

MEDICAL EXECUTIVE COMMITTEE MEETING SUMMARY November 2009

Following is a summary of Medical Executive Committee recommendations to the Board of Trustees:

A. MEDICAL STAFF TRANSFERS:

1. Acknowledge the resignation of Randy Hock, MD, effective immediately.

B. RECOMMENDED APPOINTMENTS TO THE MEDICAL STAFF:

James Reidy, MD / family medicine (affiliate staff)
Bryon Thomas, MD / family medicine (affiliate staff)
Kusumakar Bhatt, DO / family medicine (affiliate staff)
Shrinkhla Agrawal, MD / pediatrics.

C. OTHER:

1. Approve Dr. Harold Barnard for additional privileges in emergency medicine and transfer to the Department of Emergency Medicine.
2. Approve the following practitioners for completion of the focused professional practice evaluation period:

Anil Asgaonkar, MD / nephrology
Michele Ashton, MD / ob-gyn
Larissa Chism, MD / psychiatry
Leslie Schmitz, DO / nephrology
James Sieradzki, MD / orthopaedics
3. Approve Thomas Moretti, PA-C, for allied health professional staff membership as a physician-sponsored practitioner under the supervision of Dr. Bryan Boyer.
4. Approve Jennifer Ewing, NP, for allied health professional staff membership as a physician-employed practitioner under the supervision of Dr. Jose Bufill.
5. Approve Jeanette Kiehl, RN, for allied health professional staff

membership as a physician-employed practitioner under the supervision of Dr. John Kobayashi.

6. Approve Kenya Martinez, MD, for allied health professional staff membership as a physician-employed practitioner for the South Bend Emergency Physicians under the supervision of Dr. Michael Blakesley.
7. Acknowledge the re-assignment of physician sponsorship for Timothy Barnard, PA-C, from Dr. Boyer to Dr. Charles Ware.
8. Approve proposed revisions to the Temporary Privileges policy.
9. Approve the following proposed revision to Section F. TB Exposure of the Medical Staff Rules and Regulations to comply with revised Hospital policy.

F. TB EXPOSURE IMMUNIZATIONS

~~Attending p~~Physicians should provide evidence of current PPD testing and any other immunization status required by the Indiana State Department of Health ~~once during every calendar year, as well as~~ at the time of initial appointment. Should prevalence data collected on an ongoing basis suggest the need for re-testing, physicians are expected to comply with the request within the appropriate time frames.