**Name, MD, MBA**

555-555-5555

[name@gmail.com](mailto:name@gmail.com) | www.linkedin.com/in/name

**Chief Medical Officer | Medical Director**

Hospital Administrator and Physician with over 12 years of leadership experience in healthcare. Skilled in hospital operations, physician practice management, quality management, ambulatory surgery center management, and health system integration. Clinical background in \_\_\_\_\_\_ Expertise includes:

* Hospital Operations
* Physician Relations
* Health System Integration
* Hospital Quality Management
* Capital and Operating Budget Planning
* Physician Partnership Management
* Electronic Medical Records
* Medical Staff Affairs
* Hospital Compliance
* Hospital Risk Management

**Professional Experience**

**Small City Hospital,** City, ST **Year to Present**

*Small City Hospital is part of the State Hospital Health system with 400+ licensed beds and an annual net operating budget in excess of $120 million.*

***Chief Medical Officer***

Full management responsibility for Surgical Services, Surgery Center of City, Employed Physician Network, Hospital Quality, Medical Staff Affairs, and Physician Recruiting. Number of full time employees: xxx; part-time employees: xx. *Functional areas of responsibilities and accomplishments include:*

**Hospital Operations:**

* Reduced outstanding A/P from 120 days to 30 days within first 2 quarters.
* Converted supply chain resulting in just over $1 million in annual savings.
* Saved approximately $2 million annually by consolidating positions, attrition and benefit alignment.
* Changed employed physician model resulting in just over $1 million in annual expense reduction.
* Eliminated or revised contracted physicians resulting in approximately $600,000 in annual savings.
* Hospital had a net loss of $9,736,421 in 2012, net loss of $2,017,917 in 2013, net loss of $1,500,000 in 2014, with projected surplus for 2015.
* Consolidated surgical operations at main campus and Ambulatory Surgical Center (“ASC”).
* Doubled year over year cash distributions from ASC from $9K to $1.8 million.
* Oversaw the increase in employee engagement scores by 8%.

**Medical Staff Affairs:**

* Created new Medical Staff By-Laws and consolidated medical staff from x# to x# members.
* Increased physician satisfaction scores by 10 percentage points from baseline to end of first year.
* Initiated ongoing professional practice evaluation (OPPE) program.
* Revised and standardized all medical director agreements resulting in a net decrease in payments.
* Revised surgery call pay agreement with lower stipend.

**Informatics**

* Implemented Meditech EMR including CPOE to meet Stage 1 meaningful use requirements.
* Standardized office-based EMR.
* Initiated electronic quality event reporting/tracking.
* Converted to EPSi for hospital-wide budgeting/decision support.

**Quality:**

* Achieved substantial year over year improvement in all core measures.
* Earned best scores in system for HACs as well as for best inpatient HCAHPS.
* Earned back all but $23,000 in Medicare VBP program in first full year.
* Accreditation survey and state CMS survey of ASC showed no clinical deficiencies.

**Name Page 2**

**Small City Hospital Experience** (*continued*)

**Employed Physician Network**

* Started hospitalist program and maintained subsidy at or below national benchmark.
* Ended subsidy for employed OB/Gyn, surgical specialists and primary care physicians.
* Revised and consolidated employment contracts.
* Hired 6 new employed physicians within first year.

**ABC Memorial Hospital,** City, ST **Year - Year**

*ABC Memorial Hospital is a 185-bed community hospital.*

***Member, Active Medical Staff, 2002-2012***

***Chair, Infection Control Committee, 2004-2008***

***Member, Credentials Committee, 2006-2008***

* Selected to lead the hospital’s Antimicrobial Stewardship Team.
* Developed and implemented guidelines to minimize resistance, hospital-acquired infection, and maintain JCAHO accreditation
* Provided employee and public education seminars to address the problem of antibiotic overutilization and antimicrobial resistance
* Successfully implemented Surgical Care Infection Protocol (SCIP) and maintained surgical site infection rate at or below 0.5%
* Partnered with outpatient pavilion administrator to develop and implement a pediatric pre-op educational tour for patients and parents
* Streamlined scheduling and pre-op assessment for outpatient procedures

**Surgery Affiliates (“SA”),** City, ST **Year - Year**

*SA is one of the largest owner/operators of multispecialty ambulatory surgery centers.*

***Physician Leadership Team***

Served as physician leader for a region of seven ambulatory surgery centers and advisor to SA supply chain with $200 million annual spend. Worked with regional VP, center administrators, and physician partners to ensure that quality, satisfaction, and financial metrics were maximized.

* Led a successful re-syndication of a multi-specialty ASC. Results included: addition of nine new physician partners, doubling of case volume, and transition from $500K negative cash balance to $100K quarterly distributions in first year
* One of three national physicians that worked closely with supply chain coordinator, vendors, and physician partners. Initiatives included the following:
* ENT initiative (ear tubes and sinus shavers) – $600,000 annual savings
* Ophthalmology initiative (standard packs and lens implants) - $700,000 annual savings
* Suture initiative - $300,000 annual savings
* Trocar initiative - $400,000 annual savings
* Region ranked fourth out of fifteen in physician net promoter score

**Outpatient Surgery Center,** City, ST **Year - Year**

*Outpatient Surgery Center is a multispecialty ambulatory surgery center that performed over 6,700 cases annually in four operating rooms.*

***Chair, Board of Managers***

***Medical Director***

* Led successful re-syndication that resulted in: adding 12 new physician partners, raising $3 million to purchase half the operations and all of the real estate, growing annual cash distributions from $410,000 in 2008 to just over $2 million in 2010, and growing annual case volume by 17%.
* Oversaw achievement of reducing infection rate to below 0.2% and patient satisfaction above 93%
* Achieved top level 3-year accreditation (maximum given)
* Initiated peer review process

**Name Page 3**

**Education**

**Vanderbilt University Owen Graduate School of Management**, Nashville, TN

Master of Business Administration, Executive Program, Year

**University of xx College of Medicine**, City, ST

Doctor of Medicine**,** Year

**ABC University**, City, ST

Bachelor of Science, Chemistry, Year

**Professional Training and Certifications**

**ABC University**, City, ST

*Lean Healthcare*, Year

**Vanderbilt University, Owen Graduate School of Management**

**Executive Development Institute** *Leading Projects for Strategic Results*

**Diplomat**

American Board of Otolaryngology-Head and Neck Surgery**,** Year - Year

**University of ABC,** City, ST

General Surgery Internship, Year - Year

Otolaryngology Residency Program, Year - Year

* ABC Compassionate Service Award, Year
* HIJ Memorial Award, Year & Year

Chief Otolaryngology Resident, Year - Year

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**Addendum of Publications, \_\_\_\_\_\_\_, and \_\_\_\_\_\_**