



LAC+USC Attending Staff Association

PRACTITIONER FOCUSED PROFESSIONAL PRACTICE EVALUATION (FPPE)  
CONFIDENTIAL PEER REVIEW DOCUMENT

Review Range: From: \_\_\_\_\_ to: \_\_\_\_\_

PRACTITIONER: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

- FPPE Reason:
- New Applicant
  - New privilege(s) for existing practitioner
  - Focused Review

Assigned Reviewer: \_\_\_\_\_  
Type of Monitoring: Retrospective Chart, Close observation and/or General Impression

FPPE Indicators:

Special Procedures:

FIN Case 1 \_\_\_\_\_, FIN Case 2. \_\_\_\_\_, FIN Case 3. \_\_\_\_\_

FACTOR	EVALUATION (* Requires further comment)					
<b>Patient Care</b>						
Provides care that is compassionate, appropriate, and effective for the promotion of health, prevention of illness, treatment of disease, and care at the end of life. These measures may include:						
N/U means Not Applicable or Unknown	Case 1		Case 2		Case 3	
Accurate & complete H&P, appropriate to setting	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Appropriate components of physical exam present	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Complete assessment and plans	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Provides quality patient education	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Competently performs medical and/or surgical procedures delineated by privileges	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Provides standard of care; did not omit required care or include unnecessary care	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Comments: _____						
<b>Medical/Clinical Knowledge</b>						
Demonstrates knowledge of established and evolving biomedical, clinical and social sciences, and applies this knowledge to patient care and education of others. These measures may include:						
	Case 1		Case 2		Case 3	
Appropriate selection of diagnostic tests	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Appropriate interpretation/analysis of results	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Appropriate integration of findings and/or diagnostic studies to formulate a differential diagnosis	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Overall integration of clinical information into treatment planning	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Pharmacological knowledge	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Appropriate ordering of therapeutics	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U	<input type="checkbox"/> Met	<input type="checkbox"/> Not Met*	<input type="checkbox"/> N/U
Comments: _____						
<b>Practice-Based Learning &amp; Improvement</b>						
Uses scientific evidence and methods to investigate, evaluate and improve patient care practices. These measures may include:						
<i>These measures are determined through other methods than Chart Review</i>						
Applies evidence based medicine to clinical decisions						<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Awareness of quality improvement measures and application to clinical practice						<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Comments: _____						

FACTOR	EVALUATION (*Requires further comment)
<b>Interpersonal &amp; Communication Skills</b> Demonstrates interpersonal and communication skills that enable him/her to establish and maintain professional relationships with patients, families and other members of health care teams. These measures may include:	
<i>These measures are determined through other methods than Chart Review</i>	
Communications and behaviors with patients are effective and appropriate	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Communications and behaviors with other clinicians are effective and appropriate	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Demonstrates emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Uses effective listening, nonverbal, explanatory, interviewing, and writing skills to elicit and provide information	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Comments: _____ _____ _____	
<b>Professionalism</b> Demonstrates behaviors that reflect a commitment to continuous professional development, ethical practice, understanding and sensitivity to diversity and a responsible attitude toward patients, their profession and society. These measures may include:	
<i>These measures are determined through other methods than Chart Review</i>	
Displays sensitivity and responsiveness to patients' culture, age, gender, and disabilities	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Commitment to personal excellence and ongoing professional development	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Keeps appropriate medical record documentation	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Comments: _____ _____ _____	
<b>Systems-Based Practice</b> Understands the contexts and systems in which health care is provided, and applies this knowledge to improve and optimize health care. These measures may include:	
<i>These measures are determined through other methods than Chart Review</i>	
Uses information technology resources to support patient care decisions and patient education	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Practices cost-effective healthcare and resources allocation that does not compromise quality of care	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Applies medical information and clinical data systems to provide more effective, efficient patient care	<input type="checkbox"/> Met <input type="checkbox"/> Not Met* <input type="checkbox"/> N/U
Comments: _____ _____ _____	

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The following section is to be completed by the Department Chair/Chief or designee:

Based upon review and assessment of the results of the monitoring and evaluation activities, it is determined that:

- No further action required for FPPE; continue current privileges.
- Limit or modify privilege(s)\* **(Comments are required)**
- Further need for FPPE\* **(Comments are required)**

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Evaluation Reviewed by Chair/Chief or designee: \_\_\_\_\_ Date: \_\_\_\_\_

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To Credentials Committee: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

To ASA Executive Committee: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date