

Appendix 5

**List of Core and Specialised Procedures for
Emergency Medicine**

The list below of privileges for core and specialised procedures is **subject to periodic review** by Farrer Park Hospital and/or Farrer Park Medical Centre from time to time depending on its business needs and/or regulatory changes.

As such, please note that your application for practising privileges is **also subject to review** and where required, Farrer Park Hospital and/or Farrer Park Medical Centre will notify you in writing to make a fresh application.

Part A: Please tick in the appropriate boxes for the core procedures that you are applying for.

CORE PROCEDURES	Tick the correct box	
	Yes	No
Lumbar Puncture		
Examination Procedures On Larynx		
Thoracocentesis		
Airway Management/Endotracheal Intubation		
Ventilatory Support		
Non Invasive Ventilatory Support		
Insertion Temporary Transvenous Electrode Cardiac/Defibrillator		
Cardiopulmonary Resuscitation		
Insertion of Chest Tube		
Central Venous Line Insertion		

Part B: Application to perform specialised procedures requires a referee’s affirmation of applicant’s clinical competency.

Please list the procedures that you are performing (if any) for review by the Farrer Park Hospital and/or Farrer Park Medical Centre and/or Medical Boards. Further information and/or interview may be requested after the review.

Name of Referee: _____
Designation: _____
Date: _____
Note to referee: Please sign against the procedures ticked “Yes” by applicant to affirm that he/she is competent to perform these procedures safely and independently.

SPECIALISED PROCEDURES	Tick the correct box		Signature of Referee
	Yes	No	

Signature of applicant: _____

Date: _____