

Delineation Of Privileges

Critical Care Medicine

Provider Name:

Privilege	Requested	Granted
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VENTURA COUNTY MEDICAL CENTER CRITICAL CARE PRIVILEGING CRITERIA

Initial Criteria:

- a. Subspecialty board certification in critical care medicine by the ABMS or AOA, or have completed a critical care fellowship in the past 3 years **or**;
- b. Completion of a Fundamental Critical Care Support course within the previous 24 months and documentation of the provision of care to at least 50 patients in a critical care unit during the past 12 months as an attending physician or fellow.
- c. Current ACLS

Evaluation Criteria:

A minimum of 5 Core cases reviewed

Renewal Criteria:

- a. Documentation of a minimum of 50 Core cases during the previous 24 months **AND**
- b. A minimum of 20 hours of category I continuing medical education in critical care completed within the previous 24 months
- c. Current ACLS

CRITICAL CARE CORE PRIVILEGES

Admit, evaluate, diagnose, perform history and physical exam, provide treatment or consultative services to adult patients in need of critical care at Ventura County Medical Center. Core privileges include the following high-risk, high-volume, and problem-prone procedures, which are commonly performed by the intensivist in the critically ill patient:

Airway maintenance, including intubation	—	—
Management of complex airways using advanced airway techniques	—	—
Emergency tracheostomy / cricothyroidotomy	—	—
Ventilator management	—	—
Management of patients on vasopressors	—	—
Insertion and management of arterial and venous catheters	—	—
Interpretation and use of hemodynamic recording systems	—	—
Diagnostic and therapeutic paracentesis	—	—
Diagnostic and therapeutic thoracentesis	—	—
Tube thoracostomy / inclusive of pigtail catheters	—	—
Lumbar puncture	—	—
Use of ultrasound guidance for procedures	—	—
Electrical cardioversion	—	—

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Critical Care Medicine

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SANTA PAULA HOSPITAL CRITICAL CARE PRIVILEGING CRITERIA

Initial Criteria:

- a. Subspecialty board certification in critical care medicine by the ABMS or AOA, or have completed a critical care fellowship in the past 3 years **or**;
- b. Completion of a Fundamental Critical Care Support course within the previous 24 months and documentation of the provision of care to at least 50 patients* in a critical care unit during the past 12 months as an attending physician or fellow.
- c. Current ACLS

** Physicians not eligible based on the initial criteria may be granted privilege with a defined focused professional practice evaluation period of a minimum of 6 months that will include concurrent (upon admission and at a minimum every 24 hours thereafter while patient remains in ICU) consultation, discussion and review of all critical care cases with a physician that holds critical care privileges.*

Evaluation Criteria:

A minimum of 5 Core cases reviewed

Renewal Criteria:

- a. Documentation of a minimum of 20 Core cases* during the previous 24 months **AND**
- b. A minimum of 20 hours of category I continuing medical education in critical care completed within the previous 24 months
- c. Current ACLS

** Physicians not meeting the renewal volume criteria may be granted privilege with additional evaluation requirements, based on documentation of clinical activity and patient acuity*

CRITICAL CARE CORE PRIVILEGES

Admit, evaluate, diagnose, perform history and physical exam, provide treatment or consultative services to adult patient in need of critical care at Santa Paula Hospital. Core privileges include the following high-risk, high-volume, and problem-prone procedures, which are commonly performed by the intensivist in the critically ill patient:

Airway maintenance, including intubation	—	—
Management of complex airways using advanced airway techniques	—	—
Emergency tracheostomy / cricothyroidotomy	—	—
Ventilator management	—	—
Management of patients on vasopressors	—	—
Insertion and management of arterial and venous catheters	—	—
Interpretation and use of hemodynamic recording systems	—	—
Diagnostic and therapeutic paracentesis	—	—
Diagnostic and therapeutic thoracentesis	—	—
Tube thoracostomy / inclusive of pigtail catheters	—	—
Lumbar puncture	—	—
Use of ultrasound guidance for procedures	—	—
Electrical cardioversion	—	—

SPECIAL PRIVILEGES

(must also meet criteria above)

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Adult Moderate or Deep Sedation

Initial criteria:

- Current ACLS
- Completion of Adult Sedation Module (minimum score of 80%)

Evaluation criteria:

A minimum of 3 cases evaluated

Renewal criteria:

- Current ACLS
- Completion of Adult Sedation Module (minimum score of 80%)
- A minimum of 6 cases with the previous 24 mos*

*if renewal criteria not met, a minimum of 1 case (first case) must be evaluated

Acknowledgment 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 the Ventura County Medical Center and/or Santa Paula Campus Hospital. I understand that 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. I am willing to provide documentation of my current competence for the requested privileges.

Applicant's Signature: _____ Date: _____

TEMPORARY PRIVILEGE APPROVAL

Department Chief's Signature: _____ Date: _____

ICU Director's Signature: _____ Date: _____

Evaluator Assignment: _____

☐ PROVISIONAL ☐ RENEWAL APPROVAL

Chief, Department of Medicine	Date
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ICU Director	Date
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