Statement of Policy

As Issued by the Executive Board of the American College of Obstetricians and Gynecologists and the American Congress of Obstetricians and Gynecologists

LEGISLATIVE INTERFERENCE WITH PATIENT CARE, MEDICAL DECISIONS, AND THE PATIENT-PHYSICIAN RELATIONSHIP

Government serves a valuable role in the protection of public health and safety and the provision of essential health services. The American College of Obstetricians and Gynecologists (the College) and the American Congress of Obstetricians and Gynecologists (ACOG) support this proper role of government. Laws that veer from these functions and unduly interfere with patient-physician relationships are not appropriate. Absent a substantial public health justification, government should not interfere with individual patient-physician encounters.

The patient-physician relationship is essential to the provision of safe and quality medical care and should be protected from unnecessary governmental intrusion. Efforts to legislate elements of patient care and counseling can drive a wedge between a patient and her health care provider, be that a physician, certified nurse-midwife, certified midwife, nurse practitioner, or physician assistant. Laws should not interfere with the ability of physicians to determine appropriate treatment options and have open, honest, and confidential communications with their patients. Nor should laws interfere with the patient’s right to be counseled by a physician according to the best currently available medical evidence and the physician’s professional medical judgment. The College and ACOG strongly oppose any governmental interference that threatens communication between patients and their physicians or causes a physician to compromise his or her medical judgment about what information or treatment is in the best interest of the patient.

Laws that require physicians to give, or withhold, specific information when counseling patients, or that mandate which tests, procedures, treatment alternatives or medicines physicians can perform, prescribe, or administer are ill-advised. Examples of such problematic legislation include laws that prohibit physicians from speaking to their patients about firearms and gun safety; laws that require medically unnecessary ultrasounds before abortion and force a patient to view the ultrasound image; laws that mandate an outdated treatment protocol for medical abortion; and laws that prescribe what must be communicated to patients about breast density and cancer risk, contrary to current evidence-based scientific data and medical consensus.

This type of legislative interference affects all physicians, not just obstetricians-gynecologists.¹ For example, laws that require physicians to follow a specific medical protocol, singled-out by legislators in defiance of current accepted medical practice, are dangerous to patient health and safety. Such laws preclude physicians from offering the best evidence-based care to their patients. Even if the law or regulation is generally consistent with the clinical standard of care at the time of enactment, medical treatment protocols written into law are problematic. Medical knowledge is not static. As knowledge advances, these protocols, tests, and procedures will become outdated. Legislation should not override scientific progress.

The College and ACOG oppose legislation that weakens the patient-physician relationship. We urge physicians to advocate against undue legislative interference in patient care. A patient’s right to be counseled and treated by her physician according to the best available medical evidence and the physician’s professional medical judgment must be protected.

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