

**SHADY GROVE MEDICAL CENTER  
DEPARTMENT OF ANESTHESIA  
RULES AND REGULATIONS**

I. PURPOSE

The Department of Anesthesia is organized for the purpose of delivering all anesthesia care at Shady Grove Medical Center. The Department monitors the professional activity of members, sets clinical anesthesia care policies, supervises teaching programs, administers sedation policies for non-anesthesiologists, and provides an organized working relationship with the medical center and other departments.

The above purpose as well as the Rules and Regulations of the Department of Anesthesia are in accordance with and superseded by the Bylaws of the Medical of Shady Grove Medical Center.

II. ORGANIZATION OF THE DEPARTMENT

A. Eligibility

1. Physicians must be Board certified or in the certification process of the American Board of Anesthesiology. The physician must obtain certification within five years of graduation from residency.
2. Certified registered nurse anesthetists will have completed the certification process and possess a Notification of Collaboration Agreement with an anesthesiologist on staff at SGMC.

B. Selection of Members

Members will have duties and privileges defined according to the Bylaws of the Medical Staff of the Hospital.

The Medical Staff categories applicable to the Department consist of the following divisions: Active, Community, Courtesy, Consulting and Emeritus Medical Staff.

C. Duties of Members

The Active Physician Staff of the Department of Anesthesia shall consist of those physicians actively engaged in clinical patient care. The active staff is responsible for performing all departmental organization and administrative duties pertaining to the Medical Staff. The members are also responsible for attendance at assigned committee, Departmental, and Medical Staff meetings as requested by the Department Chair. The members of the Active Staff are entitled to vote at all such meetings unless otherwise specified at any time by the Medical Staff Bylaws. Members of the Active Staff shall hold elective offices in the Department of Anesthesia as well as on the Medical Staff.

The Courtesy Staff members are not eligible to vote, hold office and are not required to attend meetings or serve on committees.

Members of the Community Staff shall consist of those physicians who are requesting medical staff membership with no delineated clinical privileges. They may not vote or hold elective office.

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Members of the Consulting Medical Staff shall not vote, hold office or serve on committees.

Members of The Emeritus Medical Staff are eligible to vote, hold office, serve on The Medical Staff and Departmental Committees, and may have assigned duties if they so desire.

Allied Health Professionals are Certified Nurse Anesthetists with active clinical responsibilities and a collaboration agreement with an active member of the Department. CRNA's may not vote or hold elected office. CRNA's may participate on hospital committees at the discretion of the Department Chair.

The above delineations are consistent with the Bylaws, Article, IV Section 1 through 5. They are to be superseded by any future amendments to the Bylaws. Attendance requirements are as specified in the Bylaws, Article XII, Section 4.

D. Call Schedule

The Department of Anesthesia maintains an OR and OB call system sufficient to cover the needs of the Hospital. All active members of the Anesthesia Department will share in call or provide alternative call coverage.

E. Appointment

Appointment or reappointment to the Department of Anesthesia and the Medical Staff shall be approved by the Chair of the Anesthesia Department and the Credentials Committee as outlined in the Bylaws, Article V.

F. Promotion

In order to be promoted to or maintained on the active staff, each individual must have a minimum of 25 patient contacts per year.

G. Officers

The officers of the Department of Anesthesia shall be elected annually by the Active Physician Staff of the Department in accordance with the Bylaws, Article X, .

1. Chair

The Chair of the Department of Anesthesia shall be a member of the Active Staff, who is qualified by training, experience and demonstrated leadership ability.

Duties of the Departmental chairs are those contained in Article X, Section 6 of the Medical Staff Bylaws.

In addition, he/she shall keep accurate and complete minutes of all departmental meetings. The Chair or designee will be a member of all departmental committees.

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2. The Vice Chair shall be a member of the Active Staff. He/she will serve as alternate to the Chair of the Department of Anesthesia either when requested by the Chair or during absence of the Chair. He/she shall perform such duties as may be delegated to him by the Chair.

H. Removal of Officers from their Position

The Chair of the Department may be removed at any regular meeting at which a quorum is present or at any special meeting on notice, by a two-thirds vote of those active members of the Department present. Such removal shall become effective when approved by the Governing Body.

The presence of 50% of the total number of active members of the Department at any regular or special meeting shall constitute a quorum, for the purpose of removal of the Chair.

I. CME Requirements

Each member of the Department Medicine fulfills the continuing medical education requirements as specified by the Maryland Board of Physicians and agrees to abide by Maryland State Law regarding Continuing Medical Education (CME) requirements.

J. Board Certification Requirements

Board Certification Status: Effective May 21, 2000, new MD, DO, DPM, and DMD/DDS (Oral Surgeons only) applicants to the medical and affiliate staff must be board certified or board admissible. Effective June 27, 2005, all MD, DO, DPM, and DMD/DDS (Oral Surgeons Only) applicants who completed their residency program after January 1, 1990 must be board certified or board admissible by the appropriate Board recognized by the American Board of Medical Specialties or by the American Board of Oral and Maxillofacial Surgery or by the American Board of Podiatric Surgery pertinent to their field of expertise and request for privileges. Effective August 30, 2006, the American Osteopathic Association Boards (AOA) are considered equivalent to the American Board of Medical Specialties (AMBS) Boards for the purposes of credentialing and are accepted for membership and privileges. In the case of new applicants who are graduates from residency/fellowship programs and are board admissible, board certifications must be achieved within 5 years of completion of their residency/fellowship. Failure to achieve certification within the 5-year grace period will result in automatic termination of medical staff membership and clinical privileges at reappointment anniversary.

Board Recertification: Effective January 1, 2006, all new applicants who have completed residency in the year 2005 or after must comply with the re-certification requirements of their Board in their primary area of practice.

III: DEPARTMENTAL MEETINGS

The Department of Anesthesia shall hold regular meetings and be in accordance with the Medical Staff Bylaws, Article XII, in the conduct of these meetings.

IV: COMMITTEES

All committee activity necessary for supervision of activities of members of the departments and for quality improvement purposes will be conducted by all members of the department as members of the committee, or by subcommittees appointed by all members.

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Nominating Committee

This committee shall be formed as per Bylaws Article X; Section 3.

V. PROCEDURE TO AMEND OR REPEAL THE RULES AND REGULATIONS OF THE DEPARTMENT OF ANESTHESIA

The Rules and Regulations of the Department of Anesthesia may be amended or repealed at any regular meeting at which a quorum is present or at any special meeting on notice, by a 2/3 vote of the majority of those Active members of the department present.

The presence of 50% of the total number of Active members of the Department at any regular or special meeting shall constitute a quorum, for the purpose Of amending or repealing the Rules and Regulations of the department.

These Rules and Regulations may be amended or repealed after submission of a Proposal at any regular or special meeting of the department.

To be adopted, amendments and repeals shall require a quorum and a vote of the majority of the Active members present.

VI. CARE OF RELATIVES

As per the Medical Staff Rules and Regulations, no member of the Medical Staff shall serve as attending physician, perform procedures, or act as an official consultant for members of his or her immediate family at Shady Grove Medical Center.

VII. ANNUAL/BIANNUAL MEDICAL STAFF DUES

All medical staff members are required to pay annual medical staff dues (with the exception of Emeritus Status and Community Staff members). Please note there is no refund of medical staff dues.

VII. OTHER POLICIES AND PROCEDURES

All members of the Department of Anesthesia are members of First Colonies Anesthesia Associates (FCAA). FCAA maintains clinical Rules and Regulations outlining corporate guidelines for the administrative and clinical practice of Anesthesia based largely upon American Society of Anesthesia Standards and Guidelines. FCAA Policies and Procedures will be followed by Anesthesia Department members in administrative and clinical practice at SGMC. In the event an SGMC Medical Staff Rules and Regulations differs from an FCAA Policy and Procedure, the SGAH Rule or Regulation shall prevail.

APPROVED: 1/80; 4/27/11; 03/22/17

REVISED: 12/81; 3/83; 9/83; 12/88; 6/90; 5/91; 3/92; 5/92; 6/92; 10/96; 11/10/99; 12/2002; 3/28/07; 6/27/07