



1 shall set up a climate conducive to the practice of pre-hospital emergency care  
2 and maximize the capability and potential of emergency medical technicians  
3 (EMTs) and institute a standard system of emergency medical service in the  
4 country.

5 SEC. 3. *Objectives.* – This Act has the following objectives:

6 (a) To supervise and regulate the practice of pre-hospital care  
7 profession;

8 (b) To provide program standardization of training for EMTs;

9 (c) To prescribe certification and re-certification requirements of  
10 EMTs;

11 (d) To establish and provide support services to pre-hospital  
12 emergency care system; and

13 (e) To adopt a national universal emergency telephone number.

14 SEC. 4. *Definition of Terms.* – For purposes of this Act, the following  
15 terms are hereby defined:

16 (a) *Accredited training institutions* refer to emergency medical services  
17 training institutions that offer training programs, courses and continuing  
18 education for EMTs, which were issued recognition and approval certificate by  
19 the Technical Education and Skills Development Authority (TESDA) and the  
20 Commission on Higher Education (CHED) based on the approved national  
21 standards prescribed by the National Pre-Hospital Care Council (NPHCC);

22 (b) *Emergency medical vehicle* refers to an ambulance or other vehicle  
23 for emergency medical care which provides the following: a driver's  
24 compartment; a patient compartment to accommodate an EMT or paramedic  
25 and two (2) litter patients (one patient located on the primary cot and a  
26 secondary patient on a folding litter located on the squad bench) so positioned  
27 that the primary patient can be given intensive life support during transit;  
28 equipment and supplies for emergency care at the scene as well as during

1 transport; two-way radio communication; and, when necessary, equipment for  
2 light rescue/extrication procedures. The emergency medical vehicle shall be  
3 designed and constructed to afford safety and comfort, and avoid the  
4 aggravation of injury or illness of a patient;

5 (c) *Pre-hospital advance life support* refers to advanced pre-hospital  
6 standards for the care of seriously ill or injured patient by appropriately trained  
7 and certified EMTs, which include Advanced Pre-Hospital Trauma Care,  
8 Advanced Pre-Hospital Cardiac Life Support and the care of high dependency  
9 patients for inter-hospital transfer;

10 (d) *Emergency Medical Services Medical Director* refers to a licensed  
11 physician or a local medical authority charged with the supervision of  
12 emergency medical services and the implementation of approved emergency  
13 medical treatment protocols set by the NPHCC that govern the practice of  
14 pre-hospital care profession;

15 (e) *Competency-based assessment* refers to evidence gathering and  
16 judgment by a duly appointed TESDA or CHED assessor who evaluates the  
17 technical and practical standards of skills, ability and knowledge of an  
18 emergency medical technician as required by the NPHCC in accordance with  
19 national standards for pre-hospital care profession;

20 (f) *Emergency medical technician (EMT)* refers to a *bona fide* holder  
21 of a valid EMT National Certificate (EMTNC) issued by the NPHCC  
22 signifying achievement of the promulgated competency standards as  
23 manifested in the procedures of the TESDA competency assessment in the case  
24 of TESDA level courses, and CHED certification system for bachelors degree  
25 in pre-hospital care, in full accordance with the agreed national standards for  
26 the pre-hospital care profession as laid down by the NPHCC;



1 (g) Prepare standard of operation for pre-hospital emergency care  
2 service providers to support best practice by pre-hospital emergency care  
3 practitioners;

4 (h) Establish and maintain a roster of certified EMTs;

5 (i) Develop standard for the design and construction of emergency  
6 medical vehicles;

7 (j) Develop standard for the outfitting and operation of emergency  
8 medical vehicles;

9 (k) Establish standard and operation protocols for emergency medical  
10 vehicles; and

11 (l) Engage in research on pre-hospital care, education, training, the  
12 formulation of curricula, and the evaluation of existing courses, assessment and  
13 examination procedures.

14 SEC. 6. *Membership of the Council.* – The members of the Council  
15 shall not exceed seventeen (17) and shall be composed of the following:

16 (a) *Ex officio* Members:

17 (1) A representative from the Department of Health (DOH);

18 (2) A representative from the Department of the Interior and Local  
19 Government (DILG);

20 (3) A representative from the Technical Education and Skills  
21 Development Authority (TESDA);

22 (4) A representative from the Commission on Higher Education  
23 (CHED); and

24 (5) A representative from the Professional Regulation Commission  
25 (PRC).

26 (b) Members to be Appointed by the Secretary of the Department of  
27 Health:

1 (1) One (1) nominee of a national organization recognized by the  
2 Secretary of the Department of Health and duly registered by the Securities and  
3 Exchange Commission as being representative of the profession of EMT  
4 within the Republic of the Philippines;

5 (2) Four (4) nominees of local health boards, one (1) each from the  
6 National Capital Region (NCR), Luzon, Visayas and Mindanao;

7 (3) Two (2) registered emergency medical practitioners, one (1)  
8 representing the Philippine College of Emergency Medicine and Acute Care  
9 (PCEMAC) and one (1) representing the Philippine Society of Emergency  
10 Care Practitioners (PSECP), respectively;

11 (4) One (1) consultant in cardiology representing the Philippine Heart  
12 Association (PHA);

13 (5) One (1) registered nurse holding a qualification in emergency room  
14 nursing or pre-hospital emergency care;

15 (6) One (1) representative from an educational or training institution  
16 providing EMT programs, which have been duly approved by TESDA or  
17 CHED, as applicable;

18 (7) One (1) representative from the Philippine Medical Association  
19 (PMA); and

20 (8) One (1) representative from the Private Hospital Association of the  
21 Philippines (PHAP).

22 *SEC. 7. Term of Office.* – No member of the Council shall serve for  
23 more than three (3) consecutive terms of two (2) years.

24 *SEC. 8. Powers and Functions.* – To carry out its mandate, the  
25 Council shall exercise the following powers and functions:

26 (a) Encourage and facilitate the organization of a network of EMTs to  
27 ensure the provision of emergency medical services to the general public on a  
28 national basis;

1 (b) Establish a Secretariat under an Executive Director for the  
2 administrative and day-to-day operations of the Council;

3 (c) Set up a system of networking and coordination with and among all  
4 existing government agencies for the effective implementation of programs and  
5 activities;

6 (d) Create committees and employ other mechanisms to help expedite  
7 the implementation of plans and strategies;

8 (e) Call upon and coordinate with other government and  
9 nongovernment medical and other institutions and agencies for assistance in  
10 any form;

11 (f) Generate resources from local, national and international entities,  
12 whether government or private sector, to fund its operations;

13 (g) Receive and accept donations and other conveyances, including  
14 funds, materials and services, by gratuitous title: *Provided*, That not more  
15 than thirty percent (30%) shall be used for administrative expenses;

16 (h) Prepare an annual budget of the Council and submit the same to the  
17 President for inclusion in the annual General Appropriations Act;

18 (i) Advise the President on matters pertaining to emergency medical  
19 services;

20 (j) Promulgate rules, regulations and undertake any and all measures as  
21 may be necessary to implement this Act; and

22 (k) Regulate activities related to the delivery of emergency medical  
23 services.

24 SEC. 9. *The Secretariat.* – The Council shall organize a Secretariat  
25 headed by an Executive Director. The Council shall fix its staffing pattern,  
26 determine the duties, qualifications, responsibilities and functions subject to  
27 the provisions of the existing compensation and position classification system,  
28 and determine the compensation scheme for the positions to be created upon

1 the recommendation of the Executive Director. The staffing pattern shall be  
2 approved and prescribed by the Council within one hundred twenty (120) days  
3 from the approval of this Act.

4 In establishing the Secretariat, the Council shall consider the need to  
5 address, among others, the following areas:

- 6 (a) Education and standards development;
- 7 (b) Research;
- 8 (c) Supervision and regulation;
- 9 (d) Policy, planning and research;
- 10 (e) Administration;
- 11 (f) Finance; and
- 12 (g) Programs for the following areas:
  - 13 (1) Human resource development;
  - 14 (2) Emergency medical vehicles; and
  - 15 (3) Emergency communications.

16 SEC. 10. *Registration.* – The Council shall issue certifications and  
17 licenses for the following:

- 18 (a) Accreditation of emergency medical vehicle providers; and
- 19 (b) Accreditation of training institutions for EMTs and related  
20 personnel.

21 SEC. 11. *Meetings.* – The Council shall meet at least once every  
22 quarter.

23 SEC. 12. *Program Plans.* – The Council shall, within three (3) months  
24 after having been officially constituted and finally staffed, adopt and  
25 immediately cause to be implemented, in coordination with medical and related  
26 agencies, a short-range program in support of relevant existing projects and  
27 activities; and within six (6) months, a long-range three (3)-year development  
28 program. This development program shall be developed and subjected to



1 annual review and revision by the Council in coordination with relevant public  
2 and private medical agencies and organizations.

### 3 CHAPTER III

#### 4 EMERGENCY MEDICAL TECHNICIANS (EMTs)

5 SEC. 13. *Creation of Plantilla Positions for Emergency Medical*  
6 *Technicians (EMTs).* – There shall be created a minimum number of plantilla  
7 positions for EMTs in the following government agencies within the next five  
8 (5) years upon approval of this Act:

- 9 (a) Specialized hospitals – Five (5) EMTs;  
10 (b) Regional hospitals – Five (5) EMTs;  
11 (c) Provincial hospitals - Three (3) EMTs;  
12 (d) Local government units - Three (3) EMTs; and  
13 (e) Other agencies as may be deemed necessary by the Council.

14 SEC. 14. *Scope of the Practice of an Emergency Medical Technician.* –  
15 The practice of an EMT involves services performed in responding to the  
16 perceived needs of an individual for immediate medical care in order to  
17 prevent loss of life or aggravation of physiological or psychological illness or  
18 injury delivered in a pre-hospital and inter-hospital care setting. For this  
19 purpose, the Council shall develop the scope of work of EMTs based on  
20 internationally-accepted standards.

21 SEC. 15. *Authorized Training Institution.* – Training programs, courses  
22 and continuing education for EMTs shall be conducted by an institution that  
23 has been granted a Certificate of Program Registration (COPR) by the TESDA  
24 or a Certificate of Accreditation as a Higher Education Institution (HEI) as  
25 well as program accreditation by the CHED. The requirements prescribed by  
26 the Council shall serve as the minimum requirement for program registration.

1           SEC. 16. *Certification, Registration and Re-certification.* – Schools  
2 and institutions accredited to offer education and training programs for EMTs  
3 shall be given the responsibility to certify their graduates as mandated by the  
4 Council. Registration and re-certification of EMTs in the Philippines shall be  
5 governed by the TESDA for EMT-Basic, EMT-Intermediate and EMT-  
6 Advance, and by the CHED for EMT-Paramedic levels. A certification is valid  
7 for a period of three (3) years. The TESDA shall re-certify EMTs upon  
8 submission of a competency-based assessment statement from a recognized  
9 Emergency Medical Services Medical Director.

10           (a) Emergency Medical Technician Basic Certification. – The  
11 following are the minimum requirements for the grant of an EMT-Basic  
12 Certification from the TESDA:

13           (1) At least twenty-one (21) years of age;

14           (2) Successfully completed an EMT-Basic Training Course and passed  
15 the practical test of EMT-Basic Skills prescribed by the NPHCC; and

16           (3) Passed the written examination given by the TESDA in full  
17 accordance with the requirements of the Council.

18           (b) Emergency Medical Technician Intermediate Certification. – The  
19 following are the minimum requirements for the grant of an EMT-Intermediate  
20 Certification from the TESDA:

21           (1) At least twenty-one (21) years of age;

22           (2) Successfully completed a training course for EMT-Intermediate and  
23 passed the practical test of EMT-Intermediate Skills prescribed by the Council;  
24 and

25           (3) Passed the written examination given by the TESDA in full  
26 accordance with the requirements of the Council.

1 (c) Emergency Medical Technician Advanced Certification. – The  
2 following are the minimum requirements for the grant of an EMT Advanced  
3 Certification from the TESDA:

4 (1) At least twenty-one (21) years of age;

5 (2) Successfully completed an EMT-Advanced Training Course and  
6 passed the practical test of EMT-Advance Skills prescribed by the Council;  
7 and

8 (3) Passed the written examination given by the TESDA in full  
9 accordance with the requirements of the Council.

10 (d) Emergency Medical Technician Paramedic Certification. – The  
11 following are the minimum requirements for the grant of an EMT-Paramedic  
12 Certification from the PRC:

13 (1) At least twenty-one (21) years of age;

14 (2) A certified graduate of an EMT-Paramedic bachelor degree  
15 program from a CHED-accredited higher education institution; and

16 (3) Passed the written examination for EMT-Paramedic administered  
17 by the PRC in full accordance with the requirements of the Council.

18 SEC. 17. *Schedule of Examination.* – Written examinations for EMTs  
19 in the Philippines shall be given by the TESDA and/or the PRC at least once  
20 every year.

21 SEC. 18. *Release of the Results of Examination.* – The results of the  
22 examination shall be released by the TESDA within ten (10) working days or  
23 by the PRC within two (2) months from the date of the examination.

24 SEC. 19. *Continuing Education.* – The Council shall develop a  
25 program for continuing education of EMTs as a condition for EMTs to  
26 maintain their license and accreditation.

1           SEC. 20. *Issuance of the Certificate of Registration and EMT*  
2 *Identification Card.* – A Certificate of Registration shall be issued to  
3 examinees who pass the EMT examinations given by the TESDA or the PRC.  
4 The Certificate of Registration shall remain in full force and effect until  
5 revoked or suspended in accordance with this Act. An EMT identification  
6 card, bearing the registration number, date of issuance and expiry date, duly  
7 signed by the TESDA Director-General or the PRC Chairman, shall likewise  
8 be issued to every registrant upon payment of the required fees. EMT  
9 identification card shall be renewed every three (3) years upon satisfying the  
10 requirements of the TESDA or the PRC as prescribed by the Council.

11           SEC. 21. *Disqualification.* – The TESDA, the PRC and/or the Council  
12 shall not accept an applicant for competency requirement nor issue a national  
13 certificate to any person who has been convicted by final judgment by a court  
14 of competent jurisdiction of any criminal offense involving moral turpitude, or  
15 has been found guilty of immoral or dishonorable conduct after investigation  
16 and due process, or has been declared to be of unsound mind by competent  
17 authority, or for other grounds as may be determined by the Council in the  
18 implementing rules and regulations. The reason for the refusal shall be set forth  
19 in writing.

20           SEC. 22. *Revocation or Suspension of the Certificate of Registration,*  
21 *EMT Identification Card or the Cancellation of Temporary/Special Permit.* –  
22 The Council, upon the recommendation of the TESDA or the PRC in  
23 accordance with the prescribed procedures and due process, may revoke or  
24 suspend the national certificate or EMT identification card.

25           SEC. 23. *Reinstatement, Re-issuance or Replacement of Certificate of*  
26 *Registration and EMT Identification Card* -- The TESDA or the PRC, upon  
27 the recommendation of the Council, in accordance with the rules and  
28 regulations may, after two (2) years from the date of revocation of Certificate

1 of Registration, reinstate any revoked Certificate of Registration and re-issue a  
2 suspended EMT identification card after compliance by the applicant with the  
3 requirements for reinstatement.

4 SEC. 24. *Roster of Certified Emergency Medical Technician.* – The  
5 Council, in coordination with the TESDA, the CHED, the PRC and the  
6 accredited professional organization, shall prepare, update and maintain a  
7 roster of certified EMTs.

8 SEC. 25. *Issuance of Temporary/Special Permit.* – Upon application  
9 and payment of the necessary fees and subject to the requirements specified by  
10 the Council, the TESDA or the PRC may issue temporary/special permits to  
11 Emergency Medical Services personnel from foreign countries whose services  
12 are urgently needed in the absence or inadequacy of local EMTs who can  
13 provide pre-hospital emergency care in the Philippines.

14 SEC. 26. *Registration Without Examination for Emergency Medical*  
15 *Technicians.* – All practicing EMTs at the time this Act is passed shall be  
16 deemed qualified for registration as an EMT if he/she is a graduate of an EMT  
17 program from a TESDA- or CHED-accredited public or private  
18 educational/training institution, has worked as an EMT in any local or  
19 international organization for at least one (1) year, and has been certified by an  
20 Emergency Medical Services Medical Director to have performed full EMT  
21 functions in a pre-hospital and inter-hospital care setting.

22 SEC. 27. *Registration with Examination for Emergency Medical*  
23 *Technicians.* – All practicing EMTs who are not graduates of an EMT  
24 program from a TESDA- or CHED-accredited public or private educational or  
25 training institution at the time this Act is passed shall be deemed qualified for  
26 registration through examination using the following procedure:

1 (a) All applicants must provide a full record of initial training  
2 completed as an EMT. This record must include details of the training  
3 establishment, a full syllabus of training completed, a record of ongoing  
4 training and proof of having worked as an EMT in any local or international  
5 organization for at least one (1) year and has been certified by an Emergency  
6 Medical Services Medical Director to have performed full EMT functions in a  
7 pre-hospital and inter-hospital care setting; and

8 (b) Once qualified for examination as approved by the Council, the  
9 candidate will be referred to an approved TESDA or CHED EMT assessment  
10 center for qualifying examinations for EMT registration.

11 SEC. 28. *Accredited Professional Organization.* – All certified EMTs  
12 shall have one (1) national organization, which shall be recognized by the  
13 Council as the one and only accredited EMT organization in the country. A  
14 certified EMT duly registered with the TESDA/the PRC shall automatically  
15 become a member of the accredited professional organization of EMTs and  
16 shall receive the benefits and privileges appurtenant thereto.

17 SEC. 29. *Code of Ethics of Emergency Medical Technicians.* – The  
18 Council, in coordination with the accredited professional organization, shall  
19 adopt and promulgate the Code of Ethics and Code of Technical Standards for  
20 Emergency Medical Technicians to include, among others, duties of EMTs to  
21 pre-hospital emergency care patients, the community, their colleagues, and  
22 allied professionals.

#### 23 CHAPTER IV

#### 24 EMERGENCY MEDICAL VEHICLES

25 SEC. 30. *Emergency Medical Vehicles.* – The Council shall develop  
26 minimum requirements for the design, construction, performance, equipment,  
27 testing and appearance of emergency medical vehicles. It shall also design an  
28 accreditation system to provide the public with ambulances and other

1 emergency medical vehicles that are easily identifiable, nationally  
2 recognizable, properly constructed, easily maintained and, when appropriately  
3 equipped, will enable EMTs to safely and reliably perform their functions as  
4 basic and advanced pre-hospital life support providers.

5 While failure of an emergency medical vehicle to conform to the  
6 Council standards may be a ground for the removal of its certification, it shall  
7 not bar EMTs from the following:

8 (a) Responding and providing appropriate basic or advanced life  
9 support on-site to persons reported experiencing acute injury or illness in a  
10 pre-hospital setting, and transporting them, while continuing such life support  
11 care, to an appropriate medical facility for definitive care;

12 (b) Providing inter-hospital critical transport care; or

13 (c) Transporting essential personnel and equipment to and from the site  
14 of a multiple medical emergency or a triage site and transporting appropriately  
15 triaged patients to designated medical facilities.

## 16 CHAPTER V

### 17 EMERGENCY COMMUNICATIONS

18 SEC. 31. *Adoption of a National Universal Emergency Telephone*  
19 *Number.* – The National Telecommunications Commission (NTC) shall  
20 develop a program for the immediate adoption of a national emergency number  
21 to enable the public to access emergency medical services. It shall consult and  
22 cooperate with national and local institutions and officials such as the  
23 emergency medical service providers, emergency dispatch providers,  
24 transportation officials, public safety, fire service, law enforcement officials,  
25 consumer groups, hospital emergency and trauma care personnel (including  
26 emergency physicians, trauma surgeons, and nurses) responsible for emergency  
27 services and public safety, the telecommunications industry (specifically

1 including the cellular and other wireless telecommunications service  
2 providers), and the motor vehicle manufacturing industry.

3 SEC. 32. *Compliance.* – It shall be the duty of every voice service  
4 provider to provide its subscribers with access to the national universal  
5 emergency number in accordance with the implementing rules and regulations  
6 issued by the Council, which shall likewise include provisions regarding  
7 penalty for abuses of the said service.

8 CHAPTER VI

9 OTHER PROVISIONS

10 SEC. 33. *Service Requirement.* – The Council shall develop policies  
11 regarding mandatory service requirement for all EMTs as a condition for  
12 maintaining license and accreditation.

13 SEC. 34. *Prohibited Acts.* – The following acts shall constitute an  
14 offense punishable under this Act:

15 (a) Practicing or offering to practice pre-hospital emergency care  
16 services in the Philippines or offering himself/herself as an EMT, or using the  
17 title, word, letter, figure or any sign tending to convey the impression that one  
18 is a registered and licensed EMT, or advertising or indicating in any manner  
19 whatsoever that one is qualified to practice pre-hospital emergency care unless  
20 he/she has satisfactorily demonstrated the prescribed competency standards, in  
21 full accordance with the requirements of the Council and is a holder of a  
22 National Certificate in Emergency Medical Services or a temporary/special  
23 permit duly issued to him/her by the Council;

24 (b) Providing pre-emergency hospital care within the meaning of this  
25 Act without a valid Certificate of Registration and a professional identification  
26 card or a valid special permit issued in accordance herewith;

27 (c) Presenting or using as his/her own Certificate of Registration or  
28 professional identification card of another;



1 (d) Giving any false or forged evidence of any kind to the Council or  
2 TESDA or CHED in obtaining any of the foregoing documents;

3 (e) Falsely impersonating any registrant with like or different name;

4 (f) Abetting or assisting the illegal practice of a person who is not  
5 lawfully qualified to provide pre-emergency hospital care within the meaning  
6 of this Act by a registered and licensed emergency hospital technician;

7 (g) Attempting to use a revoked or suspended Certificate of  
8 Registration or any invalid or expired EMT identification card or a cancelled  
9 special permit; and

10 (h) Operating an Emergency Medical Services training institution  
11 without proper accreditation.

12 SEC. 35. *Penalty.* – Violation of any of the prohibited acts stated  
13 under Section 34 of this Act shall be penalized with imprisonment of not less  
14 than one (1) year but not more than five (5) years, or both, at the discretion of  
15 the court or by a fine of not less than Fifty thousand pesos (P50,000.00) but not  
16 more than One hundred thousand pesos (P100,000.00).

17 SEC. 36. *Enforcement.* – The Council shall implement the provisions  
18 of this Act, enforce its implementing rules and regulations, and investigate  
19 complaints against violators of this Act, its rules and regulations and other  
20 policies of the Council.

21 The Council shall call upon any department, instrumentality, office,  
22 bureau, or agency of the government including local government units to  
23 render such assistance as it may require carrying out, enforcing or  
24 implementing the provisions of this Act.

25 SEC. 37. *Appropriations.* – The Secretaries of the departments  
26 concerned shall include in their programs the implementation of this Act, the  
27 funding of which shall be included in the annual General Appropriations Act.

1           SEC. 38. *Implementing Rules and Regulations.* – Except as otherwise  
2 provided, the Council shall issue and promulgate the rules and regulations to  
3 implement the provisions of this Act within ninety (90) days upon its  
4 constitution.

5           SEC. 39. *Separability Clause.* – If any part, section or provision of  
6 this Act is held invalid or unconstitutional, the other provisions not affected  
7 thereby shall remain in force and effect.

8           SEC. 40. *Repealing Clause.* – All other laws, decrees, orders,  
9 issuances, rules and regulations that are inconsistent with the provisions of this  
10 Act are hereby repealed, amended or modified accordingly.

11           SEC. 41. *Effectivity.* – This Act shall take effect fifteen (15) days after  
12 its publication in the *Official Gazette* or in any newspaper of general  
13 circulation.

Approved,

**O**