Description of Service

Alberta Health Services (AHS) Medical Staff who are specialists in General Internal Medicine and have privileges in AHS facilities provide safe, high-quality care for patients across the Province. General Internal Medicine physicians diagnose and manage patients with common and emergency internal medicine conditions, and are able to do so when the individual has multiple conditions and with limited access to other subspecialists. General Internists provide comprehensive care of the adult patient in an integrated fashion as opposed to an organ-centred or disease-centred approach.¹

General Internal Medicine Privileges may include, but are not limited to, admitting, evaluating, diagnosing, treating, and providing consultation to adolescent and adult patients with common and complex illnesses, diseases, and functional disorders of the circulatory, reparatory, endocrine, metabolic, musculoskeletal, hematopoietic, gastroenteric, and genitourinary systems. General Internists may provide care to patients in the intensive care setting in conformance with unit policies.

For a full list of clinical privileges, please refer to the General Internal Medicine Clinical Privilege List on page 6.

Zone	Department(s) Section(s)		
South	Medicine Medicine		
Calgary	Internal Medicine General Internal Medicine		
Central	Internal Medicine	Internal Medicine	
Edmonton	nonton Medicine General Internal Me		
North	Hospital Health	Internal Medicine	

Zone Medical Staff Organization

¹ Royal College of Physicians and Surgeons of Canada – Objectives of Training in the Subspecialty of General Internal Medicine (2012)

College of Physicians and Surgeons of Alberta (CPSA) Requirements

The CPSA grants practice permits but the does not grant any additional practice approvals for specific procedures or specialties beyond those stated on the practice permit.

A practice permit from the CPSA does not guarantee that an individual will be granted for an AHS Medical Staff appointment or privileges. It is AHS's role and responsibility to screen and evaluate the qualifications of Practitioners in relation to the specific procedures and patient care services they will be providing at specific sites before granting an appointment and clinical privileges.

Physicians with expertise in a particular area of practice may require a CPSA approval process separate from the CPSA licensure and AHS privileging process for specific services. These services typically fall into the non-invasive diagnostics group. Please refer to the CPSA website for a list of practice areas requiring approval

http://www.cpsa.ca/accreditation/physician-approvals/.

Minimum Education and Training Requirements

The "Minimum Education and Training Requirements" set out in the AHS List of Gastroenterology Clinical Privileges are as follows:

1. Appropriate licensure with the College of Physicians and Surgeons of Alberta,

AND

- 2. Credentials satisfactory to the Zone Clinical Department Head (ZCDH), Zone Application Review Committee (ZARC) and/or the Chief Medical Officer (CMO), including:
 - o Successful completion of a Royal College of Physicians and Surgeons of Canada (RCPSC) accredited residency program and fellowship in the RCPSC (FRCPC); OR
 - o Equivalent combination of education, training and experience satisfactory to the ZCDH, ZARC and/or CMO.

These are minimum requirements. The ZCDH, ZARC and/or the CMO may determine that additional education, training or experience is required. The ZCDH, ZARC and/or CMO may also determine that an individual has developed competency in a particular area, without having completed a fellowship in that area, through an equivalent combination of education, training and experience. In addition to the minimum requirements listed above, additional education, training, experience and certification may be required to be granted certain clinical privileges.

General Internal Medicine Clinical Privilege List

These specifics are identified in the attached clinical privileges list.

Privileges Requiring Additional Education, Training and Experience

The list identifies privileges that require additional specialty training and documentation of evidence that the practitioner has received recognized postgraduate education, training or an appropriate level of experience to safely provide the service.

Clinical Privilege List and Medical Staff Bylaws

The AHS Medical Staff Bylaws state that the clinical privileges granted to a Practitioner define the diagnostic or therapeutic Procedures or other Patient care services a Practitioner is deemed competent to perform, the Facility(ies) and Zone(s) within which the Practitioner is eligible to provide care and services to Patients; and the specified AHS Programs and Professional services...that the Practitioner is eligible to access.²

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.³

Nothing in this document or the attached List of Clinical Privileges replaces the processes or requirements set out in the AHS Medical Staff Bylaws and Rules. This document and its attachments are intended to supplement and more fully describe the application of the AHS Bylaws and Rules in the context of General Internal Medicine Clinical Privileges.

The AHS Medical Staff Bylaws and Rules can be found on the AHS website at <u>http://www.albertahealthservices.ca/7086.asp.</u>

Interpretation of the Clinical Privilege List

The following list describes and reflects the categories/types of patient services included in the scope of General Internal Medicine privileges available to members of the AHS Medical Staff with the necessary and required education training and experience. When granted, General Internal Medicine privileges include the capability to perform the noted procedure using various techniques and approaches as appropriate for the patient, unless a specific technique or approach is specified. The Zone Clinical Department Head's recommendation regarding specifics of an individual's privileges and any associated techniques will be provided to ZARC and the CMO for their consideration.

² AHS Medical Staff Bylaws 3.0.2

³ AHS Medical Staff Rules 3.4.3(e)

General Internal Medicine Clinical Privilege List

The Medical Staff Rules define the minimum review period for the privilege list.⁴

Sites of Clinical Privileges

A delineation of the sites of clinical activity is a required component of clinical privileges (AHS Medical Staff Bylaws, 3.2.1(c) and 3.2.7).

Clinical privileges will reflect the site (or sites) where the Physician physically provides the clinical services. A Physician privileged in the specialty may have clinical privileges at multiple sites if they travel to multiple sites to provide clinical services as approved by the ZCDH, ZARC and/or the CMO. Privileges granted may only be exercised at the site(s) and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the privilege.

	Site A	Site B	Site C	Site D	Site E
Privilege 1					
Privilege 2					
Privilege 3					
Privilege 4					

The table above indicates what privileges are available at which sites:

- Privilege 1 is available at all sites
- Privilege 2 is available at sites A, C,D and E
- Privilege 3 is available at sites A and C
- Privilege 4 is available at sites B, D and E

Proctoring Requirements

The Zone Clinical Department Head may determine that a period of proctoring is required in certain situations. Proctoring can be defined as follows:

"The term *proctor* is often used to mean observe, supervise, mentor, monitor, or directly assess...*proctoring* reflects a process by which an individual is reviewed and evaluated over time to ensure competence, and proctor identifies the person performing the assessment." *The Medical Staff Handbook, A Guide to Joint Commission Standards, Second Edition.*

"Proctoring is a process of direct observation that allows for the focused evaluation of current physician competency in carrying out actual clinical care and takes both cognitive and procedural abilities into account. If the proctor observes potential or imminent patient harm

⁴ AHS Medical Staff Rules, 3.4.3(f)(ii)).

General Internal Medicine Clinical Privilege List

during the proctoring process, it may be ethically appropriate for him or her to intervene." *Proctoring and FPPE: Strategies for Verifying Physician Competence, Second Edition. Robert J. Marder, MD, CMSL, and Mark A. Smith, MD, MBA, CMSL.*

Clinical Privilege Lists

Gen	General Internal Medicine Privileges				
Gen	General Privileges				
	Admitting privilege (includes; assessment, evaluating, consulting, diagnosing, treating and surgical assistance)				
	Consultation privilege (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment)				
Clin	Clinical Privileges				
	Arterial puncture and blood sampling				
	Arthrocentesis and non-spinal joint injections				
	Bi-level Positive Airway Pressure (BiPAP)				
	Endotracheal intubation				
	Exercise/stress testing/persantine MIBI				
	Holter monitor interpretation				
	Insertion and management of central venous catheters				
	Insertion and management of arterial lines				
	Interpretation of electrocardiograms (ECG)				
	Invasive ventilator management				
	Lumbar puncture				
	Non-invasive ventilator management				
	Paracentesis				
	Parenteral and enteral nutrition				
	Punch biopsy				
	Temporary pacemaker insertion				
	Thoracentesis				

Privileges requiring additional education, training and experience: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.

Privileges requiring additional education, training and experience: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.

Privilege		Required additional education, training, and experience			
	Bone marrow biopsy	Post graduate training or equivalent in general internal medicine which included training in bone marrow biopsy and/or demonstrated training and experience to satisfy the ZCDH.			
	Chest tube insertion	Demonstrated training and/or experience to satisfy the ZCDH.			
	Elective cardioversion	Post graduate training or equivalent in general internal medicine which included training in cardioversion and/or demonstrated training and experience to satisfy the ZCDH.			
	Overnight oximetry interpretation	Demonstrated training and/or experience to satisfy the ZCDH.			
	Point of care ultrasound	Demonstrated training and experience to satisfy the ZCDH.			
	Procedural sedation	Compliance with the AHS Procedural Sedation Policy (PS-21) and Procedure (PS-21-01)5. Demonstrated combination of education, training and/or experience in conscious sedation to satisfy the ZCDH.			
	Pulmonary function tests	CPSA approval required.			
	Tilt table testing	Demonstrated training and/or experience to satisfy the ZCDH.			