

## **Emergency Medicine**

**Basic Education:** M.D. or D.O.

### **Minimal Formal Training**

**And Experience:** Completion of an ACGME or AOA-approved post-graduate training program in emergency medicine or a minimum of four (4) years in practice in Emergency Medicine and completion of requirements to become ABEM or AOBEM-certified.  
Demonstration of active practice for at least two (2) years in an ED with a census exceeding 15,000 patient visits annually, or

Completion of an ACGME or AOA-approved post-graduate training program in family medicine, general surgery or general internal medicine. Certification by the applicable board and ACLS, or ATLS training. Demonstration of at least two (2) years experience in general emergency medicine within the last three (3) years in an ED with a volume of more than 15,000 patient visits annually, or

One year of ACGME or AOA-approved post-graduate training in a general primary care specialty (Family Practice, General Surgery, or Internal Medicine) with board certification in emergency medicine by the ABEM or AOBEM and active practice in Emergency Medicine within the last two (2) years with a volume of more than 15,000 patient visits annually. Certification by the applicable board and ACLS, or ATLS training. (Unless "grandfather" status obtained)

A physician may be deferred from maintaining ACLS and ATLS certification providing that the physician is Residency trained or Board Certified in Emergency Medicine, the physician has practiced at least five (5) years in a high volume emergency department with at least 24,000 visits per year that involves management of cardiac cases and trauma; the physician should obtain at least 100 hours of ACEP certified CME every three (3) years.

**Core Privileges:**

Ability to assess, work up, and provide initial treatment to patients who present to the ED with any symptom, illness, injury or condition and provide services necessary to ameliorate minor illnesses or injuries, stabilize patients with major illnesses or injuries and to assess all patients to determine if additional care is necessary. Privileges do not include long-term care of patients on an inpatient basis. No privileges to perform scheduled elective procedures with the exception of procedures performed during routine emergency follow-up visits. Consultation is required for all patients with major trauma, cardiac or psychiatric illness and for patients admitted to the institution.

Other privileges requested for which you have current clinical competency may be listed below. Documentation of training and/or experience must be provided for any special privileges requested. I understand that by making this request, I am bound by the applicable laws and policies of the Medical Center and hereby stipulate that I meet the minimum threshold criteria for this request.

_____	_____
_____	_____
_____	_____

I understand that it is my obligation to notify the President of the Medical Staff of any procedure or mode of medical care in which I might engage that is not listed. I certify to the best of my knowledge, I am qualified and have professional liability insurance coverage for practice within the scope of privileges requested.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **Emergency Medicine/Urgent Care**

**Basic Education:** M.D. or D.O.

### **Minimal Formal Training**

**And Experience:** Completion of an ACGME or AOA-approved post-graduate training program in primary care or emergency medicine or a minimum of four (4) years experience working full-time in an Urgent Care setting. Must have completion of requirements to become ABEM or AOBEM-certified. or

Completion of an ACGME or AOA-approved post-graduate training program in family medicine, general surgery or general internal medicine. Certification by the applicable board and ACLS. A physician may be deferred from maintaining ACLS certification providing: the physician is Residency trained or Board Certified in Emergency Medicine. The physician has practiced at least five (5) years in a high volume emergency department with at least 24,000 visits per year that involves management of cardiac and trauma cases. The physician obtains at least 100 hours of ACEJP certified CME every three (3) years.

**Core Privileges:** The ability to assess, work up, and provide initial treatment to patients who present to the ED with any symptom, illness, injury or condition and provide services necessary to ameliorate minor illnesses or injuries, stabilize patients with major illnesses or injuries and to assess all patients to determine if additional care is necessary. Privileges do not include long-term care of patients on an inpatient basis. No privileges to perform scheduled elective procedures with the exception of procedures performed during routine emergency follow-up visits. Consultation is required for all patients with major trauma, cardiac or psychiatric illness and for patients admitted to the institution.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**EMERGENCY MEDICINE PROCEDURES  
CHECK PROCEDURES REQUESTED  
FOR REAPPOINTMENT**

<b>Privileges requested</b>	<b>Minimum formal training</b>	<b>Reappointment criteria</b>
Conscious Sedation <input type="checkbox"/>	Successful completion of an accredited residency of at least three year's duration. (Unless "grandfather" rule applies) <i>Note: If the applicant's training did not include at least four weeks of anesthesia training (including IV sedation, indications, contraindications, pre-anesthesia assessment, intra-operative care, procedure monitoring, and post-anesthesia care), the applicant must demonstrate successful completion of an accredited training sequence involving both didactic and practical components.</i>	Demonstrates clinical competency through Performance Improvement/ Clinical Outcome activities.
Thrombolytic therapy for acute myocardial infarction <input type="checkbox"/>	Successful completion of an accredited residency in internal medicine, emergency medicine, cardiology, or critical medicine. (Unless grandfather rule applies)	Demonstrates clinical competency through Performance Improvement/ Clinical Outcome activities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date