Bryan Medical Center Allied Health Provider Advanced Practice Registered Nurse-Nurse Practitioner

A Nurse Practitioner (NP) may perform services in accordance with the rules and regulations governing the practice of NPs as set forth in Nebraska State Licensure Statues. NPs may perform medical functions delegated to them by a sponsoring physician when the physician is satisfied that the NP is competent, delegation is consistent with sound medical practice, and functions are performed under physician supervision (direct or indirect). A sponsoring physician shall delegate only tasks and procedures to the NP which are within the supervising physician's scope of practice. Within the physician-NP relationship, the NP exercises a broad range of diagnostic and therapeutic services. A NP may provide health care services within specialty areas.

Initial Criteria:

- Completion of Masters or Doctorate degree in a formal training program for Advanced Practice Registered Nurse-Nurse Practitioner.
- Completion of a nationally recognized certification examination that has been approved by the Nebraska Board of Advanced Practice Registered Nurses.
- Licensed as an Advanced Practice Registered Nurse- Nurse Practitioner in the State of Nebraska.

Supervision:

- Must have a Sponsoring Physician on the Bryan Medical Center Medical Staff.
- All medical services performed at the Medical Center by an advanced practice provider will be under direction of the Sponsoring Physician.
- All medical services must be performed in the specialty area or areas of the sponsoring physician for which the NP are trained or experienced.
- It is the responsibility of the sponsoring physician to assure that the NP is competent to perform that which is delegated.

NP CORE PRIVILEGES

Core Privileges for NPs includes diagnostic evaluation, consultation and treatment of patients of all ages as delegated by the sponsoring physician. This will include managing patients with complex, acute, and chronic health conditions and may be in a variety of clinical settings. NP may prescribe medications within their scope of practice as determined by the Nebraska Board of Pharmacy.

Core privileges for NPs also includes the performance of diagnostic and therapeutic procedures, including the following, as appropriate to current role for which privileges are being requested:

- Perform detailed patient history and physical examinations.
- May assist at surgery/special procedures under the supervision of the operating physician.
 Incisional closures of the skin and subcutaneous tissue with the operating physician immediately available within the medical facility. The operating physician may not make an incision on a second patient until the incision on the first patient is closed.
- May perform common minor procedures with minimal risk, within the scope of the sponsoring physician's practice Delegation of the performance of minor procedure should align with prior training, experience and competence of the NP.
- Venipuncture, arterial puncture.
- Fracture/dislocation management (excluding reduction).

NONCORE NP PRIVILEGES

Cardiology NP Patient Care Scope of Service

Additional privileges not included in Core Privileges for NPs will include the performance of diagnostic and therapeutic procedures as appropriate to current role for which privileges are being requested. NPs should only request, and the department should only recommend for approval, privileges which are necessary to function in the current role for which privileges are being requested.

The NP's sponsoring physician must be a credentialed medical staff member within the NP's specialty and hold correlating procedure privileges. The Sponsoring Physician must submit a letter supporting and outlining the training plan for the noncore privilege requests.

•
Tilt Table
Criteria: Documentation of four (4) proctored cases by a qualified Medical Staff member and a letter by the proctoring physician must be provided before performing independently. ACLS certification required.
Stress Test (dobutamine echo or dobutamine cardiolyte) Criteria: Documentation of (5) proctored cases by a qualified Medical Staff member and a letter by the proctoring physician must be provided before performing independently. ACLS certification required.
Stress Test (simple treadmill, treadmill echo, or treadmill cardiolyte, lexiscan cardiolyte or PET stress). Criteria: Documentation of (25) proctored cases by a qualified Medical Staff member and a letter by the proctoring physician must be provided before performing independently. ACLS certification required.
Myocardial Oxygen Consumption Test Criteria: Must hold treadmill stress testing and submit documentation of two (2) proctored Myocardial oxygen consumption cases by a qualified Medical Staff member and letter by the proctoring physician before performing independently.
Management of VAD patients Criteria: Must complete annual education provided by the VAD coordinator
Cardiothoracic NP Patient Care Scope of Practice
Conduit harvesting including open or endoscopic vein harvesting, radial artery harvesting (20) External pacing including adjusting temporary epicardial, or transcutaneous pacemaker as necessary (5) Removal of temporary epicardial pace-maker wires (5) Adjustment and removal of intra-aortic balloon devices (5) Removal of postop drains (5) Sternotomy closure (20) Bedside intrapleural drug administration (pleurodesis) (5)
Criteria: Documentation of previous training and current competence with minimum of three proctored cases for each procedure requested. OR
New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the individual. Minimum number of proctored cases must be met as noted above.

Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been

submitted to Medical Staff Services and the provider has been notified that the request was granted.

Emergency Medicine NP Patient Care Scope of Service

individual. Minimum number of proctored cases must be met as noted above.

Emergency Medicine Core (Qualified Medical Person) "QMP" in the Emergency Department		
Emergency Medicine Non-Core Special Procedures		
Central Lines (10)		
Lumbar puncture (10)		
Chest tube thoracostomy (10)		
Midline Catheter (10)		
Criteria: Documentation of previous training and current competence with minimum of three proctored cases for each procedure requested. OR		
New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring		
physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the individual. Minimum number of proctored cases must be met as noted above.		
Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been submitted to Medical Staff Services and the provider has been notified that the request was granted.		
Emergency Medicine Point of Care Ultrasound		
Criteria: Successful completion of an Advanced Practice Provider Emergency Medicine Residency or Fellowship that included		
adequate training in point of care ultrasound. OR		
The provider must acquire experience in the interpretation of ultrasound point of care while under the supervision of a physician credentialed with point of care ultrasound privileges. A minimum number of 25 cases is required in each of the following categories (credentials may be obtained for all categories or individual).		
Reappointment: Minimum of 20 cases for each category per 24 months.		
RUQ/Abdominal limited		
OB/Pelvis limited		
Extremity Venous limited		
Cardiac Echo limited		
Chest/lung limited		
Retroperitoneal limited		
Internal Medicine NP Patient Care Scope of Service		
Central Lines (10)		
Criteria: Documentation of previous training and current competence with minimum of three proctored cases for each procedure		
requested.		
OR		
New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring		
physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the		

Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been submitted to Medical Staff Services and the provider has been notified that the request was granted.

Internal Medicine PICC Line
Criteria: Successful completion of PICC training program.
PICC Lines
Neonatal NP Patient Care Scope of Service
Criteria: Completion of an accredited Neonatal NP training program.
CORE
 Assume primary responsibility for evaluation and management of patients admitted to the Transition NICU/NICU under the supervision of the attending or on-call neonatologist.
 Attend high risk deliveries including preterm or multiple gestation pregnancies, infants with suspected infections or congenital anomalies, meconium-stained amniotic fluid and prenatally-depressed infants.
 Attend cesarean section deliveries and any other delivery requested by the obstetrical, neonatal or family medicine attending physicians. (Current NRP Certification is required)
• Participate in the arrangement of transport of infants to the Transition NICU/NICU from outside hospitals by discussing case with referring physician and receiving neonatologist.
 Participate in neonatal resuscitations in labor and delivery, Transition NICU, NICU and normal newborn nursery.
 Participate in procedures performed on neonates including intubation, lumbar puncture, umbilical vessel catheterization suprapubic bladder aspiration, emergency thoracentesis, emergency paracentesis, percutaneous central venous cathete insertion, percutaneous arterial puncture, percutaneous radial artery catheter insertion, chest tube insertion, exchange transfusion.
Neurosurgery NP Patient Care Scope of Service
Intracranial Pressure Monitoring (5)
Criteria: Documentation of previous training and current competence with minimum of three proctored cases for each procedure
requested.
OR
New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the individual. Minimum number of proctored cases must be met as noted above.
Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been submitted to Medical Staff Services and the provider has been notified that the request was granted.
Pediatric Hospitalists NP Patient Care Scope of Service
Lumbar Puncture (5)
Circumcision (10)
Frenulectomy (5)
Criteria: Documentation of previous training and current competence with minimum of three proctored cases for each procedure

OR

requested.

New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the individual. Minimum number of proctored cases must be met as noted above.

Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been submitted to Medical Staff Services and the provider has been notified that the request was granted.

Reappointment: Minimum of 6 cases for circumcision and 2 cases for frenulectomy every 24 months.

Pulmonology NP Patient Care Scope of Service

Central Line (10)
Thoracentesis (5)
Therapeutic Bedside Bronchoscopy (5)
Myocardial Oxygen Consumption Test; ACLS certification required (5)
Criteria: Documentation of previous training and current competence with minimum of three proctored cases for each procedure requested.
OR
New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the individual. Minimum number of proctored cases must be met as noted above.
Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been submitted to Medical Staff Services and the provider has been notified that the request was granted.
Pulmonology PICC Line Criteria: Documentation of successful completion of PICC training program. PICC Lines
Patient Care Scope of Service-Psychiatry
CORE
May order admission and treatment for psychiatric and Independence Center inpatient or observation. The admitting/attending psychiatrist will be responsible for the supervision of the APRN. And respond to requests for consultations on patients who are hospitalized in Medical/Surgical/ICU units on both east and west campuses.
Trauma NP Patient Care Scope of Service
Central Line (10)
Chest tube thoracostomy (5)
Therapeutic Bedside Bronchoscopy (5)
FAST Examination (5)
Criteria: Documentation of previous training and current competency with minimum of three proctored cases for each procedure requested.
OR
New graduate NPs new to their specialty will have a mentoring period, which will include observation, assisting the sponsoring physician or NP, then demonstration of competency under direct supervision to be determined by the physician or NP training the individual. Minimum number of proctored cases must be met as noted above.

Sponsoring physician must submit evidence of successful mentoring and support of independent practice, before the applicant performs these procedures independently. Providers may not perform procedures independently until documentation has been submitted to Medical Staff Services and the provider has been notified that the request was granted.

I understand that the expectation is patient safety and the delivery of high quality care and decision making shall be collaborative My sponsoring physician and I are responsible for all the care I provided in the Medical Center.		
Signature:	Date:	