



*Board of Directors  
Meeting Agenda Packet*

*October 14, 2024*



## *Board of Directors*

Jeffrey D. Griffith, EMT-P, Chair  
Michael Pacheco, Vice Chair  
Laura Barry, Treasurer  
Theresa Corrales, RN, Secretary  
John Clark, Director  
Laurie Edwards-Tate, MS, Director  
Linda Greer, RN, 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](http://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  
Friday,  
October 11, 2024

# BOARD OF DIRECTORS

## Meeting Agenda

Monday, October 14, 2024

6:30 p.m.

PLEASE SEE PAGE 3 OF AGENDA 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
	<b>CALL TO ORDER</b>			6:30
1.	<b>ESTABLISHMENT OF QUORUM</b>	2		6:32
2.	<b>OPENING CEREMONY</b>	3		6:35
	a. Pledge of Allegiance to the Flag			
3.	<b>PUBLIC COMMENTS<sup>1</sup></b>	30		7:05
4.	<b>PRESENTATIONS – <i>Informational Only</i></b>	15		7:20
	a. Physician Introduction			
	b. Health Equity, Diversity and Inclusion (HEDI) Data			
5.	<b>APPROVAL OF MINUTES (ADD A)</b>	5		7:25
	a. Board of Directors Meeting – Monday, September 9, 2024 (Pp 7-14)			
	b. Special Closed Session Board of Directors Meeting – Monday, September 9, 2024 (Pp 15-16)			
	c. Special Session Board of Directors Meeting – Monday, September 30, 2024 (Pp 17-19)			
6.	<b>APPROVAL OF AGENDA</b> to accept the Consent Items as listed (ADD B)	5		7:30
	a. Palomar Medical Center Escondido Medical Staff Credentialing and Reappointments (Pp 21-23)		2	
	b. Palomar Medical Center Poway Medical Staff Credentialing and Reappointments (Pp 24-28)		3	
	c. Radiology Clinical Privilege Checklist – Palomar Medical Centers Escondido and Poway (Redline Pp 29-38, Clean Pp 39-47)		4	
	d. Vascular Surgery Clinical Privilege Checklist – Palomar Medical Center Escondido (Redline Pp 48-52, Clean Pp 53-56)		5	
7.	<b>REPORTS – <i>Informational Only</i></b>			
	<b>a. Medical Staff</b>			
	I. Palomar Medical Center Escondido – Kanchan Koirala, MD	5		7:35
	II. Palomar Medical Center Poway – Sam Filiciotto, MD	5		7:40
	<b>b. Administration</b>			
	I. President and CEO – Diane Hansen	5		7:45
	II. Chair of the Board – Jeff Griffith, E.M.T.-P.	5		7:50

<b>8.</b>	<b>APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS and OTHER ACTIONS (ADD C)</b>	5		7:55
	a. Board Agenda Creation (Policy 63352) <i>(Redline Pp 58, Clean Pp 59)</i>	Governance		
<b>9.</b>	<b>BOARD COMMITTEES – Informational Only (ADD D)</b>	5		8:00
	a. Audit & Compliance Committee – Michael Pacheco, Committee Chair			
	b. Community Relations Committee – Terry Corrales, Committee Chair			
	c. Finance Committee – Laura Barry, Committee Chair			
	d. Governance Committee – Jeff Griffith, Committee Chair <i>(Pp 61)</i>			
	e. Human Resources Committee – Terry Corrales, Committee Chair			
	f. Quality Review Committee – Linda Greer, Committee Chair			
	g. Strategic & Facilities Planning – Michael Pacheco, Committee Chair			
<b>FINAL ADJOURNMENT</b>				8:00

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

<sup>1</sup> 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  
1<sup>st</sup> 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: 277 524 122 999

Passcode: mKfVNs

or

Dial in using your phone at 929.352.2216; Access Code: 365 445 192#<sup>1</sup>

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

<sup>1</sup> *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

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## Policy: Public Comments and Attendance at Public Board Meetings

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### **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. 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.

**(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

[https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:21790\\$9](https://www.lucidoc.com/cgi/doc-gw.pl?ref=pphealth:21790$9).

# 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, submit your request by doing the following:

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

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:** October 14, 2024

**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  
September 2024**

**TO:** Board of Directors

**MEETING DATE:** Monday, October 14, 2024

**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 Centers Escondido and Poway  
Medical Staff Privilege Checklist**

**TO:** Board of Directors

**MEETING DATE:** October 14, 2024

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

**Background:** Revised Radiology Core Privilege Checklist: Redlined and final versions attached. See revision on page 8. Has been to all applicable committees.

**Budget Impact:** None.

**Staff Recommendation:** Recommend Approval

**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:** October 14, 2024

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

**Background:** Revised Vascular Surgery Core Privilege Checklist:  
Redlined and final versions attached. Has been to all  
applicable department meetings. (Applies to PMC  
Escondido only.)

**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, September 9, 2024*

*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, September 6, 2024, which is consistent with legal requirements.

**CALL TO ORDER**

The meeting, which was held at the Palomar Medical Center Escondido, First Floor Conference Room at 2185 Citracado Parkway, Escondido, CA. 92029, and called to order at 6:30 p.m. by Board Chair Jeff Griffith.

**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.

Agenda Item

- Discussion

Conclusion / Action /Follow Up

**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

**3. PUBLIC COMMENTS**

- Marcelle Voorhies Rossman
- Dr. Joe Muga

**4. PRESENTATIONS**

- a. Patient Experience Video

- Omar Khawaja, M.D., Chief Medical Officer, introduced the grateful patient video.

*Agenda Item*

- *Discussion*

*Conclusion / Action /Follow Up*

**5. APPROVAL OF MINUTES**

- a. Board of Directors Meeting - Monday, August 12, 2024

**MOTION:** By Director Edwards-Tate, 2<sup>nd</sup> by Director Barry and carried to approve the Monday, August 12, 2024, Board of Directors Meeting minutes with revisions.

Roll call voting was utilized.

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

Chair Griffith announced that seven board members were in favor. None opposed. No abstention. None absent.  
Motion approved.

- Director Michael Pacheco noted two corrections, page 8 and 11 of the information packet. Revisions will be made.

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 Medical Center Poway Medical Staff Credentialing and Reappointments
- c. Annual Adoption of Statement of Investment

**MOTION:** By Director Barry, 2<sup>nd</sup> by Director Pacheco and carried to approve Consent Agenda items a through c as presented.

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

- Director John Clark sought clarification on when to inquire about an agenda item. It was determined agenda item 8b was appropriate by Kevin DeBruin, Chief Legal Officer.

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



*Board of Directors Meeting Minutes – Monday, September 9, 2024*

*Agenda Item*

- *Discussion*

*Conclusion / Action /Follow Up*

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

II. Chair of the Board

Palomar Health Chair of the Board Jeff Griffith provided a verbal report to the Board of Directors.

**8. APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS and OTHER ACTIONS**

- a. Policy: Oath of Office (21798)

**MOTION:** By Director Pacheco, 2<sup>nd</sup> by Director Corrales and carried to approve Oath of Office (21798) as presented.

Roll call voting was utilized.

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

Chair Griffith announced that six board members were in favor. None opposed. One abstention. None absent.

Motion approved.

- No discussion

Agenda Item

<ul style="list-style-type: none"> <li>Discussion</li> </ul>	Conclusion / Action /Follow Up
b. Policy: Board Agenda Creation (21809)	<p><b>MOTION:</b> By Director Barry, 2<sup>nd</sup> by Director Corrales and carried to approve Board Agenda Creation (21809) as presented.</p> <p>Roll call voting was utilized.                      Director Barry – aye            Director Greer – aye                      Director Clark – no            Director Griffith – aye                      Director Corrales – aye        Director Pacheco – aye                      Director Edwards-Tate – abstain</p> <p>Chair Griffith announced that Five board members were in favor. One opposed. One abstention. None absent.                      Motion approved.</p> <p><b>MOTION:</b> By Director Pacheco, 2<sup>nd</sup> by Director Edwards-Tate and carried to return Board Agenda Creation (21809) policy be revisited by the Board Governance Committee.</p> <p>Roll call voting was utilized.                      Director Barry – aye            Director Greer – aye                      Director Clark – aye            Director Griffith – aye                      Director Corrales – aye        Director Pacheco – aye                      Director Edwards-Tate – aye</p> <p>Chair Griffith announced that seven board members were in favor. None opposed. No abstention. None absent.                      Motion approved.</p>
<ul style="list-style-type: none"> <li>Director John Clark sought clarification of the section III,2. Board discussion ensued.</li> <li>Policy as approved stands, second motion requesting Board Governance Committee revisit the policy based on discussion.</li> </ul>	

*Board of Directors Meeting Minutes – Monday, September 9, 2024*

*Agenda Item*

<ul style="list-style-type: none"><li><i>Discussion</i></li></ul>	<i>Conclusion / Action /Follow Up</i>
<ul style="list-style-type: none"><li>c. Policy: Annual Statement of Investment (27092)</li></ul>	<p><b>MOTION:</b> By Director Barry, 2<sup>nd</sup> by Director Pacheco and carried to approve Annual Statement of Investment (27092) as presented.</p> <p>Roll call voting was utilized.</p> <p>Director Barry – aye            Director Greer – aye Director Clark – aye         Director Griffith – aye Director Corrales – aye     Director Pacheco – aye Director Edwards-Tate – abstain</p> <p>Chair Griffith announced that seven board members were in favor. None opposed. One abstention. None absent.</p> <p>Motion approved.</p>
<ul style="list-style-type: none"><li>No discussion</li></ul>	
<b>9. COMMITTEE REPORTS</b> <i>(information only unless otherwise noted)</i>	
a. Audit and Compliance Committee	
<ul style="list-style-type: none"><li>Committee Chair Michael Pacheco reported the committee summary is included in the board-meeting packet.</li></ul>	
b. Governance Committee	
<ul style="list-style-type: none"><li>Committee Director Laura Barry reported the committee summary is included in the board-meeting packet.</li></ul>	
<b>FINAL ADJOURNMENT</b>	
<ul style="list-style-type: none"><li>There being no further business, Chair Jeff Griffith adjourned the meeting at 7:34 p.m.</li></ul>	

*Board of Directors Meeting Minutes – Monday, September 9, 2024*

*Agenda Item*

- Discussion*

*Conclusion / Action /Follow Up*

Signatures:

Board Secretary

\_\_\_\_\_  
Terry Corrales, R.N.

Board Assistant

\_\_\_\_\_  
Carla Albright

DRAFT

SPECIAL CLOSED SESSION BOARD OF DIRECTORS MINUTES – MONDAY, SEPTEMBER 9, 2024	
AGENDA ITEM	CONCLUSION / ACTION
<ul style="list-style-type: none"> <li>DISCUSSION</li> </ul>	
<b>NOTICE OF MEETING</b>	
<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, September 5, 2024, which is consistent with legal requirements.</p>	
<b>I. CALL TO ORDER</b>	
<p>The meeting, which was held in the Palomar Medical Center Escondido, First Floor Conference Center, 2185 Citracado Parkway, Escondido, CA. 92029, and virtually, was called to order at 5:31 p.m. by Chair Jeff Griffith.</p>	
<b>II. ESTABLISHMENT OF QUORUM</b>	
<p>Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Greer, Griffith, and Pacheco Absences: None</p>	
<b>III. PUBLIC COMMENTS</b>	
<p>There were no public comments.</p>	

**IV. ADJOURNMENT TO CLOSED SESSION**

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

b. Pursuant to California Government Code § 54956.9 — CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION — Case name(s) unspecified because disclosure would jeopardize existing settlement negotiations or result in other prejudice to the position of the District

**V. RE-ADJOURNMENT TO OPEN SESSION**

**VI. ACTION RESULTING FROM CLOSED SESSION – IF ANY**

No action.

**VII. FINAL ADJOURNMENT**

There being no further business, Chair Jeff Griffith adjourned the meeting at 6:04 p.m.

**SIGNATURES:**

**BOARD SECRETARY**

\_\_\_\_\_  
Terry Corrales, R.N.

**BOARD ASSISTANT**

\_\_\_\_\_  
Carla Albright

SPECIAL SESSION BOARD OF DIRECTORS MINUTES – MONDAY, SEPTEMBER 30, 2024	
AGENDA ITEM	CONCLUSION / ACTION
<ul style="list-style-type: none"> <li>DISCUSSION</li> </ul>	
<b>NOTICE OF MEETING</b>	
<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, September 27, 2024, which is consistent with legal requirements.</p>	
<b>I. CALL TO ORDER</b>	
<p>The meeting, which was held in the Palomar Medical Center Escondido, First Floor Conference Center, 2185 Citracado Parkway, Escondido, CA. 92029, and virtually, was called to order at 3:03 p.m. by Board Chair Jeff Griffith.</p>	
<b>II. ESTABLISHMENT OF QUORUM</b>	
<p>Quorum comprised of Directors Barry, Clark, Corrales, Edwards-Tate, Greer, Griffith, Pacheco</p> <p>Absences:</p>	
<b>III. PUBLIC COMMENTS</b>	
<p>None</p>	

<b>IV. ADJOURNMENT TO CLOSED SESSION</b>	
a. Pursuant to California Government Code § 54956.9 — CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION — Case name(s) unspecified because disclosure would jeopardize existing settlement negotiations or result in other prejudice to the position of the District	
b. Pursuant to California Government Code § 54956.9 — CONFERENCE WITH LEGAL COUNSEL—EXISTING LITIGATION — Case name(s) unspecified because disclosure would jeopardize existing settlement negotiations or result in other prejudice to the position of the District	
c. Pursuant to California Government Code § 54956.9(d)(2)—CONFERENCE WITH LEGAL COUNSEL—ANTICIPATED LITIGATION—Significant exposure to litigation pursuant to paragraph (2) or (3) of subdivision (d) of Section 54956.9: One (1) potential case	
<b>V. RE-ADJOURNMENT TO OPEN SESSION</b>	
<b>VI. ACTION RESULTING FROM CLOSED SESSION – IF ANY</b>	
None	
<b>VII. APPROVAL OF BYLAWS, CHARTERS, RESOLUTIONS AND OTHER ACTIONS</b>	
a. Resolution 09.30.24(01)-19 of the Board of Directors of Palomar Health Authorizing and Approving Certain Amendments to the Bylaws of Arch Health Partners, Inc.	<p><b>MOTION:</b> By Director Pacheco, 2<sup>nd</sup> by Director Corrales and carried to approve Resolution 09.30.24(01)-19 of the Board of Directors of Palomar Health Authorizing and Approving Certain Amendments to the Bylaws of Arch Health Partners, Inc.</p> <p>Roll call voting was utilized.</p> <p>Director Barry – aye                      Director Greer – aye  Director Clark – abstain              Director Griffith – aye  Director Corrales – aye              Director Pacheco – aye  Director Edwards-Tate – aye</p> <p>Chair Griffith announced that six board members were in favor. None opposed. One abstention. None absent.</p> <p>Motion approved.</p>



No discussion

**VIII. FINAL ADJOURNMENT**

There being no further business, Chair Jeff Griffith adjourned the meeting at 4:39 p.m.

**SIGNATURES:**

**BOARD SECRETARY**

\_\_\_\_\_  
Terry Corrales, R.N.

**BOARD ASSISTANT**

\_\_\_\_\_  
Carla Albright

# ADDENDUM B

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

October 8, 2024

To: Palomar Health Board of Directors

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

Board Meeting Date: October 14, 2024

Subject: Palomar Medical Center Escondido Credentialing Recommendations

Provisional Appointment (10/14/2024 – 09/30/2026)

Benedict, Matthew, M.D. – Teleradiology  
Borjon Jr., Agustin, M.D. – Vascular Surgery  
Delgado, Paul A., M.D. – Anesthesiology  
Fife, William C., M.D. – Teleradiology  
Haak, Logan M., M.D. – Ophthalmology  
Hamilton, Ross M., M.D. – Neurology  
Hansen, Scott E., M.D. – OB/GYN  
Hirshman, Brian R., M.D. – Neurosurgery  
Keleshian, Hagop J., D.O. – Family Practice  
Le, Jeremy, M.D. – Vascular Surgery  
Leach, Matthew E., M.D. – Otolaryngology  
Nakhaima, Selasi M., M.D. – Teleradiology  
Parida, Akash, D.O. – Internal Medicine  
Reen, Sandeep, M.D. – Family Practice  
Rohrer, Rebecca J., M.D. – Teleradiology  
Shapiro, Boris, D.O. – Teleradiology  
Wong Wah J., D.O. – Internal Medicine

Advance from Provisional to Active Category

Phan, Hoa, DO- Hospice & Palliative Medicine- Dept. of Medicine (11/01/2024 to 05/31/2025)  
West, Julie E., M.D.- Neonatal-Perinatal Medicine- Dept. of Pediatrics (11/01/2024 to 08/31/2026)  
Yoshii-Contreras, June, MD- Neurology- Dept. of Medicine (11/01/2024 to 06/30/2025)

Voluntary Resignations

Hobart, Edward A., M.D. – Teleradiology, eff 08/28/2024

Hull, Andrew D., M.D. – OB/GYN, eff 06/30/2024

Magesh, Jayanthi, M.D. – Internal Medicine, eff 10/31/2024

Patel, Bhavesh B., D.O. – Internal Medicine, eff 11/01/2024

Spencer, Mary, MD- Pediatrics, Eff. 11/01/2024

Allied Health Professional Appointment (effective 10/14/2024 to 09/30/2026)

Hagen, Sarah M., PA – Neonatal (Sponsor: Dr. Nabil Fatayerji for Rady Children’s)

Harding, Katelyn A., PA-C – (Sponsor: Dr. Julian Anthony, Dr. Jared Brummel, Dr. Kevin Owsley, Dr. Ramin Sorkhi for PHMG)

Hogg, Megan E., PA-C – Emergency Medicine (Sponsor: Dr. Jordan Cohen)

Allied Health Professional Resignations

Witt, Kendra R., PA-C, eff. 08/09/2024

Request for 2 Year Leave of Absence

O’Neil III, James, M.D. – Anesthesiology, 2 years (effective 09/17/2024 – 09/16/2026)

PALOMAR MEDICAL CENTER ESCONDIDO RECOMMENDATIONS FOR REAPPOINTMENT

Reappointment effective 11/01/2024 to 09/30/2026

Jennings-Nunez, Chasity D., MD.      OB/GYN                                      OB/GYN                                      Courtesy

Reappointment effective 11/01/2024 to 04/30/2026)

Lin, Yuan, MD                                      Surgery, Cardiothoracic                      Dept. of Surgery                              Active

Reappointments (effective 11/01/2024 to 10/31/2026)

Andrews, Laura, MD	Emergency Medicine	Dept. of Emergency Med.	Active
Bailey, Timothy, MD	Endocrin/Internal Med	Dept. of Medicine	Active
Chelimilla, Haritha, MD	Gastro/Internal Med	Dept. of Medicine	Active
D’Auria, Andrea, DO	Pathology	Dept. of Pathology	Active
Hanna, Karen, MD	Surgery, General	Dept. of Surgery	Active*
*Category change from Courtesy to Active			
Hawkins, Melissa, MD	Obstetrics and Gyn	Dept. of OB/GYN	Active
Hwang, Janice, MD	Diagnostic Radiology	Dept. of Radiology	Active
Iyengar, Srinivas, MD	Ophthalmology	Dept. of Surgery	Courtesy
Kato, Kambrie, MD	Diagnostic Radiology	Dept. of Radiology	Active
Knutson, Thomas, MD	Orthopedic surgery	Dept. of Ortho Surg/Rehab	Active
Le, Crystal, MD	Neonatal-Perinatal	Dept. of Pediatrics	Courtesy
Morris, Jason, DPM	Podiatry	Dept. of Surgery	Active
Mumtaz, Seemal, MD	Surgery, Cardiothoracic	Dept. of Surgery	Courtesy
Neyaz, Mohammed, DO	Nephrology	Dept. of Medicine	Active
Palanca, Ariel, MD	Orthopedic Surgery	Dept. of Surgery	Active
Podstreleny, Stjepan S., DD	Surgery, Oral & Maxill.	Dept. of Surgery	Affiliate
Puckett, James L., MD	Emergency Medicine	Dept. of Emergency Med.	Active
Roeder, Zachary S., MD	Diagnostic Radiology	Dept. of Radiology	Active
Singh Jr., Teja, MD	Internal Medicine	Dept. of Medicine	Affiliate

Allied Health Professional Reappointments (effective 11/01/2024 to 10/31/2026)

Amador, Jodi, NNP	Neonatal Nurse Practitioner	(Sponsor: Dr. Fatayerji for Rady Children’s)
Belanger, Tanya M., CNM	Nurse Midwife	(Sponsor: Dr. Duncan for OBHG)
Chatfield, Alexandra J., PA-C	Physician Assistant	(Sponsors: Dr. B. Cohen & Dr. Sharp for PHMG-Ortho)
Harris, Monika, FNP	Family Nurse Practitioner	(Sponsor: Dr. Bayat for PHMG- Heart Vascular)
Kelly, Katherine M., CNM	Nurse Midwife	(Sponsor: Dr. Duncan for OBHG)
McQueen, Paula S., CNM	Nurse Midwife	(Sponsor: Dr. Duncan for OBHG)
Prasek, Lauren M., PNP	Psychiatric Nurse Practitioner	(Sponsor: Dr. Keri for SMA)
Stirling, Aaron J., NP	Emergency Nurse Practitioner	(Sponsor: Dr. Friedberg for EMA)

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: October 8, 2024  
To: Palomar Health Board of Directors – October 14, 2024 Meeting  
From: Sam Filiciotto, M.D., Chief of Staff, PMC Poway Medical Staff  
Subject: Medical Staff Credentials Recommendations – September, 2024

Provisional Appointments: (10/14/2024 – 09/30/2026)

Matthew Benedict, M.D., Teleradiology  
Agustin Borjon Jr., M.D., Vascular Surgery  
Paul Delgado, M.D., Anesthesiology  
William Fife, M.D., Teleradiology  
Logan Haak, M.D., Ophthalmology  
Ross Hamilton, M.D., Neurology  
Hagop Keleshian, D.O., Family Practice  
Jeremy Le, M.D., Vascular Surgery  
Matthew Leach, M.D., Otolaryngology  
Selasi Nakhaima, M.D., Teleradiology  
Akash Parida, D.O., Internal Medicine  
Sandeep Reen, M.D., Family Practice  
Rebecca Rohrer, M.D., Teleradiology  
Boris Shapiro, D.O., Teleradiology  
Wah Wong, D.O., Internal Medicine

Biennial Reappointments: (11/01/2024 - 10/31/2026)

Laura Andrews, M.D., Emergency Medicine, Active  
Haritha Chelimila, M.D., Gastroenterology, Active  
Andrea D'Auria, D.O., Pathology, Active  
Karen Hanna, M.D., General Surgery, Active  
Janice Hwang, M.D., Teleradiology, Active  
Srinivas Iyengar, M.D., Ophthalmology, Courtesy  
Kambrie Kato, M.D., Teleradiology, Active  
Louis Maletz, M.D., Family Practice, Affiliate  
Jason Morris, D.P.M., Podiatry, Courtesy (Includes The Villas at Poway)  
Mohammed Neyaz, D.O., Nephrology, Active  
Ariel Palanca, M.D., Orthopedic Surgery, Active  
Stjepan Podstreleny, D.D.S., Oral and Maxillofacial Surgery, Affiliate  
James Puckett, M.D., Emergency Medicine, Active  
Zachary Roeder, M.D., Teleradiology, Active

Teja Singh Jr., M.D., Internal Medicine, Affiliate (The Villas at Poway only)

Advancements to Active Category:

Hoa Phan, D.O., Palliative Care, effective 11/01/2024 – 05/31/2025 (Includes The Villas at Poway)

June Yoshii-Contreras, M.D., Neurology, effective 11/01/2024 – 06/30/2025

Requests for 2 Year Leave of Absence:

Sonal Khattri, M.D., Pediatrics, effective 08/29/2024 – 08/28/2026

James O'Neil, M.D., Anesthesiology, effective 09/17/2024 – 09/16/2026

Voluntary Resignations:

Arthur Kaminski, M.D., Emergency Medicine, effective 08/01/2024

Crystal Le, M.D., Neonatology, effective 09/06/2024

Jane O'Donnell, M.D., Pediatrics, effective 09/11/2024

Mary Spencer, M.D., Pediatrics, effective 10/31/2024

Julie West, M.D. Pediatrics, effective 08/27/2024

Allied Health Professional Appointments: (10/14/2024 – 09/30/2026)

Katelyn Harding, PA, Sponsors Drs. Anthony, Brummel, Owsley, and Sorkhi

Megan Hogg, PA, Sponsor Dr. Jordan Cohen

Allied Health Professional Reappointments: (11/01/2024 - 10/31/2026)

Alexandra Chatfield, PA, Sponsors Drs. Cohen, Sharp

Monika Harris, FNP, Sponsor Dr. Bayat

Lauren Prasek, PNP, Sponsor Dr. Keri (Includes The Villas at Poway)

Aaron Stirling, NP, Sponsor Dr. Friedberg

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.

## Provider Profiles



**Benedict, Matthew D., MD**

Status: Applicant  
Specialty: Diagnostic Radiology



**Borjon Jr, Agustin, MD**

Status: Temporary Privileges  
Specialty: Vascular Surgery



**Delgado, Paul A., MD**

Status: Temporary Privileges  
Specialty: Anesthesiology



**Fife, William C., MD**

Status: Applicant  
Specialty: Diagnostic Radiology



**Haak, Logan M., MD**

Status: Temporary Privileges  
Specialty: Ophthalmology



**Hagen, Sarah M., PA**

Status: Applicant  
Specialty: Physician Assistant



**Hamilton, Ross M., MD**

Status: Applicant  
Specialty: Neurology



## Provider Profiles



**Hansen, Scott E., MD**

Status: Temporary Privileges  
Specialty: Obstetrics and  
Gynecology



**Harding, Katelyn A., PA-C**

Status: Applicant  
Specialty: Physician Assistant



**Hirshman, Brian R., MD**

Status: Temporary Privileges  
Specialty: Neurosurgery



**Hogg, Megan E., PA-C**

Status: Temporary Privileges  
Specialty: Physician Assistant



**Keleshian, Hagop J., DO**

Status: Temporary Privileges  
Specialty: Family Practice



**Le, Jeremy, M.D.**

Status: Temporary Privileges  
Specialty: Surgery, General  
Specialty2: Vascular



**Leach, Matthew E., MD**

Status: Temporary Privileges  
Specialty: Otolaryngology

## Provider Profiles



**Nakhaima, Selasi M., MD**

Status: Temporary Privileges  
Specialty: Diagnostic Radiology



**Parida, Akash, DO**

Status: Applicant  
Specialty: Internal Medicine



**Reen, Sandeep, MD**

Status: Applicant  
Specialty: Family Practice



**Rohrer, Rebecca J., MD**

Status: Applicant  
Specialty: Diagnostic Radiology



**Shapiro, Boris, DO**

Status: Temporary Privileges  
Specialty: Diagnostic Radiology



**Wong, Wah J., DO**

Status: Applicant  
Specialty: Internal Medicine

**PALOMAR HEALTH**

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

*If any privileges are covered by an exclusive contract or an employment contract, practitioners who are not a party to the contract are not eligible to request the privilege(s), regardless of education, training, and experience. Exclusive or employment contracts are indicated by [EC].*

**Applicant:** Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital 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 DIAGNOSTIC RADIOLOGY [EC]**

**To be eligible to apply for core privileges in diagnostic radiology, 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 diagnostic radiology.

AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to certification in radiology by the American Board of Radiology or the American Osteopathic Board of Radiology, or another board with equivalent requirements.

**Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance and interpretation of an adequate volume of radiologic tests or procedures, reflective of the scope of privileges requested, 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:** For diagnostic radiology, at least 25 cases (representative of the scope of privileges requested) will be retrospectively reviewed. At least ten (10) procedures will be monitored reflective of the scope of privileges requested.

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

Page 2

Effective From: \_\_\_\_\_ To: \_\_\_\_\_

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

Current demonstrated competence and an adequate volume of experience (radiologic tests or 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. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

**CORE PRIVILEGES**

**DIAGNOSTIC RADIOLOGY CORE PRIVILEGES [EC]**

- Requested** Perform general diagnostic radiology to diagnose and treat diseases of patients of all ages. 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.

**TELERADIOLOGY CORE PRIVILEGES [EC]**

**Criteria:** As for Diagnostic Radiology Core

- Requested** Perform general diagnostic radiology to diagnose diseases of patients of all ages via a teleradiography link. 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.

**QUALIFICATIONS FOR VASCULAR AND INTERVENTIONAL RADIOLOGY [EC]**

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

Successful completion of an ACGME or AOA accredited residency in diagnostic radiology followed by completion of a one year accredited fellowship in vascular and interventional radiology.

OR

Successful completion of an ACGME or AOA accredited residency in interventional radiology.

AND

Current subspecialty certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to subspecialty certification in vascular and interventional radiology or diagnostic radiology and interventional radiology by the American Board of Radiology or by the American Osteopathic Board of Radiology, or another board with equivalent requirements.

**Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance of at least 100 vascular and interventional radiology procedures, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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***Focused Professional Practice Evaluation (FPPE)/ Monitoring guidelines:*** At least ten (10) procedures will be monitored reflective of the scope of privileges requested.

***Reappointment Requirements:*** To be eligible to renew core privileges in vascular and interventional Radiology, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and 200 VIR 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. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. In addition, continuing education related to VIR should be required.

**CORE PRIVILEGES**

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**VASCULAR AND INTERVENTIONAL RADIOLOGY CORE PRIVILEGES [EC]**

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- Requested** Admit, evaluate, diagnose, treat patients of all ages by percutaneous methods guided by various radiologic imaging modalities. 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.

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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**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 COMPUTED TOMOGRAPHY ANGIOGRAM (CTA) (EC)**

**Criteria:** Successful completion of: an ACGME or AOA accredited post graduate training program in radiology, or nuclear medicine<sup>1</sup>. If the applicant’s postgraduate program did not include cardiac CT angiography training, applicants must demonstrate that they have successfully completed a formal course in cardiac CT which included CT angiography and proctored initial cases. **Required Previous Experience:** Demonstrated current competence and evidence of having supervised and interpreted 10 exams in the past 12 months or completion of training in the past 12 months. **FPPE:** 5 cases must be monitored. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 exams based on results of ongoing professional practice evaluation and outcomes in the past 24 months.

Requested

**SPINAL INTERVENTIONAL RADIOLOGY TO INCLUDE: PERCUTANEOUS VERTEBROPLASY, BALLOON VERTEBROPLASTY (KYPHOPLASTY), SPINAL BIOPSY, PLACEMENT OF SPINAL CORD STIMULATOR AND PERCUTANEOUS LUMBAR DISCECTOMY (EC)**

**Criteria:** Successful completion of an ACGME or AOA-accredited post graduate training program that included training and experience in percutaneous spinal interventional procedures OR The applicant must show completion of an approved course in kyphoplasty/vertebroplasty that is (a minimum of 7 hours) which included didactic and laboratory training. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 5 spinal interventional procedures in the past 12 months. **FPPE:** 3 cases must be monitored concurrently. **Maintenance of Privilege:** Applicant must be able to demonstrate maintenance of competence by evidence of the performance of at least 10 spinal interventional procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

<sup>1</sup> Other specialties involved include cardiovascular disease.  
PMCE MEC 09/30/2024  
PMCP MEC 09/24/2024  
Dept of Radiology 09/10/2024  
Board of Directors 07/08/2019

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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**ENDOVASCULAR SURGICAL NEURORADIOLOGY (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)**

**Criteria:** Successful completion of an ACGME or AOA-accredited post graduate training program in Diagnostic Radiology, which included four years of experience, training and supervision in Diagnostic Neuroimaging and completion of a fellowship in Interventional Neuroradiology. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 25 Endovascular Surgical Neuroradiology procedures in the past 12 months. **FPPE:** 3 cases must be monitored concurrently. **Maintenance of Privilege:** Applicant must be able to demonstrate maintenance of competence by evidence of the performance of at least 50 Endovascular Surgical Neuroradiology procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

**ACUTE STROKE THERAPY (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)**

**Criteria:** Successful completion of a six month ACGME or AOA-accredited formal neuroscience training including: neuroanatomy, neuropathology, neurovascular imaging, and cerebrovascular hemodynamics. This training is included in Neurology, Neurosurgery, and Diagnostic Radiology or Interventional Radiology Residency programs. Other training programs would require six months of additional neuroscience training with documentation of completion AND successful completion of an Interventional Radiology or Neurointerventional Fellowship training program that included at least one year of interventional training. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 5 endovascular stroke cases (with acceptable outcomes) in the past 12 months. **FPPE:** First 5 cases must be monitored concurrently. **Maintenance of Privilege:** Applicant must be able to demonstrate maintenance of competence by evidence of the performance of at least 10 endovascular stroke treatments performed in the past 24 month period, or if 10 cases not performed, an additional 2 monitored cases are required.

Requested

**RADIOLOGY CLINICAL PRIVILEGES**

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**ADMINISTRATION OF SEDATION AND ANALGESIA**

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



**RADIOLOGY 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.

**Diagnostic Radiology**

- Arthrography
- Bone Denistometry
- Computed tomography (CT) and computed tomography angiogram (CTA) of the head, neck, spine, body, chest, extremity, CT guided biopsy and drainage procedures (excluding cardiac)
- Diagnostic nuclear medicine of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and associated procedures.
- Image guided biopsy and cyst aspiration
- Magnetic resonance imaging (MRI) and magnetic resonance (MRA) of the head, neck, spine, body, chest, extremity, and major joints-shoulder, knee, ankle, etc.
- Mammography
- Myelography
- Nuclear Medicine
- Pulse volume recordings
- Routine imaging, e.g., interpretation of plain films, intravenous or retrograde pyelography, fluoroscopy chest/abdomen, pelvis/gastrointestinal and genitourinary diagnostic and therapeutic procedures
- Spinal puncture, lumbar
- Stereotactic core cut breast biopsy
- Ultrasound (including carotid duplex u/s)

**Teleradiology**

- Computed tomography of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures
- Diagnostic nuclear medicine of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and associated procedures.
- Magnetic resonance imaging (MRI) of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and muscular skeletal structures etc
- Routine imaging, e.g., interpretation of plain films
- Ultrasound (including carotid duplex u/s)

**RADIOLOGY CLINICAL PRIVILEGES**

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**CORE PROCEDURE LIST (CONTINUED)**

*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.

**Nuclear Medicine**

- Interpret the results of diagnostic examinations of patients using unsealed radionuclides and radiopharmaceuticals.
- Perform history and physical exam
- Performance of radioimmunoassay examinations and management of radioactively contaminated patients and facilities.
- Supervise the preparation, administration and the use of unsealed radionuclides and radiopharmaceuticals for diagnostic examinations of patients.
- Supervise the preparation, administration and use of unsealed radionuclides for therapeutic purposes.

**Vascular and Interventional Radiology**

- Angiography, peripheral angioplasty, to include venography of all body parts excluding heart
- Angioplasty, carotid, vertebral, intracerebral, intracranial
- Atherectomy including laser or mechanical
- Cavernous sinus sampling
- **Carotid stenting**
- Carotid test occlusion/carotid occlusion
- Central venous access
- Cisternography
- Embolization of cerebral, cranial, head, neck and spinal tumors
- Endovascular repair of thoracic and abdominal aortic aneurysm in conjunction with qualified surgeon
- Integrating endovascular therapy into the clinical management of patients with neurological diseases (or diseases of the central nervous system) when performing diagnostic and therapeutic procedures
- Interpreting diagnostic studies
- Intra-arterial thrombolytic therapy
- Intra-cranial/Intra-arterial chemotherapy
- Intravenous thrombolytic therapy
- Neuro interventional procedures for pain including epidural steroid injection, nerve blocks and discography
- Non vascular interventional procedure, including biopsy, abscess and fluid drainage, nephrostomy, biliary procedures
- Participating in short-term and long-term postprocedure follow-up care, including neurointensive care
- Percutaneous needle aspiration of palpable masses
- Percutaneous procedures
- Perform history and physical exam
- Peripheral arterial intervention including angioplasty, stent graft placement, atherectomy, and stent placement
- Placement of vena cava filter

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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**CORE PROCEDURE LIST (CONTINUED)**

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*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.

**Vascular and Interventional Radiology (continued)**

- Regional cancer therapy including radiofrequency ablation, cryoablation, and transarterial therapy
- Therapeutic infusion of vasoactive agents
- Transcervical fallopian tube recanalization
- Transjugular intrahepatic portosystemic shunt (tips)
- Uterine artery embolization for leiomyomata
- Venous ablation

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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**ACKNOWLEDGEMENT OF PRACTITIONER**

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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

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

- Palomar Medical Center Escondido
- Palomar Medical Center Poway

- Initial Appointment
- Reappointment

*If any privileges are covered by an exclusive contract or an employment contract, practitioners who are not a party to the contract are not eligible to request the privilege(s), regardless of education, training, and experience. Exclusive or employment contracts are indicated by [EC].*

**Applicant:** Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital 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 DIAGNOSTIC RADIOLOGY [EC]**

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AND

Current certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to certification in radiology by the American Board of Radiology or the American Osteopathic Board of Radiology, or another board with equivalent requirements.

**Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance and interpretation of an adequate volume of radiologic tests or procedures, reflective of the scope of privileges requested, 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:** For diagnostic radiology, at least 25 cases (representative of the scope of privileges requested) will be retrospectively reviewed. At least ten (10) procedures will be monitored reflective of the scope of privileges requested.

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

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

Current demonstrated competence and an adequate volume of experience (radiologic tests or 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. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

**CORE PRIVILEGES**

**DIAGNOSTIC RADIOLOGY CORE PRIVILEGES [EC]**

- Requested** Perform general diagnostic radiology to diagnose and treat diseases of patients of all ages. 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.

**TELERADIOLOGY CORE PRIVILEGES [EC]**

**Criteria:** As for Diagnostic Radiology Core

- Requested** Perform general diagnostic radiology to diagnose diseases of patients of all ages via a teleradiography link. 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.

**QUALIFICATIONS FOR VASCULAR AND INTERVENTIONAL RADIOLOGY [EC]**

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

Successful completion of an ACGME or AOA accredited residency in diagnostic radiology followed by completion of a one year accredited fellowship in vascular and interventional radiology.

OR

Successful completion of an ACGME or AOA accredited residency in interventional radiology.

AND

Current subspecialty certification or active participation in the examination process, with achievement of certification within 4 years of appointment leading to subspecialty certification in vascular and interventional radiology or diagnostic radiology and interventional radiology by the American Board of Radiology or by the American Osteopathic Board of Radiology, or another board with equivalent requirements.

**Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance of at least 100 vascular and interventional radiology procedures, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

Page 3

Effective From: \_\_\_\_\_ To: \_\_\_\_\_

***Focused Professional Practice Evaluation (FPPE)/ Monitoring guidelines:*** At least ten (10) procedures will be monitored reflective of the scope of privileges requested.

***Reappointment Requirements:*** To be eligible to renew core privileges in vascular and interventional Radiology, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and 200 VIR 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. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. In addition, continuing education related to VIR should be required.

**CORE PRIVILEGES**

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**VASCULAR AND INTERVENTIONAL RADIOLOGY CORE PRIVILEGES [EC]**

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- Requested** Admit, evaluate, diagnose, treat patients of all ages by percutaneous methods guided by various radiologic imaging modalities. 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.

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

**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 COMPUTED TOMOGRAPHY ANGIOGRAM (CTA) (EC)**

**Criteria:** Successful completion of: an ACGME or AOA accredited post graduate training program in radiology, or nuclear medicine<sup>1</sup>. If the applicant’s postgraduate program did not include cardiac CT angiography training, applicants must demonstrate that they have successfully completed a formal course in cardiac CT which included CT angiography and proctored initial cases. **Required Previous Experience:** Demonstrated current competence and evidence of having supervised and interpreted 10 exams in the past 12 months or completion of training in the past 12 months. **FPPE:** 5 cases must be monitored. **Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least 20 exams based on results of ongoing professional practice evaluation and outcomes in the past 24 months.

Requested

**SPINAL INTERVENTIONAL RADIOLOGY TO INCLUDE: PERCUTANEOUS VERTEBROPLASY, BALLOON VERTEBROPLASTY (KYPHOPLASTY), SPINAL BIOPSY, PLACEMENT OF SPINAL CORD STIMULATOR AND PERCUTANEOUS LUMBAR DISCECTOMY (EC)**

**Criteria:** Successful completion of an ACGME or AOA-accredited post graduate training program that included training and experience in percutaneous spinal interventional procedures OR The applicant must show completion of an approved course in kyphoplasty/vertebroplasty that is (a minimum of 7 hours) which included didactic and laboratory training. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 5 spinal interventional procedures in the past 12 months. **FPPE:** 3 cases must be monitored concurrently. **Maintenance of Privilege:** Applicant must be able to demonstrate maintenance of competence by evidence of the performance of at least 10 spinal interventional procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Requested

<sup>1</sup> Other specialties involved include cardiovascular disease.



**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

**ENDOVASCULAR SURGICAL NEURORADIOLOGY (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)**

**Criteria:** Successful completion of an ACGME or AOA-accredited post graduate training program in Diagnostic Radiology, which included four years of experience, training and supervision in Diagnostic Neuroimaging and completion of a fellowship in Interventional Neuroradiology. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 25 Endovascular Surgical Neuroradiology procedures in the past 12 months. **FPPE:** 3 cases must be monitored concurrently. **Maintenance of Privilege:** Applicant must be able to demonstrate maintenance of competence by evidence of the performance of at least 50 Endovascular Surgical Neuroradiology procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**Requested**

**ACUTE STROKE THERAPY (NOT OFFERED AT PALOMAR MEDICAL CENTER POWAY)**

**Criteria:** Successful completion of a six month ACGME or AOA-accredited formal neuroscience training including: neuroanatomy, neuropathology, neurovascular imaging, and cerebrovascular hemodynamics. This training is included in Neurology, Neurosurgery, and Diagnostic Radiology or Interventional Radiology Residency programs. Other training programs would require six months of additional neuroscience training with documentation of completion AND successful completion of an Interventional Radiology or Neurointerventional Fellowship training program that included at least one year of interventional training. **Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least 5 endovascular stroke cases (with acceptable outcomes) in the past 12 months. **FPPE:** First 5 cases must be monitored concurrently. **Maintenance of Privilege:** Applicant must be able to demonstrate maintenance of competence by evidence of the performance of at least 10 endovascular stroke treatments performed in the past 24 month period, or if 10 cases not performed, an additional 2 monitored cases are required.

**Requested**

**ADMINISTRATION OF SEDATION AND ANALGESIA**

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

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

**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.

**Diagnostic Radiology**

- Arthrography
- Bone Denistometry
- Computed tomography (CT) and computed tomography angiogram (CTA) of the head, neck, spine, body, chest, extremity, CT guided biopsy and drainage procedures (excluding cardiac)
- Diagnostic nuclear medicine of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and associated procedures.
- Image guided biopsy and cyst aspiration
- Magnetic resonance imaging (MRI) and magnetic resonance (MRA) of the head, neck, spine, body, chest, extremity, and major joints-shoulder, knee, ankle, etc.
- Mammography
- Myelography
- Nuclear Medicine
- Pulse volume recordings
- Routine imaging, e.g., interpretation of plain films, intravenous or retrograde pyelography, fluoroscopy chest/abdomen, pelvis/gastrointestinal and genitourinary diagnostic and therapeutic procedures
- Spinal puncture, lumbar
- Stereotactic core cut breast biopsy
- Ultrasound (including carotid duplex u/s)

**Teleradiology**

- Computed tomography of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures
- Diagnostic nuclear medicine of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and associated procedures.
- Magnetic resonance imaging (MRI) of the head, neck, spine, body, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and muscular skeletal structures etc
- Routine imaging, e.g., interpretation of plain films
- Ultrasound (including carotid duplex u/s)

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

**CORE PROCEDURE LIST (CONTINUED)**

*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.

**Nuclear Medicine**

- Interpret the results of diagnostic examinations of patients using unsealed radionuclides and radiopharmaceuticals.
- Perform history and physical exam
- Performance of radioimmunoassay examinations and management of radioactively contaminated patients and facilities.
- Supervise the preparation, administration and the use of unsealed radionuclides and radiopharmaceuticals for diagnostic examinations of patients.
- Supervise the preparation, administration and use of unsealed radionuclides for therapeutic purposes.

**Vascular and Interventional Radiology**

- Angiography, peripheral angioplasty, to include venography of all body parts excluding heart
- Angioplasty, carotid, vertebral, intracerebral, intracranial
- Atherectomy including laser or mechanical
- Cavernous sinus sampling
- Carotid stenting
- Carotid test occlusion/carotid occlusion
- Central venous access
- Cisternography
- Embolization of cerebral, cranial, head, neck and spinal tumors
- Endovascular repair of thoracic and abdominal aortic aneurysm in conjunction with qualified surgeon
- Integrating endovascular therapy into the clinical management of patients with neurological diseases (or diseases of the central nervous system) when performing diagnostic and therapeutic procedures
- Interpreting diagnostic studies
- Intra-arterial thrombolytic therapy
- Intra-cranial/Intra-arterial chemotherapy
- Intravenous thrombolytic therapy
- Neuro interventional procedures for pain including epidural steroid injection, nerve blocks and discography
- Non vascular interventional procedure, including biopsy, abscess and fluid drainage, nephrostomy, biliary procedures
- Participating in short-term and long-term postprocedure follow-up care, including neurointensive care
- Percutaneous needle aspiration of palpable masses
- Percutaneous procedures
- Perform history and physical exam
- Peripheral arterial intervention including angioplasty, stent graft placement, atherectomy, and stent placement
- Placement of vena cava filter

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

**CORE PROCEDURE LIST (CONTINUED)**

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*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.

**Vascular and Interventional Radiology (continued)**

- Regional cancer therapy including radiofrequency ablation, cryoablation, and transarterial therapy
- Therapeutic infusion of vasoactive agents
- Transcervical fallopian tube recanalization
- Transjugular intrahepatic portosystemic shunt (tips)
- Uterine artery embolization for leiomyomata
- Venous ablation

**RADIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From: \_\_\_\_\_ To: \_\_\_\_\_

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**ACKNOWLEDGEMENT OF PRACTITIONER**

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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**

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

Page 1

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 Hospital 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 VASCULAR SURGERY**

**To be eligible to apply for core privileges in vascular surgery, 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 general surgery that included training in vascular surgery or successful completion of an ACGME or AOA accredited fellowship in vascular surgery

AND

Current certification or active participation in the examination process with achievement of certification within 48 months of appointment leading to certification in general surgery by the American Board of Surgery, or the American Osteopathic Board of Surgery, or another board with equivalent requirements.

OR

Current subspecialty certification or active participation in the examination process leading to certification in vascular surgery by the American Board of Surgery or the American Osteopathic Board of Surgery, or another board with equivalent requirements. **Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance of a minimum of 20 vascular surgery procedures, reflective of the scope of privileges requested, within the past 12 months, the majority being of a reconstructive nature excluding cardiac surgery, 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:** No less than 8 operating room cases of varying complexity and representative of the scope of practice will be monitored.

[Approved PMCE MEC 09/30/2024](#)  
[Approved Dept of Surg 09/10/2024](#)  
[Approved SAC 09/03/2024](#)  
 Approved by Board of Directors – 07/08/2024

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

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

Current demonstrated competence and an adequate volume of experience (40 vascular surgery 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. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

**CORE PRIVILEGES**

**VASCULAR SURGERY CORE PRIVILEGES**

- Requested** Admit, evaluate, diagnose, provide consultation and treat adolescent and adult patients with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding the intracranial vessels or the heart. May provide care to patients in the intensive care setting 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.

**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.

**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 license.

[Approved PMCE MEC 09/30/2024](#)  
[Approved Dept of Surg 09/10/2024](#)  
[Approved SAC 09/03/2024](#)  
 Approved by Board of Directors – 07/08/2024

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

Page 3

Effective From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

**TCAR (TRANSCAROTID ARTERY REVASCULATRIZATION) PMC ESCONDIDO ONLY**

**Criteria:** Physician must have hospital privileges to perform carotid endarterectomy. Physician will have attended an appropriate program for education and simulated training in TCAR (i.e. T.E.S.T. Drive certificate from Silkroad Medical.)

~~In addition, physicians must have performed ≥25 endovascular procedures as the primary operator using low-profile rapid-exchange platforms plus ≥5 TCAR procedures as the primary operator;~~

~~or~~

~~they may have acquired ≥25 endovascular procedures as the primary operator using low-profile rapid-exchange platforms and a supplement of 5 TCAR procedures under proctored guidance if they have not performed sufficient TCAR procedures;~~

~~or~~

~~a team of two physicians can collaborate, combining the endovascular and surgical requirements plus at least 5 TCAR procedures under proctored guidance.~~

**Requested**

Approved PMCE MEC 09/30/2024  
Approved Dept of Surg 09/10/2024  
Approved SAC 09/03/2024  
Approved: Board of Directors – 07/08/2024



**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

**VASCULAR SURGERY 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.

- Major and minor amputations, upper extremity, lower extremity (excluding hip disarticulations)
- Aneurysm repair, aortic and peripheral Aortic/thoracic \*PMCE
- Angioplasty, stent and atherectomy of peripheral vessels \*PMCE
- Bypass grafting all vessels excluding coronary and intracranial vessels \*PMCE
- Carotid endarterectomy \*PMCE
- Central venous access catheters and ports
- Cervical, thoracic or lumbar sympathectomy \*PMCE
- Diagnostic biopsy or other diagnostic procedures
- Embolectomy or thrombectomy for all vessels excluding coronary vessels
- Endarterectomy for all vessels excluding coronary vessels \*PMCE
- Extra cranial carotid and vertebral artery surgery \*PMCE
- Hemodialysis access procedures
- Angiography and venography
- Sympathectomy
- Muscle flap creation
- Major open and endovascular vascular arterial and venous reconstructions
- Perform history and physical exam
- Placement and removal of inferior vena cava (IVC) filter
- Reconstruction, resection, repair of arterial and venous vessels with anastomosis or replacement (excluding cardiopulmonary))
- Sclerotherapy
- Skin grafts
- Spinal access (thoracic and lumbar) \*PMCE
- Temporal artery biopsy
- Carotid stenting \*PMCE
- **Transcarotid artery revascularization (TCAR) \*PMCE**
- Thoracic outlet decompression procedures including rib resection \*PMCE
- Vein ligation and stripping
- Venous reconstruction
- Intravascular Ultrasound (IVUS) \*PMCE

\*PMCE = Available at Palomar Medical Center Escondido Only

[Approved PMCE MEC 09/30/2024](#)  
[Approved Dept of Surg 09/10/2024](#)  
[Approved SAC 09/03/2024](#)  
 Approved by Board of Directors – 07/08/2024

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

**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** \_\_\_\_\_

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

Page 1

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 Hospital 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 VASCULAR SURGERY**

***To be eligible to apply for core privileges in vascular surgery, 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 general surgery that included training in vascular surgery or successful completion of an ACGME or AOA accredited fellowship in vascular surgery

AND

Current certification or active participation in the examination process with achievement of certification within 48 months of appointment leading to certification in general surgery by the American Board of Surgery, or the American Osteopathic Board of Surgery, or another board with equivalent requirements.

OR

Current subspecialty certification or active participation in the examination process leading to certification in vascular surgery by the American Board of Surgery or the American Osteopathic Board of Surgery, or another board with equivalent requirements. **Required Previous Experience:** Applicants for initial appointment must be able to demonstrate performance of a minimum of 20 vascular surgery procedures, reflective of the scope of privileges requested, within the past 12 months, the majority being of a reconstructive nature excluding cardiac surgery, 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:** No less than 8 operating room cases of varying complexity and representative of the scope of practice will be monitored.

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

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

Current demonstrated competence and an adequate volume of experience (40 vascular surgery 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. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

**CORE PRIVILEGES**

**VASCULAR SURGERY CORE PRIVILEGES**

- Requested** Admit, evaluate, diagnose, provide consultation and treat adolescent and adult patients with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding the intracranial vessels or the heart. May provide care to patients in the intensive care setting 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.

**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.

**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 license.

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

**VASCULAR SURGERY 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.

- Major and minor amputations, upper extremity, lower extremity (excluding hip disarticulations)
- Aneurysm repair, aortic and peripheral Aortic/thoracic \*PMCE
- Angioplasty, stent and atherectomy of peripheral vessels \*PMCE
- Bypass grafting all vessels excluding coronary and intracranial vessels \*PMCE
- Carotid endarterectomy \*PMCE
- Central venous access catheters and ports
- Cervical, thoracic or lumbar sympathectomy \*PMCE
- Diagnostic biopsy or other diagnostic procedures
- Embolectomy or thrombectomy for all vessels excluding coronary vessels
- Endarterectomy for all vessels excluding coronary vessels \*PMCE
- Extra cranial carotid and vertebral artery surgery \*PMCE
- Hemodialysis access procedures
- Angiography and venography
- Sympathectomy
- Muscle flap creation
- Major open and endovascular vascular arterial and venous reconstructions
- Perform history and physical exam
- Placement and removal of inferior vena cava (IVC) filter
- Reconstruction, resection, repair of arterial and venous vessels with anastomosis or replacement (excluding cardiopulmonary))
- Sclerotherapy
- Skin grafts
- Spinal access (thoracic and lumbar) \*PMCE
- Temporal artery biopsy
- Carotid stenting \*PMCE
- Transcarotid artery revascularization (TCAR) \*PMCE
- Thoracic outlet decompression procedures including rib resection \*PMCE
- Vein ligation and stripping
- Venous reconstruction
- Intravascular Ultrasound (IVUS) \*PMCE

\*PMCE = Available at Palomar Medical Center Escondido Only

**VASCULAR SURGERY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective From \_\_\_/\_\_\_/\_\_\_\_\_ To \_\_\_/\_\_\_/\_\_\_\_\_

**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

**Source:**  
 Administrative  
 Board of Directors

**Applies to Facilities:**
**Applies to Departments:**

## Policy: Board Committee Agenda Creation

### I. PURPOSE:

To establish an open and transparent process regarding Agenda Creation for all ~~Board and~~ Board Committee meetings. A process that is consistent with relevant provisions of the Brown Act, that facilitates meetings focused on the business of the ~~d~~District as it relates to the specific ~~Board~~ duties of ~~Oversight, Governance and Strategic Planning~~Board Committees, that provides individual Board Members the ability to bring their- his or her issues and concerns to meeting agendas subject to the provisions of this policy, ~~and that documents all agenda requests (approved or not)~~. This policy also defines authority for ~~Board and~~ Board Committee meeting agenda creation.

### II. BOARD COMMITTEES

1. Board Committee Chair holds the primary responsibility for ~~their- his or her~~ specific Board Committee Meeting Agendas. The Board Committee Chair will routinely work with the specific Committee Administrative Liaison assigned to ~~their-that~~ Board Committee and ~~their~~ administrative support personnel in creating agendas. Board Committee Chair will, by policy, carefully consider all input regarding Agenda items from the Committee Administrative Liaison. The authority for approval of final agendas for Board Committee Meetings will reside with the Board Committee Chair. Any disagreement, dispute or confusion over specific agenda items and/or ~~their~~ appropriateness of specific items on the agenda between the Board Committee Chair and the Committee Administrative Liaison that cannot be resolved will be referred to the Board Chair for resolution. The Board Chair, if indicated, may consult with Board or Corporate Counsel, CEO, and/or other members of the Administrative team to achieve resolution. If Board Chair feels the issue cannot be satisfactorily resolved, the Board Chair will take the issue to the full Board.
2. Individual Board Committee Members may request to have the Board Committee Chair place items on the Board Committee Agenda at Board Committee Meetings. ~~Board Members who are not Committee Members may request to have items placed on a Board Committee Agenda at regular meetings of the Full Board either through the Board Chair or the Board Committee Chair. These requests can be made via Email (copying Board Chair for information purposes).~~ The Board Committee Chair will consider each item so requested and determine whether or not it is an appropriate Board Committee Agenda item. The Board Committee Chair will make every effort to accommodate all reasonable individual Committee Member requests including refining the requested agenda item as indicated. The Board Committee Chair may decline to put the item on the Board Committee Agenda based upon ~~their- his or her~~ judgment. ~~All such requested but not approved agenda items will be placed on the Board Committee Meeting Agenda as a list of "Requested but not approved Agenda items".~~ Any disagreement, dispute or confusion over specific agenda items and/or ~~their~~ appropriateness of specific items on the agenda between the Board Committee Chair and an individual Board Committee Member that cannot be resolved will be referred to the Board Chair for resolution. Board Chair, if indicated, may consult with the Board or Corporate Counsel, CEO and/or other members of the Administrative team to achieve resolution. If the Board Chair feels the issue cannot be satisfactorily resolved, the Board Chair will take the issue to the full Board.

**Document Owner:** DeBruin, Kevin

**Approvals**

- Committees:

**Original Effective Date:**
**Revision Date:**
**Attachments:**

(REFERENCED BY THIS DOCUMENT)

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**DocID:** 63352  
**Revision:**  
**Status:** (Pending)

**Source:**  
 Administrative  
 Board of Directors

**Applies to Facilities:**

**Applies to Departments:**

**Policy: Board Committee Agenda Creation**

**I. PURPOSE:**

To establish an open and transparent process regarding Agenda Creation for all Board Committee meetings. A process that is consistent with relevant portions of the Brown Act, that facilitates meetings focused on the business of the District as it relates to the specific duties of Board Committees, that provides individual Board Members the ability to bring his or her issues and concerns to meeting agendas subject to the provisions of this policy. This policy also defines authority for Board Committee meeting agenda creation.

**II. BOARD COMMITTEES**

1. Board Committee Chair holds the primary responsibility for his or her specific Board Committee Meeting Agendas. The Board Committee Chair will routinely work with the specific Committee Administrative Liaison assigned to that Board Committee and administrative support personnel in creating agendas. Board Committee Chair will, by policy, carefully consider all input regarding Agenda items from the Committee Administrative Liaison. The authority for approval of final agendas for Board Committee Meetings will reside with the Board Committee Chair. Any disagreement, dispute or confusion over specific agenda items and/or the appropriateness of specific items on the agenda between the Board Committee Chair and the Committee Administrative Liaison that cannot be resolved will be referred to the Board Chair for resolution. The Board Chair, if indicated, may consult with Board or Corporate Counsel, CEO, and/or other members of the Administrative team to achieve resolution. If Board Chair feels the issue cannot be satisfactorily resolved, the Board Chair will take the issue to the full Board.
2. Individual Board Committee Members may request to have the Board Committee Chair place items on the Board Committee Agenda at Board Committee Meetings. Board Members who are not Committee Members may request to have items placed on a Board Committee Agenda at regular meetings of the Full Board either through the Board Chair or the Board Committee Chair. The Board Committee Chair will consider each item so requested and determine whether or not it is an appropriate Board Committee Agenda item. The Board Committee Chair will make every effort to accommodate all reasonable requests including refining the requested agenda item as indicated. The Board Committee Chair may decline to put the item on the Board Committee Agenda based upon his or her judgment. Any disagreement, dispute or confusion over specific agenda items and/or the appropriateness of specific items on the agenda between the Board Committee Chair and an individual Board Committee Member that cannot be resolved will be referred to the Board Chair for resolution. Board Chair, if indicated, may consult with the Board or Corporate Counsel, CEO and/or other members of the Administrative team to achieve resolution. If the Board Chair feels the issue cannot be satisfactorily resolved, the Board Chair will take the issue to the full Board.

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# ADDENDUM D

**To:** Board of Directors  
**From:** Jeff Griffith, Chair, Board Governance Committee  
**Date:** October 14, 2024  
**Re:** Board Governance Committee, October 3, 2024, Meeting Summary

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**BOARD MEMBER ATTENDANCE:** Directors Laura Barry, Terry Corrales and Jeff Griffith

**ACTION/INFORMATIONAL ITEMS**

- **Board Governance Committee Meeting minutes, August 14, 2024:** The Governance Committee reviewed and approved the minutes from August 14, 2024.
- **Board Agenda Creation (63352):** The Governance Committee approved policy 63352, Board Agenda Creation, and moved to the Board of Directors for ratification.
- **Bylaws of Palomar Health:** The Governance Committee requested further draft revisions be brought to the November Governance Committee meeting for review.

**STANDING ITEMS**

- **ACHD Advocate:** ACHD Annual Meeting update.