

**RESOLUTIONS PASSED BY THE 2015  
HOUSE OF DELEGATES  
APRIL 11, 2015**

**TUBERCULOSIS (TB) CASES IN TEXAS**

WHEREAS, in 2013 there were 1,222 cases of tuberculosis (TB) reported in Texas, representing a rate of 4.6 per 100,000 population, and  
WHEREAS, TB can affect anyone but is more likely to be diagnosed in people born in a foreign country where TB is prevalent, people living with chronic immuno-suppressive conditions, the homeless, and health care workers, and  
WHEREAS, with proper preventive treatment the majority of TB infections will not progress to TB disease, and  
WHEREAS, TB disease is curable with proper treatment, and  
WHEREAS, newer laboratory methods greatly reduce the time necessary to diagnose TB, and  
WHEREAS, genotyping helps reduce the burden of TB by identifying recent TB transmission among cases and contacts; now therefore  
BE IT RESOLVED, that the Texas Osteopathic Medical Association supports efforts to enhance timely identification of tuberculosis (TB) contacts, treatment of TB cases, and education of physicians regarding TB management.

**15-02**

**DISCRIMINATION PROTECTION FOR BOARD-CERTIFIED PHYSICIANS**

WHEREAS, the high point of education and training for most osteopathic physicians is the successful completion of a rigorous residency program and board certification, and  
WHEREAS, the ongoing practice of medicine and participation in medical educational activities of interest are the means by which a physician sharpens his/her skills and gains the knowledge and wisdom that characterize a seasoned and accomplished osteopathic physician, and  
WHEREAS, if the premise is true that the physician is on a declining competency path as soon as he/she achieves board certification, then no physician can claim the immunity necessary to sit in judgment of other physicians, because all are subject to the same process of diminishing knowledge; and  
WHEREAS, that "Osteopathic Continuing Certification" (a certification process of the American Osteopathic Association) is a re-certification process; now therefore  
BE IT RESOLVED, that non-participation in "Osteopathic Continuing Certification", or other similar national programs, may not be a cause for discrimination by hospitals in granting staff privileges, nor by insurance companies in reimbursement contracts, and  
BE IT FURTHER RESOLVED, that the Texas Osteopathic Medical Association encourages the Texas State Senate and the Texas State House of Representatives that discrimination based on participation in "Osteopathic Continuing Certification" or other similar national programs be prohibited in the State of Texas, and that "Osteopathic Continuing Certification" not be used as a requirement for licensure in Texas.

**15-03**

**PROTECTION OF SAFE WATER SUPPLY**

WHEREAS, the oilfield industry is very important to the well-being of this country, and  
WHEREAS, the fracking process has made America one of the largest oil producers in the world but also produces large amounts of waste water, and  
WHEREAS, this waste water is disposed of in waste wells in which there are very few ways to track it's dissipation underground, and  
WHEREAS, earthquakes are more common around areas where the waste wells are located; therefore

BE IT RESOLVED, that the American Osteopathic Association (AOA) should encourage the oil industry and the Environmental Protection Agency (EPA) to seek out new technologies for safer disposal of waste well water and the protection of our water supply, and

BE IT FURTHER RESOLVED, that this resolution be forwarded to the AOA House of Delegates for approval.

**15-04**

#### **CONTINUOUS CERTIFICATION PROCESS**

WHEREAS, the AOA has adopted a continuous certification process or Maintenance of Certification (MOC) program for maintaining board certification, and

WHEREAS, this process is going to be long, complicated and expensive, and

WHEREAS, other certification groups such as the American Board of Internal Medicine (ABIM) heard and agrees with the concerns of many physicians and medical specialty societies, that the design and initial execution of the Maintenance of Certification (MOC) program is flawed, and

WHEREAS the ABIM have recently suspended three modules in their MOC; now therefore

BE IT RESOLVED, that the Texas Osteopathic Medical Association House of Delegates encourages the American Osteopathic Association and its Specialty Colleges to review the Osteopathic Continuous Certification process so as to make it more manageable and economically feasible; and

BE IT FURTHER RESOLVED, that the Texas Osteopathic Medical Association will forward this resolution to the American Osteopathic Association House of Delegates for their consideration.

**15-05**

#### **IMPROVING COMPETITIVE EDGE FOR MEMBERSHIP IN THE AOA**

WHEREAS, promoting and obtaining membership in the American Osteopathic Association (AOA) is crucial to our continued political viability as a professional organization, and

WHEREAS, we are competing for membership with allopathic organizations for existing members and former members along with new, and

WHEREAS, cost competition between various organizations is a huge challenge to the AOA if our dues and fees are at a rate higher than other professional organizations, and

WHEREAS, costs for annual membership, testing for certification, frequency of certification requirements, continuous certification modules, and convention expenses (CME) are all factors (but not totally inclusive) in the total cost of membership, and

WHEREAS, there now exists significantly higher costs associated with osteopathic vs allopathic membership fees and dues, and

WHEREAS, the AOA wants to enhance and retain existing members and welcome new and former members by offering more cost competitive rates; now therefore

BE IT RESOLVED, that the AOA reviews all membership dues, fees, and duration of certification to become more cost competitive with allopathic organizations to help build and maintain membership; and

BE IT FURTHER RESOLVED, that this resolution be forwarded to the American Osteopathic Association House of Delegates for consideration.

**15-06**

#### **END OF LIFE CARE**

WHEREAS, end of life care involves some of the most important personal decisions an individual will make, and

WHEREAS, each person's experience is as unique as the individual, and

WHEREAS, discussions about end of life care are best held between the patient or surrogate and the physician he/she trusts. Family members designated by the patient are also helpful in these discussions, and

WHEREAS, the osteopathic physician involved in primary care or chronic care of a patient should be prepared to explain the medical aspects of care for circumstances when life expectancy is shortened because of disease or injury, and

WHEREAS, the physician's role in these discussions is to facilitate decision-making using his knowledge of medicine and his familiarity with the patient's medical and personal needs, and

WHEREAS, the physician's role is not to make value judgments based on his personal perspective of quality of life, but to honor the patient's wishes and hope for life in an ethical way where medically possible, and

WHEREAS, the osteopathic professional training of students and residents includes appropriate handling of end-of-life care issues with their patients; now, therefore

BE IT RESOLVED, that the End of Life Care Subcommittee be charged with developing recommended guidelines and a form that may be used for facilitating End of Life discussion with patients, in accordance with current changes in the practice of medicine.

**15-08**

**TEXAS OSTEOPATHIC MEDICAL ASSOCIATION CONGRATULATES THE UNIVERSITY OF NORTH TEXAS HEALTH SCIENCE CENTER, TEXAS COLLEGE OF OSTEOPATHIC MEDICINE AND THE JOHN PETER SMITH PHYSICIAN GROUPS ON THEIR NEW PARTNERSHIP**

WHEREAS, the President of the University of North Texas Health Science Center/Texas College of Osteopathic Medicine (UNTHSC/TCOM) Michael Williams, DO, MD, and the Chief Executive Officer (CEO) of John Peter Smith (JPS) Hospital Robert Early had the vision to combine physician groups from UNTHSC/TCOM and JPS physicians groups to create a new amalgamated group.

BE IT RESOLVED that the Texas Osteopathic Medical Association (TOMA) celebrates the formation of this new partnership that will strengthen Undergraduate and Graduate Medical education, and

BE IT FURTHER RESOLVED, that TOMA congratulates everyone involved for creating a new partnership to improve the Quality of care to Tarrant County and citizens of the surrounding areas, and

BE IT FURTHER RESOLVED, that TOMA supports the new groups efforts to improve continuous and transitional care and improve accountability, productivity transparency and collegiality of all of the participants, and

BE IT FURTHER RESOLVED, that TOMA appreciates all of the hard work by the President of the University of North Texas Health Science Center/Texas College of Osteopathic Medicine (UNTHSC/TCOM) Michael Williams, DO, MD, and the Chief Executive Officer (CEO) of John Peter Smith (JPS) Hospital, Mr. Robert Early. TOMA applauds the vision to combine physician groups from UNTHSC/TCOM and JPS.

**15-11**

**PROPER BADGE IDENTIFICATION OF EMPLOYEES IN A HOSPITAL SETTING**

WHEREAS, a hospital stay can be very stressful, with unidentified persons entering and exiting rooms at various hours of the day and night, and

WHEREAS, physicians of different specialties round at different hours, creating confusion among the ill, and

WHEREAS, a ubiquitous issue among the healthcare system is a patient's perception of provider roles, influenced by both generational differences and variations in culture; and

WHEREAS that visible and proper badge identification will help decrease confusion among patients with regards to the title and role of each provider, now therefore

BE IT RESOLVED that the Texas Osteopathic Medical Association encourage all healthcare providers and hospital employees to wear hospital-issued identification badges with clear delineation of their professional role and that they verbally introduce and identify themselves and their role in the patient's treatment process, with the overall goal of improving patient safety and patient communication.

BE IT FURTHER RESOLVED that this resolution be forwarded to the American Osteopathic Association.

**15-12**