

TO: Members of The American Medical Association's Resident & Fellow Section
FROM: Joey Whelihan, MD, Delegate; and Tristan Mackey, MD, Alternate Delegate
RE: 2025 AMA Annual Meeting of the House of Delegates - AMA RFS Delegate Report
DATE: July 11, 2025

During the 2025 Annual Meeting of the AMA House of Delegates (A-25) in June, your Resident and Fellow Section (RFS) was represented by your RFS Delegate, RFS Alternate Delegate, and the RFS Sectional Delegates and Alternate Sectional Delegates who form the caucus of the RFS within the House of Delegates (HOD). Decisions on RFS support, amendments, and opposition are determined by the RFS caucus based on the available positions within the RFS Position Compendium. Where the positions are not clear, or there is no internal position on an issue of concern to residents and fellows, the caucus can vote to take an action at that meeting on behalf of the Section. Per the RFS Internal Operating Procedures, a quorum for a valid vote must consist of a majority of the RFS Sectional Delegates and Alternate Sectional Delegates. All members of the RFS are welcome to participate in the caucus, but only the caucus members count towards quorum and are allowed to vote to take positions on behalf of the RFS. This report outlines the actions and advocacy outcomes of the RFS delegation at the A-25 HOD. Recommendations for potential policy changes are summarized at the end.

A-25 HOD Items of Business and RFS Top Priorities

For full text of the reports and resolutions, please reference the [HOD Business Webpage](#) and read through the annotated and unannotated reference committee reports.

A-25 Business Item	Generated From	HOD Outcome
BOT 18 - Physician Assisted Suicide	A-24 MSS and RFS Resolutions regarding Medical Aid in Dying	Adopt -This report clarified that the HOD policy opposes legal action against physicians engaging in PAS when it is legal. Your RFS delegates attempted to extract and amend the policy to be more in line with RFS Positions but were unsuccessful. The HOD vote was approximately 30%/70%.
004 - Reducing the Harmful Impacts of Immigration Status on Health	UMAS Resolution - RFS had identical internal position passed at A-25	Adopt as amended - This policy affirms the AMA's support for humane immigration practices by advocating for asylum rights, pathways to citizenship for undocumented youth, family

		reunification, deportation deferrals for vulnerable populations and caregivers, and the removal of immigration enforcement from employment settings.
007 - Use of Inclusive Language in AMA Policy	MSS Resolution - RFS had identical internal position passed at A-25	Adopt - This policy directs the AMA to update all existing and future policies to reflect inclusive, equitable, and person-first language, and to establish a process for identifying and revising outdated or stigmatizing terminology in collaboration with the AMA Center for Health Equity. Your section delegates supported this resolution without issue.
011 - Opposition of Health Care Entities from Reporting Individual Patient Immigration Status	RFS Resolution (I-24)	Adopt as amended - This policy strengthens the AMA's stance against criminalizing care for undocumented patients, opposing mandatory immigration status reporting or proof of citizenship for healthcare access, while supporting the de-identified collection of immigration data solely for research and funding purposes. Your section delegates supported this item and the amendments that were proffered.
012 - Carceral Systems and Practices in Behavioral Health Emergency Care	RFS Resolution (I-24)	Adopt as amended - This policy expands the AMA's commitment to humane, evidence-based mental health crisis response by promoting non-carceral, community-based interventions, opposing routine use of law enforcement and physical restraints in behavioral health emergencies, and calling for

		clearer ethical guidance on interactions with law enforcement, especially regarding the shackling of youth and adults in custody. Your section delegates supporting this item and the amendments that were proffered.
CMS 05 - Medicaid Estate Recovery Reform		Adopt as amended - your section delegates sought to amend this report to ask the AMA to oppose Medicaid Estate Recovery efforts instead of allowing states to decide. This amendment was accepted.
240 - Preserving the Specialty of Occupational and Environmental Medicine		Adopted - Reinforces the importance of preserving Occupational and Environmental Medicine as a distinct specialty, particularly amid workforce shortages and regulatory threats that could dilute or marginalize its scope and recognition. Your section delegates supported the passage of this item.
228 - CHIP Coverage of OTC Medications	RFS Resolution (I-24)	Adopted as amended - Expands CHIP coverage to include OTC medications to reduce cost barriers and improve pediatric health access. Your section delegates supported the amendments to this item and passage of this as authors.
238 - Preserving Accreditation Standards on Diversity, Equity, and Inclusion	RFS Resolution (A-25)	Adopted as amended - AMA opposes any rollback of DEI-related accreditation standards and supports ongoing efforts to foster diversity in medical education. Your section delegates proffered amendments that

		strengthened language and were more in line with CME and the reference committee recommendations, and these were accepted.
241 - Opposition to the Decertification of Independent Universities from the Student and Exchange Visitor Program		Adopted as amended- Opposes SEVP decertification of independent universities, citing harm to international medical students and potential workforce impacts. Your section delegates worked to support the passage of this item as amended.
219 - Opposing Unwarranted National Institutes of Health Research Institute Restructuring		Adopted in lieu of- Calls on AMA to oppose NIH restructuring efforts that risk undermining research continuity, especially in disease-specific institutes. Your section delegates worked to support the passage of this item in its original form.
223/232/236 - Preservation of Medicaid		Adopted in lieu of - Unified resolution calling for preservation and expansion of Medicaid access; opposes eligibility restrictions or funding cuts. Your section delegates supported the item in its final form.
237 - Urgent Advocacy to Restore J-1 Visa Processing for International Medical Graduate Physicians		Adopted - Urgently advocates for restoration of J-1 visa processing for IMGs, especially after COVID-related slowdowns; supports workforce pipeline. Your section delegates worked to support the passage of this item
218 - Distribution of Resident Slots Commensurate with Shortages		Reaffirmed HOD policy - Directs the AMA to advocate for redistributing residency

		slots to regions facing workforce shortages, addressing geographic inequities.
CME 05 - Disaffiliation from the Alpha Omega Alpha Honor Medical Society due to Perpetuation of Racial Inequities in Medicine	Res. 309-A-24	Adopted as amended- Calls for AMA to disaffiliate from Alpha Omega Alpha due to its historical and current role in perpetuating racial disparities. Your section delegates worked diligently to amend this item to accomplish the original goals of our section in offering this item and were in support of the final form.
304 - Addressing Professionalism Standards in Medical Training	RFS had identical internal position passed at A-25	Adopted as amended - Calls for updated and enforceable professionalism standards that align with inclusion and well-being in medical education. Your section delegates worked to pass this item in its final form, which we were agreeable with.
305 - Curricular Structure Reform to Support Physician and Trainee Well-Being		Adopted as amended - Supports restructuring medical curricula to prioritize wellness, rest periods, and protections against exploitation in training. Your RFS section delegates worked with the MSS to support the amendments made to this item, which were accepted.
310 - Protections for Trainees Experiencing Retaliation in Medical Education	(RFS Res 9, I-24)	Adopted as amended - Establishes protections for trainees facing retaliation, including confidential reporting pathways and institutional accountability mechanisms. Your section delegates supported the amendment offered and

		assisted the MSS in the final passage of this time as amended.
311 - Transparency and Access to Medical Training Program Unionization Status, Including Creation of a FREIDA Unionization Filter	RFS Resolution (A-24)	Adopted - Directs AMA to increase transparency around medical training program unionization status via FREIDA and other tools. Your section delegates worked to have this accepted as authors.
428 - Public Health Implications of US Food Subsidies	RFS Resolution (A-24)	Adopted - Assesses the impact of U.S. food subsidies on population health, with potential future advocacy for realignment toward healthier diets. Your section delegates worked to have this accepted as authors.
517 - In Support of a National Drug Checking Registry	RFS Resolution (A-24)	Adopted as amended - Supports a national drug checking registry to reduce harm from contaminated or mislabeled substances, particularly fentanyl-adulterated drugs. Your section delegates were in support of the amendments offered and supported the passage of this item in its final state.
BOT 22 - Ranked Choice Voting		Adopted - Explores potential for ranked choice voting in AMA elections, including pilot implementation and feasibility study. Your section delegates chose to not pursue any further action on this item and allowed the part to be filed.
BOT 23 - Financial Assistance to Facilitate Attendance at MSS Meetings		Adopted as amended - Expands financial assistance to enable more medical students to attend AMA meetings, with particular

		focus on equity. Your section delegates supported the MSS in the amendment of this item as this could also impact the RFS in coming meetings. The amendments were accepted.
604 - Advisory Committee on Tribal Affairs		Adopted as amended - Creates an AMA task force on Tribal Affairs to ensure better representation and address health disparities in Indigenous populations. Your section delegates supported the MSS and MAS in order to have this item passed in a way that would feasibly accomplish their goals and we were successful.

RFS Items of Business at A-25

Your RFS Section Delegates plan to submit the following business items for consideration at the House of Delegates at I-25. If circumstances change the wisdom of introducing any individual resolution, your Section Delegates may choose to retain a resolution in this queue. Any such decision will be communicated to the RFS Delegation promptly, and input from the Delegation and Section will be solicited. Editorial changes to the titles of items, to match the final outcomes of any amendments from debate within the RFS, may be made before submission to the House, and Whereas clauses in each item will be similarly reviewed and updated.

- A-25 RFS Report B - Revisions to RFS Internal Operating Procedures
 - Of note, this will be submitted to the Council on Constitution and Bylaws, who will review and generate a report for acceptance by the House of Delegates, likely at A-26
- A-25 RFS Report D - Reasonable Workplace Accommodations for Residents and Fellows During Pregnancy
- A-25 RFS Resolution 1 - Remedy the Harms of AMA's Role in the Flexner Report

Your Section Delegates would also like to draw your attention to A-25 RFS Resolution 6 – Trial a Co-Sponsorship Mechanism for RFS with RESOLVED clauses:

RESOLVED, that our American Medical Association Resident and Fellow Section (AMA-RFS) formally trial a co-sponsorship mechanism for the 2025 Interim Meeting and 2026 Annual Meeting with thorough evaluations of the utility of the process, usage of this mechanism and possible improvements of the mechanism after each meeting; and be it further

RESOLVED, that after the 2026 Annual Meeting our AMA-RFS shall consider whether to retain, change, or dispose of this co-sponsorship mechanism, and be it further

RESOLVED, that our 2025-2026 AMA-RFS Section Delegate and Section Alternate Delegate, with input from the RFS Delegation and Section as appropriate, shall design a trial co-sponsorship mechanism for the AMA-RFS that adheres to principles of transparency, timeliness, democratic decision-making, and close alignment with existing AMA-RFS position statements.

Your 2025-26 Section Delegates will report back to the Assembly about the implementation of this policy at I-25.

Caucus Votes

During the 2025 Annual Meeting of the AMA House of Delegates (A-25), your Resident & Fellow Section (RFS) Delegation took ad hoc stances on the following business items through the caucus vote (CV) mechanism. It also used this mechanism regarding decisions on strategy for passage or acceptance of Reference Committee Recommendations. This report details the vote on the item of business on which the RFS took a formal position. CVs were completed through several mechanisms: 1) items believed by their reviewing teams to be noncontroversial could be voted on through an online Google form (any caucus member could request that any item on the Google form be upgraded to an in-person vote); 2) votes could be taken on at the pre-A-25 virtual caucus meeting (note that in vote counts for these votes, abstentions were not counted during votes, with quorum ascertained at the beginning of voting); and 3) votes could be taken at the in-person caucus meetings during A-25.

CEJA 08	Our RefCom E&B Team recommends that we SUPPORT this report.	37/1/3
Res 008	Our RefCom E&B Team recommends that we SUPPORT this resolution. Rationale: I do not believe we have similar policy but do believe many of our policies observe inclusion of all cultural beliefs and respect for other faiths and traditions. 410.038	27/0/4
CMS 02	Our RefCom A Team recommends that we AMEND this report by supporting the MSS amendment below. AMENDMENT: MSS will propose an amendment to R1 to add "with incremental increases based on continual monitoring until the firewall is completely removed"—this would allow ongoing monitoring and continued movement of the 200% FPL "firewall" recommendation as changes are made.	32/3/4
Res 104	Our RefCom A Team recommends that we OPPOSE this resolution. Rationale: We opposed essentially the same item at I-24, and this is generally a bad idea that threatens Medicaid coverage for patients.	35/2/5
BOT 17	Our RefCom B Team recommends that we SUPPORT this report. Rationale: We Priority 2 (Justice, Equity, Diversity, and	36/0/6

	Inclusion)	
Res 210	Our RefCom B Team recommends that we SUPPORT this report. Rationale: Recommend support (priority 2), fits within "healthcare access and coverage"; AMA has a lot of policy on drug access and affordability in line with the resolved clauses, but not direct policy pertaining to tariffs, I think this is novel enough with more pertinent asks.	38/4
Res 215	Our RefCom B Team recommends that we SUPPORT this report. Rationale: No RFS policy, but reasonable given our main tenets, we would be inclined to support.	38/1/3
Res 219	Our RefCom B Team recommends that we SUPPORT this report.	37/1/4
Res 221, 223, 232	Our RefCom B Team recommends that we SUPPORT these resolutions and ask to combine them. Rationale: Priority 2 (healthcare access and coverage);	39/0/3
Res 222	Our RefCom B Team recommends that we SUPPORT this resolution. Rationale: The proposed resolution aligns with the AMA policy on Permanent Residence Status for Physicians on H-1B Visas (D-255.979) by addressing the broader issue of H-1B visa challenges faced by International Medical Graduates (IMGs). Both policies aim to alleviate barriers for physicians on H-1B visas, with the proposed resolution focusing on expediting the visa application and renewal process, while the existing policy seeks to clear backlogs and address family-related visa issues. Both initiatives support the retention of IMGs in the U.S. healthcare system and advocate for improvements in visa processing to ensure a stable and uninterrupted workforce. D255.979, 220.001R, 220.002R, 220.003R	33/1/7
Res 234	Our RefCom B Team recommends that we SUPPORT this resolution.	39/1/2
Res 312	Our RefCom C Team's recommendation is that we SUPPORT this resolution.	36/2/4
Res 411	Our RefCom D Team recommends that we SUPPORT this resolution. Rationale: Protecting mRNA vaccines falls under the protection of access to healthcare (strategic focus), which would otherwise be inaccessible if banned. RFS broadly supports vaccines (410.029R Medical Vaccination Exemptions, 410.003R Payment for Vaccines by Medicare, 50.008R Allowing Mature Minors to Consent for Vaccinations) but does not have a position specific to mRNA vaccines. Also, 100.004R Ethical Physician	35/2/4

	Conduct in the Media about not spreading misinformation and actively spreading correct information	
Res 416	Our RefCom D Team recommends that we SUPPORT this resolution. Rationale: 1 SFA: JEDI. 550.013R - Supporting inclusive practices; 120.007R - Supporting food education, which is part of this resolution	39/1/2
Res 417	Our RefCom D Team's recommendation is that we SUPPORT this resolution AND say that we support the spirit of 405 and 425 but believe this is more comprehensive and think that all three should be considered together. Rationale: 1 SFA: JEDI. RFS policy: 30.001R Alcohol and Youth and 30.002R Advertising of Alcoholic Beverages give support for better alcohol policy. We also have a few RFS policies supporting various warning labels, with 120.004R UTruth in Nutrition Labeling being particularly close.	39/0/3
Res 429	Our RefCom D Team recommends that we SUPPORT this resolution. Rationale: Falls under RFS healthcare access and coverage for strategic focus area for promotion of preventive healthcare. MSS policy on HOD queue regarding microplastics	39/0/3
Res 710	Our RefCom G Team recommends that we SUPPORT this resolution. Rationale: amendment of H110.990 in I24 with ongoing conversations on managing costs with the pharmacy needs of patients. The recent RFS policy adopted on OTC coverage for patients with CHiP. Overall, lots of new policies and talk around pharmacy coverage, and we should be a part of that conversation.	39/0/3
CCB 1	Our RefCom E&B leads recommended that we support extracting this item and support the MSS amendment in order to strike regarding asking for additional nominations. Your Caucus voted in favor of this and supporting the MSS amendment	100%
CEJA 8	Our RefCom E&B leads asked that we support MAS in extracting this item and moving for re-referal of this item for CEJA to provide more information and additional recommendations. Your caucus voted to support referral of this item.	100%
Res 014	Our RefCom E&B recommends that we support this item given our extensive support of these topics in the past, although we do not have explicit policy on this topic. Your RFS caucus voted to support this resolution.	100%

CME 2	Motion was made from the floor to support the report as written if this were to be extracted. Your RFS Caucus voted to support this item.	100%
Res 237	Your RefCom B team leads recommended that we support this item as written, including with the word publicly included, and your RFS caucus voted to support this	100%
Res 219	Your RefCom B teams leads recommended that we support amendments that were being proffered by the ASCO and MSS delegation and your RFS caucus voted to support this.	100%
Res 1005	There was a motion from the floor that we support this item and your RFS caucus voted to support this item.	100%
Res 1006	Your RefCom B leads recommend that we support this item and your RFS caucus voted to support this item.	100%
Res 1007	Your RefCom B leads recommend that we support this item and your RFS caucus voted to support this item.	100%
BOT 23	Your RefCom F leads recommended supporting the MSS in striking the word "consider" and any other efforts that they were going to make in order to shorten the timeline on this item. Your RFS caucus voted to support this.	100%
Res 602	There was a motion from the floor that we support this item and your RFS caucus voted to support this item.	100%
Res 305	Your Councilor on Medical Education recommended that we supported the amendments being proffered by your Council on Medical Education and your RFS caucus voted in support of this.	100%
CMS 06	There was a motion from the floor that we support an amendment that would be proffered by the MSS and your RFS caucus voted in favor of this.	100%
BOT 23	If it gets extracted, then we will support the reference committee recommendations as written. We will not be extracting this item.	100%
Res 219	Motion to support ASCO language	100%
BOT 17	Motion to support referral	100%

Summary of Recommendations

Your RFS Delegates encourage the RFS Assembly to author resolutions centered around the RFS Strategic Focus areas of: (a) justice, equity, diversity, and inclusion in medicine, (b) scope of practice, (c) medical education, (d) trainees rights, wellbeing, and burnout, and (e) healthcare access and coverage

Specific policy gaps noted included the following areas: artificial intelligence, Indigenous health, health equity generally, immigrant health, gender-affirming care, MENA health, better definition of our stance on scope of practice, and care for people who are incarcerated.

We also encourage new authors, including members of our Standing Committees, to author new policies identified as policy gaps within our RFS Position Compendium to support our efforts within the House of Delegates.

RFS Delegation

The composition of the RFS delegation at A-25 is listed below. Sectional Delegates and Alternate Delegates are expected to contribute to the caucus's work and assist in its processes, such as resolution review, attendance at the House of Delegates, etc. (*Our sincere apologies are offered if we have missed any contributions.*)

Sectional Delegates:

1	Jacob	Altholz
2	Hussein	Antar
3	Samantha	Beck
4	Lauren	Benning
5	Kylee	Borger
6	Jacob	Cabrejas
7	Megan	Chiu
8	Rosalynn	Conic
9	Elizabeth	Conner
10	Allie	Conry
11	Nikita	Deval
12	Abhishek	Dharan
13	Lavanya	Easwaran
14	Rachel	Ekaireb
15	Oluwasegun	Emenogu
16	Nicolas	Fletcher
17	Brandon	Francis
12	Anirudh	Gautam
18	Victoria	Gordon
19	Revati	Gummaluri

20	Anna	Heffron
21	Pauline	Huynh
22	Brady	Iba
23	Dayna	Isaacs
24	Daniel	Kerekes
25	Rohan	Khazanchi
26	Laila	Koduri
27	Daniel	Lee
28	Pawan	Mathew
29	Helene	Nepomuceno
30	Neil	Rens
31	Danielle	Rivera
32	Katherine	Russell
33	Karthik	Sarma
26	Kelly	Schmidt
35	Sarah Mae	Smith
36	Nikita	Sood
37	Sophia	Spadafore
38	Ida	Vaziri
39	Michael	Visenio
40	Abbigayle	Willgruber
41	Christopher	Wong

Alternate Section Delegates:

1	Caleb	Atkins
2	Reilly	Bealer
3	Brittney	Bernal
4	Joshua	Bilello
5	Ian	Brodka
6	Arya	Dadhania
7	Mollie	Dreicer

8	Robert	Dunn
9	Zachary	Dunton
10	Elisa	Quince
11	Max	Galvan
12	Anirudh	Gautam
13	Jean-Luc	Germany
14	Mindy	Gruzin
15	Aaishwariya	Gulani
16	Terry	Henry
17	Mohammad	Ibrahim
18	Allison	Young
19	Oladimeji	Lanade
20	Shreya	Mandava
21	James	Mossner
22	Pooja	Patel
23	Haritha	Pavuluri
24	Bianca	Radut
25	Andrew	Ray
26	Kelly	Schmidt
27	Apoorva	Tummala
28	Dhruv	Puri
29	Laurie	Lapp
30	Rajadhar	Reddy
31	Rijul	Asri
32	Shaminy	Manoranjithan
33	Katerina	Kearns
34	Nidhi	Reddy
35	Frank	Zhou
36	Jasmine	Murchison
37	Jay	Devineni
38	Katie	Porter

39	Ali	Malik
40	Brock	Davis

The following delegates/alternate delegates were elected or appointed into other state or specialty societies' delegations, and while no longer part of the RFS delegation, they contributed to leadership and assistance with our RFS advocacy and processes:

Tiffany	Bellomo
Haidn	Foster
Nate	Hoff
Rafay	Nasir
Urvi	Pandit
Max	Pany
Dan	Pfeifle
Daniel	Resnick
Whitney	Sambhariya
Eryn	Wanyonyi
Elana	Sitnik

This concludes the Delegate Report for A-25.

Sincerely,



Joey Whelihan MD, Delegate

A handwritten signature in black ink, appearing to read "Tristan Mackey".

Tristan Mackey, MD, Alternate Delegate