

American Physician Scientists Association Resolution Writing Guide

This document serves as a resource for well-crafted resolutions. Resolution authors will be required to submit resolutions that fit the format described below.

Questions? Please contact the APSA Policy Committee Co-Chair, Elinor Mannon. (elinor.mannon@physicianscientists.org).

The **deadline** to submit resolutions is **Friday, February 28, 2020***.

*These must be in their final formatted form at this time. It is *highly* suggested that you submit earlier than the deadline to allow for initial feedback.

Resolutions can be submitted by email to elinor.mannon@physicianscientists.org.

Picking a Resolution Topic

A resolution can be about absolutely anything! However, it is important to keep in mind that the resolution will need to be approved by a majority of APSA Institutional Representatives (IRs) and the Board of Directors to be put into effect. Typically, these will fit into two categories- those that request a change in APSA policy/initiatives and those that request that APSA takes a certain position/advocates for a cause (see the description of Resolution Statements below).

Example topics that fit within these categories include:

- Requesting that APSA petitions the NBME for an extension of the USMLE time limit to 10 years to account for longer PhDs, particularly for SSH MD/PhD students.
- Requesting that APSA advocates for LCME policy regarding parental leave for medical students, which currently does not exist.
- Previous APSA resolutions can be found at the end of this document.

Writing a Resolutions Statement

Resolutions provide background information and propose a course of action. They are comprised of “whereas” statements (background) and “resolved” statements (proposed course of action). An example resolution is given below:

Establishing a Resolutions Process for the American Physician Scientists Association

Sponsor(s): Jane Smith, IR for the University of A; John Doe, IR for X University

WHEREAS, One of the American Physician Scientists Association’s objectives includes to be “the most representative voice and influential advocate to policymakers and the American people regarding the need for supporting physician-scientist training” (1),

WHEREAS, No current mechanism exists to regularly assess the needs and issues facing physician-scientists in training,

RESOLVED, That the Board of Directors adopts a resolutions process to assess the needs of APSA members.

REFERENCES:

(1) <http://www.physicianscientists.org/?page=about>

Heading

The resolution should begin with a title that is both concise and accurately descriptive. It must begin with a gerund (verb ending in “-ing”). This is to be bolded. Sponsor(s) should be listed below along with the institution they represent. A resolution may have one or multiple sponsors. These sponsors must all be institutional representatives. Sponsors should be listed in success with a semicolon separating each name and institution.

Whereas Statements

A key to a successful resolution is well-researched background information provided in the “Whereas” statements that establish a strong rationale for why a course of action should be taken. Typically, a well-researched resolution should have 4-10 whereas statements. In writing whereas statements, be factual not speculative and provide references when applicable. The purpose of these statements is to inform those who are voting on the resolution about why this resolution is appropriate and feasible for ASPA to adopt; they will not be retained in APSA records once a resolution is approved. The first word following “whereas” should be capitalized.

Resolution Statements

These are the statements that will eventually be acted up on by the Board of Directors should the resolution pass (and be phrased accordingly). They may request changes in APSA policy or that APSA takes an action. Multiple resolved statements may be included in a single resolution (though more than two is discouraged). These should be clearly stated and feasible for APSA to implement.

Since these are *action* statements, they should contain an *active* verb such as: Accepts, adopts, affirms, appeals, appreciates, approves, authorizes, calls upon, commends, concurs, condemns, declares, designates, directs, promotes, recognizes, recommends, seeks, suggests, supports, or urges.

References

References can help strengthen your whereas statements. Should you find an applicable reference, please indicate the references number within parentheses in the whereas statement, then list the references at the bottom of the resolution.

Helpful tips

A number of factors contribute to a successful resolution:

- More co-sponsors
- Clarity
- Well-researched
- Feasible scope
- Novelty

Previous Resolutions Submitted to APSA

Spring 2018 Resolutions:

Resolution S18-1. Establishing a Parental Leave for Medical Students Initiative

Sponsor: Mariam Bonyadi Camacho, IR for University of Illinois at Urbana-Champaign

WHEREAS, The American Physician Scientists Association (APSA) has historically advocated for policies that support the wellbeing of physician-scientist trainees; and

WHEREAS, The 1993 Family and Medical Leave Act (FMLA) establishes policies that apply for employees but not students²; and

WHEREAS, Current medical student options for taking parental leave can place undo strain on trainees by requiring them to utilize time dedicated to vacation, elective study, residency interviews, or take a medical leave of absence; and

WHEREAS, Neither the Liaison Committee on Medical Education (LCME) nor the Commission on Osteopathic College Accreditation (COCA), which oversee accreditation of MD and DO programs, respectively, have current policy that addresses the topic of parental leave for medical students^{3,4}; and

WHEREAS, Parenting and childbirth provide medical students with experience and knowledge on topics concerning Obstetrics and Gynecology and Pediatric medicine, among others; and

WHEREAS, Parental leave has been shown to have significant benefits for the healthy development of children^{5,7}; and

WHEREAS, Students participating in dual-degree programs (e.g. MD-PhD, DO-PhD, etc) should be considered graduate research assistants at all training levels^{8,9} and so are subject to the parental leave policies available to institution employees; therefore, be it

RESOLVED, That the Board of Directors advocates for LCME and COCA to establish a parental leave policy for medical students as part of their standards for medical school accreditation.

REFERENCES:

1. www.physicianscientists.org/?page=about
2. www.dol.gov/whd/regs/statutes/fmla.htm
3. www.med.virginia.edu/ume-curriculum/wp-content/uploads/sites/216/2016/07/2017-18_Functions-and-Structure_2016-03-24.pdf
4. www.osteopathic.org/inside-aoa/accreditation/COM-accreditation/Documents/com-continuing-accreditation-standards.pdf
5. Danzer N, Lavy V. Paid parental leave and children's schooling outcomes. *The Economic Journal* (2017)
6. Rossin M. The effects of maternity leave on children's birth and infant health outcomes in the United States. *J. of Health Econ.* (2011)
7. Adema W, Clarke C, Frey V. Paid parental leave and other supports for parents with young children: The United States in international comparison. *Int. Soc. Security Rev.* (2016)
8. <http://medicalpartnership.usg.edu/education/md-ph.d-program>

9. <https://gsbs.uth.edu/dotAsset/4ae2f7d5-ed43-48ae-bfaf-0322c91abf9e.pdf>

Resolution S18-2. Creating an up-to-date guide for dual-degree applicants

Sponsor: Hanna Erickson, IR for University of Illinois at Urbana-Champaign

WHEREAS, Each year there are 1,800+ applicants to MD/PhD and DO/PhD programs¹, and

WHEREAS, The only book that can serve as a comprehensive guide to dual-degree program applicants was published in 2004 and is currently selling for \$35+ on Amazon², and

WHEREAS, APSA has previously considered fundraising by producing commercial products,

WHEREAS, APSA has an established goal of supporting aspiring physician-scientist trainees at the undergraduate level³,

WHEREAS, Through its membership, APSA has unique access to a large community of current and former dual-degree students across the United States and internationally who can provide insights into the application process and day-to-day life as a dual-degree student; therefore, be it

RESOLVED, APSA oversees the production of an up-to-date and affordable comprehensive guide for dual-degree applicants.

REFERENCES:

1. <https://www.aamc.org/download/321542/data/factstableb7.pdf>
2. Rosner B, Nayak J, Minnery B. The Complete Guide to the MD/PhD Degree: The Art and Science of "Doing it Twice". J & S Publishing Company, Inc. https://www.amazon.com/gp/offer-listing/1888308168/ref=dp_olp_all_mbc_mma?ie=UTF8&condition=all Accessed on 3/15/18.
3. <http://www.physicianscientists.org/?page=ugresources>

Spring 2019 Resolutions:

Resolution S19-1. Investigating the effect that the United States Medical Licensing Examination (USMLE) Step 1 exam has on mental health of dual degree students in the continental United States.

Sponsor: Samantha Spellicy, Co-Vice Chair, Policy Committee, American Physician Scientists Association

WHEREAS, the Step 1 exam was originally designed as a binary exam for state licensure eligibility, recently it has become a crucial component of residency applications¹; and

WHEREAS, no correlation has been shown between USMLE scores and objective measures of clinical skills²; and

WHEREAS, the Journal of the American Medical Association reports physician burnout (52.8%) and moderate to severe depression (14.3%) to be prevalent in medical students, but the relationship of these rates to Step 1 have yet to be examined^{3,5}; and

WHEREAS, dual degree students are at a great risk for burnout due to unique financial stress and academic pressure⁶; and

WHEREAS, the financial burden of USMLE Step 1 examinations (\$605 for registration, before study materials), may discriminately affect students of various socioeconomic backgrounds and their mental health⁷; therefore be it

RESOLVED, That the American Physician Scientists Association further investigates the correlations between dual-degree student depression and burnout with USMLE Step 1 testing.

REFERENCES:

1. United States Medical Licensing Examination 2019 Bulletin Information, *Federation of State Medical Boards of the United States Inc.*
2. Prober CG, et al. A plea to Reassess the Role of United States Medical Licensing Examination Step 1 Scores in Residency Selection. *Academic Medicine* (2016) **91**(91): p. 12.15.
3. Roberts LW. Understanding Depression and Distress Among Medical Students. *JAMA* (2010) **304**(11): p. 1231-1233
4. Schwenk TL, et al. Depression, Stigma, and Suicidal Ideation in Medical Students. *JAMA* (2010) **304**(11): p. 1181-1190
5. Dyrbye LN, et al. Relationship Between Burnout and Professional Conduct and Attitudes Among US Medical Students. *JAMA* (2010) **304**(11): p. 1173-1180
6. Vallerand IA. Burnout Among MD/PhD Trainees: The Forgotten Subgroup. *Academic Medicine* (2017) **92**(7): p. 906
7. Covington MF. The cost of taking the USMLE exams is staggering. Available from: <https://www.kevinmd.com/blog/2016/07/cost-taking-usmle-exams-staggering.html> (Accessed 3/31/2019)

Resolution S19-2. Advocating for reformation in the utilization of the United States Medical Licensing Examination (USMLE) Step 1 exam

Sponsor: Samantha Spellicy, Co-Vice Chair, Policy Committee, American Physician Scientists Association

WHEREAS, USMLE Step 1 exam was designed as a binary exam for state licensure eligibility, rather than a determinant of residency success⁸; and

WHEREAS, the USMLE Step 1 exam has become one of the most important criteria cited by residency directors for new resident selection⁹; and

WHEREAS, no correlation exists between USMLE scores and objective measures of clinical skill³; and

WHEREAS, there are a number of alternative factors that are equally, or more predictive, of residency performance such as performance during clinical rotations and faculty recommendations³; and

WHEREAS, Step 1 exam scores have been shown to gradually increase over time in a phenomenon termed “Score creep”, this disproportionately affects dual-degree students at the time of residency selection due to depreciation of student score value over time^{4,5}; and

WHEREAS, the USMLE Step 1 exam has been implicated in further exacerbating student depression and burnout⁶; therefore be it

RESOLVED, That the American Physician Scientists Association supports reforming USMLE Step 1, to have less of a detrimental impact on student wellbeing and reduce utilization in the residency match process.

REFERENCES:

1. United States Medical Licensing Examination 2019 Bulletin Information, *Federation of State Medical Boards of the United States Inc.*
2. Green M, et al. Selection criteria for residency: results of a national program directors survey. *Acad. Med.* (2009) **84**(3): p. 362-367
3. Prober CG, et al. A plea to Reassess the Role of United States Medical Licensing Examination Step 1 Scores in Residency Selection. *Academic Medicine* (2016) **91**(91): p. 12.15.
4. Webb WL. USMLE Step 1 “Score Creep” Adversely Affects Dual-Degree Students. *Acad. Med.* (2017) **92**(6): p. 732-733
5. National Resident Matching Program. Charting Outcomes in the Match: U.S. Allopathic Seniors. *National Resident Matching Program* (2018)
6. Roberts LW. Understanding Depression and Distress Among Medical Students. *JAMA* (2010) **304**(11): p. 1231-1233

Resolution S19-3. Addressing harassment and discrimination against physician-scientists and trainees.

Sponsor: Hanna Erickson, Co-Chair, Policy Committee, American Physician Scientists Association

WHEREAS, over half of female medical students have experienced sexual harassment^{1,2}; and

WHEREAS, the “strict hierarchical structure of the profession sometimes forces victims of harassment to choose between career advancement and personal safety”³; and

WHEREAS, the American Medical Association defines harassment as being “verbal, physical, or visual” conduct that “denigrates or shows hostility or aversion toward an individual because of his or her race, color, religion, sex, sexual orientation, gender identity, national origin, age, disability, marital status, citizenship, or other protected group status” that creates “an intimidating, hostile, or offensive environment” or affects a member’s ability to participate in the organization’s proceedings⁴; and

WHEREAS, the Code of Conduct for the AAP/ASCI/APSA Joint Meeting states “Our conference is dedicated to providing a harassment-free experience for everyone, regardless of gender

identity and expression, age, sexual orientation, disability, physical appearance, body size, race, ethnicity, or religious preference”⁵; and

WHEREAS, reporting of harassment at the AAP/ASCI/APSA Joint Meeting is limited to contacting “a member of conference staff at the registration desk immediately”⁵ or contacting APSA headquarters via email⁶; therefore be it

RESOLVED, that the American Physician Scientists Association creates an anonymous system for reporting harassment at any APSA-sponsored event; and

RESOLVED, the APSA seeks partnerships with organizations such as Time’s Up Healthcare to address the issue of harassment and discrimination in healthcare and research.

REFERENCES:

1. Sexual harassment of women: Climate, culture, and consequences in academic sciences, engineering, and medicine. *National Academies of Sciences, Engineering, and Medicine* (2018) Available from: <https://www.nap.edu/catalog/24994/sexual-harassment-of-women-climate-culture-and-consequences-in-academic> (Accessed 4/1/2019)
2. Fnais N, et al. Harassment and discrimination in medical training: a systematic review and meta-analysis. *Acad. Med.* (2014) **89**(5): p. 817-27
3. Stern J, et al. The stubborn culture of harassment in America’s medical schools. *The Atlantic* (2019) Available from: <https://www.theatlantic.com/education/archive/2019/01/michael-simons-and-lasting-power-men-medicine/580210/> (Accessed 4/1/2019)
4. Anti-Harassment Policy H-140.837. *American Medical Association* (2018) Available from: <https://policysearch.ama-assn.org/policyfinder/detail/Anti-Harassment%20Policy%20H-140.837?uri=%2FAMADoc%2FHOD.xml-H-140.837.xml> (Accessed 4/1/2019)
5. 2018 AAP/ASCI/APSA Joint Meeting Meeting Program & Abstracts. Available from: <https://www.the-asci.org/wp-content/uploads/2018/04/2018-joint-meeting-program-final-small.pdf> (Accessed 4/1/2019)

Code of Conduct. Available from: <http://meeting.physicianscientists.org/faq/#code-of-conduct> (Accessed 4/1/2019)