

Heart Hospital of New Mexico
Medicine Department
Emergency Medicine

Delineation of Core Privileges

ELIGIBILITY CRITERIA: To be able to request these clinical privileges, the applicant must meet the criteria below:

1. **MD, DO**
2. **Completed additional education/training as follows:**
 - Completion of an accredited Residency Program in Emergency Medicine, Internal Medicine, Surgery or Family Practice, and
 - Board Certified in Emergency Medicine, or
 - Board Eligible in Emergency Medicine

NEW APPLICANTS MUST complete board certification within 2 years of application/approved Medical Staff membership.

CORE I EMERGENCY PHYSICIANS WORK INDEPENDENTLY IN THE EMERGENCY DEPARTMENT

3. **Be able to secure clinical references as outlined in the Policy On Appointment, Reappointment and Clinical Privileges of the Medical Staff of the Heart Hospital of New Mexico.**

Emergency Medicine Core I Privileges

Emergency Medicine CORE I privileges allows the practitioner to work independently in the Emergency Department.

A representative, but of necessity not complete list of EMERGENCY MEDICINE CORE I procedures is stated below. It is assumed that other procedures and problems of similar complexity will fall within the identified privileges.

Minimum Criteria of 200 (Combined) Emergency Medicine Core I procedures within two years (this criteria can also be met by documentation from other hospital affiliations).

CORE I Procedures

- Cardiac Pacing-Transvenous
- Central Line/Emergency Swan Ganz Catheter Placement
- I&D of Abscess: skin, felon, paronychia, perianal, Bartholin cyst
- Laryngoscopy: fiberoptic
- Ocular Tonometry, slit lamp eval
- Oxygen Therapy, initial ventilation settings
- Thoracentesis
- Transabdominal Bladder Aspiration
- Anesthesia: Local, Digital, and Dental
- Arterial Blood Gas, draw and interpretation and 3 degree)
- Cannulation of Peripheral & Central Veins
- Cardiac Pacing - External
- Change Gastrostomy Tube
- Moderate Sedation
- Emergent Fracture/Dislocation Reduction and Immobilization
- Excision of Sebaceous Cyst
- conjunctiva, ear-canal, nose, rectum, vagina, pharynx, hypopharynx
- Intraosseous Needle Placement
- Laryngoscopy: direct, indirect
- Nasal Epistaxis: cautery, anterior/posterior packing
- Spinal Immobilization
- Venous Cut Down
- Emergency management of complicated life-threatening arrhythmias
- Emergency management of cardiogenic shock
- asthmaticus
- Emergency management of ketoacidosis and diabetes
- accidents
- Emergency management of electrolytes and acid-base imbalance
- catheter
- Suture debridement of lacerations of face, lips, ears and mucous membranes
- Suture debridement of lacerations of vagina
- hands
- Burn care and debriding
- Department)
- Cricothyroidotomy
- Emergent Rapid Sequence Intubation
- Joint Aspiration
- Lumbar Puncture-Adult/Pediatric
- Oral and Nasal Endotracheal
- Peritoneal Lavage
- Tracheostomy Tube Change
- Thrombosed Hemorrhoid Evacuation
- Anoscopy
- Burn: debridement, repair, dressing (1, 2,
- Cardiac Defib & Cardioversion
- Change Cystostomy Tube
- Closed Heart Massage
- Emergency Delivery of the Newborn
- Emergent Tube Thoracostomy
- Foreign Body Removal: skin, cornea,
- Gastric Lavage
- Laceration: debridement, repair, dressing
- Nail Trephination: removal, repair
- Oral & Nasal Endotracheal Intubation
- Transurethral Bladder Catheterization
- Initial interpretation of EKG's
- Emergency management of status
- Emergency management of cerebrovascular
- Emergency insertion of pulmonary artery
- Suture and debridement of lacerations of
- Emergency thoracotomy (in Emergency