

Methodist LeBonheur Healthcare
Pulmonary Medicine Clinical Privileges

Name:

To be eligible to apply for core privileges in Pulmonary Medicine, the applicant must meet the following qualifications:

- Current board certification in Pulmonary Medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine.*

Or

- Successful completion of an ACGME- or AOA-accredited post-graduate training program in Internal Medicine followed by post-graduate training in Pulmonary Disease and planned board certification within 5 years of program completion.

Applicants will be requested to provide documentation of practice and current clinical competence as defined on the attached competency grid. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current clinical competence, and other qualifications and for resolving any doubts.

To be eligible to apply for core privileges in Pediatric Pulmonary Medicine, an applicant must meet the following qualifications:

- Current board certification in Pediatrics by the American Board of Pediatrics or the American Osteopathic Board of Pediatrics and ACGME- or AOA-accredited post-graduate training in Pediatric Pulmonology. *

Or

- Successful completion of an ACGME- or AOA-accredited post-graduate training program in Pediatrics followed by post-graduate training in Pediatric Pulmonology with board certification within 5 years of program completion.

Applicants will be requested to provide documentation of practice and current clinical competence as defined on the attached competency grid. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current clinical competence, and other qualifications and for resolving any doubts.

Pulmonary Medicine Core Privileges

Admit, evaluate, diagnose, treat and provide consultation to patients >13 years of age, except as specifically excluded from practice, presenting with conditions, disorders, and diseases of the organs of the thorax or chest; the lungs and airways, cardiovascular and tracheobronchial systems, esophagus and other mediastinal contents, diaphragm, circulatory system.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Privileges include but are not limited to:

- Interpretation of pulmonary functions testing
- Bronchoscopy
- Thoracentesis
- Chest tube placement
- Endotracheal intubation and management of mechanical ventilation
- Pleural biopsy
- Percutaneous lung biopsy
- Transbronchial lung biopsy and lymph node aspiration
- Insertion and management of central venous and pulmonary artery catheters
- Emergency cardioversion
- Thorocostomy Tube Insertion and drainage

Internal Medicine Core Privileges

Admit, evaluate, diagnose, treat and provide consultation to patients above the age of 12 admitted with both common and complex illnesses of the eyes, ears, skin, nervous system and reproductive organs.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Inherent in core privileges are the following areas/procedures:

- Arthrocentesis
- Lumbar puncture
- Thoracentesis
- Exercise testing
- EKG interpretation

Pulmonary Medicine Pediatric Core Privileges*

Admit, evaluate, diagnose, treat and provide consultation to patients from birth to age 13 with acute and chronic disease including major complicated illnesses.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Privileges include but are not limited to:

- provocation testing,
- pulmonary function testing and interpretation
- infant pulmonary function testing and interpretation
- insertion and management of arterial and central venous lines

- endotracheal intubation and airway management
- ventilator management
- bronchoscopy
- thoracentesis
- interpretation of pulmonary function tests
- techniques of chest physiotherapy
- pulmonary rehabilitation.

Pediatric Core Privileges

Admit, evaluate, diagnose and treat patients ages 0-18 for common illnesses and injuries including disorders common to general pediatric diseases and conditions.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Privileges include but are not limited to:

- Bone marrow aspiration
- Burns, superficial and partial thickness
- I&D of superficial abscess
- Local anesthetic techniques
- Lumbar puncture
- Management uncomplicated minor closed fractures and dislocations
- Perform simple skin biopsy or excision
- Peripheral arterial puncture
- Digital peripheral nerve blocks
- Placement of anterior and posterior nasal hemostatic packing
- Pre-operative and postoperative medical care for surgical patients
- Removal of foreign body by speculum, forceps, or superficial incision
- Removal of non-penetrating corneal foreign body
- Suprapubic bladder aspiration
- Suture uncomplicated lacerations
- Venipuncture

Special procedures/techniques (see Qualifications and/or specific criteria*)

The physician requesting special privileges must meet the minimum criteria for the specialty core and demonstrate the appropriate post graduate training and/or demonstrate successful completion of an approved, recognized course when such exists, or other acceptable experience.

The applicant must provide documentation of current clinical competence in performing the procedure consistent with the criteria set forth in medical staff policies governing the exercise of specific privileges and the appended competency grid. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current clinical competence, and other qualifications and for resolving any doubts.

Polysomnography (sleep disorders) testing

[Requires: Subspecialty certification by the American Board of Sleep Medicine, or successful completion of a one year Postgraduate Residency in Sleep Medicine, or successful completion of an approved fellowship by the American Sleep Disorders Association; and demonstrated competence in all aspects of polysomnographics, including administering, scoring, and interpreting polysomnograms.]

Temporary pacemaker placement in emergencies

[Requires: written documentation of successful completion of an accredited 18-24 month fellowship in Pulmonary Medicine and Critical Care Medicine that includes formal training and clinical expertise in performing temporary pacemaker insertion in emergency situations.]

Laser use for Intratracheal Lesions

[Requires: successful completion of an accredited course in lasers for intratracheal lesions, which includes didactic and laboratory training. A certificate/letter indicating education and training on a specific laser has been completed must be on file in Medical Staff Services]

Arteriovenous hemofiltration and dialysis

[Requires: successful completion of an arteriovenous hemofiltration and dialysis, which includes didactic and laboratory training.]

Endobronchial brachytherapy

[Requires: successful completion of an accredited course in endotracheal brachytherapy, which includes didactic and laboratory training.]

Endobronchial and Endotracheal stent placement

[Requires: successful completion of an accredited course in endotracheal and endobroncheal stent placement, which includes didactic and laboratory training.]

Administration of moderate sedation

See Credentialing Policy for Sedation and Analgesia by Non-Anesthesiologists

[Requires: PALS or ACLS certification].

Pulmonary Medicine Clinical Privileges

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Please check (✓) applicable age categories for each privilege requested.

Privilege Description	Neonates (0-28 days)	Infants (29 days– 2 years)	Children (2-12 years)	Adolescents (13-18 years)	Adults (>18 Years)
Pulmonary Medicine Core					
Pulmonary Medicine Pediatric Core					
Internal Medicine Core					
Pediatric Core					
Special Privileges					
Polysomnography					
Emergency temporary pacemaker insertion					
Laser Use for Intratracheal Lesions					
Arteriovenous Hemofiltration and Dialysis					
Endobronchial Brachytherapy					
Endobronchial and Endotracheal Stent placement					

**If requesting privileges to treat patients under the age of 13, please provide age-specific documentation.*

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 for which I wish to exercise at Methodist Le Bonheur Healthcare, to the extent services are available at each facility, 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

Signed: _____

Date: _____

Case Log Requirements

In addition to the required education, experience and/or training specified on each (DOP) (Delineation of Privilege) form, documentation of current clinical competence is required. TJC (The Joint Commission) describes “current clinical competence” as having performed the privilege recently and performed it well.

This should not be confused with either FPPE (Focused Professional Practice Evaluation) or OPPE (Ongoing Professional Practice Evaluation).

- FPPE: an evaluation of clinical competence of all new privileges (as performed at Methodist Le Bonheur Healthcare) after they have been initially granted. This applies to all new applicants as well as to current members applying for new/additional privileges.
- OPPE: “periodic” (more frequent than annually) evaluation of professional practice.

Both FPPE and the current clinical competence assessment are privilege-specific. FPPE is conducted during the period after granting new privileges. Current clinical competence is assessed prior to granting privileges initially and reassessed when renewing privileges at reappointment.

Current Clinical Competence: Requirements for New Applicants

- If applying directly from training, or based on the training received in a formal training program, submit case* logs from the program authenticated by the program director along with their recommendation attesting to the comparable training, experience and qualifications relative to the criteria for the clinical privileges requested.
- If applying after training completion, submit the following:
 - Case* logs from primary practice facility for a consecutive two month time period within the previous 12 months in accordance with the standards listed below.
 - procedure list identifying the top 10 CPT/ICD9 codes for the provider’s practice during the previous 12 months. Any complications/poor outcomes should be delineated and accompanied by an explanation.

All required case* logs and/or procedure lists must contain the following information at a minimum: Date, patient identifier, CPT/ICD9 procedure code, diagnosis, complications, and disposition, and the facility name, name of the person authenticating the log, signature, date signed, and contact information. If the information requested is not available, please provide an explanation.

*A “case” is an episode of care – either cognitive or procedural. For interpretive care, “case” is interpretation of one diagnostic study.

Current Clinical Competence: Maintenance of Privileges for Current Members

Current clinical competence must be verified to maintain special privileges. For highly procedural specialties, current clinical competence should be verified to maintain core privileges as well. Please see the guidelines for maintenance requirements in the following grid.

Privilege	Initial Application Case Logs	Maintenance (Reappointment) Case Logs
Pulmonary Core	Case* logs from current primary practice facility for a consecutive two month time period within the previous 12 months Procedure list identifying the top 10 CPT/ICD9 codes for your practice within the previous 12 months and the number of procedures performed and identify the facility(ies) at which procedures were performed	OPPE & Case* logs documenting procedures for a consecutive two month time period within the previous 12 months
Pulmonary Pediatric Core	Case* logs from current primary practice facility for a consecutive two month time period within the previous 12 months Procedure list identifying the top 10 CPT/ICD9 codes for your practice within the previous 12 months and the number of procedures performed and identify the facility(ies) at which procedures were performed	OPPE & Case* logs documenting procedures for a consecutive two month time period within the previous 12 months
<i>Polysomnography</i>	Case* log documenting the performance of at least 20 procedures within the previous 12 months	Case* log documenting the performance of at least 40 procedures within the previous 24 months
<i>Temporary pacemaker</i>	Case* log documenting the performance of at least 10 procedures within the previous 12 months	Case* log documenting the performance of at least 10 procedures within the previous 24 months
<i>Laser Use of Intratracheal Lesions</i>	Case* log documenting the performance of at least 5 procedures within the previous 12 months	Case* log documenting the performance of at least 10 procedures within the previous 24 months
<i>Arteriovenous hemofiltration and dialysis</i>	Case* log documenting the performance of at least 10 procedures within the previous 12 months	Case* log documenting the performance of at least 20 procedures within the previous 24 months
<i>Endobronchial brachytherapy</i>	Case* log documenting the performance of at least 10 procedures within the previous 24 months	Case* log documenting the performance of at least 5 procedures within the previous 24 months
<i>Endobronchial and Endotracheal stent placement</i>	Case* log documenting the performance of at least 10 procedures within the previous 24 months	Case* log documenting the performance of at least 10 procedures within the previous 24 months