

Privileges for: Stroke Team

Request

- ST. ELIZABETH EDGEWOOD
- ST. ELIZABETH FLORENCE
- ST. ELIZABETH FT. THOMAS
- ST. ELIZABETH GRANT CO (Surgical & other invasive procedure requiring general anesthetic are not offered)

MEC Approval: April 26, 2012, Rev. February 27, 2014; Board Approval: June 4, 2012, Rev. May 5, 2014

DEPARTMENT APPROVAL

_____ Approved _____ Disapproved

Department/Section Chair Signature	Date
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MINIMUM REQUIREMENTS

Degree required: M.D., D.O.

Applicants must be able to demonstrate successful completion of an ACGME or AOA accredited residency training program in Emergency Medicine or Neurology.

Note: For Practitioners (excluding AHPs) who apply for membership after March 2, 2009 be and remain (with a lapse of no longer than one year) board certified in their principal practice specialty, or become and remain (with a lapse of no longer than one year) board certified within six years of completion of their post-graduate medical training. Only those boards recognized by the American Board of Medical Specialties or the American Osteopathic Association are acceptable. This board certification requirement does not apply to applicants who on March 2, 2009 were members in good standing on the medical staff of the St. Luke Hospitals or St. Elizabeth Medical Center.

PRIVILEGES REQUESTED

I. CORE PRIVILEGES: Core privileges as a Stroke Team member include the care, treatment or services listed immediately below. I specifically acknowledge that board certification alone does not necessarily qualify me to perform all core privileges or assure competence in all clinical areas. By signing this request, I believe that my specific training, experience and current competence qualifies me to perform each privilege that I have requested by checking in the spaces below.

DESCRIPTION OF CORE PRIVILEGES

_____ Evaluate patients who have suffered a stroke in consultation with an Emergency Medicine or other referring physician. Recommend and administer treatment of stroke patients including tPA and other treatment and drug administration appropriate for stroke care.

_____ Telestroke privileges (Grant County) - reading and interpretation of any diagnostic imaging study that can be sent over a telemedicine link such as CT scans, ultrasound, plain films, MRIs, x-rays and nuclear medicine

Applicants Signature: _____ Date: _____