

**The Hematological Pathology & Transfusion Medicine dictionary
was approved by PMSEC on 14 September 2017**

REVIEW PANEL COMPOSITION

The panel was composed of two co-chairs with expertise in the provincial privileging dictionaries and 8 subject matter experts, who work across 5 of the province's health authorities.

RECORD OF REVIEW PANEL DECISIONS AND CRITERIA IDENTIFIED

Below are panel decisions and/or criteria identified to guide discussion of clinical practice and standards.

1. Refer to the Royal College discipline definition

The panel was in agreement to continue to use the discipline definition as defined by the Royal College of Physicians and Surgeons of Canada.

2. Breaking the dictionary into two core privileges

The panel decided to break the dictionary into 2 core privileges: hematological pathology and transfusion medicine.

3. Use training requirements to define current experience

The panel was in agreement to remove numbers and to instead define current experience by specifying minimum levels of recent work and with reference to training requirements for specific privileges. This approach is consistent with the anatomical pathology and general pathology dictionaries.

4. Use of molecular pathology, cytogenetics and molecular genetics privileges

The panel was in agreement to use the non-core privileges an expert sub-committee developed for anatomical pathology and general pathology dictionaries. For molecular pathology, the panel identified "use" of reports and findings as a core privilege and kept "interpretation, documentation, reporting and oversight" as non-core activities.

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Overall

Decision / Revision: Use training requirement to define current experience

Engagement Method: Panel discussion

ORIGINAL	REVISION
<p>Requirements were based on clinical volume completed per specific timeframe</p> <p><i>Example:</i> Interpretation of Bone Marrow</p> <ul style="list-style-type: none"> Recommended current experience: 40 cases per year averaged over three years Return to practice: review of 40 cases by a physician holding this privilege; 8 credits of appropriate CME 	<p>Refer to training requirements to define current experience.</p> <p><u>C1:</u> <i>Example:</i> Full- or part-time pathology services, reflective of the scope of privileges requested, for the past 12 months or successful completion of an RCPSC or equivalent accredited residency or clinical/research fellowship immediately following residency within the past 12 months.</p>

Core Privileges

Decision / Revision: Restructure core privileges to reflect training and practice setting. The revised structure better aligns with the Royal College training programs and reflects current practice.

Engagement Method: Panel discussion

ORIGINAL	REVISION
<p>Previously shown as one core privilege with a list of procedures outlining both hematological pathology and transfusion medicine procedures</p> <ul style="list-style-type: none"> Core Privileges: Hematological Pathology and Transfusion Medicine 	<p><u>C2:</u> Separate the core privilege into two core privileges. Procedures associated to each core are listed in bullet points.</p> <p>Core privileges: Hematological Pathology Core privileges: Transfusion Medicine</p>

Decision / Revision: Selectable Core Privilege - The revised format promotes ease of use.

Engagement Method: Panel discussion

ORIGINAL	REVISION
<p>Previously listed as a bullet point under core procedures list which triggered an added step for practitioners who wish to not perform bone marrow biopsy. They were required to list exclusions in the comments field.</p> <p>To the applicant: If there is a procedure you wish to NOT perform, then please type into the <i>Comments</i> field.</p> <p>Performance of Bone Marrow Biopsy</p>	<p><u>C3:</u> A selectable core privilege for those who wish to perform bone marrow aspirate and biopsy</p> <p>Core privileges: Performance of bone marrow aspirate and biopsy</p>

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Decision / Revision: New core privilege – Molecular pathology has been defined by a sub panel

Engagement Method: Subpanel recommendation and panel discussion

ORIGINAL	REVISION
<ul style="list-style-type: none"> Not Applicable 	<p>C4: Definition and criteria developed by a sub-panel consisted of experts in molecular pathology, cytogenetics and molecular genetics. The panel slightly revised the definition to align with their scope of practice</p> <p>Core privileges: Molecular Pathology</p>

Non-core Privileges

Decision / Revision: New non-core privileges - The non-core privileges reflect the pathology scope of practice.

Engagement Method: Sub-panel recommendation and panel discussion

ORIGINAL	REVISION
<ul style="list-style-type: none"> Not applicable 	<p>C5: Definition and criteria developed by a sub-panel consisted of experts in molecular pathology, cytogenetics and molecular genetics. The panel slightly revised the definition to align with their scope of practice</p> <p>Non-core privileges: Cytogenetics Non-core privileges: Molecular Genetics</p>

Hematological Pathology and Transfusion Medicine 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: September 14, 2017

Instructions:

Applicant: Check the “Requested” box for each privilege requested. Applicants are responsible for producing required documentation to allow 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 by uploading the appropriate documents. Privileges should not be requested (checked off) and cannot be granted unless the specific criteria associated with the privilege are met.

Medical/Clinical leaders: 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: Current experience thresholds suggested in this document were developed by practitioners in the field, and are *not* intended as a barrier to practice or to service delivery. They are *not* intended as rigid cut offs, below which clinical privileges must be restricted or removed. Instead, medical/clinical leaders are encouraged to initiate discussions with those practitioners who are close to or below the thresholds, to ensure that mechanisms are in place to ensure adequate practitioner experience and patient outcomes.

Other requirements: Note that even if applicants meet skill or experience requirements, each site will determine if the requested privilege can be supported at that site. 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 training and current experience to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

Exemption requests: A request for exemption from meeting specific credentialing requirements for a core or non-core privilege may be made; however, these will be reviewed on a case-by-case basis by the provincial credentialing & privileging oversight committee (CPOC) to determine if an expert panel should be convened to consider the request.

Context: The care of patients presenting with complex problems or uncommon diseases

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requires access to multidisciplinary groups, experienced teams and institutions with the necessary subspecialties and infrastructure for appropriate care.

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

Continuous Professional Development (CPD): Where suggested in this document, CPD requirements reflect those professional development activities which are eligible for:

1. credit under the Royal College of Physicians and Surgeons of Canada's (Maintenance of Certification (MOC) program;
2. the College of Family Physicians of Canada Mainpro+;
3. those professional development activities held in foreign jurisdictions which would be eligible under the MOC/Mainpro program if held in Canada; or
4. equivalent CPD or Quality Assurance activities for other practitioners.

Planned vs. Unplanned (Emergency) Care: The scope of privileges granted to any individual practitioner is based on considerations of patient care under "normal circumstances." In the setting of risk to life or limb, the rules of privilege are not meant to constrain practitioners from acting in the best interest of a patient.

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

Core privilege: Types of activities a recent graduate of the discipline can reasonably be expected to perform at a specific facility. Under core privileges in this dictionary, if there is a procedure you wish to NOT perform please type into the *Comments* field.

Non-core privilege: Types of activities that require further training, experience and demonstrated skill. Non-core privileges are requested in addition to requesting core. Individuals requesting these privileges should meet the specific threshold criteria associated to such non-core privileges.

Context specific privileges: Privileges that take into account what medical services and procedures a facility can support.

Additional privilege: An additional privilege is any privilege that is not included in the core, non-core, or context-specific privileges dictionary for your discipline. Additional privileges already listed in this document were previously requested by others who practice in your discipline; they may or may not be relevant to you. If there are any privileges not listed in your dictionary that you wish to request, please complete an additional privilege request form and attach any evidence of training to support your request.

Restricted procedures: Some dictionaries have procedures identified by the Ministry of Health as [DESIGNATED A RESTRICTED SERVICE BY THE MEDICAL SERVICES COMMISSION].

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Privileges identified as restricted procedures may be flagged in this document. Where it appears, the restricted procedures flag is for administrative tracking only, and has no impact on clinical content.

Reference Only

Hematological Pathology and Transfusion Medicine Clinical Privileges

Definition

Hematological Pathology is that domain of laboratory medical practice and science concerned with the study, investigation, diagnosis and therapeutic monitoring of disorders of blood, blood-forming elements, hemostasis and immune function in adults and children. The specialty also encompasses the direction and supervision of transfusion medicine services both at hospital and blood center level, ensuring safe and effective transfusion management for patients. The practice of Hematological Pathology requires an in depth knowledge of the basic sciences (immunology, biochemistry, molecular pathology, genetics) related to the specialty which are an essential foundation for the provision of expert knowledge in the morphology of blood and hematopoietic/ lymphoid organs, immunohematology, hemostasis and general hematology. The specialty also encompasses expertise in instrumentation, quality management systems, administrative and regulatory guidelines related to the directorship and management of diagnostic laboratory resources.

Qualifications for Hematological Pathology and Transfusion Medicine

Initial privileges: Certification in Hematological Pathology by the Royal College of Physicians and Surgeons of Canada or be recognized as a hematological pathology or transfusion medicine specialist 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: Applicants are expected to have a minimum of 24 weeks working experience averaged over 36 months including the following levels of activity: meet current experience requirement for requested privileges

Renewal of privileges: To be eligible to renew privileges in Hematological Pathology, 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 over the past 36 months) based on results of ongoing professional practice evaluation and outcomes.

Return to practice: Individualized evaluation at an academic training center that trains Hematological Pathology residents, with supervision by a privileged hematological pathologist of core procedures relevant to their intended scope of practice.

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

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

Core privileges: Hematological Pathology

☐ Requested

Medical laboratory oversight of testing, ordering of investigations, interpretive reporting and consultation for diseases of the hematopoietic system involving all patient populations. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy. 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 core procedures on the procedures list near the end of this document and such other procedures that are extensions of the same techniques and skills.

- Clinical consultation and advice for hematologic diseases with or without patient contact
- Laboratory Medical oversight and direction of hematology laboratories with responsibility for all medical/technical policies and procedures affecting all relevant tests.
 - Morphology of hematology and other tissues for hematologic disorders including ancillary investigations such as in-situ hybridization, flow cytometry, immunohistochemistry and molecular testing
 - Disorders of hemostasis, thrombosis and platelet disorders
 - Disorders of hemolytic and hemoglobinopathy disorders
 - Disorders of autoimmune and immunohematology investigations
 - Biochemical and nutritional disorders affecting the hematopoietic system
- Interpretation of bone marrow aspirate and biopsy
- Review of cellular differential & identification in body fluids (i.e. CSF, Pleural, Peritoneal, etc)

Core privileges: Transfusion Medicine

☐ Requested

Medical laboratory oversight of testing, ordering of investigations, interpretive reporting and consultation for diseases of the transfusion medicine involving all patient populations. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy. 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 core procedures on the procedures

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list near the end of this document and such other procedures that are extensions of the same techniques and skills.

- Clinical consultation and advice for transfusion medicine with or without patient contact
- Laboratory medicine oversight and direction of a transfusion service with responsibility for or consultation in the development of all policies that relate to the care and safety of transfusion recipients (and donors as appropriate) as described in the most recent CSA standards for blood and blood components; responsibility for all medical/technical policies and procedures affecting all relevant tests.
 - Medical and nursing clinical practice oversight and management
 - Product advice and utilization management
 - Guideline and policy development and implementation
 - Audit and quality improvement
 - Transfusion reaction medical oversight of testing, ordering investigations, interpretive reporting and consultation management
 - Medical oversight of testing, ordering investigations, interpretive reporting and consultation
 - Donor management and collection

Core privileges: Molecular Pathology

❑ Requested

Use of genetic and genomic reports and findings in the practice of pathology

Initial privileges: The applicant has completed training to the satisfaction of the appropriate medical leader.

AND

Required current experience: Full- or part-time pathology services, reflective of the scope of privilege requested, for the past 12 months or successful completion of postgraduate fellowship in the past 12 months.

Renewal of privileges: To be eligible to renew this privilege, 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 privilege requested, (minimum of 24 weeks working in the discipline over the past 36 months) based on results of ongoing professional practice evaluation and outcomes.

Return to practice: Individualized evaluation at an academic training center that regularly trains Hematological Pathology residents, with supervision of core procedures relevant to their intended scope of practice.

Hematological Pathology and Transfusion Medicine Clinical Privileges

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: Select the following procedure(s) you wish to perform.

Core privileges: Performance of bone marrow aspirate and biopsy

☐ Requested

Initial privileges: The applicant has completed training to the satisfaction of the appropriate medical leader.

AND

Required current experience: Full- or part-time pathology services, reflective of the scope of privileges requested, for the past 12 months or successful completion of an RCPSC or equivalent accredited residency or clinical/research fellowship immediately following residency within the past 12 months.

Renewal of privileges: To be eligible to renew privileges in pathology, 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 over the past 36 months) based on results of ongoing professional practice evaluation and outcomes.

Return to practice: Individualized evaluation at an academic training centre that trains Hematological Pathology residents with supervision by a privileged hematological pathologist of core procedures relevant to their intended scope of practice.”

Non-core privileges (see specific criteria)

- Are permits for activities that require further training, experience and demonstrated skill.
- Are requested individually in addition to requesting the core.
- Each individual requesting non-core privileges should meet the specific threshold criteria as outlined.

Other non-core privileges requiring proctoring and experience approved by appropriate medical leader

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Non-core privileges: Tissue banking

☐ Requested

Experience and training as assessed by the appropriate medical leader

Non-core privileges: Immunogenetic and HLA laboratory

☐ Requested

Additional training, certification, and current experience appropriate for HLA laboratory direction (e.g. American Society Histocompatibility and Immunogenetics)

Non-core privileges: Molecular Pathology

Definition

Interpretation, documentation, reporting and oversight of genetic and genomic methods and findings in the practice of pathology

The applicant has completed training and has current experience to the satisfaction of the appropriate medical leader.

☐ Requested

Non-core privileges: Cytogenetics

Definition

Cytogenetics is a branch of laboratory medicine concerned with the study of chromosomes and how chromosomal anomalies relate to human disease and phenotype. (Defined by the Canadian College of Medical Geneticists)

☐ Requested

The applicant has completed additional training or equivalent and is certified by the Canadian College of Medical Geneticists or American Board of Medical Genetics and Genomics in Cytogenetics

AND

Has current experience acceptable to the appropriate medical leader.

Non-core privileges: Molecular Genetics

Definition

Molecular genetics is a study of molecular diagnostic testing techniques used for disease diagnosis, including the identification and interpretation of molecular abnormalities, and participation in the management of patients and their families with molecular genetic disorders.

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(Defined by the Canadian College of Medical Geneticists)

☐ Requested

The applicant has completed additional training or equivalent and is certified by the Canadian College of Medical Geneticists or American Board of Medical Genetics and Genomics in Molecular Genetics

AND

Has current experience acceptable to the appropriate medical leader.

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."

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Additional privileges

Definition: An additional privilege is any privilege that is not included in the core, non-core, or context-specific privileges dictionary for your discipline.

To request a privilege that is not included in the core, non-core, or context specific privileges for your discipline, notify your medical leader or local credentialing office.

A credentialing coordinator will send you an additional privilege request form to complete.

Instructions

On the additional privilege request form, you'll be asked to provide the following details:

- a) the privilege requested (*the procedure or activity you are requesting*)
- b) the site or facility where the privilege would be exercised, and
- c) your relevant training, experience or certification, if applicable.

Your request for additional privileges will be submitted to your medical leader. Please note that additional privileges are not automatically granted, but are reviewed to determine alignment with the site capacity and to ensure training requirements are met.

Dictionary content and feedback

The privileging dictionaries on this site (bcmqi.ca) are the official versions.

Dictionary content will be updated as according to the review schedule posted at the bcmqi.ca dictionary review hub. You can provide input on a dictionary at any time, by submitting a [Dictionary Feedback](#) form to the BC MQI office.

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Acknowledgement of Practitioner

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: _____

Medical / Clinical Leader's Recommendation

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/ Facility:

Name of Medical Leader:

Title:

Signature:

Date: