JOINT CONFERENCE COMMITTEE
ARROWHEAD REGIONAL MEDICAL CENTER
SUMMARY OF THE MEDICAL EXECUTIVE COMMITTEE (REGULAR) SESSION
June 2025 – August 2025

Hospital-wide Performance Improvement reports were reviewed by the Medical Staff Departments and Committees, and significant improvement was identified in multiple areas. The reports were presented to the Quality Management Committee, and detailed information will be provided in the Arrowhead Regional Medical Center Performance Improvement and Quality Management Administrative Summary.

Reviewed Hospital-wide Core Measure Reports and Hospital-wide Performance Improvement Reports related to CMS Corrective Actions, The Joint Commission, and Patient Safety reports.

The following Medical Staff Committee reports were reviewed:
- Quality Management Committee
- Peer Review Committee

The following administrative reports were received as information:
- Chief Executive Officer
- Chief Operating Officer
- Chief Nursing Officer
- Quality and Accreditation
- Graduate Medical Education
- Chief Medical Officer

The following policies and procedures were reviewed and approved as follows:
- Revenue Cycle 203.00-Charge Reconciliation
- Mother Baby Summary of Policy and Procedure Revisions
- Pediatrics Summary of Policy and Procedure Revisions
- BH Policy 202.00-Transfers to Behavioral Health
- BH Policy 204.00-Visiting Procedures and Staff Coverage
- HIM Policy 313.00-Medical Record Assembly/Analysis
- Patient Reception Summary of Policy and Procedure Revisions
- Administrative Summary of Policy and Procedure Revisions
- RCS Policy 56-Neonatal Intensive Care Unit Oral Care
- Clinical Laboratory Policy 105.01-Laboratory Specimen Recollection Policy
- Clinical Laboratory Policy 106.01-Critical Value Read Back Procedure
- Clinical Laboratory Policy 104.11-Unusual Occurrence Report: Competency Entry
- MCH Policy 5232-Hypoglycemia, Management of the Neonate With

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- NRS Policy 5230-Hypertensive Crisis: Care of the Patient
- ADM Policy 690.32-Law Enforcement Weapons
- ADM Policy 690.42-Cannabis for Terminal Illness-Management Of
- Summary of Neonatal Intensive Care Unit Policy and Procedures Revisions
- Trauma Policy 500.10-Trauma Services Organizational Chart
- Trauma Policy 500.50-Scope of Practice
- Trauma Policy 504.30-Screening, Brief Intervention and Referral
- Trauma Policy 504.50-Post-Traumatic Stress Disorder Screening and Referral
- Trauma Policy 516.00-Trauma Disaster Response Plan
- ADM Policy 690.36-Intravenous Admixture and Administration with Attachment A

The following appointments were approved:

- Graduate Medical Education Member - David Ahamba, MD
- Emergency Medicine Program Director - Jordan M. Jeong, DO
- Family Medicine Program Director - Christina Sugirtharaj, MD

9/8/25

David Seigler, MD, President, Medical Staff — Date