

PRIVILEGE APPLICATION FORM - [Mercy Medical Center]

zz.Dermatology,

Current Privilege Status Key

Practitioner's Current Privilege status is signified in () preceding each privilege.

G = Granted

W = Withdrawn

T = Temporary

P = With Proctor

A = Assist with

C = With Consult

E = Emergency Only

RQ = Requested

L = Leave of Absence

R = Resigned

S = Suspended

Admission Privileges - Full

Requested Granted

_____ () Admission Privileges - Full

Admission Privileges - Affiliate

Requested Granted

_____ () Affiliate privileges allow the physician to arrange for admission of a patient for inpatient care. (S)he is then responsible for arranging for a medical staff member of the appropriate specialty, who holds full admitting privileges, to assume responsibility for the medical management of the patient. That physician is then responsible for admission and inpatient orders.

The admission history and physical may be performed by either the affiliate physician or physician managing the patient. The affiliate physician is responsible for documenting the name of the physician who is assuming the inpatient care.

Signed: _____ Dated: _____

The affiliate physician does not have privileges for inpatient care.

** By requesting Affiliate status, you are agreeing to withdraw your existing privileges.

If Affiliate checked, do not complete the rest of this form. **

Department of Dermatology

Members of the Dermatology Section should be residency trained physician specialists in cutaneous medicine. Appropriate board certifying entities are: American Board of Dermatology, American Osteopathic Board of Dermatology and Royal College of Physicians and Surgeons of Canada. Members should either be Board eligible or Board certified.

Date: 1985

Reviewed: Dec 1989

Revised: Aug 1995, Nov 2010

Anesthesia

Requested Granted

_____ () Moderate (conscious) sedation *

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Dermabrasion

Requested Granted

- | | | | |
|-------|-------|-----|-------------------------------|
| _____ | _____ | () | Acne scarring |
| _____ | _____ | () | Chemical or physical scarring |
| _____ | _____ | () | Actinic dermatitis |
| _____ | _____ | () | Nevoid benign growths |
| _____ | _____ | () | Rhinophyma |

Incision and Drainage

Requested Granted

- | | | | |
|-------|-------|-----|--|
| _____ | _____ | () | Acne cysts, milia, comedones, pustules, and intercommunicating sinuses. |
| _____ | _____ | () | Cutaneous and mucous membrane abscess and cysts, infected and non-infected |
| _____ | _____ | () | Pilonidal cysts, onychia and paronychia |
| _____ | _____ | () | Incision/removal of foreign body |
| _____ | _____ | () | Drainage/aspiration of hematoma |

Skin Grafting

Requested Granted

- | | | | |
|-------|-------|-----|--|
| _____ | _____ | () | Split thickness skin graft |
| _____ | _____ | () | Full thickness skin graft |
| _____ | _____ | () | Full thickness pinch grafting of defects, e.g. leg ulcers |
| _____ | _____ | () | Composite graft |
| _____ | _____ | () | Transposition (includes "Z" plasty), rotation and advancement of pedicle flaps |

Biopsy

Requested Granted

- | | | | |
|-------|-------|-----|---|
| _____ | _____ | () | Microscopic diagnostic interpretation of skin disorders |
| _____ | _____ | () | Microscopic diagnostic interpretation of skin disorders, to include skin or mucous membranes, subcutaneous tissues, muscles and lymph nodes |

Skin Testing

Requested Granted

- | | | | |
|-------|-------|-----|--|
| _____ | _____ | () | Patch, intradermal and intracutaneous (scratch or puncture), photo, mucous membrane, direct bronchial mucosa (insufflation) and passive transfer |
| _____ | _____ | () | Patch, intradermal and intracutaneous (scratch or puncture), photo, mucous membrane, direct bronchial mucosa (insufflation), and passive transfer - for allergy and infection. |

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Injections

Requested Granted

- | | | | |
|-------|-------|-----|---|
| _____ | _____ | () | Intra and sublesional injection of chemicals and medications (including corticosteroids) for benign dermatoses |
| _____ | _____ | () | Intra and sublesional chemicals and medications (including corticosteroids) for keloids and/or hypertrophic scarring |
| _____ | _____ | () | Intra and sublesional chemicals and medications (including corticosteroids) for chemotherapy (also topical application of chemotherapeutic agents) for benign or malignant cutaneous lesions. |
| _____ | _____ | () | Injection of sclerosing solutions |

Nails

Requested Granted

- | | | | |
|-------|-------|-----|---|
| _____ | _____ | () | Removal of toenails |
| _____ | _____ | () | Removal of toenails, surgical avulsion of nail |
| _____ | _____ | () | Removal of toenails, surgical ablation of nail matrix |

General

Requested Granted

- | | | | |
|-------|-------|-----|---|
| _____ | _____ | () | Vermilionectomy for actinic cheilitis and/or leukoplakia of the lip |
| _____ | _____ | () | Removal of nevi, cysts, verrucae, benign and malignant tumors of the skin and mucous membrane. Procedures to include cold knife excision, electrosurgical excision, cryosurgical ablation, or curettage and fulguration, electrodesiccation and radiotherapy (with radiation oncology consultation) |
| _____ | _____ | () | Scar revision |
| _____ | _____ | () | Electrosurgical revision of rhinophyma |
| _____ | _____ | () | Repair of lacerations of skin |
| _____ | _____ | () | Debridement of eczematous or infected skin and abrasions |
| _____ | _____ | () | Microscopically controlled chemosurgical ablation of malignant tumors of skin (Mohs technique) |
| _____ | _____ | () | Autotransplantation of hair |
| _____ | _____ | () | Blepharoplasty |
| _____ | _____ | () | Application of Unna's paste boot |
| _____ | _____ | () | Histopathologic exam of dermatologic tissue |
| _____ | _____ | () | Dermatologic laser applications |
| _____ | _____ | () | Dermatologic consultation |

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Signature

I have requested and will exercise only those privileges for which by education, training, current experience, and demonstrated performance, I am qualified to perform.

Signed: _____ Date: _____

* specific privilege criteria or requires evidence of education and experience