

**UPMC  
Clinical Scope of Practice Request  
Criteria Summary Sheet**

**Facility:** UPMC Presbyterian

**Specialty:** PSYCHOLOGIST

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| <b>TRAINING/CERTIFICATION</b> | Successful completion of an ACGME or AOA accredited residency in Psychiatry or Current certification or active participation in the examination process leading to certification in Psychiatry by the American Board of Psychiatry and Neurology or the American Osteopathic Board of Neurology and Psychiatry, or a similar certification process acceptable to the Hospital or as determined by the Chair of the Department. |
| <b>OTHER</b>                  | Documentation of the provision of inpatient, outpatient or consultative psychiatric services for at least 30 patients during the past two years, or demonstration of the provision of substantive competent clinical service in the core privilege during the past two years, or demonstration of the same under supervision for a minimum of six months before being independently privileged.                                |