

# INTERNAL MEDICINE / INFECTIOUS DISEASES

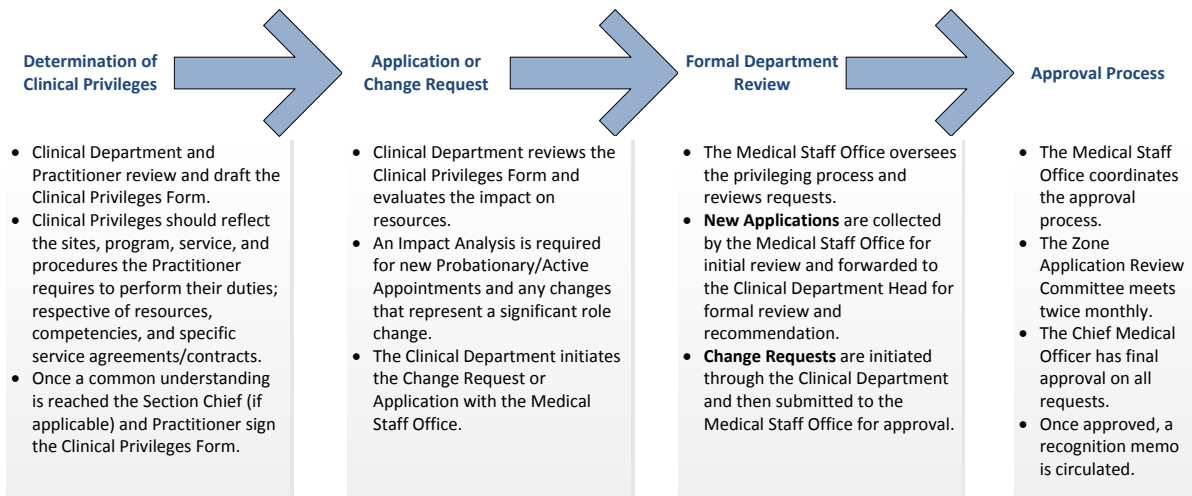
The granting of Clinical Privileges for Procedures for all Practitioners is made on the basis of each Practitioner's documented training, experience, demonstrated abilities and skill, and current competence, as well as the available AHS resources.  
(AHS Medical Staff Bylaws article 3.2.6.3)

Please review the procedures listed below and select privileges using the corresponding checkbox. Upon completion, please sign and date where indicated and submit with the Appointment Application Form or Change Request Form per the process summarized below.

Practitioner Signature	Practitioner Name	Date

**This Form cannot fulfill a request unless attached to a New Appointment Application or a Change Request Form.**

The following summarizes the document flow in the typical application and change processes.



### RECOMMENDATION

<b>Zone Clinical Department Head Signature</b>	Printed Name	Date
<b>Infectious Diseases Section Chief Signature</b>	Printed Name	Date

The personal information on this form is collected under the legal authority of section 33(c) of the Freedom of Information and Protection of Privacy Act. The information will be used by or disclosed for employment purposes. For questions, concerns or more information about the collection, use or disclosure of the personal information, please contact Information and Privacy at 1-877-476-9874 or by email at [privacy@albertahealthservices.ca](mailto:privacy@albertahealthservices.ca)

<u>Section</u> Select new, add, remove, or change then locum and/or primary if applicable	New	Add	Remove	Change	Locum	Primary
Infectious Diseases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Legend for Selecting Sites of Clinical Privileges for Infectious Diseases

INPATIENT HOSPITAL SERVICE	Primary Site (select 1 only)	OUTPATIENT CLINICS AND SERVICES IN HOSPITAL AND OTHER FACILITIES	Primary Site
FMC – Foothills Medical Centre	<input type="checkbox"/>	ALLURBAN – All Urban Care Centres	<input type="checkbox"/>
PLC – Peter Lougheed Centre	<input type="checkbox"/>	SAHIV – Southern Alberta HIV Clinic	<input type="checkbox"/>
RGH – Rockyview General Hospital	<input type="checkbox"/>	SMCHC – Sheldon M Chumir Health Centre	<input type="checkbox"/>
SHC – South Health Campus	<input type="checkbox"/>	TBCC – Tom Baker Cancer Centre	<input type="checkbox"/>
		TBCL – T.B Clinic	<input type="checkbox"/>

General Privileges	FMC	PLC	RGH	SHC	ALLURBAN	SAHIV	SMCHC	TBCC	TBCL	Exclusions
<b>Admitting</b> <i>Includes; assessment, evaluating, consulting, diagnosing &amp; treating</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
<b>Consultation</b> <i>Includes; conduct history and assessment for the purpose of making recommendations and implement management related to care and treatment.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Infectious Diseases Clinical Privileges	FMC	PLC	RGH	SHC	ALLURBAN	SAHIV	SMCHC	TBCL	TBCC	Exclusions
Acute and chronic infectious disease management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Administration and/or clinical direction of an antibiotic stewardship program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Administration and/or clinical direction of an infection prevention and control program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Complex wound care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Order of restricted antimicrobial and biological products (duration longer than 24 hrs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Punch biopsy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Infectious Diseases Privileges Requiring Additional Training/Experience/Skills	FMC	PLC	RGH	SHC	ALLURBAN	SAHIV	SMCHC	TBCL	TBCC	Exclusions
<b>Diagnostic aspiration and/or therapeutic injection of joints, bursae, tenosynovial structures, and enthuses</b> <i>Demonstrated combination of education, training and/or experience in conscious sedation to satisfy the ZCDH.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>High resolution anoscopy with biopsy (ADULT ID ONLY)</b> <i>Completion of American Society for Colposcopy and Cervical Pathology (ASCCP) high resolution anoscopy course, including the comprehensive colposcopy workshop.</i>							<input type="checkbox"/>			
<b>Paracentesis</b> <i>Demonstrated combination of education, training and/or experience in conscious sedation to satisfy the ZCDH.</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Note:** No recommendation on Clinical Privileges is meant to prevent any licensed Practitioner from performing any medical procedure on any person in an emergency situation where failure to perform that procedure may result in death or serious injury or harm to the person