

LITTLE COMPANY OF MARY OUTSTANDING PHYSICIAN AWARD NOMINATION FORM

The Little Company of Mary Outstanding Physician Award will be presented annually to the Physician who best exemplifies the Christian values of Memorial Hospital and Health Care Center through his or her work and lifestyle. Any physician who has been an active member of the Medical Staff for at least one year is eligible.

Any community member, employee, or member of the medical staff, except for members of the Mission Committee and Selection Team, may fill out this nomination form and submit to Medical Staff Coordinator by the end of January. Each individual may submit only one nomination per year. Please use other side if additional space is needed for comments.

I nominate _____ for the LCM Outstanding Physician Award.

Submitted by _____ on _____.

Please rate (1-Sometimes, 2 – Often, 3 – Usually, 4 – Most of the time, 5 - Always) and provide a brief description, using examples when possible, of how this physician:

Illustrates teamwork and working well with other physicians and hospital staff. 1 2 3 4 5

Goes above and beyond the call of duty for patients, families, and staff. 1 2 3 4 5

Has respect for human dignity, recognizing each person as a unique and valued individual. 1 2 3 4 5

Committed to Compassionate Caring, continuing Christ’s healing mission. 1 2 3 4 5

Demonstrates Stewardship, using all resources in a responsible manner. 1 2 3 4 5

Provides Quality, demonstrating a commitment to excellence. 1 2 3 4 5

Believes in Justice, creating an environment guided by integrity, honesty and fairness. 1 2 3 4 5
