

# Department of Emergency Medicine - Pediatrics 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: Successful completion of an Accreditation Council on Graduate Medical Education (ACGME) or AOA residency program in Pediatrics or verifiable equivalent non-U.S. training program in Pediatrics. Current Board Certification or in the certification process leading to certification by the relevant ABMS, AOA or acceptable equivalent specialty board in Pediatric Emergency Medicine (Board Certification must be achieved within four (4) years of being granted privileges at UCSF; See Board Certification requirements in UCSF Medical Staff Bylaws, Rules & Regulations, item 3.1.2.3.4)

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

**Pediatric Emergency Medicine Core Privileges Preventive medical services and medical care of children from birth through adolescence. Patient management, including H&P's and diagnostic and therapeutic treatments, procedures and interventions including the areas described below and similar activities. Currently board certified or board eligible through the American Board of Pediatrics or American Board of Emergency Medicine and the subspecialty Pediatric Emergency Medicine**

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	<p>A - Pediatric Emergency Medicine</p> <p>Core privileges include those listed below and others that are extensions of the same techniques/skills.</p> <p>Performance of history and physical exam <input type="checkbox"/> Abscess incision and drainage <input type="checkbox"/></p> <p>Administration of sedation and analgesia per hospital policy <input type="checkbox"/> Airway management and intubation <input type="checkbox"/> Anesthesia via IV (upper extremity, local, and regional) <input type="checkbox"/> Anoscopy <input type="checkbox"/> Arterial puncture and cannulation <input type="checkbox"/> Arthrocentesis <input type="checkbox"/> Bladder decompression and catheterization techniques <input type="checkbox"/> Blood component transfusion therapy <input type="checkbox"/> Burn management, including escharotomy <input type="checkbox"/> Cardiac pacing (external) <input type="checkbox"/> Cardioversion/defibrillation <input type="checkbox"/> Central venous catheterization <input type="checkbox"/> Cricothyrotomy (translaryngeal ventilation) <input type="checkbox"/> Conversion of supraventricular tachycardia <input type="checkbox"/> Dislocation/fracture reduction/immobilization techniques, including splint and cast applications <input type="checkbox"/> Electrocardiography interpretation <input type="checkbox"/> Endotracheal intubation techniques <input type="checkbox"/> Gastrointestinal decontamination (emesis, lavage, charcoal) <input type="checkbox"/> Hernia reduction <input type="checkbox"/> Intraosseous access <input type="checkbox"/> Irrigation and management of caustic exposures <input type="checkbox"/> Laryngoscopy (direct and indirect) <input type="checkbox"/> Lumbar puncture <input type="checkbox"/> Management of epistaxis <input type="checkbox"/> Nail trephine techniques <input type="checkbox"/> Nasal cautery/packing <input type="checkbox"/> Nasogastric/orogastric intubation <input type="checkbox"/> Ocular tonometry <input type="checkbox"/> Open cardiac massage <input type="checkbox"/> Oxygen therapy <input type="checkbox"/> Paracentesis <input type="checkbox"/></p>	See minimum formal training above.	<p>Documentation of 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</p>	(5) proctored patient care encounters and

	Pericardiocentesis <input type="checkbox"/> Peripheral venous cutdown <input type="checkbox"/> Peritoneal lavage <input type="checkbox"/> Preliminary interpretation of imaging studies <input type="checkbox"/> Rapid sequence intubation <input type="checkbox"/> Removal of foreign bodies from the nose, eye, and ear, and soft instrumentation/irrigation of skin or subcutaneous tissue <input type="checkbox"/> Repair of lacerations <input type="checkbox"/> Resuscitation <input type="checkbox"/> Slit lamp used for ocular exam <input type="checkbox"/> Spine immobilization <input type="checkbox"/> Thoracentesis <input type="checkbox"/> Thoracostomy tube insertion <input type="checkbox"/> Thoracotomy (open for patient in extremis) <input type="checkbox"/> Tracheostomy <input type="checkbox"/> Wound debridement		forth by the Chair/Chief of Department, for the past 24 months based on results of quality assessment-improvement activities and outcomes.	
	<p><b>B - Procedural and Deep Sedation</b></p> <p>To be performed in compliance with UCSF's policy on Sedation Administration by Non-Anesthesiologists.</p>	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 Hydornephrosis			
	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>	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.
	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.

\_\_\_\_\_  
UCSF Division Chief Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
UCSF Department Chair Signature

\_\_\_\_\_  
Date

