Loma Linda University Children’s Hospital

OBSTETRICS AND GYNECOLOGY SERVICE
Rules and Regulations

I. RESPONSIBILITIES:

The Obstetrics and Gynecology of Loma Linda University Children’s Hospital shall have the following responsibilities:

A. To evaluate and proctor the qualifications of those individuals applying and/or reapplying for staff membership and privileges in Gynecology and Obstetrics.

B. To monitor the ethical and professional practices of medical staff members on the Obstetrics and Gynecology.

C. To render continuing surveillance of the quality of care provided by medical Staff members on the Obstetrics and Gynecology.

D. To supervise the clinical activities of medical students, residents and fellows assigned to the Obstetrics and Gynecology.

E. To advise and make recommendations to the Medical Staff Executive Committee through the Chief of the Obstetrics and Gynecology via review of information attained through quality improvement functions and to take action as necessary to improve the quality of practice individually and collectively of the members of the Obstetrics and Gynecology.

II. MEMBERSHIP:

Requirements for membership on the medical staff and the Obstetrics and Gynecology Service shall be determined by the Medical Staff Executive Committee and shall be implemented through the Medical Staff Bylaws. Notwithstanding these requirements membership shall be available only to those who are qualified by training and/or experience to fulfill all the requirements of these Service Rules and Regulations.

III. OFFICERS:

The Chairman of the Department of Obstetrics and Gynecology of Loma Linda University School of Medicine shall serve as Chief of the Obstetrics and Gynecology of Loma Linda University Children’s Hospital. In the absence of the Chairman the individual acting as Chairman shall serve as Chief of Service. The Chairman may appoint Section Chiefs of recognized subspecialty areas and may delegate responsibilities to these individuals.
The Chief of Service shall:

A. Serve as Chairman of the Obstetrics and Gynecology Executive Committee.
B. Organize and chair regular meetings of the members of the Obstetrics and Gynecology.
C. Appoint Service committees and needed or required.
D. Maintain records of the Obstetrics and Gynecology.
E. Serves on Medical Staff committees as required by Medical Staff By-laws.
F. Review and approve all requests for privileges within the Obstetrics and Gynecology.
G. Comply with all other duties and functions specified in the Medical Staff Bylaws and its appendices.

The Section Chief:
Section Chiefs shall be appointed by the Chief of Service and be members in good standing of the active medical staff of Loma Linda University Children’s Hospital well as full-time geographic faculty of the Loma Linda University School of Medicine.

The Duties of the Section Chiefs are as follows:

A. Serve as alternates on Medical Staff committees as required by Medical Staff By-laws when the Chief of Service is absent.
B. Represent their subspecialty section at department meetings and quality improvement conferences.
C. Assist the Chief of Service in review of applicants for privileges on the Obstetrics and Gynecology.

IV. COMMITTEES:
A. Obstetrics and Gynecology Executive Committee:

1. Chairman:
The Obstetrics and Gynecology Executive Committee shall be chaired by the Chief of Service.

2. Membership:
Members of the Obstetrics and Gynecology Executive Committee shall be appointed by the Chief of Service and shall serve for indefinite periods of time at the pleasure of the Chief of Service. The number of members may vary from time to time. The committee shall consist of representatives of the various subspecialties having clinical privileges on the Obstetrics and Gynecology.

3. Function:
Review and act upon the credentials of new applicants and those being reappointed to the Obstetrics and Gynecology with specific regard to the Delineation of Privileges.
a. Review and act upon the recommendations of the sections with regard to the proctoring of members on the Obstetrics and Gynecology.
b. Recommend to members of the Obstetrics and Gynecology policies, rules and regulations it deems appropriate.
c. Assist the Chief of Service in his administrative activities as he directs.

B. Quality Improvement Committee:

1. Chairman:
The Obstetrics and Gynecology Quality Improvement Committee shall be chaired by members of the service appointed by the Chief of Service. The committee chairs (one for Obstetrics and one for Gynecology) shall be responsible for the ongoing quality improvement activities of the service.

2. Membership:
The committee shall have as members individuals representing those subspecialties currently having active members on the Obstetrics and Gynecology. The members shall be appointed by the Chief of Service on the recommendation of the chairmen of the committee.

3. Function:
   a. In conjunction with the Medical Staff Quality Improvement Committee the Service committee will review selected aspects of care on the Obstetrics and Gynecology with the goal of achieving continuing quality improvement.
   b. The committee will present recommendations to the Chief of Service for changes in policies, procedures and regulations that are intended to improve the quality of care on the Obstetrics and Gynecology.
   c. The committee will present to the entire Obstetrics and Gynecology the results of its monitoring activities.
   d. The committee will arrange for the presentations of continuing educational programs in response to its quality improvement activities.

I. POLICIES:

Rules and regulations governing the Obstetrics and Gynecology will be developed as policies. Policies will be approved by the Obstetrics and Gynecology Executive Committee and be submitted to the Medical Staff Executive Committee. These policies will be reviewed annually.

II. OBSTETRICS AND GYNECOLOGY PRIVILEGES:

A. General:
Members of the Obstetrics and Gynecology shall be granted obstetrical and surgical privileges consistent with their ability. Education and experience are the major indicators of ability. Some privileges may require specific observation by a peer to evaluate competency.

B. Specific:
   1. CATEGORY I PRIVILEGES:
   These privileges involve the care of low-risk obstetrical patients only. Physicians presenting evidence of having successfully completed an approved residency training
program in Family Practice (Family Medicine) are presumed to have gained initial competence in the management of these cases. Proctoring specific to these privileges is required.

2. CATEGORY II PRIVILEGES:
These privileges involve the care of patients with problems other than those specified in Category III. Physicians presenting evidence of having successfully completed an approved residency training program in Obstetrics and Gynecology are presumed to have gained initial competence in the management of these cases. The general initial proctoring requirement applies to and validates these privileges. Proctoring specific to these privileges is not required.

3. CATEGORY III PRIVILEGES:
These privileges involve the care of patients requiring treatment or surgery of such severity or complexity that the management is frequently provided by those physicians who have undergone subspecialty fellowship training. Specific granting of privileges is required at the time of initial application and reapplication. Proctoring specific to the area of privileges requested is required at the time of initial application.

Category II and III privileges also involve the granting of administrative responsibilities. The supervision of residents requires endorsement by the Residency Program Director for the Department of Obstetrics and Gynecology as well as by the Chief of Service. The supervision of medical students requires endorsement by the Chairman of the Department of Obstetrics and Gynecology of the Loma Linda University School of Medicine.

VII. PROCTORING:

All initial appointments to the Obstetrics and Gynecology are contingent upon the applicant demonstrating to his peers that he has the capability to provide the evaluation and management services required by his patients. This involves, but is not limited to, obtaining an appropriate history and physical examination, the ability to originate appropriate diagnostic and therapeutic orders, and to interpret the data that results from the orders. The usual requirement is that a minimum of ten (10) cases be reviewed by a peer. In special circumstances the number may be reduced by action of the Obstetrics and Gynecology Executive Committee.