

AMERICAN MEDICAL STUDENT ASSOCIATION HOUSE OF DELEGATES 2016 RESOLUTION: A6

INTRODUCED BY:	Shima Ge; Alison Case, M.D.; Katrina Ciraldo
	University of Maryland; Michigan State University College of Human Medicine; Boston University School of Medicine
SUBJECT:	Principles Regarding HIV infected health-care providers
TYPE:	Resolution of Principles

WHEREAS HIV is now a well-understood, treatable disease and

WHEREAS this group of resolutions was presumably created to address the environment of fear and stigma around the epidemic, control and understanding of which now makes them somewhat obsolete

THEREFORE BE IT RESOLVED that the Principles Regarding Human Immunodeficiency Virus (HIV) and HIV-Related Illnesses (p.106-111) section 10 be AMENDED BY DELETION to state:

- 10. In regard to HIV infected health-care providers:
 - a. SUPPORTS the right of physicians and health care workers with known or suspected HIV infection or illness to continue working in their chosen profession and that each seropositive physician or health care worker should be under competent medical care with a provider who is aware of the changing management of HIV infections. It is suggested that medical care should not be obtained from a provider located in the same workplace; (1988)
 - b. ENCOURAGES physicians and health care workers with a debilitating illness (including HIV infection or illness) to voluntarily refrain, either temporarily or indefinitely, from providing patient care at any time when their physical and/or mental capacities become impaired. Physicians and other health care workers with AIDS and opportunistic infections must conform to the same infection control guidelines applicable to those infections that would apply to any practitioner; (1988)
 - c. SUPPORTS the creation at each health care facility of a mechanism to evaluate the ability of physicians and health care providers to provide competent medical care. Such mechanisms shall maintain the individual's confidentiality and right to due process guaranteed to any potentially disabled employee. Each institution should develop personnel policies concerning HIV testing and diseases, taking into account the above recommendations and circulate these to all employees and staff; (1988)
 - d. SUPPORTS the reassignment to non-patient care duties any physician or health-care provider with known HIV infection or illness when: (1988)
 - 1. such reassignment is requested by the individual, or
 - 2. the individual's continued direct involvement in providing patient care would present an identifiable and real risk to the health of either the patient or the individual. Such determinations should be made in accordance with paragraph c above. (1988)

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REPORT OF REFERENCE COMMITTEE A DISCUSSION

BOT: Vote 10-0-0; recommends to adopt with amendments; these members strongly feel that we, unfortunately, are not at the point of refraining from discriminating against physician on the basis of their health conditions (i.e. mental health). Current language of the resolution is a bit archaic and should be changed in order to support the right of workers and appropriately advocate on the behalf of physicians in their chosen professions

BRD: adopt as amended as per BOT recommendations.

PRD: ***

IRD: adopt as amended; members feel that the organization should still be supporting the right of physicians to continue

working

ACTE: adopt as written Premedical Caucus: ***

SUMMARY OF DISCUSSION

PROS: No proposition testimony provided

CONS: The members strongly feel that the wording of this resolution is archaic; members' testimony reflected the opinion that we, as an organization, are not at the point of refraining from discriminating against physician on the basis of their health conditions (i.e. mental health). The majority of the regions and caucuses feel that this organization should appropriately advocate on the right of physicians.

REFERENCE COMMITTEE COMMENTS

The majority of regions and caucuses expressed similar amendments as those recommended by the BOT.

REFERENCE COMMITTEE RECOMMENDATION

Adopt as amended;

SUPPORTS the right of physicians and health-care workers with known or suspected HIV infection or illness to continue working in their chosen profession and that each seropositive physician or health-care worker should be under competent medical care with a provider who is aware of the changing management of HIV infections. It is suggested that medical care should not be obtained from a provider located in the same workplace; (1988)