

Family Medicine Privileges Department of Family Medicine

Name:	
_	(Please print)
Ini	tial privileges (initial appointment)
Re	enewal of privileges (reappointment, on 2-year specialty cycles)
Mo	odification of privileges (request for any additional privileges beyond those previously granted)
Basic Ed	lucation: MD or DO
family me	formal training: Successful completion of an ACGME or AOA accredited residency in dicine and current certification or board eligibility (with achievement of certification ears of training completion) leading to certification in family medicine by the ABFM or P.

Required current experience: Completion of at least 24 encounters, reflective of the scope of privileges requested, in the past 12 months or successful completion of and ACGME or AOG accredited residency or clinical fellowship within the past 12 months. Current BLS certification required.

Baroness*	Children's**	North	East	Bledsoe/Sequatchie	Community Health Centers***

^{*} Includes BEH Main Hospital, Miller Eye Center, Plaza Surgery and all Erlanger Ambulatory Clinics

Core Family Medicine Privileges:

Core privileges in family medicine include the ability to admit (if applicable to the setting), evaluate, diagnose, treat, and provide consultation to patients of all ages with a wide variety of illnesses, diseases, injuries, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, integumentary, nervous, female reproductive, and genitourinary systems. Physicians may provide care to patients in the intensive care setting in conformance with unit policies. Physicians may assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

^{**}Includes Children's Hospital Inpatient, Children's Ambulatory clinics, Children's OR and Kennedy Children's Outpatient Center

^{***}Includes Dodson Avenue Community Health Center, Premier Community Health Center, and Southside Community Health Center

Core Family Medicine privileges include the following procedures and such other procedures that are extensions of the same techniques and skills:

Performance of history and physical exam

Abdominal paracentesis

Management of burns, superficial and partial thickness

Excision of cutaneous and subcutaneous lesions, tumors, and nodules

Incision and drainage of abscesses

Management of uncomplicated, minor, closed fractures and uncomplicated dislocations

Performance of local anesthetic techniques

Performance of needle biopsies

Performance of simple skin biopsies

Peripheral nerve blocks

Placement of anterior and posterior nasal hemostatic packing

Removal of a non-penetrating foreign body from the eye, nose, or ear

Suturing of uncomplicated lacerations

Core Family Medicine Privileges - PEDIATRICS (Check ALL that are applicable to your request)								
Baroness* Children's** North East Bledsoe/Sequatchie Community Health Centers***								

Core Privileges in Family Medicine - Pediatrics

Physicians may admit, evaluate, diagnose, outpatient and clinic patients, and treat, and provide consultation to patients from birth to young adulthood (21 years of age) concerning their physical, emotional and social health as well as treating acute and chronic disease, including major complicated illnesses. In addition, applicants may assess, stabilize and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. This includes the care of the normal newborn as well as the uncomplicated premature infant born meeting criteria for care of the newborn nursery.

The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

Arterial puncture

Bladder catheterization

Circumcision of newborn

Endotracheal intubation

Incision and drainage of abscesses

Gynecologic evaluation of pre-pubertal and post-pubertal females

Local anesthetic techniques

Management of burns, superficial and partial thickness

Performance of history and physical exam

Performance of simple skin biopsy or excision

Peripheral nerve blocks

Placement of anterior and posterior nasal hemostatic packing

Placement of intraosseous lines

Placement of IV lines

Placement and removal of subdermal contraceptive devices (e.g. Nexplanon)

Placement and removal of IUD's

Reduction and splinting of uncomplicated, minor closed fractures and uncomplicated dislocations

Removal of non-penetrating foreign bodies from the eye, nose, or ear

Subcutaneous, intradermal, and intramuscular injections

Wound care and suture of uncomplicated lacerations

Core Family Medicine Privileges –GYNECOLOGY (Check ALL that are applicable to your request)							
Baroness* Children's** North East Bledsoe/Sequatchie Community Health Centers *							

<u>Core Privileges in Family Medicine – GYN</u>

Physicians may admit, evaluate, diagnose, outpatient and clinic patients, treat, and provide consultation to post-pubescent female patients with injuries and disorders of the female reproductive system and the genitourinary system. They may provide care to patients in the intensive care setting in conformance with unit policies. They may assess, stabilize, and determine the disposition of patients with emergency conditions consistent with medical staff regulations regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

Performance of history and physical exam

Appropriate screening examination (including breast examination)

Cervical biopsy and polypectomy

Colposcopy

Cryosurgery/cautery for benign disease

Diagnostic cervical dilation and uterine curettage (including for incomplete abortion)

Endometrial biopsy

Excision/biopsy of vulvar lesions

Incision and drainage of Bartholin duct cysts or marsupialization

Insertion and removal of intrauterine devices

Microscopic diagnosis of urine and vaginal smears

Removal of foreign bodies from the vagina

Suturing of uncomplicated lacerations

Core Family Medicine Privileges – OBSTETRICS (Check ALL that are applicable to your request)						
					Community Health Centers ***	

Core Privileges in Family Medicine - OBSTETRICS

Physicians may admit, evaluate, and manage female patients with pregnancy, with an expectation of non-complicated vaginal delivery, management of labor and delivery, and procedures related to normal delivery, including medical diseases that are complicating factors in pregnancy (with consultation). They may provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff regulations regarding emergency and consultative call services.

To be eligible for obstetrical privileges, the applicant must have obtained a letter from the residency director indicating proficiency in the field of non-operative obstetrics, and be able to document the performance of at least 60 vaginal deliveries as primary physician during their residency. For those physicians who have not performed obstetrics for the past 2 years, privileges may be granted with the requirement that the first 10 deliveries are proctored by a physician with at obstetrical privileges.

It will be required that prior to being credentialed every 2 years, one must complete an Obstetric Emergency Simulation course during the 2 years prior to the next reappointment cycle. This should include training in managing shoulder dystocia, postpartum hemorrhage, preeclampsia/eclampsia and operative vaginal delivery. In addition, prior to every other reappointment cycle, one must complete a

Fetal Monitoring course. This may be done online. Both of these should be completed at the time of any initial credentialing for new applicants, and by July 1, 2020 for those already on staff. Documentation of this education must accompany the initial application and the reappointment application

10 vaginal deliveries per year to maintain privileges to perform vaginal deliveries

The core privileges in Family Medicine with non-operative Obstetrics include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

Performance of history and physical exam

Amniotomy

Augmentation of labor

Dilation and curettage, including suction and postpartum

Excision of vulvar lesions at delivery

External and internal fetal monitoring

Induction of labor with consultation and Pitocin® management

Initial management of postpartum hemorrhage

Limited OB ultrasound

Management of prenatal and postpartum care

Management of uncomplicated labor

Manual removal of placenta, post-delivery

Normal vaginal delivery of a vertex presentation, including ante- and postpartum care

Oxytocin challenge testing

Postpartum endometritis

Pudendal anesthesia

Repair of episiotomy, including lacerations/extensions

Repair of vaginal and cervical lacerations

Vacuum-assisted delivery

Core Family Medicine Privileges – SURGICAL OBSTETRICS (Check ALL that are applicable to your request)						
Baroness*	Children's**	North	East	Bledsoe/Sequatchie		

Special Non-Core Privileges in Family Medicine - SURGICAL OBSTETRICS:

To be eligible for privileges, the applicant must have successfully completed at least a 1year Fellowship in surgical obstetric care as documented by a letter from the Fellowship Director. In addition, applicants must obtain certification from an established certifying body for surgical obstetric care within 2 years of completion of their Fellowship. The lack of this certification would not restrict privileging for the first 2 years of the applicant's level 2 privileging. Applicants may apply for privileging without completing a Fellowship if they can show that they have maintained hospital privileges for operative obstetrics for the past 5 years, and can present a letter from their most recent Department Chief indicating they have been free of adverse actions from the credentialing committee.

The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills. Reference/comanagement will be required for the high risk conditions.

Cesarean Section Delivery
Post-Partum Tubal Ligation

External Version

Twin delivery

Dilation and Curettage

Repair of 4th degree lacerations

Core Family Medicine Privileges – Endoscopy (Check ALL that are applicable to your request)						
Baroness*	Children's**	North	East	Bledsoe/Sequatchie		

Special Non-Core Privileges in Family Medicine with Endoscopy:

To be eligible to apply for a special procedure privilege listed below, the applicant must demonstrate successful completion of an approved and recognized course or acceptable supervised training within residency or fellowship; and provide documentation of competence in performing that procedure.

Colonoscopy: minimum requirement 50

Esophagogastroduodenoscopy: 35

Core Family Medicine Privileges – Other (Check ALL that are applicable to your request)					
Baroness*	Children's**	North	East	Bledsoe/Sequatchie	

Request for Privilege Not Listed in Core or Special Non-Core

(please list the privilege and provide justification as well as any accompanying certifications or case logs)

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Special Procedures Privileges Criteria	

Special Procedures Privileges Criteria Moderate Sedation

CRITERIA - To administer Moderate Sedation

- 1. Basic education: MD, DO, DDS, or DMD
- 2. Successful completion of a post-graduate residency training program of at least three years' duration.
- 3. Trained in the professional standards and techniques to administer pharmacologic agents to predictably achieve either minimal or moderate sedation and monitor patients carefully in order to maintain them at either of these levels of sedation-either intentionally or unintentionally. Acceptable training may be the completion of a course offered by any local hospital or the local Medical Society. Documentation of completion is required.
- 4. Must be able to evaluate and document evaluation of the patient prior to performing minimal or moderate sedation.
- 5. Must be qualified to rescue patients from *deep* sedation and trained to manage a compromised airway and to provide adequate oxygenation and ventilation.
- 6. Current proof of ACLS, PALS, or ATLS
- 7. Able to demonstrate that he/she has administered minimal or moderate sedation or analgesia to at a minimum of five (5) patients during the past 12 months.

NOTE: Deep Sedation is limited to Anesthesia/CRNAs, Critical Care, and Emergency Medicine and full Anesthesia is limited to Anesthesiologists and CRNAs and is outlined in their delineation of privileges.

Department Chief Recommendation: I have reviewed the requested clinical privileges and supportive documentation for the above named applicant. Recommended as Requested Recommended with Modifications (See comments below) Not Recommended (See comments below) Chief Comments: Date Chief Signature Date

Rev. 08/24