

DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its 2005 Annual Meeting and should not be considered final. Only the Official Proceedings of the House of Delegates reflect official policy of the Association.

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES (A-05)

Report of Reference Committee D

Sally J. Trippel, MD, Chair

1 In keeping with Resolution 601 (A-96), the Reference Committee recommends the
2 following consent calendar for acceptance:

3
4 **RECOMMENDED FOR ADOPTION**

- 5
6 1. Council on Scientific Affairs Report 2 – Factors that Influence Differences in
7 Breastfeeding Rates
8
9 2. Council on Scientific Affairs Report 3 – Chronic Wasting Disease: Implications for
10 Human Health
11
12 3. Resolution 403 – Sun Protection Programs in Elementary Schools
13
14 4. Resolution 417 – Emergency Contraception for Sexual Assault Victims
15
16 5. Resolution 420 – Healthy Food in Hospitals
17
18 6. Resolution 426 – Establishing an FDA Minority Health Committee
19
20 7. Resolution 428 – Revision of Nutrition Labels
21
22 8. Resolution 432 – Increase Funding for School and Preschool Services for MRDD
23 Children
24
25 9. Resolution 436 – Safety for Americans from Nuclear Weapons Testing Act
26
27 10. Resolution 441 – NIOSH as an Independent Branch of HHS
28

29 **RECOMMENDED FOR ADOPTION IN LIEU OF**

- 30
31 11. Resolution 442 – Eliminate Underage Alcohol Consumption
32 Resolution 407 – Eliminate Underage, Destructive and High Risk Alcohol
33 Consumption
34 Resolution 408 – Eliminate Underage, Destructive and High Risk Alcohol
35 Consumption

- 1 12. Resolution 445 – Health Disparities Among Gay and Lesbian Families
2 Resolution 409 – Discrimination Against Our Gay, Lesbian, Bisexual and
3 Transgender Patients
4

5 **RECOMMENDED FOR ADOPTION AS AMENDED OR SUBSTITUTED**
6

- 7 13. Board of Trustees Report 8 – State Tobacco Tax Revenue Increases and
8 Responsible Use of Resulting Funds
9
10 14. Council on Scientific Affairs Report 4 – Recommendations for Physician and
11 Community Collaboration on the Management of Obesity
12
13 15. Council on Scientific Affairs Report 5 – Policy H-130.989, Protocol for Emergency
14 Medical Services Personnel
15
16 16. Council on Scientific Affairs Report 7 – Diagnosis and Management of Family
17 Violence
18
19 17. Council on Scientific Affairs Report 8 – CSA’s Sunset Review of 1995 House
20 Policies
21
22 18. Resolution 401 – Teaching CPR to All High School Students
23
24 19. Resolution 404 – Raise Guam’s Minimum Legal Drinking Age to National
25 Standards
26
27 20. Resolution 405 – Support for Guam’s Proposed Smoke-Free Public Places Law,
28 the “Natasha Protection Act”
29
30 21. Resolution 406 – Teaching Sexual Education to Disabled Youth in School
31
32 22. Resolution 412 – School-Based and School-Linked Health Centers
33
34 23. Resolution 413 – Addition of Alternatives to Soft Drinks in Public Schools
35
36 24. Resolution 414 – Human Exposure to Polybrominated Diphenyl Ether (PBDE)
37 Fire Retardants
38
39 25. Resolution 416 – Support the Measles Initiative
40
41 26. Resolution 418 – Drug Education in Schools
42
43 27. Resolution 419 – Early Intervention for Children with Developmental Delay
44
45 28. Resolution 421 – Labeling of Video Game Content
46
47 29. Resolution 423 – Federal Financing of Poison Center Network
48
49 30. Resolution 424 – Teen and Young Adult Suicide in the United States

- 1 31. Resolution 425 – Depression and Suicide on College Campuses
- 2
- 3 32. Resolution 429 – Domestic Violence Against Pregnant Women
- 4
- 5 33. Resolution 430 – Encouraging Vision Screenings for Schoolchildren
- 6
- 7 34. Resolution 431 – Cardiopulmonary Resuscitation Training
- 8
- 9 35. Resolution 433 – ATV Safety
- 10
- 11 36. Resolution 434 – Require Backup Warning Devices on New SUVs as Standard
- 12 Equipment
- 13
- 14 37. Resolution 438 – Increasing Taxes on Alcoholic Beverages
- 15
- 16 38. Resolution 439 – Promoting the Utilization of New and Old Medicare Preventive
- 17 Services Benefits
- 18
- 19 39. Resolution 440 – Protect Children from Skin Cancer
- 20
- 21 40. Resolution 443 – Opiate Replacement Therapy Programs in Correctional
- 22 Facilities
- 23
- 24 41. Resolution 444 – Collaborative Approach to Addressing Tobacco Use and
- 25 Dependence
- 26
- 27 42. Resolution 446 – Department of Justice Lawsuit Against the Tobacco Industry
- 28

29 **RECOMMENDED FOR REFERRAL**

- 30
- 31 43. Resolution 411 – Mercury Pollution
- 32
- 33 44. Resolution 422 – Development and Support of Prospective Personalized Health
- 34 Planning
- 35
- 36 45. Resolution 437 – Imposing Taxes on Sugar-Sweetened Soft Drinks
- 37

38 **RECOMMENDED FOR NOT ADOPTION**

- 39
- 40 46. Resolution 427 – AMA Policy on Alcohol
- 41

42 **RECOMMENDED FOR REAFFIRMATION IN LIEU OF**

- 43
- 44 47. Resolution 435 – Designated Drivers

1 (1) COUNCIL ON SCIENTIFIC AFFAIRS REPORT 2 -
2 FACTORS THAT INFLUENCE DIFFERENCES IN
3 BREASTFEEDING RATES (RESOLUTION 412, A-04)
4

5 RECOMMENDATION:
6

7 Madam Speaker, your Reference Committee recommends
8 that the recommendations in Council on Scientific Affairs
9 Report 2 be adopted and that the remainder of the report
10 be filed.
11

12 **HOD ACTION: Recommendations In Council on Scientific**
13 **Affairs Report 2 adopted and remainder of report filed.**
14

15 Report 2 of the Council on Scientific Affairs responds to adopted Resolution 412 (A-04)
16 that asked AMA to investigate factors contributing to differences in breastfeeding rates
17 between various racial and ethnic groups with a report that included possible actions to
18 address these factors. The report recommends that a new policy be adopted to respond
19 to Resolution 412 and incorporates elements of existing policies.
20

21 Your Reference Committee heard testimony in strong support of CSA Report 2.
22 Concern was voiced that the report was not comprehensive in its scope and should
23 include programs for women physicians, residents and medical students who are
24 breastfeeding their children. Your Reference Committee has been informed that
25 Resolution 325, which addressed this issue, was presented in Reference Committee C.
26
27

28 (2) COUNCIL ON SCIENTIFIC AFFAIRS REPORT 3 -
29 CHRONIC WASTING DISEASE: IMPLICATIONS FOR
30 HUMAN HEALTH (RESOLUTION 422, A-04)
31

32 RECOMMENDATION:
33

34 Madam Speaker, your Reference Committee recommends
35 that the recommendations in Council on Scientific Affairs
36 Report 3 be adopted and that the remainder of the report
37 be filed.
38

39 **HOD ACTION: Recommendations In Council on Scientific**
40 **Affairs Report 3 adopted and remainder of report filed.**
41

42 Report 3 of the Council on Scientific Affairs responds to referred Resolution 422 (A-04)
43 that asked the AMA to study health issues associated with chronic wasting disease,
44 including but not limited to, facilities processing both game and non-game animals. The
45 report recommends that our AMA reaffirm Policy H-150.959 (3), (5), and (6) and Policy
46 H-150.950, that our AMA urge the Food and Drug Administration (FDA) to: (1) continue
47 aggressive enforcement of existing regulations to prevent the transmission of animal-
48 transmissible spongiform encephalopathies to humans; and (2) consider making Draft
49 Guidance Document 158, Use of Material From Deer and Elk in Animal Feed, into a
50 regulation. The resolution also recommends that our AMA encourage continued

1 research into the potential transmission of chronic wasting disease (CWD) to other
2 animals and humans and support continued surveillance of the CWD epidemic in cervids
3 and continued investigation into human cases of CJD that appear to have an
4 epidemiological link to exposure to CWD.

5
6 Your Reference Committee heard limited but supporting testimony in support of this
7 report. The Council on Scientific Affairs was commended for their excellent report.
8

9
10 (3) RESOLUTION 403 - SUN PROTECTION PROGRAMS IN
11 ELEMENTARY SCHOOLS

12
13 RECOMMENDATION:

14
15 Madam Speaker, your Reference Committee recommends
16 that Resolution 403 be adopted.

17
18 **HOD ACTION: Resolution 403 adopted.**

19
20 Resolution 403 asks that our AMA work with the National Association of State Boards of
21 Education, the Centers for Disease Control and Prevention, and other appropriate
22 entities to encourage elementary schools to develop sun protection policies.

23
24 Supportive testimony was voiced on this resolution. The goal of these sun protection
25 policies is to raise awareness of the teacher, parent, and child to the issue. Concerns
26 were raised that these policies would put undue burden on teachers but the majority of
27 testimony supported this resolution. Your Reference Committee is aware that the
28 Centers for Disease Control and Prevention (CDC) has developed communication tools
29 to increase awareness, formulate policy and enhance the school environment for skin
30 cancer prevention and the National Association of State Boards of Education has
31 sample policies to promote sun safety and prevent skin cancer.
32

33
34 (4) RESOLUTION 417 - EMERGENCY CONTRACEPTION
35 FOR SEXUAL ASSAULT VICTIMS

36
37 RECOMMENDATION:

38
39 Madam Speaker, your Reference Committee recommends
40 that Resolution 417 be adopted.

41
42 **HOD ACTION: Resolution 417 adopted.**

43
44 Resolution 417 asks that our AMA urge that the United States Justice Department's new
45 National Protocol for Sexual Assault Medical Forensic Examination be amended to
46 include a full discussion and recommendations on the use of emergency contraception
47 to prevent unwanted pregnancy in sexual assault victims, in line with established
48 recommendations by the American College of Obstetricians and Gynecologists and
49 other relevant medical organizations.

1 Testimony unanimously supported this resolution. Speakers stated that the availability
2 of emergency contraception needs to be clearly delineated among the treatment options
3 and presented to sexual assault victims.
4

5
6 (5) RESOLUTION 420 - HEALTHY FOOD IN HOSPITALS
7

8 RECOMMENDATION:
9

10 Madam Speaker, your Reference Committee recommends
11 that Resolution 420 be adopted.
12

13 **HOD ACTION: Resolution 420 adopted.**
14

15 Resolution 420 asks that our AMA urge component medical societies, member
16 physicians and other appropriate local groups to encourage palatable, health-promoting
17 foods in hospitals and other health care facilities and oppose the sale of unhealthy food
18 with inadequate nutritional value or excessive caloric content as part of a comprehensive
19 effort to reduce obesity and that our AMA urge health care facilities that contract with
20 outside food vendors to select vendors that share their commitment to the health of their
21 patients and community.
22

23 No testimony was heard on Resolution 420. Your Reference Committee agrees with the
24 intent of this resolution and believes that it is important for healthy options to be made
25 available to patients and their families.
26

27
28 (6) RESOLUTION 426 - ESTABLISHING AN FDA MINORITY
29 HEALTH COMMITTEE
30

31 RECOMMENDATION:
32

33 Madam Speaker, your Reference Committee recommends
34 that Resolution 426 be adopted.
35

36 **HOD ACTION: Resolution 426 adopted.**
37

38 Resolution 426 asks that our AMA and its Minority Affairs Consortium (MAC) urge the
39 United States Congress to establish a Food and Drug Administration Minority Health
40 Committee to address effective strategies to increase the participation of minority
41 patients and investigators in clinical trials and medical research as one way to eliminate
42 health disparities and that our AMA, through its MAC, provide information to minority
43 physicians on the benefits of being a clinical trial investigator. The resolution also asks
44 that our AMA encourage and work with the appropriate organizations to include more
45 minorities in clinical trials and medical research as patients and investigators as one way
46 to eliminate racial and ethnic health disparities and urge the United States Congress and
47 the United States Food and Drug Administration to develop an incentive program, like
48 the Pediatric Incentive Program, that will encourage increasing the number of minorities
49 in clinical trials and medical research.

1 Your Reference Committee heard limited but unanimous testimony in support of this
2 resolution. Information provided to the Reference Committee stated that the inclusion of
3 minorities is critical to research validation and to derive clinically relevant data to address
4 health disparities.

5
6
7 (7) RESOLUTION 428 - REVISION OF NUTRITION LABELS

8
9 RECOMMENDATION:

10
11 Madam Speaker, your Reference Committee recommends
12 that Resolution 428 be adopted.

13
14 **HOD ACTION: Resolution 428 adopted.**

15
16 Resolution 428 asks that our AMA ask the appropriate federal agency or body to require
17 that the nutritional labels on all products sold in the United States have both the absolute
18 amount (in appropriate units) and the percent daily values listed for the nutrients in the
19 product.

20
21 Your Reference Committee heard no testimony on this resolution. Comments from one
22 speaker suggested reservations over the feasibility with any labeling strategies, because
23 consumers are not inclined to read such information. It was suggested that the most
24 important information on nutritional labels is serving size.

25
26
27 (8) RESOLUTION 432 - INCREASE FUNDING FOR SCHOOL
28 AND PRESCHOOL SERVICES FOR MRDD CHILDREN

29
30 RECOMMENDATION:

31
32 Madam Speaker, your Reference Committee recommends
33 that Resolution 432 be adopted.

34
35 **HOD ACTION: Resolution 432 adopted.**

36
37 Resolution 432 asks that our AMA seek passage of federal regulation and/or legislation
38 increasing school funding for services for preschool and school-aged mentally
39 retarded/developmentally disabled children in the educational setting.

40
41 Your Reference Committee heard testimony in full support of the resolution. Services for
42 mentally retarded/developmentally disabled children who are preschool and school-aged
43 are critically important to their health and well-being.

1 (9) RESOLUTION 436 - SAFETY FOR AMERICANS FROM
2 NUCLEAR WEAPONS TESTING ACT

3
4 RECOMMENDATION:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 436 be adopted.

8
9 **HOD ACTION: Resolution 436 adopted.**

10
11 Resolution 436 asks that our AMA support legislation that would protect public health
12 and safety, should the testing of nuclear weapons by the United States be resumed.

13
14 There was no testimony heard on Resolution 436. Your Reference Committee feels that
15 AMA support of this resolution is in line with sound public health policy.

16
17
18 (10) RESOLUTION 441 - NIOSH AS AN INDEPENDENT
19 BRANCH OF HHS

20
21 RECOMMENDATION:

22
23 Madam Speaker, your Reference Committee recommends
24 that Resolution 441 be adopted.

25
26 **HOD ACTION: Resolution 441 referred for decision.**

27
28 Resolution 441 asks that our AMA advocate in support of the movement to establish the
29 National Institute for Occupational Safety and Health as an independent branch of the
30 Department of Health and Human Services.

31
32 There was limited testimony on Resolution 441; however, speakers communicated that
33 the move to an independent branch should have been made a long time ago. NIOSH
34 was described as a neglected entity and under funded with respect to federal
35 appropriations.

- 1 (11) RESOLUTION 442 - ELIMINATE UNDERAGE ALCOHOL
2 CONSUMPTION
3 RESOLUTION 407 - ELIMINATE UNDERAGE,
4 DESTRUCTIVE AND HIGH RISK ALCOHOL
5 CONSUMPTION
6 RESOLUTION 408 - ELIMINATE UNDERAGE,
7 DESTRUCTIVE AND HIGH RISK ALCOHOL
8 CONSUMPTION
9

10 RECOMMENDATION A:

11
12 Madam Speaker, your Reference Committee recommends
13 that Resolution 442 be amended by insertion and deletion
14 of the second resolve to read as follows:
15

16 ~~RESOLVED, That our AMA support public~~
17 ~~health/environmental policies to curtail underage and high-~~
18 ~~risk drinking, including banning underage young people~~
19 ~~from entry into bars, increasing alcohol excise taxes,~~
20 ~~reducing or eliminating drink specials, reducing/controlling~~
21 ~~alcohol outlet density and requiring keg registration,~~
22 ~~mandating server and seller training and enforcement~~
23 ~~(directive to take action); and be it further~~
24

25 RESOLVED, That our AMA support evidence-based public
26 health/environmental policies to curtail destructive and
27 high-risk drinking. (New HOD Policy)
28

29 RECOMMENDATION B:

30
31 Madam Speaker, your Reference Committee recommends
32 that Resolution 442 be adopted as amended in lieu of
33 Resolutions 407 and 408.
34

35 **HOD ACTION: Resolution 442 adopted as amended in lieu**
36 **of Resolutions 407 And 408.**
37

38 Resolution 442 asks that our AMA actively oppose underage drinking by working toward
39 a comprehensive community-based environmental approach that includes local and
40 state policies and medical services, that our AMA support public health/environmental
41 policies to curtail underage and high-risk drinking, including banning underage young
42 people from entry into bars, increasing alcohol excise taxes, reducing or eliminating
43 drink specials, reducing/controlling alcohol outlet density and requiring keg registration,
44 mandating server and seller training and enforcement, and that our AMA encourage
45 members of all medical and specialty societies to participate on the American Medical
46 Association Action Team on Alcohol and Health.
47

48 Resolution 407 asks that our AMA actively oppose underage, destructive and high risk
49 drinking by working toward a comprehensive community-based environmental approach
50 that includes local and state policies and medical services and that our AMA support

1 evidence-based public health/environmental policies to curtail destructive and high-risk
2 drinking.

3
4 Resolution 408 asks that our AMA actively oppose underage drinking by working toward
5 a comprehensive community-based environmental approach that includes local and
6 state policies and medical services and that our AMA support public
7 health/environmental policies to curtail underage and high-risk drinking, including
8 banning underage young people from entry into bars, increasing alcohol excise taxes,
9 reducing or eliminating drink specials, reducing/controlling alcohol outlet density and
10 requiring keg registration, and mandating server and seller training and enforcement.

11
12 Supportive testimony was heard on Resolutions 407, 408, and 442 and in support of
13 combining these resolutions. Approaches to address underage, destructive and high
14 risk drinking are extensive and the second resolve in Resolution 442 should be
15 intentionally broad and emphasize evidence-based approaches but not define them.
16 Testimony from the American Society of Addiction Medicine stated that Resolution 442
17 has been adopted or is under consideration by twenty state and county medical societies
18 and specialty societies. Your Reference Committee believes that the inclusion of this
19 resolution into AMA policy further strengthens efforts to eliminate underage alcohol
20 consumption.

21
22
23 (12) RESOLUTION 445 - HEALTH DISPARITIES AMONG
24 GAY AND LESBIAN FAMILIES
25 RESOLUTION 409 - DISCRIMINATION AGAINST OUR
26 GAY, LESBIAN, BISEXUAL AND TRANSGENDER
27 PATIENTS

28
29 RECOMMENDATION A:

30
31 Madam Speaker, your Reference Committee recommends
32 that Resolution 445 be amended by deletion of the second
33 resolve on lines 27-30.

34
35 ~~RESOLVED, That our AMA speak up for the health care~~
36 ~~equality of same sex partnered families when laws or~~
37 ~~constitutional amendments are being considered that~~
38 ~~would prohibit civil unions or domestic partnerships~~
39 ~~because of the negative effects these laws may have on~~
40 ~~the health of the dependent children and parents in these~~
41 ~~families. (directive to take action)~~

42
43 RECOMMENDATION B:

44
45 Madam Speaker, your Reference Committee recommends
46 that Resolution 445 be adopted as amended in lieu of
47 Resolution 409.

1 RECOMMENDATION C:
2

3 Madam Speaker, your Reference Committee recommends
4 that the title of Resolution 445 be changed to read as
5 follows:

6
7 HEALTH DISPARITIES AMONG GAY, LESBIAN,
8 BISEXUAL AND TRANSGENDER FAMILIES
9

10 **HOD ACTION: Resolution 445 adopted as amended in lieu**
11 **of Resolution 409 with change in title.**
12

13 Resolution 445 asks: (1) that our AMA work to reduce the health disparities suffered
14 because of unequal treatment of minor children and same sex parents in same sex
15 households by supporting equality in laws effecting health care of members in same sex
16 partner households and their dependent children; and (2) that our AMA speak up for the
17 health care equality of same sex partnered families when laws or constitutional
18 amendments are being considered that would prohibit civil unions or domestic
19 partnerships because of the negative effects these laws may have on the health of the
20 dependent children and parents in these families.

21
22 Resolution 409 asks that our AMA educate the public and our legislators of the negative
23 medical aspects of the Defense of Marriage Act, such as hospital visitation privileges,
24 bereavement privileges, giving permission for procedures for minor children in these
25 families, and insurance coverage for dependent children in these families.

26 Testimony was heard, emphasizing that Resolution 445 was consistent with the AMA
27 priority on eliminating health disparities. Strong support was voiced for the creation of
28 AMA policy to work toward reducing the health disparities suffered by the children and
29 parents in same sex partner households. By focusing on the needs of the children, the
30 recommendations made by your Reference Committee will also ensure consistency with
31 American Academy of Pediatrics policy.
32
33

34 (13) BOARD OF TRUSTEES REPORT 8 - STATE TOBACCO
35 TAX REVENUE INCREASES AND RESPONSIBLE USE
36 OF RESULTING FUNDS (RESOLUTION 803, I-03)
37

38 RECOMMENDATION A:
39

40 Madam Speaker, your Reference Committee recommends
41 that the recommendation in Board of Trustees Report 8
42 amending Policy H-495.987 be further amended by
43 insertion and deletion on page 2, lines 35-39 to read as
44 follows:

45
46 That policy H-495.987 "Tobacco Taxes" be amended by addition and
47 deletion as follows:

48
49 (1) Our AMA will work for and encourages all levels of the federation and
50 other interested groups to support efforts, including education and

1 legislation, to pass increased federal, state, and local excise taxes on
2 tobacco in order to discourage ~~smoking~~ tobacco use.

3
4 (2) An increase in federal, state, and local excise taxes for tobacco
5 should include provisions to make substantial funds available that would
6 be allocated to health care needs and health education, and for the
7 treatment of those who have already been afflicted by tobacco-caused
8 illness, including nicotine dependence, and to support counter-advertising
9 efforts. (Modify AMA Policy)

10
11 RECOMMENDATION B:

12
13 Madam Speaker, your Reference Committee recommends
14 that the recommendation in Board of Trustees Report 8 be
15 adopted as amended and the remainder of the report be
16 filed.

17
18 **HOD ACTION: Recommendation in Board of Trustees**
19 **Report 8 adopted as amended and remainder of report**
20 **filed.**

21
22 Report 8 of the Board of Trustees responds to Resolution 803, which was referred to the
23 BOT in I-03 and called for the AMA to support increases in taxation of tobacco products
24 with revenue from any such tax increases appropriated exclusively for educational,
25 counter-advertising, and cessation programs designed to decrease the prevalence or the
26 adverse effects of tobacco use, and health related costs associated with tobacco use.
27 The report calls for amending Policy H-495.987 to include all levels of government and
28 focus on tobacco use to address the concerns expressed in Resolution 803.

29
30 Your Reference Committee heard uniform support for the recommendation in this report
31 as well as compelling testimony that increasing taxes on tobacco products results in
32 decreased use of such products. Additional language was added to modify current AMA
33 policy by specifying that tobacco tax funds be derived from federal, state, and local
34 excise taxes, and that both legislative and educational efforts be directed to achieving
35 these objectives. Additional testimony favored widespread dissemination of this House
36 action.

37
38
39 (14) COUNCIL ON SCIENTIFIC AFFAIRS REPORT 4 -
40 RECOMMENDATIONS FOR PHYSICIAN AND
41 COMMUNITY COLLABORATION ON THE
42 MANAGEMENT OF OBESITY (RESOLUTION 421, A-04)

43
44 RECOMMENDATION A:

45
46 Madam Speaker, your Reference Committee recommends
47 that Recommendation 1 in Council on Scientific Affairs
48 Report 4 be amended by insertion on page 9, lines 46 – 47
49 to read as follows:

1 That, our AMA work with the Centers for Disease Control
2 and Prevention to convene relevant stakeholders to
3 evaluate the issue of obesity as a disease, using a
4 systematic, evidence-based approach. (Directive To Take
5 Action)

6
7 RECOMMENDATION B:

8
9 Madam Speaker, your Reference Committee recommends
10 that Recommendation 3 in Council on Scientific Affairs
11 Report 4 be amended by insertion on page 10, lines 7 – 10
12 to read as follows:

13
14 That, our AMA encourage physicians to incorporate body
15 mass index (BMI) and waist circumference as a
16 component measurement in the routine adult physical
17 examination, and BMI percentiles in children recognizing
18 ethnic sensitivities and its relationship to stature, and the
19 need to implement appropriate treatment or preventive
20 measures. (Directive To Take Action)

21
22 RECOMMENDATION C:

23
24 Madam Speaker, your Reference Committee recommends
25 that Recommendation 5 in Council on Scientific Affairs
26 Report 4 be amended by insertion and deletion on page
27 10, lines 16 – 20 to read as follows:

28
29 That, our AMA develop a school health advocacy agenda
30 that includes funding for school health programs, physical
31 education and exercise-physical activity with ~~stricter~~ limits
32 on declining participation, alternative policies for vending
33 machines that promote healthier diets, and standards for
34 healthy a la carte meal offerings. Our AMA will work with a
35 broad partnership to implement this agenda. (Directive To
36 Take Action)

37
38 RECOMMENDATION D:

39
40 Madam Speaker, your Reference Committee recommends
41 that Recommendation 6 in Council on Scientific Affairs
42 Report 4 be amended by insertion and deletion on page
43 10, lines 22 – 28 to read as follows:

1 That, our AMA collaborate with the Centers for Disease
2 Control and Prevention, the Department of Education, and
3 other appropriate agencies and organizations to consider
4 the feasibility of convening school health education, ...
5 identify basic tenets for promoting school nutrition and
6 exercise physical activity (using a coordinated school
7 health model), and create recommendations for a
8 certificate program to recognize schools that meet a
9 minimum of the tenants. (Directive To Take Action)

10
11 RECOMMENDATION E:

12
13 Madam Speaker, your Reference Committee recommends
14 that Council on Scientific Affairs Report 4 adopted as
15 amended.

16
17 **HOD ACTION: Council on Scientific Affairs Report 4**
18 **adopted as amended and remainder of report filed.**

19
20 Report 4 of the Council on Scientific Affairs responds to referred Resolution 421 (A-04)
21 that asked the AMA to urge CMS to change the coverage issue for bariatric surgery so
22 that obesity with the appropriate body mass index (BMI) is in itself considered as the
23 appropriate criteria for coverage of this service under the Medicare program and to
24 recognize obesity as a disease. The report recommends that our AMA convene relevant
25 stakeholders to evaluate the issue of obesity as a disease, using a systematic, evidence-
26 based approach, continue to actively pursue measures to treat obesity as an urgent
27 chronic condition, raise the public's awareness of the significance of obesity and its
28 related disorders, and encourage health industries to make appropriate care available
29 for the prevention and treatment of obese patients, as well as those who have co-morbid
30 disorders, and encourage physicians to incorporate body mass index (BMI) and waist
31 circumference as a component measurement in the routine physical examination,
32 recognizing ethnic sensitivities and its relationship to stature, and the need to implement
33 appropriate treatment or preventive measures. The report also recommends that our
34 AMA promote use of our Roadmaps for Clinical Practice: Assessment and Management
35 of Adult Obesity primer in physician education and the clinical management of adult
36 obesity and develop a school health advocacy agenda that includes funding for school
37 health programs, physical education and exercise with stricter limits on declining
38 participation, alternative policies for vending machines that promote healthier diets, and
39 standards for a la carte meal offerings. In addition, the report calls for our AMA to
40 collaborate with the Centers for Disease Control and Prevention and other appropriate
41 agencies and organizations to consider the feasibility of convening school health
42 education, nutrition, and exercise representatives, parents, teachers and education
43 organizations, as well as other national experts to review existing frameworks for school
44 health, identify basic tenets for promoting school nutrition and exercise (using a
45 coordinated school health model), and create recommendations for a certificate program
46 to recognize schools that meet a minimum of the tenants.

47
48 Sponsors of the resolution raised an objection that the Council on Scientific Affairs failed
49 to address the primary issues that BMI should be considered an appropriate criterion for
50 bariatric surgery by CMS for coverage under Medicare and that CMS recognize obesity

1 as a disease. The CSA acknowledged that these are important concerns but feels that
2 they are more appropriately addressed in Recommendation 1 that calls for further
3 examination of this complex issue with the CDC and others. A CDC spokesperson
4 expressed CDC interest and willingness to participate in this endeavor. This action will
5 reduce the fiscal note by more than half. Your Reference Committee agrees with this
6 position and with continued AMA leadership on this topic.

7
8
9 (15) COUNCIL ON SCIENTIFIC AFFAIRS REPORT 5 -
10 POLICY H-130.989, PROTOCOL FOR EMERGENCY
11 MEDICAL SERVICES PERSONNEL

12
13 RECOMMENDATION A:

14
15 Madam Speaker, your Reference Committee recommends
16 that the recommendation of Council on Scientific Affairs
17 Report 5 regarding Policy H-130.989 be amended by
18 insertion on line 24, item 5 to read as follows:

19
20 (5) where voice communication is not available, the
21 bystander physician ~~on the scene of an emergency should~~
22 may sign appropriate ~~forms~~ documentation indicating that
23 he/she will take ~~full medical and legal~~ responsibility for the
24 patient(s), including provision of care during transportation
25 to a medical facility. (~~medical control oversight systems~~
26 lacking voice communications capability should consider
27 the addition of such communication linkages to further
28 strengthen their potential in this area.)

29
30 RECOMMENDATION B:

31
32 Madam Speaker, your Reference Committee recommends
33 that item 6 on lines 27 and 28 of the recommendation in
34 Council on Scientific Affairs Report 5 be deleted.

35
36 ~~(5)(6) if the patient is unstable after the bystander physician provides~~
37 ~~significant intervention or care, the bystander physician should~~
38 ~~accompany the patient to the hospital.~~

39
40 RECOMMENDATION C:

41
42 Madam Speaker, your Reference Committee recommends
43 that Policy H-130.989 in Council on Scientific Affairs
44 Report 5 be adopted as amended and the remainder of the
45 report be filed.

46
47 **HOD ACTION: Policy H-130.989 in Council On Scientific**
48 **Affairs Report 5 adopted as amended and remainder of**
49 **report filed.**

1 Report 5 of the Council on Scientific Affairs responds to the referral of Policy H-130.989
2 for further study as part of the Sunset Report process. The report recommends
3 amendments to the current policy.
4

5 Testimony was uniformly supportive of the intent and overall language of this Council
6 report, which updates Policy H-130.989 for addressing the interaction between
7 emergency medical services personnel and bystander physicians who happen upon the
8 scene of an emergency and desire to render medical assistance. Specific concern was
9 expressed for item 6, in that it could be misinterpreted as establishing a standard of care
10 for bystander physicians, with unintended legal implications. Item 5 was modified to
11 clarify language for those circumstances in which a bystander physician chooses to
12 accompany a patient in an emergency vehicle for transport to a medical treatment
13 facility.
14

15
16 (16) COUNCIL ON SCIENTIFIC AFFAIRS REPORT 7 -
17 DIAGNOSIS AND MANAGEMENT OF FAMILY
18 VIOLENCE (RESOLUTION 438, A-04)
19

20 RECOMMENDATION A:
21

22 Madam Speaker, your Reference Committee recommends
23 that Council on Scientific Affairs Report 7 be amended by
24 deletion of Recommendation 5 on page 4, lines 41-44.
25

26 ~~5. That our AMA ask the Physician Consortium for~~
27 ~~Performance Improvement to develop both a clinical~~
28 ~~performance measurement set to improve the quality of~~
29 ~~care provided to victims of family violence and a CPT~~
30 ~~tracking code for assessment and management of family~~
31 ~~violence. (Directive to Take Action)~~
32

33 RECOMMENDATION B:
34

35 Madam Speaker, your Reference Committee recommends
36 that Council on Scientific Affairs Report 7 be adopted as
37 amended and the remainder of the report be filed.
38

39 **HOD ACTION: Recommendations in Council on Scientific**
40 **Affairs Report 7 adopted as amended and remainder of**
41 **report filed.**
42

43 Report 7 of the Council on Scientific Affairs responds to adopted Resolution 438 (A-04)
44 that asked the AMA to study best practices in diagnosis and management of family
45 violence (including an analysis of studies not reviewed in the U.S. Preventive Services
46 Task Force Recommendations on Screening for Family Violence) and present a report
47 that identifies future research and practice recommendations. The report recommends
48 that our AMA recommend that questions to assess risk for family violence should be
49 included within the context of taking a routine social history, past medical history, history
50 of present illness, and review of systems as part of emergency, diagnostic, preventive,

1 and chronic care management, that our AMA urge the Agency for Healthcare Research
2 and Quality and the National Institutes of Health to fund research and that our AMA
3 inform physicians about educational tools to aid in assessment and management of
4 family violence. In addition, the report recommends that our AMA ask the AMA Advisory
5 Council on Violence and Abuse to study strategies for the primary prevention of family
6 violence and inform physicians of the findings and ask the Physician Consortium for
7 Performance Improvement to develop both a clinical performance measurement set to
8 improve the quality of care provided to victims of family violence and a CPT tracking
9 code for assessment and management of family violence.

10
11 Limited but supportive testimony was heard on the recommendations in this report. The
12 CSA moved to delete recommendation 5 because it was premature at this time to
13 develop performance measures until more data become available. One speaker lauded
14 AMA's longstanding interest in and involvement in prevention of domestic violence.
15 Comments from the Public Health Service were supportive but indicated that the efforts
16 called for in this report, particularly recommendation 2, would require extensive and
17 expensive resources.

18
19
20 (17) COUNCIL ON SCIENTIFIC AFFAIRS REPORT 8 - CSA'S
21 SUNSET REVIEW OF 1995 HOUSE POLICIES

22
23 RECOMMENDATION A:

24
25 Madam Speaker, your Reference Committee recommends
26 that the recommendation in the Council on Scientific Affairs
27 8 be amended by addition of a recommendation to read as
28 follows:

29
30 That the policies listed in the appendix to this report be acted
31 upon in the manner indicated in the appendix, excepting policy
32 H-135.954.

33
34 RECOMMENDATION B:

35
36 Madam Speaker, your Reference Committee recommends
37 that Policy H-135.954 be retained.

38
39 RECOMMENDATION C:

40
41 Madam Speaker, your Reference Committee recommends
42 that Council on Scientific Affairs Report 8 be adopted as
43 amended and the remainder of the report be filed.

44
45 **HOD ACTION: Recommendations in Council on Scientific**
46 **Affairs Report 8 adopted as amended and remainder of**
47 **report filed.**

48
49 Report 8 of the Council of Scientific Affairs responds to the House of Delegates sunset
50 mechanism, which provides for the systematic review of all policies ten years after

1 adoption to assess their continuing timeliness and relevance. This report contains
2 specific recommendations for retention, deletion, and retention-in-part of policies
3 adopted by the House of Delegates for those policies for which the CSA was given
4 responsibility for the review.

5
6 There was limited testimony on CSA Report 8 with only one policy (H-135.954) extracted
7 for comment. The speaker asked that the Reference Committee retain the policy in its
8 original form without modification, which indicated that the AMA will provide leadership in
9 air pollution education and prevention programs. While this is not necessarily a strategic
10 initiative of our AMA, your Reference Committee believes it comports with our public
11 health objectives to which the CSA concurred.

12
13 **H-135.954 Education and Prevention Programs Regarding Air Pollution**
14 **Impact on Body Organs and Systems**

15 The AMA will provide leadership and participate in a major air pollution education
16 and prevention program carried out by the health care community, in cooperation
17 with environmental organizations and business, to inform patients and the public
18 of the negative health effects of indoor and outdoor air pollution on the organs and
19 systems of the body. (Res. 404, I-95)

20
21
22 (18) **RESOLUTION 401 - TEACHING CPR TO ALL HIGH**
23 **SCHOOL STUDENTS**

24
25 **RECOMMENDATION A:**

26
27 Madam Speaker, your Reference Committee recommends
28 that Resolution 401 be amended by addition of a third
29 resolve to read as follows:

30
31 **RESOLVED**, That our AMA encourage the Centers for Disease
32 Control and Prevention to incorporate CPR training for appropriate
33 age levels in their guidelines on comprehensive health education.

34
35 **RECOMMENDATION B:**

36
37 Madam Speaker, your Reference Committee recommends
38 that Resolution 401 be adopted as amended.

39
40 **RECOMMENDATION C:**

41
42 Madam Speaker, your Reference Committee recommends
43 that the title of Resolution 401 be changed to read as
44 follows:

45
46 **TEACHING OF CPR AS A PART OF COMPREHENSIVE HEALTH EDUCATION**
47 **PROGRAMS**

48
49 **HOD ACTION: Resolution 401 adopted as amended with**
50 **change in title.**

1 Resolution 401 asks that our American Medical Association amend Policy H-130.983 to
2 read as follows: "The AMA supports publicizing the importance of teaching CPR,
3 including the use of automated external defibrillation, and strongly recommends the
4 incorporation of CPR classes as a voluntary part of secondary school programs."
5

6 Strong support for this resolution was voiced. Youth are an easily accessible population
7 for this training if it is incorporated into school health education programs. In addition,
8 the inclusion of CPR training as a part of a comprehensive public health education
9 program was stressed and your Reference Committee has added a third resolve to
10 address this issue.

11
12
13 (19) RESOLUTION 404 - RAISE GUAM'S MINIMUM LEGAL
14 DRINKING AGE TO NATIONAL STANDARDS

15
16 RECOMMENDATION A:

17
18 Madam Speaker, your Reference Committee recommends
19 that Resolution 404 be amended by insertion and deletion
20 on lines 24 and 25 to read as follows:

21
22 RESOLVED, That our AMA encourage Guam's 28th
23 legislature and the Governor of Guam to support 21 as the
24 legal drinking age, support 0.04 percent blood-alcohol level
25 as *per se* illegal for driving, and urge incorporation of that
26 provision in ~~all state~~ drunk driving laws in all U.S. states
27 and territories in accordance with AMA Policies H-30.986
28 and H-30.989. (Directive To Take Action)

29
30 RECOMMENDATION B:

31
32 Madam Speaker, your Reference Committee recommends
33 that Resolution 404 be adopted as amended.

34
35 RECOMMENDATION C:

36
37 Madam Speaker, your Reference Committee recommends
38 that the title of Resolution 404 be changed to read as
39 follows:

40
41 UNIFORM DRINKING AGE STANDARDS

42
43 **HOD ACTION: Resolution 404 adopted as amended with**
44 **change in title.**

45
46 Resolution 404 asks that our AMA encourage Guam's 28th Legislature and the governor
47 of Guam to support 21 as the legal drinking age, support 0.04 percent blood-alcohol
48 level as *per se* illegal for driving, and urge incorporation of that provision in all state
49 drunk driving laws in accordance with AMA Policies H-30.986 and H-30.989.

1 Limited but supportive testimony was heard for this resolution. While the proposed
2 resolution was specific for Guam, your Reference Committee added additional language
3 to reflect testimony that all U.S. territories (such as the Virgin Islands and Puerto Rico)
4 be encouraged to adopt drunk driving laws consistent with AMA policy.
5
6

7 (20) RESOLUTION 405 - SUPPORT FOR GUAM'S
8 PROPOSED SMOKE-FREE PUBLIC PLACES LAW, THE
9 "NATASHA PROTECTION ACT"

10
11 RECOMMENDATION A:

12
13 Madam Speaker, your Reference Committee recommends
14 that Resolution 405 be amended by insertion and deletion
15 on page 2, line 2 to read as follows:
16

17 RESOLVED, That our AMA support the passage of
18 Guam's comprehensive smoke-free public places
19 legislation in Guam act, the "Natasha Protection Act," into
20 law. (Directive To Take Action)
21

22 RECOMMENDATION B:

23
24 Madam Speaker, your Reference Committee recommends
25 that Resolution 405 be adopted as amended.
26

27 RECOMMENDATION C:

28
29 Madam Speaker, your Reference Committee recommends
30 that the title of Resolution 405 be changed to read as
31 follows:
32

33 SUPPORT FOR SMOKE-FREE PUBLIC PLACES
34 LEGISLATION IN GUAM
35

36 **HOD ACTION: Resolution 405 adopted as amended with**
37 **change in title.**
38

39 Resolution 405 asks that our AMA support the passage of Guam's comprehensive
40 smoke-free public places act, the "Natasha Protection Act," into law.

41 The author of this resolution spoke eloquently to advocate for the AMA's support. No
42 testimony was heard in opposition of this resolution. The reference deleted the
43 reference to the specific name of the Act since the title may be altered or otherwise
44 deleted in the future.

1 (21) RESOLUTION 406 - TEACHING SEXUAL EDUCATION
2 TO DISABLED YOUTH IN SCHOOL

3

4

RECOMMENDATION A:

5

6

Madam Speaker, your Reference Committee recommends
7 that the first resolve of Resolution 406 be amended by
8 insertion and deletion on lines 14 – 15 to read:

9

10

RESOLVED, That our AMA encourage the Department of
11 Education to ensure that mentally and/or physically
12 disabled youth receive ~~more~~ effective and comprehensive
13 sexual health education.

14

15

RECOMMENDATION B:

16

17

Madam Speaker, your Reference Committee recommends
18 that the second resolve of Resolution 406 be amended by
19 insertion on line 18 to read:

20

21

RESOLVED, That our AMA encourage the Department of
22 Education to offer sexual health education counseling
23 targeted to mentally and/or physically disabled youth.
24 (Directive To Take Action)

25

26

RECOMMENDATION C:

27

28

Madam Speaker, your Reference Committee recommends
29 that Resolution 406 be adopted as amended.

30

31

HOD ACTION: Resolution 406 adopted as amended.

32

33

Resolution 406 asks that our AMA encourage the Department of Education to ensure
34 mentally and/or physically disabled youth receive more effective and comprehensive
35 sexual education and that our AMA encourage the Department of Education to offer
36 sexual education counseling targeted to mentally and/or physically disabled youth.

37

38

Testimony was heard in overwhelming support of this resolution. Testimony was also
39 heard indicating the need for all students to get appropriate sexual health education and
40 that it not be misinterpreted that mentally and physically disabled youth need to be
41 singled out for such action.

1 (22) RESOLUTION 412 - SCHOOL-BASED AND SCHOOL-
2 LINKED HEALTH CENTERS

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 412 be amended by addition of a new third
8 resolve to read as follows:

9
10 RESOLVED, That AMA Policy H-60.991 be reaffirmed.
11 (Reaffirm Existing HOD Policy)

12
13 RECOMMENDATION B:

14
15 Madam Speaker, your Reference Committee recommends
16 that Resolution 412 be adopted as amended.

17
18 **HOD ACTION: Resolution 412 adopted as amended.**

19
20 Resolution 412 asks that our AMA firmly support the concept of adequately equipped
21 and staffed School-Based or School-Linked Health Centers (SBHCs) for the
22 comprehensive management of conditions of childhood and adolescence and that our
23 AMA endeavor to work with state and federal agencies and departments, private donors,
24 industry and corporate entities, and other interested parties in the creation, funding and
25 sustaining of SBHCs throughout the country.

26
27 Your Reference Committee heard uniform supportive testimony for the intent of this
28 resolution and for the important role of school-based health centers in providing
29 comprehensive physical and mental health care, prevention, and education to children
30 and adolescents. Concern was expressed that such services may not be available year
31 round (e.g., during school vacations) and that communication may be lacking with the
32 student's family or primary care physician (if one exists). Rather than add additional
33 language to this resolution, your Reference Committee deemed that Policy H-60.991
34 [items (f), (g), and (h)] appropriately addresses continuity of care and coordination of
35 school-based and community-based programs and services.

36
37 **H-60.991 Providing Medical Services through School-Based Health**
38 **Programs**

39 (2) Where school-based services exist, the AMA recommends that they meet the
40 following minimum standards:... (f) Health care services should be available
41 during school hours. During other hours, an appropriate referral system should
42 be instituted. (g) School-based health programs should draw on outside
43 resources for care, such as private practitioners, public health and mental health
44 clinics, and mental health and neighborhood health programs. (h) Services
45 should be coordinated to ensure comprehensive care. Parents should be
46 encouraged to be intimately involved in the health supervision and education of
47 their children. (CSA Rep. D, A-88; Reaffirmed: Sunset Report, I-98)

1 (23) RESOLUTION 413 - ADDITION OF ALTERNATIVES TO
2 SOFT DRINKS IN PUBLIC SCHOOLS

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 413 be amended by insertion and deletion
8 on lines 16 – 18 to read as follows:
9

10 RESOLVED, That our AMA seek to promote the
11 consumption and availability of nutritious beverages ~~(such~~
12 ~~as 100% no-sugar-added juice, low-fat milk and water)~~ as
13 a healthy alternative to high-calorie, low nutritional-content
14 beverages (such as carbonated sodas and sugar-added
15 juices) ~~low-calorie, low-sugar drinks as a healthy~~
16 ~~alternative in public schools instead of beverages such as~~
17 ~~carbonated sodas.~~

18
19 RECOMMENDATION B:

20
21 Madam Speaker, your Reference Committee recommends
22 that Resolution 413 be adopted as amended.

23
24 RECOMMENDATION C:

25
26 Madam Speaker, your Reference Committee recommends
27 that the title of Resolution 413 be changed to read as
28 follows:
29

30 ADDITION OF ALTERNATIVES TO SOFT DRINKS IN SCHOOLS

31
32 **HOD ACTION: Resolution 413 adopted as amended with**
33 **change in title.**
34

35 Resolution 413 asks that our AMA seek to promote the consumption and availability of
36 low-calorie, low-sugar drinks as a healthy alternative in public schools instead of
37 beverages such as carbonated sodas.
38

39 Your Reference Committee heard substantial testimony in support of the promotion of
40 healthier beverage alternatives. Testimony identified the concern that the resolution as
41 currently worded would place our AMA in opposition to only the sale of high-calorie high
42 sugar drinks in schools and that there are other unhealthy drinks that may not fall into
43 this category. Similarly the current resolution would exclude the sale of milk and water as
44 possible healthy options. Your Reference Committee has amended the resolution to
45 reflect these concerns.

1 (24) RESOLUTION 414 - HUMAN EXPOSURE TO
2 POLYBROMINATED DIPHENYL ETHER (PBDE) FIRE
3 RETARDANTS
4

5 RECOMMENDATION:
6

7 Madam Speaker, your Reference Committee recommends
8 that the following Substitute Resolution 414 be adopted:
9

10 RESOLVED, That our American Medical Association urge appropriate federal
11 agencies to study and evaluate the use of polybrominated diphenyl ether
12 (PBDE) flame retardants and that any substitute retardants for PBDEs in
13 consumer products also be evaluated appropriately; and be it further
14

15 RESOLVED, That our AMA through the Council on Scientific Affairs continue to
16 monitor this issue and take action if necessary. (Directive to Take Action)
17

18 **HOD ACTION: Substitute Resolution 414 adopted.**
19

20 Resolution 414 asks that our AMA urge the federal government to require labeling of
21 halogenated flame retardants used in products as to their persistence, bioaccumulation,
22 and chemical similarity to polychlorinated biphenyls, where applicable and urge the
23 federal government to require that use of polybrominated diphenyl ether flame retardants
24 be phased out in all products manufactured and sold in the United States by a date
25 certain. The resolution also asks that our AMA urge state, federal, and local
26 governments to regulate the safe disposal of products containing brominated flame
27 retardants and to prohibit land application of sewage sludge until testing can assure that
28 such material does not contain measurable levels of polybrominated diphenyl ethers.
29

30 Your Reference Committee heard testimony on the importance of this issue. Because of
31 the complexity and scope of environmental disruptors, referral was recommended by
32 some who testified. Your Reference Committee is aware that the European Union has
33 banned the use of all PBDEs beginning in 2006 and that the Environmental Protection
34 Agency has issued a regulation to phase out two PBDEs. Given these efforts and the
35 potential negative impact of these compounds, your Reference Committee believes that
36 this resolution should be revised to reflect the ongoing efforts and provide a means for
37 the AMA to address this issue as needed.

1 (25) RESOLUTION 416 - SUPPORT THE MEASLES
2 INITIATIVE

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 416 be amended by insertion on lines 10 –
8 12 to read as follows:

9
10 RESOLVED, That our AMA take reasonable measures to
11 make physicians aware of the World Health Organization's
12 global initiative to bring measles deaths to near zero in
13 Africa by 2005 by vaccinating 200 million children and
14 encouraging them to support it. (Directive To Take Action)

15
16 RECOMMENDATION B:

17
18 Madam Speaker, your Reference Committee recommends
19 the addition of a new second resolve to Resolution 416 to
20 read as follows:

21
22 RESOLVED, That our AMA reaffirm Policy H-440.991 to
23 support efforts to prevent childhood disease through
24 immunizations. (Reaffirm Existing HOD Policy)

25
26 RECOMMENDATION C:

27
28 Madam Speaker, your Reference Committee recommends
29 that Resolution 416 be adopted as amended.

30
31 **HOD ACTION: Resolution 416 adopted as amended.**

32
33 Resolution 416 asks that our AMA take reasonable measures to make physicians aware
34 of the global initiative to bring measles deaths to zero in Africa by 2005 by vaccinating
35 200 million children and encourage them to support it.

36
37 Testimony was heard by your Reference Committee in support of this resolution.
38 Additional testimony encouraged the expansion of the measles initiative beyond Africa
39 with particular reference to recent outbreaks in European countries and Japan.

40
41 **H-440.991 Immunization Programs for Children**

42 Our AMA (1) continues to support efforts toward the prevention of childhood
43 disease through immunizations; (2) favors using its position in international
44 health organizations to promote appropriate immunization programs for children
45 throughout the world, especially in such critical and cost-effective areas as the
46 prevention of poliomyelitis and measles; and (3) expresses the need for private
47 and public research institutions to help develop more technically advanced
48 products, such as new heat stable vaccines, necessary for the effective
49 immunization of children throughout the world. (Sub. Res. 37, I-79; Reaffirmed:
50 CLRPD Rep. B, I-89; Reaffirmed: Sunset Report, A-00)

1 (26) RESOLUTION 418 - DRUG EDUCATION IN SCHOOLS

2
3 RECOMMENDATION A:

4
5 Madam Speaker, your Reference Committee recommends
6 that Resolution 418 be amended by insertion and deletion
7 on line 25 to read as follows:

8
9 RESOLVED, That our AMA support scientifically-based
10 drug education in schools and ~~supports~~ commend those
11 school districts that have suspended factually inaccurate
12 approaches. (Directive To Take Action)

13
14 RECOMMENDATION B:

15
16 Madam Speaker, your Reference Committee recommends
17 that Resolution 418 be adopted as amended.

18
19 **HOD ACTION: Resolution 418 adopted as amended.**

20
21 Resolution 418 asks that our AMA support scientifically-based drug education in schools
22 and support those school districts that have suspended factually inaccurate approaches.

23
24 Your Reference Committee heard overwhelming testimony in support of this resolution.
25 In particular, it was pointed out that drug education needs to be scientifically based.
26 Your Reference Committee concurs and recommends adoption of this resolution as
27 amended.

28
29
30 (27) RESOLUTION 419 - EARLY INTERVENTION FOR
31 CHILDREN WITH DEVELOPMENTAL DELAY

32
33 RECOMMENDATION A:

34
35 Madam Speaker, your Reference Committee recommends
36 that Resolution 419 be amended by insertion and deletion
37 on lines 18 – 21 to read as follows:

38
39 RESOLVED, That our AMA ~~support~~ work with appropriate
40 medical specialty societies ~~efforts~~ to educate and enable
41 physicians to identify children with developmental delay,
42 autism and other developmental disabilities, and urge
43 physicians to assist parents in obtaining access to
44 appropriate individualized early intervention services.

45
46 RECOMMENDATION B:

47
48 Madam Speaker, your Reference Committee recommends
49 that Resolution 419 be adopted as amended.

1 **HOD ACTION: Resolution 419 adopted as amended.**

2
3 Resolution 419 asks that our AMA support appropriate medical specialty society efforts
4 to enable physicians to identify children with developmental delay, autism and other
5 developmental disabilities, and urge physicians to assist parents in obtaining access to
6 appropriate individualized early intervention services.

7
8 Testimony was heard in overwhelming support of this resolution. The importance of early
9 intervention on the development of any child is significant. Thus, surveillance leading to
10 early detection and early enrollment in intervention programs has many benefits.
11 Coupled with data that successful early intervention has long term positive effects leads
12 your Reference Committee to urge adoption of this resolution as amended.

13
14
15 (28) **RESOLUTION 421 - LABELING OF VIDEO GAME**
16 **CONTENT**

17
18 **RECOMMENDATION A:**

19
20 Madam Speaker, your Reference Committee recommends
21 that Resolution 421 be amended by deletion on lines 18-19
22 to read as follows:

23
24 RESOLVED, That our AMA actively campaign for
25 appropriate labeling of any video game that depicts acts of
26 violence or aggressive acts ~~so that these videos will be~~
27 ~~made available for purchase by adults only.~~ (Directive To
28 Take Action)

29
30 **RECOMMENDATION B:**

31
32 Madam Speaker, your Reference Committee recommends
33 that Resolution 421 be adopted as amended.

34
35 **HOD ACTION: Original Resolution 421 adopted.**

36
37 Resolution 421 asks that our AMA actively campaign for appropriate labeling of any
38 video game that depicts acts of violence or aggressive acts so that these videos will be
39 made available for purchase by adults only.

40
41 Testimony was heard in support of this resolution. Discussants indicated that there is a
42 rising incidence of violence in pre-teen kids and appropriate labeling should be used to
43 address the violent content of video games. However, questions were raised as to
44 whether the intent of the resolution was that this labeling should also be used to restrict
45 sales. The sponsor of the resolution indicated that this was not the intent of the
46 resolution and your Reference Committee has crafted an amendment to reflect that.

47
48 Finally, this resolution is in keeping with AMA policy to urge the industry to provide
49 consumers with more precise information about the violence and sexual content of video
50 entertainment.

1 (29) RESOLUTION 423 - FEDERAL FINANCING OF POISON
2 CENTER NETWORK

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 423 be amended by insertion and deletion
8 on lines 14 – 17 to read as follows:

9
10 RESOLVED, That our AMA review the Institute of Medicine
11 (IOM) recommendations for the future of the nation's
12 network of poison centers, and take appropriate action,
13 and provide an informational report to the House of
14 Delegates. Undertake the widest possible lobbying efforts
15 to assure that the IOM's recommendations are
16 implemented as quickly as possible. (Directive To Take
17 Action)

18
19 RECOMMENDATION B:

20
21 Madam Speaker, your Reference Committee recommends
22 that Resolution 423 be adopted as amended.

23
24 **HOD ACTION: Resolution 423 adopted as amended.**

25
26 Resolution 423 asks that our AMA review the Institute of Medicine (IOM) report on its
27 recommendations for the future of the nation's network of poison centers and undertake
28 the widest possible lobbying efforts to assure that the IOM's recommendations are
29 implemented as quickly as possible.

30
31 No testimony on this resolution was heard. Your Reference Committee believes that it
32 would be prudent to review the recommendations of the IOM report prior to taking on
33 any possible lobbying efforts.

1 (30) RESOLUTION 424 - TEEN AND YOUNG ADULT
2 SUICIDE IN THE UNITED STATES

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that the second resolve in Resolution 424 be amended by
8 insertion on line 24 to read as follows:

9
10 RESOLVED, That our AMA work with appropriate federal
11 agencies, national organizations, and medical specialty
12 societies to compile resources to reduce teen and young-
13 adult suicide, including but not limited to continuing
14 medical education classes, patient education programs,
15 and other appropriate educational and interventional
16 programs for health care providers, and report back at the
17 2006 Interim Meeting. (Directive To Take Action)

18
19 RECOMMENDATION B:

20
21 Madam Speaker, your Reference Committee recommends
22 that Resolution 424 be adopted as amended.

23
24 **HOD ACTION: Resolution 424 adopted as amended.**

25
26 Resolution 424 asks that our AMA recognize teen and young-adult suicide as a serious
27 health concern in the United States and that our AMA compile resources to reduce teen
28 and young-adult suicide, including but not limited to continuing medical education
29 classes, patient education programs and other appropriate educational and
30 interventional programs for health care providers, and report back at the 2006 Annual
31 Meeting.

32
33 Testimony strongly supported a policy statement from our AMA recognizing teen and
34 young-adult suicide as an important public health problem in this country. The change of
35 language in the second resolve urges the AMA to work with relevant stakeholder
36 organizations, including local, state, and medical specialty societies, to compile available
37 resources for physicians and other health care professionals.

38
39
40 (31) RESOLUTION 425 - DEPRESSION AND SUICIDE ON
41 COLLEGE CAMPUSES

42
43 RECOMMENDATION A:

44
45 Madam Speaker, your Reference Committee recommends
46 that the first resolve in Resolution 425 be amended by
47 insertion on line 25 to read as follows:

1 RESOLVED, That our American Medical Association work
2 in conjunction with all appropriate specialty societies to
3 prepare a report on depression, substance abuse, and
4 suicide on college campuses (Directive To Take Action);
5 and be it further
6

7 RECOMMENDATION B:

8
9 Madam Speaker, your Reference Committee recommends
10 that the second resolve in Resolution 425 be amended by
11 insertion on line 29 to read as follows:
12

13 RESOLVED, That our AMA include in its report a review of
14 available scientific data on the efficacy of prevention
15 programs aimed at reducing the incidence of depression,
16 substance abuse, and suicide on college campuses
17 (Directive To Take Action); and be it further
18

19 RECOMMENDATION C:

20
21 Madam Speaker, your Reference Committee recommends
22 that the third resolve in Resolution 425 be amended by
23 insertion on line 33 to read as follows:
24

25 RESOLVED, That our AMA review the existing data on
26 access to and utilization of college mental health and
27 substance abuse services (Directive To Take Action); and
28 be it further
29

30 RECOMMENDATION D:

31
32 Madam Speaker, your Reference Committee recommends
33 that the fourth resolve in Resolution 425 be amended by
34 insertion and deletion on lines 35 and 36 to read as
35 follows:
36

37 RESOLVED, That our AMA ~~promulgate~~ advocate for the
38 development of guidelines concerning appropriate access
39 to psychiatric, addiction medicine, and other mental health
40 and substance abuse services on college campuses.
41 (Directive To Take Action)
42

43 RECOMMENDATION E:

44
45 Madam Speaker, your Reference Committee recommends
46 that Resolution 425 be adopted as amended.
47

48 **HOD ACTION: Resolution 425 adopted as amended.**

1 Resolution 425 asks that our AMA work in conjunction with all appropriate specialty
2 societies to prepare a report on depression and suicide on college campuses, include in
3 its report a review of available scientific data on the efficacy of prevention programs
4 aimed at reducing the incidence of suicide on college campuses and review the existing
5 data on access to and utilization of college mental health services. The resolution also
6 asks that our AMA promulgate guidelines concerning appropriate access to psychiatric
7 and other mental health services on college campuses.

8
9 Uniform support was heard for the resolution and the important need to address the
10 problem of suicide among college students, with particular focus on the role of
11 psychiatric illness and substance abuse. A comprehensive report, as requested in this
12 resolution, will identify effective interventions and provide guidance for better integrating
13 campus and community treatment and prevention programs and services.

14
15
16 (32) RESOLUTION 429 - DOMESTIC VIOLENCE AGAINST
17 PREGNANT WOMEN

18
19 RECOMMENDATION A:

20
21 Madam Speaker, your Reference Committee recommends
22 that Resolution 429 be amended by deletion on line 11 –
23 13 to read as follows:

24
25 RESOLVED, That our AMA increase the public awareness
26 about domestic violence against pregnant women. ~~As one~~
27 ~~of the goals of the national patient safety program.~~
28 (Directive To Take Action)

29
30 RECOMMENDATION B:

31
32 Madam Speaker, your Reference Committee recommends
33 that Resolution 429 be adopted as amended.

34
35 **HOD ACTION: Resolution 429 adopted as amended.**

36
37 Resolution 429 asks that our AMA increase the public awareness about domestic
38 violence against pregnant women as one of the goals of the National Patient Safety
39 Program.

40
41 Your Reference Committee heard limited testimony in support of this resolution.
42 Reference to the National Patient Safety Program was removed so as to not limit the
43 goals of the resolution to just one organization. Your Reference Committee feels that
44 this action appropriately extends AMA policy on this matter.

1 (33) RESOLUTION 430 - ENCOURAGING VISION
2 SCREENINGS FOR SCHOOLCHILDREN
3

4 RECOMMENDATION A:
5

6 Madam Speaker, your Reference Committee recommends
7 that the second resolve of Resolution 430 be amended by
8 insertion on lines 22-23 to read as follows:
9

10 RESOLVED, That our AMA support periodic pediatric eye
11 screenings based on AAP, AAFP, and AAO evidence-based
12 guidelines with referral to an ophthalmologist for a comprehensive
13 professional evaluation as appropriate. (New HOD Policy)
14

15 RECOMMENDATION B:
16

17 Madam Speaker, your Reference Committee recommends
18 that Resolution 430 be adopted as amended.
19

20 **HOD ACTION: Resolution 430 adopted as amended.**
21

22 Resolution 430 asks that our AMA encourage and support outreach efforts to provide
23 vision screenings for school-age children prior to primary school enrollment, encourage
24 the development of programs to improve school readiness by detecting undiagnosed
25 vision problems and support periodic pediatric eye screenings with referral for
26 comprehensive professional evaluation as appropriate.
27

28 Testimony uniformly supported increased efforts to provide vision screening for school-
29 aged children to detect vision problems and deficits that can affect learning. Additional
30 language was added to the second resolve to clearly articulate that potentially impaired
31 children be appropriately referred to an ophthalmologist for a more comprehensive
32 professional evaluation.
33

34
35 (34) RESOLUTION 431 - CARDIOPULMONARY
36 RESUSCITATION TRAINING
37

38 RECOMMENDATION A:
39

40 Madam Speaker, your Reference Committee recommends
41 that Resolution 431 be amended by insertion and deletion
42 on lines 9-11 to read as follows:
43

44 RESOLVED, That our American Medical Association endorse seek
45 passage of federal regulation and/or legislation increasing funding for the
46 cardiopulmonary resuscitation and defibrillation training of community
47 organization personnel at ~~community organizations~~. (Directive To Take
48 Action)

1 RECOMMENDATION B:
2

3 Madam Speaker, your Reference Committee recommends
4 that Resolution 431 be adopted as amended.

5
6 **HOD ACTION: Resolution 431 adopted as amended.**
7

8 Resolution 431 asks that our AMA seek passage of federal regulation and/or legislation
9 increasing funding for the cardiopulmonary resuscitation and defibrillation training of
10 personnel at community organizations.

11
12 Limited but supportive testimony was heard in favor of this resolution. Some concern
13 was expressed regarding the lack of any specified funding mechanism or responsible
14 entity to implement such training.

15
16
17 (35) RESOLUTION 433 - ATV SAFETY18
19 RECOMMENDATION A:
20

21 Madam Speaker, your Reference Committee recommends
22 that the first resolve of Resolution 433 be amended by
23 insertion on line 15 to read as follows:
24

25 RESOLVED, That our AMA seek federal legislation to
26 require sellers of all terrain vehicles (ATVS) in the United
27 States to promote the sale of and use of suitable helmets
28 to be used when operating or riding as a passenger on
29 ATVs (Directive to Take Action); and be it further
30

31 RECOMMENDATION B:
32

33 Madam Speaker, your Reference Committee recommends
34 that the second resolve of Resolution 433 be amended by
35 insertion and deletion on lines 17 – 18 to read as follows:

1 RESOLVED, That our AMA seek federal and state
2 legislation and/or regulation requiring suitable helmets be
3 worn when operating an atv to maximize safety of ATV
4 operation including but not limited to (1) wearing suitable
5 helmets and protective gear when operating or riding as a
6 passenger on an ATV, (2) providing some safety
7 instruction and training to all operators of ATVs and (3)
8 ensuring appropriate licensure for all operators of ATVs.
9 (Directive To Take Action)

10
11 RECOMMENDATION C:

12
13 Madam Speaker, your Reference Committee recommends
14 that Resolution 433 be adopted as amended.

15
16 **HOD ACTION: Resolution 433 adopted as amended.**

17
18 Resolution 433 asks that our AMA seek federal legislation to require sellers of all terrain
19 vehicles (ATVs) in the United States to promote the sale of and use of suitable helmets
20 to be used when operating ATVs and that our AMA seek legislation and/or regulation
21 requiring suitable helmets be worn when operating an ATV.

22
23 Your Reference Committee heard limited testimony in support of the resolution.
24 Comments on the resolution indicated that the safety rules should apply to both
25 operators and passengers. Additional testimony referred to the need for an age limit to
26 be implemented for the operation of ATVs. Your Reference Committee felt the intent of
27 the resolution was to encourage safety by calling for federal and state legislation on
28 protective gear, safety training, and licensure.

29
30
31 (36) RESOLUTION 434 - REQUIRE BACKUP WARNING
32 DEVICES ON NEW SUVs AS STANDARD EQUIPMENT

33
34 RECOMMENDATION A:

35
36 Madam Speaker, your Reference Committee recommends
37 that Resolution 434 be amended by deletion of the first
38 resolve on lines 31-34 to read as follows:

39
40 RESOLVED, That our American Medical Association support legislation
41 that would require the installation of back-up cameras, sensors, or other
42 warning devices as standard equipment on all new sport utility vehicles,
43 and other motor vehicles with rear blind spots (Directive to Take Action);
44 and be it further

1 RECOMMENDATION B:
2

3 Madam Speaker, your Reference Committee recommends
4 that the second resolve of Resolution 434 be amended by
5 insertion on lines 36-37 to read as follows:
6

7 RESOLVED, That our AMA support educational initiatives
8 and evidence-based measures to prevent motor vehicle-
9 related backover injuries/deaths. (Directive To Take
10 Action)
11

12 RECOMMENDATION C:
13

14 Madam Speaker, your Reference Committee recommends
15 that Resolution 434 be adopted as amended.
16

17 RECOMMENDATION D:
18

19 Madam Speaker, your Reference Committee recommends
20 that the title of Resolution 434 be changed to read as
21 follows:
22

23 PREVENTION OF MOTOR VEHICLE-RELATED
24 BACKOVER INJURIES/DEATHS
25

26 **HOD ACTION: Resolution 434 adopted as amended with**
27 **change in title.**
28

29 Resolution 434 asks that our AMA support legislation that would require the installation
30 of back-up cameras, sensors, or other warning devices as standard equipment on all
31 new sport utility vehicles, and other motor vehicles with rear blind spots and that our
32 AMA support educational initiatives to prevent motor vehicle-related backover
33 injuries/death.
34

35 Concern was voiced over the first resolve of this resolution. Because no evidence was
36 provided to support the use of warning devices, your Reference Committee finds no
37 basis to support legislation. We are aware that the National Highway Traffic Safety
38 Administration released a study on the incidence of deaths in children under the age of
39 nineteen years attributable to motor vehicle-related backovers and inexpensive backup
40 sensors are available and easy to install. Until such time that the evidence supports the
41 installation of warning devices as standard equipment, your Reference Committee
42 agrees with the recommendation to delete the first resolve. The occurrence of motor
43 vehicle-related backover injuries and deaths is a clear issue and we believe that the
44 AMA should support and recommend revisions to the second resolve and title
45 accordingly.

1 (37) RESOLUTION 438 - INCREASING TAXES ON
2 ALCOHOLIC BEVERAGES

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 438 be amended by insertion of a new
8 resolve on line 18 to read as follows:

9
10 RESOLVED, That federal, state, and local tax rates on
11 alcoholic beverages be based on the grams of ethanol
12 present in the beverage, not on the fluid volume of
13 beverages such as beer, wine, and distilled spirits; and be
14 it further. (New HOD Policy)

15
16 RECOMMENDATION B:

17
18 Madam Speaker, your Reference Committee recommends
19 that Resolution 438 be adopted as amended.

20
21 **HOD ACTION: Resolution 438 adopted as amended.**

22
23 Resolution 438 asks that our AMA support increases in federal taxes on beer, wine, and
24 liquor, with a substantial portion of the new revenues to be earmarked to the prevention
25 of alcohol abuse and drunk driving, treatment of persons with alcohol dependence or at-
26 risk drinking patterns, and public health and medical programs that serve vulnerable
27 populations, that our AMA encourage state and local medical societies to support
28 increases in state and local taxes on beer, wine, and liquor, with a substantial portion of
29 the new revenues to be earmarked to the purposes noted above, and that our AMA
30 support, to the extent possible, state and local efforts to increase taxes on beer, wine,
31 and liquor. The resolution also asks that our AMA collaborate with other national
32 organizations with an interest in this subject, including national medical specialty
33 societies, the American Public Health Association, the Center for Science in the Public
34 Interest, Mothers Against Drunk Driving, and the AMA Alliance and that when state
35 legislative efforts to increase alcohol taxes are stymied, our AMA encourage state
36 medical societies to give consideration to the use of ballot initiatives in the 24 states that
37 allow such initiatives.

38
39 Your Reference Committee heard limited but supportive testimony for this resolution.
40 The overall intent of the resolution is to increase alcohol taxes and make funds available
41 for the health care, health education, and treatment of those affected by alcohol. There
42 is substantive evidence on the effects of alcohol taxes (published by the National
43 Institute for Alcohol Abuse and Alcoholism), indicating that tax increases lead to lower
44 alcohol consumption rates among adults and youth, fewer binge-drinking episodes, and
45 lower traffic fatality rates. The additional resolve was added in support of testimony
46 calling for our AMA to support alcohol beverage tax rates based on the true ethanol
47 content rather than the fluid volume of the beverage.

1 (38) RESOLUTION 439 - PROMOTING THE UTILIZATION OF
2 NEW AND OLD MEDICARE PREVENTIVE SERVICES
3 BENEFITS
4

5 RECOMMENDATION A:
6

7 Madam Speaker, your Reference Committee recommends
8 that the first resolve in Resolution 439 be amended by
9 insertion on page 1, line 35 to read as follows:
10

11 RESOLVED, That our American Medical Association work
12 with relevant stakeholders, including appropriate national
13 medical specialty societies, state and county medical
14 societies, relevant federal agencies (e.g., Centers For
15 Medicare and Medicaid Services, Agency for Healthcare
16 Research and Quality, Centers for Disease Control and
17 Prevention, Health Resources and Services
18 Administration, National Institutes of Health), The
19 American Health Quality Association, and The Coalition
20 Partnership for Prevention to actively promote to
21 ~~consumers~~ our patients the Welcome to Medicare Visit, the
22 tobacco cessation benefit, and other Medicare-covered
23 preventive services (Directive To Take Action); and be it
24 further
25

26 RECOMMENDATION B:
27

28 Madam Speaker, your Reference Committee recommends
29 that the second resolve in Resolution 439 be amended by
30 insertion on page 2, line 1 to read as follows:
31

32 RESOLVED, That our AMA focus on underserved
33 populations in the Welcome to Medicare visit, the tobacco
34 cessation benefit, and other Medicare preventive services
35 campaigns (Directive To Take Action); and be it further
36

37 RECOMMENDATION C:
38

39 Madam Speaker, your Reference Committee recommends
40 that the third resolve in Resolution 439 be amended by
41 insertion on page 2, line 5 to read as follows:
42

43 RESOLVED, That our AMA, in partnership with other
44 stakeholders, develop and disseminate resources to assist
45 physicians in efficiently implementing the Welcome to
46 Medicare visit, the tobacco cessation benefit, and other
47 Medicare preventive services as part of an overall
48 prevention approach (Directive To Take Action); and be it
49 further

1 RECOMMENDATION D:
2

3 Madam Speaker, your Reference Committee recommends
4 that Resolution 439 be adopted as amended.

5

6 **HOD ACTION: Resolution 439 referred.**
7

8 Resolution 439 asks that our AMA work with relevant stakeholders, including appropriate
9 national medical specialty societies, state and county medical societies, relevant federal
10 agencies (e.g., Centers for Medicare and Medicaid Services, Agency for Healthcare
11 Research and Quality, Centers for Disease Control and Prevention, Health Resources
12 and Services Administration, National Institutes of Health), the American Health Quality
13 Association, and the coalition Partnership for Prevention to actively promote to
14 consumers the Welcome to Medicare Visit and other Medicare-covered preventive
15 services, that our AMA focus on underserved populations in the Welcome to Medicare
16 Visit and other Medicare preventive services campaigns, that our AMA, in partnership
17 with other stakeholders, develop and disseminate resources to assist physicians in
18 efficiently implementing the Welcome to Medicare Visit and other Medicare preventive
19 services as part of an overall prevention approach and that our AMA actively educate
20 physicians about evidence-based preventive measures and how to incorporate these
21 measures into their daily practice.

22

23 Limited but supportive testimony was heard on this resolution. A focus on prevention
24 could lead to considerable savings in future treatment costs. Strong objection was
25 raised regarding ongoing as well as foreseen problems with lack of payment for delivery
26 of health care services. Your Reference Committee agrees with testimony that the
27 Welcome to Medicare Visit provides an important opportunity for Medicare enrollees to
28 become engaged in the health care system. Your Reference Committee deemed that
29 rather than create additional policy language, medical reimbursement issues are
30 adequately addressed in existing policy.

1 (39) RESOLUTION 440 - PROTECT CHILDREN FROM SKIN
2 CANCER

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that the first resolve of Resolution 440 be amended by
8 insertion and deletion on lines 33-35 to read as follows:

9
10 RESOLVED, That our AMA support the enactment of
11 federal legislation to: (1) prohibit access to the use of
12 indoor tanning equipment (as defined in 21 CFR §1040.20
13 [a][9]) by anyone under the age of 18; ~~and to~~ (2) require a
14 United States Surgeon General warning be prominently
15 posted, that detailings the positive correlation between
16 ultraviolet radiation, the use of indoor tanning equipment,
17 and the incidence of skin cancer and (3) reaffirm Policy H-
18 440.937 and H-440.967 regulating tanning facilities.

19
20 RESOLVED, That our AMA urges the FDA's Center For
21 Devices and Radiological Health to hold a fair hearing as soon
22 as possible on the safety and efficacy of uva bulbs, as used in
23 indoor tanning facilities. (Directive To Take Action)

24
25 RECOMMENDATION B:

26
27 Madam Speaker, your Reference Committee recommends
28 that Resolution 440 be adopted as amended.

29
30 **HOD ACTION: Resolution 440 adopted as amended with**
31 **addition of a new resolve.**

32
33 Resolution 440 asks that our AMA support the enactment of federal legislation to: (1)
34 prohibit access to the use of indoor tanning equipment (as defined in 21 CFR §1040.20
35 [a][9]) by anyone under the age of 18; and to (2) require a United States Surgeon
36 General warning that details the positive correlation between ultraviolet radiation, the
37 use of indoor tanning equipment, and the incidence of skin cancer.

38
39 Limited testimony expressed support for this resolution. It was pointed out that there are
40 already FDA warnings associated with, and corresponding warning labels present on,
41 tanning equipment. Your Reference Committee believes its amendment to the original
42 resolution strengthens its intent and expands the scope of existing policy.

43
44 **H-440.937 FDA Investigating the Safety of Tanning Parlor Devices**

45 The AMA supports the continued action by dermatologists and other
46 practitioners, in cooperation with state medical societies, to promote state and
47 local legislation to regulate tanning parlors. (Sub. Res. 415, A-92; Sub. Res. 217,
48 I-94; Reaffirmed and Modified: CSA Rep. 6, A-04)

1 **H-440.967 Public Information Program Addressing the Dangers of UVA**
2 **Exposure**

3 The AMA: (1) supports using its public education capabilities to warn the public of
4 the risks of ultraviolet A radiation (UVA) exposure by skin tanning units; (2)
5 endorses the findings released by the FDA warning Americans that the use of
6 UVA tanning booths and sun beds pose potentially significant health risks to
7 users and should be discouraged; (3) supports working with the FDA to ensure
8 that state and local authorities implement legislation, rules, and regulations
9 regarding UVA exposure, including posted warnings in commercial tanning
10 salons and spas; (4) supports, in conjunction with various concerned national
11 specialty societies, an educational campaign to secure appropriate state
12 regulatory and oversight activities for tanning parlor facilities, to reduce improper
13 and dangerous exposure to ultraviolet light by patients and general public
14 consumers; (5) supports intensified efforts to enforce current regulations; and (6)
15 encourages the development of sunscreens that will protect the skin from a
16 broad spectrum of ultraviolet radiation, including both UVA and UVB. (Sub. Res.
17 103, A-88; Res. 418, I-94; Appended: Res. 407, I-99)

18
19
20 (40) **RESOLUTION 443 - OPIATE REPLACEMENT THERAPY**
21 **PROGRAMS IN CORRECTIONAL FACILITIES**

22
23 RECOMMENDATION A:

24
25 Madam Speaker, your Reference Committee recommends
26 that Resolve 1 of Resolution 443 be amended by insertion
27 and deletion on page 2, line 13 to read as follows:

28
29 RESOLVED, That our American Medical Association
30 endorse the medical treatment model of employing Opiate
31 Replacement Therapy (ORT) as an effective therapy in
32 treating ~~incarcerated~~ opiate addicted persons who are
33 incarcerated (New HOD Policy); and be it further

1 RECOMMENDATION B:
2

3 Madam Speaker, your Reference Committee recommends
4 that Resolve 2 of Resolution 443 be amended by deletion
5 and insertion on line 15 to read as follows:
6

7 RESOLVED, That our AMA endorses ORT for opiate
8 addicted ~~incarcerated~~ persons who are incarcerated, in
9 collaboration with the National Commission on Correctional
10 Health Care and The American Society of Addiction
11 Medicine (New HOD Policy); and be it further
12

13 RECOMMENDATION C:
14

15 Madam Speaker, your Reference Committee recommends
16 that Resolution 443 be adopted as amended.
17

18 **HOD ACTION: Resolution 443 adopted as amended.**
19

20 Resolution 443 asks that our AMA endorse the medical treatment model of employing
21 Opiate Replacement Therapy (ORT) as an effective therapy in treating incarcerated,
22 opiate addicted persons, that our AMA endorse ORT for opiate addicted incarcerated
23 persons, in collaboration with the National Commission on Correctional Health Care and
24 the American Society of Addiction Medicine, and that our AMA support and develop
25 model legislation in the jurisdiction where it is most feasible to institute a voluntary (for
26 inmates) opioid replacement treatment pilot programs, (including methadone and
27 buprenorphine maintenance treatment) in jails and prisons and that these programs be
28 accompanied by an evaluation process to determine whether such treatment modalities
29 decrease recidivism, crime, and transmission of infectious diseases among populations
30 at risk in incarcerated settings in the states being studied.
31

32 Your Reference Committee heard passionate testimony on both sides of this resolution.
33 There was some testimony regarding referral to the Board for further research on the
34 topic. Some testimony included the potential expense and frequency of drug testing and
35 gave a presumption that the security force in prisons were not doing their jobs by letting
36 illicit drugs into the prison system. Additional support to adopt was provided with
37 reservations regarding the potential regulations and cost. Your Reference Committee
38 feels that health care professionals have an obligation to treat opiate addicted persons
39 who are incarcerated with appropriate treatment programs, including ORT programs.
40 Such practices should impact the more serious public health problems of Hepatitis C and
41 HIV infection from IV drug use among prison inmates, which may result in net cost
42 savings.

1 (41) RESOLUTION 444 - COLLABORATIVE APPROACH TO
2 ADDRESSING TOBACCO USE AND DEPENDENCE

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 444 be amended by insertion and deletion
8 on line 24 to read as follows:

9
10 [our AMA] (b) supports efforts by any appropriately
11 licensed healthcare professional ~~physician~~ to identify and
12 treat tobacco dependence in any individual, in the various
13 clinical contexts in which they are encountered,
14 recognizing that care provided in one context needs to
15 take into account other potential sources of treatment for
16 tobacco use and dependence. (Modify Current HOD
17 Policy)

18
19 RECOMMENDATION B:

20
21 Madam Speaker, your Reference Committee recommends
22 that Resolution 444 be adopted as amended.

23
24 **HOD ACTION: Resolution 444 adopted as amended.**

25
26 Resolution 444 asks that our AMA Policy H-490.917 be amended by addition of the
27 following: “[Our AMA] (7) (a) believes that collaborative approaches to tobacco
28 treatment across all points of contact within the medical system will maximize
29 opportunities to address tobacco use among all of our patients, and the likelihood for
30 successful intervention; and (b) supports efforts by any physician to identify and treat
31 tobacco dependence in any individual, in the various clinical contexts in which they are
32 encountered, recognizing that care provided in one context needs to take into account
33 other potential sources of treatment for tobacco use and dependence.”

34
35 Limited but supportive testimony was heard for this resolution. Your Reference
36 Committee concurs with testimony that the scope of current AMA policy should be
37 expanded to include all appropriately licensed health care professionals (e.g., advanced
38 practice nurses, physician assistants, dentists), who have a role in addressing the
39 harmful health effects of smoking during regular, multiple contacts with patients. In
40 addition, those who see pediatric patients have an additional opportunity to address
41 parental smoking cessation, adoption of healthier lifestyles, and the maintenance of a
42 smoke-free home environment.

1 (42) RESOLUTION 446 – DEPARTMENT OF JUSTICE
2 LAWSUIT AGAINST THE TOBACCO INDUSTRY

3
4 RECOMMENDATION A:

5
6 Madam Speaker, your Reference Committee recommends
7 that Resolution 446 be amended by addition of a new
8 resolve to read as follows:

9
10 RESOLVED, That our AMA urge the U.S. Department of
11 Justice to appeal federal district court decision limiting
12 Racketeer Influenced Corrupt Organization (RICO) Act
13 remedies in the lawsuit against the tobacco industry and
14 not enter into settlement discussions in this case until all
15 appeals are exhausted up to and including appeal to the
16 U.S. Supreme Court. (Directive To Take Action)

17
18 RECOMMENDATION B:

19
20 Madam Speaker, your Reference Committee recommends
21 that Resolution 446 be adopted as amended.

22
23 **HOD ACTION: Resolution 446 adopted as amended.**

24
25 Resolution 446 asks that our AMA continue to encourage the Department of Justice to
26 seek other remedies in the suit against the tobacco industry including: (1) ending
27 tobacco industry marketing and advertising to children including “point of sale”
28 advertising, promotions and sponsorships and the range of additional marketing
29 activities aimed at youth; (2) halting industry deception and false health claims including
30 the use of misleading terms like “light” and “mild” cigarettes; (3) full disclosure of all
31 tobacco industry documents; and (4) fully funding tobacco cessation that includes a
32 national telephone quitline network, universal access to smoking cessation medication
33 and counseling, an extensive media campaign, research and education of medical
34 providers.

35
36 Limited but supportive testimony was heard for this resolution. Your Reference
37 Committee concurs that our AMA should encourage the Department of Justice to include
38 all of these remedies in the proposed order it will submit to the court on June 27, 2005.
39 Such action is necessary to prevent the continuation of the tobacco industry’s deceptive
40 and fraudulent activities; hold it accountable for past activities in selling products to
41 consumers, despite decades-long knowledge of tobacco’s health effects and addictive
42 properties; and impose severe restrictions on the industry’s marketing practices.

1 (43) RESOLUTION 411 - MERCURY POLLUTION

2
3 RECOMMENDATION:

4
5 Madam Speaker, your Reference Committee recommends
6 that Resolution 411 be referred.

7
8 **HOD ACTION: Resolution 411 referred.**

9
10 Resolution 411 asks that our AMA endorse the reduction of mercury usage in
11 manufacturing whenever possible, especially in chlorine manufacturing and asks that our
12 AMA urge the US to lead the development of a binding protocol to reduce mercury
13 pollution worldwide.

14
15 Testimony focused on the need for additional information prior to the adoption of this
16 resolution. The United States is the first country to regulate mercury emissions from
17 coal-fired power plants and the Clear Air Mercury Rule, when fully implemented, will
18 further reduce mercury emissions. Testimony indicated however that more action is
19 needed globally. A report providing a summary of current initiatives and
20 recommendations for the AMA would be helpful.

21
22
23 (44) RESOLUTION 422 - DEVELOPMENT AND SUPPORT OF
24 PROSPECTIVE PERSONALIZED HEALTH PLANNING

25
26 RECOMMENDATION:

27
28 Madam Speaker, your Reference Committee recommends
29 that Resolution 422 be referred.

30
31 **HOD ACTION: Resolution 422 referred.**

32
33 Resolution 422 asks that our AMA continue to recognize the need for possible
34 adaptation of the US health care system to prospectively prevent the development of
35 disease by ethically using genomics, proteomics, metabolomics, imaging and other
36 advanced diagnostics, along with standardized informatics tools to develop individual
37 risk assessments and personal health plans and that our AMA support studies aimed at
38 determining the viability of prospective care models and measures that will assist in
39 creating a stronger focus on prospective care in the US health care system. The
40 resolution also asks that our AMA support research and discussion regarding the
41 multidimensional ethical issues related to prospective care models, such as genetic
42 testing.

43
44 Limited but unanimous testimony on this resolution was heard in favor of referral to the
45 Council on Scientific Affairs. Prospective care models such as genetic testing are
46 emergent areas in medicine and the development of a report providing the evidence on
47 these models is supported by the CSA.

1 (45) RESOLUTION 437 - IMPOSING TAXES ON SUGAR-
2 SWEETENED SOFT DRINKS
3

4 RECOMMENDATION:
5

6 Madam Speaker, your Reference Committee recommends
7 that Resolution 437 be referred.
8

9 **HOD ACTION: Resolution 437 referred.**

10
11 Resolution 437 asks that our AMA support the adoption of a small federal tax on soft
12 drinks sweetened with caloric sugars ("sugar-sweetened"), with a substantial portion of
13 the new revenues to be earmarked to the prevention and treatment of obesity, as well as
14 public health and medical programs that serve vulnerable populations, that our AMA
15 encourage state and local medical societies to support the adoption of small state and
16 local taxes on sugar-sweetened soft drinks, with a substantial portion of the new
17 revenues to be earmarked to the purposes noted above and that our AMA support, to
18 the extent possible, state and local efforts to impose small taxes on sugar-sweetened
19 soft drinks. In addition, the resolution asks that our AMA collaborate with other national
20 organizations with an interest in this subject, including national medical specialty
21 societies, the American Public Health Association, the Center for Science in the Public
22 Interest, and the AMA Alliance and that when state legislative efforts to impose small
23 taxes on sugar-sweetened soft drinks are stymied, our AMA encourage state medical
24 societies to give consideration to the use of ballot initiatives in the 24 states that allow
25 such initiatives.
26

27 Your Reference Committee heard extensive testimony for and against this resolution. It
28 was pointed out that there is a complex mix of factors that can cause obesity including
29 multiple negative behaviors (e.g., long periods of television watching). To single out the
30 consumption of sugar-sweetened drinks would be inappropriate. In addition, testimony
31 highlighted that there is little evidence to support increasing taxes on sugar-sweetened
32 soft drinks only, and not addressing the other factors mentioned above. Given these
33 concerns, your Reference Committee agreed with the sponsor's subsequent
34 recommendation to refer this resolution to guide policy on this issue.
35
36

37 (46) RESOLUTION 427 - AMA POLICY ON ALCOHOL
38

39 RECOMMENDATION:
40

41 Madam Speaker, your Reference Committee recommends
42 that Resolution 427 not be adopted.
43

44 **HOD ACTION: Resolution 427 not adopted.**

45
46 Resolution 427 asks that our AMA prepare a comprehensive policy on the use of alcohol
47 for the 2005 Interim Meeting to consider the totality of the issue based on the science
48 that considers both the potential positive and negative consequences associated with
49 the use of beverage alcohol and the potential benefits of the moderate use of beverage
50 alcohol, that this policy address the issues of alcohol use disorders and their early

1 identification, and methods of effective early intervention and stress the education of our
2 patients and their families on the issues of scientific, evidence-based, effects of ongoing
3 use of alcohol to replace the multiple policies that are now AMA policy.
4

5 Testimony was voiced for and against this resolution. It was noted that the proposed
6 resolution would replace existing valuable AMA policy on alcohol and was not supported.
7 Because the evidence on the positive effects of alcohol consumption is evolving and as
8 yet inconclusive, your Reference Committee agrees that this resolution should not be
9 adopted.

10
11
12 (47) RESOLUTION 435 - DESIGNATED DRIVERS

13
14 RECOMMENDATION:

15
16 Madam Speaker, your Reference Committee recommends
17 that Policy H-30.945 be reaffirmed in lieu of Resolution
18 435.

19
20 **HOD ACTION: Policy H-30.945 reaffirmed in lieu of**
21 **Resolution 435.**

22
23 Resolution 435 asks that our AMA advise that businesses that serve alcohol should offer
24 incentives to patrons who elect to be designated drivers and that our AMA use its
25 credible voice to encourage the hospitality industry to enact the above resolved clause.
26

27 Testimony on this resolution reflected the complexity of this issue. The recent report by
28 the U.S. Taskforce on Community Preventive Services indicated that there are limited
29 studies on the effectiveness of designated-driver programs. Testimony was heard that
30 the intention of this resolution is to be commended but cannot be supported at this time.
31 The AMA has comprehensive policy on alcohol-impaired driving (Policy H-30.945) that
32 involves the collaboration of the AMA with public health, transportation safety, alcohol
33 beverage industry, and other groups to prevent alcohol-impaired driving. We believe
34 that the AMA should continue to focus on the totality of the issue and that by reaffirming
35 this existing policy the intent of this resolution, which is to eliminate alcohol-related
36 automobile crashes, is addressed.

- 1 Madam Speaker, this concludes the report of Reference Committee D. I would like to
- 2 thank Mae de la Calzada, James A. Goodyear, MD, Stephen Hansen, MD, Rodney C.
- 3 Richie, MD, Bernd Wollschlaeger, MD, Larry J. Yodlowski, MD, and all those who
- 4 testified before the Committee.

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