Delineation of Clinical Privileges Specialty of Podiatry

General Information

All applicants must meet the qualifications, conditions and responsibilities as set forth in MLH Credentials Policies. Policies are located on www.methodistmd.org

Applicants seeking appointment, reappointment, and/or clinical privileges have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current clinical competence, character, ethics, and other qualifications and for resolving any doubts about an individual's qualifications.

Other requirements:

- Applicants will be requested to provide documentation of practice and current clinical competence as defined on the attached competency grid for initial
 granting and reappointment of privileges.
- This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional
 organizational, regulatory, or accreditation requirements that the organization is obligated to meet.
- Privileges granted may be exercised only at the Hospitals that offer the service/specialty, have sufficient space, equipment, staffing, and other resources required to support the privilege.
- Requests for clinical privileges that are subject to an exclusive contract will not be processed except as consistent with the contract.

Evaluating Current Clinical Competence at time of Reappointment:

MLH Data will be obtained and analyzed as available from EMR reporting systems or Health Information Management.

If minimal activity/low volume, then the applicant should supply case logs from other facilities' HIM department or practice billing systems to meet the minimum requirement(s) to be considered for the privilege. Source of the logs must be denoted.

The preferable format for external case logs is Excel or PDF from the sourced system. Handwritten case logs are generally not accepted.

Case logs should include a blinded or partial patient number for case distinction, date of service, type of service (inpatient or outpatient), location of service, diagnostic code and/or procedure codes, and performing provider where applicable.

Board approved: March, 2011, Revised 4/16/14, 7/19/17, 5/16/18



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Privilege	Initial Application Required Education or Training	Initial Application Current Clinical Competence (CCC)	Reappointment: Retrospective review of cases performed at MLH facility (FPPE)
Podiatry Core I	Current board certification by the American Board of Podiatric Medicine (ABPM). Or Successful completion of a 24 month podiatric medical residency training program and APBM board certification within 5 years of program completion. All post-graduate training must be approved by the CPME.	I. If applying directly out of training or in less than 24 months after training completion: Case log of at least 50 cases validated by Training Director And Training Director recommendation. If out of training greater than 24 months: Case log documenting management of at least 50 podiatric patients within the previous 24 months.	FPPE: First 5 cases Case log documenting treatment of 50 podiatric patients within the previous 24 months. Department chair recommendation will be obtained from primary practice facility.
Podiatry Core II –Surgery of Forefoot and Midfoot - Inclusive of Core I privileges	Successful completion of a 24 month CPME-approved podiatric surgical residency and Current board certification in Foot Surgery by the American Board of Foot and Ankle Surgery (ABFAS) Or Successful completion of a 24 month CPME-approved podiatric surgical residency and Foot Surgery board certification within 5 years of program completion.	I. If applying directly out of training or in less than 24 months after training completion: Case log of at least 50 forefoot and midfoot procedures validated by the Training Director And Training Director recommendation. If out of Training Greater than 24 months: Case log documenting at least 50 forefoot and midfoot procedures performed within the previous 24 months.	FPPE: First 5 cases – to include at least one bunionectomy with tendon transfer and one midfoot procedure – from the procedures specific to this class of privileges. Case log documenting at least 50 forefoot and midfoot procedures performed within the previous 24 months.
Podiatry Core III - Surgery of Forefoot, Midfoot, Rearfoot and Ankle - Inclusive of Cores I and II	Successful completion of a 36 month CPME-approved podiatric surgical residency and Current ABFAS board certification in Foot Surgery (prerequisite) and in Reconstructive Rearfoot/Ankle Surgery. Or Successful completion of a 36 month CPME approved podiatric surgical residency and ABFAS board certification in Foot Surgery (prerequisite) and RRA Surgery within 5 years of program completion.	I. If applying in 24 months or less after training completion: Case log of at least 50 reconstructive rearfoot/ankle procedures validated by the Training Director And Training Director recommendation. If out of Training greater than 24 months: Case log documenting at least 50 reconstructive rearfoot/ankle procedures performed within the previous 24 months.	FPPE: First 5 cases - to include at least one rearfoot/ankle arthrodesis - from the procedures specific to this class of privileges. Case log documenting at least 50 reconstructive rearfoot/ankle procedures performed within the previous 24 months.
Arthroplasty with or without Prosthesis	Current ABFAS board certification in Foot Surgery (prerequisite) and in Reconstructive Rearfoot/Ankle Surgery.	Case log documenting 5 procedures within the previous 24 months.	FPPE: First 3 cases Case log documenting at least 5 procedures within the previous 24 months.



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Unified Medical Staff: Memphis Hospitals & Olive Branch Hospital

Privilege	Initial Application Required Education or Training	Initial Application Current Clinical Competence (CCC)	Reappointment: Retrospective review of cases performed at MLH facility (FPPE)
Achilles Tendon Repair	Current ABFAS board certification in Foot Surgery (prerequisite) and in Reconstructive Rearfoot/Ankle Surgery.	Case log documenting 5 procedures within the previous 24 months.	FPPE: First 3 cases Case log documenting at least 5 procedures within the previous 24 months.
Ankle or Subtalar Arthroscopy	Current ABFAS board certification in Foot Surgery (prerequisite) and in Reconstructive Rearfoot/Ankle Surgery	Case log documenting 10 procedures within the previous 24 months.	FPPE: First 3 cases Case log documenting at least 5 procedures within the previous 24 months.

Admission of a patient for podiatric services shall be the responsibility of a member of the Medical Staff with admitting privileges.

The patient shall receive the same basic medical appraisal as patients admitted for other services, and shall be the combined responsibility of the admitting physician member and podiatrist.

Pre-op clearance shall be completed prior to admission.

The podiatrist's responsibilities include:

- Podiatric history
- Record of podiatric examination
- Pre-operative diagnosis
- Operative report describing the findings and operative procedure. Any tissue removed shall be submitted for pathological examination.
- Progress notes related to podiatric care
- Summary of hospital course and post-hospitalization plan of care

The admitting physician's responsibilities include:

- General medical history
- Physical examination with emphasis on the general medical condition of the patient and suitability for anesthesia and surgery
- General medical care during hospitalization
- Discharge order
- Discharge summary

Inpatient consultations may be answered by a podiatrist, and, if appropriate, the requesting physician will assume the responsibilities outlined above.

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Core Privileges

Podiatry Core I

Privileges include evaluation, diagnosis, and provision of non-surgical care to patients with injuries and disorders of the foot and ankle including soft tissues below the tibial tuberosity. Podiatrists shall not be the primary physician for the management of medical problems.

Privileges include:

- Bandaging of foot
- · Trimming of toenails
- · Massaging of feet.

Podiatry Core II - Surgery of Forefoot and Midfoot:

Privileges include evaluation, diagnosis and treatment of podiatric patients requiring forefoot and midfoot procedures.

Privileges include:

- · Core I privileges
- Amputation, ray (metatarsal and toe)
- Amputation, transmetatarsal (forefoot)
- Avulsion of Nail-plate (partial or complete)
- Arthrodesis, Interphalangeal Joints with Fixation
- Arthrodesis of first metatarsophalangeal joint (great toe)
- Incision and Drainage (I&D) of Superficial Abscess
- Debridement of Foot Ulcer
- Removal of Foreign Body of Digit or foot
- Tendon Lengthening of Metatarsal Phalangeal Joint
- · Capsulotomy, Interphalangeal Joint
- Excision or Biopsy of Soft Tissue Lesions
- Excision of Lesions of Tendon Sheath, Capsule Cyst, or Ganglion

- Phalangectomy (partial or complete)
- Excision of Exostasis
- · Osteotomy of Phalanx
- · Excision of Interphalangeal Sesamoid
- · Open and Closed Reduction of Digital Fracture
- Metatarsal Head Resection, Partial or Complete (plantar lesions/ulcers)
- Osteotomy of Lesser Metatarsal, with or without Internal/External Fixation (plantar lesions/ulcers)
- Osteotomy of First Metatarsal, with or without Internal/External Fixation (bunions)
- Excision of Accessory Bones
- Fifth Metatarsal Head Resection, Partial or Complete (tailor's bunion)
- Arthrotomy and Capsulotomy Forefoot (joint cleanouts)
- Open or Closed Reduction Metatarsal Fracture

- Excision of Ganglion of Forefoot, Intermetatarsal Neuroma, Perineurofibrosis of Forefoot
- Correction of Hallux Valgus and Hallux Varus
- Bunionectomy with Osteotomy
- Bunionectomy with Tendon Transfer, with or without Osteotomy
- Repair Syndactyly
- Repair Polydactyly
- Midfoot Procedures Distal to, but not including, the Transverse Tarsal Joint: Midfoot Arthrodesis, Exostectomy Midtarsal Bone
- Open and Closed Reduction of Lisfanc Joint Fracture
- Osteotomy/Resection of Tarsal bone
- · Osteomyelitis Management Forefoot



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Podiatry Core III - Surgery of Forefoot, Midfoot, Rearfoot and Ankle:

Privileges include evaluation, diagnosis and treatment of podiatric patients requiring forefoot, midfoot, rearfoot and ankle procedures.

Privileges include:

- · Core I privileges
- Core II privileges
- Ligomentoplastic Repair or Ankle Stabilization
- Arthroereisis with Implants, Rearfoot and Ankle
- Major Rearfoot Arthrodesis Triple, Subtalar
- Fractures of the Rearfoot Tarsals, ORIF or Closed Reduction
- Ankle fractures ORIF or Closed Reduction or external fixation NO higher than the distal tibial metaphyseal flare - NOT including Pilon fractures
- Ankle Arthrodesis
- Osteomyelitis management Rearfoot and Ankle
- Flap/skin Grafts
- Plastic Repair of Rearfoot skin
- I&D, Debridement of Foot/Ankle Infections

- Neurolysis and Neurectomy of the Ankle
- Excision of Soft Tissue Neoplasms of the Ankle
- Clubfoot and Vertical Talu Release/Reconstruction
- Rearfoot and Ankle Osteotomies and Cartilage Repair
- Bone Graft Harvest Rearfoot or Distal Medial Malleolus
- Excision of Malignant Neoplasms of the Foot and Ankle
- Osteotomy of the Ankle, to extend NO higher than the distal tibial metaphyseal flare

Special privileges:

The physician requesting special privileges must meet the minimum criteria for the specialty core and demonstrate the appropriate post graduate training and/or demonstrate successful completion of an approved, recognized course when such exists, or other acceptable experience.

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Unified Medical Staff: Memphis Hospitals & Olive Branch Hospital

Podiatry Clinical Privileges

Check below the particular privileges desired in Podiatry for each facility:

Please check (\checkmark) applicable age categories for each privilege requested. Methodist Healthcare - Memphis Hospitals (MHMH) Methodist Healthcare - Olive Branch Hospital Germantown, Le Bonheur Children's Hospital, (MHOBH) **Privilege Description** North, South & University, Outpatient Clinics & Diagnostic Facilities * Infants Children & Adults & Children & Adults & Neonates Age Limitations (29 days-Adolescents **Adolescents Adolescents Adolescents** (0-28 days) 2 Years) (2-18 years) (13-& Above) (2 -18 years) (13 & above) Podiatry Core I Podiatry Core II -Surgery of Forefoot and Midfoot Podiatry Core III - Surgery of Forefoot, Midfoot, Rearfoot and Ankle Podiatry Core III – special Privileges Achilles Tendon Repair Arthroplasty with or without Prosthesis Ankle or Subtalar Arthroscopy Limitations Clinical privileges are granted only to the extent privileges are available at each facility. Darkly shaded areas represent privileges not available to any practitioner due to the privilege not being offered by the facility.

Acknowledgement of practitioner

Printed Name

above, to the extent services are available at each facilit	y, and I understand that:	
(a) in exercising any clinical privileges granted, I am con	strained by facility and medical staff policie	es and rules applicable generally and any applicable to the particular situation
(b) any restriction on the clinical privileges granted to medocuments	e is waived in an emergency situation and i	in such situation my actions are governed by the applicable section of the medical staff bylaws or related
Physician's Signature	Date	

I have requested only those privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at the facilities indicated

^{*} Podiatry Core II, III and Special Privileges are excluded at Methodist University Hospital and Le Bonheur Children's Hospital.