

**Stanford Hospital and Clinics  
Nurse Practitioner  
UROLOGY CLINIC (ADULT)**

**Privileges/Advance Procedures: Urology (Adult), Female and Neurourology**

Name \_\_\_\_\_

Check all that apply:     Infant                       Pediatric Patients             Adult Patients             Geriatric  
 Setting:                     Outpatient                     Inpatient

Requested	Privilege Description	Initial Criteria	Maintenance/Renewal Criteria	Proctoring Requirements
<b>CORE PRIVILEGES</b>				
<input type="checkbox"/>	<p><b>CORE PRIVILEGES</b></p> <ul style="list-style-type: none"> <li>The Nurse Practitioner provides routine care and management of the patient chronic complaints, in collaboration with the supervising physician and through implementation of standardized procedures.</li> <li>Obtains complete histories and performs pertinent physical exams with assessment of normal and abnormal findings on new patients according to written standardized procedures.</li> <li>Obtains interval histories and performs pertinent examinations on return patients.</li> <li>Performs diagnostic studies as indicated upon evaluation of the patient according to written standardized procedures.</li> <li>Performs designated procedures after demonstrated competency and according to written standardized procedures where applicable.</li> <li>Recognizes and considers age-specific needs of patients.</li> <li>Effectively communicates and interacts with patients, families, staff and members of the community from diverse backgrounds.</li> <li>Recognizes situations which</li> </ul>	<p>Successful completion of an approved NP program</p> <p>Current CA RN and CA NP licenses</p> <p>Certification as a Nurse Practitioner by a nationally accredited nursing organization is required.</p> <p><i>*new graduates will be required to obtain certification within 6 months of their hire date.</i></p> <p>Current BCLS</p>	<p>_____ # of patient contacts in two years</p> <p>Minimum of 25 patient contacts required in the past two years</p>	<p>3 chart reviews</p>

	<p>require the immediate attention of a physician, and initiates life-saving procedures when necessary.</p> <ul style="list-style-type: none"> <li>Facilitates the coordination of inpatient and outpatient care and services as needed.</li> <li>Facilitates collaboration between providers and coordination of community resources.</li> <li>Ensures compliance with legal, regulatory, and clinical policies and procedures.</li> <li>Participates in quality improvement initiatives.</li> <li>Provides and coordinates patient teaching and counseling.</li> <li>Other duties as assigned.</li> </ul> <p>Service specific job descriptions can be located within specific departments.</p>			
<input type="checkbox"/>	<p><b>FORMULARY</b> Administer, dispense and prescribe drugs and provide treatment within the NP's scope of practice, and consistent with the NP's skill, training, competence and professional judgment.</p>	<p>Current Furnishing Licensure in the State of California</p> <p><b>AND</b></p> <p>Current Valid DEA</p>	Maintenance of initial criteria	
<b>Requested</b>	<b>Privilege Description</b>	<b>Initial Criteria</b>	<b>Maintenance/Renewal Criteria</b>	<b>Proctoring Requirements</b>
<b>ADVANCED PROCEDURES</b>				
<input type="checkbox"/>	<p><b>Bladder Instillation</b> The purpose of this standardized procedure is to allow the Nurse Practitioner or Physician Assistant to safely and effectively instill medications into the bladder.</p>	<p>Perform at least 3 procedures under the direct supervision of the faculty, and such additional procedures as are necessary to verify clinical competency.</p> <p><b>SUPERVISION: Personal</b></p>	<p>____ # of procedures performed in the past 2 years</p> <p>Minimum of 6 procedures required in the past two years</p> <p><b>SUPERVISION: General</b></p>	3 chart reviews
<input type="checkbox"/>	<p><b>Pelvic Floor Therapy</b> The purpose of this standardized procedure is to allow the Nurse Practitioner or Physician Assistant to safely and effectively treat patients using pelvic floor therapy</p>	<p>Perform at least 3 procedures under the supervision of the faculty, and such additional procedures as are necessary to verify clinical competency.</p> <p><b>SUPERVISION: Personal</b></p>	<p>____ # of procedures performed in the past 2 years</p> <p>Minimum of 6 procedures required in the past two years</p> <p><b>SUPERVISION: General</b></p>	3 chart reviews

<input type="checkbox"/>	<p><b><u>Percutaneous Tibial Nerve Stimulation (PTNS)</u></b>  The purpose of this standardized procedure is to allow the Nurse Practitioner (NP) or Physician Assistant (PA) to safely and effectively treat patients using pelvic floor therapy.</p>	Perform at least 3 procedures under the direct supervision of the faculty, and such additional procedures as are necessary to verify clinical competency.  <b>SUPERVISION: Personal</b>	_____# of procedures performed in the past 2 years.  <b>Minimum of 6 procedures required in the past two years.</b>  <b>SUPERVISION: General</b>	3 chart reviews
--------------------------	--	---	--	-----------------

**I. Supervision**

**SUPERVISION:** The exercise of these privileges requires a designated collaborating/supervising physician with clinical privileges at SHC. The supervising/collaborating physician must provide supervision as designated in the privileges per the following definitions;

**General Supervision** = physician is available either by phone or other electronic means of communication

**Direct Supervision** = physician is on premises

**Personal Supervision** = physician in the exam room or procedure area

(A physician cannot supervise more than four NP's at one time)

Physician supervision is also provided by:

Chart audits on random charts as an integral part of departmental and practice performance improvement programs

**II. Consultation**

Nurse Practitioners will work under the supervision of the Supervising Physician in the service. In addition to general consultation, immediate physician consultation will be obtained under the following circumstances from Attending Supervising Physician or his/her designee:

- a. With emergent conditions requiring prompt medical attention;
- b. With acute decompensation of the patient situation;
- c. When there is a problem that is not resolving as anticipated with unexplained, historical, physical and/or laboratory findings;
- d. Upon request of the patient, Allied Health Professional, or physician.

Follow-up and referral:

Performed in accordance with the standard of practice and/or with the consulting physician's recommendation.

**I attest that I have met all of the required criteria and will meet all competency requirements for each procedure that I have requested and I will follow the protocol for the advance procedures requested.**

\_\_\_\_\_  
Nurse Practitioner Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date