



NURSE PRACTITIONER (ACNP) – ACUTE CARE CLINICAL PRIVILEGES

Name: _____ Date: _____

- Initial appointment
- Reappointment

Applicant. Check off the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, current clinical activity, and other qualifications, and for resolving any doubts related to qualifications for requested privileges.

Other requirements

- Note that privileges granted may be exercised only at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital and/or department policy.
- This document is focused on defining the qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR ACUTE CARE NURSE PRACTITIONER (ACNP)

To be eligible to apply for clinical privileges as a nurse practitioner (NP) in critical care, the applicant must meet the following criteria:

Completion of a master’s, post-master’s, or doctorate from an NP program accredited by the Commission on the Collegiate of Nursing Education (CCNE) or the National League for Nursing Accrediting Commission (NLNAC) with emphasis on the NP’s specialty area

AND

Current certification by the American Nurses Credentialing Center or an equivalent body

AND

Current active licensure to practice as an advanced practice registered nurse in the NP category in the State of Mississippi

AND

Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the governing body,

AND

[Current advanced cardiac life support (ACLS) certification]

NURSE PRACTITIONER (NP) CORE PRIVILEGES — CRITICAL CARE

- Requested** Management of care including risk appraisal, interpretation of diagnostic tests, providing treatment, and prescribing medication for patients with complex needs who are critically ill within the age group of patients seen by the collaborating physician. NPs [may/may not] admit patients to the hospital. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

CORE PROCEDURE LIST

This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

To the applicant: If you wish to exclude any procedures, please strike through those procedures you do not wish to request, then initial and date.

- Administer medications and perform other emergency treatment
- Apply, remove, and change dressings and bandages
- Counsel and instruct patients and significant others as appropriate
- Perform wound debridement and general care for superficial wounds and minor superficial surgical procedures
- Direct care as specified by medical staff approved protocols
- Emergent management of acute cardiopulmonary arrest following ACLS criteria
- Initiate referral to appropriate physician or other healthcare professional of problems that exceed the NP's scope of practice
- Insert and remove arterial catheters; Insert and remove central venous catheters, Swan Ganz lines and arterial lines (radial and femoral)
- Insert and remove chest tubes
- Insert and remove nasogastric tubes
- Insert and remove pulmonary artery catheters
- Make daily rounds on hospitalized patients with or at the direction of the collaborating/supervising physician
- Obtain and record medical/social history and perform physical examinations including rectal and pelvic examinations as indicated
- Order and interpret electrocardiograms with immediate second reading by collaborating/supervising physician
- Order and perform initial interpretations of simple plain X-ray films with second reading by collaborating/supervising physician (or radiologist)
- Order diagnostic testing and therapeutic modalities such as laboratory tests, medications, treatments, X-ray, EKG, IV fluids and electrolytes, etc.
- Perform endotracheal extubation and intubation
- Perform simple bronchoscopy for mucous removal and emergency endotracheal intubation
- May remove epicardial pacemaker wires.
- May suture lacerations
- Perform field infiltrations of anesthetic solutions
- Perform incision and drainage of superficial abscesses
- Perform lumbar punctures
- Perform urinary bladder catheterization (short-term and indwelling) (e.g., Robinson, coudé, Foley)
- Perform venous punctures for blood sampling, cultures, and IV catheterization
- Record progress notes
- Write discharge summaries

Acknowledgement of Practitioner

I have requested only those clinical privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at St. Dominic Hospital, and I understand that:

- a. In exercising any clinical privileges granted and in carrying out the responsibilities assigned to me, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the policies governing privileged allied health professionals.

Signed _____ **Date** _____

Endorsement of physician employer(s)/supervisor(s)

Signed _____ **Date** _____

Signed _____ **Date** _____

Signed _____ **Date** _____

Signed _____ **Date** _____