

Dear Chair Monnes Anderson, Vice-Chair Linthicum, and Members of the Committee,

As a Family Medicine physician I am writing to support SB 698, which would ensure that my patients and their caregivers can read and understand medication labels by requiring pharmacies to include labelling in both English and a language that the patient can read.

From my experience caring for men, women, and children in the hospital and in clinic, I know all too well the unfortunately common – and entirely preventable – harms that result from our current Oregon State health policy of abdicating responsibility for legible labels on medication bottles. Just one example among many is the story of a 7 year old Laotian-American girl I admitted to our Children’s Hospital. Leilani was shy, all smiles, bundled in a fluffy pink blanket from home, doting family members at her bedside day and night. They wisely brought her to the ER for fever. She has a chronic medical condition that affects her immune system; she depends on twice daily penicillin to prevent the serious infections her body can’t fight off on its own.

Leilani’s family and medical team, together with our interpreter, reviewed her home medication bottles. The bottle her father thought was penicillin was in fact her vitamin. Leilani hadn’t gotten her penicillin in days. I watched a look of horror fall over Leilani’s father’s face. He turned toward his daughter, eyes welling up with tears, and buried his face in his hands. I too felt ashamed in that moment, deeply ashamed of how my medical system and my state’s broader health policies had failed his family. By withholding crucial information we had rendered him powerless in protecting his daughter from serious harm, despite all his love and best intentions.

When Leilani was well enough to discharge home from the hospital, I ordered her a new penicillin prescription. I called the Pharmacist directly and requested that her medication be labelled both in English and in Lao. The Pharmacist informed me this was not possible, that our medical system would not accept responsibility for the accuracy of both labels, thereby re-creating the potentially deadly, and entirely preventable, scenario that caused her admission in the first place.

Leilani’s story makes it clear why we need SB 698. Oregonians who have limited English proficiency have a right, like all Oregonians, to understand their medication labelling. The only difference between a medicine and a poison is understanding how to use it. Giving someone a pill bottle with an illegible label is dangerous and wrong, and our patients, constituents, and neighbors deserve better.

SB 698 will ensure that patients and caregivers are aware of their rights, under federal law and state law, to access to interpretation when they are speaking with their pharmacist about proper administration of their medications. By requiring appropriate signage, SB 698 will inform all who come into Oregon pharmacies of their rights.

As a physician dedicated to the well-being of families, I know that health equity can only be accomplished when all Oregonians are able to read and understand their medication labels and understand their Pharmacist's instructions for use.

I urge the Committee to approve this important legislation.

Sincerely,

Maggie Wells, MD MPP
Portland Family Medicine Resident Physician