## CGH MEDICAL CENTER MEDICAL EXECUTIVE COMMITTEE 23 May 2019

Members present: Drs. Hahn, Tran, McGlone, Racanelli, Riley, Pham and Jones Others present: Dr. Steinke, G. Superczynski, P. Joines, Dr. Bird, S. Brown, J. Van Osdol and J. VanAusdal Guests: Dr. J. Monteagudo

Agenda	Discussion/Conclusions	Recommendations/Actions	Responsible
Call to Order & Approval of Minutes	Dr. Hahn, president of the medical staff called the meeting to order at 1230 in the Boardroom. 15 April 2019 minutes were reviewed (attachment A).	A MOTION WAS MADE, SECONDED AND PASSED TO APPROVE MINUTES AS PRESENTED.	
Additional Meeting Minutes	The following meeting minutes were attached to the packet: Credentials Committee (attachment B) for review.	For information only. Action items documented below.	
<b>Meeting Reports:</b>			•
Credentials Summary	A copy of the recommendations from the May Credentials Committee was attached to the agenda (attachment B) for review.	FOLLOWING DISCUSSION, A MOTION WAS MADE, SECONDED AND PASSED TO	MSC/Chair
	COMPLETED PROCTORING: Jerald Cundiff, M.D Ophthalmology	RECOMMEND TO THE CGH BOARD OF DIRECTORS APPROVAL OF COMPLETED	
	ALLIED HEALTH STAFF APPOINTMENT: Edita Danaiata, NP – (NP-Dr. Reese) Erika Stach, NP – (NP – Dr. King) Shane Stevens, CRNA	PROCTORING FOR Jerald Cundiff, M.D Ophthalmology, ALLIED HEALTH STAFF APPOINTMENT TO Edita	
	TELERADIOLOGY STAFF APPOINTMENT: Donn K. Beeson, M.D. Robert E. Stone, M.D. Kavita Garg, M.D.	Danaiata, NP – (NP-Dr. Reese), Erika Stach, NP – (NP – Dr. King) and Shane Stevens, CRNA, TELERADIOLOGY STAFF APPOINTMENT TO Donn K.	
	REAPPOINTMENT APPROVAL MAY 29, 2019 – APRIL 30, 2021: (attachment B.4)  a) Telepsychiatry	Beeson, M.D., Robert E. Stone, M.D. and Kavita Garg, M.D., REAPPOINTMENT APPROVAL MAY 29, 2019 – APRIL 30, 2021 FOR TELEPSYCHIATRY,	
	REVISED PRIVILEGE FORM: Jackie Greve, NP – (NP – Pediatrics)	REVISED PRIVILEGE FORM for Jackie Greve, NP – (NP – Pediatrics) AND RESIGNATIONS	
	RESIGNATIONS: Kathleen Hamblen, NP – Nurse Practitioner (ED) – Effective April 9, 2019 Jacob R. Hopping, M.D. – General Surgery – Effective April 9, 2019	FOR Kathleen Hamblen, NP – Nurse Practitioner (ED) – Effective April 9, 2019 and Jacob R. Hopping, M.D. – General Surgery – Effective April 9, 2019	
New Business:		Elicetive April 9, 2019	
Review and Approve Revised Fecal Microbiota Transplant Policy	A copy of the revised fecal microbiota transplant policy was attached to the packet (attachment C) for review and approval.  Dr. Monteagudo was in attendance to discuss the changes requested to this policy. GI would like to remove the ID consult from the policy due to remove some barriers they have getting FMT's approved as well as change the number of episodes from 3 to 2.  There was a lengthy discussion regarding this policy and requested changes. Dr. Hahn stated the guidelines we are following state 3 episodes	A MOTION WAS MADE, SECONDED AND PASSED TO APPROVE THE REVISED FECAL MICROBIOTA TRANSPLANT POLICY REMOVING THE ID CONSULT AND LEAVING THE NUMBER OF EPISODES AT 3.	Chair/R. Superczynski
	and the committee feels we should leave that at 3 and they are fine with removing the ID consult.  Dr. Racanelli stated the infection prevention committee recommended adding language to the policy that defines recurrence. This committee did not feel it was necessary to define recurrence and will leave that to clinical judgement.	3 VOTES APPROVED, AND 3 VOTES ABSTAINED  Drs. Monteagudo and Friend will obtain the FMT policy/protocol from UW Madison and if necessary this policy will be revisited.	
Reports:			
Chief Medical Officer	Dr. Bird stated there was an article from the WHO recently about hand washing and how important it is. It stated a many people will die from infections related to not washing your hands.	For information only.	Chair/Dr. Bird
President of the Medical Staff	There was no report for this meeting.	For information only.	Dr. Hahn

MEC	Page 2 of 2		23 May 2019	
Agenda	Discussion/Conclusions	Recommendations/Actions	Responsible	
President & CEO	A copy of the project list was attached to the packet (attachment D) for review. Dr. Steinke stated the new fiscal year is just starting so they are looking at out financials. Reminded everyone that they are working for a good organization as 1/3 of Illinois hospitals are losing money and we are not one of those.	For information only.	Dr. Steinke	
Quality & Patient Safety Director	P. Joines stated the AHRQ Culture of Safety survey will be sent out on June 3 <sup>rd</sup> via email.	For information only.	P. Joines/ MSC	
Board Report	A copy of the April Board minutes was attached to the packet (attachment E) for review.  J. Van Osdol stated the hospital bylaws were recently approved after a lengthy over haul. A general contractor was also hired for the pharmacy build out.	For information only.	Board Rep.	
Adjournment	The meeting adjourned at 1333.	The next meeting is scheduled for June 17, 2019		
Date:	Recorded by: Medical Staff Coordinator	Approved by: President of the Medical Staff		