

ATRIUM MEDICAL CENTER

ALLIED HEALTH PROFESSIONALS MANUAL

1. QUALIFICATIONS

Allied Health Professionals ("AHPs") holding a license, certificate or such other legal credentials, if any, as required by Ohio law, which authorize the AHPs to provide certain professional services, are not eligible for Medical Staff appointment. Such AHPs are eligible for Privileges in this Hospital only if they:

- (a) hold a license, certificate or other legal credential in a category of AHPs which the Board of Trustees has identified as eligible to apply for Privileges;
- (b) document their experience, background, training, demonstrated ability, judgment to fully and competently carry out the privileges requested and sufficiently demonstrate, with sufficient adequacy to demonstrate that any patient treated by them will receive care of the generally recognized professional level of quality and efficiency established by the Hospital, and that they are qualified to exercise Privileges within the Hospital;
- (c) are determined, on the basis of documented references, to adhere strictly to the lawful ethics of their respective professions; to work cooperatively with others in the Hospital setting; and to be willing to commit to and regularly assist the Hospital in fulfilling its obligations related to patient care, within the areas of their professional competence and credentials.
- (d) are free of or have under adequate control any physical or mental health impairment that interferes with, or presents a reasonable probability of interfering with, the AHP's ability to satisfy the qualifications required for:
 - (i) clinical performance, which includes prior and current experience and competence, clinical results, and utilization practice patterns that document a continuing ability to provide patient care services at an acceptable level of quality and efficiency given the current state of the healing arts and consistent with available resources;
 - (ii) cooperativeness, which includes the ability to work cooperatively and harmoniously with Medical Staff and Hospital personnel as it relates to patient care, the orderly operation of the Hospital, and general attitude toward patients, the Hospital, and its personnel; and

- (iii) professional ethics and conduct, which includes being of high moral character, and adhering to generally recognized standards of medical and professional ethics;
- (e) are free from abuse of any type or substance or chemical that affects cognitive, motor or communication ability in a manner that interferes with, or presents a reasonable probability of interfering with, the AHP's ability to satisfy the qualifications required for:
- (i) clinical performance, which includes prior and current experience and competence, clinical results, and utilization practice patterns that document a continuing ability to provide patient care services at an acceptable level of quality and efficiency given the current state of the healing arts and consistent with available resources;
 - (ii) cooperativeness, which includes the ability to work cooperatively and harmoniously with Medical Staff and Hospital personnel as it relates to patient care, the orderly operation of the Hospital, and general attitude toward patients, the Hospital, and its personnel; and
 - (iii) professional ethics and conduct, which includes being of high moral character, and adhering to generally recognized standards of medical and professional ethics.

2. PROCEDURE FOR GRANTING PRIVILEGES

An application for specified services for an AHP shall be submitted and processed in the same manner as provided in the Medical Staff Bylaws. An AHP shall be individually assigned to the clinical department appropriate to his professional training and shall be subject in general to the same terms and conditions as specified in the Medical Staff Bylaws (Medical Staff Appointments).

The procedural rights afforded by the Medical Staff Bylaws and Related Manuals shall not apply to any Adverse Action taken with respect to an AHP or an Applicant for AHP Privileges. The Corrective Action procedure outlined in Section 6 of this Manual will apply to AHP's.

3. PREROGATIVES

The Prerogatives of an AHP shall be:

- (a) to provide specified patient care services under the supervision or direction of a Practitioner Appointee to the Medical Staff (except as otherwise

expressly provided by resolution of the department approved by the Medical Executive Committee and the Board) and consistent with the limitations stated in the Medical Staff Bylaws;

- (b) to write orders only to the extent established by the Medical Staff, but not beyond the scope of the AHP's license, certificate or other legal credential;
- (c) to serve on staff, department, section, and Hospital committees;
- (d) to attend meetings of the Medical Staff and department to which the AHP is assigned and Hospital education programs; and
- (e) to exercise such other Prerogatives as shall, by resolution or written policy duly adopted by the Medical Staff and approved by the Board, be accorded to AHPs as a group or to any specific category of AHPs, such as the right to vote on specified matters, to hold defined offices, or any other Prerogatives for which medical education, training and experience, beyond that which an AHP can demonstrate, is not a prerequisite.

4. GENERAL RESPONSIBILITIES

Each AHP shall:

- (a) comply with all Hospital and Medical Staff Governing Documents as applicable in carrying out their Clinical Privileges;
- (b) retain appropriate responsibility within his area of professional competence for the care and supervision of each patient in the Hospital for whom he is providing services; and
- (c) participate, as appropriate, in quality assessment and improvement activities required of the Medical Staff and consistent with JCAHO and regulatory recommendations, in supervising initial Appointees of his same profession during the observation period, and in discharging such other Medical Staff functions as may be required from time to time; and
- (d) demonstrate professional liability insurance coverage consistent with the limits specified from time to time by the Board.

5. CATEGORIES, CLASSIFICATIONS, AND RIGHTS OF ALLIED HEALTH PROFESSIONALS

The following categories of Allied Health Professionals shall be eligible to apply for practice privileges in the Hospital: Physician Assistants, Perfusionists and Autotransfusionists, Optometrists, Certified Registered Nurse Anesthetists, Certified Nurse Midwives, Certified Nurse Practitioners, Clinical Nurse Specialists, Speech/Language

Pathologists and Audiologists, Social Workers, Physician's Nurse Associates, Certified Ophthalmic Personnel, Certified Surgical Technologist, Certified Neurophysiologic Intraoperative Monitoring Technologist, and Radiation Therapists.

Any appeals of adverse reactions related to any AHP must be addressed through the process established in Section 6 of this Manual. An AHP is not entitled to the hearing rights set forth in the Medical Staff Bylaws and Related Manuals.

As national specialty groups develop criteria for identifying and using affiliates, this Manual shall be reviewed and revised.

5.1 PHYSICIAN ASSISTANTS

5.1.1 Definition

A certified Physician Assistant is a skilled individual who assists a Physician in the provision of health care services; who is qualified by successfully completing academic and clinical training at an accredited educational program for Physician Assistants.

5.1.2 Education/Licensure/Certification Requirements

The certified Physician Assistant (PA-C) after completion of approved academic and clinical training will have completed or be eligible for the National Commission on Certification of Physician Assistants examination and be registered by the State Medical Board of Ohio.

5.1.3 Practice Privileges

The Physician Assistant shall function under the supervision and control of a Physician or Physicians on the Medical Staff pursuant to a Physician Assistant Utilization Plan. This requires availability of a Physician for consultation or direction but does not require the personal presence of the supervising Physician at the place where services are rendered. The Physician Assistant may provide services only to patients of the employing Physician or Physicians and must act accordingly to the parameters set forth in the Physician Assistant Utilization Plan. The Physician Assistant may perform in any practice setting where the employing Physician routinely practices and where the Physician Assistant may be adequately supervised.

Services performed by the Physician Assistant fall into four broad categories:

- (1) Comprehensive assessment of the patient's medical, physical, and psychosocial status.

- (2) Development of medical care plans and protocols with the employing Physician.
- (3) Implementation of a Physician directed treatment plan; and
- (4) Periodic assessment of the patient's medical needs and patient education and counseling.

In the Hospital setting the Physician Assistant:

- (1) Makes patient rounds;
- (2) Evaluates changes in patient conditions;
- (3) Records progress notes;
- (4) Transcribes and/or carries out standing orders or specific orders at the direction of the supervising Physician;
- (5) Assists at surgery;
- (6) Compiles and records detailed narrative summaries; and
- (7) May be granted the above Clinical Privileges as detailed in the Physician Assistant delineation of privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual Physician Assistant and the needs of the employing Physician.

5.1.4 Terms and Conditions

The Certified Physician Assistant will apply for clinical privileges by completing the requirements for application for AHP Privileges of Atrium Medical Center. The completed application must also be accompanied by a letter from the employing Physician listing the specific functions he/she wishes the Physician Assistant to perform in the hospital setting.

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

Privileges are automatically revoked upon termination of employment by the particular Physician Medical Staff Appointee and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining that the duties of the Physician Assistant are within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her Physician Assistant. Responsibility and liability for all acts of the Physician Assistant will be imparted to that Physician.

5.2 PERFUSIONISTS & AUTOTRANFUSIONISTS

5.2.1 Definition

The Perfusionist is a trained professional that maintains AHP Privileges and who provides life support services upon request and under the supervision of either the primary Medical Staff surgeon or treating Physician.

The Autotransfusionist, also known as a perioperative autotransfusion technologist, is a specialized allied health professional who operates the cell saver machine during surgery. The autotransfusionist also receives blood and centrifuges the blood to separate plasma from blood cells. The autotransfusion technologist does not function as a clinical perfusionist.

5.2.2 Education/Licensure/Certification Requirements

The Perfusionist will have graduated from an accredited perfusion training program. He/She will be either Certification-eligible or Certified by the American Board of Cardiovascular Perfusion, 123 South 25th Avenue, Hattiesburg, Mississippi, 39401. Licensure is not currently applicable in the State of Ohio.

The Autotransfusionist, also known as the perioperative autotransfusion technologist, will have graduated from high school and meet the basic education and minimum formal training requirements as outlined in the scope of duties. Board certification through the International Board of Blood Management, as approved by the American Society of Extracorporeal Technology/Society of Perfusionists, must be achieved within three (3) years of initial appointment.

5.2.3 Practice Privileges

The Perfusionist need not perform in the immediate presence of and under the direct supervision of the primary surgeon or treating Physician the following services which he/she is qualified and credentialed to do:

- (1) Set up monitoring equipment for patients;

- (2) May have access to the Medical Library;
- (3) May attend education conferences given by the Hospital;
- (4) Set up extracorporeal circulation systems as prescribed by the responsible Medical Staff surgeon or treating Physician;
- (5) Perform preventative maintenance procedures on the perfusion equipment; and
- (6) May manage long term life support procedures: the IntraAortic Balloon Pump and Ventricular Assist Devices as prescribed by the responsible Physician.

The Perfusionist will perform the following services in the presence of the primary Medical Staff surgeon or treating Physician:

- (1) Manage extracorporeal circulation during surgical procedures, including management of Heparin/Protamine according to ACT protocol;
- (2) Administer drugs through the extracorporeal circuit as prescribed by the responsible Medical Staff surgeon;
- (3) Set up and time the IntraAortic Balloon Pump and initiate its application as directed;
- (4) Provide Autotransfusion/Cell Saving services during surgical procedures, including the set up and operation of the "cell saver" machine; and
- (5) The Perfusionist may be granted the above clinical privileges as detailed in the Perfusionist delineation of privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual perfusionist.

The Autotransfusionist will function only under the direct supervision of the physician utilizing their services and will therefore undertake NO independent action involving direct patient care.

The Autotranfusionist may operate the cell saver and platelet rich plasma machine(s). Bone marrow aspirate/stem cell concentrate privileges are also included.

5.2.4 Terms and Conditions

The Perfusionist will apply for clinical privileges by completing the requirements for application for AHP Privileges of Atrium Medical Center. The completed application must also be accompanied by the following information.

- (1) Educational documentation, i.e., copy of either a diploma or a certificate of education in Perfusion Sciences, circulation technology, or a letter stating that the individual has received on the job training and is grandfathered for certification by the American Board of Cardiovascular Perfusion; and
- (2) A letter from the primary sponsoring Medical Staff surgeon listing the specific functions he/she wishes the Perfusionist to perform in the hospital setting.

The Autotransfusionist will apply for clinical privileges by completing the requirements for application for AHP Privileges of Atrium Medical Center. The completed application must be accompanied by the following information.

- (1) Educational documentation, i.e. copy of high school diploma and/or certificate of certification by the International Board of Blood Management (within three years if not certified at time of initial application).

This application will be reviewed per the standard credentialing and recredentialing processes of the AHP's.

Privileges are automatically revoked upon termination of sponsorship by the particular Physician and are not automatically transferrable should the individual be sponsored by another Physician.

The managing Physician (the ordering Physician for the individual case) is responsible for maintaining the duties of the Perfusionist and Autotransfusionist within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The managing Physician is responsible for acts of the Perfusionist and Autotransfusionist involving individual patients. Responsibility and liability for all actions of the Perfusionist and Autotransfusionist will be imparted to that Physician.

5.3 OPTOMETRISTS

5.3.1 Definition

The Optometrist is a licensed practitioner who may employ the instruments, devices, methods and pharmaceutical agents needed for the examination, diagnosis, therapy and follow-up of visual defects or abnormalities of the eye or its adnexa compatible with optometric education, professional competence and state licensure.

5.3.2 Education/Licensure/Certification Requirements

The Optometrist will have completed an approved academic program and clinical training and will be licensed by the Ohio State Board of Optometry and be of current standing.

5.3.3 Practice Privileges

- (1) Diagnostic Procedures--Examination of Ocular and Related Structures
 1. Applanation tonometry
 2. Ophthalmoscopy-direct and indirect
 3. Retinoscopy
 4. Gonioscopy
 5. Fundus photography
 6. Biomicroscopy
 7. Visual fields studies
 8. Laboratory studies-cytology, cultures, sensitivities, etc.

- (2) Therapeutic Procedures Involving the Application of Lenses or Orthoptic Therapy For:
 1. Refractive error
 2. Strabismus
 3. Amblyopia
 4. Anisophoria
 5. Other binocular anomalies

- (3) Therapeutic and or Cosmetic Application of Contact Lenses
 1. Hydrophilic lenses
 2. PMMA lenses
 3. Cross linked PMMA lenses
 4. Extended wear lenses

- (4) Low Vision Care

1. Modified low vision examination
 2. Telescopic systems
 3. Microscopic systems
 4. Modified printed material
- (5) Licensed Optometrists who hold a current Therapeutic Pharmaceutical Agents Certificate may prescribe and dispense the following as defined by the Ohio State Board of Optometry and as set forth in Ohio law.
1. Topical ophthalmic preparation.
 2. Any oral dosage of a drug or dangerous drug that is listed by rule adopted by the State Board of Optometry under the Ohio Revised Code and Ohio Administrative Code.
- (6) To evaluate when necessary for proper patient care and management, inpatients or Emergency Room patients with ocular or visual conditions or abnormalities in concert with a staff Physician, who will perform a general medical examination and assume overall medical management of the patient.
- (7) The Optometrist may be granted the above clinical privileges as detailed in the Optometrist delineation of privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual Optometrist.

5.3.4 Terms and Conditions

The Optometrist will apply for clinical privileges by completing the requirements for application for AHP Privileges of Atrium Medical Center.

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

5.4 CERTIFIED OPHTHALMIC PERSONNEL

5.4.1 Definition

Certified Ophthalmic Personnel is either a Certified Ophthalmic Assistant, Certified Ophthalmic Technician, Certified Ophthalmic Medical Technologist, certified through Joint Commission of Allied Health Personnel in Ophthalmology, or Certified Surgical Technologist who is

employed by a Medical Staff and who carries out patient care at the direction of the employing Physician.

5.4.2 Education/Licensure/Certification Requirements

The certified ophthalmic personnel will be either a certified ophthalmic assistant, certified ophthalmic technician, a certified ophthalmic medical technologist, certified through Joint Commission of Allied Health Personnel in Ophthalmology, or certified surgical technologist.

5.4.3 Practice Privileges

The Certified Ophthalmic Personnel need not perform in the immediate presence of and under the direct supervision of employing Physician the following services which he/she is qualified and credentialed to do.

- (1) Provide patient education to employer's patients regarding common medical problems under the guidance of employing Physician;
- (2) Provide routine instructions to patients at discharge according to the employing Physician's orders;
- (3) Participate in basic CPR after documented training. CPR training must be updated annually;
- (4) May have access to the Medical Library; and
- (5) May attend education conferences given by the Hospital.

The qualified and credentialed Certified Ophthalmic Personnel may be granted the following privileges:

- (1) Relay Orders from employing Physician and document in medical record as a verbal order from employing Physician which must be countersigned by employing Physician. (If a Hospital staff nurse executing a verbal order questions the order, the nurse will verify with employing Physician.)
- (2) First assist in the Operating Room on minor/major procedures with direct supervision by employing Physician being present and scrubbed from the time the procedure is begun until body cavity is closed.
- (3) Certified Ophthalmic Personnel may make no independent observations on the Hospital chart but may make progress notes

under direct supervision of employing Physician which must be countersigned by employing Physician, including:

- (a) History and physical;
 - (b) Prepare local anesthetic mixture;
 - (c) Instill eye drops;
 - (d) Photograph and videotape operative procedures;
 - (e) Evaluate pupil size and effectiveness of motor block;
 - (f) Apply intraocular pressure lowering devices;
 - (g) Other duties that may occur in the proper care of patients within the guidelines of the Joint Commission of Allied Health Personnel in Ophthalmology; and
 - (h) Will not be seeing patients in the Hospital in the absence of the employing Physician.
- (4) The Certified Ophthalmic Personnel may be granted the above clinical privileges as detailed in the Ophthalmic Personnel delineation of privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual Ophthalmic Personnel and the needs of the employing Physician.

5.4.4 Terms and Conditions

The Certified Ophthalmic Personnel will apply for clinical privileges by completing the application for AHP Privileges of Atrium Medical Center. The completed application must be accompanied by the following information:

- (1) Evidence of current certification by Joint Commission of Allied Health Personnel in Ophthalmology, or evidence of current certification by the Liaison Council on Certification for the Surgical Technologist; and
- (2) A letter from the employing Physician listing the specific functions he/she wishes the Certified Ophthalmic Personnel perform in the Hospital setting

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs and will include submission of a letter of review by the Vice President of Nursing or his/her designee.

Privileges are automatically revoked upon termination of employment by the particular Physician and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining the duties of the Certified Ophthalmic Personnel within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her ophthalmic personnel. Responsibility and liability for all acts of the Certified Ophthalmic Personnel will be imparted to that Physician.

5.5 SPEECH/LANGUAGE PATHOLOGISTS OR AUDIOLOGISTS

5.5.1 Definition

The Speech/Language Pathologist or Audiologist is a licensed practitioner who may diagnose and provide therapy procedures for child and adult communication disorders compatible with speech/language pathology education or audiology, state licensure, and professional competence.

5.5.2 Education/Licensure/Certification Requirements

The Speech/Language Pathologist or Audiologist will have a Masters Degree in Speech/Language Pathology or Audiology, be currently licensed by the State of Ohio Board of Speech Pathology and Audiology, and hold the Certificate of Clinical Competence in Speech/Language Pathology or Audiology from the American Speech-Language-Hearing Association.

5.5.3 Practice Privileges

(1) Diagnostic Procedures

(a) Speech/Language Pathologist

Evaluate disorders, whether of organic or nonorganic origin, that impede the normal process of human communication including, but not limited to, disorders and related disorders of speech, articulation, fluency, voice, verbal and written language; auditory comprehension; oral, pharyngeal and/or

laryngeal sensorimotor competencies; mastication; deglutition; auditory and/or visual processing; memory and cognition/communication; and assisted augmentative communication treatment and devices.

(b) Audiologist

Evaluate organic or nonorganic disorders of the auditory systems and language development including but not limited to disorders of the middle ear, inner ear, cochlear system, brainstem connections, auditory and/or visual processing, memory and cognitive communication, assistive communication treatment, evaluation of articulation and fluency disorders and auditory comprehension.

(2) Therapeutic Procedures

Planning, directing, supervising, consulting, and conducting (re)habilitative and counseling programs for individuals or groups of individuals who have or are suspected of having disorders of communication;

(3) To provide urgent and emergent consultation in the inpatient wards for the evaluation and management of communication disordered patients referred by a Medical Staff Appointee, and when called upon to do so; and

(4) The Speech/Language Pathologist or Audiologist may be granted the above clinical privileges as detailed in the Speech/Language Pathologist or Audiologist delineation of privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual Speech/Language Pathologist or Audiologist.

5.5.4 Terms and Conditions

The Speech/Language Pathologist or Audiologist will apply for clinical privileges by completing the requirements for application for AHP Privileges at Atrium Medical Center.

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

5.6 PHYSICIAN NURSE ASSOCIATE

5.6.1 Definition

The Physician Nurse Associate is a Registered Nurse/Licensed Practical Nurse who is employed by a Physician that maintains Medical Staff privileges and who carries out patient care at the direction of the employing Physician.

5.6.2 Education/Licensure/Certification Requirements

The Physician Nurse Associate will be a registered nurse or practical nurse licensed to practice in the State of Ohio.

5.6.3 Practice Privileges

The Physician Nurse Associate need not perform in the immediate presence of and under the direct supervision of employing Physician the following services which he/she is qualified and credentialed to do.

- (1) Provide patient education to employer's patients regarding common medical problems under the guidance of employing Physician;
- (2) Provide routine instructions to patients at discharge according to employing Physician's orders;
- (3) Set up monitoring equipment for patients;
- (4) Participate in basic CPR after documented training. CPR training must be updated every two years;
- (5) May have access to the Medical Library; and
- (6) May attend education conferences given by the Hospital.

The qualified and credentialed Physician Nurse Associate may be granted the following privileges:

- (1) Orders may be relayed by Physician Nurse Associate from employing Physician and documented in medical record as a verbal order from employing Physician and must be countersigned by employing Physician. (If a Hospital staff nurse executing a verbal order question order, the nurse will verify with employing Physician);
- (2) Function as first assistant or as scrub nurse in the Operating Room on minor/major procedures with direct supervision by employing

Physician being present and scrubbed from the time the procedure is begun until the surgical wound is closed;

- (3) Physician Nurse Associate may make no independent observations on the hospital chart but may make progress notes under direct supervision of employing Physician which must be countersigned by employing Physician;
- (4) The licensed practical nurse must work under the direction and supervision of a therapeutic apheresis registered nurse or employing therapeutic apheresis Physician;
- (5) The Physician Nurse Associate may be granted the above clinical privileges as detailed in the Physician Nurse Associate delineation of privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual Physician Nurse Associate and the needs of the employing Physician.

5.6.4 Terms and Conditions

The Physician Nurse Associate will apply for clinical privileges by completing the application for AHP Privileges of Atrium Medical Center. The completed application must be accompanied by the following information:

- (1) Evidence of current licensure by the Ohio State Board of Nursing;
- (2) Copy of curriculum vitae or diploma; and
- (3) If applicable, a letter from the employing Physician listing the specific functions he/she wishes the Physician Nurse Associate to perform in the Hospital setting.

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs and will include submission of a letter of review by the Vice President of Nursing or his/her designee.

Privileges are automatically revoked upon termination of employment by the particular Physician and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining the duties of the Physician Nurse Associate within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her Nurse Associate. Responsibility and Liability for all acts of the Physician Nurse Associate will be imparted to that Physician.

5.7 CERTIFIED REGISTERED NURSE ANESTHETIST

5.7.1 Definition

A Certified Registered Nurse Anesthetist is a qualified anesthesia provider involved in the administration of anesthesia and related services as delineated by the clinical and non-clinical responsibilities described herein.

5.7.2 Education/Licensure/Certification Requirements

- (1) Holds current State licensure as a Registered Nurse in the State of Ohio and complies with the State regulatory requirements in this State regarding the advanced practice of nursing;
- (2) A graduate of a Nurse Anesthesia educational program accredited by the American Association of Nurse Anesthetists (AANA) Council of Accreditation of Nurse Anesthesia educational programs or its predecessor;
- (3) Complies with one of the following requirements regarding certification eligibility, initial certification or recertification:
 - (i) Meets criteria 1 and 2, is awaiting initial certification, or
 - (ii) Is currently certified by the American Association of Nurse Anesthetists Council on Certification of Nurse Anesthetist or its predecessor, or
 - (iii) Is currently re-certified by the American Association of Nurse Anesthetists Council on Re-Certification of Nurse Anesthetists.

5.7.3 Practice Privileges

The following list of anesthesia and related services should be utilized to delineate the clinical responsibilities of the individual Certified Registered Nurse Anesthetist in which the Certified Registered Nurse Anesthetist can demonstrate new or continued competency. The clinical responsibility portion of this position description should be reviewed as necessary and

required by Atrium Medical Center. More clinical responsibilities may be added as additional education and experience is obtained by the individual practitioner.

Examples of Clinical Services:

Preanesthesia assessment
Requesting laboratory and diagnostic studies
Preanesthesia medications
General anesthesia and adjuvant drugs
Regional techniques examples: subarachnoid, epidural, caudal, extremity, transtracheal, topical and eye block
Emergency ancillary drugs to maintain physiological hemostasis and prevent or treat emergencies during the para-anesthesia period
Cardiopulmonary resuscitation management
Para-anesthesia invasive and non-invasive monitoring
Tracheal intubation and extubation
Mechanical ventilation
Fluid electrolyte and acid base management
Blood and blood products, plasma expanders
Peripheral intravenous and intra-arterial catheter placement
Central venous catheter placement
Postanesthesia visits
Others

The Certified Registered Nurse Anesthetist may be granted the above clinical privileges as detailed in the CRNA delineation privileges outline. These privileges will vary based on the specialty training, current competency and experience of that individual Certified Registered Nurse Anesthetist and the needs of the employing Physician.

5.7.4 Terms and Conditions

The Certified Registered Nurse Anesthetist will apply for clinical privileges by completing the requirements for application for AHP Privileges at Atrium Medical Center. The completed application must also be accompanied by a letter from the employing Physician listing the specific functions he/she wishes the Certified Registered Nurse Anesthetist to perform in the Hospital setting.

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

Privileges are automatically revoked upon termination of employment by the particular Physician.

The employing Physician is responsible for maintaining the duties of the Certified Registered Nurse Anesthetist within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her Certified Registered Nurse Anesthetist. Responsibility and liability for all acts of the Certified Registered Nurse Anesthetist will be imparted to that Physician.

5.8 SOCIAL WORKERS

5.8.1 Definition

A Social Worker is an individual who specializes in the knowledge of human development and behavior and social, economic and cultural systems. This knowledge is used to assist individuals, families and groups in clinical settings to improve or restore their capacity for social functioning.

5.8.2 Education/Licensure/Certification Requirements

A Social Worker will have graduated from an accredited social work program with a minimum of a Masters Degree. The Social Worker must hold a valid Licensed Independent Social Worker's License in the State of Ohio.

5.8.3 Practice Privileges

The qualified and credentialed Social Worker may be granted the following privileges.

- (1) Psychosocial assessment, planning and development intervention, accountability and supervision;
- (2) Program assessments, planning and development, program implementation and evaluation;
- (3) Organizational assessments, planning and development intervention, accountability and supervision;
- (4) Specialized problem-oriented planning, specialized intervention and evaluation of consultation; and
- (5) Handle a specialized caseload of high risk and complexity;

5.8.4 Terms and Conditions

The Social Worker will apply for clinical privileges by completing the requirements for application for AHP Privileges at Atrium Medical Center. The completed application must also be accompanied by:

- (1) a letter from the employing Physician listing the specific functions he/she wishes the Social Worker to perform in the Hospital setting;

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

Privileges are automatically revoked upon termination of employment by the particular Physician and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining that the duties of the Social Worker are within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her Social Worker. Responsibility and liability for all acts of the Social Worker will be imparted to that Physician.

5.9 RADIATION THERAPISTS

5.9.1 Definition

A certified Radiation Therapist is a professional who is licensed in radiotherapy and is employed by a Radiation Oncologist. The Radiation Therapist will assist the Radiation Oncologist in the performance of certain procedures on hospital patients.

5.9.2 Education/License/Certification Requirements

The Radiation Therapist will have graduated from either an approved academic program or clinical training program and will be registered to practice radiation therapy by the American Registry of Radiologic Technologists and licensed by the State of Ohio Department of Health.

5.9.3 Practice Privileges

The Radiation Therapist will perform in the immediate presence of and under the direct supervision of the radiation oncologist the following services which he/she is qualified and credentialed to do:

- (1) Radiation Therapists may make no independent observations on the hospital chart but may make progress notes under direct supervision of employing Radiation Oncologist which must be countersigned by the Radiation Oncologist;
- (2) May not order tests as a verbal order from the Radiation Oncologist which must be countersigned by the Radiation Oncologist;
- (3) Assists the Radiation Oncologist in quality control of radioactive sources;
- (4) Assists the Radiation Oncologist in the placement and/or removal of radioactive sources from Hospital patients; this may also include the monitoring of radiation levels in or near the patient's room;
- (5) May have access to the Medical Library;
- (6) May attend education conferences given by the Hospital; and
- (7) Provide routine instructions to patients at discharge according to employing Radiation Oncologist.

5.9.4 Terms and Conditions

The Radiation Therapist will apply for clinical privileges by completing the requirements for application for AHP Privileges of Atrium Medical Center. The completed application must also be accompanied by:

- (1) A letter from the employing Physician listing the specific functions; and
- (2) Evidence of current registration and licensure.

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

Privileges are automatically revoked upon termination of employment and are not transferrable should the individual be hired by another Radiation Oncologist.

The employing Radiation Oncologist is responsible for making sure that the duties of the Radiation Therapist are within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The Radiation Oncologist is responsible for all acts of his/her Radiation Therapist. Responsibility and liability for all acts of the Radiation Therapist will be imparted to that Physician.

5.10 CERTIFIED NURSE MIDWIFE

5.10.1 Definition

The Certified Nurse Midwife (CNM) is an individual educated in the two disciplines of nursing and midwifery, who has achieved certification according to the requirements of the American College of Nurse Midwives. The CNM is employed by or contracted with a Physician who maintains Medical Staff privileges and who carries out patient care at the direction of the employing/supervising Physician.

5.10.2 Education/Licensure/Certification Requirements

- (1) Holds current State licensure as a Registered Nurse in the State of Ohio complies with the State regulatory requirements in this State regarding the advanced practice of nursing;
- (2) Holds current State certificate of authority to practice Midwifery in the State of Ohio;
- (3) A graduate of a formal, approved Nurse Midwifery Program certified by the American College of Nurse Midwives;
- (4) A graduate of an approved school of nursing in accordance with Ohio Revised Code;
- (5) Complies with one of the following requirements regarding initial certification or recertification:
 - (i) Is currently certified by the American College of Nurse Midwives; or
 - (ii) Is currently re-certified by the American College of Nurse Midwives.

5.10.3 Scope of Practice/Privileges

The Certified Nurse Midwife need not perform in the immediate presence of and under the direct supervision of employing Physician the following services which he/she is qualified and credentialed to do.

- (1) Management of Family Planning and Routine Gynecological Care

Inclusive Of:

- (i) Perform health examination, including breasts, pelvic exam, and PAP smear;
 - (ii) Order routine screening laboratory tests and radiographic procedures;
 - (iii) Initiate fertility counseling;
 - (iv) Initiate consultation to Physician specialists;
 - (v) Perform pregnancy termination counseling;
 - (vi) Assess and treat patients with minor gynecological problems and sexually transmitted diseases.
- (2) Assessment and Management of Care of the Essentially Health Woman Newborn Throughout the Perinatal Process, Inclusive of Co-Admitting Privileges for:
- (i) Antepartum history and physical exam;
 - (ii) Complete antepartal care of the normal obstetric patient;
 - (iii) Consultation with other specialists, or health resources as indicated;
 - (iv) Evaluation of fetal well-being by monitoring and interpretation of stress and non-stress tests.
 - (v) Ongoing assessment of qualifications for birth center delivery;
 - (vi) Evaluation of labor and performing admission history and physical examination;
 - (vii) Management of uncomplicated labor inclusive of pelvic examination, routine admission orders, amniotomy, external and internal monitoring, administration of analgesia using intramuscular and intravenous narcotics and potentiators;
 - (viii) Limited ultrasonography for fetal position, placenta location, and amniotic fluid index;
 - (ix) Conduct spontaneous delivery inclusive of administration of local pudendal and paracervical block anesthesia, midline and mediolateral episiotomy, and repair;
 - (x) Assessment and management of normal post partum patients inclusive of post partum orders, and administration of oxytocics;
 - (xi) Assessment of readiness for and discharge of patients from the birth center; and
 - (xii) Initial routine care of newborn inclusive of assignment of APGAR scores, and initial newborn examination in the delivery room.
- (3) The qualified and credentialed Certified Nurse Midwife must consult with and require the presence of the supervising Physician for the following:

- (i) Pre-term delivery less than 35 weeks gestation;
 - (ii) Post-term pregnancy beyond 42 weeks;
 - (iii) Manual removal of placenta/retained placenta;
 - (iv) Repair of third and fourth degree vaginal and cervical lacerations;
 - (v) Severe pregnancy induced hypertension or severe preeclampsia;
 - (vi) Abnormal presentation;
 - (vii) Anticipated shoulder dystocia;
 - (viii) Management of emergency transport from birth center to tertiary hospital of intrapartum complications;
 - (ix) Continued management of post partum hemorrhage;
 - (x) Severe Polyhydramnios or Oligohydramnios; and
 - (xi) Failure to progress with presence of adequate labor.
- 4) For Vaginal Birth After Cesarean (VBAC) procedures, the collaborating Physician(s) must be readily available during the labor process.
- 5) In accordance with Ohio Revised Code, a midwife is prohibited from performing version, deliver breech or face presentation, use forceps, perform any obstetric operation, or treat any other abnormal condition.

5.10.4 Terms and Conditions

The Certified Nurse Midwife will apply for clinical privileges by completing the application for AHP privileges at Atrium Medical Center. The completed application must be accompanied by a letter from the employing Physician listing the specific functions he/she wishes the Certified Nurse Midwife to perform in the Hospital setting.

This application will be reviewed per the standard credentialing and recredentialing process of the AHPs.

The Certified Nurse Midwife's privileges are automatically revoked upon termination of employment by the particular Physician or Physician Group and are not transferrable should the Certified Nurse Midwife be hired by another Physician.

The employing Physician/Physician Group is responsible for maintaining the duties of the Certified Nurse Midwife within the scope of granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician/Physician Group is responsible for all acts of his/her Certified Nurse Midwife. Responsibility and Liability for all acts of the Certified Nurse Midwife will be imparted to that Physician.

5.11 CERTIFIED NURSE PRACTITIONER or CLINICAL NURSE SPECIALIST

5.11.1 Definition

The Certified Nurse Practitioner (CNP) or Clinical Nurse Specialist (CNS) is an individual educated in the two disciplines of nursing and advanced practice nursing, who has achieved certification according to the requirements of the American Nurses Association and in accordance with Ohio Revised Code. A Certified Nurse Practitioner or Clinical Nurse Specialist is an advanced practice nurse who provides primary health care and specialized health services to individuals, families, groups and communities.

The CNP/CNS is employed by or contracted with a Physician appointee of the Medical Staff and the CNP/CNS carries out patient care at the direction of the employing/supervising Physician.

5.11.2 Education/Licensure/Certification Requirements

- (1) Holds current State licensure as a Registered Nurse in the State of Ohio and complies with the State regulatory requirements for advanced practice nursing;
- (2) Holds current State certificate of authority to practice as a nurse practitioner or clinical nurse specialist advanced practice nurse in the State of Ohio;
- (3) If applicable, document of current prescriptive authority issued by the State of Ohio Board of Nursing. The advanced practice nurse shall use prescriptive authority only in the manner to the extent set forth by the State of Ohio Board of Nursing.
- (4) A graduate of an approved school of nursing, and recipient of a Masters Degree in Nursing (M.S.N.) for entry level practice in accordance with Ohio Revised Code;
- (5) Complies with one of following requirements regarding initial certification or re-certification:
 - a. Is currently specialty area certified by a national certifying organization recognized by the Ohio Board of Nursing; or

- b. Is currently specialty area re-certified by a national certifying organization recognized by the Ohio Board of Nursing.

5.11.3 Scope of Practice/Privileges

The Certified Nurse Practitioner (CNP) or Clinical Nurse Specialist (CNS) shall function under the supervision and monitoring of a Physician (s) appointee of the Medical Staff pursuant to the Standard Care Arrangement between the CNP or CNS and collaborating physician (s) to supervise the CNP or CNS practice in the Hospital. This requires the availability of the employing Physician(s) for consultation, collaboration, and direction but does not require the personal presence of the supervising Physician. The CNP or CNS may provide services and care only to patients of the employing Physician(s). The Certified Nurse Practitioner or Clinical Nurse Specialist does not have admitting privileges. All inpatients for whom a CNP or CNS holding clinical privileges provide assessment and/or care shall have been admitted to the Hospital by a Physician appointee of the Medical Staff.

Services provided by the Certified Nurse Practitioner or Clinical Nurse Specialist fall into the following broad categories:

- (1) Comprehensive assessment of the patient's medical, physical, and psychosocial health status.
- (2) Formulate appropriate differential diagnosis based on history, physical examination, and clinical findings;
- (3) Development and implementation of a Physician directed treatment plan; and
- (4) Periodic assessment of the patient's medical needs and patient/family education and counseling.

In the Hospital setting, the Certified Nurse Practitioner or Clinical Nurse Specialist:

- (1) Perform history and physical examination without the co-signature of collaborating physician;
- (2) Independently conduct preventive screening based on age and history;
- (3) Perform independent patient rounds with assessment of health status and current progress
- (4) Compiles detailed narrative summaries;
- (5) Records progress notes without the co-signature of the collaborating physician;

- (6) Order and interpret appropriate diagnostic tests without the co-signature of the collaborating physician;
- (7) Prescribes, administers, and writes orders for IV fluids, medications and other therapies, including over-the-counter preparations and home or natural remedies in accordance with the Ohio Formulary for Advanced Practice Nurses with a valid Certificate to Prescribe (CTP) without the co-signature of the collaborating physician;
- (8) Develops a patient education plan and provides relevant patient and family education;
- (9) Makes appropriate consultations and referrals to other health professionals and community agencies;
- (10) Consults directly with collaborating physician as needed for medical decision making and in all instances required by the Advanced Practice Nurse's Standard Care Arrangement and the APN Formulary through the Ohio Board of Nursing;
- (11) Dictate discharge summary with the co-signature of the collaborating physician; and discharge summaries must be countersigned within the time frame set forth in the Medical Staff Bylaws, Rules & Regulations, and Other Governing Documents, and Hospital policies and procedures.
- (12) May be granted the above Clinical Privileges as detailed in the Certified Nurse Practitioner/Clinical Nurse Specialist scope of privileges. These privileges will vary based on the specialty training, current competency and experience of the individual Certified Nurse Practitioner or Clinical Nurse Specialist and the needs of the employing Physician.

5.11.4 Terms and Conditions

The Certified Nurse Practitioner or Clinical Nurse Specialist will apply for clinical privileges by completing the requirements for application for AHP privileges of Atrium Medical Center. The completed application must also be accompanied by a letter or standard care arrangement from the employing Physician listing the specific functions he/she wishes the Certified Nurse Practitioner or Clinical Nurse Specialist to perform in the hospital setting.

This application will be reviewed per the standard credentialing and recredentialling processes of the AHPs.

Privileges are automatically revoked upon termination of employment by the particular Physician Medical Staff Appointee and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining that the duties of the Certified Nurse Practitioner or Clinical Nurse Specialist are within the scope of granted privileges and must ensure that these duties do not constitute the practice of medicine. The employing Physician must be available to the Certified Nurse

Practitioner or Clinical Nurse Specialist for alternate coverage, collaboration, and consultation and assume responsibility for the care of any patient when requested by the CNP/CNS or in the interest of patient care.

The employing Physician is responsible for all acts of his/her Certified Nurse Practitioner or Clinical Nurse Specialist. Responsibility and liability for all acts of the Certified Nurse Practitioner or Clinical Nurse Specialist will be imparted to that Physician.

5.12 CERTIFIED SURGICAL TECHNOLOGIST

5.12.1 Definition

Certified Surgical Technologist (CST), also called a scrub tech, surgical or operating room technician, is an allied health professional who functions under the supervision of a surgeon, registered nurse, or other surgical personnel, and is a member of the surgical team in a variety of surgical patient care settings. The Certified Surgical Technologist (CST) must be employed by, or under contract with, a physician (s) currently appointed to the medical staff of Atrium Medical Center and carries out patient care at the direction of the employing Physician.

5.12.2 Education/Licensure/Certification Requirements

The certified surgical technologist must be a graduate of an O.R.T. (operating room technology) accredited school recognized by the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The individual must be certified as a Surgical Technologist from the Liaison Council on Certification for Surgical Technology (LCC-ST).

5.12.3 Scope of Duties and Responsibilities

The C.S.T. shall function under the direct and general supervision of the employing physician. The C.S.T. shall be assigned “scrub” duties and specific technical patient care duties in accordance to his or her knowledge, skill and complexity of the patient’s condition or proposed procedure. Major duties and functions are:

- (a) Gather and assemble supplies and equipment necessary for surgical procedure based on physician preference and patient need (surgical instruments and equipment, sterile drapes, and sterile solutions).
- (b) Participates in the surgical procedure by directly providing employing surgeon and first assistant with instruments, suture, etc.

necessary to the procedure while maintaining a sterile operating field.

- (c) May hold retractors, cut sutures, and count sponges, needles, supplies, and instruments. Counting of sponges, needles, supplies and instruments must be done in conjunction with a registered nurse.
- (d) Operate sterilizers, lights, or suction machines, and help operate diagnostic equipment.
- (e) May not act as a “First Assistant” in the operative room setting.

The Certified Surgical Technologist may be granted the above clinical duties and responsibilities as detailed in the Certified Surgical Technologist privilege request form. These privileges will vary based on the specialty training, current competency and experience of that individual Surgical Technologist and the needs of the employing Physician.

5.12.4 Terms and Conditions

The Certified Surgical Technologist will apply for clinical privileges by completing the application for AHP Privileges of Atrium Medical Center. The completed application must be accompanied by the following information:

- (1) Evidence of current certification by the Liaison Council on Certification for the Surgical Technologist; and
- (2) A letter from the employing Physician listing the specific functions he/she wishes the Certified Surgical Technologist to perform in the Hospital setting

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

Privileges are automatically revoked upon termination of employment by the particular Physician and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining the duties of the Certified Surgical Technologist within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her surgical technologist personnel. Responsibility and liability for all acts of the Certified Surgical Technologist will be imparted to that Physician.

5.13 CERTIFIED NEUROPHYSIOLOGIC INTRAOPERATIVE MONITORING TECHNOLOGIST

5.13.1 Definition

A Certified Neurophysiologic Intraoperative Monitoring Technologist (CNIM) is an allied health professional who functions under the supervision of a physician or surgeon, and is a member of the operating room monitoring team. The Certified Technologist (CNIM) must be employed by, or under contract with, a physician (s) currently appointed to the medical staff of Atrium Medical Center and carries out patient care at the direction of the employing physician.

5.13.2 Education/Licensure/Certification Requirements

The CNIM must have a bachelor degree in science, electronics or an allied health field or educated and certified as R.EEG T., R. EP T., or R.NCS T. The technologist must maintain current registry certification as a C.N.I.M. by the American Board of Registration of Electroencephalographic and Evoked Potential Technologists (ABRET).

5.13.3 Scope of Duties and Responsibilities

The C.N.I.M., or trainee, shall function under the direct and general supervision of the employing physician. The C.N.I.M. shall gather and assemble supplies and equipment necessary for monitoring procedure based on physician and surgeon preference and patient need (monitoring instruments and equipment). The C.N.I.M. shall participate in the monitoring surgical procedure by directly providing appropriate placement and removal of stimulating and recording electrodes and equipment as well as ground wiring and safety equipment necessary to the procedure while maintaining a sterile operating field. The C.N.I.M. is responsible for the recording of optimally obtainable physiological potentials required for the supervising neurologist.

5.13.4 Terms and Conditions

The Certified Neurophysiologic Intraoperative Monitoring Technologist (CNIM) will apply for clinical privileges by completing the application for AHP Privileges of Atrium Medical Center. The completed application must be accompanied by the following information:

- (1) Evidence of current certification by the American Board of Registration of Electroencephalographic and Evoked Potentials Technologists (ABRET); and
- (2) A letter from the employing Physician listing the specific functions he/she wishes the CNIM to perform in the Hospital setting

This application will be reviewed per the standard credentialing and recredentialing processes of the AHPs.

Privileges are automatically revoked upon termination of employment by the particular Physician and are not transferrable should the individual be hired by another Physician.

The employing Physician is responsible for maintaining the duties of the CNIM within the scope of the granted privileges and must ensure that these duties do not constitute the practice of medicine.

The employing Physician is responsible for all acts of his/her technologist personnel. Responsibility and liability for all acts of the Certified Neurophysiologic Intraoperative Monitoring Technologist will be imparted to that Physician.

6.1 CORRECTIVE ACTION AND APPEAL FOR AHPs

6.1.1 SUSPENSION OF PRIVILEGES

The Hospital has the right, through the CEO, after obtaining input from the Department Chair if the AHP is one who is managed by the Medical Staff, to limit Clinical Privileges, up to and including suspension or termination.

In the event the CEO seeks to recommend a suspension or termination of Privileges, the AHP shall be advised, by Special Notice, of the CEO's recommendation and the basis for such recommendation. The AHP shall have five (5) days in which to submit a written response to the CEO as to why such suspension or termination should not take place. The CEO shall share such response with the Department Chair if the AHP is one who is Medical Staff managed, and then make a final decision. The CEO shall notify the Board of the action taken including advising the Board of the written response, if any, of the AHP and the contents of such response.

In the event the CEO summarily suspends or immediately terminates an AHP's Privileges, such action shall become effective immediately but shall be followed

by written notice of such action, given to the AHP by Special Notice. The AHP shall have five (5) days in which to submit a written response to the CEO as to why such suspension should be lifted or termination rescinded. The CEO shall share such response with the Department Chair if the AHP is one who is Medical Staff managed, and then make a final decision. The CEO shall notify the Board of the action taken including advising the Board of the written response, if any, of the AHP and the contents of such response.

When an AHP's Clinical Privileges are curtailed and/or the AHP is terminated, the employer (if an individual or entity other than the Hospital) shall be notified as to the reasons for such action.

6.1.2 MEDICAL RECORDS

Medical records shall be completed in a timely fashion consistent with any policies governing medical records at the Hospital. A failure to complete records as required by the policy (or policies) shall result in an automatic suspension of Clinical Privileges consistent with the same.

6.1.3 PROFESSIONAL LIABILITY INSURANCE

An AHP who fails to maintain professional liability insurance coverage in the minimum amount required by the Board shall be given Special Notice that he or she has ten (10) business days from the date of the notice to produce a certificate showing current coverage. Failure to provide the certificate shall result in immediate suspension of the AHP's Clinical Privileges until such time as the certificate is produced. Notwithstanding the prior requirement, if an AHP has failed to produce a certificate of adequate coverage within thirty (30) days after being suspended, his or her Clinical Privileges shall be automatically revoked.

6.1.4 EFFECT OF AUTOMATIC SUSPENSION

An automatic suspension pursuant to this Section or as otherwise permitted in this Section does not give rise to any due process rights or rights of appeal.

Article 6 - Bylaws Adopted by the Medical Staff on 12/20/95

Article 6 - Approved by the Board of Trustees on 1/25/96

Deletion of Article 6 Bylaws and Article 16 Rules & Regulations, and addition of Section 5.10 Certified Nurse Midwives, and Section 6 into the Allied Health Professional Manual adopted by Medical Staff on 9/30/99

Approved by the Board of Trustees on 10/28/99

Revisions to Article 5, Article 6.1 approved by the Board of Trustees: 12/13/01

Addition of Section 5.11 approved by Board of Trustees: 8/28/03

Addition of Section 5.12 reviewed by Bylaws Cmte 6/17/04

Addition of Section 5.12 adopted by MEC 7/6/04 and approved by MRH Board 7/29/04

Revision to Section 5.11-3 adopted by MEC 6/7/05 & approved by Board 6/15/05

Revision to Section 5.11-3 adopted by MEC 10/2/07 & approved by Board 10/17/07

Resolution for facility name change adopted 12/9/07
Revision to 5.11.3 (1) adopted by MEC 5/6/08 and approved by Board 5/21/08
Addition of Section 5.13 approved by MEC and Board 7/2008
Addition of autotransfusionist to Section 5.2 – review by Cred Cmte 6/28/13
Revision to Section 5.2 adopted by MEC & approved by Board 8/21/13
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