



# Privileges for Peace Corps Medical Officers - Physicians

Name: \_\_\_\_\_  
*Please Print Your Name and Credentials* \_\_\_\_\_ *Country*

## PRIVILEGES REQUESTED

**Core Privileges** – Privileges to perform duties that fall within the typical scope of a MD or DO.

### QUALIFICATIONS FOR PRIVILEGES

*To be eligible for core privileges, the MD or DO applicant must meet the following qualifications:*

- Doctor of Medicine or Doctor of Osteopathy degree from a school in the United States or Canada approved by a recognized accrediting body in the year of the applicant’s graduation; **OR**
- A Doctor of Medicine or equivalent degree from a foreign medical school that provided education and medical knowledge substantially equivalent to accredited schools in the United States, plus Education Commission Foreign Medical Graduate (ECFMG) certification and/or graduation from a school listed in the World Directory of Medical Schools (<https://search.wdoms.org>).
- Validation of foreign medical school accreditation
- Valid clinical MD or DO licensure
- Applicable knowledge and experience

### CORE PRIVILEGES

#### Privileges included in the Core:

Privileges that fall within the typical scope of a MD or DO practice include:  
*(Check all proficient privileges)*

#### ESSENTIAL PRIVILEGES

##### Administrative

- Accompany medevacs when indicated
- Adhere to Peace Corps Medical Technical Guidelines
- Maintain an adult immunization program
- Maintain current and complete documentation of clinical care
- Perform administrative functions of the health unit
- Provide health education to Trainees/Volunteers

##### Clinical and Procedures

- Assess, diagnose, and manage acute and chronic clinical issues
- EKG tracing and interpretation
- Initiate life support when necessary
- Local infiltration anesthesia
- Office diagnostics including commercial testing kits for HIV, urine dips, HCG, etc.
- Patient triage
- Perform comprehensive patient history taking and physical exams including pelvic exams/ pap smears
- Peripheral venipuncture for lab work and IV administration of meds

- Prescribe pharmacologic agents including controlled substances according to the Medical Technical Guidelines
- Provide emotional support and short-term counseling
- Pulse oximeter and PEAK flow reading
- Serve as a clinical advisor for PCMO-NPs
- Serve as a clinical prescriber for PCMO-RNs
- Simple laceration repair/I & D’s
- Tuberculin skin test placement and reading
- Wart ablation on extremities

##### Licensure

- Accrue 30 or more hours of continuing education annually

##### DESIRED PRIVILEGES

- Anoscopy
- Basic microscopy including UAs, wet mounts, stool
- IUD removal
- Needle aspiration for culture
- Preparation of thick and thin malaria smears
- Punch/Excisional/Shave biopsy
- Toenail removal
- Urethral catheterization

**\*\* On a separate sheet of paper, please describe any major, unexpected complications you have encountered for any of the Core Privileges you are requesting.**

**ACKNOWLEDGEMENT OF PRACTICIONER**

*I have requested only those clinical privileges for which, by education, training, current experience, and demonstrated performance, I am qualified to function as a Peace Corps Medical Officer and a MD or DO.*

*I understand that in conducting any clinical privileges granted, I am constrained by the Peace Corps Office of Health Services policies and rules.*

Applicant Signature: \_\_\_\_\_  
*Please Sign Your Name* \_\_\_\_\_  
*Date*

<b>CLINICAL SERVICE RECOMMENDATION</b>	
<b><u>Core Clinical Privileges</u></b>	
<input type="checkbox"/> Approved as requested	
<input type="checkbox"/> Approved with modification(s) <i>(specify below)</i>	
<input type="checkbox"/> Denied	
_____	
_____	
<i>I have reviewed the requested clinical privileges and supporting documentation for the above named practitioner and recommend action on the privileges as noted above:</i>	
_____	_____
Signature	Date
Chair, Credentialing Committee	
_____	_____
Signature	Date
Medical Director, Office of Health Services or Designee	