# Huntington Memorial Hospital

**Hematology/Medical Oncology Section**

**Rules and Regulations**

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I. MEMBERSHIP
The Hematology/Medical Oncology Section of the Department of Medicine is composed of those members of the Medical Staff whose primary practice is limited to the field of Hematology and/or Medical Oncology.

II. SCOPE OF PRACTICE
The Hematology/Medical Oncology Section’s delineated scope of practice includes treatment and medical management of malignant/and/or hematological diseases.

III. RESPONSIBILITIES OF THE SECTION
The Hematology/Medical Oncology Section shall be organized within the Department of Medicine and report all business to the Medicine Committee. In addition, the Section shall:

A. Recommend clinical privileges for each member of the section.

B. Recommend criteria for granting clinical privileges within the Hematology/Medical Oncology Section

C. Provide support to section members in resolving difficult or unusual physician-related credentialing issues

D. Ensure Medical Staff compliance with hospital policies and procedures

E. Review and prioritize equipment and space requests related to patient care and recommend purchase or non-purchase to Administration.

F. Continuous surveillance of the professional performance of all individuals in the section who have delineated clinical privileges

G. Continuous assessment and improvement of the quality of care and services provided to all patients.

H. Assure maintenance of quality control programs, as appropriate
I. Recommend to the Medicine Committee all changes to Section Rules and Regulations

J. Participate in staff development activities through provision of inservice education to the nursing staff and physicians

IV. SECTION MEETINGS
Regularly scheduled meetings of the Hematology/Medical Oncology Section will be held as often as necessary but at least twice a year and at the call of its Chair.

V. SECTION OFFICERS
The Hematology/Medical Oncology Section officers consist of the Chair and Chair Elect position. If the Section Chair is absent temporarily, the Chair Elect shall assume the function as temporary Chair. If the Chair position becomes vacant permanently, the Chair Elect shall assume the responsibility of Section Chair and a new Chair Elect will be elected.

VI. ELECTION PROCESS
The election process outlined in Section 11.5, 11.6 and 11.7 of the Medical Staff Bylaws for Department Chairs shall be utilized for the election of Section Chairs.

VII. SECTION CHAIR

A. TENURE OF SECTION CHAIR
The term of office for Section Chair is two (2) years, eligible to be re-elected for subsequent terms. The Chair Elect will automatically succeed to the position of Section Chair.

B. QUALIFICATIONS
The Chair shall be an Active Staff member of the Section, and shall be certified by the American Board of Internal Medicine with Subspecialty Certificate in Hematology and/or Oncology or successful completion of an approved training program requiring certification by a training director regarding experience and demonstrated competence to perform the procedure(s) being requested.
C. RESPONSIBILITIES

1. The ongoing effective operation of the Section/service and for the assessment and improvement of its activities

2. All clinically related activities of the Section

3. All administratively related activities of the Section

4. Continuing surveillance of the professional performance of all individuals who have delineated clinical privileges in the Section.

5. Recommending to the medical staff the criteria for clinical privileges in the Section

6. Recommending clinical privileges for each member of the Section

7. Conducting meetings of the Section, developing meeting agendas, and reviewing and approving meeting minutes.

8. Spokesperson represents the Section to the Department of Medicine

9. Establishing, together with medical staff and administration, the type and scope of services required meeting the needs of the patients and the hospital

10. Developing and implementing policies and procedures that guide and support the provision of services by the Section

VIII. PRIVILEGE DELINEATION

Clinical privileges shall be divided into “Core Privileges” and “Supplemental Privileges” reflecting increasing training and/or expertise or requirements for special training or certification. Details of privilege delineation are explained in the individual clinical privilege delineation for this Section.

IX. PROCTORING

Proctoring will be conducted in accordance with the Huntington Hospital Medical Staff Proctoring Protocol.
X. REQUEST FOR ADDITIONAL PRIVILEGES

A. A written request for any additions or changes to medical staff privileges must be directed to the Chair of the Section.

B. All requests for additions and changes to the Hematology and Medical Oncology Privilege sheet, must be reported to the Section meeting.

XII. FAILURE TO RESPOND TO “ON-CALL POLICY”

Please refer to the Medical Staff Rules and Regulations and the Administrative Policy and Procedure Manual, Policy #020.

Approved:
Hematology/ Medical Oncology Section: 1/21/09; 4/28/10; 01/23/2013
Medicine Committee: 2/5/09; 06/03/10; 05/02/2013
Executive Committee: 3/2/09; 07/12/10; 07/01/2013
Board of Directors: 4/23/09; 07/22/10; 07/25/2013