

## REPORT OF THE COUNCIL ON SCIENCE AND PUBLIC HEALTH

CSAPH Report 1-A-13

Subject: CSAPH Sunset Review of 2003 House Policies

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Referred to: Reference Committee D  
(Douglas W. Martin, MD, Chair)

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1 At its 1984 Interim Meeting, the House of Delegates (HOD) established a sunset mechanism for  
2 House policies (Policy G-600.110). Under this mechanism, a policy established by the House  
3 ceases to be viable after 10 years unless action is taken by the House to retain it.

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5 The objective of the sunset mechanism is to help ensure that the AMA Policy Database is current,  
6 coherent, and relevant. By eliminating outmoded, duplicative, and inconsistent policies, the sunset  
7 mechanism contributes to the ability of the AMA to communicate and promote its policy positions.  
8 It also contributes to the efficiency and effectiveness of House of Delegates deliberations.

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10 At its 2012 Annual Meeting, the House modified Policy G-600.110 to change the process through  
11 which the policy sunset review is conducted. The process now includes the following:

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13 (1) As the House of Delegates adopts policies, a maximum ten-year time horizon shall exist. A  
14 policy will typically sunset after ten years unless action is taken by the House of Delegates to  
15 retain it. Any action of our AMA House that reaffirms or amends an existing policy position  
16 shall reset the sunset “clock,” making the reaffirmed or amended policy viable for another 10  
17 years. (2) In the implementation and ongoing operation of our AMA policy sunset mechanism,  
18 the following procedures shall be followed: (a) Each year, the Speakers shall provide a list of  
19 policies that are subject to review under the policy sunset mechanism; (b) Such policies shall  
20 be assigned to the appropriate AMA Councils for review; (c) Each AMA council that has been  
21 asked to review policies shall develop and submit a report to the House of Delegates  
22 identifying policies that are scheduled to sunset. (d) For each policy under review, the  
23 reviewing council can recommend one of the following actions: (i) Retain the policy; (ii)  
24 Sunset the policy; (iii) Retain part of the policy; or (iv) Reconcile the policy with more recent  
25 and like policy; (e) For each recommendation that it makes to retain a policy in any fashion, the  
26 reviewing Council shall provide a succinct, but cogent justification. (f) The Speakers shall  
27 determine the best way for the House of Delegates to handle the sunset reports. (3) Nothing in  
28 this policy shall prohibit a report to the HOD or resolution to sunset a policy earlier than its 10-  
29 year horizon if it is no longer relevant, has been superseded by a more current policy, or has  
30 been accomplished. (4) The AMA Councils and the House of Delegates should conform to the  
31 following guidelines for sunset: (a) when a policy is no longer relevant or necessary; (b) when  
32 a policy or directive has been accomplished; or (c) when the policy or directive is part of an  
33 established AMA practice that is transparent to the House and codified elsewhere such as the  
34 AMA Bylaws or the AMA House of Delegates Reference Manual: Procedures, Policies and  
35 Practices. (5) The most recent policy shall be deemed to supersede contradictory past AMA  
36 policies. (6) Sunset policies will be retained in the AMA historical archives.

1 In this report, the Council on Science and Public Health (CSAPH) presents its recommendations on  
2 the disposition of the House policies from 2003 that were assigned to it. The CSAPH's  
3 recommendations on policies are presented in the Appendix to this report.

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5 RECOMMENDATION

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7 The Council on Science and Public Health recommends that the House of Delegates policies that  
8 are listed in the Appendix to this report be acted upon in the manner indicated in the Appendix and  
9 the remainder of this report be filed. (Directive to Take Action)

Fiscal Note: Less that \$500 to update policy.

**APPENDIX: Recommended Actions on 2003 House Policies and Directives**

<b>Policy/ Directive Number</b>	<b>Title</b>	<b>Recommended Action and Rationale</b>
H-5.983	Pregnancy Termination	Retain in part to read as follows: The AMA adopted the position that pregnancy termination be performed only by appropriately trained physicians (MD or DO). <del>and encourages any specialty society which has adopted a contrary position to review and modify its position to comply with that of the AMA.</del>
H-5.985	Fetal Tissue Research	Retain in part to read as follows: The AMA <del>reaffirms its position in</del> supports of the use of fetal tissue obtained from induced abortion for scientific research.
H-10.966	Prevention of Fires Related to Cigarette Smoking	Retain. Still a viable tobacco control issue being pursued by states.
H-10.980	Motorcycles and Bicycle Helmets	Retain pending future consolidation report.
H-10.981	Prohibition on the Public Sale of Fireworks	Retain in part. Sunset (3) as it is not realistic. (1), (2), (4) and (5) are still relevant.
H-10.994	Maximum Temperature in Water Heaters	Sunset. No longer necessary.
H-10.995	Use of Technology to Prevent Explosions	Retain in part. Sunset (1) as it is not necessary. Retain (2) as it is still relevant.
H-15.954	Older Driver Safety	Retain. Still relevant.
H-15.961	Safety for Passengers in the Back of Pickup Trucks	Retain. Still relevant as some states do not have laws in place.
H-15.963	Daytime Visible Headlights	Sunset. Not necessary.
H-15.964	Police Chases and Chase-Related Injuries	Retain in part. Sunset (1) as it is not necessary. Retain (2) and (3) as they are still relevant.
H-15.966	Preventing Underride Motor Vehicle Crash Injury	Retain. Still relevant.
H-20.900	HIV, Sexual Assault, and Violence	Sunset (1) Not a strategic priority. Retain (2) as it is still relevant.
H-20.902	Sanctions for Willfully Infecting Others with HIV	Sunset. The term "sanctions" is vague. "Knowingly and willingly" constitute criminal conduct.
H-20.903	HIV/AIDS and Substance Abuse	Retain (1), (2), (3), and (4) as they are still relevant. Sunset (5), (6), and (7) as this is not a strategic priority.
H-20.908	Medical Care of HIV-Infected Patients	Sunset. Outdated.
H-20.909	HIV-Infected Aviation Pilots	Sunset. The FAA has solid policies and processes in place now.
H-20.910	HIV-Infected Children	Retain. Still relevant.

H-20.911	Reporting of HIV-and HBV-Infected Physicians	Sunset. Policy not ethically well grounded. FSMB has policy in this area.
H-20.912	Guidance for HIV-Infected Physicians and other Health Care Workers	Sunset. Outdated.
H-20.913	Prevention and Control of HIV and other Bloodborne Pathogens in Health Care Settings	Sunset. Now standard of care.
H-20.914	Discrimination Based on HIV Seropositivity	Retain. Still relevant.
H-20.916	Breastfeeding and HIV Seropositive Women	Retain. Consistent with CDC Guidelines.
H-20.917	Neonatal Screening for HIV Infection	Retain in part to read as follows: Our AMA: (1) Urges the U.S. Public Health Service, other appropriate federal agencies, private researchers, and health care industries to continue to pursue research, development, and implementation of diagnostic tests and procedures for more accurate demonstration of HIV infection in the newborn; and supports the widespread use of such tests in early diagnosis; (2) Favors giving consideration to rapid HIV testing of newborns, with maternal consent, when the maternal HIV status has not been determined during pregnancy or labor: and (3) <del>Supports voluntary, routine HIV testing of neonates in states with a high prevalence of HIV infection with maintenance of strict confidentiality. When treatment modalities with proven benefits for infected neonates are available.</del> Our AMA supports mandatory HIV testing of all newborns in high prevalence areas.
H-20.919	Patient Disclosure of HIV Seropositivity	Retain. Still relevant.
H-20.921	HIV/AIDS to be Considered as a Communicable and a Sexually Transmitted Disease	Sunset. Not necessary.
H-30.951	Boating Under the Influence	Retain in part. Sunset (1) it is not necessary. Retain (2) as it is still relevant.
H-30.955	Sequelae of Alcohol Intake	Sunset. Superseded by H-30.942.
H-30.974	Return to Work Following Successful Rehabilitation for the Disease Alcoholism and Other Chemical Dependencies	Sunset. Not necessary.
H-35.994	Treatment of Persons with Hearing Disorders	Retain. Still relevant.
H-50.975	Safety of Blood Donations and Transfusions	Retain. Still relevant.
H-50.976	Blood Bank Look-Back Programs	Retain. Still relevant.

H-50.977	Blood Donor Recruitment	Retain in part. Modify (1) to read as follows: Our AMA: (1) <del>advocates to the federal government for</del> <u>supports</u> the establishment of a national volunteer blood donor education and recruitment campaign to assure an adequate and readily available blood supply; and
H-50.982	Autologous Blood Transfusions	Retain. Still relevant.
H-55.984	Screening and Treatment for Breast and Cervical Cancer	Retain. Still relevant.
H-60.941	Effects of Alcohol on the Brains of Underage Drinkers	Retain. Still relevant.
H-60.963	Preventable Airway Obstructions in Children	Retain in part to read as follows: The AMA <del>will develop, disseminate, and promote</del> <u>supports</u> educational programs to apprise the public of the dangers of airway obstruction hazards in children and on methods to prevent these hazards.
H-60.966	Recommendations for Ensuring the Health of the Adolescent Athlete	Sunset. Superseded by H-470.971.
H-60.970	Minimizing Iron Poisoning	Sunset. Not necessary.
H-60.975	Political Influence and the American Teenage Study	Retain with change in title to read: “Political Influence and the <u>NIH American Teenage Study</u> ”
H-75.994	Contraception and Sexually Transmitted Diseases	Retain. Still relevant.
H-85.972	The Compassionate Care of the Terminally Ill	Sunset. Not necessary.
H-90.977	Impairment and Disability Evaluations	Retain. Still relevant.
H-95.948	Research on Drug Abusing Populations	Sunset. Not necessary.
H-95.956	Harm Reduction Through Addiction Treatment	Retain. Still relevant.
H-95.959	Expanding Treatment for the Heroin Addict Population	Sunset. Buprenorphine now available.
H-95.961	Policy on Illegal Drug Use	Retain. Still relevant.
H-95.989	Drug Paraphernalia	Retain. Still relevant.
H-100.976	Benzodiazepine Education	Retain in part. Still highly relevant. Modify policy as follows: Our AMA encourages physicians interested in the <del>true</del> addictive nature of benzodiazepines and their rational use to seek information from appropriate sources, <del>of information such as the American Psychiatric Association’s Task Force Report, Benzodiazepine Dependence, Toxicity and Abuse.</del>
H-100.979	Repeal of Offensive Federal	Retain. Still an issue. Change title to read:

	Regulations	Repeal of <del>Offensive</del> Federal Regulations
H-115.989	Protective Packaging	Sunset. No longer relevant.
H-120.960	Protection for Physicians Who Prescribe Pain Medication	Retain. Still relevant.
H-120.971	Emergency Department Administration of Schedule II Drugs Under Physician Order	Sunset. No longer necessary.
H-120.972	Confidentiality of Identification During Prescription Refills	Sunset. Reflects current practices.
H-120.977	Drug Error Issues	Sunset. Superseded by H-120.968.
H-120.993	Physicians' Desk Reference	Sunset. Accomplished.
H-130.992	Proposed Crisis Relocation and Shelter Plans	Retain. Still relevant.
H-130.993	Use of Emergency Medical Information Aids	Retain. Still relevant.
H-135.948	Toxicity of Computers and Electronics Waste	Retain. Still relevant.
H-135.951	Environmental Chemical and Disease Tracking and Reduction	Sunset. Accomplished.
H-135.960	Endorsement of the Concept of Recyclable and Biodegradable Packing, Including Pharmaceutical Packaging	Sunset. No longer necessary.
H-135.961	Risks of a High-Level Radioactive Waste Repository	Retain in part. (1) Sunset-No longer relevant, (2) Retain-Still relevant, (3) Modify to read as follows: urges the U.S. Congress to <del>continue the process it has set in place to characterize</del> <u>establish</u> a site for a high-level radioactive waste repository; and (4) Sunset-Not a strategic priority.
H-135.962	Management of Waste Associated with Health Care Delivery	Sunset. Accomplished.
H-145.987	Funding for Hunter Safety Education Programs and Wildlife Restoration	Sunset. Not a realistic goal.
H-145.988	AMA Campaign to Reduce Firearm Deaths	Retain in part to read as follows: The AMA <del>as part of its campaign against violence, will publicize information to educate</del> <u>supports educating</u> the public regarding methods to reduce death and injury due to keeping guns, ammunition and other explosives in the home.
H-150.951	Dietary Supplements Containing Ephedra Alkaloids	Sunset. Accomplished.
H-150.964	Availability of Heart-Healthy and Health-Promoting Foods at AMA Functions	Retain. Still relevant.
H-150.966	FDA Regulations Regarding the Inclusion of Added L-Glutamic Acid Content on Food Labels	Retain. Still an issue.
H-170.965	Education on Condom Use	Retain in part. Still relevant. (5) Sunset-

		Not a strategic priority.
H-170.966	Human Sexuality Education	Retain. Still relevant.
H-170.967	Rehabilitative Programs, Mental Health, and Educational Services for Girls in the Juvenile Detention System	Retain. Still relevant.
H-175.988	Thermography Update	Sunset. Some recognized diagnostic use exists.
H-215.978	Guns in Hospitals	Retain in part. Change name JCAHO to The JC in (1)
H-220.940	Changing Joint Commission on Accreditation of Healthcare Organization Standards and Agenda for Change	Rescind. No longer relevant.
H-220.942	Joint Commission Accreditation of Provider Networks	Rescind. No longer relevant.
H-220.945	Economic Credentialing	Rescind. Superseded by H-230.971. Also included in AMA Physician's Guide to Medical Staff Organization Bylaws.
H-220.946	Unreasonable Burden of Joint Commission on Accreditation of Healthcare Organizations Standards and Surveys	Retain in part to read as follows: The AMA requests <del>the JCAHO</del> <u>The Joint Commission</u> to study and consider the ability of small hospitals, particularly in rural areas, to bear the burden of the increasing demands on staff and financial resources in the implementation of the current and proposed standards; and urges <del>the JCAHO</del> <u>The Joint Commission</u> to eliminate standards that increase health care costs without demonstrably improving the quality of care. Change title as follows: Unreasonable Burden of <u>The Joint Commission</u> <del>on Accreditation of Healthcare Organizations</del> Standards and Surveys
H-220.949	JCAHO	Rescind. No longer relevant.
H-225.968	Standard Admitting Orders	Retain. Still relevant.
H-245.983	Baby Walkers	Retain. Still relevant.
H-245.985	Mandatory Labeling for Waterbeds and Beanbag Furniture	Retain in part. Change word "petitions" to "urges."
H-260.972	SI Units of Measure	Sunset. Not necessary.
H-365.996	Regulation of Occupational Carcinogens	Retain. Still relevant.
H-370.976	Regulating Human Tissue Industry	Sunset. Not necessary.
H-420.991	Fetal Effects of Maternal Alcohol Use	Retain. Still relevant.
H-425.994	Medical Evaluations of Healthy Persons	Retain. Still relevant.
H-430.988	Prevention and Control of HIV/AIDS and Tuberculosis in Correctional Facilities	Retain in part. Modify 1 (a) to read as follows: Federal and state correctional systems should provide comprehensive medical

		management for all entrants, which includes <del>mandatory</del> <u>voluntary</u> testing for HIV infection and <u>mandatory testing</u> for tuberculosis followed by appropriate treatment for those infected; Rescind (d) as too difficult to implement. Rescind (e) as already covered in (a). Modify (g) to read as follows: During their post-test counseling procedures, HIV-infected inmates <del>prison medical directors should be</del> <u>encouraged</u> to confidentially notify their sexual or needle-sharing partners. Modify (h) to read: Correctional medical care must, as a minimum, meet the prevailing standards of care for HIV-infected persons in the outside community at large. Prisoners should have access to <del>all</del> -approved therapeutic drugs and generally employed treatment strategies. Reletter as appropriate, and remainder of policy still relevant.
H-430.989	Disease Prevention and Health Promotion in Correctional Facilities	Modify in part. Modify (b) to read as follows: (b) an increase in direct referral by correctional systems of parolees with a <u>recent, active</u> history of intravenous drug use to drug treatment centers. Remainder of policy still relevant.
H-440.888	Public Health Leadership	Retain. Still relevant.
H-440.931	Update on Tuberculosis	Retain in part. Delete (1) as implementation is problematic. Modify (2) as follows: All prison inmates should be tuberculin skin-tested upon arrival; <u>and</u> annually thereafter. <del>and within 60 days of their release</del> Those who are positive should be managed as medically appropriate and contact tracing performed. Renumber recommendations, and remainder of policy still relevant.
H-440-932	Hepatitis B Vaccine	Sunset per current CDC recommendations.
H-440.934	Adequacy of Sterilization in Commercial Enterprises	Retain in part. Modify to read as follows: The AMA requests that state <del>medical societies explore with their state</del> health departments <u>ensure</u> the adequacy of sterilization of instruments used in commercial enterprises (tattoo parlors, beauty salons, barbers, manicurists, etc.) because of the danger of exchange of infected blood-contaminated fluids.
H-455.980	National Biomedical Tracer Facility	Retain. Supply issue still a concern.

H-455.992	Management of Nuclear and Isotope-Related Injuries and Contamination	Sunset. Not necessary.
H-460.915	Cloning and Stem Cell Research	Retain. Still relevant.
H-460.944	Support for Investigator-Initiated Medical Research	Sunset. Not consistent with current realities.
H-460.946	Support for the National Center for Research Resources of the National Institutes of Health	Sunset. NCRR was dissolved in 2011.
H-460.948	Consumer Product Testing	Sunset. Not necessary.
H-470.972	Medical and Nonmedical Uses of Anabolic-Androgenic Steroids	Retain in part. (1) Still relevant. (2), (3), (4), (5), (6), and (7) Sunset. Not necessary.
H-475.998	Cochlear Implants	Sunset. Not necessary.
H-480.956	Commercialized Medical Screening	Retain. Still relevant.
H-480.966	Multiplex DNA Testing for Genetic Conditions	Retain in part. Sunset (1) as no longer accurate. Modify to read as follows: Policy of the AMA is that: (1) <del>physicians should not routinely order DNA-based tests for multiple genetic conditions;</del> (2) tests for more than one genetic condition should be ordered only when clinically relevant and after the patient <u>or parent/guardian</u> has had full counseling and has given informed consent; (2) efforts should be made to educate clinicians and society about <del>the uncertainty surrounding DNA-based genetic testing;</del> and (3) <del>(4)</del> before genetic testing, <del>physicians should counsel patients</del> <u>should be counseled</u> on the familial implications of genetic test results, <u>including and emphasize</u> the importance of sharing results in instances where there is a high likelihood that a relative is at risk of serious harm, and where the relative could benefit from early monitoring or from treatment.
H-480.978	Expected Rise in Cost of Medical Care as a Result of Innovations	Retain in part with change in title to read as follows “ <del>Expected Rise in Cost of Medical Care as a Result of Innovations.</del> ” Still relevant.
H-480.984	Technology Assessment in Medicine	Rescind. Principles covered in H-330.926, H-460.909, H-460.943, and H-480.990.
H-485.995	TV Violence	Retain. Still relevant.
H-515.964	Violence Activities	Retain. Still relevant.
H-515.975	Alcohol, Drugs, and Family Violence	Retain in part. (1), (2), (3) – Retain, still relevant. Sunset (4) and (5) – outdated and/or no longer necessary.
H-515.979	Violence as a Public Health Issue	Retain. Still relevant.
H-515.981	Family Violence-Adolescents as Victims and Perpetrators	Retain in part. Modify (1) (a) to read: Our AMA (1) <del>will use its communications mechanisms to</del> (a) encourages physicians to screen adolescents about a current or prior

		history of maltreatment. Special attention should be paid to screening adolescents with a history of alcohol and drug misuse, irresponsible sexual behavior, eating disorders, running away, suicidal behaviors, conduct disorders, or psychiatric disorders for prior occurrences of maltreatment; and
D-20.997	Preventing Needlestick Injuries in Health Care Settings	Sunset. Accomplished.
D-55.998	Encourage Appropriate Colorectal Cancer Screening	Retain in part. Modify to read as follows: Our AMA, in conjunction with interested organizations and societies, will <del>promote</del> <u>support</u> educational and public awareness programs to assure that physicians actively encourage their patients to be screened for colon cancer and precursor lesions, and to improve patient awareness of appropriate guidelines, particularly within minority populations for all high risk groups. <del>including all individuals over age 50.</del>
D-60.987	Gender-Specific Rehabilitation Programs, Mental Health and Educational Services for Girls in the Juvenile Detention System	Sunset. Superseded by Policy H-170.967.
D-60.988	Early Childhood and Family Education as a Mechanism to Advance Family Health	Sunset. Superseded by AMA Policy.
D-60.989	Effects of Alcohol on the Brains of Underage Drinkers	Retain in Part and Change to Policy reading: Our AMA <del>will consult with relevant specialty societies (whose members provide care for adolescents and young adults) in order to create a</del> <u>supports creating a</u> higher level of awareness about the harmful consequences of underage drinking. <del>and seek to work collaboratively to address the underage drinking problem.</del>
D-95.992	Study of Abuse of Medications Containing Dextromethorphan	Sunset. Accomplished.
D-100.989	Pharmaceutical Shortages	Sunset. Superseded by H-100.956.
D-115.995	Readable Pharmaceutical Drug Inserts and Attachments to Drug Advertisements	Sunset. Accomplished.
D-120.981	Pharmaceutical Assistance Programs	Sunset. Accomplished.
D-120.983	Concerning Pain Management	Sunset. Accomplished.
D-120.985	Increasing Awareness of Opioid Pain Management Treatments	Retain. Still relevant.
D-120.986	Guidance for Physicians on Internet Prescribing	Sunset. Accomplished.

D-130.992	Medical Preparedness for Terrorism and Other Disasters	Sunset. Accomplished.
D-140.978	Commercial Medical Screening	Sunset. Accomplished.
D-145.998	Reauthorization and Strengthening of the 1994 Assault Weapons Ban	Sunset. Outdated.
D-145.999	Epidemiology of Firearm Injuries	Retain (1) and (2). Delete (3) and (4) Accomplished.
D-150.993	Obesity and Culturally Competent Dietary and Nutritional Guidelines	Sunset. Accomplished.
D-150.994	Sympathomimetic Amine-Based Products	Sunset. Accomplished.
D-150.995	Dietary Supplement and Health Education Act	Sunset. Superseded by H-150.954.
D-220.982	AMA Support for Physician Surveyors Consistent with AMA Policy	Sunset. Accomplished.
D-220.983	Provision for Conflict Resolution in Joint Commission Standards	Sunset. Accomplished.
D-220.985	Enforcement of JCAHO Medical Staff Standards	Sunset. Accomplished.
D-225.987	Interference with Medical Staff Participation on Hospital Boards	Sunset. Accomplished.
D-265.995	Physician Testimony Related to Tobacco and Health	Sunset. No longer relevant.
D-370.990	Umbilical Cord Blood Transplantation: The Current Scientific Understanding	Change to Policy. Retain (1) as it is still relevant. Modify (2) as follows: (2) <del>work with appropriate organizations to educate</del> <u>support education for</u> physicians and the public about the potential benefits of, and limitations to, umbilical cord blood transplantation as an alternative to bone marrow transplantation.
D-370.991	Shared Accountability for Increasing Organ and Tissue Donations	Sunset. Accomplished and/or not a strategic priority.
D-405.996	Physician Well-Being and Renewal	Retain. Still relevant.
D-420.997	Pain Relief During Labor & Delivery	Sunset. Standard of care.
D-440.979	Public Health Leadership	Sunset. Accomplished.
D-440.997	Support for Public Health	Retain. Still relevant.
D-460.983	Translating Biomedical Research to the Bedside	Retain (1) and (2) – Still relevant. Sunset (3), (4), and (5) – Accomplished.
D-460.986	Commercialized Medical Screening	Retain in part and Change to Policy reading: Our AMA <del>will urge government funding agencies to continue to fund</del> <u>supports the funding of</u> well-designed, large-scale clinical trials aimed at determining the safety, value, and cost-effectiveness of screening imaging procedures.
D-470.995	Hormone Abuse by Adolescents	Sunset. (1) and (2) Accomplished. (3) Not a strategic priority.
D-480.983	Medical Patents and Their	Modify as follows and change to Policy:

	Infringement on the Art of Medicine	Our AMA <del>will reiterate its supports</del> <u>for the Ganske Compromise and discourages</u> the medical community from soliciting patents on medical methodology.
D-480.989	Multiplex Genetic Testing in Newborns	Sunset. Accomplished.
D-490.983	Annual Tobacco Report 2003	Retain. Still relevant.
D-490.985	Tobacco Products Sold in Businesses that Dispense Medications	Sunset. Accomplished.
D-490.986	Support for U.S. Surgeon General Richard H. Carmona, MD	Sunset. Accomplished.
D-490.987	Federal Interagency Committee on Smoking and Health	Sunset. Accomplished.
D-490.988	Anti-Tobacco Poster Contest	Sunset. Accomplished.
D-490.995	Allocation of Tobacco Settlement Funds	Sunset. No longer relevant.
D-495.999	Tobacco Warning Labels	Sunset. FDA no longer pursuing. Superseded by Policy H-495.989.
D-515.994	Violence Activities	Sunset. Accomplished. Superseded by H-515.993.