



Privileges in Family Medicine

SAMPLE



Required Qualifications

Education/Training	Successful completion of an ACGME or AOA-accredited residency in family practice or foreign equivalent training. AND Current certification or active participation in the examination process leading to certification in Family Medicine by the American Board of Family Medicine or in by the American Osteopathic Board of Family Physicians or foreign equivalent training/board. OR Documentation or attestation of the management of general medicine problems for at least 100 inpatients or outpatients as the attending physician (or senior resident) during the past two years
Additional Credentialing Criteria (Initial and Reappointment)	In accordance with Hospital Sedation Policy and completion of the SHC sedation exam taken every 2 years Teaching appointment to work in SHC outpatient clinics Membership and privileges at LPCH to admit, treat patients 14 years old and younger
Clinical Experience (Initial)	
Fiberoptic sigmoidoscopy - with biopsy; Cervix - biopsy; Cervix - cryocautery; Colposcopy; Hemorrhoidal rubber banding; Newborn circumcision	10 cases for each privilege selected in the past two years - documentation required
Clinical Experience (Reappointment)	Minimum 25 Core cases required during the past 2 years Minimum 10 cases for each privilege selected required during the past 2 years - Fiberoptic sigmoidoscopy - with biopsy; Cervix - biopsy; Cervix - cryocautery; Colposcopy; Hemorrhoidal rubber banding; Newborn circumcision
FPPE	FPPE CRITERIA LISTED BELOW. FPPE WILL BE ASSIGNED BY THE SERVICE CHIEF DURING THE APPROVAL PROCESS Minimum 3 chart reviews for eah privilege selected- Core; All Special Privileges

Core Privileges

Request <input type="checkbox"/>	<i>Request all privileges listed below.</i> <i>Uncheck any privileges that you do not want to request.</i>	Service Chief Rec <input type="checkbox"/>
	Privileges included in the Core:	
<input type="checkbox"/>	Privileges to admit, evaluate, diagnose, consult, perform history and physical exam, and provide treatment for non- surgical patients without life-threatening complications.	<input type="checkbox"/>
<input type="checkbox"/>	Suture of uncomplicated lacerations	<input type="checkbox"/>
<input type="checkbox"/>	I & D abscess	<input type="checkbox"/>
<input type="checkbox"/>	Performance of simple skin biopsy or excision	<input type="checkbox"/>
<input type="checkbox"/>	Removal of non-penetrating corneal foreign body, foreign body from conjunctival sac, ear, nose, skin	<input type="checkbox"/>
<input type="checkbox"/>	Management of uncomplicated minor closed fractures and uncomplicated dislocations	<input type="checkbox"/>
<input type="checkbox"/>	Lumbar puncture	<input type="checkbox"/>
<input type="checkbox"/>	Anoscopy, I & D acute thrombosed hemorrhoid	<input type="checkbox"/>
<input type="checkbox"/>	Diaphragm fitting, Endometrial biopsy, IUD insertion and removal	<input type="checkbox"/>
<input type="checkbox"/>	Fiberoptic sigmoidoscopy - diagnostic only	<input type="checkbox"/>
<input type="checkbox"/>	Diagnostic and therapeutic paracentesis	<input type="checkbox"/>
<input type="checkbox"/>	Diagnostic thoracentesis	<input type="checkbox"/>
<input type="checkbox"/>	Aspiration of intra-, subcutaneous cysts, furuncles, etc.	<input type="checkbox"/>
<input type="checkbox"/>	Arthrocentesis, large joint, small joint	<input type="checkbox"/>
<input type="checkbox"/>	Therapeutic injection, large joint, small joint	<input type="checkbox"/>
<input type="checkbox"/>	Breast mass aspiration, breast cyst aspiration	<input type="checkbox"/>
<input type="checkbox"/>	Liquid nitrogen treatment warts, keratoses	<input type="checkbox"/>
<input type="checkbox"/>	Toe nail avulsion	<input type="checkbox"/>

Special Privileges

Description: Must also meet Required Qualifications for Core Privileges

Request <input type="checkbox"/>	<i>Request all privileges listed below.</i> <i>Uncheck any privileges that you do not want to request.</i>	Service Chief Rec <input type="checkbox"/>
<input type="checkbox"/>	Administration of Sedation	<input type="checkbox"/>
<input type="checkbox"/>	Treatment of patients in outpatient clinics at Stanford Hospital & Clinics	<input type="checkbox"/>
<input type="checkbox"/>	Admit, treat, evaluate or provide follow-up care for inpatients ages 14 years or younger	<input type="checkbox"/>
<input type="checkbox"/>	Fiberoptic sigmoidoscopy - with biopsy	<input type="checkbox"/>
<input type="checkbox"/>	Cervix - biopsy	<input type="checkbox"/>
<input type="checkbox"/>	Cervix - cryocautery	<input type="checkbox"/>
<input type="checkbox"/>	Colposcopy	<input type="checkbox"/>
<input type="checkbox"/>	Hemorrhoidal rubber banding	<input type="checkbox"/>
<input type="checkbox"/>	Newborn circumcision	<input type="checkbox"/>



<input type="checkbox"/>	
<input type="checkbox"/>	
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