

| TOPIC | DISCUSSION AND FINDINGS | RECOMMENDATION | FOLLOW-UP/ACTION |
|--|---|--|--|
| Call to Order 4:30 PM | The following members were present on the attached sign-in roster. | A quorum was present and the meeting was called to order. | |
| Introduction(s) | | | |
| | Dr. Bohorquez called the MEC to order as the Chief of Staff. | None | None. |
| Public Comments | | | |
| | Dr. Bryan Dawkins introduced himself as the Assistant Program Director and our physician in the Hospitalist Group. | None | None. |
| Minutes | | | |
| Meeting Minutes | October 1, 2018 MEC minutes | None | Motion to approved: Dr. Bohorquez Second the motion: Dr. Perezalonso All approved |
| Old Business | | | |
| MEC Banking Finalizing / Treasurer report | A Bank account has been created and all checks has been deposited. We created the business as a Not for Profit. The name of our business is Lakeside Medical Center Medical Executive Committee, Inc. Discussed about the fees that were paid to credential LMC Medical Staff and how will the credentialing department be reimbursed for all fees. | It was recommended for Sarah bring the list of fees that are paid for Appointment (\$500) and Reappointment (\$300) for next meeting. | Tabled for next MEC meeting |
| Medical Staff Rules and Regulations / Medical Staff Bylaws | All staff present read the corrected Low Volume / No Volume and OPPE/ FPPE portion from Dr. Padron. | Review added portion for Joint Commission | Motion to accept the draft as written with anticipation that it will be written again in the near future. Dr. Carlson second that motion. All approved |
| CMS Guidelines for Blood Cultures in ICU – Dr. Abu | If Blood cultures are ordered, you have to do them before the antibiotics. Will reporting at 24 hrs instead of 48 hrs help with inpatient management of cases. | Recommend Dinaliza to bring and email CMS Guidelines / rules next meeting. Sylvia and Janet will send what they are saying for sepsis. | Tabled for next MEC meeting |

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| Report | | | |
| Credentialing Department Report | <p>Provisional privileges requested from Inactive privileges:</p> <ol style="list-style-type: none"> 1) Romesh Gooneratne, MD Internal Medicine <p>Provisional privileges requested from Temporary privileges:</p> <ol style="list-style-type: none"> 1) Charles Azan, MD Pediatrics 2) Maja Citakovic, ARNP 3) Bryan Dawkins, MD Family Medicine 4) Segundo Gonzalez, MD General Surgery 5) Dana Teagarden, DO Obstetrics & Gynecology | <p>Recommended to add Department Chair signature approval for assessment of Delineation of Privileges. Recommended to add in Bylaws.</p> <p>An applicant is allowed to go from Inactive to provisional privileges.</p> | <p>Motion to approve the below physicians mentioned for Provisional Privileges:</p> <ol style="list-style-type: none"> 1) Dr. Azan 2) Dr. Citakovic 3) Dr. Dawkins 4) Dr. Gonzalez 5) Dr. Teagarden <p>Approve Motion: Dr. Schepcke Second the motion: Dr. Carlson All approved</p> <p>Dr. Gooneratne's requested provisional privileges will be tabled for next MEC meeting.</p> |
| Committee Reports | | | |
| CCU Committee | | None. | Tabled for next MEC meeting due to Dr. Abu not attending |
| P&T Committee | None | None. | None. |
| New Business | | | |
| KPI | Discussed the Policy and Procedure for KPI that was effective 10/04/2018. Also discussed the key performance that they would like to see for all specialties and the data sheet that they will be using to create the graphs and where the data will be coming from. | ER: recommended to use LWOT or LWBS (left without being seen) by physicians / midleveler. Benchmark should not be 0 and it should be 0.5% and 1%. 0 is unrealistic. Will be discussed with Dr. Padron for more information. | KPI data sheet will be Tabled for next MEC meeting |
| OPPE/ FPPE | Discussed the Policy and Procedure for OPPE/ FPPE that was effective 10/04/2018. | None | all changes thus far has been reviewed and approved. |
| Low Volume / No Volume | Discussed the Low Volume / No Volume earlier during the discussion of Medical Staff Bylaws update and all changes thus far has been reviewed and approved. | None | all changes thus far has been reviewed and approved. |
| Professional Practice Evaluation | Discussed the Policy and Procedure for Professional Practice Evaluation that was effective 10/04/2018. | None | all changes thus far has been reviewed and approved. |

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| Department Reports | | | |
| Delinquent Medical Records | <p>Discussed the delinquent Medical Report</p> <p>Dr. Gooneratne has delinquent records. Dr. Gunawardene is above 30 days.</p> <p>Per Joint Commission citation: if we do not have one (1) signature, then the nurse is operating out of their scope of service.</p> | <p>Recommended to speak to compliance and IT to allow medical staff to have VPN access to work from home.</p> <p>Threshold for suspension: give the physician a letter and allow the physician 7 days to respond. Then there will be a date that the physician will have to get his delinquent records up to date before put on suspension.</p> | <p>Motion that MEC makes a recommendation to our IT and Compliance department to get in line with the standard of care in Palm Beach County and allow our physicians to get VPN access so they can stop falling out of the JCO deficiency.</p> <p>Dr. Perezalonso second the motion. All approved</p> <p>A warning letter will be sent to all physicians who have more than 0 on the delinquent report.</p> <p>The decision to when a letter should be sent out to all physicians who are not compliant will be tabled for next MEC meeting.</p> |
| Emergency Department Report | Discussed ER quality indicators report and the census. | None. | None. |
| Anesthesia Report | None. | None. | None. |
| Radiology Service Report | None. | None. | None. |
| Surgery Services Report | None. | None. | None. |
| OB Services Report | Discussed OB report | None. | None. |
| Pediatric Services Report | None. | None. | None. |
| Laboratory Service Report | Discussed Lab procedures for reflex testing Need recommendation to discontinue CKMB by Dr. Bolton | None. | Dr. Perezalonso stated the Motion to approve Discussed Lab procedures for reflex testing for Strep A and Urinalysis and to discontinue CKMB. |

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| | | | Dr. Bohorquez second the motion All approved Reflex testing for Lactic Acid to be tabled for next meeting. |
| Chief Medical Officer | None. | None. | None. |
| Family Residency Report | None. | None. | None. |
| Director of Nursing | Still in need of OB manager, clinical data specialist | None. | None. |
| Continuous Quality & Patient Safety Improvement Committee Report | No meeting was held last month due to joint commission, next meeting is Nov. 26, 2018. Currently working on 2019 standards from Joint Commission. We received an award from Florida Hospital Association. | None. | None. |
| Risk Management | None. | None. | None. |
| Administrator Report | Radiology will be starting 1/1/19 Surgery will be starting 1/1/19 Anesthesiology will be starting 2/1/19 Joint commission for hospital for lab Infectious Diseases are being credentialed right now. AMR is with Legal. Construction has begun with the clinic side of the hospital. Clinic will be up and running by April 2019. | None. | None. |
| Adjournment | Meeting adjourned at 6:09 PM Next meeting December 3, 2018 | | |



Lakeside Medical Center


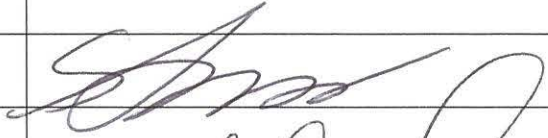
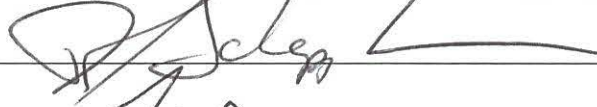
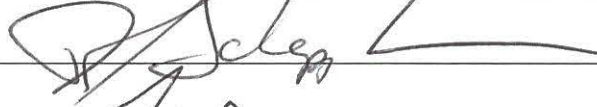
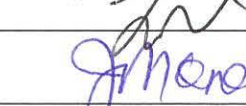
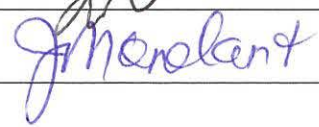


Meeting: Medical Executive Committee Meeting

Facilitator: Dr. David Bohorquez - Chief of Staff

Sign-In Sheet

November 5, 2018

LMC Conference Room 2

| Name | Signature |
|---|--|
| Daniel Padron, DO | |
| David Bohorquez, MD |  |
| Roman Skylar, MD | |
| Sherida L. Williams MD |  |
| Yolanda Cosme, MD |  |
| Melissa Carlson, MD |  |
| Kenneth Schepcke, MD |  |
| Luis Perezalonso, MD |  |
| Janet Moreland, ARNP, MSN, LHRM |  |
| Alyssa Tarter, RN, Risk Management | |
| Manny Diaz, Medical Records |  |
| Takela Golson, MBA, DIO Residency Program | |
| Jennifer Medard, DO Residency Program Director | |
| Charlene Murray, Pharm.D., CPh Director of Pharmacy | |
| Stephanie Dardanella, Hospital Administrator |  |

JH

