INTERNAL MEDICINE CLINICAL PRIVILEGES

1. General Internal Medicine Core Privileges

To be eligible to apply for core privileges in internal medicine, the applicant must meet the following criteria:

1. Current certification or active participation in the examination process leading to certification in internal medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine

   OR

   Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited post-graduate training program in internal medicine

   AND

   Applicants must be able to demonstrate provision of inpatient or outpatient services to at least 30 patients in the last 12 months or demonstrate successful completion of a hospital-affiliated accredited residency, special clinical fellowship or research.

2. Applicants for initial appointment may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, and other qualifications and for resolving any doubts.

3. Documented current competency in CPR by one of the following: ACLS, ATLS, PALS, or Emergency Board Certification.

To be eligible to renew core privileges in general internal medicine, the applicant must meet the following Maintenance of Privilege criteria:

1. Current demonstrated competence and an adequate volume of experience with acceptable results in the privileges requested for the past 24 months based on results of quality assessment/improvement activities and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

2. Documented current competency in CPR by one of the following: ACLS, ATLS, PALS, or Emergency Board Certification.

Requested | Approved | Standing | Scope | Privilege/Procedure
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| | | Approved | Active | 1 | IMCO - a) GENERAL INTERNAL MEDICINE CORE PRIVILEGES - Admit, evaluate, diagnose, treat and provide consultation to patients 12 years of age and older with common and complex illnesses, afflictions, diseases, and functional disorders of the circulatory, respiratory, digestive, endocrine, metabolic, musculoskeletal, hematopoietic, and eliminative systems of the human body. 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.

Note: 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.

Core Procedure List:
1. Arthrocentesis
2. I & D abscess,
CBR Regional Hospital
Practitioner Privileges and Procedures

PR4 05/05/09

Sort By: Department, Practitioner

Medicine - Internal Medicine

Privilege/Procedure List for: Tribiani, Joseph, DO

Department of: Medicine
Specialty: Internal Medicine

3. I & D hemorrhoids
4. Biopsy of superficial lymph nodes
5. Breast cyst aspiration
6. Burns, superficial and partial thickness
7. Excision of skin and subcutaneous lesions
8. Excision of cutaneous and subcutaneous tumors and nodules
9. Local anesthetic techniques
10. Nasogastric tube placement
11. Placement of anterior and posterior nasal hemostatic packing
12. Perform simple skin biopsy or excision,
13. ECG Performance and Interpretation
14. Remove non-penetrating corneal foreign body, nasal foreign body
15. Suprapubic bladder aspiration
16. Venous cutdown
17. Abdominal Paracentesis
18. Thoracentesis
19. Arterial Cannulation
20. Repair of Superficial Lacerations
21. Bursa and Joint Aspirations
22. Ventilator Management
23. Arterial & Venous Puncture Techniques
24. Lumbar Puncture
25. Bone Marrow Aspiration
26. Endotrachael Intubation
27. Cardioversion

If any privileges are covered by an exclusive contractual agreement, physicians who are not a part of the contract are not eligible to request the privilege(s), regardless of education, training or experience.

2. Special Non-Core Privileges - (See Qualifications and/or Specific Criteria*)

To be eligible to apply for the special non-core privileges listed below, the applicant must demonstrate successful completion of an approved, recognized course when such exists, or acceptable supervised training in residency, fellowship or other acceptable experience, and provide documentation of competence in performing the requested procedure consistent with criteria set forth in medical staff policies governing the exercise of specific privileges.

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<td>IMSP - a) EKG INTERPRETATION - [Criteria: Successful completion of an accredited residency or fellowship in cardiology, internal medicine, or family practice; and successful completion of either of the following: performance of at least 200 EKG interpretations; or demonstration of EKG interpretation skills by successful completion of EKG testing.]</td>
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<td>IMSP - b) LUMBAR PUNCTURE- [Criteria: Successful completion of an accredited residency which included training in lumbar puncture, or the applicant must have</td>
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completed hands-on training in lumbar puncture under the supervision of a qualified physician preceptor.] Source:

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**IMSP - c) EXERCISE TESTING -** [Criteria: Successful completion of either of the following: an accredited residency in cardiology; or an accredited residency in internal medicine followed by an accredited fellowship in cardiovascular disease and evidence that the training included participation in at least 50 exercise procedures]

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**IMSP - d) FLEXIBLE SIGMOIDOSCOPY -** [Successful completion of an accredited residency or fellowship in gastroenterology, colon & rectal surgery, general surgery, family practice or internal medicine and documentation is required of having done a minimum of 25 of these procedures and be supervised by someone on staff with these privileges for the first procedure done here. If applicant cannot provide this documentation, applicant will be required to have this supervision for the first 25 procedures, with the supervising physician to determine whether further supervision is necessary.]

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**IMSP - e) CAPSULE ENDOSCOPY -** [Must have approved upper and lower endoscopy privileges AND must provide documentation of training in capsule endoscopy.]

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**IMSP - f) DIAGNOSTIC EGD -** [Completed residency or equivalent training program with satisfactory documentation from residency or equivalent training program director of competence in these procedures; OR have had privileges to do these procedures at another facility and can document satisfactory completion of 100 of these procedures OR has completed a training program in Diagnostic EGD and can provide documentation of performing 100 of these procedures under supervision by someone with privileges to perform same.]

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**IMSP - g) COLONOSCOPY -** Completed residency or equivalent training program with satisfactory documentation from residency or equivalent training program director of competence in these procedures OR have had privileges to do colonoscopy at another facility and can document satisfactory completion of 100 of these procedures; OR has completed a training program in colonoscopy and can provide documentation of performing 100 colonoscopies under supervision by someone with privileges to perform these.]

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**IMSP - h) INSERTION AND MANAGEMENT OF PULMONARY ARTERY CATHETERS -** [Criteria: Successful completion of an accredited residency or fellowship in internal medicine, general surgery, cardiology, anesthesia, pulmonary medicine, critical care, or family practice; and performance of at least 50 PACs during this formal training, as the primary operator; or Successful completion of an accredited residency in another field; participation in a significant Category 1 accredited continuing medical education training program in pulmonary artery catheter insertion and management; and Successful insertion and subsequent
management of pulmonary artery catheters in at least 100 patients during the past 36
months. Required Previous Experience: Active hospital practice in the chosen
respective field; clinical privileges to treat complex cardiac cases; and performance
(as primary operator) or at least 50 PACs during the past 24 months. Maintenance
of Privilege: Performance of at least 15 PACs per year, as the primary operator.
Source: Clinical Privilege White Paper # 42

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| 10| IMSP - i) MODERATE SEDATION - [Criteria: Must show current clinical
competency in the administration of moderate sedation and the anticipated
physiological response. Current competency defined as: ACLS, ATLS, PALS, or
Emergency Board Certification AND biennial review of moderate sedation
educational information, and successful completion of a written moderate sedation
exam will be required.]

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<td>IMSP - j) PACEMAKER, TEMPORARY TRANSVENOUS - [Criteria:</td>
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