

Department of Dermatology 2021 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.

Minimum Formal Training: Successful completion of an ACGME, AOA, COA, or RCPSC accredited residency in dermatology and/or current certification or active participation in the examination process (with achievement of certification in accordance with UCSF Medical Staff bylaws) leading to ABD certification or AOBD CAQ in dermatology, or foreign training board equivalency

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

Basic Dermatology Privileges Patient management, including H & Ps, diagnostic and therapeutic treatments, procedures and interventions encompassing the areas described below and similar activities

Initial Criteria: See minimum formal training above. Renewal Criteria: A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges. Proctoring:(10) Retrospective review of ten medical records by proctor

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Structure and function of the skin and related systems: including administration of topical and local anesthesia; specific examples include: •Botulinum toxin injection • Chemical face peels • Collagen injections • Cryosurgery • Destruction of benign and malignant tumors • Electrosurgery • Excision of benign and malignant tumors with simple, intermediate, and complex repair techniques, including flaps and grafts • Intralesional injections • Patch tests • Perform history and physical exam • Photomedicine, phototherapy photodynamic therapy with blue light, and topical/systemic pharmacotherapy • Sclerotherapy • Skin and nail biopsy • Soft tissue augmentation	See minimum formal training above.	A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges.	(10) Retrospective review of ten medical records by proctor
	B - Provider Performed Microscopy - KOH	(Annual competency module required)	(Annual competency module required)	

CATEGORY 2

Subspecialty Privileges Patient management at this level encompasses Category 1 patient management, the areas checked below and similar activities
Initial Criteria: Requiring a level of training, skill and ability generally associated with persons who are Diplomates of the American Board of Dermatology and of the subspecialty board(s) whose privileges they have requested. Renewal Criteria: A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges. Proctoring:(10) Retrospective review of ten medical records by proct

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Dermatopathology	Requiring a level of training, skill and ability generally associated with persons who are Diplomates of the American Board of Dermatology and of the subspecialty board(s) whose privileges they have requested.	A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges.	(10) Retrospective review of ten medical records by proctor

CATEGORY 3

Special Dermatologic Privileges Patient management, including diagnostic and therapeutic treatments, procedures and interventions, requiring a level of training, skill and ability generally associated with persons who are Diplomates of the American Board of Dermatology and who have had additional training in specific patient management problems. Patient management at this level encompasses Category 1 patient management, the areas specifically marked below and similar activities requiring the same level of training, skill and ability.
Renewal Criteria: A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges. Proctoring:(3) Three proctored procedur

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Micrographic surgery	Letter attesting to training and competency in these privileges from Program Director OR Case-logs from previous	A minimum number of 20 laser procedures per two years at UCSF Medical Center over the past two years	(3) proctored procedures across all laser procedures

		<p>institution and peer reference form from most recent Department Chair</p> <p>OR</p> <p>Letter attesting to competency in these privileges from previous Department Chair</p>		
	B - Moderate Sedation	<p>Sedation Module completion AND ACLS required prior to granting of privileges.</p>		
	C - Laser Surgeries	<p>For all Laser Privileges - Letter attesting to training and competency in these privileges from Program Director</p> <p>OR</p> <p>Case-logs from previous institution and peer reference form from most recent Department Chair</p> <p>OR</p> <p>Letter attesting to competency in these privileges from previous Department Chair</p>	<p>For all Laser Privileges - A minimum number of 20 laser procedures per two years at UCSF Medical Center over the past two years</p>	

	C1 - Carbon Dioxide & Erbium-YAG: Excision and vaporization of cutaneous and Mucous membrane lesions. (LASER)	See criteria under header (Laser Surgeries)	See criteria under header (Laser Surgeries)	(3) proctored procedures across all laser procedures
	C2 - KPT: Treatment of vascular and pigmented cutaneous lesions (LASER)	See criteria under header (Laser Surgeries)	See criteria under header (Laser Surgeries)	(3) proctored procedures across all laser procedures
	C3 - Dye Lasers: Treatment of wave length specific cutaneous lesions (LASER)	See criteria under header (Laser Surgeries)	See criteria under header (Laser Surgeries)	(3) proctored procedures across all laser procedures
	C4 - Intense Pulsed Light: Treatment of wave length specific cutaneous lesions (LASER)	See criteria under header (Laser Surgeries)	See criteria under header (Laser Surgeries)	(3) proctored procedures across all laser procedures
	D - Dermabrasion	Letter attesting to training and competency in these privileges from Program Director OR Case-logs from previous institution and peer reference form from most recent Department Chair OR Letter attesting to competency in these privileges from previous Department	A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges.	(3) proctored procedures

		Chair		
	E - Hair transplantation and scalp reduction	<p>Letter attesting to training and competency in these privileges from Program Director</p> <p>OR</p> <p>Case-logs from previous institution and peer reference form from most recent Department Chair</p> <p>OR</p> <p>Letter attesting to competency in these privileges from previous Department Chair</p>	A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges.	(3) proctored procedures
	F - Liposuction with local anesthesia, microlipoinjection	<p>Letter attesting to training and competency in these privileges from Program Director</p> <p>OR</p> <p>Case-logs from previous institution and peer reference form from most recent Department Chair</p> <p>OR</p> <p>Letter attesting to competency in these</p>	A minimum of 100 hours of Dermatology clinical activity at UCSF Medical Center over the past two years across the breadth of the requested privileges.	(3) proctored procedures

		privileges from previous Department Chair		
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**CAT4
LIMITED PRIVILEGES**

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Clinical psychology only			

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