Many state medical associations have doctor-of-the-day programs through which a physician delivers medical services to legislators and staff. Such programs provide an opportunity for physicians to gain a better understanding of the legislative process, as well as improving relationships and increasing interactions between legislators and physicians. Because of the unique nature of their practice, emergency physicians are especially qualified to provide physician coverage for this type of program.

**Purpose**

The purpose of participation in any doctor-of-the-day program is to increase emergency medicine’s visibility among state legislators, to observe firsthand the legislative process, and to promote issues affecting emergency medicine. Physicians who participate are not expected to be lobbyists, nor should they act as such while “on duty.” However, they can and should be able to discuss pertinent issues with any legislator who may ask their opinion. Before or after their assigned shift, they should also visit with their own legislators, attend committee hearings, or listen to floor debates in the house or senate. When physicians are exposed to the legislative process, it becomes much less mysterious and intimidating. They then are more likely to understand the importance of political activity to the future of emergency medicine.

**Getting Involved**

If you are uncertain if someone is already providing physician coverage to the legislature, you can obtain this information by calling the office of the state medical association or the security office at the state capitol. If there is already a doctor-of-the-day or similar program in place, contact the sponsoring agency and inform the staff of your willingness to participate. In the rare situation when no such program is operating, your chapter has a great opportunity to take the lead and institute one. Information on how to develop such a program is available from the State Legislative Office.

**Coordination of the Program**

Even if the doctor-of-the-day program is already in place and administered
by the state medical association or other medical group, proper coordination of your chapter’s participation in the program is critical. An extremely negative situation for your chapter could occur if an emergency physician was scheduled to serve as doctor-of-the-day and did not keep the commitment. A member of your chapter’s staff, government affairs committee, or board of directors should be assigned to coordinate the physician participation portion of the program. All members who volunteer to serve as doctor-of-the-day should be contacted in advance of their scheduled shift and be reminded of their participation. It is also important that participating physicians be aware of the chapter’s position on issues that are being considered by the legislature.

Scope of Services Provided

In most state capitols, only basic care such as blood pressure checks, and the distribution of bandages, aspirin, or Tylenol is provided at the medical facilities. The emergency physician may be expected to bring certain equipment (such as a stethoscope). The policies and procedures on dispensing sample drugs, writing prescriptions, documenting the consultation, and privacy should be available for review. A physician participating in this program may be asked to perform brief evaluations on legislators, staff, or capitol employees who become ill or injured, but these evaluations are not expected to be comprehensive or definitive. Advice on whether patients should go home or to an emergency department, or see their own physician is usually all that is required. If a serious illness or injury occurs, the emergency medical services system should be activated.

The program coordinator for your chapter or the state medical association should provide specific information on the extent of medical care and advice expected of participating physicians.

Professional Liability Issues

Because of the minor nature of the medical problems usually encountered in a program of this type, the risk of medicolegal liability is low. Unfortunately, that does not mean it is absent. Participation in this program for no monetary compensation may or may not be considered an activity covered under the Good Samaritan laws of your state. Most state medical associations that sponsor such programs have obtained an opinion from their legal counsel concerning liability issues. If they have not, your chapter should seek an opinion from the state attorney general’s office or from an attorney familiar with professional liability issues in your area before agreeing to participate in the program.

A physician’s professional liability (malpractice) insurance carrier also may or may not consider this type of activity to be within the normal scope of practice for an emergency physician. Participants should consult their insurance carriers in advance and obtain a letter from them stating that their participation will be covered under the terms of their current policy.

It is always prudent to advise your members to activate the local EMS system for any illness or injury that is questionable or potentially serious. Participating physicians should not forget that they will be working in a first aid station, not an emergency department, and their threshold for referral should be adjusted accordingly.

Physician Behavior While Staffing the First Aid Station

While actually on duty at the first aid facility, it may not be appropriate for physicians to promote or discuss medical issues with legislators or staff who come in for treatment. These individuals are there for medical care (even though the problem may be very minor), and to institute a discussion of politically sensitive issues may not be proper. However, if asked an opinion, it is usually acceptable for the physician to explain his or her views or the chapter’s
position on the matter. If the issue is complex and not amenable to a brief discussion, you can arrange a meeting with the legislator or staff member at some other time. While working at these facilities, physicians should always remember that they are there primarily as physicians, and they should give opinions on medical issues only when asked specifically.

In contrast to the above advice, it is certainly appropriate for emergency physicians to promote their views when they encounter legislators before or after a scheduled shift as doctor-of-the-day. Encourage members who will be participating to arrange their schedules so that they will have time to spend at the capitol in addition to the time actually on duty. It is your chapter members’ right and responsibility as citizens, and their increased exposure and involvement in the political process is the major benefit of this type of program.

In one state, a doctor-of-the-day program was the target of a negative television report by an investigative journalist. The reporter essentially portrayed the program as an effort to circumvent the state’s lobbying and disclosure laws by the medical profession. His logic was that no other professional group provided similar “free” service to state legislators and that the physicians involved in the program were basically undocumented lobbyists.

This type of accusation demonstrates the importance of advising all participating physicians to express their opinions on pending legislative matters only when requested to do so, or when they are not actually on duty as doctor-of-the-day. Although it is unlikely that this type of negative press coverage will occur in other states, your chapter president or government affairs committee chairperson should have a response planned in case this type of accusation is made.

Coordinate of the Message

Because the physicians who participate in this program may be asked for their opinions on matters before the legislature, it is important that all participating physicians be aware of your chapter’s or the state medical association’s official position on pertinent or controversial issues. To have physicians expressing contradictory opinions on legislative matters is very damaging to your chapter’s political goals.

An orientation session or information packet with position summaries is an excellent way to have all participants informed of the chapter’s views on important issues. A phone call from your chapter’s program coordinator or government affairs committee chairperson to the member scheduled to be the doctor-of-the-day can help avoid misunderstandings. It is critical that all participants be aware of your chapter’s official positions and feel comfortable promoting them. The time to reconcile differences of opinion on political issues is before the members’ interaction with their state legislators, not after.