

## MEDICAL STAFF and HOSPITAL 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. [Source: University Hospital Medical Staff Rules and Regulations, Article IX. Medical Staff Committees, Section 9.3 – 9.8, Pages 32 – 33.](#)

Standing Committees of the Medical Staff	Charge of Committee
<b>MEDICAL EXECUTIVE COMMITTEE (MEC)</b>	Refer to Bylaws, Part I, Governance, Section 6.2, Pg. 19
<b>BIOETHICS COMMITTEE</b> Michael Shapiro, MD, Chair Fran Rieth Maynard, PhD, RN, Vice-Chair Anne Egan, Meeting Administrator 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.
<b>BYLAWS COMMITTEE</b> Suzanne Atkin, MD, Chair Ana Natale-Pereira, MD, Co-Chair Anne Egan, Meeting Administrator 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.
<b>CREDENTIALS COMMITTEE</b> Andrew Kaufman, MD, Co-Chair Natalie Roche, MD, Co-Chair Pamela Capra, Meeting Administrator 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.
<b>Nominating Committee (ad hoc)</b>	The committee shall consist of at least three (3) of the Governing Council and at least one Medical Staff Committee chair.
<b>QUALITY IMPROVEMENT STEERING COMMITTEE</b> Nina Glass, MD, Chair Antonia Armada-Oanes, Meeting Administrator Maya Jones, Recorder Ext. 2-1530	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 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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Standing Committees of the Hospital	Charge of Committee
<p><b>BLOOD UTILIZATION</b> Smita Mahendrakar, MD Bhishma Patel, Meeting Administrator</p>	<p>Oversees policies, procedures and criteria related to the ordering, distribution, handling, dispensing, administering, and monitoring of blood and blood products.</p>
<p><b>CANCER COMMITTEE</b> Ravi Chokshi, MD, Chair Nancy Louis, DNP, Meeting Administrator Ext. 2-5053</p>	<p>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.</p>
<p><b>CLINICAL PRACTICE COMMITTEE</b> Iris Herrera, MD, Chair Aeisha Hyman, Meeting Administrator Ext. 9525</p>	<p>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 meets at the call of the CMO to address changes in clinical practices.</p>
<p><b>COMBINED CRITICAL CARE RESUSCITATION</b> Anne Sutherland, MD, Chair (Medicine) Nina Glass, MD, Co-Chair (Surgery) Kesha Yearwood, Meeting Administrator Ext. 2-9481</p>	<p>Monitors and evaluates the quality of care rendered in the critical care and progressive care units.</p>
<p><b>INFECTION CONTROL COMMITTEE</b> Debra Chew, MD, Chair Wina Padilla, Meeting Administrator Ext. 2-5790</p>	<p>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.</p>
<p><b>MEDICAL RECORDS COMMITTEE</b> Iona Monteiro, MD, Chair Melissa Rojas, Meeting Administrator Ext. 2-4680</p>	<p>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.</p>

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<p><b>OPERATING ROOM COMMITTEE</b>          Alex Bekker, MD, Co-Chair          Daniel Jones, MD, Co-Chair          Carmela Abbadessa, Meeting Administrator          Ext. 2-7247</p>	<p>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.</p>
<p><b>PHARMACY &amp; THERAPEUTICS COMMITTEE</b>          Joseph Apuzzio, MD, Chair          Susan Villegas, Meeting Administrator          Ext, 2-3443</p>	<p>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 the therapeutic interventions and recommend corrective action. This committee will meet ten (10) times a year, or at the call of the chair.</p>
<p><b>UTILIZATION MANAGEMENT</b>          Andrew Berman, MD, Co-Chair          Crystal Tomlin, Meeting Administrator          Ext. 2-6437</p>	<p>Ensures that all 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.</p>

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