

11/15/73

Delineation of Clinical Privileges
Report of Ad Hoc Committee

R

The procedure for appointments to the Medical Department were reviewed. Although three references are required, at no time is documentation of medical school graduation requested. While licensure to practice is not required for clinical appointment, if clinical privileges are to be delineated it would seem logical to require documentation of specialty training where applicable.

The duty of the Credentials Committee, as outlined in Article V, Section 7 of the By-laws, requires no change but it should be brought to the attention of the Credentials Committee that, for our protection, the appropriate documentation should be requested.

Article III, Section 4; Procedure for Appointment now reads as follows:

"The Chief of Staff shall be responsible for presenting to the Governing Body of the Hospital appropriate evidence in support of recommendations for appointments to The Medical Staff. All appointments may be made by the Governing Body, or with the unanimous approval of the Credentials Committee by the President of the Governing Body; provided, however, in the latter case such appointments shall be submitted to the Governing Body at its next meeting for ratification."

The proposed change is as follows:

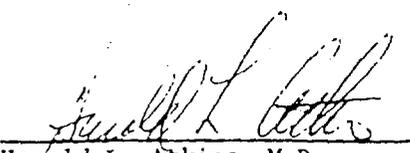
The preceding shall be labeled paragraph 1. Then will follow:

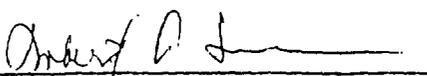
"2. All recommendations for appointments will specify the general area of medical practice for which the physician shall enjoy clinical privileges (i.e. internal medicine, neurosurgery, clinical pathology, etc.) as requested by the sponsoring physician. These privileges will also be specified for reappointments.

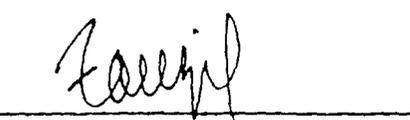
REPOSITORY Records Holding Area, Bldg.
COLLECTION Meetings/Minutes/Agendas 494
BOX No. 2
FOLDER Governing Body 1971-1974

1181602

3. Should the applicant for appointment be dissatisfied with his level of appointment or area of clinical privileges he may request his sponsoring physician to recommend a change to the Credentials Committee. Should a grievence persist the physician may then put the matter to the Clinical Staff at a regular meeting. This will be the only time when the Clinical Staff may recommend a clinical appointment to the Governing Body.


Harold L. Atkins, M.D.


Robert C. Love, M.D.


Italo Zanzi, M.D.


Daniel Slatkin, M.D.

jab

One of the recommendations of the Joint Committee on Accreditation of Hospitals is as follows:

"A profile reflecting the clinical performance of each medical staff member should be maintained and periodically updated."

The committee feels this is not necessary in the present clinical set-up and suggests the following resolution be passed on to the Governing Body.

Insofar as the Hospital of the Medical Research Center is limited in size and the Chief of Staff personally sees all patients daily, the requirement of the JCAH is not applicable and is unnecessary. There is ample opportunity to monitor physician performance on a personal level. The situation which could pertain in a community hospital is not pertinent to the operation of this hospital.