Best practices for smartphone and smart-device clinical photo taking and sharing

https://policybase.cma.ca/link/policy13860

POLICY TYPE  Policy document
DATE  2018-03-03
TOPICS  Health information and e-health
Ethics and medical professionalism

Documents
Canada’s doctors and nurses urgently calling for federal measures to address Canada’s health workforce crisis
https://policybase.cma.ca/link/policy4460

POLICY TYPE
Parliamentary submission

DATE
2021-11-09

TOPICS
Ethics and medical professionalism

Documents
Canadian Medical Association input in advance of the World Health Assembly Special Session

https://policybase.cma.ca/link/policy14461

**POLICY TYPE**  
Parliamentary submission

**DATE**  
2021-11-17

**TOPICS**  
Population health, health equity, public health
Ethics and medical professionalism

**Documents**

[Image of policy document]

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**November 17, 2021**

**Deborah Hurlbert**  
Secretary, Medical Mission Office  
Office of the President of the Canadian Medical Association

**Canadian Medical Association**

Reciprocal Health: Supporting-Led in Advance of Health Assembly Special Session

**Parliamentary Baseball**

In support of the reciprocal health work undertaken by the Canadian Medical Association (CMA) in its submission regarding the Ethical and Medical Professionalism of the World Health Assembly (WHA) Special Session, this policy document outlines the CMA's stance on reciprocal health initiatives.

The CMA supports the reciprocal health initiatives through the following:

- **Ethical and Professional Standards**
- **International Collaboration**
- **Sustainable Development Goals**
- **Health Security and Preparedness**
- **Universal Access to Health Care**

The CMA advocates for the implementation of strategies that ensure the equitable distribution of healthcare resources, particularly in the context of reciprocal health initiatives.

**Documents**

- Carter: CMA submission regarding euthanasia and assisted death
- CMA Policybase - Canadian Medical Association
Carter: CMA submission regarding euthanasia and assisted death
https://policybase.cma.ca/link/policy13935

POLICY TYPE  Court submission
LAST REVIEWED  2011-03-05
DATE  2014-08-27
TOPICS  Ethics and medical professionalism
         Population health, health equity, public health

Documents
CMA Recommendations on Vaccine Equity and Intellectual Property
https://policybase.cma.ca/link/policy14476

POLICY TYPE
Parliamentary submission

DATE
2022-05-13

TOPICS
Ethics and medical professionalism
Pharmaceuticals, prescribing, cannabis, drugs
Population health, health equity, public health

Documents

[Image of CMA's formal submission to the Federal External Panel on assisted dying]
CMA’s formal submission to the Federal External Panel on assisted dying
https://policybase.cma.ca/link/policy11750

POLICY TYPE Parliamentary submission

LAST REVIEWED 2019-03-03

DATE 2015-10-19

TOPICS Ethics and medical professionalism

Documents
CMA Statement on Racism
https://policybase.cma.ca/link/policy14245

POLICY TYPE  
Policy document

DATE  
2020-06-02

TOPICS  
Ethics and medical professionalism
Health care and patient safety

Documents
CMA Submission to the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities’ study of Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code
https://policybase.cma.ca/link/policy14464

POLICY TYPE
Parliamentary submission

DATE
2021-12-15

TOPICS
Health care and patient safety
Ethics and medical professionalism

Documents
CMA Submission to the Standing Committee on Social Affairs, Science and Technology’s study of Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code

https://policybase.cma.ca/link/policy14462

POLICY TYPE
Parliamentary submission

DATE
2021-12-10

TOPICS
Ethics and medical professionalism

Documents

November 15, 2021

Lisa M. MacKinnon
CMA President

Page 1

The Canadian Medical Association supports Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code. This submission focuses on the proposed changes in relation to direct-to-consumer genetic testing.

Direct-to-consumer genetic testing allows individuals to order genetic tests online or by telephone without the involvement of a health care provider. This can raise ethical and professional concerns, as well as potential risks to public health and safety.

The CMA recommends that direct-to-consumer genetic testing be regulated to ensure that individuals receive appropriate genetic counseling and that the results are interpreted by qualified professionals. This would help prevent misinterpretation of results and ensure that individuals understand the implications of their genetic information.

The CMA also advocates for greater transparency in the genetic testing industry, including full disclosure of test results and the limitations of testing. This would help ensure that individuals are not misled about the potential risks and benefits of genetic testing.

In conclusion, the CMA supports Bill C-3 and recommends that the proposed changes be implemented to protect the health and well-being of Canadians.

CMA Policybase - Canadian Medical Association

p. 10
Direct-to-consumer genetic testing
https://policybase.cma.ca/link/policy13696

POLICY TYPE: Policy document
DATE: 2017-05-27
TOPICS: Ethics and medical professionalism

Equity and diversity in medicine
https://policybase.cma.ca/link/policy14127

POLICY TYPE: Policy document
DATE: 2019-12-07
TOPICS: Ethics and medical professionalism
EQUITY AND DIVERSITY IN MEDICINE

BACKGROUND TO CMA POLICY

A PATIENT

The principal role of the patient is to provide care, treatment, and management. It includes the patient’s participation in the decision-making process, consent, and the right to confidentiality and privacy. It is important to recognize that patients are members of a diverse society and that they come from different backgrounds, cultures, and beliefs. It is crucial to understand and respect these differences.

The CMA recognizes the importance of patient care and the need to ensure that the care provided is safe, effective, and respectful of patients’ cultural, linguistic, and religious beliefs.

The CMA advocates for policies and practices that promote patients’ rights and responsibilities, including accessible and equitable health care services.

CMA STATEMENT ON EQUITY AND DIVERSITY IN MEDICINE

What is it?

The CMA is committed to promoting equity and diversity in medicine by ensuring that all patients receive appropriate and respectful care. This includes recognizing and addressing the social determinants of health and promoting inclusive and equitable health care systems.

Why is it important?

Equity and diversity are fundamental values that reflect the principles of human rights and social justice. The CMA recognizes that health care professionals have a responsibility to promote equity and diversity in medicine.

GUIDING PRINCIPLES

Relevant for clinicians

- The patient’s right to dignity, respect, and privacy should be respected at all times.
- The patient’s cultural, linguistic, and religious background should be considered when providing care.
- The patient should be informed of the care being provided and any potential risks.
- The patient should be able to make informed decisions about their care.

Relevant for policy makers

- Policies and practices should be developed to promote equity and diversity in medicine.
- The CMA should advocate for policies that promote equity and diversity in medicine.
- The CMA should collaborate with other organizations to promote equity and diversity in medicine.

Relevant for organizations

- Organizations should promote equity and diversity in medicine by training their staff and developing policies and practices that promote equity and diversity.
- Organizations should collaborate with other organizations to promote equity and diversity in medicine.

Conclusion

The CMA is committed to promoting equity and diversity in medicine. This includes recognizing and addressing the social determinants of health and promoting inclusive and equitable health care systems.

References


For further information, please visit: https://www.cma.ca/
The evolving professional relationship between Canadian physicians and our health care system: Where do we stand?

https://policybase.cma.ca/link/policy10389

POLICY TYPE Policy document
LAST REVIEWED 2019-03-03
DATE 2012-05-26
TOPICS Ethics and medical professionalism

Documents
Federal Monitoring and Reporting Regime for MAID
https://policybase.cma.ca/link/policy13853

POLICY TYPE  Response to consultation
DATE          2017-05-15
TOPICS        Ethics and medical professionalism

Documents
Federal monitoring of medical assistance in dying regulations
https://policybase.cma.ca/link/policy13856

POLICY TYPE  Response to consultation
DATE  2018-02-13
TOPICS  Ethics and medical professionalism

Documents
Guidelines for physicians in interactions with industry / Recommendations for physician innovators

https://policybase.cma.ca/link/policyI4454

POLICY TYPE
Policy document

DATE
2021-08-21

REPLACES
PD08-01 Guidelines for Physicians in Interactions with Industry

TOPICS
Ethics and medical professionalism

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

https://policybase.cma.ca/link/policy13940

POLICY TYPE
Policy endorsement

DATE
2018-12-15

TOPICS
Population health, health equity, public health
Health systems, system funding and performance
Ethics and medical professionalism
Joint statement on preventing and resolving ethical conflicts involving health care providers and persons receiving care

https://policybase.cma.ca/link/policy202

POLICY TYPE
Policy document

LAST REVIEWED
2019-03-03

DATE
1998-12-05

TOPICS
Ethics and medical professionalism

Documents
Medical assistance in dying
https://policybase.cma.ca/link/policy13698

POLICY TYPE
Policy document

DATE
2017-05-27

REPLACES
EUTHANASIA AND ASSISTED DEATH (UPDATE 2014)

TOPICS
Ethics and medical professionalism

Documents