

Name: _____

Date: _____

Privilege/Operative Procedure	Check (√) if Requested	Chair Approval Initial if Yes Write Not Approved if No
Category II: to be eligible for Category II privileges, applicants must have completed an ACGME approved Emergency Medicine residency program, <i>be Board Certified or a candidate for Board Certification</i> , and provide documentation as to course work and recent experience. Category II privileges are as follows:		
Category III: to be eligible for Category III privileges, applicants must have completed an ACGME approved Emergency Medicine residency program, <i>be Board Certified or a candidate for Board Certification</i> , and completion of the appropriate fellowship. Category III privileges are as follows:		
Category IV: Special/Cross Disciplinary Procedures:		
Moderate (Conscious) Sedation - Criteria for Approval: 1. Proof of Current BCLS certification (please attach); 2. Completion of age-appropriate basic airway management in-service by the UMMC Department of Anesthesia (and every two years thereafter for reappointment). <i>(Physicians board certified in Anesthesiology, Critical Care Medicine, Emergency Medicine, Neonatology, or Oral & Maxillofacial Surgery are not required to fulfill Criteria 2.)</i>		
Laser Privileges (separate application required)		
Carbon Dioxide		
Argon		
Nd-Yag		
Other: _____		
Ultrasound Procedures (please list)		

Applicant's Signature

Date

Brian Browne, MD, Clinical Chief of Emergency Medicine

Date

Applicant's Confirming Signature
(required if any requested privilege is not approved)

Date