



Academic writing and editing among practicing physicians and physicians-in-training

<https://policybase.cma.ca/en/permalink/policy11627>

Policy Type: Policy resolution

Date: 2015-Aug-26

Topics: Physician practice/ compensation/ forms

Ethics and medical professionalism

Health systems, system funding and performance

Resolution: GC15-47

The Canadian Medical Association will promote the development of resources to foster academic writing and editing among practicing physicians and physicians-in-training.



Application of evidence-based medicine

<https://policybase.cma.ca/en/permalink/policy9893>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2010-Aug-25

Topics: Health human resources

Ethics and medical professionalism

Health systems, system funding and performance

Resolution: GC10-70

The Canadian Medical Association calls on the Association of Faculties of Medicine of Canada, faculties of medicine, College of Family Physicians of Canada and Royal College of Physicians and Surgeons of Canada to greatly expand efforts to familiarize medical students and residents with the application of evidence-based medicine, including systematic reviews, clinical practice guidelines, care pathways and related techniques to improve quality, safety and efficiency in medicine.



Collaborative development of patient-focused funding initiatives

<https://policybase.cma.ca/en/permalink/policy9844>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 2010-Aug-25
Topics: Ethics and medical professionalism
Health systems, system funding and performance
Resolution: GC10-12
The Canadian Medical Association will work with provincial/territorial medical associations to ensure meaningful consultations by governments with physicians who are accountable to the medical profession in the collaborative development of patient-focused funding initiatives.



Compensation ceilings for GP's and access to front-line services

<https://policybase.cma.ca/en/permalink/policy1524>

Policy Type: Policy resolution
Last Reviewed: 2017-Mar-04
Date: 2004-Aug-18
Topics: Ethics and medical professionalism
Health human resources
Health systems, system funding and performance
Physician practice/ compensation/ forms
Resolution: GC04-51
The Canadian Medical Association recommends that compensation ceilings for general practitioners where they exist be removed in order to improve access to front-line services.



Environmental stewardship

<https://policybase.cma.ca/en/permalink/policy8936>

Policy Type: Policy resolution

Last Reviewed: 2014-Mar-01

Date: 2007-Aug-22

Topics: Ethics and medical professionalism

Health human resources

Health systems, system funding and performance

Physician practice/ compensation/ forms

Population health/ health equity/ public health

Resolution: GC07-74

The Canadian Medical Association will respond to the challenge for a clean environment (air, water, soil, climate change) by encouraging: a. physicians to become spokespersons for environmental stewardship, including the discussion of these issues when appropriate with patients; b. the medical community to work with health care facilities to adopt and implement policies aimed at reducing or recycling waste in a safe and properly prescribed manner; c. physicians to adopt "green" measures in their practice environments and personal lifestyles; d. medical schools, residency programs and continuing medical education sessions to enhance their provision of educational programs on health and the environment; and e. the development of evidence-based information on health and environment issues.



Family physicians and hospital affiliation

<https://policybase.cma.ca/en/permalink/policy1502>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Ethics and medical professionalism

Health human resources

Health systems, system funding and performance

Physician practice/ compensation/ forms

Resolution: GC04-36

The Canadian Medical Association calls on the federal, provincial and territorial governments to work together with the Association and its divisions and affiliates to develop initiatives that are incentive based to encourage family physicians to retain hospital affiliation and provide hospital care in supporting the provision of the full continuum of primary care to patients.



Health Care Coverage for Migrants: An Open Letter to the Canadian Federal Government

<https://policybase.cma.ca/en/permalink/policy13940>

Policy Type: Policy endorsement
Date: 2018-Dec-15
Topics: Population health/ health equity/ public health
Health systems, system funding and performance
Ethics and medical professionalism

Documents

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Multidisciplinary care initiatives

<https://policybase.cma.ca/en/permalink/policy9863>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2010-Aug-25

Topics: Health systems, system funding and performance

Ethics and medical professionalism

Health human resources

Resolution: GC10-33

The Canadian Medical Association supports the development of multidisciplinary care initiatives that incorporate long-term, sustainable funding and resources that remove financial barriers to incorporating diverse allied health professionals within medical practices.



National wait-time monitoring system

<https://policybase.cma.ca/en/permalink/policy1532>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Ethics and medical professionalism

Health systems, system funding and performance

Resolution: GC04-17

The Canadian Medical Association advocates for the implementation of a national wait-time monitoring system for a broad range of medical conditions and diagnostic services.



Payment for discussions of patient health with other health professionals

<https://policybase.cma.ca/en/permalink/policy1508>

Policy Type: Policy resolution

Last Reviewed: 2017-Mar-04

Date: 2004-Aug-18

Topics: Ethics and medical professionalism
Health systems, system funding and performance
Physician practice/ compensation/ forms

Resolution: GC04-44

The Canadian Medical Association recommends that provincial and territorial authorities recognize that any discussion regarding a patient's health between a physician and another health professional is a medical act to be duly compensated.