

## Department of Emergency 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/Certificates: M.D. or D.O. or foreign-equivalent

Minimum Formal Training: For Basic Privileges: Initial Appointment: Successful completion of an Accreditation Council on Graduate Medical Education (ACGME), AOA residency program in Emergency Medicine or verifiable equivalent non-U.S. training program in Emergency Medicine, or equivalent residency training in another specialty that fulfills all eligibility requirements for ABEM certification.

Renewal Criteria: Practitioners who do not meet the activity levels for maintenance/renewal criteria (such as Courtesy appointee) for particular privileges may submit – from their primary practice location—either;

- A.) A peer reference from the service Chief or Chair attesting to clinical competence in the requested privileges, or
- B.) Case-logs of clinical activity from their primary practice location.

### CATEGORY 1 Emergency Medicine Core Privileges

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	<p>A - Emergency Medicine Core Privileges Assess, evaluate, diagnose and initially treat patients of all ages who present in the Emergency Department with any symptoms, illness, injury or condition and provide services necessary to ameliorate minor illnesses or injuries; stabilize patients with major illnesses or injures and assess all patients to determine if additional care is necessary. Privileges include the procedures/services currently contained in the Model of the Clinical Practice of Emergency Medicine developed by ACEP (<a href="http://www.acep.org">www.acep.org</a>) and other organizations. Privileges include but not limited to: Cardioversion, defibrillation, intubation, central venous and arterial catheterization, insertion of chest tube, incision and drainage of abscesses, fracture and dislocation reduction, interosseous access for fluids, emergency cricothyrotomy, arthrocentesis, lumbar puncture, peritoneal lavage, nerve blocks, thoracentesis, insertion of gastric tubes, insertion of suprapubic catheters, other minor medical and surgical procedures.</p> <p>Note: Privileges do not include:            1.) Routine care of patients on an inpatient basis.            2.) Admitting or performing any scheduled elective procedures with the exception of procedures performed during emergency department follow-up visits.</p>	<p>In addition to Minimum Formal Training above, current Board Certification or in the certification process leading to certification by the relevant ABMS, AOA or acceptable equivalent specialty board in Emergency Medicine (Board Certification must be</p>	<p>Compliance with the Medical or Osteopathic Boards of California CME requirements for re-licensure. Educational activities must relate, in part, to the privileges requested and granted.</p> <p>AND</p> <p>Current demonstrated competence and documentation of successful treatment to a minimum of patients, set forth by the Chair/Chief of Department, for the past 24 months based on results of quality assessment-improvement activities and outcomes</p>	<p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p>

		achieved within Two (2) years of being granted privileges at UCSF; See Board Certification requirements in UCSF Medical Staff Bylaws, Rules & Regulations, item 3.1.2.3.4)	via eOPPE.	
	B - Procedural and Deep Sedation  To be performed in compliance with UCSF's policy on Sedation Administration by Non-Anesthesiologists.	Successful Completion of Educational Module via UC Learning Center, and successfully passing post-test.	Documentation of case volume and outcome monitoring submitted.	(2) proctored sedation cases

**CATEGORY 2  
Subspecialty Privileges**

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Ultrasound: Limited Anatomic Examination	Completion of the UCSF Emergency Department Ultrasound Credentialing Pathway or documentation of ultrasound training from prior training institution along with a letter of reference attesting to competency if ultrasound was not part of applicant's residency or fellowship training.	Documentation of recent experience (within the past 24 months) performing this procedure with acceptable accuracy rate as determined by the department's Emergency Ultrasound Committee. (Data is available upon request to Department).	(5) proctored ultrasound cases.

	A1 - Focused Abdominal Sonography in Trauma (FAST)			
	A2 - Identification of Intrauterine Pregnancy in First Trimester			
	A3 - Identification of Pericardial Effusion			
	A4 - Evaluation of Right Upper Quadrant			
	A5 - Evaluation of Kidneys for Hydromeprosis			
	A6 - Examination of Vascular Structures			
	B - Ultrasound: Procedures with Ultrasound Guidance	<p>Completion of the UCSF Emergency Department Ultrasound Credentialing Pathway or documentation of ultrasound training from prior training institution with letter of reference attesting to competency if ultrasound was not part of applicant's residency/fellowship training.</p> <p>[B1 only]* Completion of Module ("Patient Safety &amp; Quality of Care: Central Venous Catheter Insertion Practice" via UC Learning Center,) and successfully passing post-test.</p>	<p>Documentation of recent experience (within the past 24 months) performing this procedure with acceptable accuracy rate as determined by the department's Emergency Ultrasound Committee. (Data is available upon request to Department).</p>	<p>(5) proctored ultrasound cases.</p>
	B1 - Central Venous Line Placements (internal jugular, external jugular, common femoral vein)			
	B2 - Peripheral Venous Line Placement (including external jugular)			

	B3 - Subcutaneous Foreign Body Removal			
	B4 - Abscess Drainage			
	B5 - Thoracentesis			
	B6 - Abdominal Paracentesis			
	C - Medical Toxicology Privileges Evaluate, diagnose and provide consultative services to adult, adolescent and pediatric patients with clinical pharmacological and toxicological problems in the ambulatory and inpatient settings.	Currently certificate eligible, certified or re-certified in Medical Toxicology as authorized by a primary board of the American Board of Medical Specialties.	Review of 3 cases (within the past 24 months)	(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring.

**Admitting Services**

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	ED Observation Physician can place patients into the Clinical Decision (ED Observation Unit). Not a hospital admitting order.	N/A		N/A

**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 impair this individual's abilities to practice within the privileges requested.

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UCSF Division Chief Signature

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Date

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UCSF Department Chair Signature

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Date