health Units (RHUs).

III. Mandatory Reporting Protocol

A. Navigate to your specific reporting sheet by following this hierarchy: Province > Municipality > Barangay.

B. Confirm that your sheet is correctly named (e.g., "STH Registry Barangay Sampaguita Municipality Province"). No renaming is required.

C. The only editable sheets are "STH Registry" and "Summary". All other sheets (e.g., STH Masterlist SB, STH Masterlist CB) are automated and will pull data automatically.

D. Data Entry in "STH Registry" Sheet: All patient and Mass Drug Administration (MDA) data must be entered ONLY into the "STH Registry" sheet.

E. Data Entry in "Summary" Sheet: You must input the actual and projected population of each target age group in the "Summary" sheet. The accomplishment percentage will be automatically computed based on the data provided in this sheet and the STH Registry sheet.

We anticipate your full cooperation and commitment to upholding the highest standards of data integrity and program management. For immediate concerns, please contact Mr. Darryl B. Balane, Regional IICP Coordinator at (052) 742-5555 local 5231, or via email at Darryl.Balane@bchd.doh.gov.ph.

For strict compliance and wide dissemination.