

Submitter:

Chad Darling

On Behalf Of:

Committee:

Senate Committee On Health Care

Measure, Appointment or Topic:

SB1598

I am writing to express my opposition to Senate Bill 1598.

My primary concern with SB 1598 is that it expands government authority into the patient caregiver relationship in a way that risks undermining individualized medical judgment. High quality health care depends on clinicians being able to assess and respond to the specific needs, risks, and circumstances of the patient in front of them. This bill moves decision making away from that relationship and toward generalized, government directed guidance.

Section 2 of SB 1598 authorizes the Oregon Public Health Officer or a designated physician to issue standing orders to prescribe drugs or devices for any infectious or noninfectious disease or other significant public health concern . While the bill states that these orders must be evidence based and promote a legitimate medical purpose, they are still inherently broad and detached from individual clinical evaluation.

Standing orders by definition apply to classes of people, not to unique patients with complex medical histories, contraindications, or personal circumstances.

Patient centered care is a foundational principle of modern medicine. The American Medical Association emphasizes that clinical decisions should be based on the individual patient's needs, values, and clinical presentation, using professional judgment informed by evidence rather than rigid protocols imposed externally. When caregivers are expected to follow generalized directives, even well intentioned ones, there is a real risk that nuanced clinical reasoning is replaced by compliance driven care.

Additionally, SB 1598 grants broad immunity from civil, criminal, and professional liability for the issuance of standing orders, except in cases of gross negligence or willful misconduct . This significantly reduces accountability while simultaneously increasing centralized authority. When policy makers are insulated from the consequences of clinical outcomes, yet frontline caregivers are expected to implement those policies, the balance of responsibility and trust in the health care system is weakened.

The bill also allows input from local health officers and stakeholders to be bypassed entirely if the Public Health Officer determines that consultation could cause delay . While emergencies do occur, this provision risks normalizing the exclusion of local expertise and community specific context, both of which are critical to effective and ethical health care delivery.

I support evidence based medicine and public health guidance as tools to inform care. However, guidance should support clinicians, not override their judgment. Government should not be placed in the position of directing care in a way that pressures caregivers to follow generalized rules instead of exercising professional reasoning for the individual patient before them.

For these reasons, I respectfully urge you to oppose SB 1598 or substantially amend it to preserve the integrity of the patient caregiver relationship, protect individualized medical decision making, and maintain appropriate checks on centralized authority.

Thank you for your time and consideration.