

	Policy Area: Medical Staff Services
Name of Policy: Privileges, Admitting and Temporary (Medical Staff)	Replaces Policy Dated: June 17, 2015
Pages: 3	Effective Date: February 21, 2018

I. PURPOSE

- A. To identify those practitioners whose privileges make them eligible to admit and/or treat patients.
- B. To orient hospital personnel to have the ability to determine if the practitioner has privileges to admit and/or treat patients.
- C. To provide guidelines to hospital personnel on the procedure for obtaining temporary privileges for a practitioner who is not on staff, and requests the privilege to admit and/or treat a patient in the hospital.
- D. To identify classes of privileges and proctoring requirements.

II. POLICY

This policy applies to all practicing medical staff members at Texas Health Harris Methodist Hospital Southlake.

III. PROCEDURE

- A. Practitioners who wish to admit and/or treat patients in this hospital shall have been formally granted the privilege to do so, in accordance with the Bylaws of the Medical Staff of Harris Hospital Southlake.
- B. Members of the Courtesy or Active Medical Staff or practitioners, who have been granted temporary privileges in accordance with the Medical Staff Bylaws, may admit or provide medical or health-related services to patients in the hospital if granted these privileges.

Members of the Consulting Staff do not hold admitting privileges. Allied Health Professional Staff do not have privileges to admit. Psychologists, however, may perform consultations.

- C. To identify members of the Medical Staff:
The Medical Staff Roster is a resource available to identify members of the Medical Staff. The Roster contains an alpha listing of all members of the Medical Staff, including the office address, telephone number, specialty, staff status and class of privileges. A current copy of the Medical Staff Roster is distributed to all hospital departments and nursing units on a quarterly basis by the Medical Staff Services Office. Changes in the roster are communicated via e-mail from the Medical Staff Office.
- D. To identify practitioners who have been granted Temporary Privileges:
Each time a practitioner is issued temporary privileges, a copy of the temporary privilege form with the approved clinical privileges is distributed to appropriate

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hospital departments and nursing units, if applicable. Each temporary privilege form specifies the purpose for which the temporary privileges were granted. This is done only once. Temporary privileges have an effective date and they are issued for a specific period of time. If temporary privileges are renewed, the renewal shall be communicated to the appropriate hospital departments and nursing units, if applicable.

- E. To obtain emergency Temporary Privileges for a specific patient care need for a practitioner after hours and on weekends (when Medical Staff Services staff are unavailable):
1. In order to provide for proper patient care at night and on weekends, temporary privileges may be extended for the treatment of a patient when the delay in administering such treatment creates or adds to the danger of serious or permanent harm to the patient. The Hospital President (or designee) shall be contacted whenever temporary privileges are desired after hours or on weekends.
 - a. A written request from the practitioner shall be received. The request shall include documentation of the reason temporary privileges are requested.
 - b. An attempt shall be made to obtain the following information from the physician requesting temporary privileges:
 - (1) Current Texas Medical License
 - (2) Current professional liability insurance showing minimum limits of \$200,000/\$600,000 aggregate.
 - (3) Current DEA Certificate
 - c. The following chain of command shall be followed in order to grant temporary privileges:
 - (1) Credentials Review Committee Chairman, or
 - (2) Chief of the Medical Staff (or Vice-Chief of Staff if Chief is unavailable) and
 - (3) Hospital President or designee
 - (4) A completed Temporary Privilege form shall be forwarded to the Medical Staff Office the next normal business day.
 2. The temporary privileges granted under this policy shall last only so long as the emergency situation exists. If the practitioner shall thereafter desire to continue treatment of the patient; the practitioner shall make a request for privileges pursuant to the provisions of the Medical Staff Bylaws.
- F. Confirmation of granted privileges
1. Members of the Courtesy or Active Staff, or practitioners who have been granted temporary privileges shall have an approved privilege delineation sheet detailing the special procedures that he or she may perform. These privilege sheets are distributed to appropriate hospital departments for use in confirming that the privilege for the procedure to be performed has been granted by the Medical Staff.

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If a discrepancy is identified between a Medical Staff member's privilege delineation sheet and the procedure the physician is requesting to perform, the Medical Staff Services office shall be contacted.

2. Medical Staff Services shall seek clarification from the medical staff member as necessary, and shall report back to the clinical area.
3. If a discrepancy is identified after hours, the Hospital President (or designee) shall be contacted.