

Physical Medicine & Rehabilitation Privileges Form

Privileges Request Form

Basic Education/Certificates: M.D. or D.O (or equivalent degree)

Minimum Formal Training Physical Medicine and Rehabilitation (PM&R): Completion of an ACGME/AOA accredited residency in PM&R or current certification or active participation in the examination process (with the achievement of certification in accordance with UCSF Medical Staff Bylaws) leading to certification in PM&R by the American Board of Medical Rehabilitation (ABPMR) or the American Osteopathic Board of Physical Medicine and Rehabilitation (AOBPMR), of foreign training and 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

Physical Medicine and Rehabilitation - Category 1 Privileges

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	<p>A - CORE PRIVILEGES FOR PM&R</p> <p>These include the ability to admit, evaluate, diagnose, provide consultation to, and manage patients of all ages with physical and/or cognitive impairments and disability. Privileges also include the ability to diagnose and treat patients with painful or functionally limiting conditions, the management of comorbidities and coimpairments, the performance of diagnostic and therapeutic injection procedures, electrodiagnostic medicine, and the prevention of complications of disability from secondary conditions. Physicians may also provide care to patients in the intensive care setting in conformance with unit policies and may assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services</p> <ul style="list-style-type: none"> • Core privileges for PM&R <p>The core privileges in this specialty include the procedures on the following procedures list and such other procedures that are extensions of the same techniques and skills:</p> <ul style="list-style-type: none"> • Performance of history and physical exam • Anesthetic, motor blocks, chemodenervation (e.g., peripheral nerve, myoneural junction) • Arterial puncture • Arthrocentesis (both aspiration and injection [joints and bursae]) • Impairment and disability evaluations • Ergonomic evaluations • Fitness-for-duty evaluations • Independent medical evaluations • Routine nonprocedural medical care • Serial casting • Soft tissue injections, including ligament, tendon, sheath, muscle, fascial, prolotherapy • Work determination status 	See formal training	Board-eligible or Board Certified in Physical Medicine and Rehabilitation AND Performance of at least 20 cases in the last two years.	(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring

	Performance and interpretation of: <ul style="list-style-type: none"> • Ergometric studies • Gait laboratory studies • Muscle/muscle motor point biopsies • Small, intermediate, or major joint arthrogram • Work physiology testing, including treadmill and pulmonary • EKG monitoring 			
	B - SPINAL CORD INJURY MEDICINE <ul style="list-style-type: none"> • Performance of history and physical exam • Evaluation, prescription, and supervision of medical and comprehensive rehabilitation goals and treatment plans for spinal cord injuries and syndromes • Management of abnormalities and complications in other body systems resulting from spinal cord injury • Management of skin problems utilizing various techniques of prevention • Treatment, with appropriate consultation, of complications, such as deep vein thrombosis, pulmonary embolus, autonomic hyperreflexia, substance abuse, pain, spasticity, depression, and the sequelae of associated illnesses and preexisting diseases • Recognition, diagnosis, and coordination of treatment for respiratory complications • Recognition, diagnosis, and treatment of orthostatic hypotension and other cardiovascular abnormalities • Spinal cord rehabilitation (including neuromuscular, genitourinary, and other advanced techniques) • Spinal immobilization 	See core	See core	(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring
	C - CHRONIC PAIN MANAGEMENT - General evaluation and treatment of chronic pain condition, exclusive of perioperative pain <ul style="list-style-type: none"> • Management of abnormalities and complications in other body systems resulting from spinal cord injury • Management of skin problems utilizing various techniques of prevention • Treatment, with appropriate consultation, of complications, such as deep vein thrombosis, pulmonary embolus, autonomic hyperreflexia, substance abuse, pain, spasticity, depression, and the sequelae of associated illnesses and preexisting diseases • Recognition, diagnosis, and coordination of treatment for respiratory Complications • Recognition, diagnosis, and treatment of orthostatic hypotension and other cardiovascular abnormalities • Spinal cord rehabilitation (including neuromuscular, genitourinary, and other advanced techniques) 			
	D - ELECTROMYOGRAPHY STUDIES (EMG)		Board Eligible or Board Certified in Physical Medicine and Rehabilitation <ul style="list-style-type: none"> • Performance of at least 5 studies in the last two years. • Evidence of continuing 	(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring

			education in electrodiagnostics, neurologic, and/or neuromuscular disease-related subjects over the last year.	
	E - NERVE BLOCKS Includes: sympathetic chain/ganglia, caudal, facet nerve/joint, epidural (interlaminar and transforaminal), sacroiliac joint.	<ul style="list-style-type: none"> • ACGME-accredited pain management fellowship or interventional spine fellowship OR Performance of at least 5 cases with satisfactory outcomes	Maintenance of these procedural privileges requires demonstrated competence of at least 4 procedures with acceptable results within the past 24 months	(2) encounters with satisfactory outcomes must be submitted to complete proctoring

CATEGORY 2

Physical Medicine and Rehabilitation - Category 2 Subspecialty Privileges

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - CORE PEDIATRIC REHABILITATION MEDICINE (PRM) Admit, evaluate, diagnose, and provide consultation and medical therapy to children with congenital and childhood-onset physical impairments, including related or secondary medical, physical, functional, psychosocial, and vocational limitations or conditions, with an understanding of the life course of disability. PRM physicians may provide care to patients in the intensive care setting in conformance with unit policies. They may 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 in this specialty include procedures that are extensions of the same techniques and skills.	<ul style="list-style-type: none"> • Board Eligible or board-certified in Physical Medicine and Rehabilitation. AND <ul style="list-style-type: none"> • Board eligible or Board certified in Pediatrics OR <ul style="list-style-type: none"> • Completion of a Pediatric PMR fellowship 	<ul style="list-style-type: none"> • Board Eligible or board-certified in Physical Medicine and Rehabilitation AND <ul style="list-style-type: none"> • Board eligible or Board certified in Pediatrics AND <ul style="list-style-type: none"> • Performance of at least 20 cases in the last two years 	(5) encounters with satisfactory outcomes
	B - SUBSPECIALITY PMR - Interventional Spine and intradiscal therapies	<ul style="list-style-type: none"> • ACGME-accredited pain management fellowship or interventional spine fellowship 	Maintenance of these procedural privileges requires demonstrated competence of at	(5) encounters with satisfactory outcomes must be submitted to

		OR • Performance of at least 5 cases with satisfactory outcomes	least 20 procedures with acceptable results within the past 24 months	complete proctoring
	C - SUBSPECIALTY PMR - Radiofrequency lesioning of Medical Branch Nerves	ACGME-accredited pain management fellowship or interventional spine fellowship OR Performance of at least 5 cases with satisfactory outcomes	Maintenance of these procedural privileges requires demonstrated competence of at least 20 procedures with acceptable results within the past 24 months	(5) encounters with satisfactory outcomes must be submitted to complete proctoring

CATEGORY 3
Physical Medicine and Rehabilitation - Category 3 Special Privileges

Requested	Privilege Description	Initial Criteria	Renewal Criteria	Proctoring
	A - Moderate Sedation	Completion of moderate sedation modules AND ACLS/PALS for adult/pediatric providers respectively	Active ACLS/PALS for adult/pediatric providers respectively	
	B - Fluoroscopy	Valid California Fluoroscopy permit	Valid California Fluoroscopy permit	
	C - Acupuncture	Completion, by a licensed physician, of at least a 200-hour course consisting of	Documentation of 10 procedures in the past 24 months	(5) encounters with satisfactory outcomes for each requested procedure

		theory and training given by a UC or other nationally recognized university		must be submitted to complete proctoring
	D - Ultrasound (therapeutic: guided joint and soft tissue injections; diagnostic: assess etiology and/or severity of musculoskeletal injuries/conditions)	-40 hours didactic training, AND -Completion of hands-on training in musculoskeletal ultrasound	Maintenance of these procedural privileges requires demonstrated competence of at least 10 procedures with acceptable results within the past 24 months	(5) diagnostic and/or procedural scans documenting unique structures
	E - Balloon Kyphoplasty	Board certification or board eligibility in Orthopedic Surgery, Neurological Surgery or Physical Medicine and Rehabilitation AND Fellowship training in Pain Medicine or Interventional Spine	Maintenance of these procedural privileges requires demonstrated competence of at least (5) procedures with acceptable results within the past 24 months	(2) diagnostic and/or procedural scans documenting unique structures
	<p>ASC-1 - Ambulatory Surgery Center (ASC), Peninsula Outpatient Center Privileges</p> <p>Core - Physical Medicine and Rehabilitation (PMR) Privileges</p> <ul style="list-style-type: none"> • Performance of history and physical exam • Anesthetic, motor blocks, chemodenervation (e.g. peripheral nerve, myoneural junction) • Arthrocentesis (both aspiration and injections [joints and bursae]) • Routine nonprocedural medical care • Soft tissue injections, including ligament, tendon, sheath, muscle, fascial prolotherapy • Work determination status • Performance and interpretation of small, intermediate, and or major joint arthrogram 			

	ASC-2 - Ambulatory Surgery Center (ASC), Peninsula Outpatient Center Privileges Nerve Blocks - PMR Specialty • Nerve blocks that include: sympathetic chain/ganglia, caudal, facet nerve/joint, epidural (interlaminar and transforaminal), sacroiliac joint.			

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