### UNIVERSITY OF MARYLAND MEDICAL CENTER MIDTOWN CAMPUS

# Emergency Medicine for Family Medicine Physicians Delineation of Privilege Form Page 1 of 2

| Name: | Date: |
|-------|-------|
|-------|-------|

|   | Applicant              | Department Chief (Initial) |                    |                                     |
|---|------------------------|----------------------------|--------------------|-------------------------------------|
| Privilege / Operative Procedure   | Check (√) if requested | Recommended                | Not<br>Recommended | Conditions<br>(provide explanation) |
| Category I Privileges   |                        |                            |                    |                                     |
| Initial interpretation of routine x-rays  |                        |                            |                    |                                     |
| Administration of intramuscular, intravenous analgesics and anxiolytics                                     |                        |                            |                    |                                     |
| Anoscopy  |                        |                            |                    |                                     |
| Application of splints and plaster molds  |                        |                            |                    |                                     |
| Arthrocentesis  |                        |                            |                    |                                     |
| Abscess incision and drainage   |                        |                            |                    |                                     |
| Arterial puncture   |                        |                            |                    |                                     |
| Blood component transfusion therapy   |                        |                            |                    |                                     |
| Burn management   |                        |                            |                    |                                     |
| GI decontamination (emesis, lavage, charcoal)   |                        |                            |                    |                                     |
| Lumbar puncture, diagnostic   |                        |                            |                    |                                     |
| Management of epistaxis   |                        |                            |                    | <del></del>                         |
| Nasogastric/orogastric intubation   |                        |                            |                    |                                     |
| Initial evaluation and management of disease of the uterus, fallopian tubes, ovaries and external genitalia |                        |                            |                    |                                     |
| Local anesthesia  |                        |                            |                    |                                     |
| Placement of urethral / bladder catheterization   |                        |                            |                    |                                     |
| Paracentesis  |                        |                            |                    |                                     |
| Removal of foreign bodies   |                        |                            |                    |                                     |
| Reduction of simple dislocations  |                        |                            |                    |                                     |
| Repair of lacerations   |                        |                            |                    |                                     |
| Spontaneous precipitous vertex vaginal deliveries   |                        |                            |                    |                                     |
| Temporary immobilization of minor fractures and sprains   |                        | _                          |                    |                                     |
| Tetracaine/Adrenalin/Cocaine (TAC)  |                        |                            |                    |                                     |

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| Privilege / Operative Procedure  | Check (√) if requested | Recommended                | Not<br>Recommended | Conditions (provide explanation) |
| Category II Privileges – Require successful completion of an approved recognized course when such exists, acceptable supervised residency & fellowship or other acceptable advanced training |                        |                            |                    |                                  |
| Advanced cardiac life support (ACLS)   |                        |                            |                    |                                  |
| Administration of muscle relaxant (neuromuscular blockers); intubated patient  |                        |                            |                    |                                  |
| Central venous access: femoral   |                        |                            |                    |                                  |
| Central venous access: jugular, internal   |                        |                            |                    |                                  |
| Central venous access: subclavian  |                        |                            |                    |                                  |
| Dislocation reduction techniques   |                        |                            |                    |                                  |
| Direct or indirect laryngoscopy  |                        |                            |                    |                                  |
| Endotracheal intubation  |                        |                            |                    |                                  |
| Imaging of the pelvis for the determination of intrauterine pregnancy  |                        |                            |                    | ,                                |
| Newborn resuscitation  |                        |                            |                    |                                  |
| Placement of intra-osseous device  |                        |                            |                    |                                  |
| Regional nerve blocks, digital   |                        |                            |                    |                                  |
| Remove nails using digital block   |                        |                            |                    |                                  |
| Thoracentesis  |                        |                            |                    |                                  |
| Vascular imaging for line placement  |                        |                            |                    |                                  |
| Moderate Sedation- Criteria for Approval: must be competent in airway management   |                        |                            |                    |                                  |

#### Acknowledgment of Practitioner:

| particular situation.   |  |
|---|--|
| granted, I am constrained by all UMMC Midtown and medical sta   |  |
| I have requested only those specific privileges for which, by educati qualified to perform and for which I wish to exercise at UMMC I |  |