香港中文大學醫院
CUHK
Medical Centre

Name of the Applicant: _____

	Paediatrics	Privileges Applied by Applicant	Privileges Granted by CUHKMC
(A)	**Core Privileges**		
A1	Sedation for Procedures	☐	☐
A2	Percutaneous venous catheter insertion	☐	☐
A3	Urinary catheter insertion	☐	☐
A4	Neonatal resuscitation (NRP)	☐	☐
A5	Paediatric Advance Life support (PALS)	☐	☐
A6	Intubation of sick children	☐	☐
A7	Chest drain insertion	☐	☐
A8	Skin biopsy	☐	☐
(B)	**Subspecialty procedures**		
	Paediatric Respiratory Medicine		
B1.1	Full lung function test and interpretation	☐	☐
B1.2	Perform & interpretation of polysomnogram	☐	☐
B1.3	Flexible bronchoscopy	☐	☐
B1.4	Others (Please specify) :		
	_____	☐	☐
	_____	☐	☐
	Paediatric Neurology		
B2.1	Muscle & peripheral nerve biopsy	☐	☐
B2.2	EEG interpretation	☐	☐
B2.3	Ketogenic diet therapy	☐	☐
B2.4	EMG and NCV examination	☐	☐
B2.5	Others:		
	_____	☐	☐
	_____	☐	☐
	Paediatric Haematology & Oncology		
B3.1	Bone marrow examination	☐	☐
B3.2	Trephine biopsy	☐	☐
B3.3	Others:		
	_____	☐	☐
	_____	☐	☐
	Paediatric Cardiology		
B4.1	Transthoracic echocardiogram	☐	☐
B4.2	Trans-oesophageal echocardiogram	☐	☐
B4.3	Cardiac catheterization	☐	☐
B4.4	Electrophysiologic studies and ablation procedure	☐	☐
B4.5	Treadmill	☐	☐
B4.6	Cardiopulmonary exercise test	☐	☐
B4.7	Pericardial aspiration	☐	☐
B4.8	Others:		
	_____	☐	☐
	_____	☐	☐

	Developmental-Behavioural Paediatrics		
B5.1	Others:		
	_____	☐	☐
	_____		
	Genetics & Genomics (Paediatrics)		
B6.1	Others:		
	_____	☐	☐
	_____		
	Paediatric Endocrinology		
B7.1	Others:		
	_____	☐	☐
	_____		
	Paediatric Immunology, Allergy and Infectious Diseases		
B8.1	Others:		
	_____	☐	☐
	_____		
	Paediatric Inherited Metabolic Medicine		
B9.1	Others:		
	_____	☐	☐
	_____		
(C)	**Other Paediatric Procedures** (Please specify)**:**		
	_____	☐	☐
	_____		

Signature of Applicant **Date**

(Form version: 20260827)

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Approved by:

Signature: _____ Date: _____

Name & Title: _____