

1 access, distrust, and lack of patient awareness of the benefits of trials in healthcare.  
2 These minorities include Black Individuals/African Americans, Hispanics, Asians/Pacific  
3 Islanders/Native Hawaiians, and Native Americans (Directive to Take Action); and be it  
4 further

5  
6 RESOLVED, that our AMA monitor the effectiveness of H-460.911 on an annual basis  
7 (Directive to Take Action); and be it further

8  
9 RESOLVED, that our AMA collaborate with AHRQ, FDA, NIH and other relevant  
10 stakeholders to increase public awareness and education on the topic of inclusivity in  
11 clinical trial participation (Directive to Take Action); and be it further

12  
13 RESOLVED, that our AMA specifically submit comments to the FDA on current  
14 proposed industry guidelines for inclusion of underrepresented populations in clinical  
15 trials<sup>1</sup> by September 2025. (Directive to Take Action)

16 Your Reference Committee heard supportive testimony on this item, with some  
17 discussion on amendments to refine implementation. Per AMA policies, your Reference  
18 Committee however proposes amendments to update policy towards person-first  
19 language, and to make ethnicity categories consistent with recommendations from the  
20 Office of Management and Budget. One amendment was proposed to strike an annual  
21 report on this issue, as enrollment by age group is disclosed by the National Institutes of  
22 Health ([here](#), hyperlink available in online report). Additionally, an amendment was  
23 proposed to strike reference to submitting comment on an FDA rule, as that docket has  
24 already been closed as of October 2024, however our AMA did submit comment that  
25 [can be found online](#) (hyperlink available in online report). Therefore, Madam Speaker,  
26 your Reference Committee recommends that Resolution 912 be adopted as amended.

27  
28 **(18) RESOLUTION 913 - SEXUALLY TRANSMITTED**  
29 **INFECTIONS ARE ON THE RISE IN THE SENIOR**  
30 **POPULATION**

31  
32 **RECOMMENDATION A:**

33  
34 **Madam Speaker, your Reference Committee**  
35 **recommends that the first Resolve of Resolution 913**  
36 **be amended by addition and deletion to read as**  
37 **follows:**

38  
39 **RESOLVED, that our American Medical Association**  
40 **advocate and promote the U.S. Preventive Services**  
41 **Task Force (USPSTF) recommendations for STI**  
42 **screening through interested senior older adult**  
43 **advocates ~~such as AARP~~, specifically targeting**  
44 **chlamydia, gonorrhea, human immunodeficiency virus**  
45 **(HIV), HPV and syphilis, for the senior older adult**  
46 **population who are not regularly screened (Directive**  
47 **to Take Action); and be it further**

1           **RECOMMENDATION B:**

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3           **Madam Speaker, your Reference Committee**  
4           **recommends that the second Resolve of Resolution**  
5           **913 be amended by addition and deletion to read as**  
6           **follows:**

7  
8           **RESOLVED, that our AMA continue to promote**  
9           **discussion, collaboration, and consensus among**  
10          **expert groups and medical specialty societies involved**  
11          **in the development of practice guidelines for sexually**  
12          **transmitted diseases in the ~~senior~~ older adult**  
13          **population (Directive to Take Action); and be it further**  
14

15           **RECOMMENDATION C:**

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17          **Madam Speaker, your Reference Committee**  
18          **recommends that the third Resolve of Resolution 913**  
19          **be amended by addition and deletion to read as**  
20          **follows:**

21  
22          **RESOLVED, that our AMA offer CME education**  
23          **regarding best practices for reducing sexually**  
24          **transmitted disease (including oral cancer risks) in the**  
25          **~~senior~~ older adult population through the AMA's Ed**  
26          **Hub as a resource to guide the delivery of clinical**  
27          **preventative services. (Directive to Take Action)**  
28

29           **RECOMMENDATION D:**

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31          **Madam Speaker, your Reference Committee**  
32          **recommends that Resolution 913 be adopted as**  
33          **amended.**

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35           **RECOMMENDATION E:**

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37          **Madam Speaker, your Reference Committee**  
38          **recommends that the title be changed of Resolution**  
39          **913 to read as follows:**

40  
41          **SEXUALLY TRANSMITTED INFECTIONS ARE ON THE**  
42          **RISE IN THE OLDER ADULT POPULATION**

43  
44                  **HOD ACTION: Resolution 913 be adopted as**  
45                  **amended with a title change.**

46  
47          RESOLVED, that our American Medical Association advocate and promote the U.S.  
48          Preventive Services Task Force (USPSTF) recommendations for STI screening through  
49          interested senior advocates such as AARP, specifically targeting chlamydia, gonorrhea,

1 human immunodeficiency virus (HIV), HPV and syphilis, for the senior population who  
2 are not regularly screened (Directive to Take Action); and be it further

3  
4 RESOLVED, that our AMA continue to promote discussion, collaboration, and  
5 consensus among expert groups and medical specialty societies involved in the  
6 development of practice guidelines for sexually transmitted diseases in the senior  
7 population (Directive to Take Action); and be it further

8  
9 RESOLVED, that our AMA offer CME education regarding best practices for reducing  
10 sexually transmitted disease (including oral cancer risks) in the senior population  
11 through the AMA's Ed Hub as a resource to guide the delivery of clinical preventative  
12 services. (Directive to Take Action)

13  
14 Your Reference Committee heard supportive testimony on this item. It was noted that  
15 there has been a rise in STIs in older patients. Health care workers can wrongfully  
16 assume that their older patients are no longer sexually active and are no longer at risk  
17 for STIs, thus decreasing screening and treatment, making this resolution important. An  
18 individual raised concern whether USPSTF screening recommendations applied to older  
19 adults due to the potential for a lack of evidence, yet this resource is the standard for  
20 educating physicians on screening recommendations. Testimony noted that AARP  
21 should be deleted because there is no need to reference a private organization in AMA  
22 policy. Further, the term "senior" was amended to "older adult" to remain consistent with  
23 current AMA policy. Therefore, Madam Speaker, your Reference Committee  
24 recommends that Resolution 913 be adopted as amended.

25  
26 **(19) RESOLUTION 914 - PROTECTING THE HEALTHCARE**  
27 **SUPPLY CHAIN FROM THE IMPACTS OF CLIMATE**  
28 **CHANGE**

29  
30 **RECOMMENDATION A:**

31  
32 **Madam Speaker, your Reference Committee**  
33 **recommends that Resolution 914 be amended by**  
34 **addition to read as follows:**

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36 **RESOLVED, that our American Medical Association**  
37 **support the development of strategies and**  
38 **technologies to strengthen supply chain networks,**  
39 **including economic incentives for building climate and**  
40 **disaster resiliency and redundancy into new or updated**  
41 **facilities, increasing emergency stockpiles of key**  
42 **products, and incentivizing the innovation and**  
43 **adoption of reusable medical products to resist the**  
44 **impact of supply chain disturbances. (New HOD Policy)**

45  
46 **RECOMMENDATION B:**

47  
48 **Madam Speaker, your Reference Committee**  
49 **recommends that Resolution 914 be adopted as**  
50 **amended.**