Special Procedure Privileges (not included in Adult Emergency Medicine Core)

To be eligible to apply for the special procedures listed below, applicants must demonstrate successful completion of an approved and recognized course or acceptable supervised training in residency, fellowship or other acceptable experience; and provide documentation of competence in performing or supervising that procedure consistent with the criteria as indicated.

Point of Care Ultrasound:

Specific bedside ultrasound procedures (as listed below):	Requirements: Option 1: Completion of an ACGME accredited residency in Emergency Medicine in 2008 or later including verification of training in appropriate u/s and evidence of continued use of ultrasound in practice;
	Option 2: Completion of an AMA approved CME course consisting of a minimum of 16 hours of training in point- of-care u/s including evidence of training in the specific studies for which privileges are requested (copy of certificate required)

	REQUIREMENTS IN ADDITION TO THE BASIC REQUIREMENTS ABOVE	Requested	To be co	To be completed by Department		
SPECIFIC ULTRASOUND PROCEDURE			Approved	Approved with proctoring	Not Approved	
FAST (Focused Assessment with Sonography for Trauma) Ultrasound	Initial: documentation of having performed a minimum of 50 exams within the past two years. Re-appt: 25 every two years.	,				
Focused Abdominal Aortic Ultrasound for AAA (to rule out symptomatic AAA)	Initial: documentation of having performed a minimum of 25 exams within the past two years. Re-appt: 25 every two years.					
Focused Emergency Echocardiography (to rule out symptomatic pericardial effusion)	Initial: documentation of having performed a minimum of 50 exams. Re-appt: 25 every two years.					
Renal Ultrasound (to rule out hydronephrosis in cases of renal colic consistent with the attached algorithm)	Initial: documentation of having performed a minimum of 25 exams within the past two years Re-appt: 25 every two years.					
Serve as "PROCTOR" for Renal Ultrasound	Option 1: Evidence of completion of a minimum one year fellowship training in emergency uitrasound; Option 2: Current enrollment in a fellowship program with evidence of completion of a minimum of 100 studies within the past two years and demonstrated competence based upon results of ED U/S quality assurance review and/or verification from Chief of Emergency Medicine at previous hospital.					