



American Society of Nuclear Cardiology
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December 12, 2018

Dr. Rachel Levine
Secretary of Health
Pennsylvania Department of Health
Health and Welfare Building
8th Floor West
625 Forster Street
Harrisburg, PA 17120

RE: Act 112, The Patient Test Result Information Act

Dear Dr. Levine:

The American Society of Nuclear Cardiology (ASNC) would like to express our concerns with Act 112, "The Patient Test Result Information Act." Although ASNC agrees with the intent of the legislation to further patient-physician communication and care coordination, we believe the unintended consequences and imprecise legislative language may undercut these worthy goals.

ASNC is a 4,500-member professional medical society, which provides a variety of continuing medical education programs related to nuclear cardiology and cardiovascular computed tomography, develops standards and guidelines for training and practice, promotes accreditation and certification within the nuclear cardiology field, and advocates for furthering research and excellence in nuclear cardiology and cardiovascular computed tomography. Moreover, ASNC has an established role in promoting the importance of an educated patient in the healthcare system. Indeed, ASNC is a longstanding member of the [Choosing Wisely](#) initiative to promote dialogue among physicians and patients regarding the appropriate use of medical procedures. An informed patient has a more accurate perception of risk, is able to make decisions more aligned with their goals and preferences, and is more comfortable with their decision.

Patients are often best informed by discussing an imaging report and the detailed test results with the ordering physician. The ordering physician may work with the patient on health literacy, fully explain the medical report, judge the full clinical context, and outline treatment options clinically. ASNC is concerned that requiring an "imaging entity" to directly notify patients when a "significant abnormality" is found may lead to unintended consequences such as patient requests for unnecessary and potentially harmful tests, and patient and family dissatisfaction and confusion. Moreover, the potential receipt of multiple letters from multiple imaging entities may cause patient anxiety and overburden ordering physicians as they manage patient requests. These concerns are particularly acute given the clinically imprecise definition of "significant abnormality." For instance, an abnormal electrocardiogram could simply be a normal variation of cardiac rhythm which does not affect an individual's health.



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ASNC looks forward to the opportunity to work with the Department of Health and other relevant stakeholders to ensure Act 112 best serves Pennsylvania patients. Should you have questions, please contact Andy McKinley, Health Policy Director, at 703-459-2555 or amckinley@asnc.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Prem Soman".

Prem Soman, MD, PhD
President
American Society for Nuclear Cardiology