

Emergency Medicine

Name: _____

MEDICAL STAFF CATEGORY REQUESTED:

- Active* – Active staff members shall provide service to a minimum of 48 patients in their two year appointment period; shall participate in the quality/performance management activities; and shall also provide on-call coverage for medical emergencies.
- Courtesy* - Courtesy staff members shall provide service to a minimum of 6 patients in their two year appointment period; shall be members of the active or associate staff of another hospital in which their regular participation in quality/performance management activities is documented and their performance is evaluated.
- Consulting* – Consulting staff does not have a minimum patient requirement; shall consist of members who meet the general qualifications set forth in the Bylaws; will provide limited services; and are required to practice with another fully privileged member of the medical staff.

Qualifications:

To be eligible for privileges in emergency medicine, the applicant must meet the following qualifications:

- Current certification or active participation in the examination process leading to certification by the ABMS or AOA in Emergency Medicine, Family Practice or Internal Medicine, Medicine/Pediatrics; or
- Successful completion of an ACGME or AOA accredited postgraduate training program in Emergency Medicine; Family Practice or Internal Medicine/Pediatrics.

Emergency Medicine Privileges (Please indicate with a check mark the privileges requested)

- Assess, evaluate, diagnose, and provide initial treatment to patients of all age groups who present in the emergency department with any symptom, illness, injury, or condition;
- Provide services necessary to ameliorate minor illnesses or injuries and stabilize patients with major illnesses or injuries;
- Assess all patients to determine whether additional care is necessary.
- Minimal sedation (anxiolysis).
- Emergency Medicine Privileges do not include long-term care of patients on an inpatient bases, or admitting or performing scheduled elective procedures, with the exception of procedures performed during routine emergency room follow-up visits.

Special procedures privileges: (Please indicate with a check mark)

To be eligible to apply for a special procedure privilege listed below, the applicant must satisfy criteria as listed:

Privilege/Procedure	Criteria	Requested	Recommended	Not Recommended
Moderate Sedation**	ACLS			

**Moderate sedation/analgesia (“conscious sedation”) is a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained.

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 Harris Methodist Southlake, 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.

Signed: _____

Date: _____

Credentials Committee Recommendations: ____ Recommend ____ Deny

I have reviewed the requested clinical privileges and supportive documentation for the above named applicant and recommend action on the privileges as noted above.

Signed: _____

Date: _____

Recommended/Not recommended with the following modification(s) and reason(s):
