

UNMH Psychiatry Clinical Privileges

Name:

Effective Dates: _____ To: _____

All new applicants must meet the following requirements as approved by the UNMH Board of Trustees effective: 07/31/2015

INSTRUCTIONS

Applicant: Check off the "Requested" box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

OTHER REQUIREMENTS

1. Note that privileges granted may only be exercised at UNM Hospitals and clinics that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital or department policy.
2. This document defines qualifications to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

UNMH Psychiatry Clinical Privileges

Name:

Effective Dates: _____ To: _____

Qualifications for General Psychiatry

Initial privileges - *To be eligible to apply for privileges in general psychiatry, the applicant must meet the following criteria:*

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in psychiatry.

AND/OR

Current certification or active participation in the examination process leading to certification in psychiatry by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry.

Required previous experience: Applicants for initial appointment must be able to demonstrate the provision of inpatient, outpatient, or consultative services, reflective of the scope of privileges requested, for an acceptable number of patients during the past 12 months, or demonstrate successful completion of an ACGME– or AOA–accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Reappointment (Renewal of Privileges) Requirements - *To be eligible to renew privileges in general psychiatry, the reapplicant must continue to meet the appointment criteria and must meet the following maintenance of privilege criteria:*

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: *General Psychiatry*

Admit, evaluate, diagnose, treat, and provide consultation to adult patients presenting with mental, behavioral, addictive, or emotional disorders (e.g., psychoses, depression, anxiety disorders, substance abuse disorders, developmental disabilities, sexual dysfunctions, and adjustment disorders). Evaluate, admit, provisionally diagnose and provide initial treatment for child and adolescent patients. Privileges include providing consultation with physicians in other fields regarding mental, behavioral, or emotional disorders; pharmacotherapy; psychotherapy; family therapy; consultation to the courts; and emergency psychiatry; as well as the ordering of diagnostic laboratory tests and the prescription of medications. Includes the performance of history and physical exams. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

Requested

UNMH Psychiatry Clinical Privileges

Name:

Effective Dates: _____ To: _____

Qualifications for Child and Adolescent Psychiatry

Initial privileges - To be eligible to apply for privileges in child and adolescent psychiatry, the applicant must meet the following criteria:

Meet criteria for general psychiatry, plus successful completion of an accredited ACGME or AOA residency in child and adolescent psychiatry.

AND/OR

Current subspecialty certification or active participation in the examination process leading to subspecialty certification in child and adolescent psychiatry by the American Board of Psychiatry and Neurology or Certificate of Special Qualifications in child and adolescent psychiatry by the American Osteopathic Board of Neurology and Psychiatry.

Required previous experience: Applicants for initial appointment must be able to demonstrate the provision of inpatient, outpatient, or consultative services, reflective of the scope of privileges requested, for an acceptable number of patients during the past 12 months, or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Reappointment (Renewal of Privileges) Requirements - To be eligible to renew privileges in child and adolescent psychiatry, the reapplicant must continue to meet the appointment criteria and must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: Child and Adolescent Psychiatry

Admit, evaluate, diagnose, treat, and provide consultation to children and adolescents who suffer from mental, behavioral, addictive, or emotional disorders. Privileges include being able to provide consultation with physicians in other fields regarding mental, behavioral, or emotional disorders and their interaction with physical disorders. Includes the performance of history and physical exams. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

Requested

UNMH Psychiatry Clinical Privileges

Name:

Effective Dates: _____ To: _____

Qualifications for Addiction Psychiatry

Initial privileges - *To be eligible to apply for privileges in addiction psychiatry, the applicant must meet the following criteria:*

Meet criteria for general psychiatry, plus successful completion of an accredited ACGME or AOA residency in addiction psychiatry,

AND/OR

Current subspecialty certification or active participation in the examination process leading to subspecialty certification in addiction psychiatry by the American Board of Psychiatry and Neurology, or Certificate of Added Qualifications in addiction psychiatry by the American Osteopathic Board of Neurology and Psychiatry.

Required previous experience: Applicants for initial appointment must be able to demonstrate the provision of inpatient, outpatient, or consultative services, reflective of the scope of privileges requested, for at an acceptable number of patients during the past 12 months, or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Reappointment (Renewal of Privileges) Requirements - *To be eligible to renew privileges in addiction psychiatry, the reapplicant must continue to meet the appointment criteria and must meet the following maintenance of privilege criteria:*

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: *Addiction Psychiatry*

Admit, evaluate, diagnose, treat, and provide consultation to patients with mental problems related to addictive disorders and the special and emotional problems related to addiction and substance abuse (alcoholism and other drug dependencies, such as psychoactive drug use and addiction,) using all forms of psychological and social treatment including medications. Includes the performance of history and physical exams. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

Requested

UNMH Psychiatry Clinical Privileges

Name:

Effective Dates: _____ To: _____

Qualifications for Geriatric Psychiatry

Initial privileges - To be eligible to apply for privileges in geriatric psychiatry, the applicant must meet the following criteria:

Meet criteria for general psychiatry, plus successful completion of an ACGME- or AOA-accredited residency in geriatric psychiatry

AND/OR

Current subspecialty certification or active participation in the examination process leading to subspecialty certification in geriatric psychiatry by the American Board of Psychiatry and Neurology.

Required previous experience: Applicants for initial appointment must be able to demonstrate provision of inpatient, outpatient, or consultative services, reflective of the scope of privileges requested, for an acceptable number of patients during the past 12 months, or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Reappointment (Renewal of Privileges) Requirements - To be eligible to renew privileges in geriatric psychiatry, the reapplicant must continue to meet the appointment criteria and must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: *Geriatric Psychiatry*

Admit, evaluate, diagnose, treat, and provide consultation to elderly patients with mental and emotional disorders. Includes the performance of history and physical exams. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

Requested

UNMH Psychiatry Clinical Privileges

Name:

Effective Dates: _____ To: _____

Qualifications for Psychosomatic Medicine

Initial privileges - To be eligible to apply for privileges in psychosomatic medicine, the applicant must meet the following criteria:

Meet criteria for general psychiatry, plus successful completion of an ACGME- or AOA-accredited residency in psychosomatic medicine

AND/OR

Current subspecialty certification or active participation in the examination process leading to subspecialty certification in psychosomatic psychiatry by the American Board of Psychiatry and Neurology.

Required previous experience: Applicants for initial appointment must be able to demonstrate the provision of inpatient, outpatient, or consultative services, reflective of the scope of privileges requested, for an acceptable number of patients during the past 12 months, or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Reappointment (Renewal of Privileges) Requirements - To be eligible to renew privileges in psychosomatic medicine, the reapplicant must continue to meet the appointment criteria and must meet the following maintenance of privilege criteria:

Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: *Psychosomatic Medicine*

Admit, evaluate, diagnose, treat, and provide consultation to patients with mental problems related to psychosomatic disorders. Includes the performance of history and physical exams. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

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Special Non-Core Privileges (See Specific Criteria)

If desired, non-core privileges are requested individually in addition to requesting the core. Each individual requesting non-core privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required experience, and maintenance of clinical competence.

Qualifications for Electroconvulsive Therapy

Criteria: Successful completion of an ACGME or AOA accredited residency program in psychiatry AND successful completion of program in Electroconvulsive Therapy, approved by the Department of Psychiatry.

Required previous experience: Demonstrated current competence and evidence of the provision of at least 20 ECT treatments to at least three patients during the past 12 months or completion of training in the past 12 months. Treatment must have included the evaluation of the patient for treatment need and suitability and immediate post treatment follow-up and evaluation at the completion of the treatment course.

Reappointment requirements: Demonstrated current competence and evidence of the provision of ECT treatments to an acceptable number of different patients during the past 24 months based on the results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGE: *Electroconvulsive Therapy*

Requested

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Acknowledgment of practitioner

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at UNM Hospitals and clinics, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Signed _____ Date _____

Department Chair recommendation

I have reviewed the requested clinical privileges with the applicant and the supporting documentation for the above-named applicant and:

- Recommend all requested privileges with the standard professional practice plan
- Recommend privileges with the standard professional practice plan and the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege Condition/Modification/Explanation

Notes:

Department Chair Signature _____ Date _____

Criteria approved by UNMH Board of Trustees on 07/31/2015