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EMERGENCY MEDICINE 2013

Summary of Services and Availability (by location)

Each location has sufficient space, equipment, staffing and financial resources in place or available in sufficient time as required to support each requested privilege. On an ongoing basis, the organization consistently determines the resources necessary for each requested privilege related to the facility's scope of service.

Please review the following **Summary of Services and Availability by Location** prior to making your selections. If a facility is specifically identified below as <u>NOT</u> having a privilege/service available, you will <u>NOT</u> be considered for that privilege at that individual facility. Any request made that is identified as <u>not available</u> at an individual site will be considered Not Applicable for that site(s), and will be identified as such on your final approved Delineation of Privileges form.

Key

"x" means Privilege is Available at that location.

"C" means contractual arrangement restricts granting this privilege.

"N/A" means Privilege Not Available at that location.

Facility Codes:

USTM= UPMC St. Margaret

Privilege	USTM
Core Privileges	X
ADMISSION	
Admit to inpatient area	N/A
ANESTHESIA	
Sedation – Deep	X
CARDIAC STABILIZATION	
Electrical cardiac pacing transvenous	X
SURGICAL SPECIAL	
Hyperbaric oxygen therapy	N/A
Suprapubic bladder aspiration, with or without insertion of catheter	X
TRAUMA	
Ultrasound to detect cardiac activity, pericardial fluid, or free abdominal fluid (focused exam)	X
ULTRASOUND	
AAA	X
Cardiac	X
Pelvic ultrasound, with or without pregnancy	X
Renal	X
DVT	X

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Privilege	USTM
VASCULAR ACCESS	ı
Placement of indwelling arterial catheter	X
Arterial cutdown	X
SPECIAL PRIVILEGES	
Medical Command	X
Telemedicine	N/A

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