Your Reference Committee recommends the following consent calendar for acceptance:

RECOMMENDED FOR ADOPTION AS AMENDED

1. Resolution 1: Integrity of Health Professional Behavior During a Public Health Crisis

2. Resolution 2: Considerations for an “AMA Disinformation Task Force”

RECOMMENDED FOR FILING

3. Report A: AMA Advocacy Efforts

RECOMMENDED FOR ADOPTION AS AMENDED

(1) RESOLUTION 1: INTEGRITY OF HEALTH PROFESSIONAL BEHAVIOR DURING A PUBLIC HEALTH CRISIS

RECOMMENDATION A:

The second Resolve in Resolution 1 be deleted:

RESOLVED, That our AMA collaborate with licensing bodies and specialty boards to utilize incentives and punitive measures, including but not limited to, the suspension or revocation of one’s medical license, to ensure health professionals do not undermine public health interventions designed for “the betterment of public health.” (Directive to Take Action)

RECOMMENDATION B:

Resolution 1 be amended by addition:

RESOLVED, That this resolution be immediately forwarded for consideration at the November 2021 Special Meeting of the AMA House of Delegates. (Directive to Take Action)

RECOMMENDATION C:

Resolution 1 be adopted as amended with a change in title to read as follows:

Health Professional Disinformation During a Public Health Crisis

RESOLVED, That our AMA work with health professional societies to address disinformation that undermines public health initiatives (Directive to Take Action); and be it further

RESOLVED, That our AMA collaborate with licensing bodies and specialty boards to utilize incentives and punitive measures, including but not limited to, the suspension or revocation of one’s medical license, to ensure health professionals do not undermine public health interventions designed for “the betterment of public health.” (Directive to Take Action)

Online forum commentary was supportive of the first Resolve in Resolution 1, and your Reference Committee concurs that collaboration with professional medical societies is a valuable tactic in disseminating science-based information for public health initiatives.

However, online forum commentary raised concerns about the operational and ethical implications of the second Resolve. One concern is the potential for the AMA to act as an arbiter on the veracity of health-related communications. Additionally, online forum commentary noted that the Federation of State Medical Boards (FSMB) issued a statement indicating that physicians who spread misinformation and disinformation may be subject to disciplinary action. Your Reference Committee wishes to note that both the
FSMB and the American Board of Medical Specialties published statements concerning the ethical and professional responsibility of physicians in conveying information that is science-based as well as the potential consequences of spreading misinformation and disinformation related to COVID-19.

Due to the timeliness of this issue, your Reference Committee believes that this resolution should be considered immediately. Therefore, your Reference Committee recommends that Resolution 1 be adopted as amended.

(2) RESOLUTION 2: CONSIDERATIONS FOR AN “AMA DISINFORMATION TASK FORCE”

RECOMMENDATION A:

Resolution 2 be amended by addition and deletion:

RESOLVED, That our AMA work collaborate with other interested organizations relevant stakeholders on efforts to combat to consider creating a “Disinformation Task Force” to address dangerous public health misinformation on social media, while adhering to the principles of (1) respecting physician autonomy, (2) being wary of perceptions of suppressing legitimate interpretations of science and data, and (3) recognizing the evolving nature of COVID and similar public health emergencies (Directive to Take Action); and

RESOLVED, That this resolution be forwarded to the AMA-HOD at the November 2021 Special Meeting of the AMA House of Delegates. (Directive to Take Action)

RECOMMENDATION B:

Resolution 2 be adopted as amended with a change in title to read as follows:

ADDRESSING PUBLIC HEALTH DISINFORMATION

RESOLVED, That our AMA work with other interested organizations to consider creating a “Disinformation Task Force” to address dangerous public health misinformation on social media, while adhering to the principles of (1) respecting physician autonomy, (2) being wary of perceptions of suppressing legitimate interpretations of science and data, and (3) recognizing the evolving nature of COVID and similar public health emergencies (Directive to Take Action); and

RESOLVED, That this resolution be forwarded to the AMA-HOD at November 2021 Special Meeting of the AMA House of Delegates. (Directive to Take Action)

Online commentary was generally supportive of the resolution’s intent, particularly the call for collaborative relationships to address public health disinformation. Further, online commentary supported addressing disinformation on social media, but noted the scope should be expanded to include all forms of media. However, numerous concerns were
raised pertaining to the establishment of a task force, particularly in regard to its infrastructure, duration, costs, and objectives.

Your Reference Committee concurs with the comments offered during the online forum and believes that the proposed amendment would strengthen this resolution. Therefore, your Reference Committee recommends that Resolution 2 be adopted as amended.
RECOMMENDED FOR FILING

(3) REPORT A: AMA ADVOCACY EFFORTS

RECOMMENDATION:

Report A be filed.

At the 2005 Annual Meeting of the AMA Young Physicians Section (YPS) Assembly, the AMA-YPS Governing Council (GC) was directed to report annually on the section’s advocacy efforts. Report provides an overview of advocacy efforts accomplished by the AMA and AMA-YPS. Report A is informational and does not include recommendations. No online commentary was provided for Report A. Therefore, your Reference Committee recommends that Report A be filed.

(4) REPORT B: AMA-YPS INTERNAL OPERATING PROCEDURES: 2022 REVIEW CYCLE

RECOMMENDATION:

Report B be filed.

In accordance with §VII.B.4 of the YPS Internal Operating Procedures (IOP), an ad hoc committee will be constituted to review the IOP every five years. AMA-YPS Report B outlines the guidelines for the 2022 IOP review along with the timeline to implement this process. Report B is informational and does not include recommendations. No commentary was provided during the online forum. Therefore, your Reference Committee recommends that Report B be filed.
This concludes the report of the AMA-YPS Reference Committee. I would like to thank Ricardo Correa Marquez, MD; Kyle Edmonds, MD; Tracey Henry, MD, MPH, MS; and Vanessa Stan, MD.

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