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| **Figure 4.12** | **Language for Emergency Privileges** |
| There are specific circumstances in which emergency privileges are granted to a practitioner. These circum- stances are restrictive in order to discourage medical staffs from employing emergency privileges when doing so would be expedient but not necessary. In these situations, MSPs are advised to follow their privileging processes for non-applicants.  An emergency is defined as a condition or set of circumstances in which any delay in administering treatment would endanger a patient’s life or increase the risk of serious harm.  All emergency privileges must be approved by the CEO or authorized designee on the recommendation of the [medical staff president/chief of staff] or authorized designee. A licensed independent practitioner (LIP) exercising emergency privileges shall seek appropriate consultation to the degree reasonable considering the circumstances.  The LIP must present a valid government-issued photo identification from a state or federal agency (e.g., driver’s license or passport) and at least one of the following:  » A current photo hospital ID card that clearly identifies professional designation  » A current license to practice medicine/surgery  » Primary source verification of the license  In addition, attestation (peer evaluation) from a physician with firsthand knowledge of the LIP’s clinical abilities is required.  When the emergency situation no longer exists, the patient shall be assigned to an appropriate member of the medical staff who holds privileges appropriate to address the patient’s medical conditions. | |