

**SUBMITTAL TO THE BOARD OF SUPERVISORS  
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



**ITEM: 15.2**  
(ID # 22107)

**MEETING DATE:**  
Tuesday, June 27, 2023

**FROM :** (RUHS) RIVERSIDE UNIVERSITY HEALTH SYSTEM:

**SUBJECT:** RIVERSIDE UNIVERSITY HEALTH SYSTEM-MEDICAL CENTER: Ratify and Approve Medical Staff Appointments, Reappointments, Clinical Privileges Proctoring, Additional Privileges, Withdrawal of Privileges, Leave of Absences, Resignations/Withdrawals, Automatic Termination, and Privileges, as Recommended by the Medical Executive Committee on July 14, 2022, August 11, 2022, September 8, 2022, October 13, 2022, November 10, 2022, and December 8, 2022, All Districts. [\$0].

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Ratify and approve medical staff appointments, reappointments, clinical privileges proctoring, additional privileges, withdrawal of privileges, leave of absence, resignations/withdrawals, automatic termination, and privileges, as recommended by the Medical Executive Committee on July 14, 2022, August 11, 2022, September 8, 2022, October 13, 2022, November 10, 2022, and December 8, 2022.

**ACTION:**Policy

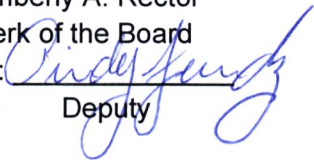
  
Jennifer Cruikshank, Chief Executive Officer - Health System 6/8/2023

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**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Perez, seconded by Supervisor Spiegel and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel, Washington, Perez and Gutierrez  
Nays: None  
Absent: None  
Date: June 27, 2023  
xc: RUHS-Medical Center

Kimberly A. Rector  
Clerk of the Board  
By:   
Deputy

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

<b>FINANCIAL DATA</b>	<b>Current Fiscal Year:</b>	<b>Next Fiscal Year:</b>	<b>Total Cost:</b>	<b>Ongoing Cost</b>
<b>COST</b>	\$0	\$0	\$0	\$0
<b>NET COUNTY COST</b>	\$0	\$0	\$0	\$0
<b>SOURCE OF FUNDS: N/A</b>			<b>Budget Adjustment: No</b>	
			<b>For Fiscal Year: 22/23</b>	

**C.E.O. RECOMMENDATION:** Approve

**BACKGROUND:**

**Summary**

The Riverside University Health System Medical Center (RUHS-MC) is a licensed and accredited acute care hospital serving the needs of County residents since 1893. As an acute care hospital, RUHS-MC is required by the State of California and its Department of Public Health to have a "governing body" separate from its administrative leaders and medical staff leadership.

Per California Code of Regulations §70035 (see also 42 CFR 482.12 and Joint Commission Standard LD.01.03.01), the "governing body" is "the person, persons, board of trustees, directors or other body in whom the final authority and responsibility are vested for conduct of the hospital." On February 23, 1988 (Motion 3-35), the Board of Supervisors (Board) declared itself to be the "governing body" for the hospital.

Subsequently, on April 12, 1998 (Resolution No. 88-166), the Board also determined that it would hold at least one regularly scheduled meeting each month, acting as the Medical Center Governing Board, to "review hospital policy, quality of care, medical staff credentialing, institutional planning and continuing education matters" in accordance with hospital bylaws; which lay out the procedures and practices by which the Board of Supervisors, acting as the governing body of RUHS-MC, exercises that authority and meets the expectations of the State, the medical center's accrediting bodies and the federal healthcare programs.

The hospital bylaws were most recently reviewed and revised on November 14, 2017 (Item 3.22). In accordance with Article II and Article IV, of these bylaws, a hospital Medical Executive Committee is currently in place and composed of the Chief of Medical Staff, immediate past Chief of Medical Staff, Chief of Medical Staff elect, Secretary-Treasurer, Medical Director, Chair of the Performance Improvement Committee, and the Chair and Vice Chair of departments.

Pursuant to the duties of the hospital Medical Executive Committee to make recommendations directly to the Governing Board pertaining to recommendations regarding medical staff initial appointments, reappointments, and clinical privileges for eligible individuals, the Medical Executive Committee met monthly between July 2022 through December 2022, in consideration of its bi-annual submission to the Board.

During its meetings on July 14, 2022, August 11, 2022, September 8, 2022, October 13, 2022, November 10, 2022, and December 8, 2022, the Medical Executive Committee recommended to refer the following RUHS-MC Medical Staff recommendations to the Board of Supervisors for review and action:

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,  
STATE OF CALIFORNIA**

- A. Approval of Medical Staff Appointments and Clinical Privileges, Reappointments, FPPE/Reciprocal\* Complete Remain on Provisional, FPPE/Reciprocal\* Complete Remain on Provisional, FPPE–Final Proctoring for Additional Privileges, Final FPPE/Reciprocal\* Advancement of Staff Status, Final Proctoring, FPPE/Partial Proctoring, FPPE/Reciprocal\* Complete Remain on Provisional, FPPE – Final Proctoring for Additional Privileges.

The attached RUHS-MC Chief Executive Officer approvals provide information related to these topics. Their presentation and review by the Board not only helps the RUHS-MC to meet regulatory requirements, but also to be transparent about its operations, successes, and challenges.

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Jennifer L. Cruikshank  
Chief Executive Officer or Designee

- ATTACHMENTS: RUHS-MC CEO APPROVALS FOR MEDICAL STAFF  
ATTESTATION APPOINTMENT, REAPPOINTMENTS, AND  
CLINICAL PRIVILEGES (JULY 2022-DECEMBER 2022)**
- ATTACHMENT A AGING POLICY APPENDIX-A SCREENING EVAL FORM 3.24.22**
- ATTACHMENT B AHP-NEURO INTERVENTION RADIOLOGY NP 04.14.22**
- ATTACHMENT C CARDIOLOGY PRIVILEGE FORM 02.08.22 (002)**
- ATTACHMENT D DERMATOLOGY CLINICAL PRIVILEGES 06.13.22**
- ATTACHMENT E EMERGENCY MEDICINE CORE PRIVILEGE FORM 3.10.22**
- ATTACHMENT F FINAL MSWBC AUTHORIZATION RELEASE FORM APPROVED  
03.10.22**
- ATTACHMENT G NEUROLOGY PRIVELGE FORM 04.14.22**
- ATTACHMENT H OBGYN PRIVILEGES FORM REVISED 01.13.22**
- ATTACHMENT I PED CRITICAL CARE MEDICINE PRIV 12.2021**

  
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Jacqueline Ruiz, Sr. Management Analyst 6/20/2023



DATE: July 14, 2022

To: File

FROM: Medical Staff Executive Committee

SUBJECT: Medical Staff Attestation Appointment, Reappointments and Clinical Privileges

**INITIAL APPOINTMENT – July 14, 2022 – June 30, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Aguilar, Vladimir, NP	AHP-Provisional	Nurse Practitioner	Surgery	AACN Adult-Gerontology Acute/Critical Care Nursing
Bovee, Kristie, MD	Provisional	Anesthesiology	Anesthesia	Eligible
Burgdorff, Courtney J., MD	Provisional	Anesthesiology	Anesthesia	Anesthesiology
Clarey, Karen, MD	Moonlighting	Psychiatry	Psychiatry	Eligible
Filler, Taylor N., MD	Provisional	Emergency Medicine	Emergency Medicine	Eligible
Heczko, Joshua B., MD	Provisional	Ophthalmology	Ophthalmology	Eligible
Heilbronn, Jackson L., DO	Provisional	Internal Medicine	Medicine	Eligible
Kerr, William K., PA	AHP-Provisional	Physician Assistant	Medicine	NCCPA
Kwon, Ohwook, MD	Provisional	Interventional Radiology	Radiology	Eligible
Mackintosh, Tia C., MD	Provisional	Emergency Medicine	Emergency Medicine	Eligible
Noda, Jason P., NP	AHP-Provisional	Nurse Practitioner	Surgery	AACN Adult Gerontology
Pappalardo, Ashley, NP	AHP-Provisional	Nurse Practitioner	Surgery	ANCC Adult-Gerontology Acute/Critical Care Nursing
Park, Eunwoo, MD	Provisional	Internal Medicine	Medicine	Eligible
Raae-Nielsen, Jennifer E., md	Provisional	Emergency Medicine	Emergency Medicine	Eligible
Saavedra, Madeline, MD	Moonlighting	Psychiatry	Psychiatry	Eligible
Shrestha, Manish P., MD	Provisional	Gastroenterology	Medicine	Internal Medicine
Srikureja, Wichit, MD	Provisional	Gastroenterology	Medicine	Internal Medicine Gastroenterology
Subramanian, Meenakshisundaram, DO	Provisional	Ophthalmology	Ophthalmology	Eligible
Truong, Alexandra, MD	Moonlighting	Psychiatry	Psychiatry	Eligible

**REAPPOINTMENTS – August 1, 2022 – July 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Amr-Elmeligy, Maha MD	Active	Neonatology	Pediatrics	Pediatrics Neonatal-Perinatal Medicine
Balsamo, Dalia N., MD	Administrative	Psychiatry	Psychiatry	Psychiatry Child & Adolescent Psychiatry Forensic Psychiatry Addiction Medicine
Reappointment date changed to match BH				
Baker, Nancy A., MD	Active	Neurology	Medicine	Neurology Clinical Neurophysiology
Brenner, Megan L., MD	Active	Surgical Critical Care	Surgery	Surgery General Surgical Critical Care Vascular Surgery
Cacho, Bradley MD	Active	Neonatology	Pediatrics	Pediatrics
Chau, Minh-Hang T., MD	Courtesy	Urology	Surgery	Urology Pediatric Urology
Choudhury, Baishakhi, MD	Active	Otolaryngology	Surgery	Otolaryngology Neurotology
Cohen, Mallory MD	Active	Pediatrics	Pediatrics	Pediatrics Pediatric Gastroenterology
Cramer, Anthony M., PA	AHP	Physician Assistant	Orthopedic Surgery	NCCPA
French, Michael H., DO	Active	Orthopedic Surgery	Orthopedic Surgery	Orthopedic Surgery
Hathout, Eba H., MD	Active	Endocrinology	Pediatrics	Pediatrics Pediatric Endocrinology
Holguin, Christine T., PA	AHP	Physician Assistant	Emergency Medicine	NCCPA
<b>Withdraw of Privileges:</b> • Lumbar Puncture • Paracentesis				
Kidd, Stephanie C., MD	Active	Otolaryngology	Surgery	Otolaryngology
Loeb, Joshua D., MD	Active	Neurology	Pediatrics	Pediatric Neurology w/qualifications in child neurology

Leong, Beatriz V., MD	Active	Vascular Surgery	Surgery	Pediatric Epilepsy Vascular Surgery Surgery-General
Liu, Yuan F., MD	Active	Otolaryngology	Surgery	Otolaryngology
Losey, Travis E., MD	Active	Neurology	Medicine	Neurology Clinical Neurophysiology Epilepsy
Martinez, Juan J., MD	Active	Pediatric Critical Care	Pediatrics	Pediatrics Pediatric Critical Care
Nesmith, Alysia N., PA	AHP	Physician Assistant	Emergency Medicine	NCCPA
Nguyen, Christopher V., MD	Active	Neuroradiology	Radiology	Diagnostic Radiology Neurology
Nguyen, Khai T., MD	Active	Psychiatry	Psychiatry	Psychiatry Child & Adolescent Psychiatry
Nguyen, Khanh K., MD	Active	Otolaryngology	Surgery	Otolaryngology
Ortega, Edgar, MD <b>Additional Privilege:</b> • General Psychiatry • Supervise AHP & Psychologist <b>Withdraw Privilege:</b> • Resident in Training	Provisional	Psychiatry	Psychiatry	Eligible
Peterson, Nancy, NP	AHP	Nurse Practitioner	Emergency Medicine	AANP
Rhee, Alice MD	Active	Pediatrics	Pediatrics	Pediatrics
Sauceda, Uziel I, DO <b>Withdraw Privileges:</b> • Palliative Care Priv • Supervise AHP • Arterial Puncture/Cannulation • NG Tube Placement	Active	Family Medicine	Family Medicine	Family Medicine Sports Medicine
Skef, Wasseem, MD	Active	Gastroenterology	Medicine	Internal Medicine Gastroenterology
Skortez, Lynetta E., MD	Active	Internal Medicine	Medicine	Internal Medicine
Thomson, Bryon D., MD	Active	Diagnostic Radiology	Radiology	Diagnostic Radiology
Tom, Michelle, MD <b>Additional Privilege:</b> • General Psychiatry • Supervise AHP & Psychologist <b>Withdraw Privilege:</b> • Resident in Training	Provisional	Psychiatry	Psychiatry	Eligible
Tsai, Janice MD	Active	Pediatrics	Pediatrics	Pediatrics
Tsang, Alexander H., MD <b>Additional Privilege:</b> • General Psychiatry • Supervise AHP & Psychologist <b>Withdraw Privilege:</b> • Resident in Training	Provisional	Psychiatry	Psychiatry	Eligible
Waheed, Osmond, DO	Active	Psychiatry	Psychiatry	Psychiatry
Wu, Patrick R., DO	Active	Infectious Disease	Medicine	Internal Medicine Infectious Disease
Yang, Almira J., DO	Active	Endocrinology	Medicine	Internal Medicine Endocrinology
Yu, Grace L., MD	Active	Plastic Surgery	Surgery	Plastic Surgery

**FPPE/RECIPROCAL\* COMPLETE REMAIN ON PROVISIONAL - None**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
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**FINAL FPPE/RECIPROCAL\* ADVANCEMENT OF STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Diem-Chau, Nguyen L., MD	Provisional	Psychiatry	Psychiatry	Advance to Active
Russell, Amy E., MD	Provisional	Emergency Medicine	Emergency Medicine	Advance to Active
Townsend, Dwight A., MD	Provisional	Diagnostic Radiology	Radiology	Advance to Telemedicine
Truong, Kevin, MD	Provisional	Psychiatry	Psychiatry	Advance to Active
Yang, Vivian, MD	Provisional	Family Medicine	Family Medicine	Advance to Active

**FPPE PARTIAL PROCTORING COMPLETE**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Pachon, Andrew G., MD	Provisional	Emergency Medicine	Emergency Medicine	Pending: • TEE

**FPPE FINAL PROCTORING FOR ALLIED HEALTH PROFESSIONALS**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Nwigwe, Desiree C, NP	AHP-Provisional	Nurse Practitioner	Psychiatry	

**FPPE FINAL PROCTORING FOR ADDITIONAL PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Selim, Khaled M., MD	Active	Gastroenterology Transplant Hepatology	Medicine	FPPE complete for Hepatology

**ADDITIONAL PRIVILEGES/WITHDRAWN PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Engelberg, Moises, DO	Active	Ophthalmology	Ophthalmology	Additional Privilege: • Surgical Vitreoretinal Non-Core Procedures
Nesper, Timothy P., MD	Active	Emergency Medicine	Emergency Medicine	Withdraw of Privilege: • TEE
Ortega, Edgar, MD	Moonlighting	Psychiatry	Psychiatry	Additional Privilege: • Psychiatry General Core • Supervision of AHP & Psychologist
Tom, Michelle, MD	Moonlighting	Psychiatry	Psychiatry	Additional Privilege: • Psychiatry General Core • Supervision of AHP & Psychologist
Tsang, Alexander H., MD	Moonlighting	Psychiatry	Psychiatry	Additional Privilege: • Psychiatry General Core • Supervision of AHP & Psychologist

**CHANGE IN STAFF CATEGORY - None**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
				•

**CHANGE IN STAFF REAPPOINTMENT DATES - None**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
				•

**MODIFICATION OF PRIVILEGES - None**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
				•

**AUTOMATIC TERMINATION, PER BYLAWS 3.8-3 (FAILURE TO COMPLETE PROCTORING) - None**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
				•

**AUTOMATIC TERMINATION, PER BYLAWS 6.4-9 (FAILURE TO FILE COMPLETE REAPPOINTMENT)**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Leitzke, Arthur S., MD	Active	Psychiatry	Psychiatry	Application not submitted appointment ends 7/31/2022



**VOLUNTARY RESIGNATIONS/WITHDRAWALS\***

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE/REASON
Ackerman, Barbara C., PhD	Active	Psychology	Family Medicine	6/15/2022
Chinn, Derek B., DO	Provisional	Internal Medicine	Medicine	7/1/2022
Escoto, Rebecca E., PA	AHP	Physician Assistant	Emergency Medicine	7/14/2022
Fujimoto, Scott T., DO	Active	Interventional Radiology	Radiology	6/3/2022
Hassanian, Mohammad, MD	Provisional	Anesthesiology	Anesthesia	5/31/2022
Helmuth, Alyssa M., PA	AHP	Physician Assistant	Emergency Medicine	7/15/2022
Horricks, Justin E., MD	Provisional	Anesthesiology	Anesthesia	6/7/2022
Kotak, Kamal M., MD	Active	Cardiology	Medicine	6/30/2022
Mathew, Sheron, PA	AHP	Physician Assistant	Emergency Medicine	7/14/2022
Oladimeji, Oluwatoyin O., NP	AHP	Nurse Practitioner	Psychiatry	6/8/2022
Pham, Patrick, MD	Active	Anesthesia	Anesthesia	6/22/2022

End of Report



I hereby:

- 1) Attest that the medical center's Medical Executive Committee meeting on July 14, 2022 recommended approval of the appointment, reappointments, proctoring, change of status, withdraw of privileges, automatic terminations, resignation/withdrawals and privilege forms.
- 2) Approve the listed changes as recommended by the Medical Executive Committee; and
- 3) Recommend that the Board of Supervisors ratify the listed changes as recommended by the Medical Executive Committee.

A handwritten signature in black ink, appearing to read "Jennifer Crinkshank". The signature is written over a horizontal line.

Jennifer Crinkshank  
Chief Executive Officer – RUHS Medical Center





DATE: August 11 2022  
 To: File  
 FROM: Medical Staff Executive Committee  
 SUBJECT: Medical Staff Attestation Appointment, Reappointments and Clinical Privileges

**INITIAL APPOINTMENT – August 11, 2022 – July 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Aka, Allison A., MD	Provisional	Surgical Oncology	Surgery	Colon Rectal Surgery Surgery
Chamberlin, David A., MD	Provisional	Pediatric Urology	Surgery	Urology Pediatric Urology
Chamberlin, Joshua, MD	Provisional	Urology	Surgery	Urology
Douglawi, Antoin, MD	Provisional	Urology	Surgery	Eligible
Favis, Roxanne N, DO	Provisional	Anesthesiology	Anesthesia	Eligible
TP Granted 7/18/2022				
Floresca, Jon William, MD	Provisional	Interventional Radiology	Radiology	Eligible
TP Request 8/1/2022				
Gray, Evan L., DO	Provisional	Neurology	Medicine	Eligible
TP Request 7/22/2022				
Hofmann, Martin R., MD	Provisional	Urology	Surgery	Eligible
Hong, Christopher Junpyi, DO	Provisional	Psychiatry	Psychiatry	Eligible
Kim, Yohanan, MD	Provisional	Otolaryngology	Surgery	Eligible
Larco, Kathlyn T., PA	AHP-Provisional	Physician Assistant	Clinical Neurological Sci.	NCCPA
Min, Alexander MD	Provisional	Pediatrics	Pediatrics	Pediatrics
Schoepflin, Charles W., MD	Provisional	Anesthesiology	Anesthesia	Anesthesiology
TP Request 8/1/2022				
Scott, Jonathan H., MD	Provisional	Internal Medicine	Medicine	Eligible
TP Request 7/22/2022				
Teitelbaum, George, MD	Provisional	Interventional Radiology	Radiology	Interventional Radiology & Diagnostic Radiology Neuroradiology

**REAPPOINTMENTS – September 1, 2022 – August 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Ads, Ayman M., MD	Active	Anesthesiology	Anesthesia	Anesthesiology Critical Care Medicine
Ariue, Barbara K, MD	Active	Allergy & Immunology	Pediatrics	Pediatrics Allergy & Immunology
Brereton, Daniel S., DO	Active	Orthopedic Surgery	Orthopedic Surgery	Eligible
Cantas Orsdemir, Sena MD	Provisional	Endocrinology	Pediatrics	Pediatrics Pediatric Endocrinology
Che, Kendrick M., DO	Active	Gastroenterology	Medicine	Gastroenterology
Chen, Kevin G., MD	Active	Emergency Medicine	Emergency Medicine	Emergency Medicine
Cobbina, Ekua MD	Active	Pediatrics	Pediatrics	Pediatrics Pediatric Hospital Medicine
Cramer, Dennis E., DO	Courtesy	Neurological Surgery	Clinical Neurological Sciences	Neurological Surgery
Status changed from Active to Courtesy due to low patient volume				
Crawley, Brianna K., MD	Active	Otolaryngology	Surgery	Otolaryngology – Head & Neck Surgery
Ha, Eutaik MD	Active	Neonatology	Pediatrics	Pediatrics
Huang, Chris, MD	Active	Anesthesiology	Anesthesia	Anesthesiology



Jahng, Alexander W., MD	Active	Gastroenterology	Medicine	Internal Medicine Gastroenterology
Kief-Garcia, Monika L., MD  Additional Privilege: • Mammography & / Steriotactic Breast Biopsy  Withdraw Privileges: • Vascular & Interventional Radiology • Moderate/Deep Sedation • Same Day Surgery	Active	Diagnostic Radiology	Radiology	Diagnostic Radiology
Kuhn, Michael MD	Active	Cardiology	Pediatrics	Pediatrics Pediatric Cardiology
Lee, Brian T., MD	Active	Gastroenterology	Medicine	Internal Medicine Gastroenterology Transplant Hepatology
Mannoia, Kristyn A., MD	Active	Vascular Surgery	Surgery	Surgery Vascular Surgery
Nwachukwu, Oluwafisayomi DO	Active	Pediatrics	Pediatrics	Pediatrics
Oregel, Karlos Z., MD	Active	Hematology/Oncology	Medicine	Internal Medicine Hematology Medical Oncology
Ospina, Jose A., MD	Telemedicine	Diagnostic Radiology	Radiology	Diagnostic Radiology
Patel, Jignasa G., MD	Active	Neurology	Medicine	Neurology Clinical Neurophysiology Epilepsy
Ree, Michael, DO	Active	Internal Medicine	Medicine	Internal Medicine
Robinson, Mathew D., DO	Active	Orthopedic Surgery	Orthopedic Surgery	Orthopedic Surgery
Rogers, Nathan C., MD	Active	Psychiatry	Psychiatry	Psychiatry
Ruckle, Herbert C., MD	Active	Urology	Surgery	Urology
Truong, Vincent V., MD	Courtesy	Neurology	Medicine	Neurology Vascular Neurology
Vargas, Linda, MD  Additional Privilege: • Endothelial Transplants	Active	Ophthalmology	Ophthalmology	Ophthalmology
Vivanco de Martinez, Lorena MD	Active	Child Abuse Pediatrics	Pediatrics	Pediatrics Child Abuse Pediatrics
Williams, Tokunbo L., MD  Reapp date changed to match BH date 9/30/2022	Active	Psychiatry	Psychiatry	Psychiatry
Yoo, Andrew MD	Active	Pediatrics	Pediatrics	Eligible

**FPPE/RECIPROCAL\* COMPLETE REMAIN ON PROVISIONAL - None**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS

**FINAL FPPE/RECIPROCAL\* ADVANCEMENT OF STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Borden, Kimberly G., MD	Provisional	Internal Medicine	Medicine	Advance to Active
Liu, David X., MD	Provisional	Diagnostic Radiology	Radiology	Advance to Active
Solis, Daniel C., MD	Provisional	Internal Medicine	Medicine	Advance to Active
Stier, Gary R., MD	Provisional	Anesthesiology	Anesthesia	Advance to Active
Townsend, Dwight, MD	Provisional	Diagnostic Radiology	Radiology	Advance to Telehealth

**FPPE FINAL PROCTORING FOR ALLIED HEALTH PROFESSIONALS**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS

**FPPE FINAL PROCTORING FOR ADDITIONAL PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS

Pandey, Neha, MD	Active	Internal Medicine	Medicine	• Moderate Sedation
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**ADDITIONAL PRIVILEGES/WITHDRAWN PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Caudill, Benjamin J., FNP	AHP	Family Nurse Practitioner	Medicine	Additional Privilege: • Palliative Care
Mahoney, Lisa M., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Mammography / Steriotactic Breast Biopsy
McNeill, Jeanine A., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Mammography / Steriotactic Breast Biopsy
Nguyen, Christopher V., MD	Active	Neuroradiology Radiology	Radiology	Additional Privilege: • Mammography / Steriotactic Breast Biopsy

**CHANGE IN STAFF REAPPOINTMENT DATES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Alzubaidi, Qammer T., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	05/31/2024 Change to 03/31/2024

**MODIFICATION OF PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Engelberg, Moises, DO	Active	Ophthalmology	Ophthalmology	

**AUTOMATIC TERMINATION, PER BYLAWS 6.4-9 (FAILURE TO FILE COMPLETE REAPPOINTMENT)**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Lodhi, Shaina MD	Active	Neonatology	Pediatrics	Physician on Leave and aware privileges will end on 8/31/2022. Not able to complete requirements Pending: • HIPAA • Reap Compliance Moodle

**VOLUNTARY RESIGNATIONS/WITHDRAWALS\***

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE/REASON
Cosand, Chelsea L., MD	Active	Emergency Medicine	Emergency Medicine	9/1/2022
Hathout, Eba MD	Active	Endocrinology	Pediatrics	6/29/2022
Haynes, Megan M., CRNA	AHP	CRNA	Anesthesia	7/1/2022
Han, Peter S., MD	Provisional	Otolaryngology	Surgery	6/30/2022
Ijeaku, Ijeoma O., MD	Active	Psychiatry	Psychiatry	9/1/2022
Krei, Mark A., DO*	Applicant	Neurological Surgery	Clinical Neurological Sciences	7/22/2022 / Incomplete Application
Moinuddin, Mehwish, DO	Provisional	Family Medicine	Family Medicine	7/22/2022
Nagendra, Gautam MD*	Applicant	Pediatrics	Pediatrics	7/22/2022 / Incomplete application
Nguyen, Khai T., MD	Active	Psychiatry	Psychiatry	7/18/2022
Poole, Joshua S., MD	Moonlighting	Psychiatry	Psychiatry	06/30/2022
Srikureja, Daniel P., MD	Active	Surgery	Surgery	07/31/2022
Stradleigh, Ryan K., DO	Provisional	Anesthesiology	Anesthesia	08/01/2022

End of Report



I hereby:

- 1) Attest that the medical center's Medical Executive Committee meeting on August 11, 2022 recommended approval of the appointment, reappointments, proctoring, change of status, withdraw of privileges, automatic terminations, resignation/withdrawals and privilege forms.
- 2) Approve the listed changes as recommended by the Medical Executive Committee; and
- 3) Recommend that the Board of Supervisors ratify the listed changes as recommended by the Medical Executive Committee.

A handwritten signature in black ink, appearing to read 'Jennifer Cruikshank', written over a horizontal line.

Jennifer Cruikshank  
Chief Executive Officer – RUHS Medical Center



DATE: September 8, 2022  
 To: File  
 FROM: Medical Staff Executive Committee  
 SUBJECT: Medical Staff Attestation Appointment, Reappointments and Clinical Privileges

**INITIAL APPOINTMENT – September 8, 2022 – August 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Alfaro Quezada, Jose E., MD <b>Temps Requested 9/1/2022</b>	Provisional	General Surgery	Surgery	Eligible
Asef, Mark A., MD	Provisional	Nephrology	Medicine	Internal Medicine
Bavarsad Shahripour, Reza, MD	Provisional	Neurology	Medicine	Neurology
Bullard, Anthony B., MD	Provisional	Diagnostic Radiology	Radiology	Diagnostic Radiology Neuroradiology
Cana, Jhoanne MD  Appointment Dates to Match CHC: 9/8/2022-7/31/2024	Provisional	Pediatrics	Pediatrics	Eligible
Choi, David M., MD	Provisional	Ophthalmology	Ophthalmology	Ophthalmology
Cruz, Arjane S., NP	AHP-Provisional	Nurse Practitioner	Clinical Neurological Sciences	AANP
Cryer, Alicia, DO	Provisional	OB/GYN	OB/GYN	Eligible
Davis-Bates, Theresa, NP	AHP-Provisional	Nurse Practitioner	Clinical Neurological Sciences	AANP AACN ABWM
Fung, Nathaniel S., MD <b>Temps Requested 9/1/2022</b>	Provisional	Surgical Critical Care	Surgery	Eligible
Galvis, Alvaro E., MD	Provisional	Infectious Disease	Pediatrics	Eligible
Garcia, Gryan, NP <b>Temps Granted 8/1/2022</b>	AHP-Provisional	Nurse Practitioner	Psychiatry	AANPCB
Genobaga, Christopher G., MD  Appointment Dates to Match CHC: 9/8/2022-7/31/2024	Provisional	OB/GYN	OB/GYN	OB/GYN
Hossein Zadeh Maleki, Ana, MD	Provisional	Neurology	Medicine	Neurology
Howitt, Loretta Y., MD <b>Temps Granted 8/1/2022</b>	Provisional	Psychiatry	Psychiatry	Psychiatry Addiction Medicine
Huang, Ming, DO <b>Temps Granted 8/16/22</b>	Provisional	Anesthesiology	Anesthesia	Anesthesiology Pain Medicine
Kwan, Josph D., FNP	AHP-Provisional	Nurse Practitioner	Clinical Neurological Sciences	AANP AACN
Lamb, Daniel MD	Provisional	Pediatrics	Pediatrics	Pediatrics
Lee, Sarah J. DO <b>Temps Requested 9/1/2022</b>	Provisional	Psychiatry	Psychiatry	Eligible
Luong, Serena DO  Appointment Dates to Match CHC: 9/8/2022-7/31/2024	Provisional	Pediatrics	Pediatrics	Eligible
Miller, Megan, DDS	Provisional	Oral & Maxillofacial Surgery	Surgery	Eligible
Millet, Kevin, CRNA <b>Temps Granted 8/16/2022</b>	AHP-Provisional	CRNA	Anesthesia	NBCRNA
Mukadam, Shireen, MD	Provisional	Cardiology	Pediatrics	Pediatrics
Petrick, Travis M., NP	AHP-Provisional	Nurse Practitioner	Radiology	ANCC
Ruiz, Lorena H., NP	AHP-Provisional	Nurse Practitioner	Radiology	ANCC



St Onge, Krista M., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	NCCPA
Sugiyama, Akihiro, MD	Provisional	Surgical Critical Care	Surgery	Eligible
<b>Temps Requested 9/1/2022</b>				
Tafazoli, Faranak S., MD	Provisional	Diagnostic Radiology	Radiology	Diagnostic Radiology
Tang, Liyang, MD	Provisional	Otolaryngology	Surgery	Eligible
Tawfik, Melanie E., MD	Provisional	Dermatology	Medicine	Eligible
Yala, Linda I, MD	Provisional	Surgical Critical Care	Surgery	Surgery
Zuckerman, Jeffrey A., MD	Provisional	Diagnostic Radiology	Radiology	Diagnostic Radiology

**REAPPOINTMENTS – October 1, 2022 – September 30, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Agrawal, Vikash MD	Active	Neonatal/Perinatal Medicine	Pediatrics	Neonatology
Batish, Suraj R. MD	Active	Pediatrics	Pediatrics	Pediatrics
Bent, Christopher K., MD	Active	Interventional Radiology	Radiology	Interventional Radiology
Burciaga Calderoni, Constanza, MD	Provisional	Pediatrics	Pediatrics	Pediatrics
Additional Privilege: • Moderate Sedation				
Chakmakian, Vache MD	Adjunct	Family Medicine	Detention Health	Family Medicine
Clark, Robin D., MD	Provisional	Clinical Genetics Clinical Cytogenetics	Pediatrics	Pediatrics Clinical Genetics Clinical Cytogenetics
Clumpner, Cori DO	Active	Pediatrics	Pediatrics	Pediatrics
Cutler, Drew C., MD	Active	Nephrology	Pediatrics	Pediatrics
Daivide, Rachel E., DO	Active	Pediatrics	Pediatrics	Pediatrics
DeWoskin, Ruth E., PA	AHP	Physician Assistant	Emergency Medicine	NCCPA
Dukes, William S., MD	Active	Emergency Medicine	Emergency Medicine	Emergency Medicine Emergency Medical Services
Fong, Matthew B., MD	Active	Pediatrics	Pediatrics	Pediatrics
Garberoglio, Carlos A., MD	Active	General Surgery	Surgery	Surgery
Ha, Tiffany, PA	AHP	Physician Assistant	Medicine	NCCPA
Hu, Tony, DO	Active	Anesthesiology	Anesthesia	Anesthesiology
Khan, Naila A., DO	Active	Internal Medicine	Medicine	Internal Medicine
Kim, Young M., MD	Active	Neurology	Pediatrics	Neurology w/special qualifications in Child Neurology Epilepsy
LeClair, Garth P., AU	AHP	Audiology	Surgery	CCC-A
Pan, Min S., PA	AHP	Physician Assistant	Medicine	NCCPA
Patel, Shalin R., MD	Active	Psychiatry	Psychiatry	Psychiatry Child & Adolescent Psychiatry
Rudisaile, Darren G., MD	Active	Internal Medicine	Medicine	Eligible until 2023
Shah, Manoj C., MD	Active	Gastroenterology	Pediatrics	Pediatrics Pediatric Gastroenterology
Shen, Bailey Y., MD	Active	Ophthalmology	Ophthalmology	Ophthalmology
Shin, Benjamin S., MD	Moonlighting	Psychiatry	Psychiatry	Eligible
Soneji, Maulin S, MD	Active	Infectious Disease	Pediatrics	Pediatrics Internal Medicine Infectious Disease Pediatric Infectious Disease
Yu, Minh, DO	Active	Internal Medicine	Medicine	Internal Medicine

**FPPE/RECIPROCAL\* COMPLETE REMAIN ON PROVISIONAL**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Burgdorff, Courtney J., MD	Provisional	Anesthesiology	Anesthesia	Remain Provisional until 7/2023
Schoepflin, Charles W., MD	Provisional	Anesthesiology	Anesthesia	Remain Provisional until 8/2023



**FINAL FPPE/RECIPROCAL\* ADVANCEMENT OF STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Batish, Suraj R., MD	Provisional	Pediatrics	Pediatrics	Advance to Active Status
Bonenfant, Jeffrey M., DO	Provisional	Pulmonary Critical Care	Medicine	Advance to Active Status
Burciaga Calderoni, Constanza, MD	Provisional	Pediatrics	Pediatrics	Advance to Active Status
Calvert, Justin, MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Collier, Carl E., DO	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Douglas, Michael, MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Eksensohn, Ashley N., MD	Provisional	Dermatology	Medicine	Advance to Active Status
Green, Morgan A., MD	Provisional	Pediatrics	Pediatrics	Advance to Active Status
Gupta, Nancy, MD	Provisional	Gastroenterology	Medicine	Advance to Active Status
Hata, Justin T., MD	Provisional	Pain Medicine	Anesthesia	Advance to Active Status
Ho, Derek K., MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Kuo, Benjamin, MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
LeClair, Bronson M., MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Leonor, Paul A., MD	Provisional	Gastroenterology	Medicine	Advance to Active Status
Nguyen, Elaine, MD	Provisional	Pulmonary Critical Care	Medicine	Advance to Active Status
Simonson, Kevin C., MD	Provisional	Psychiatry	Psychiatry	Advance to Active Status
Soloniuk, Leonard J., MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Thiruvengadam, Nikhil R., MD	Provisional	Gastroenterology	Medicine	Advance to Active Status
Tran, Minh Chau J., MD	Provisional	Anesthesiology	Anesthesia	Advance to Active Status
Vitorovic, Danilo, MD	Provisional	Neurology	Medicine	Advance in Active Status
Yoro-Bacay, Vincent Arthur, MD	Provisional	Pediatrics	Pediatrics	Advance to Active Status

**FPPE FINAL PROCTORING FOR ALLIED HEALTH PROFESSIONALS**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Long, Wen, PA	AHP-Provisional	Physician Assistant	Medicine	Complete
Carson-White, Rachel L., PA	AHP-Provisional	Physician Assistant	Medicine	Complete
Nwigwe, Desiree C., NP	AHP-Provisional	Nurse Practitioner	Psychiatry	Complete

**FPPE FINAL PROCTORING FOR ADDITIONAL PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Klein, Walter F., MD	Active	Pulmonary Critical Care	Medicine	• Fluoroscopy

**ADDITIONAL PRIVILEGES/WITHDRAWN PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Bonenfant, Jeffrey M., DO	Provisional	Pulmonary Critical Care	Medicine	Withdraw of Privilege: • Ambulatory
Leonor, Paul A., MD	Provisional	Gastroenterology	Medicine	Withdraw of Privilege: • Ambulatory
Long, Wen, PA	AHP-Provisional	Physician Assistant	Medicine	Withdraw of Privilege: • Obtaining Informed Consent
Nguyen, Elaine, MD	Provisional	Pulmonary Critical Care	Medicine	Withdraw of Privilege: • PCU • Ambulatory • TEE
Sullivan, Erin L., NP	AHP-Provisional	Nurse Practitioner	Anesthesia	Withdraw of Privilege: • Obtaining Informed Consent
Thiruvengadam, Nikhil R., MD	Provisional	Gastroenterology	Medicine	Withdraw of Privilege: • Internal Medicine Core • Ambulatory

**CHANGE IN STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Elledge, Nathan R., DO	Provisional	Ophthalmology	Ophthalmology	Advance to Active Status
Shin, Benjamin S., MD	Moonlighting	Psychiatry	Psychiatry	Advance to Provisional

**CHANGE IN STAFF REAPPOINTMENT DATES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				



**MODIFICATION OF PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Armon, Carmel, MD	Provisional	Neurology	Medicine	Neurology Privilege Form
Anderson, Nancy J., MD	Active	Dermatology	Medicine	Dermatology Privilege Form
Baker, Nancy, MD	Active	Neurology	Medicine	Neurology Privilege Form
Bannout, Firas, MD	Active	Neurology	Medicine	Neurology Privilege Form
Casassa, IV, Charles M., MD	Active	Neurology	Medicine	Neurology Privilege Form
Cheung, Shauna C., MD	Active	Neurology	Medicine	Neurology Privilege Form
Chow, Conroy, MD	Active	Dermatology	Medicine	Dermatology Privilege Form
Dao Jr., Harry, MD	Active	Dermatology	Medicine	Dermatology Privilege Form
Dastjerdi, Mohammad, MD	Active	Neurology	Medicine	Neurology Privilege Form
Elsensohn, Ashley, MD	Provisional	Dermatology	Medicine	Dermatology Privilege Form
Koshy, Ruby E., MD	Active	Neurology	Medicine	Neurology Privilege Form
LaBarte, Theresa L., DO	Active	Neurology	Medicine	Neurology Privilege Form
Losey, Travis E., MD	Active	Neurology	Medicine	Neurology Privilege Form
Luke, Janiene D., MD	Active	Dermatology	Medicine	Dermatology Privilege Form
Meadows, LaVonne M., MD	Active	Dermatology	Medicine	Dermatology Privilege Form
Nist, Laura D., MD	Active	Neurology	Medicine	Neurology Privilege Form
Patel, Jignasa G., MD	Active	Neurology	Medicine	Neurology Privilege Form
Truong, Vincent V., MD	Active	Neurology	Medicine	Neurology Privilege Form
Tsao, Bryan E., MD	Active	Neurology	Medicine	Neurology Privilege Form
Tseng, Philip H., MD	Active	Neurology	Medicine	Neurology Privilege Form
Vitorovic, Danilo, MD	Provisional	Neurology	Medicine	Neurology Privilege Form

**NAME CHANGE**

NAME	STATUS	SPECIALTY	DEPARTMENT	CHANGE TO:
Steinmann, Alexandra, PA	AHP	Physician Assistant	Emergency Medicine	Rees, Alexandra, PA

**AUTOMATIC TERMINATION, PER BYLAWS 3.8-3 (FAILURE TO COMPLETE PROCTORING)**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Govindappagari, Shravya, MD	Provisional	OB/GYN	OB/GYN	Provider has no activity at RUHS

**AUTOMATIC TERMINATION, PER BYLAWS 6.4-9 (FAILURE TO FILE COMPLETE REAPPOINTMENT)**

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE
Bux, Michael Y., PA	AHP	Physician Assistant	Orthopedic Surgery	10/1/2022

**VOLUNTARY RESIGNATIONS/WITHDRAWALS\***

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE/REASON
Chen, Gilbert Y., MD*	Applicant	Internal Medicine	Medicine	Application Withdrawn
Hathout, Eba	Active	Endocrinology	Pediatrics	Resign 6/29/2022
Langley, Shawna K., MD	Active	Dermatology	Medicine	8/9/2022
Lopez, Jairo E., MD*	Applicant	Family Medicine	Family Medicine	Application Withdrawn
Medina, Jessica MD	Provisional	Pediatrics	Pediatrics	8/18/2022 – Voluntary Resignation
Quan, Michele G., MD	Provisional	Pulmonary Critical Care	Medicine	9/8/2022
Stern, Eric S., MD	Active	Emergency Medicine	Emergency Medicine	9/8/2022
Stradleigh, Ryan K., DO	Provisional	Anesthesiology	Anesthesia	8/1/2022

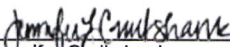
End of Report





I hereby:

- 1) Attest that the medical center's Medical Executive Committee meeting on September 8, 2022 recommended approval of the appointment, reappointments, proctoring, change of status, withdraw of privileges, automatic terminations, resignation/withdrawals and privilege forms.
- 2) Approve the listed changes as recommended by the Medical Executive Committee; and
- 3) Recommend that the Board of Supervisors ratify the listed changes as recommended by the Medical Executive Committee.

  
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Jennifer Cwikshank  
Chief Executive Officer – RUHS Medical Center



DATE: October 13, 2022  
 To: File  
 FROM: Medical Staff Executive Committee  
 SUBJECT: Medical Staff Attestation Appointment, Reappointments and Clinical Privileges

**INITIAL APPOINTMENT – October 13, 2022 – September 30, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Lewis, Christina L., NP	AHP-Provisional	Nurse Practitioner	Surgery	ANCC
Lodhi, Shaina MD	Active	Neonatology	Pediatrics	Pediatrics Neonatal-Perinatal Medicine
Mohsin, Adnan, MD	Provisional	Internal Medicine	Medicine	Internal Medicine
Mulvina, Rhea M., NP	AHP-Provisional	Nurse Practitioner	Radiology	AANP
Shaha, Sneha, DO	Provisional	Internal Medicine (LLU)	Medicine	Eligible
Temporary Privilege Request Effective 10/1/2022				
Topping, Katie L., MD	Provisional	Ophthalmology	Ophthalmology	Ophthalmology
Tran, Diem Kieu T., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Eligible
Vazquez, Jennifer A., NP	AHP-Provisional	Nurse Practitioner	Medicine	AANP
Ventro Jr., George J., MD	Provisional	Surgery Critical Care	Surgery	Surgery General

**REAPPOINTMENTS – November 1, 2022 – October 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Block, Lindsey L., NP	AHP	Nurse Practitioner	Medicine	AANP
Calaguas, Daniel K., MD	Active	Pediatrics	Pediatrics	Pediatrics
Chinnock, Richard E., MD	Active	Pediatrics	Pediatrics	Pediatrics
Clark, Alexandra M., MD	Active	Pediatrics	Pediatrics	Pediatrics
Clarkson, Lois C., NP	AHP	Critical Care	Pediatrics	PNCB AACCN
Dastjerdi, Mohammad, MD	Active	Neurology	Medicine	Neurology Epilepsy
Eguchi, Jim H., MD	Active	Critical Care	Pediatrics	Pediatrics Pediatric Critical Care Medicine
Gnass, Ronaldo D., MD	Active	Pathology	Pathology	Anatomic Pathology
Hanson, Rodolfo J., NP	AHP	Nurse Practitioner	Anesthesia	ANCC
Withdraw Privilege: • NP Clinical Neurological Sciences				
Hu, Eugene W., MD	Active	Emergency Medicine	Emergency Medicine	Emergency Medicine
Additional Privileges: • Telemedicine • TEE				
Johnson, Onyinye Y., NP	AHP	Nurse Practitioner	Psychiatry	ANCC
Khan, Faraz A., MD	Active	Pediatric Surgery	Surgery	Surgery - General Pediatric Surgery Surgical Critical Care
Khan, Mahbuba, MD	Active	Family Medicine	Family Medicine	Family Medicine
Status Change: • Administrative				
Kim, Hahns Y., MD	Active	Plastic Surgery	Surgery	Plastic Surgery
Lee, Steve C., MD	Active	Otolaryngology	Surgery	Eligible
Namm, Jukes P., MD	Courtesy	Surgery	Surgery	Surgery - General
Nguyen, Truclinh T., DO	Active	Internal Medicine	Medicine	Internal Medicine
Noel, Jerry, DO	Active	Neurological Surgery	Clinical Neurological Sciences	Neurological Surgery
Nycholat, Desiree R., MD	Active	Pediatrics	Pediatrics	Pediatrics



Perea, Samantha E., MD	Active	Ophthalmology	Ophthalmology	Ophthalmology
Radulescu, Andrei, MD	Active	Pediatric Surgery	Surgery	Surgery – General Pediatric Surgery
Rivera Landeros, Willie, PA	AHP	Physician Assistant	Emergency Medicine	NCCPA
Ronney, Alexis, AuD	AHP	Audiology	Surgery	N/A
Sandman, Lester M., MD	Active	Psychiatry	Psychiatry	Psychiatry - General
Sherman, Christopher L., DO	Active	Orthopedic Surgery	Orthopedic Surgery	Orthopedic Surgery
Van Hal, Michele, MD	Active	Anesthesiology	Anesthesia	Eligible
Additional Privilege: • Pediatric Anesthesia				
Wisdom, David M., PA	AHP	Physician Assistant	Emergency Medicine	NCCPA
Witkosky, Michael E., MD	Telehealth	Diagnostic Radiology	Radiology	Diagnostic Radiology
Yao, Ruofan, MD	Active	Maternal & Fetal Med.	OB/GYN	OB/GYN Maternal - Fetal Medicine

**FPPE/RECIPROCAL\* COMPLETE REMAIN ON PROVISIONAL**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**FINAL FPPE/RECIPROCAL\* ADVANCEMENT OF STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Dadachanji, Kaivan, DO	Provisional	Pediatrics	Pediatrics	Advance to Active
Edwards, Montessa L., MD	Provisional	Emergency Medicine	Emergency Medicine	Advance to Active
Smithson, Sarah, DO	Provisional	Maternal & Fetal Med.	OB/GYN	Advance to Active

**FPPE FINAL PROCTORING FOR ALLIED HEALTH PROFESSIONALS**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**FPPE FINAL PROCTORING FOR ADDITIONAL PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				•

**ADDITIONAL PRIVILEGES/WITHDRAWN PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Alfaro Quezada, Jose E., MD	Provisional	General Surgery	Surgery	Additional Privilege: • Surgical Robotic Platform
Bent, Christopher, MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
Dadachanji, Kaivan, DO	Provisional	Pediatrics	Pediatrics	Withdraw of Privilege: • Moderate Sedation
Hanak IV, Brian E., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Withdraw of Privilege: • Adult Neurosurgery
Kief-Garcia, Monika L., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
Loe, Stephanie A., MD	Active	Emergency Medicine	Emergency Medicine	Withdraw of Privilege: • TEE
Mesisca, Michael K., DO	Active	Emergency Medicine	Emergency Medicine	Withdraw of Privilege: • TEE
Nguyen, Christopher V., MD	Active	Neuroradiology	Diagnostic Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
Sorenson, Steven M., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
Williams, Shammah O., MD	Active	Cardiology	Medicine	Withdraw of Privilege: • Exercise Testing



**CHANGE IN STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**CHANGE IN STAFF REAPPOINTMENT DATES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**MODIFICATION OF PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Bravo, Thomas P., MD	Active	Neurology	Medicine	Neurology Clinical Privilege Form
Rosenfeld, Jeffrey, MD	Courtesy	Neurology	Medicine	Neurology Clinical Privilege Form

**NAME CHANGE**

NAME	STATUS	SPECIALTY	DEPARTMENT	CHANGE TO:
White, Rachel L., PA	AHP	Physician Assistant	Medicine	Carson, Rachael

**AUTOMATIC TERMINATION, PER BYLAWS 3.8-3 (FAILURE TO COMPLETE PROCTORING)**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**AUTOMATIC TERMINATION, PER BYLAWS 6.4-9 (FAILURE TO FILE COMPLETE REAPPOINTMENT)**

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE
Serafino, Avo, PA	AHP	Physician Assistant	Emergency Medicine	11/1/2022

**VOLUNTARY RESIGNATIONS/WITHDRAWALS\***

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE/REASON
Chao, Amanda T., MD	Provisional	Anesthesiology	Anesthesia	9/12/2022
Chan, Clarice P., MD	Provisional	Psychiatry	Psychiatry	8/25/2022
Cravanas II, Brian A., MD	Active	Neurology	Medicine	9/30/2022
Hardesty, Jeffrey S., MD	Active	OB/GYN	OB/GYN	7/1/2022
Kyrollos, Tawfik Y., MD	Active	Diagnostic Radiology	Radiology	10/31/2022
Lee, Brian T., MD	Active	Gastroenterology	Medicine	10/29/2022
Qin Hu, Min, MD	Active	Anesthesiology	Anesthesia	9/8/2022
Voleti, Sonia MD	Active	Cardiology	Pediatrics	9/6/2022

End of Report



I hereby:

- 1) Attest that the medical center's Medical Executive Committee meeting on October 13, 2022 recommended approval of the appointment, reappointments, proctoring, change of status, withdraw of privileges, automatic terminations, resignation/withdrawals and privilege forms.
- 2) Approve the listed changes as recommended by the Medical Executive Committee; and
- 3) Recommend that the Board of Supervisors ratify the listed changes as recommended by the Medical Executive Committee.

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Jennifer Cruikshank  
Chief Executive Officer – RUHS Medical Center



DATE: November 10, 2022  
 To: File  
 FROM: Medical Staff Executive Committee  
 SUBJECT: Medical Staff Attestation Appointment, Reappointments and Clinical Privileges

**INITIAL APPOINTMENT – November 10, 2022 – October 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Dawood, Hasan F., MD	Provisional	Neurology	Medicine	Eligible
Garrido, Esmeralda, PA	AHP-Provisional	Physician Assistant	Orthopedic Surgery	NCCPA
Gillespie, Heather J., MD	Provisional	Rheumatology	Medicine	Internal Medicine Rheumatology
Griffith, Jean W., MD	Provisional	Psychiatry	Psychiatry	Psychiatry & Neurology
Kim -Paglingayen, Jin Seon, MD	Provisional	Family Medicine	Family Medicine	Family Medicine
Leung, Alexander, MD	Provisional	Thoracic Surgery	Surgery	Surgery Thoracic Surgery
Mejaddam, Ali Y., MD	Provisional	Pediatric Surgery	Surgery	Surgery
Peterson, Joseph D., MD	Provisional	Head & Neck Surgery	Surgery	Head & Neck Surgery
Saint-Preux, Fabienne, MD	Provisional	Pain Medicine	Anesthesia	Physical Medicine & Rehabilitation

**REAPPOINTMENTS – December 1, 2022 – November 30, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Chan, Roxanne, MD	Tele-Health	Diagnostic Radiology	Radiology	Diagnostic Radiology
Chen, Catherine J., MD Status change from Provisional to Active	Provisional	Urology	Surgery	Urology
Chow, Conroy, MD	Active	Dermatology	Medicine	Dermatology Micrographic Dermatology
Davila, Gessica L., PA	AHP	Physician Assistant	Medicine	NCCPA
Hsueh, Chung-Tsen, MD Status change from Active to Courtesy	Active	Hematology/Oncology	Medicine	Internal Medicine Hematology/Oncology
Hwang, Frank S., MD	Active	Ophthalmology	Ophthalmology	Ophthalmology
Johnson, Ronald B., MD	Active	OB/GYN	OB/GYN	OB/GYN
Meixel, Antonie A., MD	Active	Neonatology	Pediatrics	Pediatrics Neonatal-Perinatal Medicine
Nagaraj, Gayathri, MD	Courtesy	Hematology/Oncology	Medicine	Hematology Medical Oncology
Rausser, Michael E., MD Additional Privilege: • Supervision of AHP	Active	Ophthalmology	Ophthalmology	Ophthalmology
Shu, Richard G., MD	Active	Cardiology	Medicine	Internal Medicine Cardiovascular Disease
Tabbian, Benjamin, DO Additional Privileges: • Pulmonology • Moderate Sedation Pulmonary Critical Care Procedures: • Fiberoptic Bronchoscopy • Percutaneous Tracheostomy	Active	Pulmonary Critical Care	Medicine	Internal Medicine Pulmonary Disease Critical Care Medicine
Winter, Timothy W., DO	Active	Ophthalmology	Ophthalmology	Ophthalmology



**FPPE/RECIPROCAL\* COMPLETE REMAIN ON PROVISIONAL**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Yue, Connie J., MD	Provisional	Anesthesiology	Anesthesia	Remain Prov to 5/2023

**FINAL FPPE/RECIPROCAL\* ADVANCEMENT OF STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Chen, Catherine J., MD	Provisional	Urology	Surgery	Advance to Active Status
Downing, Stephanie, MD	Provisional	Surgical Critical Care	Surgery	Advance to Active Status
Kheradpour, Albert MD	Provisional	Hematology/Oncology	Pediatrics	Advance to Active Status
Pachon, Andrew G., MD	Provisional	Emergency Medicine	Emergency Medicine	Advance to Active Status
Park, Joseph, DPM	Provisional	Podiatry	Orthopedic Surgery	Advance to Active Status

**FPPE FINAL PROCTORING FOR ALLIED HEALTH PROFESSIONALS**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Legaspi, Elaine Marie N., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	
Nguyen, Tammy T., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	
Smith, Clarissa M., FNP	AHP-Provisional	Nurse Practitioner	Emergency Medicine	

**FPPE FINAL PROCTORING FOR ADDITIONAL PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
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**ADDITIONAL PRIVILEGES/WITHDRAWN PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Elledge, Nathan R., DO	Active	Ophthalmology	Ophthalmology	Additional Privilege: • Corneal Non-Core Procedures
Huang, Ming J., MD	Provisional	Anesthesiology/Pain Medicine	Anesthesia	Additional Privilege: • Pain Medicine
Legaspi, Elaine Marie N., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	Withdraw of Privileges: • Central Line/PICC Line Placement • Lumbar Puncture • Endotracheal Intubation • Arterial Cannulation • Thoracentesis • Paracentesis
Mahoney, Lisa M., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: Interpretation of Transcranial Doppler
McNeill, Jeanine A., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
Nguyen, Tammy T., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	Withdraw of Privileges: • Central Line/PICC Line Placement • Lumbar Puncture • Endotracheal Intubation • Arterial Cannulation • Thoracentesis • Paracentesis
Robison, Richard A., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Withdraw of Privilege: • Adult Neurosurgery
Sullivan, Erin L., NP	AHP	Nurse Practitioner	Anesthesia	Withdraw of Privilege: • Pain Management
Yala, Linda I., MD	Provisional	Surgical Critical Care	Surgery	Additional Privilege: • Fluoroscopy Use of Supervision

**CHANGE IN STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				



**CHANGE IN STAFF REAPPOINTMENT DATES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Tagge, Edward P., MD	Active	Surgery Pediatric Surgery	Surgery	4/30/23 changed to 2/28/23 to align with CHC next appointment date

**MODIFICATION OF PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Elledge, Nathan R., MD	Active	Ophthalmology	Ophthalmology	Ophthalmology Privilege Form

**NAME CHANGE**

NAME	STATUS	SPECIALTY	DEPARTMENT	CHANGE TO:
Sullivan, Erin L., FNP	AHP	Nurse Practitioner	Medicine	Erin L. Jenkins, FNP

**AUTOMATIC TERMINATION, PER BYLAWS 3.8-3 (FAILURE TO COMPLETE PROCTORING)**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**AUTOMATIC TERMINATION, PER BYLAWS 6.4-9 (FAILURE TO FILE COMPLETE REAPPOINTMENT)**

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE
Gandotra, Gaurav, MD	Active	Psychiatry	Psychiatry	11/30/2022

**AUTOMATIC TERMINATION, (FAILURE TO COMPLETE THE OPPE PROCESS)**

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE
DeFranco, Jeremy J., MD	Active	Psychiatry	Psychiatry	11/10/2022

**VOLUNTARY RESIGNATIONS/WITHDRAWALS\***

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE/REASON
Green, Harry, OD	Tele health	Optometrists	Ophthalmology	Per CMO, as of 2020 contracted optometrists from UC Berkley no longer provide readings to RUHS Medical Center.
Gupta, Nancy, MD	Active	Gastroenterology	Medicine	11/21/2022
Iqbal, Sayeed N., MD*	Applicant	OB/GYN	OB/GYN	Withdraw of Application
Li, Wing, OD	Tele health	Optometrists	Ophthalmology	Per CMO, as of 2020 contracted optometrists from UC Berkley no longer provide readings to RUHS Medical Center.
Ludi, Hector D., MD	Active	Surgical Critical Care	Surgery	10/20/2022
Molina, Karen, OD	Tele health	Optometrists	Ophthalmology	Per CMO, as of 2020 contracted optometrists from UC Berkley no longer provide readings to RUHS Medical Center.
Sherstinsky, Mark, OD	Tele health	Optometrists	Ophthalmology	Per CMO, as of 2020 contracted optometrists from UC Berkley no longer provide readings to RUHS Medical Center.
Tawfik, Melanie E., MD	Provisional	Dermatology	Medicine	10/31/2022
Truong-N, Khoa T., MD	Provisional	Anesthesiology	Anesthesia	10/31/2022

End of Report





I hereby:

- 1) Attest that the medical center's Medical Executive Committee meeting on November 10, 2022 recommended approval of the appointment, reappointments, proctoring, change of status, withdraw of privileges, automatic terminations, resignation/withdrawals and privilege forms.
- 2) Approve the listed changes as recommended by the Medical Executive Committee; and
- 3) Recommend that the Board of Supervisors ratify the listed changes as recommended by the Medical Executive Committee.

A handwritten signature in cursive script, appearing to read "Jennifer Cruikshank".

\_\_\_\_\_  
Jennifer Cruikshank  
Chief Executive Officer – RUHS Medical Center



DATE: December 8, 2022  
 To: File  
 FROM: Medical Staff Executive Committee  
 SUBJECT: Medical Staff Attestation Appointment, Reappointments and Clinical Privileges

**INITIAL APPOINTMENT – December 08, 2022 – November 30, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Batton, Emily MD Temporary Privilege Request Effective 11/29/2022	Provisional	Neonatology	Pediatrics	Pediatrics
Moran, Jonathan O., PA Temporary Privilege Request Effective 11/18/2022	AHP-Provisional	Physician Assistant	Emergency Medicine	NCCPA
Rossie, Daniel J., MD	Provisional	Emergency Medicine	Emergency Medicine	Emergency Medicine
Schilling, Kelly D., PA Temporary Privilege Request Effective 11/18/2022	AHP-Provisional	Physician Assistant	Emergency Medicine	NCCPA
Sohail, Sindy, PA Temporary Privilege Request Effective 11/21/2022	AHP-Provisional	Physician Assistant	Medicine	NCCPA
Swain, Kyle A., PA Temporary Privilege Request Effective 11/18/2022	AHP-Provisional	Physician Assistant	Emergency Medicine	NCCPA
Williams, Lance R., MD	Provisional	Diagnostic Radiology	Radiology	Diagnostic Radiology Neuroradiology

**REAPPOINTMENTS – January 1, 2023 – December 31, 2024**

NAME	STATUS	SPECIALTY	DEPARTMENT	BOARD STATUS
Alvarado, Liza P., NP	AHP	Nurse Practitioner	Psychiatry	ANCC Family Nurse Practitioner ANCC Psychiatric Mental Health Nurse Practitioner
Bacot-Carter, Sharon NNP	Active	Nurse Practitioner	Pediatrics	National Certification Corporation
Bowes, Larry D., MD Additional Privilege: • Supervision of AHP's	Active	Ophthalmology	Ophthalmology	Ophthalmology
Dadachanji, Kaivan DO	Active	Pediatrics	Pediatrics	Pediatrics
Hanak, Brian E., IV, MD Status change from Provisional to Active status Additional Privilege: • Telemedicine	Active	Pediatric Neurosurgery	Clinical Neurological Sciences	Eligible
Hilliard, Anthony A., MD	Active	Cardiology	Medicine	Cardiovascular Disease Interventional Cardiology
Huynh, Paul T., DO Withdrawal of Privilege: • Internal Medicine	Active	Nephrology	Medicine	Nephrology
Jutzy, Kenneth R., MD	Active	Cardiology	Medicine	Internal Medicine Cardiovascular Disease Interventional Cardiology



Kar, Ashok J., MD	Active	Urology	Surgery	Urology
Koh, Han A., MD	Active	Hematology/Oncology	Medicine	Internal Medicine Hematology Medical Oncology
Additional Privilege: • Ambulatory				
Lucas, Daniel N., MD	Tele-health	Diagnostic Radiology	Radiology	Diagnostic Radiology
Meadows, LaVonne M., MD	Active	Dermatology	Medicine	Dermatology
Momeni, Mazdak, MD	Courtesy	OB/GYN & Gynecologic Oncology	OB/GYN	OB/GYN Gynecologic Oncology
Status change from Active to Courtesy due to no patient volume				
Nelson, Scott C., MD	Courtesy	Orthopedic Surgery	Orthopedic Surgery	Orthopedic Surgery
Olson, Jeffery MD	Active	Pediatrics	Pediatrics	Pediatrics Internal Medicine
Otsuka, Kimberly MD	Active	Pulmonology	Pediatrics	Pediatrics Pediatric Pulmonology
Plantak, Natasha S., PA	AHP	Physician Assistant	Clinical Neurological Sciences	NCCPA
Prasad, Vinoy S., MD	Active	Cardiology	Medicine	Internal Medicine Cardiovascular Disease Interventional Cardiology
Withdraw of Privileges: • Inferior Vena Cava • Implant Defibrillator & Defibrillator Threshold • Lead Extraction • Lead Revision • Loop Recorder Insertion • Loop Recorder Removal				
Ray, Andrea O., MD	Active	Plastic Surgery	Surgery	Plastic Surgery
Siddiqi, Javed, MD	Active	Neurological Surgery	Clinical Neurological Sciences	Neurological Surgery
Speer, Brittany N., PA	AHP	Physician Assistant	Medicine	NCCPA
To, Dat D., MD	Active	Internal Medicine	Medicine	Internal Medicine
Withdraw of Privileges: • Ambulatory • EKG • Telemedicine				
Yamanishi, Pamela E., MD	Active	Internal Medicine	Medicine	Internal Medicine

**FPPE/RECIPROCAL\* COMPLETE REMAIN ON PROVISIONAL**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Douglawi, Antoin, MD	Provisional	Urology	Surgery	Remain on Provisional until 8/11/23
Floresca, Jon W., MD	Provisional	Diagnostic Radiology	Radiology	Remain on Provisional until 8/11/23
Glivar, Philip J., MD	Provisional	Spine Surgery	Orthopedic Surgery	Remain on Provisional until 5/12/23

**FINAL FPPE/RECIPROCAL\* ADVANCEMENT OF STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Hanak IV, Brian E., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Advance to Active
Minasian, Tanya, DO	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Advance to Active
Robison, Richard A., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Advance to Active
Siddighi, Sam, MD	Provisional	Female Pelvic Medicine & Reconstructive Surgery	OB/GYN	Advance to Active

**FPPE FINAL PROCTORING FOR ALLIED HEALTH PROFESSIONALS**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Kherr, Grace A., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	Complete
Tabangcura, Demy F., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	Complete



**FPPE FINAL PROCTORING FOR ADDITIONAL PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				•

**ADDITIONAL PRIVILEGES/WITHDRAWN PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Aguilera, Adolfo, MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges
Bajwa, Moazzum, MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges
Chen, Catherine J., MD	Active	Urology	Surgery	Withdraw of Privileges: • Surgical Robotics Platform • Holmium Laser
Dave, Amar MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges
Glivar, Philip J., MD	Provisional	Spine Surgery	Orthopedic Surgery	Withdraw of Privileges: • Orthopedic Surgery Core • Replantation Surgery
Jukaku, Faheem MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges
Knerr, Grace A., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	Withdraw of Privileges: • Central Line/PICC Line • Lumbar Puncture • Endotracheal Intubation • Arterial Puncture • Thoracentesis • Paracentesis
Koshy, Ruby E., MD	Active	Neurology	Medicine	Additional Privilege: • Telemedicine
Liu, David X., MD	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
McLaughlin, Nathan MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges
Minasian, Tanya, DO	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Withdraw of Privilege: • Adult Neurosurgery
Robison, Richard A., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Withdraw of Privilege: • Fluoroscopy
Saint-Preux, Fabienne, MD	Provisional	Pain Medicine	Anesthesia	Additional Privilege: • Participate in Teaching Program
Sauceda, Uziel MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges
Siddighi, Sam, MD	Provisional	Female Pelvic Medicine	OB/GYN	Withdraw of Privileges: • Female Pelvic Medicine & Repro. Surgery Core • Surgical Robotics
Robison, Richard A., MD	Provisional	Pediatric Neurosurgery	Clinical Neurological Sciences	Withdraw of Privilege: • Fluoroscopy
Tabangcura, Demy F., PA	AHP-Provisional	Physician Assistant	Emergency Medicine	Withdraw of Privileges: • Central Line/PICC Line • Lumbar Puncture • Endotracheal Intubation



				<ul style="list-style-type: none"> <li>• Arterial Puncture</li> <li>• Thoracentesis</li> <li>• Paracentesis</li> </ul>
Tabuenca, Arnoldo D., MD	Administrative	Surgery	Surgery	Additional Privilege: • Surgical Assist Only
Thomson, Bryon D., DO	Active	Diagnostic Radiology	Radiology	Additional Privilege: • Interpretation of Transcranial Doppler
Tsang, Shunling MD	Active	Family Medicine	Family Medicine	Additional Privilege: • Pediatric Inpatient General Medical Diagnosis and Treatment Privileges

**CHANGE IN STAFF CATEGORY**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Tabuenca, Arnoldo D., MD	Administrative	Surgery	Surgery	Status Change to Courtesy

**CHANGE IN STAFF REAPPOINTMENT DATES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
Gillespie, Heather J., MD	Provisional	Rheumatology	Medicine	10/31/2024 change to 09/30/2024

**MODIFICATION OF PRIVILEGES**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**NAME CHANGE**

NAME	STATUS	SPECIALTY	DEPARTMENT	CHANGE TO:
None				

**AUTOMATIC TERMINATION, PER BYLAWS 3.8-3 (FAILURE TO COMPLETE PROCTORING)**

NAME	STATUS	SPECIALTY	DEPARTMENT	COMMENTS
None				

**AUTOMATIC TERMINATION, PER BYLAWS 6.4-9 (FAILURE TO FILE COMPLETE REAPPOINTMENT)**

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE
Bartley, James A., MD	Consulting	Genetics	Pediatrics	01/01/2023
Burgess, Leslie, FNP	AHP	Nurse Practitioner	Emergency Medicine	01/01/2023
Horenstein, Janet M., MD	Active	Maternal & Fetal Medicine	OB/GYN	01/01/2023
Satya, Vinod G., PA	AHP	Physician Assistant	Orthopedic Surgery	01/01/2023

**VOLUNTARY RESIGNATIONS/WITHDRAWALS\***

NAME	STATUS	SPECIALTY	DEPARTMENT	EFFECTIVE/REASON
Farshidpour, Maham MD	Provisional	Internal Medicine	Medicine	06/30/2022
Ghayoumi, Pouriya, MD	Applicant	Orthopedic Surgery	Orthopedic Surgery	Application Withdrawn
Kim, Joseph T., MD	Courtesy	Ophthalmology	Ophthalmology	12/31/2022

End of Report



I hereby:

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- 2) Approve the listed changes as recommended by the Medical Executive Committee; and
- 3) Recommend that the Board of Supervisors ratify the listed changes as recommended by the Medical Executive Committee.

A handwritten signature in cursive script, appearing to read "Jennifer Cruikshank".

\_\_\_\_\_  
Jennifer Cruikshank  
Chief Executive Officer – RUHS Medical Center

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**ADVANCED PRACTICE PROVIDER (APP)**  
**NURSE PRACTITIONER (NP) & PHYSICIAN ASSISTANT (PA)**  
**NEURO-INTERVENTION RADIOLOGY**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To) (To be completed by MSO)

Page 1

- Initial Appointment  
 Reappointment

**Applicant:** **CHECK (✓) the "Requested" box for each privilege requested and SIGN and DATE this form as indicated.** New applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, and other qualifications and for resolving any doubts. Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**QUALIFICATIONS FOR ADVANCED CARE PROVIDER NURSE PRACTITIONER**

**CRITERIA:** To be eligible to apply for clinical privileges as a Nurse Practitioner, the applicant must meet the following criteria:

Current demonstrated competence and current experience documenting the ability to provide services at an acceptable level of quality and efficiency,

**AND** (for initial certification prior to January 1, 2008)

Completion of a master's degree in nursing or satisfactorily completed a nurse practitioner program approved by the CA BRN.

**OR** (for initial certification after January 1, 2008)

Completion of a master's degree in nursing, a master's degree in a clinical field related to nursing, or a graduate degree in nursing and to have satisfactorily completed a nurse practitioner program approved by the CA BRN.

**AND**

Current Basic Life Support (BLS), healthcare provider recognized by the American Heart Association

**AND**

Current Advanced Life Support (ACLS), healthcare provider recognized by the American Heart Association

**AND**

Emergency Neurological Life Support (ENLS), healthcare provider recognized by the Neurocritical Care Society

**AND**

NIHSS certification

**AND**

mRS certification

**AND**

Alberta Aspects Score Certification

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**ADVANCED PRACTICE PROVIDER (APP)  
NURSE PRACTITIONER (NP) & PHYSICIAN ASSISTANT (PA)  
NEURO-INTERVENTION RADIOLOGY**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To) (To be completed by MSO)

Page 2

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**QUALIFICATIONS FOR ADVANCED CARE PROVIDER PHYSICIAN ASSISTANT**

*To be eligible to apply for clinical privileges as a Physician Assistant, the applicant must meet the following criteria:*

Current demonstrated competence and an adequate level of current experience documenting the ability to provide services at an acceptable level of quality and efficiency,

**AND**

Graduate from an ARC-PA (Accreditation Review Commission for the Physician Assistant) approved program. (Additional education may be required for some specialty areas),

**AND**

Current certification by the National Commission on Certification of Physician Assistants (NCCPA),

**AND**

Current licensure to practice as a physician assistant issued by the California Board of Medicine,

**AND**

Current ACLS card approved by American Heart Association (AHA)

**AND**

Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the governing body.

**AND**

County employment by or an agreement with a physician(s) currently appointed to the medical staff of this hospital to supervise the PA's practice in the hospital. According to the Practice agreement, the physician must:

- Assume responsibility for supervision or monitoring of the PA's practice as stated in the appropriate hospital or medical staff policy governing PA's;
- Be continuously available or provide an alternate to provide consultation when requested and to intervene when necessary;
- Assume total responsibility for the care of any patient when requested by the PA or required by this policy or in the interest of patient care;

**AND**

Professional liability insurance coverage issued by a recognized company and of a type and in an amount equal to or greater than the limits established by the governing body.

Commented [SJ1]: Can I assume that this physician will always be provided by the neuroradiologist or other practitioner with expertise/experience with neurologic pathophysiology and managements? i.e. I and my general IR colleagues from Loma Linda will assume no responsibility for the care of these patients?



RIVERSIDE UNIVERSITY HEALTH SYSTEM  
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NEURO-INTERVENTION RADIOLOGY**

Name: \_\_\_\_\_  
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Effective: \_\_\_\_\_  
(From—To) (To be completed by MSO)

Page 3

**AND**

County employment, or contracted employment for employment with a formal agreement with a physician(s) currently appointed to active or consulting medical staff of this hospital with a scope of practice in the same area of specialty practice. According to the written agreement, the physician must:

- Assume responsibility for supervision or monitoring of the APP's practice as stated in the appropriate hospital or medical staff policy governing APP's;
- Be continuously available or provide an alternate to provide consultation when requested and to intervene when necessary;
- Assume total responsibility for the care of any patient when requested by the APP or required by this policy or in the interest of patient care;
- Review all orders entered by the APP on the medical record of all patients seen or treated by the APP.

**CATEGORIES OF PATIENTS PRACTITIONER MAY TREAT**

May provide services consistent with the policies stated herein to patients of medical staff member(s) with whom the APP has a documented formal affiliation or to patients assigned by the chair of the department to which the APP is assigned.

**SUPERVISION**

The supervising physician(s) provides general supervision of the activities and services of the APP. The supervising physician(s) provides supervision and direction on any specific patient. The privileges of the APP's practice correspond to the supervising physician's practice. The APP is not allowed to perform any procedures that are not within the clinical privileges of the supervising physician(s) and for which the APP is not specifically granted. The supervising physician(s) must be immediately available by electronic communication or on hospital premises for consultation/direction of the APP.

**MEDICAL RECORD CHARTING RESPONSIBILITIES**

Clearly, legibly, completely, and in timely fashion, describe each service the APP provides to a patient in the hospital and relevant observations. Standard rules regarding authentication of, necessary content of, and required time frames for preparing and completing the medical record and portions thereof are applicable to all entries made.

**GENERAL RELATIONSHIP TO OTHERS**

Nurse Practitioners follow all health system policies and exhibit professionalism at all times.

**PERIODIC COMPETENCE ASSESSMENT**

Applicants must also be able to demonstrate they have maintained competence based on unbiased, objective results of care according to the hospital's existing quality assurance mechanisms and by showing evidence that they have met the continued competence requirements established by the state licensing authority, applicable to the functions for which they are seeking to provide at this hospital. In addition, continuing education related to the specialty area of practice is required as mandated by licensure.

**To the applicant:** If you wish to **exclude** any procedures, please strike through those procedures which you do not wish to request, initial, and date.

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
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Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To) (To be completed by MSO)

Page 4

**CRITERIA:** To be eligible to apply for the Department of Radiology clinical privileges, the applicant must meet the following criteria:

Applicant must satisfy the qualification requirements for Nurse Practitioner General and Physician Assistant.

**PERIODIC COMPETENCE ASSESSMENT**

Applicants must also be able to demonstrate they have maintained competence based on unbiased, objective results of care according to the hospital's existing quality assurance mechanisms and by showing evidence that they have met the continued competence requirements established by the state licensing authority, applicable to the functions for which they are seeking to provide at this hospital. In addition, continuing education related to the specialty area of practice is required as mandated by licensure.

**To the applicant:** If you wish to **exclude** any procedures, please strike through those procedures which you do not wish to request, initial, and date.

**ADVANCED PRACTICE PROVIDER (APP) CLINICAL PRIVILEGES — NEURO-INTERVENTIONAL RADIOLOGY**

(Includes APP General Clinical Privileges)

**Requested**

Patients within the age group of collaborating physician except as specifically excluded from practice. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Privileges include, but are not limited to:

- Assist attending physician with bedside procedures
- Provide care to critical and non-critical patients
- Preliminary interpretation of chest radiographs with final interpretation by supervising physician
- Preliminary interpretation of stroke imaging studies including CT, CTA, and CTP with final interpretation by supervising physician
- Order and interpret screening tests, laboratory tests, and diagnostic procedures.
- Perform physical examinations and medical history
- Develop a treatment plan
- Arterial access and groin access with ultrasound guidance
- AngioSeal placement with certification
- Arterial Line placement including groin access with 5 proctored cases
- AngioSeal groin placement with certification and 5 proctored cases
- Counsel and instruct patients and significant others on disease processes, medications, preventative health, and treatment plan.
- Develop and manage clinical patient care for patients in the hospital and clinic setting.
- Monitor and manage stable chronic illnesses of the population served.
- Monitor need for consult referrals, including dietician, physical therapy, social worker/case management, palliative care, etc.
- Write discharge summaries.

**ADVANCED PRACTICE PROVIDER (APP)  
NURSE PRACTITIONER (NP) & PHYSICIAN ASSISTANT (PA)  
NEURO-INTERVENTION RADIOLOGY**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From-To) (To be completed by MSO)

- Perform specimen collection.
- Perform daily rounds, observing and evaluating the patient for vital signs, intake, and output, laboratory and imaging results, nutritional plan, medication review, pain level, activity, psychiatric or behavioral issues.
- Write new orders and change orders that are within the scope of practice and notify responsible physician of changes in patient's condition or any concerns.
- Act as a liaison between the nursing department and other clinical departments, promoting teamwork and communication.

**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 the training, required previous experience, and for maintenance of clinical competency

**OBTAINING INFORMED CONSENT**

CRITERIA: To be eligible to provide informed consent, the applicant must have:

- Completion of module on informed consent with completion of post-test with 100% score.
- AND
- Proctoring of informed consent when proctoring of each privilege is granted that required informed consent.

REQUIRED PRIOR EXPERIENCE: None

MAINTENANCE OF PRIVILEGE: Successful completion of informed consent module with renewal of privileges.

Requested

**Obtaining Informed Consent**

For treatment/procedures the Advanced Practice Provider is authorized to perform.

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

I understand that:

- In exercising any clinical privileges granted and in carrying out the responsibilities assigned to me, I am constrained by Hospital and Medical Staff policies and rules applicable generally and any applicable to the particular situation.
- 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 policies governing allied health professionals or related documents.

\_\_\_\_\_  
Practitioner Signature

\_\_\_\_\_  
Date

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**ADVANCED PRACTICE PROVIDER (APP)**  
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**NEURO-INTERVENTION RADIOLOGY**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To) (To be completed by MSO)

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**ENDORSEMENT OF PHYSICIAN EMPLOYER / SUPERVISOR**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below.
- \*Do not recommend the requested privileges as noted below.

Privilege	Condition / Modification / Explanation

\_\_\_\_\_  
**Department Chair/Designee Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**IDPC Chair/Designee Signature**

\_\_\_\_\_  
**Date**

**FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency (including providing appropriate informed consent) of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

Department Chair/Designee: For the above-named applicant, please indicate below the privileges/procedures and the number of cases to be proctored, including the method of proctoring.

Please print legibly.

Privileges / Procedures to be Proctored	Number of Cases to be Proctored	Method of Proctoring A. Direct Observation B. Retrospective Chart Review C. Simulation

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
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**NEURO-INTERVENTION RADIOLOGY**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To) (To be completed by MSO)

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Physical exam, History and Physical, diagnosis and recommendations for treatment of adult patient with neuro consult.	4	2- A. Direct Observation 2- B. Retrospective Chart review
Physical exam, History and physical, diagnosis, and recommendations for treatment of adolescent patient with neuro consult.	1	A. Direct Observation
Obtaining Informed Consent	1	A. Direct Observation
Performing specimen collection from ventriculo-peritoneal shunt or external ventricular drain	2	A. Direct Observation
Arterial line placement and groin access with ultrasound	5	A. Direct observation
AngioSeal Placement	5	A. Direct Observation B. Certification via Manufacturer

**CARDIOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

- Initial Appointment
- Reappointment

Effective: \_\_\_\_\_  
 (From—To)

**Applicant: CHECK (✓) the “Requested” box for each privilege you are qualified to request and SIGN and DATE this form as indicated.**

Applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by RUHS-MC for a proper evaluation of current competence and other qualifications, and for resolving any doubts.

Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**QUALIFICATIONS- CARDIOLOGY CORE**

**CRITERIA:** To be eligible to apply for core privileges in Cardiology, the initial applicant must meet the membership requirements of Riverside University Health System and the following criteria:

- Successful completion of a postgraduate training program in Internal Medicine accredited by Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA)
- AND**
- Successful completion of an ACGME or AOA accredited fellowship training program in: Cardiovascular Disease
- AND**
- Subspecialty certification in Cardiovascular Diseases or active participation in examination certification process by ABMS, AOA, or the Royal College of Physicians and Surgeons of Canada.

**REQUIRED PREVIOUS EXPERIENCE:**

- Satisfactory completion of the educational requirements necessary for Board certification in the relevant specialty and be certified or an active candidate for certification in the respective certifying Board;
- AND**
- Demonstrated current competency and evidence of management of 50 cardiology patients during the past 12 months or successful completion of an ACGME or AOA accredited residency or fellowship within the past 12 months;

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew core privileges in cardiology, the applicant must meet the following maintenance of privilege criteria:

- Demonstrated current competence and evidence of 10 cases the past 24 months based on ongoing professional practice evaluation and outcomes.

<b>CARDIOLOGY CORE PRIVILEGES</b>			
<b>Requested</b>	<b>Privileges included in the Core</b>	<b>Approved</b>	<b>Deferred</b>
	Admit, evaluate, diagnose, treat, and provide consultation to adolescent and adult patients presenting with diseases of the heart and blood vessels and management of complex cardiac conditions. Provide care to patients in the intensive care setting in conformance with unit policies, and may assess, stabilize, and determine the disposition of patients with emergency conditions consist with policies and emergency and consultative call services.		

**CARDIOLOGY CLINICAL PRIVILEGES**

Requested	Privileges included in the Core	Approved	Deferred
	Serve as an attending physician in an inpatient and outpatient setting for patients with conditions/problems of up to critical severity in all areas of RUHS - Medical Center in the subspecialty area. (Includes minor procedure routinely identified with and performed by this subspecialty)		
	Performance of History and Physician Exam, EKG Interpretation, Ambulatory EKG Monitoring and Interpretation, Exercise and Pharmacological Stress Testing, Stress Echocardiography, Transthoracic, Temporary Pacemaker Insertion, Pericardiocentesis, Tilt Table Testing,		

**QUALIFICATIONS- CARDIOVASCULAR LAB AND CARDIAC LAB NON-CORE PROCEDURES**

**CRITERIA:** To be eligible to apply for Non-core privileges in Cardiology, the initial applicant must meet the membership requirements of Riverside University Health System and the following criteria:

- Successful completion of an ACGME or AOA accredited fellowship training program in Cardiovascular Disease

**AND**

- Subspecialty certification in Cardiovascular Diseases or active participation in examination certification process by ABMS, AOA, or the Royal College of Physicians and Surgeons of Canada.

**REQUIRED PREVIOUS EXPERIENCE:**

- Satisfactory completion of the educational requirements necessary for Board certification in the relevant specialty and be certified or an active candidate for certification in the respective certifying Board;

**AND**

- Demonstrated current competency and evidence of management of 50 cardiology patients during the past 12 months or successful completion of an ACGME or AOA accredited residency or fellowship within the past 12 months;

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew None-Core privileges in cardiology, the applicant must meet the following maintenance of privilege criteria:

<b>CARDIOVASCULAR LAB AND CARDIAC LAB NON-CORE PROCEDURES</b>			
Requested	Procedures included in the Non-Core – <i>Requires current Fluoroscopy Certificate.</i>	Approved	Deferred
	Arterial & Venous Cannulation		
	Bi-Ventricular Automatic Implantable Cardioverter-defibrillator		
	Bi-Ventricular Generator Change		
	Bi-Ventricular ICD Upgrade		
	Bi-Ventricular Pacemaker Implant		
	Bi-Ventricular Pacemaker Upgrade		
	Cardiac Catheterization including Contrast Injection		
	Coronary Angiography		

**CARDIOLOGY CLINICAL PRIVILEGES**

Requested	Procedures included in the Non-Core	Approved	Deferred
	Device Upgrade		
	Transesophageal Echocardiography (TEE)		
	IABP Insertion		
	IABP Removal		
	Inferior Vena Cava Filter		
	Implant/Explant – Defibrillators and Pacemakers		
	Implant Defibrillator and Defibrillator Threshold Testing including Subcutaneous Placement of Defibrillation Lead		
	Implant Permanent Pacemaker		
	Lead Extraction		
	Lead Insertion		
	Lead Revision		
	Loop Recorder Insertion		
	Loop Recorder Removal		
	Pacemaker Generator Change		
	Pacemaker Implant		
	Pacemaker Implant without Anesthesia		
	Pacemaker Upgrade		
	Pericardiocentesis		
	Pocket Revision		
	Pulmonary Angiography		
	Right and Left Heart Cath		
	Right and Left Heart Cath Nitric Oxide		
	Swanz Ganz Catheter Insertion		
	Vascular Angioplasty and Stenting		

**QUALIFICATIONS - PERCUTANEOUS CORONARY INTERVENTIONAL PROCEDURES (PCI)**

***Initial Appointment Criteria:*** To be eligible for core privileges in PCI, the applicant must meet the membership requirements of Riverside University Health System-MC and the following privileging criteria:

- Meet the criteria for core Cardiology privileges
- Initial Appointment: Proof of satisfactory performance of 50 PCI procedures per year in aggregate over 2 years

**OR**

- Satisfactory completion of fellowship in Interventional Cardiology in the last 12 months.
- Proctoring of 5 PCI procedures with 2 by direct supervision. For PCI procedures proctoring, the listed 4 modalities in any combination will satisfy proctoring requirement.

**Maintenance of Privileges:**

- Performed 50 PCI procedures per year in aggregate over 2 years



## CARDIOLOGY CLINICAL PRIVILEGES

PERCUTANEOUS CORONARY INTERVENTIONAL PROCEDURES (PCI)			
Requested	Privileges included in the Core	Approved	Deferred
	Coronary Angioplasty with or without Stenting		
	Coronary Stenting without angioplasty		
	Intravascular ultrasound (IVUS)		
	Coronary Fractional Flow Reserve assessment		

### PARTICIPATION IN TEACHING PROGRAM

**SUPERVISION:** Supervision is an intervention provided by a supervising practitioner to a resident physician. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functions of the resident while monitoring the quality of professional services delivered. Supervision is exercised through observation, consultation, directing the learning of the residents, and role modeling. (*Note: This definition is adapted from Bernard J.M., & Goodyear, R.K., Fundamentals of Clinical Supervision, 2<sup>nd</sup> Ed. Needham Heights, MA: Allyn & Bacon 1998.*)

**CRITERIA:** To be eligible to participate in the teaching program, the applicant must:

- Be credentialed and privileged at RUHS-MC in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when residents are involved in the care of these patients.

**MAINTENANCE OF PRIVILEGE:**

- Enhance the knowledge of the residents and ensure the quality of care delivered to each patient by any resident. This is exercised by observation, consultation, and direction to the resident.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the resident's evaluation process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the resident being supervised.
- Within 24 hours of a patient's admission or transfer (including weekends and holidays), shall personally examine the patient, establish a personal and identifiable relationship with the patient, and record an appropriate history, physical examination, working diagnostic impression(s) and plan for treatment. The attending shall countersign and add an addendum to the resident's note detailing his/her involvement and supervision.
- Ensure that discharge or transfer of the patient from an inpatient team or clinic is appropriate, based on the specific circumstances of the patient's diagnoses and therapeutic regimen.
- Meet with each patient who received consultation by a resident and perform a personal evaluation in a timely manner based on the patient's condition, unless otherwise stated in the graduated levels of responsibility.
- Shall be immediately available to the resident in person or by telephone and able to be present within a reasonable period of time, 45 minutes, if needed.
- Available for supervision during clinic hours and ensure the coordination of care that is provided to the patients.
- Provide an appropriate level of supervision during the performance of procedures. (Determination of this level of supervision is generally left to the discretion of the attending physician within the content of the previously described levels of responsibility assigned to the individual resident involved. This determination is a function of the experience and competence of the resident and the complexity of the specific case.)
- Documentation of resident supervision will be monitored during the course of peer review. Any case reviewed in which it appears that there is inadequate supervision will be forwarded to the Professional Practice Evaluation Committee.

PARTICIPATION IN TEACHING PROGRAM			
Requested	Privileges included:	Approved	Deferred
	Participate in Teaching Program		

**CARDIOLOGY CLINICAL PRIVILEGES**

**SUPERVISION OF ALLIED HEALTH PROFESSIONALS**

**Supervision:** The supervising employing/alternate supervising physician provides general supervision of the activities and services of the allied health professional. The supervising physician provides supervision and direction on any specific patient. The AHP is not allowed to perform any clinical activity/procedure that is not within the clinical privileges of the supervising physician. The supervising physician must be immediately available by electronic communication or on hospital premises for consultation/direction of the AHP.

**Criteria:** To be eligible to supervise allied health professionals, the applicant must:

- Be credentialed and privileged at RUHS-MC in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when AHPs are involved in the care of these patients.

**Maintenance of Privilege:**

- Ensure the quality of care delivered to each patient by any allied health professional. This is exercised by observation, consultation, and direction to the AHP.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the AHP's competency assessment process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the AHP being supervised.
- Assume responsibility for supervision or monitoring of the practice as stated in the appropriate hospital or medical staff policy governing AHPs.
- Be continuously available or provide an alternate to provide consultation when requested and to intervene when necessary.
- Assume total responsibility for the care of any patient when requested by the AHP or in the interest of patient care.
- Co-sign all orders entered by the AHP on the medical record of all patients seen or treated by the AHP in accordance with applicable requirements.

<b>SUPERVISION OF ALLIED HEALTH PROFESSIONALS</b>			
<b>Requested</b>	<b>Privileges included:</b>	<b>Approved</b>	<b>Deferred</b>
	Supervision of Allied Health Professionals		

**CARDIOLOGY CLINICAL PRIVILEGES**

**MODERATE SEDATION AND ANALGESIA**

**CRITERIA:** To be eligible for moderate sedation non-core privileges, the initial applicant must meet the following privileging criteria:

- Meet the qualification as required in the Privileging Criteria and Delineation for Moderate Sedation.
- Completion of Moderate Sedation Exam with satisfactory passing grade of 85%.
- Current knowledge of airway management as demonstrated by residency/fellowship training, or current ACLS/PALS if not board certified or eligible

**AND**

- Successful completion of one (1) proctored moderate sedation case under the direct supervision of an RUHS-MC practitioner holding this privilege.

**REQUIRED PREVIOUS EXPERIENCE:** Knowledge of airway management.

**MAINTENANCE OF PRIVILEGE:** Demonstrated current competence and evidence of the performance of at least two (2) moderate sedation cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes or completion and satisfactory passing of Moderate Sedation Exam with passing grade of 85%.

<b>MODERATE SEDATION</b>			
<b>Requested</b>	<b>Privileges included:</b>	<b>Approved</b>	<b>Deferred</b>
	Moderate Sedation Administration and Analgesia		

**TELEMEDICINE**

**CRITERIA:** To be eligible to apply for privileges in telemedicine, the applicant must

- Current license in State in which the hospital whose patients are receiving the telemedicine is located;
- Attests to competency in use of telemedicine equipment

**MAINTENANCE OF PRIVILEGE:**

Internal review of the practitioner's performance as proof that competency is being maintained as part of an ongoing evaluation (OPPE). The evaluation is to be included in decision to renew privileges.

<b>TELEMEDICINE</b>			
<b>Requested</b>	<b>Privileges included:</b>	<b>Approved</b>	<b>Deferred</b>
	Provide services remotely through Telemedicine capabilities		

**FLUOROSCOPY USE AND SUPERVISION**

**Criteria:** In addition to core requirements and valid State of California fluoroscopy certificate.

<b>FLUOROSCOPY USE AND SUPERVISION</b>			
<b>Requested</b>	<b>Privileges included:</b>	<b>Approved</b>	<b>Deferred</b>
	Fluoroscopy Use and Supervision		

**CARDIOLOGY CLINICAL PRIVILEGES**

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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 which I wish to exercise at RUHS-MC.

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.

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**Practitioner Signature**

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**Date**

**DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below.
- \*Do not recommend the requested privileges as noted below.

Privilege	Condition / Modification / Explanation

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**Division Chair Signature**

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**Date**

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**Department Chair/Designee Signature**

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**Date**

**CARDIOLOGY CLINICAL PRIVILEGES****FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

**Department Chair/Designee:** Please indicate below the privileges/procedures and the number of cases to be proctored of the above-named practitioner, including the method of proctoring.

<b>Privileges/Procedures to be Proctored</b>	<b>Number of Cases to be Proctored*</b>	<b>Method of Proctoring</b> A. Concurrent B. Retrospective C. Reciprocal
Cardiology Core	5 varied cases to include procedures	A,B,C as applicable
Cardiovascular Lab and Cardiac Lab Non-Core Procedures	5 varied cases, 2 direct observation	A,B,C as applicable
PCI Proctoring *Of the 4 listed modality privileges listed, any combination will satisfy proctoring requirement.	5 PCI procedures	A. 2 cases by direct supervision. B-C - 3 cases
Moderate Sedation	1 case	A,B,C as applicable

MEC: 2/10/22

**DERMATOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

- Initial Appointment  
 Reappointment

Effective: \_\_\_\_\_  
 (From—To)

**Applicant:** **CHECK (✓)** the “Requested” box for each privilege you are qualified to request and **SIGN and DATE this form as indicated.** Applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by RUHS for a proper evaluation of current competence and other qualifications, and for resolving any doubts.

Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**QUALIFICATIONS – MEDICAL DERMATOLOGY CORE**

**CRITERIA:** To be eligible to apply for core privileges in internal medicine, the initial applicant must meet the membership requirements of Riverside University Health System and the following criteria:

- Successful completion of a postgraduate training program in Dermatology accredited by Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA)

**AND**

- Current certification or active participation in the examination process leading to certification in Dermatology by the American Board of Dermatology or the American Osteopathic Board of Dermatology—or the Royal College of Physicians and Surgeons of Canada.

**REQUIRED PREVIOUS EXPERIENCE:**

- Current demonstrated competence and an adequate volume of current experience with acceptable results in the privileges requested during the last 12 months for patients of all age groups, except as specifically excluded from practice;

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew core privileges in internal medicine, the applicant must meet the following maintenance of privilege criteria:

- Current competence and evidence of the performance of 20 cases with acceptable results in the privileges requested during the past 24 months based on results of the hospital’s ongoing professional practice evaluation and outcomes.
- Continuing Medical Education (CME) requirement necessary for licensure by the applicable California medical board (the Medical Board of California or the Osteopathic Medical Board of California).

<b>MEDICAL DERMATOLOGY – CORE</b>			
<b>Requested</b>	<b>Privileges included in the Core</b>	<b>Approved</b>	<b>Deferred</b>
	Botox injection for hyperhidrosis Clinical Dermatology Curettage Cutaneous patch testing, allergy and immunology Cryotherapy Electrosurgery Medical problems related to cutaneous disease Microbiology (mycology, bacteriology, virology, and parasitology) Minor dermatologic surgical procedures Punch biopsies Shave excisions Simple elliptical incisions Ultraviolet light Venereology Physiotherapy of skin lesions Supervision of resident and students		

**DERMATOLOGY CLINICAL PRIVILEGES**

	Supervision of Allied health professionals under the following circumstances: AHP is granted practice privileges by the medical staff AHP operates under standardized procedures Other circumstances as recommended by the IDP Committee and approved by the medical staff.		
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**SPECIALIZED SURGICAL DERMATOLOGY**

**CRITERIA:** *The documentation of clinical experience must be five (5) cases of pinch grafts.*

<b>SPECIALIZED SURGICAL DERMATOLOGY</b>			
Requested	Procedures included in Specialized Surgical Dermatology	Approved	Deferred
	Pinch grafts		

**TELEMEDICINE CORE**

**CRITERIA:** To be eligible to apply for core privileges in telemedicine, the applicant must

- Current license in State in which the hospital whose patients are receiving the telemedicine is located;
- Attests to competency in use of telemedicine equipment

**MAINTENANCE OF PRIVILEGE:**

- Internal review of the practitioner's performance as proof that competency is being maintained as part of an ongoing evaluation (OPPE). The evaluation is to be included in decision to renew privileges.

<b>TELEMEDICINE CORE</b>			
Requested	Procedures included in Specialized Surgical Dermatology	Approved	Deferred
	Telemedicine		

**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 which I wish to exercise at RUHS.

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.

\_\_\_\_\_  
**Practitioner Signature**

\_\_\_\_\_  
**Date**

**DERMATOLOGY CLINICAL PRIVILEGES**

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**DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below.
- \*Do not recommend the requested privileges as noted below.

Privilege	Condition / Modification / Explanation

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**Department Chair/Designee Signature**

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**Date**



**DERMATOLOGY CLINICAL PRIVILEGES**

**FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

**Department Chair/Designee:** Please indicate below the privileges/procedures and the number of cases to be proctored of the above-named practitioner, including the method of proctoring.

**Please print legibility.**

<b>Privileges/Procedures to be Proctored</b>	<b>Number of Cases to be Proctored*</b>	<b>Method of Proctoring A. Direct Observation B. Retrospective C. Reciprocal</b>
Medical Dermatology Core	10 varied cases (visits, outpatient, or inpatient)	A,B,C as applicable
Specialized Surgical Dermatology <ul style="list-style-type: none"> <li>• Pinch grafts</li> </ul>	5 varied cases	A,B,C as applicable

**\*Indicate N/A if privilege not requested.**

MEC: 04.14.22, 6.13.22

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

(Last, First, Initial)

Effective: \_\_\_\_\_

(From—To)

Initial Appointment

Reappointment

Page 1

**Applicant:** **CHECK (✓)** the "Requested" box for each privilege you are qualified to request and **SIGN** and **DATE** this form as indicated. Applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by RUHS for a proper evaluation of current competence and other qualifications, and for resolving any doubts.

Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**QUALIFICATIONS FOR  
CORE EMERGENCY MEDICINE PRIVILEGES**

**EMERGENCY MEDICINE CORE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **emergency medicine**, the applicant must meet the membership requirements of Riverside University Health System and the following privileging criteria:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited postgraduate training program in emergency medicine, internal medicine, or family medicine.

**AND**

- Current certification or active participation in the examination process leading to certification in emergency medicine, internal medicine, or family medicine by the relative American Board specialty or the relative American Osteopathic Board specialty or the Royal College of Physicians and Surgeons of Canada.

**Required Previous Experience:** An applicant for initial appointment must be able to demonstrate:

- Active practice in an Emergency Department (ED), reflective of privileges requested, in the past 12 months.

**OR**

- Demonstrate successful completion of a hospital-affiliated accredited residency or special clinical fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in emergency medicine, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and an adequate volume of experience with acceptable results in the privileges requested during the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

- Meet the Continuing Medical Education (CME) requirements necessary for licensure by the applicable California medical board (the Medical Board of California or the Osteopathic Medical Board of California). Submit copies of CME certificates.

**AND**

- Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

Description of Core Privilege

**Requested Emergency Medicine Privileges**

Assess, evaluate, diagnose, and initially treat patients of all ages, except as specifically excluded from practice, who present in the ED with any symptom, illness, injury or condition and provide services necessary to ameliorate minor illnesses or injuries, stabilize patients with major illnesses or injuries, and assess all patients to determine if additional care is necessary. Privileges do not include long-term care of patients on an in-patient basis. No privileges to admit *with the exception of writing preliminary admission orders* or perform scheduled elective procedures with the exception of procedures performed during routine emergency room follow-up visits. Privileges include performance of history and physical exam.

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

Page 2

**CORE PROCEDURE LIST: This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.**

- Anoscopy
- Application of splints and plaster molds
- Arterial puncture and cannulation
- Arthrocentesis
- Anesthesia: intravenous (upper extremity, local, and regional)
- Bladder decompression and catheterization techniques
- Local burn management
- Cannulation, artery and vein
- Management of restraints
- Defibrillation
- Delivery of newborn, emergency
- Dislocation/fracture reduction/immobilization techniques, including splint and cast applications
- Electrocardiography interpretation
- GI decontamination (emesis, lavage, charcoal)
- Hernia reduction
- Immobilization techniques
- Irrigation and management of caustic exposures
- Laryngoscopy, direct, indirect
- Lumbar puncture
- Management of epistaxis
- Nail trephine techniques
- Nasal cautery/packing
- Nasogastric/orogastric intubation
- Ocular tonometry
- Oxygen therapy
- Paracentesis
- Preliminary interpretation of imaging studies
- Removal of foreign bodies, airway including nose, eye, ear, soft instrumentation/irrigation, skin or subcutaneous tissue
- Removal of IUD
- Repair of lacerations
- Slit lamp used for ocular exam, removal of corneal foreign body
- Splint or cast application after reduction of fracture or dislocation
- Spine immobilization
- Thoracentesis
- Variceal/nonvariceal hemostasis
- Wound debridement and repair

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

Page 3

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**QUALIFICATIONS FOR  
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 previous experience, and maintenance of clinical competence.

**PARTICIPATE IN TEACHING PROGRAM**

**Supervision:** Supervision is an intervention provided by a supervising practitioner to a resident physician. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functions of the resident while monitoring the quality of professional services delivered. Supervision is exercised through observation, consultation, directing the learning of the residents, and role modeling. (Note: This definition is adapted from Bernard J.M., & Goodyear, R.K., *Fundamentals of Clinical Supervision*, 2<sup>nd</sup> Ed. Needham Heights, MA: Allyn & Bacon 1998.)

**Criteria:** To be eligible to participate in the teaching program, the applicant must:

- Be credentialed and privileged at RUHS in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when residents are involved in the care of these patients.

**Maintenance of Privilege:**

- Enhance the knowledge of the residents and ensure the quality of care delivered to each patient by any resident. This is exercised by observation, consultation, and direction to the resident.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the resident's evaluation process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the resident being supervised.
- Within 24 hours of a patient's admission or transfer (including weekends and holidays), shall personally examine the patient, establish a personal and identifiable relationship with the patient, and record an appropriate history, physical examination, working diagnostic impression(s) and plan for treatment. The attending shall countersign and add an addendum to the resident's note detailing his/her involvement and supervision.
- Ensure that discharge or transfer of the patient from an inpatient team or clinic is appropriate, based on the specific circumstances of the patient's diagnoses and therapeutic regimen.
- Meet with each patient who received consultation by a resident and perform a personal evaluation in a timely manner based on the patient's condition, unless otherwise stated in the graduated levels of responsibility.
- Shall be immediately available to the resident in person or by telephone and able to be present within a reasonable period of time, 30 minutes, if needed.
- Available for supervision during clinic hours and ensure the coordination of care that is provided to the patients.
- Provide an appropriate level of supervision during the performance of procedures. (Determination of this level of supervision is generally left to the discretion of the attending physician within the content of the previously described levels of responsibility assigned to the individual resident involved. This determination is a function of the experience and competence of the resident and the complexity of the specific case.)
- Documentation of resident supervision will be monitored during the course of peer review. Any case reviewed in which it appears that there is inadequate supervision will be forwarded to the Professional Practice Evaluation Committee.

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Description of Non-Core Privilege

Requested       Participate in Teaching Program

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

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**SUPERVISE ALLIED HEALTH PROFESSIONALS**

**Supervision:** The supervising employing/alternate supervising physician provides general supervision of the activities and services of the allied health professional. The supervising physician provides supervision and direction on any specific patient. The AHP is not allowed to perform any clinical activity/procedure that is not within the clinical privileges of the supervising physician. The supervising physician must be immediately available by electronic communication or on hospital premises for consultation/direction of the AHP.

**Criteria:** To be eligible to supervise allied health professionals, the applicant must:

- Be credentialed and privileged at RUHS in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when AHPs are involved in the care of these patients.

**Maintenance of Privilege:**

- Ensure the quality of care delivered to each patient by any allied health professional. This is exercised by observation, consultation, and direction to the AHP.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the AHP's competency assessment process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the AHP being supervised.
- Assume responsibility for supervision or monitoring of the practice as stated in the appropriate hospital or medical staff policy governing AHPs.
- Be continuously available or provide an alternate to provide consultation when requested and to intervene when necessary.
- Assume total responsibility for the care of any patient when requested by the AHP or in the interest of patient care.
- Co-sign all orders entered by the AHP on the medical record of all patients seen or treated by the AHP in accordance with applicable requirements.

Description of Non-Core Privilege

Requested      **Supervision of Allied Health Professionals**

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

Page 5

**Emergency Ultrasound Non-Core Privilege**

**Criteria:** All emergency physicians should complete a training program in both image acquisition and image interpretation approved by the department. This training may take form in one of the following forms:

- Completion of an emergency medicine residency program that has emergency ultrasonography as an integral part of its curriculum.

**OR**

- Completion of an ACEP-approved course on emergency sonography.

**OR**

- Completion of training approved by the Emergency Medicine chair.

**Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least five (5) ultrasound interpretations in the past 12 months.

**Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least five (5) ultrasound interpretations in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Description of Non-Core Privilege

Requested      **Emergency Ultrasound**

**MODERATE SEDATION**

**Criteria:** To be eligible for moderate sedation, the applicant must:

- Meet the qualification as required in the Privileging Criteria and Delineation for Moderate Sedation and the Patient Care Services Policy, 628: Moderate Sedation/Analgesia.

**AND**

- View the Sedation Care training video or the online sedation training presentation.

**AND**

- Take and pass a written moderate sedation exam. This can be done online [www.rcrmc.org](http://www.rcrmc.org), click on Education Services for the moderate sedation site, which has the instructions, inservice video, and test.

**AND**

- Successful completion of one (1) proctored moderate sedation case under the direct supervision of an RUHS practitioner holding this privilege.

**Required Previous Experience:** Knowledge of airway management.

**Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least four (4) moderate sedation cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Description of Non-Core Privilege

Requested      **Moderate Sedation**  
Administration of sedation and analgesia

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

Page 6

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**TELEMEDICINE****Initial Privilege Criteria:**

- a) Current license in State in which the hospital whose patients are receiving the telemedicine services is located;
- b) Attests to competency in use of telemedicine equipment

**Reappointment Requirements:**

- c) Internal review of the practitioner's performance as proof that competency is being maintained as part of an ongoing evaluation (OPPE). The evaluation is to be included in decision to renew privileges.

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Description of Telemedicine

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- Requested Telemedicine**  
Provide services remotely through telemedicine capabilities

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

Page 7

**ACKNOWLEDGMENT OF PRACTITIONER**

I have requested only those privileges which by education, training, current experience, and demonstrated performance that I am qualified to perform and wish to exercise at Riverside University Health System.

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.

\_\_\_\_\_  
**Practitioner Signature**

\_\_\_\_\_  
**Date**

**DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the follow recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below.
- Do not recommend the requested privileges as noted below.

Privilege	Condition / Modification / Explanation

\_\_\_\_\_  
**Department Chair/Designee Signature**

\_\_\_\_\_  
**Date**



RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**EMERGENCY MEDICINE CORE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From—To)

**FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

**Department Chair/Designee:**

Indicate below the privileges/procedures and the number of FPPE cases to be done on the above-named practitioner, including the method of FPPE.

**Please print legibly.**

<b>Privileges/Procedures to be Proctored</b>	<b>Number of FPPE Cases</b>	<b>Method of FPPE A. Direct Observation B. Retrospective C. Reciprocal</b>
1. Procedural – Musculoskeletal, Chest, or Airway	1	A
2. Procedural - Ultrasound	1	B
3. Procedural - Moderate Sedation	1	A
4. Injury	1	A
5. Pediatrics	1	A
6. Cardiovascular	1	A
7.		
8.		
9.		

## **AUTHORIZATION FOR USE and DISCLOSURE OF HEALTH INFORMATION**

**Authorization for Use/Disclosure of Information:** I am presently a member of the Medical Staff of Riverside University Health System Medical Center. I have chosen to enter into a “Monitoring Agreement” with the Well-Being Committee of that Medical Staff (MSWBC). As a condition of that Agreement, I may undergo physical and cognitive assessments and treatment, which may include follow-up testing and consultations, to retain my medical staff membership and privileges at the Medical Center. I hereby authorize the health care provider(s) conducting those assessments and treatments to use and to disclose my health information during the term of this Authorization, including but not limited to the results of the assessments and any follow-up consultations or studies, to the MSWBC and I authorize those provider(s) to communicate directly with the MSWBC Chair or another designated committee member about my treatment and progress and the provider’s opinions about factors effecting my treatment and progress.

**Information to be disclosed:** I authorize the release of all information, observations and conclusions obtained by the health care provider(s) assessing and or treating me for conditions related to my referral to the MSWBC.

**Term:** I understand that this Authorization will remain in effect as long as I continue to maintain clinical privileges at Riverside University Health System Medical Center.

**HIPAA and other medical confidentiality laws:** I understand that HIPAA and other confidentiality provisions do not apply once I authorize disclosure of this health information and that these health care providers cannot guarantee that the RUHS medical staff will not redisclose my health information to a third party if required to do so by law. The third party may not be subject to federal or and state law governing the use and disclosure of my health information.

**Refusal to sign:** I understand that signing this form is voluntary. However, if I do not sign, I cannot participate in a Monitoring Agreement with the MSWBC. If I change my mind, I understand that I can revoke this authorization by providing a written notice of revocation to the health care provider possessing such information. The revocation will be effective immediately upon my health care provider's receipt of my written notice, except that the revocation will not have any effect on any action taken by my health care provider in reliance on this Authorization before it received my written notice of revocation. Such a revocation may also result in denial, suspension or revocation of my clinical privileges if it prevents full participation in my Monitoring Agreement with the MSWBC.

**Questions:** I may contact the Chairperson of my department or counsel of my own choosing if I have any questions before signing this Authorization form and participating in the required assessment, testing and any follow-up consultations or treatment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

**NEUROLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

- Initial Appointment  
 Reappointment

Effective: \_\_\_\_\_  
 (From—To)

**Applicant: CHECK (✓) the “Requested” box for each privilege you are qualified to request and SIGN and DATE this form as indicated.** Applicants may be requested to provide documentation of the number and types of cases during the past 24 months including inpatient and outpatient. Applicants have the burden of producing information deemed adequate by RUHS for a proper evaluation of current competence and other qualifications, and for resolving any doubts.

Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**NEUROLOGY MEDICINE CORE**

**CRITERIA:** To be eligible to apply for subspecialty privileges, the applicant must:

- Must have completed an accredited ACGME or AOA residency in Neurology.

**REQUIRED PREVIOUS EXPERIENCE:**

- Current certification or active participation in the examination process leading to certification in Neurology by the ABPN or the AOBNP.

**AND**

- Demonstrated current competency and evidence of neurological services to at least 24 inpatients and outpatients reflective of the scope of privileges requested during the past 12 months or successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past 12 months.

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew core privileges in Neurology, the applicant must meet the following maintenance of privilege criteria:

Demonstrated current competence, with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on ongoing professional practice evaluation and outcomes

**NEUROLOGY CORE**

Requested	Privileges	Approved	Deferred
	Admit, evaluate, diagnose, treat, performance of medical history and physical, and provide consultation to patients of all ages with diseases, disorders or impaired function of the brain, spinal cord, peripheral nerves, muscles, autonomic nervous system, and the blood vessels that relate to these structures. May provide care to patients in the intensive care setting in conformance with unit policies. Includes the ability to assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.		
	Supervision of Residents and Students		

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**NEUROLOGY CLINICAL PRIVILEGES**

**NEUROLOGY CORE PROCEDURE LIST**

*This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.*

Requested	Procedure	Approved	Deferred
	Nerve blocks, injection of steroids and/or local anesthetic agents		
	Lumbar puncture, diagnostic		
	Thrombolytic therapy		
	Pharmacologic testing for neuromuscular junction disorders		

**NEUROLOGY NON CORE PROCEDURES\***

**Criteria:** To be eligible to apply for special procedures/non-core procedures, the applicant must:

- Must have completed an accredited ACGME or AOA residency or fellowship in Neurology;
- Demonstrated current competency and evidence of neurological services to at least 24 inpatients and outpatients reflective of the scope of privileges requested during the past 12 months or successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past 12 months.
- Current certification or active participation in the examination process leading to certification in Neurology by the ABPN or the AOBNP.

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew core privileges in Neurology, the applicant must meet the following maintenance of privilege criteria:

- Demonstrated current competence, with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on ongoing professional practice evaluation and outcomes AND
- Demonstration of knowledge of the indicators for the procedure/test/therapy.

<b>NEUROLOGY NON CORE PROCEDURES</b>			
Requested	Special procedures/Non Core	Approved	Deferred
	Electroencephalography (EEG), performance and/or interpretation		
	Electromyography (EMG), performance and/or interpretation		
	Electroencephalography (EEG), interpretation of special EEG procedures:		
	Electrocorticography, performance and/or interpretation		
	Interpretation of invasive EEG monitoring		
	WADA test, participation and/or interpretation		
	Evoked potentials performance and/or interpretation (auditory, visual, somatosensory, other)		
	Doppler scanning, performance, and/or interpretation		
	Transcranial doppler scanning, performance and/or interpretations		
	Sleep study analysis, performance and/or interpretation		
	Botulinum toxin injection		
	Nerve biopsy, performance and/or interpretation		
	Intraoperative monitoring of neurologic functions		

**PROGRESSIVE CARE UNIT CORE**

**CRITERIA:** To be eligible to apply for core privileges in the adult progressive care unit (PCU), the applicant must:

- Meet the qualifications for core privileges in Neurology.

**REQUIRED PREVIOUS EXPERIENCE:**

- Demonstrated current competence and evidence of management of 5 inpatients in the PCU or ACCU (or similar Critical Care Unit) within the past 12 months

OR

- Successful completion of a hospital-affiliated accredited residency and clinical fellowship in Neurology within the past 12 months.

OR

- Privileges may be granted at the discretion of the Medicine department chair with additional proctoring

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew core privileges in the progressive care unit, the applicant must meet the following maintenance of privilege criteria:

- Demonstrated current competence in the past 24 months based on ongoing professional practice evaluation and outcomes

<b>Progressive Care Unit Core</b>			
<b>Requested</b>	<b>Procedure</b>	<b>Approved</b>	<b>Deferred</b>
	Admit and manage the medical care of patients in the progressive care unit. Except as specifically excluded from practice, the core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.		

**ADULT CRITICAL CARE UNIT CORE**

**CRITERIA:** To be eligible to apply for core privileges in the adult critical care unit (ACU), the applicant must:

- Meet the qualifications for core privileges in Neurology.

AND

- Evidence of a minimum of 4 months critical care training experience with at least 2 months experience in the capacity of a senior resident

**REQUIRED PREVIOUS EXPERIENCE:**

- Demonstrated current competence and evidence of management of 10 critical care patients within the past 12 months

OR

- Successful completion of a hospital-affiliated accredited residency or fellowship in Neurology within the past 12 months.

OR

- Privileges may be granted at the discretion of the Medicine department chair with additional proctoring

**MAINTENANCE OF PRIVILEGE:** To be eligible to renew core privileges in the adult care unit, the applicant must meet the following maintenance of privilege criteria:

- Demonstrated current competence in the past 24 months based on ongoing professional practice evaluation and outcomes.

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**NEUROLOGY CLINICAL PRIVILEGES**

**Adult Critical Care Unit Core**

Requested	Procedure	Approved	Deferred
	Management of life-threatening disorders in intensive care units including but not limited to shock, coma, heart failure, trauma, respiratory arrest, drug overdoses, massive bleeding, diabetic acidosis, and kidney failure. Except as specifically excluded from practice, the core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.		

**AMBULATORY ONLY**

**CRITERIA:** To be eligible to apply for core privileges in ambulatory, the applicant must:

- Meet the criteria for core privileges in Neurology.

**REQUIRED PREVIOUS EXPERIENCE:**

- Meet the criteria for core privileges in Neurology.

**MAINTENANCE OF PRIVILEGE:**

- Demonstrated current competence and evidence of 5 cases in the past 24 months based on ongoing professional practice evaluation and outcomes

**Ambulatory Only**

Requested	Procedure	Approved	Deferred
	Includes privileges to see, treat, refer for specialty care and otherwise manage patients in the RUHS-MC Clinics. Includes the ability to perform diagnostic and other procedures normally performed in the ambulatory care setting.		

**PARTICIPATION IN TEACHING PROGRAM**

**SUPERVISION:** Supervision is an intervention provided by a supervising practitioner to a resident physician. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functions of the resident while monitoring the quality of professional services delivered. Supervision is exercised through observation, consultation, directing the learning of the residents, and role modeling.

**CRITERIA:** To be eligible to participate in the teaching program, the applicant must:

- Be credentialed and privileged at RUHS in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when residents are involved in the care of these patients.

**MAINTENANCE OF PRIVILEGE:**

- Enhance the knowledge of the residents and ensure the quality of care delivered to each patient by any resident. This is exercised by observation, consultation, and direction to the resident.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the resident's evaluation process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the resident being supervised.
- Within 24 hours of a patient's admission or transfer (including weekends and holidays), shall personally examine the patient, establish a personal and identifiable relationship with the patient, and record an appropriate history, physical examination, working diagnostic impression(s) and plan for treatment. The attending shall countersign and add an addendum to the resident's note detailing his/her involvement and supervision.
- Ensure that discharge or transfer of the patient from an inpatient team or clinic is appropriate, based on the specific circumstances of the patient's diagnoses and therapeutic regimen.
- Meet with each patient who received consultation by a resident and perform a personal evaluation in a timely manner based on the patient's condition, unless otherwise stated in the graduated levels of responsibility.
- Shall be immediately available to the resident in person or by telephone and able to be present within a reasonable period of time, 45 minutes, if needed.
- Available for supervision during clinic hours and ensure the coordination of care that is provided to the patients.
- Provide an appropriate level of supervision during the performance of procedures. (Determination of this level of supervision is generally left to the discretion of the attending physician within the content of the previously described levels of responsibility assigned to the individual resident involved. This determination is a function of the experience and competence of the resident and the complexity of the specific case.)
- Documentation of resident supervision will be monitored during the course of peer review. Any case reviewed in which it appears that there is inadequate supervision will be forwarded to the Professional Practice Evaluation Committee.

<b>Participation in Teaching Program</b>			
<b>Requested</b>	<b>Procedure</b>	<b>Approved</b>	<b>Deferred</b>
	Participate in Teaching Program		



RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**NEUROLOGY CLINICAL PRIVILEGES**

**TELEMEDICINE**

**CRITERIA:** To be eligible to apply for core privileges in telemedicine, the applicant must

- Current license in State in which the hospital whose patients are receiving the telemedicine is located;
- Attests to competency in use of telemedicine equipment

**MAINTENANCE OF PRIVILEGE:**

Internal review of the practitioner's performance as proof that competency is being maintained as part of an ongoing evaluation (OPPE). The evaluation is to be included in decision to renew privileges.

Telemedicine			
Requested	Procedure	Approved	Deferred
	Provide services remotely through telemedicine capabilities		

**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 which I wish to exercise at RUHS.

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.

\_\_\_\_\_  
**Practitioner Signature**

\_\_\_\_\_  
**Date**

**DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below.
- \*Do not recommend the requested privileges as noted below.

Privilege	Condition / Modification / Explanation

\_\_\_\_\_  
**Department Chair/Designee Signature**

\_\_\_\_\_  
**Date**

RIVERSIDE UNIVERSITY HEALTH SYSTEM  
**NEUROLOGY CLINICAL PRIVILEGES**

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**FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

**Department Chair/Designee:** Please indicate below the privileges/procedures and the number of cases to be proctored of the above-named practitioner, including the method of proctoring.  
**Please print legibility.**

Privileges/Procedures to be Proctored	Number of Cases to be Proctored*	Method of Proctoring A. Direct Observation B. Retrospective C. Reciprocal
Neurology Core Procedures	5 varied cases	A,B,C as applicable
Neurology Special Procedures/Non-Core Procedures	5 varied cases	A,B,C as applicable
EEG	5 cases	A,B,C, as applicable
EMG	5 cases	A,B,C, as applicable
Botulinum toxin injection	5 cases	A,B,C, as applicable
Nerve Blocks	5 cases	A,B,C, as applicable
IV Thrombolytics	5 cases	A,B,C, as applicable
Progressive Care Unit Core	5 varied cases	A,B,C as applicable
Adult Critical Care Core	5 varied cases	A,B,C as applicable

MEC: 04.14.22

RIVERSIDE UNIVERSITY HEALTH SYSTEM – MEDICAL CENTER  
**OBSTETRICS AND GYNECOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From--To)

- Initial Appointment  
 Reappointment

**Applicant: CHECK (✓) the “Request” box for each privilege you are qualified to request and SIGN and DATE this form as indicated.** Applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by Riverside University Health System (RUHS) Medical Center for a proper evaluation of current competence and other qualifications, and for resolving any doubts.

Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**QUALIFICATIONS FOR CORE  
OBSTETRICS & GYNECOLOGY PRIVILEGES**

**OBSTETRICS AND GYNECOLOGY CORE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **Obstetrics and Gynecology**, the initial applicant must meet the membership requirements of RUHS and the following privileging criteria:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited postgraduate training program in Obstetrics and Gynecology.

**AND**

- Current certification or active participation in the examination process leading to certification in Obstetrics and Gynecology by the American Board of Obstetrics and Gynecology, the American Osteopathic Board of Obstetrics and Gynecology or the Royal College of Physicians and Surgeons of Canada.

**Required Previous Experience:** An applicant for initial appointment must provide:

- An equivalent list of appropriately managed cases with at least 50 deliveries including 5 c-sections) and at least 25 gynecological surgical procedures including 5 major abdominal cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Evidence of completion of a hospital-affiliated accredited residency or fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in **Obstetrics and Gynecology**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and performance of fifteen (15) deliveries to include three (3) C-sections; and ten (10) gynecological surgical procedures to include four (4) major abdominal cases with acceptable results in the privileges requested for the past 24 months based on ongoing professional practice evaluation and outcomes.

**AND**

- Meet the Continuing Medical Education (CME) requirement necessary for licensure by the Medical Board of California or the Osteopathic Medical Board of California

**AND**

- Evidence of current ability to perform privileges requested is required of all applicants for renewal of clinical privileges.

RIVERSIDE UNIVERSITY HEALTH SYSTEM – MEDICAL CENTER  
**OBSTETRICS AND GYNECOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

Effective: \_\_\_\_\_  
 (From--To)

Request	Obstetrics Core Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Admit, evaluate, diagnose, treat, and provide consultation of female patients presenting with any condition, complication or stage of pregnancy, including those on the Obstetrics Core Privileges List and such other procedures that are extensions of the same techniques and skills, excluding those specific to Maternal Fetal Medicine Core Privileges.</li> <li>• Performance of history and physical exam</li> <li>• Provide care to patients in the intensive care setting in conformance with unit policies</li> <li>• Assess, stabilize and determine the disposition of patients with emergent conditions consist with policies</li> <li>• Management of medical and surgical complications of pregnancy</li> <li>• Amniocentesis</li> <li>• Amniotomy</li> <li>• Anesthesia local, pudendal and paracervical</li> <li>• Fetal monitoring application and interpretation including non-stress test</li> <li>• Induction and augmentation of labor</li> <li>• Cesarean section</li> <li>• Cerclage</li> <li>• Circumcision of infant</li> <li>• Dilation and evacuation for late second trimester pregnancy termination</li> <li>• External version of breech</li> <li>• Management of breech delivery</li> <li>• Manual removal of placenta</li> <li>• Uterine curettage</li> <li>• Operative vaginal delivery including low, mid, breech or vacuum</li> <li>• Normal spontaneous vaginal delivery</li> <li>• Episiotomy and repair of perineal, vaginal and cervical lacerations</li> <li>• Ultrasound for assessment of amniotic fluid volume, confirmation of viability, fetal presentation, placenta position and biometry</li> <li>• Trial of labor after Cesarean section (TOLAC)</li> <li>• Post-partum tubal sterilization</li> <li>• Medical and surgical management of ectopic pregnancy</li> </ul>			

RIVERSIDE UNIVERSITY HEALTH SYSTEM – MEDICAL CENTER  
**OBSTETRICS AND GYNECOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

Effective: \_\_\_\_\_  
 (From–To)

Request	Gynecology Core Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Admit, evaluate, diagnose, treat, and provide consultation and perioperative care necessary to treat female patients of all ages, presenting with disorders and injuries of the female reproductive and genitourinary systems, including those on the Gynecologic Core Privileges List.</li> <li>• Performance of history and physical exam</li> <li>• Provide care to patients in the intensive care setting in conformance with unit policies</li> <li>• Assess, stabilize and determine the disposition of patients with emergent conditions consist with policies</li> <li>• Dilation and curettage diagnostic and therapeutic</li> <li>• Adnexal surgery including oophorectomy, salpingectomy and cystectomy</li> <li>• Hysterectomy including abdominal, vaginal and laparoscopic</li> <li>• Cervical biopsy including conization</li> <li>• Colpocleisis and colpectomy</li> <li>• Colposcopy</li> <li>• Cystoscopy</li> <li>• Diagnostic and operative laparoscopy</li> <li>• Endometrial ablation</li> <li>• Ectopic pregnancy management medical and surgical</li> <li>• Laparotomy</li> <li>• Hysterosalpingography</li> <li>• Hysteroscopy diagnostic</li> <li>• Hysteroscopy operative</li> <li>• Incision and drainage of perineal or pelvic abscess</li> <li>• Incidental appendectomy</li> <li>• Incidental large and small bowel or bladder repair</li> <li>• Minor gynecological surgical procedures including biopsies and management of Bartholin's gland</li> <li>• Myomectomy and metroplasty</li> <li>• Laparoscopy diagnostic and therapeutic</li> <li>• Vesicovaginal and rectovaginal fistula repair</li> <li>• Operations for sterilization including laparoscopic and transcervical</li> <li>• Vaginal repair</li> <li>• Operations for treatment of urinary stress incontinence including vaginal, sling and retropubic</li> <li>• Operations for non-invasive carcinoma of the vulva, vagina, uterus, cervix or ovary</li> </ul>			

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**OBSTETRICS AND GYNECOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
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**FAMILY MEDICINE CORE PRIVILEGES (IN OBSTETRICS & GYNECOLOGY)**

**Criteria:** To be eligible to apply for **Family Medicine** core privileges in **Obstetrics and Gynecology**, the initial applicant must meet the membership requirements of RUHS Medical Center and the following privileging criteria:

- Successful completion of an ACGME or AOA accredited postgraduate training program in Family Medicine.

**AND**

- Evidence of formal **obstetrical training** in residency or fellowship program.

**AND**

- Current certification or active participation in the examination process leading to certification in Family Medicine by the American Board of Family Medicine or the American Osteopathic Board of Family Physicians.

**Required Previous Experience:** To be eligible to renew privileges in **Family Medicine**, the applicant must provide:

- An equivalent list of appropriately managed cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Evidence of completion of a hospital-affiliated accredited residency or fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew privileges for **Family Medicine in Obstetrics and Gynecology**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and performance of eight (8) vaginal deliveries with acceptable results for the past 24 months based on ongoing professional practice evaluation and outcomes.

**AND**

- Meet the Continuing Medical Education (CME) requirement necessary for licensure Medical Board of California or the Osteopathic Medical Board of California)

**AND**

- Evidence of current ability to perform privileges requested.

Request	Family Medicine Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Admission and management of patients without medical, surgical or obstetrical complications for normal labor and spontaneous vaginal delivery with vertex presentation equal to or greater than 37 completed weeks gestation including those listed on the Family Medicine Privileges List</li> <li>• Neonatal resuscitation (<b>requires NRP certification</b>)</li> <li>• Fetal monitoring application and interpretation including non-stress test</li> <li>• Induction and augmentation of labor</li> <li>• Intrauterine fetal demise management</li> </ul>			

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 (From--To)

	<ul style="list-style-type: none"> <li>• Manual removal of placenta</li> <li>• Post-partum care</li> <li>• Amniotomy</li> <li>• Vacuum assisted delivery (<u>consult required</u>)</li> <li>• Anesthesia local, pudendal and paracervical</li> <li>• Episiotomy and repair including first and second degree and cervical lacerations</li> <li>• Repair of third degree lacerations (<u>consult required</u>)</li> <li>• Surgical assist for Cesarean section</li> <li>• Circumcision of Infant</li> <li>• Ultrasound for assessment of amniotic fluid volume, confirmation of viability and fetal presentation</li> <li>• Ectopic pregnancy medical management</li> </ul>			
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**OUTPATIENT OBSTETRICS AND GYNECOLOGY PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **Outpatient Obstetrics and Gynecology**, the initial applicant must meet the membership requirements of RUHS Medical Center and the following privileging criteria:

- Satisfy Obstetrics and Gynecology Core Privileges Criteria

**AND**

- Current certification or active participation in the examination process leading to certification in Obstetrics and Gynecology by the American Board of Obstetrics and Gynecology, the American Osteopathic Board of Obstetrics and Gynecology or the Royal College of Physicians and Surgeons of Canada.

**Required Previous Experience:**

- Demonstration of provision of outpatient care and appropriately managed cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Evidence of completion of a hospital-affiliated accredited residency or fellowship or research within the past 12 months.

Request	Outpatient Obstetrics and Gynecology Privileges List	Approve	Modify/Comment	Deferred
	<ul style="list-style-type: none"> <li>• Perform history and physical exams, evaluate, diagnose, and provide treatment to female patients for gynecologic and obstetric care including but not limited to those listed on the Outpatient Obstetrics and Gynecology Privileges List.</li> <li>• Loop Electrosurgical Excision Procedure (LEEP)</li> <li>• Cryotherapy</li> <li>• Colposcopy with cervical biopsy and endocervical curettage.</li> <li>• IUD insertion and removal</li> <li>• Biopsy of vulva, vagina and endometrium</li> </ul>			
	<ul style="list-style-type: none"> <li>• Nexplanon insertion (<u>requires certificate of training</u>)</li> </ul>			

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Name: \_\_\_\_\_  
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**GYNECOLOGIC ONCOLOGY CORE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **Gynecologic Oncology**, the initial applicant must meet the membership requirements of RUHS Medical Center and the following privileging criteria:

- Satisfy Obstetrics and Gynecology Core Privileges Criteria

**AND**

- Successful completion of an ACGME or AOA accredited postgraduate fellowship in Gynecologic Oncology.

**AND**

- Current certification or active participation in the examination process leading to subspecialty certification in Gynecology Oncology by the American Board of Obstetrics and Gynecology or the American Osteopathic Board of Obstetrics and Gynecology.

**Required Previous Experience:** An applicant for initial appointment must provide:

- An equivalent list of at least twelve (12) appropriately managed Gynecologic oncology cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Successful completion of a hospital-affiliated accredited residency or special clinical fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in **Gynecologic Oncology**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and adequate volume of experience including five (5) gynecologic oncology procedures with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

- Evidence of current ability to perform privileges requested.



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 (From--To)

Request	Gynecologic Oncology Core Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Admit, evaluate, diagnose, treat, and provide consultation, and surgical and therapeutic treatment of female patients with malignant diseases, including carcinomas of the cervix, ovary, fallopian tubes, uterus, vulva, and vagina, including those on the Gynecologic Oncology Core Privileges List.</li> <li>• Performance of history and physical exam</li> <li>• Provide care to patients in the intensive care setting in conformance with unit policies</li> <li>• Assess, stabilize and determine the disposition of patients with emergent conditions consist with policies</li> <li>• Chemotherapy</li> <li>• Brachytherapy</li> <li>• Cystoscopy and sigmoidoscopy with biopsy.</li> <li>• Myocutaneous flaps</li> <li>• Skin grafting</li> <li>• Lymph node dissection</li> <li>• Pelvic exenteration</li> <li>• Radical surgery for treatment of gynecological malignancy including hysterectomy, vulvectomy, vaginectomy.</li> <li>• Radical surgery for treatment of gynecological malignancy including procedures on the bowel, ureter, bladder and spleen.</li> <li>• Incidental hernia repair</li> </ul>			

**MATERNAL-FETAL MEDICINE CORE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **Maternal-Fetal Medicine**, the initial applicant must meet the membership requirements of RUHS Medical Center and the following privileging criteria:

- Satisfy Obstetrics and Gynecology Core Privileges Criteria.

**AND**

- Successful completion of an ACGME or AOA accredited postgraduate fellowship in maternal-fetal medicine.

**AND**

- Current certification or active participation in the examination process leading to subspecialty certification in maternal-fetal medicine by the American Board of Obstetrics and Gynecology or the American Osteopathic Board of Obstetrics and Gynecology.

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**Required Previous Experience:** An applicant for initial appointment must provide:

- An equivalent list of at least twelve (12) appropriately managed cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Evidence of completion of a hospital-affiliated accredited fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in **Maternal-Fetal Medicine**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and an adequate volume of experience including twenty (20) procedures with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

- Evidence of current ability to perform privileges requested,

Request	Maternal Fetal Medicine Core Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Admit, evaluate, diagnose, treat and provide consultation of patients with medical and surgical complications of pregnancy including those on the Maternal-Fetal Medicine Core Privileges List.</li> <li>• Performance of history and physical exam</li> <li>• Provide care to patients in the intensive care setting in conformance with unit policies</li> <li>• Assess, stabilize and determine the disposition of patients with emergent conditions consist with policies</li> <li>• Genetic amniocentesis</li> <li>• Chorion villus sampling</li> <li>• Dilation and evacuation for late second trimester pregnancy termination</li> <li>• Detailed ultrasound</li> <li>• Intrauterine fetal procedures including percutaneous umbilical blood sampling and intrauterine fetal transfusion</li> </ul>			

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**FEMALE PELVIC MEDICINE & RECONSTRUCTIVE SURGERY CORE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **Female Pelvic Medicine and Reconstructive Surgery, (FPMRS)**, the initial applicant must meet the privileging criteria:

- Satisfy Obstetrics and Gynecology Core Privileges Criteria.

**AND**

- Successful completion of an ACGME or AOA accredited postgraduate fellowship in Female Pelvic Medicine and Reconstructive Surgery.

**AND**

- Current subspecialty certification or active participation in the examination process leading to subspecialty certification in FPMRS by the American Board of Obstetrics and Gynecology or the American Osteopathic Board of Obstetrics and Gynecology.

**Required Previous Experience:** An applicant for initial appointment must provide:

- An equivalent list of at least fifteen (15) appropriately managed cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Evidence of completion of a hospital-affiliated accredited fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in **FPMRS**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and an adequate volume of experience including twenty (20) procedures from at least 3 categories with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

- Evidence of current ability to perform privileges requested.

Request	Female Pelvic Medicine and Reproductive Surgery Core Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Admit, evaluate, diagnose, and provide consultation and perioperative care necessary to treat female patients of all ages presenting with injuries and disorders of the genitourinary system including those on the Female Pelvic Medicine and Reproductive Surgery Core Privileges List.</li> <li>• Performance of history and physical exam</li> <li>• Provide care to patients in the intensive care setting in conformance with unit policies</li> <li>• Assess, stabilize and determine the disposition of patients with emergent conditions consist with policies</li> <li>• Bladder biopsy, cystotomy, cystostomy</li> <li>• Sigmoidoscopy</li> </ul>			

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	<ul style="list-style-type: none"> <li>• Cystoscopy including placement of ureteral stents</li> <li>• Trans-urethral bulking including collagen injection</li> <li>• Multichannel urodynamic testing</li> <li>• Vaginal and paravaginal repair with graft augmentation</li> <li>• Sacrocolpopexy laparotomy and laparoscopy</li> <li>• Sacrospinous ligament suspension</li> <li>• Vesicovaginal, rectovaginal and urethrovaginal fistula repair</li> <li>• Urethral diverticulectomy</li> <li>• Intradetrusor Botox injection</li> <li>• Sacral neuromodulation (Interstim)</li> <li>• Vaginal mesh excision</li> <li>• Operations for treatment of urinary stress incontinence including vaginal, sling and retropubic</li> <li>• Hysteropexy</li> <li>• Incidental hernia repair</li> </ul>		
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**FEMALE PELVIC MEDICINE & RECONSTRUCTIVE SURGERY ADVANCED PRIVILEGES**

**Criteria:** To be eligible to apply for advanced privileges in **Female Pelvic Medicine and Reconstructive Surgery (FPMRS)**, the initial applicant must meet the privileging criteria:

- Satisfy Obstetrics and Gynecology Core Privileges and Female Pelvic Medicine and Reconstructive Surgery Core Privileges criteria.

**AND**

- Successful completion of an ACGME or AOA accredited postgraduate fellowship in Female Pelvic Medicine and Reconstructive Surgery and evidence of mentorship or training in advanced intersex surgical procedures.

**AND**

- Current subspecialty certification or active participation in the examination process leading to subspecialty certification in FPMRS by the American Board of Obstetrics and Gynecology or the American Osteopathic Board of Obstetrics and Gynecology.

**Required Previous Experience:** An applicant for initial appointment must provide:

- An equivalent list of at least five (5) observed or appropriately managed cases with an acceptable outcome representing the advanced privileges being requested and performed during the past 12 months

**OR**

- Evidence of completion of a hospital-affiliated accredited fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew advanced privileges in **FPMRS**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and an adequate volume of experience including four (4) appropriately managed cases with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

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- Evidence of current ability to perform privileges requested.

Request	Female Pelvic Medicine and Reproductive Surgery Advanced Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Intersex surgery male to female including: penectomy, orchiectomy, vaginoplasty, vulvoplasty, urethroplasty and clitorplasty</li> </ul>			
	<ul style="list-style-type: none"> <li>• Myocutaneous flap</li> </ul>			
	<ul style="list-style-type: none"> <li>• Ureteroneocystoscopy, ureteroureterostomy</li> </ul>			

**REPRODUCTIVE ENDOCRINOLOGY AND INFERTILITY CORE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in **Reproductive Endocrinology and Infertility**, the initial applicant must meet the privileging criteria:

- Satisfy Obstetrics and Gynecology Core Privileges Criteria.

**AND**

- Successful completion of an ACGME or AOA accredited postgraduate fellowship in Reproductive Endocrinology.

**AND**

- Current certification or active participation in the examination process leading to subspecialty certification in reproductive endocrinology by the American Board of Obstetrics and Gynecology or special qualifications in reproductive endocrinology from the American Osteopathic Board of Obstetrics and Gynecology.

**Required Previous Experience:** An applicant for initial appointment must provide:

- An equivalent list of appropriately managed cases with an acceptable outcome representing the full range of privileges being requested and performed during the past 12 months.

**OR**

- Evidence of completion of a hospital-affiliated accredited fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in **Reproductive Endocrinology and Infertility**, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and an adequate volume of experience including twenty (20) reproductive endocrinology procedures with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

- Evidence of current ability to perform privileges requested is required.

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Request	Reproductive Endocrine and Infertility Core Privileges List	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Outpatient evaluation, consultation, diagnosis, and treatment of female patients presenting with endocrine and infertility problems including those on the Reproductive Endocrine and Infertility Core Privileges List.</li> <li>• Performance of history and physical exam</li> <li>• Retrieval of oocytes by ultrasound or laparoscopy</li> <li>• Culture and fertilization of oocytes</li> <li>• Embryo transfer</li> <li>• Microsurgical re-anastomosis and tubo-uterine implantation</li> <li>• Intra-abdominal transfer of gametes and zygotes</li> </ul>			

**QUALIFICATIONS FOR NON CORE PRIVILEGES**

- 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 previous experience, and maintenance of clinical competence.

**PARTICIPATE IN TEACHING PROGRAM PRIVILEGE**

**Criteria:** To be eligible to participate in the **Teaching Program**, the applicant must:

- Be credentialed and privileged at RUHS Medical Center in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.

**Maintenance of Privilege:**

- Enhance the knowledge of the residents and ensure the quality of care delivered to each patient by any resident. This is exercised by observation, consultation, and direction to the resident.
- Participate in the resident's evaluation process according to accrediting and certifying body requirements.
- Documentation of resident supervision will be monitored during the course of peer review. Any case reviewed in which it appears that there is inadequate supervision will be forwarded to the Professional Practice Evaluation Committee.

Request	Teaching Program Privileges	Approve	Modify	Deny
	<ul style="list-style-type: none"> <li>• Ability to enhance the knowledge and training of residents by observation, consultation, and direction.</li> </ul>			

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**Supervision:** The supervising employing/alternate supervising physician provides general supervision of the activities and services of the allied health professional. The supervising physician provides supervision and direction on any specific patient. The AHP is not allowed to perform any clinical activity/procedure that is not within the clinical privileges of the supervising physician. The supervising physician must be immediately available by electronic communication or on hospital premises for consultation/direction of the AHP.

**Criteria:** To be eligible to **Supervise Allied Health Professionals**, the applicant must:

- Be credentialed and privileged at RUHS Medical Center in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when AHPs are involved in the care of these patients.

**Maintenance of Privileges:**

- Ensure the quality of care delivered to each patient by any allied health professional. This is exercised by observation, consultation, and direction to the AHP.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the AHP's competency assessment process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the AHP being supervised.
- Assume responsibility for supervision or monitoring of the practice as stated in the appropriate hospital or medical staff policy governing AHPs.
- Be continuously available or provide an alternate to provide consultation when requested and to intervene when necessary.
- Assume total responsibility for the care of any patient when requested by the AHP or in the interest of patient care.
- Co-sign all orders entered by the AHP on the medical record of all patients seen or treated by the AHP in accordance with applicable requirements.

Request	Privilege	Approve	Modify	Deny
	<b>Supervision of Allied Health Professionals Privileges</b>			

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**LASER NON-CORE PRIVILEGES**

**Criteria:** To be eligible for non-core privileges in **Laser**, the initial applicant must meet the following privileging criteria:

- Successful completion of an approved 4 hour minimum CME course which includes training in laser principles and safety, basic laser physics, laser tissue interaction, discussion of the clinical specialty field, and hands-on experience with lasers.

**AND**

- A letter outlining the content and successful completion of laser course.

**OR**

- Successful completion of an approved residency in a specialty or subspecialty which included training in laser principles and safety, basic laser physics, laser tissue interaction, discussion of the clinical specialty field, and a minimum of 6 (six) hours' observation and hands-on experience with lasers.

**OR**

- Current demonstrated competence and evidence of performance of at least three (3) laser procedures in the privileges requested in the past 24 months.

**Maintenance of Privilege:**

- To be eligible to renew Laser privileges in the department of Obstetrics & Gynecology, the applicant must meet the maintenance of core specialty or subspecialty privilege criteria.

**AND**

- Evidence of current ability to perform privileges requested is required of all applicants for renewal of clinical privileges.

Request	Laser Non-Core Privilege	Approve	Modify	Deny
	CO <sub>2</sub>			
	Argon			

**MODERATE SEDATION PRIVILEGES**

**Criteria:** To be eligible for non-core privileges in **Moderate Sedation**, the initial applicant must meet the following privileging criteria:

- Completion of RUHS Moderate Sedation On Line Video Course

**AND**

- Completion of Moderate Sedation Exam with satisfactory passing grade of 85%.

**AND**



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- 
- AND**
- Current knowledge of airway management as demonstrated by residency/fellowship training, or current ACLS/PALS
  - Moderate Sedation for patients 14 years and younger require training in the care of pediatric patients demonstrated by residency/fellowship training.

**Required Previous Experience:** Knowledge of airway management.

**Maintenance of Privilege:** Demonstrated current competence and evidence of performance of four (4) moderate sedation cases in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Request	Moderate Sedation Non-Core Privilege	Approve	Modify	Deny
	Administration of sedation and analgesia			

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**SURGICAL ROBOTIC PLATFORM**

**CRITERIA:** To be eligible for **Surgical Robotic Platform** privileges, the initial applicant must meet the following privileging criteria:

- Completed an ACGME approved residency program in Obstetrics & Gynecology.
- Certification by the American Board of Obstetrics & Gynecology **OR** must be eligible to sit for that board **OR** demonstrated equivalent competency in Obstetrics & Gynecology.
- Current active privileges to perform the underlying surgical procedure to be performed on the Robotic Surgical Platform or be eligible for privileges.

**ROBOTIC PLATFORM TRAINING**

In order to apply for robotic privileges the physician must have completed at least one of the following three training experiences:

1. Teaching Proctor Experience:

a. Evidence of training by attendance at a hands-on training practicum in the use of the Robotic Surgical Platform of at least eight (8) hours duration with experience in a laboratory setting, which includes a minimum of three (3) hours of personal time on the system using animate or cadaver models on console performing routine maneuvers such as knot tying.

b. Successful completion of a minimum of five (5) cases is required under the supervision of and with the help of a teaching proctor. A proctor of the same specialty is required for the first two (2) cases, but is not required for the remaining three cases.

c. This teaching proctor may be a physician who is privileged to proctor robotic cases **OR** an outside physician with temporary privileges to proctor. This teaching proctor will be compensated for his/her services.

2. Fellowship or Residency Training Experience:

Previous practical experience via an accredited fellowship or residency program with documented clinical experience in a minimum of twenty (20) robotic-assisted procedures in that program. If less than twenty (20) robotic-assisted procedures done, follow the process in 1b. above

**OR**

3. Robotic Privileges at another Hospital:

Previous full robotic surgery privileges at another hospital as documented by providing operative reports and discharge summaries for the last ten (10) consecutive robotic cases performed as the operating physician (cases performed as assistant physician do not count) for review.

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**MEDICAL STAFF PROCTORING REQUIREMENTS**

Once the applicant has applied for robotic privileges and has furnished evidence of the required training and/or experience as detailed above, that application will be reviewed by the chair of Obstetrics and Gynecology and a recommendation made to the credentials committee for granting provisional robotic privileges.

Once provisional robotic privileges are granted, the applicant will need to be proctored on at least two (2) additional cases performed without the assistance of the proctor. The proctor will be present during the entire case and will observe the procedure.

This proctoring must be performed by a member of the Medical Staff who has full robotic privileges. Up to five (5) cases may be required in some circumstances, but after two to five (2–5) cases, full robotic privileges will be either approved, referred for additional training, or denied based on the proctoring reports and the determination of the Obstetrics & Gynecology Chair.

This proctor is provided without charge to the applicant in the usual manner for medical staff proctoring requirements.

**MAINTAINING ROBOTIC PRIVILEGES**

The physician must have performed twenty (20) cases, including eight (8) within the last two (2) years, or they will either not be eligible to reapply for the privilege or they will be referred for additional proctoring.

The physician should participate actively in the ongoing performance improvement programs of the medical staff, hospital, and department.

**REQUIREMENTS FOR A TEACHING PROCTOR AT RUHS MEDICAL CENTER**

At least one of the following three levels of experience:

1. Full robotic privileges at another hospital as documented by providing operative reports and discharge summaries for the last twenty (20) consecutive robotic cases performed as the operative physician (cases performed as assistant physician do not count) for review. Department Chair to review cases.
2. Current Intuitive Surgical approved proctor.
3. Full robotic privileges granted by Medical Staff.

Request	Privilege	Approve	Modify	Deny
	<b>Surgical Robotic Platform Privileges</b>			

RIVERSIDE UNIVERSITY HEALTH SYSTEM – MEDICAL CENTER  
**OBSTETRICS AND GYNECOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
(Last, First, Initial)

Effective: \_\_\_\_\_  
(From–To)

**ACKNOWLEDGMENT OF PRACTITIONER**

I have requested only those privileges for which by education, training, current experience, and demonstrated performance that I am qualified to perform and wish to exercise at RUHS Medical Center.

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.

\_\_\_\_\_  
**Practitioner Signature**

\_\_\_\_\_  
**Date**

**OB/GYN DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the follow recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below
- Do not recommend the requested privileges as noted below

Privilege(s)	Condition / Modification

\_\_\_\_\_  
**OB/GYN Department Chair/Designee Signature**

\_\_\_\_\_  
**Date**

RIVERSIDE UNIVERSITY HEALTH SYSTEM – MEDICAL CENTER  
**OBSTETRICS AND GYNECOLOGY CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

Effective: \_\_\_\_\_  
 (From–To)

**FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

**Department Chair/Designee:**

Please indicate below the privileges/procedures and the number of FPPE cases to be done on the above-named practitioner, including the method of FPPE.

**Please print legibly.**

Privileges/Procedures to be Proctored	Number of FPPE Cases	Method of FPPE A. Direct B. Retrospective C. Reciprocal
Obstetrics Procedures, Core Privileges	3 Varied Cases	Chair to determine method of FPPE
Gynecology Procedures, Core Privileges	3 Varied Cases	Chair to determine method of FPPE
Gynecology Oncology Core Privileges	3 Varied Cases	Chair to determine method of FPPE
Maternal-Fetal Core Privileges	3 Varied Cases	Chair to determine method of FPPE
Female Pelvic Medicine & Reconstructive Surgery (Urogynecology) Core	3 Varied Cases	Chair to determine method of FPPE
Female Pelvic Medicine & Reconstructive Surgery – Advanced	2 varied cases	Chair to determine method of FPPE
Reproductive Endocrinology and Infertility - Core	3 Varied Cases	Chair to determine method of FPPE
Use of Laser Non-Core	1 <i>Varied Case</i>	Chair to determine method of FPPE
Outpatient Obstetrics & Gynecology Core	3 Varied Cases	Chair to determine method of FPPE
Surgical Robotic Platform	2 cases	A
For Family Medicine Providers: OB Core Privileges	5 varied cases	Chair to determine method of FPPE
Moderate Sedation	1 Case	Direct

**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_  
 (Last, First, Initial)

- Initial Appointment
- Reappointment

Effective: \_\_\_\_\_  
 (From — To) (MSO Only)

**Applicant:** CHECK (✓) the "Requested" box for each privilege you are qualified to request and SIGN and DATE this form as indicated. Applicants may be requested to provide documentation of the number and types of hospital cases during the past 24 months. Applicants have the burden of producing information deemed adequate by RCRMC for a proper evaluation of current competence and other qualifications, and for resolving any doubts.

Privileges may only be exercised at the site(s) and/or setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document.

**QUALIFICATIONS FOR CORE  
 PEDIATRIC CRITICAL CARE MEDICINE PRIVILEGES**

**PEDIATRIC CRITICAL CARE MEDICINE PRIVILEGES**

**Criteria:** To be eligible to apply for core privileges in pediatric critical care medicine, the applicant must meet the membership requirements of Riverside County Regional Medical Center and the following privileging criteria:

- Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited postgraduate training in pediatrics plus an accredited postgraduate training in critical care medicine.

**AND**

- Current certification or active participation in the examination process leading to certification in pediatric critical care medicine by the American Board of Pediatrics or the American Osteopathic Board of Pediatrics (Intensive Care).

**AND**

- Must be paneled by or in process of paneling by California Children's Services (CCS).

**Required Previous Experience:** An applicant for initial appointment must be able to demonstrate:

- Performance of inpatient admissions and provide care to at least 24 pediatric critical care patients, in the privileges requested, during the past 12 months.

**OR**

- Demonstrate successful completion of a hospital-affiliated accredited residency or special clinical fellowship or research within the past 12 months.

**Reappointment Requirements:** To be eligible to renew core privileges in pediatric critical care medicine, the applicant must meet the following maintenance of privilege criteria:

- Current demonstrated competence and an adequate volume of experience, at least 12 pediatric critical care patients with acceptable results in the privileges requested for the past 24 months based on results of ongoing professional practice evaluation and outcomes.

**AND**

- Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

**AND**

- Meet the Continuing Medical Education (CME) requirement necessary for licensure by the applicable California medical board (the Medical Board of California or the Osteopathic Medical Board of California). Submit copies of CME certificates.

**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective: \_\_\_\_\_

(From – To) (MSO Only)

**Description of Core Privilege** **Requested Pediatric Critical Care Medicine Core Privileges**

Critical care management of life-threatening organ system failure from any cause in children from the term or near-term neonate to the adolescent, and support of vital physiological functions. Privileges include admit, evaluate, diagnose, treat and provide consultation, performance of medical history and physical exam, and assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

**QUALIFICATIONS FOR  
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 previous experience, and maintenance of clinical competence.

**PARTICIPATE IN TEACHING PROGRAM**

**Supervision:** Supervision is an intervention provided by a supervising practitioner to a resident physician. This relationship is evaluative, extends over time, and has the simultaneous purposes of enhancing the professional functions of the resident while monitoring the quality of professional services delivered. Supervision is exercised through observation, consultation, directing the learning of the residents, and role modeling. (Note: This definition is adapted from Bernard J.M., & Goodyear, R.K., *Fundamentals of Clinical Supervision*, 2<sup>nd</sup> Ed., Needham Heights, MA: Allyn & Bacon 1998.)

**Criteria:** To be eligible to participate in the teaching program, the applicant must:

- Be credentialed and privileged at RCRM in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when residents are involved in the care of these patients.

**Maintenance of Privilege:**

- Enhance the knowledge of the residents and ensure the quality of care delivered to each patient by any resident. This is exercised by observation, consultation, and direction to the resident.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the resident's evaluation process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the resident being supervised.
- Within 24 hours of a patient's admission or transfer (including weekends and holidays), shall personally examine the patient, establish a personal and identifiable relationship with the patient, and record an appropriate history, physical examination, working diagnostic impression(s) and plan for treatment. The attending shall countersign and add an addendum to the resident's note detailing his/her involvement and supervision.

**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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(From – To) (MSO Only)

- Ensure that discharge or transfer of the patient from an inpatient team or clinic is appropriate, based on the specific circumstances of the patient's diagnoses and therapeutic regimen.
- Meet with each patient who received consultation by a resident and perform a personal evaluation in a timely manner based on the patient's condition, unless otherwise stated in the graduated levels of responsibility.
- Shall be immediately available to the resident in person or by telephone and able to be present within a reasonable period of time, 30 minutes, if needed.
- Available for supervision during clinic hours and ensure the coordination of care that is provided to the patients.
- Provide an appropriate level of supervision during the performance of procedures. (Determination of this level of supervision is generally left to the discretion of the attending physician within the content of the previously described levels of responsibility assigned to the individual resident involved. This determination is a function of the experience and competence of the resident and the complexity of the specific case.)
- Documentation of resident supervision will be monitored during the course of peer review. Any case reviewed in which it appears that there is inadequate supervision will be forwarded to the Professional Practice Evaluation Committee.

## Description of Non-Core Privilege

 **Requested Participate in Teaching Program****SUPERVISE ALLIED HEALTH PROFESSIONALS**

**Supervision:** The supervising employing/alternate supervising physician provides general supervision of the activities and services of the allied health professional. The supervising physician provides supervision and direction on any specific patient. The AHP is not allowed to perform any clinical activity/procedure that is not within the clinical privileges of the supervising physician. The supervising physician must be immediately available by electronic communication or on hospital premises for consultation/direction of the AHP.

**Criteria:** To be eligible to supervise allied health professionals, the applicant must:

- Be credentialed and privileged at RCRMC in accordance with applicable requirements.
- Provide care and supervision only for those clinical activities for which they are privileged.
- Be responsible for and must be personally involved in the care provided to individual patients in the inpatient and outpatient settings and must continue to maintain this personal involvement when AHPs are involved in the care of these patients.

**Maintenance of Privilege:**

- Ensure the quality of care delivered to each patient by any allied health professional. This is exercised by observation, consultation, and direction to the AHP.
- Assure that medical care for each patient is delivered in an appropriate, timely, and effective manner.
- Participate in the AHP's competency assessment process according to accrediting and certifying body requirements.
- Direct the care of the patient and provide the appropriate level of supervision based on the nature of the patient's condition, the likelihood of major changes in the management plan, the complexity of care, and the experience and judgment of the AHP being supervised.
- Assume responsibility for supervision or monitoring of the practice as stated in the appropriate hospital or medical staff policy governing AHPs.
- Be continuously available or provide an alternate to provide consultation when requested and to intervene when necessary.
- Assume total responsibility for the care of any patient when requested by the AHP or in the interest of patient care.



**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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- Co-sign all orders entered by the AHP on the medical record of all patients seen or treated by the AHP in accordance with applicable requirements.

Description of Non-Core Privilege

**Requested Supervision of Allied Health Professionals**

**BRONCHOSCOPY, NON-CORE**

**Criteria:** Successful completion of an accredited residency which included training in bronchoscopy, or the applicant must have completed hands-on training in bronchoscopy under the supervision of a qualified physician preceptor.

**Required Previous Experience:** Demonstrated current competence and evidence of the performance of at least three (3) bronchoscopy procedures in the past 12 months.

**Maintenance of Privilege:** Demonstrated current competence and evidence of the performance of at least three (3) bronchoscopy procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Description of Non-Core Privilege

**Requested Bronchoscopy**

**CLINICAL ETHICS CONSULTATION**

**CRITERIA:** To be eligible to provide clinical ethics consultations the initial applicant must meet the following privilege criteria:

1. Have received specific training in clinical ethics consultation either from:
  - a. Fellowship training program
  - b. Graduate degree program in medical ethics or bioethics
  - c. Extensive experience in clinical ethics consultations
2. Be recommended as competent in the practice of clinical ethics consultations by the Chair of the Ethics Committee.

**MAINTENANCE OF PRIVILEGE:**

1. Demonstrated knowledge of 2 clinical ethic consultations within 24 months
2. Be recommended as competent in the practice of clinical ethics consultations by the Chair of the Ethics Committee.

Description of Core Privilege

**Requested Clinical Ethics Consultation**  
 **Approved**  
 **Not Approved\***

**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective: \_\_\_\_\_  
(From – To) (MSO Only)

**PROCEDURE LIST: This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.**

**To the applicant:** If you wish to **exclude** any procedures, please strike through those procedures which you do not wish to request, initial, and date.

**Pediatric Critical Care Core Privileges:**

1. Evaluation and management of life-threatening disorders or injuries in intensive care units including but not limited to shock, coma and elevated ICP, seizures, infections acute and chronic renal failure, acute endocrine electrolyte emergencies including DKA, non-kenotic hyperosmolar coma, thyrotoxicosis, SIADH, DI, adrenal insufficiency, systemic sepsis, heart failure, trauma, acute and chronic respiratory failure, drug overdoses, massive bleeding, CNS dysfunction including cerebral resuscitation, diabetic acidosis and kidney failure
2. Airway maintenance intubation
3. Arterial puncture
4. Arterial and venous cut-downs
5. Basic and advanced cardiopulmonary resuscitation
6. Calculation of oxygen content, intrapulmonary shunt and alveolar arterial gradients
7. Cardiac output determinations by thermodilution and other techniques
8. Cardioversion
9. Establishment and maintenance of open airway in nonintubated, unconscious, paralyzed patients
10. Evaluation of oliguria
11. Hyperalimentation
12. Insertion and management of chest tubes
13. Insertion of central venous, arterial and pulmonary artery balloon flotation catheters
14. Interpretation of antibiotic levels and sensitivities
15. Laryngoscopy, direct
16. Lumbar puncture
17. Maintenance of circulation with arterial puncture and blood sampling
18. Management of anaphylaxis and acute allergic reactions
19. Management of massive transfusions
20. Management of pneumothorax (needle insertion and drainage systems)
21. Management of the immunosuppressed patient
22. Management of renal and hepatic failure, poisoning
23. Moderate and Deep Sedation
24. Monitoring and assessment of metabolism and nutrition
25. PICC line placement
26. Percutaneous needle aspiration
27. Pericardiocentesis or tube placement
28. Pharmacokinetics
29. Suprapubic tap
30. Thoracentesis
31. Use of reservoir masks and continuous positive airway pressure masks for delivery of supplemental oxygen, humidifiers, nebulizers, and incentive spirometry
32. Vasoactive Drug Drip
33. Ventilator management, including experience with various modes
34. VP Shunt Tap

RIVERSIDE COUNTY REGIONAL MEDICAL CENTER  
**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective: \_\_\_\_\_  
(From – To) (MSO Only)

**ACKNOWLEDGMENT OF PRACTITIONER**

I have requested only those privileges which by education, training, current experience, and demonstrated performance that I am qualified to perform and wish to exercise at Riverside County Regional Medical Center.

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.

\_\_\_\_\_  
**Practitioner Signature**

\_\_\_\_\_  
**Date**

**DEPARTMENT CHAIR / DESIGNEE RECOMMENDATION**

I have reviewed the requested clinical privileges and supporting documentation and make the follow recommendation:

- Recommend all requested privileges.
- Recommend privileges with conditions/modifications as noted below.
- Do not recommend the requested privileges as noted below.

Privilege	Condition / Modification / Explanation

\_\_\_\_\_  
**Department Chair/Designee Signature**

\_\_\_\_\_  
**Date**

RIVERSIDE COUNTY REGIONAL MEDICAL CENTER  
**PEDIATRIC CRITICAL CARE MEDICINE CLINICAL PRIVILEGES**

Name: \_\_\_\_\_

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Effective: \_\_\_\_\_  
(From – To) (MSO Only)

**FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)**

Mechanism that may be used to confirm competency of new applicants and/or privileges or to address potential competency issues referred from Ongoing Professional Practice Evaluation (OPPE).

**Department Chair/Designee:**

Indicate below the privileges/procedures and the number of FPPE cases to be done on the above-named practitioner, including the method of FPPE.

**Please print legibly.**

Privileges/Procedures to be Proctored	Number of Cases to be Proctored*	Method of FPPE A. Concurrent B. Retrospective C. Reciprocal
Critical Care Medicine, Core Privileges	Five (5) Varied Cases	
Critical Care Medicine, Core Procedures	Five (5) Varied Procedures	
Bronchoscopy, Non-Core Privileges	Two (2) Cases	

**\*Indicate N/A if privilege not requested.**