



American Medical Association – Resident and Fellow Section (AMA-RFS) Leadership Opportunities in the AMA

The American Medical Association is YOUR organization; by virtue of your leadership, you shape its course and its future. The AMA encourages the participation of all its members in representing the profession in all of its diversity.

The AMA prepares and distributes annually a demographic analysis of the councils, with a comparison to the physician population overall and the AMA physician membership. State and specialty societies (in nominating or sponsoring candidates); the House of Delegates (in electing council members); and the Board of Trustees, the Speakers and the President (in appointing or nominating physicians for service on AMA councils or in other leadership positions), are urged to consider the need to enhance and promote diversity.

It is vital to the medical profession that such diversity is present at all levels of organized medicine. The following information outlines various AMA leadership opportunities. This is a working document; related information from your respective associations should be forwarded to our office to be included in this document.

Appointed by the Board of Trustees

American Medical Political Action Committee (AMPAC), two year term

The AMA created AMPAC in 1961 to strengthen the cause of organized medicine by making campaign contributions to medicine friendly candidates running for the US House or Senate. Over the years, AMPAC has expanded its focus to include maximizing political education and political participation of physicians and medical students, through the AMPAC Candidate's Workshop and AMPAC Campaign School, for example. The State Medical Societies have their own PACs, which support local candidates, evaluate national candidates, and forward these recommendations to AMPAC for funding. (12 members) For leadership education see last page.

Accreditation Council for Graduate Medical Education (ACGME), two year term

The Accreditation Council for Graduate Medical Education is composed of the AMA, American Hospital Association, Association of American Medical Colleges, Council of Medical Specialty Societies, American Board of Medical Specialties, a resident physician and a representative from the government and two members from the public. This organization accredits more than 6,000 residency programs throughout the United States. The Council meets three times per year and establishes general performance parameters for programs, as well as approving specific accreditation recommendations of the residency review committees. This is a two-year position and is appointed by the Governing Council.

Council on Legislation, one year term, eight term maximum

Reports to the Board of Trustees and reviews federal legislation to ensure consistency with AMA policy. In the case of conflicts, the council recommends changes to legislation or policy.



This group also reviews AMA legislative issues. It anticipates future federal legislative needs and develops model legislation for states. (13 members)

Elected by the House of Delegates

Board of Trustees (BOT), 2 year term, three term maximum

The Board has ultimate responsibility for setting Association priorities, and for making decisions regarding how to allocate the Association's financial resources. Also among its responsibilities are interpreting and implementing policies established by the House.

The AMA-BOT consists of nineteen members, including designated positions for a public member, young physician, resident physician, and a medical student. The Speaker and Vice Speaker serve as ex officio, non-voting members.

Each candidate for the Board of Trustees must be nominated by a member of the House of Delegates. Trustee elections are held at the Annual Meeting. An election manual is produced prior to the Annual Meeting, which contains information on all candidates for the Board of Trustees. Candidates and their sponsoring societies prepare text and submit copy for publication. It also is suggested that information concerning sponsoring and endorsing societies be included. Also suggested for inclusion is information from the candidate as to relevant biographical information, and, if desired, a personal statement. Two-minute nominating speeches for trustees are presented during the Saturday opening session of the AMA House of Delegates Annual Meeting. Also, Trustees may avail themselves of opportunities to address the various Sections during the Annual Meeting.

Council on Constitution and Bylaws, three year term, two term maximum

A fact-finding and advisory committee that recommends changes in the AMA's constitution and bylaws as determined to be appropriate by the House of Delegates. (10 members)

Council on Medical Education (CME), three year term, two term maximum

Ensures that undergraduate, graduate, and continuing medical education will equip physicians to meet the ever-advancing scientific and clinical challenges of health care. This Council also reviews and develops educational policy for the Board of Trustees and House of Delegates, proposes nominees for appointments to national governing bodies, and maintains active liaisons with these groups. (12 members) Staff contact: barbara_barzansky@ama-assn.org for more information.

Council on Medical Service, three year term, two term maximum

The Council on Medical Service was formed, in large part, due to growing concerns over proposed changes as to how health care services should be delivered and financed in the United States. By establishing the Council, the AMA committed itself to a new body that would have clear, nonscientific goals. Today, the Council continues to actively undertake studies and present policy recommendations to the House of Delegates. The Council's 1998 report, ["Empowering our Patients: Individually Selected, Purchased, and Owned Health Expense Coverage."](#) provided the basis for the AMA's current proposals for reforming the private health



insurance system and expanding patient choice and health insurance coverage. (12 members)
Staff contact, Rob Otten, (312) 464-4735 for more information.

Council on Science and Public Health (CSPH), three year term, two term maximum

The mission of the Council on Science and Public Health, formerly referred to as the Council on Scientific Affairs (CSA) is to assure the position of the AMA as the national leader in advancing the science of medicine as the primary mechanism for improving the quality of patient care, enhancing medical progress, and enhancing the health of the public. CSA consists of eleven active members of the AMA, one of whom is a Resident. These members of the Council are elected by the House of Delegates. The Board of Trustees nominates two or more eligible members for each vacancy on the Council, and further nominations may be made from the floor of the House. Staff contact nancy.nolan@ama-assn.org for more information.

Graduate Medical Education Advisory Committee

This committee reviews and recommends to the Council on Medical Education, acceptance, rejection or modification of proposed changes in the standards for the accreditation of residency programs. GMEAC also reviews and recommends to the Council on Medical Education policy positions related to graduate medical education either on the GMEAC's initiative or as requested by the Council on Medical Education.

- Ten members, at least one of whom must be a resident physician
- The Committee meets 3-4 times a year
- Expenses are reimbursed in accordance with AMA policy
- One year appointments

Continuing Medical Education Advisory Committee

This committee reviews and recommends to the Council on Medical Education, or act as delegated by the Council on Medical Education, to implement Board of Trustees Report NN (A-81), charging the Council to maintain the AMA as an accredited sponsor of continuing medical education. It also assists in the selection of topics for video clinics and recommends steps to maintain the quality of these instruments for continuing medical education. Additionally, CMEAC reviews and recommends to the Council on Medical Education acceptance, rejection or modification of proposed changes in the standards for the accreditation of continuing medical education programs.

- Eight members, at least one of whom must be a practicing physician
- The Committee meets 3-4 times a year
- Expenses are reimbursed in accordance with AMA policy
- One year appointments

Appointed by the Board of Trustee and the Speaker of the House of Delegates

Council on Long Range Planning and Development, three year term, two term maximum



Serves as the focal point for the study of the environment of medical practice, organizational structure and government, and the AMA's policy-development system. (10 members) Contact clrpd@ama-assn.org for more information.

Nominated by the President and Elected by the House of Delegates

Council on Ethical and Judicial Affairs (CEJA), three year term, two term maximum

CEJA has original jurisdiction in all questions involving the Principles of Medical Ethics of the AMA, as well as the constitution, bylaws, and rules of the Association. The Council investigates unethical behavior, conflicts, or complaints from the AMA, specialty societies, and state societies. (10 members)

AMA Special Groups

AMA Minority Affairs Consortium (MAC)

The MAC promotes education and advocacy on minority health issues and works to increase diversity in the AMA membership and leadership. There is a sign-up membership for MAC. Nominations for Governing Council At-large (2) positions, and for the MAC Delegate to the HOD, are open to all MAC members. They are elected directly by current MAC members (AMA members only) via electronic balloting. Candidates should submit their statement of interest, CV, and electronic photograph to the MAC office by March. Slotted seat representatives on the Governing Council – representing respectively, the Medical Student Section, Resident and Fellows Section, Young Physicians Section, and the National Medical Association, National Hispanic Medical Association, and Association of American Indian Physicians -- are appointed by those organizations based on their own nominations process. (mac@ama-assn.org)

AMA Women Physicians Congress (WPC)

The WPC addresses women in medicine professional and women's health issues, representing its sign-up membership. The WPC is not represented in the HOD but helps to shape policy and advocacy in other ways. Three At-large members of the WPC Governing Council are elected directly by current WPC members (AMA members only) via electronic balloting, based on an open-nomination process. Candidates should submit their statement of interest, CV, and electronic photograph to the WPC office by March. Slotted seat representatives – representing respectively the AMA Medical Student Section, Resident and Fellows Section, Young Physician Section and the American Medical Women's Association, are also elected by the membership but based on nominations provided by their sections/AMWA. (wpc@ama-assn.org)

AMA Advisory Committee on Gay, Lesbian, Bisexual and Transgender (GLBT) Issues

The MAC advisory committee consists of 7 members appointed by the Board of Trustees and including positions for the Medical Student, Resident and Fellow, and Young Physician Sections, and the Gay and Lesbian Medical Association. The committee advises the AMA Board of Trustees and Association on issues affecting MAC patients and physicians and serves as a focal point for physicians wishing to promote awareness and education on such issues. Contact glbt@ama-assn.org



AMA Advisory Committee on Group Practice Physicians

This committee advises the AMA Board of Trustees and the AMA Office of Group Practice Liaison on issues that impact or affect physicians who practice in group practice settings. The committee consists of representatives from 17 academic and group practices throughout the United States, and the executive directors of the Medical Group Management Association and the American Medical Group Association. The Committee meets three times yearly to discuss policy matters and activities that bear directly on group and faculty practice plan physicians. Staff contact carrie.waller@ama-assn.org for more information.

AMA Sections

The Sections leadership comes from within their Assembly structure. Each section has a Governing Council and Delegate(s)/Alternate Delegate(s) who are elected on-site by their respective Assembly members/representatives to represent the section concerns in the AMA House of Delegates. (The MSS also has regional delegates.) Each Section Assembly meets twice each year in conjunction with the AMA House of Delegates.

Medical Student Section (MSS)

The AMA MSS provides a direct means for medical students to participate in the activities of the Association through a representative body based on a voting member from each medical school with provisions for schools with multiple campuses, national medical student organizations, and specialty society student sections as well. The MSS policy-making process provides a training ground for the AMA-HOD and a valuable introduction to organized medicine and policy. The strengths of the MSS include its chapter structure which provides a focal point for community service activities and recruitment.

Resident and Fellow Section (RFS)

The AMA Resident and Fellow Section (AMA-RFS) provides a national forum for resident physicians and fellows. The Assembly is comprised of the delegates and alternate delegates of medical associations and other groups. The Governing Council is responsible for setting the Assembly meeting agendas and monitoring resolutions and reports through the Council meetings which are held every two months.

Young Physicians Section (YPS)

The AMA defines young physicians as those physicians in professional practice, under age 40 or in their first eight years of practice, nearly a quarter of all practicing physicians. The AMA-YPS Assembly, consisting of representatives from each state and 36 specialty societies, considers resolutions and reports on policy issues, especially those of concern to young practicing physicians.

International Medical Graduates (IMG) Section Approval for an IMG Section and a seat in the AMA House of Delegates was granted at the 1996 AMA Interim Meeting, succeeding a number of ad hoc committees. The major focus of the Section is combating discrimination through the AMA policy which states that residency selection and employment decisions should



be made on the basis of merit and not on where the physician received his/her medical training. The IMG Caucus is an ongoing voice for IMG interests.

Organized Medical Staff Section (OMSS)

The mission of the OMSS is to lead and assist grassroots physicians, individually and in groups, to support their role as medical leaders and advocates for excellence in patient care, professionalism and the integrity of the patient-physician relationship. The OMSS provides practical educational forums and influences the advocacy agenda through its role in the HOD. Any practicing physician may attend the OMSS educational meetings and testify at reference committee hearings. However, only one physician may be credentialed to serve as the OMSS representative of his-her hospital, health system or physician organization.

Section on Medical Schools (SMS)

The SMS serves to improve communication between practicing physicians and medical educators—and maintain the preeminence of the US medical education system. The Section provides all US medical schools a voice in House deliberations and offers a forum for discussing and developing policies on medical education and national health care issues, and helping to shape AMA policy on these issues. Currently, there are more than 550 representatives, with up to 5 representatives from each of the 125 accredited US medical schools.

Other Positions

National Board of Medical Examiners, four year commitment, \$1100 stipend, one 3 day meeting per year (expenses are covered), category 1 CME credit, 50 hrs. work per year, candidates are chosen based on their areas of expertise and if there is an opening on that committee. The Federation of State Medical Boards of the United States, Inc., and the National Board of Medical Examiners (NBME) have established a single, three-step examination for medical licensure in the United States. USMLE provides a common evaluation system for applicants for medical licensure. Call (215) 590-9500 for more information.

National Resident Matching Program Board of Directors

The National Resident Matching Program (NRMP) Board of Directors governs the NRMP which is a private, not-for-profit corporation established in 1952 to provide a uniform date of appointment to positions in graduate medical education (GME). The AMA-RFS Governing Council nominates resident members for two-year terms.

Residency Review Committee (RRC) and American Medical Specialty Boards, nominations

Each year the American Medical Association (AMA) solicits recommendations from various sources for possible appointment to Residency Review Committees or nominations to American Medical Specialty Boards. The Board of Trustees is aware that there are many physicians who are AMA members and who are well qualified for appointment to these committees, but whose names and credentials have not been brought to its attention. Periodically, fifteen of the American medical specialty boards ask for recommendations for their respective Board of Directors.



The RRC proposes requirements for revising residency program accreditation standards and ensure compliance with standards by individual programs. Membership on each RRC consists of an equal number of representatives appointed by the American Medical Association, the appropriate medical specialty board, and for most, the designated national medical specialty society.

International Medical Graduates Governing Council

The Resident representative serves as a voting member of the IMG Section Governing Council. The IMG Section represents and advocates for IMGs within the AMA. The RFS Governing Council nominates candidates to run in the IMG election. The election is conducted on the AMA Web site and voters are AMA members who have designated themselves members of the IMG Section. This is a two-year term.

Surgical Caucus Executive Committee

The Surgical Caucus discusses issues and AMA House of Delegates resolutions relevant to the surgical field. The resident member participates in the surgical caucuses at the AMA Annual and Interim meetings and serves as a member of the Surgical Caucus Executive Committee. This is a one-year position appointed by the AMA-RFS Governing Council.

For Additional Information

If there is not a staff contact person listed for any of the above, contact (800) 262-3211, ext. 4748 or e-mail: rfs@ama-assn.org for further information.