

**HOE Action: Resolution 321 adopted as amended**

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 321  
(A-08)

Introduced by: California Delegation  
Subject: Promotion of Better Pain Care  
Referred to: Reference Committee C  
(David M. Lichtman, MD, Chair)

---

1 Whereas, Widespread inadequacy and disparity of pain care persist, resulting in deteriorating  
2 public health, needless patient suffering and loss of productivity despite efforts of the medical  
3 profession, regulatory agencies, and the public; and  
4

5 Whereas, The limited availability of education in pain care at the undergraduate, graduate,  
6 and post graduate levels results in suboptimal training of all physicians; and  
7

8 Whereas, Inconsistencies in the training and credentialing requirements for self-designated  
9 "pain specialists" promotes misunderstanding of their capabilities and limitations; and  
10

11 Whereas, Inconsistencies in existing standards of care and fragmentation in the delivery of  
12 pain care results in confusion among patients, payers, regulators and physicians; therefore  
13 be it  
14

15 RESOLVED, That our American Medical Association express its strong commitment to better  
16 access and delivery of quality pain care through the promotion of enhanced research,  
17 education and clinical practice in the field of pain medicine (Directive to Take Action); and be  
18 it further  
19

20 RESOLVED, That our AMA encourage relevant specialties to collaborate in studying the  
21 following: (1) the scope of practice and body of knowledge encompassed by the field of pain  
22 medicine; (2) the adequacy of undergraduate, graduate and post graduate education in the  
23 principles and practice of the field of pain medicine, considering the current and anticipated  
24 medical need for the delivery of quality pain care; (3) appropriate training and credentialing  
25 criteria for this multidisciplinary field of medical practice; and (4) convening a meeting of  
26 interested parties to review all pertinent matters scientific and socioeconomic. (Directive to  
27 Take Action)

Received: 05/13/08

## **RELEVANT AMA POLICY**

### **D-120.976 Pain Management**

Our AMA will: (1) support more effective promotion and dissemination of educational materials for physicians on prescribing for pain management; (2) take a leadership role in resolving conflicting state and federal agencies' expectations in regard to physician responsibility in pain management; (3) coordinate its initiatives with those state medical associations and national medical specialty societies that already have established pain management guidelines; and (4) will disseminate Council on Science and Public Health Report 5 (A-06), "Neuropathic Pain," to physicians, patients, payers, legislators, and regulators to increase their understanding of issues surrounding the diagnosis and management of maldynia (neuropathic pain). (Res. 809, I-04; Appended: CSAPH Rep. 5, A-06)

### **D-170.999 Barriers to Appropriate Pain Management**

Our AMA, in cooperation with relevant medical societies and organizations, will serve as an educational resource to the media by providing objective information regarding the management of pain disorders so that information presented to the public will be factually accurate reflecting appropriate medical perspectives. (Res. 506, A-01)

### **D-295.966 Pain Management Standards and Performance Measures**

Our AMA, through the Council on Medical Education, shall continue to work with relevant medical specialty organizations to improve education in pain management in medical schools, residency programs, and continuing medical education programs. (CSA Rep. 4, A-02)

### **D-295.982 Model Pain Management Program For Medical School Curricula**

Our AMA will collect, synthesize, and disseminate information about effective educational programs in pain management and palliative care in medical schools and residency programs. (Res. 308, A-01)

### **D-300.996 Model Pain Management Program For Medical School Curricula**

Our AMA will encourage appropriate organizations to support voluntary continuing education for physicians based on effective guidelines in pain management. (Res. 308, A-01)