

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.



Unified Medical Staff: Memphis Hospitals & Olive Branch Hospital

Delineation of Clinical Privileges Specialty of Gastroenterology

Privilege	Initial Application: Required Education or Training	Initial Application: Current Clinical Competence:	Reappointment: Retrospective review of cases performed at MLH facility (FPPE)
Gastroenterology Core	<p>Current board certification in Internal Medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine and subspecialty certification in Gastroenterology</p> <p>Or</p> <p>Successful completion of an ACGME or AOA accredited post-graduate training program in Internal Medicine and completion of an ACGME or AOA accredited post-graduate training program in Gastroenterology and board certification within 5 years of completion.</p> <p><u>In order for Moderate Procedural Sedation to be a Gastroenterology Core privilege, applicant must:</u> <u>Provide her/his Program Director's verification of successful performance of, and clinical competency in providing moderate procedural sedation.</u></p> <p><u>AND</u> <u>Successfully complete the MLH Cornerstone module Moderate Sedation For Non-Anesthesia Staff</u></p> <p><u>OR</u> <u>Gastroenterologists who currently hold the Moderate Procedural Sedation privilege and successfully met the maintenance requirement for this privilege during their previous credentialing cycle are eligible to have moderate procedural sedation added as a core Gastroenterology privilege.</u></p>	<p>Case logs and procedure list from primary practice facility for the previous 12 month time period.</p> <p>Any complications/poor outcomes should be delineated and accompanied by an explanation.</p>	<p>FPPE: First 5 cases of GI Bleed FPPE: First 5 cases of EGD, Colonoscopy with or without polyp removal</p>
Gastroenterology Pediatric Core	<p>Current board certification in Pediatrics by the American Board of Pediatrics or the American Osteopathic Board of Pediatrics and subspecialty certification in Gastroenterology</p> <p>Or</p> <p>Successful completion of an ACGME or AOA accredited post-graduate training program in Pediatrics and completion of an ACGME or AOA accredited post-graduate training program in Gastroenterology and board certification within 5 years of completion.</p>	<p>Case logs and procedure list from primary practice facility for the previous 12 month time period.</p> <p>Any complications/poor outcomes should be delineated and accompanied by an explanation.</p>	<p>FPPE: First 5 cases of either EGD or colonoscopy</p>



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<i>Balloon Assisted Enteroscopy</i>	Successful completion of a postgraduate ACGME Gastroenterology/Endoscopy Residency that includes balloon assisted enteroscopy evidenced by case logs and attestation from Program Director. Or Completion of Balloon assisted enteroscopy procedure training course as evidenced by a certificate of completion.	Case log documenting successful performance of at least 5 procedures within the past 24 months Or Completion of 2 successfully proctored cases as evidenced by submission of proctor evaluation forms.	FPPE: First 5 cases Case log documenting the performance of at least 5 procedures within the previous 24 months
<i>Endoscopic Laser</i>	Successful completion of an ASGE approved eight-hour minimum CME course that includes training in laser principles and safety, basic laser principals, laser tissue interaction, discussions of the clinical specialty field and hands-on experience with lasers. Must provide documentation outlining the successful completion and contents of the course. Or Documentation of successful completion of an approved Residency in a specialty or subspecialty which included training in laser principles.	Case log documenting the performance of at least 5 procedures within the previous 24 months	FPPE: First 5 cases Case log documenting the performance of at least 5 procedures within the previous 24 months
<i>ERCP (Therapeutic) & Papillotomies</i>	Successful completion of a postgraduate ACGME Gastroenterology/Endoscopy Residency that includes Advanced Endoscopic training in ERCP and related therapeutic procedures.	If applying directly from training, case log documenting the performance of at least 150 procedures within the previous 24 months If not applying directly from training, case log documenting the performance of at least 150 procedures, with a minimum of 10 procedures within the previous 24 months.	FPPE: First 5 cases Case log documenting the performance of at least 10 procedures within the previous 24 months.



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Privilege	Initial Application: Required Education or Training	Initial Application: Current Clinical Competence:	Reappointment: Retrospective review of cases performed at MLH facility (FPPE)
<i>Endoscopic Submucosal Dissection (ESD)</i>	Successful completion of a postgraduate ACGME Gastroenterology/Endoscopy Residency that includes endoscopic submucosal dissection (ESD) as evidenced by case logs and attestation from Program Director. Or Completion of ESD procedure training course, which includes didactic and cadaver laboratory training as evidenced by a certificate of completion.	If applicant is experienced in ESD: Provide case log of 5 cases performed in the past 24 months. OR Certificates validating successful completion of a minimum of two ESD training programs AND The first 5 cases shall be limited to distal stomach and rectum. THEN For ESD cases in the esophagus, the proximal stomach or colon cases proximal to the rectum: Five (5) successfully proctored cases as evidenced by proctor evaluation forms are required. <i>See the Credentials Policies section 24.0 External Proctor for details.</i>	FPPE: First 2 cases Case log documenting the performance of 2 procedures within the previous 24 months. .
<i>Pneumatic Dilation for Achalasia</i>	Successful completion of a postgraduate ACGME Gastroenterology/Endoscopy Residency that includes Advanced Endoscopic training where Pneumatic Dilation for Achalasia was included.	Case log documenting the performance of at least 5 procedures within the previous 24 months.	FPPE: First 5 cases Case log documenting the performance of at least 5 procedures within the previous 24 months
<i>Endoscopic Ultrasounds Fine Needle Aspirations</i>	Successful completion of a postgraduate ACGME Gastroenterology/Endoscopy Residency that included Advanced Endoscopic training where Diagnostic Ultrasound, and Fine Needle Aspirations was included.	Case log documenting the performance of at least 190 procedures within the previous 48 months including at least: 75 mucosal tumor (esophagus, stomach, rectum) cases 40 submucosal abnormality cases 75 pancreaticobiliary cases	FPPE: First 5 cases Case log documenting the performance of at least 10 procedures within the previous 24 months.



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Privilege	Initial Application: Required Education or Training	Initial Application: Current Clinical Competence:	Reappointment: Retrospective review of cases performed at MLH facility (FPPE)
Internal Medicine Core	Current board certification in Internal Medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine. OR Successful completion of an ACGME or AOA accredited post-graduate training program in Internal Medicine and board certification within 5 years of completion.	Case log and procedure list from primary practice facility for the previous 12 month time period. Any complications/poor outcomes should be delineated and accompanied by an explanation.	FPPE: N/A
Pediatric Core	Current board certification in Pediatrics by the American Board of Pediatrics or the American Osteopathic Board of Pediatrics. OR Successful completion of an ACGME or AOA accredited post-graduate training program in Pediatrics and board certification within 5 years of completion.	Case log and procedure list from primary practice facility for the previous 12 month time period. Any complications/poor outcomes should be delineated and accompanied by an explanation.	FPPE: N/A

Core Privileges

The core privileges in the following specialties include procedures outlined in lists and such other procedures that are extensions of the same techniques and skills.

Gastroenterology Core

Admit, evaluate, diagnose, treat and provide consultation to patients except where specifically excluded from practice, with diseases, injuries, and disorders of the digestive organs including the stomach, bowels, liver, and gallbladder, and related structures such as the esophagus, and pancreas including the use of diagnostic and therapeutic procedures using an endoscope to see internal organs.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Privileges include but are not limited to:

- Internal Medicine Core
- EGD with or without biopsy
- Total Colonoscopy with or without biopsy
- Hemostasis (upper and lower)
- Flexible sigmoidoscopy with or without biopsy
- PEG
- Esophageal dilatation
- Enteral/Parenteral Alimentation
- Percutaneous Liver Biopsy
- Tumor Ablation
- Esophageal/Duodenogastric/Colon Enteral Stent Placement
- Moderate Procedural Sedation (when criteria are met)

Gastroenterology Pediatric Core

Admit, evaluate, diagnose, consult, and provide care to infants, children, adolescents and young adults with diseases, and disorders of the digestive system, stomach, intestines, and related structures such as the esophagus, liver, gallbladder, and pancreas.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Privileges include but are not limited to:

- Pediatric Core
- Diagnostic EGD includes biopsy and polypectomy
- Total colonoscopy with biopsy
- Snare Polypectomy
- Nonvariceal hemostasis (upper and lower)
- Variceal
- Esophageal dilation with guidewire
- PEG
- Hydrogen Breath Test
- Esophageal Manometry
- Ano-rectal Manometry
- Anal dilatation
- Esophageal pH Monitoring
- Percutaneous Liver Biopsy
- Pediatric Diagnostic Upper Panendoscopy
- Tumor Ablation
- Esophageal/Duodenogastric/Colon Enteral Stent Placement

Internal Medicine Core

Admit, evaluate, diagnose, treat and provide consultation to patients 13 and above admitted with both common and complex illnesses of cancer, infections and diseases affecting the heart, blood, kidneys, joints and the digestive, respiratory and vascular systems and treatment of common problems of the eyes, ears, skin, nervous system and reproductive organs.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Inherent in core privileges are the following areas/procedures:

- Arthrocentesis
- Lumbar puncture
- Thoracentesis
- Exercise testing
- EKG interpretation

Pediatric Core

Admit, evaluate, diagnose and treat patients' ages 0 -18 for common illnesses and injuries including disorders common to general pediatric diseases and conditions.

Access, stabilize and determine disposition of patients with emergency conditions consistent with the Medical Staff policy regarding emergency or consultative services.

Privileges include but are not limited to:

- Bone marrow aspiration
- Burns, superficial and partial thickness
- I&D of superficial abscess
- Local anesthetic techniques
- Lumbar puncture
- Management uncomplicated minor closed fractures and dislocations
- Perform simple skin biopsy or excision
- Peripheral arterial puncture
- Digital peripheral nerve blocks
- Placement of anterior and posterior nasal hemostatic packing
- Pre-operative and postoperative medical care for surgical patients
- Removal of foreign body by speculum, forceps, or superficial incision
- Removal of non-penetrating corneal foreign body
- Suprapubic bladder aspiration
- Suture uncomplicated lacerations
- Venipuncture

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.

Endoscopic Ultrasounds Fine Needle Aspirations

This includes but is not limited to:

- Mucosal Tumors
- Submucosal Lesions (Only)
- Mucosal and Submucosal (Combined)
- Pancreaticobiliary
- EUS Guided FNA: Non-Pancreatic
- EUS Guided FNA: Pancreatic
- Comprehensive Competence
- Diagnostic Ultrasound

Balloon Assisted Enteroscopy

Indications include the need for treatment of small intestinal lesions found on other gastrointestinal exams. The procedure is not used as a first line therapy and is performed only after careful evaluation by the gastroenterologist. Most procedures are done for bleeding lesions and worrisome lesions or masses identified by other modalities, polyps in patients with hereditary syndromes, retained foreign objects, and small bowel strictures.

Endoscopic Submucosal Dissection (ESD)

Patient selection criteria: Patients with benign gastrointestinal neoplasms or superficial malignant gastrointestinal neoplasms in which en bloc resection is preferred or in which alternative endoscopic methods are not feasible. The first 5 cases shall be limited to distal stomach and rectum.

A provider's initial cases in esophagus, proximal stomach or colon cases proximal to the rectum require 5 successfully proctored cases.

Moderate Sedation Administration

See Credentialing Policy for Sedation and Analgesia by Non-Anesthesiologists.

Requires: Separate DOP, ACLS, NRP or PALS certification



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Delineation of Clinical Privileges
Specialty of Gastroenterology

Gastroenterology Clinical Privileges

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

Please check (✓) applicable age categories for each privilege requested.

Privilege Description	Methodist Healthcare – Memphis Hospitals (MHMH) Germantown, Le Bonheur Medical Center, North, South & University, Outpatient Clinics & Diagnostic Facilities				Methodist Healthcare – Olive Branch Hospital (MHOBH)
	Neonates (0 - 28 days)	Infants (29 days – 2 Years)	Children & Adolescents (2 - 18 years)	Adults & Adolescents (13 & Above)	Adults & Adolescents (13 & Above)
Gastroenterology Core					
Gastroenterology Pediatric Core					
Specials					
Balloon Assisted Enteroscopy					
Endoscopic Laser					
Endoscopic Submucosal Dissection (ESD)					
ERCP (therapeutic) & Papillotomies					
Pneumatic Dilation for Achalasia					
Endoscopic Ultrasounds/Fine Needle					
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

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 above, to the extent services are available at each facility, and I understand that:

(a) in exercising any clinical privileges granted, I am constrained by facility and medical staff policies and rules applicable generally and any applicable to the particular situation

(b) any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents

Physician's Signature

Date

Printed Name