



AUSTRALASIAN COLLEGE
FOR EMERGENCY MEDICINE

POLICY

Document No: P07
Approved: Jul-95
Last Revised: Jul-16
Version No: 04

POLICY ON CLINICAL PRIVILEGES FOR EMERGENCY PHYSICIANS

1. PURPOSE AND SCOPE

This document is a policy of the Australasian College for Emergency Medicine (ACEM) and relates to the hospital appointment of Fellows of ACEM.¹

The policy is applicable to emergency departments in general.

2. POLICY

An emergency physician must be registered with the Medical Board of Australia (MBA) or Medical Council of New Zealand (MCNZ), and possess the Fellowship of ACEM or a postgraduate emergency medicine fellowship that has been assessed by ACEM to be equivalent in standing, in order to be qualified in the specialty of emergency medicine.^{1, 2} Upon receipt of these qualifications, the emergency physician will be entitled to utilise the term 'Fellow of ACEM (FACEM)' to describe their position.

Emergency physicians who must practise with conditional registration, or with restrictions placed upon their registration, have a duty to fully and openly disclose those conditions or restrictions.

Emergency physicians should have the experience appropriate to the seniority of the appointment.

Emergency physicians may be remunerated to perform duties outside their usual role provided there is mutual agreement between the emergency physician and the employing authority.

3. PROCEDURE AND ACTIONS

The clinical privileges of an emergency physician extend to direct clinical patient care, the supervision of junior medical staff, clinical support duties and risk management activities. These activities include, but are not limited to, quality assurance, teaching, research and participation in activities that relate to the maintenance of professional standards, and professional College activities to further emergency medicine.

All emergency physicians will have membership of the hospital's Department of Emergency Medicine proportional to their full or fractional appointment.

Emergency medicine is not solely practised in the ED and, by the mutual agreement of the appropriate authority, emergency physician clinical privileges may extend outside the ED and may include:

- Clinical assessment of the deteriorating patient.

¹ The ACEM P02 Policy on Standard Terminology defines an emergency physician as a 'registered medical practitioner trained and qualified in the specialty of emergency medicine, with the recognised qualification in Australasia being that of Fellowship of ACEM.'

² The ACEM P02 Policy on Standard Terminology defines emergency medicine as 'a field of practice based on the knowledge and skills required for the prevention, diagnosis and management of acute and urgent aspects of illness and injury affecting all patients of all age groups with a full spectrum of undifferentiated physical and behavioural disorders. It further encompasses and understanding of the development of pre-hospital and in-hospital emergency medical systems and the skills necessary for this development.'

- Clinical work in short stay units.
- Clinical work in diagnostic units.
- Clinical work in medical assessment units.
- Clinical work in toxicology services.
- Duties under the local Mental Health Legislation.
- Transporting patients outside the hospital premises such as inter facility transports.
- Clinical work in intensive care.
- Clinical work in rapid response teams (e.g. MET Call or Code Blue).
- “Hospital in the Home”.
- Clinical work in telemedicine.
- Clinical work in other inpatient services as negotiated locally.
- The collection of medico-legal specimens or performing forensic medical examinations.
- Duties related to organ and tissue donation.
- Duties related to child protection.
- Outpatient services.
- Other duties mutually agreed upon to be necessary or appropriate.

4. REFERENCES

1. ACEM. P02 Policy on Standard Terminology. Melbourne (VIC): ACEM; 2014.

5. DOCUMENT REVIEW

Timeframe for review: every five (5) years, or earlier if required.

5.1 Responsibilities

Document authorisation:	Council of Advocacy, Practice and Partnerships
Document implementation:	Standards Committee
Document maintenance:	Policy and Research Department

5.2 Revision History

Version	Date of Version	Pages revised / Brief Explanation of Revision
V1	Jul-95	Approved by Council
V2	Nov-03	Approved by Council
V3	Mar-11	Approved by Council
V4	Jul-16	Template updated. Sections 1 & 2: Clarification of qualifications required to use the term 'FACEM'. Section 3: 'Procedure and Actions' section expanded to include additional emergency physician clinical privileges.

© Copyright – Australasian College for Emergency Medicine. All rights reserved.