

BRYAN MEDICAL CENTER
DELINEATION OF CLINICAL PRIVILEGES

EMERGENCY MEDICINE

Qualifications: Successful completion of an Accreditation Council for Graduate Medical Educations (ECGME) or American Osteopathic Association accredited residency in emergency medicine.

AND/OR

Current certification or active participation in the examination process (with achievement of certification within 5 years) leading to certification in emergency medicine by the American Board of Emergency Medicine or the American Osteopathic Board of Emergency Medicine.

EMERGENCY MEDICINE CORE PRIVILEGES

□ **Requested:** Assess, evaluate, diagnose, and initially treat patients of all ages who present in the ED with any symptom, illness, injury, or condition and provide services necessary to ameliorate minor illnesses or injuries and stabilize patients with major illnesses or injuries and to access all patients to determine if additional care is necessary. Privileges do not include long-term care of patients on an inpatient basis. No privileges to admit or perform scheduled elective procedures with the exception of the procedures performed during routine emergency room visits. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extension of the same techniques and skills.

Emergency Medicine Core Procedure List

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures that you do not wish to request, initial, and date.

Abdominal and Gastrointestinal

1. Anoscopy
2. Balloon tamponade of upper GI bleeding, i.e., Sengstaken-Blakemore/Minnesota tube placement
3. Excision of thrombosed external hemorrhoids
4. Gastric lavage
5. Nasogastric intubation
6. Peritoneal lavage (diagnostic and for active core rewarming in hypothermia)
7. Replacement of transabdominal feeding tubes
8. Rectal foreign body removal
9. Reduction of hernias
10. Whole-bowel irrigation (WBI)

Anesthesia

1. Administration of systemic analgesia
2. Digital block anesthesia
3. Hematoma block
4. Local infiltrative (includes intra-articular) anesthesia
5. Topical anesthesia

6. Use and administration of local anesthesia/anesthetics

Antigens and Other Foreign Substances

1. Treatment of hypersensitivity reactions

Cardiovascular

1. Arterial cannula placement (percutaneous/cutdown)
2. Arterial puncture
3. Blood/crystalloid/colloid infusions
4. Cardiopulmonary resuscitation (CPR)
5. Carotid sinus massage (CSM)
6. Central venous line insertion
7. Central venous pressure (CVP) monitoring
8. Chemical (drug therapy) cardioversion
9. Closed chest massage
10. Defibrillation and synchronized cardioversion
11. Echocardiography-limited cardiography to determine cardiac activity and tamponade
12. Intracardiac injection
13. Intraosseous (IO) infusion
14. Internal cardiac massage
15. Interpretation of electrocardiograms/rhythm strips and treatment
16. Pericardiocentesis
17. Peripheral venipuncture
18. Peripheral venous catheterization
19. Peripheral venous cutdown
20. Placement of emergency electrical pacemaker external/transvenous
21. Placement of Swan-Ganz catheter
22. Resuscitative thoracotomy
23. Use of Doppler ultrasound
24. Utilization of autotransfusion system

Cutaneous/dermatologic

1. Curettage of wart, callus
2. Debridement and repair of lacerations (cutaneous, ear, eyelid, lip nailbed, tongue, mucous membranes)
3. Foreign body removal
4. Foreign body removal under fluoroscopy
5. Incision/drainage of abscess, including but not limited to: Bartholin gland, breast, cutaneous, dental, facial, felon, hidradentitis, suppurativa, infected sebaceous cyst, paronychia, periodontal, perirectal/perianal, peritonsillar, pilonidal, stitch and subungual
6. Simple split thickness graft/composite graft of fingertip injuries
7. Use of tissue adhesive
8. Wound stapling
9. Wound taping

Head and Neck

1. Anterior nasal packing
2. Dental nerve blocks
3. Direct and indirect laryngoscopy
4. Drainage of septal hematoma
5. Evacuation of auricular hematoma
6. Nasal and ear foreign body removal
7. Nasal cautery
8. Posterior nasal packing
9. Reduction of temporomandibular joint dislocation

10. Temporary stabilization of teeth injury (avulsion, fracture luxation)

Infant and Children

1. All other procedures listed in this document
2. Capillary blood gases interpretation
3. Pediatric resuscitation
4. Umbilical artery catheterization-pediatrics
5. Umbilical vein catheterization-pediatrics

Musculoskeletal

1. Application of hare traction splint
2. Application of Unna boot
3. Arthrocentesis, diagnostic/therapeutic
4. Bivalving of cast
5. Extensor tendon repair
6. Incision/drainage of subungual hematoma
7. Injection therapy of bursitis, tendonitis, myofascial pain, ganglion cysts and trigger finger
8. Intercostals nerve block
9. Measurement of compartment pressures
10. Nail trephination/removal
11. Placement of molded splints/cylinder casts
12. Reduction of dislocations and fractures
13. Removal of constricting bands
14. Removal of ingrown toenail (partial/total)
15. Repair of nail avulsion and nailbed laceration
16. Use of Sager traction splint

Nervous System

1. Caloric testing
2. Lumbar puncture/CSF interpretation
3. Spine immobilization
4. V-P shunt reservoir aspiration

Obstetrics

1. Cesarean section, postmortem
2. Emergency vaginal deliveries
3. Episiotomy
4. Removal of intrauterine device (IUD)

Ophthalmology

1. Intraocular pressure measurement : Schiötz tonometry, tonopen, applanation
2. Removal of contact lenses
3. Removal of corneal foreign body and rust ring/corneal burr
4. Slit lamp examination
5. Use of Morgan Lens

Respiratory

1. Bag-valve-mask (BVM) ventilation
2. Cricothyriodotomy
3. Digital intubation
4. Emergency tracheostomy
5. Endotracheal drug administration
6. Esophageal obturator airway (EOA)
7. Esophageal-tracheal Combitube (ETC)
8. Flexible fiberoptic laryngoscopy
9. Heimlich maneuver, chin lift, jaw thrust, abdominal thrust
10. Intubation over fiberoptic bronchoscope

11. Lighted stylet intubation
12. Nasotracheal intubation
13. Needle cricothyroidotomy
14. Needle thoracostomy
15. Oral/nasopharyngeal airway insertion
16. Orotracheal intubation
17. Percutaneous translaryngeal jet ventilation (PTJV, TTNV, PTNV)
18. Removal of upper airway foreign body
19. Retrograde intubation
20. Thoracentesis
21. Tracheal suctioning
22. Tracheostomy tube replacement
23. Transtracheal needle aspiration and suctioning
24. Tube thoracostomy
25. Use of CPAP (continuous positive-pressure ventilation system)
26. Use of end-tidal carbon dioxide detector devices
27. Use of esophageal obturator airway (EOA)
28. Use of high-frequency jet ventilation (HFJV)
29. Use of laryngeal-mask airway (LMA)
30. Use/interpretation of pulse oximetry
31. Utilization of neuromuscular blocking agents (NMBs)
32. Wright peak flow meter

Urogenital

1. Culdocentesis
2. Emergency retrograde urethrogram/cystogram/IVP
3. Reduction of paraphimosis, phimosis
4. Suprapubic bladder aspiration
5. Urethral catheterization
6. Urinary catheter placement

Emergency Department Administration

1. Base Station Medical Control
2. CPR Team Direction
3. EMS Transport

Trauma

1. Trauma Team Member (West Campus only)

Miscellaneous

1. Cautery (electrical/chemical) of bleeding
2. Rape exam
3. Treatment of burns including debridement and escharotomy

The following core procedures require successful completion of an educational module and post-test at reappointment:

1. Adult Moderate Sedation (sedation by any route with or without analgesia, which in the manner used, may be reasonably expected to result in the loss of protective reflexes. Loss of protective reflexes is an inability to handle secretions without aspiration or to maintain a patent airway independently).
2. Pediatric Moderate Sedation (equal to or less than 16 years of age)
3. RSI
4. Deep Sedation (use of induction agents, eg., barbiturates, etomidate, benzodiazepines & intravenous/intramuscular anesthetic agents eg. Ketamine)

SPECIAL NONCORE PRIVILEGES

If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

FOCUSED ABDOMINAL SONOGRAPHY FOR TRAUMA (FAST EXAM)

Criteria: Successful completion of an accredited postgraduate training program in emergency medicine that included training in ultrasound interpretation, or completion of a practice-based pathway and training for ultrasound interpretation.

Requested

TRAUMA MEMBER

Criteria: Board Certification or Board eligible in your specialty and demonstrate an active interest in trauma care. Maintain trauma CMEs of 16 hours per year or 48 hours over a 3-year period.

Requested

ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and that I wish to exercise at Bryan, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by 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 situations my actions are governed by the applicable section of the Medical Staff Bylaws and related documents.

Signature: _____ Date: _____