

“Peer Review” refers to any and all activities and conduct which involve efforts to reduce morbidity and mortality, improve patient care or engage in professional discipline. These activities and conduct include, but are not limited to: the evaluation of medical care, the making of recommendations in credentialing and delineation of privileges for Physicians, Dentists and Podiatrists or Health Allied Professionals seeking or holding such Clinical Privileges at a Medical Center facility, addressing the quality of care provided to patients, the evaluation of appointment and reappointment applications and qualifications of Physicians, Dentists and Podiatrists or Health Allied Professionals, the evaluations of complaints, incidents and other similar communications filed against members of the Medical Staff and others granted Clinical Privileges. They also include the receipt, review, analysis, acting on and issuance of incident reports, quality and utilization review functions, and other functions and activities related thereto or referenced or described in any Peer Review policy, as may be performed by the Medical Staff or the Governing Board directly or on their behalf and by those assisting the Medical Staff and Board in its Peer Review activities and conduct including, without limitation, employees, designees, representatives, agents, attorneys, consultants, investigators, experts, assistants, clerks, staff and any other person or organization who assist in performing Peer Review functions, conduct or activities.

“Peer Review Committee” means a Committee, Section, Division, Department of the Medical Staff or the Governing Board as well as the Medical Staff and the Governing Board as a whole, when participating in any Peer Review function, conduct or activity as defined in these Bylaws. Included are those serving as members of the Peer Review Committee or their employees, designees, representatives, agents, attorneys, consultants, investigators, experts, assistants, clerks, staff and any other person or organization, whether internal or external, who assist the Peer Review Committee in performing its Peer Review functions, conduct or activities. All reports, studies, analyses, recommendations, and other similar communications which are authorized, requested or reviewed by a Peer Review Committee or persons acting on behalf of a Peer Review Committee shall be treated as strictly confidential and not subject to discovery nor admissible as evidence consistent with those protections afforded under the Medical Studies Act. If a Peer Review Committee deems appropriate, it may seek assistance from other Peer Review Committees or other committees or individuals inside or outside the Medical Center. As an example, a Peer Review Committee shall include, without limitation: the MEC, all clinical Departments and Divisions, the Credentials Committee, the Clinical Performance Improvement Committee, Infection Control Committee, Physician’s Health Review Committee, the Governing Board and all other Committees when performing Peer Review functions, conduct or activities.