

## EDMOND

The Active Staff: The Active Staff shall consist of Medical Staff Appointees who have been designated to transact all business of the Medical Staff. They shall have evidenced interest in and loyalty to the Hospital by regularly treating their private patients in the Hospital. To evidence such interest and loyalty, Active Staff Appointees shall be required to be involved directly or indirectly in the care of more than twenty-five (25) inpatient or outpatient hospital encounters per year, either through admission of such patients to the Hospital, treatment of outpatients, or consultations with attending physicians of Hospital patients; provided, however, that a department or categorical subset of a department may propose a lesser numerical patient care requirement for Medical Staff Appointees assigned to such department, which requirement must be approved by the Credentials Committee and by the Board of Directors. The minimum requirement for patient care activity may be waived for practitioners who document their efforts to support the hospital's patient care mission to the satisfaction of the MEC and the Board. Failure of an Active Staff Appointee to be directly involved in the care of an average of more than twenty-five (25) patients per year (or such other departmental requirements approved in accordance with the preceding sentence) during any period of appointment shall result in reassignment of an Active Staff Appointee to Courtesy Staff during the subsequent appointment period, unless extraordinary circumstances are deemed to exist. There shall be no limitation on the number of patients that Active Staff Appointees may admit to the Hospital.

The Provisional Staff: Applicants to the Active Staff, Consulting Staff and Courtesy Staff who are appointed as Medical Staff Appointees shall initially be appointed to the Provisional Staff for a minimum period of one (1) year. Applicants accepted for Active, Consulting or Courtesy Provisional Staff before certification by their respective specialty board recognized by the American Board of Medical Specialties or the American Osteopathic Association shall remain in Provisional Status until such board certification is documented, provided that such Applicant is actively pursuing such specialty board certification. Applicants failing to become certified within the timeframe as dictated by the respective specialty board will not be eligible for reappointment to the Provisional Staff or for advancement to Active or Courtesy Staff. Notwithstanding the above, if during the first ninety (90) days in which the Hospital accepts applications to the Medical Staff, an applicant is able to demonstrate a proven record of quality care, appropriate training and qualifications, which are equivalent to Board Certification, the requirement of Board Certification or the active pursuit of such certification shall be waived. This waiver will only be available during the first ninety (90) days in which the Hospital accepts applications to the Medical Staff. Provisional Medical Staff Appointees shall generally have the same privileges and responsibilities as have

Medical Staff Appointees of the respective staff category for which staff appointment was sought, except under no circumstance shall a Provisional Staff Appointee have the privilege of voting at meetings of the Medical Staff or any department or holding any office. Provisional Staff Appointees shall have privileges as specified in the Applicant's formal letter of appointment. No physician may be a member of the Provisional Staff if neither board certified nor actively pursuing specialty board certification. No physician may be a member of the Provisional Staff for more than seven (7) years.

Admit or treat at least five (5) patients or perform at least five (5) procedures or consultation at the Hospital during each twelve month (12) period of his or her appointment to the Provisional Staff, unless appointed to the Provisional Active Staff. Provisional Active Staff appointees shall be required to be involved directly or indirectly in the care of at least twenty-five (25) Hospital patients per year, either through admission of such inpatients or treatment of outpatients at the Hospital or consultations with attending physicians of Hospital patients.

The Senior Active Staff: Upon attaining the age of sixty-five (65), each Active Staff Appointee shall be assigned to the Senior Active Staff. Senior Active Staff Appointees shall not be required to participate in any emergency patient care call schedule or to attend staff or departmental meetings. Senior Active Staff Appointees shall retain the right to vote at staff and departmental meetings. Senior Active Staff Appointees shall be subject to appointment for special duties at the discretion of the Executive Committee. An Active Staff Appointee having reached the age of sixty (60) and having served continuously on the Medical Staff for a period of twenty-five (25) years may apply for appointment to the Senior Active Staff in accordance with Section 3.01.10.(b). Senior Active Staff must continue to meet the criteria for reappointment as described in these Bylaws, with the exceptions noted above.

The Consulting Staff: The Consulting Staff shall consist of recognized specialists who may be called upon to perform specific medical procedures relating to patient care as requested by another Medical Staff Appointee (except for another Consulting Staff Appointee) who is the attending physician for the patient for whom the consultation request is made. Consulting Staff Appointees shall not be entitled to admit patients to the Hospital or assume the role of attending physician. Consulting Staff Appointees shall not be entitled to hold staff or departmental office, vote at staff and departmental meetings, or have any other assigned duties or responsibilities. If performing procedures at the Hospital, Consulting Staff Appointees must provide back-up coverage with like privileges.

The Courtesy Staff: The Courtesy Staff shall consist of those Medical Staff Appointees who do not regularly use the Hospital for treatment of their private patients. In order to maintain Courtesy Staff status, Medical Staff Appointees must document their admission or involvement in the care or treatment of at least five (5) patients during their appointment period, which may include the referral of patients who are subsequently admitted to the Hospital. Courtesy Staff Appointees unable to meet this requirement may submit for consideration by the Credentials Committee a report of clinical performance from another Joint Commission-accredited healthcare organization demonstrating care or treatment of at least five (5) patients with satisfactory outcomes. Courtesy Staff Appointees may admit to the Hospital no more than the lesser of (i) twenty-five (25) patients per year or, (ii) one (1) less than the patient care requirement for Active Staff Appointees with the same specialty, as established pursuant to Section 3.01.02(a). Such admission limitations shall be exclusive of emergency patients admitted from the Emergency Room of the Hospital when taking emergency room call. The administration of an anesthetic agent or agents to one patient by an anesthesiologist shall be considered the equivalent of admitting one (1) patient. Courtesy Staff Appointees shall have privileges as determined in accordance with these Bylaws. Courtesy Staff Appointees shall not be entitled to vote at meetings of or hold elected office in the Medical Staff or any of its departments. Courtesy Staff Appointees may be required to participate in emergency patient care call schedules if deemed necessary by the Chairperson of the department to which the Courtesy Staff Appointee is assigned. Courtesy Staff Appointees who wish to advance to the Active Staff shall submit a request in accordance with these Bylaws.

The Associate Staff: The Associate Staff shall consist of physicians and dentists licensed in the State of Oklahoma who are in administrative positions and/or who do not have an active practice at the Hospital but who are affiliated with INTEGRIS through employment, contract, referral relationships, or use of an INTEGRIS facility. The Associate Staff shall be non-departmentalized. Associate Staff Appointees shall be entitled to physician parking and library privileges at the Hospital, notification of and participation in staff functions and educational events sponsored by the Hospital, receipt of INTEGRIS publications, and participation in other non-patient care benefits as may be determined by both the Executive Committee and the Board of Directors from time to time. Associate Staff Appointees shall not be entitled to admit patients to the Hospital nor assume the role of attending physician, nor shall they be granted any clinical privileges. Associate Staff shall not be required to serve a year on Provisional Staff while considered Associate Staff. Associate Staff Appointees shall not be entitled to hold staff or departmental office, vote at staff or departmental meetings, or have any other assigned duties or responsibilities.

Associate Staff Appointees shall have the privilege of reviewing the medical records of the patients for whom they have a clinical, contractual or administrative relationship and to participate with the attending physician in discussions regarding the patient's care. Associate Staff Appointees requesting transfer to a staff category with clinical privileges shall be required to meet the same criteria for appointment as any other physician applying for appointment to that staff category and must demonstrate current competency for the privileges requested. Reappointment of the Associate Staff is not required.

Telemedicine or Teleradiology Staff: The Telemedicine/ Teleradiology Staff shall consist of physicians of demonstrated competence qualified for staff appointment who are not eligible for appointment to the Active Staff because they intend to provide only consultation through telemedicine or teleradiology. The Telemedicine/Teleradiology Staff shall have no staff committee responsibilities, may not vote, and may not hold office.

The Hospital may choose to contract with Joint Commission-accredited entities to provide credentialing services of telemedicine/teleradiology in accordance with Joint Commission standards. The Medical Staff and Board of Directors shall approve the credentialing contract.

Teleradiology/Telemedicine shall be utilized at the Hospital to assist medical providers render a diagnosis or otherwise provide clinical treatment to a patient through the use of electronic communication or other communication technologies.