2015 HOUSE OF DELEGATES ACTIONS

PUBLIC HEALTH AND EDUCATION

150 Child Resistant Caps

*Introduced by Nassau County Medical Society*

SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York support state legislation requiring child-resistant packaging on all high energy drinks manufactured for sale in New York State; and be it further

RESOLVED, That the Medical Society of the State of New York urge that the U.S. Food and Drug Administration and/or U.S. Congress take similar action on the federal level; and be it further

RESOLVED, That a copy of this resolution be transmitted to the American Medical Association for consideration at its next meeting of the House of Delegates.

151 Child-Proof Packages for E-Cigarette Liquid Refills

*Introduced by Suffolk County Medical Society*

SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York support regulations and/or legislation to have the Food and Drug Administration (FDA) require that liquid nicotine be only available in child-resistant packages; and be it further

RESOLVED, That the sale of nicotine come with appropriate warnings of the dangers of nicotine and instructions on its safe storage; and be it further

RESOLVED, That the sale and distribution in the U.S. of liquid nicotine be prohibited to anyone under the age of 21; and be it further

RESOLVED, That a similar resolution be transmitted to the American Medical Association for consideration at its next meeting of the House of Delegates.

152 Adopt Policy Banning the Sale of Powdered Caffeine

*Introduced by Suffolk County Medical Society*

SUBSTITUTE RESOLUTION ADOPTED
RESOLVED, That the Medical Society of the State of New York adopt the policy that pure powdered caffeine should not be available for consumer retail sale and its distribution; and be it further

RESOLVED, that the Medical Society of the State of New York have one of its public health committees issue a statement about powdered caffeine and its potential for misuse, overdose and harmful effects upon individuals and it be forward to members of legislature and state officials.

Title Change: Prohibiting Sale of Powdered Caffeine

Color-Coding of Medication Containers
*Introduced by Rashmae Chardavoyne, MD as an Individual Delegate, Queens County
*NOT ADOPTED

RESOLVED, That the Medical Society of the State of New York seek legislation to institute a color coding system of different drug categories, for example RED for cardiac, BLUE for Anti-hypertensive, PINK for Anti-coagulant, ORANGE for Psychotropic and Anti-depressant drugs, etc.; and be it further

RESOLVED, That the indication for each medications be printed on each container in layman terms and large letters, such as HEART, BLOOD THINNER etc.; and be it further

RESOLVED, That MSSNY introduce a similar resolution at the AMA House of Delegates.

Pain as the “Fifth Vital Sign”
*Introduced by Fifth and Sixth District Branche, Schoharie County Medical Society
*ADOPTED

RESOLVED, That the Medical Society of the State of New York (MSSNY) adopt as policy the position that the clinical highlighting of pain as “the fifth vital sign” and a focus on eradication or total resolution of a patients pain is misguided and leads to 1) inappropriate pain management demands by patients; 2) inappropriate pressure on clinical pain management practices by clinicians; and 3) consequently, the diffuse overuse of opioid, and be it further

RESOLVED, That the MSSNY recommend that “pain as the fifth vital sign” be removed from the clinical practice environment; and be it further
RESOLVED, That the MSSNY request that the Joint Commission remove “pain as the fifth vital sign” from its standards; and be it further

RESOLVED, That the New York delegation forward this resolution to the American Medical Association and encourage the AMA to request that the Joint Commission remove “pain as the fifth vital sign” from its standards.

155 Anterior Cruciate Ligament Injury Prevention
*Introduced by Ninth District Branch Medical Societies (Dutchess, Orange, Putnam, Rockland and Westchester)*
SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York encourage that the state Education Department and the New York State Public High School Athletic Association inform students and parents about the anterior cruciate ligament injury prevention program in order to prevent student injuries.

156 Dangers of Tackle Football
*Introduced by New York County Medical Society*
SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York encourages the New York State Department of Health and the New York State Public High School Athletic Association to promote parental awareness of the potential dangers of tackle football.

157 Support of Mandating Protective Headgear (Helmets)
*Introduced by Third and Fourth District Branches Broome County Medical Society*
SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York support requiring approved protective headgear for all athletes participating in the sport of girls'/women’s lacrosse; and be it further

RESOLVED, That a similar resolution be transmitted to the American Medical Association for consideration at the next meeting of their House of Delegates.

158 Increasing Awareness of Potential Drunk Drivers’ Blood Alcohol Content
*Introduced by MSSNY Medical Student Section*
SUBSTITUTE RESOLUTION ADOPTED
RESOLVED, That the Medical Society of the State of New York request that the New York State Liquor Authority research the use of blood alcohol content testing devices as a tool to reduce drunk driving in the state.

Protecting Public Health from Natural Gas Infrastructure
*Introduced by* Sheila Bushkin, MD, MPH, *as an Individual Delegate*, Saratoga County and Sandhya Malhotra, MD, *as an Individual Delegate*, Queens County

**SUBSTITUTE RESOLUTION ADOPTED**

RESOLVED, That the Medical Society of the State of New York recognizes the potential impact on human health and environment associated with natural gas infrastructure; and be it further

RESOLVED; That MSSNY support governmental assessment of the health and environmental risks that are associated with natural gas pipelines; and be it further

RESOLVED, That a copy of this resolution be transmitted to the AMA for consideration of its House of Delegates.

HCV Testing and Treatment
*Introduced by* Medical Society of the County of Kings

The Suffolk County Medical Society

**ADOPTED**

RESOLVED, That the Medical Society of the State of New York send a letter to New York State Division of Financial Services requiring that commercial insurers provide coverage for the HCV, and be it further

RESOLVED, That MSSNY seek legislation, if needed, to ensure that commercial insurance coverage is required for the HCV test and access to HCV treatment.

New HPV Vaccine Offers Protection Against Nine Types of Cancer
*Introduced by* Medical Society of the County of Kings

Suffolk County Medical Society

**AMENDED RESOLUTION ADOPTED**

RESOLVED, That Medical Society of the State of New York advocate for the use of the new HPV vaccine as a form of cancer protection for all individuals; and be it further
RESOLVED, That MSSNY urge the New York State Department of Health to educate the public about the Advisory Committee on Immunizations Practices (ACIP) recommendations on HPV (which includes the new HPV vaccine) and its enhanced cancer prevention capabilities; and be it further RESOLVED, That MSSNY take steps to ensure that commercial insurance coverage is provided for all patients.

162

Physician Assisted Suicide and Euthanasia
Introduced by New York County Medical Society
AMENDED RESOLUTION ADOPTED

RESOLVED, that the Medical Society of the State of New York (MSSNY) adopt as policy the following statement on Physician Assisted Suicide and Euthanasia to replace MSSNY Policy 95.989:

“Patients, with terminal illness, uncommonly approach their physicians for assistance in dying including assisted suicide and euthanasia. Their motivations are most often concerns of loss of autonomy, concerns of loss of dignity, and physical symptoms which are refractory and distressing. Despite shifts in favor of physician-assisted suicide as evidenced by its legality in an increasing number of states, physician-assisted suicide and euthanasia have not been part of the normative practice of modern medicine.

Compelling arguments have not been made for medicine to change its footing and to incorporate the active shortening of life into the norms of medical practice. Although relief of suffering has always been a fundamental duty in medical practice, relief of suffering through shortening of life has not. Moreover, the social and societal implications of such a fundamental change cannot be fully contemplated.

MSSNY supports all appropriate efforts to promote patient autonomy, promote patient dignity, and to relieve suffering associated with severe and advanced diseases. Physicians should not perform euthanasia or participate in assisted suicide.”

163

Increasing Access to Care for Patients with Opioid Use Disorders
Introduced by MSSNY Medical Student Section, Suffolk County Medical Society and New York Society of Addiction Medicine
SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, that the Medical Society of the State of New York encourage primary care physicians and psychiatrists to voluntarily complete appropriate
training which would best increase access to care for opioid use disorders, and which would include, but not be limited to:
a) CME courses on screening, brief intervention, prescribing of medications for substance use disorders and referral for specialized care,
b) CME courses on opioid use disorders and
c) CME which meets the requirements for certification to become licensed to prescribe buprenorphine; and be it further

RESOLVED, that that Medical Society of the State of New York support policies and initiatives to provide adequate compensation for primary care physicians and psychiatrists for the treatment and counseling of patients with opioid use disorders; and be it further

RESOLVED, That the Medical Society of the State of New York support efforts to end the limitation of 100 patients per certified physician treating opioid dependence after the second year of treatment as currently mandated by the Drug Addiction Treatment Act; and be it further

RESOLVED, That a copy of this resolution be transmitted to the AMA House of Delegates for its consideration.

Immunity from Federal Prosecution for Marijuana-Prescribing Physicians
Introduced by New York Chapter, American College of Physicians
ADOPTED

RESOLVED, That the Medical Society of the State of New York ask the American Medical Association to support legislation ensuring or providing immunity against federal prosecution for physicians who prescribe marijuana in accordance with their state’s laws.

Treatment Rather Than Arrest for Marijuana Possession
Introduced by New York Society of Addiction Medicine
SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York support the promotion of drug treatment to those arrested or fined for marijuana related offenses; and be it further

RESOLVED, That the Medical Society of the State of New York encourage communities to develop programs that emphasizes drug treatment and rehabilitation rather than criminalization of marijuana.

The Medical Society of the State of New York Opposes Recreational Marijuana Legalization
Introduced by Fifth and Sixth District Branches
ADOPTED

RESOLVED, That the Medical Society of the State of New York oppose recreational marijuana legalization.

167

Prohibiting Torture and Advanced Interrogation by Health Care Professionals
Introduced by MSSNY Medical Student Section
REAFFIRMED POLICY

RESOLVED, That the MSSNY reaffirm MSSNY Policy 95.973.

168

Increasing Organ Donation
Introduced by MSSNY Young Physicians Section
SUBSTITUTE RESOLUTION ADOPTED

RESOLVED, That the Medical Society of the State of New York support educational efforts by the New York State Department of Health to promote organ donation, and be it further

RESOLVED, That the Medical Society of the State of New York support laws and corporate policies allowing employees to use paid sick time to become living organ donors.

PHE 2015 Sunset Report
ADOPTED