REPORTS OF THE COUNCIL ON CONSTITUTION AND BYLAWS

The following reports were presented by Jerry Abraham, MD, MPH, Chair, Chair:

1. INTRODUCING CCB REPORTS 2-7 CONCERNING BYLAW 2, HOUSE OF DELEGATES

Informational report; no reference committee hearing.

HOUSE ACTION: FILED

The Council on Constitution and Bylaws (CCB) submitted CCB Report 3-I-25 to the House of Delegates (HOD) for consideration. The report drew extensive testimony in the online reference committees. The Reference Committee on Ethics and Bylaws in its preliminary report had difficulty with a report this complex and nuanced, particularly as online testimony included various amendments. After reviewing the preliminary report that contained 21 recommendations, CCB reviewed the extensive online testimony, proposed amendments, and the preliminary reference committee report, and submitted a revised report reflecting some of the testimony and amendments in the hopes that the revised report would be easier to manage at the reference committee hearing. Ultimately, after extensive debate on multiple aspects of the report, the HOD referred the report back to CCB for a report at A-26, along with Resolution 10-I-25. The resolution from the Medical Student (MSS) and the Resident and Fellow (RFS) Sections asked that the bylaws be amended to explicitly allow these sections to appoint rather than elect individuals to serve as temporary delegates and alternate delegates to fill vacancies and absences.

Admittedly, CCB Report 3-I-25 was a lengthy report that touched on a myriad of topics, many of which were nuanced. As the Council discussed appropriate follow-up, it determined that to make its proposed amendments more easily digestible and manageable for HOD members and the reference committee at A-26, it was preferable to issue a series of shorter reports, each focusing on a distinct issue addressed in CCB 3-I-25 and Resolution 10-I-25. For each report, the Council has also included the final clean bylaw language if the report is adopted. Included as an appendix to this report is a clean copy of the affected provisions of Bylaw 2 (Appendix B) if CCB 2-7 reports were adopted. Additionally, the Council has included as an appendix (Appendix A) a taxonomy of the existing and amended bylaw changes, and the source CCB report of those changes. Lastly, Appendix C includes a chart with links to the Bylaws of all entities with HOD representation for easy reference.

Report topics are as follows:

- CCB Report 2, HOD Representation and Composition
  - This report provides some amended language to emphasize the inclusive nature of the HOD.
- CCB Report 3, Rights & Privileges of HOD Members
  - This report explicitly sets forth the rights and privileges afforded to delegates paralleling existing bylaw language that articulates the rights and privileges of the alternate delegates, ex officio members, official observers, and temporary delegates.
- CCB Report 4, Credentialing of HOD Delegates and Alternate Delegates
  - This report identifies the appropriate credentialing authority for all entities represented in the HOD, respecting the unique nature of the section HOD delegates and alternates, medical student regional delegates and alternates and the resident and fellow sectional delegates and alternates. The updated term ‘credentialing’ replaces ‘certification’ which refers to a process that is no longer utilized. Lastly, some existing language is clarified for accuracy and consistency.
- CCB Report 5, Inclusion of Medical Students and Resident/ Fellow Physicians in HOD Delegations
  - This report reinstates language proposed for deletion in CCB 3-1-25, language which states that a medical student or a resident/fellow may be hold a constituent association delegation seat. It also establishes an equivalent ability for the national medical specialty societies and professional interest medical associations to seat a medical student or a resident/fellow as delegation members.
- CCB Report 6, Medical Student Regional Delegates and Alternate Delegates and Resident and Fellow Sectional Delegates
  - This report addresses the bylaws associated with the medical student regional delegates and alternate delegates and resident and fellow sectional delegates and alternate delegates, including their eligibility for election, the mechanism by which they are elected, and their unique seating assignment in the HOD.

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- CCB Report 7, HOD Delegate and Alternate Delegate Vacancies and Meeting Absences
  - This report eliminates the confusing distinction between a substitute delegate and a temporary substitute delegate and specifies the process by which a vacancy may be filled after the credentialing deadline, and the process to fill an open seat due to a meeting absence. This report also addresses Resolution 10-I-25 by granting the sections the ability to credential a temporary delegate or temporary alternate delegate when there are no available elected alternate delegates.

The Council hopes that by separating these complex and nuanced issues the AMA Bylaws will be amended in accordance with the will of the HOD.

2. HOD REPRESENTATION AND COMPOSITION

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

The AMA House of Delegates (HOD) is the policy-making body of our American Medical Association (AMA). It is democratically structured and comprised of delegates from constituent associations (state medical societies), national medical specialty societies, professional interest medical associations, the Federal services, the AMA Sections, medical student regional representatives, resident and fellow sectional representatives and other groups with HOD representation. A complete list of those represented societies is online, as is the 2026 apportionment of delegates for each. Additionally, groups represented in the HOD are invited to identify one alternate delegate for each delegate apportioned to the group.

There is parity of representation between the constituent associations and the national medical specialty societies. Each constituent association is apportioned one delegate and one alternate delegate for each 1,000 (or fraction thereof) active members of the AMA, including medical students and residents and fellows. The national medical specialty societies then receive that same number of delegates and alternate delegates and those positions are apportioned back to the individual specialty societies according to AMA Policy G-600.027. Each AMA Section and professional interest medical association granted representation in the HOD receives one delegate and one alternate delegate regardless the size of its membership. There are also two groups in our House of Delegates – medical student regional delegates and resident and fellow sectional delegates, whose apportionment is codified in the AMA Bylaws (Bylaw 2.3.2 and 2.4.2) and which is based on medical student and resident and fellow AMA membership.

While the HOD treats all delegations equally, they are constituted differently. In general, the Bylaws do not prescribe the process by which most organizations represented in the House of Delegates choose their delegates and alternate delegates. These groups have organizational autonomy and can fill their delegation positions however they choose so long as the individuals are AMA active members and members of the organization, and have autonomy when it comes to how they fill unfilled positions or vacancies. Medical students and resident and fellow physicians are eligible for service on an organization's delegation as either a delegate or an alternate delegate so long as they are AMA members and members of the organization. CCB Reports 5 and 7 provide additional details.

The Council has prepared this report to propose Bylaw amendments that further emphasize the inclusive nature of the HOD, with further nuances addressed in other A-2026 CCB reports.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaws amendments (shown in red and amended by insertion or ~~deletion~~) be adopted, and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

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2—House of Delegates

2.0.1 Composition and Representation. ***

2.0.1.1 Qualification of Members of the House of Delegates. Members of the House of Delegates must be active members of the AMA, including resident and fellow physicians and medical students, and of the entity they represent.

2.0.1.2 Representation. The representational role of the delegates is multi-dimensional and includes:

a. Advocacy for patients to improve the health of the public and the health care system.

b. Representation of the perspectives of the delegate's sponsoring organization to the House of Delegates.

c. Representation of the delegate's physician and medical student constituents in the decision-making process of the House of Delegates.

d. Representation of the AMA and the House of Delegates to physicians, medical associations, and others, including resident and fellow physicians and medical students.

e. Solicitation of input from and provision of feedback to constituents.

2.0.1.2.1 Consideration. In considering business, delegates should take into consideration the perspectives of their patients, their sponsoring organizations, and their medical student or physician constituents. In voting on matters before the House of Delegates, delegates should vote on the basis of what is best for patients and quality medical care.

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2.0.1.3 ~~2.8~~ Alternate Delegates. Each organization represented in the House of Delegates ~~may select~~ is allotted an alternate delegate for each of its delegates entitled to be seated in the House of Delegates. Alternate delegates must meet the criteria specified in Bylaw 2.0.1.1 and be similarly credentialed per the Bylaws that govern credentialing for the delegates representing their organization. Terms for alternate delegates shall be the same as for the delegates.

~~2.10.7~~
2.0.1.4 Unique Representation. No delegate or alternate delegate may be credentialed or seated at any meeting to represent more than one organization in the House of Delegates.

2.0.1.5 Registration. All attendees of a House of Delegates meeting must register for the meeting.

~~2.0.1.3~~
2.0.1.6 Autonomy. The participation of any organization in the House of Delegates is voluntary. Policy actions of the AMA do not in themselves bind an organization or subject it to any obligation that it does not voluntarily assume.

2.1 Constituent Association~~s~~ Delegations. Constituent associations are recognized medical associations of states, commonwealths, districts, territories, or possessions of the United States. Each recognized constituent association granted representation in the House of Delegates is entitled to delegate representation based on the number of seats allocated to it by apportionment. Only one constituent association from each U.S. state, commonwealth, territory, or possession shall be granted representation in the House of Delegates.

2.1.1 Apportionment. The apportionment of delegates from each constituent association is one delegate and one alternate delegate for each 1,000 (or fraction thereof), active members of the

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AMA including medical students and residents and fellows within the jurisdiction of each constituent association, as recorded by the AMA as of December 31 of each year.

2.1.1.1 Effective Date. Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year. ~~**2.10.1. Notification**~~ In January of each year, the AMA shall notify each organization of the number of seats in the House of Delegates to which it is entitled during the current year.

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2.1.4 Term. Delegates and alternate delegates from constituent associations shall be selected for two ~~2~~-year terms and assume office on the date set by the constituent association, provided that such seats are authorized pursuant to these Bylaws. Constituent associations entitled to more than one delegate and one alternate delegate shall select them so that half the number, as near as may be, are selected each year. One-year terms may be provided but only to the extent and for such time as is necessary to accomplish this proportion.

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2.2 National Medical Specialty Society~~ies~~ Delegations. The number of delegates representing national medical specialty societies shall equal the number of delegates representing the constituent societies. Each national medical specialty society granted representation in the House of Delegates is entitled to delegate representation based on the number of seats allocated to it by apportionment. The total number of apportioned to national medical specialty societies under Bylaw 2.2.1 shall be adjusted to be equal to the total number of delegates apportioned to constituent societies under sections 2.1.1 using methods specified in AMA policy.

2.2.1 Apportionment. The apportionment of delegates from each specialty society represented in the AMA House of Delegates is one delegate and alternate delegate for each 1,000, or fraction thereof, physician specialty society members, including residents and fellows, as of December 31 of each year who are eligible to serve on committees or the governing body, are active members of the AMA and are members in good standing and current in payment of applicable dues of both the specialty society and the AMA.

2.2.1.1 Effective Date. Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year. ~~**2.10.1. Notification.**~~ In January of each year, the AMA shall notify each organization of the number of seats in the House of Delegates to which it is entitled during the current year.

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2.2.4 Term. Delegates and alternate delegates from specialty societies shall be selected for two ~~2~~-year terms, and shall assume office on the date set by the specialty society provided that such seats are authorized pursuant to these Bylaws. Specialty societies entitled to more than one delegate and alternate delegate shall select them so that half the number, as near as may be, are selected each year. One-year terms may be provided but only to the extent and for such time as is necessary to accomplish this proportion.

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2.6 Other Delegates and Alternate Delegates. Each of the following is entitled to a delegate and an alternate delegate: AMA Sections; the Surgeons General of the United States Army, United States Navy, United States Air Force, and United States Public Health Service; the Chief Medical Director of the Department of Veterans Affairs; the National Medical Association; the American Medical Women's Association; the American Osteopathic Association; and professional interest medical associations granted representation in the House of Delegates.

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2.6.2 Term. Delegates and alternate delegates from these entities shall be selected for two ~~2~~ year terms, and shall assume office on the date set by the entity. ***

(Modify Bylaws)

CLEAN BYLAW LANGUAGE IF ADOPTED

2—House of Delegates

2.0.1 Composition and Representation. ***

2.0.1.1 Qualification of Members of the House of Delegates. Members of the House of Delegates must be active members of the AMA, including resident and fellow physicians and medical students, and of the entity they represent.

2.0.1.2 Representation. The representational role of the delegates is multi-dimensional and includes:

a. Advocacy for patients to improve the health of the public and the health care system.

b. Representation of the perspectives of the delegate's sponsoring organization to the House of Delegates.

c. Representation of the delegate's physician and medical student constituents in the decision-making process of the House of Delegates.

d. Representation of the AMA and the House of Delegates to physicians, medical associations, and others, including resident and fellow physicians and medical students.

e. Solicitation of input from and provision of feedback to constituents.

2.0.1.2.1 Consideration. In considering business, delegates should take into consideration the perspectives of their patients, their sponsoring organizations, and their medical student or physician constituents. In voting on matters before the House of Delegates, delegates should vote on the basis of what is best for patients and quality medical care.

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2.0.1.3 Alternate Delegates. Each organization represented in the House of Delegates is allotted an alternate delegate for each of its delegates entitled to be seated in the House of Delegates. Alternate delegates must meet the criteria specified in Bylaw 2.0.1.1 and be similarly credentialed per the Bylaws that govern credentialing for the delegates representing their organization. Terms for alternate delegates shall be the same as for the delegates.

2.0.1.4 Unique Representation. No delegate or alternate delegate may be credentialed or seated at any meeting to represent more than one organization in the House of Delegates.

2.0.1.5 Registration. All attendees of a House of Delegates meeting must register for the meeting.

2.0.1.6 Autonomy. The participation of any organization in the House of Delegates is voluntary. Policy actions of the AMA do not in themselves bind an organization or subject it to any obligation that it does not voluntarily assume.

2.1 Constituent Association Delegations. Constituent associations are recognized medical associations of states, commonwealths, districts, territories, or possessions of the United States. Each recognized

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constituent association granted representation in the House of Delegates is entitled to delegate representation based on the number of seats allocated to it by apportionment. Only one constituent association from each U.S. state, commonwealth, territory, or possession shall be granted representation in the House of Delegates.

2.1.1 **Apportionment.** The apportionment of delegates from each constituent association is one delegate and one alternate delegate for each 1,000 (or fraction thereof), active members of the AMA including medical students and residents and fellows within the jurisdiction of each constituent association, as recorded by the AMA as of December 31 of each year.

2.1.1.1 **Effective Date.** Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year. In January of each year, the AMA shall notify each organization of the number of seats in the House of Delegates to which it is entitled during the current year.

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2.1.4 **Term.** Delegates and alternate delegates from constituent associations shall be selected for two-year terms and assume office on the date set by the constituent association, provided that such seats are authorized pursuant to these Bylaws. Constituent associations entitled to more than one delegate and one alternate delegate shall select them so that half the number, as near as may be, are selected each year. One-year terms may be provided but only to the extent and for such time as is necessary to accomplish this proportion.

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2.2 **National Medical Specialty Society-Delegations.** The number of delegates representing national medical specialty societies shall equal the number of delegates representing the constituent societies. Each national medical specialty society granted representation in the House of Delegates is entitled to delegate representation based on the number of seats allocated to it by apportionment. The total number of apportioned to national medical specialty societies under Bylaw 2.2.1 shall be adjusted to be equal to the total number of delegates apportioned to constituent societies under sections 2.1.1 using methods specified in AMA policy.

2.2.1 **Apportionment.** The apportionment of delegates from each specialty society represented in the AMA House of Delegates is one delegate and alternate delegate for each 1,000, or fraction thereof, physician specialty society members, including residents and fellows, as of December 31 of each year who are eligible to serve on committees or the governing body, are active members of the AMA and are members in good standing and current in payment of applicable dues of both the specialty society and the AMA.

2.2.1.1 **Effective Date.** Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year. In January of each year, the AMA shall notify each organization of the number of seats in the House of Delegates to which it is entitled during the current year.

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2.2.4 **Term.** Delegates and alternate delegates from specialty societies shall be selected for two-year terms, and shall assume office on the date set by the specialty society provided that such seats are authorized pursuant to these Bylaws. Specialty societies entitled to more than one delegate and alternate delegate shall select them so that half the number, as near as may be, are selected each year. One-year terms may be provided but only to the extent and for such time as is necessary to accomplish this proportion.

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2.6 **Other Delegates and Alternate Delegates.** Each of the following is entitled to a delegate and an alternate delegate: AMA Sections; the Surgeons General of the United States Army, United States Navy, United

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States Air Force, and United States Public Health Service; the Chief Medical Director of the Department of Veterans Affairs; the National Medical Association; the American Medical Women's Association; the American Osteopathic Association; and professional interest medical associations granted representation in the House of Delegates.

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2.6.2 Term. Delegates and alternate delegates from these entities shall be selected for two-year terms, and shall assume office on the date set by the entity.

3. RIGHTS & PRIVILEGES OF HOD MEMBERS

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED AS FOLLOWS
REMAINDER OF REPORT FILED
Bylaws amended

At I-25 the House of Delegates (HOD) referred Council on Constitution and Bylaws (CCB) Report 3-I-25 for report back at A-26. Because CCB Report 3-I-25 was long and complex, the Council opted to separate the issues it addressed into several focused reports.

This report presents new language to specifically address the rights of those delegates and alternate delegates who are affiliated with the House of Delegates as well as relevant HOD procedures. Current Bylaws address the rights and privileges of Ex Officio Members (of the House) [Bylaw 2.7], Rights of Official Observers (to the House) [Bylaw 2.9.1], the Rights of the Speakers [Bylaw 2.5, 4.4 and 4.5], Rights of Temporary Substitute Delegates [Bylaw 2.10.4.1] and the rights of Alternate Delegates [Bylaw 2.8], but provides no language explicitly addressing the rights and privileges of delegates. This report provides that language as well as additional amended language to address the rights and privileges of alternate delegates. It also relocates existing provisions acknowledging that a constituent association president or national medical specialty society or professional interest medical association president may be credentialed as an additional alternate delegate for the societies they represent. In doing so and in eliminating redundant text, some renumbering has occurred.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaws amendments and deletions (shown in red and amended by insertion or ~~deletion~~) be adopted, and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

2—House of Delegates

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2.0.1 Composition and Representation. The House of Delegates is composed of delegates selected by recognized constituent associations and specialty societies, and other delegates as provided in this bylaw. A delegate may introduce resolutions into the House of Delegates, speak and debate on the floor of the House, offer an amendment to a pending matter, make motions, vote on items of business and vote in elections.

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2.0.1.1 Qualification of Members of the House of Delegates. ***

2.0.1.2 Representation. ***

2.0.1.3 ~~2.8~~ Alternate Delegates. ***

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2.0.1.3.1 ~~2.8.5~~ **Rights and Privileges.** ~~An alternate delegate may substitute for a delegate, on the floor of the House of Delegates, at the request of the delegate by complying with the procedures established by the Committee on Rules and Credentials. **2.8.6 Status.**~~ The alternate delegate is not a "member of the House of Delegates" as that term is used in these Bylaws. Accordingly, an alternate delegate may not introduce resolutions into the House of Delegates~~,~~ ~~n~~or vote in any election conducted by the House of Delegates. An alternate delegate is not eligible for nomination or election as Speaker or Vice Speaker of the House of Delegates.

2.0.1.3.2 **Alternate Delegate Seated for a Delegate.** ~~2.8.5~~ At the request of their corresponding delegate, ~~A~~an alternate delegate may be seated for them ~~substitute for a delegate,~~ on the floor of the House of Delegates~~, at the request of the delegate by complying with the procedures established by the Committee on Rules and Credentials~~. The alternate delegate must display their corresponding delegate's temporary credential (salmon badge). While seated ~~substituting~~ for a delegate, the alternate delegate may speak and debate on the floor of the House, offer an amendment to a pending matter, make motions, and vote. ~~2.8.6~~ The alternate delegate must immediately relinquish their position on the floor of the House of Delegates at ~~upon~~ the request of ~~the delegate for whom the alternate delegate is substituting~~ their corresponding delegate.

~~2.8.1 **Qualifications.** Alternate delegates must be active members of the AMA and of the entity they represent.~~

~~2.8.2 **Certification.** Alternate delegates shall be certified to the AMA in the same manner as delegates.~~

~~2.8.3 **Term.** Alternate delegates shall be selected for a 2-year term, and shall assume office on the date set by the organization, unless otherwise provided in these Bylaws.~~

~~2.8.4 **Vacancies.** Alternate delegates selected to fill a vacancy shall assume office immediately after selection and shall serve for the remainder of that term.~~

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2.5 Speaker and Vice Speaker Additional Delegates. Upon election of the Speaker and Vice Speaker of the House of Delegates from among the members of the House of Delegates, the organizations represented by the delegates elected to be Speaker and Vice Speaker of the House of Delegates shall be entitled to an additional delegate for the term of service of the Speaker and Vice Speaker. The additional delegates so selected shall have the full rights and privileges of delegates in the House of Delegates.

2.5.1 Rights and Privileges ~~Status of Speaker and Vice Speaker~~. Upon their election, the Speaker and Vice Speaker shall continue to be members of the House of Delegates, with all of the rights and privileges of members of the House of Delegates. They shall be entitled to vote in the House of Delegates. The Speaker and Vice Speaker, as members of the House of Delegates, shall be eligible to be nominated for re-election to the office of Speaker and Vice Speaker of the House of Delegates.

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2.8 Additional Alternate Delegates.

2.8.1
~~2.10.5~~ **Constituent Association President.** The current president of a constituent association may also be ~~certified~~ credentialed as an additional alternate delegate at the discretion of each constituent association.

2.8.2
~~2.10.6~~ **National Medical Specialty Society or Professional Interest Medical Association President.** The current president of a national medical specialty society or a professional interest medical association may also be ~~certified~~ credentialed as an additional alternate delegate at the discretion of each national medical specialty society or professional interest medical association.

(Modify Bylaws)

CLEAN BYLAW LANGUAGE IF ADOPTED

2.0.1 Composition and Representation. The House of Delegates is composed of delegates selected by recognized constituent associations and specialty societies, and other delegates as provided in this bylaw. A delegate may introduce resolutions into the House of Delegates, speak and debate on the floor of the House, offer an amendment to a pending matter, make motions, vote on items of business and vote in elections.

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2.0.1.1 Qualification of Members of the House of Delegates. ***
/
2.0.1.2 Representation. ***

2.0.1.3 Alternate Delegates. ***

2.0.1.3.1—Rights and Privileges. The alternate delegate is not a "member of the House of Delegates" as that term is used in these Bylaws. Accordingly, an alternate delegate may not introduce resolutions into the House of Delegates or vote in any election conducted by the House of Delegates. An alternate delegate is not eligible for nomination or election as Speaker or Vice Speaker of the House of Delegates.

2.0.1.3.2 Alternate Delegate Seated for a Delegate. At the request of their corresponding delegate, an alternate delegate may be seated for them on the floor of the House of Delegates. The alternate delegate must display their corresponding delegate's temporary credential (salmon badge). While seated for a delegate, the alternate delegate may speak and debate on the floor of the House, offer an amendment to a pending matter, make motions, and vote. The alternate delegate must immediately relinquish their position on the floor of the House of Delegates at the request of-their corresponding delegate.

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2.5 Speaker and Vice Speaker Additional Delegates. Upon election of the Speaker and Vice Speaker of the House of Delegates from among the members of the House of Delegates, the organizations represented by the delegates elected to be Speaker and Vice Speaker of the House of Delegates shall be entitled to an additional delegate for the term of service of the Speaker and Vice Speaker. The additional delegates so selected shall have the full rights and privileges of delegates in the House of Delegates.

2.5.1 Rights and Privileges. Upon their election, the Speaker and Vice Speaker shall continue to be members of the House of Delegates, with all of the rights and privileges of members of the House of Delegates. They shall be entitled to vote in the House of Delegates. The Speaker and Vice

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Speaker, as members of the House of Delegates, shall be eligible to be nominated for re-election to the office of Speaker and Vice Speaker of the House of Delegates.

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2.8 Additional Alternate Delegates.

2.8.1 Constituent Association President. The current president of a constituent association may also be credentialed as an additional alternate delegate at the discretion of each constituent association.

2.8.2 National Medical Specialty Society or Professional Interest Medical Association President. The current president of a national medical specialty society or a professional interest medical association may also be credentialed as an additional alternate delegate at the discretion of each national medical specialty society or professional interest medical association.

4. CREDENTIALING OF HOD DELEGATES AND ALTERNATE DELEGATES

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

At I-25 the House of Delegates (HOD) referred Council on Constitution and Bylaws (CCB) Report 3-I-25 for report back at A-26. Because CCB Report 3-I-25 was long and complex, the Council opted to separate the issues it addressed into several focused reports.

This report presents amended language to more accurately address the appropriate credentialing authority for all groups with representation in the HOD, including the credentialing authorities for the AMA Section delegates and alternate delegates, the regional medical student delegates and alternate delegates and the resident and fellow sectional delegates and alternate delegates.

As noted in referred CCB Report 3-I-25, the Council looked at the disparate provisions that govern the credentialing of delegates and alternate delegates and noted several outmoded provisions and inaccuracies. The term "certification" referred to an obsolete process whereby each group represented in the HOD manually completed a form listing their delegates and alternate delegates and then certified the accuracy of that information. While the Council understands that the term certification may have varying implications or significance for different purposes and delegations, the term "credentialing" more appropriately reflects the current process.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaws amendments and deletions (shown in red and amended by insertion or ~~deletion~~) be adopted, and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

2.1.3 ~~Certification~~ Credentialing. The president or chief executive officer of each constituent association, or ~~the president's~~ their designee, shall provide ~~certify to~~ the AMA Office of House of Delegates Affairs with the names and contact information of their delegates and alternate delegates ~~from their respective associations. Certification must occur~~ at least 45 days prior to each meeting ~~the Annual or Interim Meeting~~ of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

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2.2.3 ~~Certification~~ Credentialing. The president or chief executive officer of each specialty society, or ~~the president's~~ their designee, shall provide ~~certify to~~ the AMA Office of House of Delegates Affairs with the

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names and contact information of their delegates and alternate delegates ~~from their respective societies~~. ~~Certification must occur~~ at least 45 days prior to each meeting ~~the Annual or Interim Meeting~~ of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

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2.3.4 ~~**Certification**~~ **Credentialing.** The ~~C~~chair of the Medical Student Section Governing Council or the director of the Medical Student Section, or their ~~Chair's~~ designee, shall provide ~~certify to~~ the AMA Office of House of Delegates Affairs with the names and contact information of the delegates and alternate delegates for each Medical Student Region elected in accordance with 2.3.3. ~~Certification~~ Credentialing must occur at least 45 days prior to each meeting ~~the Annual Meeting~~ of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

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2.4.4 ~~**Certification**~~ **Credentialing.** The ~~C~~chair of the Resident and Fellow Section Governing Council or the director of the Resident and Fellow Section, or their ~~Chair's~~ designee, shall provide ~~certify to~~ the AMA Office of House of Delegates Affairs the names and contact information of the resident and fellow sectional delegates and alternate delegates elected in accordance with 2.4.3. ~~Certification~~ Credentialing of delegates and alternate delegates must occur at least 45 days prior to each meeting ~~the Annual Meeting~~ of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

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2.6.1 ~~**Certification**~~ **Credentialing.** The president, chief executive officer, AMA Section chair or director, or other authorized individual of each entity described in Bylaw 2.6 shall provide ~~certify to~~ the AMA Office of House of Delegates Affairs with the names and contact information of their respective delegate and alternate delegate at least 45 days prior to each meeting ~~the Annual or Interim Meeting~~ of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

2.6.2 Term. ***~~Certification of delegates and alternate delegates must occur at least 45 days prior to the Annual or Interim Meeting of the House of Delegates.~~

(Modify Bylaw)

CLEAN BYLAW LANGUAGE IF ADOPTED

2.1.3 Credentialing. The president or chief executive officer of each constituent association, or their designee, shall provide the AMA Office of House of Delegates Affairs with the names and contact information of their delegates and alternate delegates-at least 45 days prior to each meeting of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

***

2.2.3 Credentialing. The president or chief executive officer of each specialty society, or their designee, shall provide the AMA Office of House of Delegates Affairs with the names and contact information of their delegates and alternate delegates at least 45 days prior to each meeting of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

***

2.3.4 Credentialing. The chair of the Medical Student Section Governing Council or the director of the Medical Student Section, or their designee, shall provide the AMA Office of House of Delegates Affairs with the names and contact information of the delegates and alternate delegates for each Medical Student Region elected in accordance with 2.3.3. Credentialing must occur at least 45 days prior to each meeting of the

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House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

***

2.4.4 Credentialing. The chair of the Resident and Fellow Section Governing Council or the director of the Resident and Fellow Section, or their designee, shall provide the AMA Office of House of Delegates Affairs the names and contact information of the resident and fellow sectional delegates and alternate delegates elected in accordance with 2.4.3. Credentialing of delegates and alternate delegates must occur at least 45 days prior to each meeting of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

***

2.6.1 Credentialing. The president, chief executive officer, AMA Section chair or director, or other authorized individual of each entity described in Bylaw 2.6 shall provide the AMA Office of House of Delegates Affairs with the names and contact information of their respective delegate and alternate delegate at least 45 days prior to each meeting of the House of Delegates. These appropriately identified individuals shall be duly credentialed for that meeting only.

5. INCLUSION OF MEDICAL STUDENTS AND RESIDENT/FELLOW PHYSICIANS IN HOD DELEGATIONS

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

At I-25 the House of Delegates (HOD) referred Council on Constitution and Bylaws (CCB) Report 3-I-25 for report back at A-26. Because CCB Report 3-I-25 was long and complex, the Council opted to separate the issues it addressed into several focused reports.

Previously the Council had recommended deletion of Bylaw 2.1.6 that acknowledged the ability of a constituent association to include a medical or resident and fellow physician on its delegation. The Council had recommended deletion as constituent associations are autonomous and thus may select a delegate by a mechanism of its choice. However, there was significant testimony opposing deletion of that language with additional testimony supporting equivalent language for the national medical specialty societies.

This report presents updated language to reflect the HOD's will. The report also recognizes the ability of a professional interest medical association and other groups to similarly fill its delegate or alternate delegate positions with a resident/fellow physician member and/or a medical student member. Lastly, the Council acknowledges its awareness that its amended language refers to "resident/fellow physician" rather than "resident and fellow physician" as is used in other Bylaw provisions but believes the usage of "resident/fellow" is appropriate here.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaws amendments and deletions (shown in red and amended by insertion or ~~deletion~~) be adopted, and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

2.1.2 Selection. Each constituent association shall select and adjust the number of delegates and alternate delegates to conform with the number of seats authorized under this bylaw.

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***

2.1.6 Resident/Fellow Physician and Medical Student Delegates and Alternate Delegates. A constituent association may designate one or more of its delegate and alternate delegate seats to be filled by a resident/fellow physician member or a medical student member.

2.1.6.1 Term. Such resident/fellow physician or medical student delegate or alternate delegate shall serve for a one-year term ~~beginning as of the date of certification of the delegate or alternate delegate by the constituent association to the AMA~~.

2.1.6.2 No Restriction on Selection. Nothing in this bylaw shall preclude a resident/fellow physician or medical student member from being selected to fill a full two~~2~~-year term as a delegate or alternate delegate from a constituent association as provided in Bylaw 2.1.4.

***

2.2.2 Selection. Each specialty society shall select and adjust the number of delegates and alternate delegates to conform with the number of seats authorized under this bylaw.

***

2.2.6 Resident/Fellow Physician and Medical Student Delegates and Alternate Delegates. A national medical specialty society may designate one or more of its delegate and alternate delegate seats to be filled by a resident/fellow physician member or a medical student member.

2.2.6.1 Term. Such resident/fellow physician or medical student delegate or alternate delegate shall serve for a one-year term.

2.2.6.2 No Restriction on Selection. Nothing in this bylaw shall preclude a resident/fellow physician or medical student member from being selected to fill a full two-year term as a delegate or alternate delegate from a specialty association as provided in Bylaw 2.2.4.

***

2.6 Other Delegates. ***

***

2.6.2 Term. ***

2.6.2.1 Resident/Fellow Physician and Medical Student Delegates. These entities may designate their delegate and/or alternate delegate seat to be filled by a resident/fellow physician member or a medical student member.

2.6.2.1.1 Term. Such resident/fellow physician or medical student delegate or alternate delegate shall serve for a one-year term.

2.6.2.1.2 No Restriction on Selection. Nothing in this bylaw shall preclude a resident/fellow physician or medical student member from being selected to fill a full two-year term as a delegate or alternate delegate from a specialty association as provided in Bylaw 2.6.2.

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2.1.2 Selection. Each constituent association shall select and adjust the number of delegates and alternate delegates to conform with the number of seats authorized under this bylaw.

***

2.1.6 Resident/Fellow Physician and Medical Student Delegates and Alternate Delegates. A constituent association may designate one or more of its delegate and alternate delegate seats to be filled by a resident/fellow physician member or a medical student member.

2.1.6.1 Term. Such resident/fellow physician or medical student delegate or alternate delegate shall serve for a one-year term.

2.1.6.2 No Restriction on Selection. Nothing in this bylaw shall preclude a resident/fellow physician or medical student member from being selected to fill a full two-year term as a delegate or alternate delegate from a constituent association as provided in Bylaw 2.1.4.

***

2.2.2 Selection. Each specialty society shall select and adjust the number of delegates and alternate delegates to conform with the number of seats authorized under this bylaw.

***

2.2.6 Resident/Fellow Physician and Medical Student Delegates and Alternate Delegates. A national medical specialty society may designate one or more of its delegate and alternate delegate seats to be filled by a resident/fellow physician member or a medical student member.

2.2.6.1 Term. Such resident/fellow physician or medical student delegate or alternate delegate shall serve for a one-year term.

2.2.6.2 No Restriction on Selection. Nothing in this bylaw shall preclude a resident/fellow physician or medical student member from being selected to fill a full two-year term as a delegate or alternate delegate from a specialty association as provided in Bylaw 2.2.4.

***

2.6 Other Delegates. ***

***

2.6.2 Term. ***

2.6.2.1 Resident/Fellow Physician and Medical Student Delegates. These entities may designate their delegate and/or alternate delegate seat to be filled by a resident/fellow physician member or a medical student member.

2.6.2.1.1 Term. Such resident/fellow physician or medical student delegate or alternate delegate shall serve for a one-year term.

2.6.2.1.2 No Restriction on Selection. Nothing in this bylaw shall preclude a resident/fellow physician or medical student member from being selected to fill a full two-year term as a delegate or alternate delegate from a specialty association as provided in Bylaw 2.6.2.

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6. MEDICAL STUDENT REGIONAL DELEGATES AND ALTERNATE DELEGATES AND RESIDENT AND FELLOW SECTIONAL DELEGATES AND ALTERNATE DELEGATES IN THE HOD

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

At I-25 the House of Delegates (HOD) referred Council on Constitution and Bylaws (CCB) Report 3-I-25 for report back at A-26. Because CCB Report 3-I-25 was long and complex, the Council opted to separate the issues it addressed into several focused reports.

This report covers the general parameters that govern the medical student regional delegates and alternate delegates and resident and fellow sectional delegates and alternate delegates with some proposed changes for clarity, consistency and accuracy.

BACKGROUND

Specific Requirements of the Medical Student Regional and Resident and Fellow Sectional Delegations

The medical student regional delegates and alternate delegates and the resident and fellow sectional delegates and alternate delegates are governed by long-existing American Medical Association (AMA) Bylaw provisions. The HOD in granting additional representation to medical students and residents and fellows adopted language prescribing that these representatives must be endorsed by a society represented in the HOD and be elected by their peers. The bylaws further specify that medical student regional delegates and alternate delegates require an endorsement from the constituent society in which their medical school is located and may only represent their Medical Student Region, as defined in the Medical Student Internal Operating Procedures. Similarly, there are limitations on the number of resident and fellow sectional delegates and alternate delegates that may be elected with endorsement from a single state or specialty, with those details contained in the rules (internal operating procedures) of the Resident and Fellow Section.

Current bylaws also direct that the apportionment of the medical student regional and resident and fellow sectional delegates and alternates is determined in January but does not take effect until the following January, one year later. This timing is important as it allows for the election of medical student regional and resident and fellow sectional delegates to take place in November, in conjunction with the Interim meeting. These elected delegates are then reported to the Office of the House of Delegates prior to the development of the HOD seating chart which occurs in January of each year, directly after the apportionment process for the HOD is completed. Other bylaw provisions specify that the medical student regional delegates are seated with their endorsing constituent society and the resident and fellow sectional delegates are seated with their endorsing society, hence the need to identify elected medical student regional and resident and fellow sectional delegates prior to developing the HOD seating chart for the year. These seats remain with the original delegate's endorsing society for the duration of that delegate's term (1 year). Alternate delegates or temporary delegates will be seated in this primary delegate's seat, even if they are from a different state within the Medical Student Region or from a different state or specialty than the original resident and fellow sectional delegate. Therefore, the Council moved the existing language that governs the seating of the medical student regional delegates and the resident and fellow sectional delegates under the heading for the medical student regional and the resident and fellow sectional delegations.

The bylaw clarifications offered in this report do not change existing rules that govern the apportionment, election, or seating of the medical student regional or resident and fellow sectional delegates and alternate delegates. The rules that govern the filling of vacancies or meeting absences in these positions are discussed in CCB 7.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaws amendments and deletions (shown in red and amended by insertion or ~~deletion~~) be adopted, and that the remainder of the report be filed. Adoption

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requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

2.3 Medical Student Regional Delegates and Alternate Delegates. In addition to the delegate and alternate delegate representing the Medical Student Section, medical student regional delegates and regional alternate delegates shall be apportioned and elected as provided in this bylaw.

2.3.1 Qualifications. Medical student regional delegates and alternate delegates must be active medical student members of the AMA. In addition, medical student regional delegates and alternate delegates must be members of and have received written endorsement from the~~ir endorsing~~ constituent association where their educational program is located. The Medical Student R~~r~~egion in which the endorsing society is located determines the student's region, and a medical student may only serve as a regional delegate, alternate delegate or a~~ny~~ temporary delegate or temporary alternate delegate ~~form of substitute (pursuant to Bylaws 2.8.5 or 2.10.4) only~~ for that region.

2.3.2 Apportionment. The total number of ~~M~~medical ~~S~~student ~~R~~regional delegates and alternate delegates is based on one delegate and one alternate delegate for each 2,000 active medical student members of the AMA, as recorded by the AMA on December 31 of each year. Each Medical Student Region, as defined by the Medical Student Section, is entitled to one delegate and one alternate delegate for each 2,000 active medical student members of the AMA in an educational program located within the jurisdiction of the Medical Student Region. Any remaining ~~M~~medical ~~S~~student ~~Section~~ ~~R~~regional delegates and alternate delegates shall be apportioned one delegate and one alternate delegate per region(s) with the greatest number of active AMA medical student members in excess of a multiple of 2,000. If two R~~r~~egions have the same number of active AMA medical student members, ties will be broken by lottery by the Medical Student Section Governing Council.

2.3.2.1 Effective Date. In January of each year the AMA shall notify the chair of the Medical Student Section Governing Council and the director of the Medical Student Section of the number of seats in the House of Delegates to which each Medical Student Region is entitled. Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year.

2.3.3 Election. Medical student regional delegates and alternate~~s~~ delegates shall be elected by the medical student representatives to the appropriate Medical Student ~~Section~~ Region in accordance with rules ~~procedures~~ adopted by the Medical Student Section and approved by the Board of Trustees. ~~Each elected delegate and alternate delegate must receive written endorsement from their constituent association in accordance with procedures adopted by the Medical Student Section and approved by the Board of Trustees.~~ Regional d~~D~~elegates and alternate delegates shall be elected at the Business Meeting of the Medical Student Section held in conjunction with ~~prior to~~ the Interim Meeting of the House of Delegates. Regional d~~D~~elegates and alternate delegates shall ~~be seated~~ assume office at the subsequent ~~next Annual Meeting~~ meeting of the House of Delegates.

***

2.3.5 Term. Medical ~~s~~Student ~~r~~Regional delegates and alternate delegates shall be elected for one-year terms ~~and shall assume office on the date set by the Medical Student Section Governing Council~~.

***

2.3.7
~~2.10.8~~ Medical Student Regional Delegate Seating. Each medical student regional delegate shall be seated with the student's endorsing constituent association. Alternate delegates, ~~substitute~~ temporary delegates, or temporary alternate delegates shall be assigned to the original medical student regional delegate's seat location during the time they are seated for the original delegate.

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2.4 ~~**Delegates from the**~~ **Resident and Fellow Sectional Delegates and Alternate Delegates.** In addition to the delegate and alternate delegate representing the Resident and Fellow Section, resident and fellow physician delegates and alternate delegates shall be apportioned and elected in a manner as provided in this bylaw.

2.4.1 **Qualifications.** Resident and fellow sectional ~~D~~delegates and alternate delegates ~~from the Resident and Fellow Section~~ must be active members of the Resident and Fellow Section of the AMA. In addition, resident and fellow sectional ~~physician~~ delegates and alternate delegates must be members of and have written endorsement from an ~~their endorsing~~ organization currently seated in the HOD, in a capacity appropriate to their level of training.

2.4.2 **Apportionment.** The apportionment of delegates from the Resident and Fellow Section is one delegate and alternate delegate for each 2,000 active resident and fellow physician members of the AMA, as recorded by the AMA on December 31 of each year.

2.4.2.1 **Effective Date.** In January of each year, the AMA shall notify the chair of the Resident and Fellow Section Governing Council and the director of the Resident and Fellow Section of the number of seats in the House of Delegates to which the Resident and Fellow Section is entitled. Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year.

2.4.3 **Election.** Resident and fellow sectional ~~D~~delegates and alternate delegates shall be elected by the Resident and Fellow Section in accordance with rules adopted by the Section and approved by the Board of Trustees. Sectional delegates and alternate delegates shall be elected at the Business Meeting of the Resident and Fellow Section held in conjunction with the Interim Meeting of the House of Delegates. Sectional delegates and alternate delegates shall assume office at the subsequent meeting of the House of Delegates. ~~Each delegate and alternate delegate must receive written endorsement from a society or organization currently seated in the House of Delegates and in accordance with procedures adopted by the Resident and Fellow Section and approved by the Board of Trustees.~~

***

2.4.5 **Term.** Resident and fellow sectional ~~D~~delegates and alternate delegates ~~from the Resident and Fellow Section~~ shall be elected for one-year terms ~~and shall assume office on the date set by the Resident and Fellow Section Governing Council~~.

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~~**2.10.9**~~
2.4.7 **Resident and Fellow Sectional Delegate Seating.** Each ~~delegate from the~~ ~~R~~resident and ~~F~~fellow ~~S~~sectional delegate shall be seated with the physician's endorsing society or organization. In the case where a delegate has been endorsed by multiple entities, the delegate must choose, prior to the election, with which delegation the delegate wishes to be seated. Alternate sectional delegates, ~~substitute~~ temporary delegates, or temporary alternate delegates shall be assigned to the original resident and fellow sectional delegate's seat location during the time they are seated for the original delegate.

(Modify Bylaws)

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2.3 Medical Student Regional Delegates and Alternate Delegates. In addition to the delegate and alternate delegate representing the Medical Student Section, medical student regional delegates and regional alternate delegates shall be apportioned and elected as provided in this bylaw.

2.3.1 Qualifications. Medical student regional delegates and alternate delegates must be active medical student members of the AMA. In addition, medical student regional delegates and alternate delegates must be members of and have received written endorsement from the constituent association where their educational program is located. The Medical Student Region in which the endorsing society is located determines the student's region, and a medical student may only serve as a regional delegate, alternate delegate or a temporary delegate or temporary alternate delegate for that region.

2.3.2 Apportionment. The total number of medical student regional delegates and alternate delegates is based on one delegate and one alternate delegate for each 2,000 active medical student members of the AMA, as recorded by the AMA on December 31 of each year. Each Medical Student Region, as defined by the Medical Student Section, is entitled to one delegate and one alternate delegate for each 2,000 active medical student members of the AMA in an educational program located within the jurisdiction of the Medical Student Region. Any remaining medical student regional delegates and alternate delegates shall be apportioned one delegate and one alternate delegate per region(s) with the greatest number of active AMA medical student members in excess of a multiple of 2,000. If two Regions have the same number of active AMA medical student members, ties will be broken by lottery by the Medical Student Section Governing Council.

2.3.2.1 Effective Date. In January of each year the AMA shall notify the chair of the Medical Student Section Governing Council and the Director of the Medical Student Section of the number of seats in the House of Delegates to which each Medical Student Region is entitled. Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year.

2.3.3 Election. Medical student regional delegates and alternate delegates shall be elected by the medical student representatives to the appropriate Medical Student Region in accordance with rules adopted by the Medical Student Section and approved by the Board of Trustees. Regional delegates and alternate delegates shall be elected at the Business Meeting of the Medical Student Section held in conjunction with the Interim Meeting of the House of Delegates. Regional delegates and alternate delegates shall assume office at the subsequent meeting of the House of Delegates.

***

2.3.5 Term. Medical student regional delegates and alternate delegates shall be elected for one-year terms.

***

2.3.7 Medical Student Regional Delegate Seating. Each medical student regional delegate shall be seated with the student's endorsing constituent association. Alternate delegates, temporary delegates, or temporary alternate delegates shall be assigned to the original medical student regional delegate's seat location during the time they are seated for the original delegate.

2.4 Resident and Fellow Sectional Delegates and Alternate Delegates. In addition to the delegate and alternate delegate representing the Resident and Fellow Section, resident and fellow physician delegates and alternate delegates shall be apportioned and elected in a manner as provided in this bylaw.

2.4.1 Qualifications. Resident and fellow sectional delegates and alternate delegates must be active members of the Resident and Fellow Section of the AMA. In addition, resident and fellow sectional

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delegates and alternate delegates must be members of and have written endorsement from an organization currently seated in the HOD, in a capacity appropriate to their level of training.

2.4.2 Apportionment. The apportionment of delegates from the Resident and Fellow Section is one delegate and alternate delegate for each 2,000 active resident and fellow physician members of the AMA, as recorded by the AMA on December 31 of each year.

2.4.2.1 Effective Date. In January of each year, the AMA shall notify the chair of the Resident and Fellow Section Governing Council and the Director of the Resident and Fellow Section of the number of seats in the House of Delegates to which the Resident and Fellow Section is entitled. Such apportionment shall take effect on January 1 of the following year and shall remain effective for one year.

2.4.3 Election. Resident and fellow sectional delegates and alternate delegates shall be elected by the Resident and Fellow Section in accordance with rules adopted by the Section and approved by the Board of Trustees. Sectional delegates and alternate delegates shall be elected at the Business Meeting of the Resident and Fellow Section held in conjunction with the Interim Meeting of the House of Delegates. Sectional delegates and alternate delegates shall assume office at the subsequent meeting of the House of Delegates.

***

2.4.5 Term. Resident and fellow sectional delegates and alternate delegates shall be elected for one-year terms.

***

2.4.7 Resident and Fellow Sectional Delegate Seating. Each resident and fellow sectional delegate shall be seated with the physician's endorsing society or organization. In the case where a delegate has been endorsed by multiple entities, the delegate must choose, prior to the election, with which delegation the delegate wishes to be seated. Alternate sectional delegates, temporary delegates, or temporary alternate delegates shall be assigned to the original resident and fellow sectional delegate's seat location during the time they are seated for the original delegate.

7. HOD DELEGATE AND ALTERNATE DELEGATE VACANCIES AND MEETING ABSENCES

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

The House of Delegates (HOD) referred Council on Constitution and Bylaws (CCB) Report 3-I-25 and Resolution 10-I-25 to CCB for a report back at A-26. CCB Report 3-I-25 proposed numerous bylaw amendments, including deletion of references to substitute delegates and temporary substitute delegates. In that report, the Council had alternatively proposed the term, "temporary delegates and alternate delegates," to denote those individuals who were credentialed to fill an unfilled seat or a delegation vacancy after the credentialing deadline, which is a uniform 45 days for all groups with HOD representation. As CCB Report 3-I-25 noted, the distinction between existing bylaw language that characterized alternate delegates, substitute delegates, substitute alternate delegates, temporary substitute delegates, and temporary substitute alternate delegate was confusing.

Resolution 10-I-25, submitted by the Medical Student Section (MSS) and the Resident and Fellow Section (RFS) asked for the following actions:

- That our AMA Bylaws be amended to explicitly affirm the ability of the RFS to appoint substitute resident and fellow sectional delegates and alternate delegates as well as temporary substitute resident and fellow

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sectional delegates in accordance with procedures adopted by the Section as all other delegations to the House of Delegates are able to and without being held to a higher threshold of election; and

- That our AMA Bylaws be amended to explicitly affirm the ability of the MSS to appoint substitute medical student regional delegates and alternate delegates as well as temporary substitute medical student regional delegates and alternate delegates in accordance with procedures adopted by the Section as all other delegations to the House of Delegates are able to and without being held to a higher threshold of election.

BACKGROUND

Alternate delegates are considered active members of their delegation and typically share meeting duties equally with delegates. While the traditional purpose of an alternate delegate is to be seated in the House at a delegate's request, in practice, delegations often routinely seat their alternates for the portion of the meeting covering a reference committee for which the alternate delegate was primarily responsible or for other designated times to better allow for this division of labor. Seating of alternates is accomplished via the exchange of the delegate's temporary credential (salmon card) — see CCB Report 3-A-26 (Bylaw 2.0.1.3.2). This standard practice is widely used and understood by members of the House. However, it should not be confused with the recredentialing of an alternate delegate as a temporary delegate which is reserved for delegate absences from all or the remainder of a meeting. Furthering this confusion is the fact that all individuals who miss the 45-day credentialing deadline for the meeting are credentialed as temporary delegates or alternate delegates for that meeting, even though they may be the duly selected individuals from that HOD entity.

In their testimony on CCB Report 3-I-25 and Resolution 10-I-25, medical students and residents and fellows cited challenges associated with school, work and family responsibilities, which often equate to an inability to attend both their Section meeting and an entire HOD meeting. They mentioned the need to hold a leadership position to secure funding to support their attendance in whole or in part, and they noted that attending the meeting in an "official capacity" such as a temporary alternate delegate may allow an excused absence from their training program. The Council heard that many medical students, residents and fellows stay for the HOD meetings for mentorship and leadership development opportunities and comprise a pool of potential temporary alternate delegates who could be appointed rather than elected. The Council noted that these "extra" medical students and residents and fellows in attendance at meetings are occasionally asked to fill temporary positions in constituent associations, national medical societies, or other groups represented in the House for which they are an eligible member. Such situations fully comport with the AMA Bylaws that allow constituent, national medical specialty society, professional interest medical associations and other groups autonomy in how to fill positions. The difficulty lies in credentialing these available individuals to fill unfilled medical student regional or resident and fellow sectional alternate delegate positions. This stems from long-existing Bylaws that require medical student regional delegates and alternates and resident and fellow sectional delegates and alternates to be elected by their respective sections and endorsed by an organization represented in the HOD.

EXAMPLES AND TERMINOLOGY

As a starting point, the Council discussed at length various scenarios that may occur before and after the credentialing deadline and proposed some definitions for clarity. These definitions will be included in the glossary of the Bylaws and cited in the House of Delegates Reference Manual: Procedures, Policies and Practices:

- ***Vacancy*** – A vacancy is a permanent loss of a position for the remainder of the term. Vacancies are addressed throughout the Bylaws where the composition of the HOD is defined.

- ***Meeting Absence*** – A meeting absence occurs when a credentialed delegate or alternate delegate is unable to attend a meeting of the HOD, or a portion thereof. A remedy for a meeting absence is the credentialing of a temporary delegate or temporary alternate delegate.

Vacancies are typically addressed by filling the position via the procedures as defined by the entity represented in the House of Delegates. This may be via selection of a new individual to complete the term or to start a new term per the entity's internal rules.

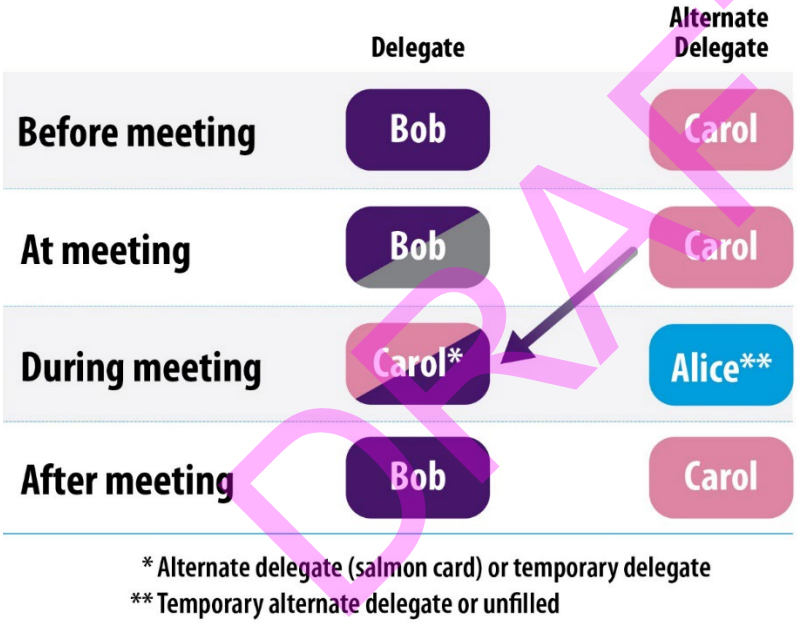
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Example A: ***A Medical Association Chooses Bob as its Delegate for a 2-year Term*****.**
Bob duly attends an HOD meeting as a delegate but must resign shortly thereafter. The medical association then chooses, via its established procedures for filling vacancies, Carol to serve as delegate for the remainder of Bob's term.

Meeting Absences are addressed via the appointment of temporary delegates and temporary alternate delegates who fill positions that become open transiently, with the original holder of the position expected to fulfill the term. This includes occasions when the duly selected individuals were not credentialed by the 45-day credentialing deadline.

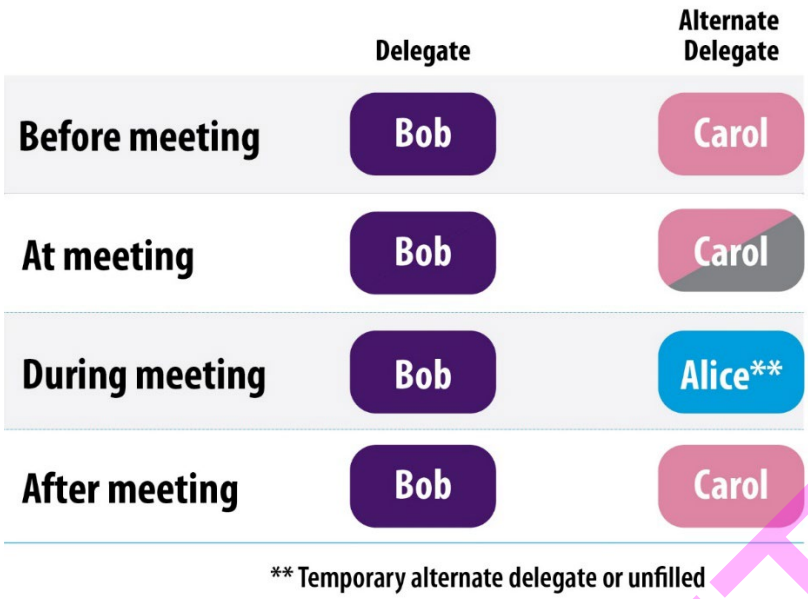
Example B***: Bob, the Delegate, Leaves the Meeting.***
A medical association has chosen Bob as its delegate and Carol as its alternate delegate. They are credentialed by the 45-day deadline. Alice, a member of the association and the AMA, attends the meeting but is not serving as a delegate or alternate delegate. Bob must leave the meeting before it concludes. Carol, the alternate delegate, may function as the delegate using Bob's salmon card, but she may not vote in elections. Alternatively, the medical association may choose to recredential her as a temporary delegate. If Carol is recredentialed as a temporary delegate, her alternate delegate position opens. This position may be left open or may be filled by credentialing a temporary alternate delegate. In this instance, the medical association chooses to credential Alice as a temporary alternate delegate for that meeting only. Following the meeting, Bob and Carol resume their roles for the remainder of their terms.



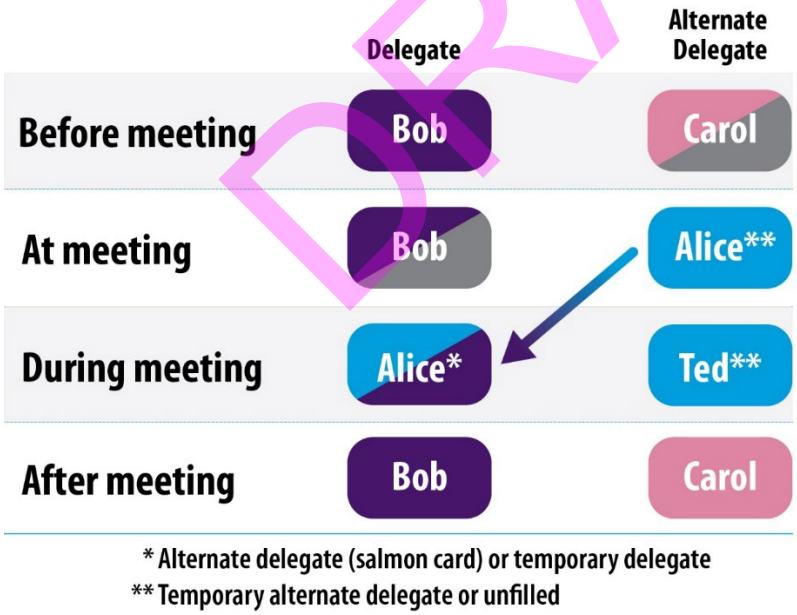
Example C***: Carol, the Alternate Delegate, Leaves Meeting.***
Bob and Carol are the medical association's credentialed delegate and alternate delegate for an HOD meeting, but Carol has to leave the meeting early. Carol's position may remain unfilled for the rest of the meeting or the association may choose to credential Alice as the temporary alternate delegate for that meeting only. Following the meeting, Bob and Carol resume their roles for the remainder of their terms.

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Example D: ***Bob Must Leave and Carol is Absent for the Meeting.***
Bob and Carol are the medical association's credentialed delegate and alternate delegate for an HOD meeting. Carol learns she is unable to attend, so the medical association chooses to credential Alice as a temporary alternate delegate. At the meeting, Bob learns he must leave urgently. Alice may function as the delegate using Bob's salmon card, but she may not vote in elections. Alternatively, the medical association may choose to credential her as a temporary delegate. If so, the alternate delegate position could remain unfilled, or the association could credential Ted, another eligible association member in attendance, as the temporary alternate delegate. Following the meeting, Bob and Carol resume their roles for the remainder of their terms.



CONCLUSION

The Council offers definitions of vacancy and meeting absences to clarify these two instances whereby an open seat needs to be permanently versus temporarily filled, along with the protocol to fill each. This report also standardizes

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the terminology governing temporary delegates and alternate delegates and clarifies the eligibility order of individuals who may be credentialed in these positions.

Lastly, this report fulfills the request of Resolution 10-I-25 by providing the necessary bylaw changes to allow for credentialing by appointment of a temporary medical student regional alternate delegate and a temporary resident and fellow sectional alternate.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaw amendments and deletions (shown in red and amended by insertion or ~~deletion~~) be adopted and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of delegates present and voting following a one-day layover.

2.1.5 **Vacancies.** The delegate or alternate delegate selected to fill a vacancy before the credentialing deadline shall assume office immediately after selection and serve for the remainder of that term.

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2.2.5 **Vacancies.** The delegate or alternate delegate selected to fill a vacancy before the credentialing deadline shall assume office immediately after selection and serve for the remainder of that term.

***

2.3.6 **Vacancies.** A medical student who ~~The delegate selected to~~ fills a vacancy before the credentialing deadline as a medical student regional delegate or alternate delegate must be from the same Medical Student Region as the vacating student, must be endorsed by the appropriate endorsing constituent association, and must be elected by the appropriate electorate. A medical student regional delegate or alternate delegate who fills such a vacancy shall assume office immediately after ~~s~~election and serve for the remainder of that term.

***

2.4.6 **Vacancies.** A resident or fellow who ~~The delegate selected to~~ fills a vacancy for a resident and fellow sectional delegate or alternate delegate before the credentialing deadline must be elected by the Resident and Fellow Section and must be endorsed by an entity represented in the House of Delegates. A resident and fellow sectional delegate or alternate delegate who fills a vacancy shall assume office immediately after ~~s~~election and serve for the remainder of the term.

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2.6.3 **Vacancies.** The delegate or alternate delegate selected to fill a vacancy before the credentialing deadline shall assume office immediately after selection and serve for the remainder of that term.

2.10 ~~**Registration and Seating of Delegates.**~~ **Temporary Delegates and Alternate Delegates.**

~~**2.10.4** **Substitute Delegates.**~~

2.10.1 **Temporary Delegates.** The credentialing authority of any entity represented in the House of Delegates may credential a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.1 When there is no delegate credentialed by the 45-day credentialing deadline, a delegate who was appropriately selected via the entity's rules may be credentialed as a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.2 When there is no appropriately selected delegate available an alternate delegate may be credentialed as a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

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2.10.1.3 When there is no appropriately selected alternate delegate available a temporary alternate delegate may be credentialed as a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.4 Temporary delegates must be credentialed the day before an AMA election in order to vote in that election.

2.10.2 **Temporary Alternate Delegates.** The credentialing authority of any entity represented in the House of Delegates may credential a temporary alternate delegate, who shall be eligible to serve at that meeting only.

2.10.2.1 When there is no alternate delegate credentialed by the 45-day credentialing deadline, an alternate delegate who was appropriately selected via the entity's rules may be credentialed as a temporary alternate delegate for that meeting only.

2.10.2.2 When there is no appropriately selected alternate delegate available, a member of the entity who is also an AMA member may be credentialed as a temporary alternate delegate, who shall be eligible to serve at that meeting only.

2.10.2.3 **Temporary Medical Student Regional Alternate Delegate.** The credentialing authority for the Medical Student Section may credential a member of the Medical Student Section who has a written endorsement from their constituent association and who is from the same Medical Student Region as the absent alternate delegate as a medical student regional temporary alternate delegate. This individual shall be eligible to serve at that meeting only.

2.10.2.4 **Temporary Resident and Fellow Sectional Alternate Delegate.** The credentialing authority for the Resident and Fellow Section may credential a member of the Resident and Fellow Section who has a written endorsement from an entity represented in the House of Delegates as a resident and fellow sectional temporary alternate delegate. This individual shall be eligible to serve at that meeting only.

***

~~**2.10.1 Notification.** In January of each year, the AMA shall notify each organization of the number of seats in the House of Delegates to which it is entitled during the current year.~~

~~**2.10.2 Credentials.** A delegate or alternate delegate may only be seated if there is certification on file stating that the delegate or alternate delegate has been properly selected to serve in the House of Delegates.~~

~~**2.10.3 Lack of Credentials.** A delegate or alternate delegate may be seated without the certificate defined in Bylaw 2.10.2 provided proper identification as the delegate or alternate delegate selected by the respective entity is established, and so certified to the AMA.~~

***

~~**2.10.4.1** **Temporary Substitute Delegate.** A delegate whose credentials have been accepted by the Committee on Rules and Credentials and whose name has been placed on the roll of the House of Delegates shall remain a delegate until final adjournment of that meeting of the House of Delegates. However, if the delegate is not able to remain in attendance, that delegate's place may be taken during the period of absence by an alternate delegate, or a substitute alternate delegate selected in accordance with Bylaw 2.10.4 if an alternate delegate is not available. The person who takes the place of the delegate must have certification on file and shall be known as a temporary substitute delegate. Such temporary substitute delegate shall have all of the rights and privileges~~

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~~of a delegate while serving as a temporary substitute delegate, including the right to vote in the House of Delegates and to vote in any election conducted by the House of Delegates. The temporary substitute delegate shall not be eligible for nomination or election as Speaker or Vice Speaker of the House of Delegates.~~

(Modify Bylaws)

CLEAN BYLAW LANGUAGE IF ADOPTED

2.1.5 Vacancies. The delegate or alternate delegate selected to fill a vacancy before the credentialing deadline shall assume office immediately after selection and serve for the remainder of that term.

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2.2.5 Vacancies. The delegate or alternate delegate selected to fill a vacancy before the credentialing deadline shall assume office immediately after selection and serve for the remainder of that term.

***

2.3.6 Vacancies. A medical student who fills a vacancy before the credentialing deadline as a medical student regional delegate or alternate delegate must be from the same Medical Student Region as the vacating student, must be endorsed by the appropriate endorsing constituent association, and must be elected by the appropriate electorate. A medical student regional delegate or alternate delegate who fills such a vacancy shall assume office immediately after election and serve for the remainder of that term.

***

2.4.6 Vacancies. A resident or fellow who fills a vacancy for a resident and fellow sectional delegate or alternate delegate before the credentialing deadline must be elected by the Resident and Fellow Section and must be endorsed by an entity represented in the House of Delegates. A resident and fellow sectional delegate or alternate delegate who fills a vacancy shall assume office immediately after election and serve for the remainder of the term.

***

2.6.3 Vacancies. The delegate or alternate delegate selected to fill a vacancy before the credentialing deadline shall assume office immediately after selection and serve for the remainder of that term.

2.10 Temporary Delegates and Alternate Delegates.

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2.10.1 Temporary Delegates. The credentialing authority of any entity represented in the House of Delegates may credential a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.1 When there is no delegate credentialed by the 45-day credentialing deadline, a delegate who was appropriately selected via the entity's rules may be credentialed as a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.2 When there is no appropriately selected delegate available an alternate delegate may be credentialed as a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.3 When there is no appropriately selected alternate delegate available a temporary alternate delegate may be credentialed as a temporary delegate, who shall be eligible to serve in the House of Delegates at that meeting only.

2.10.1.4 Temporary delegates must be credentialed the day before an AMA election in order to vote in that election.

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2.10.2 Temporary Alternate Delegates. The credentialing authority of any entity represented in the House of Delegates may credential a temporary alternate delegate, who shall be eligible to serve at that meeting only.

2.10.2.1 When there is no alternate delegate credentialed by the 45-day credentialing deadline, an alternate delegate who was appropriately selected via the entity's rules may be credentialed as a temporary alternate delegate for that meeting only.

2.10.2.2 When there is no appropriately selected alternate delegate available, a member of the entity who is also an AMA member may be credentialed as a temporary alternate delegate, who shall be eligible to serve at that meeting only.

2.10.2.3 Temporary Medical Student Regional Alternate Delegate. The credentialing authority for the Medical Student Section may credential a member of the Medical Student Section who has a written endorsement from their constituent association and who is from the same Medical Student Region as the absent alternate delegate as a medical student regional temporary alternate delegate. This individual shall be eligible to serve at that meeting only.

2.10.2.4 Temporary Resident and Fellow Sectional Alternate Delegate. The credentialing authority for the Resident and Fellow Section may credential a member of the Resident and Fellow Section who has a written endorsement from an entity represented in the House of Delegates as a resident and fellow sectional temporary alternate delegate. This individual shall be eligible to serve at that meeting only.

8. BUSINESS MEETINGS OF THE AMA SECTIONS

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

In preparing its reports for the A-26 meeting of the House of Delegates and in reviewing updates to Section rules for approval by the Board, the Council has learned that existing AMA Bylaw language is confusing and constraining when referring to the Business Meetings of the AMA Sections. Some Sections have multiple business meetings prior to each meeting of the House of Delegates with components such as a virtual reference committee and elections that are accomplished electronically.

The Council has prepared this report to ensure that the AMA Bylaws remain accurate. An additional editorial change has been incorporated to reflect Bylaw 7.0.7 that states that "all rules, regulations, and procedures adopted by each Section shall be subject to the approval of the Board of Trustees".

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaw amendments and deletions (shown in red and amended by insertion or ~~deletion~~) be adopted and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

7.0.6 Business Meeting. There shall be a Business Meeting of members of each Section~~. The Business Meeting shall be held on a day~~ prior to each ~~Annual and Interim~~ ~~M~~meeting of the House of Delegates.

7.0.6.1 Purpose. The purposes of the Business Meeting shall be:

7.0.6.1.1 To hear such reports as may be appropriate.

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7.0.6.1.2 To consider other business and vote upon such matters as may properly come before the meeting.

7.0.6.1.3 To adopt resolutions for submission by the Section to the House of Delegates.

7.0.6.1.4 To hold elections.

7.0.6.2 Meeting Procedure.

7.0.6.2.1 The Business Meeting shall be open to all members of the AMA.

7.0.6.2.2 Only duly selected representatives who are AMA members shall have the right to vote at the Business Meeting.

7.0.6.2.3 The Business Meeting shall be conducted pursuant to rules of procedure adopted by the ~~Governing Council~~ Section and approved by the Board of Trustees. The rules of procedure may specify the rights and privileges of Section members, including any limitations on participation or vote.

(Modify Bylaws)

CLEAN BYLAW LANGUAGE IF ADOPTED

7.0.6 Business Meetings. There shall be a Business Meeting of members of each Section prior to each meeting of the House of Delegates.

7.0.6.1 Purpose. The purposes of the Business Meeting shall be:

7.0.6.1.1 To hear such reports as may be appropriate.

7.0.6.1.2 To consider other business and vote upon such matters as may properly come before the meeting.

7.0.6.1.3 To adopt resolutions for submission by the Section to the House of Delegates.

7.0.6.1.4 To hold elections.

7.0.6.2 Meeting Procedure.

7.0.6.2.1 The Business Meeting shall be open to all members of the AMA.

7.0.6.2.2 Only duly selected representatives who are AMA members shall have the right to vote at the Business Meeting.

7.0.6.2.3 The Business Meeting shall be conducted pursuant to rules of procedure adopted by the Section and approved by the Board of Trustees. The rules of procedure may specify the rights and privileges of Section members, including any limitations on participation or vote.

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9. CONTINUITY OF AMA RESIDENT AND FELLOW SECTION GOVERNING COUNCIL LEADERSHIP

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

At the 2025 Interim Meeting of the House of Delegates Policy D-600.950 was adopted and called for an amendment to the AMA Bylaws to allow the section's Immediate Past Chair to serve in that position even if they no longer meet the membership definition of either a resident (Bylaw 7.1.1.1) or a fellow (Bylaw 7.1.1.2). Bylaw 7.1.2 states that "If any officer or Governing Council member ceases to meet the membership requirements of Bylaw 7.1.1 prior to the expiration of the term for which elected, the term of such officer or member shall terminate and the position shall be declared vacant." Bylaw 7.1.2 further provides a grace period for a Governing Council member who completes residency or fellowship within 90 days prior to an Annual Meeting. What 7.1.2 does not address, however, is an immediate past chair who during their six-month term as a nonvoting ex officio member and who completes their residency or fellowship between the Annual and the Interim Meeting. Currently, that Immediate Past Chair would be unable to continue their service on the RFS Governing Council.

The Council presents the appropriate Bylaw changes to allow the Immediate Past Chair to fulfill their term on the RFS Governing Council.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following amendments to the Bylaws (shown in red and amended by insertion or ~~deletion~~) be adopted, that Policy D-600.950 be sunset, and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

7.1 **Resident and Fellow Section.** The Resident and Fellow Section is a fixed Section.

7.1.1 **Membership.** All active resident/fellow physician members of the AMA shall be members of the Resident and Fellow Section.

7.1.1.1 **Definition of a Resident.** For purposes of membership in the Resident and Fellow Section, the term Resident shall be applied to any physicians who meet at least one of the following criteria:

a) Members who are enrolled in a residency approved by the Accreditation Council for Graduate Medical Education.
b) Members who are active duty military or public health service residents required to provide service after their internship as general medical officers (including underseas medical officers or flight surgeons) before their return to complete a residency.
c) Members who are serving, as their primary occupation, in a structured educational, vocational, or research program of at least one year to broaden competency in a specialized field prior to completion of their residency.

7.1.1.2 **Definition of a Fellow.** For purposes of membership in the Resident and Fellow Section, the term Fellow shall be applied to any physicians who have completed a residency and meet at least one of the following criteria:

a) Members who are serving in fellowships approved by the Accreditation Council for Graduate Medical Education.

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b) Members who are serving, as their primary occupation, in a structured clinical, educational, vocational, or research training program of at least six months to broaden competency in a specialized field.

7.1.2 Cessation of Eligibility. If any officer or Governing Council member ceases to meet the membership requirements of Bylaw 7.1.1 prior to the expiration of the term for which elected, the term of such officer or member shall terminate and the position shall be declared vacant. If the officer or member completes residency or fellowship within 90 days prior to an Annual Meeting, the officer or member shall be permitted to continue to serve in office until the completion of the Annual Meeting. An immediate past chair who completes residency or fellowship during their term as immediate past chair shall be permitted to serve as a nonvoting ex officio member of the Governing Council for the remainder of their immediate past chair term.

(Modify Bylaws)

RELEVANT AMA POLICY

D-600.950, Amendment to AMA Bylaws to Enable Continuity of Leadership. Our American Medical Association will amend AMA Bylaw 7.1.2 to allow the Resident and Fellow Section (RFS) Immediate Past Chair to serve in the position even if they have graduated from the RFS.

CLEAN BYLAW LANGUAGE IF ADOPTED

7.1 Resident and Fellow Section. The Resident and Fellow Section is a fixed Section.

7.1.1 Membership. All active resident/fellow physician members of the AMA shall be members of the Resident and Fellow Section.

7.1.1.1 Definition of a Resident. For purposes of membership in the Resident and Fellow Section, the term Resident shall be applied to any physicians who meet at least one of the following criteria:

a) Members who are enrolled in a residency approved by the Accreditation Council for Graduate Medical Education.
b) Members who are active duty military or public health service residents required to provide service after their internship as general medical officers (including underseas medical officers or flight surgeons) before their return to complete a residency.
c) Members who are serving, as their primary occupation, in a structured educational, vocational, or research program of at least one year to broaden competency in a specialized field prior to completion of their residency.

7.1.1.2 Definition of a Fellow. For purposes of membership in the Resident and Fellow Section, the term Fellow shall be applied to any physicians who have completed a residency and meet at least one of the following criteria:

a) Members who are serving in fellowships approved by the Accreditation Council for Graduate Medical Education.
b) Members who are serving, as their primary occupation, in a structured clinical, educational, vocational, or research training program of at least six months to broaden competency in a specialized field.

7.1.2 Cessation of Eligibility. If any officer or Governing Council member ceases to meet the membership requirements of Bylaw 7.1.1 prior to the expiration of the term for which elected, the term of such officer or member shall terminate and the position shall be declared vacant. If the officer or member completes residency or fellowship within 90 days prior to an Annual Meeting,

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the officer or member shall be permitted to continue to serve in office until the completion of the Annual Meeting. An immediate past chair who completes residency or fellowship during their term as immediate past chair shall be permitted to serve as a nonvoting ex officio member of the Governing Council for the remainder of their immediate past chair term.

10. AMA AWARDS

Reference committee hearing: see report of Reference Committee on Ethics and Bylaws.

HOUSE ACTION: RECOMMENDATIONS ADOPTED
REMAINDER OF REPORT FILED
Bylaws amended

The House of Delegates (HOD) adopted the recommendation of Board of Trustees Report 34-A-26 to amend the American Medical Association (AMA) Bylaws to remove reference to the Citation for Distinguished Service.

As part of its due diligence, the Council examined AMA Bylaws [Section 10, Awards and Honors] and noted reference to only two awards, one of which is the Citation for Distinguished Service that the House voted to discontinue. This and the Distinguished Service Award were originally the purview of a Committee on Distinguished Service Awards, whose existence was acknowledged in earlier bylaws and whose responsibility was to solicit nominations and present nominees to the HOD for decision. This committee was disbanded in 1952 by House action and its functions transferred to the Board of Trustees.

Per the Board's Standing Rules, the Committee on Awards and Nominations advises the Board regarding awards and nominations and screens or generates proposals for establishing additional awards for recommendation to the Board. The AMA maintains documentation on all award programs, including the names of the specific awards, the criteria for selection, the nomination and selection process, the nature and amount of any prize or recognition, and eligibility requirements.

Traditionally, bylaws contain only a high-level provision authorizing a body to grant awards, with specific details about those awards specified elsewhere. Thus, the Council proposes that the AMA Bylaws eliminate references to specific awards and provide enabling language under the Board's duties and privileges. Appropriate bylaw language is included for House action. The Council emphasizes that historical data on all Awards is maintained in the Board Office and in the AMA Archives.

RECOMMENDATIONS

The Council on Constitution and Bylaws recommends that the following Bylaws amendments and deletions be adopted, and that the remainder of the report be filed. Adoption requires the affirmative vote of two-thirds of the members of the House of Delegates present and voting following a one-day layover.

1) That the following Bylaw language be amended by deletion (shown in red):

~~**10 Awards and Honors**~~

~~**10.1 Distinguished Service Award.**~~

~~**10.1.1 Award.** This award shall consist of a suitable medal and a citation selected and approved by the Board of Trustees.~~

~~**10.1.2 Eligibility.** This award may be made to a member of the AMA for meritorious services in the science and art of medicine.~~

~~**10.1.3 Nominations and Selection.** Names of prospective nominees, with a brief statement of their qualifications for the award, shall be submitted to the Board of Trustees by the date~~

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~~designated by the Board of Trustees. The Board of Trustees shall select the recipient from the nominees submitted.~~

~~**10.1.4 Endorsement.** The name of the nominee selected by the Board of Trustees to receive the Distinguished Service Award shall be presented to the House of Delegates for its endorsement.~~

~~**10.1.5 Presentation.** The award shall be presented to the recipient selected by the Board of Trustees at a time and place designated by the Board of Trustees.~~

~~**10.2 Citation for Distinguished Service.**~~

~~**10.2.1 Citation.** This citation shall consist of a suitable certificate of citation selected and approved by the Board of Trustees.~~

~~**10.2.2 Eligibility.** This citation shall be made to a person who is not a physician and who has contributed to the achievement of the ideals of American medicine by aid and cooperation in advancing medical science, medical education, or medical care.~~

~~**10.2.3 Nominations and Selection.** Names of prospective nominees, with a brief statement of their qualifications for the citation, shall be submitted to the Board of Trustees by the date designated by the Board of Trustees. The Board of Trustees shall select the recipient from the nominees submitted.~~

~~**10.2.4 Endorsement.** The name of the nominee selected by the Board of Trustees to receive the Citation for Distinguished Service shall be presented to the House of Delegates for its endorsement.~~

~~**10.2.5 Presentation.** The citation shall be presented to the recipient selected by the Board of Trustees at a time and place designated by the Board of Trustees.~~

[Subsequent sections to be renumbered accordingly]

2) That the following Bylaw amendments (shown in red and amended by insertion or ~~deletion~~) be adopted:

5.3 Duties and Privileges. In addition to the rights and duties conferred or imposed upon the Board of Trustees by law and custom and elsewhere in the Constitution and Bylaws, the Board of Trustees shall:

5.3.1 Management. ***

5.3.2 Planning. ***

5.3.3 Fulfillment of House of Delegates Charge. ***

5.3.4 Publication. ****

~~**10.3**~~
5.3.5 ~~Other~~ Awards and Honors. ~~Any other~~ A~~a~~wards and honors conferred by the AMA shall be as authorized and approved by the Board of Trustees or House of Delegates.

[Subsequent sections to be renumbered accordingly]

(Modify Bylaws)

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