**DECATUR COUNTY MEMORIAL HOSPITAL**

**CLINICAL PRIVILEGES IN WOUND CARE**

**NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**DATE**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**QUALIFICATIONS**: To be eligible for core privileges in wound care, the practitioner must meet the following qualifications:

**BASIC EDUCATION**: M.D. or D.O. or D.P.M.

**MINIMAL FORMAL TRAINING**: Sufficient post-graduate medical education to meet the requirements for medical staff membership, successful completion of a UHMS approved hyperbaric medicine introductory course totaling a minimum of 40 hours, and demonstration of competence in wound debridement and or core privileges selected as determined by the Medical Director.

**\*EXPERIENCE**: Applicants for initial appointment must demonstrate the provision of inpatient, outpatient and/or consultative services to at least 50 patients during the past two years.

**REAPPOINTMENT REQUIREMENTS**: Basic Life Support competence, current demonstrated competence and an adequate volume of current experience (as specified in the ADMINISTRATION Medical Staff Credentialing Process) 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.

*Note: If any privileges are covered by an exclusive contractual arrangement, physicians who are not party to the contract are not eligible to request the privilege(s) regardless of education, training and experience.*

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|  | CORE PRIVILEGES |
| Requested   | \* Evaluate, diagnose, consult and manage patients of all ages, except where specifically excluded from practice, for direct routine wound care. Privileges include surgical debridement of wounds, transcutaneous oximetry interpretation, complicated wound management, local and regional anesthesia, wound biopsy, and preparation of wound bed and application of skin substitute.  \*Hyperbaric Management includes the following: necrotizing soft tissue infections, crush injury/compartment syndrome/traumatic ischemia, compromised skin grafts and flaps, problem/compound wounds, radiation tissue damage, osteomyelitis, HBOT complications (barotrauma, oxygen toxicity, etc.), apply standard treatment protocols and modify when clinically indicated, diabetic wounds of lower extremity (who meet the criteria). |

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| Requested   | **Moderate (Conscious) Sedation**: Must maintain Basic Life Support Competency and complete the DCMH Sedation & Analgesia open book test reviewing the DCMH guidelines and education material with at least 100% score for initial credentialing. If the physician has performed eight (8) or more cases at DCMH without complications within the two (2) year credentialing period, renewal credentialing will occur automatically at the time of reappointment. |
| Requested   | **Hyperbaric Medicine:** Evaluation and management of patients referred for elective hyperbaric oxygen therapy. Consultation with patients regarding fitness for diving or other hyperbaric exposure. Attendance and supervision of hyperbaric oxygen treatment. Management of patients requiring emergent hyperbaric oxygen therapy. |

**ACKNOWLEDGEMENT OF PRACTITIONER**

I have requested only those privileges for which, by education, training, current experience, and demonstrated performance, I am qualified to perform, and that I wish to exercise at Decatur County Memorial Hospital

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Found qualified for privileges requested.
* Modifications recommended as follows:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Wound Care Medical Director Date

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Department Chair Date

**Core Privilege Form Approved**:

Department Committee Date: 11-07-14

Medical Staff Date: 02-20-15

Board of Trustees Date: 02-26-15

Board of Trustees Approved Revision Date: 11-17-16

Board of Trustees Approved Revision Date: 08-23-18