



Resident 1 Consent Calendar

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

- 1 **RECOMMENDATION: The Resident 1 Reference Committee recommends the following**
2 **consent calendar for adoption:**
3
4 **Item 1:** Adopt Substitute Resolution No. 401 on “National Advance Directive Database.”
5
6 **Item 2:** Adopt Substitute Resolution No. 402 on “Support Financial Literacy for Physicians.”
7
8 **Item 3:** Reaffirm Resolution No. 403 on “Gender-Affirming Care as a Core Competency in
9 Residency Curriculum.”
10
11 **Item 4:** Reaffirm Resolution No. 404 on “To Promote Local, State, and National Support for
12 Community Hospitals.”
13
14 **Item 5:** Reaffirm Resolution No. 405 on “Sexually Transmitted Infections (STIs) During
15 Pregnancy.”



Resident 1 Reference Committee Report

National Conference of Family Medicine Residents and Medical Students
July 29-31, 2021

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

5
6 **ITEM NO. 1: RESOLUTION NO. 401: NATIONAL ADVANCE DIRECTIVE DATABASE**

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

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12 The reference committee heard testimony in support of the resolution. A delegate described the
13 challenges associated with addressing care decisions with families during COVID-19, both with
14 split-family and last-minute decisions on care management. They highlighted the challenges
15 with having varying state-by state notary requirements and expectations for advance care
16 directives. No delegates spoke in opposition to the resolution.

17
18 The reference committee discussed the feasibility and challenges associated with the
19 development of a national database and highlighted the varying challenges that are faced in
20 dealing with cross-state directives. The committee also discussed the concept of state-by-state
21 compacts to allow clinicians access as needed, similar to the prescription drug monitoring
22 program.

23
24
25 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
26 **No. 401 be adopted in lieu of Resolution No. 401 which reads as follows:**

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28 **RESOLVED, That the American Academy of Family Physicians collaborate with**
29 **other national medical specialty organizations and relevant state bodies to**
30 **advocate for each state to have an advance directive database that can be**
31 **accessible by physicians in any state to assist with end-of-life care.**

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37 **ITEM NO. 2: RESOLUTION NO. 402: SUPPORT FINANCIAL LITERACY FOR PHYSICIANS**

38
39 RESOLVED, That the American Academy of Family Physicians support financial literacy
40 education requirements in undergraduate and graduate medical education, and be it
41 further

42
43 RESOLVED, That the American Academy of Family Physicians provide trustworthy
44 financial literacy information for medical students and physicians and expand its current
45 webpage to include additional resources specifically focusing on personal financial
46 health.

47
48 The reference committee heard testimony in support of the resolution. Delegates speaking in
49 favor of the resolution emphasized that physicians often have a background deficit in financial
50 planning and make mistakes throughout medical school and residency on savings and
51 investments. They would like to see more integration of financial planning into the curriculum.
52 No delegates spoke in opposition to the resolution.

53
54 The reference committee noted that the AAFP already provides numerous resources that
55 students and residents can access on financial literacy and planning. The reference committee
56 determined that protected time should be secured to allow for financial literacy education, both
57 within undergraduate and graduate medical education.

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59
60 **RECOMMENDATION: The reference committee recommends that Substitute**
61 **Resolution No. 402 be adopted in lieu of Resolution No. 402 which reads as follows:**

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63 **RESOLVED, That the American Academy of Family Physicians support protected**
64 **time for financial literacy education in undergraduate medical education (medical**
65 **school) and graduate medical education (residency).**

66
67 **ITEM NO. 3: RESOLUTION NO. 403: GENDER-AFFIRMING CARE AS A CORE**
68 **COMPETENCY IN RESIDENCY CURRICULUM**

69
70 RESOLVED, That the American Academy of Family Physicians support the integration
71 of gender-affirming hormone therapy in core residency curricula, and be it further

72
73 RESOLVED, That the American Academy of Family Physicians make an official
74 curriculum recommendation that all Family Medicine Residencies ensure competency of
75 trainees in gender-affirming hormone therapy, and be it further

76
77 RESOLVED, That the American Academy of Family Physicians encourage the
78 Accreditation Council for Graduate Medical Education to compile core competencies in
79 gender-affirming care for family medicine residencies.

80

81 The reference committee heard testimony in favor of adopting the resolution. One individual that
82 spoke in favor of the resolution cited concerns regarding health disparities for the transgender
83 community and the lack of medical training as a potential barrier to access hormone treatment,
84 noting that it was not uncommon for their transgender patients to travel several hours to receive
85 treatment. No delegates spoke in opposition to the resolution.

86
87 The reference committee agreed with the intent of the resolution but debated the focused ask of
88 the ACGME in the third resolved clause, noting that the body was not likely to include a topic of
89 such narrow scope in residency requirements. The reference committee also confirmed that the
90 AAFP's current policy stance supports gender-affirming care and patient treatment, as well as
91 the existence of a residency curricular guideline on the topic of Lesbian, Gay, Bisexual,
92 Transgender, Queer/Questioning, and Asexual Health, which met the concerns cited within the
93 resolved clauses.

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95 **RECOMMENDATION: The reference committee recommends that Resolution No. 403 be**
96 **reaffirmed.**

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98 **ITEM NO. 4: RESOLUTION No. 404: TO PROMOTE LOCAL, STATE, AND NATIONAL**
99 **SUPPORT FOR COMMUNITY HOSPITALS**

100
101 RESOLVED, That the American Academy of Family Physicians create a committee to
102 actively examine the role of community hospitals in family medicine training and the
103 provision of equitable patient care, and be it further

104
105 RESOLVED, That the American Academy of Family Physicians advocate for policies at
106 the local, state, and national level that support the continued role of community hospitals
107 and provides adequate funding flow to these institutions.

108
109 The reference committee heard only the co-author testify in support of the resolution. Having
110 trained at a community hospital, the co-author asserted that community hospitals are a
111 fundamental component of our nation's health care system, providing access to care for
112 vulnerable populations. Support for advocacy for funding of community hospitals was also
113 voiced as a key role in training the health care workforce. No delegates spoke in opposition to
114 the resolution.

115
116 The reference committee discussed AAFP policy on Rural Health, Graduate Medical Education
117 (GME) Financing, and Community and Migrant Health Centers, all of which together support the
118 functions of community hospitals and funding for these hospitals to be able to both provide care
119 to vulnerable communities and train physicians during residency. The reference committee also
120 discussed AAFP advocacy on this topic, including the Academy's advocacy in an April 2019
121 letter in support of the Advancing Medical Resident Training in Community Hospitals Act, a June
122 2021 letter in support of the Doctors of Community Act, and a June 2021 letter in support of the
123 Rural Physician Workforce Production Act. All of these bills establish or bolster residency
124 programs, including those in hospitals, in medically underserved communities facing physician

125 shortages in order to increase access to care. The reference committee discussed that while the
126 resolution calls for the creation of a committee, the Academy is already monitoring this issue
127 closely and can work with existing commissions to further research and advocacy.

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129

130 **RECOMMENDATION: The reference committee recommends that Resolution No. 404 be**
131 **reaffirmed.**

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133 **ITEM NO. 5: RESOLUTION No. 405: SEXUALLY TRANSMITTED INFECTIONS (STIS)**
134 **DURING PREGNANCY**

135

136 RESOLVED, That the American Academy of Family Physicians study best practices
137 for sexually transmitted infection screening during pregnancy and pitfalls that are leading
138 to the increasing incidence of neonatal syphilis and other sexually transmitted infections
139 during pregnancy, and be it further

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

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

148

149 The reference committee heard testimony in support of the resolution. Testimony was in support
150 of expedited partner therapy as a way to treat partners quickly to reduce the rates of neonatal
151 syphilis and morbidity and mortality related to health issues from neonatal syphilis. No delegates
152 spoke in opposition to the resolution.

153

154 The reference committee reviewed the Academy's policy in support of Expedited Partner
155 Therapy according to current Centers for Disease Control and Prevention (CDC)
156 recommendations. The reference committee also reviewed the AAFP's practice manual: AAFP
157 Screening for Sexually Transmitted Infections (STIs), AAFP's tools on assessing patients for
158 STIs, and several *American Family Physician* articles on STI screening, congenital syphilis
159 prevention and treatment, and recommendations and indications for expedited partner therapy.
160 Given the existing policy and breadth of research offered by the AAFP that is available and can
161 be built upon, the reference committee agreed to reaffirm the resolution as current policy.

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163

164 **RECOMMENDATION: The reference committee recommends that Resolution No. 405 be**
165 **reaffirmed.**

166

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

170

171 Respectfully submitted,

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175 Kate Schreck, Designation, Chair

176

177 Jerry Bradley, Member

178 Eli Eisman, Member

179 Eric Sullivan, Member

180 Kayley Swope, Member

181 Asna Tasleem, Member

182 Emma York, Member

183 Tisha Van Pelt, Observer