

Clinical Privileges and Procedures  
 Department of Dermatology  
 Revised February 2008

Requested X	Task	Core or Special	Training Requirements
	<b>Inpatient General Clinical Privileges</b>	C	
	<b>Outpatient General Clinical Privileges</b>	C	
	<b>Laboratory Tests – may include Waived Testing</b>		
	Cutaneous infestations (e.g. Lice, scabies), KOH	C	
	Cutaneous microbiology, including, routine, advanced, and STD's special stain	C	
	Cutaneous viral infections (Tzank staining)	C	
	Fungal infections, superficial (fungal culture)	C	
	Microbe culture (e.g. fungi, bacterial, viruses)	C	
	Parasitology	C	
	Urine Pregnancy Testing	C	
	Gram or Giemsa Staining	C	
	Fecal Occult Blood	C	
	Routine Derm Pathology	C	
	<b>Dermatopathology</b>		
	Dermatopathology Consultation	S	Completion of dermatopathology fellowship
	Immunopathology	S	Completion of immunopathology training or dermpath fellowship
	<b>Dermatology Procedures</b>		
	Skin Biopsy – shave or punch	C	
	Excision – benign or malignant, simple	C	
	Cryosurgery	C	
	Electrodessication with or without Curettage	C	
	Nail Surgery	C	
	Chemical Peel	C	
	Curettage	C	
	<b>Injections</b>		
	Tissue Augmentation – Zyderm, Zyplast, Restylene	C	
	Vein Sclerosis	C	
	Cutaneous Lesions with Chemotherapy	C	
	Botox	C	
	Subcutaneous injections	C	
	<b>Patch Testing</b>		
	Patch Testing	C	

	<b>Laser Surgery</b>		
	Laser surgery for vascular/cutaneous lesions	S	Completion of training with a supervising dermatologist or the equipment manufacturer
	Laser Resurfacing CO2, Erbium	S	Completion of training with a supervising dermatologist
	Skin tightening/Collagen rebuilding	S	Completion of training with a supervising dermatologist
	Continuous Wave CO2	S	Completion of training with a supervising dermatologist
	<b>Phototherapy</b>		
	Non-Augmented UVB	C	
	PUV A	C	
	Narrow- Band UVB	C	
	Photopheresis and Plasmapheresis	C	
	Photochemotherapy	C	
	UVA-1	C	
	<b>Special Procedures Requiring Additional Training</b>		
	MOHS micrographic surgery	S	Completion of an accredited Mohs Fellowship Program
	Dermabrasion	S	Completion of training with supervising dermatologist.
	Scar revisions	C	
	Skin grafting	C	
	Flaps and grafts	C	
	Liposuction	S	Completion of training with a supervising dermatologist.
	Fat Transplantation	S	Completion of training with a supervising dermatologist
	Hair Transplantation	S	Completion of training with a supervising dermatologist
	Moderate/conscious sedation	S	Completion of training with a supervising dermatologist
	<b>Other: (Please write in)</b>		
	Other:		

**SIGNATURES AND RECOMMENDATIONS**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Chair: \_\_\_\_\_ Date: \_\_\_\_\_

COMMITTEE/BOARD APPROVALS

Credentials Committee: \_\_\_\_\_ Date: \_\_\_\_\_

Medical Board: \_\_\_\_\_ Date: \_\_\_\_\_

Hospital Board: \_\_\_\_\_ Date: \_\_\_\_\_