

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 PEDIATRICS DELINEATION OF PRIVILEGES**

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.
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
 SPECIALTIES OF PEDIATRICS**

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.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		GENERAL PEDIATRIC CORE PRIVILEGE
										CAHP-PED-1	Provide care, treatment, and services consistent with pediatric 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). Allied Health Professionals 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; assess, diagnose, and treat childhood illnesses, including chronic and acute conditions, or any other condition that is within the expertise and knowledge of the Allied Health Professional; consult and collaborate with other healthcare providers as necessary; 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; participate in the teaching activities and health counseling to include pregnancy testing; screen and refer for other health problems including suspected sexual abuse and rape; or physical abuse, emotional abuse, mental health issues including eating disorders and school failure, perform STD screen and follow-up; contraception counseling and management; foreign body removal, ear; record progress notes; write discharge summaries; lumbar puncture.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-PED-1	GENERAL PEDIATRIC SPECIAL PROCEDURES				
											<i>Must apply for and maintain General Pediatric Core Privileges</i>				
											PERSONAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-PED-1(a)*	Circumcisions	10			
										CAHP-PED-1(b)*	Extra digit removal	10			

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-PED-1	GENERAL PEDIATRIC SPECIAL PROCEDURES <i>Must apply for and maintain General Pediatric Core Privileges</i>			
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-PED-1(d)*	PICC Lines (excluding internal jugular lines and subclavian placement)	15		

*** REQUIRED PREVIOUS EXPERIENCE REQUIRED FOR ALL SPECIAL PRIVILEGES:**

1. Applicants must present evidence of appropriate training, i.e., patient logs, verification from the training program director; **AND**
2. Documentation of current competence which includes at least the minimum number required as defined by the medical staff. The Applicant must present evidence of performance of the privileges being requested within the past two (2) years; **OR**
2. If the Applicant is unable to demonstrate current clinical competence in any of the procedures being requested they may submit the PERMISSION TO BE PROCTORED REQUEST FORM requesting to be proctored by the Sponsoring Physician who currently holds the privilege.

Maintenance Criteria for Continued Special Privileges:

The Practitioner must submit 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		PEDIATRIC ALLERGY AND IMMUNOLOGY CORE PRIVILEGES			
									N/A	CAHP-PED-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.			

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 PEDIATRIC CARDIOVASCULAR DISEASES
			N/A						N/A	CAHP-PED-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. Allied Health Professionals 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 Pediatric Life Support (PALS) in accordance with certification. Documentation of current certification required.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-PED-3	CARDIOVASCULAR DISEASES SPECIAL PROCEDURES
											<i>Must apply for and maintain Pediatric Cardiovascular Diseases Core Privileges</i>

										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
			N/A						N/A	CAHP-PED-3(a)*	PICC Lines (excluding internal jugular lines and subclavian placement)	15		

*** REQUIRED PREVIOUS EXPERIENCE REQUIRED FOR ALL SPECIAL PRIVILEGES:**

1. Applicants must present evidence of appropriate training, i.e., patient logs, verification from the training program director; **AND**
2. Documentation of current competence which includes at least the minimum number required as defined by the medical staff. The Applicant must present evidence of performance of the privileges being requested within the past two (2) years; **OR**
2. If the Applicant is unable to demonstrate current clinical competence in any of the procedures being requested they may submit the PERMISSION TO BE PROCTORED REQUEST FORM requesting to be proctored by the Sponsoring Physician who currently holds the privilege.

Maintenance Criteria for Continued Special Privileges:

The Practitioner must submit 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	PEDIATRIC CRITICAL CARE CORE PRIVILEGES		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4	Critical Care Medicine Core Privileges - Evaluate, diagnose, interpret data, treat and provide consultation and management of care 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 orders on behalf of the supervising physician; assistance in management of critically ill patients alongside the intensivist; obtain and record medical history and perform physical examination; conduct comprehensive patient chart review for RHICU patients deemed appropriate by the intensivist; develop and implement an initial plan for patients in collaboration with the intensivist; initiate referral to appropriate physician; order and interpret electrocardiograms with immediate second reading by supervising physician; order and perform initial interpretations of simple plain x-ray films with second reading by supervising physician (or radiologist); order diagnostic testing and therapeutic modalities; perform endotracheal extubation; perform invasive/non-invasive ventilation and chest tube management in collaboration with the supervising physician, record progress notes; write discharge summaries; lumbar puncture.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	SPECIAL PROCEDURES				
										<i>Must apply for and maintain Pediatric Critical Care Core Privileges</i>				
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(a)*	Umbilical Vessel Catheterization	10		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(b)*	Insertion of Chest Tubes	10		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(c)*	Atrial and Ventricular Pacing Wire Removal	10		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(d)*	Intracardiac Indwelling Line Removal	10		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(e)*	Peripherally Inserted Central Venous Catheters (PICC) Lines	15		

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	SPECIAL PROCEDURES				
										Must apply for and maintain Pediatric Critical Care Core Privileges				
										PERSONAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(f)*	Emergency/Urgent Endotracheal Intubation	10		
										**GENERAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(h)*	Insertion of Central Venous Catheters (Femoral/Internal Jugular)	15		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-4(i)*	Percutaneous Arterial Lines	15		

Maintenance Criteria for Continued Privileges (CAHP-PED-4(a-f)):

The Practitioner must provide documentation of current clinical competence and performance of a minimum of ten (10) representative samples of the 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 is not able to document the minimal number of ten (10) representative samples will be requested to voluntarily withdraw their request for such clinical privileges.

Maintenance Criteria for Continued Privileges (CAHP-PED-4(q-i)) 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
- Percutaneous Arterial Lines (radial femoral) 5

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

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		SPECIALTY OF PEDIATRIC DERMATOLOGY
										CAHP-PED -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.

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: initiate/place orders on behalf of the supervising physician; assist in major medical procedures such as Mohs micrographic surgery, if applicable; perform wound debridement, suturing and general care for superficial wounds and minor superficial surgical procedures; initiate referrals to appropriate physicians; 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 modalities; field infiltrations of anesthetic solutions; record progress notes and write discharge summaries.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	DERMATOLOGY SPECIAL PROCEDURES <i>Must apply for and maintain Pediatric Dermatology Core Privileges</i>				
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
			N/A							CAHP-PED-5(a)*	Cryosurgery	10		
			N/A							CAHP-PED-5(b)*	Electrosurgery/Electrodesiccation	10		
			N/A							CAHP-PED-5(c)*	Biopsies and simple and complex excisions	10		
			N/A							CAHP-PED-5(d)*	Perform incision and drainage of superficial abscesses	10		

*** REQUIRED PREVIOUS EXPERIENCE REQUIRED FOR ALL SPECIAL PRIVILEGES:**

1. Applicants must present evidence of appropriate training, i.e., patient logs, verification from the training program director; **AND**
2. Documentation of current competence which includes at least the minimum number required as defined by the medical staff. The Applicant must present evidence of performance of the privileges being requested within the past two (2) years; **OR**
2. If the Applicant is unable to demonstrate current clinical competence in any of the procedures being requested they may submit the PERMISSION TO BE PROCTORED REQUEST FORM requesting to be proctored by the Sponsoring Physician who currently holds the privilege.

Maintenance Criteria for Continued Special Privileges:

The Practitioner must submit 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		SPECIALTY OF PEDIATRIC EMERGENCY MEDICINE
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-6	Assess, evaluate, diagnose, and initially treat patients within the age group of patients seen by the supervising physician who present in the Emergency Department with any symptom, illness, injury, or condition, and provide services necessary to ameliorate minor illnesses or injuries. Stabilize patients with major illnesses or injuries and assess all patients to determine if additional care is necessary. Privileges do not include long-term care of patients on an inpatient basis. 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; apply, remove, and manage casts and splints; perform wound debridement and general care for superficial wounds and minor superficial surgical procedures; initiate referral to appropriate physician; obtain and record medical/social history and perform physical examinations including rectal and genitor-urinary examinations as indicated; ocular tonometry; order diagnostic testing and therapeutic modalities; perform incision and drainage of superficial abscesses; perform preliminary interpretations of EKGs with immediate second reading by supervising physician; field infiltrations of anesthetic solutions; record progress notes; reduce joint dislocations; perform removal of superficial foreign body; splint extremity fractures; perform trephination and removal of nail.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	PEDIATRIC EMERGENCY MEDICINE SPECIAL PROCEDURES <i>Must apply for and maintain Pediatric Emergency Medicine Core Privileges</i>				
										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-6(a)*	Perform anoscopy	10		
	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CAHP-PED-6(b)*	Remove central venous catheters	10		

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		PEDIATRIC ENDOCRINOLOGY CORE PRIVILEGES
										CAHP-PED-7	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 PEDIATRIC GASTROENTEROLOGY
										CAHP-PED-8	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; Counsel and instruct patients and significant others as appropriate; obtain medical histories and perform physical exams; order diagnostic testing and therapeutic modalities; peg tube replacement-mature tract; make daily rounds on hospitalized patients with or at the direction of the supervising physician; record progress notes, write discharge summaries.

Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	GASTROENTEROLOGY SPECIAL PROCEDURES				
									<i>Must apply for and maintain Pediatric Gastroenterology Core Privileges</i>				
									PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
		N/A							CAHP-PED-8(a)*	Paracentesis	10		

*** REQUIRED PREVIOUS EXPERIENCE REQUIRED FOR ALL SPECIAL PRIVILEGES:**

1. Applicants must present evidence of appropriate training, i.e., patient logs, verification from the training program director; **AND**
2. Documentation of current competence which includes at least the minimum number required as defined by the medical staff. The Applicant must present evidence of performance of the privileges being requested within the past two (2) years; **OR**
2. If the Applicant is unable to demonstrate current clinical competence in any of the procedures being requested they may submit the PERMISSION TO BE PROCTORED REQUEST FORM requesting to be proctored by the Sponsoring Physician who currently holds the privilege.

Maintenance Criteria for Continued Special Privileges:

The Practitioner must submit 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		PEDIATRIC HEMATOLOGY/MEDICAL ONCOLOGY CORE PRIVILEGES
										CAHP-PED-9	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). Allied Health Professionals 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; direct care as specified by medical staff approved protocols; 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; lumbar puncture.

CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-PED-9	PEDIATRIC HEMATOLOGY/MEDICAL ONCOLOGY SPECIAL PROCEDURES				
											<i>Must apply for and maintain Pediatric Hematology/Medical Oncology Core Privileges</i>				
											PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-PED-9(a)*	Bone Marrow Aspiration and Biopsy	10			
										CAHP-PED-9(c)*	Thoracentesis	10			
										CAHP-PED-9(d)*	Paracentesis	10			
										CAHP-PED-9(e)*	Administration of intrathecal chemotherapeutic agents	10			

Maintenance Criteria for Continued Privileges (CAHP-PED-9(a-e)):

The Practitioner must submit a minimum of five (5) cases, for each 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-PED-9	PEDIATRIC HEMATOLOGY/MEDICAL ONCOLOGY SPECIAL PROCEDURES				
											<i>Must apply for and maintain Pediatric Hematology/Medical Oncology Core Privileges</i>				
											PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
										CAHP-PED-9(f)*	Write oral/subcutaneous/ Intramuscular/ intravenous/ intraperitoneal antineoplastic agents per protocol prescribed by the attending oncologist	30			

Maintenance Criteria for Continued Privileges (CAHP-PED-9(f)):

The Practitioner must submit a minimum of fifteen (15) cases 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	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		TELEMEDICINE PRIVILEGES FOR ALLIED HEALTH PROFESSIONALS
										CAHP-PED-10	<p>Telemedicine privileges are defined as privileges for the use of electronic communication or other communication technologies' to provide or support clinical care at a distance. Telemedicine privileges shall include consulting, prescribing, rendering a diagnosis or otherwise providing clinical treatment to a patient using telemedicine in accordance with all laws, regulations, hospital guidelines and the Bylaws of the Medical and Dental Staff. The Supervising Physician shall remain responsible for all clinical activity of the Allied Health Professional.</p> <p>PLEASE NOTE: Telemedicine activities require prior approval from the Facility Medical Executive Committee.</p>

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		PEDIATRIC INFECTIOUS DISEASES CORE PRIVILEGES
										CAHP-PED-11	<p>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.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		SPECIALTY OF NEONATOLOGY
										CAHP-PED-12	Evaluate, diagnose, treat, and provide consultation to newborns presenting with severe and complex life-threatening problems such as respiratory failure, shock, congenital abnormalities, and sepsis, and provide consultation to mothers with high-risk pregnancies. Assess, stabilize, and determine the disposition of patients with emergent conditions. Allied Health Professionals 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; assist in management of neonates; assess patient in the Emergency Department prior to sponsoring physician's arrival; obtain and record medical history and perform physical examinations; develop and implement an initial plan for patients in collaboration with the neonatologist; perform diagnostic and therapeutic procedures; performing arterial puncture; performing endotracheal intubation; lumbar puncture; performing exchange transfusions; initiating cardiopulmonary resuscitation; inserting and managing central venous catheters; insertion of chest tubes; thoracentesis; inserting and managing percutaneous arterial catheters; inserting and managing percutaneous venous catheters; inserting and managing umbilical artery catheters; inserting and managing umbilical venous catheters; performing laryngoscopy and suction; performing scalp vein infusion; performing suprapubic bladder aspiration; ventilator management for newborns and infants; ventricular access device (not cardiac) aspirations; record progress notes; write discharge summaries.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland	PEDIATRIC NEPHROLOGY CORE PRIVILEGES					
										CAHP-PED-13	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.				
<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 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.</p>															
CMC	Pine.	Univ.	CR	Lin.	CAB	Union	Stanly	Anson	CLE	CAHP-PED-13	PEDIATRIC NEPHROLOGY SPECIAL PROCEDURES				
											<i>Must apply for and maintain Pediatric Nephrology Core Privileges</i>				
										PERSONAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location	
										CAHP-PED-13(a)*	Placement of Femoral or Internal Jugular Vascular Catheters	10			
										CAHP-PED-13(b)*	Remove Permacaths	10			

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland		PEDIATRIC PULMONARY DISEASE CORE PRIVILEGES
										CAHP-PED-14	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		PEDIATRIC RHEUMATOLOGY CORE PRIVILEGES
										CAHP-PED-15	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-PED-15	PEDIATRIC RHEUMATOLOGY SPECIAL PROCEDURES				
											<i>Must apply for and maintain Pediatric Infectious Diseases Core Privileges</i>				
											GENERAL SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
											CAHP-PED-15(a)*	Joint Injections	10		
											CAHP-PED-15(b)*	Cortisone and Hyaluronic Acid Injections	10		
											CAHP-PED-15(c)*	Trigger Point Injections	10		

Maintenance Criteria for Continued Special Privileges:

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		OUTPATIENT ONLY – GENERAL PEDIATRICS CORE PRIVILEGES
	N/A	N/A	N/A							CAHP-PED-16	General Pediatrics – Outpatient Core Privileges

The Allied Health Professional may, in consultation with the supervising physician, perform the following duties: provide care of outpatients in the Department of Pediatrics and the hospital clinics that are on the hospital license, including treatment and services consistent with pediatric practice, including the performance of physical exams, diagnosing conditions, assisting in the development of treatment plans, provide medical services and participate in the teaching activities and health counseling to include pregnancy testing; screen and refer for other health problems including suspected sexual abuse and rape; or physical abuse, emotional abuse, mental health issues including eating disorders and school failure, perform STD screen and follow-up; contraception counseling and management; foreign body removal, ear. Allied Health Professionals may not admit patients to the hospital.

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland	CAHP-PED-16	OUTPATIENT ONLY – GENERAL PEDIATRICS SPECIAL PROCEDURES
											<i>Must apply for and maintain Outpatient Only - General Pediatrics Core Privileges</i>

										PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
	N/A	N/A	N/A							CAHP-PED-16(a)*	Suturing	10		
	N/A	N/A	N/A							CAHP-PED-16(b)*	Digital Blocks	5		
	N/A	N/A	N/A							CAHP-PED-16(c)*	Insertion - Subcutaneous Birth Control Implant	5		
	N/A	N/A	N/A							CAHP-PED-16(d)*	Removal - Subcutaneous Birth Control Implant	5		
	N/A	N/A	N/A							CAHP-PED-16(e)*	Toe Nail Removal	5		
	N/A	N/A	N/A							CAHP-PED-16(f)*	Incision and Drainage of Superficial Abscesses	5		

*** REQUIRED PREVIOUS EXPERIENCE REQUIRED FOR ALL SPECIAL PRIVILEGES (CAHP-PED-16(a-f)):**

1. Applicants must present evidence of appropriate training, i.e., patient logs, verification from the training program director; **AND**
2. Documentation of current competence which includes at least the minimum number required as defined by the medical staff. The Applicant must present evidence of performance of the privileges being requested within the past two (2) years; **OR**
2. If the Applicant is unable to demonstrate current clinical competence in any of the procedures being requested they may submit the **PERMISSION TO BE PROCTORED REQUEST FORM** requesting to be proctored by the Sponsoring Physician who currently holds the privilege.

CMC	Pine.	Univ.	CR	LIN	CAB	Union	Stanly	Anson	CLE	CAHP-PED-16	OUTPATIENT ONLY – GENERAL PEDIATRICS SPECIAL PROCEDURES				
											<i>Must apply for and maintain Outpatient Only - General Pediatrics Core Privileges</i>				
											PROXIMATE SUPERVISION REQUIRED		Minimum Number Required	Number Performed Within The Past 2 Years	Location
	N/A	N/A	N/A								CAHP-PED-16(g)*	Intrauterine Device (IUD) insertion and removal	5		
	N/A	N/A	N/A								CAHP-PED-16(h)*	Long Acting Subdermal Contraception insertion and removal	5		
<p align="center">* REQUIRED PREVIOUS EXPERIENCE REQUIRED FOR ALL SPECIAL PRIVILEGES (CAHP-PED-16(g-h)):</p> <ol style="list-style-type: none"> Applicants must present evidence of appropriate training, i.e., patient logs, verification from the training program director; AND Documentation of current competence which includes at least the minimum number required, to include of two (2) IUD Placements and two (2) IUD Removals services in adolescent patients during the past two (2) years; OR If the Applicant is unable to demonstrate current clinical competence in any of the procedures being requested they may submit the PERMISSION TO BE PROCTORED REQUEST FORM requesting to be proctored by the Sponsoring Physician who currently holds the privilege. 															
<p align="center">Maintenance Criteria for Continued Special Privileges(CAHP-PED-16(g-h)):</p> <p>The Practitioner must submit at least four (4) 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.</p>															

CMC	Pineville	University City	CR	Lincoln	Cabarrus	Union	Stanly	Anson	Cleveland			TERM NEWBORN NURSERY PRIVILEGES
			N/A								CAHP-PED-17	Provide care, treatment, and services consistent with term newborn 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). Allied Health Professionals 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; assess, diagnose, and treat neonatal illnesses, including acute conditions, or any other condition that is within the expertise and knowledge of the Allied Health Professional; direct care as specified by medical staff approved protocols; 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 routine immunizations; perform incision and drainage of superficial abscesses; record progress notes; write discharge summaries.

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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CASE LOG

Name: _____

Date: _____

	DATE	MEDICAL RECORD NUMBER	PROCEDURE TYPE	Name of procedure (as listed on DOP, e.g. CAHP-PED-4(a))
1				
2				
3				
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			TOTAL	