UNIVERSITY HOSPITAL
Newark, New Jersey

Medical Staff Committees at a Glance

Medical Staff Committees provide a useful tool for the UH Medical Staff to participate in development of policies and procedures that affect patient care at UH. Below is a chart which outlines the primary purpose and contact information of each committee to refer issues or to request participation:

COMMITTEE (Chaired by Physician)	CHARGE of COMMITTEE
MEDICAL EXECUTIVE COMMITTEE Justin Sambol, MD, Chair Minerva Rodriguez, Support / Anne Egan (Alternate) Ext. 2-0440	Receives and acts upon reports and recommendations from the Medical Staff committees, special committees and officers of the Staff concerning performance improvement and quality assessment. Reports results and recommendations to the Medical Staff and Board of Directors.
BYLAWS Michael Jaker, MD, Chair Anne Egan, Support Ext. 2-0026	The charge of this committee shall be to review, recommend and revise the Medical Staff Bylaws and Rules and Regulations to reflect current practice and regulatory requirements. This committee will meet not less than annually, or at the call of the chair
CLINICAL PRACTICE Vincent Barba, MD, Chair Denise Smith, Support Ext. 2-0440	The charge of this committee shall be to recommend and implement guidelines and procedures to clarify functions, duties and responsibilities of the Medical Staff. The committee will review clinical care issues. This committee will meet at least ten (10) times a year, or at the call of the chair
CREDENTIALS Natalie Roche, MD, Chair George Wallace, DPM, Vice-Chair Donna Cuddeback, Support Ext. 2-7049	The charge of this committee shall be to review and evaluate the training, scope of practice, competency, ability to perform privileges requested of each initial appointment, reappointment and modification of clinical privileges and makes recommendations to the MEC. The Committee approves credentialing policies and procedures provides the oversight for Focused Professional Practice Evaluation (FPPE). This committee will meet at least ten (10) times a year, or at the call of the chair.
ETHICS Michael Shapiro, MD, Chair Fran Ward, PhD, RN, Vice-Chair Anne Egan, Support Ext. 2-0026	The charge of this committee shall be to create a forum for discussion of ethical issue, palliative care, and end-of-life decisions. This committee will plan and implement educational programs for Medical Staff and Hospital Staff and meet at least ten times (10) a year.

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COMMITTEE	CHARGE
INFECTION CONTROL Rajendra Kapila, MD, Chair Linda Booth, RN, Support Ext. 2-5790	The charge of this committee shall be to identify and analyze the causes and patterns of all nosocomial infections affecting patients. The committee will maintain permanent records of all activities and submit findings to the MEC. This committee will meet at least ten (10) a year, or at the call of the chair.
MEDICAL RECORDS Constancia Uy, MD, Chair Yvette Porter-White, Support Ext. 2-4680	The charge of this committee shall be to ensure that the content and format of the University Hospital medical record shall reflect all regulatory requirements as they pertain to clinical documentation, accuracy and confidentiality. This committee shall meet at least ten (10) times a year, or at the call of the chair.
MEDICAL STAFF IMPAIRMENT	The charge of this committee shall be to assess any allegation regarding potential impairment of a practitioner, and to refer the practitioner to the appropriate agency for evaluation, monitoring and treatment as deemed necessary. The confidentiality of all potentially impaired practitioners shall be strictly maintained times as per regulatory requirements. The Chairperson of the MEC and the CMO shall designate three (3) members of the Medical Staff to serve on this committee. This committee will meet on an as needed basis.
ONCOLOGY Ravi Chokshi, MD, Chair Irene Szczech, Support Ext. 2-5053	The charge of this committee shall be to develop and evaluate goals and objectives for clinical programs, community outreach, quality improvement, clinical programs and programmatic activities related to cancer; b. to establish the frequency, format and multidisciplinary attendance requirements for tumor conferences, and ensures that the required number of cases are presented and discussed; c. to establish and implement a policy and procedure to evaluate the quality, accuracy and timeliness of cancer registry data.
OPERATING ROOM Anne Mosenthal, MD, Co-Chair Alex Bekker, MD, Co-Chair Carmela Abbadessa, Support Ext. 2-7247	The charge of the Operating Room committee is to develop, recommend, review and implement policies and procedures to improve safety, patient outcomes and efficiency in the Operating Room. This committee will meet ten (10) times a year, or at the call of the chair.

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COMMITTEE	CHARGE
PHARMACY & THERAPEUTICS Joseph Apuzzio, MD, Chair Dawn Brown, Support Ext. 2-3443	The charge of the Pharmacy and Therapeutics committee is to develop, monitor, maintain and make recommendations concerning a safe and effective hospital formulary. The committee will review all reported adverse drug reactions, medication errors and adverse outcomes from therapeutic interventions and recommend corrective action. This committee will meet ten (10) times a year, or at the call of the chair.
QUALITY IMPROVEMENT Michael Curi, MD, Chair Lorraine Jones, Support Ext. 2-3986	The charge of this committee shall be to ensure and promote the quality of care provided by all services in University Hospital through the review and assessment of all quality activities and reports; to establish policies and procedures to promote and ensure improved patient outcomes and to compare these outcomes with established benchmarks and goals; to implement processes that ensure patient safety and to provide oversight for the process of Ongoing Professional Practice Evaluation. This committee will meet at least eleven (11) times a year, or at the call of the chair.

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Committees defined by the Medical Staff Bylaws to include Medical Staff representation provide a useful tool for the Medical Staff to participate in development of policies and procedures that affect patient care at UH. Below is a chart which outlines the primary purpose and contact information of each committee to refer issues or to request participation:

HOSPITAL COMMITTEES	CHARGE of COMMITTEE
AMBULATORY CARE George Wallace, DPM, Chair Betty Patterson-Pearson, Support Ext. 2-4965	Provides medical direction and supervision of the UH Out-Patient Services.
BLOOD UTILIZATION REVIEW Franklin Desposito, MD, Chair Bishma Patel, Support Ext. 2-6061	Oversees policies, procedures and criteria related to the ordering, distribution, handling, dispensing, administration and monitoring of blood and blood products.
COMBINED CRITICAL CARE RESUSCITATION Anne Mosenthal, MD, Chair Carolyn Ricks, Support Ext. 2-9481	Monitors and evaluates the quality of care rendered in the critical care and progressive care units.
INVASIVE AND OTHER PROCEDURES REVIEW Vasanti Tilak, MD, Chair Roxanne Poon, Support Ext. 2-1353	Reviews cases involving discrepancies between pre-operative and post-operative diagnosis, measurement of performance of procedures and outcomes and oversight of policy and procedures related to the care of surgical, invasive or other procedures performed on patients.
MEDICAL INFORMATICS Iris Herrera, MD, Chair Doris Fernandez/Anne Egan (Alternate), Support Ext. 2-0026	Defines rules and regulations governing electronic medical records. Functions as a liaison between the Medical Staff and UH Corporate Compliance regarding issues of exchanges of medical information involving the Medical Staff, as well as compliance issues and HIPAA violations governing the electronic medical record.

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COMMITTEE	CHARGE
RADIATION SAFETY Roger Howell, PhD, Chair Corisa Mobley, Support Ext. 2-0861	Reviews and recommends procedures and policies concerning the safe and effective administration of devices which produce radioactive substances and radiation throughout the Hospital and on the Newark Campus.
UTILZATION MANAGEMENT Vincent Barba, MD, Chair Shawn Logan, Support Ext. 2-6437	Ensures that all of the inpatient care given by the Hospital is appropriate and provided effectively. Duties include: Undertaking studies designed to evaluate the appropriateness of admission to the Hospital, delays in use of, or overuse of ancillary services, delays in consultations and referrals, lengths of stay and discharge planning.