LOMA LINDA UNIVERSITY MEDICAL CENTER
NEUROLOGY SERVICE
DEPARTMENT RULES & REGULATIONS

I. RESPONSIBILITIES:

The Neurology Service of Loma Linda University Medical Center shall be responsible for:

A. The evaluation of the qualifications of those individuals applying/reapplying for membership on the medical staff in the Neurology Service.

B. The monitoring of the ethical and professional practices of medical staff members on the Neurology Service and the monitoring of the quality of care provided on the Neurology Service and/or by members of the Neurology Service.

C. The supervision of the clinical activities of students and residents assigned to the Neurology Service.

D. The provision of continuing education activities to its members and guests.

II. MEMBERSHIP:

Requirements for membership in the Neurology Service of the medical staff shall be determined by the Executive Committee of the medical staff and shall be implemented through the bylaws, and rules and regulations of the medical staff. Notwithstanding this requirement membership shall be available only to those who are qualified by training and/or experience to fulfill all the requirements of these service rules and regulations.

III. OFFICERS:

The Chairman of the Department of Neurology of Loma Linda University School of Medicine or designee, shall serve as the Chief of the Neurology Service of Loma Linda University Medical Center. In the absence of the chairman, the individual acting as chairman shall serve as chief. The chairman may appoint an Associate Chief of Service and delegate responsibilities to this individual.

A. The Chief of Service shall:
   1. Serve as chairman of the Neurology Service Committee.
   2. Organize and chair regular meetings of the members of the Neurology Service.
   3. Appoint service committees as needed or required.
   4. Maintain records of the Neurology Service.

B. The Associate Chief of Service shall discharge the responsibilities of the chief in the absence of the chief.

IV. COMMITTEES:

A. The Neurology Service Committee – chaired by Chief of Service.
1. **Membership**
   The committee shall consist of all active members of the Neurology Service.

2. **Function**
   a. Review applications for appointment and reappointment to the Neurology Service.
   b. Recommend (to the Chief of the Service) the granting of specific clinical privileges.
   c. Recommend (to the entire service) service policies, and rules and regulations.
   d. Assist the Chief of Service in his/her administrative activities as he/she directs.

B. **Quality Improvement Committee.**

1. **Chairman:**
   The Neurology Service Quality Improvement Committee shall be chaired by a member of the service appointed by the Chief of Service. The committee chair shall be responsible for the ongoing quality improvement activities of the service.

2. **Membership:**
   The committee shall consist of all active members of the Neurology Service.

3. **Function:**
   a. In conjunction with the Medical Staff Quality Improvement Committee, this Committee will review selected aspects of care on the Neurology Service with the goal of achieving continuing quality improvement.
   b. The Committee will present recommendations to the Chief of Service for changes in policies, procedures and regulations that are intended to improve the quality of care on the Neurology Service.
   c. The Committee will present the entire Neurology Service the results of its monitoring activities.
   d. The committee will arrange for the presentation to the Neurology Service educational programs in response to its (the committee) quality improvement activities.

V. **POLICIES:**

Rules and regulations governing the Neurology Service will be developed as policies. Policies will be approved by the neurology Service Committee, the active members of the Neurology Service, and the Executive Committee of the medical staff. These policies will be summarized in a document titled **RULES AND REGULATIONS** which will be reviewed annually and distributed to all members of the Neurology Service after review.

VI. **NEUROLOGY SERVICE PRIVILEGES:**
A. General

Members of the Neurology Service shall be granted practice/clinical privileges consistent with their ability. Education and experience are the major indicators of ability. Many privileges require specific observation by a peer to evaluate ability. Physicians seeking privileges in areas outside their approved category would request these privileges individually and clinical service approval would be determined individually based on documented clinical competence. To maintain credentialing, physicians must be available within thirty (30 minutes), if needed, for emergent care of their patients or arrange for their care by another physician.

The supervision of residents requires endorsement by the appropriate Service Residency Program Director of designee. The supervision of the medical students requires endorsement by the Chair of the Department of Neurology of Loma Linda University School of Medicine. The supervision of Allied Health Professional, who are not employees of the Medical Center, requires specific application.

B. Specific

1. Physician categories
   a. Category 1: Specialty board-eligible/certifies(residency trained – meets requirements for board certification or is board certified)
   b. Category 2: Subspecialty board eligible/certified

2. Privileges:
   a. Category 1 Privileges:
      These privileges involve the care of patients with medical problems other than those in Category 2. Physicians presenting evidence of having successfully completed a residency in Neurology are presumed to have gained initial competence in the management of these problems. The general initial proctoring is required. Proctoring specific to these privileges is not required.

      These privileges involve the use of minor procedures in patient care. These procedures are commonly performed in the ambulatory setting and in basic care units. These procedures require a certification of competency from the medical staff member indicated by his/her initial for each required procedure on the Privilege Request Form at the time of initial application and reapplication. There is no minimum volume necessary for granting privileges. Proctoring specific to these procedures is not required.

   b. Category 2 Privileges:
      These privileges involve the care of patients with medical problems in the field of Neurology of such severity or complexity that the management is frequently provided in special care units or by sub-specialists. Specific granting of privileges is required at the time of initial application and reapplication. Proctoring specific to the area of privileges requested is required at the time of initial application.
Physicians will present evidence of subspecialty board eligibility/certification or special training.

These privileges involve the use of procedures in patient care for which the medical staff member must provide specific evidence of continuing competence at the time of initial application and reapplication. Procedure specific proctoring is required.

VII PROCTORING:

A. General
All initial appointments to the Neurology Service are contingent on the applicant demonstrating to his/her peers that he/she has the capability to provide the evaluation and management services required by his/her patients. This involves the ability to obtain a history and perform a physical examination. It also involves the ability to originate appropriate diagnostic and therapeutic orders and to interpret the data that results from those orders. The usual requirement is that 10 cases be reviewed by a peer. In special circumstances the number may be reduced by action of the Service Committee. The absolute minimum is 5 cases. Consultations, ER evaluations and outpatient evaluations may be used to complete this requirement.

B. Specific
Category 2 privileges require specific proctoring.