

## Department of Medicine-Hematology/Medical Oncology

**CAT 1 Basic Privileges: Patient management, including H & Ps and diagnostic and therapeutic treatments, procedures and interventions encompassing the areas described below and similar activities.**

Requiring a level of training generally associated with persons who have completed the residency program prescribed by the American Board of Internal Medicine, and a level of skill and ability generally associated with persons who are diplomates of that board.

- A Basic privileges in general medicine**
- B Thoracocentesis**
- C Abdominal paracentesis**
- D Bone marrow aspiration**
- E Bone marrow biopsy**
- F Liver biopsy**
- G Sigmoidoscopy, proctoscopy with biopsy**
- H Aspiration of joints & subcutaneous lesions**
- I Lumbar puncture**
- J Arterial puncture**
- K Skin Biopsy**
- L Central Line Placement & Removal**

Criteria: Documented Completion of the Central Venous Catheter Procedure Education and Training Module AND Documentation of at least one of the following: 1. Board Eligibility/Board Certification in specialties that include CVC Insertion and/or removal procedure as part of the basic delineated competencies (ie. Anesthesia, Cardiology, Emergency Medicine, General Surgery, Interventional Radiology and Nephrology). 2. Completion of one-month experience/rotation in Interventional Radiology. 3. Attestation or certification by Service Chief or Program Directors. 4. Documented supervised insertion procedures (5 internal jugular, 5 femoral, 5 PICC, 5 subclavian). Documented supervised removal procedures (2 non-tunneled lines)

**M Muscle Biopsy**

**CAT 2 Subspecialty Privileges: Patient management at this level encompasses Category 1 patient management, the items marked below and similar activities.**

Requiring a level of training generally associated with person who are Diplomates of the American Board of Internal Medicine and of the subspecialty board(s) designated below.

- A Hematology**
  - 1 Basic privileges in hematology**
  - 2 Bone marrow aspiration**

- 3 Bone marrow biopsy**
- 4 Bone marrow transplantation**
- 5 Plasmapheresis**
- A Medical Oncology**
- 1 Basic privileges in medical oncology**
- 2 Chemotherapy for malignant disease**
- 3 Bone marrow transplantation**
- 4 Bone marrow biopsy**
- 5 Bone marrow aspiration**
- 6 Care of young adults (over 18 years of age) with pediatric related cancers**

**CAT 3 Special Privileges**

- A Acupuncture**
- B Fluoroscopy**  
(CA State Certification required)
- C Provider performed microscopy (Annual competency module required)**  
Please circle the privilege(s) being requested
  - 1 Urine**
  - 2 KOH**
  - 3 Wet Prep**
  - 4 Fern**
  - 5 Pinworm**
- D Waived Point-of-Care Testing**  
Please circle the privilege(s) being requested
  - 1 IM Confirms® Urine Pregnancy Test**
  - 2 Urine Multistix® or Uristix®**
  - 3 pH testing using pH paper**
  - 4 Coloscreen®**
  - 5 Gastrocult®**
  - 6 Quickview Influenza**
  - 7 Signify Strep A**
  - 8 Binax Now ® RSV**
  - 9 OraQuick Advance ® Rapid HIV ½ Antibody**

**CAT 4 Limited Privileges in Medicine: Patient management limited to the areas specified**

- A Podiatric practice only (Parnassus only)**
- B Clinical psychology only**

**C Metabolic privileges only**

**D Consultation only**

**E EKG reading only**

**ADMSE Admitting Services**

I expect to admit and care for patients under my own name on the following inpatient services:

**CD Cardiology**

**GM Medicine**

**CR Hematology/Oncology**

**MT MT GCRC (Requires GCRC Medical Director Approval)**

\_\_\_\_\_  
Signature of GCRC Medical Director

\_\_\_\_\_  
**PRINT NAME - APPLICANT**

**SIGNATURE**

**DATE**

\_\_\_\_\_  
**PRINT NAME - PROCTOR / SUPERVISING PHYSICIAN**

**SIGNATURE - SUPERVISING PHYSICIAN**

**DATE**

\_\_\_\_\_  
**PRINT NAME - DEPARTMENT CHIEF**

**SIGNATURE - DEPARTMENT CHIEF**

**DATE**

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**PRINT NAME - DEPARTMENT CHAIR**

**SIGNATURE - DEPARTMENT CHAIR**

**DATE**