



General Surgery Kettering Health
Delineation of Privileges

Applicant's Name: \_\_\_\_\_

Instructions:

- 1. Click the Request checkbox to request a group of privileges.
2. Uncheck any privileges you do not want to request in that group.
3. Check off any special privileges you want to request.
4. Sign/Date form and submit with required documentation
5. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving doubts related to qualification of requested privileges.

Clinical Service Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation on the last page of this form.

NOTE: If call, all members of the clinical service must be able to respond within thirty (30) minutes or have an alternate who can respond within 30 minutes time. If on call the same response time (30 minutes) is in effect. The 30 minute response time reflects traveling at posted highway speed limits. Privileges granted may only be exercised at the site(s) and setting(s) that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital or department policy.

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.

Required Qualifications

Table with 2 columns: Requirement Category and Description. Categories include Membership, Education/Training, Certification, Clinical Experience (Initial), and Clinical Experience (Reappointment).

**Additional Qualifications** If called, all members of the clinical service must be able to respond within thirty (30) minutes or have an alternate who can respond within 30 minutes time. If on call the same response time (30 minutes) is in effect. The 30 minute response time reflects traveling at posted highway speed limits.

**Professional Practice Evaluation** All new clinical privileges granted are subject to focused professional practice evaluation as follows:  
Retrospective medical record review of Five (5) patient encounters

## Core Privileges General Surgery

**Description:** This list is a sampling of procedures included in the core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

Request							Request all privileges listed below. Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	
							- Currently granted privileges
							Conduct office visits and provide surgical consultation for patients on-site at the Jamestown Rural Health Clinic.
							Admit, evaluate, diagnose, consult, and provide pre-, intra-, and postoperative care and perform surgical procedures to patients of all ages to correct or treat various conditions, diseases, disorders, and injuries of the alimentary tract, abdomen, and its contents, extremities, breast, skin and soft tissue, head and neck, and endocrine systems. May provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.
							<b>Procedures</b> (This listing includes procedures typically performed by physicians in this specialty. Other procedures that are extensions of the same techniques and skills may also be performed.)
							Abdominoperineal resection
							Amputations, above the knee, below knee; toe, transmetatarsal, digits, upper extremity
							Anoscopy
							Appendectomy
							Breast: complete mastectomy with or without axillary lymph node dissection; excision of breast lesion, breast biopsy, incision and drainage of abscess, modified radical mastectomy, operation for gynecomastia, partial mastectomy with or without lymph node dissection, radical mastectomy, subcutaneous mastectomy
							Circumcision
							Colectomy, abdominal
							Colon surgery for benign or malignant disease
							Colonoscopy with polypectomy
							Colotomy, colostomy
							Correction of intestinal obstruction
							Distal esophagogastrectomy
							Drainage of intra-abdominal, deep ischiorectal abscess
							EGD with and without biopsy
							Emergency thoracotomy
							Endoscopy (intraoperative)
							Enteric fistulae, management

						Enterostomy (feeding or decompression)
						Esophageal resection and reconstruction
						Excision of fistula in ano/fistulotomy, rectal lesion
						Excision of pilonidal cyst/marsupialization
						Excision of thyroid tumors
						Excision of thyroglossal duct cyst
						Gastric operations for cancer (radical, partial, or total gastrectomy)
						Gastroduodenal surgery
						Gastrostomy (feeding or decompression)
						Genitourinary procedures incidental to malignancy or trauma
						Gynecological procedure incidental to abdominal exploration
						Hepatic resection
						Hemodialysis access procedures
						Hemorrhoidectomy, including stapled hemorrhoidectomy
						Incision and drainage of abscesses and cysts
						Incision and drainage of pelvic abscess
						Incision, excision, resection and enterostomy of small intestine
						Incision/drainage and debridement, perirectal abscess
						Insertion and management of pulmonary artery catheters
						IV access procedures, central venous catheter, and ports
						Laparoscopy, diagnostic, appendectomy, cholecystectomy, lysis of adhesions, mobilization and catheter positioning, colon resection
						Laparoscopic Nissen Fundoplication (Anti-reflux Surgery)
						Laparotomy for diagnostic or exploratory purposes or for management of intra-abdominal sepsis or trauma
						Liver biopsy (intraoperative), liver resection
						Management of burns
						Management of intra-abdominal trauma, including injury, observation, paracentesis, lavage
						Management of multiple trauma
						Management of soft-tissue tumors, inflammations and infection
						Operations on gallbladder, biliary tract, bile ducts, hepatic ducts, including biliary tract reconstruction
						Pancreatectomy, total or partial
						Pancreatic sphincteroplasty
						Parathyroidectomy
						Perform history and physical exam
						Peritoneal venous shunts, shunt procedure for portal hypertension
						Peritoneovenous drainage procedures for relief or ascites
						Proctosigmoidoscopy, rigid with biopsy, with polypectomy/tumor excision
						Pyloromyotomy
						Radical regional lymph node dissections
						Removal of ganglion (palm or wrist, flexor sheath)
						Repair of perforated viscus (gastric, small intestine, large intestine)
						Scalene node biopsy
						Sclerotherapy
						Selective vagotomy
						Sentinel lymph node biopsy
						Sigmoidoscopy, fiberoptic with or without biopsy, with polypectomy
						Skin grafts (partial thickness, simple)

							Small bowel surgery for benign or malignant disease
							Splenectomy (trauma, staging, therapeutic)
							Surgery of the abdominal wall, including management of all forms of hernias, including diaphragmatic hernias, inguinal hernias, and orchiectomy in association with hernia repair
							Thoracentesis
							Thoracoabdominal exploration
							Thyroidectomy and neck dissection
							Tracheostomy
							Transhiatal esophagectomy
							Tube thoracostomy
							Vein ligation and stripping

**Trauma Surgery**

**Description:** To be eligible to apply for core privileges in trauma surgery, the initial applicant must meet the following criteria:

**Qualifications**

**Education/Training** Completion of a residency/fellowship approved by Accreditation Council of Graduation Medical Education (ACGME), American Board of Medical Specialties (ABMS), or American Osteopathic Association (AOA) in General Surgery followed by successful completion of a trauma or surgical critical care fellowship or demonstrated current clinical competence with acceptable results reflective of the scope of privileges requested deemed appropriate.

**AND**

Current certification or active participation in the examination process with achievement of certification within six years leading to certification in General Surgery by the American Board of Surgery, or the American Osteopathic Board of Surgery.

**Clinical Experience (Initial)** Applicants for initial appointment must be able to demonstrate performance of at least 50 trauma surgeries and/or surgical critical care cases, reflective of the scope of privileges requested, during the past 12 months or demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship, within the past 12 months.

**Clinical Experience (Reappointment)** To be eligible to renew core privileges in General Surgery, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience in trauma surgeries and/or surgical critical care cases with acceptable results, reflective of the scope of privileges requested, for the past 24 months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges

							Admit, evaluate, diagnose and manage patients of all ages presenting with any trauma-related injuries and disorders, including the initial evaluation and stabilization of the Neurotrauma patient, as well as resuscitation, surgical intervention, diagnostic studies and coordination of operative procedures to be performed by other healthcare professionals; supervise and perform all necessary operative cases; manage the trauma patient throughout the stay in the acute care facility; and coordinate the early institution of rehabilitation and discharge planning. Practitioners 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 emergent conditions consistent with medical staff policy regarding emergency and consultative call services.
							Decortication procedures
							Emergency sternotomy
							Emergency vascular repair, ligation, and bypass
							Emergent thoracotomy
							Exploration and repair of traumatic soft tissue and musculoskeletal injury
							Exploration of neck for traumatic injury
							Exploratory laparotomy for traumatic injury
							Management of trauma patients in the ICU setting
							Nonanatomic pulmonary resection (posttraumatic lung injury)
							Performance of image-guided procedures
							Preliminary interpretation of imaging studies relative to diagnosis and/or treatment in the trauma patient
							Surgical treatment of penetrating or crush injuries in which soft tissue, musculoskeletal, or organ trauma has occurred

**Special Non-Core Privileges**

**Description:** If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the specific threshold criteria governing the exercise of the privilege requested including training, required previous experience, and for maintenance of clinical competence.

Request							Request all privileges listed below.
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Special Non-Core Privileges

**Use of Laser**

**Description:** Successful completion of an approved residency in a specialty or subspecialty that included training in laser principles or provide documentation appropriate to the specific laser to be utilized. Practitioner agrees to limit practice to only the specific laser types for which they have provided documentation of training and experience.

Request							Request all privileges listed below.
							Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.

KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	
							- Currently granted privileges
							Use of Laser

## Bariatric Surgery

**Description:** Bariatric surgeons should be responsible for demonstrating a defined experience and exposure to the discipline's unique cognitive, technical, and administrative challenges. Bariatric procedures are divided into procedures which involve stapling/division of the gastrointestinal tract to achieve weight loss or procedures that do not involve stapling/division of the gastrointestinal tract. Surgeons performing bariatric surgery will have bariatric surgery specifically delineated in their file.

### Qualifications

#### Global Credentialing Requirements

To meet the global credentialing requirements in Bariatric Surgery the applicant must:

**AND**

Complete a fellowship in bariatric surgery or have demonstrated current competence as manifested by successful outcomes in a MBSAQIP Accredited Center or an integrated program.

**AND**

Meet general surgery criteria with unrestricted privileges to perform gastrointestinal and biliary surgery.

**AND**

Document that he or she has practiced or is practicing at a MBSAQIP Accredited Center or in an integrated program for the care of the morbidly obese patient that provides ancillary services such as specialized nursing care, dietary instruction, counseling, support groups, exercise training, and psychological assistance as needed. Kettering Health Miamisburg has a designation as a MBSAQIP Accredited Center and new applicants for bariatric surgery must receive documentation that s/he is enrolled and/or applied and be accepted as a member of the KH MBSAQIP Accredited Center.

**AND**

Document that there is a program in place to prevent, monitor, and manage short- and long-term complications. The surgeon must promptly and accurately provide all required patient data through the KH MBSAQIP Accredited Center database. Document that there is a system in place to provide and encourage follow-up for all bariatric patients. Follow-up visits must be documented and recorded into the KH MBSAQIP Accredited Center database for credentialing.

**AND**

Agree to terms of the Bariatric Panel Criteria.

**AND**

Agree to participate in peer review activities in a specific bariatric peer review group or a process designated by the hospital through general surgery or its medical staff.

**AND**

Document that there is continuing medical education for bariatric surgery. A minimum of 8 hours of CME is required for each biennial reappointment. (Not required for applicants within six months of completion of training program.)

**AND**

Document that the surgeon performs at least fifty bariatric cases annually.

**AND**

Document that professional liability insurance includes bariatric procedures.

#### Experience in Bariatric Surgery Required to Train Applicants

Experienced bariatric surgeons who wish to train applicants for bariatric surgery must meet Global Credentialing Requirements and have experience with at least 200 bariatric procedures in the appropriate category of procedure in which the applicant is seeking privileges prior to training the applicant.

#### Definition of the Operative Experience

As a privileging guideline, the operative experience is defined broadly to include not only procedure performance, but also global care of the bariatric patient that encompasses preoperative and postoperative management. Specifically, preoperative management experience must include patient evaluation and preparation for surgery. Postoperative management experience must include inpatient postoperative management AND outpatient management extending beyond the 90-day global period (i.e. 6 month and or annual follow-up visits). Documentation of perioperative management should reflect "hands-on" experience in the hospital ward or in the outpatient clinic/surgeon's office. Procedure performance experience is defined as "hands-on" performance of a more than 50% of the operation under direct supervision of an experienced bariatric surgeon as defined above.

<b>Open Bariatric Surgery Privileges Involving Stapling or Division of the Gastrointestinal Tract</b>	<p>To obtain "open" bariatric surgery privileges, the surgeon must meet Global Credentialing Requirements and document an operative experience of 15 open bariatric procedures (or subtotal gastric resection with reconstruction) with satisfactory outcomes during either 1) general surgery residency,</p> <p style="text-align: center;"><b>OR</b></p> <p>post residency training supervised by an experienced bariatric surgeon. Surgeons who perform primarily laparoscopic bariatric surgery may obtain open bariatric surgery privileges after documentation of 50 laparoscopic cases (see below) AND at least 10 open cases supervised by an experienced bariatric surgeon.</p>
<b>Clinical Experience (Initial)</b>	<p>To obtain laparoscopic bariatric surgery privileges that involve stapling of the GI tract, the surgeon must meet the Global Credentialing Requirements</p> <p style="text-align: center;"><b>AND</b></p> <p>Have privileges to perform "open" bariatric surgery at the accredited facility</p> <p style="text-align: center;"><b>AND</b></p> <p>Have privileges to perform advanced laparoscopic surgery at the accredited facility</p> <p style="text-align: center;"><b>AND</b></p> <p>Document 50 cases with satisfactory outcomes during residency/fellowship training or post-residency training under the supervision of an experienced bariatric surgeon.</p>
<b>Bariatric Surgery Privileges for Procedures that Do Not Involve Stapling of the Gastrointestinal</b>	<p>To obtain laparoscopic bariatric surgery privileges for procedures that do not involve stapling or division of the GI tract, the surgeon must meet the Global Credentialing Requirements</p> <p style="text-align: center;"><b>AND</b></p> <p>Have privileges to perform laparoscopic bariatric procedures</p> <p style="text-align: center;"><b>AND</b></p> <p>Document 10 cases with satisfactory outcomes.</p>
<b>Procedures Which Involve Implantation of FDA Approved Devices for Weight Loss</b>	<p>Must successfully complete a training course for the implantable device</p> <p style="text-align: center;"><b>AND</b></p> <p>Must have privileges to perform "open" and laparoscopic bariatric surgery</p>
<b>Revisional Bariatric Surgery Procedures</b>	<p>Revision surgery on bariatric patients is a high-risk procedure that involves converting one weight loss procedure to another weight loss procedure. Revision surgery is very technically difficult, requires longer operative times and lengths of stay, and may result in a higher rate of complications.</p> <p>Bariatric surgeons who wish to perform revisions of previous bariatric procedures should be experienced bariatric surgeons who meet Global Credentialing Requirements and have privileges for open and laparoscopic bariatric procedures which involve stapling or divisions of the GI tract.</p>
<b>Provisional Bariatric Surgery Privileges</b>	<p>Provisional bariatric surgery privileges are to facilitate the pursuit of full bariatric surgical credentials. Provisional privileges may be conferred to those bariatric surgeons who are/were members of a MBSAQIP Accredited Center elsewhere and otherwise meet the Global Credentialing Requirements and criteria for MBSAQIP Accredited Center procedures.</p> <p style="text-align: center;"><b>AND</b></p> <p>Bariatric surgeons who have not been members of a MBSAQIP Accredited Center who request privileges to do bariatric surgery may be approved for provisional privileges if the surgeons performed 50 cases within the preceding 12-month period. Applicants must successfully complete a site inspection of their practice site by the appropriate body from the American Society for Bariatric Surgery within the first year and meet all other requirements for the KH MBSAQIP Accredited Center.</p> <p style="text-align: center;"><b>AND</b></p> <p>Surgeons who have completed an advanced laparoscopic fellowship or bariatric fellowship will be granted provisional privileges for one year following their application to KH MBSAQIP Accredited Center at which time credentialing may be conferred if the above requirements have been met.</p> <p style="text-align: center;"><b>AND</b></p> <p>Surgeons who have completed a bariatric training course (for a new bariatric procedure to that surgeon) must include both didactic and hands-on laboratory work. Documentation of the first 10 cases, including pre- and post-operative follow-up, clinical outcomes, and data entry which meet</p>

the operative experience as described above will be reviewed to determine whether the surgeon will be granted full privileges for that procedure.

**Continued Assessment of Outcomes** The KH MBSAQIP Accredited Center Hospital program will review the surgeon's outcome data within six months of initiation of new privileges and after the surgeon's first 50 procedures done independently, as well as at regular intervals thereafter to confirm patient safety. In addition, the surgeon should continue to meet Global Credentialing Requirements for bariatric surgery at the time of reappointment.

**Average Annual Case Volumes** For surgeons who experience a recent decline in case volume due to insurance reimbursement issues or natural disasters which prevent them from reaching their annual case volume requirement, the credentialing committee (in accordance with the BSRC) will consider volumes from both the 12-month application period and its 2nd preceding year. For surgeon applicants, full approval of privileges may be granted or continued if the average number of cases is equal to or greater than 50. The specific situation of each applicant will be considered, including an explanation of the reason for decline in volume.

**Renewal of Privileges** Providers with current bariatric surgery privileges are required to renew their privileges every two years with the KH MBSAQIP Accredited Center.

Request							Request all privileges listed below.
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Bariatric Surgery
							<b>Surgery involving stapling or division of the GI tract</b>
							Open
							Laparoscopic (must have open privileges)
							Roux-en-Y Gastric Bypass
							Duodenal switch (must have performed 100 lap Roux's)
							Gastric Sleeve
							<b>Surgery not involving stapling or division of the GI tract (must meet criteria above)</b>
							Open
							Laparoscopic (must have open privileges)
							Bariatric revision surgery (must have open and lap privileges for stapling/division of the GI tract)

**Stereotactic Breast Biopsy**

**Qualifications**

**Certification** Successful completion of an ACGME or AOA accredited postgraduate training program that included training in the stereotactic and ultrasound guided-technique of breast biopsy during residency.

**Clinical Experience (Initial)** Demonstrated current competence and evidence of the performance of at least 12 stereotactic breast biopsies in the past 12 months.

**Clinical Experience  
(Reappointment)**

Demonstrated current competence and evidence of the performance of at least 24 stereotactic breast biopsies in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Stereotactic Breast Biopsy

## Robotic Assisted Surgery (da Vinci)

**Description:** NOTE: ALL proctoring at Hospital requires approval by Medical Staff Services prior to performing procedures. Proctors must be credentialed members of the Medical Staff at KMCS, in the same specialty as the applicant with robotic assisted surgery privileges and adequate case volume. All proctors are to be approved by the respective Clinical Service Chair.

### Qualifications

For initial robotic assisted privileges, the applicant must fulfill the following criteria:

**Education/Training** Successful completion of an ACGME or AOA accredited Residency or Fellowship training program in respective specialty currently credentialed or being credentialed.

**Clinical Experience (Initial)** If RESIDENCY COMPLETED WITHIN LAST THREE YEARS;  
Applicant must provide letter from the program director affirming qualification to perform the requested procedure(s) using the robotic system;  
**AND**  
Case log of at least 10 cases in the last 12 months.  
**AND**  
If <10 cases, first case will be proctored and once deemed proficient by the proctor, the next four cases performed should be reviewed by the Robotics Committee, department Chair or designee.

IF RESIDENCY COMPLETION GREATER THAN THREE YEARS WITH PRIOR ROBOTIC EXPERIENCE;  
Applicant must provide letter from Hospital Department Chair at a CMS accredited facility affirming qualification to perform the requested procedure(s) using the robotic system.  
**AND**  
Case log of at least 10 cases performed in the last 12 months.  
**AND**  
If <10 cases, first case will be proctored and once deemed proficient by the proctor, the next four cases performed should be reviewed by the Robotics Committee, department Chair, or designee.

IF RESIDENCY TRAINED BUT NO PRIOR ROBOTIC EXPERIENCE;  
Completion of Mini Fellowship Training that includes computer-based education, porcine lab, docking and problem resolution training.  
**AND**  
Observe and document two cases with preceptor physician.  
**AND**  
Perform a minimum of three proctored cases acting as primary physician.  
**AND**  
Submit a letter of documenting proficiency along with the case log or three cases from the proctor to Medical Staff Services if physician is not deemed proficient by the proctor  
**AND**  
After deemed proficient, all applicants are required to request full-unrestricted privileges. Temporary privilege may be requested in the interim.  
**AND**  
The next five cases performed shall be reviewed by the Robotics Committee, department Chair, or designee.

**Clinical Experience (Reappointment)** Proficient completion of 20 cases, including those at outside institutions during the reappointment cycle. 10 of those cases should be done in the last 12 months.  
**AND**  
If <10 cases in the last 12 months, the first case should be proctored  
**AND**  
Ongoing continuing medical education in robotics

**Additional Qualifications** Unrestricted privileges, either open or laparoscopic, for the procedure to be performed without

robotic assistance.

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Robotic Assisted Surgery

## Radiation

### Qualifications

**Education/Training** New applicants must complete Hospital radiation safety training with Radiation Safety Officer.

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Radiation

## Administration of Chemotherapeutic Agents and Biological Response Modifiers Through Therapeutic Routes

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Administration of chemotherapeutic agents and biological response modifiers through therapeutic routes

## Cystoscopy

### Qualifications

**Clinical Experience (Initial)** Documentation of five (5) proctored cases with a credentialed urologist

**Clinical Experience (Reappointment)** Documentation of ten cases every two years

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Cystoscopy

**Excision of Redundant Lower Abdominal Tissue for Hygiene, Mobility, Functional or Medical Necessity**

**Qualifications**

**Clinical Experience (Initial)** Documentation of five (5) cases or Five (5) proctored cases with a credentialed plastic surgeon

**Clinical Experience (Reappointment)** Documentation of three cases every two years

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Excision of redundant lower abdominal tissue for hygiene, mobility, functional or medical necessity

**Fluoroscopy**

**Description:** Must demonstrate competence. Initial applicants must complete the online quiz; reapplicants must complete online quiz at least once then complete annual attestations thereafter.

Request							<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.
							- Currently granted privileges
							Fluoroscopy

**Administration of Sedation and Analgesia**

**Description:** Moderate sedation privileges are required for any physician who, without the presence of an anesthesia provider, administers a drug-induced depression of consciousness during which patients respond purposely to verbal commands and/or by light tactile stimulation. Deep sedation, a drug-induced depression of consciousness during which patients may not be easily aroused except to repeat/painful stimuli, may only be performed by an anesthesiologist, CRNA under direction of an anesthesiologist or a board eligible/board certified physician trained in surgical airway techniques per the approval of the Department of Anesthesia.

**Qualifications**

**Clinical Experience (Initial)** The physician will be granted administration of sedation privileges after successful completion of current medical staff approved airway management education and testing, as well as maintaining current ACLS and/or ATLS.

**Clinical Experience (Reappointment)** A biennial competency at reappointment as well as current ACLS and/or ATLS as outlined in the KHN Sedation Policy is required.

Request							<p><i>Request all privileges listed below.</i></p> <p>Click <b>shaded blue check box</b> to Request all privileges. Uncheck any privileges you do not want to request.</p>
KHMC	KHMB	KHTR	SOIN	KHGM	KHDO	KHHM	
							- Currently granted privileges
							Moderate and Deep Sedation

**Acknowledgment of Applicant**

I have requested only those privileges for which by education, training, current experience, and demonstrated competency I believe that I am competent to perform and that I wish to exercise at Kettering Health hospital(s) and I understand that:

- A. In exercising any clinical privileges granted, I am constrained by applicable Hospital 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.

Practitioner's Signature \_\_\_\_\_

Date \_\_\_\_\_

**Clinical Service Chair Recommendation - Privileges**

I have reviewed the requested clinical privileges and supporting documentation and make the following recommendation(s):

	Recommend all requested privileges
	Do not recommend any of the requested privileges
	Recommend privileges with the following conditions/modifications/deletions (listed below)

Privilege	Condition/Modification/Deletion/Explanation

Clinical Service Chair Recommendation - Additional Comments

\_\_\_\_\_  
 Clinical Service Chair Signature \_\_\_\_\_ Date