



National Peer Review Corporation

Specialists in external medical peer review

Please contact us via e-mail to join our mailing list and begin receiving our e-mails and press releases.

1033 SKOKIE BOULEVARD
SUITE 640
NORTHBROOK, IL 60062

866.307.4700 TOLL FREE
847.272.4720 FAX

NATIONALPEERREVIEW.COM
INFO@NATIONALPEERREVIEW.COM

NPRC Policy for External Peer Review

Request for External Peer Review

The following (“Requesting Party”) may request an external peer review (“Request for External Peer Review”):

- The MEC
- The President of the Medical Staff
- The peer review committee (“PRC”) with overall responsibility for peer review (if not the MEC)
- The Chair of the PRC
- The Board
- The President
- A Department Chair on behalf of a member of the Department
- A Section Chair on behalf of a member of the Section
- The Chief Medical Officer
- The Vice President of Medical Affairs
- General Counsel

In the Request for External Peer Review, the Requesting Party should cite the perceived need for external peer review based upon the following guidelines:

Request for External Peer Review

- The peer review cannot be conducted in accordance with the hospital’s policy for peer review by business associates.
- There appears to be a conflict of interest between the practitioner under review (“Practitioner”) and potential peer reviewers.
- There is a substantial difference in expertise between the Practitioner and potential peer reviewers.
- There is a substantial difference of opinion in the Peer Review System regarding the quality of care provided in a case or by the Practitioner.
- The review involves new technology or a new procedure and the medical staff does not have an internal resource.
- Anticipation of a professional review action under the Fair Hearing Plan.
- Anticipation of litigation.
- Other reasons dictated by the circumstances.



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Request for External Peer Review Based Upon the Standards of Professional Conduct

- There appears to be a conflict of interest between the Practitioner and potential peer reviewers.
- There appears to be a conflict of interest or discord between the Practitioner and the PRC.
- There is a substantial difference of opinion regarding the professional conduct of the Practitioner.
- Anticipation of a professional review action under the Fair Hearing Plan.
- A potential violation of state or federal law requiring a review by an attorney (consult the hospital's policy for access to general counsel).
- Anticipation of litigation.
- Other reasons dictated by the circumstances. In the Request for External Peer Review, the Requesting Party should cite the perceived need for external peer review based upon the following guidelines:

Obtaining the External Peer Review

- The Request for External Peer Review will be in writing and directed to the Chair of the PRC or the President of the Medical Staff.
- The request will require the approval of the PRC [option: the Chair of the PRC] and the MEC [option: the Chair of the MEC] and the President [option: additional approval by the Board].
- If the request is approved by the PRC [or the Chair of the PRC] and the MEC [or the Chair of the MEC] and the President [and the Board], the Peer Review Coordinator [the person responsible for the overall management of the peer review system], under the direction of General Counsel, will coordinate the external peer review process by providing the records to the external peer reviewer and receiving the report of the external peer reviewer.



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Notification of the Practitioner Subject to External Peer Review

- At least five (5) days prior to sending cases to external peer review, the Peer Review Coordinator will send a notice to the Practitioner subject to external peer review.
- The notice will inform the Practitioner of the external peer review and request input from the Practitioner as part of the external peer review.
- The Practitioner may provide input into the external peer review before, during or after the cases are sent to external peer review or after the receipt of the report from the external peer review.
- The Practitioner may decline to provide such input. Notwithstanding the foregoing, any committee designated with the power may still require a Practitioner to provide a written response to questions or to appear before such committee and answer questions. Neither the written response nor an appearance by a Practitioner will be deemed to be a hearing under the Fair Hearing Plan. Failure by the Practitioner to provide a written response to such questions within the time period designated by the committee, failure to appear or failure in any manner to appropriately and in good faith answer such questions will be deemed a voluntary resignation from the Medical Staff.
- This Section will not apply to policies or protocols for routine external peer review approved by the MEC and disclosed to the Practitioners subject to the external peer review.

Prohibitions during an External Peer Review

During the pendency of the external peer review, the Practitioner will not:

- Contact the external peer review organization conducting the external peer review.
- Contact the peer reviewer conducting the external peer review.
- Contact the patients of the cases involved in the external peer review regarding the external peer review. This Section will not preclude continuing medical services to such patients.
- Modify the medical or other records regarding the cases involved in the external peer review.
- In any manner seek to influence the external peer review.

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