

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 525  
(A-06)

Introduced by: College of American Pathologists  
Subject: Inappropriate Legislative Mandates of eGFR Calculations  
Referred to: Reference Committee E  
(Mary G. Armstrong, MD, Chair)

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- 1 Whereas, Numerous state legislatures this year have considered legislation mandating the  
2 performance of the estimated Glomerular Filtration Rate Calculation (eGFR) by clinical  
3 laboratories on all serum creatinine tests ordered by physicians; and  
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5 Whereas, Such legislation has proliferated nationwide this year due largely to the advocacy  
6 efforts of pharmaceutical interests, notwithstanding the objections of medical societies and  
7 medical specialty societies both at the state and national level; and  
8  
9 Whereas, Such legislation would establish in state law a specific, legal standard of medical  
10 practice without regard to a patient's clinical status and medical necessity; and  
11  
12 Whereas, State laws mandating performance of the eGFR calculation on serum creatinine tests  
13 usurp the clinical judgment of medical professionals, including both treating physicians and the  
14 medical directors of the laboratory; therefore be it  
15  
16 RESOLVED, That our American Medical Association support the position that the estimated  
17 Glomerular Filtration Rate Calculation (eGFR) calculation, when appropriate and feasible, is a  
18 clinically useful calculation that should be promoted in the medical community in a scientific  
19 manner as a calculation that does NOT require state legislation or state law that would create  
20 an inflexible, politically-based mandate for the practice of medicine that, in general, can be  
21 deleterious to patient care (New HOD Policy); and be it further  
22  
23 RESOLVED, That our AMA policy is that legislation mandating the eGFR calculation improperly  
24 and detrimentally prescribes medical decision-making to the extent that it deprives a physician  
25 of the ability to make appropriate, patient-specific clinical judgments regarding the performance  
26 of the calculation. (New HOD Policy)

Fiscal Note: Staff cost estimated at less than \$500 to implement.

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