

General Information

All applicants must meet the qualifications, conditions and responsibilities as set forth in MLH Credentials Policies. Polices 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.



Delineation of Clinical Privileges Specialty of Anesthesiology

Privilege	Initial Application: Required Education or Training	Initial Application: Current Clinical Competence:	Reappointment:
Anesthesiology Core	Successful completion of an ACGME or AOA accredited residency training program in Anesthesiology AND Current board certification or active participation in the examination process leading to certification in Anesthesiology by the American Board of Anesthesiology (ABA) or the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	Case log from primary practice facility documenting 50 cases for the previous twelve (12) months; unless recent graduate within preceding twelve (12) Months.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification.
Pediatric Anesthesiology	Meet Anesthesiology Core; AND Successful completion of an ACGME or AOA accredited fellowship in Pediatric Anesthesiology, AND Current board certification or active participation in the examination process leading to certification in Pediatric Anesthesiology by the American Board of Anesthesiology (ABA) or Pediatric Anesthesiology by the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board certification within five (5) years of completion.	Case log from primary practice facility documenting 50 hospital cases for the previous twelve (12) months; unless recent graduate within preceding twelve (12) Months; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits.
Adult Cardiac Anesthesiology	Meet Anesthesiology Core; AND Successful completion of an ACGME accredited fellowship in Adult Cardiothoracic Anesthesiology; OR Current experience in managing complex cardiac surgical patients, including hemodynamic instability, utilizing advanced monitoring techniques, and administering specialized anesthetic agents during cardiac procedures; AND Current board certification or active participation in the examination process leading to certification in Adult Cardiac Anesthesiology by the American Board of Anesthesiology (ABA) or Anesthesiology by the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	Case log from primary practice facility documenting 20 hospital cases for the previous twelve (12) months; unless recent graduate within preceding twelve (12) Months; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits.



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Community Pediatric Privileges	Meet Anesthesiology Core; AND Current board certification or active participation in the examination process leading to certification in Anesthesiology by the American Board of Anesthesiology (ABA) or the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	Demonstrated competence in providing five (5) ASA 1 & 2 level pediatric anesthesia; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits
Chronic Pain Management	Meet Anesthesiology Core; AND Completion of an ACGME fellowship in Pain Medicine; AND Current board certification or active participation in the examination process leading to certification in Pain Medicine by the American Board of Anesthesiology (ABA) or Pain Management by the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	50 cases within the previous 12 months. (e.g. neuraxial blocks, peripheral nerve blocks, management of PCA pumps, oral pain management etc.); AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits
Critical Care	Meet Anesthesiology Core; AND Completion of an ACGME fellowship in Critical Care; AND Current board certification or active participation in the examination process leading to certification in Critical Care Medicine by the American Board of Anesthesiology (ABA) or Critical Care by the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	Case log from primary practice facility documenting 25 hospital cases within the previous 12 months; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits



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Liver Transplant Anesthesia (Adult)	Meet Anesthesiology Core; AND Current board certification or active participation in the examination process leading to certification in Anesthesiology by the American Board of Anesthesiology (ABA) or the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	 Experience in routine and high-risk transplant patient cohorts (e.g. Liver, Kidney, other solid organ transplant patients) as it pertains to both the Transplant Procedures, bring-back procedures, and non-transplant surgery on patients who have had a transplant sometime in the past; OR Cases for the last six (6) months reflective of the privileges requested. One (1) case to be proctored concurrently once privilege approved; OR A letter of reference may come from the applicable department chair and/or clinical service chief at the facility where the applicant most recently practiced. 	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits
Neurosurgical Anesthesiology	Meet Anesthesiology Core; AND Completion of an ACGME fellowship in Neurosurgical Anesthesiology; OR Current experience in routine and high-risk adult neurosurgical patient cohorts (e.g. supratentorial, infratentorial, peripheral cases, etc.) as it pertains to both the surgical and interventional procedures, bring-back procedures, and select non-neurological surgery undertaken on patients who have had a recent neurological procedure; AND Current board certification or active participation in the examination process leading to certification in Anesthesiology by the American Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	Verification of similar specialty or subspecialty privileges from most recent/previous facility during the preceding twelve (12) months, along with evidence of having completed five (5) cases not inconsistent with privileges over this period of time; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits



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Dbstetrical Anesthesia	Meet Anesthesiology Core; AND Completion of an ACGME fellowship in Obstetrical Anesthesiology; OR Current experience in routine and high-risk obstetrical cohorts (e.g. multiple gestation, pre-eclampsia, eclampsia, gestational diabetes, patients with co-existing morbidities or adverse lifestyle factors); AND Current board certification or active participation in the examination process leading to certification in Anesthesiology by the American Board of Anesthesiology (ABA) or the American Osteopathic Board of Anesthesiology (AOBA) or foreign equivalent training/board within five (5) years of completion.	Verification of similar specialty or subspecialty privileges from most recent/previous facility during the preceding twelve (12) months, along with evidence of having completed five (5) cases not inconsistent with privileges over this period; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	OPPE; AND Maintain current certification or active participation in the certification process. Active enrollment in Maintenance of Certification for providers who have time-limited certification. AND Ten (10) relevant subspecialty CME credits.
ree Basic	Meet Anesthesiology Core	Case log from primary practice facility documenting 50 exams; AND Ten (10) relevant subspecialty CME credits, unless recent graduate within preceding twelve (12) months of application submission.	Case log documenting 25 procedures within the previous reappointment cycle.
EE Advanced	Meet Anesthesiology Core	Case log from primary practice facility documenting 100 exams; AND Ten (10) relevant subspecialty CME credits, unless graduated within preceding twelve (12) months of application submission.	Case log documenting 25-50 procedures within the previous reappointment cycle.

Core Privileges

Anesthesiology Core Privilege:

Admit, evaluate, diagnose, consult, and provide care management of patients of all ages except as specifically excluded from practice, rendered unconscious or insensible to pain and emotional stress during surgical, obstetrical and certain other medical procedures; including preoperative, intraoperative and postoperative evaluation and treatment; the support of life functions and vital organs under the stress of anesthetic, surgical and other medical procedures; management of patients with a difficult airway, management of problems in pain relief, direct resuscitation in the care of patients with cardiac or respiratory emergencies, including the need for artificial ventilation, pulmonary care, supervision of patients in post-anesthesia care units and critically ill patients in special care units; except for those special procedures listed.

- Anesthesia for laser surgery of the airway
- Arterial and central venous cannulation
- Fiberoptic laryngotracheobronchoscopy and intubation



- Local and regional anesthesia with and without sedation, including topical, and infiltration, minor and major nerve blocks, intravenous blocks, spinal, epidural, and major plexus blocks and peripheral nerve blocks to include indwelling catheters
- Solid Organ Transplant Anesthesia, excluding liver
- Single lung anesthesia
- FPPE: First 3 cases proctored concurrently, and first three months of quality, complication, and safety data.

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

Community Pediatric Privileges

Admit, evaluate, diagnose, consult, and provide care management of pediatric (ages 2-13 years) patients rendered unconscious or insensible to pain and emotional stress utilizing various pediatric sedation, general or regional anesthesia, place and use of invasive monitors (including arterial, central venous, and pulmonary artery catheters,) during surgical and certain other medical procedures, limited to ASA classifications 1 and 2; including pre-, intra-, and postoperative evaluation and treatment, support of life functions and vital organs under the stress of anesthetic, surgical and other medical procedures, medical management and consultation in pain management and critical care medicine, direct resuscitation in the care of patients with cardiac or respiratory emergencies, including the need for artificial ventilation and pulmonary care,

• FPPE: First 5 cases Case log documenting 5 procedures within the previous 12 months

Pediatric Anesthesiology Privileges:

Admit, evaluate, diagnose, consult, and provide care management of pediatric (ages neonate to 18 years) patients rendered unconscious or insensible to pain and emotional stress utilizing various pediatric sedation, general or regional anesthesia, place and use of invasive monitors (including arterial, central venous, and pulmonary artery catheters,) during surgical and certain other medical procedures; including pre-, intra-, and postoperative evaluation and treatment, support of life functions and vital organs under the stress of anesthetic, surgical and other medical procedures, medical management and consultation in pain management and critical care medicine, direct resuscitation in the care of patients with cardiac or respiratory emergencies, including the need for artificial ventilation, pulmonary care, and supervision of pediatric patients in the neonatal ICU and Well Newborn Nurseries.

- Anesthesiology Core (0-18 years)
- Cardiac Anesthesia
- Single lung anesthesia
- Liver Transplantation
- FPPE: First 3 cases proctored concurrently, and first three months of quality, complication, and safety data.

Adult Cardiac Anesthesia:

Admit, evaluate, diagnose, consult, and manage complex cardiac surgical patients; this includes managing hemodynamic instability, utilizing advanced monitoring techniques,

and administering specialized anesthetic agents during cardiac procedures.

• FPPE: First 3 cases proctored concurrently, and first three months of quality, complication, and safety data.



Chronic Pain Management:

Admit, evaluate, diagnose, consult, and provide comprehensive management of chronic and/or cancer pain utilizing a broad range of peripheral nerve block procedures, epidural and subarachnoid injections, joint and bursal sac injections, cryotherapeutic techniques, epidural, subarachnoid, or peripheral neurolysis, electrical stimulation techniques, implanted epidural and intrathecal catheters, ports, and infusion pumps; acupuncture and acupressure, hypnosis, stress management, and relaxation techniques, trigeminal ganglionectomy, peripheral neurolysis, Sympathectomy techniques, alternative pain therapies and management of local anesthetic overdose including airway management and resuscitation; management of therapies, side effects and complications of pharmacologic agents used in pain management.

• FPPE: First 5 cases proctored concurrently

Critical Care:

Management of patients in critical care units including but not limited to the use of procedures such as chest tube insertion, transvenous pacemaker insertion, cardioversion, hemodialysis catheter insertion, ultrafiltration, thoracentesis, and pericardiocentesis.

- Management of mechanical ventilators including initiation, management, weaning, etc
- Perform critical care procedures, including central line placement, arterial line insertion, and management of mechanical ventilation
- Undertake diagnostic and/or therapeutic efforts to treat ICU patients with critical conditions (e.g.; sepsis, respiratory failure, etc.)
- Use of ultrasound to identify, diagnose and treat exigent ICU clinical situations (e.g.; pneumothorax, hemopericardium, etc.)
- FPPE: First three months of quality, complication, and safety data.

Liver Transplant (Adult)

Complete thorough evaluation for liver transplant surgeries and development of an anesthesia plan considering various comorbidities.

Provide anesthesia for liver transplant surgeries, including management of complex coagulation issues, massive transfusions, and significant hemodynamic shifts during procedure

• FPPE: First 5 cases proctored concurrently, and first three months of quality, complication, and safety data.

Neurosurgical Anesthesiology

- Provide anesthesia for patients undergoing procedures on the brain, spinal cord, related blood vessels and supporting structures
- Anesthesia for supratentorial or infratentorial intracranial surgery
- Anesthesia for extracranial surgery
- Anesthesia for surgery on the spinal cord and surrounding structures
- FPPE: First 3 cases proctored concurrently. (Not required for Section Head); and, first three months of quality, complication, and safety data.

Obstetrical:

- Complete thorough evaluation for obstetrical patients and development of an analgesia and/or anesthesia care plan considering various comorbidities
- Manage neuraxial blocks for labor analgesia, surgical anesthesia, and postoperative pain control.
- Perform spinal, epidural, and combined spinal epidural (CSE) anesthesia.
- Provide anesthesia and analgesia for parturient during the delivery process, as well as related procedures (e.g., cerclage, c-section, etc.)
- Treatment of patients with complex medical issues (e.g.; renal, pulmonary, cardiac, hematologic, hepatic, neurological, etc.)
- Treatment of patients with complex obstetrical issues (e.g.; preeclampsia, eclampsia, placenta accreta, placenta previa, pre term labor etc.)
- Use fetal monitor to detect fetal well-being or extremis before, during and after anesthetic or analgesic care
- Obstetric anesthesia not otherwise specified but reasonably within the scope of a specialist obstetric anesthesiologist
- FPPE: First 3 cases proctored concurrently. (Not required for Section Head); and, first three months of quality, complication, and safety data.



TEE (Basic)

TEE probe placement and intraoperative monitoring

• FPPE: First five (5) cases retrospective review

TEE (Advanced)

Procedural guidance and diagnostic abilities

• FPPE: First three (3) cases proctored concurrently.



Anesthesiology Clinical Privileges

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

Privilege Description	Please check (✓) applicable age categories for each privilege requested. Methodist Healthcare – Memphis Hospitals (MHMH) Germantown, Le Bonheur Medical Center, North, South & University, Outpatient Clinics & Diagnostic Facilities				Methodist Healthcare – Olive Branch Hospital (MHOBH)	
Age Limitations	Neonates & Infants (0-6 months)	Infants to Children (6 mos-2)	Children (2-13)	Adolescents (13-18)	Adolescents & Adults (13 & Above*)	Adults (13 & Above*)
Anesthesiology Core						
Special Privileges						
Community Pediatric Privileges						
Anesthesiology Core & Pediatric						
Anesthesiology						
Cardiac Anesthesia						
Chronic Pain Management						
Critical Care						
Liver Transplant (Adult)						
Neurosurgical Anesthesiology						
Obstetrical Anesthesia						
TEE Basic						
TEE Advanced						
Limitations					privileges are available a extended regardless of the	

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



Delineation of Clinical Privileges Specialty of Anesthesiology

Printed Name