



AcuteCare Health System

Specialty Hospital at Kimball

Specialty Hospital at Monmouth

Medical Delineation of Privileges

APPLICANT'S NAME: _____ DATE: _____

This is my: Initial Application Re-appointment Application I am modifying my privileges

Status: Active

I. Training: Successful completion of an approved residency training program in Internal Medicine or Family Practice, certification by the applicable Board, or admissibility to take the Board with achievement of Board Certification within (two years for FP & six years for IM) of completion of residency training.

II. Experience: The successful applicant must be able to demonstrate provision of inpatient service to at least 15 patients in the past 12 months. (Note: Applicants who are unable to document compliance with noted experience requirements may work on under a preceptor member of the Medical Staff in order to attain required experience).

III. Check the applicable category:

CATEGORY I: Core privileges include the admission, work up, diagnosis and provision of non-surgical treatment including consultation patients admitted to the hospital or in need of care to treat general medical problems. These privileges do not include any of the procedures listed in the special requests nor any of the privileges included in the subspecialty areas.

Check the appropriate designations listed below:

- Internal Medicine
- Family Practice

CATEGORY II: Successful completion of an approved residency training program in Internal Medicine followed by an approved fellowship in the area sub-specialization. Applicant must achieve Internal Medicine Board certification as listed above, and must be qualified for certification by the applicable subspecialty Board and achieve subspecialty certification within six years of completing subspecialty training. These physicians may admit and treat without limitation. These physicians may also act as consultants to others and provide care for complex problems in their sub-specialty area. In turn, they should request consultation whenever needed.

Check the appropriate specialty designation listed below:

- Allergy/Immunology
- Neurology
- Cardiology
- Dermatology
- Endocrinology/Metabolism
- Emergency Medicine
- Gastroenterology
- Geriatric Medicine
- Hematology
- Infectious Diseases
- Metabolic Immunology
- Nephrology
- Oncology
- Physical Medicine and Rehabilitation
- Pulmonary Medicine
- Radiation Oncology
- Rheumatology

Other (Specify) _____



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<input type="checkbox"/> Renal biopsy – Percutaneous									
<input type="checkbox"/> Apheresis (Phersis); includes plasmapheresis, leukopheresis, platelet pheresis, red cell pheresis									
<input type="checkbox"/> Other (specify)									
Neurology									
<input type="checkbox"/> EEG Interpretation									
<input type="checkbox"/> Other (specify)									
Other Specialty (specify)									
<input type="checkbox"/>									

Life Threatening Emergency: At the time of a clinical emergency, a practitioner who holds clinical privileges and is a member of the medical staff may render whatever care he/she believes to be indicated.

Signature/Applicant

Date

Medical Executive Committee

Date