

October 10, 2011

**VIA CERTIFIED MAIL-RETURN RECEIPT REQUESTED
PERSONAL & CONFIDENTIAL**

Mahnee Dinsmore, M.D.
Trinity Women's Care
7633 Cita Lane, Suite 102
New Port Richey, Florida 34653

NOTICE OF ADVERSE RECOMMENDATION BY MEDICAL EXECUTIVE COMMITTEE

Dear Dr. Dinsmore:

This letter is being sent pursuant to the Helen Ellis Memorial Hospital Medical Staff Bylaws, Credentialing Policy Manual, Actions Affecting Medical Staff Appointees, Section 6, Notice to Affected Practitioner which states as follows:

Any Hospital, committee or body which makes a proposal, recommendation, or decision regarding an application for reappointment or a change in medical staff privileges shall, within ten (10) days of such proposal, recommendation, or decision, send the affected practitioner notice of such, by return receipt mail, and deliver copy of said notice to The Chief Executive Officer . . .

On October 5, 2011, the Medical Executive Committee (MEC) adopted the findings and recommendations of the Credentials Committee and voted not to grant your request for permanent staff membership at Helen Ellis Memorial Hospital. Although you had completed one year of provisional staff membership, a number of clinical issues regarding your handling of obstetrical cases had resulted in a precautionary suspension and further investigation of several of your obstetric cases. The Credentials Committee, by letter dated October 5, 2011, advised the MEC of their findings and recommendations which were as follows:

1. The documentation by this physician is below the Standard of Care (SOC) with regard to medical management and decision making during the labor and delivery process. Of the 13 cases reviewed by an external obstetric expert, all were noted to have problems with documentation. In addition to violating the SOC, these documentation deficiencies violate our Medical Staff Bylaws, Policies & Procedures, and Rules and Regulations.

2. There is a serious lack of documentation regarding informed consent as to C-sections and/or VBAC (Vaginal Birth After C-section).

3. Because of this lack of documentation, there is no insight as to why management decisions were being made, who is making these decisions, the timing of these decisions, and the involvement or non-involvement of the physician in the decision-making process. Further, the vagueness of the terms "oblique lie" and "chronic renal" are not helpful and of no assistance understanding the patient's condition.

4. While due consideration is given to Dr. Dinsmore's statements to the Committee, both oral and written, these repeated violations of the SOC, as well as of Medical Staff Bylaws, Policies and Procedures, and Rules and Regulations are concerning and make it difficult for this Committee to lend credence to her explanations given the consistent pattern of omissions presented. In other words, to provide an "after the fact" explanation in one case may be excusable, but not to the degree presented here.

5. The Credentials Committee concurs with the expert reviewers in most of the opinions of the cases provided. The Credentials Committee had particular concerns regarding the clinical management of patients [REDACTED], [REDACTED], [REDACTED], [REDACTED], and [REDACTED].
Patients # 2, 12, 11, 5 or 10

6. The Credentials Committee did not concur with, nor have criticisms with regard to Dr. Dinsmore's decision to order type and *# 12* cross with patient [REDACTED]; sending patient [REDACTED] to ICU; and the use of consultants with patient [REDACTED]. *#7* *↳ # 4*

After review and discussion, the MEC adopted these findings and recommendations as their own.

In addition, the MEC would point out that the General Rules and Regulations of Helen Ellis Memorial Hospital set out specific requirements for documentation at this institution. By your own admission, your documentation was deficient and in violation of Section 2. Medical Records and Section 3. General Conduct of Care of these General Rules and Regulations. This decision is being copied to the Chief Executive Office for further action as needed.

Based upon this adverse recommendation, you are entitled to a hearing. Pursuant to the HEMH Medical Staff Bylaws, Hearing and Appeal Procedure, Section A. Initiation of Hearing: An applicant or an individual holding a medical staff appointment shall be entitled to a hearing whenever: "1. recommendation unfavorable to him/her has been made by either the Executive Committee or the Credentials Committee to the Board."

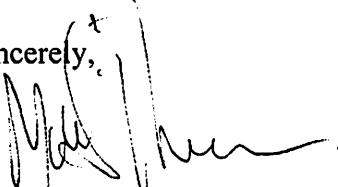
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If you desire a hearing, you have thirty (30) days following the date of receipt of this letter within which to request a hearing. You must make this request in writing to me. If you do not do so, you will have deemed to have waived your right to such a hearing and to have accepted the recommendation or decision at issue.

Sincerely,



Nicolas Pavouris, M.D., Chief of Staff
Helen Ellis Memorial Hospital

NP:LKR:Its

cc: Adam Levine, Esquire
Mason H. Grower, III, Esquire
Bruce Bergherm, Chief Executive Officer