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- MS.16.4 The tissue review committee defines and approves the list of specimens exempted from submission to surgical pathology or microscopic examination.
- MS.16.5 The tissue review committee reviews the appropriateness of all surgical procedures performed in the hospital, correlating pre- and post-operative surgical diagnoses with pathological findings.
- MS.16.6 The tissue review committee recommends actions for improvement and evaluates their effectiveness.
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**Standard Intent:**

There is tissue review committee to review and approve all policies related to specimen collection, handling, and processing of all surgical and cytology specimens in the organization. The committee also monitors the appropriateness of all surgical procedures performed in the hospital, correlating pre- and post-operative surgical diagnosed with pathological findings as part of the physicians' performance evaluation. The committee recommends improvements in the system based on its findings and reports

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**MS.17 The hospital has an operating room committee.**

- MS.17.1 There is an operating room committee with representatives from relevant services such as medical staff, nursing staff, operating room staff, infection control, and safety personnel.
- MS.17.2 The operating room committee approves all policies required for proper conduct of the work in the operating room including, but are not limited to, the following:
- MS.17.2.1 Infection control measures.
  - MS.17.2.2 Supply of equipment and disposables.
- MS.17.3 The operating room committee develops a code of ethical conduct in the operating room to protect patient privacy and dignity.
- MS.17.4 The operating room committee monitors performance in the operating room including cancellation rate and makes improvements accordingly.
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**Standard Intent:**

The operating room committee must include representatives from relevant services such as medical staff, nursing staff, operating room staff, infection control, and safety personnel. It approves all policies required for proper conduct of the work in the operating room including; infection control measures and supply of equipment and disposables. The committee also develops a code of ethical conduct in the operating room to protect patient privacy and dignity and monitors performance in the operating room including cancellation rate and makes improvements accordingly.

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**MS.18 The hospital has a cardiopulmonary resuscitation committee.**

- MS.18.1 There is a cardiopulmonary resuscitation committee with representatives from relevant services such as medical staff, nursing staff, intensive care staff and emergency staff.

- MS.18.2 The cardiopulmonary resuscitation committee ensures there is an effective system to handle all cases requiring cardiopulmonary resuscitation at all times.
- MS.18.3 The cardiopulmonary resuscitation committee ensures that the cardiopulmonary resuscitation team members have cardiac life support training as appropriate to the patient population served by the hospital.
- MS.18.4 The cardiopulmonary resuscitation committee discusses all codes in the hospital, recommends actions for improvement, and evaluates those actions for effectiveness.
- MS.18.5 A summary of the cardiopulmonary resuscitation committee's discussions is forwarded to the medical director and the quality director.
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**Standard Intent:**

The hospital has a cardiopulmonary resuscitation committee with representatives from relevant services such as medical staff, nursing staff, intensive care staff and emergency staff. The committee ensures that there is a unified cardiopulmonary resuscitation system in the organization with team members that has the appropriate life support training relevant to the patient population. The committee also ensures the availability and standardization of resuscitation medication, supplies and equipment. All "code" cases are discussed in the committee with a view to improve the resuscitation services. Reports and recommendations are forwarded to the medical director and the quality director.

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**MS.19 The hospital has a pharmacy and therapeutics committee.**

- MS.19.1 There is a pharmacy and therapeutics committee with representatives from relevant services involved in drug prescribing, ordering, dispensing, administering, as well as patient monitoring processes.
- MS.19.2 The pharmacy and therapeutics committee provides oversight of the hospital formulary and medications use.
- MS.19.3 The pharmacy and therapeutics committee meets on a regular basis (at least quarterly).
- MS.19.4 The pharmacy and therapeutics committee recommends actions for improvement and evaluates their effectiveness.
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**Standard Intent:**

Medication management is not only the responsibility of the pharmaceutical service but also of all those involved in medication procurement, storage, prescribing, transcribing, dispensing, administering and monitoring. The pharmacy and therapeutics committee provides oversight of the hospital formulary and medications use. The committee meets on regular basis, at least quarterly to review and approve all policies related to medication management and all newly introduced or discontinued medications. The committee also reviews reports from medication errors and adverse effects with a view to improve safe medication practices and reduce adverse events.

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