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CONSTITUTION AND BYLAWS
OF THE
AMERICAN MEDICAL STUDENT ASSOCIATION

ARTICLE I. NAME

The name of this Association shall be the American Medical Student Association.

ARTICLE II. OBJECTIVES

The objectives of the Association shall be as follows:

To be committed to the improvement of health care and health care-delivery to all people; to promote the active improvement of medical education; to involve its members in the social, moral and ethical obligations of the profession of medicine; to assist in the improvement and understanding of world health problems; to contribute to the welfare of all members, including premedical students, medical students, interns, residents and post-M.D./D.O. trainees; to advance the profession of medicine; to work to ensure that medicine reflects the diversity of society, with diversity including but not limited to differences in age, culture, race/ethnicity, sexual orientation and gender identity, gender and disability.

ARTICLE III. MEMBERSHIP

Membership in the Association shall be classified as follows:

Medical Student

Available to medical students enrolled in or on leave of absence from any LCME or AOA accredited or provisionally accredited North American allopathic or osteopathic training program.

International Medical Student

Available to all American and foreign students who are in training at foreign medical institutions listed in the World Directory of Medical Schools maintained by the World Federation for Medical Education and the Foundation for Advancement of International Medical Education and Research.

Premedical Student

Available to any student attending or having graduated from an accredited university in the U.S. who has demonstrated a serious interest in the profession of medicine.

Graduate Member

Available to any person currently engaged in graduate medical education in the U.S. (e.g. current residents and fellows).

Professional Member

Available to any physician who has completed medical training and has demonstrated a serious interest in the objectives of the organization.

All National Presidents and Student Office Fellows shall be given lifetime membership in the organization in the category that is appropriate to their level of training or relationship to the organization at any given time.

Supporting Affiliate

Available to those not eligible for medical, premedical, international medical, resident or professional membership -- includes allied health professionals and naturopathic students.

Resignation

Any member may resign upon written notification to the Board of Trustees and to the local chapter, if there is one. Resignation shall entail forfeiture of all dues paid to the Association and any future benefits.

ARTICLE IV. CHAPTERS

Section 1—Petitioning for a New Chapter

The school petitioning for charter must have a minimum of 5 registered active, medical, premedical or international members no later than sixty (60) days prior to the opening session of the House of Delegates in order for the petition to be considered. There shall not be more than one (1) such chapter at any medical, undergraduate or international school campus. Eligibility for multiple chapters at single campus or joint chapters between multiple campuses will be at the discretion of the Board of Trustees after reviewing the individual school's structure, finances and geographical limitations. Branch campuses providing less than two years of medical education and/or which do not have a Dean shall be considered part of the accredited degree granting institution rather than an independent chapter.

Section 2—Ratification of Charter

A charter shall be granted to the petitioning chapter upon approval of the Board of Trustees and subject to ratification by a simple majority vote at the House of Delegates.

ARTICLE V. SUSPENSION OR REVOCATION OF A CHAPTER

Section 1—Revocation of a Charter by the National Office

The Board of Trustees reserves the right to review and demand correction of any gross violation of either AMSA policy. In worst case scenarios the Board of Trustees (by at least two-thirds vote) reserves the right to revoke the charter of any chapter that either refuses to rectify a situation after the chapter is notified by the national office or one that has done such damage through the misuse of authority and/or of AMSA's name that the Board of Trustees deems it prudent to discontinue association with the chapter. Furthermore, the charter of any chapter may be suspended or revoked by the House of Delegates, independent of the Board of Trustees, upon a vote to that effect by at least three-fourths (3/4) of those voting.

Section 2—Revocation of a Charter by an Individual

1. Any individual may file written charges against any chapter that the accuser feels to have acted in conflict with the letter or intent of the Constitution and Bylaws of the Association, or to have failed to comply with all requirements of the Constitution and Bylaws of the Association, or with any lawful requirement of the House of Delegates. Such charges shall be signed, dated, and filed with the Vice-President of Membership, who shall submit a copy of said charges to the accused chapter and request of the chapter a written reply. He/she shall so present said charges and the reply to the Board of Trustees at its next meeting.
2. If the Board of Trustees fails to dismiss said charges, it shall fix a time and place for the hearing of the charges. If, following the hearing, the Board of Trustees fails to dismiss the charges, it shall advise the accused chapter of its recommendations, and shall make known its decision in a written resolution signed by the President of the Association at least thirty (30) days prior to the next House of Delegates.
3. At the next House of Delegates, the resolution shall be presented and voted upon. Before the voting shall commence, the chapter shall be allowed ten (10) minutes to answer charges. Upon suspension or revocation of the charter by a three-fourths vote of the House of Delegates, the delegation of that chapter shall leave the floor of the House of Delegates.

Section 3—Alteration of Individual Membership

The Board of Trustees reserves the right to alter (including, but not limited to, temporary and permanent revocation, suspension, and termination) the membership status of any individual, by at least two-thirds vote.

Section 4—Petitioning for a New Charter After Revocation

A chapter whose charter is thus revoked may petition for a new charter as specified in Article IV Section I of the Constitution and Bylaws. Chapters that had their charters revoked may not apply for a new charter for one year after such revocation has occurred.

ARTICLE VI. WITHDRAWAL OF A CHAPTER

Section 1—Withdrawal by a Chapter From the National Association

1. If a chapter wishes to withdraw from the Association, it shall present a petition to the Board of Trustees. This petition shall carry the signature of at least two-thirds (2/3) of the student members of the chapter as found on the national membership rolls. The signatures on the petition shall be dated.
2. When the Board of Trustees has established the authenticity of the petition for withdrawal, the chapter shall be considered to have withdrawn from the Association. The President of the Association shall immediately notify the chapter that its petition for withdrawal has been accepted and its charter revoked.
3. The withdrawal of a chapter shall immediately cause the loss of membership privileges of all members of that chapter signing the petition for withdrawal. Members not signing the petition shall retain their membership privileges.

Section 2—Petitioning for a New Charter After Withdrawal

A chapter that has withdrawn from the Association may petition for a new charter in the manner outlined in Article IV, Section I of the Constitution and Bylaws.

ARTICLE VII. LEADERSHIP

Section 1—Qualifications of the Officers and Trustees

Officers of the Association shall be defined as holding a position as a Trustee, Regional Director, or Chair on the Action Committees and Teams Executive Board.

All officers and trustees must be medical student members of the Association, for the duration of their term, unless otherwise noted.

The president-elect will be a medical student member of the Association during the year in which they will hold that position, but may be a professional member of the Association during the year in which they are president.

Section 2—Term of Office

The term of office for all Officers and Trustees of the Association shall be for one (1) year, or until their successors are duly elected and qualified with the exception of the Secretary/Vice President for Internal Affairs, President-Elect/President, TNP Student Editor, and Graduate Trustee who shall serve a two (2) year term. No Officer or Trustee shall be elected to the same position more than twice, and no officer or trustee who has held an office for more than 2/3 of that office’s term, in which the office was vacant, shall be elected to that position more than once.

The above Officers and Trustees shall serve for a total of thirteen months with the final month as Outgoing Officers and Trustees with the exception of the Secretary/Vice President for Internal Affairs position, Graduate Trustee, TNP Student Editor, and President-Elect.

Section 3—Dismissal of the Officers

The Board of Trustees (BOT) shall be empowered to dismiss from his/her position any Officer, Trustee, Immediate Past President, or Executive Director of the Association, who has failed to perform the duties of his/her position, providing that the person in question shall have the opportunity to answer the charges against him/her in writing or in person before the

BOT votes on the question of dismissal. A vote of at least two-thirds (2/3) of the voting members of the BOT shall be necessary for such dismissal.

With regard to the Regional Directors, the local AMSA chapters in the region involved shall be empowered to provide feedback regarding a Regional Director who has failed to perform his/her position, providing that the person in question be given the opportunity to answer the charges against him/her. Furthermore, the appropriate Trustee (i.e. PT, IT or VPM), VPLD and Board of Regional Directors (i.e. BRDs, PRDs, IRDs) shall be empowered to dismiss from his/her position any Regional Director who has failed to perform the duties of his/her position. The Officer in question must be given written warning and then, upon further complaint, the opportunity to answer the charges against them within 14 days. A vote of at least two-thirds (2/3) of said Board of Regional Directors, Trustee and VPLD shall be necessary for dismissal.

With regard to the Vice President for Leadership Development and the Vice President for Program Development, the Executive Board of the Action Committees (ACT Exec) shall be empowered to dismiss the Trustee if he/she has failed to perform his/her duty, providing the person in question be given one warning and then, upon further complaint, the opportunity to answer the charges against him/her in writing or in person before a meeting of the ACT Exec. A vote of at least two-thirds (2/3) of the ACT Exec shall be necessary for dismissal.

ACT Exec shall be empowered to dismiss from his/her position any Action Committee or Team Chair, Committee Coordinator or Campaign Chair who has failed to perform the duties of his/her position. The Officer in question must be given one written warning and then, upon further complaint, the opportunity to answer the charges against them in writing or in person before a meeting of ACT Exec. A vote of at least two-thirds (2/3) of ACT Exec shall be necessary for dismissal. ACT Exec shall fill vacant positions through appointment. The Vice President of Leadership Development shall be responsible for communicating with any Action Committee or Team Chair, Committee Coordinator or Campaign Chair who has failed to perform the duties of his/her position and facilitating the dismissal process.

Section 4—Rules of Succession

In the event of the inability of any Officer or Trustee to fulfill the duties of his/her position for any reason, the vacancy thus created shall be filled in the following manner: in the case of the vacancy in the position of President, the President-Elect shall serve in that position for the remainder of the term; and in the case of a vacancy in the position of Vice President for Membership, Vice President for Leadership Development, Vice President for Programming Development, Secretary or Vice President for Internal Affairs, Premedical Trustee, Graduate Trustee, or International Trustee, the BOT shall designate an individual to serve in that position for the remainder of the term; and in the case of a vacancy in any of the positions of Regional Director, the remaining members of the appropriate Board of Regional Directors (i.e. BRDs, PRDs, IRDs), the VPLD and Trustee of the appropriate caucus (i.e. PT, IT, or VPM), with the opportunity for Chapter representatives in said region to provide feedback, shall appoint individuals for holding said positions to serve in those positions for the remainder of the terms. With regard to the TNP Student-Editor, the EAB will determine the way in which to fill the vacancy, with the input of the BOT.

ARTICLE VIII. HOUSE OF DELEGATES

Section 1—Representation of Medical, International and Graduate Members

A. Medical & International Chapters

Each chartered chapter shall be entitled to representation in the House of Delegates on the basis of one (1) delegate per chapter, with 1 additional delegate gained at 376, 626, and 876 members. Each such delegate shall be an active member of the Association.

The number of delegates to the House of Delegates for the degree granting institution shall be determined by the total number of student members at the main campus, plus those at all of the branch campuses which do not have separate chapter status. The number of members at any given chapter is determined seventy-five (75) days prior to the House of Delegates by the national office.

B. Graduate Members

Graduate Members of the Association as defined by Article III shall be entitled to representation in the House of Delegates on the basis of ten at-large votes. (2008) Each delegate must be a graduate member of the Association. Medical students who have successfully matched and will be entering internship are not considered Graduate Members and may not vote as such in the HOD.

C. Premedical Student Members

Premedical Student Members of the Association as defined by Article III shall be entitled to representation in the House of Delegates on the basis of five at-large votes. Each delegate shall be an active premedical member of the Association.

Section 2—Ex-Officio Representation

Ex-officio members, as defined in the rules report, shall have the right to address the House of Delegates upon recognition by the Chair but shall not have the right to vote.

Section 3—Delegate Selection

The Delegate(s) serve as the local chapter's formal representative(s) to the House of Delegates. Any active member may serve as a Delegate for a local chapter. In addition to the Delegate(s), each chapter may name three (3) Alternate Delegates for each designated delegate. During the proceedings of the House of Delegates, only one individual may be seated per authorized position.

Section 4—Delegate Responsibilities

The primary responsibility of each Delegate/Alternate Delegate is to present the views of his/her chapter before the House of Delegates. Before the Annual Meeting, it is the responsibility of the Delegate(s) and Alternate Delegates to become familiar with the policy of the Association. It is the responsibility of the Delegates and Chapter Officers to call a meeting of the chapter at this time to review all pertinent items. All proposed amendments and resolutions must be reviewed with members of the Chapter in order to adequately represent their viewpoints.

Section 5—Addressing the House of Delegates

Only delegates and ex-officio members of the House of Delegates and members of the presenting reference committee shall have the right to address the House of Delegates, unless the House of Delegates grants an unauthorized member or guest the right to the floor by a simple majority vote.

Section 6—Official Observer Status

- A. Official Observer Status shall be granted to all organizations to which AMSA has an official liaison relationship.
- B. Organizations with Official Observer Status are invited to send one representative to observe the actions of the House of Delegates at the annual meeting. Official observers have the right to speak and debate on the floor of the House upon invitation from the Chair. Official observers do not have the right to introduce new business, introduce an amendment, make a motion or vote.

Section 7—Voting Guidelines

An affirmative vote of at least two-thirds (2/3) of the delegates present and voting shall be necessary for amendments to the Constitution or Bylaws as specified in Article XVII of the Constitution and Bylaws. Otherwise, all questions shall be decided by a majority of the votes cast.

Section 8—Order of Business

The order of business of the House of Delegates shall be determined and published by the Chair of the House of Delegates and shall be distributed to the delegates at the commencement of the Meeting of the House of Delegates. The order of business shall be changed only by a vote to that effect by at least two-thirds (2/3) of those voting.

Section 9—Quorum

The right to vote shall be vested in the duly elected delegates from each chapter. In order for quorum to be established, a majority of the registered delegates must be present at the House of Delegates. Registered delegates will be defined as delegates that are registered at any time before the start of business on the first day of the House of Delegates. During the absence of a delegate from the floor of the House of Delegates, his/her vote shall be vested in the corresponding duly elected alternate delegate from said chapter. No other votes of a proxy nature shall be allowed.

Section 10—Meetings of the House of Delegates

The House of Delegates shall meet annually and at such other times as necessary.

Section 11—Selection of the Chairperson and Vice Chairs

The Vice President of Internal Affairs, who is in the second year of his/her term shall serve as Chairperson of the House of Delegates and shall preside at all sessions of the House of Delegates. The Secretary, who is in the first year of his/her term, shall serve as a Vice Chair. The President-Elect shall serve as Second Vice-Chair.

Section 12—Submission of Resolutions to the House of Delegates

The national office of the Association must receive all resolutions from members or chapters no later than sixty (60) days prior to the opening session of the House of Delegates. The Association shall make copies of these resolutions available to members and local chapter by thirty (30) days prior to the House of Delegates at which they are to be considered. After the deadline for delivery of resolutions to the national office, resolutions may only be submitted to the House of Delegates for consideration with approval of the Board of Trustees.

Section 13—Committees of the House of Delegates

In order to enable to the House of Delegates to function smoothly and efficiently, the Chairperson, Vice-Chairperson, and Second Vice-Chairperson of the House appoint a number of Committees to assist in preparation for the upcoming House of Delegates.

- A. Rules Committee. The Rules Committee consists of the President, the Chairperson of the House of Delegates and the Vice Chairs of the House of Delegates. The function of the Committee is to clarify the working rules of the House of Delegates for the official business sessions in the form of a Rules Committee Report.
- B. Credentials Committee. The Credentials Committee consists of student members of the Association, including a designated Chairperson, and functions to maintain the official roll of those entitled to vote in the official business sessions of the House of Delegates.
- C. Nominations Committee. The Nominations Committee consists of student members of the Association, including a designated Chairperson, who are not candidates for any national office. The functions of the Committee are to ensure that all candidates for national office are members of the association, to present all identified candidates to the general membership and to oversee the electoral process.
- D. Reference Committees. All resolutions submitted before the appropriate deadlines will be referred to the Reference Committees. All proponents and opponents of the resolutions will be given a reasonable opportunity to appear before the Reference Committee to bring testimony on their position. The Reference Committees will report to the House of Delegates the resolutions either as submitted, amended, or rejected, giving pertinent explanation for their recommendations. The House of Delegates will then adopt, defeat, or amend the committee report. The resolutions adopted then become the policy of the Association.
 1. Reference Committee Structure. Each Reference Committee consists of members of the association, including a designated Chairperson chosen by the Chairperson, Vice-Chairperson, and Second Vice-Chairperson of the House of Delegates, from applications solicited from the general membership. In order to avoid any conflict of interest, no person may be a member of any Reference Committee to which he/she has submitted a resolution. Reference Committee members are selected on the basis of their objectivity, past experience and geographic representation.
 2. Reference Committee Responsibilities. Each Reference Committee holds “open” sessions to hear testimony on the amendments and resolutions referred to it. Any individual is invited to contribute, whether he/she speaks for a region, a chapter or simply for themselves.

Each Reference Committee must recommend specific action to the House of Delegates on each referred amendment or resolution. The Committees may not change the intent of any resolution; however, they may modify the wording of resolutions in concert with opinions expressed in testimony. If the Committee

members disagree with the intent of the resolution based on the testimony presented to them, they may recommend rejection to the House of Delegates. The Reference Committee reports should reflect the testimony presented, plus a consideration of the resolution in light of existing policy and other resolutions submitted for consideration by the House of Delegates.

ARTICLE IX. FINANCES

Section 1—Dues

Dues for all AMSA members, including medical, international, premedical, professional and graduate members, shall be set by the Board of Trustees in conjunction with input from the Executive Director and membership department staff.

The dues will not increase by more than ten dollars in any given year, unless authorized the HOD, with no dues increase in two successive years.

Any change in dues will be reported to the HOD citing the reasons for the change and the proposed fiscal impact.

Section 2—Fund-raising Guidelines

No funds may be raised for activities and publications of the Association from sources disapproved by the House of Delegates or the Board of Trustees.

AMSA will publish, on a yearly basis, a list of its current sources of funds from commercial and for-profit sources, which will be available from the national AMSA office upon request.

Section 3—Authority to Expend Funds

Funds may only be expended by order of the Board of Trustees by signatories authorized by the Board of Trustees on checks signed by the Executive Director, or his/her appointee, to defray expenses of the Association, its publications, and to further the purposes of the Association. A minimum of two signatories should be authorized by the Board of Trustees.

Section 4—Copyright Guidelines

AMSA retains the right to copyright any materials or products produced or published under the auspices of AMSA. Such products may be published and marketed only by AMSA, unless otherwise agreed to by the Board of Trustees. The author(s) may continue to use and reproduce the product for personal use, and will retain proprietary rights other than copyright, provided that:

1. the copies are not used to imply AMSA endorsement;
2. the sources, AMSA, and the copyright date are listed;
3. the copies are not offered for sale.

AMSA may require recipients of project funds to sign a copyright release form approved by the Board of Trustees.

ARTICLE X. OFFICIAL RECORDS

Approved proceedings of the Board of Trustees and the House of Delegates shall be open to inspection at any time when requested by a simple majority vote of the House of Delegates. Demand of inspection, other than during the House of Delegates, shall be made in writing addressed to the President of the Association and shall be at the member's expense. Such inspection may be made by an agent or attorney, and shall include the right to make extracts thereof.

ARTICLE XI. PARLIAMENTARY AUTHORITY

The rules contained within the current edition of Robert's Rules of Order shall govern this Association in all cases to which they are applicable, In cases to which Robert's Rules of Order opposes the Constitution, Bylaws and Internal Affairs of this Association the Constitution, Bylaws and Internal Affairs will supersede.

ARTICLE XII. DISCRIMINATION

Neither the Association, nor its chapters, may refuse membership on the basis of race, religion, color, gender, sexual orientation, gender identity, national origin, creed or disabilities, but chapters shall otherwise determine the qualifications of their own members where not inconsistent with the Constitution and Bylaws of the Association. Organizations that discriminate in recruitment and for employment on the basis of race, religion, color, gender, sexual orientation, gender identity, national origin, creed or disabilities may be prohibited from recruitment or offering employment in AMSA's exhibit hall, *The New Physician*, or in other books or items which are, in part or whole, published or endorsed by AMSA.

In the event that there is a suspected or known violation of the antidiscrimination policy or the principles regarding advertisement in AMSA's exhibit hall, in *The New Physician*, or in other books or items which are, in part or whole, published or endorsed by AMSA, the member(s) are to register their complaint to the Board of Trustees who will then follow the appropriate and established organization protocols to address such complaints.

ARTICLE XIII. INSIGNIA

There shall be a seal, logo and other insignia adopted by the Board of Trustees, and these shall be recognized as the official insignia of the Association.

ARTICLE XIV. PUBLICATION

The New Physician shall be the official journal of the Association. The editorial policy of the journal shall be determined by the Board of Trustees and administered by the editor.

ARTICLE XV. AMENDMENTS TO THE CONSTITUTION AND BYLAWS

Proposed amendments to this Constitution and Bylaws shall be considered during the House of Delegates. Any five (5) or more student members of the Association may propose amendments to this Constitution and Bylaws by submitting such proposals to the National Office. These proposals must be received no later than sixty (60) days prior to the opening session of the House of Delegates. The association shall make copies of these resolutions available to chapters by thirty (30) days prior to the House of Delegates at which they are to be considered. An affirmative vote of at least two-thirds (2/3) of the delegates present and voting shall be necessary for the adoption of any such proposed amendments.

For all resolutions seeking to amend these Constitution and Bylaws, the actual vote counts shall be tabulated and maintained as part of the official record of that session of the House of Delegates.

INTERNAL AFFAIRS

OF THE

AMERICAN MEDICAL STUDENT ASSOCIATION

Section I. Elections of the Officers and Trustees of the Association

A. Election Procedures

1. Voting shall be made by secret ballot, with each delegate entitled to cast one vote for each office to be filled.
2. Elections for any national offices in which there are greater than two candidates use a system of instant runoff voting. Under this system, in which each chapter has as many votes as they have delegates to the HOD as outlined in Article VIII, each delegate ranks the candidates in order of preference. The counting of ballots simulates a series of runoff elections. All first choices are counted, and if no candidate wins a majority of first choices, then the last place candidate is eliminated. Ballots of voters who ranked the eliminated candidate first are redistributed to their next choice candidates, as indicated on each voter's ballot. Last place candidates are successively eliminated and ballots are redistributed to next choices until one candidate remains or a candidate gains a majority of votes. In case of a tie the candidates receiving the two (2) highest number of votes in the first ballot shall be included in the second balloting. Additional balloting for said office shall continue until one (1) candidate shall receive a majority of votes cast on a re-ballot and he/she shall be elected to said office.

B. President-Elect, Vice President for Membership, Secretary, Vice President for Leadership Development, and Vice President for Program Development

1. The House of Delegates shall elect the President-Elect, Vice President for Membership, Secretary, Vice President for Leadership Development, and Vice President for Program Development of the Association. As soon as it is technologically feasible, with the approval of the BOT, a President-Elect shall be elected prior to the deadline for submitting a rank-list to the National Residency Matching Program. The President-Elect shall automatically assume the role of President of the Association in May following their election.
2. Candidates for President-Elect, Vice President for Membership, Vice President for Leadership Development, and Vice President for Program Development offices shall have had prior AMSA leadership experience as either a national Trustee or Officer. In the event that less than two candidates with this experience requirement have declared their candidacy 30 days prior to election, the candidacies of medical student members without this prior experience shall be accepted. Candidates for all elected Board of Trustees positions shall be required to declare candidacy seven (7) days prior to elections. No candidates for these positions shall be permitted to run from the floor.
3. Challenges to offered credentials shall be received by the Nominations Committee and reviewed before 5:00 PM on the day preceding elections with the candidate, prior to which he/she may revise an offered curriculum vitae or statement of candidacy. If such revised credentials are subsequently found to be false, the candidate will be disqualified, and the runner-up shall be elected in his/her place. The Board of Trustees will fill vacancies in such positions.
4. Challenges to the election results shall be reported to the Nominations Committee within ten (10) days from the election. The Nominations Committee will then investigate the challenge and report their preliminary findings to the rising Vice President for Internal Affairs. The Vice President for Internal Affairs will then be responsible for reporting all information on challenges to the Board of Trustees and presenting a motion based on the Nominations Committees recommendations.

5. All national officers shall take office on May 1st of the leadership year to which they were elected.
6. Candidates shall be permitted to run for more than one national leadership position including positions on the Board of Trustees. Candidates running for more than one position shall submit a rank order list; and if they are elected to more than one position, they will be given the position that was ranked the most preferred.

C. Regional Directors, International Trustee, International Regional Directors, Premedical Trustee, Premedical Regional Directors

1. Regional Directors must be medical student members of the Association and shall be elected by the constituents of their corresponding region.
2. The International Trustee and International Regional Directors must be international members of the Association. The International Trustee shall be elected by the House of Delegates. International Regional shall be elected by the Association's international constituency.
3. The Premedical Trustee and Premedical Regional Directors must be premedical members of the Association and shall be elected by the Association's premedical constituency. Each region shall have one Premedical Regional Director.
4. Whenever possible all candidates for regional office should attend a school or reside within the region they wish to represent in the upcoming year.
5. Each participating chartered chapter shall be entitled to one (1) vote. If there are greater than two candidates, the election shall use a system of instant runoff voting as outlined in Sec. I(A)2.
6. In the case of a tie, the individual conducting the election shall vote. This ballot shall be cast during the voting period and counted only in case of a tie, in which case it will be used to break the tie and determine the winner.
7. Disputes of election procedure or challenges of election results shall be made as described in Sec. I(B)4.

D. Graduate Trustee

1. The Graduate and Professional Caucus shall elect the Graduate Trustee. Any candidate for Graduate Trustee must be a member of the Association as defined by Article III and satisfy one of the following criteria: 1) Have earned an M.D. or D.O. degree; or 2) Anticipate earning an M.D. or D.O. degree by July 1 of the current year AND have previously served as a national officer in the Association.
2. Qualifications to participate in voting for the Graduate Trustee shall be:
 - a. Professional member of the Association as defined in Article III, Section I, or
 - b. Medical member of the Association as defined in Article III, Section 3, subsection A, who also meets the qualifications of being a graduating senior of the Association, expecting to receive an M.D. or D.O. degree in the same academic year of the election.
 - c. Graduate member of the Association as defined in Article III.
3. Each member of the Professional Caucus shall be entitled to one (1) vote in the election of the Graduate Trustee.
4. In instances when there are greater than two candidates for Graduate Trustee, the election shall use a system of instant runoff voting outlined in Sec. I(A)2.

E. Selection of Action Committee Coordinators and Election of Committee Chairs

1. Medical, premedical, and international student members of the Association shall be eligible for appointment to Action Committee Coordinator positions and election to Action Committee Chair positions.
2. An application will be generated by the Vice President for Leadership Development and Vice President for Program Development that will address specific items of importance for each of the specific positions being

appointed. Applicants will be required to submit this application at a deadline set by the Executive Board of the Action Committees and Teams in accordance to the academic calendar.

3. Selection of Coordinators: The outgoing Chairs of the Committee and Team that supervise each respective Coordinator shall review the applications for each Coordinator position and make a recommendation to the Executive Board of the Action Committees and Teams. The members of Executive Board of the Action Committees and Teams will review the applications in light of this recommendation and use a ranking system of instant runoff voting to appoint a Coordinator. The Vice President for Program Development shall cast a vote that will only be counted in the event of a tie. In the event of the resignation of a Coordinator with input from the Vice President for Program Development and the remaining members of the Action Committee or Team, the Chair shall determine, depending on the time at which the resignation occurred in the year, whether the Committee or Team should replace the vacancy or leave it unfilled. If replacing the coordinator, the Chair shall publicize the vacancy and may personally contact one or more possible candidates. The Executive Board of Action Committees and Teams shall review the Chair's nominations and select a replacement.
4. Election of Chairs: Elections for Chairs shall occur as announced by the Executive Board of the Action Committees & Teams and approved by the Board of Trustees. All candidates must declare by a pre-designated deadline and no candidate may run from the floor. In the event no qualified candidate declares by the predetermined deadline or the resignation of a Chair, the Executive Board of the Action Committees shall seek applicants to fill the position by appointment. The rules of elections including the system of balloting and voting shall be proposed by the Executive Board of the Action Committees and Teams and voted upon by the Board of Trustees 60 days prior to the elections. The rules of the election as passed by the Board of Trustees shall then be made available for review by potential candidates electronically. The Vice-President for Leadership Development, the Secretary, and the Vice-President for Internal Affairs shall be responsible for confirming the election and notifying winners.

F. National Leadership Code of Election Conduct

Members of the AMSA national leadership, including all Trustees and Officers shall not offer unsolicited opinions about candidates for any position. Upon being asked about a candidate, leaders may speak personally about a candidate if, and only if, they clearly state that they do not speak on behalf of the AMSA national leadership. At no time should an AMSA National Leader make a statement about a candidate when serving in his or her official capacity (e.g., running regional time, serving as a speaker on a panel, facilitating a session, etc.)

G. Code of Election Conduct

1. No distribution of campaign materials. The Nominations Committee chair, with the assistance of the Secretary, Vice President for Internal Affairs, and President-Elect, will determine how the candidates will identify themselves as such.
2. No form of mass communication will be utilized by any candidate in efforts to "campaign" with the general membership. This includes the prohibition of posting candidacy on Facebook or social media outlets. Candidates will submit application materials and these materials will be uniformly disseminated by the Secretary, Vice President for Internal Affairs, and President-Elect.
3. Nominees shall publicly address the membership only at times designated by the Nominations Committee.
4. Receptions and/or hospitality should not be used for promotion of an individual candidate.
5. No member of AMSA shall recklessly or negligently disseminate information on behalf of a candidate about another AMSA member or candidate. In addition, no AMSA member shall take any action to unduly positively or negatively affect the election outcome of any candidate, including but not limited to posting on Facebook, Twitter, Inspiration Exchange, blogs or other social media. If this occurs, any knowing individual is obligated to notify the Nominations Committee in writing immediately, preferably by 5 p.m. the night prior to the election. If it is submitted after 5 p.m., then the Nominations Committee shall have the power to postpone the election for that office to review the allegations. If the allegation of misconduct is found to be valid or will discredit the organization, the Nominations Committee shall determine the best course of action. If the allegation is submitted after the election for that office the Nominations Committee shall determine the best course of action, which includes but is not limited to re-opening election for that office.

6. The Secretary, the Vice President for Internal Affairs, and/or the President-Elect shall advise the Nominations Committee as necessary and conduct the HOD as appropriate.
7. If the Vice President for Internal Affairs is a candidate for national office, then they will recuse themselves from the oversight of the nominations committee and all decisions related to elections in which they are a candidate.

Section II. The Board of Trustees

- A. The Board of Trustees (BOT) of the Association shall be composed of the President, President-Elect, Vice President for Membership, Vice President for Internal Affairs, Vice President for Leadership Development, Vice President for Program Development, Secretary, Premedical Trustee, International Trustee, Graduate Trustee, and *The New Physician Magazine* Student Editor, all of whom are voting members of the BOT. In addition, the Immediate Past President and the Chief Executive Officer shall serve as ex officio, nonvoting members.
- B. The BOT will meet a minimum of four times per annum. Emergency meetings of the BOT may be called by a majority of the members of the Board.
- C. The BOT shall have charge of the property and financial affairs of the Association and shall perform such duties as are prescribed by law for trustees of corporations. It will be the responsibility of the BOT to see that the policy determined by the HOD is carried out and interpreted correctly, and that the Association is responsive to local chapters and membership.
- D. The BOT shall bear the responsibility of assuring the HOD and the Membership-at-Large that it is functioning responsibly: that it is carrying out and interpreting the Association's policy in light of the sentiment of the Membership-at-Large and the HOD.
- E. The Board of Trustees shall not amend or change AMSA's Constitution and Bylaws section by creating interim policy of the Association. The Board of Trustees shall be authorized by a 2/3 vote to create new policies in the Internal Affairs and Principles section of the PPP if timely issues arise between meetings of the House of Delegates. Creation of and implementation of interim policy in Principles shall occur in consultation with the appropriate national leadership and Student Office Fellow. The passing of any interim policy of the Association shall be voted on at the next House of Delegates meeting for official adoption.

Section III. The Board of Regional Directors

The Vice President for Membership shall chair the Board of Regional Directors and serve as a non-voting member of the Board except in cases of a tie. Each Regional Director will serve as a voting member of the Board.

Section IV. The Board of International Regional Directors

The International Trustee shall chair the Board of International Regional Directors and serve as a non-voting member of the Board except in cases of a tie. Each International Regional Director will serve as a voting member of the Board.

Section V. The Board of Premedical Regional Directors

The Premedical Trustee shall chair the Board of Premedical Regional Directors and serve as a non-voting member of the Board except in cases of a tie. Each Premedical Regional Director will serve as a voting member of the Board.

Section VI. Action Committees and Teams

A. Overview

1. Action Committee Formation: Action Committees represent the long-term, broad, ongoing organizational priorities of the Association, as defined in the Constitution and Bylaws. Creation of a new Action Committee must be accompanied by a Statement of Goals, Means and Purpose, as well as a justification to the House of Delegates of the institutional need for and fiscal impact of a new Action Committee. Membership is open to all members of the Association.

2. Action Committees of the Association: The Action Committees of the Association will have a minimum of 8 committee/teams but will not exceed 10 committees/teams. Changes to the structure will be discussed among the Executive Committee of the Action Committees and Teams and voted upon by motion to the Board of Trustees.

Section VII. Executive Board of the Action Committees and Teams (ACT Exec)

The Vice President for Program Development shall Chair the Executive Board of the Action Committees and the Vice President for Leadership Development shall serve as Vice-Chair. Each Action Committee and Team Chair will serve as a voting member of the Board. The President of the Association and Campaign Directors shall be *ex officio* members of the Executive Board. The National President is empowered to break ties when necessary in voting.

Section VIII. IFMSA

A. AMSA as the National Member Organization

AMSA as the National Member Organization representing the USA within the International Federation of Medical Students' Associations:

1. AMSA shall be the official National Member Organization (NMO) representing medical students at USA medical schools to the International Federation of Medical Students' Associations (IFMSA).
2. AMSA's official title within the IFMSA shall be AMSA-USA.
3. There shall be an IFMSA advisory council charged with the facilitation of exchanges with oversight of relevant staff or BOT member, and which shall be AMSA's representatives to the IFMSA.
4. The allotment of revenues from IFMSA specific AMSA programs will be discussed with the IFMSA advisory council prior to final approval by the BOT.

Section IX. Campaigns

Campaigns provide content and programming expertise to the Association in an area of key importance with respect to its strategic priorities or core values. These groups provide a venue for participation for members with an interest in one particular area of focus by way of developing programming in response to an emergent issue of key importance. Notably, they may also serve in the capacity to steer a student fellow should she or he desire, but they may function in a capacity that is broader than this with regard to the creation and execution of programming, organizing, and so forth.

The structure and function of a Campaign is as follows:

1. Charter

- a. Campaigns are chartered by majority decision of the Executive Board of the Action Committees & Teams. The charters will be reviewed on a rolling basis and Campaigns will be notified of the time of the meeting to discuss the charter so they may call in to participate. Campaign Charters may be approved for one or two years, depending on the length requested at the time of charter application.

In order for the group to continue without lapse, a new charter must be received by the Secretary, Vice President for Internal Affairs and Vice-President for Program Development 60 days prior to expiration of the previous charter. The Executive Board of the Action Committees & Teams may revoke a charter by majority decision at any time should need arise. A written warning will be provided in advance barring extreme circumstances.

- b. The Campaigns may be authorized operating budget funds to be allocated by the Executive Board of the Action Committees.
- c. The Campaign shall be required to submit an annual report to the Vice-President for Program Development outlining progress, problems, and budget adjustment requests. Failure to submit these reports may result in the revocation of a charter.

2. Leadership

- a. The Campaign shall be headed by a Director. The Director shall be recommended for appointment by the Campaign seeking charter and confirmed by the Executive Board of the Action Committees & Teams.
 - i. The Campaign Director shall be directly supported by the Vice President for Program Development.
 - ii. She or he shall be trained at the same time and in the same manner as the Chairs of the Action Committees & Teams.
 - iii. She/he shall serve as an ex officio member of ACT Exec.
- b. The Campaign Director shall be responsible for the operations of the Campaign and be its spokesperson. She or he shall be trained in the same manner as the Chairs of Action Committees & Teams.

3. Support

- a. The Campaigns are supported with fiscal and other resources through the Executive Board of the Action Committees & Teams.
- b. The Campaigns are also eligible to apply for grants through the Executive Board of the Action Committees & Teams
- c. The Campaigns shall also have access to the resources of the National Office at the discretion of the Executive Director.

Section X. Interest Groups

The Interest Groups of the Association serve as a venue for small groups of students to discuss a particular topic of interest, including specific issues in the practice of medicine or specific medical and surgical careers or specialties. These offer an opportunity for issues that do not otherwise fit into the programming structure of the Association and are afforded organizational time at the National Convention and the opportunity to propose programming at Convention.

The structure & function of an Interest Group is as follows:

1. Charter

- a. Interest groups are chartered by the Executive Board of the Action Committees by majority vote and are valid for two years. The charters will be reviewed on a rolling basis and Interest Group leaders will be notified of the time of the meeting to discuss the charter so they may call in to participate. The Executive Board of the Action Committees & Teams may revoke a charter by majority decision at any time should need arise. A written warning will be provided in advance barring extreme circumstances.

2. Leadership

- a. The Interest Group shall be headed by a Facilitator and a Premedical Representative shall be selected in the same manner as the Action Committee & Team Coordinators. In the event that a position is unfilled Facilitators and Premedical Representatives shall be appointed by the Executive Board of the Action Committees & Teams.
 - i. The Facilitator and Premedical Representative shall be directly supported by the Vice-President for Leadership Development and Vice President for Program Development
 - ii. Each Interest Group shall be required to submit a semiannual report to the Vice-President for Program Development outlining progress and problems. Failure to submit these reports shall result in the revocation of a charter and/or dismissal of a Facilitator.
 - iii. Additional members involved in the Interest Group shall be referred to as members and shall not be official national leaders of the Association.
 - iv. Interest Group Facilitators and Premedical Representative shall be members of the Association or naturopathic students from CNME schools.

3. Support

- a. Interest Groups are supported with fiscal and other resources through the Executive Board of the Action Committees & Teams.
- b. Interest Groups are also eligible to apply for grants through the Executive Board of the Action Committees & Teams
- c. Interest Groups shall also have access to the resources of the National Office at the discretion of the Executive Director.

Section XI. The D.O. Advisory Board

The DO Advisory Board provides expertise on issues related to Osteopathic medical students. Through this expertise it seeks to ensure that membership benefits and programming put on by AMSA are inclusive of osteopathic student members. It also seeks to advocate for the concerns of the osteopathic student members of AMSA and ensure that AMSA national

is aware of relevant events, legislation and initiatives that are of interest to osteopathic AMSA members and to AMSA as a whole.

1. Charter

- a) The DO Advisory Board is a standing group that reports to the AMSA national president
- b) The BOT can remove the charter of the DO Advisory Board by a vote of 2/3 of the BOT

2. Leadership

- a) The DO Advisory Board will be headed by a Chair who will be recommended by the DO Advisory Board members and confirmed by the BOT by the close of National Convention. The Chair will report to the AMSA National President twice a year or as determined by the AMSA National President.
- b) The Advisory Board members shall be empowered to provide feedback regarding an Advisory Board Chair who has failed to perform his/her position. The Chair in question must be given one written warning and then, upon further complaint, the opportunity to answer the charges against them in writing or in person before a meeting of BOT. A vote of at least two-thirds (2/3) of BOT shall be necessary for dismissal. The BOT shall fill vacant positions through appointment.

3. Support

- a) There will be no fiscal support provided to the DO Advisory Board by AMSA unless determined necessary by the BOT.
- b) The DO Advisory Board will have access to the resources of the national office as determined by the Executive Director.

Section XII. The N.D. Advisory Board

The ND Advisory Board provides expertise on issues related to Naturopathic Medicine and ICAM, including research and patient safety advancements. It also seeks to strengthen the lines of communication between Naturopathic medical students and AMSA to ensure mutual awareness of relevant events, legislation and initiatives that are of interest to AMSA as a whole. The ND Advisory Board aims to align Naturopathic medical students' legislative efforts with AMSA initiatives.

1. Charter

- a) The ND Advisory Board is a standing group, which includes at least one NMSA National leader, and reports to the AMSA national president
- b) The BOT can remove the charter of the ND Advisory Board by a vote of 2/3 of the BOT

2. Leadership

- a) The ND Advisory Board will be headed by a Chair who will be recommended by the ND Advisory Board members and confirmed by the BOT by the close of National Convention. The Chair will report to the AMSA National President twice a year or as determined by the AMSA National President.
- b) The Advisory Board members shall be empowered to provide feedback regarding an Advisory Board Chair who has failed to perform his/her position. The Chair in question must be given one written warning and then, upon further complaint, the opportunity to answer the charges against them in writing or in person before a meeting of BOT. A vote of at least two-thirds (2/3) of BOT shall be necessary for dismissal. The BOT shall fill vacant positions through appointment.

3. Support

There will be no fiscal support provided to the ND Advisory Board by AMSA unless determined necessary by the BOT.

Section XIII. The Chief Executive Officer

The Chief Executive Officer (CEO) shall be appointed by a joint commission of the Board of Trustees and the Board of Directors of the AMSA Foundation, and shall serve as the chief administrative officer of the Association. He/she shall have supervision of its administrative, membership and business personnel and direct the operations of the offices of the Association.

The CEO shall prepare an annual budget for review by the Board of Trustees. The CEO shall undergo an annual performance review that will be conducted by representatives of the Board of Trustees. The CEO shall attend the annual convention and the meetings of the Board of Trustees and the Board of Trustees and shall ensure that minutes of these meetings shall be prepared and distributed to the members of the Board of Trustees and shall perform such other duties as may be designated in this Constitution or in the Bylaws or by the Board of Trustees of the Association.

Section XIV. Student Office Fellows

For each year that the Board of Trustees (BOT) authorizes, as indicated by allocated funding through the annual budget, the Association shall have Student Office Fellow (SOF) positions. SOFs shall be members of AMSA in good standing that work in the National Office full-time for a period of one year. The fellowship description will be determined and agreed upon by the CEO, BOT and current SOFs. The position(s) will be filled by an application process and will be hired by the CEO with input from an Advisory Committee composed of the CEO, the National President, the SOF currently holding the position, member of the Board of Trustees appointed by the BOT, member(s) of the ACT Executive Board appointed by the ACT Executive Board, and a full-time AMSA or AMSA Foundation staff member designated by the CEO. The selection shall occur prior to the deadline for submitting a rank-list to the National Residency Matching Program. If an SOF position will likely not be funded for the upcoming fiscal year, the BOT will make every effort to inform potential applicants early, prior to the application deadline.

Section XV. Liaisons of the Association

The Association maintains formal liaisons with several organizations to promote effective cooperation and to provide them with the medical student perspective.

A. Purposes of the Relationship

1. to promote broad consideration of issues in medical education, health care and health-care delivery;
2. to promote the consideration of policy of the Association as set forth in the Preamble, Purposes and Principles of the American Medical Student Association;
3. to gather information concerning the purposes and activities of these organizations; and
4. to facilitate the development of inter-organization programs and activities of mutual benefit.

Section XVI. Structure of the Regions

The geographic breakdown of the regions is determined by the House of Delegates. The region serves as the focal point for articulating the concerns of medical students from a given geographic area of the country. The five (5) regions of the Association are geographically distributed as follows:

Region I	New Hampshire
	Vermont
	Massachusetts
	Maine
	Rhode Island
	Connecticut
	Canada
	New York
	New Jersey
	Delaware

Region II	Michigan
	Ohio

Indiana
Illinois
Wisconsin
Minnesota
Iowa
Nebraska
North Dakota
South Dakota

Region III

North Carolina
South Carolina
Georgia
Florida
Kentucky
Tennessee
Alabama
Mississippi
Puerto Rico

Region IV

Louisiana
Oklahoma
Texas
Missouri
Kansas

Region V

Washington
Idaho
Montana
Oregon
California
Nevada

Utah
Wyoming
Colorado
Arizona
New Mexico
Alaska
Hawaii

International Regions

All Caribbean school chapters
All other international school chapters

Section XVII. Structure of Local Chapters

The local chapter serves as the official representative body of constituent members to the national organization. The structure of the local chapter is determined by the local members.

- A. Chapter Officers. Each chapter of the Association selects a Chapter Liaison. The creation of other offices and positions is at the discretion of the local chapter.
- B. Responsibilities of Chapter Officers. All duties and responsibilities for each of the chapter officers are determined by members of the local chapter. However, the House of Delegates, in order to maintain communication and facilitate activities of the Association, requires certain minimal functions to be accomplished by the local officers. The functions of the chapter officers are as follows:
1. provide ongoing feedback to the Regional Director and national officers on the concerns of chapter members relative to policy, programs and activities of the Association;
 2. serve as the focal point for communicating local chapter activities to the national office and Regional Director;
 3. coordinate programs and activities at the chapter level;
 4. coordinate the annual membership drive;
 5. facilitate activity within the chapter and communicate through periodic chapter meetings to discuss and review issues of concern to medical students; and
 6. be members of the Association in good standing at the time of or within 30 days of their election and during their term of office.
- C. Responsibilities of the Chapter Liaison. The primary functions of the Chapter Liaison are as follows:
1. serve as primary contact for the national office in the receipt and distribution of pertinent information and materials relating to the organization and issues of concern to medical students;
 2. coordinate local chapter activities and work with other local chapter officers to accomplish responsibilities delineated above;
 3. attend the annual chapter officer training or fail to remain in good standing within the National Organization;

4 attend the National Convention;

- D. Chapter Officer Selection. The House of Delegates encourages the election of all chapter officers in an open meeting of local members. The national office should be notified by the outgoing chapter liaison immediately upon the election of new chapter officers. All chapter officers must be members of national AMSA.

Section XVIII. Annual Meeting

The purpose of the Annual Meeting is to provide a forum for the consideration of issues pertinent to health care, medical care, medical education and health care delivery. Numerous educational programs, often participatory in nature, are offered. This is an opportunity for the members of the Association to meet other medical and health science students from throughout the United States and the world. All AMSA members are encouraged to attend and participate in the Annual Meeting. In addition, the House of Delegates meets during the Annual Meeting to formulate the policy of the Association.

- A. Annual Meeting Site and Date Selection. After reviewing possible sites for the Annual Meeting, the Board of Trustees selects a date and location for the Annual Meeting at least one year in advance. Every attempt is made to offer the membership geographic parity in site selection. Any member may submit suggestions to the Board of Trustees as to possible sites for the Annual Meeting. The Annual Meeting will be held at fully accessible locations, as defined by the Americans with Disabilities Act of 1990.
- B. Financial Assistance to Members Attending the Annual Meeting. The Association attempts to assist with available resources the Delegate(s), Alternate Delegates and/or individual members in defraying costs to attend the Annual Meeting.

Section XIX. AMSA Conferences

1. In the fall of each year, the Board of Trustees, AMSA National Staff and local chapters shall organize and hold AMSA Conferences at several locations across the country. These conferences shall involve members and non-members for the purpose of orienting them to the national and regional organization and presenting engaging and educational programming that promote AMSA's priorities. All efforts should be made to hold AMSA Conferences at fully accessible locations, as defined by the Americans with Disabilities Act of 1990.
2. The BOT shall approve the locations of the AMSA Conferences

Section XX. Policy of the Association

The policy of the House of Delegates is contained in three separate documents, entitled The Constitution and Bylaws, The Preamble, Purposes and Principles, and The Structure, Functions and Internal Policy of the American Medical Student Association. These documents may be amended by resolutions submitted to the House of Delegates.

- A. The Constitution and Bylaws. The governing document of the Association is The Constitution and Bylaws. Amendments to The Constitution and Bylaws are submitted to the House of Delegates for consideration and action.
- B. Internal Affairs of the American Medical Student Association. This document contains guidelines and readily available explanations of how the Association operates. Like The Preamble, Purposes and Principles, the document is the official policy of the House of Delegates on matters related to the "internal" affairs of the Association. The guidelines set forth under the direction of the House of Delegates are implemented by the Board of Trustees. Amendments are submitted to the House of Delegates for consideration and action.
- C. The Preamble, Purposes and Principles. Adopted in 1976 by the House of Delegates, this document contains major "external" policy positions of the Association and should be referred to whenever members or staff members represent AMSA in an official capacity. Amendments are submitted to the House of Delegates for consideration and action.

Section XXI. Policy Formulation of the Association

Deadlines are maintained to allow adequate time for local chapters to review all resolutions, amendments and reports submitted to the House of Delegates for consideration for this reason the Board of Trustees only accepts those resolutions of an emergency nature after the deadline date.

- A. Referral of Resolutions. All amendments and resolutions will be referred by the Chairperson of the House to an appropriate Reference Committee. The Reference Committees then hold “open” sessions to hear testimony on all proposed amendments and resolutions.
- B. Participation by Members in the Reference Committee Hearings. The importance of member participation in testimony before Reference Committees cannot be over emphasized. The Reference Committee sessions are used for in depth discussion of the issues reflected in amendments, resolutions and reports submitted to the House of Delegates. A policy of openness is maintained in hearings of the Reference Committees, and any individual may present viewpoints for consideration at the designated “open” sessions. During “closed” sessions, any individual may be present to hear the deliberations of the Reference Committee. However, individuals not on the Reference Committee may not participate or make comments until subsequent “open” sessions.
- C. Delegate(s) Responsibilities in the House of Delegates. It is the responsibility of the official Delegate(s) to take final action on the Reference Committee reports. Although any Delegate may speak out in support of or opposition to any part of any Reference Committee report, it is primarily within the chapter meetings prior to the House of Delegates and within the regional meetings and Reference Committee hearings that in depth discussion and debate of the issues takes place.
- D. Implementation of Association Policy. In order to allow the policies of AMSA to be implemented in a manner appropriate to its resources, the House of Delegates entrusts the Board of Trustees (BOT) with the responsibility for implementation of all policies established by the House of Delegates. In cases where the Association’s resources do not allow for immediate implementation of policies, the BOT will implement such policies as soon as adequate resources are obtained.

Section XXII. Review of Association Principles

- A. The responsibility for review and revision of Association Principles is a general one falling to all the members of AMSA. However, it shall be a specific duty of the Action Committees and Teams to periodically review those Principles, which might apply to them, and assure they reflect current evidence and the views of the membership.
- B. The Chairs of the Action Committees and Teams shall present to the Board of Trustees a short summary of sections of the Principles which apply to them and which will be reviewed during the year.
 - 1. (Short summary of newly adopted amendments to the Principles shall be published annually for the membership, following the Annual Convention’s House of Delegates, in a medium chosen by the Board of Trustees. This summary will be produced by the Action Committees and Teams no later than 30 days after the close of the HOD.)
- C. In their year end report, Chairs of the Action Committees and Teams shall list these Principles and note any action taken—whether it be a project, interest group, or resolution—that concerned those Principles in question.
- D. It shall be the responsibility of the Secretary and Vice President for Internal Affairs to periodically reformat the Principles of the Association in order to make the organization of them more relevant to the membership.
- E. The Action Committees and Teams shall be responsible for annually reviewing the Principles for outdated terms and obsolete issues or entries. The Secretary and Vice President for Internal Affairs shall annually update the Principles of the Association with the approval of the BOT. These updates may include the following:
 - 1. Substitution of outdated terms with up-to-date terms.
 - 2. Deletion of Principles that address issues or entities that are obsolete.
- F. Any Principles that are deleted for being obsolete shall be kept on file by AMSA for historical purposes.

Section XXIII. Regarding *The New Physician Magazine*

- A. Editor. The editor shall be an employee, but not necessarily a member, of the Association. The editor shall be appointed by the Chief Executive Officer (CEO) of the Association, with the advice and consent of the Board of Trustees, and the term shall be indeterminate.
- B. Managing Publisher. The CEO of the Association, or his/her designee, shall be the Managing Publisher of the journal.
- C. Student Editor. While *The New Physician* is a professionally produced publication, it seeks to serve the information needs of medical students. Formalized student input is required to provide a complementary and necessary perspective for the professional staff. The journal shall have a Student Editor who shall be an active member of the Association and shall be chosen based on editorial experience. He/she shall be appointed by the

outgoing Editorial Advisory Board for two- year term. The Student Editor's duties shall include, but are not limited, the following: (2008)

- a. Coordination of the Editorial Advisory Board (EAB) in its efforts to critique *TNP* and relaying the EAB's commentary to the Editor.
- b. Shall carry out the policy of the House of Delegates as a member of the Board of Trustees and serve as the liaison between the EAB, Executive Editor and the Board of Trustees. (2008)
- c. Periodic and regular review of manuscripts at the discretion of the Editor.
- d. Providing input into the long-range goals, content, and direction of *TNP* in conjunction with the EAB.
- e. Seeking out students with interesting experiences and perspectives for interview at the discretion of the Editor.
- f. Seeking out students with journalistic skills and an interest in writing for publication assignments at the discretion of the Editor.
- g. Solicitation and formulation of manuscript topics in conjunction with the EAB for use by the Editor.
- h. Submission of a year-end report.

- D. Editorial Advisory Board. *The New Physician* shall have an Editorial Advisory Board. The composition of the Board shall be the Student Editor and four members of AMSA as approved by the Board of the Trustees. This Advisory Board can include both medical students, premedical students and residents, and will be selected on the basis of editorial and journalistic experience. Board members will serve one-year terms to coincide with the leadership year.

The Advisory Board's duties will be as follows:

- a. Improving communication of AMSA's priorities through *TNP*.
- b. Working with the Student Editor to seek out students with journalistic skills who are interested in writing for *TNP* and who are interested in sharing their experiences and perspectives.
- c. Providing input to the Executive Editor as to the long-range goals, content, and direction of *TNP*.
- d. Ensuring that advertisements in *The New Physician* are in keeping with the advertising guidelines in the Internal Affairs.

- E. Additional Publications. It is the discretion of the BOT in conjunction with national staff to determine what other publications should be distributed by the Association.

- F. Management Principles.

1. The magazine shall be provided to each member who elects to receive the journal, to each individual subscriber and to related complementary readership as determined by the Managing Publisher.
2. The magazine shall be supported by appropriate allocation of dues, as set by the Board of Trustees (BOT) and the Managing Publisher, each individual reader subscription, display and classified advertising and gifts and contributions as solicited by the BOT.
3. The magazine shall contain commercial advertising (display and classified) depicting goods and services of personal and professional use to physicians-in-training, i.e., the readership.
4. All advertising shall be represented in a tasteful manner, inoffensive to any human group, and represent a quality and truthful product or service.
5. AMSA, through the Managing Publisher, shall retain the right to reject any advertising deemed to be untruthful or misleading, offensive, or presented in bad taste.
6. The magazine shall carry AMSA program promotional advertising, based on availability of space, as determined by the Managing Publisher to promote AMSA's membership services, educational products or educational programs.

7. The magazine shall be viewed and managed by the organization as an "objective journalistic instrument," having protected integrity and sole purpose to provide the readership with unbiased and truthful research and reporting.
8. The magazine's editorial mission shall be to pursue and present news and issues of interest and importance to the readership and the organization in an unbiased manner through objective research and reporting.
9. The magazine shall serve as a primary educational tool for the readership and will provide educational aids of high quality and utility to physicians-in-training of a clinical or non-clinical nature.
10. The magazine shall not carry any political messages or advertising reflecting the opinions of any internal or external group. There shall not be advertising for specific campaigns, including advertising for political candidates and political parties. (2005)
11. The magazine shall routinely carry timely and important news concerning the AMSA and its affiliates.
12. The Student Editor, National President, Managing Publisher and Editor of the magazine shall comprise an executive team for the purpose of planning and developing the magazine. This team shall have the responsibility to referee issues arising concerning the pursuit, preservation of integrity and any infringement upon the editorial mission of the magazine and management principles of the magazine as approved by the House of Delegates.
13. The Managing Publisher and executive team shall have the responsibility of evaluating the progress of the magazine each year in terms of effectiveness and stability and develop an annual report for the BOT. The report shall make recommendations regarding pending issues, strategies, needs and changes in the magazine or its managing principles.

Section XXIV. Advertising Policy Formulation

The following guidelines are to be used by the Association in formulating advertising policy:

1. There should be no statements, verbal or pictorial, that are misleading.
2. Patients and providers should be portrayed in a respectful and humane manner and not in a stereotyped or demeaning fashion with respect to age, sex, sexual orientation, gender identity, race or disability.
3. Statements of properties, performance, content values, beneficial results, etc. of products should be such that they can be verified by adequate data in the literature.
4. AMSA bans all advertisements and sponsorships in its publications and at its events from all pharmaceutical, medical device, biotechnology, diagnostic companies as well as companies who manufacture/promote/market/develop products purported to have a direct health benefit (such as vitamins, supplements, food derivatives). Samples of medical supplies (including sutures, IUDs, etc.) are prohibited, except in circumstances that protect the integrity of education and AMSA prevents the use of samples as a marketing tool. Companies may contribute unrestricted medical device samples at the chapter level for educational programs that are independent of any industry input or control and unaccompanied by marketing materials.
5. AMSA bans all campaign advertisements for political candidates and/or political parties.
6. Support documentation verifying claims must be submitted to publisher upon request before an advertisement will be accepted for publication.
7. Nutritional advertisements should not conflict with the U.S. Dietary Guidelines.
8. Advertisements for special purpose foods must include a list of ingredients and the quantitative nutrition analysis of the product or offer to supply this information on request. If the advertiser elects to state the nutrition value in terms of RDA's, as well as the quantitative nutrition analysis, current federal regulations governing nutrition labeling should be followed or this information offered on request.

9. Advertisements for products and services should seek not to be in conflict with the Association's strategic priorities and principles as described in the Preamble, Purposes and Principles.
10. Final judgment regarding the appropriateness and acceptability of advertisements not addressed by the above guidelines and the implementation of the above guidelines will be the responsibility of the BOT.
11. AMSA requires that all parties with direct funding from pharmaceutical, medical device and biotechnology companies report the existence of those relationships to AMSA. This information will be made available to AMSA members upon request. A report of this disclosure must be submitted to AMSA upon confirmation of participation and/or attendance (i.e. AMSA meetings, advertising).
12. AMSA does not endorse the products and services of organizations that advertise or participate in AMSA publications, meetings, conferences, exhibition halls, convention, etc.

Section XXV. AMSA-Sponsored Activities

- A. **Environmental Health:** To promote the highest quality of health for those attending AMSA events, AMSA-sponsored regional or national meetings and programs will adhere to the following guidelines:
1. Use of any tobacco product is not allowed during any AMSA-sponsored regional or national meetings or local programs, within an environment under the temporary or permanent control of local or National AMSA. AMSA encourages local, regional and national event organizers to promote a smoke-free environment within areas not under AMSA control.
 2. Weapons of any kind are not permitted at AMSA events unless special permission has been given in advance by the Board of Trustees for a compelling reason or the individual is on duty as a law enforcement officer or active-duty military personnel. Those possessing or carrying weapons without permission will not be permitted to attend future AMSA events or participate in AMSA leadership.
 3. If noxious or harmful exposures are noted at an AMSA event, event organizers are accountable for informing attendees and mitigating harm.
 4. AMSA will specifically request recycling and other energy conservation services when booking any commercial meeting sites and contractors.
 5. Recycling and energy conservation measures are required, when feasible, in all national AMSA properties and rentals.
 6. All AMSA leaders and staff should minimize the amount of paper and copying for all activities, meetings and programming. Alternatives such as digital documents, online forms, shared programs, and recyclable materials are strongly encouraged.
- B. **LGBT Inclusion:** To ensure that all AMSA events are accessible to LGBT members, AMSA-sponsored national meetings will adhere to the following guidelines:
1. All paperwork and application material should include gender options beyond the male/female binary by either having a fill in space or including male, female, transgender male and transgender female, GQ (gender queer), intersex, and “prefer not to say” as options.
 2. Because legal names and preferred names are not always synonymous, space should be included on all forms for preferred names.
 3. Gender neutral bathrooms will be available such as through ensuring that the space has single stall bathrooms or reassigning gendered bathrooms available in the event space.
 4. Options for non-gender based room assignments will be available at national meetings. Local and regional AMSA events are strongly encouraged to follow the same guidelines.

Section XXVI. Strategic Planning and Strategic Priorities

The President shall oversee a process of strategic planning for the Association every four years for external priorities and every two years for internal priorities or sooner, if deemed necessary by the Board of Trustees and Executive Board of the Action Committees. During this time, the leadership shall designate strategic priorities of the Association. These priorities shall serve as issues around which AMSA shall focus its time, resources, and energies. The Board of Trustees may supersede these regulations if deemed necessary. Updates on each Strategic Priority shall be presented and reviewed at all meetings of the Board of Trustees and Executive Board of the Action Committees.