

REPORT OF THE COUNCIL ON ETHICAL AND JUDICIAL AFFAIRS

CEJA Report 01-I-22

Subject: Amendment to Opinion 4.2.7, “Abortion”

Presented by: Peter A Schwartz, MD, Chair

Referred to: Reference Committee on Amendments to Constitution and Bylaws

1 Current guidance on abortion in Opinion 4.2.7 of the AMA *Code of Medical Ethics* was issued in
2 1977 in the context of the U.S. Supreme Court decision in *Roe v. Wade*,¹ which recognized a
3 constitutional right to abortion. The Court’s recent decision in *Dobbs v. Jackson Women’s Health*
4 *Organization*² overturning *Roe* and returning debate about abortion to the states has significantly
5 altered the landscape for patients and their physicians.

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7 As the American Medical Association immediately [noted](#), *Dobbs*:

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9 overturn[s] nearly a half century of precedent protecting patients’ right to critical reproductive
10 health care—representing an egregious allowance of government intrusion into the medical
11 examination room, a direct attack on the practice of medicine and the patient-physician
12 relationship, and a brazen violation of patients’ rights to evidence-based reproductive health
13 services.

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15 The AMA joined the American College of Obstetricians and Gynecologists and more than 70 other
16 professional medical associations in [condemning](#) the unacceptable effects *Dobbs* will have on
17 access to safe, accepted, essential reproductive health services; the privacy and integrity of patient-
18 physician relationships; and indeed, the safety of patients and physicians.

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20 Guidance throughout the *Code* underscores physicians’ duty of fidelity to patients and to promote
21 access to care, as well as responsibility to support informed decision making in keeping with
22 patients’ individual goals and preferences as autonomous moral agents. The *Code* likewise
23 prohibits physicians acting as agents of government entities in conflict with their duties to patients.
24 At the same time, the *Code* acknowledges that physicians too are moral agents as individuals,
25 whose deeply held personal beliefs may at times conflict with the expectations held of them as
26 medical professionals, and offers guidance to help physicians navigate an ethically acceptable path
27 forward in the face of diverging commitments.

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29 Finally, the *Code* [acknowledges](#) that although deeply intertwined, law and the ethical commitments
30 of the profession do not always align:

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32 In some cases, the law mandates conduct that is ethically unacceptable. When physicians
33 believe a law violates ethical values or is unjust they should work to change in law. In
34 exceptional circumstances of unjust laws, ethical responsibilities should supersede legal duties.

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36 When the letter of the law would foreclose urgently needed care physicians must have latitude to
37 act in accord with their best professional judgement.

1 RECOMMENDATION

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3 With all of the foregoing considerations in mind, the Council on Ethical and Judicial Affairs
4 recommends that Opinion 4.2.7, "Abortion," be amended as follows and the remainder of this
5 report be filed:

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

12

13 ~~The *Principles of Medical Ethics* of the AMA do not prohibit a physician from performing an~~
14 ~~abortion permit physicians to perform abortions in keeping with good medical practice under~~
15 ~~circumstances that do not violate the law.~~

(Modify HOD/CEJA Policy)

Fiscal Note: Less than \$500

¹ *Roe v. Wade*, 410 U. S. 113 (1973).

² *Dobbs v. Jackson Women's Health Organization*, 142 S.Ct. 2228.