

**PUBLIC COMMENTS FOR: ARC 1708C – Amend IAC 653 –
Chapter 13, National Transportation Safety Board**



1001 Grand Avenue
West Des Moines, IA 50265-3502
515 223-1401 • 800 747-3070
Fax 515 223-0590
www.iowamedical.org

November 17, 2014

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Mark Bowden, Executive Director
Iowa Board of Medicine
400 SW Eighth Street, Suite C
Des Moines, IA 50309
mark.bowden@iowa.gov

Re: Proposed Rule ARC 1708C – Pain Medications and Vehicle Operation

Dear Director Bowden:

On behalf of the 6,400 physician and student members of the Iowa Medical Society (IMS), thank you for this opportunity to provide comment on the above-stated proposed rule of the Iowa Board of Medicine (IBM). While IMS understands the underlying intent of the proposed rulemaking, we oppose **ARC 1708** on the grounds that incorporating such a mandate in rule is an intrusion into the physician-patient relationship and is unnecessarily redundant given current practice.

Iowa physicians consistently deliver high quality medical care. Efforts to codify standards of care in statute or administrative rule are an intrusion into medical practice, and threaten quality care by failing to account for the unique healthcare needs of each patient. In recent years, the IBM has adopted numerous, burdensome pain management rules. The addition of this proposed rule would add another burden on Iowa prescribers and result in little added public benefit.

IMS questions the value of this proposed rule. It is current practice for physicians and pharmacists to have conversations with patients regarding the effects of any prescribed medications, including pain medications. Patients are warned if their medical conditions or prescribed medications might interfere with their ability to operate a motor vehicle. In addition, prescription packaging clearly contains warnings when a medication necessitates special precautions like not operating a motor vehicle. Mandating in rule that a prescribing physician have such conversations is unnecessarily duplicative of current practice and would expose Iowa physicians to additional, unnecessary liability.

The Iowa Medical Society urges the IBM to fully weigh the implications of **ARC 1708** and to not adopt this rule. Thank you again for the opportunity to offer comment and for your consideration.

Sincerely,

Clare M. Kelly
Executive Vice President

Iowa Osteopathic Medical Association



950 - 12th Street • Des Moines, Iowa 50309
(515) 283-0002 • Fax (515) 283-0355
leah@ioma.org • www.ioma.org

November 17, 2014

Mark Bowden, MPA
Executive Director
Iowa Board of Medicine
400 S.W. 8th Street, Suite C
Des Moines, IA 50309-4686

Dear Mr. Bowden:

Subject: Comments on proposed amendment to IAC 653-13.2(8)

The Board cites a National Transportation Safety Board (NTSB) recommendation that states adopt **guidance** (emphasis added) for physicians to discuss with patients the effects that patients' medical conditions and the medication they use may have on their ability to safely operate a vehicle in any mode of transportation, as the rationale for the proposed rule.

The Board does not need to promulgate a rule, especially one that sets a standard of care, to provide "guidance" to physicians. There are multiple alternative methods the Board could use to accomplish the intended goal of the NTSB advisory. The Board could place the information on its website, provide the information to physicians at the time of license renewal, and/or provide the information to medical societies to forward to their members in their newsletters and include in their educational seminars.

The Iowa Osteopathic Medical Association stands ready to assist the Board in disseminating this information to physicians. Placing this requirement in rule will further discourage physicians from treating patients in pain. The Board may recall that in the past, rulemaking by the Board so dampened analgesic prescribing that the Board had to adopt rules stating that it is a violation of the standard of care to not address a patient's pain (653-13.2 preamble paragraphs 5 and 6). IOMA urges the Board to reconsider the need for this rule and seek alternative methods of providing this information to physicians.

Sincerely,

A handwritten signature in black ink that reads "Leah J. McWilliams". The signature is written in a cursive style with a large, looping initial "L".

Leah J. McWilliams, CAE
Executive Director



KATHIE J. LYMAN
Executive Director

POLK COUNTY MEDICAL SOCIETY

1520 HIGH STREET • DES MOINES, IOWA 50309-3110 • (515) 288-0172 • FAX (515) 288-0173
website: <http://www.pcms.org> • email: pcms@pcms.org

November 5, 2014

Mark Bowden, Executive Director
Iowa Board of Medicine
400 SW Eight Street, Suite C
Des Moines, IA 50309-4686

Director Bowden:

On Behalf of the Polk County Medical Society, we are opposed to the Board of Medicine's noticed rule, ARC 1708C, adding a new subrule, 13.2(8) – *Ability to Safely Operate a Vehicle*.

The Polk County Medical Society (PCMS) is the oldest continuously operating medical society in the state of Iowa, representing more than 1242 physicians and their patients since 1851. Members are local physicians and residents dedicated to serving Des Moines area patients in medical care. Throughout the changes that have taken place in medicine, PCMS has remained a leader at the local, state and national levels. Our Physicians represent thousands of patients, their staff and families. A primary purpose of the Polk County Medical Society is to promote the science and art of medicine and the betterment of public health.

We believe the noticed rule, ARC 1708C, is not a workable or enforceable regulation. If a regulation cannot be uniformly and consistently enforced, our view is that it is not a viable standard of care and by definition will not improve public health.

Secondly, counseling and warnings to patients about the effects of pain medications already exist at many stages of care including at the point of purchase. We believe the rule is unnecessary as written due to these practices, especially when a patient receives guidance at the point of purchase before they take their pain medication.

For these reasons, the Polk County Medical Society respectfully opposes the Board of Medicine's noticed rule, ARC 1708C. We request that the rule not proceed any further in the rulemaking process.

Sincerely,

Philip Colletier, M.D.
President
Polk County Medical Society

Craig Mahoney, M.D.
Chair, Legislative Committee
Polk County Medical Society

Mr. Mark Bowden
Executive Director
Board of Medicine
mark.bowden@iowa.gov

November 18, 2014

Dear Mr. Bowden,

UnityPoint Health operates in the states of Iowa, Illinois and Wisconsin, with over 30,000 employees including more than 900 doctors and specialists. Our team of professionals communicates with our patients to clearly and effectively address the patients' health care in the most appropriate setting: whether that is a clinic, a hospital or at home. We are constantly looking for ways to improve the way health care is delivered. We describe our professional culture as "physician-led" always from the perspective of the best interests of the patient.

With that in mind, UnityPoint Health submits the following comments in regard to the Notice of Intended Action, ARC 1708C. UnityPoint Health believes the rules are unnecessary, too prescriptive and could expose our physicians to potential liability.

Pharmacists must comply with extensive protocols when dispensing pain medication. The pharmacist is already counseling the patient on the potential impact of the medication and how use of the medication may affect the patient's ability to safely operate a vehicle. The pharmacist who is physically handing the patient the pain medication is in the best position to counsel the patient. The proposed rule adds another layer of bureaucracy, without measurably adding to patient safety. Requiring the physician to also counsel the patient is unnecessary.

The proposed rule enters into the physician/patient relationship and is unnecessarily prescriptive from the physicians' perspective. The rule would appear to create exposure to liability on the part of a physician who may fail to document that a discussion was had in regard to safe operation of a vehicle.

UnityPoint Health urges the Board of Medicine to withdraw this rule from further consideration based upon the fact that this type of patient education is already taking place under existing rules governing pain management and existing pharmacy protocols.

Respectfully Submitted,
Julie Smith
UnityPoint Health