

## Delineation of Privileges Department of Family Medicine

Name:	
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## **CORE PRIVILEGES**

**Scope of Practice/Privileges:** Family Physicians provide primary medical care both in an ambulatory setting and in the hospital. The scope of this care includes all ages from conception to death. Family Medicine privileges are divided into three areas: ambulatory core, advanced ambulatory, and inpatient privileges.

Minimum Training and Experience: Applicant must have received an MD or DO degree from an approved school of medicine or osteopathy. Applicant must have a valid Michigan Medical License. Applicant must have completed an approved internship and residency program, approved by the American Board of Family Medicine. Applicant must be board certified and recertified as appropriate by the American Board of Family Medicine or American Osteopathic Board of Family Physicians, or scheduled to take the next available board exam. Parallel accreditation by the College of Family Physicians of Canada or Irish College of General Practitioners is also acceptable.

				AMBULATORY CORE		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include admitting, outpatient care, and initial evaluation of all patients presenting in an ambulatory setting. The scope of care includes prenatal patients, newborn and pediatric patients, non-operative gynecological care, adult medicine, and geriatrics. The procedures included are commonly performed in the office and include but are not limited to arthrocentesis, ECG interpretation, endometrial biopsy, IUD removal, uncomplicated lacerations, word catheter, I&D of abscess, skin biopsy or simple excision, trigger point injection, cryotherapy, nail avulsion uncomplicated minor closed fractures (not requiring traction or manipulation), and uncomplicated dislocations.	Minimum Training and Experience: For ambulatory core privileges, the applicant must demonstrate regular involvement with the direct provision of ambulatory primary care. Nexplanon requires successful completion of FDA certification process.	Minimum review of five (5) charts per month by site medical director for a period of six (6) months.	Participation in a minimum of fifty (50) cases over the prior two (2) years.  If faculty member is providing episodic prenatal care, s/he will be required to attend yearly CME – twelve (12) hours over two (2) years on this topic.

LEVEL	II					
EDUCA	TION P	RIVILE	GES			
			Obstetrical Care: Basic (F	Practicing Specialist gaining ac	dditional training)	
REQUEST	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Qualified clinicians will receive additional training in the inpatient and outpatient obstetrical environment. They will be supervised by BC/BE University of Michigan faculty either in the Department of Family Medicine or the Department of Obstetrics and Gynecology for all obstetrical care related activities including admission, evaluation, diagnosis, treatment, antepartum/intrapartum/postp artum care plans, progress notes, triage evaluation, vaginal deliveries and obstetrical repairs.	Minimum Training and Experience: A practicing clinician entering the Department of Family Medicine's Obstetrical Education program at the University of Michigan must have either M.D. or D.O. degree, and have successfully completed residency training in Family Medicine.	Focused Professional Practice Evaluation (FPPE): Due to varied training backgrounds, each new faculty in the Obstetrical Care program will be proctored until achieving a total of at least 80 deliveries including residency and those performed during the Obstetrical Education Program.	N/A
LEVEL	II					
			OU	TPATIENT OBSTETRICS		
REQUEST	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include continuity prenatal and postpartum care including but not limited to the supervision of residents providing obstetrical care. Requires knowledge of Stork, UMMC birth center protocols, referral to the Perinatal Assessment Center (PAC) and coordination of prenatal care with the inpatient FMB team.	Minimum Training and Experience: Training in an approved family medicine residency program.	Minimum review of ten (10) prenatal charts over six (6) months by faculty member with outpatient obstetrical privileges.	Faculty must participate in twelve (12) hours of obstetrical CME, participate in ten (10) cases, and review the UMHS prenatal care guideline including passing the on-line exam each two (2) year period.

			BASI	C INPATIENT OBSTETRICS		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scopes of Practice/Privileges: Privileges include antepartum, intra-partum, and post-partum care. Privileges are inclusive for the following: Ability to perform a normal spontaneous vaginal delivery with management of the spontaneous placenta and postpartum hemorrhage, Emergency management of shoulder dystocia, Manual removal of the placenta, Repair of the labial lacerations and first and second degree perineal lacerations, Interpretation of fetal heart rate patterns and management of fetal bradycardia/tachycardia, variable and late decelerations and sinusoidal patterns, Induction and augmentation of labor, Management of gestational age greater than thirty-four (34) weeks and postdates pregnancy, Management of intrapartum GBS prophylaxis and treatment of chorioamnionitis, Management of non-insulin requiring gestational diabetes, preeclampsia without severe features and VBAC/TOLAC, Ultrasound evaluation of fetal presentation, number, confirmation of cardiac activity, position, and placental location. Independent competency in Stork and CPOE. Appropriate obstetrical consultation with adherence to FMB/OB Consultation Guidelines.	Scenario A: Newly graduated residents of the Department of Family Medicine (UMMC) program who did eighty (80) vaginal deliveries during residency. Residents may need to complete an obstetrical elective to ensure that eighty (80) vaginal deliveries are completed before applying for privileges.  Scenario B: Newly graduated residents from another program or faculty who have performed obstetrics elsewhere must submit a letter from a program director, department chair, service chief or other qualified individual who can attest to competence stating skill level and number of vaginal deliveries performed during residency or during the past two (2) years of practice. They must have completed eighty (80) vaginal deliveries before applying for privileges.  Scenario C: Faculty requesting privileges who have not practiced inpatient obstetrics within the past three (3) years must have a 1-week retraining period which includes inpatient obstetrics, prenatal care and night call with a supervising FMB faculty.  Scenario D: Faculty requesting privileges who have not practiced inpatient obstetrics for three (3) years or more must complete a minimum of four (4) weeks retraining period which includes inpatient obstetrics, prenatal care and night call with a supervising FMB faculty.	Scenario A: Minimum 1-2 weeks on FMB proctored by the current FMB faculty. They will complete five (5) deliveries followed by a documentation review by the service chief.  Scenario B: Minimum five (5) proctored deliveries during at least a two (2) week observation period on FMB.  Scenario C: They will complete a minimum of ten (10) deliveries followed by a documentation review by the service chief.  Scenario D: Minimum ten (10) proctored deliveries during at least a two (2) week observation period on FMB, after the four (4) weeks of retraining period.	A current FMB faculty member must demonstrate involvement in the management of twenty (20) deliveries over two (2) years, plus management of at least ten (10) additional laborers over two (2) years. Each FMB faculty must obtain twelve (12) CME credits in obstetrical topics over two (2) years.

			ADVANO	CED INPATIENT OBSTETRICS		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges:	Applicants must have	Review of all cases	Performance of at
			Advanced privileges include:	verification from a program director, department chair, or	involving pertinent procedures over the	least two (2) of each performed
			- use of outlet forceps	current FMB service chief of competency in requested	first six (6) months.  If there are no cases	procedure over the past two (2) years.
			- use of vacuum	procedures. They must have completed the appropriate number of deliveries during the previous two (2) years as	in the first six (6) months, FPPE monitoring may be extended at the	
			- repair of third (3 <sup>rd</sup> ) degree lacerations	described in basic inpatient obstetrics.	discretion of the Service Chief.	
			- repair of fourth (4 <sup>th</sup> ) degree lacerations			
	Ш		management of twin     pregnancy with consultation     for prenatal and intrapartum     care and delivery.			
				NPATIENT NEWBORN		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges apply to term and uncomplicated premature infants. Privileges include newborn resuscitation, routine care, septic evaluation of hemodynamically stable infants, performance of minor surgical procedures including circumcision and excision of supernumerary digits without bony involvement, evaluation of ongoing tachypnea, tachycardia, temperature instability, evaluation of blood sugar abnormalities, congenital anomalies, hip dysplasia, hyperbilirubinemia, intravenous fluids, and medication administration and nasogastric feedings.	All faculty must have current NRP certification  Scenario A: New faculty members who have provided newborn care elsewhere must provide proof of procedural skills training in a letter from a program director, department chair, service chief or other qualified individual who can attest to competence.  Scenario B: Any faculty member who has not provided inpatient newborn care for more than three (3) years must have a four (4) week retraining period.	Scenario A: Minimum five (5) proctored newborn evaluations and five (5) proctored circumcisions.  Scenario B: Minimum fifty (50) newborn evaluations as well as ten (10) circumcisions and five (5) neonatal resuscitations after the four (4) week retraining period. Service chief will determine which of these must be proctored and which may be reviewed retrospectively.	All faculty members must have current NRP certification.  Faculty members who are currently providing newborn care must demonstrate involvement in ten (10) newborn evaluations, five (5) circumcisions and five (5) newborn resuscitations during the past two (2) years.

			OBS	TETRICAL ULTRASOUND		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Basic ultrasound skills to determine fetal presentation, number and viability are part of core obstetrical skills. These privileges are for more advanced skills including:  Gestational dating	Scenario A:  New faculty members who have performed these skills elsewhere will supply proof of didactic ultrasound education in an intensive CME course and a letter from a program director, department chair, service chief or other qualified individual who can attest to competence. Applicant must present proof of thirty (30) prior studies for II, III, and V and 10 prior studies for I and IV.	Scenario A: Five (5) proctored studies  Scenario B: Ten (10) proctored studies	Faculty members who are currently performing obstetrical ultrasounds must maintain proficiency by appropriate CME and perform at least ten (10) of the requested privileged studies over two (2) years.
				Scenario B: Faculty members who have little or no recent experience with ultrasound who wish to begin performing the procedure will attend a structured OB ultrasound course approved by the service chief and show proof of 30 studies performed for II, III and V or 10 studies for I and IV.		
				ADULT INPATIENT		
REQUEST	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include admission, work-up, diagnosis, and provision of non-surgical treatment including consultation for patients who are admitted or in need of care to treat general medical illnesses. This includes routine procedures such as arthrocentesis, arterial blood gases, abdominal paracentesis, lumbar puncture, thoracentesis, ECG interpretation, pre-op care of surgical patients, and post-op medical care of surgical patients.	All faculty must have active ACLS certification  Scenario A: New faculty members, who have been performing inpatient or adult medical observation unit care elsewhere, must provide a letter from a program director, department chair, service chief or other qualified individual who can attest to competence.  Scenario B: If applicant has not practiced in an inpatient or adult medical observation setting for two (2) years, s/he must	Scenario A: Minimum proctoring for three (3) days on service with review of at least ten (10) cases  Scenario B: Proctoring twenty (20) cases	All faculty must have active ACLS certification  The applicant must attend on inpatient services eight (8) weeks or attend in the Medical Short Stay Unit forty-eight (48) shifts over a two (2) year period.

				attend an approved CME course and have a		
				supervised two (2) week retraining period. A letter from		
				the retraining supervisor is required.		
			FLE	XIBLE SIGMOIDOSCOPY		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Screening flexible sigmoidoscopy and cold forceps biopsy.	Scenario A: New faculty members who have been performing flexible sigmoidoscopy elsewhere must provide a letter from a program director, department chair, service chief or other qualified individual who can attest to competence and must have a log of procedures performed.  Scenario B: Faculty member who has not performed flexible sigmoidoscopies in the past two years or those who are re-training must attend a flexible sigmoidoscopy course that includes experience with models and be proctored by a current faculty member with privileges until the preceptor determines that the learner is competent, but with a minimum of ten (10) flexible sigmoidoscopies.	Scenario A: Minimum of five (5) proctored scopes  Scenario B: Minimum ten (10) proctored scopes	Ten (10) scopes over a two (2) year period
			EXER	CISE STRESS TESTING (EST)		
REQUES NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Treadmill exercise stress test	Scenario A:  New faculty members who have performed ESTs elsewhere must present proof of didactic EST education, such as a clinical rotation at	Scenario A: Minimum ten (10) proctored cases Scenario B:	Six (6) ESTs over two (2) years and maintain a current ACLS certification.

				an EST facility or intensive EST CME course, and must present proof of knowledge of resting ECG interpretation with a letter from a program director, department chair, service chief or other qualified individual who can attest to competence. The candidate must also supply documentation of performance of at least twenty (20) ESTs at least ten (10) of which have been performed during the past three (3) years of practice and must have an up to date ACLS certification.  Scenario B: Faculty members who desire to start performing ESTs must attend a structured EST course, document his/her ECG interpretation and have up-to-date ACLS certification.	Minimum twenty (20) proctored cases	
				GYNECOLOGY		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			- IUD Placement  - Marsupialization of Bartholin gland cyst	Scenario A:  New applicant must have verification from a program director, department chair, service chief or other qualified individual who can attest to competence in the requested procedure, or have performed at least six (6) of each requested procedure during the past two (2) years of practice.  Scenario B: Applicants without prior experience will need to provide proof of training in each procedure in an approved setting and then must have proof of six (6) cases.	Scenario A: Proctoring of one (1) case  Scenario B: Proctoring of one (1) case	Six (6) procedures over two (2) years or one (1) proctored case

				COLPOSCOPY		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Colposcopy for diagnosis and management of cervical, vulvar, and peri-anal abnormalities and precancers	Scenario A:  New faculty members who have performed colposcopy elsewhere must present proof of didactic colposcopic education, either with a letter from a program director, department chair, service chief or other qualified individual who can attest to competence, or by proof of an approved intensive colposcopy course. Applicant must present proof of thirty (30) previously proctored studies.  Scenario B: Faculty members who have little or no recent experience with colposcopy who desire to start performing the procedure will attend an approved intensive colposcopy course.	Scenario A: At least Five (5) procedures will be proctored by faculty members with colposcopic privileges and the individual will pass an on-line exam  Scenario B: Minimum ten (10) proctored cases by faculty members with colposcopic privileges and the individual will pass an on-line exam	Five (five) cases over two (2) years and passing an on- line exam
			CERVICAL LOOP ELECT	ROSURGICAL EXCISION PRO	CEDURE (LEEP)	
REQUEST	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Loop electrosurgical procedure (LEEP) for treatment of cervical intraepithelial neoplasia in the non-pregnant woman. Use of submucosal infiltration of cervical anesthesia is included in this privilege. Use of LEEP in the pregnant woman is not included in this privilege.	Scenario A:  New faculty members who have performed cervical LEEP elsewhere must present proof of didactic/practical education, either with a letter from a program director, department chair, service chief or other qualified individual who can attest to competence, or by proof of an approved intensive didactic/practical course. Applicant must present proof of ten (10) prior LEEPs.  Scenario B: Faculty members who do not have experience with LEEP and desire to start performing the procedure will attend an	Scenario A: At least five (5) procedures will be proctored by faculty members with LEEP privileges.  Scenario B: At least ten (10) procedures will be proctored by faculty members with LEEP privileges.	Four (4) cases over two (2) years

				approved didactic/practical course.		
				FINE NEEDLE BIOPSY		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Diagnostic Fine Needle Biopsy	Scenario A: New faculty members who have performed or been trained in fine needle biopsy elsewhere must provide a letter from a program director, department chair, service chief or other qualified individual who can attest to competence in the procedure.  Scenario B: Faculty members who have not performed fine needle biopsy previously or within the last year will perform two (2) fine needle biopsies with a credentialed faculty member present.	Scenario A and B: Minimum two (2) proctored procedures	Four (4) cases over two (2) years
				SURGICAL VASECTOMY		
REQUEST	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Surgical Vasectomy	Scenario A:  New faculty members who have performed vasectomies elsewhere must have a letter from a program director, department chair, service chief or other qualified individual who can attest to competence.  Scenario B: Faculty Members not currently performing vasectomies must show proof of completion of an approved course.	Scenario A: Minimum two (2) proctored cases  Scenario B: Minimum ten (10 ) proctored cases	Eight (8) cases over two (2) years

	,		М	EDICAL ACUPUNCTURE		
REQUEST	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Medical acupuncture is a specific medical discipline embracing the integration of acupuncture from various traditions into contemporary biomedical practice. A Physician Acupuncturist is a physician (MD or DO) who has acquired specialized education and training related to the integration of acupuncture within a biomedicine practice. Medical acupuncture is usually applied in primary care and pain management settings. Acupuncture is within the scope of practice of all licensed physicians in the State of Michigan. Current indications for medical acupuncture include but are not limited to: acute and chronic pain control, musculoskeletal pain, anxiety, neuralgias (trigeminal, Herpes Zoster, postherpetic, etc.), gastro-intestinal disorders, headache (vertigo, tinnitus), arthritis/arthrosis, insomnia, allergic sinusitis, labor management, dysmenorrhea, PCOS, cough with contraindications for narcotics, vasomotor symptoms, and acupuncture anesthesia for high risk patients, or patients with previous adverse reactions to anesthetics.	Minimum Training and Experience Applicants must have received a MD or DO degree from an approved school of medicine or osteopathy. Applicants must have privileges in the Department of Family Medicine in good standing. Applicants must have completed two hundred (200) hours of graduate training in medical acupuncture at an AMA Category I certified program, or equivalent training approved by the Department of Family Medicine after consultation with the American Academy of Medical Acupuncture.  Scenario A:  If previously practicing medical acupuncture, submission of three (3) letters of recommendation specifically addressing and attesting to the applicant's qualification and experience in medical acupuncture.  Scenario B: Applicants who have not previously practiced acupuncture must meet the minimal training requirements described above.	Scenario A: Minimum five (5) proctored cases  Scenario B: Minimum twenty (20) proctored cases	Must show evidence of a minimum of thirty (30) accredited hours over a two (2) year period of continuing education in AMA or NCCAOM (National Commission for the Certification of Acupuncture and Oriental Medicine) approved courses in acupuncture. The physician must maintain at least thirty (30) acupuncture patient contacts over two (2) years.
			MUSCL	JLOSKELETAL ULTRASOUND		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Musculoskeletal ultrasound for guiding procedures.	Qualifications in musculoskeletal ultrasound including the isolation and aspiration of fluid collections, and therapeutic injections requires knowledge of	Minimum ten (10) proctored cases within six (6) months.	Must maintain proficiency by obtaining appropriate CME and performing at least twenty (20)

				management of relevant musculoskeletal conditions. The abilities to distinguish abnormal findings to perform ultrasound-guided procedures in relevant clinical conditions are also necessary.  These qualifications can be demonstrated by completion of an education program covering ultrasound physics and instrumentation, normal and pathologic musculoskeletal anatomy, and "hands-on" experience.  New faculty who have performed musculoskeletal ultrasound elsewhere will supply proof of didactic ultrasound education, either a letter from residency or fellowship director or an intensive CME course. A letter from their previous credentialing chair, residency/fellowship director, or another board certified physician who can supply this information is acceptable. Must present proof of ten (10) proctored or twenty-four (24) independently performed musculoskeletal ultrasound-		procedures over two (2) years.
				guided interventional procedures.		
			BOTULISM TO	OXIN (BOTOX) INJECTION THE	RAPY	
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include Botox injection to areas of the face for cosmetic purposes as well as to the axillae for the medical condition of hyperhydrosis.	Scenario A:  New faculty members who have performed Botox injections elsewhere must present proof of didactic/practical education, either with a letter from a program director, department chair, service chief or other qualified individual who can attest to competence or by proof of an approved intensive didactic/practical course. Applicant must present proof of ten (10) injections performed under supervision.	Scenario A: Minimum five (5) proctored cases  Scenario B: Minimum ten (10) proctored cases	Six (6) cases over two (2) years

				Scenario B: Faculty members who have performed less than ten (10) Botox procedures in the previous two (2) years or do not have recent experience with Botox injections and desire to start performing the procedure will attend an approved didactic/practical course.		
LEVEL	III					
			rtment require specialty trainin rts Medicine, Integrative Medici	ine, and Palliative Medicine.	ice residency; privileges a	are granted in four
				GERIATRICS		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Faculty members with these privileges lead an interdisciplinary team in performing comprehensive geriatric assessment. S/he is able to accept referrals from outside physicians for these services at the departmental Geriatric Assessment Unit.	In addition to Level I qualifications, faculty members will have a Certificate of Added Qualification (CAQ) in Geriatrics, jointly issued by the American Board of Family Medicine and the American Board of Internal Medicine.	Minimum five (5) proctored cases	Participation in ten (10) cases over two (2) years
				SPORTS MEDICINE		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include evaluation, management, and non- operative treatment of musculoskeletal injuries in individuals and the treatment of medical conditions due to this level of activity (e.g. amenorrhea in female athletes). Faculty members can accept referrals for such services from physicians outside the department.	In addition to Level I qualifications, faculty members will have a Certificate of Added Qualification (CAQ) in Sports Medicine from the American Board of Family Medicine, or be qualified to sit for the exam.	Minimum five (5) proctored cases	Participation in twenty (20) cases over two (2) years

INTEGRATIVE MEDICINE						
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include evaluation and management of the healthcare of individuals who seek to integrate conventional medicine with holistic health therapies and practices. Faculty members can accept referrals for such services from physicians outside the department.	In addition to Level I qualifications, faculty members will have certification by either the American Board of Integrative and Holistic Medicine, or the American Board of Integrative Medicine or be qualified to sit for either of the exams.	Minimum five (5) proctored cases	Participation in twenty (20) cases over two (2) years
				PALLIATIVE MEDICINE		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Privileges include being able to admit, evaluate, diagnose, and provide palliative care treatment to adult patients with advanced illness and end of life disease. Physicians with these privileges have the highest level of competence in Hospice and Palliative Medicine on a par with that considered appropriate for a subspecialist. They are qualified to act as consultants and should, in turn, request consultation from within or from outside the medical center whenever needed.  Elements of subspecialty hospice and palliative medicine practice include, but are not limited to:  Assessment and management of pain Assessment and management physical symptoms (pain, nausea, dyspnea, fatigue, etc) Assessment and management of psychological symptoms (depression, anxiety, grief, etc) Goals of care determination, and	In addition to Level I qualifications, a practicing subspecialist in Hospice and Palliative Medicine (HPM) must have successfully completed an M.D. or D.O. degree or equivalent, an accredited residency program, and a Hospice and Palliative Medicine Fellowship. HPM subspecialists are additionally expected to be board-certified within 5 years of appointment. Physicians who obtain HPM board certification through a practice pathway (i.e. 'grandparenting') before 2012 (MD) or 2014 (DO) will be exempt from the fellowship completion.	Each new appointee to the clinical faculty will have a senior faculty member identified to serve as a clinical mentor and reviewer of initial professional practice. This advisory and monitoring function will occur for the first six months of appointment, and will involve the detailed review of no fewer than ten (10) cases. As part of this initial FPPE, five patient and/or family meetings will be personally observed or formally debriefed by the mentor. After successful completion of this initial six month period, faculty will be expected to participate in the care of no fewer than twenty (20) patients as an HPM subspecialist.	A provider profile will be reviewed for clinical activity and for medical record and resident supervision compliance. Outpatient and inpatient notes will be evaluated for key components including history, physical examination, and medical decision making. Reporting will be made through the Division leadership and to the Department of Family Medicine.

			support for appropriate decision-making and treatment planning  Running family  Meetings  Managing Interprofession Interprofes			
LEVE	_ IV					
			NON FAMILY	MEDICINE PRACTITION	DNER	
				DICAL ACUPUNCTURE		
REQUEST NEW	REQUEST RENEWAL	APPROVAL CHIEF/CHAIR	PROCEDURE	INITIAL CRITERIA	FPPE Monitoring requirements for New Hire or Add Privileges (As applicable)	RENEWAL CRITERIA
			Scope of Practice/Privileges: Medical acupuncture is a specific medical discipline embracing the integration of acupuncture from various traditions into contemporary biomedical practice. A Physician Acupuncturist is a physician (MD or DO) who has acquired specialized education and training related to the integration of acupuncture within a biomedicine practice. Medical acupuncture is usually applied in primary care and pain management settings. Acupuncture is within the scope of practice of all licensed physicians in the State of Michigan. Current indications for	Minimum Training and Experience Applicants must have received a MD or DO degree from an approved school of medicine or osteopathy. Applicants must have core privileges in good standing within Michigan Medicine. Applicants must have completed two hundred (200) hours of graduate training in medical acupuncture at an AMA Category I certified program, or equivalent training approved by consultation with the American Academy of Medical Acupuncture.	Scenario A: Minimum five (5) proctored cases  Scenario B: Minimum twenty (20) proctored cases	Must show evidence of a minimum of thirty (30) accredited hours over a two (2) year period of continuing education in AMA or NCCAOM (National Commission for the Certification of Acupuncture and Oriental Medicine) approved courses in acupuncture. The physician must maintain at least thirty (30) acupuncture

	medical acupuncture include but	Scenario A:		patient contacts			
	are not limited to: acute and	If previously practicing		over two (2)			
	chronic pain control,	medical acupuncture,		years.			
	musculoskeletal pain, anxiety,	submission of three (3) letters					
	neuralgias (trigeminal, Herpes	of recommendation					
	Zoster, postherpetic, etc.),	specifically addressing and					
	gastro-intestinal disorders,	attesting to the applicant's					
	headache (vertigo, tinnitus),	qualification and experience					
	arthritis/arthrosis, insomnia,	in medical acupuncture.					
	allergic sinusitis, labor						
	management, dysmenorrhea,						
	PCOS, cough with	Scenario B:					
	contraindications for narcotics,	Applicants who have not					
	vasomotor symptoms, and	previously practiced					
	acupuncture anesthesia for high	acupuncture must meet the					
	risk patients, or patients with	minimal training requirements					
	previous adverse reactions to	described above.					
	anesthetics.						
For Level IV Medical Acupuncutre Only: Non-Family Medicine Practitioners must obtain approval from his/her Primary Department Chair and Service Chief.							
Applicant Signature	:		Date				
Service Chief of Prin	mary Department:		Date				
Chairman of Primary Department:			Date				
SPECIAL PRIVILEGES  A separate application is required to APPLY or REAPPLY for the following Special Privileges:  ► CHEMOTHERAPY PRESCRIBING FOR NON-ONCOLOGISTS  ► FLUOROSCOPY  ► HYPERBARIC OXYGEN THERAPY  ► LASER  ► ROBOTIC SURGICAL PLATFORM  ► SEDATION PRIVILEGES FOR A NON-ANESTHESIOLOGIST							
PLEASE go to URL: www.med.umich.edu/i/oca for instructions, or contact your Clinical Department Representative.							
TO BE COMPLETED BY APPLICANT:							
I meet the previously stated minimum criteria and request that my application be considered for the privileges as outlined							
above. I authorize and release from liability, any hospital, licensing board, certification board, individual or institution who							
in good faith and without malice, provides necessary information for the verification of my professional credentials for							
membership to the	Medical Staff of the University of	Michigan health System.					
Applicant Signature:			te:				

## Approval: As Modified As (please explain) Requested I have reviewed and /or discussed the privileges requested and find them to be commensurate with his/her training and experience, and recommend that his/her application proceed. Justification for approval is based on careful review of the applicant's education, postgraduate clinical training, demonstrated clinical proficiency and Board Certification or qualifications to sit for the Boards. Department Chair: \_\_\_\_\_ Date: \_\_\_\_ Date: \_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_ **CREDENTIALS COMMITTEE ACTION:** Approval as Not Approved \_\_\_\_\_(please explain) Requested Credentials Committee Member: \_\_\_\_\_\_Date: \_\_\_\_\_ **EXECUTIVE COMMITTEE ON CLINICAL AFFAIRS ACTION:** Approval as Not Approved (please explain) Requested Executive Committee on Clinical Affairs – Member: Date:

**DEPARTMENT ACTION:**