

LA CLINICA DE FAMILIA

INTERNAL MEDICINE REQUEST FOR PRIVILEGES

Clinical privileges with La Clinica de Familia, Inc. shall be granted to members of the Medical Staff who are board certified, board eligible, or board prepared in Internal Medicine. Specific clinical privileges are requested below.

Provider's Name: _____

| Request | Verified | Approved | Not Approved | PROCEDURES AND SERVICES | Request | Verified | Approved | Not Approved | PROCEDURES AND SERVICES |
|---------|----------|----------|--------------|---|---------|----------|----------|--------------|--|
| | | | | DIAGNOSTIC | | | | | SURGERY CONT. |
| | | | | GENERAL | | | | | Evacuation of thrombosed external hemorrhoid |
| | | | | Routine physical examination | | | | | Wound dressing |
| | | | | History and physical examination | | | | | Ingrown toenail removal |
| | | | | Interpretation of laboratory data | | | | | DERMATOLOGY |
| | | | | Preliminary interpretation of radiographs | | | | | Treatment of simple lesions, acne, etc. and superficial skin lesions |
| | | | | Preliminary interpretation of EKGs | | | | | Punch biopsy |
| | | | | Cardiopulmonary resuscitation (basic life support) | | | | | Cryotherapy of superficial lesions |
| | | | | Life threatening emergency. At a time of a clinical emergency any practitioner may render whatever he believes to be indicated. | | | | | Shave biopsy |
| | | | | OB/GYN | | | | | TREATMENT |
| | | | | Provide family planning counseling | | | | | OB/GYN |
| | | | | Prescribe oral contraceptives | | | | | Treat Vaginitis |
| | | | | | | | | | MEDICINE: TREATMENT OF UNCOMPLICATED |
| | | | | PROCEDURE | | | | | Allergy |
| | | | | OB/GYN | | | | | Arthritis |
| | | | | Perform PAP smears | | | | | Cardiac diseases |
| | | | | Remove IUD's | | | | | Collagen diseases |
| | | | | Bartholin's cyst/ abscess I&D | | | | | Gastrointestinal diseases |
| | | | | ANESTHESIOLOGY | | | | | Hepatic diseases |
| | | | | Local infiltration and minor nerve blocks | | | | | Metabolic/Endocrine diseases |
| | | | | OPHTHALMOLOGY | | | | | Neurological diseases |
| | | | | Removal of foreign bodies on cornea | | | | | Pulmonary diseases |
| | | | | Eye irrigation | | | | | Renal Diseases |
| | | | | GASTROINTESTINAL | | | | | Routine Physical Examination |
| | | | | Anuscopy | | | | | Hematological diseases |
| | | | | Pilonidal cyst/ Abscess I&D | | | | | OPHTHALMOLOGY |
| | | | | ORTHOPEDICS | | | | | Treatment of conjunctivitis |
| | | | | Tigger point injection | | | | | Treatment of corneal abrasions |
| | | | | Ankle taping | | | | | ORTHOPEDICS |

