

**Loma Linda University Medical Center**  
**Loma Linda, CA 92354**

**PRIVILEGE FORM**

CLINICAL AREA: **EMERGENCY MEDICINE**

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REQUEST	CATEGORY	MEMBERSHIP CATEGORY	ACTION		
			Approved	Conditions	Denied
	Provisional (Bylaws 4.3)	All initial appointees shall be placed in the Provisional Category for the duration of their initial appointment.			
	Administrative (Bylaws 4.7)	For practitioners who are members of the Medical Staff who have no clinical privileges, who are recommended for appointment or reappointment to the Administrative Staff by the Chief of the Clinical Service, the Credentials Committee, and the Medical Staff Executive Committee, and who must <b>MUST</b> meet the following:			
		1. Have been a member in good standing of the Active, Courtesy, or Provisional Staff for at least one (1) year.			
		2. Have completed proctoring for any clinical privileges previously requested.			
		3. Agree to refrain from participating in any activities within the Medical Center that require clinical privileges.			
		4. Provide significant service to the Medical Center and the Medical Staff in the form of academic activities, quality improvement activities, or administration.			
		5. Be recommended for appointment or reappointment			
		Failure to meet any of these qualifications will be adequate grounds to deny reappointment.			
	Affiliate (Bylaws(4.9))	Practitioners who <b>CANNOT</b> :			
		1. Vote or hold office in the Medical Staff or Service. 2. Be a member of any Medical Staff Committee. 3. Be Reappointed to the Affiliate Category.			
		Practitioners who <b>MUST</b> :			
		1. Have been a member in good standing of the Active, Courtesy or Consulting category during the immediate preceding appointment period. 2. Have completed, in a timely manner as described in the Bylaws, an application for reappointment. 3. Have been found to be qualified for reappointment, <b>other than the volume of clinical activity.</b>			
	Active (Bylaws 4.2)	Regularly care for patients in the Medical Center; have completed proctoring requirements and the Provisional period.			
	Courtesy (Bylaws 4.4)	Admit or otherwise provide care for not more than twelve (12) patients in the Medical Center during each year. Have completed proctoring and the Provisional period.			
	Consulting (Bylaws 4.5)	Render a clinical opinion within their competence. Shall not be eligible to admit patients or to assume continuing care of patients in the Medical Center. Not eligible to vote or hold office in the Medical Staff or Clinical Service			

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CATEGORY	QUALIFICATIONS
<p align="center">Physicians with full  <b>EMERGENCY MEDICINE</b>  privileges</p>	<p>Current demonstrated competence and an adequate volume of current experience in Emergency Medicine to evaluate, initially manage and treat, all patients who seek emergency care, furthermore, the competence and experience in the privileges requested; except as specifically excluded from practice, <b>and one of the following:</b></p> <p>Current certification in Emergency Medicine by the American Board of Emergency Medicine (ABEM) or the American Osteopathic Board of Emergency Medicine (AOBEM); <b>or</b></p> <p>Currently Board-prepared for one of the above Board examinations, with the additional requirement to achieve and then maintain ACLS, ATLS and PALS certification.</p> <p>A qualified emergency physician is defined as one who:</p> <ol style="list-style-type: none"> <li>1. Possesses the experience in Emergency Medicine sufficient to evaluate, initially manage and treat all patients who seek emergency care.</li> <li>2. Performs differential diagnosis and recognizes life-threatening conditions by means of: <ol style="list-style-type: none"> <li>a) History</li> <li>b) Physical examination</li> <li>c) Medical decision making</li> <li>d) Laboratory and other studies</li> <li>e) ECGs</li> <li>f) Diagnostic imaging</li> </ol> </li> <li>3. Performs definitive treatment within established competence and/or refers the patient to other physicians for definitive care when indicated.</li> <li>4. Cares for life-threatening situations with the facilities and staff available in the emergency department until such time as the appropriate physician responds and/or appropriate transfer or admission occurs.</li> <li>5. Has an understanding of the Medical Center's policy for legal requirement to evaluate every patient who presents to the emergency department seeking emergency care, to ascertain whether or not an emergency medical condition exists, and to stabilize to the extent possible all patients who require stabilization, without consideration of the patient's ability to pay for this service.</li> </ol>

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<p>Physicians with privileges limited to <b>PEDIATRIC EMERGENCY MEDICINE</b></p>	<p>Additional physicians may be privileged in the Department of Emergency Medicine to care only for pediatric patients, and as an alternative to ABEM/AOBEM certification (see above) these physicians must have current certification or qualification to take the certification examination by the American Board of Pediatrics and additional relevant training or experience (for example, Pediatric Emergency Medicine or Critical Care Pediatric fellowship), as judged by the Department Chairman. Pediatric emergency physicians must achieve and then maintain current certification in ATLS and PALS unless Board Certified in Pediatric Emergency Medicine or Critical Care Pediatrics.</p> <p>A qualified Pediatric emergency physician is one who:</p> <ol style="list-style-type: none"> <li>1. Possesses the experience in Pediatric Emergency Medicine sufficient to evaluate, initially manage and treat all patients who seek emergency care.</li> <li>2. Performs differential diagnosis and recognizes life-threatening conditions by means of:             <ol style="list-style-type: none"> <li>a. History</li> <li>b. Physical examination</li> <li>c. Medical decision making</li> <li>d. Laboratory and other studies</li> <li>e. ECGs</li> <li>f. Diagnostic imaging</li> </ol> </li> <li>3. Performs definitive treatment within established competence and/or refers the patient to other physicians for definitive care when indicated.</li> <li>4. Cares for life-threatening situations with the facilities and staff available in the emergency department until such time as the appropriate physician responds and/or appropriate transfer or admission occurs.</li> <li>5. Has an understanding of the Medical Center's policy for legal requirement to evaluate every patient who presents to the emergency department seeking emergency care, to ascertain whether or not an emergency medical condition exists, and to stabilize to the extent possible all patients who require stabilization, without consideration of the patient's ability to pay for this service.</li> </ol>
<p>Observation/Proctoring Requirements</p>	<p>As specified in the Department of Emergency Medicine rules and regulations.</p>

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MARK IF REQUESTED	CODE	PRIVILEGE	ACTION		
			Approved	Conditions	Denied
<b>GENERAL PRIVILEGES</b>					
	EM0300	Admission decision			
	EM02601	Consults in areas of competence			
		Ordering tests and therapy			
		Requesting consultations			
		Arranging transfers and discharges			
		Evaluation of all Emergency Department patients			
		Evaluation of all Pediatric Emergency Department patients			
		Supervision of Residents and students			
		Supervision of Allied Health Professionals (AHP) under the following circumstances: When an AHP is granted practice privileges by the Medical Staff; When the AHP operates under standardized procedures; Or under other circumstances as recommended by the Interdisciplinary Practice Committee and approved by the Medical Staff.			
		Supervise Radiologic Technologists and operate Fluoroscopy Equipment. <u>Fluoroscopy Supervisor and Operator Permit required (attach current copy).</u>			
<b>PATIENT CLASSIFICATION</b>					
	EM00440	Child (0-21 years)			
	EM00450	Adult (18-65 years)			
	EM00460	Geriatric (> 65 years)			
<b>MANAGEMENT PRIVILEGES</b>					
		<b><i>Emergency Management of:</i></b>			
		Abdominal and Gastrointestinal Disorders			
		Cardiovascular Disorders			
		Cutaneous Disorders			
		Endocrine, Metabolic and Nutritional Disorders			
		Environmental Disorders			
		Head and Neck Disorders			
		Hematologic and Oncologic Disorders			
		Immune System Disorders			
		Musculoskeletal Disorders			
		Nervous System Disorder			
		Obstetrics and Disorders of Pregnancy			
		Pediatric Disorders			
		Psychobehavioral Disorders			
		Renal Disorders			
		Systemic Infectious Disorders			
		Thoracic-Respiratory Disorders			
		Toxicology and Clinical Pharmacology Disorders			
		Traumatic Disorders			
		Urogenital/Gynecologic Disorders			

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			Approved	Conditions	Denied
<b>PROCEDURAL PRIVILEGES</b>					
The granting of procedural privileges is for the emergency management of the following disorders. Specific procedures listed represent a limited number of possible examples. This list of examples is not all-inclusive nor are the examples limited to any specific disorder. Privileges for appropriate anesthesia to accomplish these procedures are included within the procedural privilege.					
		<b><i>Procedures Related to the Emergency Management of:</i></b>			
		<u>Abdominal and Gastrointestinal Disorders</u> <i>Paracentesis, hernia reduction</i>			
		<u>Cardiovascular Disorders</u> <i>Pericardiocentesis, cardiac pacing techniques</i>			
		<u>Cutaneous Disorders</u> <i>Abscess incision and drainage, use of Wood's lamp</i>			
		<u>Endocrine, Metabolic and Nutritional Disorders</u> <i>Insertion of arterial line, management of mechanical ventilation</i>			
		<u>Environmental Disorders</u> <i>Core warming techniques, decontamination</i>			
		<u>Head and Neck Disorders</u> <i>Direct laryngoscopy, removal of airway and ocular foreign bodies</i>			
		<u>Hematologic and Oncologic Disorders</u> <i>Blood component transfusion therapy, venous access techniques</i>			
		<u>Immune System Disorders</u> <i>Lumbar punctures</i>			
		<u>Musculoskeletal Disorders</u> <i>Arthrocentesis, compartment pressure measurement</i>			
		<u>Nervous System Disorders</u> <i>Rapid cooling techniques, emergency endotracheal intubation with paralysis</i>			
		<u>Obstetrics and Disorders of Pregnancy</u> <i>Emergency delivery</i>			
		<u>Pediatric Disorders</u> <i>Newborn resuscitation, intraosseous cannulation</i>			
		<u>Psychobehavioral Disorders</u> <i>Use of mechanical or pharmacological restraints</i>			
		<u>Renal Disorders</u> <i>Bladder catheterization techniques, peritoneal dialysis catheter evaluation</i>			
		<u>Systemic Infectious Disorders</u> <i>Endotracheal intubation, central venous access techniques</i>			
		<u>Thoracic-Respiratory Disorders</u> <i>Thoracentesis, ABG interpretation</i>			
		<u>Toxicology and Clinical Pharmacology Disorders</u> <i>GI decontamination, ECG interpretation</i>			
		<u>Traumatic Disorders</u> <i>Cricothyroidotomy, lavage, thoracostomy tube placement, management of dislocations, laceration repair</i>			
		<u>Urogenital/Gynecologic Disorders</u> <i>Forensic exams, testicular detorsion, removal of foreign bodies</i>			

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MARK IF REQUESTED	CODE	SEDATION	ACTION		
			Approved	Conditions	Denied
	EM99998	Moderate sedation			
	EM99999	Deep sedation			

**Acknowledgment of Practitioner**

I have requested only those specific privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at Loma Linda University Medical Center, Inc.; **and**

I understand that:

- (a) In exercising any clinical privileges granted, I am constrained by any hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- (b) Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\* *For Hospital and/or Clinic Use Only* \*\*\*\*

**Conditions/Modifications:**

The requested clinical privileges have been approved by the Governing Board with the following conditions/modifications and the explanation for same.

Code	Privilege	Condition/Modification
Code	Explanation:	

\_\_\_\_\_  
Chief of Service

\_\_\_\_\_  
Date

\_\_\_\_\_  
Credentials Committee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Medical Staff Executive Committee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Governing Board Designee

\_\_\_\_\_  
Date