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.

We are Suzanne Van Fleet, a Clinical Pharmacist, and Daniel Tanase and Matt Doers, Medical Intensivists. We practice as a part of a multidisciplinary Intensive Care Unit team and cared for critically ill Ohioans throughout the COVID pandemic. We are writing to express our strong concern that House Bill 73 will harm the patients whom we care for.

Among our many concerns are the following key points:

• Emboldening dangerous prescribers, providing them with temporary privileges and turning Ohio patients into research quinea pigs.

We agree that it is incredibly important to ensure that patients have access to medications that can help them; however, House Bill 73 creates legal infrastructure for our most vulnerable patients to be exploited by dangerous prescribing. There is a clear difference between appropriate off-label medication use and inappropriate prescribing, and House Bill 73 fails to draw a difference between these two entities. House Bill 73 opens the door for providers outside of a patient's treatment team to mislead vulnerable patients, earn their trust, and then force hospitals to entertain temporary privileges for these providers. This allows these providers to go around a patient's treatment team, prescribe medicines that are inappropriate and/or dangerous in terms of dose or risk of side effects, and force a pharmacist to dispense these medicines. Nothing would stop these outside providers from prescribing chemotherapy to treat a bloodstream infection, using experimental medication cocktails without any scientific support, or using doses of medicines that turn them into toxins. House Bill 73 would turn patients into research guinea pigs for prescribers who want to perform research upon them, without going through the appropriate channels set in place since the Nuremburg code was established in 1948. This conduct would only be possible because of House Bill 73 and due to House Bill 73, there would be no way to stop any external provider willing to engage in this sort of dangerous and inappropriate prescribing.

 Splintering interdisciplinary care teams with outside prescribers and interfering with quality, inter-disciplinary care.

The best way to provide care, especially for our most vulnerable patients, is through a coordinated interdisciplinary team effort. A coordinated team will ensure that all members are acting with up-to-date information, that all interactions between medications and disease states are known and thoughtfully considered, and that the best overall plan is established and implemented through a consensus of the most qualified individuals accessible in a patient's care. In permitting external providers to obtain temporary privileges, House Bill 73 fractures the care of our most fragile patients. Through allowing external individuals to assume complete and isolated control over an aspect of a patient's care, House Bill 73 puts Ohio patients at risk of communication errors which occur when a medical team is splintered. It will lead to errors due to the lack of clear communication, collaboration, and coordination which will occur when multiple exclusive parties are making medical decisions in the context of acute illness with moment-to-moment changes; it is times such as these when consistent information exchange is

of the utmost importance. This privilege-related aspect of the bill has many extremely concerning implications, and adding an unnecessary layer of complexity to an already complicated process will lead to errors and harm to Ohioans.

These concerns lie very close to home. During the COVID pandemic our team was court ordered to administer ivermectin to one of our patients despite us unanimously opposing this treatment decision. This caused <u>significant</u> stress to the team and we felt it went against our oath to "do no harm". We are very concerned about the implications this Bill may have on both patient care and the emotional wellbeing of the medical team.

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.

Suzanne Van Fleet, Pharm.D., BCCCP

Daniel Tanase, MD

Matt Doers, MD