



*Board of Directors
Meeting Agenda Packet*

December 11, 2023



Board of Directors

Linda Greer, RN, Chair
Jeffrey D. Griffith, EMT-P, Vice Chair
Laura Barry, Treasurer
Theresa Corrales, RN, Secretary
John Clark, Director
Laurie Edwards-Tate, MS, Director
Michael Pacheco, Director

Diane Hansen, President and CEO

Regular meetings of the Board of Directors are held on the second Monday of each month at 6:30 p.m., unless indicated otherwise.

For an agenda, locations or further information please call (760) 740-6375 or visit our website at www.palomarhealth.org

Our Mission

To heal, comfort, and promote health
in the communities we serve

Our Vision

Palomar Health will be the health system of choice for patients, physicians and employees, recognized nationally for the highest quality of clinical care and access to comprehensive services

Our Values

Compassion - Providing comfort and care
Integrity - Doing the right thing for the right reason
Teamwork - Working together toward shared goals

Excellence - Aspiring to be the best
Service - Serving others and our community
Trust - Delivering on promises

POSTED
Thursday
December 7, 2023

BOARD OF DIRECTORS MEETING AGENDA

Monday, December 11, 2023
6:30 p.m.

PLEASE SEE PAGE 3 FOR MEETING LOCATION

The Board may take action on any of the items listed below, including items specifically labeled "Informational Only"		Time	Form A Page	Target
CALL TO ORDER				6:30
1.	ESTABLISHMENT OF QUORUM	2		6:32
2.	OPENING CEREMONY	3		6:35
	a. Pledge of Allegiance to the Flag			
3.	PUBLIC COMMENTS¹	30		7:05
4.	PRESENTATIONS – <i>Informational Only</i>			
	a. Municipal Service Review Overview - LAFCO	10		7:15
5.	APPROVAL OF MINUTES <i>(ADD A)</i>	5		7:20
	a. Board of Directors Meeting – Monday, November 13, 2023 <i>(Pp 6-16)</i>			
	b. Board of Directors Special Closed Session Meeting – Monday, November 13, 2023 <i>(Pp 17-19)</i>			
	c. Board of Directors Special Session Meeting – Friday, November 17, 2023 <i>(Pp 20-22)</i>			
6.	APPROVAL OF AGENDA to accept the Consent Items as listed <i>(ADD B)</i>	5		7:25
	a. Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments <i>(Pp 23-26)</i>		2	
	b. Palomar Medical Center Poway Medical Staff Credentialing and Reappointments <i>(Pp 27-61)</i>		3	
	c. Palomar Medical Center Escondido Medical Staff and Palomar Medical Center Poway Medical Staff Rules and Regulations <i>(Redline Pp 62-65, Clean Pp 66-69)</i>		4	
	d. Palomar Medical Center Escondido Medical Staff Cardiology Clinical Privileges <i>(Redline Pp 70-80, Clean Pp 81-91)</i>		5	
7.	REPORTS – <i>Informational Only</i>			
	a. Medical Staff			
	I. Palomar Medical Center Escondido – <i>Kanchan Koirala, MD</i>	5		7:30
	II. Palomar Medical Center Poway – <i>Sam Filiciotto, MD</i>	5		7:35
	b. Administration			
	I. <u>President and CEO</u> – <i>Diane Hansen</i>	5		7:40
	II. <u>Chair of the Board</u> – <i>Linda Greer, RN</i>	5		7:45
8.	ELECTION OF OFFICERS			
	a. Elections of 2024 Officers	15		8:00
9.	APPROVAL of BYLAWS, CHARTERS, RESOLUTIONS, and OTHER ACTIONS <i>(ADD C)</i>	5		8:05
	Agenda Item	Committee or Dept.	Action	
	a. Affirmation of the Board of Directors Code of Conduct	General Counsel	Review/Approve	
	b. Resolution No. 12.11.23(01)-18 of the Board of Directors of Palomar Health Establishing Regular Board Meetings for Calendar Year 2024 <i>(Pp 92-93)</i>	Board	Review/Approve	

10.	COMMITTEE REPORTS – <i>Informational Only (ADD D)</i>	5		8:10
	a. Audit & Compliance Committee – Michael Pacheco, Committee Chair <i>(No meeting in November)</i>			
	b. Community Relations Committee – Terry Corrales, Committee Chair <i>(No meeting in November)</i>			
	c. Finance Committee – Laura Barry, Committee Chair <i>(No meeting in November)</i>			
	d. Governance Committee – Jeff Griffith, Committee Chair <i>(No meeting in November)</i>			
	e. Human Resources Committee – Terry Corrales, Committee Chair <i>(Pp 94-95)</i>			
	f. Quality Review Committee – Linda Greer, Committee Chair <i>(No meeting in November)</i>			
	g. Strategic & Facilities Planning Committee – Michael Pacheco, Committee Chair <i>(Pp 96)</i>			
FINAL ADJOURNMENT				8:10

NOTE: If you have a disability, please notify us by calling 760.740.6375, 72 hours prior to the event so that we may provide reasonable accommodations

¹ 3 minutes allowed per speaker. For further details, see Request for Public Comment Process and Policy on page 4 of agenda.



Board of Directors Meeting Location Options

**Palomar Medical Center Escondido
1st Floor Conference Room
2185 Citracado Parkway, Escondido, CA 92029**

- Elected Board Members of the Palomar Health Board of Directors will attend at this location, unless otherwise noticed below
- Non-Board member attendees, and members of the public may also attend at this location

<https://www.microsoft.com/en-us/microsoft-teams/join-a-meeting?rtc=1>

Meeting ID: 292 740 851 974

Passcode: iepteC

or

Dial in using your phone at 929.352.2216; Access Code: 896 226 868#¹

- Non-Board member attendees, and members of the public may also attend the meeting virtually utilizing the above link

¹ *New to Microsoft Teams? Get the app now and be ready when your first meeting starts: [Download Teams](#)*

DocID: 21790
 Revision: 9
 Status: Official

Source:
 Administrative
 Board of Directors

Applies to Facilities:
 All Palomar Health Facilities

Applies to Departments:
 Board of Directors

Policy: Public Comments and Attendance at Public Board Meetings

I. PURPOSE:

A. It is the intention of the Palomar Health Board of Directors to hear public comment about any topic that is under its jurisdiction. This policy is intended to provide guidelines in the interest of conducting orderly, open public meetings while ensuring that the public is afforded ample opportunity to attend and to address the board at any meetings of the whole board or board committees.

II. DEFINITIONS:

A. None defined.

III. TEXT / STANDARDS OF PRACTICE:

- A. There will be one-time period allotted for public comment at the start of the public meeting. Should the chair determine that further public comment is required during a public meeting, the chair can call for such additional public comment immediately prior to the adjournment of the public meeting. Members of the public who wish to address the Board are asked to complete a [Request for Public Comment form](#) and submit to the Board Assistant prior to or during the meeting. The information requested shall be limited to name, address, phone number and subject, however, the requesting public member shall submit the requested information voluntarily. It will not be a condition of speaking.
- B. Should Board action be requested, it is encouraged that the public requestor include the request on the *Request for Public Comment* as well. Any member of the public who is speaking is encouraged to submit written copies of the presentation.
- C. C. The subject matter of any speaker must be germane to Palomar Health's jurisdiction.
- D. Based solely on the number of speaking requests, the Board will set the time allowed for each speaker prior to the public sections of the meeting, but usually will not exceed 3 minutes per speaker, with a cumulative total of thirty minutes.
- E. Questions or comments will be entertained during the "Public Comments" section on the agenda. All public comments will be limited to the designated times, including at all board meetings, committee meetings and board workshops.
- F. All voting and non-voting members of a Board committee will be seated at the table. Name placards will be created as placeholders for those seats for Board members, committee members, staff, and scribes. Any other attendees, staff or public, are welcome to sit at seats that do not have name placards, as well as on any other chairs in the room. For Palomar Health Board meetings, members of the public will sit in a seating area designated for the public.
- G. In the event of a disturbance that is sufficient to impede the proceedings, all persons may be excluded with the exception of newspaper personnel who were not involved in the disturbance in question.
- H. The public shall be afforded those rights listed below (Government Code Section 54953 and 54954).
 - 1. To receive appropriate notice of meetings;
 - 2. To attend with no pre-conditions to attendance;
 - 3. To testify within reasonable limits prior to ordering consideration of the subject in question;
 - 4. To know the result of any ballots cast;
 - 5. To broadcast or record proceedings (conditional on lack of disruption to meeting);
 - 6. To review recordings of meetings within thirty days of recording; minutes to be Board approved before release,
 - 7. To publicly criticize Palomar Health or the Board; and
 - 8. To review without delay agendas of all public meetings and any other writings distributed at the meeting. I. This policy will be reviewed and updated as required or at least every three years.

IV. ADDENDUM:

Original Document Date: 2/94

Reviewed: 8/95; 1/99; 9/05

Revision Number: 1 Dated: 9/20/05

Source Administrator Hernandez, Lisa

Document Owner DeBruin, Kevin

Collaborators: Carla Albright, Deanna Peterson, Deborah Hollick, Douglas Moir, Jami Pearson, Jeffrey Griffith, Julie H Avila, Kelly Wells, Laurie Edwards-Tate, Megan Strole, Nancy Calabria, Nanette Irwin, Richard Engel, Sally Valle, Tanya L Howell, Thomas Kumura

Reviewers

Approvals

- Committees: (10/12/2022) Policies & Procedures

- Signers: Kevin DeBruin

Original Effective Date Kevin DeBruin, Chief Legal Officer (10/25/2022 09:21AM PST)

Revised Reviewed [09/20/2005 Rev. 1], [03/13/2009 Rev. 2], [04/14/2012 Rev. 3], [05/01/2014 Rev. 4], [02/03/2017 Rev. 5], [04/22/2019 Rev. 6],

Next Review Date [07/10/2019 Rev. 7], [12/02/2021 Rev. 8], [10/25/2022 Rev. 9]

Attachments: 10/24/2025

(REFERENCED BY [Public Comment Form](#)

Paper copies of this document may not be current and should not be relied on for official purposes. The current version is in Lucidoc at

Palomar Health Board of Directors Meeting

Meeting will begin at **6:30 p.m.**



Request for Public Comments

If you would like to make a public comment, please submit a request by doing the following:

- **In Person: Submit Public Comment Form, or verbally submit a request, to the Board Assistant**
- **Virtual: Enter your name and “Public Comment” in the chat function once the meeting opens**

Those who submit a request will be called on during the Public Comments section and given 3 minutes to speak.

Public Comments Process

Pursuant to the Brown Act, the Board of Directors can only take action on items listed on the posted agenda. To ensure comments from the public can be made, there is a 30 minute public comments period at the beginning of the meeting. Each speaker who has requested to make a comment is granted three (3) minutes to speak. The public comment period is an opportunity to address the Board of Directors on agenda items or items of general interest within the subject matter jurisdiction of Palomar Health.

**Palomar Medical Center Escondido Medical Staff
Credentialing Recommendations**

TO: Board of Directors

MEETING DATE: December 11, 2023

FROM: Kanchan Koirala, M.D., Chief of Staff, Palomar Medical Center Escondido

Background: Credentialing Recommendations from the Medical Executive Committee of Palomar Medical Center Escondido.

Budget Impact: None

Staff Recommendation: Recommend Approval

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Poway
Medical Staff Credentials Recommendations
November, 2023**

TO: Board of Directors

MEETING DATE: Monday December 11, 2023

FROM: Sam Filiciotto, M.D., Chief of Staff, Palomar Medical Center Poway

Background: Monthly credentials recommendations from the Palomar Medical Center Poway Medical Executive Committee for approval by the Board of Directors.

Budget Impact: None

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Escondido and Poway
Medical Staff Department Rules and Regulations
Recommendation**

TO: Board of Directors

MEETING DATE: December 11, 2023

FROM: Sam Filiciotto, M.D., Chief of Staff, Palomar Medical Center Poway and
Kanchan Koirala, M.D., Chief of Staff, Palomar Medical Center Escondido

Background: The Palomar Medical Center Escondido and Poway Department of Emergency Medicine Rules and Regulations were updated to show current practices. Includes redlined and final versions.

Budget Impact: None

Staff Recommendation:

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

**Palomar Medical Center Escondido
Medical Staff Privilege Checklist**

TO: Board of Directors

MEETING DATE: December 11, 2023

FROM: Kanchan Koirala, M.D., Chief of Staff
Palomar Medical Center Escondido

Background: Revised Cardiovascular Disease Core Privilege Checklist:
Revised to current standards. Has been approved at all
applicable Medical Staff Department meetings at PMC
Escondido. Includes redlined and final versions.

Budget Impact: None.

Staff Recommendation: Recommend Approval

Committee Questions:

COMMITTEE RECOMMENDATION: Approval

Motion: X

Individual Action:

Information:

Required Time:

ADDENDUM A

Board of Directors Meeting Minutes – Monday, November 13, 2023

Agenda Item

- *Discussion*

Conclusion / Action /Follow Up

NOTICE OF MEETING

Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 Citracado Parkway, Suite 300, Escondido, CA. 92029, as well as on the Palomar Health website, on Friday, November 10, 2023, which is consistent with legal requirements.

CALL TO ORDER

The meeting, which was held at the Linda Greer Conference Room at 2125 Citracado Parkway, Suite 300, Escondido, CA. 92029, and called to order at 6:30 p.m. by Board Chair Linda Greer.

1. ESTABLISHMENT OF QUORUM

Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Greer, Griffith, Pacheco
Absences: None

2. OPENING CEREMONY – Pledge of Allegiance to the Flag

The Pledge of Allegiance to the Flag was recited in unison.

MISSION AND VISION STATEMENTS

The Palomar Health mission and vision statements are as follows:

- *The mission of Palomar Health is to heal, comfort and promote health in the communities we serve*
- *The vision of Palomar Health is to be the health system of choice for patients, physicians and employees, recognized nationally for the highest quality of clinical care and access to comprehensive services*

Agenda Item

- Discussion

Conclusion / Action /Follow Up

3. PUBLIC COMMENTS

- Lilly Williams, Escondido Republican Women

4. PRESENTATIONS

a. Physician Recognition

- Chair Linda Greer presented Lachlan Macleay, MD, with a certificate of appreciation.

b. Management Services Agreement

- John Kern and Shaun Turner, Holland & Knight, shared a presentation with the Board Members.

5. APPROVAL OF MINUTES

a. Board of Directors Meeting - Monday, October 9, 2023

MOTION: By Director Pacheco, 2nd by Director Barry and carried to approve the Monday, October 9, 2023 Board of Directors Meeting minutes, as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye

Director Greer – aye Director Barry – aye

Director Clark – aye Director Pacheco – aye

Director Edwards-Tate – aye

Chair Greer announced that seven board members were in favor. None opposed. No abstention. None absent.

Motion approved.

Board of Directors Meeting Minutes – Monday, November 13, 2023

Agenda Item

- *Discussion*

Conclusion / Action /Follow Up

- No discussion

b. Board of Directors Special Closed Session Meeting - Monday, October 9, 2023

MOTION: By Director Barry, 2nd by Director Clark and carried to approve the Monday, October 9, 2023 Board of Directors Special Closed Session Meeting minutes, as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
Director Greer – aye Director Barry – aye
Director Clark – aye Director Pacheco – aye
Director Edwards-Tate – aye

Chair Greer announced that seven board members were in favor. None opposed. None abstention. None absent.

Motion approved.

- No discussion

c. Board of Directors Special Session Meeting - Friday, October 6, 2023

MOTION: By Director Barry, 2nd by Director Clark and carried to approve the Friday, October 6, 2023 Board of Directors Special Session Meeting minutes, as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
Director Greer – aye Director Barry – aye
Director Clark – aye Director Pacheco – aye
Director Edwards-Tate – aye

Chair Greer announced that seven board members were in favor. None opposed. None abstention. None absent.

Motion approved.

- No discussion

Agenda Item

- Discussion

Conclusion / Action /Follow Up

6. APPROVAL OF AGENDA to accept the Consent Items as listed

- a. Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments
- b. Palomar Health Center Poway Medical Staff Credentialing and Reappointments
- c. Nurse Practitioner Psychiatry Core Privilege Checklist
- d. Board Member Onboarding Quick-Start Guide
- e. Executed, Budgeted, Routine Physician Agreements
- f. September 2023 and YTD FY2024 Financial Report

MOTION: By Director Griffith, 2nd by Director Pacheco and carried to approve Consent Agenda items A through E as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
 Director Greer – aye Director Barry – aye
 Director Clark – aye Director Pacheco – aye
 Director Edwards-Tate – aye

Chair Greer announced that seven board members were in favor. None opposed. None abstention. None absent.

Motion approved.

MOTION: By Director Corrales, 2nd by Director Barry and carried to approve Consent Agenda items F as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
 Director Greer – aye Director Barry – aye
 Director Clark – aye Director Pacheco – aye
 Director Edwards-Tate – abstain

Chair Greer announced that six board members were in favor. None opposed. One abstention. None absent. Motion approved.

- Director John Clark requested consent item F be approved separately.
- Director John Clark asked clarifying questions regarding consent item F. Hugh King, Chief Financial Officer and Omar Khawaja, MD, Chief Medical Officer, satisfied the Directors questions.

Agenda Item

- **Discussion**

Conclusion / Action /Follow Up

7. REPORTS

a. Medical Staffs

I. Palomar Medical Center Escondido

Palomar Medical Center Escondido Chief of Staff, Dr. Kanchan Koirala, provided a verbal report to the Board of Directors.

II. Palomar Medical Center Poway

Palomar Medical Center Poway Chief of Staff, Dr. Sam Filiciotto, provided a verbal report to the Board of Directors.

b. Administrative

I. President and CEO

Palomar Health President & CEO Diane Hansen provided a verbal report to the Board of Directors:

- Palomar Health achieved Leap Frog “A” score at both hospitals
- Healthgrades Patient Safety Award which puts Palomar Health in the top ten percent of the nation
- Read letter from patient

II. Chair of the Board

Palomar Health Chair of the Board Linda Greer provided a verbal report to the Board of Directors:

- Reminded Board Members to complete their annual training.

7. APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS and OTHER ACTIONS

a. Resolution No. 11.13.23(01)-17 of the Board of Directors of Palomar Health Authorizing the Executive Team to Identify a Potential Management Services Company and Negotiate a Proposed Management Services Agreement

MOTION: By Director Corrales, 2nd by Director Barry and carried to approve Resolution No. 11.13.23(01)-17 of the Board of Directors of Palomar Health Authorizing the Executive Team to Identify a Potential Management Services Company and Negotiate a Proposed Management Services Agreement

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
Director Greer – aye Director Barry – aye
Director Clark – no Director Pacheco – aye
Director Edwards-Tate – no

Chair Greer announced that five board members were in favor. two opposed. None abstention. None absent. Motion approved.

MOTION: By Director Clark, 2nd by Director Edwards-Tate and carried to table the agenda item until the next monthly meeting for time to study and analyze the proposition

Roll call voting was utilized.

Director Corrales – no Director Griffith – no
Director Greer – no Director Barry – no
Director Clark – aye Director Pacheco – no
Director Edwards-Tate – aye

Chair Greer announced that two board members were in favor. Five opposed. None abstention. None absent. Motion failed.

MOTION: By Director Edwards-Tate, 2nd by Director Clark and carried to defer the vote to a later date, possibly in a couple of weeks, or to discuss on its own merits the resolution

Roll call voting was utilized.

Director Corrales – no Director Griffith – no
Director Greer – no Director Barry – no
Director Clark – aye Director Pacheco – no
Director Edwards-Tate – aye

Chair Greer announced that two board members were in favor. Five opposed. None abstention. None absent. Motion failed.

Agenda Item

• Discussion

Conclusion / Action /Follow Up

- At the top of the first motion discussion, Director John Clark brought another motion to the table. Following that motion board discussion ensued
- Director Laurie Edwards-Tate motioned, board discussion continued.
- Discussion ensued regarding the original motion. Director Laura Barry called for a vote.
- Chair Linda Greer called a five minute recess at 7:37pm, the meeting resumed at 7:42pm.

b. Vote of No Confidence in a Director; Request for Director to Show Cause (John Clark)

MOTION: By Director Corrales, 2nd by Director Barry and carried to approve a Vote of No Confidence in Director John Clark

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye

Director Greer – aye Director Barry – aye

Director Clark – no Director Pacheco – aye

Director Edwards-Tate – no

Chair Greer announced that five board members were in favor. Two opposed. None abstention. None absent. Motion approved.

- Directors Jeff Griffith, Laura Barry, Terry Corrales, and Chair Linda Greer spoke in favor, Director Laurie Edwards-Tate opposed
- John Kern, Holland & Knight, addressed the Board Members regarding the agenda item
- Director John Clark spoke on his behalf

c. Vote of No Confidence in a Director; Request for Director to Show Cause (Laurie Edwards-Tate)

MOTION: By Director Corrales, 2nd by Director Barry and carried to approve a Vote of No Confidence in Director Laurie Edwards-Tate (motion amended, no vote taken).

AMENDED MOTION: By Director Edwards-Tate, 2nd by Director Clark and carried to table the vote until all proper procedures are followed, until confronted with a written complaint by another board member, written draft report containing investigation findings and ample time to prepare a response

Roll call voting was utilized.
Director Corrales – no Director Griffith – aye
Director Greer – no Director Barry – aye
Director Clark – aye Director Pacheco – aye
Director Edwards-Tate – aye
Chair Greer announced that five board members were in favor. Two opposed. None abstention. None absent. Motion approved.

MOTION: By Director Pacheco, 2nd by Director Clark and carried to vacate the earlier motion for Director John Clark and provide proper notifications that are being afforded to Director Laurie Edwards-Tate.

Roll call voting was utilized.
Director Corrales – no Director Griffith – no
Director Greer – no Director Barry – absent
Director Clark – aye Director Pacheco – aye
Director Edwards-Tate – aye
Chair Greer announced that three board members were in favor. Three opposed. None abstention. One absent. Motion failed.

MOTION: By Director Edwards-Tate, 2nd by Director Clark and carried to adjourn based on the failure of the board to follow the requirements of the Brown Act, other statutes and code of conduct

Roll call voting was utilized.
Director Corrales – no Director Griffith – no
Director Greer – no Director Barry – absent
Director Clark – abstain Director Pacheco – no
Director Edwards-Tate – aye
Chair Greer announced that one board members were in favor. Four opposed. One abstention. One absent. Motion failed.



Agenda Item

• Discussion

Conclusion / Action /Follow Up

MOTION: By Director Edwards-Tate to adjourn the meeting with no second.
Motion failed.

- Directors Laura Barry, Jeff Griffith, Terry Corrales, Michael Pacheco and Chair Linda Greer spoke in favor, director John Clark opposed
- John Kern, Holland & Knight, addressed the Board Members regarding the agenda item
- Director Laurie Edwards-Tate read a statement on her behalf
- Board discussion ensued after the second motion
- Director Laura Barry excused herself from the meeting at 8:25pm
- Board discussion ensued after the third motion
- Board discussion ensued after the fourth motion

8. COMMITTEE REPORTS (information only unless otherwise noted)

a. Audit and Compliance Committee

- Committee Chair Michael Pacheco reported the committee summary is included in the board-meeting packet.

b. Community Relations Committee

- Committee Chair Terry Corrales reported the committee summary is included in the board-meeting packet.

c. Finance Committee

- Committee Chair Laura Barry reported the committee summary is included in the board-meeting packet.

d. Governance Committee

- Committee Chair Jeff Griffith reported the committee summary is included in the board-meeting packet.

e. Human Resources Committee

- Committee Chair Terry Corrales reported the committee was dark in the month of October.

f. Quality Review Committee

Board of Directors Meeting Minutes – Monday, November 13, 2023

Agenda Item

• *Discussion*

Conclusion / Action /Follow Up

- Committee Chair Linda Greer reported the committee summary is included in the board-meeting packet.

g. Strategic & Facilities Planning Committee

- Committee Chair Michael Pacheco reported the committee was dark in the month of October.

FINAL ADJOURNMENT

- There being no further business, Chairwoman Linda Greer adjourned the meeting at 8:44 p.m.

Signatures:

Board Secretary

Terry Corrales, R.N.

Board Assistant

Carla Albright

SPECIAL CLOSED SESSION BOARD OF DIRECTOR’S MEETING MINUTES – MONDAY, NOVEMBER 13, 2023	
AGENDA ITEM	CONCLUSION / ACTION
<ul style="list-style-type: none"> DISCUSSION 	
<p>NOTICE OF MEETING</p> <p>Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 Citracado Parkway, Suite 300, Escondido, CA 92029, as well as on the Palomar Health website, on Friday, November 10, 2023, which is consistent with legal requirements.</p>	
<p>I. CALL TO ORDER</p> <p>The meeting, which was held in the Linda Greer Board Room at 2125 Citracado Parkway, Suite 300, Escondido, CA. 92029, and virtually, was called to order at 5:01 p.m. by Board Chair Linda Greer.</p>	
<p>II. ESTABLISHMENT OF QUORUM</p> <p>Quorum comprised of Directors Barry, Clark, Corrales, Greer, Griffith, Pacheco Absences: Edwards-Tate</p>	
<p>III. PUBLIC COMMENTS</p> <p>There were no public comments</p>	

SPECIAL CLOSED SESSION BOARD OF DIRECTOR'S MEETING MINUTES – MONDAY, NOVEMBER 13, 2023

AGENDA ITEM

CONCLUSION / ACTION

- **DISCUSSION**

IV. ADJOURNMENT TO CLOSED SESSION

a. Pursuant to California Government Code §54956.9(a) and (e); §54954.5—CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION—Case name(s) unspecified, disclosure would jeopardize service of process, existing negotiations, or result in other prejudice to the position of the District.

b. Pursuant to California Government Code § 54962 and California Health & Safety Code § 32106 – REPORT INVOLVING TRADE SECRET – Discussion will concern proposed new service or program. Estimated date of public disclosure: June 1, 2024

c. Pursuant to California Government Code §54956.9(a) and (e); §54954.5—CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION—Case name(s) unspecified, disclosure would jeopardize service of process, existing negotiations, or result in other prejudice to the position of the District.

V. RE-ADJOURNMENT TO OPEN SESSION

VI. ACTION RESULTING FROM DISCUSSION – IF ANY

- No action resulting from discussion

SPECIAL CLOSED SESSION BOARD OF DIRECTOR'S MEETING MINUTES – MONDAY, NOVEMBER 13, 2023

AGENDA ITEM

CONCLUSION / ACTION

- **DISCUSSION**

VII. FINAL ADJOURNMENT

There being no further business, Chair Greer adjourned the meeting at 6:23 p.m.

SIGNATURES:	BOARD SECRETARY	_____ Terry Corrales, R.N.
	BOARD ASSISTANT	_____ Carla Albright

SPECIAL MEETING BOARD OF DIRECTOR'S MINUTES – FRIDAY, NOVEMBER 17, 2023	
AGENDA ITEM	CONCLUSION / ACTION
<ul style="list-style-type: none"> DISCUSSION 	
NOTICE OF MEETING	
<p>Notice of Meeting was posted at the Palomar Health Administrative Office at 2125 Citracado Parkway, Suite 300, Escondido, CA 92029, as well as on the Palomar Health website, on Thursday, November 16, 2023, which is consistent with legal requirements.</p>	
I. CALL TO ORDER	
<p>The meeting, which was held in the Linda Greer Board Room at 2125 Citracado Parkway, Suite 300, Escondido, CA. 92029, and virtually, was called to order at 1:00 p.m. by Board Chair Linda Greer.</p> <p>Chair Linda Greer informed Board Members Michael Pacheco will be facilitating the meeting, as he is the Board Audit and Compliance Committee Chair.</p> <p>Director Laurie Edwards-Tate's remote appearance was not noticed. Motion by Pacheco, 2nd by Greer to allow Edwards-Tate remote appearance via the emergency provision of Government Code § 54953(j). Roll call vote was utilized. All in favor.</p>	
II. ESTABLISHMENT OF QUORUM	
<p>Quorum comprised of Directors Barry, Corrales, Edwards-Tate, Greer, Griffith, Pacheco</p> <p>Absences: Clark</p>	
III. PUBLIC COMMENTS	
<p>There were no public comments</p>	
IV. AGENDA ITEM(S) FOR REVIEW	
<p>a. <i>Moss Adams Audit Presentation: Communication of Results of the June 30, 2023 Audit</i></p>	

- Stacy Stelzriede and Jessa May Sidebotham of Moss Adams presented the audit findings to the board.
- Board member discussion ensued

V. BOARD VOTE TO APPROVE ANNUAL AUDIT

MOTION: By Director Greer, 2nd by Director Barry and carried to approve the Annual Audit results of the June 30, 2023, audit as presented.

Roll call voting was utilized.

Director Corrales – aye Director Griffith – aye
 Director Greer – aye Director Barry – aye
 Director Clark – absent Director Pacheco – aye
 Director Edwards-Tate – aye
 Director Pacheco announced that six board members were in favor. None opposed. No abstention. One absent.
 Motion approved.

- No discussion

VI. FINAL ADJOURNMENT

There being no further business, Chair Greer adjourned the meeting at 1:50 p.m.

SIGNATURES:	BOARD SECRETARY	<hr/> Terry Corrales, R.N.
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	BOARD ASSISTANT	<hr/> <p>Carla Albright</p>
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DRAFT

ADDENDUM B

Palomar Medical Center Escondido
2185 Citracado Parkway
Escondido, CA 92029
(442) 281-1005 (760) 233-7810 fax
Medical Staff Services

November 30, 2023

To: Palomar Health Board of Directors

From: Kanchan Koirala, M.D., Chief of Staff
Palomar Medical Center Escondido Medical Executive Committee

Board Meeting Date: December 11, 2023

Subject: Palomar Medical Center Escondido Credentialing Recommendations

Provisional Appointment (12/11/2023 – 11/30/2025)

Bansal, Preeti, M.D. - Ophthalmology
Bhatia, Shagun K., M.D. – Ophthalmology
Casillas Berumen, Sergio G., M.D. – Vascular Surgery
Kopec, Marcin A., M.D. – Teleradiology
Lim, Albert Y., D.O. – Anesthesiology
Mohabir, Anthony D., M.D. – Teleradiology
Patel, Punit, D.O. – Physical Medicine & Rehab
Penick, Cimberly L., D.O. – OB/Gyn
Plotz, Zachary J., M.D. – Teleradiology
Qazi, Hamid M.D. – Family Practice
Sargent, Paul D., M.D. – Psychiatry
Suntay, Berk T., M.D. – OB/Gyn
Velasco, Omar, M.D. – Internal Medicine
Venkatesh, Vijay B., M.D. – Diagnostic Radiology
Zuleta, Andres G., M.D. – Family Practice

Advance from Provisional to Active Category

Carranza, Carlee M., D.O. – Emergency Medicine (eff. 12/11/2023 – 05/31/2025)
DeLaurier, Geoffrey P., M.D. – Emergency medicine (eff. 12/11/2023 – 07/31/2025)
Huang, Alex Z., M.D. – Emergency Medicine (eff. 12/11/2023 – 8/31/2024)
Myatt, Toby C., M.D. - Emergency Medicine (eff. 12/11/2023- 7/31/2025)
Phull, Hardeep S., M.D. – Hematology/Oncology (eff. 12/11/2023- 8/31/2024)
Posadas, Emerson S., M.D. - Emergency Medicine- (eff. 12/11/2023- 7/31/2024)
Raney, Emerald S., M.D. – Emergency Medicine (eff. 12/11/2023- 08/31/2025)

Advance from Provisional to Courtesy Category

Lopez, Sandra, M.D. – Obstetrics and Gynecology (eff. 12/11/2023 – 11/30/2025)
Steinberg, Jeffrey A., M.D. – Neurosurgery (eff. 12/11/2023 – 03/31/2024)

Additional Privileges

Unterberg, Stephen H., M.D. – Urology

- Use of Robotic Assisted System for Urological Procedures and Sacral Nerve Stimulation for Urinary Control (both effective 12/11/2023 – 12/31/2024)

Voluntary Resignations

Ahmed, Farhana M.D. – Internal Medicine (eff. 12/31/2023)

Alunni, Marisa L., M.D. – OB/Gyn (eff. 11/30/2023)

Busa, Swapna P., M.D. – Rheumatology (eff. 12/31/2023)

Dalugdugan, Randy G., M.D. – Critical Care Medicine (eff. 12/31/2023)

Kennedy, John S., M.D. – OB/Gyn (eff. 12/31/2023)

Khemlina, Galina L., M.D. – Hospice & Palliative Medicine (eff. 12/31/2023)

Kolnick, Dean L., M.D. – Teleradiology (eff. 11/03/2023)

Martin, Mersadies R., M.D. – General Surgery (eff. 12/31/2023)

Master, Sonali S., M.D. – Gastroenterology (eff. 11/18/2023)

Ong, Lee-Ling, D.O. – Hospice & Palliative Medicine (eff. 12/31/2023)

Parker, Jaclyn T., M.D. – General Surgery (eff. 12/31/2023)

Poon, David, M.D. – General Surgery (eff. 12/31/2023)

Sitzer, Matthew E., M.D. – Gastroenterology (eff. 10/31/2023)

Vance, Erin J., M.D. – OB/Gyn (eff. 12/31/2023)

Velez, Erik M., M.D. – Teleradiology (eff. 11/20/2023)

Request for Leave of Absence – 2 years

Tavakoli, Sirpa A., M.D. – Psychiatry (eff. 11/01/2023 to 10/31/2025)

Allied Health Professional Appointment (12/11/2023 – 11/30/2025)

Keith, Heather R., NP – Emergency Medicine (Sponsor – Dr. Bruce Friedberg, for EMA)

Allied Health Professional Additional Privileges

Rice, William M., PA-C – Emergency Medicine Physician Assistant

- Perform Lumbar Puncture (effective 12/11/2023 – 10/31/2025)

Allied Health Professional Voluntary Resignations

Evans-Claassen, Desiree M., PA-C – General Surgery (eff. 10/31/2023)

Mazzarese, Peter M., PA-C - General Surgery (eff. 12/31/2023)

Allied Health Professional Request for Leave of Absence – 2 years

Cusi, Leslie B. Jr., NP – Family Nurse Practitioner (eff. 11/01/2023 – 10/31/2025)

PALOMAR MEDICAL CENTER ESCONDIDO RECOMMENDATIONS FOR REAPPOINTMENT

Reappointment (effective 01/01/2024 – 03/31/2024)

Bessudo, Alberto, M.D.	Medical Oncology	Dept. of Medicine	Consulting
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Reappointments (effective 01/01/2024 – 12/31/2025)

Adhikary Sharma, Sarina, M.D.	Family Practice	Dept. Of Family Practice	Affiliate
Barba, Daniel, M.D.	Orthopaedic Surgery	Dept. of Ortho Surgery/Rehab	Active
Chung, Charles J. W., M.D.	Diagnostic Radiology	Dept. of Radiology	Active
Faruque, Tania, M.D.	Pain Medicine	Dept. of Anesthesia	Affiliate
Franco, Juan Carlos T., M.D.	Internal Medicine	Dept. of Medicine	Active
Grant, William G., M.D.	Anesthesiology	Dept. of Anesthesia	Active
Gupta, Abhay, M.D.	Plastic Surgery	Dept. of Surgery	Courtesy
Hebreo, Joseph D., M.D.	Nephrology	Dept. of Medicine	Active
Katz, Michael S., M.D.	Surgery, Critical Care	Dept. Of Surgery	Active
Koirala, Kanchan, M.D.	Critical Care Medicine	Dept. of Medicine	Active
Lee, Young E., M.D.	Cardiovascular Disease	Dept. of Medicine	Active
Lotan, Roi M., M.D.	Diagnostic Radiology	Dept. of Radiology	Active
Nasiri, Arian, M.D.	Radiology, Vascular	Dept. of Radiology	Active
Okumura, Sean M., M.D.	Emergency Medicine	Dept. of Emergency Medicine	Active
Ross, Mark A., M.D.	Neurology	Dept. of Medicine	Courtesy
Sadoff, Mark N., M.D.	Neurology	Dept. of Medicine	Active
(*Change from Courtesy to Active*)			
Soni, Ranju A., M.D.	Critical Care Medicine	Dept. of Medicine	Active

Allied Health Professional Reappointments (effective 01/01/2024 – 12/31/2025)

Bergen, Sophea R., PA-C	Dept. of Ortho Surgery/Rehabilitation (Sponsor: Dr Kim & Dr. Raiszadeh for Spine Inst of SD)		
Chacon, Eliza C., PA-C	Dept. of Emergency Medicine (Sponsor: Dr Friedberg on behalf of EMA)		
Lam, Davina, PA-C	Dept. of Ortho Surgery/Rehabilitation (Sponsor: Dr Kim for Spine Institute of SD)		
Meyers, Judith S., ACNP	Dept. of Medicine (Sponsor: Dr. Mulvihill on behalf of PHMG)		

Certification by and Recommendation of Chief of Staff

As Chief of Staff of Palomar Medical Center Escondido, I certify that the procedures described in the Medical Staff Bylaws for appointment, reappointment or alteration of staff membership or the granting of privileges and that the policy of Palomar Health’s Board of Directors regarding such practices have been properly followed. I recommend that the action requested in each case be taken by the Board of Directors.

Palomar Medical Center Poway
Medical Staff Services
15615 Pomerado Road
Poway, CA 92064
(858) 613-4538 (858) 613-4217 fax

Date: November 30, 2023
To: Palomar Health Board of Directors – December 11, 2023 Meeting
From: Sam Filiciotto, M.D., Chief of Staff, PMC Poway Medical Staff
Subject: Medical Staff Credentials Recommendations – November, 2023

Provisional Appointments: (12/11/2023 – 11/30/2025)

Sergio Casillas Berumen, M.D., Vascular Surgery
Joseph Chammas, M.D., Vascular Surgery
Marcin Kopec, M.D., Teleradiology
Anthony Mohabir, M.D., Teleradiology
Punit Patel, D.O., Physical Medicine/Rehab
Zachary Plotz, M.D., Teleradiology
Hamid Qazi, M.D., Family Medicine (Includes The Villas at Poway)
Paul Sargent, M.D., Psychiatry (Includes The Villas at Poway)
Vijay Venkatesh, M.D., Diagnostic Radiology
Andres Zuleta, M.D., Family Medicine

Biennial Reappointments: (01/01/2024 - 12/31/2025)

Daniel Barba, M.D., Orthopedic Surgery, Active
Charles Chung, M.D., Teleradiology, Active
William Grant, M.D., Anesthesiology, Active
Abhay Gupta, M.D., Plastic Surgery, Active
Joseph Hebreo, M.D., Nephrology, Active
Kanchan Koirala, M.D., Critical Care Medicine, Active
Young Lee, M.D., Cardiovascular Disease, Active
Roi Lotan, M.D., Teleradiology, Active
Arian Nasiri, M.D., Diagnostic Radiology, Active
Sean Okumura, M.D., Emergency Medicine, Active
Mark Sadoff, M.D., Neurology, Courtesy
Ranju Soni, M.D., Critical Care Medicine, Active

Reappointment Effective 01/01/2024 – 03/31/2024:

Alberto Bessudo, M.D., Medical Oncology, Consulting

Advancements to Active Category:

Carlee Carranza, D.O., Emergency Medicine, effective 12/11/2023 – 05/31/2025
Geoffrey DeLaurier, M.D., Emergency Medicine, effective 12/11/2023 – 07/31/2025
Alex Huang, M.D., Emergency Medicine, effective 12/11/2023 – 08/31/2024
Toby Myatt, M.D., Emergency Medicine, effective 12/11/2023 – 07/31/2025

Hardeep Phull, M.D., Hematology/Oncology, effective 12/11/2023 – 08/31/2024 (Includes The Villas at Poway)

Emerson Posadas, M.D., Emergency Medicine, effective 12/11/2023 – 07/31/2024

Emerald Raney, M.D., Emergency Medicine, effective 12/11/2023 – 08/31/2025

Request for Additional Privileges:

Stephen Unterberg, M.D., Urology – Use of Robotic Assisted System and Sacral Nerve Stimulation, effective 12/11/2023 – 12/31/2024

Requests for Two Year Leave of Absence:

Sadaf Farasat, M.D., Endocrinology, effective 11/3/2023 – 11/02/2025

Aayah Fatayerji, D.O., Internal Medicine, effective 09/28/2023 – 09/27/2025

Sirpa Tavakoli, M.D., Psychiatry, effective 11/01/2023 – 10/31/2025

Voluntary Resignations:

Jill Furubayashi, M.D., Teleradiology, effective 10/08/2023

Eric Gerber, M.D., Urology, effective 09/22/2023

Dean Kolnick, M.D., Teleradiology, effective 11/03/2023

Michelle Koski, M.D., Urology, effective 09/22/2023

Lucila Moriera, D.O., Pediatrics, effective 11/30/2023

Steven Pratt, M.D., Ophthalmology, effective 11/30/2023

Nathaly Sweeney, M.D., Neonatology, effective 11/30/2023

Allied Health Professional Appointment: (12/11/2023 – 11/30/2025)

Heather Keith, NP, Sponsor Dr. Friedberg

Allied Health Professional Reappointments: (01/01/2024 – 12/31/2025)

Eliza Chacon, PA, Sponsor Dr. Friedberg

Judith Meyers, NP, Sponsor Dr. Mulvihill

Allied Health Professional Request for Additional Privileges:

William Rice, PA, Sponsor Dr. Friedberg – Lumbar Puncture (effective 12/11/2023 – 10/31/2025)

Allied Health Professional Request for Two Year Leave of Absence:

Leslie Cusi, FNP, effective 10/31/2023 – 10/30/2025

Allied Health Professional Voluntary Resignations:

Sabrina Lindsey, NNP, effective 11/30/2023

Jessica McElhose, NNP, effective 11/30/2023

PALOMAR MEDICAL CENTER POWAY: Certification by and Recommendation of Chief of Staff: As Chief of Staff of Palomar Medical Center Poway, I certify that the procedures described in the Medical Staff Bylaws for appointment, reappointment, or alternation of staff membership or the granting of privileges and the policy of the Palomar Health's Board of Directors regarding such practices have been properly followed. I recommend that the Board of Directors take the action requested in each case.

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Preeti Bansal, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Ophthalmology, Ophthalmology, Pediatric - Certified 2005, 2004
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ORGANIZATIONAL NAME

<i>Name</i>	Children’s Specialist of San Diego
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School University of Kentucky College of Medicine, MD From: 09/01/1995 To: 05/23/1999
<i>Internship Information</i>	Internship Vanderbilt University Hospital Internal Medicine From: 07/01/1999 To: 06/30/2000
<i>Residency Information</i>	Residency University of Kentucky Ophthalmology From: 07/01/2001 To: 06/30/2004 Chief resident 07/01/2003-06/30/2004
<i>Fellowship Information</i>	Fellowship Duke University Medical Center Pediatric, Ophthalmology From: 07/12/2004 To: 07/08/2005
<i>Current Affiliation Information</i>	Tri-City Medical Center Sharp Memorial Hospital Rady Children’s Hospital, San Diego

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Shagun K. Bhatia, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Ophthalmology - Certified 2020
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ORGANIZATIONAL NAME

<i>Name</i>	Children's Specialists of San Diego
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Emory University School of Medicine, MD From: 07/01/2009 To: 06/30/2014
<i>Internship Information</i>	Internship Waterbury Hospital (CT) Internal Medicine From: 06/30/2014 To: 06/30/2015
<i>Residency Information</i>	Residency Yale New Haven Hospital Ophthalmology From: 07/01/2015 To: 06/30/2018
<i>Fellowship Information</i>	Fellowship Shiley Eye Center, UCSD Pediatric, Ophthalmology From: 07/01/2018 To: 06/30/2019
<i>Current Affiliation Information</i>	Sharp Chula Vista Medical Center Tri-City Medical Center Sharp Grossmont Hospital Sharp Memorial Hospital Rady Children's Hospital, San Diego

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Sergio G. Casillas Berumen, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Surgery, General Vascular, Surgery, General - Certified 2021, 2018
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ORGANIZATIONAL NAME

<i>Name</i>	SS Vascular
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School La Universidad Autonoma de Baja California, MD From: 08/01/2000 To: 04/01/2008
<i>Internship Information</i>	
<i>Residency Information</i>	Residency Abington Hospital - Jefferson Health General Surgery From: 06/24/2010 To: 06/23/2015
<i>Fellowship Information</i>	Fellowship Boston University Medical Center Vascular Surgery From: 07/01/2015 To: 06/22/2017
<i>Current Affiliation Information</i>	



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Joseph H. Chammas, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Surgery, Cardiothoracic, Surgery, General - Certified 2002, 2000, 2013
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ORGANIZATIONAL NAME

<i>Name</i>	Joseph H. Chammas, M.D./SS Vascular
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Medical College of Wisconsin, MD From: 08/01/1989 To: 06/01/2001 Doctor of Medicine Degree
<i>Internship Information</i>	Internship Medical College of Wisconsin General Surgery From: 07/01/1993 To: 06/30/1994
<i>Residency Information</i>	Residency Medical College of Wisconsin General Surgery From: 07/01/1994 To: 06/30/1999 Chief Resident: 07/01/98-06/30/99
<i>Fellowship Information</i>	Fellowship Medical College of Wisconsin Cardiothoracic Surgery From: 07/01/1999 To: 06/01/2001
<i>Current Affiliation Information</i>	Loma Linda University Medical Center - Murrieta Palomar Medical Center Escondido

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Heather R. Keith, N.P.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Nurse Practitioner - Certified 2018
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ORGANIZATIONAL NAME

<i>Name</i>	Palomar Emergency Physicians
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EDUCATION/AFFILIATION INFORMATION

<i>Education Information</i>	California State University, Bakersfield, BSN From: 08/31/1992 To: 06/14/2002 gap in education secondary to working as an RN
<i>Employment</i>	Current Employment USACS Nurse Practitioner From: 06/28/2018 To: Current Current Employment WestSide Family Health Nurse Practitioner From: 12/11/2018 To: Current Current Employment Palomar Emergency Physicians From: 11/01/2023 To: Current
<i>Current Affiliation Information</i>	

**PALOMAR HEALTH
ALLIED HEALTH PROFESSIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Marcin A. Kopec, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Diagnostic Radiology - Certified 2019
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ORGANIZATIONAL NAME

<i>Name</i>	Stat Radiology Medical Group
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School New York University School of Medicine, MD From: 08/01/2006 To: 05/31/2010
<i>Internship Information</i>	Internship Jersey City Medical Center Internal Medicine From: 07/01/2010 To: 06/30/2011
<i>Residency Information</i>	Residency NYU Grossman School of Medicine Radiology, Diagnostic Imaging From: 07/01/2011 To: 06/30/2015
<i>Fellowship Information</i>	Fellowship NYU Grossman School of Medicine Vasc & Interventional Radiology From: 07/01/2015 To: 06/30/2016

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

<i>Current Affiliation Information</i>	Kaweah Delta Medical Center St. Jude Medical Center, Fullerton Southwest Healthcare System Centinela Hospital Medical Center Chino Valley Medical Center Montclair Hospital Medical Center San Dimas Community Hospital San Mateo Medical Center Banner University Medical Center Phoenix Marshall Medical Center Encino Hospital Medical Center Sherman Oaks Community Hospital Los Alamitos Medical Center Kaiser Foundation Hospital Sunnyside Kaiser Foundation Hospital Westside Sentara Martha Jefferson Hospital Sentara Rockingham Memorial Hospital Lourdes Health Bon Secours Depaul Medical Center Mary Immaculate Hospital Mission Hospital Medical Center - M Viejo
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**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Albert Y. Lim, D.O.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Anesthesiology - Certified 2011
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ORGANIZATIONAL NAME

<i>Name</i>	Anesthesia Consultants of California Med Group
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Kirksville College of Osteopathic Medicine, DO From: 06/14/1999 To: 06/07/2003
<i>Internship Information</i>	Internship National Naval Medical Center Internal Medicine From: 07/01/2003 To: 06/30/2004
<i>Residency Information</i>	Residency Baystate Medical Center Anesthesiology From: 07/01/2007 To: 06/30/2010
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Naval Medical Center, San Diego

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Anthony D. Mohabir, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Radiology, Interventional & Diagnostic - Certified 2019
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ORGANIZATIONAL NAME

<i>Name</i>	Stat Radiology Medical Groupo
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Albert Einstein College of Medicine, MD From: 08/01/2008 To: 05/31/2012
<i>Internship Information</i>	Internship North Shore University Hospital Internal Medicine From: 06/25/2012 To: 06/24/2013
<i>Residency Information</i>	Residency North Shore University Hospital Radiology, Diagnostic Imaging From: 07/01/2013 To: 06/30/2017
<i>Fellowship Information</i>	Fellowship North Shore University Hospital Vasc & Interventional Radiology From: 07/01/2017 To: 06/30/2018

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

<i>Current Affiliation Information</i>	The Queens Medical Center Emanuel Medical Center Doctors Medical Center, Modesto Kaweah Delta Medical Center CarePoint Health-Christ Hospital CarePoint Health-Hoboken University Medical Center Adventist Castle Medical Center Kansas Heart Hospital CarePoint Health - Bayonne Medical Center LMH Health - Lawrence Memorial Hospital Ellenville Regional Hospital Nuvance Health - Putnam Hospital Center Nuvance Health - Sharon Hospital Nuvance Health - Northern Dutchess Hospital
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**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Punit Patel, D.O.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Physical Medicine & Rehab - Certified 2023
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ORGANIZATIONAL NAME

<i>Name</i>	Palomar Health Rehab Institute
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School College Of Osteopathic Medicine of the Pacific, DO From: 08/01/2013 To: 05/17/2017 Doctor of Osteopathic Medicine
<i>Internship Information</i>	Internship Kaweah Delta Medical Center Transitional From: 06/19/2017 To: 06/30/2018
<i>Residency Information</i>	Residency Northwestern Memorial Hospital Physical Medicine/Rehab From: 07/01/2018 To: 06/30/2021
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Palomar Health Rehabilitation Institute Dominican Santa Cruz Hospital

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Cimberly L. Penick, D.O.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Obstetrics and Gynecology - Certified 2014
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ORGANIZATIONAL NAME

<i>Name</i>	OB Hospitalist Group
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School New York College of Osteopathic Medicine, DO From: 07/01/2001 To: 12/01/2006 Doctor of Osteopathic Medicine
<i>Internship Information</i>	
<i>Residency Information</i>	Residency Mount Sinai Queens Obstetrics/Gynecology From: 07/01/2007 To: 06/30/2011 ICAHN School of Medicine at Mount Sinai
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Loma Linda University Medical Center - Murrieta Sharp Grossmont Hospital Saddleback Memorial Laguna Hills Campus

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Zachary J. Plotz, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Diagnostic Radiology - Certified 2013
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ORGANIZATIONAL NAME

<i>Name</i>	Stat Radiology Medical Group
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Boston University, MD From: 09/01/2004 To: 05/30/2008
<i>Internship Information</i>	Internship National Capital Consortium Transitional From: 07/01/2008 To: 06/30/2009
<i>Residency Information</i>	Residency National Capital Consortium Radiology From: 07/01/2009 To: 06/30/2013
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Doctors Medical Center, Modesto El Camino Health - Mountain View Hospital Los Robles Regional Medical Center St. Jude Medical Center, Fullerton Kaweah Delta Medical Center Marshall Medical Center Mission Hospital Medical Center - M Viejo

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Hamid Qazi, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Family Practice - Certified 2021
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ORGANIZATIONAL NAME

<i>Name</i>	Palomar Health Medical Group
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Xavier University School of Medicine, Aruba, MD From: 09/01/2010 To: 03/31/2016
<i>Internship Information</i>	
<i>Residency Information</i>	Residency University of Alabama - Birmingham Family Medicine From: 07/01/2018 To: 06/30/2021
<i>Fellowship Information</i>	Fellowship Dermatology Care of Alabama Dermatology From: 08/01/2021 To: 08/31/2022
<i>Current Affiliation Information</i>	DCH Regional Medical Center DCH North Medical Center

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Paul D. Sargent, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Psychiatry - Certified 2010
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ORGANIZATIONAL NAME

<i>Name</i>	Senior Medical Associates
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Uniformed Services University - Health Sciences, MD From: 07/01/1998 To: 05/18/2002
<i>Internship Information</i>	Internship Naval Medical Center, San Diego Psychiatry From: 07/01/2002 To: 06/30/2003
<i>Residency Information</i>	Residency Naval Medical Center, San Diego Psychiatry From: 07/01/2006 To: 06/30/2009
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Camp Pendleton Naval Hospital Naval Medical Center, San Diego

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Berk T. Suntay, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Obstetrics and Gynecology - Certified 2015
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ORGANIZATIONAL NAME

<i>Name</i>	Optum Medical Care
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School Marmara Universitesi Tip Fakultesi, MD From: 09/01/1997 To: 06/30/2003 Doctor of Medicine Degree
<i>Internship Information</i>	Internship Bronx-Lebanon Hospital Center Obstetrics/Gynecology From: 07/01/2009 To: 06/30/2010
<i>Residency Information</i>	Residency Bronx-Lebanon Hospital Center Obstetrics/Gynecology From: 07/01/2009 To: 06/30/2013 Residency Maramara Univeritesi Tip Fakiltesi Obstetrics/Gynecology From: 06/01/2004 To: 06/01/2009
<i>Fellowship Information</i>	
<i>Current Affiliation Information</i>	Tri-City Medical Center

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Omar Velasco, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Internal Medicine - Certified 2018
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ORGANIZATIONAL NAME

<i>Name</i>	PHMG - Graybill Hospitalist
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School University of Rochester, MD From: 08/01/2006 To: 05/14/2010 Doctor of Medicine Degree
<i>Internship Information</i>	Internship University of Maryland Hospital General Surgery From: 07/01/2010 To: 06/30/2012
<i>Residency Information</i>	Residency University of Arizona Health Sciences Center Internal Medicine From: 07/01/2015 To: 06/30/2018
<i>Fellowship Information</i>	Fellowship UCLA Medical Center Research Fellow From: 07/01/2012 To: 06/30/2015
<i>Current Affiliation Information</i>	Redlands Community Hospital Palmdale Regional Medical Center Antelope Valley Hospital Medical Center

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Vijay B. Venkatesh, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Diagnostic Radiology, Neuroradiology - Certified 2005, 2008
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ORGANIZATIONAL NAME

<i>Name</i>	San Diego imaging Medical Group
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School SUNY, Upstate Medical Center, MD From: 07/01/1996 To: 05/31/2000
<i>Internship Information</i>	Internship Wilson Memorial Regional Medical Center Transitional From: 06/24/2000 To: 06/23/2001
<i>Residency Information</i>	Residency State University of New York at Stony Brook Radiology From: 07/01/2001 To: 06/30/2005
<i>Fellowship Information</i>	Fellowship Mount Sinai Hospital - New York Neuroradiology From: 07/01/2005 To: 06/30/2006
<i>Current Affiliation Information</i>	Sharp Grossmont Hospital

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**

PERSONAL INFORMATION

<i>Provider Name & Title</i>	Andres G. Zuleta, M.D.
<i>Palomar Health Facilities</i>	Palomar Medical Center Escondido Palomar Medical Center Poway

SPECIALTIES/BOARD CERTIFICATION

<i>Specialties</i>	Family Practice - Certified 2013
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ORGANIZATIONAL NAME

<i>Name</i>	Benchmark Hospitalists
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EDUCATION/AFFILIATION INFORMATION

<i>Medical Education Information</i>	Medical School American University of the Caribbean, MD From: 08/01/2006 To: 08/01/2010 AUC School of Medicine Netherlands Antilles
<i>Internship Information</i>	
<i>Residency Information</i>	Residency University of South Alabama Medical Center Family Medicine From: 08/06/2011 To: 08/05/2013
<i>Fellowship Information</i>	Fellowship American Academy of Integrative Medicine Integrative Medicine From: 08/05/2016 To: 03/31/2021
<i>Current Affiliation Information</i>	Palomar Health Rehabilitation Institute Whidbey General Hospital Santiam Hospital Kona Community Hospital

**PALOMAR HEALTH
PROVISIONAL APPOINTMENT
December 2023**



Palomar Medical Center- Escondido and Poway
Department of Emergency Medicine
Rules and Regulations

I. Purpose

The purpose of the Department of Emergency Medicine is to provide high-quality emergency medical care to the patient community served by Palomar Health and to provide this service to patients and referring physicians in a prompt, courteous, and cost-effective manner. It shall also be the functions of the Department to:

- 1.1 Supervise all professional services in the Emergency Department and formulate rules, regulations, and policies necessary to assure high standards of emergency care and to assure proper and efficient functioning of the Emergency Department.
- 1.2 Provide oversight for the emergency screening evaluation of all patients who present to the Emergency Departments at Palomar Medical Center -Escondido and Poway without discrimination on the basis of race, religion, gender, sexual orientation, insurance status, color, ancestry, national origin, citizenship, disability, economic status, pre-existing medical condition, or ability to pay for medical services.
- 1.3 Provide quality assurance to the Department and its patients, and investigate and respond to patient/physician complaints as requested.
- 1.4 Monitor the credentials of the physicians practicing in the Department and submit appropriate recommendations regarding privileges.
- 1.5 Counsel and administer disciplinary action to Members of the Department when required, in compliance with all applicable Medical Staff Bylaws and Rules and Regulations.
- 1.6 Provide liaison to all other departments and services of Palomar Health and its Medical Staffs. Specifically, this includes providing a Chairperson who will be responsible for helping to resolve medical and/or administrative issues involving the Medical Staffs and the District administrations.
- 1.7 Oversee continuing medical education in the Department.

II. Membership

- 2.1 Qualifications
 - 2.1.1 Compliance with membership qualifications in accordance with the Medical Staffs Bylaws, Rules and Regulations.
 - 2.1.2 Board certification or eligibility in Emergency Medicine, or training and experience equivalent to board-eligibility, is required for departmental membership as specified in the Palomar Medical Center-Escondido and Poway Staff Bylaws.
- 2.2 Responsibilities
 - 2.2.1 Participation in department business and committees and duties assigned by the Department Chairperson in accordance with the departmental rules and regulations.
 - 2.2.2 Meeting attendance requirements are defined in the Palomar Medical Center Escondido and Poway Staff Bylaws.
 - 2.2.3 Compliance with the Department of Emergency Medicine Rules and Regulations.
 - 2.2.4 Compliance with practice and behavioral expectations as described in the Expectations of Attending Physicians Granted Privileges at Palomar Health and Code of Conduct documents.

III. Privileges

Only emergency physicians who are affiliated with the group holding the active service contract with Palomar Health may apply for privileges.

3.1 Monitoring

- 3.1.1 The Department Chairperson will assign a monitor for all new members. Monitoring shall be performed on at least twenty-five (25) cases.
Monitoring shall include review of the physician's charting as well as concurrent review of procedures performed, when deemed necessary.
- 3.1.2 The monitoring report shall be completed by the monitoring physician and filed in the applicant's credentials file in Medical Staff Services.
- 3.1.3 Monitors must be members of the Department of Emergency Medicine except in the case of certain procedures, where monitoring may be performed by a member of another department, provided that that member has privileges in his or her department to perform the procedure in question.
- 3.1.4 The responsibility of a monitor shall be to observe and report on the performance of the practitioner who is undergoing monitoring. The monitor shall not be responsible for assisting or intervening in the procedure. However, monitors have the authority to interdict procedures or therapy which they deem dangerous or contraindicated, pending evaluation by the Department Chairperson or the Chief of Staff.
- 3.1.5 After monitoring reports have been filed with Medical Staff Services, the Department Chairperson shall review them and determine whether further monitoring is required.

3.2 Admission of Patient from the Emergency Department

- 3.2.1 Transfer of responsibility for patient care will occur only after direct communication between the Emergency Physician and the Admitting Physician.
- 3.2.2 The Emergency Physician and Admitting Physician will collaborate on an official time of transfer of care, level of care (i.e. m/s, tele, ICU), outstanding studies/tests and need for transition orders. Documentation will occur in the medical record.
- 3.2.3 The Emergency Physician DOES NOT have admitting privileges.
- 3.2.4 The Emergency Physician DOES NOT HAVE privileges to write the admission status order on patients being admitted to the institution.
- 3.2.5 The Emergency Physician DOES HAVE the privileges to write transition orders on patients that will be admitted when requested by the admitting physician. Transition orders are not admission orders and represent truncated orders for the inpatient care team, limited to extending care starting in the ED and allowing a patient to be moved from the ED to the inpatient setting prior to admission orders being written by the admitting physician.
- 3.2.6 Transition orders written by the ED physician:
 - 3.2.6.1 Expire in 6 hours or will be discontinued by the admitting physician.
 - 3.2.6.2 Orders will cover basic patient care, not inpatient evaluation, diagnosis or essential treatment.
 - 3.2.6.3 Include an order to call the admitting physician for any clarification of orders, change in medical condition if it arises and at expiration of the transition orders.

- 3.2.7 Boarding: When the patient remains in the Emergency Department after the decision to admit pending an inpatient bed:
- 3.2.7.1 Admitting physician shall be responsible for the care of the patient after they have accepted responsibility for the admission regardless of the patient's physical location in the hospital.
 - 3.2.7.2 Admitting physician will place inpatient orders per med staff rules and regulations.
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 - 3.2.7.5 In the event a boarding patient deteriorates or experiences a critical medical need Emergency Physician will respond while the Admitting Physician is being notified.

3.2.8 All required elements of a procedural sedation in the Emergency Department will be documented in the procedure section of the Emergency Department note. The patient's history and physical exam must be documented in the note before the procedure is performed.

IV. Officers - Chairperson and Chairperson-Elect

- 4.1 The Department Chairperson and Chairperson-Elect shall be elected by the voting members of the Department at least thirty (30) days prior to the end of the year. Terms of office shall be for two (2) years. The Chairperson and Chairperson-Elect may be re-elected.
- 4.2 Both the Department Chairperson and Chairperson-Elect shall be board-certified by either the American Board of Emergency Medicine or American Osteopathic Board of Emergency Medicine.
- 4.3 The Department Chairperson and Chairperson-Elect shall be elected, in accordance with Section 4.1.1 above. These officers shall be subject to recall upon a two-thirds (2/3) vote of the members of the Department, which vote must be approved by the Medical Executive Committees and the Board of Directors. These officers shall perform all duties specified in the Bylaws of Palomar Medical Center -Escondido and Poway as well as any duties specified in these Rules and Regulations.
- 4.4 Duties of the Chairperson shall include those duties specified in the Medical Staff Bylaws, Rules and Regulations of Palomar Medical Center -Escondido and Poway, as well as:
 - 4.4.1 Presiding over the monthly Emergency Medicine department meetings and any Emergency Medicine executive meetings which may be convened.
 - 4.4.2 Assuming and discharging responsibility for the professional direction of the Department under the Medical Staff Bylaws, Rules and Regulations of Palomar Medical Center -Escondido and Poway.
 - 4.4.3 Assisting the Medical Staffs and Hospital Administrations in achieving a high level of patient service with efficiency and economy.
 - 4.4.4 Assisting the Hospital Administrations in maintaining the Department, according to the needs of patients, the hospitals, the Medical Staffs, and the requirements of accrediting bodies.
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- 4.5 The Chairperson-Elect shall serve as an assistant to the Chairperson and shall assume the duties of the Chairperson in his or her absence.

V. Department Meetings

- 5.1 The Department of Emergency Medicine will hold regular monthly meetings in February, April, June, August, and October and Performance Improvement/Peer Review meetings in January, March, May, September, and November. There will be no meetings in July or in December. Written minutes shall be maintained.
- 5.2 Per the Medical Staffs Bylaws, only active category Members may vote on department policies/procedures.

VI. Committees

- 6.1 The Department shall maintain standing committees as it deems necessary.
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VII. Supervision of Residents

- 7.1 An attending physician of the Emergency Medicine staff, or from the admitting staff, will evaluate every patient who has been evaluated by a resident.
- 7.2 The supervising attending physician will enter a personal notation documenting his or her participation in the three (3) key components of Evaluation and Management Services (i.e. history, exam, and medical decision making).
- 7.3 The supervising attending physician will review each resident care plan and counter-sign the medical record of every patient seen by a resident, indicating endorsement of the plan.
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Approved by Department of Emergency Medicine 11/15/2023
Approved by Palomar Medical Center Escondido Executive Committee..... 11/27/2023
Approved by Palomar Medical Center Poway Executive Committee 11/28/2023
Approved by Palomar Health Board of Directors 12/11/2023

Palomar Medical Center- Escondido and Poway
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Approved by Department of Emergency Medicine 11/15/2023
Approved by Palomar Medical Center Escondido Executive Committee..... 11/27/2023
Approved by Palomar Medical Center Poway Executive Committee 11/28/2023
Approved by Palomar Health Board of Directors 12/11/2023

PALOMAR HEALTH

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

Page 1 of 11

Effective From _____ To _____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Medical Staff for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR CARDIOLOGY

To be eligible to apply for core privileges in cardiology, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in internal medicine followed by a fellowship in cardiovascular disease (cardiology).

AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to subspecialty certification in cardiovascular disease (cardiology) by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine with Special Qualifications in Cardiology or another board with equivalent requirements.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate active cardiology practice, reflective of the scope of privileges requested, for at least 50 patients (admissions or consultations) in the past 12 months in an accredited hospital or healthcare facility or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: Monitoring includes all phases of a patient’s hospitalization (admission, management, discharge, etc.) as applicable. At least six (6) inpatient admissions or consults performed in hospital or post discharge will be reviewed retrospectively.

Reappointment Requirements: To be eligible to renew core privileges in Cardiology, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (100 patients – admissions or consultations) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

Approved: Board of Directors ~~02/13/2023~~ 12/11/2023

Removal of CardioMEMS monitoring revision Approved:
Cardiology Cmtt., MAC, and Dept. of Medicine 11/21/2023
MEC: 11/27/2023

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

CARDIOLOGY CORE PRIVILEGES

- Requested** Admit, evaluate, diagnose, treat and provide consultation to adolescent and adult patients presenting with diseases of the heart, lungs, and blood vessels and manage complex cardiac conditions. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.
- Requested** Cardiology Core Privileges including Cardioversion – Requires maintenance of privileges for Administration of Sedation and Analgesia – Deep.

QUALIFICATIONS FOR INVASIVE DIAGNOSTIC CARDIOLOGY

At Palomar Medical Center Poway only cases that are not likely to require an acute coronary intervention (PCI) are to be performed.

To be eligible to apply for core privileges in invasive cardiology, the initial applicant must be granted core privileges in cardiology and meet the following criteria:

Required Previous Experience: Applicants for initial appointment must have demonstrated successful performance, reflective of the scope of privilege requested, of at least 10 diagnostic right and/or left cardiac catheterizations in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited training program which included training in invasive cardiology within the past 12 months. If privileges include Pulmonary Artery Pressure Monitors (CardioMEMS) applicants must provide evidence of at least 2 implants in the past 12 months or completion of a course in Pulmonary Artery Pressure Monitor implantation. **FPPE:** Monitoring required for at least the first three (3) invasive cardiology procedures. ~~If privileges include CardioMEMS, monitoring is also required for the first two (2) CardioMEMS procedures.~~

Reappointment Requirements: To be eligible to renew core privileges in invasive cardiology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience 20 diagnostic cardiac catheterizations with acceptable results, reflective of the scope of privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. If Invasive Diagnostic Cardiology Core Privileges including CardioMEMS are held, evidence of 5 implants for the past 24 months is required or repeat completion of the Pulmonary Artery Pressure Monitoring Implantation course. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

INVASIVE DIAGNOSTIC CARDIOLOGY CORE PRIVILEGES

- Requested** Admit, evaluate, consult treat adolescent and adult patients who present with acute or chronic heart disease and who may require invasive diagnostic procedures. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.
- Requested** Invasive Diagnostic Cardiology Core Privileges including CardioMEMS – Requires evidence of successful completion of didactic course in implant and subsequent management of CardioMEMS or equivalent training as part of a Cardiovascular Fellowship.

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

QUALIFICATIONS FOR INTERVENTIONAL CARDIOLOGY (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)

To be eligible to apply for core privileges in interventional cardiology, the initial applicant must be granted core privileges in cardiology and meet the following criteria:

Successful completion of an ACGME or AOA accredited fellowship in interventional cardiology or equivalent practice experience as documented by activity or operative reports from another facility in accordance with the required previous experience listed below.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate performance, reflective of the scope of privileges requested, of at least 20 percutaneous coronary intervention procedures in the past 12 months or demonstrate successful completion of an ACGME or AOA clinical fellowship, or research in a clinical setting within the past 12 months. **FPPE:** Monitoring required for at least the first three (3) interventional cardiology procedures. If Percutaneous Device Closure for ASD and/or PFO privileges are included, monitoring is required for the first procedure. If privileges include Pulmonary Artery Pressure Monitors (CardioMEMS) applicants must provide evidence of at least 2 implants in the past 12 months or completion of a course in Pulmonary Artery Pressure Monitor implantation.

Reappointment Requirements: To be eligible to renew core privileges in interventional cardiology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience (40 percutaneous coronary intervention procedures) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Maintenance for ASD/PFO closure is required to be at least 6 procedures in a 24 month time frame or repeat completion of didactic course provided by the manufacture. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. If Invasive Diagnostic Cardiology Core Privileges including CardioMEMS are held, evidence of 5 implants for the past 24 months is required or repeat completion of the Pulmonary Artery Pressure Monitoring Implantation course.

INTERVENTIONAL CARDIOLOGY CORE PRIVILEGES (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)

Requested Admit, evaluate, treat and provide consultation to adolescent and adult patients with acute and chronic coronary artery disease, acute coronary syndromes and valvular heart disease, including but not limited to chronic ischemic heart disease, acute ischemic syndromes, and valvular heart disease and technical procedures and medications to treat abnormalities that impair the function of the heart. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

Requested Interventional Cardiology Core Privileges including Percutaneous Device Closure for ASD and/or PFO – Requires fellowship training in interventional cardiology completed within the past 12 months with documentation from the program director that training included ASD/PFO closure, OR Completion of a didactic program or training provided by the device manufacturer and/or a qualified interventional cardiologist.

Monitoring required for at least the first ASD and or PFO. **Maintenance of Privilege:** Demonstrated current competency and evidence of the review and interpretation of at least 10 cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

CHECK HERE TO REQUEST INTERNAL MEDICINE PRIVILEGES FORM.

Requested

CHECK HERE TO REQUEST SKILLED NURSING FACILITY FORM.

Requested The Villas at Poway

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

CARDIAC COMPUTED TOMOGRAPHY (CT) AND CARDIAC COMPUTED TOMOGRAPHY ANGIOGRAM (CTA)

Criteria: Physician must be board certified or eligible in cardiovascular disease (cardiology). In addition, practitioner must provide documentation of Level II certification within the past 24 months or documentation of 5 cases in the last 12 months. **FPPE:** Monitoring required for at least the first three (3) CT or CTA procedures. **Maintenance of Privilege:** Demonstrated current competency and evidence of the review and interpretation of at least 10 cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes and current board certification eligibility.

Requested

TRANSESOPHAGEAL ECHOCARDIOGRAPHY (TEE)

Criteria: Successful completion of an accredited fellowship in cardiology that included education and direct experience in transthoracic echocardiography and TEE with performance and interpretation of at least 20 supervised TEE cases. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 10 TEE procedures in the past 12 months. **FPPE:** Monitoring required for at least the first three (3) TEE procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 TEE procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes and/or repeated successful completion of an accredited course followed by 3 monitored procedures.

Requested

IMPLANTATION OF CARDIAC ELECTRONIC DEVICES (CIED) INCLUDING SINGLE AND DUAL CHAMBER PACEMAKERS

Criteria: Successful completion of an ACGME or AOA accredited fellowship in cardiology with evidence that training included 25 implants. If unable to verify training, the applicant must provide documentation of 25 pacemakers and 10 ICDs in the past 5 years. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of 5 CIED or ICD procedures in the past 12 months. **FPPE:** Monitoring required for at least the first three (3) CIED procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the implantation of at least 10 CIED procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

IMPLANTATION OF BI-VENTRICULAR PACEMAKERS

Criteria: Successful completion of an ACGME or AOA accredited fellowship in cardiology with evidence that training included 25 implants. If unable to verify training, the applicant must provide documentation of 25 pacemakers and 10 ICDs in the past 5 years. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of 5 Bi-Ventricular Pacemakers in the past 12 months.

FPPE: Monitoring required for at least the first three (3) procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the implantation of at least 10 Bi-Ventricular Pacemakers in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

IMPLANTATION OF CARDIAC DEFIBRILATORS (ICD)

Criteria: All requirements for implantation of single and dual chamber pacemakers and successful completion of an ACGME or AOA accredited fellowship in cardiology followed by completion of an accredited training program in CCEP or successful completion of an endorsed CME program specific to ICD. If unable to verify training, the applicant must provide evidence of the performance of 25 single and dual chamber pacemakers and 10 ICDs in the past 5 years. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of 5 ICD procedures in the past 12 months. **FPPE:** Monitoring required for at least the first three (3) ICD implantation procedures. **Maintenance of Privilege:**

Demonstrated current competence and evidence of the implantation of at least 10 ICD procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

ELECTROPHYSIOLOGY WITH ABLATION (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY) INCLUDES THE ABILITY TO PERFORM DIAGNOSTIC CARDIAC CATHETERIZATION AS STAND ALONE PROCEDURE WITHOUT HAVING INVASIVE DIAGNOSTIC CORE PRIVILEGES.

Criteria: All requirements for Core Cardiology privileges and successful completion of an ACGME or AOA accredited fellowship in Clinical Cardiac Electrophysiology and achievement of Subspecialty Certification in Clinical Cardiac Electrophysiology or be actively engaged in the certification process through the American Board of Internal Medicine. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of twenty (20) Electrophysiology Studies/Radiofrequency Catheter Ablations in the past 12 months. **FPPE:** Monitoring required for at least the first one (1) EP/RFA procedures. The diagnostic cath portion can be fulfilled by monitoring the first one (1) case of diagnostic catheterization.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 20 EP/RFA procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

ELECTROPHYSIOLOGY WITH ATRIAL FIBRILLATION ABLATION (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)

Criteria: All requirements for Core Cardiology privileges and successful completion of an ACGME or AOA accredited fellowship in Clinical Cardiac Electrophysiology that included at least 40 Electrophysiology with Atrial Fibrillation Ablations and achievement of Subspecialty Certification in Clinical Cardiac Electrophysiology or be actively engaged in the certification process through the American Board of Internal Medicine. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of twenty (20) left sided and transeptal procedures in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) left-sided/transeptal procedures to include one (1) afib and one (1) other procedure. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 40 left-sided/transeptal procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

Requested

NON INVASIVE PERIPHERAL VASCULAR PROCEDURES TO INCLUDE CAROTID ARTERY DUPLEX SCANNING, CEREBRAL VASCULAR STUDIES – OPG, PERIPHERAL ARTERY TESTING WITH AND WITHOUT EXERCISE, PERIPHERAL VENOUS TESTING

Criteria: Successful completion of an ACGME or AOA post graduate training program that included training in non invasive peripheral vascular procedures or completion of a hands-on CME of (duration at least 12 hours). Training must include at least 25 readings with a trained expert.

Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 50 non invasive peripheral vascular procedures reflective of the scope of privileges requested in the past 12 months or completion of training in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 non invasive peripheral vascular procedures reflective of the scope of privileges requested in the past 24 months based on results of ongoing professional practice evaluation and outcomes. Practitioners who do not meet the minimum number of procedures for maintenance of privileges may provide evidence of ten (10) hours of continuing medical education specific to non-invasive vascular testing obtained during the past 24 months.

Requested

CATHETER BASED PERIPHERAL VASCULAR INTERVENTIONS

Practitioners who perform angioplasty of the peripheral vessels should have a thorough understanding of the clinical manifestations and natural history of peripheral vascular and renovascular occlusive disease. They should be competent interpreting diagnostic peripheral angiographic examinations, performing arteriographic procedures via percutaneous approaches, and recognizing and managing initial complications specific to peripheral angioplasty. They should be knowledgeable in the alternative therapies that are available including their risks and benefits.

The complex nature of angioplasty requires further training beyond that necessary for routine diagnostic angiography. To assure the experience and competence needed to perform successful angioplasty, the physician should meet the following minimal criteria:

Criteria: Successful completion of an ACGME or AOA accredited-training program in cardiovascular disease and the practitioner needs to document one of the following:

- 1. Post-residency training in a formal program specifically in catheter-based interventions, which is of at least 12 months in duration and includes participation in at least 50 peripheral interventional cases plus 100 diagnostic cases.

OR

- 2. Performance of at least 25 diagnostic peripheral angiograms as primary or first assistant and no less than 25 peripheral interventional procedures.

Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 25 catheter based peripheral vascular intervention cases in the past 12 months and completion of training in the past 24 months. **FPPE:** Monitoring required for at least first three (3) catheter based peripheral vascular interventional procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 catheter based peripheral vascular intervention cases in the past 24 months based on the results of ongoing professional practice evaluation and outcomes or a repeat didactic training course within the past 12 months.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

AORTIC ENDOGRAFT REPAIR (MUST MEET ALL CRITERIA FOR CATHETER BASED PERIPHERAL VASCULAR INTERVENTIONS)

Criteria: The practitioner needs to meet the qualifications for catheter-based peripheral vascular interventions and meet the following criteria:

- 1. One (1) or Two (2) years post-residency training in a formal, appropriately organized, and supervised training program specifically in catheter-based interventions which includes participation in at least 15 aortic endografting procedures,

OR

- 2. Completion of didactic training as recommended by a manufacturer, and performance of 15 cases under the direct supervision of a practitioner with aortic endografting privileges.

Required Previous Experience: Demonstrated current competence and documentation of experience in at least 5 aortic endografting procedures in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) aortic endografting procedures by a physician with equivalent privileges.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 5 aortic endografting procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes or a repeat didactic training course within the past 12 months.

Requested

CAROTID STENTING

Criteria: The practitioner needs to meet the qualifications for catheter based peripheral vascular interventions and meet the following criteria:

- 1. One (1) or Two (2) years post-residency training in a formal, appropriately organized, and supervised training program specifically in catheter-based interventions, which includes participation in at least 10 carotid stent procedures and 20 diagnostic cervicocerebral angiograms and/or interpretation of carotid 20 CT angiograms.

OR

- 2. Performance of no less than 10 carotid stent procedures as primary or first assist.

Required Previous Experience: As stated above. **FPPE:** Monitoring required for at least the first two (2) carotid stenting procedures by a physician with equivalent privileges.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 20 carotid artery stenting procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes or completion of didactic carotid artery stenting course followed by 2 monitored procedures.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

TRANSCATHETER AORTIC VALVE REPLACEMENT

Criteria: The practitioner needs to meet the qualifications for Interventional Cardiology Core Privileges and the following:

1. Successful completion of a residency or fellowship training program undertaken in a facility with a CMS approved TAVR program, and
2. Successful completion of a didactic, approved Transcatheter Aortic Valve Repair training course, and
3. Having scrubbed at least as a primary assistant on ten (10) TAVR cases in the past two years.

OR

1. Successful completion of a didactic, approved Transcatheter Aortic Valve Repair training course and the required previous experience below.

Required Previous Experience: Demonstrated current competence and evidence of the performance of at least ten (10) TAVR procedures as assistant or primary operator in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) TAVR procedures by a physician with equivalent privileges.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least ten (20) TAVR procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. If minimum numbers are not met, then evidence of a didactic training course within the past 12 months must be submitted and 2 monitored procedures.

Requested

TRANSCATHETER MITRAL VALVE REPLACEMENT/REPAIR

Criteria: The practitioner needs to meet the qualifications for Interventional Cardiology Core Privileges and the following:

1. Successful completion of a residency or fellowship training program undertaken in a facility with a CMS approved TMVR program, and
2. Successful completion of a didactic, approved Transcatheter Mitral Valve Repair training course, and
3. Having scrubbed at least as a primary assistant on ten (10) TMVR cases in the past two years.

OR

1. Successful completion of a didactic, approved Transcatheter Mitral Valve Repair training course and the required previous experience below.

Required Previous Experience: Demonstrated current competence and evidence of the performance or first assist of at least five (5) TMVR procedures in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) TMVR procedures by a physician with equivalent privileges. **Maintenance of Privilege:**

Demonstrated current competence and evidence of the performance of at least five (10) TMVR procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. If minimum numbers are not met, then evidence of a didactic training course within the past 12 months must be submitted and 2 monitored procedures.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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LEFT ATRIAL APPENDAGE CLOSURE THERAPY

Criteria: The practitioner must be an Interventional Cardiologist, Electrophysiologist, or Cardiovascular Surgeon (they may jointly participate in intra-procedural aspects of the implant or perform the implant procedure individually) and the following:

1. Performance or assist of at least 10 LAAC procedures performed over the past 12 month period.
2. Successful completion of training prescribed by the manufacturer on the safe and effective use of the device(s)

FPPE: Monitoring required for at least the first three (3) LAA procedures by a physician with equivalent privileges. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least ten (20) LAAC procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. If minimum numbers are not met, then evidence of a didactic training course within the past 12 months must be submitted and 2 monitored procedures.

Requested

ADMINISTRATION OF SEDATION AND ANALGESIA

Requested See Hospital Policy for Sedation and Analgesia by Non-Anesthesiologists.

USE OF FLUOROSCOPY

Requested Requires maintenance of a valid x-ray supervisor and operator's permit for fluoroscopy.

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

Cardiology

- Ambulatory electrocardiology monitor interpretation
- EKG interpretation
- Infusion and management of thrombolytic agents and antithrombolytic agents
- Insertion and management of central venous catheters, pulmonary artery catheters, and arterial lines
- Loop recorders
- Non-invasive hemodynamic monitoring
- Perform history and physical exam
- Pericardiocentesis
- Placement of temporary transvenous pacemaker
- Stress testing
- Tilt table testing
- Transcutaneous external pacemaker placement
- Transthoracic 2D echocardiography, Doppler, and color flow

Invasive Diagnostic Cardiology

- Coronary arteriography
- Diagnostic right and left heart cardiac catheterization
- Insertion and maintenance of intraortic balloon counter pulsation device
- Insertion and maintenance of Left Ventricular Assist device (Impella)
- Interpretation of coronary arteriograms, ventriculography and hemodynamics
- Intracoronary infusion of pharmacological agents including thrombolytics

Interventional Cardiology (Not offered at Palomar Medical Center Poway)

- Intravascular and intracoronary foreign body retrieval
- Intracoronary mechanical thrombectomy
- Intracoronary stents
- Intravascular Ultrasound (IVUS) of coronaries
- Management of mechanical complications of percutaneous intervention
- Perform diagnostic angiography or percutaneous coronary intervention
- Performance of balloon angioplasty, stents, and other commonly used interventional devices
- Rotational Atherectomy (Rotablator)
- Use of intracoronary Doppler and flow wire

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

PALOMAR HEALTH

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

Applicant: Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Medical Staff for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR CARDIOLOGY

To be eligible to apply for core privileges in cardiology, the initial applicant must meet the following criteria:

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in internal medicine followed by a fellowship in cardiovascular disease (cardiology).

AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to subspecialty certification in cardiovascular disease (cardiology) by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine with Special Qualifications in Cardiology or another board with equivalent requirements.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate active cardiology practice, reflective of the scope of privileges requested, for at least 50 patients (admissions or consultations) in the past 12 months in an accredited hospital or healthcare facility or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Focused Professional Practice Evaluation (FPPE) / Monitoring guidelines: Monitoring includes all phases of a patient’s hospitalization (admission, management, discharge, etc.) as applicable. At least six (6) inpatient admissions or consults performed in hospital or post discharge will be reviewed retrospectively.

Reappointment Requirements: To be eligible to renew core privileges in Cardiology, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience (100 patients – admissions or consultations) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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CARDIOLOGY CORE PRIVILEGES

- Requested** Admit, evaluate, diagnose, treat and provide consultation to adolescent and adult patients presenting with diseases of the heart, lungs, and blood vessels and manage complex cardiac conditions. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.
- Requested** Cardiology Core Privileges including Cardioversion – Requires maintenance of privileges for Administration of Sedation and Analgesia – Deep.

QUALIFICATIONS FOR INVASIVE DIAGNOSTIC CARDIOLOGY

At Palomar Medical Center Poway only cases that are not likely to require an acute coronary intervention (PCI) are to be performed.

To be eligible to apply for core privileges in invasive cardiology, the initial applicant must be granted core privileges in cardiology and meet the following criteria:

Required Previous Experience: Applicants for initial appointment must have demonstrated successful performance, reflective of the scope of privilege requested, of at least 10 diagnostic right and/or left cardiac catheterizations in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited training program which included training in invasive cardiology within the past 12 months. If privileges include Pulmonary Artery Pressure Monitors (CardioMEMS) applicants must provide evidence of at least 2 implants in the past 12 months or completion of a course in Pulmonary Artery Pressure Monitor implantation. **FPPE:** Monitoring required for at least the first three (3) invasive cardiology procedures.

Reappointment Requirements: To be eligible to renew core privileges in invasive cardiology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience 20 diagnostic cardiac catheterizations with acceptable results, reflective of the scope of privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes. If Invasive Diagnostic Cardiology Core Privileges including CardioMEMS are held, evidence of 5 implants for the past 24 months is required or repeat completion of the Pulmonary Artery Pressure Monitoring Implantation course. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

INVASIVE DIAGNOSTIC CARDIOLOGY CORE PRIVILEGES

- Requested** Admit, evaluate, consult treat adolescent and adult patients who present with acute or chronic heart disease and who may require invasive diagnostic procedures. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.
- Requested** Invasive Diagnostic Cardiology Core Privileges including CardioMEMS – Requires evidence of successful completion of didactic course in implant and subsequent management of CardioMEMS or equivalent training as part of a Cardiovascular Fellowship.

CARDIOLOGY CLINICAL PRIVILEGES

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QUALIFICATIONS FOR INTERVENTIONAL CARDIOLOGY (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)

To be eligible to apply for core privileges in interventional cardiology, the initial applicant must be granted core privileges in cardiology and meet the following criteria:

Successful completion of an ACGME or AOA accredited fellowship in interventional cardiology or equivalent practice experience as documented by activity or operative reports from another facility in accordance with the required previous experience listed below.

Required Previous Experience: Applicants for initial appointment must be able to demonstrate performance, reflective of the scope of privileges requested, of at least 20 percutaneous coronary intervention procedures in the past 12 months or demonstrate successful completion of an ACGME or AOA clinical fellowship, or research in a clinical setting within the past 12 months. **FPPE:** Monitoring required for at least the first three (3) interventional cardiology procedures. If Percutaneous Device Closure for ASD and/or PFO privileges are included, monitoring is required for the first procedure. If privileges include Pulmonary Artery Pressure Monitors (CardioMEMS) applicants must provide evidence of at least 2 implants in the past 12 months or completion of a course in Pulmonary Artery Pressure Monitor implantation.

Reappointment Requirements: To be eligible to renew core privileges in interventional cardiology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience (40 percutaneous coronary intervention procedures) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Maintenance for ASD/PFO closure is required to be at least 6 procedures in a 24 month time frame or repeat completion of didactic course provided by the manufacture. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. If Invasive Diagnostic Cardiology Core Privileges including CardioMEMS are held, evidence of 5 implants for the past 24 months is required or repeat completion of the Pulmonary Artery Pressure Monitoring Implantation course.

INTERVENTIONAL CARDIOLOGY CORE PRIVILEGES (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)

Requested Admit, evaluate, treat and provide consultation to adolescent and adult patients with acute and chronic coronary artery disease, acute coronary syndromes and valvular heart disease, including but not limited to chronic ischemic heart disease, acute ischemic syndromes, and valvular heart disease and technical procedures and medications to treat abnormalities that impair the function of the heart. May provide care to patients in the intensive care setting as well as other hospital settings in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

Requested Interventional Cardiology Core Privileges including Percutaneous Device Closure for ASD and/or PFO – Requires fellowship training in interventional cardiology completed within the past 12 months with documentation from the program director that training included ASD/PFO closure, OR Completion of a didactic program or training provided by the device manufacturer and/or a qualified interventional cardiologist.

Monitoring required for at least the first ASD and or PFO. **Maintenance of Privilege:** Demonstrated current competency and evidence of the review and interpretation of at least 10 cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

CARDIOLOGY CLINICAL PRIVILEGES

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CHECK HERE TO REQUEST INTERNAL MEDICINE PRIVILEGES FORM.

Requested

CHECK HERE TO REQUEST SKILLED NURSING FACILITY FORM.

Requested The Villas at Poway

SPECIAL NON-CORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, Non-Core Privileges are requested individually in addition to requesting the Core. Each individual requesting Non-Core Privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

CARDIAC COMPUTED TOMOGRAPHY (CT) AND CARDIAC COMPUTED TOMOGRAPHY ANGIOGRAM (CTA)

Criteria: Physician must be board certified or eligible in cardiovascular disease (cardiology). In addition, practitioner must provide documentation of Level II certification within the past 24 months or documentation of 5 cases in the last 12 months. **FPPE:** Monitoring required for at least the first three (3) CT or CTA procedures. **Maintenance of Privilege:** Demonstrated current competency and evidence of the review and interpretation of at least 10 cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes and current board certification eligibility.

Requested

TRANSESOPHAGEAL ECHOCARDIOGRAPHY (TEE)

Criteria: Successful completion of an accredited fellowship in cardiology that included education and direct experience in transthoracic echocardiography and TEE with performance and interpretation of at least 20 supervised TEE cases. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 10 TEE procedures in the past 12 months. **FPPE:** Monitoring required for at least the first three (3) TEE procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 TEE procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes and/or repeated successful completion of an accredited course followed by 3 monitored procedures.

Requested

IMPLANTATION OF CARDIAC ELECTRONIC DEVICES (CIED) INCLUDING SINGLE AND DUAL CHAMBER PACEMAKERS

Criteria: Successful completion of an ACGME or AOA accredited fellowship in cardiology with evidence that training included 25 implants. If unable to verify training, the applicant must provide documentation of 25 pacemakers and 10 ICDs in the past 5 years. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of 5 CIED or ICD procedures in the past 12 months. **FPPE:** Monitoring required for at least the first three (3) CIED procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the implantation of at least 10 CIED procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

Name: _____

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Effective From _____ To _____

IMPLANTATION OF BI-VENTRICULAR PACEMAKERS

Criteria: Successful completion of an ACGME or AOA accredited fellowship in cardiology with evidence that training included 25 implants. If unable to verify training, the applicant must provide documentation of 25 pacemakers and 10 ICDs in the past 5 years. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of 5 Bi-Ventricular Pacemakers in the past 12 months.

FPPE: Monitoring required for at least the first three (3) procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the implantation of at least 10 Bi-Ventricular Pacemakers in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

IMPLANTATION OF CARDIAC DEFIBRILATORS (ICD)

Criteria: All requirements for implantation of single and dual chamber pacemakers and successful completion of an ACGME or AOA accredited fellowship in cardiology followed by completion of an accredited training program in CCEP or successful completion of an endorsed CME program specific to ICD. If unable to verify training, the applicant must provide evidence of the performance of 25 single and dual chamber pacemakers and 10 ICDs in the past 5 years. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of 5 ICD procedures in the past 12 months. **FPPE:** Monitoring required for at least the first three (3) ICD implantation procedures. **Maintenance of Privilege:**

Demonstrated current competence and evidence of the implantation of at least 10 ICD procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

ELECTROPHYSIOLOGY WITH ABLATION (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY) INCLUDES THE ABILITY TO PERFORM DIAGNOSTIC CARDIAC CATHETERIZATION AS STAND ALONE PROCEDURE WITHOUT HAVING INVASIVE DIAGNOSTIC CORE PRIVILEGES.

Criteria: All requirements for Core Cardiology privileges and successful completion of an ACGME or AOA accredited fellowship in Clinical Cardiac Electrophysiology and achievement of Subspecialty Certification in Clinical Cardiac Electrophysiology or be actively engaged in the certification process through the American Board of Internal Medicine. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of twenty (20) Electrophysiology Studies/Radiofrequency Catheter Ablations in the past 12 months. **FPPE:** Monitoring required for at least the first one (1) EP/RFA procedures. The diagnostic cath portion can be fulfilled by monitoring the first one (1) case of diagnostic catheterization.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 20 EP/RFA procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

ELECTROPHYSIOLOGY WITH ATRIAL FIBRILLATION ABLATION (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)

Criteria: All requirements for Core Cardiology privileges and successful completion of an ACGME or AOA accredited fellowship in Clinical Cardiac Electrophysiology that included at least 40 Electrophysiology with Atrial Fibrillation Ablations and achievement of Subspecialty Certification in Clinical Cardiac Electrophysiology or be actively engaged in the certification process through the American Board of Internal Medicine. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of twenty (20) left sided and transeptal procedures in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) left-sided/transeptal procedures to include one (1) afib and one (1) other procedure. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 40 left-sided/transeptal procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

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NON INVASIVE PERIPHERAL VASCULAR PROCEDURES TO INCLUDE CAROTID ARTERY DUPLEX SCANNING, CEREBRAL VASCULAR STUDIES – OPG, PERIPHERAL ARTERY TESTING WITH AND WITHOUT EXERCISE, PERIPHERAL VENOUS TESTING

Criteria: Successful completion of an ACGME or AOA post graduate training program that included training in non invasive peripheral vascular procedures or completion of a hands-on CME of (duration at least 12 hours). Training must include at least 25 readings with a trained expert.

Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 50 non invasive peripheral vascular procedures reflective of the scope of privileges requested in the past 12 months or completion of training in the past 12 months. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 non invasive peripheral vascular procedures reflective of the scope of privileges requested in the past 24 months based on results of ongoing professional practice evaluation and outcomes. Practitioners who do not meet the minimum number of procedures for maintenance of privileges may provide evidence of ten (10) hours of continuing medical education specific to non-invasive vascular testing obtained during the past 24 months.

Requested

CATHETER BASED PERIPHERAL VASCULAR INTERVENTIONS

Practitioners who perform angioplasty of the peripheral vessels should have a thorough understanding of the clinical manifestations and natural history of peripheral vascular and renovascular occlusive disease. They should be competent interpreting diagnostic peripheral angiographic examinations, performing arteriographic procedures via percutaneous approaches, and recognizing and managing initial complications specific to peripheral angioplasty. They should be knowledgeable in the alternative therapies that are available including their risks and benefits.

The complex nature of angioplasty requires further training beyond that necessary for routine diagnostic angiography. To assure the experience and competence needed to perform successful angioplasty, the physician should meet the following minimal criteria:

Criteria: Successful completion of an ACGME or AOA accredited-training program in cardiovascular disease and the practitioner needs to document one of the following:

- 1. Post-residency training in a formal program specifically in catheter-based interventions, which is of at least 12 months in duration and includes participation in at least 50 peripheral interventional cases plus 100 diagnostic cases.

OR

- 2. Performance of at least 25 diagnostic peripheral angiograms as primary or first assistant and no less than 25 peripheral interventional procedures.

Required Previous Experience: Demonstrated current competence and evidence of the performance of at least 25 catheter based peripheral vascular intervention cases in the past 12 months and completion of training in the past 24 months. **FPPE:** Monitoring required for at least first three (3) catheter based peripheral vascular interventional procedures. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 catheter based peripheral vascular intervention cases in the past 24 months based on the results of ongoing professional practice evaluation and outcomes or a repeat didactic training course within the past 12 months.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

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AORTIC ENDOGRAFT REPAIR (MUST MEET ALL CRITERIA FOR CATHETER BASED PERIPHERAL VASCULAR INTERVENTIONS)

Criteria: The practitioner needs to meet the qualifications for catheter-based peripheral vascular interventions and meet the following criteria:

1. One (1) or Two (2) years post-residency training in a formal, appropriately organized, and supervised training program specifically in catheter-based interventions which includes participation in at least 15 aortic endografting procedures,

OR

2. Completion of didactic training as recommended by a manufacturer, and performance of 15 cases under the direct supervision of a practitioner with aortic endografting privileges.

Required Previous Experience: Demonstrated current competence and documentation of experience in at least 5 aortic endografting procedures in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) aortic endografting procedures by a physician with equivalent privileges.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 5 aortic endografting procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes or a repeat didactic training course within the past 12 months.

Requested

CAROTID STENTING

Criteria: The practitioner needs to meet the qualifications for catheter based peripheral vascular interventions and meet the following criteria:

1. One (1) or Two (2) years post-residency training in a formal, appropriately organized, and supervised training program specifically in catheter-based interventions, which includes participation in at least 10 carotid stent procedures and 20 diagnostic cervicocerebral angiograms and/or interpretation of carotid 20 CT angiograms.

OR

2. Performance of no less than 10 carotid stent procedures as primary or first assist.

Required Previous Experience: As stated above. **FPPE:** Monitoring required for at least the first two (2) carotid stenting procedures by a physician with equivalent privileges.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least 20 carotid artery stenting procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes or completion of didactic carotid artery stenting course followed by 2 monitored procedures.

Requested

CARDIOLOGY CLINICAL PRIVILEGES

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TRANSCATHETER AORTIC VALVE REPLACEMENT

Criteria: The practitioner needs to meet the qualifications for Interventional Cardiology Core Privileges and the following:

1. Successful completion of a residency or fellowship training program undertaken in a facility with a CMS approved TAVR program, and
2. Successful completion of a didactic, approved Transcatheter Aortic Valve Repair training course, and
3. Having scrubbed at least as a primary assistant on ten (10) TAVR cases in the past two years.

OR

1. Successful completion of a didactic, approved Transcatheter Aortic Valve Repair training course and the required previous experience below.

Required Previous Experience: Demonstrated current competence and evidence of the performance of at least ten (10) TAVR procedures as assistant or primary operator in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) TAVR procedures by a physician with equivalent privileges.

Maintenance of Privilege: Demonstrated current competence and evidence of the performance of at least ten (20) TAVR procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. If minimum numbers are not met, then evidence of a didactic training course within the past 12 months must be submitted and 2 monitored procedures.

Requested

TRANSCATHETER MITRAL VALVE REPLACEMENT/REPAIR

Criteria: The practitioner needs to meet the qualifications for Interventional Cardiology Core Privileges and the following:

1. Successful completion of a residency or fellowship training program undertaken in a facility with a CMS approved TMVR program, and
2. Successful completion of a didactic, approved Transcatheter Mitral Valve Repair training course, and
3. Having scrubbed at least as a primary assistant on ten (10) TMVR cases in the past two years.

OR

1. Successful completion of a didactic, approved Transcatheter Mitral Valve Repair training course and the required previous experience below.

Required Previous Experience: Demonstrated current competence and evidence of the performance or first assist of at least five (5) TMVR procedures in the past 12 months. **FPPE:** Monitoring required for at least the first two (2) TMVR procedures by a physician with equivalent privileges. **Maintenance of Privilege:**

Demonstrated current competence and evidence of the performance of at least five (10) TMVR procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. If minimum numbers are not met, then evidence of a didactic training course within the past 12 months must be submitted and 2 monitored procedures.

Requested

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LEFT ATRIAL APPENDAGE CLOSURE THERAPY

Criteria: The practitioner must be an Interventional Cardiologist, Electrophysiologist, or Cardiovascular Surgeon (they may jointly participate in intra-procedural aspects of the implant or perform the implant procedure individually) and the following:

1. Performance or assist of at least 10 LAAC procedures performed over the past 12 month period.
2. Successful completion of training prescribed by the manufacturer on the safe and effective use of the device(s)

FPPE: Monitoring required for at least the first three (3) LAA procedures by a physician with equivalent privileges. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least ten (20) LAAC procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes. If minimum numbers are not met, then evidence of a didactic training course within the past 12 months must be submitted and 2 monitored procedures.

Requested

ADMINISTRATION OF SEDATION AND ANALGESIA

Requested See Hospital Policy for Sedation and Analgesia by Non-Anesthesiologists.

USE OF FLUOROSCOPY

Requested Requires maintenance of a valid x-ray supervisor and operator's permit for fluoroscopy.

CARDIOLOGY CLINICAL PRIVILEGES

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CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, initial, and date.

Cardiology

- Ambulatory electrocardiology monitor interpretation
- EKG interpretation
- Infusion and management of thrombolytic agents and antithrombolytic agents
- Insertion and management of central venous catheters, pulmonary artery catheters, and arterial lines
- Loop recorders
- Non-invasive hemodynamic monitoring
- Perform history and physical exam
- Pericardiocentesis
- Placement of temporary transvenous pacemaker
- Stress testing
- Tilt table testing
- Transcutaneous external pacemaker placement
- Transthoracic 2D echocardiography, Doppler, and color flow

Invasive Diagnostic Cardiology

- Coronary arteriography
- Diagnostic right and left heart cardiac catheterization
- Insertion and maintenance of intraortic balloon counter pulsation device
- Insertion and maintenance of Left Ventricular Assist device (Impella)
- Interpretation of coronary arteriograms, ventriculography and hemodynamics
- Intracoronary infusion of pharmacological agents including thrombolytics

Interventional Cardiology (Not offered at Palomar Medical Center Poway)

- Intravascular and intracoronary foreign body retrieval
- Intracoronary mechanical thrombectomy
- Intracoronary stents
- Intravascular Ultrasound (IVUS) of coronaries
- Management of mechanical complications of percutaneous intervention
- Perform diagnostic angiography or percutaneous coronary intervention
- Performance of balloon angioplasty, stents, and other commonly used interventional devices
- Rotational Atherectomy (Rotablator)
- Use of intracoronary Doppler and flow wire

CARDIOLOGY CLINICAL PRIVILEGES

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ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at Palomar Health, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signed _____

Date _____

ADDENDUM C

RESOLUTION NO. 12.11.23(01)-18

**RESOLUTION OF THE BOARD OF DIRECTORS OF PALOMAR HEALTH
ESTABLISHING REGULAR BOARD MEETINGS
FOR CALENDAR YEAR 2024**

WHEREAS, Palomar Health is required, pursuant to Section 54954 of the California Government Code and Section 5.2.2 of the Palomar Health Bylaws, to pass a resolution adopting the time, place and location of the regular board meetings:

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of Palomar Health that the following schedule of regular meetings will apply for Calendar Year 2024:

2024 BOARD MEETING SCHEDULE

January 8	July 8
February 12	August 12
March 11	September 9
April 8	October 14
May 13	November 11
June 10	December 9

Pursuant to Resolution 01.09.23(02)-02 that meetings be held in-person, the First Floor Conference Center at Palomar Medical Center Escondido, located at 2185 Citracado Parkway in Escondido, has been reserved for in-person meetings unless otherwise noticed. Each meeting will begin at 6:30 p.m.

PASSED AND ADOPTED at a regular meeting of the Board of Directors of Palomar Health held on December 11, 2023 by the following vote:

AYES:

NAYS:

ABSENT:

ABSTAINING:

DATED: December 11, 2023

APPROVED:

Linda Greer, RN, Chairperson
Board of Directors
Palomar Health

ATTESTED:

Terry Corrales, RN, Secretary
Board of Directors
Palomar Health

ADDENDUM D

Memorandum

To: Palomar Health Board of Directors

From: Terry Corrales, Chair, Board Human Resources Committee

Date: December 11, 2023

Subject: Board Human Resources Committee Meeting – November 8, 2023

BOARD MEMBER ATTENDANCE:

Directors Corrales, Pacheco and Barry

STANDING ITEMS:

Human Resources General Update – deferred to February 2024

ACTION ITEMS:

- **Board Human Resources Committee Minutes – August 9, 2023:** The minutes were approved as presented
- **Board Human Resources Committee 2024 Meeting Calendar:** The dates indicated approved as presented with request to push meeting time to 2:30pm

Memorandum

To: Board of Directors
From: Mike Pacheco, Chair, Board Strategic and Facilities Planning Committee
Date: December 11, 2023
Board Strategic and Facilities Planning Committee
Re: November 30, 2023, Meeting Summary

BOARD MEMBER ATTENDANCE: Directors Pacheco, Barry & Griffith

INFORMATION ITEMS

- **Construction Project Update:** Reviewed a presentation providing updates on the status of projects across the District.

ACTION ITEM

- **Minutes, Tuesday, September 26, 2023, Meeting:** Reviewed and approved the draft minutes from the Tuesday, September 26, 2023, Board Strategic & Facilities Planning Committee meeting.