

**YALE-NEW HAVEN HOSPITAL  
DEPARTMENT OF PHYSICIAN SERVICES  
POLICY & PROCEDURE  
MEDICAL STAFF GUESTS & OBSERVERS**

**Purpose:** To outline the requirements for practitioners who are not members of the YNHH Medical Staff but wish to participate in patient care delivered at YNHH as a “guest” or to simply “observe” patient care delivered by current members of the YNHH Medical Staff.

**Scope:** Under this policy, “practitioner” refers to any physician, dentist, podiatrist or affiliated practitioner (APRN, PA, CNM, CRNA) who is not presently a member of the YNHH Medical Staff.

**Policy:** Temporary privileges are issued to practitioners in accordance with the procedure, and under the circumstances, described below.

**Procedure:**

1. Guests

“Guests” are distinguished from “Observers” in that they may be permitted to participate in patient care activities in cooperation with a current, appropriate based upon specialty, member in good standing of the Active Medical Staff and are, therefore, required to fulfill basic credentialing requirements necessary to qualify for “temporary privileges.”

Practitioners who have been invited to participate in the delivery of care at Yale-New Haven Hospital for a limited period of time or to assist in the care of a specific patient and who would otherwise have no need to obtain full Medical Staff privileges (due to geography or other reasons) may apply for Guest Privileges. Such individuals may include visiting professors or others who come to the Hospital to perform or assist an existing Medical Staff member in a select procedure or serve in a role of definitive scope.

Guests are typically involved in the care of a specific patient for a specific procedure or admission and work under the direction of or in collaboration with a current member of the Active Medical Staff.

The Department to which the physician will be assigned must make a request by completing the Request for Temporary/Guest Privileges Form and specifying that the physician will be a “Guest”. The request must be approved by the appropriate Chief/Associate Chief and Section Chiefs (when relevant) and the Chief of Staff.

Guest appointments are reported at the next Medical Board / Medical Board Administrative Committee meeting.

Requests must be made with a minimum of seven (7) business days notice. Sufficient notice is required to allow for adequate time for processing. **Applications submitted without enough notice may be denied.**

The following will be required to be submitted by the applicant before Guest privileges may be recommended:

- “Application for Physician Guests” form
- Signed “Authorization to Release Records and Information” form including attestation of having read the YNHH Policies and Procedures with regard to Infection Control, Standard Precautions and Safety and Security.
- “Practice History Information” questionnaire including a full explanation for any practice history questions answered affirmatively
- “Immunization Testing Record” including proof of PPD within the past 12 months. Chest X-ray results required if applicant is PPD positive
- Signed “Medical Staff Guest & Observer Confidentiality Agreement” in which applicant attests that he/she will comply with HIPAA regulations with respect to the confidentiality of YNHH patient information
- Copy of current malpractice insurance coverage
- Copy of current C.V.

The following will be completed by the Department of Physician Services before Guest privileges may be recommended:

- Follow up, as applicable, on any affirmatively answered practice history information questions.
- Verify current licensure in good standing in the State of Connecticut and/or any other of the United States in which the physician is licensed. (Note: Except under extraordinary circumstances and requiring the approval of the Chief of Staff, Individuals who are not licensed in one of the United States are not eligible for Guest privileges.)
- Conduct a NPDB query
- Visually verify that malpractice insurance coverage provided by practitioner is current and of sufficient quantity in accordance with the Medical Staff Bylaws. Contact the insurance carrier to verify coverage for services rendered at Y-NHH.
- Contact the hospital(s) at which the physician currently practices to verify current membership in good standing and, specifically, to determine current competence and ability to perform the privileges requested.
- Review by Legal & Risk Services as applicable based upon results of above.

Note: As outlined in Article V, Section G of the “Medical Staff Bylaws,” the Department Chief and Associate Chief, upon whose request Guest/Temporary Privileges are granted, are responsible for the supervision of the physician. In addition, the Guest/Temporary Privileges of any physician are subject to all of the other conditions and requirements as described in Article V, Section G.

Upon approval, Guests are provided with a letter which serves as their identification while on YNHH premises and outlines restrictions related to their activity. In certain circumstances, Guests may be provided with a temporary YNHH identification badge. As applicable, the Medical and Nursing Directors of the Operating Room are notified of any Guests who have been approved participate in perioperative care.

2. Observers:

Practitioners who have been invited to Y-NHH strictly to *observe* patient care are permitted to do so under the direct supervision of a member of the Active Medical Staff. Such individuals are subject to some of the requirements for Guest Privileges as described below. Medical Staff members who wish to bring in physician observers must notify the Department of Physician Services with a minimum of seven (7) business days.

The requirements for application as an observer are described below:

A. The Medical Staff member and the Observer complete and sign the “Application for Physician Observers”. A member of the Active Medical Staff must agree, in writing, to be responsible for the observer and must attest that the observer will not engage in any of the following activities:

- Speaking with patients
- Examining patients
- Writing in or accessing patient charts
- Advising members of the medical staff regarding patient care or treatment
- Participating in patient care in any manner

Additionally, observers in Y-NHH Operating Rooms are to remain “unscrubbed” at all times and are not permitted to operate any equipment connected with the delivery of patient care.

The completed “Application for Physician Observers” must be returned to the Department of Physician Services (7) days prior to the desired start date.

B. Additionally, the observer must submit the following documentation:

- “Immunization Testing Record” including proof of PPD within the past 12 months. Chest X-ray results required if applicant is PPD positive.
- Signed “Medical Staff Guest & Observer Confidentiality Agreement” in which applicant attests that he/she will (1) comply with HIPAA regulations with respect to the confidentiality of YNHH patient information and (2) comply with the YNHH Policies and Procedures with regard to Infection Control, Standard Precautions and Safety and Security.

Depending upon the nature and duration of the observation period, upon approval, physician observers may be provided with a temporary YNHH identification badge. As applicable, the Medical and Nursing Directors of the Operating Room are notified of any Observers who have been approved for perioperative care.

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