

**Delineation of Privileges Request  
Criteria Summary Sheet**

**Facility: UPMC Horizon**

**Specialty: CRITICAL CARE MEDICINE**

<b>KNOWLEDGE</b>	Successful Completion of an ACGME/AOA, accredited program												
<b>TRAINING</b>	The successful completion of an approved (ACGME/AOA) post graduate residency program												
<b>CERTIFICATION</b>	Board Certification per Policy on Appointment, Reappointment, and Clinical Privileges of UPMC Horizon.												
<b>OTHER</b>	<ul style="list-style-type: none"> <li>▪ The applicant must provide documentation of his/her training and experience from the director of the residency and/or fellowship program.</li> </ul> <p style="text-align: center;"><b>Special Request Privileges</b></p> <p>In order for these requests to be granted, the applicant must provide documentation of specialized or fellowship training and documentation of satisfactory performance of the procedure. Documentation may be in the form of continuing medical education, a letter from a training program director and/or documentation of clinical experience.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;"><b>Privilege</b></th> <th style="text-align: right;"><b>Suggested Level of Activity for granting initial privileges</b></th> </tr> </thead> <tbody> <tr> <td>▪ Direct Laryngoscopy</td> <td style="text-align: right;">25</td> </tr> <tr> <td>▪ Signaled averaged EKG interpretation</td> <td style="text-align: right;">50</td> </tr> <tr> <td>▪ Insertion of Chest Tube</td> <td style="text-align: right;">5</td> </tr> <tr> <td>▪ Pericardiocentesis</td> <td style="text-align: right;">5</td> </tr> <tr> <td>▪ Conscious Sedation</td> <td style="text-align: right;">5 (in last 12 months)</td> </tr> </tbody> </table>	<b>Privilege</b>	<b>Suggested Level of Activity for granting initial privileges</b>	▪ Direct Laryngoscopy	25	▪ Signaled averaged EKG interpretation	50	▪ Insertion of Chest Tube	5	▪ Pericardiocentesis	5	▪ Conscious Sedation	5 (in last 12 months)
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