STANFORD
HOSPITAL & CLINICS
Center for Advanced Practice

PRIVILEGES
for the
Advanced Practice Provider

APP PRIVILEGES IN CARDIOTHORACIC SURGERY

Name:

Instructions:

1. Click the **Request** checkbox to request a group of *Core Privileges.*
2. Uncheck any privileges you do not want to request in this group.
3. Individually check off any **Special Privileges** you want to request.
4. Sign form electronically and **submit with all required documentation**.
5. As the Supervising Physician I have reviewed and agree to the Collaborative Practice Agreement by signing this privilege form. The Collaborative Practice Agreement can be found here.

Required Qualifications	
Education/Training	Successful completion of a PA or NP program
Licensure (Initial and Reappointment)	Current Licensure as a PA or RN in the state of CA Current certification as a NP in the state of California
Certification (Initial and Reappointment)	Current certification as a PA or NP by a nationally accredited organization
Additional Qualifications (Initial and Reappointment)	Current BLS from the American Heart Association
FPPE	FPPE CRITERIA LISTED BELOW. FPPE WILL BE ASSIGNED BY THE SERVICE CHIEF DURING THE APPROVAL PROCESS.

Patient Population

Request	Request all privileges listed below. Uncheck any privileges that you do not want to request.	Supervising Physician	Service Chief/Designee
	Patient Population		
	Infant		
	Pediatric		
	Adolescent		
	Adult		
	Geriatric		
	Setting		
	Outpatient		
	Inpatient		

Core Privileges - PHYSICIAN ASSISTANT (PA)

Request	Request all privileges listed below. *Uncheck any privileges that you do not want to request.*	Supervising Physician	Service Chief/Designee
	General Supervision		
	Evaluates and treats patients with acute, chronic complaints and health maintenance concerns related to specialty		
	Obtains complete histories and performs pertinent physical exams with assessment of normal and abnormal findings on new and return patients		
	Performs or requests and evaluates diagnostic studies as indicated upon evaluation of the patient		
	Orders and collects specimens for routine laboratory tests, screening procedures and therapeutic procedures, including blood and blood products		
	Orders physical therapy, occupational therapy, respiratory therapy, radiology examinations and nursing services		
	Performs designated procedures after demonstrated competency, according to written standardized procedures where applicable		
	Obtains informed consent, as indicated		
	Initiates arrangements for hospital admissions and discharges and completes appropriate paperwork		
	Provides and coordinates patient teaching and counseling		
	MEDICATIONS Administer, order, furnish or prescribe drugs and provide treatment within the APP's scope of practice, and consistent with the APP's skill, training, competence, professional judgment and policies of SHC. see Standardized Procedure: Administering, Ordering, Furnishing or Prescribing of Drugs; Formulary Protocol [CRITERIA - Must meet core criteria plus: Current individual CA DEA in State of California - Full Schedule (II, IIN, III, IIIN, IV, V) (DEA exception for applicant APP Fellows who are allowed up to a 3-month grace period before requesting MEDICATION privileges in core)]		
	CONTROLLED MEDICATIONS OUTPATIENT PRESCRIPTION Administer, dispense and prescribe legend drugs in outpatient setting including narcotics and provide treatment within the APP's scope of practice, and consistent with the APP's skill, training, competence and professional judgment [CRITERIA - Must meet core criteria plus: Current individual CA DEA in State of California - Full Schedule (II, IIN, III, IIIN, IV, V)] (DEA exception for applicant APP Fellows who are allowed up to a 3-month grace period before requesting MEDICATION privileges in core) Proof of completion of a one-time controlled substance education course approved by the California Physician Assistant Board]		

Qualifications	
Renewal Criteria	Maintenance of all the above qualifications. Minimum of 22 core cases required during the past two years.

FPPE - Area is managed by Medical Staff Office. Please make NO selections

Core - PHYSICIAN ASSISTANT (PA) CARDIOTHORACIC SURGERY

Core Privileges - NURSE PRACTITIONER (NP)

Request	Request all privileges listed below. Uncheck any privileges that you do not want to request.	Supervising Physician	Service Chief/Designee
	General Supervision		
	Evaluates and treats patients with acute, chronic complaints and health maintenance concerns related to specialty, according to written standardized procedures		
	Obtains complete histories and performs pertinent physical exams with assessment of normal and abnormal findings on new and return patients, according to written standardized procedures		
	Performs or requests and evaluates diagnostic studies as indicated upon evaluation of the patient, according to written standardized procedures		
	Orders and collects specimens for routine laboratory tests, screening procedures and therapeutic procedures, including blood and blood products		
	Orders physical therapy, occupational therapy, respiratory therapy, radiology examinations and nursing services		
	Performs designated procedures according to written standardized procedures where applicable		
	Obtains informed consent, as indicated		
	Initiates arrangements for hospital admissions and discharges and completes appropriate paperwork		
	MEDICATIONS Administer, order, furnish or prescribe drugs and provide treatment within the APP's scope of practice, and consistent with the APP's skill, training, competence, professional judgment and policies of SHC. see Standardized Procedure: Administering, Ordering, Furnishing or Prescribing of Drugs; Formulary Protocol [CRITERIA - Must meet core criteria plus: Current individual DEA in State of California - Full Schedule (II, IIN, III, IIIN, IV, V) and Current Furnishing Licensure in the State of California (DEA and Furnishing Licensure exception for applicant APP Fellows who are allowed up to a 3-month grace period before requesting MEDICATION privileges in core)]		
	CONTROLLED MEDICATIONS OUTPATIENT PRESCRIPTION Administer, dispense and prescribe legend drugs in outpatient setting including narcotics and provide treatment within the APP's scope of practice, and consistent with the APP's skill, training, competence and professional judgment [CRITERIA - Must meet core criteria plus: Current individual CA DEA in State of California - Full Schedule (II, IIN, III, IIIN, IV, V) and Current Furnishing Licensure in the State of California (DEA exception for applicant APP Fellows who are allowed up to a 3-month grace period before requesting MEDICATION privileges in core)]		

Qualifications

Renewal Criteria   Maintenance of all the above qualifications.
Minimum of 22 core cases required during the past two years.

FPPE - Area is managed by Medical Staff Office. Please make NO selections

Core - NURSE PRACTITIONER (NP) CARDIOTHORACIC SURGERY

Standardized Protocols/Standardized Procedures

Description: (requires selection of a core professional role above)

Request	Request all privileges listed below. *Uncheck any privileges that you do not want to request.*	Supervising Physician	Service Chief/Designee
	(requires selection of a core professional role above)		
	General Supervision		
	ADMINISTRATION OF MODERATE SEDATION [CRITERIA - In accordance with SHC Moderate Sedation policy and completion of the SHC sedation exam every two years. Renewal Criteria - Minimum 6 cases required during the past two years]		
	Personal Supervision		
	FIRST ASSISTANT [CRITERIA - Initial - Successful completion of an accredited RNFA course -OR- Concurrent enrollment in an accredited RNFA course with the attending surgeon as primary preceptor with completion of clinical practicum within 12 months of didactic course completion -OR- Completion of a First Assistant course with clinical practicum completion as evidenced by a certificate of completion -OR- Evidence from another hospital or organization where privileges were granted to assist in the OR -OR- Board Certification as a Physician Assistant. Renewal - Minimum 20 cases required during the past 2 years.]		
	Robotics First Assist in the OR Standard (Multi Port) [CRITERIA - Initial - Must meet Core Criteria. Must be approved for FIRST ASSISTANT privilege. Completion of "da Vinci Multi - Port Training Passport Technology Training Pathway: First Assistant" Certificate required - OR - Letter from attending surgeon documenting competency and documentation of a minimum of 24 robotics procedures during the past 2 years. Case log required. Renewal - Minimum 24 procedures required during the past 2 years]		

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Administration of Moderate Sedation - (Chart Review)

Administration of Moderate Sedation - (Direct Observation)

First Assistant - (Chart Review)

First Assistant - (Direct Observation)

Robotics First Assist in the OR Standard (Multi Port) - (Chart Review)

Robotics First Assist in the OR Standard (Multi Port) - (Direct Observation)

Division

Request	Request all privileges listed below. *Uncheck any privileges that you do not want to request.*	Supervising Physician	Service Chief/Designee
	(Select division which corresponds to your Supervising Physician)		
	CARDIAC ANESTHESIA		
	CARDIOVASCULAR SURGERY		
	THORACIC SURGERY		
	CARE OF SOLID ORGAN TRANSPLANT PATIENTS INCLUDES HEART AND LUNG SURGICAL TRANSPLANT - Renewal criteria: Manager attestation to be collected to validate that the APP completed Transplant education requirements		

Standardized Protocols/Standardized Procedures

Request	Request all privileges listed below. *Uncheck any privileges that you do not want to request.*	Supervising Physician	Service Chief/Designee
	(requires selection of a core professional role above)		
	General Supervision		
	Arterial Line Insertion [CRITERIA - Minimum 6 cases required]		
	Central Venous Catheter (CVC): Insertion - Internal/External Jugular [Criteria - Initial - Must complete "Getting to Zero" educational module. Renewal - Must complete "Getting to Zero" educational module. Minimum of 10 cases required for each]		
	Central Venous Catheter (CVC): Insertion - Femoral [Criteria - Initial - Must complete "Getting to Zero" educational module. Renewal - Must complete "Getting to Zero" educational module. Minimum of 6 cases required for each]		
	Central Venous Catheter (CVC): Removal [CRITERIA - Minimum 6 cases required]		
	Central Venous Catheter (Cvc): Removal Of Tunneled [CRITERIA - Minimum 6 cases required]		
	Chest Tube: Insertion [CRITERIA - Minimum 10 cases required]		
	Chest Tube: Removal [CRITERIA - Minimum 6 cases required]		
	Direct Current Cardioversion (DCCV) [CRITERIA - Current ACLS from the American Heart Association. Renewal Criteria - Minimum 10 cases required]		
	Implantable Vascular Access Port: Removal [Criteria - Minimum of 6 cases required during the past 2 years]		
	Intra Aortic Balloon Pump: Insertion & Removal [Criteria - Minimum of 6 each Insertion/Removal cases required during the past 2 years]		
	Intrapleural Lytic Administration [CRITERIA - Minimum 6 cases required]		
	Management And Care Of Mechanical Left Ventricular And Right Ventricular Assist Devices [CRITERIA - Completion of SHC VAD HealthStream module - Minimum 10 cases required]		

	Temporary Epicardial Pacer Wire Removal [CRITERIA - Minimum 6 cases required]		
	Paracentesis [CRITERIA - Minimum 10 cases required]		
	Point Of Care Ultrasound Assessment Of Inferior Vena Cava [CRITERIA - Minimum 20 cases required]		
	Point Of Care Ultrasound Assessment Of Pericardial Effusion [CRITERIA - Minimum 20 cases required]		
	Pulmonary Catheter: Insertion & Removal [Criteria - Minimum of 10 each Insertion/Removal cases required during the past 2 years]		
	Thoracentesis [CRITERIA - Minimum 10 cases required]		
	Wound Closure (Simple) [CRITERIA - Minimum 6 cases required]		
	Wound Closure & Minor Debridement Of Wounds [CRITERIA - Minimum 6 cases required]		
	Wound Debridement [CRITERIA - Minimum 6 cases required]		

Qualifications

Initial Criteria   Must Also Meet the Core Criteria for Standardized Protocols/Standardized Procedures

FPPE - Area is managed by Medical Staff Office. Please make NO selections

Arterial Line Insertion - (Chart Review)
Arterial Line Insertion - (Direct Observation)
Central Venous Catheter (CVC): Insertion - Internal/External Jugular - (Chart Review)
Central Venous Catheter (CVC): Insertion - Internal/External Jugular- (Direct Observation)
Central Venous Catheter (CVC): Insertion - Femoral- (Chart Review)
Central Venous Catheter (CVC): Insertion - Femoral - (Direct Observation)
Central Venous Catheter (CVC): Removal- (Chart Review)
Central Venous Catheter (CVC): Removal - (Direct Observation)
Central Venous Catheter (CVC): Removal Of Tunneled - (Chart Review)
Central Venous Catheter (CVC): Removal Of Tunneled - (Direct Observation)
Chest Tube: Insertion - (Chart Review)
Chest Tube: Insertion - (Direct Observation)
Chest Tube: Removal - (Chart Review)
Chest Tube: Removal - (Direct Observation)
Direct Current Cardioversion (DCCV) (Chart Review)
Direct Current Cardioversion (DCCV) (Direct Observation)
Implantable Vascular Access Port: Removal - (Chart Review)
Implantable Vascular Access Port: Removal - (Direct Observation)
Intra Aortic Balloon Pump: Insertion - (Chart Review)
Intra Aortic Balloon Pump: Insertion - (Direct Observation)
Intra Aortic Balloon Pump: Removal - (Chart Review)
Intra Aortic Balloon Pump: Removal - (Direct Observation)
Intrapleural Lytic Administration (Chart Review)
Intrapleural Lytic Administration (Direct Observation)
Management And Care Of Mechanical Left Ventricular And Right Ventricular Assist Devices - (Chart Review)
Management And Care Of Mechanical Left Ventricular And Right Ventricular Assist Devices - (Direct Observation)
Temporary Epicardial Pacer Wire Removal - (Chart Review)
Temporary Epicardial Pacer Wire Removal - (Direct Observation)
Paracentesis - (Chart Review)
Paracentesis - (Direct Observation)
Point of Care Ultrasound Assessment of Inferior Vena Cava - (Chart Review)
Point of Care Ultrasound Assessment of Inferior Vena Cava - (Direct Observation)

Point of Care Ultrasound Assessment of Pericardial Effusion - (Chart Review)
Point of Care Ultrasound Assessment of Pericardial Effusion - (Direct Observation)
Pulmonary Catheter: Insertion & Removal - (Chart Review)
Pulmonary Catheter: Insertion & Removal - (Direct Observation)
Thoracentesis - (Chart Review)
Thoracentesis - (Direct Observation)
Wound Closure (Simple) - (Chart Review)
Wound Closure (Simple) - (Direct Observation)
Wound Closure & Minor Debridement Of Wounds - (Chart Review)
Wound Closure & Minor Debridement Of Wounds - (Direct Observation)
Wound Debridement - (Chart Review)
Wound Debridement - (Direct Observation)

Acknowledgment of Applicant

I have requested only those privileges for which, by education, training and experience I am qualified to perform under the supervision of an attending physician, and that I wish to exercise at Stanford Hospital & Clinics.

I attest that I have met all of the required criteria and will meet all competency requirements for each standardized protocol and/or standardized procedure that I have requested.

I also attest that I will adhere to the guidelines of the SHC Job Description appropriate to my professional role as well as all standardized protocols and/or standardized procedures that I have requested.

_____   _____
By clicking on the "Submit" button below, I have electronically signed, dated and submitted this   Date
privilege request

Service Chief Recommendation - Privileges

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

Privilege	Condition/Modification/Deletion/Explanation

Service Chief Recommendation - Proctoring Requirements

Supervising Physician - By clicking on the 'Submit' button below, I have electronically signed, dated and approved this privilege request   Date

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Service Chief - By clicking on the 'Submit' button below, I have electronically signed, dated and approved this privilege request   Date