



Temporary Privileges

Medical Staff Policies & Procedures	
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PURPOSE: To define the process for granting temporary privileges at Jersey Shore University Medical Center.

POLICY: Temporary privileges are granted to fulfill an important patient care need or when an applicant with a complete, clean application is awaiting review and approval by the Medical Executive Committee

PROCEDURE:

I. To fulfill an important patient care need:

- A. Temporary privileges may be granted by the CEO, or designee, to fulfill an important patient care need for the care of one or more specific patients upon meeting the following:
 1. The applicant must make a written request for temporary privileges;
 2. Have the recommendation of the President of the Medical Staff and the applicable department chair; and
 3. Have documented primary source verification of current licensure and current competence.
 4. Have a copy of the practitioner's DEA certification, NJ CDS registration and Professional Liability insurance certificate, if applicable; and
 5. Have a signed acknowledgement from the practitioner that he/she will be bound by the hospital and medical staff bylaws, Rules and regulations and hospital and medical staff policies that are in force at the time temporary privileges are requested.
- B. Temporary privileges for the care of a specific patient shall be restricted to the treatment of a maximum of two patients in any one year.

- C. Temporary privileges for the care of a specific patient shall automatically terminate at the end of the needed services as determined by the Chair of the applicable department or as indicated in the Medical Staff Bylaws under the section of Termination of Temporary Privileges.
- D. The Delineation of privileges granted shall be as recommended by the applicable department chair

II. **For applicants with clean applications waiting for a review and approval by the Board of Trustees, the process is as follows:**

- A. The President of the Hospital or designee may grant temporary privileges, upon the recommendation of the President of the Medical Staff to those applicants awaiting approval by the Board of Trustees after meeting the following minimum criteria:
 - 1) Have a favorable recommendation from the MEC;
 - 2) The applicant must make a written request for temporary privileges;
 - 3) The application must be complete;
 - 4) The applicant must not have any current, previous or pending challenges to any licenses or registrations;
 - 5) The applicant must not have involuntarily been terminated from any Medical Staff or organization;
 - 6) The applicant must not have any instances of involuntary reduction, limitation, denial or loss of clinical privileges;
 - 6) Must have documentation, at a minimum of
 - Current licensure with primary source verification
 - Relevant training and/or experience
 - Current competence
 - Ability of perform the privileges requested
 - Evaluation of the results of the NPDB
- B. Temporary privileges for applicants waiting approval by the Board of Trustees may be granted for a period not to exceed 120 days.
- C. Temporary privileges may be terminated in accordance with the Medical Staff Bylaws, under the section of ‘Termination of Temporary Clinical Privileges’
- D. Delineation of privileges granted shall be as recommended by the applicable department chair.

- III. In exercising temporary privileges, the applicant shall act under the supervision of the chair of the applicable department / section.