

TITLE: EKG READER PROCEDURE AND CREDENTIALING CRITERIA

MANUAL: MEDICAL STAFF

Effective Date: 04/25/00

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Approval: /s/Jeannett Currie, MD,
Chief of Staff

Reviewed: 3/13/00, 8/04, 8/09, 3/10, 10/11,
 5/13, 3/15.

PROCEDURE FOR SCHEDULING EKG READERS

Lists are compiled by the EKG Department with each member of the EKG Reader Panel being scheduled for one-week increments. A “member of the EKG Reader Panel” is a member of the Medical Staff who has (a) met the credentialing criteria for EKG Interpretation, as outlined in this policy, (b) been approved through the Medical Staff’s process (as outlined in the Medical Staff Bylaws) for obtaining and renewing privileges to read EKGs, and (3) who has a contract with the hospital for provision of and payment for this service.

Readers are responsible for obtaining their own coverage (by a physician on the EKG Reader panel) if they are unable to read as scheduled.

CREDENTIALING CRITERIA FOR EKG INTERPRETATION

Criteria for the granting and renewal of EKG (Panel) Interpretation privileges include the following:

1. Board Certification or Qualification, as described in the Medical Staff Bylaws, in Internal Medicine or Cardiovascular Disease.
2. Documentation of 100 interpretations/year.
3. For those physicians not board certified in cardiovascular disease, completion, with a passing grade, of the examination approved for use by the Medical Executive Committee as a criterion for demonstrating competency in EKG interpretation.
4. Medical Staff members who are not currently on the panel and wish to apply for EKG (Panel) Interpretation privileges will be given the opportunity once each year to successfully complete the examination. The annual examination deadline will be no later than September 1 of the year preceding the beginning of the 12-month EKG Panel Schedule.”

Author/Department: Department of Cardiovascular Medicine & Surgery	
2004 References: AHA/ACC/ASIM Guidelines	
Reviewed 8/04; Revised 8/09; Revised 3/10, 5/13, 3/15	
CVMS Dept, 7/20/04; Revisions: 8/25/09; 3/23/10; 10/11; 05/2013; Credentials Committee 2/25/15; MEC 3/10/15; BOT 3/24/15	Distribution: Medicine and CVMS Departments

Request for inclusion on the EKG Reader Panel requested by: _____

I attest that I have met the qualifications outlined in this policy and am requesting inclusion on the EKG Reader panel.

Requesting physician’s signature: _____

CVMS Department Chairman Recommendation: [] Approval [] Other: _____

CVMS Department Chairman Signature: _____

Credentials Committee action & date: _____

MEC action & date: _____

Board action & date: _____