Rodger Sayre, MD FAAFP

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Education

Diplomat American Board of Family Medicine, July 1986 to present

Fellow American Academy of Family Physicians, inducted October 2008

Residency The Williamsport Hospital Family Practice Residency, 1983 - 1986

MD Jefferson Medical School, Thomas Jefferson University, 1983

BS Biology, Elizabethtown College, 1979

Professional Experience

• Associate, Geisinger Medical Group

July 1986 to present

• School Physician, Tunkhannock and Elk Lake School Districts

Ongoing

Publications/Presentations

 "Doc's Digest", a bimonthly column on various medical topics in the <u>Court Report</u>, a periodical of the Home School Legal Defense Association (HSLDA) April 1998 to July 2013

Affiliations/Memberships

• American Academy of Family Physicians

July 1986 to Present

- Pennsylvania Academy of Family Physicians
- Pennsylvania Medical Society
- Christian Medical and Dental Society

July 1983 to Present

• Alpha Kappa Kappa Medical Fraternity (President 1980-1981)

Sept 1983 to June 1986

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To: The Honorable House Committee on Children & Youth Chair Katharine Watson
P.O. Box 202144
Room 41 A East Wing
State Capitol
Harrisburg, PA 17120-2144

Cc.: Members of the House Committee on Children & Youth

Date: April 25, 2014

Subj.: SB 27 scheduled to be heard by your committee on April 28, 2014

Position: **OPPOSE**

As a Board Certified Family Physician, licensed to practice medicine in the state of Pennsylvania since 1984, I have several serious concerns regarding Senate Bill 27.

First, since physicians are mandatory reporters, **this bill is unnecessary**. If a physician is suspicious of child abuse he/she will be contacting Child Protective Services (CPS) as mandated by law. If the courts decide that further information is needed to effectively determine the presence or extent of wrongdoing, records can be obtained by court order or subpoena.

Second, and of utmost importance to the family physician, is the fact that **this bill undermines the ability of a physician to maintain the privacy of his patients' medical records.** This physician/patient privilege has been an unquestioned and foundational element of medical care for centuries. It will be jeopardized in Pennsylvania if Senate Bill 27 is passed into law. It is critical that parents feel free to share concerns regarding their children with their physician without fear that such information is available to social workers for the asking. Several questions relative to this aspect of the bill beg to be answered:

- Who determines what constitutes the "relevant medical information" referred to in the bill?
- ➤ What if CPS requests medical records when no medical concern is alleged? Is the physician obliged to respond? Who decides if such a request is unwarranted?
- Should a social worker be privileged to request medical information regarding children for whom no allegation of neglect or abuse has been made? How will that privilege impact the trust relationship between a

doctor and the families in his care? Who all is then privy to that information (see bullet points below)?

Third, this bill undermines the ability of Child Protective Services to maintain confidentiality as they investigate alleged child abuse. According to this bill, CPS must provide information to any "licensed medical practitioner who is providing ongoing medical care." Again, questions are raised:

- ➤ Who qualifies as "a licensed medical practitioner?" Clearly this bill identifies that there are individuals other than the patient's medical doctor who should be notified that an investigation is underway, since it specifically states "child's primary care provider and other licensed medical practitioner who is providing medical care" (emphasis added). Are the dentist, optometrist, chiropractor, naturopathic physician, physical therapist, pharmacist, etc., also notified? Can they request the details of the investigation?
- Suppose one of the many individuals listed above also happens to be a neighbor to the family being investigated. Who decides if this is an inappropriate request, and by what authority is the request denied?

Maintaining the health and safety of children is a common goal of both physicians and CPS, and clearly the sharing of information between physicians and CPS may be necessary when abuse or neglect is suspected or confirmed. The sharing of information should be:

- Subject to a "need to know" criterion,
- > Taken on a case-by-case basis,
- Sensitive to the physician/patient relationship, and
- Always with due consideration given to the right to privacy for both parents and children.

Senate Bill 27 fails all of the above standards. It is an ill-conceived and unnecessary initiative that endangers age-old standards of physician/patient confidentiality. It attempts to solve a problem of communication that would be far better addressed by enforcing present laws and by employing a little common sense.

Thank you for your consideration.

Sincerely,

Rodger Savre, M.D.

Current Positions and Appointments

- Tyler Memorial Hospital, Tunkhannock, PA, Active Staff Physician
 - o Chair, Ethics Committee
 - o Chair, Medical Records Committee
- Geisinger Wyoming Valley Hospital, Plains, PA, Courtesy Staff