UNMH Pediatric Hematology/Oncology Clinical Privileges

Name:
Effective Dates: _____ **To:** _____

☐ Initial privileges (initial appointment)

☐ Renewal of privileges (reappointment)

☐ Expansion of privileges (modification)

All new applicants must meet the following requirements as approved by the UNMH Board of Trustees effective: 09/27/2013

INSTRUCTIONS

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

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

OTHER REQUIREMENTS

1. Note that privileges granted may only be exercised at UNM Hospitals and clinics 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.

2. This document defines qualifications to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

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Qualifications for Pediatric Hematology/Oncology

Intial privileges - *To be eligible to apply for core privileges in pediatric hematology/oncology, the initial applicant must meet the following criteria:*

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in pediatrics, followed by successful completion of an accredited fellowship in pediatric hematology/oncology.

AND/OR

Current subspecialty certification or active participation in the examination process leading to subspecialty certification in pediatric hematology/oncology, by the American Board of Pediatrics or the American Osteopathic Board of Pediatrics.
AND

Required previous experience: Applicants for initial appointment must be able to demonstrate provision of inpatient or consultative services for an acceptable volume of pediatric* 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. [*Services/care provided to other age groups may be considered for volume requirements.]

Reappointment requirements: *To be eligible to renew core privileges in pediatric hematology/oncology, the applicant must meet the following maintenance of privilege criteria:*

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on the results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges. [*Services/care provided to other age groups may be considered for volume requirements.]

Core privileges: Pediatric Hematology/Oncology

Admit, evaluate, diagnose, consult, and treat on inpatient/outpatient basis patients of any age with illnesses and disorders of the blood, blood-forming tissues, and the immunologic system; and provide treatment or consultation for patients ranging in age from newborn through young adulthood with cancer.

☐ **Requested**

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Pediatric Hematology/Oncology Core Procedures List

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.

To the applicant: If you wish to exclude any procedures, please strike through those procedures which you do not wish to request, then initial and date.

1. History & Physical
2. Antithrombotic therapy
3. Apheresis procedures
4. Arterial venous cutdowns
5. Biological response modifiers, administration through all therapeutic routes
6. Blood count, measurement of, including: - platelets differential; - use of automated or manual techniques w/appropriate quality control; - white cell differential
7. Blood diseases: diagnose/treat, including: - anemias; - diseases of stem cells; - diseases of white blood cells; - disorders of hemostasis; - thrombosis
8. Blood disorders patients, pain management
9. Bone marrow aspiration and biopsy, including: - bone marrow aspirates; - examination; - interpretation of blood smears; - preparation; - staining; - touch preparations of bone marrow biopsies
10. Chemotherapeutic agents, administration through all therapeutic routes
11. Coagulation assays (standard) performance and interpretation, including: - bleeding time; - partial thromboplastin time; - platelet aggregation; - prothrombin time
12. Correlate clinical information with the findings of: - cytology; - histology; - imaging techniques; - immunodiagnostic techniques
13. Cytochemical studies
14. Fibrinogen abnormalities, inherited
15. Graft-versus-host (GVH) disease
16. Granulomatous disease, chronic
17. Hematopoietic malignancies: - apply radiation medicine; - combined modality therapy; - multiagent chemotherapy protocol
18. Hemostasis, congenital/acquired disorders
19. Imaging techniques, patients with blood disorders and tumors
20. Immunodeficiencies, including: - acquired; - congenital
21. Immunophenotyping
22. Indwelling venous access catheters, management and care
23. Leukapheresis aspiration
24. Leukemias, including: - acute; - chronic
25. Lumbar Puncture – General
26. Lymphopoietic malignancies: - apply radiation medicine; - combined modality therapy; - multiagent chemotherapy protocols
27. Neoplastic diseases of blood, blood-forming organs, and lymphatic tissues, diagnose/manage,

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including: - cytogenetic analysis; - DNA analysis

28. Neutropenic patient, manage
29. Organ-specific cancers
30. Pain management
31. Paracentesis, therapeutic
32. Paraneoplastic disorders, recognize/manage
33. Peripheral blood films, interpretation
34. Peripheral venous cutdowns
35. Phlebotomy, therapeutic
36. Plasmapheresis aspiration• Platelets disorders, including but not limited to: - acquired platelet function defects; - idiopathic thrombocytopenic purpura (ITP); - inherited platelet function defects
37. Posttransplant complications, manage
38. Splenomegaly
39. Thoracentesis
40. Thrombosis, congenital/acquired disorders
41. Transfusion medicine, including: - apheresis; - blood compatibility; - evaluation of antibodies; - long-term transfusion therapy, patient management; - use of blood-component therapy

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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 UNM Hospitals and clinics, 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.

Signed _____ Date _____

Department recommendation(s)

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

☐ Recommend all requested privileges with the standard professional practice plan
☐ Recommend privileges with the standard professional practice plan and the following conditions/modifications:
☐ Do not recommend the following requested privileges:

Privilege Condition/Modification/Explanation
Notes:
_____
_____
_____
_____

Division Chief Signature _____ Date _____

Print Name_____ Title _____

Department Chair Signature _____ Date _____

Print Name_____

Criteria approved by UNMH Board of Trustees on 09/27/2013