REPORT OF THE COUNCIL ON ETHICAL AND JUDICIAL AFFAIRS

CEJA Report 1-I-12

Subject: Amendment to Opinion E-9.011, “Continuing Medical Education”

Presented by: H. Rex Greene, MD, Chair

Referred to: Reference Committee on Amendments to Constitution and Bylaws
            (Richard L. Stennes, MD, Chair)

Ethics policy relating to continuing medical education (CME), Opinion E-9.011, “Continuing Medical Education,” was last updated in 1996. Since then, CME has evolved substantially, as have standards for the conduct of CME providers, such as those of the Accreditation Council on Continuing Medical Education. In addition, CEJA Report 1-A-11, “Financial Relationships with Industry in Continuing Medical Education,” adopted in June 2011 and subsequently Opinion E-9.0115 of the same title bears on these matters.

In light of these developments, the Council on Ethical and Judicial Affairs has reviewed prior policy and concluded that E-9.011 should be updated.

KEY REVISIONS

The Council reviewed E-9.011 with the goal of ensuring consistency among Opinions in the Code of Medical Ethics, avoiding unnecessary repetition of guidance set out in AMA policies and other standards for CME, and providing succinct ethical guidance that physicians can readily apply across the evolving spectrum of CME. Revisions, developed in consultation with the Council on Medical Education, are directed toward clearly focusing on ethical guidance for physician-attendees of certified CME activities and eliminating ethical guidance specifically directed to other audiences.

Guidelines for physician-attendees (section one of current E-9.011) have been edited for clarity, including replacing cross-references to E-8.061, “Gifts to Physicians from Industry,” with explicit guidance regarding subsidies for expenses of attending CME activities.

Guidelines for faculty (section two of current E-9.011) overlap with requirements established elsewhere, including:

- Accreditation Criteria, Standards for Commercial Support and related policies of the Accreditation Council on Continuing Medical Education;
- Guidance on industry-supported educational activities from the U.S. Food and Drug Administration; and

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• Code on Interactions with Healthcare Professionals of Pharmaceutical Research and Manufacturers of America.

The guidelines in this section, including specific references to guidance from other entities, have therefore been removed from the opinion.

Similarly, guidelines for sponsors (section three of current E-9.011) overlap with requirements established in other policy, including:

• Opinion E-9.0115, Financial Relationships with Industry in Continuing Medical Education;
• Accreditation Criteria, Standards for Commercial Support and related policies of the Accreditation Council on Continuing Medical Education;
• Code for Interactions with Companies from the Council of Medical Specialty Societies;
• Guidance on industry-supported educational activities from the U.S. Food and Drug Administration; and
• Code on Interactions with Healthcare Professionals of Pharmaceutical Research and Manufacturers of America.

The guidelines in this section, including specific references to guidance from other entities, have therefore been removed from the opinion.

RECOMMENDATION

Given these considerations, the Council recommends that E-9.011, “Continuing Medical Education” as set forth in appendix attached hereto, be amended by substitution as follows and that the remainder of this report be filed:

Physicians should strive to further their medical education throughout their careers, to ensure that they serve patients to the best of their abilities and live up to professional standards of excellence.

Participating in formal continuing medical education (CME) activities is critical to fulfilling this professional commitment to lifelong learning. As attendees of CME activities, physicians should:

(a) Select activities that are of high quality and are appropriate for the physician’s educational needs.

(b) Choose activities that are carried out in keeping with ethical guidelines and applicable professional standards.

(c) Claim only the credit commensurate with the extent of participation in the CME activity.

(d) Decline any subsidy offered by a commercial entity other than the physician’s employer to compensate the physician for time spent or expenses of participating in a CME activity.

(Modify HOD/CEJA Policy)

Fiscal Note: Less than $500 to implement.
Physicians should strive to further their medical education throughout their careers, for only by participating in continuing medical education (CME) can they continue to serve patients to the best of their abilities and live up to professional standards of excellence. Fulfillment of mandatory state CME requirements does not necessarily fulfill the physician’s ethical obligation to maintain his or her medical expertise.

**Attendees.** Guidelines for physicians attending a CME conference or activity are as follows:

1. The physician choosing among CME activities should assess their educational value and select only those activities which that are of high quality and appropriate for the physician’s educational needs. When selecting formal CME activities, the physician should, at a minimum, choose only those activities that (a) are offered by sponsors accredited by the Accreditation Council for Continuing Medical Education (ACCME), the American Academy of Family Physicians (AAFP), or a state medical society; (b) contain information on subjects relevant to the physician’s needs; (c) are responsibly conducted by qualified faculty; (d) conform to Opinion 8.061, "Gifts to Physicians from Industry."

2. The educational value of the CME conference or activity must be the primary consideration in the physician’s decision to attend or participate. Though amenities unrelated to the educational purpose of the activity may play a role in the physician’s decision to participate, this role should be secondary to the educational content of the conference.

3. Physicians should credit commensurate with only the actual time spent attending a CME activity or in studying a CME enduring material.

4. Attending promotional activities put on by industry or their designees is not unethical as long as the conference conforms to Opinion 8.061, "Gifts to Physicians from Industry," and is clearly identified as promotional to all participants.

**Faculty.** Guidelines for physicians serving as presenters, moderators, or other faculty at a CME conference are as follows:

1. Physicians serving as presenters, moderators, or other faculty at a CME conference should ensure that:
   a. research findings and therapeutic recommendations are based on scientifically accurate, up-to-date information and are presented in a balanced, objective manner;
   b. the content of their presentation is not modified or influenced by representatives of industry or other financial contributors, and they do not employ materials whose content is shaped by industry. Faculty may, however, use scientific data generated from industry-sponsored research, and they may also accept technical assistance from industry in preparing slides or other presentation materials, as long as this assistance is of only nominal monetary value and the company has no input in the actual content of the material.

2. When invited to present at non-CME activities that are primarily promotional, faculty should avoid participation unless the activity is clearly identified as promotional in its program announcements and other advertising.

3. All conflicts of interest or biases, such as a financial connection to a particular commercial firm or product, should be disclosed by faculty members to the activity’s sponsor and to the audience. Faculty may accept reasonable honoraria and reimbursement for expenses in accordance with Opinion 8.061, "Gifts to Physicians from Industry."
Sponsors. Guidelines for physicians involved in the sponsorship of CME activities are as follows:

(1) Physicians involved in the sponsorship of CME activities should ensure that
(a) the program is balanced, with faculty members presenting a broad range of scientifically
supportable viewpoints related to the topic at hand;
(b) representatives of industry or other financial contributors do not exert control over the
choice of moderators, presenters, or other faculty, or modify the content of faculty
presentations. Funding from industry or others may be accepted in accordance with Opinion
8.061, "Gifts to Physicians from Industry."

(2) Sponsors should not promote CME activities in a way that encourages attendees to violate the
guidelines of the Council on Ethical and Judicial Affairs, including Opinion 8.061, "Gifts to
Physicians from Industry," or the principles established for the AMA’s Physician Recognition
Award. CME activities should be developed and promoted consistent with guideline 2 for
Attendees.

(3) Any non-CME activity that is primarily promotional must be identified as such to faculty and
participants, both in its advertising and at the conference itself.

(4) The entity presenting the program should not profit unfairly or charge a fee which is excessive
for the content and length of the program.

(5) The program, content, duration, and ancillary activities should be consistent with the ideals of
the AMA CME program.