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AMA CODE SAYS

CEJA to Present Three Reports with Recommendations to House of Delegates

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At the heart of the AMA *Code of Medical Ethics* revision process is the work of the Council on Ethical and Judicial Affairs (CEJA) nine members and its staff. First, CEJA determines that a topic of ethical or professional concern warrants a policy statement from the AMA. The suggestion for a policy statement may come from AMA delegates in an open forum or as a resolution from the House of Delegates; it may be the result of letters or inquiries CEJA has received from physicians; or it may arise from CEJA's close monitoring of professional journals and media reports. Having determined the need for an AMA policy, CEJA staff research the topic thoroughly and prepare a comprehensive report complete with recommendations. When the council has arrived at a consensus on the report's content and recommendations, CEJA presents the report to a House of Delegates reference committee, which in turn reports to the House, recommending that the CEJA report be adopted, not adopted, or referred, that is, returned to CEJA for revision. When a report is adopted, its recommendations are formatted as an Opinion that is filed at the next House of Delegates meeting and then included in the *AMA Code*.

At the AMA House of Delegates Interim meeting in December 2002, CEJA will present three reports to the House by way of reference committees.

Report 1-I-02, "Special Physician-Patient Contracts – Contracting for Exclusive Personalized Services," considers an emerging trend sometimes called "boutique care." Under specialized contracts, physicians offer exclusive personalized services and amenities to patients who pay additional, usually annual, fees distinct from the cost of medical care. Personalized service may mean that the patient need not wait with other patients to see the physician, or that the physician will accompany the patient to see a specialist or will make a home visit if necessary. The CEJA report recommends that both parties to such contracts be clear about the terms of the relationship and agree to them and that such contracts not be promoted as a promise for higher quality of technical care, but as a means to provide more personalized service. The recommendations note that the impact of such special contracts on access to care within a community should be considered, so that physicians may be precluded from establishing special contracts in locations where physicians are scarce.

Report 2-I-02, "Ethical Responsibility to Study and Prevent Error and Harm in the Provision of Health Care," explores the ethical responsibilities mentioned in its title

and also physicians' responsibilities to patients who suffer harm as a result of a medical error. The recommendations call on physicians to participate in the development of reporting mechanisms that emphasize learning and systems changes. The report offers guidance in dealing with patients who have been harmed, with emphasis on honesty, continuity of care, and patient advocacy. Finally, the report encourages physicians to seek changes in the current legal system to ensure that all medical errors can be safely and securely reported and studied as learning experiences for all participants in the health care system, without threat of legal liability or punitive action.

Report 3-I-02, "Ethical Guidelines for the Use of Electronic Mail between Patients and Physicians," examines the ethical implications of electronic communication (e-mail) between physicians and patients, its impact on a previously established patient-physician relationship, and the limitations in using e-mail to create a new patient-physician relationship. The report recommends that e-mail should not be used to establish a patient-physician relationship but can supplement office visits in established relationships. The report states that physicians must hold the same ethical responsibilities to their patients when using e-mail as they do during other patient encounters.

House of Delegates decision on the three CEJA reports is expected by mid-December.

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