



Family Medicine Clinical Privileges

The application for appointment, requested privileges, and all supporting documentation and information has been reviewed and evaluated by all pertinent parties with the following recommendations:

Practitioner Name Nadia Azuero Date 2/18/2025

Staff Category Active Approved Privileges Family Medicine

Privilege Effective Date _____ through _____

Recommendation by Credentialing Committee

Recommend Appointment & Privileges as requested Do Not Recommend Appointment
 Privileges as requested with the following conditions, exceptions, or limitations _____

Signature of Credentiaing Officer

3-10-25
Date

Recommendation by MEC

Recommend Appointment & Privileges as requested Do NOT Recommend Appointment
 Privileges as requested with the following conditions, exceptions or limitations _____

Signature of MEC Chairperson

Date

Recommendation by Governing Board

Recommend Appointment & Privileges as requested Do NOT Recommend Appointment
 Privileges as requested with the following conditions, exceptions or limitations _____

Signature of Governing Board Chairperson

Date



Emergency Medicine Clinical Privileges

The application for appointment, requested privileges, and supporting documentation and information has been reviewed and evaluated by all pertinent parties with the following recommendations.

Practitioner Name Nadia Azuero, MD Date 2/18/2025

Approved Privilege(s) Emergency Medicine

Privilege Effective Date _____ through _____

Recommendation of Credentialing Officer

Recommend all requested privileges Do Not Recommend
 Recommend Privileges with the following conditions/modifications _____

Nicky Santis
Signature of Credentialing Officer

3-10-25
Date

Recommendation of MEC

Recommend all requested privileges Do Not Recommend
 Recommend privileges with the following condition/modification: _____

MEC Chairperson

Date

Recommendation of Governing Board

Recommend all requested privileges Do Not Recommend
 Recommend privileges with the following conditions/modifications _____

Governing Board Chairperson

Date