

#### **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.

Board approved: March 2011



Privilege	Initial Application Required Education and/or Training	Initial Application Current Clinical Competence (CCC)	Reappointment Retrospective review of cases performed at MLH facility (FPPE)
Vascular Surgery Core	Current certification by the American Board of Surgery, or the American Osteopathic Board of Surgery and subspecialty certification in Vascular Surgery  OR Current certification by the American Board of Thoracic Surgery, or the American Osteopathic Board of Thoracic Cardiovascular Surgery  OR Successful completion of ACGME or AOA accredited postgraduate training programs in:  • general surgery • vascular surgery and board certification within 5 years of completion.  OR Successful completion of an ACGME or AOA accredited postgraduate training program in thoracic surgery 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 major cases
Vascular Surgery Pediatric Core	Current certification by the American Board of Surgery, or the American Osteopathic Board of Surgery and subspecialty certification in Vascular Surgery  OR Current certification by the American Board of Thoracic Surgery, or the American Osteopathic Board of Thoracic Cardiovascular Surgery  OR Successful completion of ACGME or AOA accredited post-graduate training programs in:  • general surgery  • vascular surgery and board certification within 5 years of completion.  OR Successful completion of an ACGME or AOA accredited post-graduate training program in thoracic surgery 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 3 major cases

Board approved: March 2011 Revised: 4/16/14, 06/15/2016, 5/16/18, 12/19/18, 11/20/19

# **Delineation of Clinical Privileges Specialty of Vascular Surgery**

Privilege	Initial Application Required Education and/or Training	Initial Application Current Clinical Competence (CCC)	Reappointment Retrospective review of cases performed at MLH facility (FPPE)
Use of Laser	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
Robotic Surgery	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	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

Board approved: March 2011 Revised: 4/16/14, 06/15/2016, 5/16/18, 12/19/18, 11/20/19



# **Core Privileges**

## **Vascular Surgery Core Privilege:**

Admit, evaluate, diagnose, provide consultation and treatment to patients ages 13 or older with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding vessels of the heart and excluding therapeutic interventions of the intracranial arteries.

Physicians may provide care to patients in the intensive care setting in conformance with unit policies. They may also assess, stabilize, and determine the disposition of patients with emergency conditions consistent with medical staff policy regarding emergency and consultative call services.

The core privileges in this specialty include the procedures on the attached list and such other procedures that are extensions of the same techniques and skills.

#### Operative procedures:

- Amputations of the upper or lower extremity
- Assess, debride, and treat wounds including the use of split thickness skin grafting, and wound coverage with the use of skin substitutes.
- Central venous access catheters and ports
- Hemodialysis access procedures
- Diagnostic biopsy or other diagnostic procedures on blood vessels
- Repair of aneurysms of the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, carotid and vertebral arteries, and peripheral arteries
- Reconstruction and repair of the non-cardiac and non-intracranial arteries and veins of the body including the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, carotid and vertebral arteries, peripheral arteries, central veins, and peripheral veins (e.g., endarterectomy, thrombectomy, embolectomy, bypass grafting, prosthetic graft, autologous vein, in situ vein, and extra-anatomic bypass)
- Decompressive fasciotomies of the upper and lower extremities
- Temporal artery biopsy
- Vein ligation and stripping
- Operations for thoracic outlet decompression
- Vascular exposure for operations of the cervical, thoracic, and lumbar spine
- Cervical, thoracic, and lumbar sympathectomy
- Emergency Pediatric Vascular trauma

#### **Endovascular procedures:**

- Diagnostic arteriography (excluding intracardiac) including pulmonary arteriography
- Diagnostic venography (excluding intracardiac)
- Repair (e.g., stent, stent graft, and embolization) of aneurysms of the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, the carotid and vertebral arteries, and peripheral arteries
- Reconstruction and repair (e.g., angioplasty, stent, stent graft, and embolization) of the non-cardiac and nonintracranial arteries and veins of the body including the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, the carotid and vertebral arteries, and peripheral arteries.
- Open and percutaneous endovascular procedures
- Placement of inferior vena cava filter
- Endovenous ablative therapy (laser or radiofrequency)
- Intravascular ultrasonography
- Balloon angioplasty
- Stent placement
- Stent graft placement
- Intra-arterial and intravenous thrombolytic therapy
- Embolization/ablation, including transarterial chemoembolization
- Use of AngioVac and other thrombus aspiration devices

#### **Vascular Diagnostic Laboratory:**

- Performance and Interpretation of arterial studies of the extremities
- Performance and Interpretation of venous studies of the extremities
- Performance and Interpretation of cerebrovascular studies
- Performance and Interpretation of visceral and abdominal arterial and venous studies
- Performance and Interpretation of transcranial studies

Board approved: March 2011



## Vascular Surgery Pediatric Core Privilege:

Admit, evaluate, diagnose, provide consultation and treatment to patients ages 12 or younger with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding vessels of the heart and excluding therapeutic interventions of the intracranial arteries.

Physicians may provide care to patients in the intensive care setting in conformance with unit policies. They may also assess, stabilize, and determine the disposition of patients with emergency conditions consistent with medical staff policy regarding emergency and consultative call services.

The core privileges in this specialty include the procedures on the attached list and such other procedures that are extensions of the same techniques and skills.

#### Operative procedures:

- Amputations of the upper or lower extremity
- Assess, debride, and treat wounds including the use of split thickness skingrafting, and wound coverage with the use of skin substitutes.
- Central venous access catheters and ports
- Hemodialysis access procedures
- Diagnostic biopsy or other diagnostic procedures on blood vessels
- Repair of aneurysms of the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, carotid and vertebral arteries, and peripheral arteries
- Reconstruction and repair of the non-cardiac and non-intracranial arteries and veins of the body including the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, carotid and vertebral arteries, peripheral arteries, central veins, and peripheral veins (e.g., endarterectomy, thrombectomy, embolectomy, bypass grafting, prosthetic graft, autologous vein, in situ vein, and extra-anatomic bypass)
- Decompressive fasciotomies of the upper and lower extremities
- Temporal artery biopsy
- Vein ligation and stripping
- Operations for thoracic outlet decompression
- Vascular exposure for operations of the cervical, thoracic, and lumbar spine
- Cervical, thoracic, and lumbar sympathectomy

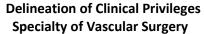
#### **Endovascular procedures:**

- Diagnostic arteriography (excluding intracardiac) including pulmonary arteriography
- Diagnostic venography (excluding intracardiac)
- Repair (e.g., stent, stent graft, and embolization) of aneurysms of the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, the carotid and vertebral arteries, and peripheral arteries
- Reconstruction and repair (e.g., angioplasty, stent, stent graft, and embolization) of the non-cardiac and nonintracranial arteries and veins of the body including the thoracic aorta, thoracoabdominal aorta, abdominal aorta, iliac artery, visceral/renal arteries, aortic arch branch vessels, the carotid and vertebral arteries, and peripheral arteries.
- Open and percutaneous endovascular procedures
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- Intravascular ultrasonography
- Balloon angioplasty
- Stent placement
- Stent graft placement
- Intra-arterial and intravenous thrombolytic therapy
- Embolization/ablation, including transarterial chemoembolization
- Use of AngioVac and other thrombus aspiration devices

#### **Vascular Diagnostic Laboratory**

- Performance and Interpretation of arterial studies of the extremities
- Performance and Interpretation of venous studies of the extremities
- Performance and Interpretation of cerebrovascular studies
- Performance and Interpretation of visceral and abdominal arterial and venous studies
- Performance and Interpretation of transcranial studies

Board approved: March 2011





# 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.

Administration of moderate sedation: See Credentialing Policy for Sedation and Analgesia by Non-Anesthesiologists.

Requires: Separate DOP, ACLS, NRP or PALS certification

Carotid Stents: Requires: Separate DOP

Board approved: March 2011



**Unified Medical Staff: Memphis Hospitals & Olive Branch Hospital** 

# Vascular Surgery Clinical Privileges

Check below the particular privileges desired in Vascular Surgery for each facility:

Please check (✓) applicable age categories for each privilege requested. Methodist Healthcare – Memphis Hospitals (MHMH)

Privilege Description	Methodist Healthcare – Memphis Hospitals (MHMH)  Germantown, Le Bonheur Medical Center,  North, South & University, Outpatient Clinics & Diagnostic Facilities				
Age Limitations	Neonates (0-28 days)	Infants (29 days–2 Years)	Children & Adolescents (2-18 years)	Adults & Adolescents (13-& Above)	
Vascular Surgery Core					
Vascular Surgery Pediatric Core					
Special Privileges					
Use of Laser					
Robotic Surgery					
Limitations	Clinical privileges are granted only to the extent privileges are available at each facility.				
Acknowledgement of practition  I have requested only those privileges at the facilities indicated above, to the	s for which by educa			nce I am qualified to perform and for which I wish to exercise	
(a) In exercising any clinical privileges	s granted, I am cons	trained by facility and med	lical staff policies and rules applicab	ole generally and any applicable to the particular situation	
(b) Any restriction on the clinical privil staff bylaws or related documents	eges granted to me	is waived in an emergency	y situation and in such situation my	actions are governed by the applicable section of the medica	
Physician's Signature			Date		
Printed Name					

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