



Pediatric Hospitalist Privileges
Department of Pediatrics

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 postgraduate training program in pediatrics or internal medicine/pediatrics and current certification or active participation in the examination process leading to certification in pediatrics or pediatric hospital medicine by the appropriate board (AOBFP, ABP) within five (5) years of completion of training.

Required current experience: Successful completion of inpatient services to at least 25 patients within the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past 12 months.

Minimum BLS certification required.

Table with 5 columns: 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 Pediatric Hospitalist Privileges:

Core privileges for hospitalist include the ability to admit, perform history and physical exam, evaluate, diagnose, treat patients of all ages, and provide consultation to inpatients with common and complex illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, immunologic, gastroenteric, and genitourinary systems. Hospitalists may provide care to patients in the intensive care setting in conformance with unit policies. They also should be able to assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff regulations regarding emergency and consultative call services.

The core privileges in Pediatric Hospital Medicine include the procedures listed below:

- Drawing of arterial blood
Lumbar puncture
Incision and drainage of abscesses
Local anesthetic techniques

Management of burns, superficial and partial thickness
 Placement of peripheral venous line
 Placement of anterior and posterior nasal hemostatic packing
 Removal of non-penetrating foreign body from eye, nose, or ear
 Interpretation of ECGs
 Management of non-invasive airway support devices such as humidified & heated high flow nasal cannula and CPAP

Special Non-Core Pediatric Hospitalist Privileges:

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
Intubation (requires at least 5 performed per year with case logs included with application)					
Management of Critical Care patient with specialty consultation					

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)*

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