



PatientTrue
Patient Resource Physicians

May 15th, 2017

SENATE COMMITTEE ON HEALTH CARE TESTIMONY

Senator Laurie Monnes-Anderson, Chair
Senator Jeff Kruse, Vice Chair

Re: HB 2103, Permits Licensed Nurse Practitioner to Perform Vasectomies

POSITION: OPPOSE

Dear Senator Monnes-Anderson, Senator Kruse and other distinguished committee members:

As a physician, patient advocate and native Oregonian, I oppose HB 2103 and I urge you to vote **NO** for the following reasons:

1. HB - 2103 has immense safety concerns

This bill underestimates the importance of training and dismisses potential complications and problems that would occur with limited training. Many urologists would agree that performing a vasectomy is not an “easy” procedure.

2. HB 2103 - Recommended Training is Inadequate


Midlevels are an excellent addition to a practice if you can figure out how to use them without replacing the doctor. In a practice with multiple MDs, they could assist in surgery and help with hospital rounds. This would help keep the doctor in the office seeing patients, and that's a wonderful addition to a practice.

Medical residents are supervised by attending physicians and need to perform several vasectomies on patients before they are permitted to perform these independently. In addition, if midlevels need this type of training to perform vasectomies there would be great investment of time to supervise them when the physician can simply do it themselves.

If you compare education and training, NP's do not have the level of experience as a trained Urologist.

- NP's have a bachelor's degree in Nursing and complete 1-2 years of additional training to receive their NP degree.
- MD/DOs have 4 years of post-graduate training and go on to a minimum 5-year urology residency.

Thank you for your attention to this important issue and your commitment to the health of all Oregon residents.

Sincerely,
Sara Bubenik, MD, MPH

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