City of Hope

♦ Department of Continuing Medical Education ♦

Cultural Linguistic Competency (CLC) and Implicit Bias (IB)

The California legislature has passed Assembly Bill (AB) 1195, which states that as of July 1, 2006, all Category 1 CME activities that relate to patient care must include a cultural diversity/linguistics component. It has also passed AB 241, which states that as of January 1, 2022, all continuing education courses for a physician and surgeon **must** contain curriculum that includes specified instruction in the understanding of implicit bias in medical treatment.

The cultural and linguistic competency (CLC) and implicit bias (IB) definitions reiterate how patients' diverse backgrounds may impact their access to care.

The following bibliography of articles is provided to serve as a resource and adjunct to this activity.

1. Gibiansky L, Sutjandra L, Doshi S, Zheng J, Sohn W, Peterson MC, Jang GR, Chow AT, Pérez-Ruixo JJ. Population pharmacokinetic analysis of denosumab in patients with bone metastases from solid tumours. Clin Pharmacokinet. 2012 Apr 1;51(4):247-60. doi: 10.2165/11598090-000000000-00000. PMID: 22420579.
2. Hui M, Balu B, Uppin SG, Uppin MS, Chandrasekhar P, Rao KN, Bhattarcharjee S, VijayaSaradhi M, Krishna YV. Bone metastases: A compilation of 365 histologically verified cases spanning over two decades from a single center. Indian J Pathol Microbiol. 2021 Oct-Dec;64(4):717-724. doi: 10.4103/IJPM.IJPM_1132_20. PMID: 34673591.
3. Zhang Y, Yi M, Cao J, Hou C, Zhou Y, Zhong Y. Serum cross-linked N-telopeptide of type I collagen for the diagnosis of bone metastases from solid tumours in the Chinese population: Meta-analysis. J Int Med Res. 2016 Apr;44(2):192-200. doi: 10.1177/0300060515600187. Epub 2016 Feb 8. PMID: 26857861; PMCID: PMC5580071.