

**LOMA LINDA UNIVERSITY MEDICAL CENTER
ORTHOPAEDIC SURGERY SERVICE
RULES AND REGULATIONS**

I. NAME OF ENTITY

The name of this organization shall be the Orthopaedic Surgery Service.

II. PURPOSE

- A. Provide high quality medical and surgical care of the musculoskeletal system.
 - 1. Render professional services to patients in accordance with the current standards of orthopaedic care.
 - 2. Insure the best possible orthopaedic care to all patients by performing continuing surveillance of the quality of care.
- B. Seek through clinical and basic research activities to improve the quality of patient care and add to the body of knowledge of the musculoskeletal system.
- C. Provide education to students in the Loma Linda University School of Medicine and resident physicians on the Orthopaedic Surgery Service regarding injuries and disorders of the musculoskeletal system.
- D. Act in an advisory capacity to the Loma Linda University Medical Center (LLUMC) regarding appropriate care of patients with injuries and disorders of the musculoskeletal system.

III. ORGANIZATION

- A. Membership
 - 1. Categories:

Membership categories shall correspond to those set forth in the Medical Staff Bylaws. Individuals considered for membership will demonstrate commitments to educational and research activities in addition to those involving the highest quality of patient care.
 - 2. Qualifications:
 - a. Orthopaedic surgeons on this Service will have satisfied the training requirements established by the American Board of Orthopaedic Surgery, including, when required by the ABOS, recertification.
 - b. Have a license to practice medicine and surgery in the State of California.
 - c. Be in good standing in the local medical community.
 - d. Meet other requirements for appointment to the LLUMC Medical Staff, including, but not limited to, a capability to provide continuous quality care to patients admitted to LLUMC.
 - 3. Requirements of Membership:
 - a. Active members of this Service are required to participate in all activities of the Service, including regular attendance at Service meetings and conferences.
 - b. Active members are expected to serve on Service and LLUMC committees as appropriate.

B. Officers and Duties

1. Service Chief:

- a. Accountable for all professional and administrative duties for the Service.
- b. Serve on the Medical Staff Executive Committee.
- c. Serve on the Operating Room Committee.
- d. Participate in the establishment of the medical policies of LLUMC. Make specific recommendations and suggestions regarding the Service in order to assure quality patient care.
- e. Enforce the Medical Staff Bylaws, Rules and Regulations for the Orthopaedic Surgery Service.
- f. Inform members of the Service of and implement actions taken by the Medical Staff Executive Committee.
- g. Transmit to the Medical Staff Executive Committee the Service's recommendations regarding delineation of clinical privileges, staff classification, and reappointment of members of the Orthopaedic Surgery Service.
- h. Review and approve requests for temporary privileges.
- i. Participate with LLUMC Administration and Orthopaedic Surgery Service in facilitating quality patient care.
- j. Ensure an ongoing Quality Management Program.

IV. MEETINGS

A. Frequency

The Service will hold monthly meetings, generally in the second week of the month.

B. Agenda

Because of the multiple purposes of the Service, meetings will be divided into separate and distinct portions and minutes will be kept. These separate and distinct sections include: quality management; financial and practice management affairs; academic affairs. An agenda will be prepared prior to the meeting. The meeting will be conducted by the Service Chief.

V. PRIVILEGES

A. Delineation and Granting of Privileges

1. Members of the Service may request specific privileges generally considered to be within the scope of orthopaedic surgery.
2. It will be the responsibility of the requesting surgeon to demonstrate the appropriateness of such a request.
3. Granting of these privileges shall be based on known facts regarding the previous training and experience of the individual surgeon and will first be approved by the Service Chief and recommended to the Credentials Committee whose approval will be subject to the final approval of the Medical Staff Executive Committee.

B. Proctoring

The Policy for proctoring physicians newly appointed to the Medical Staff as members of the Orthopaedic Service shall be in accordance with the Medical Staff Bylaws.

The Term of Proctoring may be extended over a period of 12 months; however these requirements may be met sooner.

A minimum of 6 cases will be reviewed by an active staff member who has been on staff for at least 2 years.

3 by direct observation

3 by retrospective chart review

At the completion of the 6 cases, a written report will be made to the Service Chair stating the types and number of cases reviewed, and an evaluation of performance.

The qualifications and performance of the appointee will be deemed adequate at the discretion of the Chair.

The Chair will then send a report to the Credentials Committee stating that the physician has satisfactorily demonstrated the qualifications for unsupervised practice.

Supervision while in L.L.U.M.C.'s graduate medical program, or direct knowledge of the appointee, may be substituted for 50% of the proctoring requirement.

C. Reappointment

Reappointment to the Medical Staff shall occur in accordance with Medical Staff policies. Newly appointed physicians who fail to meet the proctoring requirements within the first year will not be reappointed. Reappointment, which occurs every 2 years, will be forfeited if the minimum of 6 surgical cases is not met. Matters to be considered in the decision for reappointment by the Service Chief include overall participation in Service efforts, information from the quality management group, pertinency evaluation, and general maintenance of orthopaedic skills.

VI. PATIENT CARE RESPONSIBILITIES

A. Emergency Department

1. Members of this Service are expected to participate in the emergency department call schedule on an as needed basis. The call schedule is established on a monthly basis by the Service.
2. Surgeons on call are expected to be readily available to emergency department personnel.
3. It is understood that resident and fellow physicians in the Orthopaedic Surgery Service represent the first line of call for patient care needs in the emergency department.

B. Outpatient Responsibilities

1. Service members are expected to maintain an active practice of orthopaedic surgery.
2. Service members will promptly provide service and be available for response to patient needs.

C. Inpatient Responsibilities

1. Inpatient care is the direct responsibility of members of this Service and is carried out with the assistance of orthopaedic residents.
2. Patients will generally be seen personally by their attending surgeon on a daily basis in conjunction with the orthopaedic resident.

D. Operating Room

1. Elective surgical cases will be scheduled in advance through usual procedures established by the Operating Room Committee.
2. Surgeons will be available at regularly scheduled operating times and will be in the hospital fifteen (15) minutes prior to the scheduled start of each case.
3. Surgeons will not schedule cases in two different facilities at the same time.
4. Because of the educational commitment of this Service, it is recognized that surgery is carried out with the assistance of orthopaedic resident physicians who participate in the procedures at a level appropriate for level of training.
5. It is permissible for the operating surgeon to leave the operating suite prior to the termination of the case if, in the surgeon's judgement, the resident physician has the expertise and experience to complete the case.
6. Appropriate tissue removed at surgery shall be sent to the laboratory for identification.
7. "Guests" in the operating room will be allowed only at the discretion of the attending surgeon and the director of the operating room.
8. Surgeons will abide by the policies established by the Operating Room Committee.

E. Consultations

1. Service members will be available to provide patient consultations to other services on the days of emergency room call and at such other times as beneficial because of special interest or expertise.
2. Consultations from other services shall be requested in cases of obscure diagnosis, certain complications of treatment, or at family or patient request.

F. Absences

In the event of a planned absence by an attending surgeon, a note shall be made in the chart documenting the responsible surgeon covering in his absence.

G. Medical Records

1. A written record shall be provided by the attending surgeon that will document the medical history, physical examination, surgical procedure, and course of care.
2. Information to justify proposed procedures and evidence of informed consent shall be provided.
3. Medical records shall be completed on a timely basis, in accordance with Medical Staff policies set forth in the Bylaws.

H. Confidentiality

Patient confidentiality shall be maintained at all times.

VII. EDUCATIONAL RESPONSIBILITIES

- A. Members of the Service are expected to support and participate in the educational efforts of the Service. These are directed primarily toward resident physicians in orthopaedic surgery, but also include students in the Loma Linda University School of Medicine.
- B. Because of the subspecialization of orthopaedic surgery, individuals with subspecialty expertise have a responsibility to participate in the continuing education of their fellow Service members as well as resident physicians by regular attendance at teaching conferences.
- C. Service members accept the responsibility to continue their own medical education and maintain their expertise at current levels of knowledge.