

DOP INSTRUCTIONS

1. Complete the attached DOP
2. Use the current privilege roster we have provided in your packet to cross-reference privileges if needed
3. Identify the privileges you need then check each facility box where the privilege will be practiced (see IMAGE #1)
4. If you currently hold a privilege requiring maintenance criteria (see IMAGE #2 as an example) you must submit the required documentation to keep the privilege. Maintenance criteria is highlighted throughout the DOP for you. **No Maintenance – No Privilege**
5. If you are requesting a privilege you do not already hold (check your privilege roster), you must meet the initial criteria detailed on the DOP.
6. Return all pages of the DOP by email or fax (jpeg images not accepted)

IMAGE #1

You need privilege CALL-1 at Pineville, Cabarrus and Stanly so this is how your request should look

Please check appropriate blocks when applying for privileges:

CMC	PVL	UNV	CR	LIN	CAB	UNN	STN	ANS	CLV		ALLERGY AND IMMUNOLOGY CORE PRIVILEGES
	X		N/A		X		X		N/A	CALL-1	Privileges to evaluate, diagnose, and manage patients of all ages presenting with conditions or disorders involving the immune system, both acquired and congenital.
<p>NOTE: Privileges include but are not limited to: asthma, anaphylaxis, rhinitis, eczema, urticaria, and adverse reactions to drugs, foods, and insect stings as well as immune deficiency diseases (both acquired and congenital), defects in host defense, and problems related to autoimmune disease, organ transplantation or malignancies of the immune system. Privileges also include allergy testing and desensitization.</p> <p>These core privileges do not include any of the special procedures listed below.</p>											

IMAGE #2

Maintenance Criteria for Continued Privileges (CHEM-1):

The Physician must perform a minimum of ten (10) representative samples of Adult Hematology Core procedures over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for Adult Hematology Core privileges. This will be reviewed at the time of reappointment. Physicians who would like to continue to hold any Adult Hematology Core privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

**ATRIUM HEALTH
ALLIED HEALTH PROFESSIONAL
PHYSICIAN ASSISTANT OR NURSE PRACTITIONER
REAPPOINTMENT SPECIALTY OF INTERNAL MEDICINE DOP**

Print Name

SUMMARY OF OCCUPATION:

1. The Allied Health Professional is a skilled member of the health care team who is qualified by academic and clinical education and experience to provide patient services as an Allied Health Professional under the supervision of a member(s) of the Medical Staff of Atrium Health in accordance with the Bylaws of the Medical Staff.
2. He/she shall assist in the implementation of the health care plan and the management of patients by performing diagnostic and therapeutic tasks as defined and approved by the Board, and authorized under applicable law.
3. For purposes of this form, Allied Health Professional shall mean a "Dependent Practitioner" defined as a health care professional other than physicians or dentists, who is approved by the Board, who is licensed or certified by his/her respective licensing or certifying agencies, and who provides service under the supervision of a physician who is currently appointed to the Medical Staff of Atrium Health.

ORGANIZATIONAL RELATIONSHIP:

1. The Allied Health Professional shall only exercise those clinical privileges maintained by the supervising physician(s) and approved by the Board. The Allied Health Professional may also assist the residents assigned to the Department of Medicine in performance of their duties and responsibilities as assigned by their supervising physician. The Allied Health Professional shall notify the supervising physician of all cases of acute and severe distress, serious nature (life- or limb-threatening), or whenever the patient wishes to see a physician or has unanswered questions.
2. The Allied Health Professional shall perform all privileges in accordance with all laws and regulations pertaining to the scope of practice for his or her health profession. The Allied Health Professional shall wear a nametag identifying him/herself as an Allied Health Professional and introduce him/herself as an Allied Health Professional, and shall at no time imply, state, or lead one to believe that he/she is a physician.
3. The Allied Health Professional must conduct all duties and responsibilities in accordance with departmental and hospital policies and procedures.
4. A nurse or secretary who receives an order from an Allied Health Professional for medication(s), laboratory or radiological studies, and/or treatment is authorized to perform that order as if it were received from a physician.
5. The supervising physician(s) must sign the Delineation of Privileges form of the Allied Health Professional, accepting responsibility for appropriate supervision, and shall intervene and directly assume the care of any patient when requested by the patient or the Allied Health Professional, required by hospital policies and procedures, or when in the interest of patient care. The supervising physician(s) shall co-sign entries on the medical records of patients seen or treated by the Allied Health Professional as required by hospital policies and procedures.

QUALIFICATIONS:

1. The Allied Health Professional shall maintain qualifications as specified in the POLICY ON CLINICAL PRIVILEGES FOR ALLIED HEALTH PROFESSIONALS. His/her past experience and training shall be commensurate with privileges requested.
2. The scope of duties and responsibilities of the Allied Health Professional shall be delineated on an approved Delineation of Privileges form and approved by the Board.

QUALIFICATIONS - continued:

3. The Supervising Physician shall delegate only tasks and procedures to his or her Allied Health Professional which are within or contemplated by the clinical privileges granted to the Supervising Physician by the Medical Executive Committee and the Board of Commissioners and which the Allied Health Professional has been approved to perform. It is understood that the supervision of an Allied Health Professional shall never be transferred to a physician who is not currently a fully appointed member of Atrium Health Medical Staff.
4. If the Medical Staff appointment or Clinical Privileges of the Sponsoring Physician are resigned, revoked or terminated, the Allied Health Professional's permission to practice shall automatically terminate and his or her clinical privileges shall be automatically relinquished.

SUPERVISION:

Except where the Delineation of Privileges form provides for Personal Supervision or Proximate Supervision, General Supervision (as defined below) will be required for all tasks and procedures performed by the Allied Health Professional.

1. "General Supervision" shall mean the procedure is furnished under the supervising physician's overall direction and control, but the physician is not required to be present during the procedure. General Supervision requires the performance of tasks and procedures in a manner that is consistent with state law, the applicable standard of care, Medical Staff Bylaws and hospital policies and procedures, but does not require Personal Supervision or Proximate Supervision, as those terms are defined below.
2. "Proximate Supervision for these procedures" shall mean the physical presence of a sponsoring/supervising physician in the hospital, in close proximity and immediately available to furnish assistance and direction to the Allied Health Professional as needed.
3. "Personal Supervision" shall mean the physical presence of a sponsoring/supervising physician in the room with the Allied Health Professional during the performance of a procedure.

**ATRIUM HEALTH
 DELINEATION OF PRIVILEGES FORM
 ALLIED HEALTH PROFESSIONAL
 REAPPOINTMENT SPECIALTIES OF INTERNAL MEDICINE DOP**

NOTE 1: "CORE" privileges cannot be amended or altered in any way.

NOTE 2: Allied Health Professionals must apply for "CORE" privileges in order to be eligible for special procedure clinical privileges at any facility within Atrium Health.

NOTE 3: Please note that the exercise of certain privileges enumerated herein is necessarily limited by the operational and resource constraints of the facility. All procedures must be performed within a clinical setting with the capabilities and organizational structure required to provide appropriate support.

*** SPECIAL PRIVILEGES WITH QUALIFICATIONS AND/OR SPECIFIC CRITERIA - PROVIDE THE NUMBER OF PROCEDURES PERFORMED WITHIN THE PAST TWO YEARS AND FACILITY WHERE THE PROCEDURES WERE PERFORMED.**

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		GENERAL INTERNAL MEDICINE (ADULT) CORE PRIVILEGES
										CAHP-MED-1	Provide care, treatment, and services consistent with adult practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations including rectal and genitor-urinary examinations as indicated; order diagnostic testing and therapeutic modalities; perform field infiltrations of anesthetic solutions; perform incision and drainage of superficial abscesses; remove chest tubes; record progress notes; write discharge summaries; lumbar puncture.

Maintenance Criteria for Continued Special Privileges (CAHP-MED-1):

The Practitioner must submit a representative sample of a minimum of ten (10) cases, to include at least two (2) cases for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-1	SPECIAL PROCEDURES			
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-1 (b)*	PICC Lines (excluding internal jugular lines and subclavian placement)	15		
										PERSONAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-1 (c)*	Insertion of arterial lines	10		
										CAHP-MED-1 (d)*	Cardiac Stress Testing - Exercise	10		
										CAHP-MED-1 (e)*	Cardiac Stress Testing – Drug Induced	10		
										CAHP-MED-1 (f)*	Insertion - Subcutaneous Birth Control Implant	10		
										CAHP-MED-1 (g)*	Removal - Subcutaneous Birth Control Implant	10		
										CAHP-MED-1 (h)*	Joint Injections	10		
										CAHP-MED-1 (i)*	Incision and Drainage of Superficial Abscess	10		

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		ALLERGY AND IMMUNOLOGY CORE PRIVILEGES
									N/A	CAHP-MED-2	Provide care, treatment, and services consistent with patients presenting with conditions or disorders involving the immune system, both acquired and congenital, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.
<p>The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations; order diagnostic testing and therapeutic modalities; record progress notes; write discharge summaries.</p>											

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		CARDIOVASCULAR DISEASE CORE PRIVILEGES
										CAHP-MED-3	Provide comprehensive care to patients diagnosed with cardiovascular disease and those identified as at risk for cardiac vascular events within the age group of patients seen by the supervising physician. The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations including rectal and genitor-urinary examinations as indicated; order diagnostic testing and therapeutic modalities; perform field infiltrations of anesthetic solutions; perform incision and drainage of superficial abscesses; preliminary interpretation of electrocardiogram with physician consultation; record progress notes; write discharge summaries. Provide basic care and management of patients with implantation of artificial heart and mechanical devices to support or replace the heart partially or totally.

Directing/Performing Advanced Cardiac Life Support (ACLS) in accordance with certification. Documentation of current certification required.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-3	SPECIAL PROCEDURES			
										PROXIMATE SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location	
					N/A		N/A		N/A	CAHP-MED-3 (a)*	Insertion of Central Venous Catheters	10		
CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-3	SPECIAL PROCEDURES			
										GENERAL SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location	
										CAHP-MED-3 (b)*	Cardiac Stress Testing – Exercise (This includes the ability to obtain the Confirmation of Consent)	10		

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-3	SPECIAL PROCEDURES			
										GENERAL SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location	
										CAHP-MED-3 (c)*	Cardiac Stress Testing – Drug Induced (This includes the ability to obtain the Confirmation of Consent)	10		
CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-3	SPECIAL PROCEDURES			
										GENERAL SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location	
					N/A		N/A		N/A	CAHP-MED-3 (d)*	Tilt Table Testing (This includes the ability to obtain the Confirmation of Consent)	10		

Maintenance Criteria for Continued Special Privileges (CAHP-MED-3):

The Practitioner must submit a representative sample of a minimum of ten (10) cases, to include at least two (2) cases for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		CRITICAL CARE MEDICINE CORE PRIVILEGES
			N/A							CAHP-MED-4	Management of care including risk appraisal, interpretation of diagnostic tests, providing treatment for patients with complex needs who are critically ill within the age group of patients seen by the sponsoring physician(s) (inclusive of neurological or postneurosurgical, postsurgical, postcardiac/thoracic surgical care). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place admission, transfer and discharge orders on behalf of the supervising physician; Perform history and physical examinations on new admissions or consultations at the direction of the supervising physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations including rectal and genitourinary examinations as indicated; record progress notes; document discharge and transfer summaries; order and interpret electrocardiograms with second reading by the supervising physician; order and perform initial interpretations of radiographic exam with second reading by the supervising physician and/or radiologist; may order diagnostic testing and therapeutic modalities; including laboratory tests, blood and blood product administration, medications, treatments, ventilator management, IV fluids and electrolytes; perform endotracheal extubation; may remove chest tubes; perform tracheal tube changes, downsizing or decannulation; perform local infiltration of anesthetic solutions; order topical anesthesia; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; perform incision and drainage of superficial abscesses with and without packing; peg tube replacement-mature tract; emergent management of acute cardiopulmonary arrest following Advanced Cardiac Life Support (ACLS) in accordance with current certification; initiate referral to appropriate physician; lumbar puncture.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	SPECIAL PROCEDURES				
										Must apply for and maintain Critical Care Medicine Core Privileges				
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
			N/A							CAHP-MED-4(a)*	Insertion of Chest Tubes	10		
			N/A							CAHP-MED-4(b)*	Insertion of Central Venous Catheters (Subclavian)	10		
			N/A							CAHP-MED-4(c)*	Peripherally Inserted Central Venous Catheters (PICC) Lines	15		
			N/A							CAHP-MED-4(d)*	Insertion of Pulmonary Artery Catheters	10		

SEE MAINTENANCE CRITERIA BELOW

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	SPECIAL PROCEDURES				
										Must apply for and maintain Critical Care Medicine Core Privileges				
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
			N/A							CAHP-MED-4(e)*	Intra-aortic balloon pump removal	5		
										PERSONAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
			N/A							CAHP-MED-4(f)*	Fiberoptic Bronchoscopy in the intubated patient for removal of secretions diagnosis of pneumonia	10		
										**GENERAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
			N/A							CAHP-MED-4(g)*	Emergency/Urgent Endotracheal Intubation	10		
			N/A							CAHP-MED-4(h)*	Thoracentesis	10		
			N/A							CAHP-MED-4(i)*	Paracentesis	10		
			N/A							CAHP-MED-4(k)*	Insertion of Percutaneous Arterial Lines	15		
			N/A							CAHP-MED-4(l)*	Insertion of Central Venous Catheters(Femoral/Internal Jugular)	15		

SEE MAINTENANCE CRITERIA BELOW

Maintenance Criteria for Continued Privileges (CAHP-MED-4) General Supervision Special Procedures:**

The Practitioner must provide documentation of current clinical competence and performance of a minimum number of procedures over a two (2) year period based on results of ongoing professional practice evaluation and outcomes to be eligible to reapply for privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold privileges but who are not able to document the minimal number of cases will be requested to voluntarily withdraw their request for such clinical privileges.

- Insertion of Central Venous Catheters (Femoral/Internal Jugular) 10
- Paracentesis 5
- Percutaneous Arterial Lines (radial femoral) 5
- Thoracentesis 5
- Emergency/Urgent Endotracheal Intubation 10

**maximum of 50% performed in the approved simulation laboratory

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		SPECIALTY OF DERMATOLOGY
										CAHP-MED-5	Provide care, treatment, and services consistent with dermatology practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

NOTE: Dermatology Core Clinical Privileges include initiate/place orders on behalf of the supervising physician; assist in major medical procedures such as Mohs micrographic surgery, if applicable; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; initiate referrals to appropriate physicians or other healthcare professional for problems that exceed the Allied Health Professional's scope of practice; make daily rounds on hospitalized patients with or at the direction of the sponsoring physician; obtain and record medical/social history and perform physical examinations; order diagnostic testing and therapeutic field infiltrations of anesthetic solutions; write discharge summaries and record progress notes.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-5	SPECIAL PROCEDURES			
											PROXIMATE SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-5 (a)*	Cryosurgery	10		
										CAHP-MED-5 (b)*	Electrosurgery/ Electrodessication	10		
										CAHP-MED-5 (c)*	Biopsies and simple and complex excisions	10		
										CAHP-MED-5 (d)*	Perform incision and drainage of superficial abscesses	10		

Maintenance Criteria for Continued Special Dermatology Privileges (CAHP-MED-5):

The Practitioner must submit a minimum of five (5) cases, for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		ENDOCRINOLOGY CORE PRIVILEGES
										CAHP-MED-6	Provide care, treatment, and services consistent with endocrinology practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients. The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations; order diagnostic testing and therapeutic modalities; record progress notes; write discharge summaries.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		SPECIALTY OF GASTROENTEROLOGY
										CAHP-MED-7	Provide care, treatment, and services consistent with gastroenterology practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician; obtain medical histories and perform physical exams, order radiological studies; make daily rounds on hospitalized patients with or at the direction of the supervising physician; order diagnostic testing and therapeutic modalities; peg tube replacement-mature tract; record progress notes; write discharge summaries.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-7	SPECIAL PROCEDURES			
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-7(a)	Paracentesis			

Maintenance Criteria for Continued Special Gastroenterology Privileges (CAHP-MED-7):

The Practitioner must submit a minimum of five (5) cases, for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		HEMATOLOGY/MEDICAL ONCOLOGY CORE PRIVILEGES
										CAHP-MED-8	Provide care, treatment, and services consistent with hematology/oncology practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician or other healthcare professional of problems that exceed the Allied Health Professionals scope of practice; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations; perform field infiltrations of anesthetic solutions; order diagnostic testing and therapeutic modalities; record progress notes; write discharge summaries; lumbar puncture.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-8	SPECIAL PROCEDURES		
										PROXIMATE SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-8(a)*	Bone Marrow Aspiration and Biopsy	10	
										CAHP-MED-8(c)*	Administration of Intrathecal Antineoplastic Agents	5	
										CAHP-MED-8(d)*	Punch Biopsy	10	

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-8	SPECIAL PROCEDURES			
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-8(e)*	Write oral/subcutaneous /Intramuscular/ intravenous/ intraperitoneal antineoplastic agents per protocol prescribed by the attending oncologist	30		

Maintenance Criteria for Continued Special Privileges (CAHP-MED-8):

The Practitioner must submit a representative sample of a minimum of ten (10) cases, to include at least two (2) cases for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

APPLICANT MUST:

1. (a) Show evidence of qualification by completion of a six (6) month formal training program with in the past two (2) years;

OR

(b) Submit documentation of experience of writing at least thirty (30) cases of oral/subcutaneous/intramuscular and/or intravenous/intraperitoneal antineoplastic agents within the past two (2) years.

In reviewing requests for privileges, the Credentials Committee will determine if the course content or experience are judged to be satisfactory for the recommendation of privileges.

- I. Formal Training Program – Please include the location, dates, type of program and the name and address of the practitioner responsible for your training.

- II. Post Graduate Program – Please include course description, copy of course certificate and the name and address of the practitioner responsible for your training.

- III. Prescribing Experience at Other Hospitals: Please provide a list of cases and the name and address of the supervising/collaborating physician.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-8	SPECIAL PROCEDURES			
										GENERAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-8(f)*	Extracorporeal photopheresis (ECP)	5		

Maintenance Criteria for Continued Special Privileges (CAHP-MED-8f):

The Practitioner must submit two (2) cases every two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland	HOSPITALIST CORE PRIVILEGES	
										CAHP-MED-9	Provide care, treatment, and services consistent with hospitalist practice, including performance of History & Physicals, interpretation of labs and diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/placement of orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician; perform History & Physicals; make daily rounds on hospitalized patients with, or at the direction of, the supervising physician; order and interpret diagnostic tests and therapeutic modalities; write progress notes; write discharge summaries.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-9	SPECIAL PROCEDURES			
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-9(a)*	Insertion of Central Venous Catheters	10		

Maintenance Criteria for Continued Special Privileges (CAHP-MED-9):

The Practitioner must submit a representative sample of a minimum of ten (10) cases, to include at least two (2) cases for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		INFECTIOUS DISEASES CORE PRIVILEGES
										CAHP-MED-10	Provide care, treatment, and services consistent with Infectious Disease practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.
<p>The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations; order diagnostic testing and therapeutic modalities; perform field infiltrations of anesthetic solutions; perform incision and drainage of superficial abscesses; record progress notes; write discharge summaries; lumbar puncture.</p>											

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		NEPHROLOGY CORE PRIVILEGES
										CAHP-MED-11	Provide care, treatment, and services consistent with nephrology practice with a focus on care that promotes health, prevents kidney disease, presents and/or manages the complications of acute and chronic disease, and prevents disability for patients within the age group of patients seen by the supervising physician. The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations including rectal and genitor-urinary examinations as indicated; order diagnostic testing and therapeutic modalities; perform field infiltrations of anesthetic solutions; perform incision and drainage of superficial abscesses; record progress notes; write discharge summaries.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-11	SPECIAL PROCEDURES			
											PERSONAL SUPERVISION REQUIRED	Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-11(a)*	Placement of Femoral or Internal Jugular Vascular Catheters	10		
										CAHP-MED-11(b)*	Remove Permacaths	10		

Maintenance Criteria for Continued Special Privileges (CAHP-MED-11):

The Practitioner must submit a representative sample of a minimum of ten (10) cases, to include at least two (2) cases for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		PULMONARY DISEASE CORE PRIVILEGES
										CAHP-MED-12	Provide care, treatment, and services consistent with a Pulmonary practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.
<p>The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations; order diagnostic testing and therapeutic modalities; remove chest tubes; perform field infiltrations of anesthetic solutions; record progress notes; write discharge summaries.</p>											

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		RHEUMATOLOGY CORE PRIVILEGES
										CAHP-MED-13	Provide care, treatment, and services consistent with Rheumatology practice, including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s). The Allied Health Professional may not admit patients to the hospital but may initiate/place orders on behalf of the supervising physician.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; initiate referral to appropriate physician; make daily rounds on hospitalized patients with or at the direction of the supervising physician; obtain and record medical/social history and perform physical examinations; order diagnostic testing and therapeutic modalities; record progress notes; write discharge summaries.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-MED-13	SPECIAL PROCEDURES			
										GENERAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-MED-13(a)*	Joint Injections	10		
										CAHP-MED-13(b)*	Cortisone and Hyaluronic Acid Injections	10		
										CAHP-MED-13(c)*	Trigger Point Injections	10		

Maintenance Criteria for Continued Special Privileges (CAHP-MED-13):

The Practitioner must submit a representative sample of a minimum of ten (10) cases, to include at least two (2) cases for each special privilege held, over the past two (2) years based on acceptable results of ongoing professional practice evaluation and outcomes to reapply for current special privileges. This will be reviewed at the time of reappointment. Practitioners who would like to continue to hold any special privileges but are unable to document the minimal number will be requested to voluntarily withdraw their request for such privileges and to complete the necessary proctoring forms.

_CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		TELEMEDICINE ONLY PRIVILEEGS
										CAHP-MED-T	Provide care, treatment, and services consistent with the practice of the sponsoring physician(s), including the performance of physical exams, diagnosing conditions, the development of treatment plans, health counseling for patients within the age group of patients seen by the sponsoring physician(s).

PRIVILEGES REQUESTED BY:

I attest that I am not currently a user of illegal drugs or do not currently abuse the use of legal drugs.

I attest that I do not have a physical or mental condition which could affect my motor skills or ability to exercise the clinical privileges requested or that I require an accommodation in order to exercise the privileges requested safely and competently.

I attest that the information provided in my initial application or most recent reappointment is accurate and has not changed, specifically the disclosure questions relating to my licensure or registration, clinical privileges, participation in benefit programs, health status, liability, and work history.

Signature of Applicant

Date

Printed or typed name of Applicant

SPONSORING PHYSICIAN:

Signature of Sponsoring Physician

Date

Printed or typed name of Sponsoring Physician

Signature of Sponsoring Physician

Date

Printed or typed name of Sponsoring Physician

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Approved by the CHS Medical Executive Committee: 02/16/2017; 05/18/2017; 08/17/2017; 09/20/2018, 06/18/2020

Approved by the Board of Commissioners: 03/14/2017; 06/13/2017; 09/12/2017; 03/12/2019, 08/11/2020

CASE LOG

Name: _____

Date: _____

	DATE	MEDICAL RECORD NUMBER	PROCEDURE TYPE	Name of procedure (as listed on DOP, e.g. CAHP-MED-1(a))
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