



## FINAL ACTIONS OF THE 2022 MEDICAL SOCIETY OF VIRGINIA HOUSE OF DELEGATES

### SUMMARY OF ACTION

#### ADOPTED

- 19-111 Medical Care for the Terminally Ill
- 22-101 Medical Society of Virginia Proposed 2023 Budget
- 22-103 A Proposed Bylaws Change Concerning PA Membership
- 22-104 A Proposed Bylaws Change Concerning the Compensation Committee
- 22-105 A Proposed Bylaws Change Concerning Meetings
- 22-202 Mental Health Questions on Credentialing Forms
- 22-203 Supporting Mental Health in Veterans and Veteran's Families

#### ADOPTED AS AMENDED OR SUBSTITUTED

- 22-102 2022 MSV Policy Compendium 10 Year Review
- 22-107 Striving for Adrenal crisis treatment by Virginia EMS responders (SAVE)
- 22-108 Resolution Supporting Maternity Leave
- 22-113 Acknowledging Climate Change as a Public Health Emergency
- 22-205 Improved Reimbursement for Hair Protheses for Individuals with Cicatricial Alopecia
- 22-206 Amending Policy Compendium 25.1.02: Opposition to Criminalization of Reproductive Decision-Making
- 22-207 Opposing Restriction of Medically Appropriate Care
- 22-208 Resolution to Protect Evidence Based Medicine and Safeguard Medical Speech

#### ADOPTED AS AMENDED IN LIEU OF

- Policy 40.3.01- AEDs for Police First Responders
  - (in lieu of Resolution 22-106: MSV Support for Expanding AED Access in Public Spaces Around Virginia).
- Policy 40.9.04- Child Firearm Injury Prevention
  - (in lieu of Resolution 22-109: Gun Safety Resolution).
- Policy 35.2.03- Physician Dispensing
  - (in lieu of Resolution 22-111: Benefit for Patients at Virginia Physicians' Offices)
- Policy 25.3.02 Legislation, Standards of Care and the Patient/Physician Relationship
  - (in Lieu of Resolution 22-210: Health Care Policy Should Be Based Upon Peer Reviewed Research and Evidence-Based Practices

#### REFERRED TO THE BOARD OF DIRECTORS FOR REPORT

- 22-112 Hospital Medical Staff Self-Governance
- 22-114 Housing as Healthcare

#### NOT ADOPTED

- 21-201 Removing Health Questions on Licensure and Credentialing Applications to Promote Physician Wellness
- 22-110 Resolution to Request the Virginia Legislature to Allow Virginia Physicians to Bear Financial Risk in Health Care Policies
- 22-201 Road Safety Resolution
- 22-204 MSV Organizational Structure Proposal

## **FINAL ACTIONS OF THE 2022 MEDICAL SOCIETY OF VIRGINIA HOUSE OF DELEGATES**

- 22-209 Licensure and Discipline: Dissemination of Misinformation

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### 19-111: Medical Care for the Terminally Ill (ADOPTED)

RESOLVED, that the MSV adopt a position of engaged neutrality with regard to medical aid in dying and amends Policy Compendium 25.2.04 as follows:

~~Physician Assisted Suicide and Euthanasia~~

#### Medical Care of the Terminally Ill

In dealing with the terminally ill, suffering patient, physicians may ethically:

1. Withdraw life-prolonging procedures or decline to initiate such treatment in situations in which a patient is terminally ill and has given informed consent for this to be done either personally or through an advance directive, or in instances in which the patient is unable to give such consent it is obtained from an authorized family member or a surrogate.
2. Prescribe medication to a patient even though the potential exists for ~~inappropriate~~ use by the patient that may result in death., ~~provided the physician's intent in prescribing such medication is not to cause death or to assist the patient in committing suicide.~~
3. In situations where the distinction between relieving suffering and causing a terminally ill patient's death may be blurred, the physician should exercise his/her best medical judgment in caring for the patient.
4. Withhold or withdraw treatment from a terminally ill patient that the physician reasonably believes to be futile either in terms of promoting or improving the health of the patient or alleviating the patient's suffering, provided the physician's purpose in so doing is ~~not actively to cause the patient's death, but rather~~ to allow death to occur with minimal suffering.

~~In accordance with the above statements (which are consistent with and supplemented by the views of the Council on Ethical and Judicial Affairs of the American Medical Association 2.17, 2.20 and 2.21), the Medical Society of Virginia strongly opposes the practice of physician assisted suicide or euthanasia.~~

In accordance with the above statements, the Medical Society of Virginia adopts a position of engaged neutrality toward medical aid in dying, which is the process whereby adult terminally ill patients of sound mind ask for and receive prescription medication that they may self-administer to hasten death.

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**21-201: Removing Health Questions on Licensure and Credentialing Applications to Promote Physician Wellness (NOT ADOPTED)**

RESOLVED, the Medical Society of Virginia supports removing licensure and credentialing application questions in the state of Virginia about health conditions that do not currently impair the physician's ability to practice medicine.

**22-101: Medical Society of Virginia 2023 Proposed Budget (ADOPTED)**

RESOLVED, that the Medical Society of Virginia approve, as presented, the proposed budget for 2023.

**22-102: 2022 MSV Policy Compendium 10 Year Review (ADOPTED AS AMENDED)**

RESOLVED, that the Medical Society of Virginia adopt the recommendations in the enclosed report as amended to archive MSV Policy 55.1.09. – Support for Northern Virginia Medical Societies

**22-103: A Proposed Bylaws Change Concerning PA Membership (ADOPTED)**

RESOLVED, that the Medical Society of Virginia House of Delegates amend current bylaws as specified in the provided draft to grant the PA section the right to vote and the right to delegate representation by amending Affiliate Member rights and by reclassifying the PA section as a specialty section.

**22-104: A Proposed Bylaws Change Concerning the Compensation Committee (ADOPTED)**

RESOLVED, that the MSV Bylaws be amended as follows:

**ARTICLE VIII**

**BOARD OF DIRECTORS**

**Section 5. Compensation Committee.** There shall be an eight (8) member Compensation Committee of the Board of Directors comprised of the President, President-Elect, ~~Immediate~~ a Past President, the Speaker of the House of Delegates, the Chair of the Nominating Committee, the Secretary-Treasurer, the Chair of the AMA Delegation, and one member of the MSV Board of Directors as appointed by the President. The ~~Immediate Past~~ President shall ~~serve as~~ appoint the Chair of the Compensation Committee. The Chair may serve multiple one-year terms. The Compensation Committee shall have responsibility for recommending to the Board of Directors adjustments to the compensation and benefits package for the Executive Vice President and Chief Executive Officer which shall be voted on by the Board of Directors in executive session.

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**22-105: A Proposed Bylaws Change Concerning Meetings (ADOPTED)**

RESOLVED, that the MSV Bylaws be amended as follows:

*ARTICLE IV*

ANY MEETINGS OF MEMBERS

*Section 1. Annual Meeting. There shall be an annual meeting of the Society, with the date and place to be determined by the Board of Directors.*

*Section 2. Attendees. Meetings of members of the Society shall be open to all registered members and guests.*

*Section 3. Voting. Active, student and resident physician members may vote on any matter that the House of Delegates determines is of sufficient importance that it should be submitted to the voting members of the Society.*

*Section 4. Virtual Meetings. Any meeting of members described in these Bylaws may be held virtually at the discretion of the President and in consultation with the Executive Vice President and Chief Executive Officer.*

**22-106: MSV Support for Expanding AED Access in Public Spaces Around Virginia (ADOPTED AS AMENDED IN LIEU OF)**

*RESOLVED, that MSV Policy 40.3.01- AEDs for Police First Responders be adopted as amended in lieu of Resolution 22-106 MSV Support for Expanding AED Access in Public Spaces Around Virginia.*

*40.3.01- AEDs for Police First Responders, Skilled Nursing Facilities, and Long-Term Care Facilities*

*The Medical Society of Virginia supports increasing access to AEDs, including funding for skilled nursing facilities, long-term care facilities, and law enforcement agencies to buy AEDs and to equip and train their personnel as first responders to improve cardiac arrest survival.*

**22-107: Striving for Adrenal Crisis Treatment by Virginia EMS Responders (SAVE) (ADOPTED AS AMENDED)**

*~~RESOLVED, that the Medical Society of Virginia work with the Department of Health, all EMS Medical Directors, the Office of EMS, and all other appropriate stakeholders and organizations to educate them on the signs and symptoms of adrenal insufficiency as well allow authorized EMS staff to administer a patient's provided hydrocortisone injection when appropriate medical identification is available.~~ supports*

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increased education and training among EMS Medical Directors and state government stakeholders on the signs and symptoms of adrenal insufficiency. The MSV supports authorized EMS staff to administer a patient's provided hydrocortisone injection when appropriate medical information is available.

### **22-108: Resolution Supporting Maternity Leave (ADOPEd AS AMENDED)**

RESOLVED, the MSV (a) encourage employers to offer or expand paid parental leave policies with job protection following the birth, adoption, foster placement, or newly appointed legal guardianship of a child younger than age 18; ~~for birthing and non-birthing parents~~; (b) work with the state legislature to establish and promote paid parental leave policies; (c) advocate for improved social and economic support for paid family leave to care for newborns or new adoptees; and (d) encourage key stakeholders to implement policies and programs that help protect against parental discrimination.

### **22-109: Gun Safety Resolution (ADOPTED AS AMENDED IN LIEU OF)**

RESOLVED, that MSV Policy 40.9.04- Child Firearm Injury Prevention be adopted as amended in lieu of Resolution 22-109: Gun Safety Resolution.

#### *40.9.04- Child Firearm Injury Prevention*

*The Medical Society of Virginia supports public education programs including safe storage initiatives, to reduce injuries to children from firearms as well as the dangers and legal liabilities of leaving loaded, unsecured firearms accessible to children. Such programs should use evidence-based, developmentally age-appropriate information.*

*Further, the Society will the Medical Society of Virginia will cooperate and collaborate with interested advocacy groups regarding prevention of injury to children by firearms.*

*The Medical Society of Virginia supports requiring safety devices to be sold or transferred with each gun sold or transferred in Virginia, either at a regulated gun store or through any other means such as gun shows.*

### **22-110: Resolution to Request the Virginia Legislature to Allow Virginia Physicians to Bear Financial Risk in Health Care Policies (NOT ADOPTED)**

RESOLVED, that the Medical Society of Virginia ask the Virginia legislature to pass an "enabling Law" that allows Virginia doctors/physicians to control the solvency of a medical insurance plan covering their costs by adjusting their charges appropriately month to month.

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**22-111: Benefit for Patients at Virginia Physicians Offices (ADOPTED AS AMENDED IN LIEU OF)**

RESOLVED, that Policy 35.2.03: Physician Dispensing be adopted as amended in lieu of Resolution 22-111: Benefit for Patients at Virginia Physicians Offices.

35.2.03: Physician Dispensing

*The Medical Society of Virginia supports physician dispensing of prescribed medications at a physician's office or via the mail ~~prepackaged drugs for a fee or charge~~ when it is in the best interest of the patient.*

**22-112: Hospital Medical Staff Self-Governance (REFERRED TO BOARD OF DIRECTORS FOR REPORT)**

*RESOLVED, that the Medical Society of Virginia create and adopt a hospital medical staff member bill of rights to better ensure that all members can more effectively and ethically carry out their professional responsibilities for their patients, and be it further*

*RESOLVED, that the Medical Society of Virginia will expand their policy #30.4.05, Physician & Medical Staff Bill of Rights, to at least include the need for independent medical staff self-governance, and be it further*

*RESOLVED, that the Medical Society of Virginia work with the Virginia Hospital Association and all other appropriate organizations to codify and enforce independent medical staff self-governance.*

**22-113: Acknowledging Climate Change as a Public Health Emergency (ADOPTED AS AMENDED)**

RESOLVED, that the Medical Society of Virginia amend 40.8.03 – Protecting Human Health in a Changing Climate as follows:

40.8.03 – Protecting Human Health in a Changing Climate.

*The Medical Society of Virginia notes the findings of leading U.S. and international scientific bodies that the Earth is undergoing adverse changes in the global climate, and recognizes climate change as an urgent public health threat ~~emergency that threatens the health and welfare of all people.~~*

*The Medical Society of Virginia supports educating the medical community on the adverse effects of global climate change and incorporating the health implications of climate change into the spectrum of medical education and policymaking.*

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*The Medical Society of Virginia encourages physicians to work with local and state health departments to strengthen the public health infrastructure to ensure that the health effects of climate change can be anticipated and responded to more effectively.*

*RESOLVED, that our MSV provide information on the MSV website about governmental and non-governmental resources on climate change available for members to work within the Commonwealth.*

### **21-114: Housing as Healthcare (REFERRED TO BOARD OF DIRECTORS FOR REPORT)**

*RESOLVED, the Medical Society of Virginia (MSV) recognizes long-term, adequate housing as a critical component and social determinant of health, and be it further*

*RESOLVED, the MSV supports evidence-based state and national systems and legislation that expands supply of long-term, safe, and adequate housing.*

### **22-201: Road Safety Resolution (NOT ADOPTED)**

~~*RESOLVED, that the Medical Society of Virginia work with all appropriate organizations and stakeholders to supports legislation and/or regulatory actions requiring all licensed registered motor vehicles with four wheels or more in Virginia have being equipped with emergency supplies in their car, and be it further,*~~

~~*RESOLVED, that the Medical Society of Virginia be involved in determining which safety items should be kept in an individual's car.*~~

### **22-202: Mental Health Questions on Credentialing Forms (ADOPTED)**

*RESOLVED, that the MSV encourage all hospitals, health systems, malpractice insurers, licensing bodies, and health plans regularly review its (professional) healthcare workforce applications, credentialing and/or job review questionnaires, and worker communications to remove or reword questions that identify mental or physical health issues that do not have the potential to impair or interfere with performance expectations commensurate with their job and professional responsibilities, and be it further*

*RESOLVED, these entities consider using the wording suggested by the Federation of State Medical Boards, American with Disabilities Act, American Medical Association, American Hospital Association, the Surgeon General's Advisory, and others.*



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**22-203: Support Mental Health for Veterans and Families of Veterans (ADOPTED)**

RESOLVED, that the Medical Society of Virginia partner with the Virginia Department of Veteran Services to explore strategies that support mental health and prevent suicides in veterans and family members of veterans.

**22-204: MSV Organizational Structure Proposal (NOT ADOPTED)**

RESOLVED, the Medical Society of Virginia (MSV) supports amending the Virginia Constitution to create a state entity to deliver healthcare to its citizens. This is assuming that the entity is the Medical Society of Virginia which is a democratic organization with the ability to vote the way things are managed, and be it further

RESOLVED, that the Medical Society of Virginia and the State of Virginia will collaboratively create the new entity which would be the Medical Society of Virginia.

**22-205: Improved Reimbursement for Hair Protheses for Individuals with Cicatricial Alopecia (ADOPTED AS AMENDED)**

RESOLVED, that the Medical Society of Virginia ~~supports~~ encourages State, local, and community entities to develop policies that expand insurance reimbursement and coverage of hair protheses, thereby improving quality of life and reducing financial burden for those suffering from scarring alopecia.

**22-206: Amending Policy Compendium 25.1.02: Opposition to Criminalization of Reproductive Decision-Making (ADOPTED BY SUBSTITUTION)**

RESOLVED, that the MSV amends policy compendium 25.1.02 by addition and deletion as follows:

*25.1.02- Opposition to Criminalization of Reproductive Decision Making*

*The Medical Society of Virginia will oppose any legislation or ballot measures that could criminalize or impose civil penalty for obtaining or providing evidence-based reproductive health services. ~~healthcare in vitro fertilization, contraception, or the management of ectopic and molar pregnancies.~~*

**22-207: Opposing Restriction of Medically Appropriate Care (ADOPTED BY SUBSTITUTION)**

RESOLVED, that the MSV amends policy compendium 25.1.04 as follows:

*25.1.04 – Opposing Legislative Efforts to Restrict the Provision of Reproductive ~~Healthcare~~ Health Services*

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*The Medical Society of Virginia opposes any government mandated efforts to restrict the provision of medically appropriate care, as decided by the physician and patient, in the management of reproductive health.*

*Comprehensive reproductive health services care includes the provision of contraception contraceptive and or abortion. services. Furthermore, the Medical Society of Virginia opposes the restriction of abortion services.*

*The Medical Society of Virginia further opposes efforts which criminalize or impose civil penalties for obtaining or providing evidence-based reproductive health services, or enforce medically unnecessary standards on healthcare providers providers clinicians and clinics that in turn make it economically or physically difficult for healthcare providers doctors and clinics to provide services.*

### **22-208: Resolution to Protect Evidence Based Medicine and Safeguard Medical Speech (ADOPTED AS AMENDED)**

*RESOLVED, that the MSV supports ~~that the Virginia Board of Medicine shall have the authority in the Board's authority to take appropriate disciplinary action against suspend or revoke the license of a physician or other medical licensee who demonstrates unprofessional conduct by propagating medical misinformation or disinformation.~~*

### **22-209: Licensure and Discipline: Dissemination of Misinformation (NOT ADOPTED)**

*RESOLVED, the Medical Society of Virginia believes that when a physician's board certification is revoked on accusations of alleged professional misconduct for the dissemination of misinformation or disinformation that may threaten public health, such revocation should be based on a clear and convincing evidentiary standard.*

### **22-210: Health Care Policy Should Be Based Upon Peer Reviewed Research and Evidence-Based Practices (ADOPTED AS AMENDED IN LIEU OF)**

*RESOLVED, that Policy 25.3.02 Legislation, Standards of Care and the Patient/Physician Relationship be amended as follows in Lieu of Resolution 22-210: Health Care Policy Should Be Based Upon Peer Reviewed Research and Evidence-Based Practices.*

*25.3.02 Legislation, Standards of Care and the Patient/Physician Relationship*

*The Medical Society of Virginia ~~will opposes efforts to or work to favorably amend legislation, regardless of its primary intent, that~~ interfere with or jeopardize the sanctity of the patient/physician relationship.*

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*The MSV supports ~~or is in conflict with or contrary to~~ broadly accepted, evidence-based standards of care identified by credible medical organizations such as the American Medical Association or the specialties and sub-specialties recognized by the American Board of Medical Specialties.*

*RESOLVED, that MSV further opposes all criminal penalties against physicians and the other healthcare providers who deliver, and the patients who receive, care that is evidence-based.*