

**SAN GORGONIO MEMORIAL HOSPITAL  
PRIVILEGE DELINEATION LIST  
PHYSICIAN ASSISTANT/ORTHOPEDICS**

NAME OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

YEAR OF BOARD CERTIFICATION/RECERTIFICATION \_\_\_\_\_

<b>PRIVILEGES CATEGORY</b>	<b>QUALIFICATIONS/CRITERIA</b>
<b>CATEGORY I</b>	<p><b>USUAL AND CUSTOMARY PRIVILEGES</b> (Procedures considered include minimal formal training.)</p>
	<p><b>QUALIFICATIONS:</b></p> <ol style="list-style-type: none"> <li>1. Successful completion of an accredited Physician Assistant training program, AND,</li> <li>2. Current license by the Medical Board of California</li> <li>3. Demonstrate comparable competency to perform the privileges requested based on proctoring reports, reference letters, activity reports or other documentation acceptable to the Surgical Service.</li> <li>4. Privileges will be proctored per Surgical Service Rules and Regulations.</li> </ol>
<b>CATEGORY II</b>	<p><b>ADVANCED PRIVILEGES</b> (Procedures performed requiring special expertise and/or requiring documented special training and/or certification through National Commission on Certification of Physician Assistants (NCCPA), or proctoring.)</p>
	<p><b>QUALIFICATIONS:</b></p> <ol style="list-style-type: none"> <li>1. Current license by the Medical Board of California</li> <li>2. AND, documented evidence of additional training, experience and competence by hands-on training, special certification, or written documentation of supervised numbers performed and outcomes.</li> <li>3. Privileges will be proctored per Surgical Service Rules and Regulations.</li> </ol>

	R	#Done 24 mos	D	P/O	G	<b>CATEGORY 1 - USUAL AND CUSTOMARY PRIVILEGES</b>
						<b>CORE PRIVILEGES:</b> Under direction of the supervising physician(s):
						(a). Take a patient history; perform a physical examination and make an assessment and diagnosis therefrom; initiate, review and revise treatment and therapy plans including plans for those services described in section (b) through (h) inclusive; and record pertinent data in a manner meaningful to the physician.
						(b) Order or transmit an order for x-ray, other studies, therapeutic diets, physical therapy, occupational therapy, respiratory therapy, and nursing services.
						(c) Order, transmit an order for, perform laboratory procedures, screening procedures and therapeutic procedures.
						(d) Recognize and evaluate situations which call for immediate attention of a physician and institute, when necessary, treatment procedures essential for the patient's life.
						(e) Instruct and counsel patients regarding matters pertaining to their physical and mental health. Counseling may include topics such as medications, diets, social habits, family planning, normal growth and development, aging, and understanding of and long-term management of their diseases.
						(f) Initiate arrangements for admissions, complete forms and charts pertinent to the patient's medical record, and provide services to patients requiring continuing care, including patient's at home.
						(g) Initiate and facilitate the referral of patients to the appropriate health care facilities, agencies, and resources of the community.
						(h) Administer medication to a patient, or writing on a patient's medical record a prescription from his/her supervising physician, based either on a patient-specific order by the supervising physician or on written protocol, which is required for controlled substances in Schedules II through V inclusive.
	R	#Done 24 mos	D	P/O	G	<b>CATEGORY 2 - ADVANCED PRIVILEGES</b>
1.						Simple wound closure and/or debridement for all orthopedic cases
2.						Joint arthrocentesis & injection
3.						Closed reduction with and without manipulation of fractures/dislocations including appl. finger traps.
4.						Cast/splint application and removal
5.						Application of joint braces & CPM's
6.						Simple finger and toe tip repair
7.						Steinmann pin placement for skeletal traction: femur, tibia.
8.						Skin and skeletal traction of children/adults
9.						Repair superficial tendon lacerations (dorsum of wrist & hand of which would be immediately under the skin).
10.						Hardware removal (percutaneous pins & screws, the head of which would be immediately under the skin)
	R	#Done 24 mos	D	P/O	G	<b>CATEGORY 2 - ADVANCED PRIVILEGES</b>
						<b>Assist the supervising physician with the following:</b>
1.						First assistant in surgery
2.						Halo and tongs placement/application
3.						Amputation completion and revision of fingertips & toe tips where there has been traumatic amputation and the bone needs to be smoothed off, the wound debrided and the skin revised in order to make a closure on the amputation.
						<b>OTHER:</b>

**STAFF CATEGORY: ALLIED HEALTH PROFESSIONAL**

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE \_\_\_\_\_

PRINT NAME OF APPLICANT: \_\_\_\_\_

**APPROVALS:**

**Applicant may perform privileges and procedures as indicated: [ ]**

**Exceptions/Limitations:** \_\_\_\_\_

I have reviewed the applicant's health status and can attest that there are no health problems that exist that could affect his or her ability to perform the privileges requested.

\_\_\_\_\_  
Chairman, Surgical Services Committee  
Date

\_\_\_\_\_  
Chairman, Credentials Committee  
Date

\_\_\_\_\_  
Chairman, Medical Executive Committee  
Date

\_\_\_\_\_  
Chairman, Board of Directors  
Date