

TEMPORARY PRIVILEGES**MS 123**

Manual	Medical Staff	<i>Effective Date</i>	01/2002
Policy #	MS 123	<i>Next Review</i>	4/30/2023
<i>Responsible Person:</i> Director, Medical Staff Administration			

PURPOSE

To define the steps for uniformly processing requests for temporary privileges for a licensed independent practitioner.

To assure that the granting of the temporary privileges is based on the meaningful review of the individual's qualifications and current competence.

To assure that temporary privileges are only utilized when clinically appropriate.

POLICY

Temporary clinical privileges may be granted by the Governing Body or delegate for a limited period of time on the recommendation of the Section Chief, Department Chair, or Chief of Staff or designee.

A Non-Medical Staff practitioner must request privileges from the Department Chair of their specialty, who will determine both the appropriateness of issuing temporary privileges and the professional competency of the requesting physician.

The Department Chair, or their designee must then notify Medical Staff Administration (or Administrator-on-call during off-hours) of their decision to recommend temporary privileges.

PROCEDURE**Temporary Privileges Pending Appointment**

Once an applicant's file is complete and has been signed off by the Department Chair, the practitioner is eligible for temporary privileges pending appointment.

Temporary Privileges Requested to Fulfill an Important Patient Care Need – during Business Hours (7 a.m. – 3 p.m.)

1. The practitioner requesting temporary privileges should contact the appropriate Department Chair or designee to evaluate the request. Upon approval by the Department

Chair, Medical Staff Administration will forward the Temporary Privilege Application to the practitioners for completion and signature.

2. Upon receipt of the completed and signed application, Medical Staff Administration will begin primary source verification on the following credentials:
 - Current license
 - Current DEA
 - Current professional liability coverage
 - Reference from a facility where the practitioner holds active medical staff privileges
 - Reference from a colleague who is familiar with their work
 - NPDB Query/OIG/GSA
3. After completing primary source verification, Medical Staff Administration will forward the temporary privilege application to the Department Chair, or their designee for their recommendation and signature.
4. Upon receipt of the signed favorable recommendation of the Department Chair, Medical Staff Administration will obtain the approval of the Governing Body delegate; the practitioner and Department will be advised of the approval; and the appropriate computer databases and the intranet privilege site will be updated.

Temporary Privileges Requested to Fulfill an Important Patient Care Need During Non-Business Hours (3 p.m. – 7 a.m.; weekends, holidays)

1. Temporary privileges will only be granted during non-business hours if there is no one on the medical staff available who is qualified and credentialed to provide the required specialty services. A current member of the medical staff should be contacted to treat the patient.
2. If a required medical staff member with appropriate privileges is not available, the following process should be followed for obtaining privileges to fulfill an important patient care need:
 - a. The physician requesting temporary privileges must contact the appropriate Department Chair or Chief of Staff, or their designee to evaluate the request.
 - b. The Department Chair or Chief of Staff or their designee will notify the Administrator-on-call via the Nursing Supervisor of the request for temporary privileges.
 - c. The Administrator-on-call will make a determination with regard to the request; will verify current licensure, either by checking on line at <http://www.medbd.ca.gov/>, or by requesting that the nursing office verify the information, and will also obtain the following additional credentialing information:

1. the name and phone number of the physician being granted temporary privileges;
 2. the practitioner's license number
 3. the practitioner's DEA number;
 4. the professional liability carrier name and policy number;
 5. the name of the patient being treated; and
 6. the procedure/treatment to be performed
- d. The Administrator-on-call or their designee will notify Medical Staff Administration (via Voice-Net or FAX) that temporary privileges have been requested by the Department Chair or Chief of Staff, or their designee and are being granted.
 - e. The Administrator-on-call, will notify Admissions and/or the Operating Room that temporary privileges have been granted. Units within the house that have questions should contact Admissions.
 - f. Medical Staff Administration will follow-up the next business day to assure all appropriate documentation is on file.
3. These temporary privileges will be valid for no longer than 5 days from the initial approval date to allow time for Medical Staff Administration to complete the primary source verification and to obtain the appropriate recommendation and signature. If no concerns are noted, the temporary privileges will be extended for an additional 25 days.

APPROVAL

Medical Staff Executive Committee reviewed with no revisions: 4/25/2020
Governing Body approved with no revisions: 4/30/2020