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| **Figure 4.14** | | **Credentials Committee Referrals Table** | | | | |
| **Initial Requests for Medical Staff Membership and Clinical Privileges** | | | | | | |
| **Name** | **Category** | | **Specialty, Service**  **Line** | **Documents** | **Action** | **Notes** |
| New Applicant, MD | 1 | | Resident/University  Hospital privileges |  | Vote |  |
| New Applicant, DO | 1 | | Resident/University  Hospital privileges |  | Vote | Pending licensure |
| New Applicant, MD | 1 | | Pulmonology/CC |  | Vote | Locum, temp priv |
| New Applicant, MD | 1 | | Teleradiology |  | Vote | Temp priv |
| New Applicant, MD | 2 | | Neurology |  | Vote | Locum  [Include relevant information here that makes this applicant a Category 2, such as:]  Malpractice cases with payments: [dates and amounts]  Actions: Dr. B. has reviewed and would like to see if New Ap- plicant works out. Dr.  B. will observe close- ly for months and then reevaluate; Dr. C. agrees with this plan.  Additional FPPE also required for .  Dr. A. will observe. |

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| **Figure 4.14** | | **Credentials Committee Referrals Table (cont.)** | | | | |
| **Reappointment Requests for Medical Staff Membership and Clinical Privileges** | | | | | | |
| **Name** | **Category** | | **Specialty, Service**  **Line** | **Documents** | **Action** | **Notes** |
| None |  | |  |  |  |  |
| Category 1: Clean application (no issues, negative references, problems) Category 2: One to two issues  Category 3: More than two issues | | | | | | |
| **Status Changes** | | | | | | |
| **Status** | **Name** | | | | **Action** | **Notes** |
| To Inactive | Current Staff Member, MD | | | | For informa-  tion |  |
| FPPE Complete— No Issues | Physician E, MD  Physician F, MD Physician assistant W, PA | | | | For informa- tion |  |
| Physician G FPPE Plan Amendment | After discussion with administration and Dr. G., Dr.  H. has decided he would like to complete all three weeks of Dr. G.’s proctoring due to cost and billing issues. Dr. H. also feels he will be able to help Dr.  G. “fit in” with the unit and ICU nursing staff better  than locum providers. | | | | Vote |  |
| Change Status/ Privileges | Physician I, MD—Add polysomnography privileges. | | | | Vote | Board-certified in sleep medicine but no recent volume data—Dr. H. will proctor first 20  cases. |

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| **Figure 4.14** | | **Credentials Committee Referrals Table (cont.)** | | |
| **Form Revisions** | | | | |
| **Revisions** | **Name** | | **Action** | **Notes** |
| Privilege Form Revisions | Radiology: Update criteria; move cardiac CT to core. | | Vote | Attached |
|  | General Surgery: Delete HALO procedure. | | Vote | Attached |
|  | Emergency: Remove fascia block placement | | Vote | Attached |
|  | Certified Nurse Midwife: Delete redundancies on  lists. | | Vote | Attached |
|  | Otolaryngology: Update list to specify balloon sinuplasty. | | Vote |  |
|  | Obstetrics and Gynecology, CV surgery, Neurol- ogy, Pulmonology; Wound Care: Remove CME requirements, as they are already required in the medical staff bylaws. | | Vote |  |
| Medical Staff Rules | Add: Signature stamps may not be used in the  medical record. | | Vote | Attached |
| Medical Staff Policies | Leadership Development: Defer to corporate policy regarding funding/reimbursement.  Credentialing Fees and Dues: Revise to increase new applicant initial fee from $400 to $600.  Ongoing Practitioner Performance Review: Routine review; no changes.  Physician Mentoring: NEW.  Practicing Within the Scope of Privileges Granted: NEW. | | Vote | Attached |
| Medical Staff Quality Committee Annual  Report | For information | | Vote | Attached |