

This policy applies to: <input checked="" type="checkbox"/> <i>Stanford Health Care</i> <input checked="" type="checkbox"/> <i>Lucile Packard Children’s Hospital Stanford</i>	Last Approval Date: June 2017
Name of Policy: SHC Physicians and/or APP Providing Care at LPCHS	Page 1 of 2
Departments Affected: All Departments	

I. PURPOSE

The purpose of this policy is to provide guidelines for allowing credentialed and privileged Stanford Health Care (SHC) physicians and Advanced Practice Professionals (APP) to provide care and/or consultation to patients at Lucile Packard Children’s Hospital Stanford (LPCHS)

II. POLICY STATEMENT

SHC practitioners are credentialed and privileged by the Medical Staff Services Department (MSSD) for Stanford University Medical Center (SUMC). The MSSD department maintains a credentials file for each LPCH and SHC practitioner. If a SHC provider is requested by an LPCH physician to provide care to or consult on an LPCHS patient and has already been credentialed and privileged at SHC, that member’s credentials and privileges from SHC will be shared with LPCHS. The SHC/LPCHS Information Sharing Agreement will become in effect. The agreement allows for sharing of all credentials, privileges and peer review and quality information between both hospitals. The LPCHS Attending retains overall responsibility of the patient at all times.

III. PROCEDURES

The SHC practitioner providing the care to or consult on an LPCHS patient should be an active/courtesy member in good standing at SHC and will have the appropriate level of privileges to provide care to or consult on an LPCH patient. The SHC Staff Category will be automatically assigned to the SHC provider coming to LPCH.

- A. The request for a SHC provider to provide care to or to consult on an LPCH patient should be made by the attending physician of record or his/her physician designee. Notification can be made by providing the name of the SHC physician and clinical service by emailing Medstaff@stanfordhealthcare.org.

The Medical Staff Services Department shall maintain a record of all SHC practitioners who are asked to provide care to or consult on an LPCH patient.

IV. DOCUMENT INFORMATION

- A. Author/Original Date

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June 2011 – Debra R. Green, MPA, CPMSM, CPCS, Ross Campbell, Medical Staff
Attorney Feb 2013, May 17

Related Documents: SHC/LPCH Information Sharing Agreement

- B. Gatekeeper of Original Document
Director, Medical Staff Services

- C. Distribution and Training Requirements
 1. This policy resides in the Medical Staff Policy Manual of SHC and LPCH.
 2. The department/unit/clinic manager will be responsible for communicating this information to the applicable staff.

- D. Review and Renewal Requirements
This policy will be reviewed and/or revised every three years or as required by change of law or practice.

- E. Review and Revision History
- F. Approval

LPCH Policy Committee – 8/11, 8/12, 5/13
LPCH/SHC MEC – 8/11, 6/12, 5/13, 6/17

LPCH/SHC Board of Directors 8/11, 6/12, 5/13, 6/17

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