York Hospital Medical Staff Business Meeting
April 9, 2013

The York Hospital Medical Staff met on Tuesday, April 9, 2013 at the York Hospital Medical Education Pavilion.

The social hour began at 5:45 pm until 7:10 pm. At 7:10 pm Dr. S. Pandelidis introduced the guest speaker – John Henry Pfifferling, PhD. Dr. Pfifferling is the Director for the Center for Professional Well-Being. He offers an extensive background in applied medical anthropology, focusing on well-being advocacy for professionals. Dr. Pfifferling presentation titled, “How to Kill a Physician Without Really Trying: “Things I Wish I Had Learned in Training” focused on identification of risks for self-care, citing ways to separate personal from professional attitudes that predispose physician exhaustion and recognizing the importance of setting boundaries, emphasizing saying “yes” and “no”. The dialogue was interesting and well-received by about 150 members that attended the event.

A brief business meeting followed at 8:30 pm.

ACTION: The minutes of the April 26, 2012 Medical Staff Business Meeting were approved as presented.

President of York Hospital – Keith Noll
Hospital News: Mr. Noll shared a power point presentation on “The Environmental Overview Financial Perspective” for WellSpan Health. Mr. Noll’s presentation began with an explanation of the financial cycle for a non-profit hospital, and the differences when compared to a for-profit institution. A special focus was directed at the decreasing Medicare payments and increasing bad debt and charity that was recorded in the last decade. In the next five years, we anticipate that the Patient Protection and Affordable Care Act will add to burden of decreased revenue. Our external and internal environments make this budget season more challenging than ever before. Reducing operational expenses will be paramount.

President of the Medical Staff – Stephen Pandelidis, MD
Dr. Pandelidis thanked everyone for attending this meeting. About 150 members were present for this event. He also thanks Dr. Pfifferling for an excellent presentation, which was recorded for continuing education.

Consult Policy: The new consult policy was approved by MEC since the last meeting. The new policy requires physician to physician communication for urgent consults (seen within the same day) with the expectation to clearly communicate a) the reason for the consult; b) the timeliness of the consult; and c) any and all information required by the consultant. Additional guidelines are being considered to improve communication and standardize the consultation process.

Cell Phone Utilization:
Medical Affairs currently has the cell phone numbers for most physicians and providers on staff. An email will be sent to the entire medical staff notifying that cell phones numbers will be placed on the secure Medical Affairs portal for other physicians and providers to access. Unless a physician contacts Medical Affairs to decline the publication of his/her cell phone number, individual cell phones will be shared on this secure site effective June 1, 2013.

Recognition of Service:
Dr. Pandelidis presented a token of appreciation to the following providers for their years of services:
Stephen Dilts, MD – President of the YH Medical Staff, 2010 – 2012;
David Jones, MD – Chairman of Pathology, 2006 – 2012;
William Unwin, MD – YH Board Member, 2007 – 2012; and
Gary Zimberg, MD – Chairman of Psychiatry, more than 10 years – 2012.

Resolutions of Respect:
Resolutions of Respect were presented for the following deceased medical staff members:
Dr. Samuel Laucks presented a Resolution of Respect for Dr. William Shue, MD – Member of the Department of Surgery; Dr. Ron Benenson presented a Resolution of Respect for Dr. David Eitel, MD – Member of the Department of Emergency; and Dr. Paul Schwartzkopf presented a Resolution of Respect for Dr. Donald Piper, MD – Member of the Department of Family.

Copies of the Resolutions of Respect will be sent to their families and included in the minutes (see Attachment A).

**Proposed Bylaws Update:** Presented by Mark Catterall, MD

The following Bylaws were presented:

- **4.3 AFFILIATE CATEGORY**

  **4.3.1 QUALIFICATIONS FOR AFFILIATE CATEGORY**

  An Appointee to this category must:

  (a) be located sufficiently close to the Hospital (office and residence) in order to fulfill his patient care obligations.

  **4.3.2 PREROGATIVES OF AFFILIATE CATEGORY**

  An Appointee to this category may:

  a) exercise such clinical privileges as are granted to him (At times of shortage of hospital beds, as determined by the Chief Executive officer or his designee, the elective patient admissions of Appointees of the affiliate category shall be subordinate to those of Appointees of the active category.); and

  b) not hold office at any level of the Medical Staff organization and sit on or be the chairman of any Medical Staff committee; and

  c) not vote on all any matters presented at general and special meetings of the Medical Staff and of Departments and committees to which he is appointed; and

  **Rationale: Clarification of prerogatives**

- **4.7.2 PEROGATIVES OF TELEMEDICINE CATEGORY**

  An Appointee to this category may:

  (a) exercise such clinical privileges as are granted to him.

  (b) not hold office at any level of the Medical Staff organization or sit on or be the chairman of any Medical Staff committee;

  (c) not vote on all any matters presented at general and special meetings of the Medical Staff and of Department and committees to which he is appointed; and
may be responsible for dues and assessments at the discretion of the York Hospital and Medical Staff leadership.

Rationale: Clarification of prerogatives

- 7.1.2 CURRENT DEPARTMENTS AND DIVISIONS

The current Departments, encompassing the following subspecialty Divisions, are as follows:

(a) Department of Anesthesiology
(b) Department of Dentistry
   - Division of General Dentistry
   - Division of Pediatric Dentistry
   - Division of Periodontics
   - Division of Prosthodontics
   - Division of Endodontics
   - Division of Orthodontics
(c) Department of Emergency Medicine
(d) Department of Family Medicine
(e) Department of Imaging and Radiation Oncology
   Division of Body CT and MRI
   Division of Diagnostic Radiology
   **Division of Emergency Radiology**
   Division of General Ultrasound
   Division of Interventional Vascular and Oncologic
   Division of Musculoskeletal
   Division of Neuroradiology
   Division of Nuclear Medicine and PET/CT
   Division of Pediatric Radiology
   Division of Radiation Oncology
   Division of Vascular Ultrasound
   Division of Women’s Imaging and Interventional

Rationale: To reflect the specialization within Imaging, as requested by the department chairperson.

(h) Department of Obstetrics and Gynecology
   - Division of Maternal-Fetal Medicine
- Division of Gynecologic Oncology
- Division of Reproductive Endocrinology
- Division of Urogynecology, Female Pelvic Medicine and Pelvic Floor Surgery

Rationale: To reflect the specialization within OB/GYN, as requested by the interim department chairperson.

- 8.5 EDUCATION COMMITTEE

8.3.1 COMPOSITION

The Education Committee shall consist of the residency program directors, the Director of Medical Education, the Director of the Medical Library, the Vice-President of Medical Affairs, the Director of Research, a representative from the Quality and Research Department, the accountable Designated Institutional Official (DIO), the physician Education Coordinators, administrators and members of the faculty. Voting membership on the committee must include residents nominated by their peers. The Chairman shall be the Director of Medical Education. (Internal, based on changes in research dept structures)

Rationale: To reflect the recent changes within QM and Research.

- 7.5.2 Selection and Appointment
  (c) Salaried Department Chairmen

The Board may not initiate the process for appointing a salaried Department Chairman in a Department with a Voluntary Department Chairman without first consulting with the Department involved and obtaining the approval of the Medical Executive Committee.

(i) New appointments: The President of the Medical Staff and the Vice President of Medical Affairs will jointly name an Ad Hoc Selection Committee of three (3) Appointees of the active or executive category to make a recommendation to the Board as to the selection of a salaried Department Chairman. The Chairman of the Ad Hoc Selection Committee will not be a member of the Department involved. The Vice President of Medical Affairs will seek and recommend candidate(s) to the Ad Hoc Selection Committee, which, with the endorsement by two-thirds of the Department members eligible to vote on departmental matters in the Department involved voting in favor of appointment who voted, will recommend a candidate to the Vice President of Medical Affairs who will present the recommendation to the Board for its final action. The Department vote may be by email ballot. Pending appointment of a salaried Department Chairman, the Board, in consultation with the Vice President of Medical Affairs and the Department involved, may appoint a temporary Department Chairman.

Rationale: To successfully get endorsement for candidates, when it is difficult to get all departments engaged in meetings or decisions.
8.2 MEDICAL EXECUTIVE COMMITTEE

8.2.1 COMPOSITION

The Medical Executive Committee shall consist of:

(a) the President and Vice President of the Medical Staff;

(b) at the option of each Department, which shall be exercised in July of each year in which there is a vacancy, one (1) Appointee of the active or executive category representing each Department set forth from time to time in Article VII of these Bylaws. The elected departmental representative will not ordinarily serve for more than three consecutive years on the Medical Executive Committee.

(c) the Chairman of each Department set forth from time to time in Article VII of these Bylaws;

(d) The Vice President of Medical Affairs, the Chief Executive Officer, Vice President of Patient Care Services, and one or more of the Vice Presidents of Operations, and a representative from the Allied Health Professionals, all of whom shall serve on an ex officio basis without the right to vote.

Rationale: To respond to requests from advanced practice clinicians (APC) at YH, and formally establish communication between the MEC and APCs.

ACTION: A motion was made, seconded and approved to accept the Bylaws as presented.

Other Issues: None

The meeting was adjourned at 9:05 pm. The next Medical Staff Meeting will be SEPTEMBER 25, 2013. Please mark your calendars!

Respectfully submitted by,

Stephen Pandelidis, MD
President, Medical Staff

Attachment A
David R Eitel, MD
Dr. David R Eitel was born in Brantford, Ontario, Canada on the 21st of December 1948. He died at home in the embrace of his loving family on the 5th of October 2012 at age 63.
Dr. Eitel graduated from the University of Western Ontario medical school in 1973. He and his wife Lynne moved to United States in 1975 where he practiced medicine in New York and Maine. In 1982, the Eitels moved to York, Pennsylvania and Dave began a 30-year career at York Hospital and WellSpan Health Systems. Dr. Eitel will be remembered for his passion and compassion in all his endeavors. He was passionate about excellent patient care, provider education, EMS, business applications and systems design in medicine. He was compassionate not only towards patients and families but also towards his many coworkers and colleagues.

If Dr Eitel recognized a deficiency in patient care, he set about to correct it. If he saw a better way to do things, he made it happen. He was an innovator, always ahead of the curve. Among his many accomplishments, Dr. Eitel was the Medical Director of Medic 97, the Medical Director of the York-Adams Emergency Medical Resource Center, the first Residency Director for the York Hospital Emergency Medicine Residency, the Research Director for the York Hospital Emergency Medicine Residency, and the co-creator of the Emergency Severity Index (ESI) Triage System, the most widely used triage system in US Emergency Departments. He established the first Pediatric Advanced Life Support (PALS) and Advanced Pediatric Life Support (APLS) programs at York Hospital. Dr. Eitel was recognized by the Commonwealth of Pennsylvania with the first EMS Physician of the Year award. Dr. Eitel’s intellectual curiosity led to involvement in research. He conducted and published numerous EMS and Emergency Medicine studies. The York Hospital Emergency Medicine Resident Researcher of the Year award is named in his honor.

In 1996, he graduated with an MBA from the Sellinger School of Business at Loyola College. Dr. Eitel recognized the utility of business and quality management methodology in medicine and began to incorporate these principles into his practice. He created an Advanced Business Life Support (ABLS) program for physicians. He developed other handbooks and tools and was a graduate level faculty member at George Mason and Kent State Universities. While battling illness over the past several years, he returned to work at York Hospital as the Physician Advisor for the Case Management Department.

Dave enjoyed good food and drink and sharing the everyday pleasures of life with family and friends. His personal life and family were his greatest sources of joy. He is survived by Lynne, his wife of 38 years, daughters Jessica and Kristin, and son, Justin.

Dr. Eitel was a true friend and mentor to many people. His career and his work touched many lives and he will be remembered with love and respect by his medicine family.

Be it resolved that we, members of the York Hospital medical staff, pause to remember Dr. David R. Eitel, and his contributions to our hospital and health system, to our community and to our profession. Be it also resolved that a copy of this resolution be included in the minutes of the Medical Staff and copies be forwarded to his family.

Respectfully submitted,

Ronald S. Benenson M.D.
Associated Research Director
Department of Emergency Medicine

William M Shue, MD
Dr. William M. Shue was born on June 18, 1935, in Spring Grove Pennsylvania, the son of Dr. Spurgeon and Mrs. Elizabeth Shue. He was a graduate of Spring Grove High School, Franklin and Marshall College, and Jefferson Medical College. He completed his surgery residency at York Hospital, and served in the U. S. Army Medical Corps, including a tour in Viet Nam. He served as a general surgeon at
York Hospital for over 35 years, and, last year, was honored by the York County Medical Society for 50 years in the field of medicine.

His long and devoted service to the York community included the York County Medical Society (including a term as President); the Patient and Family Advisory Council at York Hospital; the York Fair Board; the York Symphony Board; the York Benevolent Association; the consistory of Trinity United Church of Christ; and the Masonic Lodge. He was a member of the Country Club of York and past president of Prospect Hill Cemetery. He was an avid reader, a passionate world traveler, and a connoisseur of gourmet food.

A surgeon must, of course, be knowledgeable and must possess good manual dexterity. But that is not enough. An excellent surgeon must have integrity, compassion, and good judgment. These are traits which describe Bill’s surgical career perfectly. In both his personal and professional life, I have known no other surgeon who was more trustworthy, kind, honest and generous than he was.

No one was more joyful than Bill when a patient had a good outcome from surgery, and no one was more devastated if things did not go well. Within the Department of Surgery, he was highly regarded for his keen surgical judgment and common sense. He knew when to operate, and, more importantly, when not to operate. He enriched the lives of thousands of patients during his career, but always endeavored to live by the motto, “Primum non nocere”, or “First, do no harm.”

He was a beloved teacher and patient mentor for all the younger surgeons and residents, but especially to Tom Scott and me, who had the honor and privilege of being his partners. We all owe a tremendous debt of gratitude to him, both personally and professionally.

Bill lived life to the fullest. He never had a bad vacation, saw a bad show, or ate a bad meal! He chose to make the best of every situation, and chose to see the best in each person that he met. He treated everyone kindly and respectfully. He had a wonderful sense of humor, and a smile that wouldn’t quit! In summary, he was a happy man. Perhaps of all of his wonderful qualities, these are the ones that I will remember most.

Bill is survived by his loving wife of 55 years, Nelda, and by daughters Elizabeth and Margaret, son-in-law Leonard, brother Ted, and seven grandchildren.

Be it resolved that we, the members of the York Hospital Medical Staff, pause to remember Dr. William M. Shue, and his contributions to our hospital and our profession. Be it also resolved that a copy of this resolution be included in the minutes of the Medical staff and copies be forwarded to his family.

I have lost a wonderful teacher, colleague, partner and friend. I will miss him deeply. May he rest in peace.

Respectfully submitted,

Samuel S. Laucks II, M.D.

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Donald E (Peter) Piper, M.D.
Donald Evans (Peter) Piper, 85, died March 6, 3013 at his home in Newtown, Pennsylvania after a three year struggle with pulmonary fibrosis. Dr. Piper was born in Chambersburg, PA on May 30, 1927 and grew up in Dry Run, PA. As many high school boys did upon graduation during World War II he enlisted
in the U.S. Army and served in the 88th Infantry Division’s Medical Administration office in Trieste, Italy until 1947. He graduated from Dickinson College with a B.S. in Biology in 1951 and received his medical degree from Temple University in 1955. Later that year he married Mildred Anne Marker in 1955 and began his one year internship at York Hospital.

After joining the York Hospital medical staff in 1956 he took over a pre existing medical practice in Dallastown, PA. He was active in hospital affairs particularly the embryonic Family Practice Department and Family Practice Residency program. He served as President of the York Hospital Medical Staff from 1969 to 1971. He cofounded the Dallastown Family Practice Center in 1972. He remained there until his retirement from private practice in 1992. He and Anne, a nurse then spent a year as medical missionaries at the African Inland Mission Hospital in Kijabe, Kenya. Over the many years of their marriage they also served on the Navajo reservation in Ganado, Arizona, Samalia Rwanda and in Danishpet, India.

After his return from Kenya in 1993, he recharged his batteries for several months and then worked in several offices around the county as a substitute physician. Dr. Piper officially retired from seeing patients in 997.

In addition to his medical duties Dr. Piper was a man of many interests and had a deep love for hunting and fishing. He was one of several cofounders of Rambo Run, a beautiful fly fishing club in southern York County. He was also involved in many different charitable organizations and churches.

Dr. Piper was predeceased by Anne on December 18, 2001. They were blessed with three children: Franklyn and his wife, Laura, Daniel and his wife Kimberlee and their 2 children Emma and Ian, and Elizabeth Major and her husband Fred.

In 2004 Dr. Piper reunited with a friend from college and medical school, Dr. Lois Pauley, a retired pediatrician, who had lost her 1st husband several years earlier. Lois and Pete were married several months later in Newton, PA where most of Lois’s large family lived. All of their combined grandchildren were involved in the wedding. Over the next several years Lois taught Pete how to golf and he taught her how to fish. They traveled extensively. Dr. Piper passed away peacefully March 6, 2013 surrounded by Lois and other members of both his loving families.

Dr. Piper was highly respected by his partners and peers, adored by his office staff, and loved by his patients. He served the Dallastown/Red Lion area for over 40 years and is still remembered very fondly by his patients.

At his memorial service in York there was a table of memories from his Army service. His army dress jacket was placed on a table next to his picture. I could not believe how small it was. In my mind Pete was a giant of a man with a huge influence upon all those he encountered.

Be it resolved that we, members of the York Hospital Medial Staff, pause to remember Dr. Donald Evans (Peter) Piper, and his profound influence on our hospital, our community, and our private and our professional lives. Be it also resolved that a copy of this resolution be included in the minutes of the medical staff and copies be forwarded to his family.

Respectfully submitted,

Paul B Schwartzkof, MD
Partner: Dallastown Family Medicine