

SIXTEENTH CONGRESS OF THE REPUBLIC )  
OF THE PHILIPPINES )  
First Regular Session )



'14 MAY 22 P 4 :23

SENATE  
S. No. 2236

RECEIVED BY: *ju*

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Introduced by Senator Miriam Defensor Santiago

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AN ACT  
AUTHORIZING AND SUPPORTING THE CREATION OF CARDIOMYOPATHY  
EDUCATION, AWARENESS, AND RISK ASSESSMENT MATERIALS AND  
RESOURCES BY THE SECRETARY OF HEALTH AND THE DISSEMINATION OF  
SUCH MATERIALS AND RESOURCES BY EDUCATION AGENCIES TO  
IDENTIFY MORE AT-RISK FAMILIES

EXPLANATORY NOTE

The Constitution, Article 2, Section 15 provides:

SEC. 15. The State shall protect and promote the right to health of the people and instill health consciousness among them.

This bill, a.k.a. the "HEARTS Act" would require the Secretary of Health and national patient advocacy and health professional organizations to develop educational materials and resources for public awareness, regarding the symptoms of cardiomyopathy, risk assessment, training in lifesaving procedures, and development and implementation of a cardiac emergency response plan, and disseminate them to schools and families as well as post them on the Department of Health's website.

The HEARTS Act will also encourage schools to be aware of and prepared for a cardiac emergency, and will encourage families to evaluate their family's cardiac history, check for cardiomyopathy symptoms and seek medical screening if necessary.<sup>1</sup>

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*Miriam Defensor Santiago*  
MIRIAM DEFENSOR SANTIAGO

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<sup>1</sup> This bill was originally filed by Representative Frank Pallone in the U.S. House of Representatives (H.R. 565; 113<sup>th</sup> Congress, First Session).

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

AN ACT  
AUTHORIZING AND SUPPORTING THE CREATION OF CARDIOMYOPATHY  
EDUCATION, AWARENESS, AND RISK ASSESSMENT MATERIALS AND  
RESOURCES BY THE SECRETARY OF HEALTH AND THE DISSEMINATION OF  
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SECTION 1. *Short Title.* – This Act shall be known as “Cardiomyopathy Health Education, Awareness, Risk Assessment, and Training in the Schools (HEARTS) Act”.

SECTION 2. *Definition of Terms.* – As used in this Act, the term:

(1) “Cardiomyopathy” means a rare heart condition, which is a disease of the heart muscle (myocardium) –

(A) the symptoms of which may vary from case to case, including:

(i) in some cases, the presentation of no symptoms (asymptomatic);

and

(ii) in many cases, the symptoms of a progressive condition that may result in an impaired ability of the heart to pump blood, fatigue, irregular heart-beats (arrhythmia), and, potentially, sudden cardiac death or heart failure; and

(B) the recognized types of which include dilated, hypertrophic, restrictive, arrhythmogenic right ventricular dysplasia, and left ventricular noncompaction.

(2) “National Non-Profit Advocacy Organizations Expert in All Forms of Cardiomyopathy” means organizations that provide support services to families or fund research, and work to increase public awareness and education regarding all types of cardiomyopathy.

(3) “School Administrators” mean a principal, director, or other supervisor or leader within an elementary school or secondary school, early education program, or child or day care center.

(4) “Schools” mean an early education program, child or day care center, or elementary school or secondary school.

SECTION 3. *Materials and Resources to Increase Education and Awareness of Cardiomyopathy among School Administrators, Educators, and Families.* –

(a) *Materials and Resources.* – Not later than 18 months after the date of effectivity of this Act, the Secretary of Health, in consultation with national patient advocacy and health professional organizations experts in all forms of cardiomyopathy, shall develop public education and awareness materials and resources to be disseminated to school administrators, educators, school health professionals, coaches, families, and other appropriate individuals. The materials and resources shall include:

(1) background information to increase education and awareness of cardiomyopathy among school administrators, educators, and families;

(2) a cardiomyopathy risk assessment worksheet for use by parents, guardians, or other caregivers;

(3) guidelines regarding the placement of automated external defibrillators in schools and child care centers;

(4) training information on automated external defibrillators and cardiopulmonary resuscitation; and

(5) recommendations for how schools and child care centers can develop and implement a cardiac emergency response plan.

(b) *Development of Materials and Resources.* – The Secretary of Health shall develop and update as necessary and appropriate the materials and resources under subsection (a) and, in support of such effort, the Secretary is encouraged to:

(1) establish an advisory panel composed of:

(A) representatives from multiple national patient advocacy organizations and medical professionals expert in all forms of cardiomyopathy; and

(B) representatives from other relevant government agencies; and

(2) engage in a memorandum of understanding or cooperative agreement with a national non-profit advocacy organization expert in all forms of cardiomyopathy.

(c) *Dissemination of Materials and Resources.* – Not later than 30 months after the date of effectivity of this Act, the Secretary of Health shall disseminate the materials and resources under subsection (a) in accordance with the following:

(1) *Distribution by Education Agencies.* – The Secretary of Health shall make available such materials and resources to educational agencies to distribute –

(A) to school administrators, educators, school health professionals, coaches and parents, guardians, or other caregivers, the cardiomyopathy education and awareness materials and resources under subsection (a);

(B) to parents, guardians, or other caregivers, the cardiomyopathy risk assessment worksheet described in subsection (a)(2); and

(C) to school administrators and school health professionals, the—

(i) guidelines described in subsection (a)(3);

(ii) training information described in subsection (a)(4); and

(iii) recommendations described in subsection (a)(5).

(2) *Dissemination to Health Departments and Professionals.* – The Secretary of Health shall make available such materials and resources to pediatricians, hospitals, and other health professionals, such as nurses and first responders.

(3) *Posting on Website.* –

(A) *Department of Health.* –

(i) *In General.* – The Secretary of Health shall post the materials and resources developed under subsection (a) on the website of the Department of Health.

(ii) *Additional Information.* – The Secretary of Health is encouraged to maintain on such website such additional information regarding cardiomyopathy as deemed appropriate by the Secretary.

(B) *Education Agencies.* – The Department of Education is encouraged to create webpages dedicated to cardiomyopathy and post the materials and resources developed under subsection (a) on such webpages.

(d) *Report to Congress.* – Not later than one year after the date of effectivity of this Act, and annually thereafter, the Secretary of Health shall submit to the appropriate committees of the Senate and the House of Representatives a report identifying the steps taken to increase public education and awareness of cardiomyopathy as outlined under this Act.

SECTION 4. *Authorization of Appropriations.* – There are authorized to be appropriated to carry out this Act such sums as may be necessary for the implementation of this Act for the year 2015 to 2018.

SECTION 5. *Separability Clause.* – If any provision or part hereof, is held invalid or unconstitutional, the remainder of the law or the provision not otherwise affected shall remain valid and subsisting.

SECTION 6. *Repealing Clause.* – Any law, presidential decree or issuance, executive order, letter of instruction, administrative order, rule or regulation contrary to or is inconsistent with the provision of this Act is hereby repealed, modified, or amended accordingly.

SECTION 7. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved,

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