

DEPARTMENT OF FAMILY MEDICINE RULES AND REGULATIONS

I. Purpose

The Department of Family Medicine is organized for the purpose of securing the highest standards of medical care for patients hospitalized in the Shady Grove Adventist Hospital. Also, the Department of Family Medicine is organized for the purpose of supervising the professional activities of the physicians who attend patients, to assist and provide continuing professional education to the members of the department, to supervise and implement any proposed teaching program and to provide an organized and organizational relationship between this and other departments as well as its members in relation to the departments and the hospital in general.

The above purpose as well as all Rules and Regulations of the Department of Family Medicine are in accordance and superseded by the Bylaws of the Medical Staff of Shady Grove Adventist Hospital.

II. Organization of the Department

A. Eligibility

1. Physicians certified by the American Board of Family Medicine are eligible for membership in the Department of Family Medicine or
2. Who has satisfied all of the following criteria: (a) Has spent the immediately preceding three (3) years prior to making application for membership in the department, doing general medical practice. (b) The majority of the practice (item a) being provided in the service area of SGAH. (c) The applicant can satisfactorily demonstrate to the Executive Board of the Department of Family Medicine, i.e. Chair, vice Chair, that he/she can demonstrate a high level of competency in medical care delivery in the field of family medicine.
3. Physician who have graduated from an ACGME accredited Family Medicine Residency program within 36 months prior to making application. Applicants accepted into the Department under this criterion will be eligible only for provisional status; to advance to active status, they must pass the ABFM board certification examination, or
4. Physicians who have held unrestricted Family Medicine Department membership at any JCAHO accredited hospital for at least three of the past six years prior to making application. There must be no record of major or significant disciplinary action against the applicant by the hospital.
5. These requirements concern only applicants who apply for membership after January 1, 1997. All physicians who are members of the Department as of January 1997 may remain members regardless of the above criteria.

B. Selection of Members

Members are selected with duties and privileges defined according to the Bylaws of the Medical and Affiliate Staff of the Hospital.

Physicians who are members of the Department of Family Medicine who meet the above criteria will have their application either for Initial Appointment to the Medical Staff or for Reappointment reviewed by the Department Chair. Following this review, a recommendation will be forwarded to the Credentials Committee, the Medical Executive Committee, and the Governing Board for final action.

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C. Duties of Members

The Active Staff members of the Department of Family Medicine are responsible for the welfare of all service patients entrusted to their care. They also have the responsibility for performing all departmental organizational and administrative duties pertaining to the Medical Staff. The members are responsible for attendance and interaction at all assigned committees, attendance at departmental and Medical Staff meetings and effective interaction and teaching if so assigned in relation to a functioning teaching program. The members of the Active Staff are entitled to vote at all such meetings unless otherwise specified at any time by the Bylaws. Members of the Active Staff shall hold elective offices in the Department of Family Medicine as well as on the Medical Staff.

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

The Consulting Staff members shall not vote, hold office or serve on committees.

The Courtesy Staff members are not eligible to vote, hold office or be required to attend meetings or serve on committees. They are to have no assigned duties with the teaching program but may interact if invited.

The Emeritus Staff members are eligible to vote, hold office, serve on the Medical Staff and departmental committees and shall have assigned duties if they so desire.

The above delineation is in consonance with the Bylaws, Article IV, Section 1 through 6. They are to be superseded by any future amendments to the Bylaws. Attendance requirements are as specific in the Bylaws, Article XII, Section 5.

D. Emergency Room Call Schedule

The Department of Family Medicine does not have nor does it require an Emergency Room Call Schedule. However, members of the department may chose to participate in the Outpatient Referral Call Roster. Those members are required to provide an initial follow-up visit to all patients that are referred to them through the Emergency Room.

E. Appointment

Appointment and reappointment to the Department of Family Medicine and the Medical Staff in general are to be decided by the Credentials Committee and are to be operative as outlined in the Bylaws, Article V.

Appointment and Reappointment to the Department of Family Medicine and the Medical Staff in general are to be decided by Chair of the Department of Family Medicine, the Credentials Committee, and are to be operative 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 Family Medicine shall be elected annually by the members of the Active Staff of the department in accordance with the Bylaws, Article X, Section 3.

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1. Chair

The Chair of the Department of Family Medicine shall be a member of the Active Staff, who is qualified by training, experience and demonstrated leadership ability for the position. The Chair is to be elected for a one-year term and shall not be elected for more than five consecutive terms.

a. Duties of Officer:

The duties of the chair are as follows:

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 and be responsible for initiating and recording official correspondence to the Department of Family Medicine.

The Chair will be a member of all the departmental committees (except the Nominating Committee).

2. Vice Chair

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

H. Removal of Officers from their Position

An officer may be removed from his/her position in the Department of Family Medicine for cause. To remove this officer, three-quarters or more of the entire active staff of the department must vote for his or her removal for cause. A special election then will be held within 60 days of this vote to elect a new officer.

I. CME Requirements

Each member of the Department of Family Medicine fulfills the continuing medical education requirements as specified by the Maryland Board of Physician Quality Assurance 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. 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.

All new applicants must be board certified in their primary specialty within 5 years of completion of their residency.

If fellowship trained, the applicant must be board certified in their sub-specialty within 5 years of fellowship completion in order to practice that sub-specialty in this institution.

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.

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IV. Departmental Meetings

- A. The Department of Family Medicine shall hold regular bi-monthly meetings and be in accordance with the Medical Staff Bylaws, Article XIII, in the conduction of these meetings.
- B. The agenda of all regular staff meetings shall be:
1. call to order
 2. acceptance of minutes of regular and all special meetings
 3. old business
 4. committee reports
 5. new business
 6. review and analysis of clinical work of department
 7. adjournment
2. Agenda of any special meeting shall be as described in the Medical Staff Bylaws, Article XII, 6.b.
- C. Department members are encouraged to attend department meetings on a regular basis. These are held every two months. All the members of the department of Family Medicine must attend 50% of the department meetings per year to remain on Active staff.

V. 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.

A. Nominating Committee

This committee shall be formed of the following:

1. The two most immediate past Chair of the department of which the senior will be the Chair. If the immediate past chairmen are not available, the President of the Medical Staff may appoint suitable substitutes.
2. Three (3) Active Staff members of the department elected at the September departmental meeting.

The Nominating Committee shall meet and nominate one (1) Medical Staff member for each office in the department. These names will be circulated to the Active members of the Department at least four (4) weeks prior to the November meeting of the department, at which meeting, the election will be held.

Twenty percent (20%) of the Active Staff members of the department may place another name in nomination for any departmental office by petition presented to the Medical Staff Office no less than two (2) weeks prior to the date of the election.

Thereafter, the nominations shall be closed. The names of the members of the staff so nominated shall be posted and circulated to the Active Staff members of the department no less than ten (10) days prior to election.

VI. Procedure to Amend or Repeal the Rules and Regulations

The Rules and Regulations of the Department of Family Medicine may be amended or repealed at any regular meeting at which a quorum is present or at any special meeting on notice, by a 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.

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VII. Care of Relatives

Members of the Department of Family Medicine will not be allowed to admit first degree relatives (defined as a parent, sibling, child or spouse).

This regulation does not prohibit a family practitioner from caring for a family member as an outpatient or ordering outpatient studies; nor does it prohibit the family practitioner from consulting on a family member.

VIII. Medical Staff Dues

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

Revised: 2/86; 9/87; 7/90; 4/91; 11/10/99; 10/19/00; 8/25/04; 11/29/06; 3/28/07; 6/27/07; 02.23.11; 8.22.12; 2/28/18