



2012 Consent Calendar for the Reference Committee on Health of the Public and Science

National Conference of Special Constituencies—Sheraton Kansas City Hotel at Crown Center

1 **The Reference Committee on Health of the Public and Science recommends the following**
2 **consent calendar for adoption (page numbers indicate page in reference committee**
3 **report):**

4
5 **RECOMMENDATION: The Reference Committee on Health of the Public and Science**
6 **recommends the following consent calendar for adoption:**

7
8 **Item 1:** Adopt Substitute Resolution No. 3002 “Addressing the Invisible Wounds of Wars” in lieu
9 of Resolution No. 3002 (pp. 1-2).

10
11 **Item 2:** Adopt Resolution No. 3004 “Backpack Safety in Children” (p. 2).

12
13 **Item 3:** Adopt Substitute Resolution No. 3005 “To Increase Bone Marrow Registries for Minority
14 Populations” in lieu of Resolution No. 3005 (p. 2).

15
16 **Item 4:** Adopt Resolution No. 3006 “Update on HIV Screening” (p. 3).

17
18 **Item 5:** Adopt Resolution No. 3010 “The Great Salt Shake Up: Clarity in Nutrition Labeling
19 (p. 3).

20
21 **Item 6:** Adopt Substitute Resolution No. 3011 “Family Physician Participation in Under and
22 Uninsured Medical Programs” in lieu of Resolution No. 3011 (pp. 3-4).

23
24 **Item 7:** Adopt Resolution No. 3007 “Increasing Targeted HIV Screening for Men Who Have Sex
25 with Men (MSM)” (p. 4).

26
27 **Item 8:** Adopt Substitute Resolution No. 3009 “Helmets during Tornado Alerts” in lieu of
28 Resolution No. 3009 (p. 4).

29
30 **Item 9:** Adopt Substitute Resolution No. 3001 “Certified Medical Examiner Training and
31 Certification Testing” in lieu of Resolution No. 3001 (pp. 4-5).

32
33 **Reaffirmation Calendar:** Reaffirmation of Items A through B under the Reaffirmation Calendar
34 (pp. 5-6).



2012 Report of the Reference Committee on Health of the Public and Science

National Conference of Special Constituencies—Sheraton Kansas City Hotel at Crown Center

1 **The Reference Committee on Health of the Public and Science has considered each of**
2 **the items referred to it and submits the following report. The committee's**
3 **recommendations will be submitted as a consent calendar and voted on in one vote. Any**
4 **item or items may be extracted for debate.**

5
6 **ITEM NO. 1: RESOLUTION NO. 3002: ADDRESSING THE INVISIBLE WOUNDS OF WAR**
7

8 RESOLVED, That the American Academy of Family Physicians (AAFP) urge its
9 members to acquire training and provide in their practice medical care specifically
10 related to trauma and military mental and behavioral health concerns, and be it further
11

12 RESOLVED, That the American Academy of Family Physicians (AAFP) advocate for
13 inclusion in the current certification process a mechanism to demonstrate the clinical
14 qualifications and requisite knowledge of unique military culture and issues relevant to
15 service members and veterans, and be it further
16

17 RESOLVED, That the American Academy of Family Physicians (AAFP) explore
18 providing an appropriate CME curriculum and certificate for excellence in military
19 medicine.
20

21 One of the co-authors of the resolution stated that although the AAFP is working with the
22 Joining Forces campaign, more should be done to help veterans returning from war. The
23 testimony was in favor of the resolution, with the exception of the second resolved clause. There
24 was concern that requiring certification would delay the implementation of the intent of the
25 resolution, and the committee members did not think certification should be mandatory.
26

27 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
28 **No. 3002 be adopted in lieu of Resolution No. 3002, which reads as follows:**
29

30 **RESOLVED, That the American Academy of Family Physicians (AAFP) urge its**
31 **members to acquire training and provide in their practice medical care specifically**
32 **related to sequelae of trauma and military mental and behavioral health concerns,**
33 **and be it further**
34

35 **RESOLVED, That the American Academy of Family Physicians (AAFP) advocate**
36 **for unique military culture and issues relevant to service members, veterans, and**
37 **their families, and be it further**
38

1 **RESOLVED, that the American Academy of Family Physicians (AAFP)**
2 **explore providing an appropriate CME curriculum and certificate for**
3 **excellence in military medicine.**
4

5 **ITEM NO. 2: RESOLUTION NO. 3004: BACKPACK SAFETY IN CHILDREN**
6

7 RESOLVED, That the American Academy of Family Physicians (AAFP) recommend
8 children not carry over the shoulder backpacks greater than 15% of their body weight,
9 and be it further

10
11 RESOLVED, That the American Academy of Family Physicians (AAFP) place
12 information about backpack safety on the Familydoctor.org website.
13

14 The reference committee heard testimony in favor of the resolution. There is concern that the
15 weight of backpacks can be too heavy and children may sustain back injuries as a result. There
16 was discussion for considering rolling backpacks, as some schools will not allow them and
17 rolling backpacks can also cause injuries. It was suggested that information about appropriate
18 backpack use and weight limits be placed on familydoctor.org.
19

20 **RECOMMENDATION: The reference committee recommends that Resolution No. 3004 be**
21 **adopted.**
22

23 **ITEM NO. 3: RESOLUTION NO. 3005: TO INCREASE BONE MARROW REGISTRIES FOR**
24 **MINORITY POPULATIONS**
25

26 RESOLVED, That the American Academy of Family Physicians (AAFP) contact the
27 National Bone Marrow Registry and utilize its funds to evaluate how best to disseminate
28 information regarding the need for minorities to be on the registry, and be it further
29

30 RESOLVED, That the American Academy of Family Physicians (AAFP) join the National
31 Marrow Donor Program for the development of a campaign to increase the number of
32 minority bone marrow donors.
33

34 The reference committee heard testimony in favor of the resolution to encourage the American
35 Academy of Family Physicians to ask the National Marrow Donor Program to utilize registry
36 funds to disseminate information on the National Bone Marrow Registry to family physicians'
37 minority patients.
38

39 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
40 **No. 3005 be adopted in lieu of Resolution No. 3005, which reads as follows:**
41

42 **RESOLVED, That the American Academy of Family Physicians (AAFP)**
43 **contact the National Bone Marrow Registry and encourage the Registry to**
44 **utilize its available funds to evaluate how best to disseminate information**
45 **regarding the need for minorities to be on the Registry, and be it further**
46

47 **RESOLVED, That the American Academy of Family Physicians (AAFP) join**
48 **the National Marrow Donor Program for the development of a campaign to**
49 **increase the number of minority bone marrow donors.**
50

1 **ITEM NO. 4: RESOLUTION NO. 3006: UPDATE ON HIV SCREENING**

2
3 RESOLVED, That the American Academy of Family Physicians (AAFP) strongly
4 recommends that physicians screen for human immunodeficiency virus (HIV) all
5 individuals between 13 and 64 years of age regardless of recognized risk factors, as per
6 CDC 2010 Guidelines, and be it further
7

8 RESOLVED, That the American Academy of Family Physicians (AAFP) make policy that
9 human immunodeficiency virus (HIV) consent be an opt-out process regardless of risk
10 stratification.
11

12 The reference committee heard favorable testimony for the resolution. Risk-based screening
13 does not identify all potential HIV patients. It was recommended that the AAFP adopt the
14 Centers for Disease Control and Prevention (CDC) 2010 HIV Testing Guidelines.
15

16 **RECOMMENDATION: The reference committee recommends that Resolution No. 3006 be**
17 **adopted.**
18

19 **ITEM NO. 5: RESOLUTION NO. 3010: THE GREAT SALT SHAKE UP: CLARITY IN**
20 **NUTRITION LABELING**
21

22 RESOLVED, That the American Academy of Family Physicians (AAFP) make a formal
23 recommendation to the Food and Drug Administration (FDA) to modify nutrition labels
24 such that wherever the word “sodium” appears in written format, it will instead read
25 “sodium (salt).”
26

27 The reference committee heard favorable testimony on this resolution. When family physicians
28 ask their patients to adopt a low-sodium diet, many patients are not aware that sodium is salt
29 and do not realize there is salt in the products they purchase. The word “sodium” is listed on
30 nutritional labels instead of the word “salt.” This resolution would be consistent with The Plain
31 Language Act and help reduce health illiteracy.
32

33 **RECOMMENDATION: The reference committee recommends that Resolution No. 3010 be**
34 **adopted.**
35

36 **ITEM NO. 6: RESOLUTION NO. 3011: FAMILY PHYSICIAN PARTICIPATION IN UNDER**
37 **AND UNINSURED MEDICAL PROGRAMS**
38

39 RESOLVED, That the American Academy of Family Physicians (AAFP) encourage their
40 members via email, regular mail and other communications to participate in local and
41 state medically underserved programs for at least 7% of their patient population.
42

43 Testimony was provided that too many economically disadvantaged people are not receiving
44 medical services and that family physicians need to take the lead. It was estimated that even
45 with the passage of the Affordable Care Act (ACA), approximately 6% of citizens will be
46 uninsured. Since the AAFP advocates health care for all, family physicians are positioned to
47 provide access and care to underserved patient populations. It was recommended that the
48 American Academy of Family Physicians (AAFP) Board of Directors encourage members to
49 participate in programs for the uninsured and underinsured. Constituent chapters could also
50 work with their state programs to encourage family physicians to care for underserved,
51 uninsured, and underinsured. Recognition was given to those family physicians who are caring

1 for this patient population and those in the reference committee hearing expressed their
2 viewpoints enthusiastically.

3
4 **RECOMMENDATION: The reference committee recommends Substitute Resolution No.**
5 **3011 be adopted in lieu of Resolution No. 3011, which reads as follows:**

6
7 **RESOLVED, That the American Academy of Family Physicians (AAFP)**
8 **encourage their members to participate in local and state medically**
9 **underserved programs for at least 7% of their patient population.**

10
11 **ITEM NO. 7: RESOLUTION NO. 3007: INCREASED TARGETED HIV SCREENING FOR MEN**
12 **WHO HAVE SEX WITH MEN (MSM)**

13
14 RESOLVED, That the American Academy of Family Physicians (AAFP) support
15 increased targeted human immunodeficiency virus (HIV) screening for men who have
16 sex with men (MSM) toward reducing the disproportionate infection rate among MSM.

17
18 The reference committee heard testimony in favor of the resolution to make members aware
19 that higher risk populations should be screened more than annually. After counseling the
20 patient, it should be determined by the physician if screening more than annually is appropriate.

21
22 **RECOMMENDATION: The reference committee recommends that Resolution No. 3007 be**
23 **adopted.**

24
25 **ITEM NO. 8: RESOLUTION NO. 3009: HELMETS DURING TORNADO ALERTS**

26
27 RESOLVED, That the American Academy of Family Physicians (AAFP) support the use
28 of helmets for people in tornado alert areas.

29
30 The reference committee heard testimony in favor of the resolution. The Centers for Disease
31 Control and Prevention (CDC) recommends using a helmet during a tornado alert but that
32 people should not compromise safety by looking for a helmet in lieu of seeking shelter. The
33 CDC recommends storing the helmet in the shelter with other safety supplies. The use of a
34 helmet during a tornado may decrease the risk of head injuries due to flying debris.

35
36 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
37 **No. 3009 be adopted in lieu of Resolution No. 3009, which reads as follows:**

38
39 **RESOLVED, That the American Academy of Family Physicians (AAFP) support the**
40 **use of helmets for people in tornado alert areas as an adjunct to seeking**
41 **appropriate shelter.**

42
43 **ITEM NO. 9: RESOLUTION NO. 3001: CERTIFIED MEDICAL EXAMINER TRAINING AND**
44 **CERTIFICATION TESTING**

45
46 RESOLVED, That the American Academy of Family Physicians (AAFP) investigate the
47 educational requirements that will be presented by the Department of Transportation for
48 Certified Medical Examiners and provide an educational opportunity and certification
49 testing as a service to its members.

1 The reference committee heard testimony in favor of the resolution. As a result of a federal rule,
2 approved in April of 2012 and to be implemented in 2014, those who provide medical
3 examinations to workers in occupations such as private and public transportation must be
4 certified. Testimony also included educating AAFP members about the requirements so
5 members can obtain the required certification in order to continue performing the exams.
6 A second resolved clause was added to ask the AAFP to educate members about the new
7 federal requirement for certification of medical examiners. Testimony was heard concerning that
8 the term "Medical Examiner" may prove confusing; however, given that this is the terminology
9 used by the Department of Transportation this language was retained.

10
11 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
12 **No. 3001 be adopted in lieu of Resolution No. 3001, which reads as follows:**

13
14 **RESOLVED, That the American Academy of Family Physicians (AAFP)**
15 **investigates the educational requirements that will be presented by the**
16 **Department of Transportation for Certified Medical Examiners and provide an**
17 **educational opportunity and certification testing, and be it further**

18
19 **RESOLVED, That the American Academy of Family Physicians (AAFP) educate its**
20 **members about the new federal requirements for Certification of Medical**
21 **Examiners in order to continue to do Department of Transportation/Commercial**
22 **Driver License (DOT/CDL) physical exams.**

23 24 **REAFFIRMATION CALENDAR**

25
26 **The following items A and B are presented by the reference committee on the**
27 **Reaffirmation Calendar. Testimony in the reference committee hearing and as discussed**
28 **by the reference committee in Executive Session concurred that the resolutions**
29 **presented in items A and B are current policy or are already addressed in current**
30 **projects. At the request of the NCSC, any item may be taken off the Reaffirmation**
31 **Calendar for an individual vote on that item. Otherwise, the reference committee will**
32 **request approval of the Reaffirmation Calendar in a single vote.**

33
34 (A) Resolution No. 3003 entitled, "Addressing the Obesity Epidemic," the resolved
35 portion which reads as printed below:

36
37 RESOLVED, That the American Academy of Family Physicians (AAFP) encourage
38 family physicians and their practice teams to serve as positive role models for
39 healthy lifestyle choices, and be it further

40
41 RESOLVED, That the American Academy of Family Physicians (AAFP) encourage
42 family physicians to provide their patients with access to available resources (on-
43 line and print) to help them make healthy lifestyle choices.

44
45 The reference committee heard limited testimony and it was acknowledged that the American
46 Academy of Family Physicians (AAFP) already has resources online and in print on healthy
47 eating, physical activity, and emotional well being for physicians and their patients in the
48 Americans In Motion-Healthy Interventions (AIM-HI) program.

49
50 (B) Resolution No. 3008 entitled, "Evidence-Based Screening for Blood Donation,"
51 the resolved portion which reads as printed below:

1 RESOLVED, That the American Academy of Family Physicians (AAFP) request
2 the Food and Drug Administration's Blood Products Advisory Committee and the
3 U.S. Department of Health & Human Services' Advisory Committee on Blood
4 Safety and Availability change the deferral period for blood donation from a
5 permanent deferral to a 12 month deferral for male blood donors who have had
6 sexual contact with another male.
7

8 The reference committee heard testimony in favor of the resolution. The Food and Drug
9 Administration (FDA) created the current rule in 1977 and there is an acute need to update the
10 standard. The AAFP sent a letter of the FDA in 2008 asking them to consider evidence-based
11 information on the 12-month deferral recommendation for male blood donors who have had
12 sexual contact with men. The FDA responded by indicating they have established a rigorous
13 protocol to assure a safe blood supply. The reference committee recommended that AAFP send
14 another letter to the FDA to echo the recommendations of the American Association of Blood
15 Banks and the American Red Cross lifting the permanent deferral to a 12-month deferral for
16 male blood donors who have had sex with men.
17

18 **RECOMMENDATION: That the Reference Committee recommends that items A and B on**
19 **the Reaffirmation Calendar be approved as current policy or as already being addressed**
20 **in current projects.**
21

22 **I wish to thank those who appeared before the reference committee to give testimony**
23 **and the reference committee members for their invaluable assistance. I also wish to**
24 **commend the AAFP staff for their help in the preparation of this report.**

1 Respectfully Submitted,

2

3

4

5

Tamaan Osbourne-Roberts, MD, Chair

6

7 Geetha Ambalavanan, MD, Minority

8 Kiran Khanolkar, MD, IMG

9 Cathleen London, MD, Women

10 Luis Otero, Jr., MD, FAAFP, GLBT

11 Angela Sparks, MD, New Physicians

12 Elvan Daniels, MD (Observer) Women