

**ENDOCRINOLOGY
DELINEATION OF PRIVILEGES
SPECIALTY OF INTERNAL MEDICINE AND SPECIALTY OF PEDIATRICS**

I have reviewed the DOP/Roster provided to me by MSS and confirm as indicated below:

My DOP is accurate and reflects privileges relevant to my current practice

I have listed privileges that should be removed: _____

Printed Name: _____

Signature: _____

Date: _____

If your roster indicates that you hold any of the privileges listed below, you must provide the maintenance criteria as described, in order to maintain the privilege. Your maintenance criteria and attestation must be returned together.

Maintenance Criteria for continued privileges in Adult Endocrinology Core Privileges (CEND-1):

1. In order to be eligible for reappointment the Appointee shall demonstrate current clinical competence by providing documentation of ten (10) inpatient or consultative services within the most recent two (2) years; **AND**
2. Submission of a Peer Review Evaluation Form completed by one of the Appointee's peers that refers patients to Appointee,
OR
1. Provide documentation from the Appointee's outpatient practice setting of at least twenty-four (24) cases which include the management of thyroid or parathyroid masses, nodules or over-activity; diabetes management, either type I or II, and Osteoporosis in the most recent two (2) years; **AND**
Submission of a Peer Review Evaluation Form completed by one of the Appointee's peers that refers patients to Appointee.

Maintenance Criteria for continued privileges in Pediatric Endocrinology Core Privileges (CEND-2):

1. In order to be eligible for reappointment the Appointee shall demonstrate current clinical competence by providing documentation of ten (10) inpatient or consultative services within the most recent two (2) years; **AND**
2. Submission of a Peer Review Evaluation Form completed by one of the Appointee's peers that refers patients to Appointee,
OR
1. Provide documentation from the Appointee's outpatient practice setting of at least twenty-four (24) cases which include the management of thyroid masses, nodules or over-activity; diabetes management, either type I or II, and disordered sexual differentiation in the most recent two (2) years; **AND**
Submission of a Peer Review Evaluation Form completed by one of the Appointee's peers that refers patients to Appointee.

STOP:

UNLESS YOU ARE REQUESTING NEW PRIVILEGES, YOU DO NOT NEED TO GO BEYOND THIS POINT. ATRIUM HEALTH

**ENDOCRINOLOGY
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SPECIALTY OF INTERNAL MEDICINE AND SPECIALTY OF PEDIATRICS**

Print Name _____

	YES		NO	I have participated in direct patient care in the hospital setting and/or outpatient practice setting within the past two (2) years.
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If the answer is No, please do not complete this form. Contact the Medical Staff Office at (704) 355-2147 for additional instructions regarding the required proctoring process.

- Initial appointment** **Reappointment** **Updated DOP** **Request for Clinical Privileges**

To be eligible for core privileges in Adult Endocrinology (CEND-1), the applicant must meet the following qualifications:

- If the applicant is not currently subspecialty certified in Endocrinology by the American Board of Internal Medicine (ABIM) or the American Osteopathic Board of Internal Medicine (AOBIM), the applicant must:
 1. Provide documentation of successful completion of an ACGME or an AOA accredited Endocrinology fellowship training program, within the past five (5) years; **AND**
 2. Verification from the fellowship program director that the Applicant successfully completed the program. Experience must include evidence of current clinical competence during the past two (2) years. The Applicant has the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, and other qualifications and for resolving any doubts.

- If the applicant is currently subspecialty certified in Endocrinology by the American Board of Internal Medicine (ABIM) or the American Osteopathic Board of Internal Medicine (AOBIM), the applicant must:
 1. Must be able to demonstrate that he/she has provided inpatient or consultative services for at least twenty-four (24) endocrinology patients during the past two (2) years in an accredited hospital or healthcare facility; **OR**
 1. Provide documentation from the Applicant's outpatient practice setting that he/she has provided outpatient or consultative services for at least twenty-four (24) cases which include the management of thyroid or parathyroid masses, nodules or over-activity; diabetes management, either type I or II, and Osteoporosis in the most recent two (2) years; **AND**
 2. Submission of a Peer Review Evaluation Form completed by one of the Applicant's peers that refers patients to Appointee.

Print Name

- Carolinas HealthCare System Kings Mountain applicants may be eligible for Core Endocrinology privileges by meeting the following qualifications:
1. Must be able to demonstrate that he/she has provided inpatient or consultative services for at least twenty-four (24) endocrinology patients during the past two (2) years in an accredited hospital or healthcare facility; **OR**
 1. Provide documentation from the Applicant's outpatient practice setting that he/she has provided outpatient or consultative services for at least twenty-four (24) cases which include the management of thyroid or parathyroid masses, nodules or over-activity; diabetes management, either type I or II, and Osteoporosis in the most recent two (2) years; **AND**
 2. Submission of a Peer Review Evaluation Form completed by one of the Applicant's peers that refers patients to Appointee.

To be eligible for core privileges in Pediatric Endocrinology (CEND-2), the applicant must meet the following qualifications:

- If the applicant is not currently subspecialty certified in Endocrinology by the American Board of Pediatrics (ABP) or the American Osteopathic Board of Pediatrics (AOBP), the applicant must:
1. Provide documentation of successful completion of an ACGME or an AOA accredited Pediatric Endocrinology fellowship training program, within the past five (5) years; **AND**
 2. Verification from the fellowship program director that the Applicant successfully completed the program. Experience must include evidence of current clinical competence during the past two (2) years. The Applicant has the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, and other qualifications and for resolving any doubts.
- If the applicant is currently subspecialty certified in Pediatric Endocrinology by the American Board of Pediatrics (ABP) or the American Osteopathic Board of Pediatrics (AOBP), the applicant must:
1. Must be able to demonstrate that he/she has provided inpatient or consultative services for at least twenty-four (24) pediatric endocrinology patients during the past two (2) years in an accredited hospital or healthcare facility; **OR**
 2. Provide documentation from the Applicant's outpatient practice setting that he/she has provided outpatient or consultative services for at least twenty-four (24) cases which include the management of thyroid masses, nodules or over-activity; diabetes management, either type I or II, and disordered sexual differentiation in the most recent two (2) years; **AND**
 2. Submission of a Peer Review Evaluation Form completed by one of the Applicant's peers that refers patients to Appointee.

Print Name _____

NOTE 1: Physicians must apply for “CORE” privileges in order to be eligible for clinical privileges in the specialty of Endocrinology at any facility within Atrium Health.

NOTE 2: “CORE” privileges cannot be amended or altered in any way.

NOTE 3: If “general” Internal Medicine or “general” Pediatric privileges are required, please request the appropriate additional Delineation of Privileges Forms.

NOTE 4: 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 for provide appropriate support.

CMC	Pineville	University	CR	Lincoln	NorthEast	Union	Stanly	Anson	Cleveland	Kings Mountain		ADULT ENDOCRINOLOGY CORE PRIVILEGES
			N/A								CEND-1	Privileges to evaluate, diagnose, treat and provide consultation to patients of all ages, except where specifically excluded from practice, with injuries or disorders of the internal (endocrine) glands (e.g., thyroid and adrenal glands), and metabolic and nutritional disorders, diabetes in pregnancy or gestational disorders, obesity, pituitary diseases, and menstrual and sexual problems. The core privileges in this specialty include the procedures listed below and such other procedures that are extensions of the same techniques and skills.

Endocrinology Core privileges include but are not limited to: basic laboratory techniques including interpretation; interpretation of hormone assays; perform and interpret stimulation and suppression tests; perform fine needle aspiration of the thyroid; perform history and physical exam; radiologic measurement of bone density and other tests used in the management of osteoporosis and other metabolic bone diseases; radiologic, and other imaging studies for diagnosis and treatment of endocrine and metabolic diseases; Radionuclide localization of endocrine tissue; ultrasonography of the soft tissues of the neck.

Maintenance Criteria for continued privileges in Adult Endocrinology (CEND-1):

3. In order to be eligible for reappointment the Appointee shall demonstrate current clinical competence by providing documentation of ten (10) inpatient or consultative services within the most recent two (2) years; **AND**
4. Submission of a Peer Review Evaluation Form completed by one of the Appointee’s peers that refers patients to Appointee,
OR
2. Provide documentation from the Appointee’s outpatient practice setting of at least twenty-four (24) cases which include the management of thyroid or parathyroid masses, nodules or over-activity; diabetes management, either type I or II, and Osteoporosis in the most recent two (2) years; **AND**
3. Submission of a Peer Review Evaluation Form completed by one of the Appointee’s peers that refers patients to Appointee.

Print Name _____

CMC	Pineville	University	CR	Lincoln	NorthEast	Union	Stanly	Anson	Cleveland	Kings Mountain		CORE ENDOCRINOLOGY PRIVILEGES – REHABILITATION HOSPITAL SETTING <u>ONLY</u>
N/A	N/A	N/A		N/A	N/A	N/A	N/A	N/A	N/A	N/A	CEND-3	Privileges include evaluation and management, as well as procedures approved for performance within the acute rehabilitation setting, in conjunction with the comprehensive rehabilitation treatment plan.

Print Name _____

CMC	Pineville	University	CR	Lincoln	NorthEast	Union	Stanly	Anson	Cleveland	Kings Mountain		PEDIATRIC ENDOCRINOLOGY CORE PRIVILEGES
			N/A							N/A	CEND-2	Evaluate, provide comprehensive examination, consultation, diagnosis and treatment to infants, children and adolescents with diseases or disorders resulting from an abnormality in the endocrine glands, including but not limited to diabetes mellitus, growth failure, unusual size for age, early or late pubertal development, birth defects, defects of the genital region and disorders of the thyroid, adrenal and pituitary glands. Assess, stabilize and determine the disposition of patients with emergency conditions. The core privileges in this specialty include the procedures listed below and such other procedures that are extensions of the same techniques and skills.

Pediatric Endocrinology Core Privileges include performance of history and physical exam, interpretation of laboratory studies, including the effects of non-endocrine disorders, growth hormone release, interpret of hormone assays, Luteinizing-hormone-releasing hormone and thyrotropin-releasing hormone testing, performance and interpretation of stimulation and suppression tests, provocation testing, preliminary interpretation of radiologic and other imaging studies for diagnosis and treatment of endocrine and metabolic disease.

Maintenance Criteria for continued privileges in Pediatric Endocrinology (CEND-2):

3. In order to be eligible for reappointment the Appointee shall demonstrate current clinical competence by providing documentation of ten (10) inpatient or consultative services within the most recent two (2) years; **AND**
 4. Submission of a Peer Review Evaluation Form completed by one of the Appointee's peers that refers patients to Appointee,
- OR**
2. Provide documentation from the Appointee's outpatient practice setting of at least twenty-four (24) cases which include the management of thyroid masses, nodules or over-activity; diabetes management, either type I or II, and disordered sexual differentiation in the most recent two (2) years; **AND**
 3. Submission of a Peer Review Evaluation Form completed by one of the Appointee's peers that refers patients to Appointee.

PRIVILEGES REQUESTED BY:

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform, and that I wish to exercise at Atrium Health and;

I understand that:

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

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.

Signature

Date

Print Name

Physician's Name: _____

Date: _____

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