

Medical Biochemistry Clinical Privileges

Name: _____

Effective from ____/____/____ to ____/____/____

Initial privileges (initial appointment) Renewal of privileges (reappointment)

All new applicants must meet the following requirements as approved by the governing body, effective: June 4, 2013.

Applicant: Check the “Requested” box for each privilege requested. Applicants are responsible for producing required documentation for a proper evaluation of current skill, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges. Please provide this supporting information separately.

[Department/Program Head or Leaders/ Chief]: Check the appropriate box for recommendation on the last page of this form and include your recommendation for any required evaluation. If recommended with conditions or not recommended, provide the condition or explanation on the last page of this form.

Current experience is an estimate of the level of activity below which a collegial discussion about support should be triggered. It is not a disqualifier. This discussion should be guided not only by the expectations and standards outlined in the dictionary but also by the risks inherent in the privilege being discussed and by similar activities that contribute to the skill under consideration. This is an opportunity to reflect with a respected colleague on one's professional practice and to deliberately plan an approach to skills maintenance.

Other requirements

- Note that 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.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

Note: The dictionary will be reviewed over time to ensure it is reflective of current practices, procedures and technologies.

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Grandparenting: Physicians holding privileges prior to implementation of the dictionary will continue to hold those privileges as long as they meet currency and quality requirements.

Definition: Medical Biochemistry is a branch of medicine based on principles of biochemistry and metabolism, human health and disease. The Medical Biochemist is a specialist in laboratory medicine, is trained in the operation and management of medical biochemistry laboratories, and is a consultant in all aspects of their use. The medical biochemist directs clinical laboratories, consults, diagnoses and treats patients with a variety of metabolic disorders and biochemical abnormalities.

Qualifications for Medical Biochemistry

Initial privileges: Certification in Medical Biochemistry by the Royal College of Physicians and Surgeons of Canada or be recognized as a medical biochemist by the College of Physicians and Surgeons of British Columbia by virtue of credentials earned in another jurisdiction that are acceptable to both the College and the Health Authority and its Affiliate(s).

AND

Recommended current experience: Full- and/or part-time medical biochemistry services, reflective of the scope of privileges requested, for the past 12 months or successful completion of a Royal College of Physicians and Surgeons of Canada residency in Medical Biochemistry (or equivalent) or clinical/research fellowship within the past 12 months.

Renewal of privileges: To be eligible to renew privileges in Medical Biochemistry, the applicant should meet the following criteria:
Current demonstrated skill and an adequate volume of full- or part-time experience with acceptable results, reflective of the scope of the privileges requested, (minimum of 24 weeks working in the discipline for the past 36 months), based on results of ongoing professional practice evaluation and outcomes.

Core Privileges: Medical Biochemistry

Core privileges are offered to ALL members in the discipline as long as the facility can support those activities.

Requested



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Apply Medical Biochemistry for diagnosis and management of disease for patients of all ages with a variety of metabolic and biochemical disorders and assess the natural history of those disorders. Participate in the direction of method development. May provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

Core Procedures List

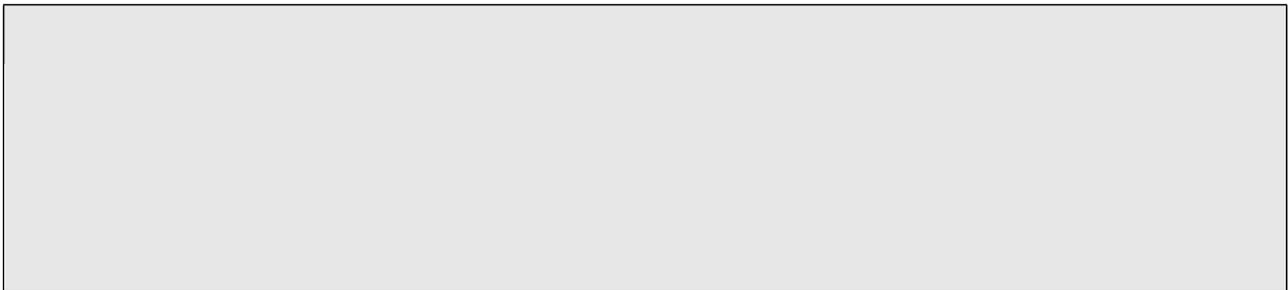
This is not intended to be an all-encompassing procedures list. It defines the types of activities/procedures/privileges that the majority of practitioners in this specialty at this organization would competently perform, and inherent activities/procedures/privileges requiring similar skill sets and techniques.

To the applicant: If there is a procedure you wish to NOT perform, then please type into the *Comments* field.

- Advise on biochemical basis of diagnosis and management of diseases including appropriate testing and interpretation of results for the following
 - Acute and chronic diseases in adult and pediatric medical biochemistry
 - Adult and pediatric endocrine and metabolic testing
 - Lipid diagnostic testing
 - Protein chemistry
 - Obstetric medical biochemistry
 - Therapeutic drug monitoring (TDM) and toxicology
 - Tumour markers, screening, monitoring and prognosis
 - Critical care and trauma
 - Neurology and degenerative diseases
- Population based prevention and health promotion
- Direction of Method development
- Direction of Quality Management
- Direction of Laboratory Medicine Point of Care testing
- Administrative direction and system management of Laboratory Medicine
- Medical consultation (direct patient care)
 - Lipid disorders
 - Bone disorders
 - Diabetes mellitus

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- Thyroid disorders
- Inborn errors of metabolism
- Nutrition and total parenteral nutrition (TPN)
- Other biochemically based metabolic disorders



Other non-core privileges requiring specialized training or proctoring and experience approved by department head

Medical Biochemistry

Advise on appropriate testing, interpret, and report results for:

Non-core Privilege	Additional training required	Recommended current experience	Requested
Specialized pediatric medical biochemistry (For Pediatricians who enter medical biochemistry, no further training required)	6 months mentoring	8 weeks / year	<input type="checkbox"/>
Prenatal screening	2 months mentoring	8 weeks / year	<input type="checkbox"/>
Neonatal screening	3 months mentoring	8 weeks / year	<input type="checkbox"/>
Specialized toxicology (including forensic)	1 year mentoring	8 weeks / year	<input type="checkbox"/>
Inborn errors of metabolism (biochemical genetics)	1 year mentoring	8 weeks / year	<input type="checkbox"/>

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Context Specific Privileges

Context refers to the capacity of a facility to support an activity.

Context specific privileges: Administration of procedural sedation

Requested

See "Hospital Policy for Sedation and Analgesia by Non-anesthesiologists."

For Reference Only



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Process for requesting privileges not included in the dictionary

Where a member of the medical staff requests a privilege not included in the core, non-core or context specific privileges for a discipline, the following process will be followed.

1. The practitioner will request a **Change Request Form** from the Medical Affairs Office. This will be submitted to the head of department or chief of staff as part of the electronic application process
2. The practitioner will complete the privileges section of the **Change Request Form** and submit with the following information; the privilege requested, the location within the facility where the privilege would be exercised, and the relevant training and experience held by the practitioner in this area.
3. The department head or chief of staff, in consultation with the senior medical administrator and medical administrator responsible for the facility, will determine if the requested privilege can be supported at that site.
4. Where it is deemed appropriate, the practitioner, the department head or chief of staff and the senior medical administrator will agree on any additional training required, and a minimum level of activity required to maintain the privilege. The specific minimum number requirement indicating the level of experience needed to demonstrate skill to obtain clinical privileges for the requested procedure must be evidence-based. Where no supporting literature exists for a specific number, the criteria are established by the consensus of a multidisciplinary group of practitioners who do not have self-interest in creating an artificially high volume requirement.
5. Any additional training will be done in a facility that normally trains practitioners in this activity. Exceptions may be granted in circumstances where all that is required is training by a member of the medical staff who holds the privilege in question.
6. On satisfactory completion of training, the department head or chief of staff may recommend to the governing body through the medical advisory committee that the privilege be granted.

The privileging dictionaries on this site (bcmqi.ca) are the official versions. They will be reviewed beginning in 2016. In the meantime if you have any questions or comments please contact your medical administration office or the BC MQI Office by completing the [Provincial Privileging Dictionary Feedback form](#).

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I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at the facility I am applying, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Signed: _____ Date: _____

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege Condition/modification/explanation

Notes: _____

Name of Department / Division / Program: _____

Name of Medical Leader: _____

Title: _____

Signature: _____

Date: _____