EIGHTEENTH CONGRESS
REPUBLIC OF THE PHILIPPINES
First Regular Session



# HOUSE OF REPRESENTATIVES

Introduced by Representative Rufus B. Rodriguez

House Bill No. 3767

### **EXPLANATORY NOTE**

Mercury is a naturally-occurring heavy metal. At ambient temperature and pressure, mercury is a silvery-white liquid that readily vaporizes and may stay in the atmosphere for up to a year. When released to the air, mercury is transported and deposited globally. Mercury ultimately accumulates in lake bottom sediments, where it is transformed into its more toxic organic form, methyl mercury, which accumulates in fish tissue.

Mercury is highly toxic, especially when metabolized into methyl mercury. It may be fatal if inhaled and harmful if absorbed through skin. Around 80% of the inhaled mercury vapor is absorbed in the blood through the lungs. It may cause harmful effects to the nervous, digestive, respiratory, immune systems and to the kidneys, besides causing lung damage. Adverse health effects from mercury exposure can be: tremors, impaired vision and hearing, paralysis, insomnia, emotional instability, developmental deficits during fetal development, and attention deficit and developmental delays during childhood.

In 1991, the World Health Organization (WHO) concluded that a safe level of mercury exposure, below which no adverse effect, has never been established.

Many countries all over the world have banned the use of mercury-containing devices and thermometers and it is high time that the Philippine also ban the same. The Department of Health took the first step and issued an administrative order. It is now time to strengthen said administrative order and give it more teeth.

In view of the foregoing, early passage of this bill is earnestly sought.

RUFUS B. RODRIGUEZ

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#### AN ACT

BANNING THE USE OF MERCURY IN ALL PHILIPPINE HEALTH CARE FACILITIES AND INSTITUTIONS, AND PROVIDING PENALTIES FOR VIOLATIONS THEREOF

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

**SECTION 1.** Declaration of Policy – It is the policy of the State to protect and promote the right to health of the people and instill health consciousness among them.

SEC. 2. Scope and Coverage - This Act shall apply to all Health Care Facilities as defined hereunder.

## SEC. 3. Definition of Terms -

A. Health Care Facilities mean any of the following:

- a. Hospitals places devoted primary to the maintenance and operation of facilities for the diagnosis, treatment and acre of individuals suffering from illness, disease, injury or infirmity or in need of obstetrical or other medical and nursing care. The term "hospital" shall also be construed as any institution, building or place where there are installed beds or cribs or bassinets for twenty-four hour use or longer by patients in the treatment of diseases, diseased-condition, injuries, deformities or abnormal physical or mental states, maternity cases, and sanitorial or sanitarial care infirmities, nurseries, dispensaries, and such other means by which they may be designated.
- b. Infirmary a health facility that provides emergency treatment and care to the sick and injured, as well as clinical care and management to mothers and newborn babies.
- c. Birthing Home a health facility that provides maternity services on pre-natal and post-natal care, normal spontaneous delivery and care of newborn babies.
- d. Clinic shall mean a place in which patients avail of medical consultations or treatment on an out-patient basis and shall include the following:
  - i. Medical
  - ii. Ambulatory
  - iii. Dialysis
  - iv. Health Care Centers and Dispensaries
  - v. Surgical
  - vi. Alternative Medicine
  - vii. Denta
  - viii. Other clinical facilities not mentioned above that require a license / certification / accreditation from the Department of Health
- **B.** Mercury means any substance containing element mercury, either in pure form, as metallic salts or organo-metallic compounds.
- C. Mercury Audit a mercury audit aims to identify all the uses and sources of mercury, and the amount present in the facility.

D. Alternative to Mercury-containing devices/products - mercury-reduced and mercury-free products that are considered to be viable replacements for mercury-containing devices/products.

E. Hospital Waste Management Committee (HWMC) - means a group in the Health Care Facility with the overall responsibility of ensuring that health care waste

management plan are promoted and implemented.

F. Waste Management Officer (WMO) - means a person in the Health Care Facility responsible for the day-to-day operation and monitoring of the waste management system. In cases where the Health Care Facility has no HVVMC, the WMO shall be the person to assume the responsibility of ensuring the health care waste management plan of the facility as promoted and implemented.

G. Mercury Minimization Program - means a gradual phase-out plan for MDEP by a Health Care Facility in accordance with Section V and following the management plan

described in Annex B of this Administrative Order.

**SEC. 4.** It is hereby mandated that all health care facilities shall immediately discontinue the use of mercury-containing devices and the distribution of mercury thermometers to patients through the distribution of hospital admission/discharge kits: *Provided*, that if instant banning cannot be had, health care facilities shall follow the guidelines for the gradual phase-out of mercury provided in this Act.

April 28, 2008

SEC. 5. Guidelines for the Gradual Phase-Out of Mercury in Health Care Facilities -

- In order to ensure safety and contamination control, steps taken towards mercury elimination in facility must be consistent and predetermined. It is therefore a must to involve the whole facility in a dedicated Mercury Management and Minimization Program, with the goal of:
  - Raising awareness on the dangers posed by mercury and mercury-containing devices in all health care facilities and institutions; and

b. Developing a clear preference for the use of Alternative to Mercury-containing

Devices among health care personnel:

- 2. All Health Care Facilities are hereby tasked to designate a dedicated Mercury Management Team within two months from the approval of this Act. This team should be directly under the Hospital Waste Management Committee and is mandated to:
  - Conduct a Mercury Audit of their facility. This should include an assessment of the cost of switching to alternatives to mercury-containing devices;

b. Develop and manage a Mercury Minimization Program for their facility;

c. Draft and implement a purchasing policy that requires vendors to sign a mercury-content disclosure agreement covering products intended for purchase. A clear preference for Alternatives to Mercury-containing Devices where applicable should be in effect. Efforts should be made to communicate with suppliers about an eventual mercury-free purchasing policy and to work with staff on finding Alternative to Mercury-containing Devices;

d. Conduct a facility-wide information campaign and employee education on the consequences of continued mercury use with simultaneous personnel

training on preventing and proper handling of mercury spills; and

e. Identify and remove unnecessary practices that promote the use and distribution of mercury-containing medical devices;

3. Within 12 months from the effectivity of this Act, all health care facilities should have accomplished the following:

Fully implemented the Mercury Minimization Program developed for their facility;

b. Switched to alternatives from mercury-containing devices;

- Developed and implemented a program of waste segregation and recycling to further reduce the mercury waste stream in cases where no alternative products exist;
- d. Identified a dedicated mercury collection area within the facility;
- e. Developed a proper temporary mercury storage in the facility inaccessible to the public:
- f. Incorporated a mercury management module in their training program for new personnel; and
- g. Information materials on mercury are displayed and/or available in their facility for the benefit of their patients and the general public.
- **SEC.** 6. Penal Provisions Any health care facility caught violating any of the provisions of this Act shall be held liable to pay a fine of not less than Five hundred Thousand Pesos (P500,000) nor more than One Million Pesos (P1,000,000).
- **SEC.** 7. Implementing Rules The Department of Health shall issue such orders, rules and regulations and other issuances as may be necessary to ensure the effective implementation of this Act.
- **SEC. 8.** Separability Clause If for any reason, any part of or provision of this Act is declared unconstitutional or invalid, such parts not affected thereby shall remain in full force and effect.
- **SEC. 9.** Repealing Clause Any law, executive order, letter of instruction, rules and regulations, circulars, issuances or any part thereof inconsistent with any of the provisions of this Act is hereby repealed, modified or amended accordingly.
- **SEC. 10.** Effectivity This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved.