

Members of the Board of Regents Take Action on BOG Resolutions at April 20th Meeting

A summary of Board of Regents (BOR) actions on Board of Governors (BOG) resolutions discussed at the April 20, 2024, BOR Organizational Meeting is available below. Resolutions initiated by ACP members and endorsed by a chapter council and the BOG become ACP policy when adopted by the BOR.

If you have an idea you would like to suggest to ACP, consider submitting a resolution to your Governor or local ACP chapter. Visit your [ACP chapter website](#) for more information on how to contact your Governor or chapter staff about proposing a resolution.

1 **Actions on BOG Resolutions, April 20, 2024, Board of Regents Organizational Meeting**

3 **Adopted and referred for implementation: (Lines 49-55)**

4 6-S24. Advocating for Vaccination Incentives

6 **Adoption/Implementation with Amendments: (Lines 58-103)**

7 1-S24. Developing Educational Programs to Train Internal Medicine Physicians in the Care of
8 Sexual and Gender Minority Persons

9 4-S24. Improving the Experience of International Medical Students (IMS) and International Medical
10 Graduates (IMG) Seeking Clinical Observerships and Letters of Recommendation in the
11 United States of America and Canada

12 7-S24. Seeking Full Coverage of All Advisory Council on Immunization Practices (ACIP) Recommended
13 Vaccines under Medicare Part B

14 12-S24. Streamlining Longitudinal, Uninterrupted Access to Critical Health Services that Support Daily
15 Activities and Safe, Independent Living for Patients with Chronic Persistent or Progressive
16 Impairments

18 **Adopted as a Reaffirmation: (Lines 106-152; 174-184)**

19 3-S23. Developing Educational Resources to Train Physicians about the Evolving Threats of Climate
20 Change on Human Health

21 5-S24. Advocating for Continued Coverage of Colon Cancer Screening

22 9-S24. Acknowledging the Individual Right to Decisional Privacy

23 14-S24. Reducing the Risk of Medical Workplace Violence

25 **Adopted with BOR Amendments for Implementation (Lines 155-171; 199-243)**

26 6-S23. Promoting Research on the Public Health Impact of Extreme Risk Protection Orders (ERPOs) in
27 Reducing Firearm Death and Injury

28 10-S24. Updating ACP Policy to Support Physicians Pursuing Collective Empowerment

30 **Adopted as a BOR substitute resolution for Implementation (Lines 245-269)**

31 15-S24. Advocating that the Dietary Guidelines for Americans Use National Academy of Medicine
32 (NAM) Institute of Medicine (IOM) and Guidelines International Network's Standards to
33 Develop Clinical Guidelines

35 **Referred for Study: (Lines 186-197; 270-320)**

36 8-S24. Approaching Physician Suicide as a Problem Requiring Healthcare System Change

37 16-S24. Educating the Public about the Appropriate Identification of Healthcare Professionals in Clinical Settings

38 17-S24. Promoting and Developing Initiatives Related to Narrative Medicine

39 18-S24. Supporting our Military Membership at the American College of Physicians by Developing a
40 Special Dues Category for Active Members of the U.S. Armed Forces

41 20-S24. Addressing the Environmental Burden Associated with American College of Physicians Publications

42

43 The Board of Regents approved, as a Consent Calendar, the recommendations regarding the disposition
44 of each of the following resolutions recommended for adoption at the Spring 2024 Board of Governors
45 Meeting:

46

47

48 **BOG Recommended for Adoption/Implementation:**

49 **Resolution 6-S24. Advocating for Vaccination Incentives**

50 *(RRC Referral Recommendation: Medical Practice and Quality Committee [MPQC] with input from the*
51 *Immunization Committee)*

52 *RESOLVED, that the Board of Regents will partner with other medical specialty organizations to*
53 *advocate for insurance companies including Medicare and Medicaid, to reduce their premiums or*
54 *offer some other financial incentive to those members who are vaccinated according to Advisory*
55 *Committee on Immunization Practices (ACIP) recommendations.*

56

57 **BOG Recommended for Adoption/Implementation with Amendments:**

58 **Resolution 1-S24. Developing Educational Programs to Train Internal Medicine Physicians in the Care**
59 **of Sexual and Gender Minority Persons**

60 *(RRC Referral Recommendation: Education Committee with input from Division of Governmental Affairs and*
61 *Public Policy [DGAPP] staff)*

62 *RESOLVED, that the Board of Regents recognize the importance of education for all internal*
63 *medicine physicians regarding the topics of sexual and gender minority health and the provision of*
64 *culturally and clinically competent gender affirming care at all levels of medical training including*
65 *undergraduate and graduate medical education; and be it further*

66

67 *RESOLVED, that the Board of Regents, along with other **interested parties as necessary, make***
68 ***available updated** medical education programs **and clinical resources** for internal medicine*
69 *physicians **enabling them to provide** culturally and clinically competent care, **inclusive of gender***
70 *affirming care, **for all members of the LGBTQ+ Community.***

71

72 **Resolution 4-S24. Improving the Experience of International Medical Students (IMS) and International Medical**
73 **Graduates (IMG) Seeking Clinical Observerships and Letters of Recommendation in the United States of**
74 **America and Canada**

75 *(RRC Referral Recommendation: Education Committee with input from Diversity, Equity, and Inclusion*
76 *Committee)*

77 *RESOLVED, that the Board of Regents condemns the exploitative practice of for-profit letter of*
78 *recommendations and observerships; and be it further*

79

80 *RESOLVED, that the Board of Regents further studies the problem and works with the Accreditation*
81 *Council for Graduate Medical Education (ACGME), Alliance for Academic Internal Medicine (AAIM),*
82 *Association for Program Directors in Internal Medicine (APDIM), Education Commission for Foreign*
83 *Medical Graduates (ECFMG), and other partners to develop a transparent, ethical, and fair system to*
84 *enhance IMS and IMG medical training and incorporation into the U.S. healthcare workforce.*

85

86 **Resolution 7-S24. Seeking Full Coverage of All Advisory Council on Immunization Practices (ACIP)**
87 **Recommended Vaccines under Medicare Part B**

88 *(RRC Referral Recommendation: MPQC with input from the Immunization Committee)*

89 **RESOLVED, that the Board of Regents seek full coverage of all Advisory Council on Immunization**
90 **Practices (ACIP) recommended vaccines under Medicare Part B, to enable optimal preventative**
91 **care for patients to be able to receive all ACIP-recommended vaccines in their primary care**
92 **physicians' or clinicians' offices as covered services without cost shifting.**

93
94 **Resolution 12-S24. Streamlining Longitudinal, Uninterrupted Access to Critical Health Services that**
95 **Support Daily Activities and Safe, Independent Living for Patients with Chronic Persistent or**
96 **Progressive Impairments**
97 *(RRC Referral Recommendation: MPQC)*

98 *RESOLVED, that the Board of Regents advocates for streamlined, longitudinal, uninterrupted access*
99 *to critical health services that support daily activities and safe, independent living for patients with*
100 *chronic persistent or progressive impairments by taking the following action:*

101 1. *Advocate to CMS and other payers to remove the mandatory recertification requirements for*
102 *critical health services that support daily activities and safe, independent living for patients with*
103 *chronic persistent or progressive impairments.*

104

105 **BOG Recommended for Reaffirmation:**

106 **Resolution 9-S24. Acknowledging the Individual Right to Decisional Privacy**

107 *RESOLVED, that the Board of Regents acknowledges that patients' right to autonomy includes the*
108 *right to make their own independent medical decisions, with or without reliance on a patient-*
109 *clinician relationship and, as such, will adopt and advocate for positions in furtherance of this*
110 *acknowledgment. ***

111

112 ****College policy/practice being reaffirmed:**

113 ACP policy has long recognized that patients have the right to make their own decisions about health care, in
114 keeping with their values and preferences, “based on the philosophical and ethical concept of respect for
115 autonomy, the common-law right of self-determination, and the patient's liberty interest under the U.S.
116 Constitution” (1).

117 The ACP Ethics Manual likewise recognizes that “[p]rivacy is freedom from unauthorized intrusion,” and that
118 need or illness do not “change a patient’s legal rights” (1).

119 1. Sulmasy LS, Bledsoe TA, for the ACP Ethics, Professionalism, and Human Rights Committee. American
120 College of Physicians ethics manual: seventh edition. Ann Intern Med. 2019;170:S1–S32.
121 doi:10.7326/M18-2160.

122

123 **Resolution 14-S24. Reducing the Risk of Medical Workplace Violence**

124 *RESOLVED, that the Board of Regents discuss what actions might be taken to reduce the risk to*
125 *physicians from workplace violence. Actions might include, but are not limited to, having ACP*
126 *develop teaching packages which provide instruction on how to deal with such incidents in a manner*
127 *that reduces the risk of serious injuries occurring, as well as encouraging medical settings to place in*
128 *service protective measures such as screening for individuals entering medical settings with*
129 *handguns or other potentially lethal instruments. ***

130

131 ****College policy/practice being reaffirmed:**

132 The Health and Public Policy Committee developed a position statement on policy standards for workplace violence
133 prevention and management approved by the Board of Regents (BOR) in fall 2021. In 2022, ACP developed an
134 Advocacy Toolkit also to help with member advocacy to pass legislation to protect health care workers.

135

136

137 **BOR Adopted as a Reaffirmation:**

138 **Resolution 3-S23. Developing Educational Resources to Train Physicians about the Evolving Threats of**
139 **Climate Change on Human Health**

140 *RESOLVED, that the Board of Regents will expand and develop educational resources to train*
141 *physicians about the evolving threats of climate change and environmental degradation on human*
142 *health through dedicated comprehensive coursework and tracks within conferences, supported by*
143 *online resources such as an up-to-date compendium of clinical research, links to relevant*
144 *organizations, communication tools, and lectures.***

145

146 ****College policy/practice being reaffirmed:**

147 DGAPP and Education staff identified currently available resources as well as content being developed that
148 aligned with and fulfilled the intent of Resolution 3-S23. A “Final Report” on Resolution 3-S23, submitted for
149 the April 16, 2024 BOR meeting, highlighted multiple educational sessions at the 2024 Internal Medicine
150 Meeting (IMM), a 2025 IMM educational session, and an IM 2025 Global Engagement Committee (GEC)
151 session, as well as a number of education resources. Additionally, the ACP [Toolkit: Climate Change and Health](#)
152 is in the process of being updated.

153

154 **BOR Adopted with Amendments for Implementation:**

155 **Resolution 6-S23. Promoting Research on the Public Health Impact of Extreme Risk Protection Orders**
156 **(ERPOs) in Reducing Firearm Death and Injury**

157 *(RRC Referral Recommendation: Health and Public Policy Committee [HPPC] with input from Ethics,*
158 *Professionalism, and Human Rights Committee [EPHRC] on the 2nd resolved clause and Medical*
159 *Education staff on the 3rd clause)*

160 *RESOLVED, that the Board of Regents promote research on the public health impact of Extreme Risk*
161 *Protection Orders (ERPOs), in particular on reducing suicide as well as intimate partner violence*
162 *injury and mass shootings; and be it further*

163

164 *RESOLVED, that the Board of Regents research and make recommendations in regard to the*
165 *administrative burden, legal liability concerns, and ethical concerns for physicians and other*
166 *clinicians filing ERPOs; and be it further*

167

168 *RESOLVED, that the Board of Regents identify and disseminate concise, actionable educational*
169 *resources for students, residents and practicing clinicians on effective counseling and harm reduction*
170 *interventions when patients or family members express a concern that they or someone they know is*
171 *at risk for firearm violence, including resources to advise on ERPOs when indicated.*

172

173 **Board members extracted the following resolutions from the Consent Calendar for discussion:**

174 **Resolution 5-S24. Advocating for Continued Coverage of Colon Cancer Screening**

175 *The Board of Regents extracted Resolution 5-S24 from the Consent Calendar to discuss. Following the*
176 *discussion, The Board of Regents*

177 **VOTED: to approve Resolution 5-S24 for reaffirmation.**

178

179 **Rationale:** At the April 20, 2024 meeting, the Board of Regents (BOR) approved Resolution 5-S24 for
180 reaffirmation. In the opinion of the BOR, the work on this resolution is complete and no further work is
181 required since the resolution reaffirms existing policy. Members of the BOR noted that the Affordable
182 Care Act, which ACP supports, requires coverage of preventative measures and that denial of coverage is

183 a broader issue. The BOR also noted concerns regarding conflicting guidelines and highlighting any one
184 medical condition over others.

185

186 **Resolution 8-S24. Approaching Physician Suicide as a Problem Requiring Healthcare System Change**

187 *The Board of Regents extracted Resolution 8-S24 from the Consent Calendar to discuss. Following the*
188 *discussion, The Board of Regents*

189 **VOTED:** *to refer Resolution 8-S24 for study to the Executive Office.*

190

191 **Rationale:** At the April 20, 2024 meeting, the Board of Regents referred Resolution 8-S24 for study to the
192 Executive Office. BOR members noted that the work of this resolution is already being done within a
193 consortium of organizations alongside ACP. Convening a task force is not recommended as its work would
194 be largely research based, which is outside the scope of ACP's work, and would have a significant impact
195 on ACP staff time as well as a potentially significant fiscal impact. Referral to the Executive Office was
196 approved to facilitate coordination of action among multiple committees, departments, and outside
197 organizations.

198

199 **Resolution 10-S24. Updating ACP Policy to Support Physicians Pursuing Collective Empowerment**

200 *The Board of Regents extracted Resolution 10-S24 from the Consent Calendar to discuss. Following the*
201 *discussion, The Board of Regents*

202 **VOTED:** *to refer Resolution 10-S24 to the Health and Public Policy Committee for implementation with input*
203 *from Ethics, Professionalism and Human Rights Committee, Professional Development and Fulfillment*
204 *Committee, and Medical Practice and Quality Committee (1st resolved clause) and to the ACP American*
205 *Medical Association Delegation (2nd resolved clause) with the following amended language:*

206

207 *Track Changes:*

208 ***RESOLVED, that the Board of Regents update policy to:***

209 ***a) Support of the right of physicians to engage in collective ~~bargaining, including physician~~***
210 ***~~unionization; empowerment through a variety of modalities~~***

211 ***b) Advocate for the expansion of the numbers of physicians eligible for this right ~~under state and~~***
212 ***~~federal law; and~~***

213 ***c) Provide comprehensive guidance on physicians' regulatory and ethical obligations in balancing***
214 ***direct patient care and advocacy within health systems during ~~the any~~ collective bargaining process;***
215 ***and be it further***

216

217 ***RESOLVED, that the Board of Regents bring a resolution to the American Medical Association (AMA)***
218 ***seeking study of opportunities for the AMA and other physician associations to support ~~physicians~~***
219 ***~~initiating collective bargaining, including but not limited to unionization, the above.~~***

220

221 *Clean Copy:*

222 ***RESOLVED, that the Board of Regents update policy to:***

223 ***a) Support of the right of physicians to engage in collective empowerment through a variety of***
224 ***modalities***

225 ***b) Advocate for the expansion of the numbers of physicians eligible for this right***

226 ***c) Provide comprehensive guidance on physicians' regulatory and ethical obligations in balancing***
227 ***direct patient care and advocacy within health systems during any collective bargaining process; and***
228 ***be it further***

229

230 ***RESOLVED, that the Board of Regents bring a resolution to the American Medical Association (AMA)***
231 ***seeking study of opportunities for the AMA and other physician associations to support the above.***

232
233
234
235
236
237
238
239
240
241
242
243
244
245
246
247
248
249
250
251
252
253
254
255
256
257
258
259
260
261
262
263
264
265
266
267
268
269
270
271
272
273
274
275
276
277
278
279
280
281

Rationale: At the April 20, 2024 meeting, the Board of Regents referred Resolution 10-S24 to the Health and Public Policy Committee with input from Ethics, Professionalism and Human Rights Committee, Professional Development and Fulfillment Committee, and Medical Practice and Quality Committee (1st resolved clause) and to the ACP American Medical Association Delegation (2nd resolved clause) for implementation with amended language. Members of the BOR recommended using the term “collective empowerment through a variety of modalities” rather than “unionization.” Discussion among Board members included consideration of ongoing work toward a paper by the Ethics, Professionalism and Human Rights Committee to address the ethics of collective bargaining as well as consideration of the regulatory impact and obligations. BOR members noted the intention of the resolution is to empower physicians to seek adequate conditions while continuing to provide ethical and compassionate care for patients.

Resolution 15-S24. Advocating that the Dietary Guidelines for Americans Use National Academy of Medicine (NAM) Institute of Medicine (IOM) and Guidelines International Network’s Standards to Develop Clinical Guidelines

The Board of Regents extracted Resolution 15-S24 from the Consent Calendar to discuss. Following the discussion, The Board of Regents

VOTED: to refer Resolution 15-S24 to Clinical Policy staff for implementation with the following substitute language:

Original language:

RESOLVED, that ACP policy be strengthened to support advocacy for implementation of the National Academies of Sciences, Engineering and Medicine (NASEM) recommendations for processes around Dietary Guidelines for Americans (DGA) development; and be it further RESOLVED, that the Board of Regents shall advocate for implementation of the NASEM and Guidelines International Network’s recommendations for processes around DGA development to the greatest extent possible prior to release of each set of DGA.

Substitute Language:

RESOLVED, that the Board of Regents shall advocate that Dietary Guidelines for Americans (DGA) use the National Academy of Medicine (NAM) Institute of Medicine (IOM) and Guidelines International Network’s standards to develop clinical guidelines.

Rationale: At the April 20, 2024 meeting, the Board of Regents referred Resolution 15-S24 to Clinical Policy staff for implementation with substitute language. The substitute language is intended to combine the two original resolves into one and accurately reflect that NAM (IOM) created the guidelines.

Resolution 16-S24. Educating the Public about the Appropriate Identification of Healthcare Professionals in Clinical Settings

The Board of Regents extracted Resolution 16-S24 from the Consent Calendar to discuss. Following the discussion, The Board of Regents

VOTED: to refer Resolution 16-S24 for study to Marketing and Public Relations staff with input from Health and Public Policy Committee and Professional Development and Fulfillment Committee.

Rationale: At the April 20, 2024 meeting, the Board of Regents referred Resolution 16-S24 for study to Marketing and Public Relations staff with input from Health and Public Policy Committee and Professional Development and Fulfillment Committee. The BOR referred this resolution for study instead of implementation because this resolution’s intent goes beyond the scope of the professional brand identity campaign and will have a potentially large fiscal impact. Board members noted toolkits are available for

282 Chapters, ACP published a paper on team-based care, and ACP is engaged in the AMA's Truth in
283 Advertising campaign. The Board encouraged the study to be returned to them in as short a time frame as
284 possible.

285

286 **Resolution 17-S24. Promoting and Developing Initiatives Related to Narrative Medicine**

287 *The Board of Regents extracted Resolution 17-S24 from the Consent Calendar to discuss. Following the*
288 *discussion, The Board of Regents*

289 **VOTED:** *to refer Resolution 17-S24 to the Professional Development and Fulfillment Committee for study*
290 *with input from Publication and Medical Education staff.*

291

292 **Rationale:** At the April 20, 2024 meeting, the Board of Regents referred Resolution 17-S24 to the
293 Professional Development and Fulfillment Committee for study with input from Publication and Medical
294 Education staff. The BOR noted the College is currently engaged in multiple activities in support of this
295 resolution and study will more clearly define what additional work could be done and at what cost.

296

297 **Resolution 18-S24. Supporting our Military Membership at the American College of Physicians by**
298 **Developing a Special Dues Category for Active Members of the U.S. Armed Forces**

299 *The Board of Regents extracted Resolution 18-S24 from the Consent Calendar to discuss. Following the*
300 *discussion, The Board of Regents*

301 **VOTED:** *to refer Resolution 18-S24 to the Membership Committee for study.*

302

303 **Rationale:** At the April 20, 2024 meeting, the Board of Regents referred Resolution 18-S24 to the
304 Membership Committee for study. This referral is tied to the current work undertaken regarding
305 modification of the dues structure. Members of the BOR noted that members of U.S. Armed Forces are
306 typically well-supported in their participation with ACP. Members of the BOR who were also members of
307 the U.S. Armed Forces were not in favor of adopting the resolution.

308

309 **Resolution 20-S24. Addressing the Environmental Burden Associated with American College of Physicians**
310 **Publications**

311 *The Board of Regents extracted Resolution 20-S24 from the Consent Calendar to discuss. Following the*
312 *discussion, The Board of Regents*

313 **VOTED:** *to refer Resolution 20-S24 to the Publication Committee for study with input from Membership*
314 *Committee and Financial Policy and Audit Committee.*

315

316 **Rationale:** At the April 20, 2024 meeting, the Board of Regents referred Resolution 20-S24 to the
317 Publication Committee for study with input from Membership Committee and Financial Policy and Audit
318 Committee. This referral calls for consideration of unintended consequences if delivery of *Annals of*
319 *Internal Medicine* defaults to electronic, including fiscal consequences and perception of benefits of
320 membership. A detailed fiscal forecast is requested with this referral.