



Family Medicine

Kettering Medical Center Kettering Memorial Hospital/Sycamore Hospital

Clinical Privileges Profile

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 45 minutes or have an alternate who can respond within 45 minutes.

QUALIFICATIONS FOR FAMILY MEDICINE

To be eligible to apply for core privileges in 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.

AND

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.

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:

Demonstrate clinical competence in family medicine. This may include (among several options) passing re-certification exam within the two year period; active clinical teaching status in a family medicine residency or medical school department; review of patient charts (in or out-patient); review of use of consultants, maintenance of current CME requirements.

The applicant must also maintain an active clinical practice (over 30 active patient contacts per month.) This can include precepting family medicine residents and students (both in and out patient).

Evidence of competence and clinical activity may be requested by the department chair or her/his representative.

CORE PRIVILEGES

FAMILY MEDICINE CORE PRIVILEGES

- Requested** Admit, evaluate, diagnose, treat, and provide consultation patients with illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. May 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 attached procedure list and such other procedures that are extensions of the same techniques and skills.

AMBULATORY PRIVILEGES (KMC AMBULATORY SITES)

Criteria: Education and training as for family medicine core.

- Requested** Provide diagnosis and treatment for services for common ambulatory disorders, including minor office procedures, such as repairing simple lacerations, treating warts, simple incision and drainage, cerumen disimpaction, skin biopsy, and small skin lesion removal. **Perform outpatient preadmission and history and physical, order noninvasive outpatient diagnostic tests and services, visit patients in hospital, review medical records, consult with attending physician, and observe diagnostic or surgical procedures with the approval of the attending physician or surgeon.**

REFER AND FOLLOW PRIVILEGES

Criteria: Education and training as for family medicine core privileges.

- Requested** Perform outpatient preadmission and history and physical, order noninvasive outpatient diagnostic tests and services, visit patient in hospital, review medical records, consult with attending physician, and observe diagnostic or surgical procedures with the approval of the attending physician or surgeon.

SPECIAL NONCORE PRIVILEGES (SEE SPECIFIC CRITERIA)

If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and maintenance of clinical competence.

OBSTETRICAL AND GYNOCOLOGICAL PRIVILEGES

Criteria Level I Privileges: As for family medicine core

Maintenance of privilege: To be eligible to renew Level I privileges in Ob/Gyn, the applicant must meet the following maintenance of privilege criteria:

Current 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 and outcomes. 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.

Criteria Level II Privileges: As for family medicine core plus:

Required previous experience: Documentation that completion of the three-year family practice residency included a minimum of three month obstetrical experience and/or have documented experience for and demonstrated competence. Application for Level II privileges must include 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.

Maintenance of privilege: To be eligible to renew Level II privileges in Ob/Gyn, the applicant must meet the following maintenance of privilege criteria:

Current 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 and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

- Requested** Privileges include all Level I privileges. In addition, 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.

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

Criteria Level III Privileges: As for family medicine core plus:

Required previous experience: Documentation that 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. Application for Level II privileges must include 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.

Maintenance of privilege: To be eligible to renew Level III privileges in Ob/Gyn, the applicant must meet the following maintenance of privilege criteria:

Current 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 and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

- 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.

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

Family physicians requesting Level II or 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.

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

Maintenance of privilege: Demonstrated current competence and evidence of the performance of at least 24] deliveries in the past 24 months based on ongoing professional practice evaluation and outcomes.

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**

ADMINISTRATION OF SEDATION AND ANALGESIA

- Requested** See Hospital Policy for Moderate Sedation.

CORE PRIVILEGES

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures that you do not wish to request, initial, and date.

General

1. Arthrocentesis and joint injection
2. Attendance at delivery to assume care of normal newborns
3. Burns, superficial and partial thickness
4. I & D abscess
5. Local anesthetic techniques
6. Manage uncomplicated minor closed fractures and uncomplicated dislocations
7. Perform history and physical exam
8. Perform simple skin biopsy or excision
9. Peripheral nerve blocks
10. Placement of anterior and posterior nasal hemostatic packing
11. Remove nonpenetrating foreign body from the eye, nose, or ear
12. Suture uncomplicated lacerations

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:

Privilege	Condition/Modification/Explanation
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Notes

Clinical Service Chief's Signature: _____ **Date:** _____

FOR MEDICAL STAFF OFFICE USE ONLY

Credentials Committee action

Date: _____

Medical Executive Committee action

Date: _____

Board of Directors action

Date: _____

Approved:	Credentials Committee	7/13/2009
	Medical Executive Com.	7/21/2009
	Board of Directors	8/6/2009