

Sept. 27, 2008 This is the first news letter of Health Watch USA. We have representation on the mailing list from Doctors, Nurses, Insurance Companies, Lawyers and Medical and Hospital Associations. The newsletter is meant to stir discussion by the opinions it presents. Rebuttal editorials may be submitted and if approved may be distributed through the newsletter. To submit the address is contact-mail@healthwatchusa.org

Three items for today's newsletter.

#1. The 2008 Conference for Healthcare Transparency and Patient Advocacy will be held on Nov 20th, 2008. You may register and obtain a PDF Brochure at www.healthconference.org

#2. A recent article in the Fort-Worth Star Telegram places the spot light again on Joint Commission Accreditation. "Value of hospital accreditations under review" <http://www.star-telegram.com/804/story/889990.html> This follows other reports concerning hospitals in the VA System (Salisbury NC http://www.dailysoutherner.com/statenews/local_story_099120113.html and Marion, ILL <http://www.foxnews.com/story/0,2933,326187,00.html>) along with the American Nurses Association Lawsuit against the Dept of Health and Human Services regarding inadequate staffing at facilities <http://www.nursingworld.org/FunctionalMenuCategories/MediaResources/PressReleases/2006/PR0615068560.aspx>

#3. The Kentucky Medical Association on Sept 17, 2008 passed a resolution to actively support legislation designed to allow doctors to discuss quality and costs with their patients without fear of retaliation from healthcare facilities.

WHEREAS, the patient-physician relationship is based on concern for medical welfare, clinical quality, trust and candor, and

WHEREAS, these elements obligate the physician to care for and counsel patients using his/her best medical advice and judgment regardless of care delivery system structure or system processes, and

WHEREAS, physicians are sometimes influenced or encounter coercive forces intended to prevent their candid discussion of cost and quality of care issues that relate to the array of treatment options available, now therefore be it

RESOLVED, that KMA actively support legislation that would prohibit any health/medical care facility processes or procedures or payment system rules from interfering with the counsel of patients by physicians whom are relied on to aid in medical decision making, and be it further

RESOLVED, that such legislation would further require that no health/medical care facility or payment system subject physicians to any reprisals that would restrain, suppress or prevent them from providing information to patients and their families regarding cost and quality issues, and be it further

RESOLVED, that no physician be required to report discussion of such information to any facility or agency.

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The contents of this news letter are the express opinion of Kevin T Kavanagh, MD and Health Watch USA