

Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio, and members of the Senate Health Committee, thank you for the opportunity to provide my personal opponent testimony on House Bill 73.

My name is Erica Carlson and I just graduated from Ohio Northern University with my Doctor of Pharmacy (PharmD) degree in May. I will be completing a pharmacy residency at OhioHealth Riverside Methodist Hospital, where I will be working closely with members of the medical team to manage patient medications while they are hospitalized. I am writing to express my concern that House Bill 73 will harm the Ohio patients whom I will care for.

At my graduation ceremony a couple of weeks ago, the graduating class recited a sacred oath. An oath that stated, *“I will consider the welfare of humanity and relief of suffering my primary concerns. I will apply my knowledge, experience, and skills to the best of my ability to assure optimal outcomes for all patients. I will hold myself and my colleagues to the highest principles of our profession’s moral, ethical, and legal conduct.”*

As a new pharmacist, my biggest concern surrounding House Bill 73 is that it “requires” pharmacists to dispense ANY off-label prescription they receive. Off-label prescribing already exists and is beneficial for many patients. Pharmacists are not against off-label prescribing. However, pharmacists are champions of using evidence-based medicine to guide the practice of off-label prescribing. Evidence-based medicine means using scientific research and data that has been collected in a moral and ethical manner to guide treatment decisions. Evidence-based medicine means that a medication has proven to be effective and safe for patients. Evidence-based medicine is the line between using a medication for a legitimate medical purpose with scientific evidence and putting patients in danger by disregarding the adverse effects that come with many medications. This bill concerns me because it dissolves evidence-based medicine in off-label prescribing and it directly contradicts my legal responsibility to keep patients safe. *“I will consider the welfare of humanity and relief of suffering my primary concerns”*

Although this bill masquerades as a way for patients to advocate for their health and make their own treatment decisions, in reality this bill will cause more harm than good. The majority (but not all) of the general population does not carry medical knowledge that is poised to make educated decisions regarding their health. Of course, there is nothing wrong with this because everyone has their own strengths and their own roles in society. Pharmacists spend 8 to 10 years training to be the expert in medication safety. We need to trust not only pharmacists, but every professional to do the job they were trained to do. For example, we trust firefighters, mechanics, engineers, politicians, and architects to be the professional in their field. We trust them to keep the general population safe using the knowledge and skills they have gained from a lifetime of service and training. Ignoring their expertise would cause significant harm. The same is true in medicine. We should trust physicians and APPs to prescribe and pharmacists to verify the medication is indeed safe and effective for the illness we are treating. We should trust that healthcare professionals are already advocates for patients, but are also always aiming to empower and educate patients, so they can become their own advocates as well. *“I will apply my knowledge, experience, and skills to the best of my ability to assure optimal outcomes for all patients.”*

The oath that I took on my graduation day has been recited by thousands of pharmacists across the nation. It signifies our commitment to the health and safety of every patient we serve. In addition to this ethical oath, every pharmacist in Ohio has a legal responsibility to ensure every prescription they dispense was written by a legitimate prescriber for a legitimate medical purpose (per OAC Rule 4729:5-5-15). In addition, pharmacists complete a drug utilization review with each prescription. We review the patient's profile, medications, and health conditions to check that this medication will not cause undo harm. We are legally required to prevent harm by completing this review, but House Bill 73 will contradict this legal precedent and take away our ability to act in those situations. This is what makes the bill dangerous. It allows medication errors to go uncorrected. Medication errors that cause harm to patients happen every day, despite our best efforts. Just imagine how many more would happen without a pharmacist. How many people would have a medication that worsens their heart failure or causes them to become dizzy and fall or interacts with another drug they take and causes fatal respiratory depression or makes them more susceptible to infection or leads to a fatal bleed? The role of the pharmacist legally exists to prevent these deadly and costly medication errors, but House Bill 73 seeks to abolish this role and cause more undo harm to innocent and unknowing patients across the state of Ohio. I strongly urge you to oppose House Bill 73 and trust pharmacists to do the job they have devoted their lives to: keeping patients safe. *"I will hold myself and my colleagues to the highest principles of our profession's moral, ethical, and legal conduct."*

Thank you for the opportunity to provide this written testimony in **opposition to House Bill 73** and for your time considering the threat that it poses to Ohio patients.

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