



EVIDENCE-BACKED ADVANCED CREDENTIALING

Hospital Clinical Credentialing Report

Clinical experience, procedure evidence and institution-specific privileging

OVERALL RESULT	QUALITY REVIEWED
APPROVED WITH CONDITIONS	No material discrepancy identified in the approved sample scope.

DOCTOR / FACULTY	HYRDOC ID	INSTITUTION	REPORT DATE
Dr. Aarav Menon	HYD-SAMPLE-CLIN-001	Lotus Bay Multispeciality Hospital	29 Jul 2026

Sample purpose: This fictional report demonstrates the same section structure, evidence statuses, source recording, governance decisions and integrity controls used by the live HYRDOC credentialing report engine. Live reports contain only lawfully obtained and reviewed evidence within the purchased and consented scope.

01. Identity, registration and qualification foundation

The doctor-declared identity, registration and qualifications were matched against the fictional consented evidence sources listed below.

Check	Doctor claim	Source-confirmed value	Outcome
Identity	Dr. Aarav Menon; DOB 08 May 1984	Name and DOB matched the sample identity document	Verified
Medical registration	Tamil Nadu Medical Council; SAMPLE-TNMC-445566	Permanent registration; active through 31 Dec 2028	Verified
MBBS	Coastal Health University, 2008	Degree and passing year confirmed	Verified
MS General Surgery	South India Institute of Medical Sciences, 2012	Award and specialty confirmed	Verified

Decision boundary: Qualification verification supports credentialing evidence readiness but does not itself authorise independent procedures.

02. Previous clinical employment and departmental responsibility

Institution / period	Role and department	Confirmed responsibilities	Source
Green Valley Multispeciality Hospital Jul 2012 - Mar 2018	Senior Resident / General Surgery	Ward rounds, emergency duty, assisted major surgery, supervised minor procedures	Authorised HR and HOD response
Sunrise Medical Centre Apr 2018 - Jun 2026	Consultant General Surgeon	OPD, inpatient admission, emergency on-call, independent listed procedures	Medical Superintendent and HOD response

Clarification: The previous institution used the internal title “Registrar / Senior Resident equivalent.” Service period and department were confirmed; the terminology difference was assessed as non-material.

SAMPLE - NOT VALID

03. Procedure and activity evidence

Procedure / activity	Doctor-declared experience	Source-confirmed evidence	Finding
Laparoscopic appendectomy	85 independent	72 independent + 14 assisted; de-identified theatre log and HOD confirmation	Verified with numerical clarification
Open inguinal hernia repair	120 independent	116 identifiable aggregate entries confirmed	Verified
Central venous access	60 independent	48 log entries plus competency certificate	Partially verified
Emergency laparotomy	34 independent	31 independent; 3 supervised during transition period	Verified with clarification
Upper GI endoscopy	12 assisted	Training attendance confirmed; independent competence not claimed	Training verified

No patient names, identifiers, full case sheets or identifiable treatment records were collected. Only aggregated or de-identified evidence was reviewed.

04. Competency, training and case-volume review

Evidence	Record reviewed	Authority	Outcome
Advanced laparoscopy workshop	Completion certificate dated 15 Sep 2023	Recognised training centre - sample	Verified
BLS / ACLS	Valid through 30 Nov 2027	Sample accredited provider	Verified
Departmental competency assessment	Judgement, consent, escalation and complication recognition reviewed	HOD and clinical assessor	Competent with stated conditions
Aggregated operative volume	267 procedures during verified employment window	Medical Records / OT register custodian	Source confirmed

Risk note: Historical procedure volume is not a substitute for the hiring hospital's current competency assessment, infrastructure review or committee decision.

05. Previous and current privilege decisions

Privilege	Previous institution	HOD recommendation	Current committee decision	Validity
Independent OP consultation	Granted	Recommended	Approved	12 months
Laparoscopic appendectomy	Granted	Recommended	Approved	12 months
Emergency laparotomy	Granted	Recommended	Approved with peer review of first 5 cases	6 months
Upper GI endoscopy	Assisted only	Not recommended independently	Not approved	Not applicable

Institution-specific condition: Emergency laparotomy privilege requires review after the first five cases and remains subject to the hospital's morbidity, mortality and clinical-governance processes.

06. Governance approvals and authorised source record

Stage	Decision	Fictional authorised reviewer	Decision note
Credential review	Approved	Ms. Nisha Rao - Verification Officer	Mandatory evidence complete; two clarifications documented
HOD recommendation	Approved with conditions	Dr. Kavita Iyer - HOD Surgery	Privilege recommendations recorded procedure by procedure
Medical Superintendent review	Approved	Dr. R. S. Natarajan	Employment and institutional governance evidence accepted
Credentialing Committee	Approved with conditions	Sample Hospital Committee	Final scope and review dates recorded

Each source response was preserved with access controls, responder authority declaration, submission timestamp and reviewer acceptance. A doctor-nominated contact was not automatically treated as an independent source.

07. Monitoring, exceptions and final conclusion

Monitoring item	Current status	Next action
Medical registration validity	Active	Alert at 90 / 60 / 30 days before expiry
BLS / ACLS renewal	Current	Notify doctor and authorised institution before due date
Conditional privilege review	Due after first 5 cases or 6 months	Committee reassessment
Annual credentialing review	Scheduled	Reconfirm conditions and material changes

Final conclusion: Evidence readiness and institution-specific privileges were approved with stated conditions. HYRDOC does not grant a universal clinical licence or guarantee future performance.

SAMPLE - NOT VALID

08. Consent, report integrity and sample limitations

Control	Sample record
Doctor consent	Granted for employer-sponsored advanced clinical credentialing scope
Verification Officer	Completed source and evidence review
Quality Reviewer	Independent second-level review approved
Report version	1 - Current sample
Sample integrity hash	0bbdb1797dec858f1a3c1d7106ded28225a5038302003072d56ef31c470a8e8d

This sample is fictional and cannot be used for employment, credentialing, clinical privilege, insurance, licensing, regulatory, immigration, legal or financial decisions. A live report uses the same structure but only actual scoped evidence and recorded outcomes.

SAMPLE - NOT VALID