

Levy Anderson, City Solicitor - Law Department - 1610 MSB

September 7, 1971

Anthony J. Durkin, Administrative Services Director - Department of Records - 158 CH

BY-LAWS AND RULES OF THE MEDICAL STAFF OF THE PHILADELPHIA GENERAL HOSPITAL

The subject By-laws and Rules promulgated by the Board of Directors of Philadelphia General Hospital were received in the Department of Records on August 9, 1971.

Inasmuch as there were no requests for hearings these By-laws and Rules became effective September 5, 1971.

cc: E. Zeger - Adm. Serv. Director - PGH

BYLAWS
AND
RULES
OF
THE MEDICAL STAFF OF THE PHILADELPHIA GENERAL HOSPITAL
ADOPTED _____

Preamble

Recognizing that the medical staff shares the responsibility for the quality of medical care in the hospital and must accept and assume this responsibility, subject to the ultimate authority of the Board of Trustees, and that the best interests of the patients are protected by concerted effort, the physicians practicing in Philadelphia General Hospital hereby organize themselves in conformity with the Bylaws and Rules hereinafter stated and in accordance with the Rules of the Board of Trustees relating to the medical staff of the Philadelphia General Hospital.

For the purpose of these bylaws the word medical staff shall be interpreted to include all physicians and dentists who are duly appointed to their positions by the Board of Trustees of the Philadelphia General Hospital.

ARTICLE I - NAME

The name of this organization shall be "Medical Staff of Philadelphia General Hospital".

ARTICLE II - PURPOSE

The purpose of this organization shall be:

1. To insure that all patients admitted to the hospital or treated in the outpatient department receive the best possible care;
2. To provide a means whereby problems of combined medical-administrative nature may be discussed by the medical staff with the Board of Trustees and Hospital Administration;
3. To initiate and maintain Bylaws and rules for government of the medical staff;
4. To support and maintain an educational program to meet accepted standards of professional training;
5. To promote and carry on scientific research for the improvement of patient care and the extension of medical knowledge;
6. To participate in programs and activities designed to promote the general health of the community.

ARTICLE III - MEMBERSHIP

SECTION 1. QUALIFICATIONS

The applicant for membership on the medical staff shall be a graduate of a Medical, Dental or Osteopathic School approved by the American Medical Association and the Pennsylvania State Board of Medical Education and Licensure or the State Board of Osteopathy. The applicant shall also have completed an internship or residency approved by the above Boards respectively. The applicant shall be licensed to practice medicine by the Pennsylvania State Board of Medical Education and Licensure or licensed to practice dentistry by the Pennsylvania State Board of Dental Examiners.

SECTION 2. SPECIALITY QUALIFICATIONS

Each member of the medical staff shall possess qualifications, including specialty board certification where indicated, appropriate to the responsibility at the Philadelphia General Hospital to which he is assigned.

SECTION 3. PROVISION AGAINST DISCRIMINATION

No member of the medical staff shall be employed or promoted or demoted or dismissed from any position, or in any way favored or discriminated against with respect to any such position because of sex, race, color, religion or national origin.

SECTION 4. ETHICS AND ETHICAL RELATIONSHIPS

The professional conduct of members of the medical staff shall be governed by the Principles of Medical Ethics of the American Medical Association.

SECTION 5. TERMS OF APPOINTMENT

Subsection 1. Appointments to the Medical Staff shall be made by the Board of Trustees after recommendations of the medical staff and shall continue until the end of the fiscal year.

Subsection 2. At the termination of each fiscal year, the Executive Director, upon recommendation from the Executive Committee, shall submit to the Board of Trustees, the names of all candidates recommended for renewal of Appointment.

Subsection 3. The Board of Trustees before taking action on an application or refusing an appointment or cancelling an appointment previously made, shall consult with the Executive Committee of the Medical Staff.

Subsection 4. Appointment to the medical staff shall confer on the Appointee only such privileges as specifically indicated at the time of appointment or as subsequently added by the Board of Trustees.

SECTION 6. PROCEDURES OF APPOINTMENT

Subsection 1. Application for membership on the medical staff shall be presented in writing on the approved application form, and shall state the qualifications, and shall also signify his agreement to abide by the bylaws and rules of the medical staff.

Subsection 2. The Chief of Service concerned will submit the completed application to Coordinator of School Division for the clinical departments or to the chairman concerned for the diagnostic or special patient service departments and he in turn will forward it to the Credentials Committee for recommendation. It will then be forwarded to the Executive Committee of the medical staff who will in turn submit it together with its recommendation to the Executive Director. The Executive Director of the hospital will submit the application to the Board of Trustees for final action.

Subsection 3. The Board of Trustees shall either accept, reject or shall refer it back to the Executive Director for further information, stating reasons for such action.

Subsection 4. All recommendations shall include designation of rank and service for each physician.

Subsection 5. When final action has been taken by the Board of Trustees, the Executive Director of the hospital shall transmit this decision to the candidate for membership.

SECTION 7. APPEALS

In any case where the Credentials Committee or Executive Committee of the medical staff does not recommend reappointment or where reduction of privileges is recommended, the Executive Director shall notify the physician concerned and he shall be given an opportunity of appearing before the Credentials Committee and the Joint Conference Committee in joint session. After such hearing, the Joint Conference Committee shall make final recommendation to the Board of Trustees. The decision of the Board of Trustees shall be final.

SECTION 8. TEMPORARY PRIVILEGES

The Executive Director of the hospital shall have the authority to grant temporary privileges to a physician who is not a member of the medical staff, upon the recommendation of the Medical Director, coordinator or chairman of a department, for a period not to exceed sixty (60) days.

SECTION 9. REPRESENTATION OF ADMINISTRATION OF THE HOSPITAL

The Executive Director of the Hospital shall be an ex-officio member of the Executive Committee of the Medical Staff, and of the Medical Staff.

ARTICLE IV - CONDUCT OF THE MEDICAL STAFF

The Medical Staff of the Philadelphia General Hospital organized as herein stated dedicates itself to the following principles and practices:

1. To embrace complete professional responsibility, within the means provided, for the patients under his care.
2. To recognize that the health care and welfare of his patients supersedes all other personal or professional endeavor.
3. To work with full measure to the duties assigned; in patient care, administration, teaching and research; and that endeavor be complete and appropriate to the task at hand.
4. To work in harmony with colleagues and peers in the smooth and efficient delivery of quality care to the patient.
5. To continually review and revise methods of care; explore and adopt new and improved ideas and techniques and maintain himself knowledgeable of progress in the health sciences.

ARTICLE V - DEPARTMENTS

SECTION 1. DEFINITION OF TERMS

1. Division - a medical school complex at the Philadelphia General Hospital, including all Administrative, patient care, teaching and research activities under the respective medical school direction; as provided for in the medical school - City of Philadelphia Contracts; Hahnemann Medical College Division, Thomas Jefferson University Division, University of Pennsylvania Division.
2. Department - a major specialty discipline requiring individual patient care, training, research and administrative programs peculiar to that specialty endeavor.
3. Service - an organization of specialty or subspecialty activity within a department.

SECTION 2. ALLOCATION OF DEPARTMENTS

Subsection 1. The Departments shall be allocated as:

1. Clinical Departments
2. Diagnostic Departments
3. Special Patient Service Departments

Subsection 2. The Clinical Departments shall be assigned to medical school divisions and will receive their administrative support for professional care of patients, teaching and research from the division coordinators.

Subsection 3. The Diagnostic Departments and Special Patient Services Departments are not assigned to the medical school divisions. Their administrative activities are a responsibility of each department chairman.

Subsection 4. Clinical Departments

1. Dermatology Department
2. General Surgery Department
3. Medicine Department
4. Neurology Department
5. Neurosurgery Department
6. Obstetrics and Gynecology Department
7. Ophthalmology Department
8. Orthopedic Department
9. Otorhinolaryngology Department
10. Pediatrics Department
11. Physical Medicine and Rehabilitation Department
12. Psychiatry Department
13. Urology Department

Subsection 5. Diagnostic Departments

1. Anatomical Pathology Department
2. Clinical Pathology Department
3. Radiology Department
4. Diagnostic Cardiology Department

Subsection 6. Special Patient Services Department

1. Admissions and Emergency Department
2. Anesthesiology Department
3. Compensation Department
4. Dentistry and Oral Surgery Department
5. Student Health Department

SECTION 3. ASSIGNMENT TO DEPARTMENTS

The Chief of the Department concerned shall recommend to the Executive Committee of the medical staff the departmental assignments of the medical staff.

SECTION 4. ORGANIZATION OF DEPARTMENTS

Subsection 1. The Deans of the respective medical schools (Hahnemann Medical College, Thomas Jefferson University and the University of Pennsylvania) shall appoint a coordinator for their division to be appointed to the medical staff as indicated in these Bylaws. The Clinical Departments will be organized with the Coordinator in direction.

Subsection 2. Each medical school shall respect the status of members of the medical staff of the Division for which the medical school is responsible who are City Civil Service employees. The responsible medical school shall take no action affecting such employees' tenure of employment without approval of the City authorities.

Subsection 3. In departments where services are provided by more than one medical school and where there is a Chief of that Department for each School-Division, the Chief of one medical school department shall serve as Chairman for that Collective department for a period of one fiscal year, to be designated, on a rotating basis, from among the Chief of Department of each Division represented.

Subsection 4. Each department shall meet monthly under the Department Chairman and record of individual attendance will be recorded and minutes will be maintained. Such attendance at department meetings shall not release the members from their obligation to attend the general staff quarterly meetings.

ARTICLE VI - CATEGORIES OF THE MEDICAL STAFF

SECTION 1. THE MEDICAL STAFF

The medical staff shall be divided into honorary consultant, consultant, active, associate and auxiliary, in accordance with the rules of the Board of Trustees.

SECTION 2. THE HONORARY CONSULTANT

An Honorary Consultant on resignation or retirement after 10 years on the active medical staff shall be assigned to a Service of a Division but shall have no regular responsibility for patient care. He may serve in an advisory or consultative capacity upon the request of a Division Coordinator, a Chairman of a Department, a Chief of Service, or a Senior Attending Physician.

SECTION 3. THE CONSULTING MEDICAL STAFF

A Consultant shall be a member of the faculty of a participating school with professional rank and eminence in his field and shall be assigned to an appropriate Division and Service. He may, with the consent of the Chairman of a Department, Chief of Service, or Senior Attending Physician concerned, engage in teaching and research and shall, upon request, answer consultations sent to the Department and perform such other duties as may from time to time be set forth in the Rules of the Medical Staff.

SECTION 4. THE ACTIVE MEDICAL STAFF

Subsection 1. The active Medical Staff members will have both clinical and administrative duties. Each member will have a clinical title of rank and may have an administrative title. Such titles will be designated at the time of appointment to the Medical Staff.

Subsection 2. Change in rank or title will be achieved by recommendation to the Executive Committee by the Division Coordinator for the Clinical Departments and the Chairman of Department for the Diagnostic and Special Patient Service Departments. Following approval by the Executive Committee, such change in rank or title will take effect, when approved by the Board of Trustees.

Subsection 3. Clinical Titles

- a. A Senior Attending Physician shall be assigned to a specified Division and Department. He shall provide medical care to a group of patients in the Hospital and shall supervise Attending Physicians, Assistant Attending Physicians, Residents and Interns assigned to him. His duties may also include service in the appropriate

number of the administrative staff.

- b. An Attending Physician serving under the supervision and direction of a Senior Attending Physician, where applicable shall perform the same duties and services as a Senior Attending Physician.
- c. An Assistant Attending Physician will serve under the direction and supervision of a Senior Attending and/or Attending Physician.

Subsection 4. Administrative Titles

- a. A Division Coordinator shall be responsible for all administrative matters relating to the professional care of patients, teaching and research of his Division. On matters relating to education and research, the Division Coordinator shall report to the Dean of the medical school responsible for the Division as well as to the Executive Director of the Philadelphia General Hospital. On matters relating to hospital administration and patient care, he shall report to the Executive Director of the Hospital.
- b. A Chairman of Department, working with the Chiefs of Service of each Division, shall coordinate the activities of his Department. He will serve to coordinate activity as necessary between the Divisions and Services within his Department.
- c. A Chief of Service in the Clinical and Special Patient Service Departments is responsible for the supervision of professional medical care of a group of patients in the Hospital assigned to his Division and Service. A Chief of Service generally supervises the work of the attending medical staff, the auxiliary staff, the residents and interns assigned to his inpatient service. A Chief of Service, also, generally supervises the staff, residents and interns assigned to the clinics in the Outpatient Department. He shall have direct responsibility for resident training, clinical clerkship and medical student teaching programs, within his own Service.
- d. A Chief of Service in the Diagnostic Departments is responsible for the major Subdivisions within his service and supervises the activities of Attending Staff and House Staff within his service.

SECTION 5. THE ASSOCIATE MEDICAL STAFF

A member of the Associate Medical Staff shall serve at the pleasure of the Chief of Service of the Department to which he is appointed. The duties and responsibilities of a member of the Associate Medical Staff shall be limited to, and restricted by his schedule and assignment for a specified tour of duty by his Chief of Service. As a member of the Associate Medical Staff he shall have no other obligations or responsibilities except to serve at the request of the Chief of Service for special assignment at any time. Appointees to the Associate Medical Staff shall be given the title of Senior Attending Physician, Attending

Physician, or Assistant Attending Physician and shall have duties and responsibilities similar to the corresponding titles on the Active Medical Staff.

SECTION 6. THE AUXILIARY MEDICAL STAFF

The auxiliary staff shall consist of adjunct members who shall perform special services in the basic sciences (e.g. bacteriology, physiology), under the direction and supervision of a Chief of Service, Senior Attending Physician, or Attending Physician.

ARTICLE VII - OFFICERS AND COMMITTEES

SECTION 1. OFFICERS

Subsection 1. The officers of the medical staff shall be the president, the vice president, the secretary, the treasurer, and such additional officers as may be authorized by a plurality vote of the active staff present and voting.

Officers shall be elected from among the members of the active staff.

Officers shall serve for one year as long as they are members of the active staff.

The president and vice president shall not serve for more than two (2) consecutive terms.

Subsection 2. Nomination of officers of the medical staff shall be made by a Nominating Committee, which shall be appointed by the President, at least four months prior to the March meeting. The Committee shall be known as the Committee on Nominations and shall consist of five (5) members of the Medical Staff.

The Committee shall present in writing the names of nominees for each office to the Active Medical Staff at the December meeting of the Medical Staff at which meeting nominations may be made from the floor by any member of the Active Medical Staff.

Officers shall be elected and assume office at the regular annual meeting of the Medical Staff in March.

If there be a contest for any office, voting shall be by secret ballot of the members attending the Annual Meeting. Election shall be determined by a plurality of the votes cast by those present. If there is no contest, a voice vote will be sufficient.

The President of the Medical Staff shall appoint three (3) members of the Medical Staff who are present at the Annual Meeting, and who are not candidates for any office, to act as tellers.

Subsection 3. The President shall preside at all meetings of the medical staff. The President shall perform such other duties as may be authorized by the medical staff from time to time. The President shall select and appoint all committee members and chairmen of each unless otherwise provided in these Bylaws.

The Vice president shall, in the absence of the President, perform the duties assigned to the President.

The secretary shall keep accurate records of the proceedings of all meetings of the Medical Staff, shall be custodian of all its records, and shall issue all notices of meetings. The secretary shall maintain a record of the attendance of all members of the Medical Staff at all regular and special meetings.

The treasurer shall be responsible for all monies belonging to the organization entrusted to his care, and for keeping accurate records of income and expenses and shall submit a financial report quarterly to the medical staff. All expenditures of monies entrusted to the care of the treasurer shall be made after prior authorization by the officers of the medical staff.

SECTION 2. COMMITTEES

Subsection 1. Committees shall be:

1.) Standing; 2.) Special and 3.) Ad Hoc. The President of the Medical Staff shall inform and appoint all respective Committee members and chairmen, except as designated in these Bylaws, from among the members of the Medical Staff, to serve for one year, corresponding with the term of the President.

Subsection 2. Standing Committees

Standing Committees will hold at least nine (9) meetings per year and record attendance and minutes to be forwarded each to the President of the Medical Staff and the Executive Director.

The Chairman of each Standing Committee, or his delegated representative, shall present at the Annual Meeting of the Medical Staff in March a summary of the work performed by the Committee during the preceding year, with recommendations for improvement of services.

The report will be in writing and a copy placed in the hands of the Secretary of the Medical Staff at the time of the meeting.

The following Standing Committees are hereby authorized. For all committees, only members of the active Medical Staff shall have voting privileges.

1. Executive Committee

The Executive Committee of the medical staff shall consist of the Chairman of each clinical, diagnostic department and special patient service department; the President, Vice President, Secretary and Treasurer of the Medical Staff, three members of the medical staff, the Division Coordinators, the Medical Director, and the Associate Executive Director. The Executive Director will be an ex-officio member. The President of the medical staff will be the presiding officer.

The Executive Committee of the medical staff shall be permitted to organize itself and to adopt its own rules of procedure subject to the approval of the medical staff and of the Board of Trustees. Officers of the Medical Staff shall hold similar offices on the Executive Committee.

The Executive Committee of the medical staff shall review patient care in the Hospital; shall coordinate the activities and general medical procedures of the various Departments; shall make recommendations concerning appointment and resignation of medical staff members assigned to it by these Rules; shall be concerned with the operation of the Medical Staff as a whole and with the supervision and direction of the intern and residency training program. It shall receive and act upon the reports of the Standing, Special and such other Committees as the Medical Staff may designate.

The Executive Committee shall report to the Medical Staff at the regular quarterly meeting of the Medical Staff for its action.

2. Joint Conference Committee

The Joint Conference Committee shall consist of two representatives of the Board of Trustees designated by the Chairman of the Board of Trustees. The president of the Medical Staff and two representatives of the Medical Staff designated by the President of the Medical Staff, the Division Coordinator of each medical school participating in the Hospital program, the Executive Director and the Medical Director.

To this Committee shall be brought all problems in policy and administration of the Medical Staff which are of mutual interest to the medical staff, the administration of the hospital and the Board of Trustees and which concern patient care, teaching, medical research or related matters.

3. Committee on Medical Records and Medical Audit

(a) Membership: The president of the Medical Staff will appoint nine (9) members of the medical staff, to include: one member of the Executive Committee to act as Chairman, one (1) member of the Diagnostic Departments and one (1) member of the Special Patient Service Departments. The Medical Records Librarian shall be a member and act as secretary.

(b) Duties: The Committee shall review and clinically evaluate the quality of medical care provided to all categories of patients on the basis of documented evidence and shall maintain continuous supervision over the quality of the medical records. The Committee shall from time to time suggest changes in form of the procedure which will result in progress or improvement. If records are unsatisfactory, the Committee shall suggest the method of improvement and shall advise the Medical Staff members whose records may not comply with accepted standards. If within a reasonable period, the medical records of a member of the Medical Staff, who has been warned, do not show adequate improvement, the Medical Records Committee shall, through its Chairman, present its findings to the Executive Director for such action as he considers appropriate.

4. Committee on Hospital Utilization

(a) Membership: The Committee shall consist of the Chairman of each Clinical Department or his designee, the Chairman of each Diagnostic Services Department or his designee, the Medical Records Librarian, the Chief of Admissions and Emergency, the Medical Director, the Director of Nursing or her alternate, the Director of Administrative Services or his alternate, and the Chairman of the Medical Records and Audit Committee. The Chairman shall be selected by the President of the Medical Staff.

(b) Duties: The Committee shall review the hospital admissions with respect to the need for admission, length of stay, discharge practices and the evaluation of the services ordered and provided, as indicated by the Hospital Utilization Review Plan.

5. Committee on Tissue

(a) Membership: The membership of this Committee shall consist of the following Department chairmen or their designees: Obstetrics and Gynecology, General Surgery, Neurosurgery, Ophthalmology, Orthopedics, Otorhinolaryngology, Urology, Medicine, and Anatomical Pathology.

(b) Duties: The Committee shall study and report the agreement or disagreement between preoperative diagnosis and reports by the pathologist on tissues removed at operation. It shall also review the autopsy findings in cases which the pathologist wishes to bring to the attention of the Committee. The Committee shall meet monthly and a summary presented at each Quarterly Staff Meeting and shall form a part of the permanent record of the Hospital.

6. Committee on Hospital Infections

(a) Membership: The Committee shall consist of the Chairman of the Clinical Departments or his designee, the Chief of the Clinical Pathology Department or his designee, the Medical Director or his designee, the Directress of Nursing or her designee. The President of the Medical Staff shall appoint the presiding officer.

(b) Duties: The Committee shall provide surveillance of hospital infection, and shall promote a preventive and corrective program designed to minimize these hazards.

7. Committee on Publications and Research

(a) Membership: (11 members)

three (3) members of the Active Medical Staff, to be appointed by the President of the Medical Staff; the Chairman of the Clinical Pathology Department or his designee;

the Chairman of the Anatomical Pathology Department or his designee;

the Director of Research;

the Medical Director;

the Director, Clinical Research Center;

the President of the Medical Staff shall appoint a sociologist, a clergyman and an attorney to this Committee.

The presiding officer will be selected from the Committee members, by the President of the Medical Staff.

(b) Duties:

(1) The Committee shall be permitted to organize itself and to adopt rules of procedure subject to the approval of the Executive Committee.

(2) The Committee shall be responsible for supervising and regulating all medical research activities performed in the Hospital or by the Medical Staff.

(3) The Committee shall function in such a manner to protect the individual as a research subject by assuring that (a) the rights and welfare of the individuals involved are adequately protected; (b) the methods used to obtain informed consent are adequate and appropriate; and (c) the risks to the individual are outweighed by the potential benefit to him or by the importance of the knowledge to be gained.

(4) The Committee shall promulgate rules from time to time regarding research involving human and animal subjects, living and dead, and other research not involving human or animal subjects.

(5) The Committee shall have the authority to prescribe restrictions or conditions under which the research may be conducted, define areas of possible pertinent changes in the research plans, and determine the nature and fre-

quency of the interim review procedures to insure continue acceptable conduct of Research.

(6) The Committee shall develop rules regarding articles containing reports or studies or investigations for dissemination or publication and the approval of the form of recognition of the Philadelphia General Hospital.

(7) The Committee shall submit its recommendations on applications for research to the Research Fund Board of Trustees and its Chairman shall make monthly reports to the Executive Committee of the Hospital.

8. Committee on Operating Room and Anesthesia

(a) Membership: The Committee shall consist of the Chairman or his designee of each of the following departments: General Surgery, Neurosurgery, Obstetrics and Gynecology, Ophthalmology, Orthopedics, Otorhinolaryngology, Urology, Anesthesiology, Dentistry and Oral Surgery, and Clinical Pathology. The presiding officer shall be appointed by the President of the Medical Staff.

(b) Duties: The Committee shall make recommendations to the Executive Committee of the Medical Staff, the President of the Medical Staff and the Executive Director and the Medical Director regarding the management of the Operating Rooms and on the standardization of administrative orders, techniques for surgical procedures, and for anesthesia.

9. Tumor Board

(a) Membership: The Committee shall consist of the Chief of the Radiation Therapy Service, the Medical Director and 9 members of the following departments to be selected by the President of the Medical Staff; Surgery (2), Medicine (2), Anatomic Pathology (1), Urology (1), Otorhinolaryngology (1), Oral Surgery (1), and Obstetrics and Gynecology (1).

(b) Duties:

1. Review and advise the care of all patients in the Institution with malignant tumors.
2. Maintain a tumor registry and follow-up clinic.
3. Administrate an education program in oncologic disease.

Subsection 3. Special Committees

Special Committees shall limit their activities to the accomplishment of the duties outlined, and shall have no authority to act except as specifically conferred by action of the Medical Staff.

Special Committees will meet at intervals appropriate to duties encharged. Attendance and minutes will be maintained and forwarded, each to the Executive Director and President of the Medical Staff.

The following Special Committees are hereby authorized. For all Committees, only members of the Active Medical Staff shall have voting privileges.

1. Committee on Pharmacy and Therapeutics

(a) Membership: The Committee shall consist of the Chairman of each department or his designee, the Chief Pharmacist shall serve as Secretary, the Medical Director and the Directress of Nursing or her designee. The Chairman will be appointed by the President of the Medical Staff.

(b) Duties: The Committee shall serve as an advisory group to hospital medical staff and the hospital pharmacist on matters pertaining to the choice of drugs accepted for use within the hospital and out-patient department; shall reduce the unnecessary duplication of drugs; shall make recommendations concerning drugs to be stocked on the nursing unit floors and by other services, shall evaluate pharmacologic data concerning new drugs or preparations requested for use in the Hospital; shall evaluate new methods of labeling and distribution. A formulary of accepted drugs for use in the Hospital shall be prepared and revised yearly.

2. Committee on Credentials

(a) Membership: The Committee shall consist of: The President of the Medical Staff, the Medical Director, the Secretary of the Medical Staff, and each division Coordinator or his designee. The Secretary of the Medical Staff will serve as Chairman.

(b) Duties: The Committee shall investigate the credentials of all applicants for appointment to the Medical Staff; the character, qualifications and standing of the applicant, and make recommendations conforming with the Bylaws and the Rules of the Board of Trustees. The Committee shall investigate any breach of ethics reported; review records referred to it by the Executive Committee or any Standing or Special Committee and arrive at a decision from this review regarding the competence of staff members and make recommendations for reappointments. All proposed

recommendations for new and reappointments shall be submitted to the Executive Committee of the Medical Staff for approval at the next regular meeting. Where a recommendation to defer is made, it must be followed by one to accept or reject the applicant at the next meeting of the Executive Committee. Any recommendation for appointment should include an assignment to a Service and schedule of coverage.

3. Committee on Interns

(a) Membership: The Committee shall consist of one representative from each of the following departments: Medicine, Surgery, Obstetrics/Gynecology, Pediatrics, Psychiatry and Neurology, selected by the Chairman of each of these Departments, the three coordinators, the Director of Medical Education and the Medical Director.

(b) Duties: The Committee shall be responsible for making recommendations regarding the following:

(1) the selection of interns; (2) the education of and training programs offered to interns; (3) service assignments; (4) recipients or prizes and/or awards of merit; (5) demeanor, conduct and performance

4. Committee on Library:

(a) Membership: The committee shall consist of: the Director of Medical Education, the Medical Librarian who shall act as Secretary. The following members will be appointed by the President of the Medical Staff: two members from each Medical School Division, one member from the Diagnostic Departments, collectively and one member from the Special Patient Service Departments, collectively, and the Director of Research.

(b) Duties: The Committee shall make recommendations with regard to the purchase of special books and scientific periodicals. It shall advise the Medical Staff and the Hospital Administration on the care, operation, and needs of the Medical Library.

5. Committee on Outpatient Services:

(a) Membership: The Chief of Out-Patient Services will serve as Chairman. Additional members will include the Assistant Executive Director, the Secretary of the Executive Committee, the three Coordinators or their designees, the Chairman of the following Departments or his designee: Clinical Pathology, Radiology, Dentistry and Oral Surgery, Admission and Emergency.

(b) Duties: The Committee shall concern itself with the proper conduct of the out-patient services, shall make recommendations for changes deemed desirable, shall recommend the creation and deletion of clinics if the need arises and shall report requirements of the out-patient services to the Executive Committee of the Medical Staff.

6. Committee on Diagnostic Services

(a) Membership: The Committee shall consist of: the Medical Director and the Director of Medical Education. A member shall be appointed from each Diagnostic Department and from each Clinical Department by the President of the Medical Staff.

(b) Duties: The Committee shall make recommendations to the Executive Committee of the Medical Staff regarding the problems arising between the Diagnostic Services and the Clinical Services, as well as the needs of the Diagnostic Service Departments.

7. Committee on Public Relations:

(a) Membership: The Committee shall consist of five (5) members of the Medical Staff, to be appointed by the President of the Medical Staff.

(b) Duties: The Committee shall act in an advisory capacity to the Medical Staff and the Hospital Administration on matters of public relations as they concern the Medical Staff.

8. Committee on Budget

(a) Membership: The Committee shall consist of the Chairman of each Clinical Department and the Chairman of each Diagnostic Service and Special Patient Service. The Medical Director shall be an ex-officio member. The Administrative Services Director and the Budget Officer shall be available for consultation. The President of the Medical Staff shall appoint the presiding officer from the Medical Staff at large.

(b) Duties: The Committee shall act in an advisory capacity to the Executive Director and the Board of Trustees in the preparation of the Annual Operating Budget and Capital Improvement Budget. It shall undertake other duties as decided by the Executive Committee or the President of the Medical Staff.

9. Committee on Rules and Bylaws

(a) Membership: The Committee shall consist of seven (7) members of the Medical Staff appointed by the President of the Medical Staff. The President of the Medical Staff shall select the presiding officer.

(b) Duties: The Committee shall review the Bylaws and Rules of the Medical Staff yearly. They will receive recommendations from the various Departments

and the Medical Staff at large. Revisions, additions and deletions will be presented to the Executive Committee for approval prior to presentation to the Medical Staff.

10. Committee on Supplies and Equipment:
 - (a) Membership: The Committee shall consist of: Director of Professional Services, Director of Central Service, Directoress of Nursing or her designee. The President of the Medical Staff shall appoint one member from each of the following Departments: Medicine, Surgery, Pediatrics, Obstetrics and Gynecology.
 - (b) Duties: The Committee shall serve as an advisory group to the Hospital Medical Staff and the Director of Central Service on matters pertaining to the purchase and proper use of medical supplies and medical equipment; shall evaluate the efficiency and safety of currently used and new supplies and equipment; shall review reports of adverse reactions and incidents involving medical supplies and equipment.

11. Committee on Memorials:
 - (a) Membership: This Committee shall consist of three (3) members appointed by the President of the Medical Staff.
 - (b) Duties: This Committee shall concern itself with both historical and memorial property, funds and incunabula. It shall carry out the tasks necessary to promote their development and safe keeping. As prizes and awards are available from memorials, it shall function in their distribution.

12. Committee on Radioisotopes:
 - (a) Membership: The Committee shall consist of the Chief of Radiosotope Service, Radiation Physicist, Chief of Radiation Therapy Service and one member from each of the following categories to be selected by the President of the Medical Staff: Internal Medicine, Hematology, Pathology, Diagnostic Radiology, Administrative Services, and two (2) members to be selected from the Medical Staff at large.
 - (b) Duties:
 1. Review, grant permission for, or disapprove the use of radioisotopes within the institution.
 2. Prescribe special conditions that may be necessary, such as special training of personnel, limitation of areas where radioisotopes may be used, disposal methods and the like.
 3. Receive reports from the radiation protection officer and review his records.

4. Recommend remedial action when an individual fails to observe protection recommendations, rules and regulations.
 5. Keep a record of action taken in approving the use of radioisotopes.
13. Committee on Accreditation:
- (a) Membership: The Committee shall consist of three (3) members of the Active Medical Staff.
 - (b) Duties: The Committee shall keep the Medical Staff informed concerning the accreditation of the Hospital and the factors influencing the status.
14. Committee on Blood Bank:
- (a) Membership: The Committee shall consist of: The Director of the Blood Bank, the Chairman of the Department of Clinical Pathology, one member from each of the following Departments: General Surgery, Medicine, Obstetrics and Gynecology, Pediatrics, Anesthesiology.
 - (b) Duties: The Committee shall assist and advise the Director of the Blood Bank in all matters pertaining to the acquisition, processing and delivery of Blood and Blood By-Products. Wherever possible, it shall endeavor to adhere to the principles of Blood Banking adopted by the American Blood Banking Association.

Subsection 4. Ad Hoc Committees

The President of the Medical Staff shall be empowered to appoint one or more ad hoc committees, from the medical staff at large, when a need is recognized.

Such committees shall be appointed for a specific task. The President shall transmit the charge of the committee to the committee Chairman in writing.

The Committee shall limit its activities to the accomplishment of the task for which created and appointed, and shall have no authority to act except as specifically conferred by action of the Medical Staff.

The President shall inform the Medical Staff of each ad hoc committee appointed and the duties encharged at the next earliest Quarterly Staff Meeting.

Upon completion of the task for which appointed, such ad hoc committee shall be discharged by letter in writing from the President to the Committee Chairman.

ARTICLE VIII - MEETINGS

SECTION 1. REGULAR MEETING

Regular meetings of the Active Medical Staff shall be held quarterly in March, June, September and December, at a time and day authorized by the President of the Medical Staff. The March meeting shall be the Annual Meeting.

SECTION 2. SPECIAL MEETING

A special meeting may be called at any time by the President of the Medical Staff or, in his absence, by the Vice President. A special meeting also shall be called promptly by the President upon written request signed by at least twenty-five (25) members of the Active Medical Staff.

SECTION 3. NOTICE OF MEETING

The Secretary of the Medical Staff shall give at least five (5) days notice of either a regular meeting or a special meeting, and in the notice of a special meeting shall state the specific business to be considered.

SECTION 4. ATTENDANCE

Each member of the Active Medical Staff shall attend at least 50 per cent of the general staff meetings unless excused by the President of the Medical Staff for exceptional conditions, e.g., sickness or absence from the community.

SECTION 5. QUORUM

A quorum for the transaction of business at any regular or special meeting of the Medical Staff shall consist of not less than twenty-five (25) members of the Active Medical Staff.

SECTION 6. VOTING

Each member of the Active Medical Staff in good standing shall have one vote.

SECTION 7. DUES

Each member of the Active Medical Staff shall be required to pay such dues as are recommended by the Executive Committee and approved by a vote of the Active Medical Staff.

The Treasurer, at the beginning of each fiscal year, will bill each member of the Active Medical Staff for the amount assessed. Staff members who have failed to remit within sixty (60) days of billing shall be considered to be delinquent and shall be notified by the Treasurer regarding their delinquency and be required to pay their indebtedness within thirty (30) additional days of notice by the Treasurer. Those who are still delinquent in their payment, shall

be considered no longer in good standing, shall lose voting privileges and the privilege to hold office and shall be reported to the Executive Committee for any additional action which may seem appropriate

SECTION 8. AGENDA

The agenda at any regular meeting shall be:

Business

1. Call to order
2. Acceptance of the minutes of the last regular and of all special meetings
3. Unfinished business
4. Communications
5. Reports of standing and of special business committees
6. New business

Medical

7. Review and analysis of the clinical work of the hospital
8. Reports of standing and of special medical committees
9. Discussion and recommendations for improvement of the professional work of the Hospital
10. Report of the Executive Director of the Hospital
11. Adjournment

The agenda at special meetings shall be:

1. Reading of the notice of calling of the meeting
2. Transaction of the business for which the meeting was called
3. Adjournment

ARTICLE IX - RULES OF MEDICAL STAFF

SECTION 1. ADOPTION OF RULES

The Medical Staff shall adopt such rules as may be necessary for the proper conduct of its work. These rules shall be a document embodied in the Bylaws under this Article (Article IX). They may be amended at any regular meeting of the Medical Staff, without previous notice, by a majority vote of the total Active members present. Such amendments shall become effective when approved by the Board of Trustees.

ARTICLE X - STANDING AND ADMINISTRATIVE ORDERS

SECTION 1.

The Chairman of each Clinical Department working together with the Chief of the various school services shall be responsible for the development of a single set of standing orders for his Department or, where applicable, for each Service of his Department. These standing orders, or any amendment thereto, shall be equally applicable to the three school divisions and shall be subject to the approval of the departmental head of each school division and shall be transmitted through the Division Coordinator and through the Executive Committee to the Executive Director for his approval.

SECTION 2.

The Chairman of each Diagnostic and Special Patient Services Department shall be responsible for the development of a set of standing orders for his Department and, where applicable, for each Service in the Department. These standing orders, or any amendment thereto, shall be transmitted through the Executive Committee to the Executive Director for his approval.

ARTICLE XI - AMENDMENTS

These Bylaws may be amended by an affirmative vote of the majority of the active members present and voting at any duly constituted regular or special meeting of the medical staff provided that a full statement of such proposed amendment shall have been set forth in writing and distributed to the medical staff at least fifteen (15) days to the meeting.

Such amendment(s) shall be forwarded with the recommendations of the Executive Director to the Board of Trustees for their approval. The amendment(s) are subject to the provisions of the Bylaws and Rules of the Board of Trustees and will become effective after approval by the Board of Trustees and after approval of Administrative Board of the City of Philadelphia.

ARTICLE XII - ADOPTION

These bylaws, together with the appended rules and regulations, shall be adopted at any regular meeting of the active medical staff, shall replace any previous bylaws and rules and shall become effective when approved by the Board of Trustees of the Hospital and after approval of Administrative Board of the City of Philadelphia. They shall, when adopted and approved, be equally binding on the governing body and the medical staff.

Adopted by the active medical staff of the Philadelphia General Hospital.

Edward S. Cooper, MD
President of Medical Staff

P. R. Marone
Secretary of Medical Staff

September 21, 1970
Date

Approved by the Board of Trustees of the Philadelphia General Hospital

Saul P. ...
Chairman of Board of Trustees

Samuel R. ...
Secretary of Board of Trustees

October 21, 1970
Date

HS:CP

MOH

5-18-70

Revised 10-15-70

Approved by:

Administrative Board of the
City of Philadelphia

161102-2 64 1:24
DEPARTMENT OF ...

... 161102-2 64 1:24

Edward S. Cooper, MD
President of Medical Staff

T. B. Merriman
Secretary of Medical Staff

September 21, 1970
Date

Approved by the Board of Trustees of the Philadelphia General Hospital

Earl P. Lundy
Chairman of Board of Trustees

Samuel R. Ingraham
Secretary of Board of Trustees

October 21, 1970
Date

WS:dp

PGH

5-18-70

Revised 10-15-70

Approved by:

Joe Dorman
Administrative Board of the
City of Philadelphia

July 29, 1971
Date