

WOUND CARE

Delineation of Clinical Privileges

Criteria for granting privileges:

Maintain clinical privileges in a primary specialty

And

Provide documentation of satisfactory attendance at a 16 hour CME credit course in Wound Care

And

Provide six Focused Professional Practice Evaluation Forms for procedures

Or

Maintain clinical privileges in a primary specialty of General Surgery, Plastic Surgery or Vascular Surgery

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.

Current Clinical Competence - MLH

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. Current clinical competence is described as having “performed the privilege recently and performed it well”.

Current clinical competence is assessed prior to granting privileges initially and is reassessed when renewing privileges at reappointment – for maintenance of privileges. Current Clinical Competence (CCC) may be location specific (acute hospital care/surgery center (ASC) and/or age specific (adult, pediatric, neonatal).

This should not be confused with Focused Professional Practice Evaluation (FPPE)

- FPPE: an evaluation of clinical competence of all new privileges as performed at the specific licensed MLH facility (MHMH, MHOBH) for which they have been initially granted. This applies to privileges for all new applicants as well as to new/additional privileges for current members.

Both FPPE and current clinical competence assessments are privilege-specific. FPPE is conducted during the period after granting new/additional privileges. FPPE must occur at the MLH facility(ies) where privileges/membership are held. Current clinical competence may be evaluated from case logs provided by non-MLH facilities.

Current Clinical Competence: Requirements for New Applicants

- If applying directly from training, or based on the training received in a formal training program, provider should 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 more than 1 year after training completion, submit the following:
 - Aggregate data from acute care or surgery center facility for the previous 12 month time period, identifying the top 10 diagnosis codes and the number of patients per code. Any complications/poor outcomes should be delineated and accompanied by an explanation.

- Procedure list from acute care or surgery center facility for the previous 12 month time period, identifying the top 10 CPT/ICD codes and the number of procedures per code. Any complications/poor outcomes should be delineated and accompanied by an explanation.
- Case logs (see specifications below) for any special privileges requested that meet the criteria specific for the number of procedures defined for current clinical competence.

Current Clinical Competence: Maintenance of Privileges for Current Members

- **For active staff members:** MLH source data will be aggregated to review cases and procedures performed. If this does not meet the minimum requirement for core and/or special privileges, the practitioner will be required to submit additional case logs from other facilities.
- **For courtesy staff members with low activity and for certain active staff with activity that has diminished and is now low:** Department chair recommendation should be obtained from their primary facility; and the practitioner should submit the following:
 - Aggregate data from acute care or surgery center facility for the previous 12 month time period, identifying the top 10 diagnosis codes and the number of patients per code. Any complications/poor outcomes should be delineated and accompanied by an explanation.
 - Procedure list from acute care or surgery center facility for the previous 12 month time period, identifying the top 10 CPT/ICD codes and the number of procedures per code. Any complications/poor outcomes should be delineated and accompanied by an explanation.
 - Case logs (see specifications below) for any special privileges requested that meet the specific number of procedures defined for current clinical competence.

Case Logs

All required case logs and/or procedure lists must contain the following information at a minimum: Date, patient identifier, CPT/ICD procedure code, diagnosis, complications, and disposition, and the facility name, name/title 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 defined as an episode of care – either cognitive or procedural. For interpretive care, “case” is interpretation of one diagnostic study.

Ongoing Professional Performance Evaluation (OPPE)

OPPE is evaluated periodically (more frequently than annually) in the facility where membership/privileges are held.

To assure OPPE requirements are satisfied, the practitioner must periodically exercise the privileges in the MLH facility(ies) where he/she has membership. OPPE must occur regularly on patient encounters in the MLH facility(ies) where privileges/membership are held.

Specialty/Procedure Delineation of Privilege Form	Education/Training Documentation for Initial Granting	Initial Application (Proof of current clinical competence)	FPPE – Validation of competence after appointment and/or granting of a new or additional privilege (To be completed within one year)	Maintenance Requirements
Wound Care Core	Maintain clinical privileges in a primary specialty And Provide documentation of satisfactory attendance at a 16 hour CME credit course in Wound Care Or Maintain clinical privileges in a primary specialty of General Surgery, Plastic Surgery or Vascular Surgery	Proctor evaluations for six successful cases	Proctor evaluations for six successful cases or surgical specialty privileges	Department chair recommendation will be obtained from primary practice facility. Data obtained from MHMH sources documenting 6 procedures within the previous 24 months. If the numbers obtained do not meet the minimum requirements, the practitioner will be required to submit additional case logs from other facilities. 6 hours CME credits from the previous two years applicable to privileges in wound care.
<i>Debridement-Subcutaneous & Muscle</i>		Case log documenting 6 procedures within the previous 24 months	Proctor evaluations for six successful cases or surgical specialty privileges	Case log documenting 6 procedures within the previous 24 months
<i>Debridement-Subcutaneous & Muscle/Bone</i>		Case log documenting 6 procedures within the previous 24 months	Proctor evaluations for six successful cases or surgical specialty privileges	Case log documenting 6 procedures within the previous 24 months
<i>I & D, Abscess, Complex</i>		Case log documenting 6 procedures within the previous 24 months	Proctor evaluations for six successful cases or surgical specialty privileges	Case log documenting 6 procedures within the previous 24 months
<i>Cauterization</i>		Case log documenting 6 procedures within the previous 24 months	Proctor evaluations for six successful cases or surgical specialty privileges	Case log documenting 6 procedures within the previous 24 months
<i>Biopsy, Bone</i>		Case log documenting 6 procedures within the previous 24 months	Proctor evaluations for six successful cases or surgical specialty privileges	Case log documenting 6 procedures within the previous 24 months
<i>Preparation & application of skin substitutes (bilaminate & dermal)</i>		Case log documenting 6 procedures within the previous 24 months	Proctor evaluations for six successful cases or surgical specialty privileges	Case log documenting 6 procedures within the previous 24 months

Wound Care Core Privileges:

Debridements:

Skin - Partial Thickness

Skin - Full Thickness

Skin and Subcutaneous Tissue

Other Procedures

I & D, Abscess, simple

Biopsy Skin

TcpO₂ interpretation - Multi Level

Doppler Study – Interpretation

Vacuum Assisted Closure Application

Special privileges for Wound Care to be determined by demonstration of competencies through provision of case logs or focused professional practice evaluations, or approved ongoing core privileges with MHMH surgical or surgical specialty department as appropriate.

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.

Administration of moderate sedation: See Credentialing Policy for Sedation and Analgesia by Non-Anesthesiologists.
Requires: Separate DOP, ACLS, NRP or PALS certification

Wound Care Clinical Privileges

Check below the particular privileges desired in Wound Care for each facility:

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

Privilege Description	Methodist Healthcare – Memphis Hospitals (MHMH) Germantown, Le Bonheur Medical Center, North, South & University, Outpatient Clinics & Diagnostic Facilities			
	Neonates (0-28 days)	Infants (29 days– 2 Years)	Children & Adolescents (2-18 years)	Adults & Adolescents (13-& Above)
Wound Care Core				
Special Privileges				
Debridements – subcutaneous muscle				
Debridements – subcutaneous muscle/bone				
I & D, Abscess, Complex				
Cauterization				
Biopsy, Bone				
Preparation and application of skin substitutes (bilaminate & dermal)				
Limitations	Clinical privileges are granted only to the extent privileges are available at each facility.			
Darkly shaded areas represent privileges not available to any practitioner due to the privilege not being offered by the facility.				

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 the facilities indicated above, to the extent services are available at each facility, and I understand that:

(a) in exercising any clinical privileges granted, I am constrained by facility 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

Physician's Signature

Date

Printed Name