

CHAMBERSBURG ENDOSCOPY CENTER, LLC

**MEDICAL STAFF
BYLAWS, RULES, AND REGULATIONS**

These Medical Staff Bylaws, Rules, and Regulations have been reviewed and approved by the Governing Body for implementation.

PREAMBLE

Recognizing that the best interest of the patient is served by the concerted efforts of the Medical Staff, the Medical Staff must assume responsibility for the quality of medical care and maintain high standards through peer review established by the Governing Body.

The name shall be Wellspan Chambersburg Endoscopy Center, LLC.

The physicians practicing at the Center hereby are organized in conformity with the Bylaws, Rules, and Regulations here in after stated.

For the purpose of these Bylaws, Rules, and Regulations, the following definitions are given:

The term "Governing Body" shall mean the governing authority of the Center and shall consist of the Medical Director, Center Director, and any other members deemed necessary.

The Medical Director shall act as President of the Governing Body.

The term "Center" shall mean Wellspan Chambersburg Endoscopy Center, LLC.

The "Center Director" is an employee of the Center who has authority and responsibility for the operation of the center at all times. Qualifications, authority, responsibilities and duties of the person in charge are defined in Section 2-Center Director Job Description.

The "Quality Improvement Committee" shall consist of an licensed practitioner who is a non-owner (who may also be the Committee Chairman), Center Director, registered nurse, and Medical Director.

The Center will be staffed and equipped to meet the needs of the patient, support staff, and care providers. Procedures approved by the Governing Body to be performed are listed in the Description of Services Policy.

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**SECTION 1
ARTICLE A
Philosophy and Objectives**

We:

1. Consider each patient as a unique individual.
2. Recognize what procedures can mean to a patient physically and psychologically.
3. Adjust to patient's various means of coping with stress.
4. Protect the individual rights of the patient to privacy and dignity.
5. Provide a safe environment for the patient.
6. Apply principles of high-level disinfection in the processing of our endoscopy equipment.
7. Support the physician's work through technical and nursing skills.
8. Think and act promptly, efficiently, and calmly in an emergency situation.
9. Realize the need for absolute accuracy, integrity, and conscientious effort in our patient care.
10. Know the action and use of anesthetic agents and detect adverse reactions in immediate post-endoscopic situations.
11. Coordinate procedure room activities with recovery room personnel and family as needed.
12. Maintain legal records.
13. Communicate the patient's condition to their immediate family as necessary.
14. Practice thrift in use of time, supplies, and equipment.
15. Serve in the function as teachers of laity, clinical personnel, and students.
16. Provide suitable equipment for elective and emergency conditions.
17. Support professional organizations for nursing and non-licensed staff.
18. Continue to update our knowledge through in-service and other educational pursuits.

**ARTICLE B
Governing Body Responsibility**

The Governing Body shall be ultimately responsible for quality of care rendered in the Center.

The Governing Body shall insure that all health care personnel for whom state licenses, certification, or registration are required are currently licensed, certified or registered as appropriate in the State of Pennsylvania.

The Governing Body shall insure there is effective review of professional practices of the Center and the improvement of patient care as is indicated by the involvement

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and participation of the Quality Improvement Committee, which includes an external peer review physician having no financial interest in the Center.

The Governing Body shall be responsible for total overall operation of the Center and the approval of the Medical Staff appointments as recommended by the Quality Improvement committee. The Governing Body shall have documented evidence on the file that medical staff members admitted to practice are granted privileges consistent with their individual training, experience, and other qualifications. The Governing Body shall have the power for granting, restricting, and terminating privileges.

The Governing Body shall assure the Medical Staff complies with its Medical Staff Bylaws, Rules, and Regulations.

The Governing Body shall approve all standing orders.

The Governing Body shall delegate the Medical Director the ability to grant temporary privileges, review all policy and procedure manuals, ancillary and/or contracted services, and all other programs reports and approve its implementation to assure quality patient care is being provided.

The Governing Body shall review the Quality Improvement Committee's quarterly reports and approve its implementation to assure quality patient care is being provided.

The Governing Body shall act on all medico-administrative matters of the organization.

The Governing Body is ultimately responsible for all activity of the Center, which is demonstrated by protecting patients' right and responsibilities and their privacy and confidentiality.

Should the occasion arise for interim decision making prior to the next scheduled meeting, the issue will be addressed and handled accordingly by the President of the Governing Body and communicated to concerned parties.

**ARTICLE C
Terms of Appointments**

The Governing Body grants initial, renewed, or revised privileges for no longer than a two-year period. (Joint Commission HR.02.02.03) Verification of all credentials and pertinent documents will be maintained in the medical staff member's credentialing

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file at the Center. Reference policy titled “Medical Staff and Medical Staff Credentialing.”

**ARTICLE D
Meetings**

Governing body meetings will be announced to members at least fourteen (14) days prior to the meeting date and time.

**ARTICLE E
Determination of Diagnostic and Treatment Privileges**

Diagnostic and treatment privileges for specific outpatient procedures to be performed are determined and approved by the Governing Body. A current copy of each physician’s Request of Privileges form will be maintained in each physician’s credentials file identifying which procedures they will be performing.

**ARTICLE F
Reappointments**

Medical staff appointments are for a period of two (2) years. The procedure for reappointment shall be as follows:

The Center Director shall provide such staff member with a Request for Reappointment for use in considering their reappointment. Each staff member who desires reappointment shall, at least thirty days prior to such expiration date, send their Request for Reappointment to the Center Director.

The Center Director shall compile information and submit the completed request to the Medical Director. The Medical Director will review the verified credential packet and may grant temporary privileges at that time. This information will then seek final approval from the Governing Body at the next meeting.

**ARTICLE G
Ethics and Ethical Relationships**

The code of ethics as adopted or amended by the American Medical Association, the American College of Physicians, respectively, shall govern the professional conduct of the members of the staff.

Upon becoming a member of the medical Staff, each Physician shall agree not to engage in the practice of the division of fees under any guise whatsoever. Specifically, each member of the Staff shall pledge himself as follows:

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“I agree to abide by the Bylaws of the Medical Staff and by such Rules and Regulations as may be from time to time enacted. I hereby declare that I shall not engage in the practice of the division of fees under any guise whatsoever. In complying with this principle, I understand that I am not to collect fees for, not to make joint fees with Physicians or Surgeons referring patients to me for operation or consultation, nor permit any agent or associate of mine to do so. Further, I agree to comply with the principle that all physicians and surgeon’s participation in the care of the patient shall render separate bills and receipts.”

**ARTICLE H
Hearing/Appeals Process**

Recommendation to the Governing Body for withdrawal of any privileges or dismissal from the Medical Staff shall be made only after a thorough investigation, with the subject member being given the right of hearing before the Governing Body. An appeals process will follow these guidelines.

1. All notification and communication between the medical staff member and the Center will be certified mail, return receipt requested.
2. Initial correspondence between the Center will advise the practitioner of his/her right to a hearing, review and right to review specific charges against him/her.
3. Failure to request a hearing or review within fourteen (14) days of proper notification by certified mail will constitute a waiver rights for hearing of review.
4. The Medical Director will be present at all formal hearings and review.
5. The formal nature of a hearing or review will state in concise language, acts of omission or commission with which the physician or other health-related professional are charged.
6. A record of proceedings will be maintained.
7. Either party will be allowed to have an attorney present at the hearing or review. Should either party elect to have an attorney present, then the other party will be so notified prior to the meeting.
8. Notification and hearing will be conducted within thirty (30) days; the beginning date to commence with the date notification is posted. Review will be conducted and notification delivered within ten (10) days following the hearing.

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**ARTICLE I
Adoption of Bylaws**

The Governing Body shall adopt such Bylaws, Rules, and Regulations as may be necessary for the proper conduct of its work. Such Rules and Regulations as pertaining to the Medical Staff as a whole shall be a part of these Bylaws. These Rules and Regulations, or amendments to them, shall become effective when approved by the Governing Body.

**ARTICLE J
Amendments or Revisions**

To review or amend the Bylaws the Governing Body will provide prior notice to all physicians with appointments to the Center, the nature of the change and the effective date. Amendments will be effective when adopted by the Governing Body.

**ARTICLE K
Adoption**

These Bylaws, together with the Rules and Regulations contained herein, shall be adopted at any regular meeting of the Governing Body and shall become effective when approved by the Governing Body of the Center. They shall, when adopted and approved, be equally binding on the Governing Body and the Medical Staff.