



Resident 1 Agenda and Resolutions

National Conference of Family Medicine Residents and Medical Students
July 29-31, 2021 – Kansas City, MO

<u>Item No.</u>	<u>Resolution Title</u>
1. Resolution No. 401	National Advance Directive Database
2. Resolution No. 402	Support Financial Literacy for Physicians
3. Resolution No. 403	Gender-Affirming Care as a Core Competency in Residency Curriculum
4. Resolution No. 404	To Promote Local, State, and National Support for Community Hospitals
5. Resolution No. 405	Sexually Transmitted Infections (STIs) During Pregnancy

1 **Resident RESOLUTION NO. 401**

2

3 **National Advance Directive Database**

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5 Introduced by: Jen Nordhauser, MD
6 Mikita Patel, MD

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8 WHEREAS, Hospice and palliative care provide much-needed support while a patient has a
9 chronic disease and/or is dying, and

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11 WHEREAS, during the COVID-19 pandemic, many patients presented to the hospital in
12 respiratory failure and had to be immediately intubated without time for a conversation about
13 code status, , and

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15 WHEREAS, many patients have not had the conversation with their families or primary care
16 physician about their wishes for their advance directive even at an advanced age or with a
17 chronic disease, and

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19 WHEREAS, when said conversations do take place, patients' preferences are often not
20 consistent with what is documented in the medical record or the surrogate decision maker may
21 be omitted, and

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23 WHEREAS, discussions of code status in an acute, distressed setting may cause stress and
24 even interpersonal conflict that could be avoided with a conversation about a patient's wishes
25 well before an emergent situation, and

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27 WHEREAS, the prescription drug monitoring programs have been immensely helpful for
28 tracking the prescription of controlled substances across state lines and are quick and easy to
29 access, now, therefore be it

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31 RESOLVED, That the American Academy of Family Physicians collaborate with other relevant
32 bodies to advocate for a national advance directive database to assist with care planning.

1 **Resident RESOLUTION NO. 402**

2

3 **Support Financial Literacy for Physicians**

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5 Introduced by: Heather Merchut, DO
6 Kreena Patel

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8 WHEREAS, Traditional medical education allows little time for learning about health care
9 business and personal finance, and

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11 WHEREAS, student debt and loan repayment are a significant source of stress for young
12 physicians, with medical students graduating in 2020 with a median total educational debt of
13 \$200,000, and

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15 WHEREAS, family physicians typically come into a large salary an average of 10 years
16 later than their age-matched peers, and

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18 WHEREAS, a 2017 survey of academic medical centers found that residents and fellows
19 had low financial literacy and investment-risk tolerance, high debt, and deficits in their
20 financial preparedness, and

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22 WHEREAS, the current American Academy of Family Physicians' webpage regarding
23 finances in residency and early career is not sufficient, now, therefore be it

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25 RESOLVED, That the American Academy of Family Physicians support financial literacy
26 education requirements in undergraduate and graduate medical education, and be it
27 further

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29 RESOLVED, That the American Academy of Family Physicians provide trustworthy
30 financial literacy information for medical students and physicians, and expand its current
31 webpage to include additional resources specifically focusing on personal financial
32 health.

1 **Resident RESOLUTION NO. 403**

2
3 **Gender-Affirming Care as a Core Competency in Residency Curriculum**

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5 Introduced by: Haley Parsley, MD
6 Rebekka DePew
7 Faizan Memon
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9 WHEREAS, The American Academy of Family Physicians (AAFP) supports gender affirming
10 care for gender-diverse patients, including but not limited to behavioral health care, gender-
11 affirming hormones, puberty blockade, medical procedures, and surgical intervention, and
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13 WHEREAS, 1.4 million gender-diverse identifying adults are known to currently reside in the
14 United States, and many cite lack of providers with sufficient knowledge in gender-affirming care
15 as a significant barrier to access care, and
16

17 WHEREAS, the AAFP recognizes that family physicians are uniquely equipped to provide
18 gender-affirming care given their focus on patient-centered and longitudinal care, and it is fully
19 within the scope, and
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21 WHEREAS, the AAFP already recommends residents be competent in discussing hormone
22 replacement therapy with gender-diverse patients, and
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24 WHEREAS, most family medicine residencies do not currently train residents to competency in
25 gender-affirming hormone therapy, and many trainees do not feel adequately prepared to meet
26 the needs of their gender-diverse patients, now, therefore, be it
27

28 RESOLVED, That the American Academy of Family Physicians support the integration of
29 gender-affirming hormone therapy in core residency curricula, and be it further
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31 RESOLVED, That the American Academy of Family Physicians make an official curriculum
32 recommendation that all Family Medicine Residencies ensure competency of trainees in
33 gender-affirming hormone therapy, and be it further
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35 RESOLVED, That the American Academy of Family Physicians encourage the Accreditation
36 Council for Graduate Medical Education to compile core competencies in gender-affirming care
37 for family medicine residencies.

1 **Resident RESOLUTION NO. 404**

2

3 **To Promote Local, State, and National Support for Community Hospitals**

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5 Introduced by: Rebekka DePew

6 Mikita Patel

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8 WHEREAS, Both rural and urban community hospitals provide a substantial proportion of
9 healthcare, particularly to low-income individuals and individuals with limited access to care, and

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11 WHEREAS, many family medicine physicians complete their medical school and residency
12 training in the community hospital setting, often receiving unique educational experiences not
13 available at academic institutions, and

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15 WHEREAS, closure of community hospitals is increasingly common, leading to decreased
16 access to care among vulnerable populations previously served by the community hospital, and

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18 WHEREAS, closure of community hospitals is, in part, driven by limitations in current insurance
19 reimbursement models, decreased local and state funding to community hospitals, and the
20 exacerbation of structural inequities faced by the patient population served by community
21 hospitals, now, therefore be it

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23 RESOLVED, That the American Academy of Family Physicians create a committee to actively
24 examine the role of community hospitals in family medicine training and the provision of
25 equitable patient care, and be it further

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27 RESOLVED, That the American Academy of Family Physicians advocate for policies at the
28 local, state, and national level that support the continued role of community hospitals and
29 provides adequate funding flow to these institutions.

1 **Resident RESOLUTION NO. 405**

2
3 **Sexually Transmitted Infections (STIs) During Pregnancy**

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5 Introduced by: Jen Nordhauser, MD
6 Mikita Patel, MD
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8 WHEREAS, Rates of neonatal syphilis are increasing rapidly on an annual basis despite
9 existence of clear medical organization guidelines and best practices, and

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11 WHEREAS, rates of chlamydia and gonorrhea during pregnancy are also rising frequently with
12 the potential for perinatal transmission and without evidence of cure through repeat testing, and

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14 WHEREAS, neonatal syphilis causes major morbidity and mortality as up to 40% of infected
15 babies may be stillborn or die from the infection as a newborn, according to the Centers for
16 Disease Control and Prevention (CDC), and

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18 WHEREAS, timely screening and treatment of pregnant women with widely available antibiotics
19 can prevent transmission to a fetus, and

20
21 WHEREAS, concurrent treatment of a pregnant women's sexual partner(s) is supported by the
22 CDC to prevent subsequent reinfection and vertical transmission, now, therefore be it

23
24 RESOLVED, That the American Academy of Family Physicians study best practices for sexually
25 transmitted infection screening during pregnancy and pitfalls that are leading to the increasing
26 incidence of neonatal syphilis and other sexually transmitted infections during pregnancy, and
27 be it further

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29 RESOLVED, That the American Academy of Family Physicians study best practices for
30 expedited partner testing, and be it further

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32 RESOLVED, That the American Academy of Family Physicians collaborate with appropriate
33 parties to accumulate and provide educational materials regarding expedited partner therapy to
34 medical students and residents as well as continuing medical education for family physicians.
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