UWHCA Board of Directors

July 23, 2020, 1:00 - 4:30 PM

https://uwhealth.webex.com/uwhealth/onstage/g.php?
MTID=e7673b59d6d9e454aea26f19a87f6e4f9

Meeting number: 120 130 2758 // Password: 072320


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UWHCA Board of Directors - July 23, 2020 - Public Meeting Notice

Agenda

1:00 PM
I. Call to Order of Board Meeting
   Dean Robert Golden

1:00 PM
II. Consent Agenda
    Dean Robert Golden

Meeting Minutes

Medical Staff Membership and Clinical Privileges

Attachment - Medical Staff Membership and Clinical Privileges Page 4

Regional Division, Inc. - Corporate Officers

Resolution - Regional Division, Inc. Corporate Officer Appointments Page 18

1:05 PM
III. UW Health Anti-Racism: A Vision for a New Normal
     Ms. Shiva Bidar-Sielaff

     Presentation - UW Health Anti-Racism: A Vision for a New Normal Page 20

1:40 PM
IV. Closed Session

   Motion to enter into closed session pursuant to Wisconsin Statutes section 19.85(1)(e), for the discussion of the following confidential strategic matters, which for competitive reasons require a closed session: review and approval of closed session and members only closed session meeting minutes; discussion of investment in Dane Workforce Housing Fund, LLC; discussion of COVID-19 impact and response including but not limited to operations, strategic plan and financial matters including FY21 UW Health Enterprise Capital and Operating Budget (July-December 2020); and workforce committee update; pursuant to Wisconsin Statutes section 19.85(1)(c), for discussion of the UW Health CEO performance assessment; and pursuant to Wisconsin Statutes section 19.85(1)(g), to confer with legal counsel regarding these and other matters.

4:20 PM
V. Return To Open Session
   (Estimated)

4:21 PM
VI. ACTION: Approval of Dane Workforce Housing Fund, LLC Contribution
    Dean Robert Golden

    Approve $1M fund contribution as discussion in closed session

    Resolution - Dane Workforce Housing Investment Fund Page 41

4:25 PM
VII. ACTION: Approval of FY21 UW Health Enterprise Capital and Operating Budget (July 1 through December 31, 2020)
     Dean Robert Golden

     Motion to approve Resolution – FY21 UW Health Enterprise Capital and Operating Budget (July 1 through December 31, 2020) as discussed in closed session.
VIII. Adjourn
Attachment

Medical Staff Membership and Clinical Privileges

July 2020
The Medical Board, upon the recommendation of the Credentials committee, recommends approval of the following new applications, additional privileges, biennial reappointments and status changes for the medical staff and other providers requesting professional privileges for practice at UWHC. All of the recommended actions have been reviewed in accordance with the Medical Staff Bylaws. The credentials of all new applicants have been verified. All persons listed below meet the standards of the medical staff for the membership and privileges recommended.

Credentials Committee: June 26 & July 6, 2020
Medical Board: July 9, 2020

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**Joshua P. Babu, MD, Active Staff**
Department of Psychiatry

- Adult Psychiatry Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult and treat patients, above the age of 15, who suffer from mental, behavioral, or emotional disorders. These privileges also include care of patients via telemedicine. These privileges include supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.

**Patrick M. Belson, DO, Active Staff**
Department of Radiology/Fellow

- Radiology Core Privileges: Performance and interpretation of all radiologic tests and procedures including radiographs, ultrasound, CT, MRI, diagnostic (non-therapeutic) nuclear medicine in adults and children. These privileges include, but are not limited to, Doppler vascular imaging, transcranial Doppler, arthograms and joint aspirations, venography of major vessels, lumbar puncture, mammography, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows and other trainees. These privileges include care of patients via telemedicine.
- Nuclear Medicine Core Privileges: Consultation, performance, and interpretation of all routine and non-routine nuclear medicine procedures to make diagnostic evaluations, by both in vivo and in vitro techniques, of the anatomic and/or physiologic conditions of the body. These privileges include supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.

**Ruqin Chen, MD, Active Staff**
Department of Medicine/Hematology/Oncology

- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and
supervision of residents, fellows, and others in training.

- Hematology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients presenting with diseases and disorders of the blood and blood-forming tissues. These privileges include, but are not limited to, bone marrow aspiration and biopsy; administration of chemotherapy; the management and care of indwelling venous access catheters; plasmapheresis; therapeutic phlebotomy; lymph node aspiration; bone marrow harvest; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Medical Oncology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients presenting with malignancies. These privileges include, but are not limited to, administration of chemotherapeutic agents and biological response modifiers through all therapeutic routes; management and maintenance of indwelling venous access catheters; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

Naga L. Dharmavaram, MD, Active Staff
Department of Medicine/Cardiovascular Medicine
- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows, and others in training.

- Internal Medicine/Intermediate Care Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses in the outpatient setting (General Internal Medicine clinic). Includes lumbar puncture, thoracentesis, paracentesis, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and vaginal PH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training. These privileges include care of patients via telemedicine.

- Central venous catheter insertion for access

Ashanda R. Esdaille, MD, Active Staff
Department of Urology/Fellow
- Urology Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and surgically treat patients presenting with illnesses or injuries of the genitourinary system; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and vaginal PH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training. These privileges include care of patients via telemedicine.

- Use of surgical laser

- Laparoscopic urologic procedures

Victoria G. Gillet, MD, Active Staff
Department of Medicine/Chief Resident
- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges include, but are not limited to, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows, and others in training.

- Internal Medicine/Intermediate Care Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses in the outpatient setting (General Internal Medicine clinic). Includes diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows, and others in training.

Catherine Harnois, MD, Active Staff
Department of Radiology/Fellow
- Radiology Core Privileges: Performance and interpretation of all radiologic tests and procedures including radiographs, ultrasound, CT, MRI, diagnostic (non-therapeutic) nuclear medicine in adults and children. These privileges include, but are not limited to, Doppler vascular imaging, transcranial Doppler, arteriograms and joint aspirations, venography of major vessels, lumbar puncture, mammography, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows and other trainees. These privileges include care of
patients via telemedicine.

Newton J. Hurst, Jr., MD, Active Staff
Department of Human Oncology

- Radiation Oncology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat patients of all ages, with malignant and benign tumors, as well as other conditions where radiotherapy has a role. These privileges include, but are not limited to, administration of external beam radiation therapy, brachytherapy, naked or tagged radioisotopes (including intrallesional, intracavitary, intracystic, intravascular, intraarterial or other routes of administration), radiosensitizers, radioprotectors and other therapeutic drugs required in the routine management of these patients; management and maintenance of indwelling brachytherapy catheters and other devices for delivery of brachytherapy or other forms of radiation; performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and other persons in training.

Andrew Johannes, DO, Active Staff
Department of Medicine/Fellow

- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods and supervision of residents, fellows, and others in training.
- Gastroenterology and Hepatology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients presenting with diseases of the alimentary tract and associated organs. These privileges include, but are not limited to, diagnostic upper gastrointestinal endoscopy; therapeutic upper gastrointestinal endoscopy (treatment of bleeding lesions, sclerotherapy or banding of esophageal or proximal gastric varices, removal of foreign bodies, removal of polypoid lesions, dilation of stenotic lesions with transendoscopic balloon dilators or dilating systems with guidewires, palliative treatment of stenosing neoplasms); colonoscopy with polypectomy; liver biopsy; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.
- Upper Gastrointestinal and Enteric: Endoscopic injection of botulism toxin for achalasia
- Upper Gastrointestinal and Enteric: Percutaneous endoscopic gastrostomy (PEG) or jejunostomy (JEG) placement

Andrew A. Kanarek, MD, Active Staff
Department of Radiology/Fellow

- Radiology Core Privileges: Performance and interpretation of all radiologic tests and procedures including radiographs, ultrasound, CT, MRI, diagnostic (non-therapeutic) nuclear medicine in adults and children. These privileges include, but are not limited to, Doppler vascular imaging, transcranial Doppler, arthrograms and joint aspirations, venography of major vessels, lumbar puncture, mammography, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows and other trainees. These privileges include care of patients via telemedicine.
- Fluoroscopy

Margaret A. Knoedler, MD, Active Staff
Department of Urology/Fellow

- Urology Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and surgically treat patients presenting with illnesses or injuries of the genitourinary system; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and vaginal PH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training. These privileges include care of patients via telemedicine.
- Use of surgical laser
- Laparoscopic urologic procedures

Edward M. Lawrence, MD, Active Staff
Department of Radiology/Fellow

- Radiology Core Privileges: Performance and interpretation of all radiologic tests and procedures including radiographs, ultrasound, CT, MRI, diagnostic (non-therapeutic) nuclear medicine in adults and children. These privileges include, but are not limited to, Doppler vascular imaging, transcranial Doppler, arthrograms and joint aspirations, venography of major vessels, lumbar puncture, mammography, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows and other trainees. These privileges include care of patients via telemedicine.
- Fluoroscopy

Elizabeth A. Mann, MD, Active Staff
**Department of Pediatrics/Endocrinology**
- Pediatric Endocrinology Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult and treat infants, children, and adolescents with documented or possible disorders of the endocrine system. These privileges include, but are not limited to, endocrine tolerance and provocative tests; provision of immediate and longitudinal care for adults previously treated for pediatric endocrine system disorders; and supervision of residents, fellows and others in training.

**Justin S. McLean, MD, Active Staff**
**Department of Emergency Medicine**
- Emergency Medicine Core Privileges: Privileges to evaluate including performance of H&P, diagnose, and treat patients presenting with any illness, injury, condition or symptom to the Emergency Department. These privileges include, but are not limited to, moderate sedation for all populations; lumbar puncture, thoracentesis, paracentesis, central line placement; intubation and emergency airway management; emergency cardioversion; repair of soft tissue injuries; management of closed fractures; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.
- Deep Sedation--Adults (13 years and older)

**Daniel S. Modaff, MD, Active Staff**
**Department of Medicine/Cardiovascular Medicine**
- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods and supervision of residents, fellows, and others in training.
- Cardiovascular Medicine Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients presenting with diseases of the heart and blood vessels. These privileges include, but are not limited to, cardiovascular; insertion and management of central venous and pulmonary artery catheters; use of thrombolytic agents; pericardiocentesis; Holter scan interpretation; treadmill testing; temporary transvenous pacemaker placement; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.
- Electrophysiology Procedures: Electrophysiology studies
- Electrophysiology Procedures: Permanent pacemaker selection and implementation
- Fluoroscopy
- Adult Moderate Sedation--ONLY within University Hospital or UW Health at The American Center

**Zachary E. Pflum, MD, Active Staff**
**Department of Surgery/Fellow**
- Otolaryngology Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat patients presenting with illnesses, injuries and disorders of the head and neck affecting the ears, facial skeleton, and respiratory and upper alimentary system. These privileges include, but are not limited to, surgical procedures involving the temporal bone, nasal and paranasal sinuses, the skull-base, the thyroid, parathyroid, salivary glands, and lymphatic tissue of the head and neck, maxillofacial plastic and reconstructive procedures; sinus endoscopy; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training. These privileges include care of patients via telemedicine.
- Use of surgical laser

**Michael D. Puricelli, MD, Active Staff**
**Department of Surgery/Otolaryngology**
- Otolaryngology Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat patients presenting with illnesses, injuries and disorders of the head and neck affecting the ears, facial skeleton, and respiratory and upper alimentary system. These privileges include, but are not limited to, surgical procedures involving the temporal bone, nasal and paranasal sinuses, the skull-base, the thyroid, parathyroid, salivary glands, and lymphatic tissue of the head and neck, maxillofacial plastic and reconstructive procedures; sinus endoscopy; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training. These privileges include care of patients via telemedicine.
- Use of surgical laser

**Nicholas J. Pytel, DO, Active Staff**
**Department of Pediatrics/Hematology/Oncology**
- Pediatric Hematology/Oncology Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult and treat Privileges to admit, evaluate including performance of H&P, diagnose, consult and treat
include, but are not limited to, suturing of uncomplicated lacerations; arthrocentesis; I&D of abscess; simple skin care for adults previously treated for pediatric hematologic or oncologic disease; and supervision of residents, fellows and others in training.

**Angela M. Richardson, MD, Active Staff**
Department of Neurological Surgery/Fellow
- Neurological Surgery Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and surgically treat patients presenting with illnesses, injuries, and disorders of the neurological system, including the supporting structures and vascular supply. These privileges include, but are not limited to, craniotomy and craniectomy; reconstructive cranioplasty; laminecetomy; spinal fusion; chemonucleolysis; percutaneous diskectomy; transspinalididal hypophysectomy; CSF shunting procedures; radiofrequency chemical rhizotomy/chordotomy; intracarotid injection; peripheral nerve surgery; intra-extracranial anastomosis; carotid endarterectomy; myelomeningocele repair; neurostimulation and recording; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.
- Neurocritical Care Core Privileges: Privileges to admit, evaluate (including H&P), diagnose, consult and provide medical treatment to patients with critical illnesses or injuries of the brain, spinal cord, nerves, vessels, and their supporting structures with associated medical problems complicating their care.

**Daniel L. Rosenberg, MD, Active Staff**
Department of Allergy, Pulmonary & Critical Care
- Allergy & Immunology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat patients of all ages presenting with diseases and disorders affecting the immune system. These privileges include, but are not limited to, allergy skin testing and interpretation, allergic desensitization, supervision of residents, fellows and others in training.

**Madhuchhanda I. Roy, MD, Active Staff**
Department of Pathology and Lab. Medicine
- Clinical Pathology Core Privileges: Privileges in clinical pathology include provision of consultation to physicians for diagnosis exclusion, and monitoring of disease utilizing information gathered from examination of clinical laboratory tests on body fluids and secretions. These privileges also include care of patients via telemedicine. These privileges include supervision of residents, fellows and others in training. These privileges also include performance of duties via telemedicine.
- Anatomic Pathology Core Privileges: Privileges in anatomic pathology include provision of consultation to physicians for diagnosis exclusion, and monitoring of disease utilizing information gathered from examination of tissue specimens, cells and body fluids and performance of autopsies. These privileges also include performance of duties via telemedicine. These privileges include supervision of residents, fellows and others in training.

**Elizabeth M. Salisbury-Afshar, MD, Active Staff**
Department of Family Medicine and Community Health
- Substance Use Disorder (Alcohol) Core Privileges: Physicians granted these privileges are permitted to provide care for patients who have or are suspected of having alcohol use disorders who they are not seeing primarily for other conditions. Privileges to evaluate including performance of H&P, diagnose, consult and provide treatment to adult patients with possible or present alcohol related problems. These privileges include, but are not limited to assessment and management of physical dependence upon and withdrawal from alcohol.
- Substance Use Disorder (Addictive Substances Other Than Alcohol: Prescription-based and Illicit Drugs) Core Privileges: Physicians granted these privileges are permitted to provide care for patients with substance use disorders who they are not seeing primarily for other conditions. Privileges to evaluate including performance of H&P, diagnose, consult and provide treatment to adult patients with substance use related problems. These privileges include, but are not limited to assessment and management of physical dependence upon and withdrawal from controlled substances.
- Family Medicine Adult Core Privileges: Physicians granted these privileges shall be able to care for patients with more complicated medical problems. If a diagnosis cannot be established after reasonable investigation, or if there is a serious threat to a patient’s life, consultation shall be obtained. Privileges to admit, evaluate including performance of H&P, diagnose, consult and provide treatment to adult patients with general medical problems. These privileges include, but are not limited to, suturing of uncomplicated lacerations; arthrocentesis; I&D of abscess; simple skin
biopsy or excision; removal of nonpenetrating corneal foreign body; uncomplicated minor closed fractures (not involving traction or major manipulation); uncomplicated dislocations; diagnostic endometrial sampling; peripheral intravenous cannulation; peripheral arterial puncture; lumbar puncture; preoperative care of surgical patients; postoperative medical care of surgical patients; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Family Medicine Pediatric Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult and provide non-surgical treatment to pediatric patients without major complications or serious life threatening disease. These privileges include, but are not limited to, the care of normal newborn as well as the uncomplicated premature infant equal to or greater than 36 weeks gestation; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

Nauman S. Siddiqui, MD, Active Staff
Department of Medicine/Hematology/Oncology
- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Hematology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients presenting with diseases and disorders of the blood and blood-forming tissues. These privileges include, but are not limited to, bone marrow aspiration and biopsy; administration of chemotherapy; the management and care of indwelling venous access catheters; plasmapheresis; therapeutic phlebotomy; lymph node aspiration; bone marrow harvest; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Medical Oncology Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients presenting with malignancies. These privileges include, but are not limited to, administration of chemotherapeutic agents and biological response modifiers through all therapeutic routes; management and maintenance of indwelling venous access catheters; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

Daniel L. Summers, MD, Active Staff
Department of Emergency Medicine/Fellow
- Emergency Medicine Core Privileges: Privileges to evaluate including performance of H&P, diagnose, and treat patients presenting with any illness, injury, condition or symptom to the Emergency Department. These privileges include, but are not limited to, moderate sedation for all populations; lumbar puncture; thoracentesis; paracentesis; central line placement; intubation and emergency airway management; emergency cardioversion; repair of soft tissue injuries; management of closed fractures; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.
- Deep Sedation--Adults (13 years and older)
- Point of Care Emergency Ultrasound
- Fluoroscopy

Janice Thai, MD, Active Staff
Department of Radiology/Fellow
- Radiology Core Privileges: Performance and interpretation of all radiologic tests and procedures including radiographs, ultrasound, CT, MRI, diagnostic (non-therapeutic) nuclear medicine in adults and children. These privileges include, but are not limited to, Doppler vascular imaging, transcranial Doppler, arthrograms and joint aspirations, venography of major vessels, lumbar puncture, mammography, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows and other trainees. These privileges include care of patients via telemedicine.

Brandon D. Tomlin, MD, Active Staff
Department of Pediatrics/General
- Pediatric Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult and provide care for infants, children and adolescents with complex problems or severe illnesses, including those that are potentially life-threatening. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture; peripheral arterial puncture; peripheral venous puncture; neonatal circumcision; intubation; suprapubic bladder tap in the care of newborn infants greater than 2000 grams; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.
Alexandra A. Wick, MD, Active Staff  
Department of Medicine/Hospital Medicine  
- Internal Medicine/Hospital Medicine Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges include, but are not limited to, providing care via inpatient service and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.  
- Arterial Line Insertion  
- Central venous catheter insertion for access  
- Lumbar Puncture  
- Paracentesis  
- Ventilator management on Intermediate Care patients

Status Change with Additional Privilege

David H. Somsen, MD  
Department of Radiology/General  
Including change of status from Affiliate to Active  
- Radiology Core Privileges: Performance and interpretation of all radiologic tests and procedures including radiographs, ultrasound, CT, MRI, diagnostic (non-therapeutic) nuclear medicine in adults and children. These privileges include, but are not limited to, Doppler vascular imaging, transcranial Doppler, arthrograms and joint aspirations, venography of major vessels, lumbar puncture, mammography, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows and other trainees. These privileges include care of patients via telemedicine.  
- Fluoroscopy

Advanced Practice Provider Privileges-- New Applications

Bethany A. Meyering, CAA, UW Anesthesiologist Assistant  
Department of Anesthesiology  
- Anesthesiologist Assistant - Certified Privileges: Under the direction and supervision of the responsible and credentialed Anesthesiologist(s) who possesses UWHC privileges, an Anesthesiologist Assistant may perform the following: preanesthesia evaluation and preparation; administration of general and regional anesthesia and all levels of sedation techniques; postanesthesia care for children, adolescent, and adult patients; and assess, stabilize, and determine disposition of patients with emergent conditions consistent with policy regarding emergency and consultative call services. These privileges also include ordering respiratory therapy.

Allison E. Schroeder, CAA, UW Anesthesiologist Assistant  
Department of Anesthesiology/General  
- Anesthesiologist Assistant - Certified Privileges: Under the direction and supervision of the responsible and credentialed Anesthesiologist(s) who possesses UWHC privileges, an Anesthesiologist Assistant may perform the following: preanesthesia evaluation and preparation; administration of general and regional anesthesia and all levels of sedation techniques; postanesthesia care for children, adolescent, and adult patients; and assess, stabilize, and determine disposition of patients with emergent conditions consistent with policy regarding emergency and consultative call services. These privileges also include ordering respiratory therapy.

Focused Professional Practice Evaluation Review- Additional Privileges

The following focused review applications have been endorsed by the UWHC Credentials Committee and are recommended to the Medical Board for approval/action:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department/Section</th>
<th>Staff Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boucher, Lindsey L., CAA</td>
<td>Anesthesiology</td>
<td>UW Anesthesiologist Assistant</td>
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July 6, 2020

New Applications

Jacquelyn H. Adams, MD, Active Staff  
Department of Obstetrics and Gynecology/Maternal Fetal Medicine  
- Obstetrics Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult and treat preganant patients. These privileges include, but are not limited to, ultrasound; fetal monitoring;
amniocentesis; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; and supervision of residents, fellows and others in training.

- Emergency Obstetrics Core Privileges: Privileges to evaluate including performance of H&P, diagnose, manage, and surgically treat pregnant and post-partum patients admitted to UWHC. This does not permit admission for the primary purpose of obstetrical services, except when such admission is required by law in emergencies. These privileges include, but are not limited to, vaginal delivery; outlet forceps delivery; cesarean section; electronic fetal monitoring; D&C and/or uterine exploration and exploratory laparotomy for post-partum hemorrhage and supervision of residents, fellows and others in training.

Majid Afshar, MD, Active Staff
Department of Medicine/Allergy, Pulmonary & Critical Care

- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Critical Care Medicine Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat as an attending physician adult patients in need of critical care. These privileges include, but are not limited to, Swan Ganz catheter insertion and management; endotracheal intubation; management of mechanical ventilation; management of noninvasive ventilation; fiberoptic bronchoscopy; direct laryngoscopy; chest tube placement; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Pulmonary Medicine Core Privileges: Privileges to evaluate including performance of H&P, diagnose, admit, consult, and treat adult patients presenting with diseases and disorders of the organs of the thorax or chest. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, management of mechanical ventilation; management of noninvasive ventilation; direct laryngoscopy, diagnostic flexible bronchoscopy; including transbronchial lung biopsy, transbronchial needle aspiration, endobronchial ultrasound. Therapeutic bronchoscopy including simple reduction and treatment of bleeding and opening of blocked bronchi; pulmonary function testing (including methacholine challenges) and interpretation; sleep study testing and interpretation; endotracheal intubation; needle aspiration of the chest; chest tube placement; pulmonary treadmill exercise testing; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Central venous catheter insertion for access

Iliya P. Amaza, MD, Active Staff
Department of Medicine/Allergy, Pulmonary & Critical Care

- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of residents, fellows and others in training.

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- Pulmonary Medicine Core Privileges: Privileges to evaluate including performance of H&P, diagnose, admit, consult, and treat adult patients presenting with diseases and disorders of the organs of the thorax or chest. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, management of mechanical ventilation; management of noninvasive ventilation; direct laryngoscopy, diagnostic flexible bronchoscopy; including transbronchial lung biopsy, transbronchial needle aspiration, endobronchial ultrasound. Therapeutic bronchoscopy including simple reduction and treatment of bleeding and opening of blocked bronchi; pulmonary function testing (including methacholine challenges) and interpretation; sleep study testing and interpretation; endotracheal intubation; needle aspiration of the chest; chest tube placement; pulmonary treadmill exercise testing; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Central venous catheter insertion for access

**Julia R. Berian, MD, Active Staff**
**Department of Surgery/Colorectal**

- General Surgery Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat patients presenting with disorders, illnesses or injuries of the alimentary tract, the abdomen and its contents, breast, skin, soft tissue, head and neck, endocrine system and minor extremity surgery. These privileges include, but are not limited to, laparoscopic surgery, upper gastrointestinal endoscopy, colonoscopy, insertion and management of arterial catheter, insertion and management of chest tubes, insertion and management of central venous catheters, lumbar puncture, pericardiocentesis, tracheostomy, paracentesis, management of trauma, and complete care of critically ill patients with underlying surgical conditions; performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training. These privileges include care of patients via telemedicine.

- Use of surgical robot for procedures otherwise privileged to perform.

**Colin D. Boettcher, MD, Active Staff**
**Department of Anesthesiology**

- Anesthesiology Core Privileges: Privileges to evaluate including performance of H&P, consult and administer anesthesia to patients for relief and prevention of pain during and following surgical, therapeutic and diagnostic procedures, including the monitoring and maintenance of normal physiology during the perioperative period and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods. Supervision of Anesthesiologist Assistants is included in these privileges. These privileges include supervision of residents, fellows, and other persons in training.

- Advanced Transesophageal Echocardiography

**Katherine R. Gavinski, MD, Active Staff**
**Department of Medicine/Hospital Medicine**

- Internal Medicine/Hospital Medicine Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges include, but are not limited to, providing care via inpatient service and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

- Arterial Line Insertion
- Central venous catheter insertion for access
- Joint Aspiration/Injection
- Lumbar Puncture
- Paracentesis
- Thoracentesis

**Katrina N. Hickle-Koelanes, MD, Active Staff**
**Department of Psychiatry**

- Adult Psychiatry Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult and treat patients, above the age of 15, who suffer from mental, behavioral, or emotional disorders. These privileges also include care of patients via telemedicine. These privileges include supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.

**Roy B. Kim, MD, Active Staff**
Department of Anesthesiology

- Anesthesiology Core Privileges: Privileges to evaluate including performance of H&P, consult and administer anesthesia to patients for relief and prevention of pain during and following surgical, therapeutic and diagnostic procedures, including the monitoring and maintenance of normal physiology during the perioperative period and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods. Supervision of Anesthesiologist Assistants is included in these privileges. These privileges include supervision of residents, fellows, and other persons in training.
- Fluoroscopy
- Pain Management Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat patients presenting with acute or chronic pain. These privileges include, but are not limited to, anesthetic nerve block; arthrocentesis; injection of neuromuscular block; neurolytic nerve block; botulism toxin injection; epidural steroid injections/selective nerve root block; facet joint injections/medial and lateral branch blocks; major joints blocks/steroid injection; radiofrequency neurolysis; sympathetic ganglion blocks; trigger point injection; soft tissue injection; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.
- Intrathecal pain pump
- Spinal cord stimulation trial and implant

Melissa M. MacDonald, MD, Active Staff
Department of Medicine/Allergy, Pulmonary & Critical Care

- Internal Medicine/Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture, thoracentesis, paracentesis, arterial line insertion, diagnostic or therapeutic joint aspiration/injection, endometrial biopsy, endocervical polyp removal/biopsy, intrauterine device (IUD) insertion, punch biopsy of the skin, percutaneous needle biopsy of a breast mass or skin lesion, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.
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- Pulmonary Medicine Core Privileges: Privileges to evaluate including performance of H&P, diagnose, admit, consult, and treat adult patients presenting with diseases and disorders of the organs of the thorax or chest. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, management of mechanical ventilation; management of noninvasive ventilation; direct laryngoscopy, diagnostic flexible bronchoscopy; including transbronchial lung biopsy, transbronchial needle aspiration, endobronchial ultrasound. Therapeutic bronchoscopy including simple reduction and treatment of bleeding and opening of blocked bronchi; pulmonary function testing (including methacholine challenges) and interpretation; sleep study testing and interpretation; endotracheal intubation; needle aspiration of the chest; chest tube placement; pulmonary treadmill exercise testing; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.
- Central venous catheter insertion for access
- Advanced ventilator management
- Fluoroscopy
- Adult Moderate Sedation-- All locations - includes UH, TAC, DHC, and UWHC Clinics
Sarah E. MacKay, MD, Active Staff  
Department of Pediatrics/General  
- Pediatric Major Care Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult and provide care for infants, children and adolescents with complex problems or severe illnesses, including those that are potentially life-threatening. These privileges also include care of patients via telemedicine. These privileges include, but are not limited to, lumbar puncture; peripheral arterial puncture; peripheral venous puncture; neonatal circumcision; intubation; suprapubic bladder tap in the care of newborn infants greater than 2000 grams; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows and others in training.

Floreta I. Shapiro, DO, Active Staff  
Department of Medicine/Geriatrics  
- Internal Medicine/Intermediate Care Core Privileges: Privileges to evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses in the outpatient setting (General Internal Medicine clinic). Includes lumbar puncture, thoracentesis, paracentesis, diagnostic or therapeutic joint aspiration/injection, intrauterine device (IUD) insertion, punch biopsy of the skin, soft tissue injection, liquid nitrogen cryosurgery of the skin or other appropriate lesion, supervision of physician assistants with prescriptive authority, and supervision of residents, fellows, and others in training.

Central venous catheter insertion for access

Robert E. Shaw, MD, Active Staff  
Department of Anesthesiology  
- Anesthesiology Core Privileges: Privileges to evaluate including performance of H&P, consult and administer anesthesia to patients for relief and prevention of pain during and following surgical, therapeutic and diagnostic procedures, including the monitoring and maintenance of normal physiology during the perioperative period and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods. Supervision of Anesthesiologist Assistants is included in these privileges. These privileges include supervision of residents, fellows, and other persons in training.

Sara B. Warner, PsyD, Clinical Psychology  
Department of Pediatrics/Neurodevelopmental-Behavioral  
- Psychological testing: children (under 12)  
- Psychological testing: adolescents  
- Psychological testing: adults  
- Individual psychotherapy: children (play)  
- Individual psychotherapy: adolescents  
- Individual psychotherapy: adult  
- Behavior modification  
- Family therapy  
- Group therapy  
- Psychoeducational counseling  
- Psychoeducational testing  
- Psychological consultation

Additional Privileges

Kelli Heinrich, MD  
Department of Family Medicine and Community Health  
- Internal Medicine/Hospital Medicine Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult, and treat adult patients with medical illnesses. These privileges include, but are not limited to, providing care via inpatient service and perform waived laboratory testing not requiring an instrument; including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

Alison R. Miller, DO  
Department of Family Medicine and Community Health/General  
- Includes status change from Affiliate to Active
• Family Medicine Adult Core Privileges: Physicians granted these privileges shall be able to care for patients with more complicated medical problems. If a diagnosis cannot be established after reasonable investigation, or if there is a serious threat to a patient’s life, consultation shall be obtained. Privileges to admit, evaluate including performance of H&P, diagnose, consult and provide treatment to adult patients with general medical problems. These privileges include, but are not limited to, suturing of uncomplicated lacerations; arthrocentesis; I&D of abscess; simple skin biopsy or excision; removal of nonpenetrating corneal foreign body; uncomplicated minor closed fractures (not involving traction or major manipulation); uncomplicated dislocations; diagnostic endometrial sampling; peripheral intravenous cannulation; peripheral arterial puncture; lumbar puncture; preoperative care of surgical patients; postoperative medical care of surgical patients; and performing waived laboratory testing not requiring an instrument, including but not limited to fecal occult blood, urine dipstick, and pH by paper methods; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

• Family Medicine Pediatric Core Privileges: Privileges to admit, evaluate including performance of H&P, diagnose, consult and provide non-surgical treatment to pediatric patients without major complications or serious life threatening disease. These privileges include, but are not limited to, the care of normal newborn as well as the uncomplicated premature infant equal to or greater than 36 weeks gestation; supervision of physician assistants with prescriptive authority; and supervision of residents, fellows, and others in training.

• Substance Use Disorder (Alcohol) Core Privileges: Physicians granted these privileges are permitted to provide care for patients who have or are suspected of having alcohol use disorders who they are not seeing primarily for other conditions. Privileges to evaluate including performance of H&P, diagnose, consult and provide treatment to adult patients with possible or present alcohol related problems. These privileges include, but are not limited to assessment and management of physical dependence upon and withdrawal from alcohol.

• Substance Use Disorder (Addictive Substances Other Than Alcohol: Prescription-based and Illicit Drugs) Core Privileges: Physicians granted these privileges are permitted to provide care for patients with substance use disorders who they are not seeing primarily for other conditions. Privileges to evaluate including performance of H&P, diagnose, consult and provide treatment to adult patients with substance use related problems. These privileges include, but are not limited to assessment and management of physical dependence upon and withdrawal from controlled substances.

### Focused Professional Practice Evaluation Review

The following focused review applications have been endorsed by the UWHC Credentials Committee and are recommended to the Medical Board for approval/action:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department/Section</th>
<th>Staff Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anderson, Jonathan S., MD</td>
<td>Medicine/General Internal Medicine</td>
<td>Active Staff</td>
</tr>
<tr>
<td>Davis, Matthew J., MD</td>
<td>Pediatrics/Urgent Care</td>
<td>Active Staff</td>
</tr>
<tr>
<td>Frye, Laura K., MD</td>
<td>Medicine/Allergy, Pulm &amp; Crit Care</td>
<td>Active Staff</td>
</tr>
<tr>
<td>Furuya, Katryn N., MD</td>
<td>Pediatrics/Gastroenterology</td>
<td>Active Staff</td>
</tr>
<tr>
<td>Sarda, Rakesh, MD</td>
<td>Pathology and Lab. Medicine</td>
<td>Active Staff</td>
</tr>
<tr>
<td>Sultan, Samir, DO</td>
<td>Medicine/Allergy, Pulm &amp; Crit Care</td>
<td>Active Staff</td>
</tr>
<tr>
<td>Swartz, Kathryn M., MD</td>
<td>Pathology and Lab. Medicine</td>
<td>Active Staff</td>
</tr>
</tbody>
</table>
Advanced Practice Provider Privileges—Transfers
Maggie S. Steingraber-Pharr, NP, UW Advance Practice Nurse
Department of Medicine/Endocrinology
- NP Endocrinology Core Privileges: Privileges to manage and treat patients with documented or possible endocrine or metabolic disorders.

Advanced Practice Provider Privileges—Additional Privileges
Amanda E. Browne, NP (Acute Care Nurse Practitioner)
Department of Medicine/Cardiovascular Medicine
- VAD Management

Sara J. Holland, PA
Department of Orthopedics and Rehabilitation/Orthopedic Surgery
- Aspiration and Injections of joints, bursars, cysts, tendons

Barbara J. Koschak, NP (Family Nurse Practitioner)
Department of Anesthesiology
- Intrathecal pump reprogram, Intrathecal pump interrogation, Intrathecal pump refill

Jennifer L. Trott, NP (Adult Gerontology Primary Care NP)
Department of Medicine/Hematology/Oncology
- Intrathecal Chemotherapy

Focused Professional Practice Evaluation Review
The following focused review applications have been endorsed by the UWHC Credentials Committee after review by their applicable sub-committees (if appropriate) and are recommended to the Medical Board for approval/action:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department/Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Holmes-Drammeh, Emelle S., PA</td>
<td>Surgery/Endocrine</td>
</tr>
<tr>
<td>Meeteer, Wanda J., NP</td>
<td>Pediatrics/Genetics &amp; Metabolism</td>
</tr>
<tr>
<td>Stevens, Catherine F., NP</td>
<td>Pediatrics/Hematology/Oncology</td>
</tr>
<tr>
<td>Weier (Schumacher), Kari, NP</td>
<td>Pediatrics/Hematology/Oncology</td>
</tr>
</tbody>
</table>

Focused Professional Practice Evaluation Review—Additional Privileges
The following focused review applications have been endorsed by the UWHC Credentials Committee and are recommended to the Medical Board for approval/action:

<table>
<thead>
<tr>
<th>Name</th>
<th>Department/Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Connolly-Nelson, Kira, NP</td>
<td>Obstetrics and Gynecology/General Ob &amp; Gyn</td>
</tr>
<tr>
<td>Kuhl, Kayli R., PA</td>
<td>Surgery/Cardiothoracic</td>
</tr>
<tr>
<td>Weitz, Elizabeth G., NP</td>
<td>Medicine/Allergy, Pulmonary &amp; Critical Care</td>
</tr>
</tbody>
</table>
Resolution

UW Health Regional Division, Inc.
Corporate Officer Appointments
RESOLUTION OF
THE BOARD OF DIRECTORS OF
UNIVERSITY OF WISCONSIN HOSPITALS AND CLINICS AUTHORITY

Approval of UW Health Regional Division, Inc. Corporate Officer Appointments

July 23, 2020

WHEREAS, University of Wisconsin Hospitals and Clinics Authority (“UWHCA”) and University of Wisconsin Medical Foundation, Inc. (“UWMF”) are the members of the Regional Division, Inc. (the “Corporation”); and

WHEREAS, pursuant to Section 3.11(a) of the Corporation’s Bylaws require that the Corporation’s officers be recommended by the Corporation’s Board, subject to approval by the UWHCA and UWMF; and

WHEREAS, pursuant to Section 5.2 of the Corporation’s Bylaws, the Corporation’s Board of Directors met on July 20, 2020, to nominate and elect by majority vote the Corporate Officers subject to Article 3; and

WHEREAS, pursuant to its reserved powers under Section 3.11(a) of the Corporation’s Bylaws, the UWHCA Board of Directors (the “Authority Board”) has received the recommendation from the Corporation’s Board of Directors to consider approval of Corporate Officers and has determined it is in the best interest of the Authority Board to elect the Corporate Officers to the Corporation’s Board of Directors;

NOW, THEREFORE BE IT RESOLVED, that the Authority Board approves the following individuals as Officers of the Corporation, for a one (1) year term commencing August 1, 2020 and until a successor is duly elected; and

President     Mr. Michael Dallman
Vice President Ms. Carey Gehl
Treasurer     Mr. Robert Flannery
Secretary     Ms. Patricia Hutter
Assistant Secretary Mr. Daniel Brzozowski
Assistant Secretary Ms. Patti Meyer

FURTHER RESOLVED, that the UWHCA Chief Executive Officer (“CEO”), and his delegates are hereby authorized, empowered and directed to take all such actions as may be considered proper and convenient to carry out the foregoing resolutions and any and all acts heretofore taken by the UWHCA CEO, or his delegates in connection with the foregoing resolutions are hereby ratified and confirmed.
Anti-Racism: A Vision for a New Normal

Shiva Bidar-Sielaff
Chief Diversity Officer
July 2020
Anti-Racism: A Vision for a New Normal

Background
We are using the framework of the UW-Madison Population Health Institute County Health Rankings model to understand what contributes to health outcomes and think broadly about areas for community health improvement.
## Our Current Work

### Internal
- Voluntary computer based training
- Limited in-person/interactive training
- Internal messaging (signs, buttons)
- Employee Resource Groups
- Updating clinical policies

### Internal & External
- Career pathways educational programs
- Direct community giving & partnerships
- Community Health Implementation Strategy focused on eliminating disparities in Black maternal child health
Anti-Racism: A Vision for a New Normal

Where we are headed
The Path To Becoming A
an Anti-racist, Multicultural Institution

<table>
<thead>
<tr>
<th>MONOCULTURAL</th>
<th>MULTICULTURAL</th>
<th>ANTI-RACIST</th>
<th>ANTI-RACIST MULTICULTURAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Racial and Cultural Differences Seen as Defects</td>
<td>Tolerant of Racial and Cultural Differences</td>
<td>Racial and Cultural Differences Seen as Assets</td>
<td></td>
</tr>
<tr>
<td>Exclusive</td>
<td>Passive</td>
<td>Symbolic Change</td>
<td>Identity Change</td>
</tr>
<tr>
<td>A Segregated Institution</td>
<td>A “Club Institution”</td>
<td>A Multicultural Institution</td>
<td>An Anti-Racist Institution</td>
</tr>
</tbody>
</table>

We are here

Our Vision

**Proprietary**
Vision, Path and Goals

**Our Vision**

**UW Health is a leader in dismantling racism in ourselves, in our system and in our community**

**Our Path**

**Identity Change**
Local/Internal

Create a culture of anti-racism and inclusion

**Structural Change**
Regional/Community

Deliver healthcare that is equitable and inclusive

**Fully Inclusive**
National/Advocacy

Reduce health inequities by addressing social determinants of health
Anti-Racism: A Vision for a New Normal

Strategies
Two Phases of Implementation

PHASE 1
Building the Foundation

- The work we will do in the next 12 months
- Four key strategies
- Adding human resources and infrastructure to DEI department
- Broad initiatives supporting DEI department’s work
- Identifying and developing future strategies

PHASE 2
Sustain and Grow

- Three-year strategic plan
- Sustain foundational strategies
- Develop additional strategies
Broad initiatives supporting the DEI department’s work:

- Review and make recommendations to organizational financial investments from an equity perspective. - Senior Team
- Review and make recommendations to create equity within our supply chain. - Supply Chain
- Review and make recommendations to improve recruitment and retention of employees of color. - HR
- Actively support healthcare related public policy that addresses systemic racism. - Government Relations

PHASE 1
Building the Foundation

- The work we will do in the next 12 months
- Four key strategies
- Adding human resources and infrastructure to DEI department
- Broad initiatives supporting DEI department’s work
- Identifying and developing future strategies
We have developed four foundational strategies to move us toward our vision and goals:

1. Expand Professional Development and Training Programs
2. Demonstrate Leadership Support of Providers and Staff of Color
3. Integrate Equity Tools into Decision-making and Operational Process
4. Goal Focused Investment of Time and Money into Communities of Color
Strategy 1: Expand Professional Development and Training Programs

- Create a culture of anti-racism and inclusion
- Deliver healthcare that is equitable and inclusive
- Reduce health inequities by addressing social determinants of health

Ensure leaders are trained to recognize bias and empowered to reduce the negative impact of racism on their actions and on our organization

Key Tactics

- Training for all leaders on implicit bias
- Cascading goals
  - Require each leader to complete two micro-learnings or one interactive training
- Professional development and training templates
- Tailor training plan for department
- Turnkey professional development tools and models available for all departments to implement
Strategy 2: Demonstrate Leadership Support of Providers and Staff of Color

Goals Impacted

- Create a culture of anti-racism and inclusion
- Deliver healthcare that is equitable and inclusive
- Reduce health inequities by addressing social determinants of health

Ensure providers and staff of color receive the support needed to successfully navigate challenges

Key Tactics

- Accelerate growth of our Employee Resource Groups through intentional support by leaders:
  - Leaders cascade information and supporting ERG participation
  - Support of ERG voices and initiatives
  - Connect the CEO to the work of ERGs
  - Support for additional ERGs
- Work with HR to improve processes for providers and employees of color to report issues and receive support
- Clearly communicate internally and externally our discriminatory behavior policies and practices
Strategy 3: Integrate Equity Tools into Decision-making and Operational Process

Goals Impacted
- Create a culture of anti-racism and inclusion
- Deliver healthcare that is equitable and inclusive
- Reduce health inequities by addressing social determinants of health

Create standard equity tools that guide leaders through a process of reflection and evaluation to mitigate unintended consequences of bias in decision making in daily tasks, project implementation, policy creation & strategic planning

Key Tactics
- Create equity tool templates tailored to meet our organizational needs
- Develop and deliver training on use of equity tools
- Integrate and embed tools into tasks across the institution through ongoing training, consultation and assistance
- Begin to develop equity lens competencies
Strategy 4: Goal Focused Investment of Time and Money into the Communities of Color

Goals Impacted

Create a culture of anti-racism and inclusion
Deliver healthcare that is equitable and inclusive
Reduce health inequities by addressing social determinants of health

We need to continue to invest in and partner with organizations improving health and well-being in communities of color. This is essential to address centuries-long disinvestments that have greatly contributed to racialized health inequities.

Key Tactics

- Make investments aligned with Board-approved Community Health Needs Assessment and DEI focus areas
- Increase funding to allow transformation-sized gifts to key partners
- Continue trust-based unrestricted contributions
- Fund multi-year gifts to allow partners to build stable organizations
- Seek more input from partner organizations and decision-making led by people of color
Two Phases of Implementation

PHASE 2
Sustain and Grow

• Three-year strategic plan
• Sustain foundational strategies
• Develop additional strategies
  • Workforce diversity, local supplier diversity, increasing financial investments
Anchor institutions are large place-based organizations that are deeply rooted in their local geographies and that play an integral role in the local economy. Anchor institutions are often located in or adjacent to inner city neighborhoods and represent opportunities for creating shared value.

Anchors include universities, hospitals, and medical centers, but can also include local government organizations, community foundations, sports teams, arts and cultural organizations, and large corporations.
Anti-Racism: A Vision for a New Normal

Resources
• Financial Investment
  • $1.4 million total
    • $400,000 for additional DEI staff and resources
    • $1 million for direct community investment
Questions & Discussion

Thoughts on the goals and strategies?
Is the resource investment appropriate at this time?
Thank you
Resolution

Investment in Dane Workforce Housing LLC
WHEREAS, according to United Way of Dane County, approximately 45,000 Dane County working families struggle to afford housing, and families of color are disproportionally affected by a lack of affordable workforce housing; and

WHEREAS, the Madison Development Corporation, in conjunction with the Economic Stability Council of Dane County, WI and the United Way of Dane County, is launching The Dane Workforce Housing Fund LLC (the “Fund”) as a Ten Million Dollar ($10,000,000) socially responsible investment fund to make investments in projects that help create affordable workforce housing; and

WHEREAS, the Fund is seeking up to ten (10) investors to make a minimum investment of One Million Dollars ($1,000,000); and

WHEREAS, UW Health is one of the largest employers in Dane County; some UW Health employees struggle to find affordable housing, and the Fund’s mission is consistent with UW Health’s mission and philosophy on social responsibility; and

WHEREAS, UW Health management is recommending that UW Health invest One Million Dollars ($1,000,000) in the Fund (the “Investment”); and

WHEREAS, the Board has considered management’s recommendation and has determined that the Investment is in the best interest of UW Health.

NOW, THEREFORE, BE IT RESOLVED, that the Investment is hereby authorized and approved; and

FURTHER RESOLVED, that the UWHCA CEO and/or CFO or their delegates (“Authorized Officers”) be, and each of them is, hereby authorized, empowered and directed to take all such actions as may be considered necessary, appropriate, convenient, proper, or advisable in furtherance of the foregoing resolution; and

FURTHER RESOLVED, that any and all lawful actions previously taken by the UWHCA CEO and/or CFO and Authorized Officers on behalf of UWHCA and in its name in furtherance of the foregoing resolution are hereby ratified, confirmed and approved in all respects.
Resolution

FY21 UW Health Enterprise Capital and Operating Budget
July 1 - December 31, 2020
RESOLUTION OF THE BOARD OF DIRECTORS OF
THE UNIVERSITY OF WISCONSIN
HOSPITALS AND CLINICS AUTHORITY

APPROVING FY21 UW HEALTH ENTERPRISE CAPITAL AND OPERATING BUDGET
(July 1 – December 31, 2020)

June 23, 2020

WHEREAS, the Finance Committee of the University of Wisconsin Hospitals and Clinics Authority (“UWHCA”) has reviewed the FY21 UW Health Enterprise Capital and Operating Budget and the Joint Operating Agreement Entities Capital and Operating Budget (collectively, the “FY21 Budgets”) as prepared and presented by management, has approved the FY21 Budgets for July 1, 2020 through December 31, 2020 as presented and has recommended its approval to the UWHCA Board of Directors (“Board”); and

WHEREAS, the Board has reviewed the FY21 Budgets for July 1, 2020 through December 31, 2020 as presented by management and determined it to be in the best interest of UWHCA to approve the FY21 Budgets.

WHEREAS, the Board will review and approve the FY21 Budgets for January 1 – June 30, 2021 prior to December 31, 2020.

NOW, THEREFORE, BE IT RESOLVED, that the Board approves the FY21 Budgets for July 1, 2020 through December 31, 2020 as presented by management.

FURTHER RESOLVED, that the UW Health CEO, and his delegates are hereby authorized and directed to take any and all actions, and to execute, deliver, and perform any and all agreements and other documents in the name of and on behalf of UWHCA as deemed necessary or appropriate in furtherance of the matters contemplated by these resolutions;

FURTHER RESOLVED, that any and all lawful actions previously taken by the UW Health CEO, and officers and representatives of UW Health in its name and on its behalf and in furtherance of the matters contemplated by these resolutions are hereby ratified, confirmed and approved in all respects.