



PRIVILEGED AND CONFIDENTIAL  
Proceedings and Records of the  
Professional Review Committee

Print Name:
Hire Date:
Primary Location:
Board Certified:
Subspecialty:
Board Eligible:
Projected Certification Date:

Privilege Request Form

Privilege Level:

- General     Residency/Board Certification     Advanced Procedures

Clinical Site Legend:

- South Los Angeles     Baldwin Park I     Baldwin Park II     Anaheim I     Anaheim II  
 Stanton     Garden Grove     Indio     Upland     La Puente     El Monte  
 Downtown Los Angeles     Norco     Los Angeles Broadway  
 San Pedro     ADHC     Upland

Procedures	Requested	Level	Site	Medical Director Approval	Special Conditions/ Comments
<b>General Procedures</b>					
Management of Routing Adolescent Care					
Management of Routine Adult Care					
Management of Routine Geriatric Care					
Supervision of Residents and Students					
Abcess I&D					
Biopsy, skin					
Cardiopulmonary Resuscitation (BLS)					



Excision, Benign Lesion, Skin					
Foreign Body Removal, Eye					
Ingrown Toenail Excision					
Laceration, Infected					
Paronychia, I & D					
Suturing of Simple Laceration					
Procedures	Requested	Level	Site	Medical Director Approval	Special Conditions/ Comments
<b>Privileges in Anesthesia Care</b>					
Use of Local Anesthesia for Wound Repair					
<b>Privileges in Anesthesia Care</b>					
Debridement, Skin Subcutaneous, Tissue					
Dressing/Debridement, Burn					
Foreign Body Removal, Nose					
Incision and Removal of Foreign Body					
Laceration Simple					
<b>Privileges in Internal Medicine</b>					
Debridement, Skin Subcutaneous, Tissue					
Dressing/ Debridement, Burn					
Foreign Body Removal, Nose					
Incision and Removal of Foreign Body					
Laceration Simple					
<b>Privileges in Internal Medicine</b>					
Debridement, Skin Subcutaneous, Tissue					
Dressing/ Debridement,					





Burn					
Foreign Body Removal, Nose					
Laceration Simple					
<b>Privileges in Internal Medicine</b>					
Independent Care: Basic Life Support					
Basic Diagnosis & Management					
Full Care of Uncomplicated Cases					
EKG Interpretation					
Needle Aspiration of Subcutaneous Lesion					
PFT (Pulmonary Function Test) Interpretation					
Superficial Nerve Block					
<b>Privileges in Gynecological Care</b>					
I & D Bartholin Cyst					
Cervical Biopsy					
Colposcopy/Cervical Cryotherapy					
Culdocentesis					
Endometrial Biopsy					
IUD Insertion and Removal					
Loop Electrode Excisional Procedure					
<b>Privileges in Orthopedic Care</b>					
Initial Evaluation of Orthopedic Problems					
Treatment of Acute Back and Neck Pain					
Treatment of Contusions, Simple Lacerations, Sprains					
Treatment of Bursitis, Tendonitis, Elbow, etc.					
Casting Procedures for Closed Fractures Requiring No Reduction					
Joint Aspirations					





Procedures Involving Destruction of Nail Beds					
Treatment of Corns, Calluses and Bunions					
Treatment of Pes Planus					
Foot Care					
Treatment of Closed Disclosures					
Privileges of Routine Pediatric Care, including full-term newborns					
<b>Special Privileges for Level Three Privileges</b>					

I hereby request the privileges identified above. Furthermore, I am physically and mentally capable to perform the above requested privileges.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

The following recommendation is made to the Central City Community Health Centers Governing Board that has authority to grant or deny privileges. As Chief Executive Officer and Medical Director, we recommend that:

Privileges for: \_\_\_\_\_ at Central City Community Health Centers are:

- Approved**                       **Approved with Modifications**                       **Denied**

Specified Modifications:

Denial based on:

\_\_\_\_\_  
Chief Executive Officer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Medical Officer Signature

\_\_\_\_\_  
Date



