

MEMORIAL HOSPITAL PEMBROKE  
Medical Staff Bylaws  
Amendment 1

Section 12. 2. Cancer Committee

- A. The Cancer Committee is a single committee performing its functions for the Medical Staffs of the Memorial Healthcare System. The Cancer Committee shall be multidisciplinary in nature and will include Medical Staff representatives from diagnostic radiology, pathology, surgery, medical oncology, radiation oncology, pain control, and pediatric oncology. The Committee shall also include: Cancer Program Network Administrator, Administration, oncology nurse, ambulatory surgery oncology nurse, social worker, certified tumor registrar, quality improvement professional, clinical research nurse, dietary specialist, and pharmacist.
- B. The Committee will be responsible for planning, initiating, stimulating, and assessing all cancer-related activities in the healthcare system.
- C. The Cancer Committee shall meet every other month or as required to meet category requirements as designated by the Commission on Cancer.
- D. The Cancer Committee is responsible for:
  - 1) Developing and evaluating the annual goals and objectives for the clinical community outreach, quality improvement, and programmatic endeavors related to cancer care;
  - 2) Organize, publicize, conduct and evaluate educational and consultative cancer conferences that are multi-disciplinary, network wide and patient oriented and focused;
  - 3) Assure consultative services from all major disciplines are available to all patients;
  - 4) Annually review and appoint coordinators for each of the areas of cancer committee activity: Oncology Resource Management, Cancer Conference, Quality Improvement, Community Outreach and Clinical Research and Education.
    - a. The coordinator roles and responsibilities are defined by the Cancer Committee.
      - (1) Quality Control of Cancer Registry Data shall be the responsibility of the Clinical Research and Education Coordinator.
    - b. The coordinators report regularly to the Cancer Committee.
    - c. Recommend corrective action if activity falls below the annual goal or requirements.
  - 5) Analyze patient outcomes and disseminates the results of the analysis.
  - 6) Plan and complete three QI studies annually.
  - 7) Encourage a supportive care system for all cancer patients.