During the A-18 meeting the American Medical Association (AMA) Resident and Fellow Section (RFS) delegation to the AMA House of Delegates (HOD) took ad hoc stances on the following items by caucus vote. The composition of the delegation may be found at the end of the report.

Resolution 001: Discriminatory Policies that Create Inequities in Health Care

1. Resolved Clauses:
   RESOLVED, That our American Medical Association speak against policies that are discriminatory and create even greater health disparities in medicine (Directive to Take Action); and be it further RESOLVED, That our AMA be a voice for our most vulnerable populations, including sexual, gender, racial and ethnic minorities, who will suffer the most under such policies, further widening the gaps that exist in health and wellness in our nation. (Directive to Take Action)

2. Vote: Support, by affirmation, with 40 out of 52 members of the delegation present.

3. Rationale: Our RFS has broad policy opposing discrimination and supporting the specific asks within this resolution would fall under our umbrella policy. See 130.---R, CEJA Opinion E-8.115, CEJA report 6-A-07

4. Outcome in HoD: Adopted

Resolution 008: Healthcare Rights of Pregnant Minors

1. Resolved Clauses:
   RESOLVED, That our American Medical Association work with appropriate stakeholders to support legislation allowing pregnant minors to consent to related tests and procedures from the prenatal stage through postpartum care (Directive to Take Action); and be it further RESOLVED, That our AMA oppose any law or policy that prohibits a pregnant minor to consent to prenatal and other pregnancy related care, including, but not limited to, prenatal genetic testing, epidural block, and Cesarean section. (Directive to Take Action)

2. Vote: Support, by affirmation, with 40 out of 52 members of the delegation present.

3. Rationale: Our RFS has broad policy regarding women’s health issues and opposing any restrictions therein, but needed to vote on this specific issue. See CEJA 2.2.1, CEJA 2.2.2, H60.958

4. Outcome in HoD: Adopted as Amended below
   RESOLVED, That our AMA oppose any law or policy that prohibits a pregnant minor from consenting to prenatal and other pregnancy related care, including, but not limited to, prenatal genetic testing, epidural block, pain management, Cesarean section, diagnostic imaging, procedures, and emergency care. (Directive to Take Action)

Resolution 209: Substance Use Disorders During Pregnancy

1. Resolved Clauses:
   RESOLVED, That our American Medical Association reaffirm Policy H-420.969 (#4) so as to oppose any legislation that seeks to specifically penalize women who are diagnosed with a substance abuse disorder during pregnancy (Reaffirm HOD Policy); and be it further RESOLVED, That our AMA oppose any efforts to imply that the diagnosis of substance abuse disorder during pregnancy represents child abuse (New HOD Policy); and be it further RESOLVED, That our AMA support legislation for the expansion and improved access to evidence-based treatment for substance abuse disorders during pregnancy without mandating any specific form of therapy. (Directive to Take Action)

2. Vote: Support, by affirmation, with 40 out of 52 members of the delegation present.
3. Rationale: Our RFS has policy opposing criminal punishment for a pregnant woman whose behaviors are harmful to the fetus. Further, our Section is in support of providing rehabilitative treatments for such individuals as appropriate based on their condition. See 390.005R, H-420.962, H-420.969, H-430.987

4. Outcome in HoD: Adopt as Amended below
RESOLVED, That our AMA support legislative and other appropriate efforts legislation for the expansion and improved access to evidence-based treatment for substance abuse disorders during pregnancy without mandating any specific form of therapy. (Directive to Take Action)

Resolution 218: Considering Feminine Hygiene Products as Medical Necessities

1. Resolved Clauses:
RESOLVED, That our American Medical Association encourage the Internal Revenue Service to classify feminine hygiene products as medical necessities.

2. Vote: Support, by affirmation, with 40 out of 52 members of the delegation present.

3. Rationale: Our RFS has existing policy supporting assistance for feminine hygiene products, but does not specifically advocate for their classification as a medical necessity. See 390.001R, H-270.953, H-320.942

4. Outcome in HoD: Amended by Addition of a Second Resolved Clause as below
RESOLVED, That our American Medical Association work with state and specialty medical societies to advocate for the removal of barriers to feminine hygiene products in state and local prisons and correctional institutions to ensure incarcerated women have affordable access to the appropriate type and quantity of feminine hygiene products including tampons for their needs.

Resolution 313: Financial Literacy for Medical Students and Residents

1. Resolved Clauses:
RESOLVED, That our American Medical Association amend policy D-295.316 by addition to read as follows: Management and Leadership for Physicians D-295.316
Our AMA will study advantages and disadvantages of various educational options on management and leadership for physicians with a report back to the House of Delegates; and develop an online report and guide aimed at physicians interested in management and leadership that would include the advantages and disadvantages of various educational options.
2. Our AMA will work with key stakeholders to advocate for collaborative programs between medical schools, residency programs, and related schools of business and management to better prepare physicians for administrative, financial and leadership responsibilities in medical management.
3. Our AMA: (a) will advocate for and support the creation of leadership programs and curricula that emphasize experiential and active learning models to include knowledge, skills and management techniques integral to achieving financial literacy and leading interprofessional team care, in the spirit of the AMA’s Accelerating Change in Medical Education initiative; and (b) will advocate with the Liaison Committee for Medical Education, Association of American Medical Colleges and other governing bodies responsible for the education of future physicians to implement programs early in medical training to promote the development of leadership and financial literacy capabilities. (Modify Current HOD Policy)

2. Vote: Support, by affirmation, with 38 out of 52 members of the delegation present.

3. Rationale: Our RFS does not have specific policy relating to this issue, but as the subject matter directly relates to residents it was decided that our delegation needs to take a position. See D-295.316, D-295.321, H-295.924, H-295.977

4. Outcome in HoD: Adopted as Amended below
RESOLVED, That our American Medical Association amend policy D-295.316 by addition to read as follows: Management and Leadership for Physicians D-295.316

Our AMA will study advantages and disadvantages of various educational options on management and leadership for physicians with a report back to the House of Delegates; and develop an online report and guide aimed at physicians interested in management and leadership that would include the advantages and disadvantages of various educational options.

2. Our AMA will work with key stakeholders to advocate for collaborative programs between medical schools, residency programs, and related schools of business and management to better prepare physicians for administrative, financial and leadership responsibilities in medical management.

3. Our AMA: (a) will advocate for and support the creation of leadership programs and curricula that emphasize experiential and active learning models to include knowledge, skills and management techniques integral to achieving personal and professional financial literacy and leading interprofessional team care, in the spirit of the AMA’s Accelerating Change in Medical Education initiative; and (b) will advocate with the Liaison Committee for Medical Education, Association of American Medical Colleges and other governing bodies responsible for the education of future physicians to implement programs early in medical training to promote the development of leadership and personal and professional financial literacy capabilities. (Modify Current HOD Policy)

Resolution 417: Reducing Disparities in Obstetric Outcomes, Maternal Morbidity, and Prenatal Care

1. Resolved Clauses:

RESOLVED, That our American Medical Association work with stakeholders to encourage research on identifying barriers and developing strategies toward the implementation of evidence-based practices in ethnic minorities to prevent disease conditions that contribute to poor obstetric outcomes, maternal morbidity and maternal mortality. (Directive to Take Action)

2. Vote: Support, by affirmation, with 40 out of 52 members of the delegation present.

3. Rationale: Our RFS has broad policy covering women’s health issues and reducing health disparities, but it was felt that they did not adequately cover the topics addressed by this resolution. See 410.028R, H-350.974, D-420.993, H-420.995

4. Outcome in HoD: Adopted as Amended below

RESOLVED, That our American Medical Association work with stakeholders to encourage research on identifying barriers and developing strategies toward the implementation of evidence-based practices in ethnic minorities to prevent disease conditions that contribute to poor obstetric outcomes, maternal morbidity and maternal mortality in racial and ethnic minorities. (Directive to Take Action)

Resolution 522: Silence Science: EPA Proposed Data Policy

1. Resolved Clauses:

RESOLVED, That our American Medical Association submit comments during the public comment period, or join comments written by other medical organizations, to express concern with the U.S. Environmental Protection Agency’s (EPA) proposal to limit the use of research studies published in peer reviewed scientific journals that describe the adverse health effects of exposure to air pollution and other environmental exposures (Directive to Take Action); and be it further

RESOLVED, That our AMA reaffirm the value and integrity of the journal peer review process by sending a letter to the EPA stating that studies that have been published in scientific peer reviewed journals should be used by the agency in informing EPA regulatory policy making. (Directive to Take Action)

2. Vote: Support, by affirmation, with 40 out of 52 members of the delegation present.
3. **Rationale:** Our delegation strongly believes in the role of science and facts in the determination of federal policy and thought it important that our RFS have a unified voice on this specific topic. See 7.2.1, H-220.930, H-60.975, H-460.899, H-460.976

4. **Outcome in HoD:** Referred to the Board of Trustees

**Resolution 601: Creation of LGBTQ Health Specialty Section Council**

1. **Resolved Clauses:**
   RESOLVED, That our American Medical Association House of Delegates establish a Specialty Section Council on LGBTQ Health. (Directive to Take Action)

2. **Vote:** Support, by affirmation, with 40 out of 52 members of the delegation present.

3. **Rationale:** Our RFS has broad policy supporting LGBTQ-specific issues in health and wanted to support the creation of a Section Council that may adequately represent this community within the HoD. See 260.008R, B-7.0.8

4. **Outcome in HoD:** Adopted.

**Delegation Composition**
The composition of the delegation is listed below. Please note that changes occurring as individuals left the conference or joined other delegations will be reflected in-line. A special thanks to our reference committee team leaders, who helped lead the review of over 250 items of business. Their names will be bolded below.

Delegate- Joshua Lesko  
Alternate Delegate- Taylor George

Sectional Delegates:  

Sectional Alternate Delegates:  
Ankit Agarwal, Michelle Falcone, Logan Jones, Michael Metzner, Scott Pasichow, Keena Que, Kunj Patel (replaced by Joanne Loethen), Courtney Moors (replaced by Ariel Anderson), Laurel Bessey, Melanie Mitta (replaced by George Fryhofer), Carl Streed Jr., Erin Schwab, Valerie Lockhart, Jessica Cho, Alberto Bursian (replaced by Pratishta Koirala), Danniell Terveen, Toyn Okenlawon, Timothy Parker, Jacob Burns (replaced by Christopher Libby), Tani Malhotra, Sarah Marsicek, Colin Murphy, Rebecca Obeng.

This concludes the Delegate Report for A-18.

Josh Lesko, Delegate  
Taylor George, Alternate Delegate