

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

PRINTED NAME: _____

DATE: _____

All new applicants must meet the following requirements as approved by the governing body, effective: _____.

INSTRUCTIONS

Applicant: Check 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 clinic activity, and other qualifications, and for resolving any doubts related to qualifications for requested privileges.

Department Chair/Chief: Check the appropriate box for recommendations on the privilege listing as well as the last page of this form. If recommended with conditions or not recommended, provide the condition or explanation.

Other Requirements:

- Note that privileges granted may only be exercised at sites and/or settings that have sufficient space, equipment, staffing, and other resources required to support the privilege
- If any privileges are covered by an exclusive contract, practitioners who are not a party to the contract are not eligible to request the privilege(s), regardless of education, training, and experience. Exclusive or employment contracts are indicated by [EC].
- This document is focused on defining 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 WOUND CARE CORE PRIVILEGES (MD/DO)

Initial Applicants: To be eligible to apply for privileges in wound care, the applicant must meet the following criteria:

Education– Applicants must be a graduate of an approved school of medicine, osteopathy or certified by the Educational Council for Foreign Medical Graduates

AND

Minimum Formal Training - Successful completion of an accredited Accreditation Council for Graduate Medical Education (ACGME) , American Osteopathic Association (AOA) in the United States or by the College of Family Physicians of Canada (CFPC) or the Royal College of Physicians and Surgeons of Canada postgraduate training program in a medical or surgical specialty

AND

Board Certification – Must meet the Medical Staff Bylaws requirements for board certification.

AND

Continuing Medical Education – Non-surgical physicians must provide documentation of satisfactory attendance at a 16 hour CME credit course in Wound Care. *Physicians providing wound care services at St. Dominic’s prior to July 28, 2016 do not have to meet this requirement.*

AND

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

Required Current Experience – Inpatient/outpatient care to at least 25 patients, reflective of the scope of privileges requested, during the past 12 months or successful completion of an ACGME- or AOA- accredited residency or clinical fellowship within the past 12 months. Evidence of current physical and mental ability to perform privileges requested is required of all applicants.

Renewal of Privileges: To be eligible to renew privileges in wound care, the applicant must meet the following criteria:

Continuing Medical Education – Provide documentation of ongoing education in wound care as evidence by the completion of AMA Category 1 CME activities.

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to a sufficient volume of patients with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.

QUALIFICATIONS FOR WOUND CARE CORE PRIVILEGES (NP)

Initial Applicants: To be eligible to apply for privileges in wound care, the applicant must meet the following criteria:

Education – Completion of masters, post-masters, or doctorate degree in an NP program accredited by the Commission on Collegiate of Nursing Education (CCNE) or the Accreditation Commission for Education in Nursing (ACEN).

AND

Certification – Current certification by the American Nurses Credentialing Center (ANCC) or an equivalent body.

AND

Continuing Medical Education – Nurse Practitioners must provide documentation of satisfactory attendance at a 16 hour CME credit course in Wound Care. *Nurse Practitioners providing wound care services at St. Dominic's prior to July 28, 2016 do not have to meet this requirement.*

AND

MS Board of Nursing Approval – As for core, plus any non-core privileges require Mississippi Board of Nursing approval. Written approval from the Mississippi Board of Nursing should be submitted to the Medical Staff Office. For privileges that require on-site training, there must be documentation that the Board has been notified and the request is pending submission of on-site training.

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to at least 25 patients reflective of the scope of privileges requested in the past 12 months or completion of master’s or post-master’s degree program in the past 12 months. Evidence of current physical and mental ability to perform privileges requested is required of all applicants.

Renewal of Privileges: To be eligible to renew privileges in wound care, the applicant must meet the following criteria:

Continuing Education – Provide documentation of ongoing education in wound care as evidence by the completion of CE activities.

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to a sufficient volume of patients with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.

QUALIFICATIONS FOR WOUND CARE CORE PRIVILEGES (PA)

Initial Applicants: To be eligible to apply for privileges in wound care, the applicant must meet the following criteria:

Education –Completion of an Accreditation Review Commission on Education for the Physician Assistant (ARC-PA)-approved program (prior to January 2001 – Commission on Accreditation of Allied Health Education Programs).

AND

Certification– Current certification by the National Commission on Certification of Physician Assistants (NCCPA).

AND

Continuing Medical Education – Physician Assistants must provide documentation of satisfactory attendance at a 16 hour CME credit course in Wound Care.

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to at least 25 patients reflective of the scope of privileges requested in the past 12 months or completion of master’s or post-master’s degree program in the past 12 months. Evidence of current physical and mental ability to perform privileges requested is required of all applicants.

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

Renewal of Privileges: To be eligible to renew privileges in wound care, the applicant must meet the following criteria:

Continuing Education – Provide documentation of ongoing education in wound care as evidence by the completion of CE activities.

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to a sufficient volume of patients with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current physical and mental ability to perform privileges requested is required of all applicants for renewal of privileges.

QUALIFICATIONS FOR HYPERBARIC OXYGEN THERAPY MANAGEMENT (MD/DO/NP)

Initial Applicants: **Education/Training** – Documentation of successful completion of a 40-hour UHMS (Undersea and Hyperbaric Medical Society) approved hyperbaric medicine introductory course.

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to at least 12 patients with acceptable results, reflective of the scope of privileges requested, for the past 12 months. *This requirement is waived for applicants completing the 40-hour UHMS approved hyperbaric medicine introductory course within the past 24 months.*

Renewal of Privileges: Demonstrated current competence and provision of care, treatment, or services, to a sufficient volume of patients with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

QUALIFICATIONS FOR MANAGEMENT OF WOUND VAC (RN ONLY)

Initial Applicants: **Education/Training** – Documentation of successful completion of an ADN or BSN degree program and be licensed by the state to practice as a Registered Nurse.

AND

Required Current Experience – Demonstrated current competence and provision of care, treatment, or services, to at least 10 patients with acceptable results, reflective of the scope of privileges requested, for the past 12 months. *Applicants not meeting this requirement must receive didactic training and be proctored for 5 patients (proctor must be MD/DO/NP with wound care privileges).*

Renewal of Privileges: Demonstrated current competence and provision of care, treatment, or services, to a sufficient volume of patients with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

PRIVILEGES REQUESTED		
REQUESTED	Request Privileges Below. <i>Only request privileges for which by education, training, current experience, and demonstrated performance you are qualified to perform (please refer to qualifications outlined above) and wish to exercise at St. Dominic's. <u>If there are privileges listed in the core procedure listing that you do not perform please strike through these items.</u></i>	DEPT CHAIR/ SERVICE CHIEF REC
CORE PRIVILEGES		
<input type="checkbox"/>	<p>WOUND CARE CORE PRIVILEGES (MD/DO): Admit, evaluate, diagnose, and provide treatment or consultative services for patients with wound and skin disorders on a non-emergent basis. The core privileges in this specialty include the following procedures, and such other procedures that are extensions of the same techniques and skills, which are commonly performed:</p> <ul style="list-style-type: none"> • Application of skin substitute • Chemical cauterization • Complicated wound management • Emergency pneumothorax decompression • Epidermal autograft • Incision and drainage of abscesses • Inpatient consultation for wound care management • Local anesthesia • Debridement of wounds • Paring of corns or callouses • Simple laceration repairs • Transcutaneous oximetry interpretation • Wound biopsy • Wound Vac (negative pressure) – application, change, and removal 	<input type="checkbox"/>
<input type="checkbox"/>	<p>WOUND CARE CORE PRIVILEGES (NP/PA): Evaluate, diagnose, and provide treatment for patients with wound and skin disorders on a non-emergent basis. The core privileges in this specialty include the following procedures, and such other procedures that are extensions of the same techniques and skills, which are commonly performed:</p> <ul style="list-style-type: none"> • Application of skin substitute • Chemical cauterization • Complicated wound management • Emergency pneumothorax decompression • Epidermal autograft • Incision and drainage of abscesses • Inpatient consultation for wound care management • Local anesthesia • Debridement of wounds • Paring of corns or callouses • Simple laceration repairs • Transcutaneous oximetry interpretation • Wound biopsy • Wound Vac (negative pressure) – application, change, and removal 	<input type="checkbox"/>

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

SPECIAL PRIVILEGES:

<input type="checkbox"/>	HYPERBARIC MANAGEMENT MD/DO/NP/PA: Diagnosis and therapeutic management of conditions utilizing hyperbaric oxygen therapy to patients of all ages except where specifically excluded from practice, presenting with acute carbon monoxide poisoning (smoke inhalation), cerebral arterial gas embolism (decompression, iatrogenically included), cyanide poisoning (ingestion, inhalation), decompression sickness/disorders (high altitude activities, scuba diving), soft tissue radiation injury, necrotizing soft tissue infections (subcutaneous tissue, muscle fascia), refractory osteomyelitis, thermal burns, acute traumatic ischemia from crush injury or compartment syndrome, and any other indications as deemed appropriate. This also includes the management of HBOT complications such as barotrauma, oxygen toxicity, etc.	<input type="checkbox"/>
<input type="checkbox"/>	WOUND VAC (NEG PRESSURE) RN ONLY: Application, change, and removal	<input type="checkbox"/>

ACKNOWLEDGMENT OF PRACTITIONER

I have requested only those 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’s, and I understand that:

- a. In exercising any clinical privileges granted, 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 medical staff bylaws or related documents.

Signature: _____

Date: _____

DEPARTMENT CHAIR/SERVICE CHIEF’S RECOMMENDATION

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications
- Do not recommend the following requested privileges

Privilege	Condition/Modification/Explanation

Notes: _____

Department Chair/Service Chief Signature: _____ **Date:** _____

WOUND CARE CLINICAL PRIVILEGES

St. Dominic – Jackson Memorial Hospital

FOR MEDICAL STAFF SERVICES DEPARTMENT USE ONLY		
<input type="checkbox"/> Initial Appointment <input type="checkbox"/> Reappointment	<input type="checkbox"/> Transition to New Privilege Forms <input type="checkbox"/> Request for Additional Privileges	
Credentials Committee Action/Approval: Explanation for any modification -	<input type="checkbox"/> As Requested	<input type="checkbox"/> As Modified
Medical Executive Committee Action/Approval: Explanation for any modification -	<input type="checkbox"/> As Requested	<input type="checkbox"/> As Modified
QA/PI Committee Action/Approval: Explanation for any modification -	<input type="checkbox"/> As Requested	<input type="checkbox"/> As Modified
Governing Board Action/Approval: Explanation for any modification -	<input type="checkbox"/> As Requested	<input type="checkbox"/> As Modified
Effective from ____/____/____ to ____/____/____		