

**Title: CARDIAC RESUSCITATION COMPETENCE FOR MEDICAL STAFF PRACTITIONERS**

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Location: Saint Joseph Regional Medical Center (SJRCM)		Department: Centralized Credentials

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**POLICY:**

1. Education: MD, DO
2. SJRCM has developed a policy in accordance with the Indiana Department of Health that ensures cardiopulmonary resuscitation (CPR) competence in accordance with current standards of practice and hospital policy for all health care workers, including medical staff, and including contract and agency personnel, who provide direct patient care.
3. In response to the IHHA notification it has been identified that CPR competence for medical staff practitioners is considered a core privilege for some specialties and a special request for others. Medical Staff practitioners who have direct patient care contact from time to time encounter a patient in cardiac arrest. The nature of medicine is such that certain specialties such as, but not limited to, anesthesiology, cardiology, critical care and emergency medicine more commonly encounter cardiac arrests. These specialties demonstrate their competency in CPR by sustaining an active practice in their field of specialty, which by the very nature of these specialties demonstrates competency in the maintenance and management of cardiopulmonary function. Therefore the following specialties are privileged to perform CPR as part of their core privileges:
  - A. Anesthesiology
  - B. Emergency Medicine
  - C. Cardiology
  - D. Cardiothoracic Surgery
  - E. Critical Care Medicine
4. Medical Staff practitioners who are not privileged for cardiopulmonary resuscitation and are providing direct patient care in the hospital and a patient has a cardiac and/or pulmonary arrest, the Hospital Code Blue Resuscitation Plan Policy would be initiated and followed with the appropriately trained associate, according to the American Heart Association/Red Cross guidelines, to begin cardiopulmonary resuscitation efforts until the Code Blue Team arrives.
5. Thus, medical staff practitioners who respond to cardiac arrests are competent in cardiopulmonary resuscitation. All other medical staff practitioners are not required to demonstrate competency in cardiopulmonary resuscitation on an ongoing basis.
6. ACLS sponsored by the American Heart Association (AHA) is required. If an initial application has a non-AHA ACLS, they must obtain AHA ACLS certification upon renewal.
7. The following privilege forms include Cardiac Resuscitation as a Special Request and require valid American Heart Association (AHA) ACLS certification, if requested: (PALS for pediatrics.)
  - A. Allergy/Immunology
  - B. Clinical Psychology
  - C. Dermatology

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- D. Endocrinology
- E. Family practice
- F. Gastroenterology
- G. General Surgery
- H. Gynecologic Oncology
- I. Hematology/Oncology
- J. Infection Disease
- K. Internal Medicine
- L. Nephrology
- M. Neurology
- N. Neurosurgery
- O. OB/GYN
- P. Occupational Medicine
- Q. Ophthalmology
- R. Oral and Dental Surgery
- S. Orthopedics
- T. Otolaryngology
- U. Pathology
- V. Pediatric
- W. Physical Medicine and Rehabilitation
- X. Plastic Surgery
- Y. Podiatry
- Z. Psychiatry
- AA. Pulmonary Medicine
- BB. Radiology
- CC. Rheumatology
- DD. Urology

\*This privilege is core for any specialty if the physician is also Critical Care Board Certified.

**References/Standards:**

- Policy Origin Date: February 2013
- Review Date: December 2015, December 2018
- Revised Date: September 2014
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- Reviewed/Recommended By: Medical Executive Committee
- Policy 197