# Qualifications

To be eligible to apply for clinical core privileges in family medicine, the initial applicant must meet the following criteria

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in family medicine

#### or

Current certification or active participation in the examination process [with achievement of certification within 3 years of initial appointment] leading to certification in family medicine by the American Board of Family Medicine or the American Osteopathic Board of Family Physicians

#### and

Current active licensure to practice as a physician in the State of Texas

#### **Required previous experience**

Applicants for initial appointment must be able to demonstrate current competence and provision of care, reflective of the scope of privileges requested, or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship in a clinical setting within the past 12 months.

#### **Reappointment requirements**

To be eligible to renew core privileges in family medicine, the applicant must have current demonstrated competency and quality, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

# Directions

#### Applicant

Check off the "Requested" box for each privilege requested. Applicants have the burden of producing information deemed adequate by Lone Star Circle of Care for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

#### **Family Practice Medical Director**

Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

#### **Other Requirements**

Note that privileges granted may only be exercised at the site(s) and setting(s) that have the appropriate equipment, license, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in Lone Star Circle of Care policy.

This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

# Applicant

Privileges		OFFICE USE ONLY
	Initial Appointment	Effective from://
	Reappointment	Effective to:///
0:1		

# Sites

The applicant may perform granted privileges at any of the Community Health Center clinics, incorporated as Lone Star Circle of Care, with the provision that privileges only be exercised when appropriate equipment, license, staff, and other support are available.

# **Core Privileges**

# Family Medicine Core Privileges

### □ Requested

Evaluate, diagnose, treat, and provide consultation to adolescent and adult patients with illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with policy regarding emergencies. The core privileges in this specialty include the procedures on the procedure list and such other procedures that are extensions of the same techniques and skills.

# **Pediatric Core Privileges**

• Criteria

Must qualify for and be granted privileges in family medicine plus

#### • Required previous experience

Demonstrated current competence and evidence of the provision of care, reflective of the scope of privileges requested, to at least 10 pediatric patients in the past 12 months.

#### • Maintenance of privilege

Demonstrated current competence and evidence of the provision of care to at least 25 pediatric patients in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

#### □ Requested

Evaluate, diagnose, and treat pediatric patients up to the age of 18 with common illnesses, injuries, or disorders. This includes the care of the normal newborn as well as the uncomplicated premature infant equal to or greater than 36 weeks gestation. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with policy regarding emergencies. The core privileges in this specialty include the procedures on the procedure list and such other procedures that are extensions of the same techniques and skills.

# **Gynecology Core Privileges**

### Criteria

Must qualify for and be granted privileges in family medicine plus

#### • Required previous experience

Demonstrated current competence and evidence of provision of care, reflective of the scope of privileges requested, to at least 10 gynecologic inpatients in the past 12 months.

### • Maintenance of privilege

Demonstrated current competence and evidence of provision of care to at least 25 gynecologic patients in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

### □ Requested

Evaluate, diagnose, treat, and provide consultation to post-pubescent female patients with injuries and disorders of the female reproductive system and the genitourinary system. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with policy regarding emergencies. The core privileges in this specialty include the procedures on the procedure list and such other procedures that are extensions of the same techniques and skills.

# **Geriatric Medicine Core Privileges**

### • Applicable

When a family medicine physician treats geriatric patients only

### • Criteria

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in either family or internal medicine

#### or

Current subspecialty certification or active participation in the examination process [with achievement of certification within 3 years of initial granting of privileges] leading to subspecialty certification in geriatric medicine by the American Board of Internal Medicine, or the American Board of Family Medicine, or a Certificate of Added Qualifications in Geriatric Medicine by the American Osteopathic Board of Family Physicians.

#### • Required previous experience

Applicants for initial appointment must be able to demonstrate provision of care, reflective of the scope of privileges requested, for at least 24 patients as the attending practitioner during the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship in a clinical setting within the past 12 months.

#### • Maintenance of privilege

Current demonstrated competence and an adequate volume of experience (50 patients) with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

#### □ Requested

Evaluate, diagnose, treat, and provide consultation to older adult patients with illnesses and disorders that are especially prominent in the elderly or have different characteristics in the elderly. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with policy regarding emergencies. The core privileges in this specialty include the procedures on the procedure list and such other procedures that are extensions of the same techniques and skills.

# **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. If you wish to exclude any procedures, please strike through those procedures that you do not wish to request, initial, and date.

# General

- 1. Arthrocentesis and joint injection
- 2. Burns, superficial and partial thickness
- 3. Chronic ventilator management
- 4. I & D abscess
- 5. Local anesthetic techniques
- 6. Manage uncomplicated minor closed fractures and uncomplicated dislocations
- 7. Perform history and physical exam
- 8. Perform simple skin biopsy or excision
- 9. Peripheral nerve blocks
- 10. Placement of anterior and posterior nasal hemostatic packing
- 11. Remove non-penetrating foreign body from the eye, nose, or ear
- 12. Suture uncomplicated lacerations
- 13. Blood Glucose Point of Care Testing
- 14. Hemoglobin A1c Point of Care Testing
- 15. Influenza Point of Care Testing
- 16. Mononucleosis Point of Care Testing
- 17. Pregnancy Point of Care Testing
- 18. RSV Point of Care Testing
- 19. Strep A Point of Care Testing
- 20. Urinalysis Point of Care Testing
- 21. Fecal Occult Blood Point of Care Testing
- 22. Pertussis Point of Care Testing

# Pediatrics

- 1. I & D abscess
- 2. Manage uncomplicated minor closed fractures and uncomplicated dislocations
- 3. Perform history and physical exam
- 4. Perform simple skin biopsy or excision
- 5. Remove non-penetrating corneal foreign body
- 6. Suture uncomplicated lacerations
- 7. Blood Glucose Point of Care Testing
- 8. Hemoglobin A1c Point of Care Testing
- 9. Influenza Point of Care Testing
- 10. Mononucleosis Point of Care Testing
- 11. Pregnancy Point of Care Testing
- 12. RSV Point of Care Testing
- 13. Strep A Point of Care Testing
- 14. Urinalysis Point of Care Testing
- 15. Fecal Occult Blood Point of Care Testing
- 16. Pertussis Point of Care Testing

# Gynecology

- 1. Biopsy of cervix, endometrium
- 2. Colposcopy
- 3. Cryosurgery/cautery for benign disease
- 4. Diagnostic cervical dilation and uterine curettage
- 5. Excision/biopsy of vulvar lesions
- 6. Incision and drainage of Bartholin duct cyst or marsupialization
- 7. Insertion of intrauterine devices
- 8. Perform history and physical exam
- 9. Removal of foreign body from vagina
- 10. Suturing of uncomplicated lacerations

- 11. Uterine curettage following incomplete abortion
- 12. Blood Glucose Point of Care Testing
- 13. Hemoglobin A1c Point of Care Testing
- 14. Influenza Point of Care Testing
- 15. Mononucleosis Point of Care Testing
- 16. Pregnancy Point of Care Testing
- 17. RSV Point of Care Testing
- 18. Strep A Point of Care Testing
- 19. Urinalysis Point of Care Testing
- 20. Fecal Occult Blood Point of Care Testing
- 21. Pertussis Point of Care Testing

### **Geriatric Medicine**

- 1. Apply the general principles of geriatric rehabilitation, including those applicable to patients with orthopedic, rheumatologic, cardiac, and neurologic impairments
- 2. Assess patient to includes medical, affective, cognitive, functional status, social support, economic, and environmental aspects related to health
- 3. Manage areas of special concern such as falls and incontinence
- 4. Manage aspects of preventive medicine, including nutrition, oral health, exercise, screening, immunization, and chemoprophylaxis against disease
- 5. Manage the appropriate interdisciplinary coordination of the actions of multiple health professionals, including physicians, nurses, social workers, dieticians, and rehabilitation experts, in the assessment and implementation of treatment
- 6. Perform history and physical exam
- 7. Recognize and evaluate cognitive impairment
- 8. Treat and prevent iatrogenic disorders
- 9. Blood Glucose Point of Care Testing
- 10. Hemoglobin A1c Point of Care Testing
- 11. Influenza Point of Care Testing
- 12. Mononucleosis Point of Care Testing
- 13. Pregnancy Point of Care Testing
- 14. RSV Point of Care Testing
- 15. Strep A Point of Care Testing
- 16. Urinalysis Point of Care Testing
- 17. Fecal Occult Blood Point of Care Testing
- 18. Pertussis Point of Care Testing

# **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 designated Lone Star Circle of Care sites, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by Lone Star Circle of Care 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 situation my actions are governed by the applicable section of the appropriate policies or related documents.

Signature
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Date

# **Service Line Medical Director Recommendation**

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and make the following recommendation(s):

- □ Recommend all requested privileges
- □ Recommend requested privileges with the changes as noted below
  - The following privilege(s) are granted with conditions and/or modifications:

	Privilege		Condition/Modification				
1.							
2.							
3.							
4.							
5.							
The following privilege(s) are not granted:							
	Privilege		Explanation				
1.							
2.							
3.							
				_			
5.							
Family Practice Medical Director Signature			Date				
OFFICE USE ONLY							
Medical Executive Committee Action:				Date:			
Board of Directors Action:				Date:			