
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

Privilege	Initial Application: Required Education or Training	Initial Application Current Clinical Competence (CCC)	Reappointment: Retrospective review of cases performed at MLH facility (FPPE)
Advanced Aortic Trans Catheter Valve Placement Privileges	Maintain current clinical privileges at facility in either Cardio Thoracic Surgery or Interventional Cardiology, CME including successful completion of didactic training in Advanced Aortic Trans Catheter Valve Placement as part of the structured TAVR training program and documented by a Certificate of Completion from Edwards LifeSciences	Participation in the structured TAVR program at MHMH	FPPE: First 3 cases Case log documenting the performance of procedures annually over the reappointment cycle sufficient to maintain current clinical competence and participation in the structured TAVR program at MHMH, and adherence to established patient selection criteria.

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.

Advanced Aortic Trans Catheter Valve Placement Privileges

Indications for Use:

- Severe, symptomatic aortic stenosis
- >20% operative mortality risk
- Severe ascending aorta calcification (porcelain aorta) that prevents aortic cannulation or cross-clamping
- Severe radiation damage to the chest or other severe chest deformities that would preclude a sternotomy (transcatheter approach used because radiation damage may also prevent a transapical approach)
- Patients' willingness to comply with follow-up evaluations to assist with ongoing development of this new technology and ethics boards that approve studies with these valves

Contraindications for transcatheter and transapical aortic valve replacement:

- Previously untreated coronary disease (the valve may prevent access for percutaneous coronary interventions although successful stent placement after implantation of a transcatheter valve has been reported)
- No concomitant coronary artery bypass surgery with transapical aortic valve replacement because the exposure would be inadequate
- Infective endocarditis or intracardiac tumor (excision on bypass is the only accepted treatment for intracardiac tumor)
- Estimated life span of less than 1 year (would limit follow-up of investigational valves)
- Recent active gastrointestinal bleeding that would prohibit use of heparin or antiplatelet therapies such as aspirin or clopidogrel
- Patients with a contraindication to transesophageal echocardiography (used preoperatively to assess aortic annulus size and to position the valve)
- Aortic annulus size not amenable to use with the currently available valve sizes (valve sizing is critical to avoid paravalvular regurgitation)
- Anomalous coronary ostia (valve could potentially interfere with flow into anomalous coronary ostia) or an unusually bulky coronary leaflet
- Renal failure with creatinine clearance <20 mL/min
- For transcatheter aortic valve replacement only: severely calcified, diseased, small or tortuous iliac vessels that preclude passage of the delivery catheter or previous aortobifemoral grafting (these patients would qualify for transapical aortic valve replacement) or aortic aneurysm
- For transapical aortic valve replacement only: left apical clot, aneurysm, or scar (these patients would qualify for transcatheter aortic valve replacement); left ventricular clot could be a contraindication for transcatheter
- Patient offered conventional aortic valve replacement but refused surgery



Unified Medical Staff: Memphis Hospitals & Olive Branch Hospital

Delineation of Clinical Privileges
Specialty of Advanced Aortic Trans Catheter Valve Placement

Advanced Aortic Trans Catheter Valve Placement Clinical Privileges

Check below the particular privileges desired 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				
	Neonates (0-28 days)	Infants (29 days–2 Years)	Children & Adolescents (2-18 years)	Adults & Adolescents (13 & Above)	Adults (18 & Above)
Advanced Aortic Trans Catheter Valve Placement					
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