



Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City



TWENTIETH CONGRESS
First Regular Session

House Bill No. 4870

Introduced by Representative Nelson S. Legacion
Third Congressional District, Camarines Sur

Snakebite envenomation is a significant public health issue in the Philippines, particularly in rural and agricultural communities where human-snake encounters are frequent. The timely administration of anti-venom is a critical, life-saving intervention. However, there is no existing national law that mandates the systematic distribution and stockpiling of this vital medicine. As a result, access remains a pressing problem. Many frontline healthcare facilities, including Rural Health Units (RHUs), infirmaries, and smaller hospitals, often lack a sufficient supply.

This absence of a comprehensive legal framework forces victims to make costly and time-sensitive referrals to higher-level hospitals, which can lead to increased suffering, higher healthcare costs, and tragically, preventable deaths or severe disabilities. The proposed "Anti-Venom Distribution Act" directly addresses this legislative gap by institutionalizing the State's responsibility to ensure equitable access to essential medical care.

The bill establishes clear mechanisms for the Department of Health (DOH), in close coordination with local government units (LGUs), to identify high-risk areas and create strategic stockpiles at national, regional, and local levels. It also mandates that all RHUs, infirmaries, and hospitals in these areas maintain minimum stocks of appropriate anti-venom.

The measure also requires comprehensive training and capacity building for healthcare professionals on anti-venom administration, storage, and overall snakebite management. Additionally, it provides for vital public awareness campaigns to educate communities on prevention, first aid, and the urgency of seeking professional medical care.

By ensuring the expanded and consistent availability of anti-venom, this Act aims to significantly reduce snakebite-related illness and death. It is a crucial step towards safeguarding the lives and well-being of Filipinos, especially those in

vulnerable rural communities, while also strengthening the nation's public health emergency preparedness.

This bill builds on the legislative measure previously filed by Representative Carl Nicolas C. Cari during the 19th Congress, underscoring the persistent and recognized urgency of this issue at the national level. It further strengthens the proposed measure by making anti-venom more accessible to those afflicted by making it available to rural health units (RHUs) and infirmaries as well.

In view of the foregoing, the immediate passage of this measure is earnestly sought.


NELSON S. LEGACION
Representative, Third District Camarines Sur



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AN ACT MANDATING THE AVAILABILITY OF ANTI-VENOM IN ALL RURAL HEALTH UNITS, INFIRMARIES, AND HOSPITALS, PROVIDING GUIDELINES FOR STORAGE AND DISTRIBUTION, AND FOR OTHER PURPOSES

Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:

SECTION 1. *Short Title.* This Act shall be known as the "*Anti-Venom Distribution Act.*"

SECTION 2. *Declaration of Policy.* It is hereby declared the policy of the State to prioritize the health and safety of its citizens, especially those in vulnerable rural communities. The State recognizes the urgent need to ensure equitable access to life-saving medical interventions, including anti-venom, for victims of snakebite envenomation.

SECTION 3. *Definition of Terms.* – For purposes of this Act, the following terms shall be defined as follows:

- a) *Anti-Venom* – refers to a biological product used to treat venomous bites or stings by neutralizing the venom;
- b) *Hospitals* – refer to any healthcare facility, public or private, that provides medical and surgical treatment;
- c) *Infirmarys* – refer to healthcare facilities that provide primary medical care and basic emergency services but are not licensed as hospitals;

- d) *Rural Health Unit (RHU)* – refer to a primary-level healthcare facility established by the DOH in a municipality; and
- e) *Venomous Species* – refer to animals that inject venom, including but not limited to snakes, spiders, and marine animals.

SECTION 4. *Expanded Distribution of Anti-Venom.* The Department of Health (DOH), in coordination with local government units (LGUs), shall ensure the expanded and regular distribution of appropriate anti-venom to all Rural Health Units (RHUs), infirmaries, and public and private hospitals, particularly those in identified snake-prone areas.

SECTION 5. *Identification of Snake-Prone Areas.* The DOH, through its Epidemiology Bureau and in consultation with local health offices, shall establish a comprehensive list and regularly update the identification of municipalities and barangays considered as snake-prone areas based on epidemiological data, geographical characteristics, and reported incidences of snakebites.

SECTION 6. *Stockpiling and Inventory.*

(a) The DOH shall maintain a strategic national stockpile of anti-venom to ensure adequate supply;

(b) All RHUs, infirmaries, and hospitals in identified snake-prone areas shall maintain a minimum stock of appropriate anti-venom, as determined by the DOH based on the prevalence of venomous snake species in their respective localities; and

(c) Regular inventory and replenishment mechanisms shall be established to prevent stock-outs and ensure the viability of the anti-venom supply.

SECTION 7. *Training and Capacity Building.* The DOH shall develop and implement a comprehensive training program for healthcare professionals in RHUs, infirmaries, and hospitals on the proper administration, storage, and management of anti-venom, as well as on the diagnosis and management of snakebite envenomation. This training shall include protocols for referral to higher-level facilities when necessary.

SECTION 8. *Public Awareness and Education Campaign.* The DOH, in coordination with LGUs, shall conduct a continuous public awareness and education campaign in snake-prone areas on snakebite prevention, first aid measures, and the importance of seeking immediate medical attention at healthcare facilities equipped with anti-venom.

SECTION 9. *Funding.* The initial funding for the implementation of this Act shall be charged against the current appropriations of the Department of Health. Thereafter, such sums as may be necessary for the continuous implementation of this Act shall be included in the annual General Appropriations Act.

SECTION 10. *Implementing Rules and Regulations.* Within sixty (60) days from the effectivity of this Act, the Secretary of Health, in consultation with relevant

stakeholders, shall promulgate the necessary rules and regulations for the effective implementation of this Act.

SECTION 11. *Separability Clause.* If any provision or part of this Act is declared unconstitutional or invalid, the remaining parts or provisions not affected thereby shall remain in full force and effect.

SECTION 12. *Repealing Clause.* All laws, decrees, orders, rules, and regulations or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SECTION 13. *Effectivity.* This Act shall take effect fifteen (15) days after its complete publication in the Official Gazette or in a newspaper of general circulation.

Approved,