AMERICAN MEDICAL ASSOCIATION ORGANIZED MEDICAL STAFF SECTION

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Resolution: 3
(A-25)

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Introduced by: Lee Ansel, MD

Subject: Mobile IV "Services"

Referred to: OMSS Reference Committee
(xxxx, MD, Chair)

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1   Whereas, there has been an uptick in marketing for mobile IV services; and
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3   Whereas, these marketing efforts offer dubious and perhaps dangerous interventions; and
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5   Whereas, the offerings of hydration, energy boost, or cleansing have no supporting evidence to
6   back their efficacy or benefit and without oversight they may put the public at risk; and
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8   Whereas, these unregulated new health-related businesses have sketchy physician oversight if
9   any at all; and
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11   Whereas, the AMA has no policy to deal with these new risks to the health and welfare of the
12   public; therefore be it
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14   RESOLVED, that our American Medical Association study the business model of mobile IV
15   services with an eye on safety, costs, risks, dangers, and oversight and report back on its
16   findings at the 2026 Annual Meeting (Directive to Take Action).
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Fiscal Note: (Assigned by HOD)

Received: 4/28/2025

RELEVANT AMA POLICY

Guidelines for Mobile Medical Applications and Devices D-480.972

1. Our AMA will monitor market developments in mobile health (mHealth), including the development and uptake of mHealth apps, in order to identify developing consensus that provides opportunities for AMA involvement.
2. Our AMA will continue to engage with stakeholders to identify relevant guiding principles to promote a vibrant, useful and trustworthy mHealth market.
3. Our AMA will make an effort to educate physicians on mHealth apps that can be used to facilitate patient communication, advice, and clinical decision support, as well as resources that can assist physicians in becoming familiar with mHealth apps that are clinically useful and evidence based.
4. Our AMA will develop and publicly disseminate a list of best practices guiding the development and use of mobile medical applications.
5. Our AMA encourages further research integrating mobile devices into clinical care, particularly to address challenges of reducing work burden while maintaining clinical autonomy for residents and fellows.
6. Our AMA will collaborate with the Liaison Committee on Medical Education and Accreditation Council for Graduate Medical Education to develop germane policies, especially with consideration of potential financial burden and personal privacy of trainees, to ensure more uniform regulation for use of mobile devices in medical education and clinical training.
7. Our AMA encourages medical schools and residency programs to educate all trainees on proper hygiene and professional guidelines for using personal mobile devices in clinical environments.
8. Our AMA encourages the development of mobile health applications that employ linguistically appropriate and culturally informed health content tailored to linguistically and/or culturally diverse backgrounds, with emphasis on underserved and low-income populations.

Citation: CSAPH Rep. 5, A-14; Appended: Res. 201, A-15; Appended: Res. 305, I-16; Modified: Res. 903, I-19

Integration of Mobile Health Applications and Devices into Practice H-480.943

1. Our American Medical Association supports the establishment of coverage, payment and financial incentive mechanisms to support the use of **mobile** health applications (mHealth apps) and associated devices, trackers and sensors by patients, physicians and other providers that:
    a. support the establishment or continuation of a valid patient-physician relationship;
    b. have a high-quality clinical evidence base to support their use in order to ensure mHealth app safety and effectiveness;
    c. follow evidence-based practice guidelines, especially those developed and produced by national medical specialty societies and based on systematic reviews, to ensure patient safety, quality of care and positive health outcomes;
    d. support care delivery that is patient-centered, promotes care coordination and facilitates team-based communication;
    e. support data portability and interoperability in order to promote care coordination through medical home and accountable care models;
    f. abide by state licensure laws and state medical practice laws and requirements in the state in which the patient receives services facilitated by the app;
    g. require that physicians and other health practitioners delivering services through the app be licensed in the state where the patient receives services, or be providing these services as otherwise authorized by that state's medical board; and
    h. ensure that the delivery of any services via the app be consistent with state scope of practice laws.
2. Our AMA supports that mHealth apps and associated devices, trackers and sensors must abide by applicable laws addressing the privacy and security of patients' medical information.

3. Our AMA encourages the **mobile** app industry and other relevant stakeholders to conduct industry-wide outreach and provide necessary educational materials to patients to promote increased awareness of the varying levels of privacy and security of their information and data afforded by mHealth apps, and how their information and data can potentially be collected and used.
4. Our AMA encourages the mHealth app community to work with the AMA, national medical specialty societies, and other interested physician groups to develop app transparency principles, including the provision of a standard privacy notice to patients if apps collect, store and/or transmit protected health information.
5. Our AMA encourages physicians to consult with qualified legal counsel if unsure of whether an mHealth app meets Health Insurance Portability and Accountability Act standards and also inquire about any applicable state privacy and security laws.
6. Our AMA encourages physicians to alert patients to the potential privacy and security risks of any mHealth apps that they prescribe or recommends, and document the patient's understanding of such risks
7. Our AMA supports further development of research and evidence regarding the impact that mHealth apps have on quality, costs, patient safety and patient privacy.
8. Our AMA encourages national medical specialty societies to develop guidelines for the integration of mHealth apps and associated devices into care delivery.

Citation: CMS Rep. 06, I-19; Reaffirmation: A-17; Reaffirmation: A-23; Modified: Speakers Rep. 02, I-24