
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 and/or Training	Initial Application Current Clinical Competence (CCC)	Reappointment Retrospective review of cases performed at MLH facility (FPPE)
Otolaryngology Core	Current certification by the American Board of Otolaryngology or The American Osteopathic Board of Ophthalmology and Otolaryngology. OR Successful completion of an ACGME or AOA accredited post-graduate training program in Otolaryngology and board certification within 5 years of completion.	Case log or 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 : First 5 cases
Otolaryngology Pediatric Core	Current certification by the American Board of Otolaryngology or The American Osteopathic Board of Ophthalmology and Otolaryngology. OR Successful completion of an ACGME accredited post-graduate training program in Otolaryngology and board certification within 5 years of completion.	Case log or 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 : First 5 cases
<i>Use of Laser</i>	1. Completion of an approved eight hour minimum CME course which includes: a. training in laser principles and safety b. basic laser physics c. laser tissue interaction d. discussions of the clinical specialty field e. hands-on experience with lasers 2. A letter outlining the content and successful completion of course must be submitted, or documentation of successful completion of an approved residency in a specialty or subspecialty which included training in: a. laser principles and safety b. basic laser physics c. laser tissue interaction d. discussions of the clinical specialty field e. a minimum of six hours observation and hands-on experience with lasers.		FPPE : First 5 cases Case log documenting 5 procedures within the previous 24 months
<i>Neuro-otology Core</i>	Completion of special training either in a fellowship or sufficient clinical experience in neuro-otology as determined by the Department Chair.	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 2 procedures within the previous 24 months

Privilege	Initial Application Required Education and/or Training	Initial Application Current Clinical Competence (CCC)	Reappointment Retrospective review of cases performed at MLH facility (FPPE)
<i>Cochlear implant</i>	Completion of special training and/or a course in cochlear implantation.	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 2 procedures within the previous 24 months
<i>Implantation of Inspire Upper Airway Stimulation System</i>	Completion of Inspire Medical Systems training course which includes didactic and laboratory training as evidenced by a certificate of completion.	Case log documenting the performance of 6 procedures within the previous 24 months OR Completion of 3 successfully proctored cases as evidenced by submission of proctor evaluation forms.	FPPE : First 3 cases Case log documenting the performance of at least 3 procedures annually.
<i>Robotic Surgery</i>	1. Applicants whose formal surgical training included robotic surgery: Training director letter validating competence in robotic surgery OR 2. Applicants without formal surgical training in robotic surgery: Training Certificate validating completion of a robotic surgery training course which included didactic and laboratory training	1. Applicants whose formal surgical training included robotic surgery: Case log from training reflecting applicant was primary surgeon or If training logs are not available, privilege will be initially granted with a limit requiring five successful cases evidenced by retrospective review. OR 2. Applicants without formal surgical training in robotic surgery: Privilege initially granted with a limit requiring concurrent proctoring of five successfully completed cases.	FPPE : First 5 cases Case log documenting the performance of at least 10 procedures over the previous 24 months

Core Privileges

Otolaryngology Core Privilege:

Admit, evaluate, diagnose, provide consultation and comprehensive medical and surgical care to patients, except as specifically excluded from practice, presenting with diseases, deformities, or disorders of the head and neck that affect the ears, nose, throat, the respiratory and upper alimentary systems and related structures of the head and neck. Head and neck oncology and facial plastic reconstructive surgery and the treatment of disorders of hearing and voice are also included.

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

The core privileges in this specialty include the procedures on the list below and such other procedures that are extensions of the same techniques and skills. These shall include all non-airway pediatric procedures. Airway cases under two years of age should be on an emergency basis only.

Otolaryngology Pediatric Core Privilege:

Admit, evaluate, diagnose, provide consultation and comprehensive medical and surgical care to pediatric patients over two years of age unless appropriate training and experience is documented in neonates and infants, except as specifically excluded from practice, presenting with disease, deformities, or disorders of the head and neck that affect the ears, nose, throat, the respiratory and upper alimentary systems and related structures of the head and neck. Head and neck oncology and facial plastic reconstructive surgery and the treatment of disorders of hearing and voice are also included.

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

The core privileges in this specialty include the procedures on the list below and such other procedures that are extension of the same techniques and skills. Routine surgical pediatric airway privileges for children <2 years of age shall require pediatric fellowship training or documentation of sufficient clinical experience.

Pediatric Otolaryngology Surgeons may serve as co-attending with Intensivists in the Intensive Care Unit.

Procedures

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| <ul style="list-style-type: none">• Excision:<ul style="list-style-type: none">➤ angiofibroma➤ other nasopharyngeal tumor➤ Submandibular gland excision➤ tumor ethmoid cribiform plate➤ Skin lesions 1st degree closure➤ Excision with flap reconstruction➤ Parapharyngeal space tumor excision• Lip: shave, wedge resection, 1st degree closure lip• Cleft Lip/Palate Surgery• Orthognathic surgery• TMJ surgery | <ul style="list-style-type: none">• Major vessel: ligation, repair• Tympanostomy/tube placement• Tympanoplasty/ossicular chain reconstruction• Mastoid procedures• Stapes procedures• Tumor surgery (glomus tympanic tumors, other middle ear tumors)• Ear canal procedures (atresia and stenosis of ear canal, other ear canal procedures)• Cysts: Brachial cleft, Thyroglossal• Dermoid• Lymphangioma• Cystic hygroma | <ul style="list-style-type: none">• Laryngoscopy (with excision); Direct (diagnostic)• Vocal cord injection• Esophagoscopy-diagnostic (with foreign body removal, with stricture dilation)• Bronchoscopy-diagnostic (with foreign body removal, with stricture dilation)• Panendoscopy (multiple concurrent endoscopic procedures)• Nasal:<ul style="list-style-type: none">➤ polypectomy➤ septoplasty➤ Turbinectomy➤ intranasal antrotomy |
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| <ul style="list-style-type: none"> • Resection: <ul style="list-style-type: none"> ➢ Local resection cancer mouth ➢ Composite resection of primary tumor in floor of mouth alveolus, tongue, buccal region, tonsil or any combination ➢ Mandibular resection ➢ Submucous resection of septum ➢ Tracheal resection with repair • Hemiglossectomy • Parotidectomy: <ul style="list-style-type: none"> ➢ Superficial parotidectomy ➢ Total parotidectomy, VII preserved ➢ Parotidectomy with nerve graft • Rhinectomy • Lateral rhinotomy • Maxillectomy • Maxillectomy with orbital extenteration • Adenoidectomy • Tonsillectomy • T&A • I&D neck abscess • Neck dissection: complete, modified • Node biopsy: cervical, scalene • Thyrotomy (laryngofissure) • Vertical hemilaryngectomy • Laryngectomy: total, Supraglottic • Laryngopharyngectomy • Surgical speech fistula • Section recurrent laryngeal nerve • Arytenoidectomy • Arytenoidpexy • Thyroid: <ul style="list-style-type: none"> ➢ Lobectomy ➢ Thyroidectomy: total, subtotal • Parathyroidectomy | <ul style="list-style-type: none"> • Laryngoplasty • Tracheoplasty • Otoplasty • Rhinoplasty • Mentoplasty • Rhytidectomy, forehead Rhytidectomy • Blepharoplasty • Uvulopalatopharyngoplasty • Repair: <ul style="list-style-type: none"> ➢ Complex facial lacerations ➢ Oroantral fistula repair ➢ Choanal atresia repair ➢ Laryngeal fracture ➢ Facial nerve decompression and repair ➢ Repair of middle ear and mastoid trauma • Dermabrasion • Reduction: <ul style="list-style-type: none"> ➢ facial frontal fractures ➢ nasal fractures ➢ maxilla-Le Fort I, II, and III ➢ malar fractures ➢ orbital blowout fractures ➢ mandibular-closed and open fractures • Grafts (split thickness skin, full thickness skin) • Facial sling procedures • Pharyngeal flap • Pedicle flap procedures • Pharyngeal diverticulectomy • Pharyngoesophagectomy • Cervical esophagostomy for feeding • Tracheotomy - open and percutaneous | <ul style="list-style-type: none"> • Sinus: <ul style="list-style-type: none"> ➢ Caldwell Luc ➢ Intranasal ethmoidectomy ➢ External ethmoidectomy ➢ Frontoethmoidectomy ➢ Frontal sinus trephine ➢ Osteoplastic frontal sinusotomy ➢ Frontal sinus ablation ➢ Sphenoidotomy ➢ Radical pansinusotomy ➢ Dacryocystorhinostomy ➢ Hypophysectomy (transnasal and transsinus approach) ➢ Vidian neurectomy • Transantral ligation of vessels • Endoscopic Sinus Surgery (ESS) including, but not limited to <ul style="list-style-type: none"> ➢ Maxillary antrostomy ➢ Ethmoidectomy-Anterior and Total ➢ Sphenoidotomy ➢ Frontal sinusotomy • Facial cosmetic and reconstructive surgery including the following, but not excluding other facial cosmetic and reconstructive surgery <ul style="list-style-type: none"> ➢ Facial augmentation ➢ Liposuction (head and neck area) ➢ Brow lifts ➢ Botox ➢ Facial skin peeling ➢ Reconstruction external ear ➢ Scar revision |
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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.

Neuro-otology privileges include but are not limited to the following:

- Stapedectomy, stapedotomy
- Middle fossa, posterior fossa, translabyrinthine approaches to skull base
- Vestibular neurectomy
- Petrous apex surgery
- Glomus tumor surgery
- Endolymphatic sac surgery
- Acoustic neuroma
- Cochlear implantation
- Intratemporal facial nerve surgery
- CSF leak repair

Administration of moderate sedation:

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

Requires: Separate DOP, ACLS, NRP or PALS certification



Unified Medical Staff: Memphis Hospitals & Olive Branch Hospital

Delineation of Clinical Privileges
Specialty of Otolaryngology

Otolaryngology Clinical Privileges

Check below the particular privileges desired in Otolaryngology 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)
Age Limitations	Neonates (0-28 days)	Infants (29 days– 2 Years)	Children & Adolescents (2-18 years)	Adults & Adolescents (13 & Above)	Adults & Adolescents (13 & Above)
Otolaryngology Core					
Otolaryngology Pediatric Core					
Special Privileges					
Use of Laser					
Neuro-otology					
Cochlear Implants					
Robotic Surgery					
Implantation of Inspire Upper Airway Stimulation System					
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.				

Note: Privileges for administration of moderate sedation and robotic surgery require completion of a separate Delineation of Privilege form.

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