

**2019 House of Delegates  
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**RESOLUTION 301**

**Subject:** Prenatal Care Provision at Crisis Pregnancy Centers

**Introduced by:** Medical Student Section

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**WHEREAS**, Louisiana's rate of maternal mortality has increased from 35 deaths per 100,000 live births in 2016 to an estimated 45 deaths per 100,000 in 2018<sup>1</sup>;

**WHEREAS**, Louisiana's maternal mortality rates per 100,000 deaths are above the US National Averages for both White and African-American women, and all age groups over the age of 25<sup>1</sup>;

**WHEREAS**, LSMS has previously established policies regarding maternal and child health, including 20.05 (HIV Screening in Pregnancy), 40.01 (Risks of Alcohol Abuse in Pregnancy), and 241.02 (School-Based Health Programs);

**WHEREAS**, maternal and child health is best served by evidence-based prenatal care by a licensed medical professional<sup>2</sup>;

**WHEREAS**, Crisis Pregnancy Centers (CPCs, also known as Pregnancy Resource Centers/ PRCs) provide services for pregnant women, with one large national crisis center network performing 252,480 pregnancy tests and 124,480 ultrasounds in 2015<sup>3</sup>;

**WHEREAS**, most CPCs are staffed by volunteers who are not licensed medical professionals<sup>4</sup>;

**WHEREAS**, patients who see an unlicensed provider at a CPC may experience a delay in the initiation of professional prenatal care, increasing the chance of negative health outcomes including postpartum depression, preterm delivery, tobacco use after birth, preeclampsia, and low-birth-weight<sup>5-9</sup>;

**WHEREAS**, delayed prenatal care and negative health outcomes such as preeclampsia increase the risk of maternal mortality<sup>10,11</sup>; therefore be it

**RESOLVED**, that our LSMS supports the enactment and promulgation of regulations requiring any provider or facility advertising prenatal or pregnancy services to:

1. Give evidence-based information regarding prenatal care in all print, telephonic, web-based, and oral communications;
2. Have a licensed physician in family medicine or obstetrics-gynecology on staff, or a documented relationship with a licensed physician within 30 miles of the facility;
3. Offer information or referrals about reproductive services at patient request;
4. Accurately advertise the services offered in all print and digital media inside and outside the facility.

**RESOLVED**, that our LSMS opposes any state funding of centers that provide non-evidence-based information to women seeking care during pregnancy.

**RESOLVED**, That H-10.01 of the LSMS policy manual be amended by addition and deletion as follows:

#### Abortion – General Policy, H-10.01

The LSMS affirms the physician oath to preserve life. LSMS general policy on abortion includes the following guidelines: (1) Elective abortion is a medical procedure and should be performed only by a duly licensed physician and surgeon in conformance with standards of good medical practice and the Medical Practice Act of the state of Louisiana. (2) No physician or other licensed medical professionals should be required to perform an act violative of good medical judgment. Neither physician, nor licensed medical professionals should be required to perform any act that violates personally held moral principles. In these circumstances, good medical practice requires only that the physician or other licensed medical professionals withdraw from the case, so long as the withdrawal is consistent with good medical practice (3) The LSMS encourages its physician members to offer counseling to expectant mothers in accepting and coping with the stresses of pregnancy to assure their patients have access to appropriate information regarding alternatives to abortion. pregnant patients comprehensive, evidence-based, unbiased options counseling, and to provide them with medically accurate information regarding all of their pregnancy options.

### **LSMS Policy Referenced**

#### **10.01 Abortion - General Policy**

The LSMS affirms the physician oath to preserve life. LSMS general policy on abortion includes the following guidelines: (1) Elective abortion is a medical procedure and should be performed only by a duly licensed physician and surgeon in conformance with standards of good medical practice and the Medical Practice Act of the state of Louisiana. (2) No physician or other licensed medical professionals should be required to perform an act violative of good medical judgment. Neither physician, nor licensed medical professionals should be required to perform any act that violates personally held moral principles. In these circumstances, good medical practice requires only that the physician or other licensed medical professionals withdraw from the case, so long as the withdrawal is consistent with good medical practice. (3) The LSMS encourages its physician members to offer counseling to expectant mothers in accepting and coping with the stresses of pregnancy to assure their patients have access to appropriate information regarding alternatives to abortion.

#### **20.05 AIDS - Human Immunodeficiency Virus (HIV) Screening in Pregnancy**

The LSMS supports Center for Disease Control and National Institutes of Health positions on counseling, screening and treatment of HIV in pregnant women and their newborns, in order to decrease the rates of vertical transmission of HIV from mother to fetus. The LSMS supports removal of the written informed consent requirement in Louisiana for HIV testing, allowing

testing to occur after appropriate discussion of benefits/risks between the patient and her physician, under the confidential patient-physician relationship.

#### **40.01 Chemical Dependence - Warnings Against Abuse of Alcohol**

All places where alcohol is sold should be required to post signs warning that (1) drinking alcoholic beverages during pregnancy can cause birth defects and (2) excessive consumption of alcoholic beverages results in impaired ability to drive vehicles, operate machinery and may cause health problems.

#### **241.02 Children and Youth - School-Based Health Programs**

The LSMS recognizes the need for and urges the development of comprehensive school based health clinics to address the health needs of our youth including, but not limited to, the prevention of drug abuse, AIDS, sexually transmitted diseases, and unintended pregnancy. The LSMS supports enhanced funding of health clinics in junior/senior high schools specifically to provide resource information upon student request.

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**RESOLUTION 302**

**Subject:** Promote Physician Autonomy in Abortions

**Introduced by:** Medical Student Section

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**WHEREAS**, The American College of Obstetricians and Gynecologists is its specialty's premier organization and is dedicated to the advancement of women's healthcare<sup>1</sup>; and

**WHEREAS**, American College of Obstetricians and Gynecologists has established that "induced abortion is an essential component of women's health care" and "opposes unnecessary regulations that limit or delay access to care<sup>1,2</sup>;" and

**WHEREAS**, Louisiana law significantly impedes access to abortion by imposing a 72 hour waiting period (RS 40:1061.17), requiring physicians who perform abortions to have admitting privileges at a nearby hospital (RS 40:1061.10), and prohibiting any state agency or department from providing public funding to an organization that performs abortions (RS 49:200.51); and

**WHEREAS**, abortions are a safe medical procedure with a major complication rate of only 0.23% and a minor complication rate of only 2.1%. This rate is significantly lower than that of wisdom tooth removal (7%) and tonsillectomy (9%), two procedures which do not require admitting privileges<sup>3,4</sup>; and

**WHEREAS**, two of the three practices currently providing abortions in Louisiana will be shut down if the rule requiring admitting privileges goes into effect<sup>5</sup>; and

**WHEREAS**, "If all Louisiana facilities close, the mean distance women would need to travel would more than triple to 208 miles, and the proportion of Louisiana women of reproductive age who live more than 150 miles from an abortion facility would increase from 1% to 72%."<sup>6</sup>; and

**WHEREAS**, patients whose nearest clinic closes are significantly more likely to travel farther for services and face higher out-of-pocket costs compared to patients whose closest clinic remains open and therefore patients from certain areas of the state would be subjected to barriers to quality care<sup>7</sup>; therefore be it

**RESOLVED**, That H-10.01 of the LSMS policy manual be amended by addition and deletion as follows:

Abortion – General Policy, H-10.01

The LSMS affirms the physician oath to preserve life. LSMS general policy on abortion includes the following guidelines: (1) Elective abortion is a safe medical procedure and

should be performed only by a duly licensed physician and surgeon in conformance with standards of good medical practice established by The American College of Obstetricians and Gynecologists and the Medical Practice Act of the state of Louisiana. (2) No physician or other licensed medical professionals should be required to perform an act violative of good medical judgment. Neither physician, nor licensed medical professionals should be required to perform any act that violates personally held moral principles. In these circumstances, good medical practice requires only that the physician or other licensed medical professionals ~~withdraw from the case, so long as the withdrawal is consistent with good medical practice~~ provide referrals and/or information about other physicians who would be better suited to the patient's needs. (3) The LSMS encourages its physician members to offer counseling to expectant mothers in accepting and coping with the stresses of pregnancy to assure their patients have access to appropriate information regarding alternatives to abortion.; and be it further

**RESOLVED**, that our LSMS oppose the requirement that physicians have admitting privileges in order to provide abortions; and be it further

**RESOLVED**, that our LSMS opposes the denial of government funds to any health facility or provider for non-abortion services.

NOTES-----

LSMS Policies:

**10.01 Abortion - General Policy**

The LSMS affirms the physician oath to preserve life. LSMS general policy on abortion includes the following guidelines: (1) Elective abortion is a medical procedure and should be performed only by a duly licensed physician and surgeon in conformance with standards of good medical practice and the Medical Practice Act of the state of Louisiana. (2) No physician or other licensed medical professionals should be required to perform an act violative of good medical judgment. Neither physician, nor licensed medical professionals should be required to perform any act that violates personally held moral principles. In these circumstances, good medical practice requires only that the physician or other licensed medical professionals withdraw from the case, so long as the withdrawal is consistent with good medical practice. (3) The LSMS encourages its physician members to offer counseling to expectant mothers in accepting and coping with the stresses of pregnancy to assure their patients have access to appropriate information regarding alternatives to abortion.

Authority Note: R29-91; reaffirmed R101-01; reaffirmed R102-06; reaffirmed R101-11; reaffirmed R101-16

**10.02 Abortion - Public Funding**

The LSMS opposes Medicaid and the Louisiana Department of Health and Hospitals funding of abortions.

Authority Note: LR1-80; reaffirmed R101-2000; reaffirmed R101-06; reaffirmed R101-11; reaffirmed R101-16

### **91.03 Hospitals; Organized Medical Staff - Physician Credentialing**

Credentialing of a physician should be determined solely on professional competence based on relevant clinical training and skills, practice experience, and malpractice history; not economic performance factors such as physician Medicare prospective pricing profiles, physician costs to hospital revenue streams, physician hospital charge information, DRG profiles, volume indicators or any other such criteria. Authority Note: R303-9; reaffirmed R101-02; reaffirmed R101-07; reaffirmed R102-12; reaffirmed R103-17

### **243.01 Immunizations - Childhood Immunizations**

The LSMS endorses the continued immunization of all children as recommended by the medically-accepted guidelines of the American Academy of Pediatrics, and/or the Advisory Committee on Immunization Practices and opposes any state or federal legislation which may eliminate and/or alter the schedule of immunization of children as recommended by these guidelines.

Authority Note: R302-99; reaffirmed R101-06; reaffirmed R101-11; reaffirmed R101-16

### **243.02 Immunizations – Annual Vaccinations**

The LSMS supports the annual administration of vaccines recommended by the Centers for Disease Control and/or the American Academy of Pediatrics. The Secretary of the Louisiana Department of Health and Hospitals should arrange for adequate funding to administer the vaccine in public health clinics. LSMS supports the requirement for all students entering school to have the required vaccines in accordance with State Health Department approved schedule.

Authority Note: R70-90; reaffirmed R101-04; reaffirmed R101-11, reaffirmed as amended R103-15

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**RESOLUTION 303**

**Subject:** Advocating for Implementation of Prevention Strategies and Training Programs for Suicide Assessment, Intervention, and Management

**Introduced by:** Medical Student Section

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**WHEREAS**, In Louisiana suicide is the 11th leading cause of death and Louisiana ranks 30th out of 50 states and has 622 people die from suicide every year<sup>1-2</sup>; and

**WHEREAS**, there has been an alarming increase in suicide rates over the past decade and a half, with nearly a 25% increase in suicide rates and in 27 states nearly half of the individuals that committed suicide had no previous diagnosis of mental health disorder<sup>3-4</sup>; and

**WHEREAS**, current programs focus on trainings of healthcare professionals in recognizing mental health complications in primary care, preventing suicide in the emergency department, and QPRT risk assessment and management training; there is a paucity in legislation on literacy of mental health and programs available for the public<sup>5</sup>; and

**WHEREAS**, other states including Arkansas and Mississippi: have programs to improve mental health literacy through public information and increasing knowledge of suicide prevention, strategies that include online simulations of possible suicide situations, and networks that promote individuals as young as 15 on recognizing signs of suicide ideation to report<sup>6-7</sup>; and

**WHEREAS**, a 2015 Mental Health America report ranked Louisiana 47th for overall mental health care, meaning the state has a high prevalence of mental illness and scarce access to care<sup>8</sup>; and

**WHEREAS**, in Louisiana, the number of residents in state and county psychiatric hospitals decreased from 2,255 in 1982 to 996 in 2010, a decline of 56 percent<sup>9</sup>; therefore, be it

**RESOLVED**, that our LSMS advocate for the advancement of statewide programs targeted at providing resources that improve public literacy on suicide and prevention;

**Programs should include:**

1. Training in mental health literacy, including (1) recognition of suicide warning signs in patients, (2) preventative steps that can be taken, and (3) proper intervention during an active suicide attempt.
2. A comprehensive suicide prevention program.

3. Peer support programs for youth and the creation of school programs which mitigate suicide risk in adolescents.
4. Support for effective clinical, professional, and community practices which will reduce mental health stigma and aid in identifying individuals at risk for suicide.

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## RELEVANT LSMS POLICY

### 200.01 Mental Health - Mental Health Care

The LSMS endorses the concept that the state of Louisiana provide mental health treatment and programs for the medically indigent under the supervision of a licensed physician. The LSMS encourages its members to be more aware of the limitations and restrictions on obtaining access to medical treatment for mental illnesses and/or substance abuse disorders and encourage its members to become proactive in resolving these access problems in coordination with civic organizations addressing the problem.

Authority Note: R44-90; reaffirmed R101-2000; reaffirmed R101-06; reaffirmed R101-11; reaffirmed R101-16

### 200.02 Mental Health - Discrimination against Psychiatric Consultation

The LSMS opposes the policy of insurers that treat consultation for patients with psychiatric symptoms in a discriminatory manner. Primary insurers be held fully accountable for the policies and performance of their subcontractors and be held fully responsible for the equitable treatment of all patients and provide timely reimbursement for legitimate services under their

plans, whether subcontracted or not. Further, primary insurers be required to cancel contracts with subcontractors no longer financially able to provide contracted services without resorting to discriminatory practices.

Authority Note: R216-03; reaffirmed sub R101-08; reaffirmed R102-13; reaffirmed R101-18

*200.03 Mental Health - Parity of Benefits for Mental Illness*

The LSMS affirms its support of health system reform which will guarantee parity of benefits for the mentally ill from its inception and opposes any reform which further stigmatizes our mentally ill patients by continuing to deprive them of the necessary access to affordable care.

Authority Note: R309-93 reaffirmed R123-2000; reaffirmed R101-04; reaffirmed R101-10; reaffirmed R101-15 31

*200.04 Mental Health - Mental Health Centers in Louisiana*

The LSMS opposes psychologists and inadequately-trained social workers treating psychiatric patients in mental health centers without physician supervision.

Authority Note: 1977; amended R101-97; reaffirmed R101-06; reaffirmed R101-11; reaffirmed R101-16

**RESOLUTION 304**

**Subject:** Firearm Regulation in Louisiana

**Introduced by:** Medical Student Section

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**WHEREAS**, Louisiana is ranked third in the United States for firearm-related mortality with 21.3 deaths per 100,000 as determined by the CDC in 2016<sup>2</sup>; and

**WHEREAS**, firearm ownership has been correlated with higher rates of homicide and suicide<sup>3,4,5</sup>; and

**WHEREAS**, firearm-related mortality costs each resident in Louisiana more than \$1,300 per firearm-related death when calculating direct and indirect costs<sup>10,11</sup>; and

**WHEREAS**, the American Public Health Association and the American Medical Association H-145.997 categorizes violence committed with firearms a public health crisis<sup>12,13</sup>; and

**WHEREAS**, Louisiana has a significant paucity of regulations for firearm purchase, usage and management comparatively to other states in the United States<sup>6,7</sup>; and

**WHEREAS**, the private-party gun market allows persons to purchase firearms and avoid mandatory background checks serving as a leading contributor to firearm procurement and violence<sup>22</sup>; and

**WHEREAS**, background checks are necessary but not sufficient<sup>20</sup>; and

**WHEREAS**, laws in Louisiana like concealed carry, stand your ground and the castle doctrine have been shown to increase firearm homicides<sup>8,9</sup>; and

**WHEREAS**, provisions for firearm licensure have already been instituted in places like Massachusetts, Connecticut, New York, California resulting in lower rates of firearm mortality by as much as forty percent<sup>6,14,15</sup>; and therefore be it

**RESOLVED**, LSMS supports that all firearm owners possess a trigger lock or safe; be it further

**RESOLVED**, LSMS supports comprehensive background checks and regulation of sales and transfers of firearms; be it further

**RESOLVED**, LSMS supports state-wide licensure for firearms that includes, be it further

1. Application filled out at local police station, photograph, fingerprinting, interview and background checks (in both criminal and mental health history)
2. Registration of firearms in a state-wide database; be it further

**RESOLVED**, LSMS supports restrictions on private sales of firearms requiring,

1. Private sales only be done by persons with firearm licenses to persons with licenses
2. Firearm transfers be registered and recorded in the firearm state registry

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