



## Annual Review of Medical Staff

Year: 2000/2

Name: DR. NEBOISA DENIC  
Program: PATHOLOGY

### **Summary of Professional Activities**

To be provided by the medical staff member. This should include details of clinical, educational and research activities.

- FULL TIME STAFF PATHOLOGIST - ST. CLARE'S SITE
- PART TIME FORENSIC PATHOLOGIST - HSC
- MEDICAL EXAMINER FOR THE PROVINCE
- COORDINATOR FOR CLINICO-PATHOLOGICAL CONFERENCES
- INVOLVED IN TEACHING OF RESIDENTS, INTERNS AND MEDICAL STUDENTS
- INVOLVED IN PREPARATION<sup>OF</sup> SURGICAL RESIDENTS FOR ROYAL COLLEGE SPECIALITY EXAM
- ACTING CHIEF OF THE DEPARTMENT IN ABSENCE OF DR. D. COOK
- CURRENTLY WORKING ON A PAPER TO BE SUBMITTED FOR PUBLICATION
- Chair of clinical pathological conference

### **Performance Issues**

This would only be an issue if complaints had been received or the divisional chief or clinical chair had particular reason for concern.



Annual Review of Medical StaffPage 2

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**Resource Utilization**

The divisional chief or clinical chair should review length of stay and appropriateness data with the staff member.

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**Meetings Attended**

- AMERICAN ACADEMY OF FORENSIC SCIENCES  
FEB 11-16 2002, ATLANTA, GEORGIA

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**Committees**

IN ELECTION FOR TREASURER FOR MEDICAL STAFF

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Annual Review of Medical Staff

Page 3

**Proof of Ongoing Licensure & Malpractice Insurance**

License #



Malpractice #



Results of any reviews that you have undergone by the Newfoundland Medical Board or other.

**Other Issues**

Either participant could raise any other issues. The meeting should normally close with the divisional chief or clinical chair offering appreciation on behalf of the Health Care Corporation of St. John's for the individual's contributions and a discussion of future plans.

*Issue of consolidation of Pathology Technical services and  
the impact on Pathologists and service they provide*

Annual Review of Medical StaffPage 4**Comments**

W.L.

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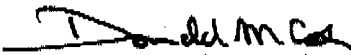
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I have read and understand the Health Care Corporation of St. John's Bylaws. I agree to abide by and govern myself in accordance with the Bylaws.



**Signature**  
**Medical Staff Member**



**Signature**  
**Clinical Chief and/or**  
**Divisional Chief**

Sept 20 / 02

**Date**

Aug 26 / 03

**Date**