

RULES AND REGULATIONS

DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

THE DEPARTMENT

The Department of Obstetrics and Gynecology shall have a Chair who is appointed by the Board of Directors. An Associate Chair of the Department is to be selected by vote from the Medical Staff of the Department excluding full-time employed physicians and will serve a two-year term. This physician shall be eligible for reappointment as the Associate Chair for a maximum of two consecutive terms but would be eligible for reappointment after a minimum of one-year absence from this position.

The duties and responsibilities of the Associate Chair will be to assist the Chair in the performance of his/her duties and in particular, when the Chair is unavailable, to stand in for the Chair to resolve immediate clinical problems in the Operating Room, Labor & Delivery, with critical patient issues, or conflicts with other services in the hospital as needed.

All surgical privileges shall be delineated so that each Attending will know exactly what he or she is allowed to do and will be granted after review and approval by those Hospital Committees as outlined in the By-laws after review and recommendation by the Chair. A period of preceptorship may be required of new applicants to the medical staff at the discretion of the Chair or in the context of new operative procedures or devices. In such instances, the preceptor(s) will be appointed by the Chair .

The Chair will appoint an Executive Committee to include the Associate Chair and 3 members of the Department (one full-time employed physician and two members of the voluntary Medical Staff). to serve at the discretion of the Chair. This Committee will help in arranging policies of the Department and suggesting new programs. The members of this Committee may also assist in resident selection and in other matters of departmental interest, which may be requested by the Chair.

. Standing Committees and ad hoc Committees of the Department will be established and appointed by the Chair as needed. The Standing Committees of the Department currently include the Peer Review Committee, the GYN Surgical Committee and the interdisciplinary OB Task Force.

MEETINGS AND CONFERENCES

A total educational program is maintained by the Department. Each member of the Staff is expected to attend 50% of the Grand Rounds Meetings and 50% of the monthly Business Meetings.

STAFF

The Staff of the Department of Obstetrics and Gynecology will consist of those physicians who qualify for membership on the Stamford Hospital Medical Staff as described by the By-Laws of the Hospital. In addition, it is required that each applicant have completed a standard approved residency in accordance with the American Board of Obstetrics and Gynecology; be Board Certified, or have passed Part 1 of the Boards or

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be scheduled to take the Part 1 examination in order to take Part II of the examination to be Board Certified in the specialty. Those members already appointed to the Staff prior to May 19, 2004, even if not holding Board Certification, will be continued in that position. In the event of failure to pass the examination, the policies of the A.B.O.G. are to be followed.

The Staff will be composed of Provisional and Active Members as described in the By-Laws of The Stamford Hospital. The initial appointment will be that of Provisional Staff for a minimum of one year. After a minimum of one year of Provisional status and achievement of certification by the American Board of Obstetrics and Gynecology, the member will be eligible for appointment to full Active Staff. In addition, there will be a Consultant level which is assigned to selected individuals with special expertise who serve only as consultants and teachers. Also, an Honorary position as stated by the By-Laws will exist for those over 65 or who have served for 30 or more years in an active position and have requested relief from the daily clinical activities.

MEDICAL SCHOOL RELATIONSHIPS

The Attendings who teach medical students will be recommended for faculty appointment commensurate with their abilities and effort.

COVERAGE RESPONSIBILITIES

The By-Laws of the Medical Staff stipulate that each member of the active or provisional staff shall participate in a rotational call system for staff patients. However the Department has established a separate P.C. consisting of members of the Department who voluntarily participate in staff call and in return are paid a stipend for their call shifts which generally, but not absolutely, relieves other members of the Department of the need to participate in staff call. Typically, a monthly schedule for daytime, night and weekend call will be arranged by the Chair utilizing the voluntary members of the OB/GYN P.C. Each P.C. Attending is expected to cover his or her assigned "on-call" duties and be available to consult with the Residents throughout their shift. In the event that an Attending is unable to be present on his or her assigned shift, coverage is to be arranged by that attending assigned to be "on-call". In the event that all call shifts in a given month are not covered, the Chair may need to assign call duties to non-P.C. members of the department in accordance with the By-Laws.

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CONTINUING MEDICAL EDUCATION

C.M.E. Credits may be obtained by attending conferences in the Hospital, on line courses, or attending conferences at other venues. For reappointment to the Medical Staff, 50 Category One CME credits are required each two-year cycle.

TEACHING ASSIGNMENTS

It is expected that each person on the full time staff will accept assignments to give prepared organized talks, lectures or seminars to the Residents and Medical Students. Other members of the Attending Staff are encouraged to participate in these teaching activities as their schedules and areas of expertise allow.

COMMITTEE ASSIGNMENTS

Each member of the Attending Staff is expected to serve on a rotational basis on Hospital and/or Medical Staff Committees as requested by the Chair.

PATIENT MANAGEMENT

All cases are "teaching" cases. The Resident is to assist at surgery. No outside assistants are to be used unless special expertise is needed by the operating surgeon, which is above and beyond the ability of that person. In the event that such a person is required, permission shall be requested from the Chair.

All patient management is to be reviewed and will be presented daily at morning rounds or at weekly GYN case reviews. These case reviews will be done in the interest of evaluating the overall quality of care as offered by this Department.

PROTOCOLS

A Clinical Protocol Book should be kept on the Labor and Delivery Unit. These Protocols are strongly endorsed management approaches which have been approved by the Department as a whole. Any suggestion as to changes or additions to these Protocols will be discussed by the appropriate OB or GYN Committee for consideration and then presented to the Department for approval.

CHART WORK

It is mandatory that charts and operative reports are completed on time and notifications from the Record Room be answered promptly.

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Each member of the Staff will have his or her privileges reviewed and delineated every two years at the time of reappointment. Reappointment to the Medical Staff and re-approval of these privileges will be dependent on:

- ...Competence and clinical judgment
- ...Ethics and conduct
- ...Attendance at meetings
- ...Continuing education
- ...Compliance with Medical Staff By-Laws and these Rules and Regulations
- ...Evidence of good physical, emotional and mental health
- ...Appropriate malpractice coverage

Reappointment will be evaluated and recommended at each cycle by the Chair on the basis of compliance with the requirements for privileges as well as clinical conduct and referred to the Credentials Committee, Medical Executive Committee and Board of Directors for approval.

PATIENT CARE

All patients admitted to the Department of OB/GYN must be seen and evaluated by the relevant house staff and/or Attending physician and have a detailed history and physical examination written or dictated within the time frames specified in the By-Laws of the Medical Staff of Stamford Hospital. All patients, whether on the general medical units or the Critical Care Unit (CCU), and whether staff or private, must be evaluated on an initial and ongoing basis by the Attending physician of record in accordance with the By-Laws of the Medical Staff of The Stamford Hospital.

The assigned private or attending physician must countersign all written histories and physical examinations completed by house officers or medical students and should note in writing any corrections or additions deemed significant.

A documented history and physical examination, assessment and plan as well as daily progress notes are required of the attending physician on all patients whether or not they are staff or private patients. When applicable and in the context of countersignature of house staff progress notes, a relevant supplement to that note demonstrating meaningful attending participation in care and concordance and support of the written note, will suffice as a formal progress note.

