

Emergency Medicine Clinical Privilege List

Description of Service

Alberta Health Services (AHS) Medical Staff who have privileges in the Department/Section of Emergency Medicine provide safe, high quality care for patients in AHS facilities. An emergency physician is a physician who is engaged in the practice of emergency medicine and demonstrates the specific set of required competencies that define this field of medical practice.

The Emergency Medicine specialist is foremost a physician who uses highly developed clinical reasoning skills to care for patients with acute and often undifferentiated medical problems, frequently before complete clinical or diagnostic information is available.¹

Privileges in Emergency Medicine include the ability to assess, stabilize, and determine the disposition of patients of all ages with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. Emergency privileges include, but are not limited to: admitting, evaluating, diagnosing, treating, and providing consultation to patients in the emergency department in conformance with applicable policies.

For a full list of clinical services, please refer to the attached Emergency Medicine Clinical Privilege List.

Zone Medical Staff Organization

Zone	Department(s)	Section(s)
South	Emergency Medicine	Emergency Medicine
Calgary	Emergency Medicine	Emergency Medicine
Central	Emergency Medicine	Emergency Medicine
Edmonton	Emergency Medicine	Emergency Medicine
North	Hospital Health	Emergency Medicine

¹ Royal College of Physicians and Surgeons of Canada – Objectives of Training in the specialty of Emergency Medicine (2014)

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College of Physicians and Surgeons of Alberta (CPSA) Requirements

The CPSA grants practice permits but does not guarantee that an individual will be granted an AHS Medical Staff appointment or privileges. It is AHS's role and responsibility to screen and evaluate the qualifications of Practitioners in relation to the specific procedures and patient care services they will be providing at specific sites before granting an appointment and clinical privileges.

Physicians with expertise in a particular area of practice may require a CPSA approval process separate from the CPSA licensure and AHS privileging process for specific services. These services typically fall into the non-invasive diagnostics group. Please refer to the CPSA website for a list of practice areas requiring approval

<http://www.cpsa.ca/accreditation/physician-approvals/>.

Minimum Education and Training Requirements:

1. Appropriate licensure with the College of Physicians and Surgeons of Alberta,
AND
2. Credentials satisfactory to the Zone Clinical Department Head (ZCDH), Zone Application Review Committee (ZARC) and/or the Chief Medical Officer (CMO), including:
 - o Successful completion of a Royal College of Physicians and Surgeons of Canada (RCPSC) accredited residency program in Emergency Medicine and fellowship in the RCPSC (FRCPC) or completion of a CFPC Family Medicine - Emergency Medicine Residency Program;
 - OR
 - o Equivalent combination of education, training and experience satisfactory to the ZCDH, ZARC and/or CMO.

These are minimum requirements. The ZCDH, ZARC and/or the CMO may determine that additional education, training or experience is required. The ZCDH, ZARC and/or CMO may also determine that an individual has developed competency in a particular area, without having completed a fellowship in that area, through an equivalent combination of education, training and experience. In addition to the minimum requirements listed above, additional education, training and experience may be required at the discretion of the ZCDH, ZARC and/or the CMO, to grant certain clinical privileges. These specifics are reflected in the following list and whether a particular combination of education, training and experience meets the requirements will be determined by the ZCDH.

Privileges Requiring Additional Education, Training and Experience

The list identifies certain privileges that require additional specialty training and documentation

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of evidence that the practitioner has received recognized postgraduate education, training or an appropriate level of experience to safely provide the service.

Clinical Privilege List and Medical Staff Bylaws

The AHS Medical Staff Bylaws state that the clinical privileges granted to a Practitioner define the diagnostic or therapeutic Procedures or other Patient care services a Practitioner is deemed competent to perform, the Facility(ies) and Zone(s) within which the Practitioner is eligible to provide care and services to Patients; and the specified AHS Programs and Professional services... that the Practitioner is eligible to access.²

No recommendation on Clinical Privileges is meant to prevent any licensed Practitioner from performing any medical procedure on any person in an emergency situation where failure to perform that procedure may result in death or serious injury or harm to the person.³

Nothing in this document or the attached List of Clinical Privileges replaces the processes or requirements set out in the AHS Medical Staff Bylaws and Rules. This document and its attachments are intended to supplement and more fully describe the application of the AHS Bylaws and Rules in the context of Emergency Medicine Clinical Privileges.

The AHS Medical Staff Bylaws and Rules can be found on the AHS website at <http://www.albertahealthservices.ca/7086.asp>.

Interpretation of the Clinical Privilege List

The following list describes and reflects the categories/types of patient services included in the scope of Emergency Medicine privileges available to members of the AHS Medical Staff with the necessary and required education training and experience. When granted, Emergency Medicine privileges include the capability to perform the noted procedure using various techniques and approaches as appropriate for the patient, unless a specific technique or approach is specified. The Zone Clinical Department Head's recommendation regarding specifics of an individual's privileges and any associated techniques will be provided to ZARC and the CMO for their consideration.

The Medical Staff Rules define the minimum review period for the privilege list.⁴

Sites of Clinical Privileges

² AHS Medical Staff Bylaws 3.0.2

³ AHS Medical Staff Rules 3.4.3(e)

⁴ AHS Medical Staff Rules, 3.4.3(f)(ii).

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A delineation of the sites of clinical activity is a required component of clinical privileges (AHS Medical Staff Bylaws, 3.2.1(c) and 3.2.7).

Clinical privileges will reflect the site (or sites) where the Physician physically provides the clinical services. A Physician privileged in the specialty may have clinical privileges at multiple sites if they travel to multiple sites to provide clinical services as approved by the ZCDH, ZARC and/or the CMO. Privileges granted may only be exercised at the site(s) and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the privilege.

	Site A	Site B	Site C	Site D	Site E
Privilege 1					
Privilege 2					
Privilege 3					
Privilege 4					

The table above indicates what privileges are available at which sites:

- Privilege 1 is available at all sites
- Privilege 2 is available at sites A, C,D and E
- Privilege 3 is available at sites A and C
- Privilege 4 is available at sites B, D and E

Proctoring Requirements

The Zone Clinical Department Head may determine that a period of proctoring is required in certain situations. Proctoring can be defined as follows:

“The term *proctor* is often used to mean observe, supervise, mentor, monitor, or directly assess... *proctoring* reflects a process by which an individual is reviewed and evaluated over time to ensure competence, and proctor identifies the person performing the assessment.” *The Medical Staff Handbook, A Guide to Joint Commission Standards, Second Edition.*

“Proctoring is a process of direct observation that allows for the focused evaluation of current physician competency in carrying out actual clinical care and takes both cognitive and procedural abilities into account. If the proctor observes potential or imminent patient harm during the proctoring process, it may be ethically appropriate for him or her to intervene.” *Proctoring and FPPE: Strategies for Verifying Physician Competence, Second Edition. Robert J. Marder, MD, CMSL, and Mark A. Smith, MD, MBA, CMSL.*

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<input type="checkbox"/>	Admitting and/or Patient Care Management Includes; management and care of patient, assessment, evaluating, consulting, diagnosing, treating
<input type="checkbox"/>	Consultation Includes; conduct history, assessment, and initial response to hospital codes for the purpose of making recommendations related to care and treatment.
Core Clinical Privileges – includes assessment, evaluating, consulting, diagnosing, treating (medical/surgical options)	
<input type="checkbox"/>	Performance of history and physical exam
<input type="checkbox"/>	Blood, fluid, and component therapy administration
<input type="checkbox"/>	Procedural sedation
<input type="checkbox"/>	Violent patient management/restraint
<input type="checkbox"/>	Sexual assault examination
<input type="checkbox"/>	Wound management and repair
<input type="checkbox"/>	Escharotomy/burn management
Airway	
<input type="checkbox"/>	Airway adjuncts
<input type="checkbox"/>	Cricothyrotomy
<input type="checkbox"/>	Foreign body removal
<input type="checkbox"/>	Endotracheal Intubation
<input type="checkbox"/>	Mechanical ventilation
<input type="checkbox"/>	Percutaneous transtracheal ventilation
<input type="checkbox"/>	Noninvasive ventilatory management
Local Anesthetic Procedures	
<input type="checkbox"/>	Regional nerve block
Head & Neck	
<input type="checkbox"/>	Removal of foreign body
<input type="checkbox"/>	Cautery for anterior epistaxis
<input type="checkbox"/>	Anterior and Posterior nasal packing
<input type="checkbox"/>	Lateral Canthotomy (emergent)
<input type="checkbox"/>	Tonometry
<input type="checkbox"/>	Laryngoscopy
<input type="checkbox"/>	Drainage of peritonsillar abscess
Cardiopulmonary & Resuscitation	
<input type="checkbox"/>	Cardiopulmonary resuscitation
<input type="checkbox"/>	Neonatal resuscitation
<input type="checkbox"/>	Defibrillation/cardioversion
<input type="checkbox"/>	Cardiac pacing (cutaneous, transvenous)
Diagnostic	
<input type="checkbox"/>	Anoscopy

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<input type="checkbox"/>	Arthrocentesis
<input type="checkbox"/>	Cystourethrogram
<input type="checkbox"/>	Lumbar puncture
<input type="checkbox"/>	Paracentesis
<input type="checkbox"/>	Peritoneal lavage
<input type="checkbox"/>	Compartment pressure measurement
<input type="checkbox"/>	Sigmoidoscopy
<input type="checkbox"/>	Point of Care Emergency Ultrasound
Genital/Urinary	
<input type="checkbox"/>	Bladder catheterization (Foley catheter, suprapubic)
<input type="checkbox"/>	Testicular detorsion
<input type="checkbox"/>	Dorsal slit
Gastrointestinal	
<input type="checkbox"/>	Anoscopy
<input type="checkbox"/>	Sigmoidoscopy
<input type="checkbox"/>	Fecal occult blood testing
<input type="checkbox"/>	Gastric lavage
<input type="checkbox"/>	Gastrostomy tube replacement
<input type="checkbox"/>	Incise and drain thrombosed external hemorrhoid
<input type="checkbox"/>	Nasogastric tube
<input type="checkbox"/>	Balloon tamponade of gastroesophageal varices
Vascular	
<input type="checkbox"/>	Arterial catheter insertion
<input type="checkbox"/>	Central venous access
<input type="checkbox"/>	Intraosseous infusion
<input type="checkbox"/>	Peripheral venous cutdown
Musculoskeletal / Skin	
<input type="checkbox"/>	Arthrocentesis
<input type="checkbox"/>	Injection of tendon sheaths, ligaments, trigger points, and bursa
<input type="checkbox"/>	Repair of extensor tendons
<input type="checkbox"/>	Closed reduction of dislocations and fractures
<input type="checkbox"/>	Emergency splinting and casting of fractures and other injuries
<input type="checkbox"/>	Incision and drainage of abscesses
<input type="checkbox"/>	Removal of foreign body
<input type="checkbox"/>	Application of skeletal traction
Obstetrics	
<input type="checkbox"/>	Emergency delivery
Thoracic	
<input type="checkbox"/>	Pericardiocentesis
<input type="checkbox"/>	Thoracentesis
<input type="checkbox"/>	Thoracostomy

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<input type="checkbox"/>	Thoracotomy (emergency)

Specific Request Privileges Please note, the privileges listed below may require further education, training and experience in addition to the successful completion of the Fellowship/Residency program.			
Clinical Privilege	Required additional education, training and experience		
<input type="checkbox"/>	<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Surgical Assistant</td> <td>At the direction of the surgeon, provides aid in technical functions in the OR.</td> </tr> </table>	Surgical Assistant	At the direction of the surgeon, provides aid in technical functions in the OR.
Surgical Assistant	At the direction of the surgeon, provides aid in technical functions in the OR.		