



GREATER LANSING

DEPARTMENT OF EMERGENCY MEDICINE
Core Privileges

Name: _____

Purpose

To provide an environment in which physicians may perform proficient and immediate care to patients of all ages who present to the Emergency Department.

Qualifications

To be eligible for core privileges in the Department of Emergency Medicine, the applicant must meet the following qualifications:

- Successful completion of an ACGME or AOA-recognized accredited residency.

Active participation in the examination process leading to certification in emergency medicine or current certification by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine is highly recommended.

Privileges included in the core with observation requirements

_____ **Requested**

Privileges to assess, evaluate, diagnose, and provide initial treatment to patients of all age groups who present to the emergency department with any symptom, illness, injury, or condition; to provide services necessary for minor illnesses or injuries and stabilize patients with major illnesses or injuries; assess all patients to determine whether additional care is necessary.

Privileges include, but are not limited, to: advanced cardiac life support, moderate sedation*, propofol administration**, anoscopy/proctoscopy, arthrocentesis, any type of catheter placement, aspiration, cardiac massage, cardioversion, defibrillation, cricothyrotomy, tracheostomy, culdocentesis, cut down, endotracheal intubation, foreign body removal, lavage, incision and drainage, intracardiac injection, lumbar puncture, laryngoscopy, ocular tonometry, paracentesis, pericardiocentesis, precipitous vaginal delivery, preliminary interpretation of tests, closed reduction of dislocations and fractures to include splinting or immobilization, respiratory therapy, skin grafting, suprapubic tap/cystostomy, wound debridement and repair, thoracentesis, thoracostomy tube drainage, any emergency life -saving measure deemed necessary.

*Moderate Sedation Privileges: In addition to the qualifications listed above, the applicant must pass an exam at the time of initial credentialing and recredentialing; education and pharmacology pieces will be provided.

** Propofol Administration: In addition to the qualifications listed above, the applicant must pass an exam at the time of initial credentialing and recredentialing.

Observation requirements for core emergency medicine privileges

Retrospective review for initial appointees shall consist of a minimum of eighteen (18) charts (three (3) per shift) for the first six (6) months of assignment.

Concurrent observation shall be required for a minimum of three (3) days but not longer than ninety (90) days to ensure competence with Department standards.

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Observation requirements for propofol administration: Retrospective review of the first four cases is required for physicians appointed after 9/11/07. Physicians appointed prior to 9/11/07 are exempt from the observation requirement, except as may be required at the discretion of the Department Chairman.

Special procedures privileges with observation requirements

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 policies governing the exercise of specific privileges.

Requested	Procedure	Criteria	Recommend	Do Not Recommend
	Admitting privileges	Provide letter of explanation, to include subspecialty, and documentation of training in patient management.		
	Osteopathic manipulative treatment	No documentation requirement for osteopathic physicians (DOs); documentation of training and experience required for allopathic physicians (MDs).		
	Other:			

Comments: _____

Provisional year chart review requirement

All of the extension cases will be retrospectively reviewed, during the quality improvement process, during the first year at 6 and 12-month intervals.

If there is not a sufficient level of activity during the provisional period, recommendations for privileges or an extension of provisional status will be at the discretion of the Department chairman.

Acknowledgement of practitioner

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform, and that I wish to exercise at **McLaren Greater Lansing**, and

I understand that:

- (a) In exercising any clinical privileges granted, I am constrained by Hospital and Professional Staff policies and rules applicable generally and any applicable to the particular situation.
- (b) Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such a situation my actions are governed by the applicable section of the Professional Staff Bylaws or related documents.

Signed: _____

Date: _____

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Recommendation:

- Approve as requested
- Approve with modifications as noted below
- Denial of privileges

Modifications: _____

Observers: _____

I (we) attest that in recommending these privileges, due consideration has been given to the applicant's professional performance, training, experience, judgment, and technical skills.

Chairman, Department of Emergency Medicine *Date*

Co-Chief of Staff (for interim privileges only) *Date*

Action:
Credentials Committee Date: _____
Professional Staff Executive Committee: Date: _____
Board of Trustees Date: _____

Comments: _____
