

Delineation of Privileges

Name: _____ Dept. _____

CATEGORY I - PRIVILEGES			
Category I Core Privileges include:	Currently Approved	Requested	Approved
<p>Physicians seeking Category I Sedation Privileges must meet Bylaws requirements for board certification and must provide documentation of training and/or experience as evidenced by the following methods: <i>(Check all that apply)</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Provide evidence of moderate sedation/analgesia training during residency, or at least 10 cases performed within the last 12 months; OR <input type="checkbox"/> Review the currently recommended educational video that addresses updated practice guidelines for sedation and analgesia by non-anesthesiologists; AND/OR <input type="checkbox"/> Have current certification in ACLS or PALS and have current board certification in Emergency Medicine, Neonatology, or Internal Medicine. <ol style="list-style-type: none"> 1. Order diagnostic and therapeutic services; write orders and progress notes; request and provide consultations; render any care in a life threatening emergency. 2. Minimal Sedation (A drug-induced state during which patient responds normally to verbal commands. Although cognitive function and coordination may be impaired, ventilatory and cardiovascular functions are unaffected. This includes patients who receive low doses of sedatives/opioids for the purpose of pain or anxiety control.) 3. Moderate Sedation (Conscious sedation is a drug-induced state during which patients respond normally to verbal commands. No interventions are required to maintain a patent airway and spontaneous ventilation is adequate. Cardiovascular functions usually maintained.) 			
CATEGORY II - PRIVILEGES			
Category II Core Privileges include:	Currently Approved	Requested	Approved
<p>Physicians seeking Category II Sedation Privileges must meet Bylaws requirements for board certification and must provide documentation of training and/or experience as evidenced by the following methods:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Provide evidence of deep sedation/analgesia training and advanced airway management training during residency AND/OR <input type="checkbox"/> Have current certification in ACLS or PALS and (if physician) have current board certification in Emergency Medicine or Pulmonology. <ol style="list-style-type: none"> 1. Order diagnostic and therapeutic services; write orders and progress notes; request and provide consultations; render any care in a life threatening emergency. 2. Deep Sedation/Analgesia (A drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require assistance in maintaining a patent airway and ventilation may be inadequate. Cardiovascular function is usually maintained.) 			
Privileges for Specification Medications:	Currently Approved	Requested	Approved
Pentothal			
Brevital			
Ketamine			
Amidate			
Diprivan			
Other - <i>specify:</i> _____			

Name: _____ Dept. _____

Practitioners requesting Moderate and/or Deep Sedation/Analgesia privileges shall possess the ability to rescue patients from deep sedation, to manage a compromised airway, and to provide adequate oxygenation and ventilation. Each applicant must follow ASA guidelines for scoring and administering sedation/analgesia.

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.

I also certify that I have met the requirements as outlined above and agree to comply with the current Hospital Policy and Procedure for Sedation/Analgesia.

Physician's Signature: _____ Date: _____.

APPROVAL:

- Approved as requested
- Denied
- Modified as follows: _____

Comments: _____

*Chief of Anesthesia*_____
Date