



Delineation of Privileges
 Department of Medicine
PHYSICAL MEDICINE AND REHABILITATION

Name: _____

MINIMUM QUALIFICATIONS FOR PRIVILEGES:

- Practitioners must be duly licensed to practice in the State of Florida and hold a valid DEA certificate.
- Successful completion of an ACGME or AOA-accredited residency/fellowship in physical medicine and rehabilitation.
- Current certification or active participation in the examination process leading to certification in Physical Medicine and Rehabilitation by the American Board of Medicine & Rehabilitation or the American Osteopathic Board of Medicine & Rehabilitation.

CATEGORY I: CORE PRIVILEGES

Core Privileges <i>include:</i>	Requested	Approved
1. Write orders/progress notes in patient charts, request/provide consultation, and render any care in life threatening emergency.		
2. Diagnosis and management of patients with neuromuscular and musculoskeletal disorders.		
3. Core procedures include electrodiagnostic procedures, facet joint injections, nerve and motor point blocks.		

CATEGORY II: SPECIAL PROCEDURES

Advanced Procedures <i>which may require additional training/experience</i>	Requested	Approved
1.		
2.		
3.		
4.		
5.		

I hereby certify that I possess the training, skill, experience, and current competency for the clinical privileges I have requested and pledge to practice within the limitations and scope of these privileges. Category II privileges cannot be requested or approved without requesting and approving Category I Core privileges.

 Physician Signature

 Date

APPROVAL:

 Chief of Medicine

 Date