

Purpose:	Required credentials and privileges for Family Physician's to work in Family Medicine (FM) sites within Island Health's Department of Primary Care (PC)	
Scope:	 Guidelines for Credentialing and Privileging Family Physician's who work in Family Medicine in Urban and Rural setting. This includes Inpatient Most Responsible Practitioner (MRP), Long Term Care (LTC) MRP, Rural Emergency and Out Patient Ordering. 	
Outcomes:	Ensuring minimum required qualifications of Family Physician's to work in Family Medicine within the Department of Primary Care in order to maintain a high quality of patient care	
Developed by:	Department of Primary Care	
Approved:	Island Health – Health Authority Medical Advisory Committee –, 2021	

1.0 Introduction

This guideline describes privileging requirements for Family Physician's work in the Department of Primary Care in Island Health Hospital Act sites. Island Health Family Medicine is practiced in:

- Tertiary Hospitals;
- Community Acute Care Hospitals;
- Rural Acute Care Hospitals;
- Rural Urgent Care Centres;
- Rural Health Centres; and
- Long Term Care Centres.

Credentialing and Privileging is required at the following sites:

- **Geo 1 -** Cormorant Island Health Centre, Gold River Health Centre, Kyuquot Health Centre, NIH Campbell River and District, NIH Comox Valley, Port Alice Health Centre, Port Hardy Hospital, Port McNeill Hospital, Sointula Health Centre, Tahsis Health Centre.
- Geo 2 Dufferin Place (LTC), Eagle Park Health Care Facility (LTC), Nanaimo Regional General Hospital,
 Oceanside Health Centre (Urgent Care, Medical Day Care, Primary Care), Tofino General Hospital,
 Trillium Lodge (LTC), West Coast General Hospital, Westhaven (LTC).
- **Geo 3** Cairnsmore Place (LTC), Chemainus Health Care Centre, Chemainus Health Care Centre (LTC), Cowichan District Hospital, Lady Minto/Gulf Islands Hospital, Ladysmith Community Health Centre, Saanich Peninsula Hospital (LTC), Saanich Peninsula Hospital.
- **Geo 4** Aberdeen Hospital, Glengarry Hospital, Gorge Road Hospital (LTC), Priory Hospital (LTC), Royal Jubilee Hospital/Victoria General Hospital, Queen Alexandria Children's Centre, Field Hospitals.

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Island Health uses provincial privileging dictionaries for Primary Care privileging. The Family Practice dictionary, Emergency Medicine dictionary, Nurse Practitioner dictionary¹ and all other dictionaries can be found on the BCMQI website.

Link to BCMQI website for the 2019 <u>Family Practice Dictionary</u>. Link to BCMQI website for the 2018 <u>Emergency Medicine Dictionary</u>. Link to BCMQI website for <u>All Privileging Dictionaries</u>.

Pain Management Privileges

Basic Pain Management is available for all Family Physicians. The department of primary care will not approve requests for Intermediate and Advanced pain management procedures except for exceptional circumstances for duly qualified practitioners.

Administration of Sedation and Analgesia – Outside of Emergency Situations

Requests for Administration of Sedation and Analgesia – Outside of Emergency Situations will not be approved by the Department of Primary Care, except for exceptional circumstances for duly qualified practitioners.

Context Specific privileges: Administration of Sedation & Analgesia – Outside of Emergency Situations is to provide sedation for patients who are going through a procedure such as closed reductions, colonoscopy, bronchoscopy, dental procedures, etc. It requires competency in managing cardiovascular and neurologic complications during and after procedure. Practitioners do not need this non-core privilege to provide palliative sedation. Island Health adopted the provincial guideline on refractory symptoms and palliative sedation, https://intranet.viha.ca/departments/eol/Documents/bc-symptom-guidelines-interactive.pdf#page=295. This guideline includes a strong recommendation that consultation with a palliative physician be sought prior to

Other Related Privileges

initiating palliative sedation.

Some dictionaries and non-core privileges that are not part of the Primary Care Guideline are Specialized Palliative Care, Clinical Practitioner in Oncology, Hospital Medicine, Medical Assistance in Dying, Family Practice Anesthesia, Family Practice Obstetrics, Surgical Assist and Family Practice Enhanced Surgical Skills.

Addictions Medicine, Psychiatric Hospitalists and Proceduralists are also credentialed and privileged through other Divisions/Departments, but do not have a specific dictionary at this time.

Physician Certification to Work in Primary Care

The Family Physician (FP) will have certification through one of the following streams:

- Canadian College of Family Physicians (CCFP).
- Canadian College of Family Physicians with a certificate of added Competence.

¹ Please refer to Division of Nurse Practitioners' guideline for Nurse Practitioner credentials requirements for privileges at Island Health sites.

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• Possession of credentials acceptable to both the College of Physicians and Surgeons of British Columbia and the governing body of the Health Authority and its Affiliate(s).

Island Health MAY Require Additional Certification Depending on the Facility and the Type of Work

- Current ACLS and ATLS (or equivalent) or CARE course within last 4 years, PALS (or equivalent, APLS) and certificates must be up to date within 2 years.
- Current NRP is encouraged, as a physician can be called in to assist with a neonatal resuscitation or deliveries.
- If a physician holds CCFP-EM, then ACLS /ATLS (or equivalent) is not required.
- Cultural Safety and Humility training.

Methadone Prescribing as per the BC College, updated June, 2020

- If a provider has section 56(1) exemption and have prescribed within the last three years, they are okay to have the privilege without any additional training.
- For Methadone prescription for analgesia:
 - Registrants who do not currently have a section 56(1) exemption, or have not prescribed in more than
 three years, must obtain relevant education and training by completing the Methadone for Pain in
 Palliative Care online course (http://www.methadone4pain.ca/), and have read the College's
 Methadone for Analgesia Guidelines.
- For Methadone prescription for substance use disorder:
 - o Registrants who do not currently have a section 56(1) exemption, or have not prescribed in more than three years, must obtain relevant education and training through the BC Centre on Substance Use (https://ubccpd.ca/course/provincial-opioid-addiction-treatment-support-program).

Certificate Grace Period

• A 6-month grace period can be granted for physicians to obtain necessary certifications or certificate renewals as determined by the Division Head.

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2.0 Privileging Requirements for Long Term Care (LTC) Facilities

- Geo 2 Dufferin Place, Eagle Park Health Care Facility, Trillium Lodge, Westhaven.
- Geo 3 Cairnsmore Place, Chemainus Health Care Centre, Saanich Peninsula Hospital.
- Geo 4 Aberdeen Hospital, Glengarry Hospital, Gorge Road Hospital², Priory Hospital.

The Department of Primary Care oversees Family Physician's work in these facilities.

Medical Staff category status of Provisional or Active are given when the practitioner is the Most Responsible Practitioner (MRP) for their patients and has arranged 24/7 on call coverage (e.g. on-call roster) for their patients. LTC Physicians request Core privileges: Full-admitting privileges – Family Medicine.

Family Practice Requirements for Long Term Care Facilities:

- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Documentation in support of any requested non-core procedures.
- CMPA Code 35 or higher (73, 78, 79, 82) or code 27 if only working in LTC is required.

Privileging dictionary required to work in Long Term Care Facilities:

Family Medicine Privileging Dictionary.

Physicians who carry Medical Staff category status of Provisional or Active in these facilities are also required to hold Medical Staff category status of Associate at a local hospital in order to facilitate ordering outpatient treatments.

² Please see miscellaneous as well.

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3.0 Privileging Requirements for Rural Health Centres

Geo 1 - Sointula Health Centre (SHC);
Gold River Health Centre (GRHC);
Kyuquot Health Centre (KYU);
Port Alice Health Centre (PAH);
Tahsis Health Centre (THC).

The Department of Primary Care oversees Family Physician's work in these facilities.

Medical Staff category status of Provisional or Active are given when the practitioner is the Most Responsible Practitioner (MRP) for their patients and has arranged 24/7 on call coverage (e.g. on-call roster) for their patients.

Family Practice Requirements for Rural Health Centres:

- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Current ACLS and ATLS (or equivalent) or CARE course within last 4 years.
- Documentation in support of any requested non-core procedures.
- CMPA Code 73 (same cost as 35) or higher (78, 79, 82) is required.

Privileging dictionary required to work in Rural Health Centres:

Family Medicine Privileging Dictionary.

Physicians who carry Medical Staff category status of Provisional or Active in these facilities are also required to hold Medical Staff category status of Associate at the North Island Hospitals at Campbell River and Comox Valley sites in order to facilitate ordering outpatient treatments.

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4.0 Privileging Requirements for Rural Urgent Care Centres

- Geo 1 Cormorant Island Health Centre (CIHC).
- **Geo 3** Ladysmith Community Health Centre (LCHC); Chemainus Health Care Centre (CHCC).

The Department of Primary Care oversees Family Physician's work in emergency, primary care services and medical day care clinic work.

Medical Staff category status of Provisional or Active is given when the practitioner is the Most Responsible Practitioner (MRP) for their patients and has arranged 24/7 on call coverage (e.g. on-call roster) for their patients.

Family Practice Requirements for Cormorant Island Health Centre:

- Emergency Medicine experience in the past 24 months with an average equal to or exceeding 400 clinical patient care hours per year or as per assessment by the Division Head.
- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Current ACLS and ATLS (or equivalent) or CARE course within last 4 years.
- Documentation in support of any requested non-core procedures.
- CMPA Code 73 (same cost as 35) or higher (78, 79, 82) is required.

Physicians who carry Medical Staff category status of Provisional or Active at Cormorant Island Health Centre are also required to hold Medical Staff category status of Associate at the North Island Hospitals at Campbell River and Comox Valley in order to facilitate ordering outpatient treatments.

Family Practice Requirements for <u>Ladysmith Community Health Centre (LCHC)</u> and <u>Chemainus Health Care Centre (CHCC)</u>:

- CCFP EM designation with current practice/residency completion; OR
- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Current ACLS, and ATLS or CARE course within last 4 years, and PALS at least once.
- Documentation in support of any requested non-core procedures.
- CMPA Code 73 (same cost as 35) or higher (78, 79, 82) is required.

Privileging dictionary required to work in Rural Urgent Care Centres:

- Family Medicine Privileging Dictionary,
- Emergency Medicine Privileging Dictionary.

Ladysmith Community Health Centre and Chemainus Health Centre are credentialed and privileges as one campus two sites.

Physicians who carry Medical Staff category status of Provisional or Active at Ladysmith Community Health Centre and Chemainus Health Care Centre are also required to hold Medical Staff category status of Associate at Cowichan District Hospital in order to facilitate ordering outpatient treatments.

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Family Physicians who carry Active, Provisionals, Temporary and Locum staff status at Cowichan District Hospital Emergency can request same staff category and family medicine admitting privileges at Ladysmith and Chemainus in their initial application. Family Physicians who carry Active, Provisional, Temporary and Locum staff status at Cowichan District Hospital Department of Primary Care can request same staff category and family medicine admitting privileges if they fulfill the crediating requirement for these two sites.

5.0 Privileging Requirements for Oceanside Health Centre (OHC)

The Department of Primary Care oversees Family Physician's work in emergency, primary care services and medical day care clinic work.

Medical Staff category status of Provisional or Active is given when the practitioner is the Most Responsible Practitioner (MRP) for their patients.

OHC - Urgent Care

Family Practice Requirements for OHC-Urgent Care:

- Emergency Medicine experience in the past 24 months with an average equal to or exceeding 400 clinical patient care hours per year or as per assessment by the Division Head.
- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Current ACLS and ATLS (or equivalent) or CARE course within last 4 years.
- Documentation in support of any requested non-core procedures.
- CMPA Code 73 (same cost as 35) or higher (78, 79, 82) is required.

Privileging dictionary required to work in OHC-Urgent Care:

- Family Medicine Privileging Dictionary,
- Emergency Medicine Privileging Dictionary.

OHC - Primary Care Clinic and the OHC-Medical Day Care

Family Practice Requirements for OHC-Primary Care and OHC-Medical Day Care clinics:

- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Documentation in support of any requested non-core procedures.
- CMPA Code 35 or higher (73, 78, 79, 82) is required.

Privileging dictionary required to work in OHC-Primary Care and OHC-Medical Day Care clinics:

• Family Medicine Privileging Dictionary.

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6.0 Privileging Requirements for Rural Acute Care Hospitals

- **Geo 1** Port Hardy Hospital (PHH); Port McNeill Hospital (PMH).
- Geo 2 Tofino General Hospital (TGH).
- Geo 3 Lady Minto/Gulf Islands Hospital (LMGH).

The Department of Primary Care oversees Family Physician's work in the inpatient hospital and emergency services work.

Medical Staff category status of Provisional or Active is given when the practitioner is the Most Responsible Practitioner (MRP) for their patients and has arranged 24/7 on call coverage (e.g. on-call roster) for their patients.

Family Practice requirements for Rural Acute Care Hospitals:

- Emergency Medicine experience in the past 24 months with an average equal to or exceeding 400 clinical patient care hours per year or as per assessment by the Division Head.
- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Current ACLS and ATLS (or equivalent) or CARE course within last 4 years. ATLS requirement is not mandatory for Lady Minto/Gulf Islands Hospital, but encouraged.
- Current NRP is encouraged, as a physician can be called in to assist with a neonatal resuscitation or deliveries.
- Documentation in support of any requested non-core procedures.
- CMPA Code 73 (same cost as 35) or higher (78, 79, 82) is required.
- CCFP-EM can perform in-patient MRP work in a Rural Acute Care hospital, if they can demonstrate equivalent currency in Family Medicine practice as determined by the Division Head.

Privileging dictionary required to work in Rural Acute Care Hospitals:

- Family Medicine Privileging Dictionary,
- Emergency Medicine Privileging Dictionary.

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7.0 Privileging Requirements for Community Acute Care Hospitals

- **Geo 1** NIH, Campbell River and District (CRG); NIH, Comox Valley (CVH).
- Geo 2 West Coast General Hospital (WCGH).
- **Geo 3** Cowichan District Hospital (CDH); Saanich Peninsula Hospital (SPH).

The Department of Primary Care oversees Family Physician's work in the inpatient hospital work at these sites and also oversees the Emergency Department Fast Track Clinic at the Saanich Peninsula Hospital.

Emergency services work at these sites is overseen through the Department of Emergency & Critical Care. Requirements for working in the Emergency department at Community Acute Care Hospitals is identified in the Emergency Medicine Credentialing Guideline (EM-001).

Medical Staff category status of Provisional or Active are given when the practitioner is the Most Responsible Practitioner (MRP) for their patients and has arranged 24/7 on call coverage (e.g. on-call roster) for their patients and may participate in the Doctor of the Day program (where applicable).

Family Practice requirements for Community Acute Care Hospitals:

- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Documentation in support of any requested non-core procedures.
- CMPA Code 35 or higher (73, 78, 79, 82) is required.

Additional Family Practice requirements of the Emergency Fast Track Clinic at the Saanich Peninsula Hospital:

• CMPA code 73 or higher (78, 79, 82) is required.

Privileging dictionary required to work in Community Acute Care Hospitals:

• Family Medicine Privileging Dictionary.

Saanich Peninsula Hospital Doctor of the Day Program

In the SPH Doctor of the Day Program - Temporary medical staff category status is provided for the participants of the Doctor of the Day program until they are established in community and then they can be moved to Medical Staff category status of Provisional.

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8.0 Privileging Requirements for Tertiary Hospitals

- Geo 2 Nanaimo Regional General Hospital (NRGH).
- **Geo 4** Royal Jubilee Hospital/Victoria General Hospital (RJH/VGH); Queen Alexandra Centre for Children's Health (QAC).

The Department of Primary Care oversees Family Physician's work in the inpatient hospital work done by Family Physicians who are MRP.

The Division of Hospitalist Medicine oversees hospital services work.

The Department of Emergency & Critical Care oversees emergency services work. Requirements for working in Emergency at tertiary hospitals are identified in the Emergency Medicine Credentialing Guideline (EM-001).

Medical Staff category status of Provisional or Active is given when the practitioner is the Most Responsible Practitioner (MRP) for their patients and has arranged 24/7 on call coverage (e.g. on-call roster) for their patients.

Family Practice requirements for Tertiary Hospitals:

- CCFP or equivalent. Division Head to determine acceptable equivalencies.
- Documentation in support of any requested non-core procedures.
- CMPA Code 35 or higher (73, 78, 79, 82) is required.

Privileging dictionary required to work in Tertiary Hospitals:

• Family Medicine Privileging Dictionary.

Nanaimo Regional General Hospital Doctor of the Day Program

In the NRGH Family Doctor of the Day Program (FDOD) – participants of the FDOD are provided Medical Staff category status of Provisional or Active at NRGH. They are also required to hold Medical Staff category status of Associate at OHC for outpatient ordering. New participants to the program are provided a mentor for orientation and support.

The OHC privileges for Medical Staff category of Temporary or Locum Tenens members of the FDOD are determined case-by-case basis.

Royal Jubilee Hospital and Queen Alexandra Centre for Children's Health – Psychiatry Hospitalists

The Department of Primary Care oversees Family Physicians working as hospitalist at the Psychiatry department. There providers take care of the patients' non-psychiatric medical problems and MRP on the Psychiatric Service is always the Psychiatrist. Although, consulting category is the most appropriate for these providers, staff members who are in provisional or active category continue with their gained medical staff status.

At QAC, Family physicians attend to medical needs of the pediatric psychiatric patients admitted. They gain consulting staff status and family medicine non-admitting privileges

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9.0 Miscellaneous Items

Outpatient Ordering - Any Family Practice physician, who does not already hold Family Practice privileges, seeking outpatient-ordering privileges (i.e. blood transfusion, IV iron, antibiotics, etc.) **Only** at a specific site:

- Needs to be credentialed and privileged,
- Will be processed in the Associate medical staff category,
- Request Non-Admitting privileges from the Family Practice Privileging Dictionary.

Ambulatory Care Outpatient Ordering – The Physician needs to be available or have arranged coverage when sending patients to Ambulatory Care for outpatient ordering in case complications arise.

Refer and Follow - Refer and Follow in the privileging dictionary is **not** provided by Island Health. Family physicians, who would like to refer patients for treatment or visit their patients in hospital, need to have Non-Admitting privileges in the Medical Staff category status of Associate.

Surgical Assist - If a Family Physician holds Family Practice privileges (as Provisional, Active, Consulting) for that particular facility, they do not need specific Surgical Assist privileges. **However, Island Health requires completion of the Surgical Assist privileging dictionary for tracking purposes.**

Urgent & Primary Care Centres (U&PCC) – Island Health does not provide credentialing and privileging at U&PCC's. However, physicians may obtain Medical Staff category status of Associate at their local hospital if it is a requirement to work at the U&PCC. As Gorge Rd Hospital is a hospital act site, Gorge Road UPCC requires credentialing and privileging. Individuals are required to have non-admitting Family Practice privileges and Consulting staff category.

Gorge Low Intensity Rehabilitation Unit at Gorge Road Hospital – As Gorge Rd Hospital is a hospital act site, any and all units in this hospital will reqire credentialing and privileging. The credentialing requirements is same as any inpatient MRP service.

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10.0 Island Health Facilities

Geo 1

- CIHC Cormorant Island Health Centre
- GRHC Gold River Health Centre
- KYU Kyuquot Health Centre
- CRG NIH, Campbell River and District
- CVH NIH, Comox Valley
- PAH Port Alice Health Centre
- PHH Port Hardy Hospital
- PMH Port McNeill Hospital
- SHC Sointula Health Centre
- THC Tahsis Health Centre

Geo 2

- DPRC Dufferin Place (LTC)
- EPLTC Eagle Park Health Care Facility (LTC)
- NRGH Nanaimo Regional General Hospital
- OHC Oceanside Health Centre (Urgent Care, Medical Day Care, and Primary Care)
- TGH Tofino General Hospital
- TLLTC Trillium Lodge (LTC)
- WCGH West Coast General Hospital
- WRC Westhaven (LTC)

Geo 3

- CPRC Cairnsmore Place (LTC)
- CHCC Chemainus Health Care Centre and Chemainus Health Care Centre (LTC)
- CDH Cowichan District Hospital
- LMGH Lady Minto/Gulf Islands Hospital
- LCHC Ladysmith Community Health Centre
- SPH Saanich Peninsula Hospital and Saanich Peninsula Hospital (LTC)

Geo 4

- ABER Aberdeen Hospital
- GLEN Glengarry Hospital
- GRH Gorge Road Hospital (LTC/ Bridgeview / UPCC)
- PRIO Priory Hospital (LTC)
- RJH/VGH Royal Jubilee Hospital/Victoria General Hospital
- Field Hospitals Mount Tolmie and Summit
- Queen Alexandria Chidren's Centre

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11.0 Definitions

- ACLS Advanced Cardiovascular Life Support
- APLS Advanced Paediatric Life Support
- ATLS Advanced Trauma Life Support
- CARE Cardiac Education
- CCFP Canadian College of Family Physicians
- CMPA Canadian Medical Protective Association
- ECCM Emergency & Critical Care Medicine
- ED Emergency Department
- EM Emergency Medicine
- FM Family Medicine
- FP Family Physician
- MRP Most Responsible Practitioner
- IH Island Health
- LTC Long Term Care
- PALS Pediatric Advanced Life Support
- PC Primary Care
- U&PCC Urgent and Primary Care Centres

12.0 Related Island Health Standards

- Orientation to Island Health.
- Violence Training

13.0 References

- College of Family Physicians of Canada
- CMPA Codes
- VIHA Locum Tenens Policy
- MRP Policy
- Rural Locum Program
- methadone4pain.ca/

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14.0 Resources

- https://www.health.gov.bc.ca/library/publications/year/misc/rural_programs.pdf
- https://www.cfpc.ca/EligibilityandApplication/
- https://rccbc.ca/
- https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/physician-compensation/rural-practice-programs
- https://www2.gov.bc.ca/assets/gov/health/practitioner-pro/rgplp_policy.pdf
- https://rccbc.ca/wp-content/uploads/2019/07/RSA-communities 2019.pdf
- https://intranet.viha.ca/pnp/pnpdocs/locum-tenens.pdf
- https://intranet.viha.ca/pnp/pnpdocs/most-responsible-practitioner-mrp.pdf
- http://www.methadone4pain.ca/
- https://ubccpd.ca/course/provincial-opioid-addiction-treatment-support-program
- https://www.cpsbc.ca/files/pdf/DP-Methadone-for-Analgesia-Guidelines.pdf

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