

Stanly Regional Medical Center Anesthesiology/Pain Management Allied Health Professional Delineation of Privileges			
Name _____			
Privileges/Procedures List:	Requested	Approved	Comments
Obtain and record patient history			
Collect and record data for consultation			
Dictate Discharge Summaries			
Write patient orders, as specified, in approved standing orders			
Accept , record and carry out verbal orders			
Write progress notes, with appropriate countersignature			
Perform or assist with therapeutic procedures and tests routinely accepted, within the practice of the supervising physician, according to demonstrated training and competence			
Provide Patient Teaching and instructions, and interpretation of physician orders to patient/family and hospital staff			
Performing trigger point injections - Lumbar Region			
Minor joint and bursa injections			
Greater Trochanteric bursa injections			
Shoulder injections			
knee injections			
Prescribing appropriate medications			
Prescription authority			
Reprogramming spinal cord and peripheral nerve stimulators			
Perform cardiopulmonary Resuscitation (CPR)			
Assist and perform advanced Cardiac Life Support (ACLS) in accordance with certification			
Ordering other therapies when indicated			
Additional privileges requested:			

AHP Signature \_\_\_\_\_

Date \_\_\_\_\_

I have reviewed the above privileges for \_\_\_\_\_ and agree this applicant is competent to provide such services under the direct supervision of the practitioner(s) of \_\_\_\_\_. I give my assurance, personal responsibility. And acceptance of liability for this applicant.

Supervising Physician \_\_\_\_\_

Date \_\_\_\_\_

Chief of Service \_\_\_\_\_

Date \_\_\_\_\_