

Approved October 2017

## *Hospital Disaster Physician Privileging*

Revised October 2017

Revised January 2010 with  
current title

Originally approved February  
2003 titled, "Hospital Disaster  
Privileging"

The American College of Emergency Physicians (ACEP) believes that all hospitals should have a process in place which allows emergency privileging of additional physician staff in the event of activation of the hospital disaster (emergency preparedness) plan. Should it be necessary to activate the disaster plan, additional physician support may be needed immediately to supplement the existing medical staff. A Hazard Vulnerability Assessment (HVA) or other similar evaluation should be undertaken to proactively identify potential emergencies, including any circumstances unique to the particular hospital that could suddenly affect physician demand or supply. It should also include the hospital's role in the community and the potential of displacing the medical staff in the event of hospital evacuation to an alternate site or hospital through community and mutual aid agreements.

The Joint Commission (TJC) has put forth standards (TJC Standard EM.02.02.13) to address the issue of Hospital Disaster Physician Privileging. During disasters, the hospital may grant disaster privileges to volunteer licensed independent practitioners (LIP). As defined by TJC: A disaster is an emergency that, due to its complexity, scope, or duration, threatens the organization's capabilities and requires outside assistance to sustain patient care, safety, or security functions.

Therefore, ACEP agrees with and reaffirms the TJC Hospital Accreditation Standards, EM.02.02.13 recommendations.