

Mangum Regional Medical Center
Medical Staff Meeting
Thursday
August 21, 2025

MEMBERS PRESENT:

John Chiaffitelli, DO, Medical Director

Laura Gilmore, MD

Absent:

Guest:

ALLIED HEALTH PROVIDER PRESENT

David Arles, APRN-CNP

Mary Barnes, APRN-CNP

NON-MEMBERS PRESENT:

Kelley Martinez, RN, CEO

Nick Walker, RN, CCO

Chelsea Church, PharmD

Denise Jackson, RN – Quality

Chasity Howell, RN – Utilization Review

1. Call to order
 - a. The meeting was called to order at 01:12 pm by Dr. John Chiaffitelli, Medical Director.
2. Acceptance of minutes
 - a. The minutes of the July 17, 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
 - The roof repair is ongoing well. We have been working with electricians and heating and air companies during the roof repair because they have raised the height of the roof over 9 inches in some areas, some units have had to be raised, and new wiring ran to account for increase height.
 - We have had some increased leaking with the recent rain fall

mainly due to the progress of the repairs.

- Roof completion is still on track for the first of September.
- We did have to go on CT divert for 3 days due to leaking in the CT room. We had the GE service technician come out and inspect the CT machine prior to turning it back on to ensure it did not have any damage.
- Room remodeling is continuing.
- According to standards, since we are doing rewiring in the OR for the Lab, we do have to get an architect involved.
- Looking at clinic collections for July, we collected a total of \$349.22 down from \$695.64 at time of service.
- Upfront hospital collections for July were \$1685.68.
- We continue to work on our outreach and marketing within our community and surrounding areas.
- Patient rounds continue to provide positive feedback on patient care.

Written report remains in the minutes.

5. Committee / Departmental Reports

a. Medical Records –

1. June – ER – Two ER Provider notes were needed.

OBS - ER note instead of H&P

Acute - ER note instead of H&P

No DC Summary

SWB - 0

All notes were completed according to Hospital By Laws

2 July - ER - Three ER Provider notes were needed.

OBS - One H&P needed

Acute - Two ER note instead of H&P

One lacking Provider Note

SWB - 0

All notes were completed according to Hospital By Laws

Written report remains in the minutes.

b. Nursing

Patient Care

- MRMC Education included:
 1. Nursing documentation updates are communicated to nursing staff weekly.
 2. Nurse meeting scheduled for August 20th.
- MRMC Emergency Department reports 0 patients Left Without Being Seen (LWBS).
- MRMC Laboratory reports 0 contaminated blood culture set(s).
- MRMC Infection Prevention reports 1 CAUTI.
- MRMC Infection Prevention report 0 CLABSI.

- MRMC Infection Prevention reports 1 HAI, and 0 MDRO for the month of July, 2025.

Client Service

- Total Patient Days for July, 2025 were 272.. This represents an average daily census of 8.8.
- July, 2025 COVID-19 statistics at MRMC: Swabs (0 PCR & 6 Antigen) with 0 positive.

Preserve Rural Jobs and Culture Development

- One-PM House Supervisor RN
- One CNA position filled!
- 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. N/A
- Education/In Services
 - a. Education pending for preventing non-ventilator associated pneumonia..
- Updates: Employees are offered flu shots through the influenza vaccine program. Influenza vaccinations and declinations completed for MRMC employees. 1 N95 Fit Test; EHN to begin annual Fit test in June and July 2025.

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 to be replaced, pending official start date.
ICRA for June 2024 completed.
- b. Linen Services – New linen company CLEAN to deliver new linen order June 24th, 2025.

No Report for the month of August, 2025

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.

- b. ER Provider office flooring needing replaced. Tile is onsite.- remodel is postponed.
- c. Stained ceiling tile throughout facility from leaking roof
- d. Damaged wall and ceiling in X-Ray due to leaking roof
- e. Damaged ceiling in OR2 due to leaking roof.
- f. Stained Ceiling tile in x-ray control room and office area due to leaking roof.
- g. New Hope Roof – Leak in Physical Therapy office after hail storm
- h. New Hope Window - - Window in south end of lobby broken from hail storm.
- i. Ceiling tile in Clinic stained due to leaking roof. Replaced some 6-10-2025.

i.i.i. New Business

- a. None

Written report remains in the minutes. .

e. Laboratory

- i. Tissue Report – No report for the month of July, 2025.
- i.i. Transfusion Report – Approved
Written report remains in minutes.

f. Radiology

- i. There was a total of – 231 X-Rays/CT/US
- i.i. Nothing up for approval
- i.i.i. Updates:
 - o No new updates.Written report remains in minutes.

g. Pharmacy

- i. Verbal Report by Clinical Pharmacist
- i.i. P & T Committee Meeting –
The next P&T Committee Meeting will be held in September 18, 2025
- i.i.i. Lorazepam injectable is on national backorder and is unavailable to order. Will ask the providers to save lorazepam for seizure treatment only. Please use oral lorazepam or diazepam injectable for anxiety/agitation.
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 – 1 – In Pt.
 - Fall with minor injury – 0 – ER Pt.
 - Fall with major injury – 0
 - Death – 0
 - AMA/LWBS – 1 ER AMA – I - SWB AMA
 - Quality – Minutes are in the minutes of Medical Staff Meeting.
 - HIM – ED discharge instructions - Compliance
 - 95% - D/C Note Compliance
 - 100% - Progress Notes
 - 99% - ED DC Instructions
 - 97% - ED Provider Dx
 - Med event – 0
 - After hours access was – 51
- Written report remains in the minutes.

- k. Utilization Review
- i. Total Patient days for June: 212
 - i.i. Total Medicare days for June: 134
 - i.i.i. Total Medicaid days for June: 0
 - iv. Total Swing Bed days for June: 177
 - v. Total Medicare SB days for June: 116
- Written reports remain in the Minutes.

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

6. New Business

- a. Review & Consideration of Approval of Sign: MRMC – Neutropenic Precautions Sign - English
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Neutropenic Precautions Sign – English.
- b. Review & Consideration of Approval of Sign: MRMC – Neutropenic Precautions Sign Spanish
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Neutropenic Precautions Sign – Spanish.
- c. Review & Consideration of Approval of Policy & Procedure: MRMC - Transmission Based Precautions: Preventing Transmission of Infectious Agents Policy
- i.Motion:** made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Transmission-Based Precautions: Preventing Transmission of Infectious Agents Policy.
- d. Review & Consideration of Approval of Protocol: MRMC – Chest Pain/Acute Coronary

Syndrome (ACS) /STEMI/NSTEMI Protocol

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Chest Pain/Acute Coronary Syndrome (ACS) /STEMI/NSTEMI Protocol

- e. Review & Consideration of Approval of Policy & Procedure: MRMC - Management of Acute Chest Pain and Acute Coronary Syndrome (ACS) Policy

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Management of Acute Chest Pain and Acute Coronary Syndrome (ACS) Policy.

- f. Review & Consideration of Approval of Policy & Procedure: MRMC: Management of ST-Elevation Myocardial Infarction (STEMI), Non-ST Elevation Myocardial Infarction (NSTEMI) and Unstable Angina (UA) Acute Coronary Syndrome (ACS) Policy

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Management of ST-Elevation Myocardial Infarction (STEMI), Non-ST Elevation Myocardial Infarction (NSTEMI) and Unstable Angina (UA) Acute Coronary Syndrome (ACS) Policy..

- g. Review & Consideration of Approval of Policy & Procedure: MRMC – Fibrinolytic Indications and Contraindications Checklist & TNKase/Activase Dosing Instructions

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Fibrinolytic Indications and Contraindications Checklist & TNKase/Activase Dosing Instructions.

- h. Review & Consideration of Approval of Policy & Procedure: MRMC – Fibrinolytic Therapy Dosing

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Fibrinolytic Therapy Dosing.

- i. Review & Consideration of Approval of Policy & Procedure: MRMC – ECG Screening Criteria

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - ECG Screening Criteria.

- j. Review & Consideration of Approval of Policy & Procedure: MRMC – Chest Pain Assessment Tool

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC - Chest Pain Assessment Tool.

- k. Review & Consideration of Approval of Policy & Procedure: MRMC – Heart Score Evaluation Tool

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC: Heart Score Evaluation Tool.

- l. Review & Consideration of Approval of Policy & Procedure: MRMC – Cardiac Chest Pain/ACS/NSTEMI Outcome Review Tool

i.Motion: made by John Chiaffitelli, DO, Medical Director, to approve the MRMC – Cardiac Chest Pain/ACS/NSTEMI Outcome Review Tool.

7. Adjourn

- a. Dr Chiaffitelli made a motion to adjourn the meeting at 1:30 pm.

Medical Director/Chief of Staff

Date

