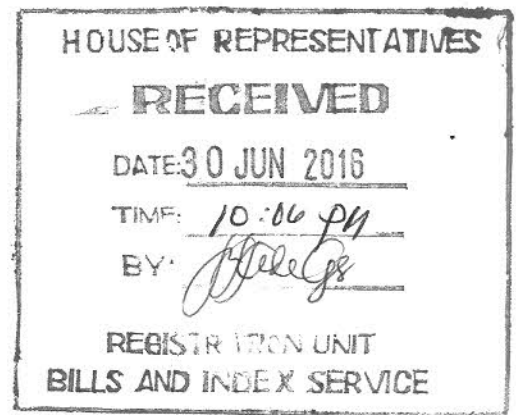


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Congress of the Philippines
Metro Manila

Seventeenth Congress
First Regular Session



House Bill No. 608

INTRODUCED BY REPRESENTATIVE SANDRA Y. ERIGUEL

EXPLANATORY NOTE

This Bill was approved during the 16th Congress by the House Committee on Health, which was chaired then by the predecessor of this Representation. It was eventually approved by the House Representatives on Third and Final Reading and later transmitted to the Senate for its consideration. However, the Senate was unable to finish its deliberation on the Bill due to lack of time. Hence, the Bill is being refiled in view of its importance.

This Bill seeks to strengthen and enhance the existing Organ Donation Program in the country. Although organ transplantation affords the highest quality of life for patients including those with kidney failure, it is sad to note that the number of transplants has been declining.

Based on the data from the National Kidney and Transplant Institute (NKTI), the largest transplant facility in the Philippines, the number of recipients of kidney transplant at the NKTI has gone down from 368 patients in 2008 to 238 recipients in 2013. The same dismal trend is true nationwide where 679 patients had kidney transplant in 2008 and only 342 patients underwent transplant in 2012.

The primary reason for this bleak scenario is the lack of organ donors.

Therefore, there is an urgent need to improve the existing Organ Donation Program. Regulated systems that remove disincentives on organ donation and afford incentives to donors simultaneously with a strong information and education drive on organ donation awareness are deemed as the solutions to increase organ donation.

More organ donors would mean more lives would be saved and significant savings for the government on costs spent on expensive dialysis, which has shorter survival rate compared to a transplant.

Approval of this Bill is earnestly requested.

[Signature]

SANDRA Y. ERIGUEL, M.D.
Representative, 2nd District, La Union

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AN ACT PROVIDING FOR A REVISED HUMAN ORGAN DONATION AND TRANSPLANTATION PROGRAM AND PROVIDING PENALTIES FOR VIOLATION THEREOF, REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 7170, AS AMENDED, ALSO KNOWN AS THE "ORGAN DONATION ACT OF 1991"

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 "Organ Donation Act".

ARTICLE I

GENERAL PROVISIONS

SEC. 2. *Coverage.* – This Act covers all government and private hospitals, health facilities, organ recovery organizations, medical and allied medical practitioners or professionals, foundations and nongovernment organizations that are involved in organ and tissue transplantation in the Philippines.

This Act also covers organ donations for transplantation purposes from deceased and living donors.

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

(a) *Allowable reimbursement* refers to the reasonable costs incurred by the donor associated with the legal removal, transportation, implantation, processing, preservation, quality control, and storage of a human organ, tissue, or part thereof, or the expenses for travel, housing, and lost wages, medical insurance and periodic health monitoring, life insurance, and cost of medicines of the donor to attain full recovery;

(b) *Brain death* refers to the irreversible cessation of all functions of the entire brain;

(c) *Clinical transplant coordinator* refers to a healthcare professional of a transplant center designated to coordinate with its transplant team, patients, donors, the organ recovery

organizations, the Philippine Organ Donation and Transplantation Board and the Philippine Network for Organ Sharing (PhilNOS) towards the performance of a transplant operation;

(d) *Commercial dealings* refer to:

(1) The sale, barter, or supply of human organ, tissue, or part thereof involving valuable consideration in whatever form;

(2) Acts involving trafficking of a human organ, tissue, or part thereof through whatever means; and

(3) The brokering for sale, barter or supply of a human organ, tissue, or part thereof whether for money or any other consideration in violation of this Act;

(e) *Death* refers to the irreversible cessation of circulatory and respiratory functions or the irreversible cessation of all functions of the entire brain, including the brain stem. A person shall be medically and legally dead if:

(1) In the opinion of the attending physician, based on the acceptable standards of medical practice, there is an absence of natural respiratory and cardiac functions, and attempts at resuscitation would not be successful in restoring these functions. In this case, death shall be deemed to have occurred at the time these functions ceased; or

(2) In the opinion of the consulting physician, concurred in by the attending physician, that on the basis of acceptable standards of medical practice, there is an irreversible cessation of all brain functions; and considering the absence of such functions, further attempts at resuscitation or continued supportive maintenance would not be successful in restoring such natural functions. In this case, death shall be deemed to have occurred at the time when these conditions first appeared.

The death of a person shall be determined in accordance with the acceptable standards of medical practice and shall be diagnosed separately by the attending physician and another consulting physician, both of whom must be appropriately qualified and suitably experienced in the care of such parties. The death shall be recorded in the patient's medical record;

(f) *Decedent* refers to a deceased individual, and includes a still-born infant or fetus;

(g) *Donor* refers to an individual who voluntarily donates organ, tissue, or part thereof, gratuitously to another who accepts it. The term also refers to an individual authorized in this Act to donate all or part of the body of a decedent;

(h) *Donor allocation scoring system* refers to the national scoring system by which allocation of organs from deceased donors shall be based;

(i) *Graft* refers to an organ that has been removed from the body of an organ donor for transplantation into a recipient;

(j) *Hospital* refers to an institution licensed, accredited or approved by the Department of Health (DOH) devoted primarily to the maintenance and operation of facilities for the diagnosis, treatment and care of individuals from illness, disease, injury or deformity, or in need of obstetrical or other medical and nursing care. The term “hospital” shall also be construed as any building or place where there are installed beds, or cribs, or bassinets for twenty-four (24)-hour use or longer by patients in the treatment of diseases, diseased conditions injuries, deformities, or abnormal physical and mental states, maternity cases, and all institutions such as those for convalescence, sanatoria care, infirmaries, nurseries, dispensaries and such other means by which they may be designated;

(k) *Human organ* refers to the kidney, liver, heart, lung, pancreas, and any other human organ, tissue, or part thereof, including bone marrow, bone, cornea, skin, muscle tissue, and any other transplantable part of a human body;

(l) *Human organ and tissue bank storage facility* refers to a facility licensed, accredited or approved by the DOH under the law for storage of human organs, tissues, or parts thereof;

(m) *Immediate family of the decedent* refers to the spouse, son or daughter of legal age, either parent, brother or sister of legal age and legal guardian over the person of the decedent, at the time of death;

(n) *Indigent* refers to an individual who has no visible means of income or whose income is insufficient for the subsistence of his family, and identified, listed or certified by the Department of Social Welfare and Development (DSWD) as poor pursuant to the National Household Targeting System for Poverty Reduction;

(o) *Living donor* refers to an individual who is willing to donate an organ, tissue, or part of the body while still alive, and may be either a:

(1) *Living related donor (LRD)* – a donor who is related to the recipient by blood within the fourth civil degree of consanguinity, including parents, children, siblings, nephews, nieces and first cousins; or

(2) *Living non-related donor (LNRD)* – a donor who is not related to the recipient by blood but who is willing to donate organs, tissues, or parts thereof. The term also applies to those related emotionally.

A LNRD is further classified as:

(i) *Directed living organ donor* – a donor who has a specific intended recipient to whom the organ shall be donated; or

(ii) *Non-directed living organ donor* – a living donor who is willing to donate an organ to any suitable recipient;

(p) *Organ transplant candidate* refers to a patient diagnosed to have end stage organ disease who is qualified to undergo an organ transplant procedure;

