Practitioner Name:__________________________________________________________

Practice Specialty Requested:______________________________________________ License #________________________

Supervising Physician Name:______________________________________________ Specialty_____________________

Qualifications:
- Certification by the American Board of Cardiovascular Perfusion or
- Evidence of having performed at least 40 perfusions annually for five of the last six years in health facilities licensed within
  the United States or
- A diploma from a CAHEA accredited perfusion training program and evidence of being in the process for ABCP examination
  (these individuals will use the title Graduate Perfusionist until certification is achieved).
- Members of the AmSECT

Monitoring:
- All cases are monitored by the Surgeon and attending Anesthesiologist, e.g., Pressure Awareness, ABG, ACT, Electrolytes,
  Fluid Management

Responsibilities:
- Set up circuit in safe, sterile manner (check list)
- Order and prepare necessary solutions and medications
- Prime circuit with a sanguinous prime
- Debubble
- Initiate patient cannulated pump lines connected to patient cannulae
- Initiate bypass
- Maintain safe line pressure, art mean, and volume in circuit
- Draw blood gas after patient stabilized. Then CAI400 calibrated to gas. Future ABG’s analyzed PRN with 1 definitely
  drawn during warming phase. ABG’s analyzed in satellite lab or with gem primier. (Inform Surgeon and Anesthesia
  Attendings, and OR Resident of values)
- Analyze ACT every 30 minutes or PRN
- Cool patient to a temperature designated by the surgeon
- Decrease flow as temperature decreased, low flow limit determined by surgeon
- Warm patient per surgeon’s request
- Decrease flow to meet metabolic demand
- Add blood, hemoconcentration commenced
- Give medications, as needed
- Terminate bypass when temperature is approximately 37 degrees core
- Deliver blood through arterial cannulae via pump per physician’s request PRN to ensure adequate filling pressures
- Remove cannulae
- Hand off lines
- Dispose of circuit in a safe manner
**Other Responsibilities:**
- Maintain an accurate perfusion record.
- Establish and maintain the appropriate anticoagulation status of the patient according to established protocol.
- Maintain appropriate gas exchange during extracorporeal circulation following physician designated parameters.
- Maintain blood flow rate and blood pressure in following physician designated parameters.
- Maintain a safe operational level in the extracorporeal circuit during extracorporeal circulation.
- Employ appropriate safety devices.
- Utilize appropriate monitoring devices.
- Make a responsible effort at cost containment.
- Utilize properly maintained equipment in the conduct of clinical perfusion.
- Seek to continually improve the quality of perfusion care delivered to the patient.
- Conduct extracorporeal circulation according to established procedures and protocols in accordance with hospital policy, and upon prescription by a physician. These procedures and protocols shall include emergency procedures and catastrophic event management.
- Conduct self in a professional and ethical manner at all times.
- Maintain patient confidentiality

To follow all LLUMC operating room policies and procedures.

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**Acknowledgment of AHP**

In accordance with the provisions of Section 3055 of the Business and Professions Code, I am appropriately licensed (to practice in the State of California and subject to the rules and regulations of the appropriate California State Licensing Board, if applicable. I acknowledge I have received a copy of the Medical Staff Bylaws and Rules and Regulations, and agree to be bound by the terms of the Bylaws of the Medical Staff, of the hospital, and all other manuals and policies relevant to my practice privileges at Loma Linda University Medical Center.

I have requested only those specific practice privileges for which by education, training, current experience and demonstrated performance I am qualified and wish to exercise at Loma Linda University Medical Center, and I understand that:

(a) In exercising any practice privileges granted, I am constrained by any hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.

(b) Any restriction on the practice privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the Medical Staff Bylaws.

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Applicant Signature  
Date

Supervising Physician Signature  
Date

Service Chief Signature  
Date

Credentials Committee Chair  
Date

Medical Staff Executive Committee Chair  
Date

Governing Board Officer/Designee  
Date