



### **Standard Intent:**

The medical records review committee must include members representing the medical staff, the nursing staff and other professionals privileged to write in the medical record. It oversees and monitors the documentation in medical records for quality, completeness, and timeliness. The committee should regularly review a sample (e.g., 5% on a quarterly basis) of the medical records of discharged and in-patients through an approved checklist that includes but not limited to MS.13.3.1-MS.13.3.9.

### **MS.14 The hospital has a utilization review committee.**

MS.14.1 There is a utilization review committee that is chaired by the medical director or a designee with representatives from relevant services such as medical staff, nursing staff, admission office and social services.

MS.14.2 The utilization review committee assesses the medical necessity of the services furnished by the hospital and the medical staff members to patients. This includes, but is not limited to, the following:

MS.14.2.1 Appropriateness of admissions.

MS.14.2.2 Appropriateness and quality of care.

MS.14.2.3 Length of stay.

MS.14.2.4 Drug usage.

MS.14.2.5 Efficiency in using various hospital resources (e.g., overutilization or underutilization).

MS.14.3 The utilization review committee recommends actions for improvement and evaluates their effectiveness.

### **Standard Intent:**

The hospital must have utilization review committee that is chaired by the medical director or a designee with representatives from relevant services such as medical staff, nursing staff, admission office and social services. It assesses the medical necessity of the services furnished by the hospital and the medical staff members to patients. The major areas the committee review include appropriateness of admissions, appropriateness, and quality of care, the length of stay, drug usage and efficiency in using various hospital resources (e.g., overutilization or underutilization). The function of the resources utilization committee is to review the appropriateness of admissions, appropriateness, and quality of care, drug usage, and the length of stay. It assesses the medical necessity of the services furnished by the hospital and the medical staff members to patients and provides/ recommends actions for improvement and evaluates their effectiveness. Elements of substandard MS.14.2.1 through MS.14.2.5 are examples.

### **MS.15 The hospital has a blood utilization committee.**

MS.15.1 There is a blood utilization committee that is chaired by the medical director or a designee with representatives from relevant services such as medical staff, nursing staff and blood bank.



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- MS.15.2 The blood utilization committee ensures the optimal use of blood and blood products by establishing Indications/triggers for the transfusion of blood, blood components and blood derivatives.
  - MS.15.3 The blood utilization committee approves all policies and procedures that involve the ordering and administration of blood and blood products, including:
    - MS.15.3.1 Handling of blood outside the laboratory.
    - MS.15.3.2 Use of blood warmers and infusion devices.
    - MS.15.3.3 Venous access.
    - MS.15.3.4 Addition of fluids and drugs other than 0.9%NaCL.
    - MS.15.3.5 Bedside Identification of the blood product and the intended recipient.
    - MS.15.3.6 Monitoring of patient during and after blood administration.
  - MS.15.4 The blood utilization committee ensures the optimal utilization of therapeutic phlebotomy and apheresis services.
  - MS.15.5 The blood utilization committee monitors practices related to blood ordering and blood administration.
  - MS.15.6 The blood utilization committee recommends actions for improvement and evaluates their effectiveness.
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**Standard Intent:**

The blood utilization committee functions include but not limited to approving all policies and procedures that involve the ordering and administration of blood and blood products, ensure the optimal utilization of therapeutic phlebotomy and apheresis services and monitors practices related to blood ordering and administration. The committee ensures that all steps related to the procurement and administration of blood are safe by regularly collecting data on the various processes involved in blood preparation and administration. The committee utilizes the collected information to improve the blood bank services

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**MS.16 The hospital has a tissue review committee.**

- MS.16.1 There is a tissue review committee that conducts analysis and review of tissues removed during surgeries and procedures.
- MS.16.2 The tissue review committee ensures there is a hospital policy that governs how to obtain and handle specimens and tissues.
- MS.16.3 The tissue review committee monitors the following:
  - MS.16.3.1 The collection and transportation of specimens to the laboratory.
  - MS.16.3.2 The accuracy and completeness of histopathology forms (e.g., site of biopsy, number of biopsies, clinical history, previous biopsies).
  - MS.16.3.3 The accuracy of fine needle aspirations.
  - MS.16.3.4 The accuracy of frozen section specimens.