



Advanced Practice Registered Nurse (APRN) Delineation of Privileges

Applicant's Name: _____

Instructions:

1. Click the **Request** checkbox to request a group of privileges.
2. **Uncheck** any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign/Date form and submit with required documentation
5. 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 doubts related to qualification of requested privileges.

NOTE:

Privileges granted may only be exercised at the site(s) and 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 or department policy.

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.

Required Qualifications

Membership	Satisfy the education/continuing education, training, and national board certification requirements established by the Ohio Board of Nursing (OBON) necessary to attain and maintain a current, valid Ohio license to practice as an Advanced Practice Registered Nurse (APRN). The APRN must have and maintain a current, valid DEA registration if applicable to the clinical privileges requested. For Hospital medicine- highly recommended Acute Care Nurse Practitioner (ACNP) trained/certified
Collaborative Requirements	The Advanced Practice Registered Nurse (APRN) must have and maintain a current, valid Standard Care Arrangement with a collaborative physician [or Podiatrist] with Medical Staff appointment and clinical privileges at the Kettering Health Network hospital(s) at which the APRN is requesting clinical privileges.
Clinical Experience (Initial)	Applicants for initial appointment must be able to demonstrate provision of care, treatment, or services reflective of the scope of privileges requested to at least 25 patients in the past 12 months or completion of master's or post master's degree program in the 12 months. This list could be obtained for example through billable procedures the applicant has completed or use of an attached clinical log.
Clinical Experience (Reappointment)	To be eligible for re-grant of core clinical privileges, the applicant must meet the following maintenance of clinical privileges criteria: Current demonstrated competence and an adequate volume of patient encounters to include the provision of care, treatment, or services reflective of the scope of clinical privileges requested to at least 25 patients in the past 24 months with acceptable results based upon the applicant's ongoing professional practice evaluation outcomes at the Kettering Health Network hospital(s) at which he/she practices. Evidence of current ability to continue to safely and competently perform the clinical privileges requested is required of all applicants requesting re-grant of clinical privileges.

Additional Qualifications

The collaborating physician is responsible for maintaining the duties of the APRN within the scope of granted privileges and must ensure that those duties do not constitute the practice of medicine outside the limitations of the APRN licensure. The collaborating physician assumes responsibility for appropriate instruction and training of the APRN in the functions and procedures that the APRN performs under that physician's supervision.

AND

Responsibility and liability for all acts of the APRN shall be that of the collaborating physician.

AND

The privileges of a APRN may be terminated at the direction of the clinical service chief in which the collaborating physician is a member or the Chief of Staff at any time for just and due cause. The collaborating physician may appeal this termination to the Medical Executive Committee or a committee especially dedicated for this purpose. Privileges are voluntarily resigned upon leaving the employment of the collaborating physician.

Core Clinical Privileges

Description: In accordance with applicable laws, rules, and regulations and within his/her scope of practice

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Assess, diagnose, treat, and observe patient responses relevant to acute and chronic illnesses of population served.
							Educate and counsel patients on health status and related issues.
							Facilitate transitional care within the Health System and community resources.
							Hospital admission and discharge under the conditions specified in Ohio Revised Code 3727.06, Fort Hamilton Hospital Only.
							Initiate referral to consultant physician or other healthcare professional.
							Obtain, perform, and record history and physical examination.
							Order and initial interpretation of diagnostic testing and therapeutic modalities (i.e., EKG).

Primary Privileges Cardiology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Administer ACLS if certified
							initial 12 lead ECG interpretation
							Performance of pharmacological/non-pharmacological stress tests.
							Preliminary echo interpretation with final read by Cardiologist.
							Temporary pacemaker management including removal.
							Device Checks:
							AICD
							Loop recorder
							PPM

Cardiothoracic Surgery

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Administer ACLS if certified
							ACNP-Required
							Assist with insertion of intra-aortic balloon pump.
							Epicardial pacing wire management.
							Harvest saphenous vein or radial artery conduit.
							Insertion of arterial lines, both radial and femoral with assistance of ultrasound as necessary.
							Insertion of central venous catheters.
							Insertion of chest tubes.
							Perform thoracentesis.
							Preliminary echo interpretation with final read by Cardiologist.
							Removal of arterial sheaths including intra-aortic balloon pump.
							Removal epicardial pacing wires.

Critical Care/Pulmonary Medicine

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Administer ACLS if certified
							ACNP-Required
							Emergent insertion of chest tubes.
							Endotracheal intubation.
							Insertion of arterial lines with assistance of ultrasound as necessary.
							Insertion of central venous catheters with assistance of ultrasound guidance as indicated.
							Interosseous access.
							Manage mechanical ventilator.

										Thoracentesis and paracentesis with ultrasound localization.
--	--	--	--	--	--	--	--	--	--	--

Primary Privileges Emergency Medicine

Description: Must be employed by the group currently contracted by the hospital to provide Emergency Medicine services. New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Administer ACLS/ATLS if certified
							Arthrocentesis
							Assessment, treatment, and disposition of low acuity patients
							Assist the ER physician in any other action delegated by the physician under direct supervision of the physician
							Change gastrostomy tubes
							Change tracheostomy tubes
							Chest tube insertion
							Compartment pressure measurements
							Diagnostic lumbar punctures
							Endotracheal intubation
							FAST ultrasound
							I&D of abscess including Bartholin's cyst.
							Interosseous access
							Laceration repair
							Local/digital anesthesia
							Manage epistaxis
							Ocular tonometry
							Peripheral/central venous/arterial access
							Reduce joint dislocations
							Removal of foreign body from, but not limited to; ears, nose, throat, rectum, vagina, superficial corneal and soft tissue
							Superficial foreign body removal from cornea
							Trephination and removal of nail

Primary Privileges Gastroenterology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Anoscopy
							Change gastrostomy feeding tubes

Primary Privileges General Surgery

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Administer ACLS if certified
							Anoscopy
							Change gastrostomy tubes
							Change tracheostomy tubes
							Compartment pressure management
							Diagnostic and therapeutic paracentesis
							Endotracheal intubation
							Foreign body removal of superficial/visible foreign body under local anesthesia
							Incision and drainage of abscess
							Insert central venous catheters
							Laceration repair
							Local /digital anesthesia
							Management of ventilator
							Perform or assist with ultrasound guided biopsy/drain placement/or aspiration
							Removal of tunneled catheters
							Trephination and removal of nail
							Insertion of:
							Central venous catheters
							Chest tubes
							Intraosseous access
							Radial and femoral arterial lines

Primary Privileges Hematology/Oncology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Bone marrow biopsy

Primary Privileges Hyperbaric Management

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature. Documentation of successful completion of a 40-hour UHMS-approved hyperbaric medicine introductory course required. ACLS is required.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Consult for initiation of HBOT
							ACLS- requirement for hyperbaric
							Provide hyperbaric management without consultation
							Emergency myringotomy
							Emergency pneumothorax with needle decompression
							Management of HBOT complications
							Barotrauma
							Oxygen toxicity

Primary Privileges Internal Medicine

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Abdominal paracentesis
							Arthrocentesis and joint injections
							Central Line Insertion
							Endotracheal intubation -appropriate documentation of airway management
							Insertion and management of central venous catheters, and arterial lines
							Lumbar Puncture
							Thoracentesis

Primary Privileges Neonatology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Inserting and managing central venous catheters
							Inserting and managing percutaneous arterial and venous catheters
							Inserting and managing umbilical artery and venous catheters
							Inserting and removing chest tubes
							Performing laryngoscopy and suction
							Performing suprapubic bladder aspiration
							Provide immediate supportive care of the newborn in the delivery room
							Perform diagnostic and therapeutic procedures including, but not limited to:
							Performing arterial puncture
							Performing emergency needle thoracentesis
							Performing endotracheal intubation
							Performing exchange transfusions
							Performing lumbar puncture

Primary Privileges Nephrology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Place vascular catheters for hemodialysis and plasmapheresis
							Remove permacaths
							Start femoral dialysis lines

Primary Privileges Neurology/Neurosurgery

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Teleconsultation: Remotely observe, evaluate, and confer, via specialized telemedicine equipment, regarding patients being treated at Kettering Health - Hamilton, review such patients' medical records, assess such patients' clinical care needs, issue patient care orders, prepare consultation reports, and advise on treatment and/or transfer of patients within the Certified Nurse Practitioner's scope of practice, education, training, national nursing specialty certification, and experience.
							Insertion of external ventricular drain
							Insertion of intracranial pressure monitors
							Removal of lumbar drains
							Manage intracranial monitors
							Perform lumbar puncture
							Perform occipital nerve block
							Place external ventricular drains
							Place Halo fixation
							Place intracranial pressure monitor
							Removal of intracranial catheters
							JP drains
							Ventriculostomy catheters

Primary Privileges OB/GYN and Women's Health

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Colposcopy
							Endometrial biopsy
							I&D of vulvar/Bartholin's abscess
							IUD insertion and removal
							Nexplanon insertion and removal
							Vulvar biopsy

Primary Privileges Orthopedics

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature.
 New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Application of casts and/or splints
							Application of skeletal traction
							Arthrocentesis
							Closed joint reduction
							Perform compartment pressure measurements
							Therapeutic joint injections

Primary Privileges Pediatrics

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Cryotherapy
							Foreign body removal including, but not limited to, nose, eye, and skin
							Incision and drainage of abscess
							Nail trephine techniques
							Punch biopsy
							Radial head subluxation
							Repair minor laceration with no nerve, tendon, or major vessel involvement
							Sebaceous cyst removal

Primary Privileges Psychiatric and Mental Health

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Clinically manage psychiatric disorder including but not limited to severe and persistent neurobiological disorders
							Conduct individual group and family psychotherapy

Primary Privileges Radiation Oncology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Assists Radiation Oncologist with simulations, procedures, and portal verification

Primary Privileges Radiology

Description: *Procedures will be approved once first (5) procedures are proctored

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Arthrocentesis and joint aspiration (shoulder, elbow, hip, knee, wrist)
							Assist with CT, MRI, Ultrasound, Angiography (under direct supervision), biopsies, central venous access
							Assist with CT guided biopsy/drain placement
							Assist with US guided biopsy/drain placement
							Assist radiologist in any other action delegated by the physician under the direct supervision of the physician
							Assist with venography
							Chest tube removal
							Cystogram
							Diagnostic and therapeutic paracentesis +/- imaging*
							Diagnostic and therapeutic thoracentesis +/- imaging*
							Feeding tube placement
							Fistulagram
							Gastrointestinal tube/drain (placement/manipulation) +/- imaging*
							Image guided chest tube insertion*
							Injection of contrast for central line evaluation*
							Injection of contrast for Myelogram (cervical, thoracic, lumbar)*
							Injection of contrast for tube/drain evaluation*
							Injection of contrast for Venogram
							Intra-articular injection of contrast for arthrogram (shoulder, elbow, hip, knee, wrist)
							Intra-articular injection of steroid preparation (shoulder, elbow, hip, knee, wrist)*
							Intrathecal administration of chemotherapy at lumbar puncture*
							Lumbar Puncture +/- imaging*
							NG/feeding tube placement without fluoroscopy
							Order moderate conscious IV sedation to be cosigned by radiologist
							Percutaneous gastrostomy tube removal*
							Perform CT guided biopsy/drain placement/aspiration*
							Perform US guided biopsy/drain placement*
							Peripherally inserted central catheter (PICC) removal/reposition
							Peripherally inserted central catheter (PICC) reposition*
							Removal of tunneled catheters (with and without blunt dissection)
							T-tube cholangiogram
							The following procedures require fluoro test and attestation
							Perform and assist fluoroscopy to include the following exams/procedure
							Fluoroscopic gastrointestinal contrast studies

							Fluoroscopic genitourinary contrast studies
							Fluoroscopic swallow evaluation with contrast
							NG/feeding tube placement with fluoroscopy

Primary Privileges Trauma

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Anoscopy
							Change gastrostomy tubes
							Change tracheostomy tubes
							Compartment pressure measurement
							Diagnostic and therapeutic paracentesis
							Endotracheal intubation
							FAST ultrasound
							Foreign body removal of superficial/visible foreign body under local anesthesia
							I&D of abscess
							Laceration repair
							Local/digital anesthesia
							Management of ventilator
							Perform or assist with ultrasound guided biopsy/drain placement/or aspiration
							Removal of tunneled catheters
							Trephination and removal of nail
							Insertion of:
							Central venous catheters
							Chest tubes
							Intraosseous access
							Radial and femoral arterial lines

Primary Privileges Urology

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Perform urodynamic studies
							Post-op voiding trials
							Post-void residual evaluations
							Ureteral stent removal on string

Primary Privileges Wound Care

Description: New graduate and specialty is required to demonstrate five (5) procedures with preceptor signature. New to hospital is required to demonstrate two (2) procedures with preceptor signature.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Application of skin substitute
							Change gastrostomy tubes
							I&D of skin abscesses
							Inpatient consultation for wound care management
							Medical wound management
							Minor surgical debridement of wounds
							Simple laceration repair
							Tissue closure
							Topical and local anesthesia
							Transcutaneous oximetry interpretation
							Wound biopsy

Special Non-Core Procedures Advanced Practice Registered Nurse

Qualifications

Education/Training Those technical and management skills that qualify the APRN to administer highly specialized care by virtue of training and experience

Clinical Experience (Initial) Demonstrated current competence and evidence of the performance of at least 5 procedures in the past 12 months or direct supervision is required for the first 5 procedures for each privilege requested

Clinical Experience (Reappointment) Demonstrated current competence and evidence of the performance of at least 5 procedures within the past 24 months based on results of ongoing professional practice evaluation and outcomes

OR

*Demonstrated current competence and the performance of at least 4 procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Insert arterial catheters
							Insert central venous catheters
							Insert chest tubes to include pleurodesis
							Insert Peripheral Insert Central Catheter (PICC)
							Insert pulmonary artery catheters
							Perform arthrocentesis and joint aspiration
							Perform lumbar puncture*
							Perform thoracentesis*
							Place vascular catheters for hemodialysis and plasmapheresis
							Remove intra-aortic balloon pump*

Insert Thoracostomy Tube

Qualifications

- Education/Training** Those technical and management skills that qualify the APRN to administer highly specialized care by virtue of training and experience.
- Clinical Experience (Initial)** Demonstrated current competence and evidence of the performance of at least 4 procedures in the past 12 months or direct supervision is required for the first 5 procedures.
- Clinical Experience (Reappointment)** Demonstrated current competence and the performance of at least 5 procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Insert thoracostomy tube

Performance of Pharmacological and Non-Pharmacological Stress Tests

Qualifications

- Education/Training** Those technical and management skills that qualify the APRN to administer highly specialized care by virtue of training and experience
- Clinical Experience (Initial)** Demonstrated current competence and evidence of the performance of at least 20 procedures in the past 12 months or direct supervision is required for the first 5 procedures.
- Clinical Experience (Reappointment)** Demonstrated current competence and the performance of at least 20 procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Request							<i>Request all privileges listed below.</i>
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Performance of pharmacological and non-pharmacological stress tests

Harvest (Endoscopic and Open) Arterial and/or Venous Conduit for Bypass Grafting

Qualifications

- Membership** Video assisted vein harvesting will be in accordance with current manufacturing guidelines.
- Education/Training** Those technical and management skills that qualify the APRN to administer highly specialized care by virtue of training and experience.
- Clinical Experience (Initial)** Video assisted vein harvesting will be in accordance with current manufacturing guidelines which include: training from manufacture's site and proctoring for a minimum of ten (10) cases by an approved proctor.
Open vein harvesting privileges will need to include proctoring for a minimum of ten (10) cases by an approved proctor.
- Clinical Experience (Reappointment)** Video assisted vein harvesting will be in accordance with current manufacturing guidelines.
Maintain a minimum of at least thirty-six (36) video vein harvesting per year; a maximum of fifty (50%) can be completed by simulation. A copy of the case log will be needed to be provided for re-credentialing.
Open vein harvesting must maintain a minimum for at least ten (10) cases per year. A case log will need to be provided for re-credentialing.

Request							Request all privileges listed below. Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
KHHM	KHDO	KHGM	KHMC	SOIN	KHMB	KHTR	
							- Currently granted privileges
							Video assisted vein harvesting privileges
							Open vein harvesting privileges

Acknowledgment of Applicant

I attest that I have read and understand the information contained within this Delineation of Clinical Privileges. I understand that by making a request for clinical privileges at a Kettering Health Hospital(s), I am bound by the applicable Bylaws, policies, and rules and regulations of the hospital(s) to which I am applying. I further attest that I have the education, training, certification(s), licensure, experience, and demonstrated current clinical competence necessary to safely perform the clinical privileges that I am requesting at the hospital(s). I agree to exercise any and all clinical privileges that are granted to me consistent with this Delineation of Clinical Privileges and in accordance with applicable laws, rules, regulations, accreditation standards, my standard care agreement/supervision agreement, and applicable hospital/medical staff governing documents.

Practitioner's Signature _____
Date

Clinical Service Chair Recommendation - Privileges

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendation(s):

	Recommend all requested privileges
	Do not recommend any of the requested privileges
	Recommend privileges with the following conditions/modifications/deletions (listed below)

Privilege	Condition/Modification/Deletion/Explanation

Clinical Service Chair Recommendation - Additional Comments

 Clinical Service Chair Signature _____ Date