



e.Forum Posit

Posit: "Primary care physicians have an ethical and professional obligation to inform women of childbearing age about 'Plan B' (the Morning After Pill), and to offer the prescription to be filled in an emergency."

A MAJORITY AGREED WITH THE POSIT, which was based on Dr. Ruth Haskin's essay in the May issue of *Sierra Sacramento Valley Medicine*. (Agree-98; Disagree-25; No opinion-3; comments-28.)

Readers should keep in mind that posits are not valid surveys or polls. They are strident statements intended to promote dialogue among members, and do not reflect the views of the Board of Directors, Officers, or the Editorial Committee.

Comments reflect a broad range of opinion, and we present them without interjecting our own. Unedited comments appear below.

As these remarks were being prepared for publication, the American Medical Association adopted a Northern California resolution to ease access to emergency contraception. [Click here to read more.](#)

"I agree, since we all would like to limit the need for abortions; this is a very ethical approach for all physicians." - **Anthony Russell, MD**

"A person whose personal ethics will interfere with the patient's rights -- THE PATIENT'S RIGHTS -- should consider a more appropriate specialty such as ophthalmology or podiatry. Perhaps even a career in chiropractics?" - **Andrew Last, MD**

"What about our own moral obligations to ourselves?" - **Kevin Mackey, MD**

"This is not a religious or abortion issue!" - **E.T. Rulison, MD**

"The basis of the medical profession is serving the patient's needs, not your own agenda." - **David Gibson, MD**

"I wouldn't call this the "morning after pill". This is not the RU-486 pill and does not cause an abortion if already pregnant. Using this label also is irresponsible and feeds into public fears. Call it Plan B or the Emergency Contraceptive Pill. As a pediatrician, I would like to think that my colleagues also agree with the above statement." - **Sean Cooke, MD**

"I am a pro choice person. The morning-after-pill, preventing even the fertilization of an egg, is better than abortion, a poor replacement for birthcontrol . Perhaps the prochoice people can see that even this egg is not yet a "living" being." - **George Meyer, MD**

"Obligation is a pretty strong word. What if we think the pill is ethically wrong? There is already so many ways to prevent unwanted pregnancy that doctors should not be "required" to inform or prescribe the morning after pill. It's about time we as a group start to ask the patients to take some responsibility for their actions." - **Esther Kim, MD**

"Some physicians have moral and ethical objections to providing contraceptives or abortifacients. They should not be forced to choose between career and conscience."

- **Steve McCurdy, MD**

"It seems that the the questions in these surveys aren't structured very well. This is really two questions, is there a moral obligation to inform, the answer to that is sometimes. The second question, which is very different is there an obligation to prescribe if requested, the answer to that question is yes." - **Thom Atkins, MD**

"Agree they should fill prescription in an emergency but not that informing patients about the availability of the morning after pill is an obligation." - **David Wisner, MD**

"Physicians should not withhold medical information that may help a patient make a reasoned decision. Since this is now available over the counter, a prescription may not be needed. If a physician is not comfortable prescribing Plan B, the patient should be informed of that fact and given information on how to get it elsewhere." - **Joanne Berkowitz, MD**

"There is an ethical and professional obligation to educate and inform patients of the availability of "the morning after pill." This may include referring patients to other facilities or colleagues that offer such services. However, a physician should not himself be ethically bounded to condone, offer, or administer intervention and fill this prescription in an emergency. The act of offering and administration of the intervention or in this case prescribe the drug may be contrary to the physician's own sense morals and ethical beliefs of life and abortion." - **Mark Pham, MD**

"Once again you have done it. You have asked people to agree or disagree with a poorly worded statement. The direct corollary of this statement is that any primary care physician who fails inform any of their patients of child bearing age about PLAN B is both unethical and unprofessional. *Most would agree that one of the important tasks of primary care physicians is to inform interested patients about family planning and contraceptive options, and that one such option is "Plan B". That being said, I would hope that physicians would think twice, and then disagree with the statement and its inherent implications you have printed above.*" - **Gerald Upcraft, MD**

"Particularly if a patient inquires about it. Not sure that we need to bring it up proactively with all women patients of childbearing age though." - **Jason Flamm, MD**

"Physicians have a duty to educate their patients." - **Kent Hart, MD**

"There is no obligation for MD's to offer circumcision for infants even though there is nothing morally wrong to perform circumcisions. There is no obligation for physicians to perform abortions. Many OB's do not perform abortions and refer these patients to other practitioners who do. Some individuals believe that a fertilized ovum is, theologically speaking, a human being. One of the effects of Plan B is to prevent implantation of a fertilized ovum. Therefore, preventing implantation is exactly the same as an abortion (expelling a human fetus). Why should a physician be forced to prescribe Plan B and kill that fetus when other doctors are allowed to not perform abortions?" - **Ku-Liang Yu, MD**

"Fertility and family planning/fertility management is, last I checked, an integral part of Gyn/ primary care practice. Medical Ethics and common courtesy mandate provision of effective and accepted therapy or, if the individual physician's religious practice discourage this, promote and accurate referral to a viable prescribing source." - **Michael Goodman, MD**

"I believe should give option if pt comes in needing it, but not to inform them of it on a routine basis." - **Soni Nageswaran, MD**

"I disagree. I do not believe a PCP, or for that matter a specialist, has a ethical and professional obligation to inform women about Plan B. If the physician chooses to they can inform the patient but there is no obligation to do so." - **Jose Cueto, MD**

"Absolutely women whould be educated on this option." - **Karen Lo, MD**

"Question seems ambiguously worded. Does this imply that a visit is related to fear of pregnancy after a sexual exposure? Or a general announcement to all women patients of childbearing age?" - **Michael McCloud, MD**

"As with any other treatment patients need all the choices" - **Walter Malhoski, MD**

"Women of child bearing age may or may not know about the morning after pill *option*, and it's availability." - **Rugmini Shah, MD**

"Don't need a prescription for over age 18 in California" - **Barbara Hays, MD**

"Informing women is one thing, but being obligated to provide the Pill is quite another. We have a right to act in accord with our conscience and NOT prescribe drugs which have an abortifacient effect. We may refer to another physician who will provide it, but it is not fair to ask us to leave our own ethical concerns at the door." - **Stephanie Whittle, MSIII**

"This issue is up to the individual M.D. The morals of this country are in total disgrace and to further increase the irresponsibility of mankind is certainly not the Doctors role." - **Gene Speicher, MD**

"I will offer the prescription, but I do not suggest forcing others to do so because it is primarily a religious matter. Likewise, I feel they should not interfere with my decision." - **Allan H Galbreath, MD**

Editor's note: Dr Haskins' article makes the point that even though a prescription is not required, there are significant practical advantages for the patient with Rx in hand in case of emergency.

Sierra Sacramento Valley Medical Society
5380 Elvas Avenue #100 • Sacramento, CA 95819
916.452.2671 PH • 916.452.2690 FX • Email: info@ssvms.org

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