**BASIC EDUCATION:** M.D. or D.O.

**MINIMAL FORMAL TRAINING:**
Successful completion of a post-graduate residency program in Pathology approved by the ACGME. Membership or eligibility for the American Board of Pathology is also required.

**BOARD CERTIFICATION:**
Those applicants who are not board certified at the time of application but who have completed their residency or fellowship training within the last five years shall be eligible for Medical Staff appointment. However, in order to remain eligible, those applicants must achieve board certification in their primary area of practice within five (5) years from the date of completion of their residency or fellowship training.

**REQUIRED PREVIOUS EXPERIENCE:** The applicant must have actively practiced Pathology at least 18 of the last 24 months, and have actively practiced in an accredited hospital at least two of the past five years.

**Core Privileges in Pathology**
Privileges include surgical, autopsy and clinical pathology and require (i.e., providing documentation of fulfilling) clinical competency indicators as follow. Physicians requesting special privileges may specify the privileges requested

Please select which facility you are requesting privileges at:

|   | 1 – Renown Regional Medical Center | 2 – Renown South Meadows Medical Center | 3 – Renown Rehabilitation Hospital N-A |

To request privileges at those facilities please place an “X” in the appropriate column below

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<tr>
<td>SPECIAL REQUESTS: Some of these procedures require additional documentation</td>
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<tr>
<td><strong>Autopsy (89.8)</strong></td>
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<tr>
<td>1. Board certification or eligibility in Anatomical Pathology.</td>
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<tr>
<td>2. Demonstration of two cases, which will be reviewed by the Department Chief or met the surgical pathology requirements.</td>
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<td><strong>Surgical Anatomic Pathology (50.SP)</strong></td>
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<td>1. Board certification or eligibility in Anatomical Pathology.</td>
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<tr>
<td>2. Demonstration of 100 cases, which will be reviewed by the Department Chief or meet the autopsy requirements.</td>
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<td><strong>Clinical Pathology (CL.PA)</strong></td>
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<td>1. Board certification or eligibility in Clinical Pathology.</td>
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<tr>
<td><strong>Bone Marrow Aspiration/Biopsy (41.31)</strong></td>
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<td>1. Board certification or eligibility in Anatomical and/or Clinical Pathology.</td>
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<tr>
<td>2. Must be mentored by an active staff Pathologist with the privilege for the first two cases.</td>
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<tr>
<td><strong>Fine Needle Aspiration Cytology (XX.XX)</strong></td>
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</table>
**Frozen Sections (50.FS)**

1. Board certification or eligibility in Anatomical Pathology.
2. Be mentored by an active staff Pathologist with the privilege for the first two cases.

**MODERATE SEDATION**

**Moderate Sedation Privileges**

A. **Member Competence for Privileges**

Members other than Anesthesiologists, Trauma surgeons, Pulmonologists, Intensivist, Emergency Medicine, Pediatric Intensivist, Neonatologists, Otolaryngologists, Cardiologists and Gastroenterologists, seeking to direct moderate sedation for procedures performed at the Hospital must be privileged according to the following criteria:

**Moderate Sedation.** Any active or Associate Member of the Medical Staff may apply for moderate sedation privileges as follows:

a. **Initial Privileges.** The Member must submit a written request for moderate sedation privileges to the Medical Staff Services Office along with:

   (i) Completion of mandatory education materials and score of 80% on an examination that reviews the applicable pharmacology, adverse effects, administration, dosage and emergency interventions for the sedative(s) used at least once every two (2) years; and

   (ii) Maintenance of current ACLS certification. If the Member does not maintain current ACLS certification, then an individual certified in ACLS must be present every time the Member exercises his or her moderate sedation privileges.

b. **Reappointment Privileges.** The Member must submit a Request for moderate sedation privileges to the Medical Staff Services Office along with:

   (i) Completion of mandatory education materials and 80% on an examination that reviews the applicable pharmacology, adverse effects, administration, dosage and emergency interventions for the sedative(s) used;

   (ii) Maintenance of current ACLS certification.

**If the Member does not maintain current ACLS** certification, and then an individual certified in ACLS must be present every time the Member exercises his or her moderate sedation privileges.
ELEVATION TO ACTIVE AND REAPPOINTMENT/CURRENT CLINICAL COMPETENCE

Volume Requirements
1. Autopsies (coroner and/or hospital) 20 autopsies or meet the volume requirements for surgical pathology.
2. Surgical pathology specimens (inpatient and/or outpatient): 200 with at least 150 from inpatient or meet the criteria for autopsies
3. Two (2) Bone Marrow microscopic, (This is a special request privilege).
4. Ten (10) frozen sections. (This is a special request privilege)
5. Currently practicing clinical consultations and review.

Quality Indicators
1. Unjustified frozen section discrepancies.
2. Errors found on daily review.
3. Any cases not completed at RRMC will undergo review by the Department.

Other Review Items
As aggregated by Medical Staff Services for Department Chief review.

Procedure
The Department Chief, with the aid of the department staff, will maintain a list of the indicators mentioned above for each pathologist. At reappointment, the information will be reviewed by the Department Chief and forwarded to Medical Staff Services for the physician’s confidential profile.

__________________________________   __________________
Applicant Signature                                                                         Date

__________________________________   __________________
Applicant Printed Name                                                                  Date

__________________________________   __________________
Section Chief, Department of Pathology                                                             Date

__________________________________   __________________
Department Chief, Internal Medicine                                                            Date

Date of Recommendation by the Credentials & Privileges Committee:  __________
Date of Recommendation by the Executive Committee:                           __________
Date of Approval by the Board of Governors:                                             __________

South Meadows :

__________________________________   __________________
Department Chief, Internal Medicine                                                            Date

Date of Recommendation by the Executive Committee:                           __________
Date of Approval by the Board of Governors:                                             __________