Atrium Health Surgery Center
Indian Trail
PRIVILEGE REQUEST: Physician Assistant

Provider Printed Name:

Provider Signature:

Date:

PROCEDURE	REQUESTED	NOT REQUESTED
Administer medication and regulate, as well as manage complication of medications		
Assist in Surgery		
Assist in oxygen therapy		
clean/ debris minor lacerations		
Drape patient/prep skin for surgery		
Educate patients/family members re: post op care and discharge instructions		
Gown/Glove physician and assistant in surgery		
History and Physical		
Irrigate/suction wounds		
Load/unload autosutures		
Mix/drain and /or administer medications		
Order and interpret laboratory test		
Participate in the proves if clinical decision making medical diagnosis and therapeutic		
Management, including prescribe medication, immunizations, and patient education		
Pass instruments in surgery		
Perform therapeutic procedures including suturing, removal of sutures, wound care		
Incision and drainage of superficial infection		
Remove Drains		
Remove foreign bodies from skin		
Retractions of tissue and organs in surgery under the direction of surgeon		
Suture Skin under direction of physician		

Supervising Physician signature: _____ Date: _____