American Medical Association

Stance on Abortion and Contraception

https://www.ama-assn.org/press-center/press-releases/ruling-egregious-allowance-government-intrusion-medicine

Dr. Jack Resneck, former president of the American Medical Association, made the following statement immediately following the overturning of *Roe v. Wade* on June 24, 2022:

"The American Medical Association is deeply disturbed by the U.S. Supreme Court's decision to overturn nearly a half century of precedent protecting patients' right [sic] to critical reproductive health care—representing an egregious allowance of government intrusion into the medical examination room, a direct attack on the practice of medicine and the patient-physician relationship, and a brazen violation of patients' rights to evidence-based reproductive health services. States that end legal abortion will not end abortion—they will end safe abortion, risking devastating consequences, including patients' lives."

https://www.ama-assn.org/press-center/press-releases/ama-announces-new-adopted-policies-related-reproductive-health-care

On Nov. 16, 2022, the American Medical Association announced the following press releases on abortion in a "Post-Dobbs" world:

- "Since the Dobbs decision, health care in the United States has been thrown into chaos, with life-or-death decisions deferred to hospital lawyers, patients needing care driven across state lines, and uncertainty over the future of access to reproductive health care," said AMA President Jack Resneck Jr., M.D. "The AMA is steadfastly opposed to governmental interference in the practice of medicine, especially for well-established, medically necessary treatments. Patients and physicians need assurances that they won't be accused of crimes for medically necessary treatment. Unfortunately, this is the post-Dobbs world we now face. The fact that medically necessary treatment can be criminalized speaks volumes about these misguided abortion laws. Physicians and other health care professionals must attempt to comply with vague, restrictive, complex, and conflicting state laws that interfere in the practice of medicine. These new policies will help the AMA to continue our advocacy and defend physicians in legislatures and the courts."
- ♦ "To ensure broad and equitable access to abortion services called for by newly adopted policy, the AMA will advocate for public health programs and private insurers to cover those services. The AMA also will urge lawmakers to codify

- legal protections for physicians who provide abortion services. 'Reproductive care is health care. It's that simple,' Dr. Resneck said. 'Expecting patients, especially those covered by Medicaid, to shoulder the cost of abortion services is unrealistic. Our new policy is a roadmap for improving access and equity to ensure patients get the health care that they need.'"
- * "Although the Accreditation Council for Graduate Medical Education requires access to abortion training for all obstetrics and gynecology residents, nearly 45% of accredited programs are in states that have or are likely to ban abortion. New policy directs the AMA to ensure medical students and residents retain access to abortion training. Specifically, the AMA will advocate for the availability of abortion education and clinical exposure to medication and procedural abortion. The AMA will also advocate for funding for institutions that provide clinical training on reproductive health services, including medication and procedural abortion, to medical students and resident and fellow physicians from other programs, so that they can expand their capacity to accept out-of-state physicians-in-training who are seeking this training. Under the new policy, the AMA will support pathways for medical students, residents and fellow physicians to receive medication and procedural abortion training at another location in the event that this training is limited or illegal in a home institution."

https://www.ama-assn.org/delivering-care/public-health/ama-holds-fast-principle-reproductive-care-health-care

"Since the *Dobbs* decision, health care in the United States has been thrown into chaos, with life-or-death decisions deferred to hospital lawyers, patients needing care driven across state lines, and uncertainty over the future of access to reproductive health care"-AMA President Jack Resneck Jr., MD.

https://code-medical-ethics.ama-assn.org/ethics-opinions/abortion

In their Code of Medical Ethics, the AMA states:

"Abortion is a safe and common medical procedure, about which thoughtful individuals hold diverging, yet equally deeply held and well-considered perspectives. Like all health care decisions, a decision to terminate a pregnancy should be made privately within the relationship of trust between patient and physician in keeping with the patient's unique values and needs and the physician's best professional judgment."

https://www.ama-assn.org/delivering-care/public-health/ama-court-don-t-overturn-fda-approval-mifepristone

In March 2023, the AMA joined leading medical and public health associations in federal court to argue in favor of the FDA's approval of distributing the mifepristone abortion pill, in the name of "protecting pregnant patients' health". The Catholic Medical Association and other pro-life organizations were the ones who brought forth the lawsuit against the FDA.

https://www.ama-assn.org/press-center/press-releases/ama-applauds-fda-approval-otc-birth-control

In July 2023, AMA supported and applauded FDA for approving Opill as the first over-the-counter birth control pill:

"The FDA's decision today approving over-the-counter birth control is a monumental step in providing broader access to safe and effective reproductive health care for millions of patients. At a time when reproductive health care services are becoming increasingly limited and reproductive health clinics are closing in several states, improving access to oral contraceptives is critically important to ensure patients can effectively limit unintended pregnancies and manage family planning."

Stance on Human Embryonic Stem Cell Research

https://code-medical-ethics.ama-assn.org/ethics-opinions/research-stem-cells

AMA also supports the use of human embryonic stem cell research in their Code of Medical Ethics:

"The pluralism of moral visions that underlies this debate must be respected. Participation in research involving embryonic stem cells requires respect for embryos, research participants, donors, and recipients. Embryonic stem cell research does not violate the ethical standards of the profession. Every physician remains free to decide whether to participate in stem cell research or to use its products. Physicians should continue to be guided by their commitment to the welfare of patients and the advancement of medical science. Physicians who conduct research using embryonic stem cells should be able to justify greater risks for subjects, and the greater respect due to embryos than stem cells from other

sources, based on expectations that the research offers substantial promise of contributing significantly to scientific or therapeutic knowledge."

Stance on IVF/Reproductive Technologies

https://code-medical-ethics.ama-assn.org/ethics-opinions/assisted-reproductive-technology

According to AMA:

Physicians should increase their awareness of infertility treatments and options for their patients. Physicians who offer assisted reproductive services should:

- Value the well-being of the patient and potential offspring as paramount.
- ♦ Ensure that all advertising for services and promotional materials are accurate and not misleading.
- ◆ Provide patients with all of the information they need to make an informed decision, including investigational techniques to be used (if any); risks, benefits, and limitations of treatment options and alternatives, for the patient and potential offspring; accurate, clinicspecific success rates; and costs.
- Provide patients with psychological assessment, support and counseling or a referral to such services.
- ♦ Base fees on the value of the service provided. Physicians may enter into agreements with patients to refund all or a portion of fees if the patient does not conceive where such agreements are legally permitted.
- Not discriminate against patients who have difficult-to-treat conditions, whose infertility has multiple causes, or on the basis of race, socioeconomic status, or sexual orientation or gender identity.