

**CAROLINAS HEALTHCARE SYSTEM
(CAROLINAS MEDICAL CENTERS-CHARLOTTE)
ALLIED HEALTH PROFESSIONAL
PHYSICIAN ASSISTANT OR NURSE PRACTITIONER
DEPARTMENT OF MEDICAL AND SURGICAL SPECIALTIES
SPECIALTY OF RADIOLOGY**

SUMMARY OF OCCUPATION:

1. The Radiology Allied Health Professional is a skilled member of the health care team who is qualified by academic and clinical education to provide patient services as an Allied Health Professional under the supervision of a member(s) of the Medical Staff of Carolinas Medical Center, Carolinas Medical Center-University, Carolinas Rehabilitation, Carolinas Medical Center-Mercy or Carolinas Medical Center-Pineville in accordance with the Bylaws of the Medical Staff.
2. He/she will assist in the implementation of the health care plan and the management of patients by performing diagnostic and therapeutic tasks as defined and approved by the Board.
3. Allied Health Professional "Dependent Practitioner" shall mean a health care professional other than physicians or dentists, who is approved by the Board, who is licensed or certified by his/her respective licensing or certifying agencies, and who provides service as an employee of and under the supervision of a physician who is currently appointed to the Medical Staff of Carolinas Medical Center, Carolinas Medical Center-University, Carolinas Rehabilitation, Carolinas Medical Center-Mercy or Carolinas Medical Center-Pineville.

ORGANIZATIONAL RELATIONSHIP:

- 1) The Allied Health Professional reports and is responsible to the supervising physician(s). He/she may also assist the residents assigned to the Department of Radiology in performance of their duties and responsibilities as assigned by their supervising physician. The Allied Health Professional shall notify the supervising physician of all cases of acute and severe distress, serious nature (life- or limb-threatening), or whenever the patient wishes to see a physician or has unanswered questions.
- 2) The Allied Health Professional shall wear a nametag identifying him/herself as an Allied Health Professional and introduce him/herself as an Allied Health Professional, and shall at no time imply, state, or lead one to believe that he/she is a physician.
- 3) The Allied Health Professional must be familiar with departmental and hospital policies and procedures.

QUALIFICATIONS:

1. The Allied Health Professional will maintain qualifications as specified in the POLICY ON CLINICAL PRIVILEGES FOR ALLIED HEALTH PROFESSIONALS. His/her past experience and training shall be commensurate with privileges requested.
2. The scope of duties and responsibilities of the Allied Health Professional shall be delineated on an approved Delineation of Privileges form and approved by the Board.
3. The Supervising Physician shall delegate only tasks and procedures to his or her Allied Health Professional which are within or contemplated by the clinical privileges granted to the Supervising Physician by the Medical Executive Committee and the Board of Commissioners and which the Allied Health Professional has been approved to perform. It is understood that the supervision of an Allied Health Professional will never be transferred to a physician who is not currently a fully appointed member of Carolinas Medical Center, Carolinas Medical Center-University, Carolinas Rehabilitation, Carolinas Medical Center-Mercy or Carolinas Medical Center-Pineville Medical Staff.

**** DIRECT SUPERVISION:**

Direct supervision shall mean the physical presence of a sponsoring/supervising radiologist within the Department of Radiology with immediate availability to the Dependent Practitioner for assistance.

**Delineation of Privileges Form
Allied Health Professional - Specialty of Radiology**

CMC	MERCY	PINEVILLE	UNIVERSITY	CR		
					AHPR-1	NON SURGICAL DUTIES:
					AHPR-1(A)	Perform and record history, physical examination, and discharge summary and present patient information to attending physician.
					AHPR-1(B)	Write routine orders and initiate requests for appropriate laboratory studies, x-rays, and consultations in conformance with approved standing orders. Orders must be countersigned by a physician within the time limits outlined by the Guidelines for Medical Assistants.
					AHPR-1(C)	Following instructions of primary supervising physician, order IV drugs, blood products and IV fluids.
					AHPR-1(D)	Make hospital rounds, including ICU, and write progress notes for countersignature by primary supervising physician(s).
					AHPR-1(E)	Provide education and special instructions for the patient and patient's family, including telephone follow-up of interventional radiology, vascular radiology and interventional neuroradiology patients post discharge. Follow-up should include answering patient's questions and providing instructions to the patient. All telephone follow-up should be documented.
					AHPR-1(F)	Provide post-hospital instructions to interventional radiology, vascular radiology, and interventional neuroradiology patients related to wound and catheter care, diet, activity, and medications, including prescriptions for discharge medications as directed by the primary supervising physician. Schedule follow-up appointments with radiologist and referring physician.
					AHPR-1(G)	Collect data and write pertinent progress notes on charts.
					AHPR-1(H)	Make routine rounds and consult with other health professionals involved in the care of all radiology patients to assess the patient's status and implement indicated therapy in conformance with routine post-op orders and service protocols.
					AHPR-1(I)	Inform physician of changes in patient's status and initiate therapy as directed by the physician.
	N/A	N/A	N/A	N/A	AHPR-1(J)	Monitoring exercise and pharmacological stress myocardial perfusion scans.
					AHPR-1(K)	Drainage catheter maintenance including irrigation, manipulation, suturing, and dress change.
					AHPR-2	CARE OF EMERGENCY PATIENTS:
				N/A	AHPR-2 (A)	Assess patient in the Emergency Department, prior to primary supervising physician's arrival.
					AHPR-3	CARE OF INTERVENTIONAL RADIOLOGY, VASCULAR RADIOLOGY AND INTERVENTIONAL NEURORADIOLOGY PATIENTS:
					AHPR-3 (A)	Write routine pre and postoperative orders in conformance with approved standing orders.
				N/A	AHPR-3 (B)	Participate and assist in the pre-procedure preparation of interventional radiology, vascular radiology, and neuroradiology patients, including preparing the patient for the specific procedure.

CMC	MERCY	PINEVILLE	UNIVERSITY	CR		
				N/A	AHPR-3 (C)	Participate and assist in the intraprocedural care of the interventional radiology, vascular radiology, and interventional neuroradiology patient.
				N/A	AHPR-3 (D)	Coordinate special procedure and image-guided procedure schedule daily.
					AHPR-3 (E)	Participate and assist in the post procedural care of the interventional radiology, vascular radiology, and interventional neuroradiology patient.
					AHPR-4 **	** THE FOLLOWING PROCEDURES WILL BE PERFORMED UNDER DIRECT SUPERVISION:
				N/A	AHPR-4 (A) **	Image-guided thoracentesis.
				N/A	AHPR-4 (B) **	Image-guided paracentesis.
	N/A	N/A	N/A	N/A	AHPR-4 (C) **	Femoral arterial/venous catheterization.
	N/A	N/A	N/A	N/A	AHPR-4 (D) **	Internal jugular venous catheter insertion.
					AHPR-4 (E) **	Placement of peripherally inserted central venous catheters.
	N/A	N/A	N/A	N/A	AHPR-4 (F) **	Hysterosalpingogram.
				N/A	AHPR-4 (G) **	Fluoroscopically guided lumbar puncture.
					AHPR-4 (H) **	Removal of tunneled temporary dialysis catheters.
					AHPR-5	OTHER PROCEDURES:
				N/A	AHPR-5 (A)	Bladder catheterization
				N/A	AHPR-5 (B)	Nasogastric/Dobhoff catheter placement
					AHPR-5 (C)	Removal of chest tubes
					AHPR-5 (D)	Removal of percutaneously placed fluid and abscess drainage catheters.
					AHPR-5 (E)	Removal of peripherally inserted central venous catheters.
					AHPR-5 (G)	Wound and catheter care, suturing of external minor lacerations, removal of sutures and application of dressings.
					AHPR-5 (H)	Administration of specified medications, IV fluids and transfusion of blood and blood products when indicated.
		N/A		N/A	AHPR-5 (I)	Insertion of arterial lines, performs arterial blood gases.

CMC	MERCY	PINEVILLE	UNIVERSITY	CR		
					AHPR-5 (J)	Control of external hemorrhage, hematoma post catheter removal.
					AHPR-5 (K)	Use of thrombin to achieve hemostasis.
					AHPR-5 (L)	Measure and assess hemodynamic data.
				N/A	AHPR-5 (M)	Assist as required during interventional radiology, vascular radiology, and interventional neuroradiology and miscellaneous operative procedures.
				N/A	AHPR-5 (N)	Peripheral venous cut down.
				N/A	AHPR-5 (O)	Venipuncture: starting intravenous lines.
				N/A	AHPR-5 (P)	Perform therapeutic procedures as directed by the supervising radiologist and in conformance with service management protocols, including percutaneous pleuradesis, cyst sclerosis, and thrombolysis.
		N/A			AHPR-5 (Q)	Removal of arterial catheters.
						* FLUOROSCOPIC PROCEDURES IN PEDIATRIC PATIENTS
					AHPR-5 (R) * * *	Gastrografin/barium Upper GI Series
					AHPR-5 (S) * * *	Gastrografin/Barium Enema
					AHPR-5 (T) * * *	Gastrografin/Barium Swallow
					AHPR-5 (U) * * *	Gastrografin/Barium Small Bowel Follow Through
					AHPR-5 (V) * * *	Voiding Cystourethrogram
					AHPR-5 (W) * * *	Modified Barium Swallow
						* FLUOROSCOPIC PROCEDURES IN ADULT AND/OR PEDIATRIC PATIENTS
					AHPR-5 (X) * * *	Cystogram
					AHPR-5 (Y) * * *	Retrograde Urethrogram
					AHPR-5 (Z) * * *	Tube Check
					AHPR-5 (AA) * * *	Nasogastric Dobhoff Tube-Placement/Manipulation
					AHPR-5 (BB) * * *	T-Tube Cholangiogram
					AHPR-5 (CC) * * *	Sinus Tract Injection

CMC	MERCY	PINEVILLE	UNIVERSITY	CR		
						* FLUOROSCOPIC PROCEDURES IN ADULT AND/OR PEDIATRIC PATIENTS
					AHPR-5 (DD) * * *	Chest Fluoroscopy
					AHPR-5 (EE) * * *	Gastrografin/barium Upper GI Series
					AHPR-5 (FF) * * *	Gastrografin / Barium Enema
					AHPR-5 (GG) * * *	Gastrografin / Barium Swallow
					AHPR-5 (HH) * * *	Gastrografin / Barium Small Bowel Follow through
					AHPR-5 (II) * * *	Modified barium swallow
					AHPR-5 (JJ) * * *	Voiding cystourethrogram
					AHPR-5 (KK) * * *	Feeding tube placement
					AHPR-5 (LL) * * *	G – J tube Check
					AHPR-5 (MM) * * *	Programmable CSF shunt fluoro

Signature of Applicant

Date

Printed or typed name of Applicant

Signature of Sponsoring Physician

Date

Printed or typed name of Sponsoring Physician

APPROVAL:

Chief, Carolinas Medical Center

Date

Chairman, Carolinas Medical Center-University

Date

Medical Director, Carolinas Rehabilitation

Date

Section Chief, Carolinas Medical Center-Mercy

Date

Section Chief, Carolinas Medical Center-Pineville

Date

Approval by the Medical Executive Committee at:

Carolinas Medical Center – 06/14/05; 08/13/08

Carolinas Medical Center-University – 06/13/05; 08/12/08

Carolinas Medical Center-Mercy – 08/08/05; 07/14/08

Carolinas Rehabilitation – 06/12/05; 07/03/08

Approval by the Board of Commissioners: 09/13/05; 09/12/06; 09/09/08

**RADIOLOGY PROCEDURES THAT
MUST BE PERFORMED WITH A PHYSICIAN UNDER DIRECT SUPERVISION * ***

APPLICANTS FOR THESE PRIVILEGES SHALL PRESENT EVIDENCE OF APPROPRIATE TRAINING AND CURRENT COMPETENCE AND QUALIFICATIONS TO PERFORM THE REQUESTED PROCEDURES. THE APPLICANT MUST SUBMIT DOCUMENTATION THAT THESE CASES WERE PERFORMED WITH A PROCTORING PHYSICIAN PRESENT.

AHPR-4 (A) Image-guided thoracentesis

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (B) Image-guided paracentesis

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (C) Femoral arterial/venous catheterization

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (D) Internal jugular venous catheter insertion

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (E) Placement of peripherally inserted central venous catheters

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (F) Hysterosalpingogram

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (G) Fluoroscopically guided lumbar puncture

A minimum of fifteen (15) procedures must be performed.

AHPR-4 (H) Removal of tunneled temporary dialysis catheters

A minimum of fifteen (15) procedures must be performed.

OTHER PROCEDURES * * *

APPLICANTS FOR THESE PRIVILEGES SHALL PRESENT EVIDENCE OF APPROPRIATE TRAINING AND CURRENT COMPETENCE AND QUALIFICATIONS TO PERFORM THE REQUESTED PROCEDURES. THE APPLICANT MUST SUBMIT DOCUMENTATION THAT THESE CASES WERE PERFORMED WITH A PROCTORING PHYSICIAN PRESENT. STUDY MUST BE REVIEWED WITH THE RADIOLOGIST BEFORE THE PATIENT LEAVES THE DEPARTMENT.

FLUOROSCOPIC PROCEDURES IN PEDIATRIC PATIENTS:

AHPR-5 (R) Gastrografin/barium Upper GI Series

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (S) Gastrografin/barium Enema

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (T) Gastrografin/barium Swallow

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (U) Gastrografin/barium small bowel follow through

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (V) Voiding Cystourethrogram

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (W) Modified barium swallow

A minimum of five (5) procedures must be performed.

FLUOROSCOPIC PROCEDURES IN ADULT AND/OR PEDIATRIC PATIENTS:

AHPR-5 (X) Cystogram

A minimum of three (3) procedures must be performed.

AHPR-5 (Y) Retrograde Urethrogram

A minimum of three (3) procedures must be performed.

AHPR-5 (Z) Tube Check

A minimum of five (5) procedures must be performed.

AHPR-5 (AA) Nasogastric Dobhoff Tube-Placement/Manipulation

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (BB) T-Tube Cholangiogram

A minimum of three (3) procedures must be performed.

AHPR-5 (CC) Sinus Tract Injection

A minimum of five (5) procedures must be performed.

OTHER PROCEDURES * * *

APPLICANTS FOR THESE PRIVILEGES SHALL PRESENT EVIDENCE OF APPROPRIATE TRAINING AND CURRENT COMPETENCE AND QUALIFICATIONS TO PERFORM THE REQUESTED PROCEDURES. THE APPLICANT MUST SUBMIT DOCUMENTATION THAT THESE CASES WERE PERFORMED WITH A PROCTORING PHYSICIAN PRESENT. STUDY MUST BE REVIEWED WITH THE RADIOLOGIST BEFORE THE PATIENT LEAVES THE DEPARTMENT.

FLUOROSCOPIC PROCEDURES IN ADULT AND/OR PEDIATRIC PATIENTS:

AHPR-5 (DD) Chest Fluoroscopy

A minimum of ten (10) procedures must be performed.

AHPR-5 (EE) Gastrografin/barium upper GI series

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (FF) Gastrografin / barium enema

A minimum of ten (10) procedures must be performed.

AHPR-5 (GG) Gastrografin / barium swallow

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (HH) Gastrografin / barium small bowel follow through

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (II) Modified barium swallow

A minimum of fifteen (15) procedures must be performed.

AHPR-5 (JJ) Voiding cystourethrogram

A minimum of ten (10) procedures must be performed.

AHPR-5 (KK) Feeding tube placement

A minimum of five (5) procedures must be performed

AHPR-5 (LL) G – J tube Check

A minimum of five (5) procedures must be performed

AHPR-5 (MM) Programmable CSF shunt fluoro

A minimum of five (5) procedures must be performed