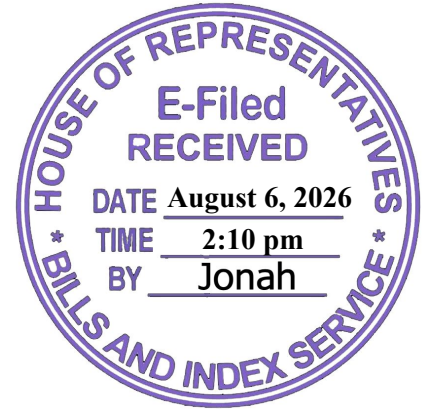


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Constitution Hills, Quezon City

TWENTIETH CONGRESS
Second Regular Session

HOUSE BILL NO. 10662



Introduced by 2nd District of Iloilo Representative
HON. KATHRYN JOYCE F. GORRICETA, M.D.

AN ACT
STRENGTHENING PASSENGER SAFETY IN AIR AND SEA TRAVEL BY
MANDATING ONBOARD EMERGENCY MEDICAL KITS, LIFE-SAVING
MEDICINES, AUTOMATED EXTERNAL DEFIBRILLATORS, AND OTHER
EMERGENCY MEDICAL EQUIPMENT, AND PRESCRIBING STANDARDS
THEREFOR

EXPLANATORY NOTE

Severe allergic reactions can become life-threatening within minutes if not treated immediately. The timely administration of epinephrine remains the standard and most effective intervention to prevent fatal outcomes. However, allergic reactions are only one of several medical emergencies that may occur while passengers are in transit.

In the context of air and sea travel, the ability to respond to such emergencies is inherently constrained. Passengers may be at cruising altitude or traveling across open waters, where immediate access to hospitals, ambulances, or medical professionals is not available. In these situations, emergency response must begin onboard, especially for time-critical conditions such as anaphylaxis, cardiac arrest, respiratory distress, asthma attacks, seizures, diabetic emergencies, fainting, trauma-related injuries, and other sudden medical episodes.

This concern is especially relevant in the Philippines, an archipelagic country composed of more than 7,600 islands, where mobility relies heavily on air and maritime transport. Data from the Civil Aviation Authority of the Philippines (CAAP) indicate that Philippine airports handle over 50 million passengers annually, while the Maritime Industry Authority (MARINA) reports that more than 30 million passengers travel by sea each year, particularly along inter-island routes. These figures highlight the magnitude of passengers potentially exposed to in-transit medical emergencies.

Despite this, the availability of emergency medical kits, life-saving medicines, automated external defibrillators, oxygen and breathing support devices, trauma care supplies, and trained crew is not uniformly required across air and sea passenger transport. This gap in onboard medical preparedness limits the capacity of operators to respond effectively during the first critical minutes of a medical emergency.

This bill seeks to address this gap by requiring air carriers and passenger ship operators to maintain onboard emergency medical kits, life-saving emergency medicines, emergency

injectable allergy medication such as epinephrine, automated external defibrillators, oxygen and breathing support devices, trauma care supplies, and other emergency medical equipment. It further ensures that trained crew are available to recognize common medical emergencies, operate emergency equipment, administer or assist in the use of emergency medicines, and coordinate with ground or shore-based medical facilities.

The measure mandates the Department of Health (DOH), in coordination with the Department of Transportation (DOTr), CAAP, and MARINA, to establish clear standards for minimum contents, quantities, storage, handling, maintenance, training, reporting, and compliance monitoring. This allows the law to remain flexible and responsive to evolving medical and transport safety standards.

By institutionalizing onboard medical readiness, this measure strengthens emergency response capability, enhances passenger safety, and upholds the State's duty to protect the health and welfare of the traveling public.

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


KATHRYN JOYCE F. GORRICETA, M.D.
Representative
2nd District of Iloilo

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THEREFOR

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

SECTION 1. *Short Title.* This Act shall be known as the “*Onboard Emergency Medical Response Act.*”

SEC. 2. *Declaration of Policy.* It is the policy of the State to protect the health, safety, and welfare of passengers in air and sea travel. Recognizing that medical emergencies may occur while passengers are in transit and may become fatal without immediate intervention, the State shall ensure the availability of onboard emergency medical kits, life-saving emergency medicines, automated external defibrillators, oxygen and breathing support devices, trauma care supplies, and other portable emergency response equipment, supported by trained personnel, proper storage and handling, and effective coordination with appropriate medical services.

SEC. 3. *Definition of Terms.* As used in this Act:

- (a) *Air Carrier* refers to any person, partnership, corporation, or entity engaged in the business of air transportation of passengers operating within Philippine jurisdiction, whether domestic or international;
- (b) *Passenger Ship* refers to any inter-island or international vessel engaged in the carriage of passengers, operating within Philippine jurisdiction;
- (c) *Emergency Medical Kit* refers to a standardized onboard medical kit containing life-saving emergency medicines, medical supplies, administration devices, and other materials necessary for the immediate management of common in-transit medical emergencies, including severe allergic reactions, cardiac-related emergencies, respiratory distress, seizures, diabetic emergencies, trauma, bleeding, and other urgent medical conditions, as may be prescribed by the Department of Health;

- (d) *Emergency Injectable Allergy Medication* refers to epinephrine or adrenaline indicated for the emergency treatment of anaphylaxis, in the form of autoinjectors or ampules/vials with appropriate administration devices, and such other medications as may be approved by the Department of Health for severe allergic reactions;
- (e) *Automated External Defibrillator or AED* refers to a portable medical device capable of analyzing heart rhythm and delivering an electric shock, when necessary, to assist persons experiencing sudden cardiac arrest;
- (f) *Emergency Medical Equipment* refers to AEDs, oxygen and breathing support devices, basic airway support devices, trauma care supplies, emergency medical response bags or portable response units, and other medical devices or equipment prescribed by the DOH, in coordination with the DOTr, CAAP, and MARINA;
- (g) *Life-Saving Emergency Medicines* refers to medicines prescribed by the DOH for the immediate management of urgent medical conditions during air or sea travel, including medicines for severe allergic reactions, cardiac-related emergencies, respiratory distress, seizures, diabetic emergencies, pain, fever, trauma-related conditions, and other emergency conditions;
- (h) *Medical Emergency* refers to any sudden illness, injury, or condition occurring during air or sea travel which requires immediate medical attention to prevent death, serious harm, or deterioration of the passenger's condition;
- (i) *Trained Crew* refers to crew members who have completed DOH-prescribed training on basic life support, recognition of common medical emergencies, use of AEDs and emergency medical equipment, administration or assistance in the use of emergency medicines, management of anaphylaxis, and post-incident monitoring and referral procedures.

SEC. 4. Coverage. This Act shall apply to all domestic and international air carriers operating flights within Philippine jurisdiction, and all inter-island and international passenger ship operators operating voyages within Philippine jurisdiction.

SEC. 5. Mandatory Availability of Onboard Emergency Medical Kits, Medicines, and Equipment. To safeguard passenger health and safety during travel, all air carriers and passenger ship operators shall ensure the availability of onboard emergency medical kits, life-saving emergency medicines, emergency injectable allergy medication, AEDs, oxygen and breathing support devices, trauma care supplies, and other portable emergency response equipment, subject to the following requirements:

- a) **Stock and Equipment Requirement.** — Air carriers and passenger ship operators shall ensure the continuous availability of emergency medical kits, emergency medicines, AEDs, and other emergency medical equipment on board at all times during operation. Such obligation shall be non-delegable.
- b) **Minimum Contents, Quantities, and Configuration.** — Within six (6) months from the effectivity of this Act, the DOH, in coordination with the Department of Transportation (DOTr), CAAP, and MARINA, shall prescribe the minimum contents, quantities, dosage configurations, equipment specifications, redundancy requirements, and operational standards for onboard emergency medical kits and equipment, taking into account passenger capacity, flight or voyage duration, route characteristics, aircraft or vessel type, and access to nearby medical facilities.
- c) **Required Emergency Response Components.** — The standards prescribed under this Act shall include, at a minimum, appropriate medicines, supplies, and equipment for the immediate response to severe allergic reactions, sudden cardiac arrest, respiratory

distress, seizures, diabetic emergencies, trauma, bleeding, pain, fever, and other common medical emergencies during travel.

- d) AED Requirement. — Air carriers and passenger ship operators shall maintain at least one (1) functional AED on board, or such number of AEDs as may be prescribed by the DOH, CAAP, and MARINA based on passenger capacity, aircraft or vessel size, and travel duration.
- e) Storage and Accessibility. — Operators shall ensure proper storage conditions, temperature control where necessary, security, regular inspection, and timely replacement prior to expiry. Emergency medical kits, medicines, AEDs, and equipment shall be placed in secure but readily accessible locations for use by trained crew during emergencies.
- f) Maintenance and Inspection. — Operators shall maintain a regular inspection and maintenance log for all emergency medical kits, medicines, AEDs, and equipment, including records of expiry dates, functionality checks, replacements, and corrective actions.
- g) Non-Discrimination. — Operators shall not refuse carriage or impose discriminatory conditions solely on the basis that a passenger has a known medical condition, disability, severe allergy, or risk of medical emergency, without prejudice to existing safety regulations and reasonable medical or operational requirements.

SEC. 6. *Training and Readiness Requirements.* All air carriers and passenger ship operators shall comply with the following training and readiness requirements:

- a) Every flight or voyage shall have at least two (2) trained crew members on duty who are capable of recognizing common medical emergencies, activating emergency response protocols, operating AEDs, administering or assisting in the use of emergency medicines and equipment, and coordinating with medical professionals or ground or shore-based medical facilities.
- b) The DOH shall prescribe training standards, including content, duration, certification and recertification intervals, competency requirements, and practical demonstration.
- c) The training standards shall include, at a minimum, basic life support, AED use, recognition and management of anaphylaxis, recognition of sudden cardiac arrest, respiratory distress, seizure episodes, diabetic emergencies, trauma and bleeding control, use of oxygen and airway support devices, proper documentation, and post-incident referral procedures.
- d) Operators shall adopt protocols for coordination with ground or shore-based medical facilities, including procedures for medical consultation, diversion, emergency docking, evacuation, or rapid disembarkation when medically necessary.

SEC. 7. *Incident Documentation and Reporting.* To ensure proper monitoring and accountability, all air carriers and passenger ship operators shall comply with the following incident documentation and reporting requirements:

- (a) Record of Use. — Any use or administration of emergency medicines, AEDs, oxygen or breathing support devices, trauma supplies, or other emergency medical equipment shall be recorded in an incident report indicating the time, circumstances, passenger condition, personnel involved, intervention made, and post-event actions taken, subject to applicable data privacy laws.
- (b) Reporting. — Operators shall submit anonymized incident reports to the DOH and the appropriate regulatory agency within forty-eight (48) hours from occurrence. The DOH

shall maintain a centralized database for monitoring, policy development, and improvement of onboard emergency medical standards.

SEC. 8. *Passenger Information and Public Awareness.* Operators shall inform passengers of the availability of onboard emergency medical assistance, emergency medical kits, AEDs, and trained crew support through safety briefing materials, printed notices, visual displays, or other appropriate means, and shall indicate procedures for requesting assistance during a medical emergency.

SEC. 9. *Good Samaritan Protection.* Any trained crew member who, in good faith, administers or assists in the administration of emergency medicines, operates an AED, uses emergency medical equipment, or provides immediate emergency medical assistance in accordance with this Act shall not be held civilly or criminally liable, provided that such act is performed without gross negligence, willful misconduct, or bad faith.

The same protection shall extend to licensed medical professionals or qualified volunteers on board who, in good faith, assist in responding to a medical emergency upon request of the crew or operator, subject to applicable laws and professional standards.

SEC. 10. *Implementing Rules and Regulations.* Within six (6) months from the effectivity of this Act, the DOH, in coordination with the DOTr, CAAP, and MARINA, and after consultation with relevant stakeholders, shall promulgate the implementing rules and regulations necessary for the effective implementation of this Act.

The IRR shall include standards on minimum emergency medical kit contents, life-saving medicines, AED requirements, oxygen and breathing support devices, storage and maintenance, inspection, training, reporting, and compliance monitoring.

SEC. 11. *Compliance Monitoring.* CAAP and MARINA shall integrate compliance checks under this Act into their existing inspection, audit, certification, and licensing systems. The DOH may conduct joint or unannounced inspections as necessary.

Compliance monitoring shall include verification of the availability, accessibility, expiry status, and operational condition of emergency medical kits, emergency medicines, AEDs, oxygen and breathing support devices, and other emergency medical equipment, as well as the certification status of trained crew.

SEC. 12. *Administrative Penalties.* Without prejudice to existing laws, rules, and regulations, noncompliance shall subject the operator to the following penalties:

1. First Offense — Fine of not less than One Hundred Thousand Pesos (₱100,000.00) and issuance of a compliance order;
2. Second Offense — Fine of not less than Three Hundred Thousand Pesos (₱300,000.00) and enhanced monitoring;
3. Third and Subsequent Offenses — Fine of not less than Five Hundred Thousand Pesos (₱500,000.00) and recommendation for suspension, restriction, or other appropriate regulatory action, subject to due process.

Each flight or voyage in violation shall constitute a separate offense.

SEC. 13. *Separability Clause.* If any provision of this Act is declared unconstitutional or invalid, the remaining provisions not affected thereby shall remain in full force and effect.

SEC. 14. *Repealing Clause.* All laws, decrees, executive orders, rules, and regulations inconsistent with this Act are hereby repealed, amended, or modified accordingly.

SEC. 15. *Effectivity.* This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

Approved,