

10 SEP 20 P 1:39

SENATE  
S. No. 2530

RECEIVED BY: 

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

Anaphylaxis is a severe allergic reaction which can be life-threatening. It occurs when a child's immune system overreacts to an allergen. The whole body is affected, usually within minutes. When the allergen is detected by the immune system, it triggers the release of massive amounts of histamine and other chemicals, and can cause the body to go into anaphylactic shock. This produces rapid and sometimes life-threatening symptoms. Allergies are unpredictable and some children who have only ever reacted mildly may go on to have the more serious symptom of breathing difficulty, or wheeziness.<sup>1</sup>

This bill seeks to develop uniform guidance on how to create appropriate management and emergency plans for children with food allergies. The bill will direct the Secretary of Health to develop a voluntary policy for schools to implement measures to prevent exposure to food allergens and to ensure a prompt response if a child suffers a potentially fatal anaphylactic reaction.

  
MIRIAM DEFENSOR SANTIAGO

<sup>1</sup> <http://www.babycentre.co.uk/baby/health/anaphylaxis/>

10 SEP 20 P 1:39

SENATE  
S. No. **2530**

RECEIVED BY: 

Introduced by Senator Miriam Defensor Santiago

1 AN ACT  
2 DIRECTING THE SECRETARY OF HEALTH, IN CONSULTATION WITH THE  
3 SECRETARY OF EDUCATION, TO DEVELOP GUIDELINES TO BE USED ON A  
4 VOLUNTARY BASIS TO DEVELOP PLANS TO MANAGE THE RISK OF FOOD  
5 ALLERGY AND ANAPHYLAXIS IN SCHOOLS

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

6 SECTION 1. *Short Title.* – This Act shall be known as the “Food Allergy and  
7 Anaphylaxis Management Act”.

8 SECTION 2. *Establishment of Voluntary Food Allergy and Anaphylaxis Management*  
9 *Guidelines.* – Not later than one year after the date of effectivity of this Act, the Secretary of the  
10 Department of Health (DOH), in consultation with the Secretary of the Department of Education  
11 (DepEd), shall:

12 (A) develop guidelines to be used on a voluntary basis to develop plans for individuals to  
13 manage the risk of food allergy and anaphylaxis in schools and early childhood  
14 education programs; and

15 (B) make such guidelines available to local educational agencies, schools, early childhood  
16 education programs, and other interested entities and individuals to be implemented on a  
17 voluntary basis only.

18 The voluntary guidelines developed by the DOH Secretary shall address each of the  
19 following, and may be updated as the Secretary determines necessary:

20 (1) Parental obligation to provide the school or early childhood education program, prior  
21 to the start of every school year, with:

22 (A) documentation from their child’s physician or nurse -

- 1 (i) supporting a diagnosis of food allergy, and any risk of anaphylaxis,  
2 if applicable;
- 3 (ii) identifying any food to which the child is allergic;
- 4 (iii) describing, if appropriate, any prior history of anaphylaxis;
- 5 (iv) listing any medication prescribed for the child for the treatment of  
6 anaphylaxis;
- 7 (v) detailing emergency treatment procedures in the event of a reaction;
- 8 (vi) listing the signs and symptoms of a reaction; and
- 9 (vii) assessing the child's readiness for self-administration of prescription  
10 medication; and

11 (B) a list of substitute meals that may be offered to the child by school food  
12 service personnel.

13 (2) The creation and maintenance of an individual plan for food allergy management, in  
14 consultation with the parent, tailored to the needs of each child with a documented risk for  
15 anaphylaxis, including any procedures for the self-administration of medication by such children  
16 in instances where the children are capable of self-administering medication.

17 (3) Communication strategies between individual schools and providers of emergency  
18 medical services, including appropriate instructions for emergency medical response.

19 (4) Strategies to reduce the risk of exposure to anaphylactic causative agents in  
20 classrooms and common school areas such as cafeterias.

21 (5) The dissemination of general information on life-threatening food allergies to school  
22 staff, parents, and children.

23 (6) Food allergy management training of school personnel who regularly come into  
24 contact with children with life-threatening food allergies.

25 (7) The authorization and training of school personnel to administer epinephrine when the  
26 nurse is not immediately available.

27 (8) The timely accessibility of epinephrine by school or early childhood education  
28 program personnel when the nurse is not immediately available.

1           (9) The creation of a plan contained in each individual plan for food allergy management  
2 that addresses the appropriate response to an incident of anaphylaxis of a child while such child  
3 is engaged in extracurricular programs of a school or early childhood education program, such as  
4 non-academic outings and field trips, before and after school, and school-sponsored held on  
5 weekends.

6           (10) Maintenance of information for each administration of epinephrine to a child at risk  
7 for anaphylaxis and prompt notification to parents.

8           (11) Other elements the DOH Secretary determines necessary for the management of  
9 food allergies and anaphylaxis in schools and early childhood education programs.

10           SECTION 3. *Separability Clause.* – If any provision of this Act shall be declared  
11 unconstitutional, any other provision not affected thereby shall remain in full force and effect.

12           SECTION 4. *Repealing Clause.* – All laws, decrees, orders, rules and regulations, or  
13 parts thereof inconsistent with this Act are hereby repealed or amended accordingly.

14           SECTION 5. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication  
15 in at least two (2) newspapers of general circulation.

Approved,