



Ohio Administrative Code

Rule 3701-22-59 Quality assessment and performance improvement - pediatric cardiac catheterization services.

Effective: August 31, 2025

(A) Each pediatric cardiac catheterization service will have a regular formal morbidity and mortality conference:

(1) Chaired by the medical director of the pediatric cardiac catheterization service or the medical director's designee;

(2) Held at a minimum of once every sixty days or more frequently depending on the need; and

(3) Review all of the following:

(a) Deaths;

(b) Rescue extracorporeal membrane oxygenation;

(c) Emergency surgery; and

(d) Major complications, such as:

(i) Readmission to intensive care unit;

(ii) Emergent readmission to the hospital; or

(iii) Major non-surgical intervention.

(B) Each pediatric cardiac catheterization service will establish and maintain a method for reviewing the quality of all cardiac catheterization procedures. This review will assess the following:

(1) Appropriateness of cardiac catheterization studies and interventions;



(2) Technical quality of cardiac catheterization studies;

(3) Procedure result;

(4) Rate of therapeutic success; and

(5) Rate of procedural complications.

(C) Each pediatric cardiac catheterization service will establish and maintain a database to support the review process detailed in paragraph (B) of this rule. The results of analyses and review are to be documented and used to guide periodic internal reviews of individual physicians with respect to maintaining their credentials to perform specific cardiac catheterization procedures.