



## Privileges in Psychiatry Service

**SAMPLE**



### Required Qualifications

<b>Education/Training Psychiatry</b>	Successful completion of an ACGME or AOA-accredited residency/fellowship in psychiatry or foreign equivalent training  <b>AND</b> Current certification or active participation in the examination process leading to certification in psychiatry by the American Board of Psychiatry & Neurology or the American Osteopathic Board of Neurology & Psychiatry or foreign equivalent training/board.
<b>Psychologists</b>	Successful completion of an APA accredited doctoral program in clinical or counseling psychology.  <b>AND</b> Successful completion of an APA accredited internship <b>AND</b> CA Psychology license <b>AND</b> Documentation or attestation of the provision of psychological services for at least 5 inpatients, outpatients or consultative service during the past two years.
<b>FPPE Chart Reviews</b>	FPPE CRITERIA LISTED BELOW. FPPE WILL BE ASSIGNED BY THE SERVICE CHIEF DURING THE APPROVAL PROCESS 5 chart reviews - Psychiatry Core; Psychology Core; Hypnotherapy; Biofeedback; Electroconvulsive therapy; Lumbar puncture; Sleep Studies; Rhinolaryngopharyngoscopy 3 chart reviews - Neuropsychological testing
<b>FPPE Observations</b>	1 observations - Neuropsychological testing 5 observations - Transcranial Magnetic Stimulation (TMS)

<b>Provide care on LPCH patients in specific areas of SHC</b>
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Request  <input type="checkbox"/>	<b><i>Request all privileges listed below.</i></b> <i>Uncheck any privileges that you do not want to request.</i>	Service Chief Rec <input type="checkbox"/>
	<b>Additional Request</b>	
<input type="checkbox"/>	ONLY provide care of patients in the SHC Emergency Department, ASC, Cath Lab, Cancer Center or Endo Unit - requires Active or Courtesy Status at LPCH	<input type="checkbox"/>

<b>Psychiatry Core Privileges</b>
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Request  <input type="checkbox"/>	<b><i>Request all privileges listed below.</i></b> <i>Uncheck any privileges that you do not want to request.</i>	Service Chief Rec <input type="checkbox"/>
	<b>Privileges include:</b>	
<input type="checkbox"/>	Privileges to admit, evaluate, diagnose, consult, perform history & physical, and provide treatment to patients presenting with mental, behavioral, or emotional disorders.	<input type="checkbox"/>
<input type="checkbox"/>	Consultation with physicians in other fields regarding mental, behavioral, emotional, and geriatric psychiatric disorders	<input type="checkbox"/>
<input type="checkbox"/>	Psychopharmacology for physicians	<input type="checkbox"/>
<input type="checkbox"/>	Providing individual, group and family therapy	<input type="checkbox"/>
<input type="checkbox"/>	Behavior modification	<input type="checkbox"/>
<input type="checkbox"/>	Consultation to the courts	<input type="checkbox"/>
<input type="checkbox"/>	Emergency psychiatry	<input type="checkbox"/>
<input type="checkbox"/>	Chemical dependency intervention and therapy	<input type="checkbox"/>

<b>Qualifications</b>
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<b>Renewal Criteria</b>	Minimum 12 Psychiatry Core cases required during the past 2 years
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**Psychology Core Privileges**

Request  <input type="checkbox"/>	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request.</i>	Service Chief Rec <input type="checkbox"/>
	<b>Privileges include:</b>	
<input type="checkbox"/>	Privileges to admit, evaluate, diagnose, consult, and provide treatment to patients presenting with mental, behavioral, or emotional disorders such as depression, anxiety, substance abuse, psychosis, developmental disabilities, sexual dysfunction, adjustment reactions.	<input type="checkbox"/>
<input type="checkbox"/>	Consultation with physicians in other fields regarding mental, behavioral, emotional, and geriatric psychiatric disorders	<input type="checkbox"/>
<input type="checkbox"/>	Providing individual, group and family therapy	<input type="checkbox"/>
<input type="checkbox"/>	Behavior modification	<input type="checkbox"/>
<input type="checkbox"/>	Consultation to the courts	<input type="checkbox"/>
<input type="checkbox"/>	Chemical dependency intervention and therapy	<input type="checkbox"/>
<input type="checkbox"/>	Administration of psychological tests	<input type="checkbox"/>

**Qualifications**

**Renewal Criteria**                      Minimum 12 Psychology Core cases required during the past 2 years

## Special Privileges

**Description:** Must also meet Required Qualifications for Core Privileges

Request	<b><i>Request all privileges listed below.</i></b> <i>Uncheck any privileges that you do not want to request.</i>	Service Chief Rec <input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>	Treatment of patients in outpatient clinics at Stanford Hospital & Clinics [CRITERIA - Teaching appointment through Stanford School of Medicine required.]	<input type="checkbox"/>
<input type="checkbox"/>	Admit, treat, evaluate or provide follow-up care for inpatients ages 14 years or younger [CRITERIA - Membership and privileges at LPCH]	<input type="checkbox"/>
<input type="checkbox"/>	Hypnotherapy [CRITERIA - Initial - Evidence of graduate school or post-graduate school training course in hypnosis; -AND- Membership in either: Division 30 of the American Psychological Association (this is the hypnosis division); -OR- Society for Clinical and Experimental Hypnosis -OR- Documentation of at least 5 supervised cases by someone with this privilege. Renewal - Minimum 5 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Neuropsychological testing [CRITERIA - Initial - CA Psychology license; 10 cases in past two years. Renewal - Minimum 10 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Biofeedback [CRITERIA - Initial - Certified by the Biofeedback Certification Institute of America. Renewal - Minimum 5 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Electroconvulsive therapy [CRITERIA - Initial - Documentation of at least 10 treatments to at least three patients during the previous 12 months -OR- Completion of training in the previous 12 months; Must have provided ECT treatment that includes: • Evaluation of the patient for treatment need and suitability; • Immediate post-treatment follow-up • Evaluation at completion of the patient's treatment course. Renewal - Minimum 20 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Lumbar puncture [CRITERIA - Initial - ACGME or OGME accredited residency training program or accredited fellowship program that included training in lumbar puncture- letter from program director required -OR- Completed hands-on training under supervision of a qualified physician preceptor- letter from preceptor required. Documentation of successful performance of at least 5 relevant cases in the previous 12 months. Renewal - Minimum 10 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Sleep Studies - No Age Limit [CRITERIA - Meeting Core Privilege criteria for psychiatry/psychology training or equivalency is not required. Initial - Board certification or active participation in the examination process leading to sleep medicine certification by the American Board of Sleep Medicine or authorized Board of the American Board of Medical Specialties. Qualifications reviewed by Medical Director of Sleep Medicine. Renewal - Minimum 200 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Rhinolaryngopharyngoscopy [CRITERIA - Initial - ACGME or OGME accredited residency training program or accredited fellowship program that included training in lumbar puncture- letter from program director required -OR- Completed hands-on training under supervision of a qualified physician preceptor- letter from preceptor required. Documentation of successful performance of at least 5 relevant cases in the previous 12 months. Renewal - Minimum 10 cases required during the past 2 years]	<input type="checkbox"/>
<input type="checkbox"/>	Transcranial Magnetic Stimulation (TMS) [CRITERIA - Initial - A. Medical staff to complete a minimum of 10 supervised TMS treatments by the Medical Director and/or other qualified psychiatry personnel with this privilege (parenthetically Medical Director, Psychiatric Interventional Therapies or designee). B. Medical staff to successfully complete TMS competency exam and review with the Medical Director, Psychiatric Interventional Therapies. C. The TMS/ECT Committee will review, discuss and approve potential candidate for credentialing. D. The implementation process: It is the responsibility of the Medical Director, Psychiatric Interventional	<input type="checkbox"/>

	Therapies to notify the appropriate parties of success accreditation completion. Renewal - Minimum 5 cases required during the past 2 years]	
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