

**CONFIDENTIAL PEER REVIEW DOCUMENT
Focused Professional Practice Evaluation/Proctoring Evaluation**

To be completed by the Credentials Committee and Chief of Service

The attached Peer Review documents were reviewed by the department credentials committee.

Name of Practitioner: _____

This review is for a New Practitioner:

is representative of their CORE clinical practice (5 FPPEs).

Category 1 privilege (3 FPPEs) _____
Name of Privilege

This review is for an Additional Privilege (practitioner currently on staff): _____
Name of Privilege

This review is for a Privilege that required proctoring: _____
Name of Privilege

The Credentials Committee:

has determined that the Focused Professional Practice Review has been successfully completed.

has determined that the proctoring has been successfully completed and the practitioner may now perform this privilege independently. No further proctoring or FPPE is required. (MEC 10/23)

recommends that the Focused Professional Practice Review should be extended for the following reasons:

recommends that the requested privilege(s) should not be granted/continued for the following reasons:

Credentials Committee Chair

Date

To be completed by the Chief of Service

I concur I do not concur for the following reasons:

Chief of Service

Date