Clinical Privileges Profile
Family Medicine

Kettering Medical Center System

☐ Kettering Medical Center  ☐ Sycamore Medical Center

Applicant: Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Clinical Service Chief: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

Other Requirements
1. Note that privileges granted may only be exercised at the site(s) and setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital or department policy.
2. This document is focused on defining qualifications related to competency to exercise clinical privileges.
3. If called for patient care, all members of the Family Medicine Clinical Service must be able to respond within 30 minutes or have an alternate who can respond within 30 minutes.

Qualifications for Family Medicine

To be eligible to apply for core privileges in OUTPATIENT family medicine, the initial applicant must meet the following criteria:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in family medicine or emergency medicine.
- Current certification or active participation in the examination process, with achievement of certification within six years of completion of residency, leading to certification in family medicine by the American Board of Family Medicine or the American Osteopathic Board of Family Physicians or emergency medicine by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine.

Required previous experience: Applicants for initial appointment must be able to demonstrate provision of care, reflective of the scope of privileges requested, for at least 24 inpatients as the attending physician during the past 12 months or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Reappointment requirements: To be eligible to renew core privileges in family medicine, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.
To be eligible to apply for core privileges in INPATIENT family medicine, the initial applicant must meet the following criteria:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in family medicine.
- Current certification or active participation in the examination process, with achievement of certification within six years of completion of residency, leading to certification in family medicine by the American Board of Family Medicine or the American Osteopathic Board of Family Physicians.
- Provision of care, reflective of the scope of privileges requested, for at least 24 inpatients as the attending physician during the past 12 months.
- Current ACLS certification is required for INPATIENT privileges

Reappointment requirements: To be eligible to renew core privileges in family medicine, the applicant must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES

OUTPATIENT FAMILY MEDICINE CORE PRIVILEGES

- Requested OUTPATIENT: Evaluate, diagnose, and treat disorders of the circulatory, dermatologic, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, neurologic, renal, basic psychiatric and genitourinary systems.

Core privileges include:
  - Perform history and physical exams
  - Order diagnostic tests and services
  - Visit establish patients in the inpatient setting and review the medical record, consult with the inpatient attending providers, and observe diagnostic or surgical procedures with the approval of the attending physician or surgeon
  - Minor outpatient procedures reflective of their scope of practice

INPATIENT FAMILY MEDICINE CORE PRIVILEGES

- Requested INPATIENT: Admit, evaluate, diagnose, treat, and provide consultation to patients with common and complex illnesses, diseases, and functional disorders of the circulatory, dermatologic, respiratory, renal, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, neurologic, basic psychiatric and genitourinary systems. Admit, evaluate, and provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the below procedure list and such other procedures that are extensions of the same techniques and skills.

The core INPATIENT privileges include the procedure list below and such other procedures that are extensions of the same techniques and skills. Applicant should strike through privileges not requested and include initials and date.

- Abscess incision and drainage
Clinical Privilege Profile
Family Medicine
Page 3 of 7

- Arterial blood sampling
- Arthrocentesis and joint injection
- Anesthesia limited to local anesthetics and uncomplicated peripheral nerve blocks
- Bladder catheterization
- Blood Component transfusion therapy
- Cardioversion, emergent
- EKG interpretation
- Endotracheal intubation
- Epistaxis management including simple cautery and packing
- External transcutaneous pacing
- Imaging interpretation for plain film radiography
- Laceration repair, simple uncomplicated
- Laryngoscopy, direct or indirect
- Management of uncomplicated closed fractures and dislocations
- Management of basic adult psychiatric care including overdose and withdrawal
- NG/OG tube placement
- Pericardiocentesis, emergent
- Peripheral venous access
- Removal of superficial foreign body from skin, eyes, ears
- Resuscitation
- Skin biopsy and simple excision
- Ventilator Management

SPECIAL NONCORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, noncore privileges are requested individually in addition to requesting the core. Submission of certification of clinical competence by program director/department chair and/or evidence of performance of 5 cases required for each individual requesting noncore privileges.

- Arterial cannulation
- Biopsy
  - Cervical
  - Endometrial
- Cardiac pacemaker, transvenous, temporary
- Central venous catheter placement, including ultrasound guidance
- Diagnostic Lumbar Puncture
- Flexible sigmoidoscopy
- Paracentesis, abdominal
- Pulmonary Function Testing
- Thoracentesis
- Other:

OBSTETRICAL AND GYNOCOLOGICAL PRIVILEGES*

Level I

Privilege Criteria: As for INPATIENT family medicine core

Maintenance of privilege: To be eligible to renew Level I privileges for family medicine in obstetrics and gynecology, the applicant must have demonstrated competence and an adequate volume of experience (24 inpatients) with acceptable results, reflective of the scope of privileges requested, for
the past 24 months based on results of ongoing professional practice evaluation including outcomes for the obstetrical patient. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

- **Requested** Admit, evaluate, diagnose, and non-surgical management of the female patient with common gynecologic and obstetrical problems, for example, abnormal uterine bleeding, infections of the GU tract, benign and malignant neoplasms, sexual assault, menopause and geriatric gynecology, medical diseases during pregnancy, such as hypertension, and ectopic pregnancy. Procedural skills necessary for such care include: gynecological examination, removal of vaginal foreign body, repair of minor vaginal trauma, culdocentesis, cervical biopsy, and polypectomy, IUD insertion and removal.

- **Requested** Privileges for D & C for incomplete abortion and diagnostic D & C will be considered by special request based on documented training and/or experience and demonstrated competence.

**Level II**

**Privilege Criteria:** As for INPATIENT family medicine core

**Required previous experience:** Documentation of the following:

- Completion of the three-year family practice residency included a minimum of three months or greater obstetrical experience and/or have documented experience for and demonstrated competence
- A supporting letter for those privileges from the director of obstetrical training in the applicant's residency or from the chief of the obstetrical clinical service of the hospital where privileges were previously held.
- Demonstrated current competence and evidence of the performance of at least 12 deliveries in the past 12 months

**Maintenance of privilege:** To be eligible to renew Level II privileges for family medicine in obstetrics and gynecology, the applicant must demonstrate the following:

- Competence and an adequate volume of experience (24 inpatients) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes
- Competency and evidence of the performance of at least 24 deliveries in the past 12 months.

- **Requested** Privileges include all Level I privileges as well as care of the obstetrical patient including: evaluation of fetal maturity, feto-placental adequacy, normal cephalic delivery including outlet forceps, exploration of the vagina, cervix and uterus, manual removal of the placenta, episiotomy and repair including fourth degree perineal repair, pudendal and paracervical block anesthesia, fetal monitoring, diagnostic D & C, and D & C for incomplete AB. Selective induction of labor requires consultation.

Family physicians requesting Level II privileges should request and identify one or more obstetrician(s) on Active staff who agree to provide consultation. Family physicians will be monitored according to standards currently established for members of the clinical section of Obstetrics-Gynecology. It will be the responsibility of Family Medicine Clinical Service to evaluate its members according to these standards and alter or rescind privileges accordingly.

__________________________________________________________ Name(s) of identified obstetrician(s) on Active Staff who agree to provide consultation.
Level III

Privilege Criteria: As for INPATIENT family medicine core

Required previous experience: Documentation of the following:
- Completion of the three-year family practice residency included a minimum of six months or greater obstetrical experience and/or have documented experience for and demonstrated competence
- A supporting letter for those privileges from the director of obstetrical training in the applicant's residency or from the chief of the obstetrical clinical service of the hospital where privileges were previously held.
- Demonstrated current competence and evidence of the performance of at least 12 deliveries in the past 12 months

Maintenance of privilege: To be eligible to renew Level III privileges for family medicine in obstetrics and gynecology, the applicant must demonstrate the following:
- Competence and an adequate volume of experience (24 inpatients) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes
- Competency and evidence of the performance of at least 24 deliveries in the past 12 months.

☐ Requested Privileges include Level I and II, and selective induction of labor. Augmentation of labor, pharmacologic inhibition of labor requires consultation. Multiple delivery and breech delivery must be requested and approved individually. Other more specialized privileges may be requested at this level and approved based on documented training, experience and demonstrated competence.

Family physicians requesting Level III privileges should request and identify one or more obstetrician(s) on Active staff who agree to provide consultation. Family physicians will be monitored according to standards currently established for members of the clinical section of Obstetrics-Gynecology. It will be the responsibility of Family Medicine Clinical Service to evaluate its members according to these standards and alter or rescind privileges accordingly.

___________________________________ Name(s) of identified obstetrician(s) on Active Staff who agree to provide consultation.

*Not available at Sycamore Medical Center

CIRCUMCISION*

Criteria: Successful completion of formal training in this procedure or the applicant must have completed hands-on training in this procedure under the supervision of a qualified physician preceptor. Evidence of having performed 2 proctored procedures during training.

Required previous experience: Demonstrated current competence and evidence of the performance of at least 2 procedures in the past 12 months.

Maintenance of privilege: Demonstrated current competence and evidence of the performance of at least 2 procedures in the past 24 months based on results of quality assessment/improvement activities and outcomes.

☐ Requested

*Not available at Sycamore Medical Center
ADMINISTRATION OF SEDATION AND ANALGESIA

☐ Requested  See Hospital Policy for Moderate Sedation.

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and that I wish to exercise at Hospital, 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 situation my actions are governed by the applicable section of the Medical Staff Bylaws or related documents.

Signature: ___________________________ Date: __________

CLINICAL SERVICE CHIEF’S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

☐ Recommend all requested privileges.
☐ Recommend privileges with the following conditions/modifications:
☐ Do not recommend the following requested privileges:

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<th>Condition/Modification/Explanation</th>
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Notes

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Family Medicine Clinical Service Chief’s Signature (Outpatient): ___________________________ Date: __________

Internal Medicine Clinical Service Chief’s Signature (Inpatient): ___________________________ Date: __________

FOR MEDICAL STAFF OFFICE USE ONLY

Credentials Committee action Date: __________
Medical Executive Committee action Date: __________
Board of Directors action Date: __________
Adopted: November 11, 2010
Revised: October 13, 2015
Approved: October 13, 2015 (Credentials); October 20, 2015 (MEC); October 20, 2015 (BOT)