

Hematology Privileges Department of Medicine

Name:

(Please print)

- ' Initial privileges (initial appointment)
- ' Renewal of privileges (reappointment, on 2 year specialty cycles)
- ' Modification of privileges (request for any additional privileges beyond those previously granted)

Basic Education: MD or DO

Minimal formal training: Successful completion of an ACGME or AOA accredited residency in pathology, followed by successful completion of an accredited fellowship in blood banking/transfusion medicine. Current subspecialty certification or active participation in the examination process (with achievement of certification within 5 years of training completion) leading to subspecialty certification in hematology or dual certification in hematology and medical oncology by the ABIM or subspecialty certification in hematology by the AOBIM.

Maintenance of Basic Life Support (BLS) at a minimum.

Required current experience: Inpatient or consultative services for at least 24 hematology patients, outpatient or clinic patients, reflective of the scope of privileges requested, during the past 12 months, or successful completion of an ACGME or AOA residency or clinical fellowship within the past 12 months.

Facility (Check ALL that are applicable to your request)								
Baroness*	Children's**	North	East	Bledsoe/Sequatchie				

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

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

Core Hematology Privileges:

Core privileges for hematology include the ability to admit, evaluate, diagnose, treat, and provide consultation to patients of all ages with diseases of the blood, spleen, and lymph glands; and disorders of the immunologic system such as anemia, clotting disorders, sickle cell disease, hemophilia, leukemia, and lymphoma. Core privileges may also include the ability to provide care to patients in the intensive care setting in conformance with unit policies, as well as assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty also include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

Privileges include but are not limited to the following:

Performance of history and physical exam

Administration of chemotherapeutic agents and biological response modifiers through all therapeutic routes

Apheresis procedures

Complete blood count, including platelets and white cell differential, by means of automated or manual techniques

Diagnostic lumbar puncture

Indications and application of imaging techniques in patients with blood disorders

Management and care of indwelling venous access catheters

Preparation, staining, and interpretation of peripheral blood smears, bone marrow aspirates, and touch preparations, as well as interpretation of bone marrow biopsies

Therapeutic thoracentesis and paracentesis

Special Non-Core Privileges in Hematology:

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 in residency, fellowship, or other acceptable experience; and provide documentation of competence in performing that procedure consistent with the criteria set forth in the medical staff guidelines governing the exercise of specific privileges.

Procedure	Baroness	Children's	North	East	Bledsoe/Sequatchie
Bone marrow transplantation					
Administration of Moderate sedation and analgesia (see below for criteria).					

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)

Special Procedures Privileges Criteria Moderate Sedation

CRITERIA - To administer Moderate Sedation

1. Basic education: MD, DO, DDS, or DMD

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

^{2.} Successful completion of a post-graduate residency training program of at least three years' duration.

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:

Provider Signature

Date

Chief Signature

Date

Rev. 03/24