

### Department of Medicine - Hospice and Palliative Medicine 2020 Privileges Request Form

I am requesting the specific privileges marked below. I understand that I may request additional privileges, or privileges in another Clinical Department, at any time. I also understand that the granting of these privileges is subject to verification of proficiency by the Chair of the Department, the Credentials Committee of the Medical Staff, and/or any other person or body appropriately designated under the Bylaws, Rules and Regulations of the Medical Staff.

I understand that in an emergency (any situation in which any delay in administering treatment would result in serious harm to the patient or an immediate threat to the life of the patient), I am authorized to treat any medical disease and/or perform any medical or surgical procedure indicated that is within the scope of my license.

Basic education: MD or DO

Minimal formal training: Successful completion of an ACGME- or AOA-accredited residency in a primary medical specialty and a 12-month ACGME affiliated fellowship in HPM or the equivalent in practice experience and/or current certification or active participation in the examination process (with achievement of certification in accordance with UCSF Medical Staff Bylaws) leading to certification in HPM by the ABMS or the AOA, or current certification in HPM by the ABHPM, or foreign training and board equivalency

#### **ADMITTING SERVICES**

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	GM Medicine	N/A		N/A

## **CATEGORY 1 Core Privileges in Hospice and Palliative Medicine (DPM)**

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Core Privileges in Hospice and Palliative Medicine (DPM)  Core privileges for HPM include the ability to admit, evaluate, diagnose, and provide primary care or consultative services to all patients with life-threatening illness who require, or may require, specialist-level palliative care services. Core privileges may include the ability to provide care to patients in the intensive care setting in conformance with unit policies. Candidates must assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges include the procedures listed on the attached privileges list and such other procedures that are extensions of the same techniques and skills.	Required current experience: Palliative medicine services for at least 50 patients during the past 36	Reappointment should be based on unbiased, objective results of care according to a hospital's quality assurance mechanism.	procedure must be submitted to complete
	This is not intended to be an all-encompassing procedures list. It defines the types of activities/procedures/ privileges that the majority of practitioners in this specialty perform at this organization and inherent activities /procedures/privileges requiring similar skill sets and techniques.  □ Performance of history and physical exam  □ Assessment of pertinent diagnostic studies	months (with at least 16 in the past 12 months), reflective of the scope of privileges requested, or successful completion of an accredited HPM	To be eligible to renew privileges in palliative medicine, the applicant must display current demonstrated competence and an adequate volume of experience (32 terminally ill or severely/chronically	proctoring

Direct treatment and formation of a treatment plan that includes patient's wishes and goals of care    Management of palliative care emergencies (e.g., spinal cord compression and suicidal ideation)    Management of psychological, social, and spiritual issues of palliative care patients and their families    Management of symptoms, including various pharmacologic and non-pharmacologic modalities and pharmacodynamics of commonly used agents    Provision of appropriate advanced symptom control techniques, such as parenteral infusional techniques	fellowship program within the past 12 months.	ill patients) 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 physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.  In addition, continuing education related to HPM should be required.	
B - Special Noncore Privileges in Hospice and Palliative Medicine (DPM)  B1 - Palliative Sedation (limited to Adult Palliative Care Attending)	Completion of palliative care fellowship, review of DPM and hospital policies, approval of the Division of Palliative Medicine Associate Division Chief for Inpatient Palliative Care	demonstrate knowledge of the details of the procedure, review	(The supervision of a physician with full Hospice and Palliative Medicine privileges is required when performing the procedure for the first time in this institution)
B2 - Intravenous Ketamine Infusion	Completion of palliative care fellowship,	Report at least one case performed OR demonstrate	(The supervision of a physician with full

	review of DPM and hospital policies, approval of the Division of Palliative Medicine Associate Division Chief for Inpatient Palliative Care	knowledge of the details of the procedure, review of Division of Palliative Medicine and hospital policies, approval from Division of Palliative Medicine Associate Division Chief for Inpatient Palliative Care.	Hospice and Palliative Medicine privileges is required when performing the procedure for the first time in this institution)
B3 - Performance of pain-relieving procedures	Completion of relevant training program, review of DPM and hospital or clinic policies, approval of Division of Palliative Medicine Associate Division Chief for Inpatient Palliative Care or Associate Division Chief for Outpatient Palliative Care AND of the Director of the Anesthesia Pain Service as indicated		

# CATEGORY 2 DEPARTMENT SPECIAL PRIVILEGES

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Acupuncture	Criteria: 220 hours of CME in acupuncture training	months	(5) encounters with satisfactory outcomes for each requested procedure

must be
submitted to
complete
proctoring

### CATEGORY 3 LIMITED PRIVILEGES

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - End of Life Option Act  A physician who has specific training to ensure compliance with the UCSF protocol for End of Life Option Act/Medical Aid in Dying care. This medical practitioner can assess patient eligibility for this care and can prescribe aid in dying medications to qualifying patients.  NOTE: Privileging criteria are required ONLY for providers without formal training in Palliative Medicine, and are seeking to serve as the attending physician authorized to prescribe aid-in-dying medication. This credentialing is NOT required for those serving solely in the role of consulting physician.	- Review the current EOLOA policy available on the UCSF EOLOA website - Review the latest best practices slides posted on the UCSF EOLOA website - Complete and sign the EOLOA attestation form	privileges with acceptable accuracy determined by the Medical Director of Medical Aid in Dying at UCSF.	

APPLICANT'S SIGNATURE:	
Date:	

### **DEPARTMENTAL REVIEW AND RECOMMENDATION**

I am not aware of any physical	or mental health status issue	that could in any way impa	ir this individual's abilities to p	ractice within the privileges requested.

UCSF Division Chief Signature

Date

UCSF Department Chair Signature	Date