

Chief of Staff “Morning After” Report  
November 2010

The following are highlights from the November 1<sup>st</sup> Medical Executive Committee Meeting:

**Medical Staff Rules & Regulations - Section 11.3.2 was revised**

Revised language follows this report.

**New Department Chair in OB/GYN**

The MEC approved the recommendation of the OB/GYN Chair Search Committee to appoint Dr. Sarah Kilpatrick as Department Chair, contingent on her obtaining Medical Staff privileges.

**Nominating Committee formed for Medical Staff Secretary and Treasurer.**

The following physicians were appointed to a Nominating Committee, charged with identifying candidates for Medical Staff Secretary and Treasurer for 2011:

- Gerald Whitman, M.D. – Chair
- Jeffrey Caren, M.D.
- Ruth Cousineau, M.D.
- David Savar, M.D.
- Daniel Schaefer, M.D.

**Task Forces approved for “Committee Service”**

MEC membership is limited to Medical Staff members with prior service on an approved committee or Task Force. The MEC updated the list of committees that would qualify.

**New Members of the Medical Staff:**

- Ronny Alfandari, D.P.M. – Podiatry
- Jennifer Anger, M.D. -- Urology
- Alexandre Arkader, M.D. – Orthopedic Surgery
- Paul Choi, M.D. – Orthopedic Surgery
- Lawrence Cohen, M.D. – Imaging
- Pavittarpaul Dhesi, M.D. – General Internal Medicine
- Joel Epstein, D.M.D. – Dentistry
- Vlad Gendelman, M.D. – Orthopedic Surgery
- Uzoma Ibebuogu, M.D. – Cardiology
- Aaron Savar, M.D. -- Ophthalmology
- Puja Vora, M.D. – General Internal Medicine
- Natalia Zorzhevsky, M.D. – Imaging

*End of Report*

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## Supplemental Information: Recently Approved Rule and Regulation (new language is red)

### ARTICLE XI, Section 11.3.2

#### 11.3.2 Completed Application Requirement.

The completed Medical Staff Application shall be submitted to the Department of Medical Staff Services for processing in accordance with Article III, Section 2 of the Constitution. For purposes of Section 11.3 of this Article XI, review of an Application may proceed without evidence of an applicant's current: (i) California licensure; (ii) DEA status; and (iii) Liability Coverage. Notwithstanding the foregoing, the Application shall not be forwarded to the Medical Executive Committee for action until evidence of the foregoing is received by the Department of Medical Staff Services. In addition to meeting the minimum criteria for membership as set forth in the Constitution, applicants for membership must provide the following additional information to the Department of Medical Staff Services, which information must be satisfactory to the Medical Staff:

(b) At least ~~three (3)~~ four (4) written references; one or more must be from an "Authoritative Source", and the others must be from peers from the applicant's specialty area, ~~and one (1) written reference from an "Authoritative Source."~~ If the applicant has been out of his or her training program for five (5) years or less, such Authoritative Source(s) ~~shall~~ should be considered the Program Director(s) of each the applicant's specialty training program(s). If the applicant is currently in a training program, one of the Authoritative Sources shall be the Program Director of that program, only if the applicant has been in the program for at least six months. If the applicant has been out of his or her training program for over five (5) years, such Authoritative Source shall be considered either: (1) the Department Chair, Division Director or Clinical Chief of the applicant's specialty area(s), at the hospital where the applicant has maintained full Medical Staff membership and Clinical Privileges, and who is able to attest to the applicant's current (within the last two (2) years) competency for the Privileges requested.; or (2) for applicants who have completed the Medical Center's Clinical Practice Re-Entry program, the Department Chair of the applicant's specialty area and the consensus statement of the exit interview committee of the Clinical Practice Re-Entry program. The requisite peer references required by this Subsection and any additional references obtained in the course of reviewing an application shall provide information that the quality of patient care provided by the applicant is above average from individuals who have worked with the applicant and have observed and are knowledgeable about the individual's professional competence, ethical character, ability to work with others and interest in and qualifications for training Physicians-In-Training. The peer references required by this Subsection shall not include references received from persons having a perceived conflict of interest with the applicant (e.g., a business associate, classmate, student, friend, relative, etc.). Notwithstanding the foregoing, the applicant may be required to submit additional references. Any additional references shall be held to the same standard noted above;