

LIST OF CLINICAL PRIVILEGES – GENERAL MEDICAL OFFICER

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 the Air Force.

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, or 4 in 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. (Uncensored/uncertified or lacks current relevant clinical experience.

3. Not approved due to lack of facility support. (Reference facility master Strawman. Use of this code is reserved for the Credentials 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

I Scope		Requested	Verified
P387409	The scope of privileges for a General Medical Officer (GMO) includes the assessment, evaluation, diagnosis, and treatment of outpatients with uncomplicated and/or minor illnesses, diseases, injuries, and functional disorders. Physicians assess, stabilize, and determine disposition of patients in environments ranging from austere to fixed facilities in accordance with Service and MTF medical staff policies. The GMO will manage conditions consistent with training and will refer complex patients beyond the level of training to specialty medical care.		
Diagnosis and Management (D&M)		Requested	Verified
P387413	Pulmonary spirometry testing and interpretation		
P388591	Tympanometry		
P388659	Care for pediatric patients from 2 to 16 years of age		
P388661	Provide basic burn care		
P388663	Perform Pap smears		
P388665	Pre and Post-travel health counseling and care		
P391984	Electrocardiogram (EKG) preliminary interpretation		
D & M Advanced Privileges (Requires Additional Training):		Requested	Verified
P387425	Care for pediatric patients under 2 years of age		
P387428	Traumatic brain injury (TBI) prevention, diagnosis, triage and care		
P387430	Primary behavioral/mental health care for uncomplicated conditions		
P387432	GYN problems to include treatment of minor infections and sexually transmitted diseases (STDs)		
P387436	Recognition, early management and referral of 1st trimester pregnancy and its complications		
Procedures		Requested	Verified
P387438	Perform peripheral arterial puncture for arterial blood gas (ABG) analysis		
P387444	Repair of cutaneous lacerations - multiple layers not involving tendons or nerves		
P387317	Topical and local infiltration anesthesia		
P387323	Peripheral nerve block anesthesia		
P387759	Incision and drainage of cysts and minor abscesses		
P388483	Thrombosed hemorrhoid incision and drainage (I&D)		
P388376	Complete/partial nail removal with or without destruction of nail matrix		
P388667	Splint and/or immobilize extremities		
P388500	Reduction of simple closed fractures and dislocations		

LIST OF CLINICAL PRIVILEGES – GENERAL MEDICAL OFFICER (CONTINUED)

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