

Mangum Regional Medical Center  
Medical Staff Meeting  
Thursday  
December 18, 2025

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director

Laura Gilmore, MD

Absent:

Guest:

ALLIED HEALTH PROVIDER PRESENT

Mary Barnes, APRN-CNP

David Arles, APRN-CNP

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO

Nick Walker, RN, CCO

Meghan Smith, RN – Infection Control

Chasity Howell, RN – Utilization Review

Lynda James, LPN – Drug Tech

1. Call to order
  - a. The meeting was called to order at 12:47 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
  - a. The minutes of the November 20, 2025, Medical Staff Meeting were reviewed.  
**i.Action:** Dr. Chiaffitelli, Medical Director, made a motion to approve the minutes.
3. Unfinished Business
  - a. None.
4. Report from the Chief Executive Officer
  - Operations Overview -  
Roof has been completed.
    - Patient room remodeling continues
    - Looking at clinic collections for November, we collected a total of \$416.44 up from \$575.36 at time of service.

- Hospital upfront collections were at \$827.00 for the month of November down from \$985.00 in October.
- We did 12 patient transports with the Strong Minds van: 2 for the program, 4 for outpatient wound care, 1 to Dr Office, 3 for outpatient radiology, 1 transport from the hospital to home, and 1 back to the nursing home.
- We met with ARC Architecture, and they are working on plans for the lab renovation, second site visit is scheduled for 12/5/2025.
- Hospital awning repair is completed.
- We will take donations for our first toy drive at MRMC up until 12/10/2025 and then we plan on handing presents out on 12/18/2025
- As of January 6, 2026, providers will be doing rounds on Swing Bed patients three times a week; Tuesday, Thursday and Saturday.
- We are also getting quotes from area contractors for repair work on our current lab that was struck by a vehicle. Written report remains in the minutes.

## 5. Committee / Departmental Reports

### a. Medical Records –

#### 1. September – ER –

OBS -

Acute –

SWB -

All notes were completed according to Hospital By Laws.

There wasn't a report for November, 2025.

### b. Nursing

#### Patient Care

- MRMC Education included:
  1. Nursing documentation updates are communicated to nursing staff weekly.
  2. Nurse meeting held November 19<sup>th</sup>.
- MRMC Emergency Department reports 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 0 contaminated blood culture set(s).
- MRMC Infection Prevention reports 0 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.
- MRMC Infection Prevention reports 0 HAI, and 0 MDRO for the month of November, 2025.

#### Client Service

- Total Patient Days for November 2025 were 231. This represents an average daily census of 8.
- November 2025 COVID-19 statistics at MRMC: Swabs (0 PCR & 12 Antigen) with 0 positive.

Preserve Rural Jobs and Culture Development

- One-AM and PM House Supervisor RN position is open. Multiple interviews held for AM position.
- Patients continue to voice their praise and appreciation for the care received at MRMC. We continue to strive for excellence and improving patient/community relations.

Written report remains in minutes.

c. Infection Control –

- Old Business
  - a. None
- New Business
  - a. N/A
- Data:
  - a. N/A
- Policy & Procedures Review:
  - a. Completed July, 2024
- Education/In Services
  - a. N/A
- Updates: None at this time.
- N95 Fit Tests – 5: N95 Fit Test

Annual Items:

- a. Construction Risk Assessment - ICRA completed for OR to Lab conversion. Submitted to state by K. Martinez, CEO. No start date on this project at this time. Roof has been completed. ICRA for June 2024 completed.
- b. Linen Services – No issues reported with new linen company.

Written report remains in minutes.

d. Environment of Care and Safety Report

- i. Evaluation and Approval of Annual Plans
  - i.i. Old Business - -
    - a. Chrome pipe needs cleaned and escutcheons replaced on hopper in ER – could not replace escutcheons due to corroded piping in wall – capped off leaking pipe under the floor to stop leak – hopper will be covered – remodel postponed.—Talked to contractor 10-4-2025 about cover for hopper – contractor measured and is making quote for cover.
    - b. ER Provider office flooring needing replaced. Tile is onsite.- remodel is postponed.

- c. Stained ceiling tile throughout facility from leaking roof – Replacement Started 9-15-2025.
- d. Damaged wall and ceiling in X-Ray due to leaking roof – Repaired 9-15-2025 – Ready for paint.
- e. Damaged ceiling in OR2 due to leaking roof.
- f. New Hope Roof – Leak in Physical Therapy office after hail storm.
- g. New Hope Window - - Window in south end of lobby broken from hail storm. – Replacement Ordered. Complete 10-27-2025
- h. Ceiling in CT area damaged due to leaking room.- Repaired 9-15-2025 - -- Ready for Paint.
- i. Remove Velcro strips from data drops and replace with zip ties.
- j. Temperature Log on blanket warmer not current.
- k. Camera Outside Pharmacy not working.
- l. Alarm system and panic button for Pharmacy needing installed.
- i.i.i. New Business
  - a. Regulator on reserve oxygen manifold has small leak and needs replaced.

Written report remains in the minutes.

- e. Laboratory
    - i. Tissue Report – No tissue report for the month of November, 2025.
    - i.i. Transfusion Report – No transfusion report for November, 2025.
- Written report remains in minutes.

- f. Radiology
    - i. There was a total of – 168 X-Rays/CT/US
    - i.i. Nothing up for approval
    - i.i.i. Updates:
      - o No updates
- Written report remains in minutes.

- g. Pharmacy
    - i. Verbal Report by Clinical Pharmacist
    - i.i. P & T Committee Meeting –
      - The P&T Committee Meeting was held on Tuesday, December 23, 2025.
    - i.i.i. Lorazepam injectable is available for order.
      - Demerol IV is unavailable.
    - i.v. Reviewing Policies & Procedures to be presented at a later date.
- Written report remains in the minutes.

- h. Physical Therapy
  - i. No report.

- i. Emergency Department
  - i. No report

- j. Quality Assessment Performance Improvement
  - Risk Management
    - Grievance – 1
    - Fall with no injury – 2
    - Fall with minor injury – 0
    - Fall with major injury – 0
    - Death – 2
    - AMA/LWBS – 2-In Pt – 1- ER AMA -  
OBS – SWB
  - Quality – Minutes are in the minutes of Medical Staff Meeting.
  - HIM – ED discharge instructions - Compliance  
100% - D/C Note Compliance  
100% - Progress Notes  
97% - ED DC Instructions  
100% - ED Provider Dx
  - Med event –
  - After hours access was –

Written report remains in the minutes.

- k. Utilization Review
  - i. Total Patient days for September: 350  
Total Patient days for October: 290
  - i.i. Total Medicare days for September: 308  
Total Medicare days for October: 236
  - i.i.i. Total Medicaid days for September: 2  
Total Medicaid days for October: 0
  - iv. Total Swing Bed days for September: 319  
Total Swing Bed days for October: 247
  - v. Total Medicare SB days for September: 288  
Total Medicare SB days for October: 212

Written report remains in the minutes.

Motion made by Dr. John Chiaffitelli, Medical Director to approve Committee Reports for October, 2025.

#### 6. New Business

- a. Review & Consideration of Approval of Policy & Procedure: MRMC: –  
Oklahoma Physician Orders for Life-Sustaining Treatment (POLST) Form  
**i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC:  
Oklahoma Physician Orders for Life Sustaining Treatment (POLST) Form.
- b. Review & Consideration of Approval of Policy & Procedure: MRMC Information for  
Patients and Their Families – Your Medical Treatment Rights Under Oklahoma Law  
**i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the  
MRMC – Information for Patients and Their Families – Your Medical Treatment  
Rights Under Oklahoma Law.

c. Review & Consideration of Approval of Policy & Procedure: MRMC – Indwelling Urinary Catheter Insertion/Removal

**i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: - Indwelling Urinary Catheter Insertion/Removal Protocol.

d. Review & Consideration of Approval of Policy & Procedures: MRMC – Advance Directives Policy

**i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Advance Directives Policy.

e. Review & Consideration of Approval of Policy & Procedures: MRMC – Foley Catheter Line Insertion/Removal Policy

**i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Foley Catheter Line Insertion/Removal Policy.

7, Adjourn

a, Dr Chiaffitelli made a motion to adjourn the meeting at 1:15 pm

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Medical Director/Chief of Staff

Date