

DATE: November 12, 2025

TO: Torrance Memorial Medical Staff Members & Hospital Departments

FROM: Oren Zaidel, M.D., Chief of Staff

SUBJECT: Medical Executive Committee Meeting Action Items

The following items were approved or presented for information by the Medical Executive Committee on November 11, 2025:

EMERGENCY DEPARTMENT – October 16, 2025

A. Informational: Brett Lorber, M.D., nominated for 2026 Chief of Emergency Department

FAMILY PRACTICE DEPARTMENT – October 23, 2025

A. Informational: Chelse Kumabe, D.O., elected 2026 Chief of Family Practice Department
B. Revised Clinical Privilege Application Card for Department of Family Practice

Revisions:

Deletion of the following privileges:

- 30.07-Flexible sigmoidoscopy (no biopsy)
- 30.11-Incision & drainage of Bartholin Cyst
- 30.12-Removal of vulvar skin lesion

OBSTETRICS & GYNECOLOGY DEPARTMENT – October 28, 2025

A. Informational: Cheryl Sanders, M.D., nominated for 2026 Chief of OB/GYN Department

PEDIATRIC DEPARTMENT – October 16, 2025

A. Informational: Steven Jensen, M.D., elected 2026 Chief of Pediatrics Department
B. Revised Division of Nursing Pediatrics Policy/Procedure entitled, “Standard of Care – Pediatric Nursing Care”

CREDENTIALS COMMITTEE – October 30, 2025 and November 10, 2025

– For a detailed report, see Toni Woodard, Medical Staff Services Department.

INFECTION PREVENTION/P&T COMMITTEE – November 4, 2025

- A. Draft Order Set, EDMD Adult Anaphylaxis
- B. Draft Order Set, EDMD Pediatric Anaphylaxis
- C. Draft Order Set, EDMD Pediatric Seizure Epilepticus
- D. Draft Order Set, EDMD Pregnant Vaginal Bleeding
- E. Revised Order Set, EDMDM Pediatric DKA or HHS
- F. Revised Order Set, Lumbar Puncture
- G. Revised Order Set, Craniotomy Pre-Op
- H. Revised Order Set, Craniotomy Post-Op
- I. Annual Review, Code Stroke Orders (Stroke/CVA)
- J. Annual Review, Neuro Arrest (Stroke/CVA)

INFECTION PREVENTION/P&T COMMITTEE (CONTINUED)

- K. Stroke/CVA-Aneurysmal Subarachnoid Hemorrhage (aSAH)
- L. Annual Review, Stroke/CVA-Intracerebral Hemorrhage (ICH)
- M. Annual Review, Stroke/CVA-Ischemic
- N. Annual Review, Stroke/CVA-Post Thrombectomy
- O. Annual Review, Stroke CVA-Post Thrombolysis
- P. Annual Review, Transient Ischemic Attack (TIA)
- Q. Revised Medication Management Policy/Procedure entitled, "Patient Care Medication Management Medication Reconciliation"
- R. Revised Nursing Administration Policy/Procedure entitled, "Nursing Practice Guidelines"
- S. Revised Order Set, Medication Transfer/Admission Order Form
- T. Revised Infection Prevention Policy/Procedure entitled, "Surge Plan Influenza/Unusual Illness"
- U. Annual Review Compounding Non-Sterile Products
- V. 3-Year Review, Medication Management Policy/Procedure entitled, "Medication Management-Medication Storage"
- W. Revised Heart Box List
- X. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Construction and Renovation"
- Y. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Designated Path of Travel for Handling Waste and Contaminated Materials"
- Z. Revised Infection Prevention Policy/Procedure entitled, "Disinfectant/Detergents/Cleaning /Cleansing Products"
- AA. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Equipment Cleaning Matrix"
- BB. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Hand Hygiene"
- CC. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Laboratory Exposure Control Plan"
- DD. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Leak/Flood Assessment Response"
- EE. 3-Year Review, Infection Prevention Policy/Procedure entitled, "MRSA/CRE/Candida auris Screening Protocol"
- FF. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Prevention of Nosocomial Legionnaires and other Waterborne Diseases"
- GG. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Respiratory Hygiene/Cough Etiquette"
- HH. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Supply Storage"
- II. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Communicable Disease Reporting"
- JJ. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Transitional Care Unit"
- KK. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Treatment of Inpatients Suspected/Confirmed/Exposed to Scabies"
- LL. 3-Year Review, Infection Prevention Policy/Procedure entitled, "Tuberculosis Exposure Control Plan"
- MM. Revised Order Set, Tube Feeding
- NN. Annual Review, TMMC Diet Manual Diet Types and Restrictions

INSTITUTIONAL REVIEW BOARD – Approvals filed in Medical Staff Services – please see Angela Moreno

TRANSITIONAL CARE UNIT – October 14, 2025

- A. Transitional Care Unit Policy/Procedure entitled, “Transportation of Residents for Off-Site Dialysis Treatment”
- B. Transitional Care Unit Policy/Procedure entitled, “Care Coordination for Resident Receiving Dialysis at Off-Site Locations”

If there are any questions, please contact Genny Schauwecker at extension 27555.

Distribution:

TMMC Website – For Medical Staff Members

Medical Staff Services/Performance Improvement Department

Dan Bauman, Clinical Informatics

Amy Hellinga, Clinical Informatics

Maki Jerden, N.P., Wound Ostomy

Anne Kienberger, Clinical Informatics

TMMC Managers