

# LEGACY SALMON CREEK HOSPITAL MEDICAL STAFF

**Policy #:**

**Origination Date:** 4/19/07

**Last Revision** New Policy

**Next Review Date:**

Page 1 of 1

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**SUBJECT: PENALTIES FOR FAILURE TO FULFILL ED CALL OBLIGATIONS**

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**POLICY:** Section IV.2 of the Medical Staff Rules and Regulations delineate emergency admission call responsibility. Physicians must be within a thirty (30) minute response time of the Hospital when on call.

**TEXT/PROCEDURE:** In the event that a practitioner fails to respond to emergency call, the procedure below will be followed.

Step 1 – Notification of Failure: Gathering the Facts - The Department or Section Chair communicates verbally with the practitioner about the issue. Chair determines if the failure was caused by factors outside the physician's control. If the failure was caused by such factors, the Chair will dismiss the case and provide documentation of the incident for the physician's credentials file. If the failure was not caused by factors outside the physician's control, then move to Step 2.

Step 2 – First Failure: Verbal Communication - Chair notifies practitioner that, if there is a second failure, the ED call stipend (if applicable to the practitioner) will be withdrawn until the practitioner has fulfilled ED call obligations for two continuous months. A written report by the department or section chair summarizing this communication will be maintained in the practitioner's credentials file.

Step 3 – Second Failure: Written Communication and Withdrawal of ED Call Stipend - A letter will be sent to the practitioner from the Medical Staff President noting the ED call stipend would be withheld for 60 days. The letter will also communicate to the practitioner that, if there is a third failure, the MEC will discuss possible suspension (15 days) and report the issue to the NPDB and state licensing board.

Step 4 – Third Failure: Suspension of Medical Staff Membership and Privileges – The MEC will discuss possible suspension (15 days) and report to the NPDB and state licensing board.

Over the course of two years, if there are no further occurrences, the policy would be reset for that physician.

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References:

Replaces: New Policy

Approval: LSCH Officers 3/13/07, MEC 3/20/07, MQ&C 4/19/07

Originator: LSCH Medical Executive Committee

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