

DELINEATION OF PRIVILEGES ADVANCED PRACTICE REGISTERED NURSE PRACTITIONER

NAME: _____

EFFECTIVE: _____

<p><u>Nurse Practitioner Certification:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Family NP (FNP- BC) <input type="checkbox"/> Pediatric NP (PNP- BC) <input type="checkbox"/> Primary Care CPNP (CPNP-PC) <input type="checkbox"/> Acute Care CPNP (CPNP-AC) <input type="checkbox"/> Gerontological NP (GNP-BC) <input type="checkbox"/> Pediatric NP (PNCB-BC) 	<ul style="list-style-type: none"> <input type="checkbox"/> Acute Care NP (ACNP-BC) <input type="checkbox"/> Adult NP (ANP-BC) <input type="checkbox"/> Adult or Family Psychiatric & Mental Health NP (PMHNP-BC) <input type="checkbox"/> Women's Health NP (WHNP-BC) <input type="checkbox"/> Wound Care NP <input type="checkbox"/> _____
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CORE NURSE PRACTITIONER PRIVILEGES

To be eligible to apply for core nurse practitioner privileges, the applicant must meet the following criteria:

1. **Education:** Graduate of an accredited school of nursing, successful completion of a master's degree in a nursing program, **AND** must have successfully completed the required clinical practice hours of the accredited program; **AND**
2. **Licensure:** Current licensure in the State of Louisiana as an Advanced Practice Registered Nurse; **AND**
3. **Collaborating Physician:** Each NP must have a current formal arrangement with a current member in good standing of the Medical Staff of this Hospital, who serves as the collaborating physician and who has an appropriate level of clinical privileges in the specific clinical area. The NP's services may not exceed the clinical privileges granted to the collaborating physician. Similarly, the NP may not provide professional services to a patient whose problem or condition is outside the privileges granted to the collaborating physician. The NP may provide services to those patients of the collaborating physicians with whom he/she has documented a formal collaborative agreement. All duties and responsibilities of the NP will be under the direct guidance of the collaborating physician. General supervision of activities and services of the NP is provided by the Chair of the applicable department of his/her designee; **AND**
4. **Practice Authority:** A collaborative practice agreement is required and includes parameters agreed upon by the NP and the supervising physician. The agreement must include availability of the collaborating physician for consultation and/or referral, methods of management, and coverage of care in the absence of the physician.
[La. Admin. Code §46-XLVII.4513](#)

CATEGORY (please check requested category below):

	<p><i>Acute Care Nurse Practitioner</i> Requires: Current license to practice professional nursing in the State of Louisiana as an Acute Care Nurse Practitioner (ACNP) and current certification by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). Twenty cases proctored in accordance to the Medical Staff Proctoring Policy or letter from previous employer and/or educational training attesting to previous inpatient clinical competency.</p>
	<p><i>Adult Nurse Practitioner</i> Requires: Current license to practice professional nursing in the State of Louisiana as an Adult Nurse Practitioner (ANP) and current certification by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). Twenty cases proctored in accordance to the Medical Staff Proctoring Policy or letter from previous employer and/or educational training attesting to previous inpatient clinical competency.</p>
	<p><i>Family Nurse Practitioner</i> Requires: Current licensure to practice professional nursing in the State of Louisiana as a Family Nurse Practitioner (FNP) and current certification by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). Twenty cases proctored in accordance to the Medical Staff Proctoring Policy or letter from previous employer and/or educational training attesting to previous inpatient clinical competency.</p>

	<p>Adult Nurse Practitioner: wound care</p>
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	Requires: Current license to practice professional nursing in the State of Louisiana as an Adult Nurse Practitioner (ANP) and current certification by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). Twenty cases proctored in accordance to the Medical Staff Proctoring Policy or letter from previous employer and/or educational training attesting to previous clinical wound care competency.
	Pediatric Nurse Practitioner Requires: Current license to practice professional nursing in the State of Louisiana as a Pediatric Nurse Practitioner (PNP) and current certification by the Pediatric Nursing Certification Board (PNCB). Twenty cases proctored in accordance to the Medical Staff Proctoring Policy or letter from previous employer and/or educational training attesting to previous competency.
	Adult Psychiatric Mental Health Practitioner Requires: Current licensure to practice professional nursing in the State of Louisiana as a Adult Psychiatric Mental Health Nurse Practitioner (PMHNP-BC)) and current certification by the American Nurses Credentialing Center (ANCC) or the American Association of Nurse Practitioners (AANP). Twenty cases proctored in accordance to the Medical Staff Proctoring Policy or letter from previous employer and/or educational training attesting to previous inpatient clinical competency.

MEDICAL RECORD

The NP is required to clearly, legibly, completely and in a timely fashion describe in the patient's medical record each service he/she provides to a patient in the hospital and relevant observations. The rules of this Hospital and the Medical Staff regarding authentication, necessary content of and required time frames for preparing and completing the medical record and portions thereof are applicable to all entries made by the NP. The NP may record the collaborating physician's progress notes and orders, transcribing the same in the proper place in the medical record with the date, time, his/her name, and signature. The NP must document all telephone and verbal consultations with the collaborating physician.

REAPPOINTMENT

To be eligible to renew privileges, the NP must meet the following criteria:

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 NPs for renewal of privileges. Evidence includes, but is not limited to collaborating physician evaluation, report by Department Chair or his/her designee, peer assessment, and quality data.

CORE PRIVILEGES

Requested

Evaluates (on an inpatient or outpatient basis), diagnose, provide medical treatment, patient education and counseling, by including the following:

1. Obtains an appropriate comprehensive or problem-focused health history from the patient;
2. Performs an appropriate comprehensive or problem-focused physical examination;
3. Differentiates between normal, variations of normal, and abnormal findings;
4. Provides health promotion, disease prevention services, anticipatory guidance and counseling to promote health diagnostic information to develop appropriate differential diagnoses;
5. Diagnoses and manages acute and chronic conditions while attending to the patient's response to the illness experience;
6. Prioritizes health problems and intervenes appropriately including initiation of effective emergency care;
7. Employs appropriate diagnostic and therapeutic interventions and regimens including but not limited to pharmacological, behavioral and other non-pharmacological treatment modalities with attention to safety, cost, invasiveness, simplicity, acceptability, adherence and efficacy;
8. Formulates an action plan based on scientific rationale, evidence-based standards of care, and practice guidelines;
9. Integrates knowledge of pharmacokinetic processes and factors that alter pharmacokinetics in pharmacologic management decisions;

10. Provides guidance and counseling regarding management of the health/illness condition;
11. Communicates the patient's health status using appropriate terminology, format and technology;
12. Collaboratively assesses, plans, implements, and evaluates care with other health care professionals;
13. Acts ethically to meet the needs of the patient.

_____ **Granted** _____ **Not Granted**

CORE PROCEDURES (Please check requested procedures below):

Requested	Granted	Not Granted	Nurse Practitioner: Core Procedures	Training	Proctored
			Joint or bursa aspiration/injection of only the following joints: shoulders, elbows, wrists, hips, knees and ankles		
			Skin Punch biopsy		
			Wound biopsy		
			Foreign body removal (subcutaneous and eye)		
			Incision and drainage		
			Nail removal (fingers and toes)		
			Wound management/suturing		
			Application, management, and removal of casts or splints to body and extremities		
			Fine needle aspirates		
			Conversion, or change and manipulation of gastrostomy, jejunostomy		
			Trigger Point Injections		
			Aspiration/injection of superficial cysts or seromas		
			Cryotherpay of warts		
			Soft tissue fluid aspiration		
			Removal of anterior nasal packing/splints and drains as appropriate to area of practice		

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NON-CORE PROCEDURES (Please check requested procedures below):

Upon Initial Request: The procedures requested below require documentation of training and proof of proctoring by collaborating physician of **10** procedures. If training cannot be documented, proof of proctoring by collaborating physician of **20** or more procedures is required. Supervised instruction in at least **3** of each requested procedure. Independently perform the procedure **3** times under the direct observation of an appropriately privileged physician or a privileged NP or PA assigned by the physician(s).

For renewal: Verify with documentation, participation in **6** or more of each procedure during the previous **24-month** period.

Requested	Granted	Not Granted	Nurse Practitioner: Non-Core Procedures	Training	Proctored
			Arterial line placement		
			Arterial line removal		
			Central line placement		
			Central line removal		
			Chest tube removal		
			Elective cardioversion with IV conscious sedation		
			Gastrostomy tube checks		
			Gastrostomy tube replacements		
			Gastrostomy tube changes for dislodged or malfunctioning tubes		
			Intubations and initiation of mechanical ventilation		
			Lumbar puncture (Adult > 18 years)		
			Lumbar puncture (Infant/neonate)		
			Lumbar puncture (Pediatric >6 years)		
			Peripheral inserted central catheter placement (PICC)		
			Pneumothorax needle aspiration		
			Removal of percutaneously placed intra-aortic balloon pump		
			Resuscitation/stabilization of newborn		
			Suprapubic bladder aspiration		
			Umbilical arterial catheter placement		
			Umbilical venous catheter placement		
			Venous femoral sheath placement		
			Removal of hemodialysis catheters		

SUBSPECIALTY SPECIFIC CATEGORIES (Please check requested procedures below):

Upon Initial Request: The procedures requested below require documentation of training and proof of proctoring by collaborating physician of **10** procedures. If training cannot be documented, proof of proctoring by a collaborating physician of **20** or more procedures is required. BLS and ACLS certification required. Supervised instruction in at least **3** of each requested procedure. Independently perform the procedure **3** times under the direct observation of an appropriately privileged cardiologist.

For renewal: Verify with documentation, participation in **6** or more of each procedure during the previous **24-month** period.

*** Denotes procedures that require the cardiologist to be in direct attendance, overseeing the procedure.**

Requested	Granted	Not Granted	Subspecialty: Cardiology	Training	Proctored
			*Heart catheterization, including arterial sheath placement		
			*Cardiac intervention		
			*Peripheral intervention		
			*Pacemaker insertion		
			Perform chemical cardiac stress testing		
			Perform cardioversion		
			Perform cardiac stress testing		
			Perform automatic implantable cardioverter defibrillator checks		
			Perform nuclear cardiac stress testing		
			Tilt table testing		

Requested	Granted	Not Granted	Subspecialty: Emergency Medicine	Training	Proctored
			Removal of corneal foreign body		
			Repair nail bed lacerations		
			Repair of wounds of the deep fascia or muscle		
			Repair of wounds of the eyelids, nose, ear, face, or lip		
			Closed reduction of fractures and dislocations		
			Mini C-Arm fluoroscopy for fracture and joint reduction and foreign body identification and removal. **Requires separate fluoroscopy privileges		

Gynecology (Upon Initial Request): Provide proof of completion of an FDA-approved instructional program on insertion and removal of gynecological devices. If ultrasound privileges are desired, provide proof of completion of an ultrasound instructional program meeting content criteria to perform first trimester pregnancy identification and gestational age dating as well as monitoring of ovaries for ovulation induction, followed by observation of at least **10** ultrasounds by OB/Gyn faculty or privileged advanced practice nurse or PA assigned by the physician(s).

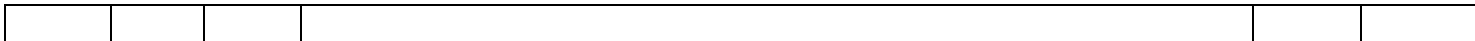
For renewal of ultrasound privileges: Verify with documentation, participation in **20** or more of each procedure during a **24-month** period.

For renewal of privileges all procedures (excluding ultrasound): Participation in **3** or more of each procedure during the recredentialing cycle. Supervised instruction in at least **3** of each requested procedure. Independently perform the procedure **3** times under the direct observation of an appropriately privileged physician or a privileged NP or PA assigned by the physician(s). For renewal, participation in **6** or more of each procedure during the previous **24-month** period.

Requested	Granted	Not Granted	Subspecialty: Gynecology	Training	Proctored
			Limited gynecologic and early pregnancy ultrasound for (a) identification of early intrauterine pregnancy up to 10 weeks gestation including verification of intrauterine location, gestational age dating, fetal number, and viability and (b) ovulation induction imaging		

			including ovarian appearance, follicular number, size and location, and endometrial thickness.		
			Insertion and removal of hormonal contraceptive rods in the upper arm, including administration of local anesthetic		
			IUD insertion and removal		
			Fitting diaphragms and cervical caps		
			Vulvoscopy		
			Colposcopy		
			Vaginoscopy		
			Endometrial Biopsy		

Requested	Granted	Not Granted	Subspecialty: Wound care	Training	Proctored
			Consult, evaluate, diagnose, treat, and provide wound care management for patients at Riverside Medical Center.		
			Debridement of skin, subcutaneous tissue, muscle, and bone as warranted for wound care.		
			Pinch graft, single, 2 cm.		
			Split graft, trunk, arms, legs, first 100 square centimeters.		
			Prepare site for graft.		
			Use of electrocautery for hemostasis		
			Infiltration of local anesthetic.		
			Incision and drainage		
			Removal of foreign object – simple.		
			Tissue or bone biopsy.		
			Suturing of skin.		
			Suturing or stapling of grafts		
			Application of local wound care products or xenografts (tissue or organ transplantation from a donor of a different species than the recipient).		
			Application of topical anesthetic		
			Compression wrap		



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 Riverside Medical Center.

Date _____

Collaborative physician: _____

Not Recommended

Date _____

If denied, reason: _____

Not Recommended

Date

If denied, reason: _____

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