

LIST OF CLINICAL PRIVILEGES – PEDIATRIC NURSE PRACTITIONER (PNP)

AUTHORITY: Title 10, U.S.C. Chapter 55, Sections 1094 and 1102.

PRINCIPAL PURPOSE: To define the scope and limits of practice for individual providers. Privileges are based on evaluation of the individual's credentials and performance.

ROUTINE USE: Information on this form may be released to government boards or agencies, or to professional societies or organizations, if needed to license or monitor professional standards of health care providers. It may also be released to civilian medical institutions or organizations where the provider is applying for staff privileges during or after separating from military service.

DISCLOSURE IS VOLUNTARY: However, failure to provide information may result in the limitation or termination of clinical privileges

INSTRUCTIONS

APPLICANT: In Part I, enter Code 1, 2, or 4 in each REQUESTED block for every privilege listed. This is to reflect your current capability. Sign and date the form and forward to your Clinical Supervisor

CLINICAL SUPERVISOR: In Part I, using the facility master privileges list, enter Code 1, 2, 3, or 4 in each VERIFIED block in answer to each requested privilege. In Part II, check appropriate block either to recommend approval, to recommend approval with modification, or to recommend disapproval. Sign and date the form and forward the form to the Credentials Office.

CODES: 1. Fully competent within defined scope of practice.

2. Supervision required. (Unlicensed/uncertified or lacks current relevant clinical experience.)

3. Not approved due to lack of facility support. (Reference local facility privilege list. Use of this code is reserved for the Credentials Committee/Function.)

4. Not requested/not approved due to lack of expertise or proficiency, or due to physical disability or limitation.

CHANGES: Any change to a verified/approved privileges list must be made in accordance with Service specific credentialing and privileging policy.

NAME OF APPLICANT:

NAME OF MEDICAL FACILITY:

ADDRESS:

I Scope		Requested	Verified
P387255	The scope of privileges for a pediatric nurse practitioner includes the evaluation, diagnosis, treatment, and consultation for patients from birth to young adulthood. PNPs provide a wide range of health care services, to include patient education on health promotion, injury and disease prevention, and management of acute and chronic illness.		
Diagnosis and Management (D&M)		Requested	Verified
P387263	Neonatal and pediatric interfacility transport		
P385998	Prescribe medications in accordance with Military Treatment Facility (MTF) Pharmacy and Therapeutics (P&T) policy		
P388341	Pulmonary function testing and interpretation		
P391984	Electrocardiogram (EKG) preliminary interpretation		
Procedures		Requested	Verified
P387317	Topical and local infiltration anesthesia		
P387323	Peripheral nerve block anesthesia		
P388406	Moderate sedation		
P388359	Lumbar puncture		
P388380	Arthrocentesis		
P388382	Joint injection		
P387759	Incision and drainage of cysts and minor abscesses		
P388376	Complete/partial nail removal with or without destruction of nail matrix		
P386389	Diaphragm fitting		
P385365	Intrauterine device insertion/removal		
P385367	Subcutaneous contraceptive rod insertion/removal		
P388882	Repair of simple laceration		
	Skin biopsies:	Requested	Verified
P388391	Punch biopsy		
P388393	Shave biopsy		
P388395	Excisional biopsy		

LIST OF CLINICAL PRIVILEGES – PEDIATRIC NURSE PRACTITIONER (CONTINUED)

Other (Facility- or provider-specific privileges only):		Requested	Verified
SIGNATURE OF APPLICANT		DATE	

II CLINICAL SUPERVISOR'S RECOMMENDATION

RECOMMEND APPROVAL

RECOMMEND APPROVAL WITH MODIFICATION
(Specify below)

RECOMMEND DISAPPROVAL
(Specify below)

STATEMENT:

CLINICAL SUPERVISOR SIGNATURE

CLINICAL SUPERVISOR PRINTED NAME OR STAMP

DATE