



**Medicine - Cardiology FHHM**  
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.

**Note:**

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**

<b>Education/Training</b>	Must have successfully completed an ACGME/AOA-accredited fellowship in cardiovascular disease.
<b>Certification</b>	The applicant physician must possess current board certification by the specialty board most commonly applicable to his or her specialty, or become board certified as such within six years of completing his or her residency program or receiving medical staff membership or clinical privileges.
<b>Clinical Experience (Initial)</b>	The successful applicant for initial appointment must be able to demonstrate active cardiology practice, reflective of the scope of privileges requested, for at least 50 patients in the past 12 months in an accredited hospital or healthcare facility <b>OR</b> Demonstrate successful completion of an ACGME or AOA accredited residency, clinical fellowship or research in a clinical setting within the past 12 months.
<b>Clinical Experience (Reappointment)</b>	To be eligible to renew core privileges in Cardiovascular Disease, the applicant must demonstrate competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, of 50 patients annually for the past 24 months. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

## Primary Privileges General Cardiology

**Description:** Core Privileges include: Admit, evaluate, diagnose, treat, and provide consultation to patients presenting with diseases of the heart, lungs, and blood vessels and manage complex cardiac conditions. Assess, stabilize, and determine disposition of patients. 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.

Request	<i>Request all privileges listed below. Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Admit and manage patients in non-critical care and unmonitored settings	
	Admit and manage patients in ICU and other monitored settings	
	Adult transthoracic echocardiography	
	Ambulatory electrocardiology monitor interpretation	
	Cardioversion, electrical, elective	
	Central line placement and venous angiography	
	Consultation privileges in General Cardiology.	
	ECG interpretation, including signal average ECG	
	Image guided procedures (ultrasound and fluoroscopy - see separate requirements for fluoroscopic procedures)	
	Infusion and management of Gp IIb/IIIa agents and thrombolytic agents and antithrombolytic agents	
	Insertion and management of central venous catheters, pulmonary artery catheters, and arterial lines	
	Non-invasive hemodynamic monitoring	
	Perform History and Physical Examinations	
	Pericardiocentesis	
	Stress echocardiography (exercise and pharmacologic stress)	
	Temporary transvenous pacemaker insertion	
	Tilt table testing	
	Transthoracic 2D echocardiography, Doppler, and color flow	

## Coronary Computed Tomography (CCT) Interpretation (With and without contrast)

### Qualifications

<b>Certification</b>	Board certification or eligibility
<b>Clinical Experience (Initial)</b>	150 contrast CCT examinations. For at least 50 of these cases, the candidate must be physically present
	<b>AND</b>
	Be involved in the acquisition and interpretation of the case
	<b>AND</b>
	Evaluation of 50 non-contrast studies
	<b>AND</b>
	Completion of 20 hour/lectures related to CT in general and/or CCT in particular
<b>Clinical Experience (Reappointment)</b>	50 contrast CCT exams conducted and interpreted per year

<b>Request</b>	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	<b>Dept Chair Rec</b>
	Coronary Computed Tomography (CCT) Interpretation (with and without contrast)	

### Transeophageal Echocardiography (TEE)

#### Qualifications

- Education/Training** Successful completion of an accredited residency in cardiology, or cardiothoracic surgery that included education and direct experience in transthoracic echocardiography and TEE with performance and interpretation of at least 25 supervised TEE cases  
**OR**  
National Board of Echocardiography certification in TEE.
- Clinical Experience (Initial)** Demonstrated current competence and evidence of the performance of at least 25 TEE procedures in the past 12 months.
- Clinical Experience (Reappointment)** Demonstrated current competence and evidence of the performance of at least 50 TEE procedures in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

<b>Request</b>	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	<b>Dept Chair Rec</b>
	Transeophageal Echocardiography (TEE)	

### Ultrafiltration/Aquapheresis

#### Qualifications

- Education/Training** Successful completion of an ACGME/AOA-accredited fellowship in cardiovascular disease or nephrology.  
**AND**  
Review of Aquapheresis Training Documents and successful completion (80%) of the review post-test. (Contact the Medical Staff Office.)
- Clinical Experience (Reappointment)** Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months.

<b>Request</b>	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	<b>Dept Chair Rec</b>
	Ultrafiltration/Aquapheresis	

**Cardiopulmonary Exercise Testing (CPET) (Supervision and Interpretation)**

**Qualifications**

**Clinical Experience (Initial)** Successful completion of an accredited residency in Cardiology  
**AND**  
 Certification of training in Cardiopulmonary Exercise Testing in the last 5 years  
**OR**  
 Supervised/interpreted 25 CPET exams in the last 5 years  
**OR**  
 Board certification in advanced heart failure

**Clinical Experience (Reappointment)** Current demonstrated competence and evidence of the performance of at least 10 CPET exams in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

Request	<p align="center"><b>Request all privileges listed below.</b>  <i>Uncheck any privileges that you do not want to request</i></p>	Dept Chair Rec
	Cardiopulmonary Exercise Testing (CPET) (Supervision and Interpretation)	

**Invasive Cardiology**

**Qualifications**

**Membership** To be eligible to apply for core privileges in invasive cardiology, the initial applicant must meet the requirements for General Cardiology privileges and be granted core privileges in General Cardiology and meet the following criteria:

**Clinical Experience (Initial)** Applicants for initial appointment must have demonstrated successful performance, reflective of the scope of privilege requested, of at least 100 diagnostic left cardiac catheterizations in the past 24 months and 5 right heart catheterizations in the past 24 months  
**OR**  
 Demonstrate successful completion of an ACGME- or AOA accredited training program which included training in invasive cardiology within the past 12 months.  
**OR**  
 Physicians who meet the above training qualifications but do not meet required competency volume for left and/or right cardiac catheterizations can be proctored by the Chief of Cardiology or his/her designee. The required number of proctored procedures is a minimum of 5, with additional increments of 5 procedures at the discretion of the proctoring physician.

**Clinical Experience (Reappointment)** To be eligible to renew core privileges in interventional cardiology, the applicant must provide current demonstrated competency of 75 right or left cardiac catheterizations in the past 12 months with acceptable results reflective of the scope of privileges requested for the past 24 months.

Request	<p align="center"><b>Request all privileges listed below.</b>  <i>Uncheck any privileges that you do not want to request</i></p>	Dept Chair Rec
	<b>Primary Privileges Invasive Cardiology</b> (Core Privileges include: Admit, evaluate, consult, and treat	

	patients who present with acute or chronic heart disease and who may require invasive diagnostic procedures. 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.)	
	Consultation privileges in Invasive Cardiology	
	Coronary arteriography	
	Diagnostic right and left heart cardiac catheterization	
	Fluoroscopy (required) Contact the medical staff office.	
	Hemodynamic monitoring with balloon flotation devices	
	Insertion of intraortic balloon counter pulsation device	
	Moderate Sedation (required) Contact the medical staff office.	
	Use of vasoactive agents for epicardial and microvascular spasm	

## Interventional Cardiology

### Qualifications

**Membership** To be eligible to apply for core privileges in interventional cardiology, the initial applicant must be granted core privileges in General Cardiology and meet the following criteria:

**Education/Training** Successful completion of an ACGME- or AOA-accredited fellowship in interventional cardiology or equivalent practice experience if training occurred prior to 2003.  
**AND**  
 Current subspecialty certification or active participation in the examination process with achievement of certification within six years leading to subspecialty certification in interventional cardiology by the American Board of Internal Medicine or a Certificate of Added Qualification in interventional cardiology by the American Osteopathic Board of Internal Medicine.

**Clinical Experience (Initial)** Applicants for initial appointment must be able to demonstrate performance, reflective of the scope of privileges requested, of at least 75 percutaneous coronary intervention (PCI) procedures in the past 12 months  
**OR**  
 Demonstrate successful completion of an accredited ACGME or AOA clinical fellowship, or research in a clinical setting within the past 12 months.  
**AND**  
 If less than 75 PCI cases then primary operator must align PCI practice with American College of Cardiology (ACC) guidelines for low volume operator.

**Clinical Experience (Reappointment)** To be eligible to renew core privileges in interventional cardiology, the applicant must provide current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	<b>Primary Privileges Interventional Cardiology</b> (Core Privileges include: Admit, evaluate, treat, and provide consultation to patients with acute and chronic coronary artery disease, acute coronary syndromes, and valvular heart disease, including but not limited to chronic ischemic heart disease, acute ischemic syndromes, and valvular heart disease and technical procedures and medications to treat abnormalities that impair the function of the heart. . 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.)	
	Consultation privileges in Interventional Cardiology	
	Endomyocardial biopsy	

	Femoral, brachial or radial, axillary cannulation for diagnostic angiography or percutaneous coronary intervention	
	Interpretation of coronary arteriograms, ventriculography, and hemodynamics	
	Intracoronary athrectomy (rotoblator)	
	Intracoronary foreign body retrieval (TEC)	
	Intracoronary infusion of pharmacological agents including thrombolytics	
	Intracoronary mechanical thrombectomy	
	Intracoronary stents	
	Intravascular Ultrasound (IVUS) of coronaries	
	Management of mechanical complications of percutaneous intervention	
	Performance of balloon angioplasty, stents, and other commonly used interventional devices	
	Use of intracoronary Doppler and flow wire	

### Special Privileges Interventional Cardiology - Temporary Percutaneous Left Ventricular Assist Device (Impella)

#### Qualifications

**Education/Training** Interventional cardiology fellowship and documentation of completion of device training required.

**Clinical Experience (Reappointment)** Demonstrated current competence and evidence of the performance of at least three (3) successful insertions without complications in the past 24 months.

<b>Request</b>	<b><i>Request all privileges listed below.</i></b> <i>Uncheck any privileges that you do not want to request</i>	<b>Dept Chair Rec</b>
	Temporary Percutaneous Left Ventricular Assist Device (Impella)	

### Clinical Cardiac Electrophysiology (CCEP)

#### Qualifications

**Membership** To be eligible to apply for core privileges in clinical cardiac electrophysiology, the initial applicant must qualify for and be granted core privileges in General Cardiology and meet the following criteria:

**Education/Training** Successful completion of an ACGME- or AOA-accredited fellowship in clinical cardiac electrophysiology or equivalent practice experience/training if training occurred prior to 1998.  
**AND**  
Current subspecialty certification or active participation in the examination process with achievement of certification within six years leading to subspecialty certification in clinical cardiac electrophysiology by the American Board of Internal Medicine or achievement of a certificate of added qualification in clinical cardiac electrophysiology by the American Osteopathic Board of Internal Medicine.

**Clinical Experience (Initial)** Applicants for initial appointment must be able to demonstrate performance of at least 50 intracardiac procedures, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of a hospital-affiliated accredited clinical fellowship, or research in a clinical setting within the past 12 months.

**Clinical Experience** To be eligible to renew core privileges in interventional cardiology, the applicant must provide

**(Reappointment)**

current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	<b>Primary Privileges Clinical Cardiac Electrophysiology (CCEP)</b> (Core Privileges include: Admit, evaluate, treat, and provide consultation to acute and chronically ill patients with heart rhythm disorders including the performance of invasive diagnostic and therapeutic cardiac electrophysiology procedures. 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.)	
	Consultation privileges in Clinical Cardiac Electrophysiology	
	Insertion and management of automatic implantable cardiac defibrillators	
	Insertion of permanent pacemaker, including single/dual chamber and biventricular	
	Interpretation of activation sequence mapping recordings, invasive intracardiac electrophysiologic studies including encocardial electrogram recording and imaging studies.	
	Interpretation of results of noninvasive testing relevant to arrhythmia diagnoses and treatment	
	Pacemaker programming/reprogramming and interrogation	
	Performance of therapeutic catheter ablation procedures	
	Percutaneous transluminal septal myocardial ablation	

**Special Privileges Clinical Cardiac Electrophysiology (CCEP)**

**Qualifications**

**Initial Request** Documentation of current experience: 35 pacemaker implantations per year and 100-implantations over the prior 3 years

**AND**

Proctored ICD implantation experience including 10 Implantations and 5 Revisions

**AND**

Proctored CRT implantation experience: 5 implantations

**AND**

Completion of didactic course and/or NAPSExAM

**AND**

Monitoring of patient outcomes and complication rates

**AND**

Established patient follow-up

**Physicians Performing ICD and/or CRT at Another Hospital** Documentation of current experience: 35 pacemaker implantations per year and 100-implantations over the prior 3 years

**AND**

5 Revisions

**AND**

Completion of didactic course and/or NAPSExAM

**AND**

10 ICD and CRT procedures per year

**AND**

20 patients per year in follow-up

**AND**

For CRT therapy, evidence of having performed 5 coronary sinus lead placements

**Clinical Experience (Reappointment)** 10 ICD and CRT procedures per year

**AND**

20 patients per year in follow-up

**AND**

For CRT therapy, evidence of having performed 5 coronary sinus lead placements - Source: Heart Rhythm Society - endorsed by the American College of Cardiology Foundation Sept 2004

<b>Request</b>	<b><i>Request all privileges listed below.</i></b> <i>Uncheck any privileges that you do not want to request</i>	<b>Dept Chair Rec</b>
	ICD (ICD (Implantable Cardioverter Defibrillators) & CRT (Cardiac Resynchronization Devices) IMPLANTATION	

### Special Implantable Device Privileges - (Non-Electrophysiologist)

#### Qualifications

<b>Membership</b>	For the non-electrophysiologist, who is already experienced in pacemaker implantation and requests to independently implant prophylactic (primary prevention) ICD and CRT devices;	
<b>Initial Request</b>	Documentation of current experience: 35 pacemaker implantations per year and 100-implantations over the prior 3 years	
	<b>AND</b>	Proctored ICD implantation experience
	<b>AND</b>	10 Implantations
	<b>AND</b>	5 Revisions
	<b>AND</b>	Proctored CRT implantation experience: 5 implantations
	<b>AND</b>	Completion of didactic course and/or NAPSExAM
	<b>AND</b>	Monitoring of patient outcomes and complication rates
	<b>AND</b>	Established patient follow-up
<b>Physicians Currently Performing ICD and/or CRT at Another Hospital</b>	Documentation of current experience: 35 pacemaker implantations per year and 100-implantations over the prior 3 years	
	<b>AND</b>	5 Revisions
	<b>AND</b>	Completion of didactic course and/or NAPSExAM
	<b>AND</b>	10 ICD and CRT procedures per year
	<b>AND</b>	20 patients per year in follow-up
	<b>AND</b>	For CRT therapy, evidence of having performed 5 coronary sinus lead placements
<b>Clinical Experience (Reappointment)</b>	10 ICD and CRT procedures per year ?	
	<b>AND</b>	20 patients per year in follow-up ?
	<b>AND</b>	For CRT therapy, evidence of having performed 5 coronary sinus lead placements



Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	ICD (ICD (Implantable Cardioverter Defibrillators) & CRT (Cardiac Resynchronization Devices) IMPLANTATION	

### Permanent Cardiac Pacemaker

#### Qualifications

- Education/Training** Successful completed an ACGME/AOA-accredited fellowship in cardiovascular disease that included pacemaker insertion, interrogation and follow-up .
- Clinical Experience (Initial)** Documentation of 25 pacemaker insertions in the past 24 months or successful completion of an ACGME or AOA accredited residency, clinical fellowship or research in a clinical setting within the past 12 months.
- AND**
- Fellowship trained physicians who do not meet the required competency volume for the past 24 months, can be proctored by the Chief of Cardiology or his/her designee to meet the required 25 procedures over a 24 month period.
- Clinical Experience (Reappointment)** Documentation of performance of 12 permanent pacemaker implantations over the previous 12 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Permanent Cardiac Pacemaker	

### Implantable Loop Recorder

#### Qualifications

- Education/Training** Demonstrated current competence and evidence of performance of at least 10 procedures in the past 12 months.
- Proctor Requirements** 5 procedures proctored by a physician currently holding this privilege.
- Clinical Experience (Reappointment)** Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Implantable Loop Recorder	

## Nuclear Cardiology Interpretation of Cardiac Nuclear Imaging

### Qualifications

<b>Education/Training</b>	Board certified by the Council for Certification in Cardiovascular Imaging
<b>Continuing Education</b>	Documentation of 15 hours of CME from the past 24 months that includes interpretive nuclear cardiology exams. As required by ICANL for Nuclear Laboratory Accreditation.)
<b>Clinical Experience (Initial)</b>	<p>Non-nuclear board-certified or eligible Cardiologists must provide written documentation from his or her fellowship director and/or private practice stating that he/she has interpreted 500 scans (as required to sit for CNBC exam) and has 15 hours of CME in last 2 years.</p> <p style="text-align: center;"><b>AND</b></p> <p>If provider does not have documented current interpretations of at least 50 scans in the past year, provider must have 25 scans proctored prior to full reading privileges.</p>
<b>Clinical Experience (Reappointment)</b>	<p>Maintenance of cardiovascular imaging board certification.</p> <p style="text-align: center;"><b>AND</b></p> <p>Current demonstrated competency fifteen (15) per year, thirty (30) within reappointment cycle (24 months) with acceptable results, reflective of the scope of privileges requested, for the past 24 months.</p>

Request	<i><b>Request all privileges listed below.</b></i> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Interpretation of Cardiac Nuclear Imaging	

## Vascular Procedures - Interpretation of Vascular Studies

### Qualifications

<b>Initial Privileges Formal Training</b>	<p>Completion of a residency or fellowship that includes appropriate didactic and clinical vascular laboratory experience as an integral part of the program.</p> <p style="text-align: center;"><b>AND</b></p> <p>The physician must have experience in interpreting the following minimum number of diagnostic studies: Carotid duplex ultrasound - 100 cases; Peripheral arterial physiologic - 100 cases; Peripheral arterial duplex - 100 cases; Venous duplex ultrasound - 100 cases or Broad spectrum vascular ultrasound exams - 500 cases</p>
<b>Initial Privileges Informal Training</b>	<p>Appropriate training and experience for proper qualifications to interpret non-invasive vascular laboratory studies can be achieved through formal accredited post graduate education that includes: A minimum of 40 hours of relevant Category I CME credits must be acquired within the three-year period prior to the initial application.</p> <p style="text-align: center;"><b>AND</b></p> <p>Twenty (20) hours must be courses specifically designed to provide knowledge of the techniques, limitations, accuracies, and methods of interpretations of non-invasive vascular laboratory examinations the physician will interpret.</p> <p style="text-align: center;"><b>AND</b></p> <p>Twenty (20) hours may be dedicated to appropriate clinical topics relevant to vascular testing.</p> <p style="text-align: center;"><b>AND</b></p> <p>Eight (8) of the 40 hours must be specific to each testing area the physician will interpret</p> <p style="text-align: center;"><b>AND</b></p> <p>For those examinations the physician will interpret, there must be documentation of interpretation</p>

for the following minimum number of studies while under the supervision of a physician who has already met the ICAVL criteria. Carotid duplex ultrasound - 100 cases; Peripheral arterial physiologic - 100 cases; Peripheral arterial duplex - 100 cases; Venous duplex ultrasound - 100 cases or Broad spectrum vascular ultrasound exams - 500 cases

**Initial Privileges Established Practice**

Current training and current experience will be considered appropriate for a physician who has met the qualifications of and has worked for an accredited vascular laboratory for at least the past three (3) years

**AND**

Has interpreted the following minimum number of diagnostic studies in the specific areas that will be interpreted. Carotid duplex ultrasound - 300 cases; Peripheral arterial physiologic - 300 cases; Peripheral arterial duplex - 300 cases; Venous duplex ultrasound - 300 cases

**Registered Physician in Vascular Interpretation (RPVI)**

Physician is registered at an American College of Radiology accredited vascular lab and meets ACR Accreditation requirements for physicians.

**Clinical Experience (Reappointment)**

Provide documentation of the following requirements: Carotid Duplex Ultrasound - 100 cases; Peripheral Arterial Physiologic - 100 cases; Peripheral Arterial Duplex - 100 cases; Venous Duplex Ultrasound - 100 cases

**AND**

Broad spectrum Vascular Ultrasound Exams - 500 cases to include all categories performed at this hospital with a minimum of 50 cases from each of the above categories.

**AND**

All medical staff members should interpret a minimum of ten (10) non-invasive vascular examinations per month (120 per year).

**Continuing Education**

Each medical staff member must show evidence of maintaining current knowledge by participating in CME courses that are relevant to vascular testing. To be relevant, the course content must address principles, instrumentation, techniques, or interpretation of non-invasive vascular testing. A minimum of fifteen (15) hours of CME is required every three (3) years, of which ten (10) hours must be Category I.

**OR**

The CME requirement will be waived if, in the previous three (3) years prior to the application submission, the medical staff member has: Completed formal training, acquired an appropriate vascular credential, or has been employed in the laboratory less than one (1) year

Request	<p align="center"><b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i></p>	Dept Chair Rec
	Vascular Lab - Interpretation of Vascular Studies	

**Percutaneous Inferior Vena Cava (IVC) Filter Placement**

**Qualifications**

**Membership** Privileges to perform catheterization at Fort Hamilton Hospital

**Education/Training** Completion of a formal training program

**Clinical Experience (Initial)** The operator must have experience in at Least five (5) cases

**AND**

A letter of support from the program director of the applicant's training program stating his ability to

perform the procedure.

**OR**

Physicians with no formal training must demonstrate satisfactory performance of percutaneous insertion of vena cava filters - under the supervision of a proctor for at least six (6) procedures, with a letter from the preceptor(s) indicating competence.

**Clinical Experience (Reappointment)**

Current demonstrated competence and an adequate volume of experience with acceptable results for the past 24 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Percutaneous Inferior Vena Cava (IVC) Filter Placement	

**Peripheral Angiography**

**Qualifications**

**Membership** Hold privileges in invasive cardiology

**Clinical Experience (Initial)** 100 angiograms (diagnostic and non-cardiac combined)

**Clinical Experience (Reappointment)** Current demonstrated competence and an adequate volume of experience with acceptable results for the past 24 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Peripheral Angiography	

**Peripheral Angioplasty**

**Qualifications**

**Membership** To be eligible for the following procedure, physicians must provide documentation of the following competency requirements listed below:

**Education/Training** Meet privileges for Peripheral Angiography

**Clinical Experience (Initial)** 25 therapeutic interventions, performed as primary operator

**Clinical Experience (Reappointment)** Current demonstrated competence and an adequate volume of experience with acceptable results for the past 24 months.

**Note** All peripheral angioplasty procedures require timely vascular surgery back-up.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Peripheral Angioplasty	

### Varicose Vein Laser Treatment/Sclerotherapy

#### Qualifications

**Education/Training**      Successful completed an ACGME/AOA-accredited fellowship in cardiovascular disease  
**AND**  
Documentation of completion of specific procedural device training by vendor through a proctor training site. This includes case observation of an established practitioner(s) performing the procedure.

**Clinical Experience (Reappointment)**      Current demonstrated competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past 24 months.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Varicose Vein Laser Treatment/Sclerotherapy	

### Special Privileges Cardiovascular Disease

**Description:** The below special privileges are not routinely part of the post-graduate training program. Additional proof of training and/or experience may be necessary to request the privilege and is noted within the privilege block. If documentation is required, please submit all required elements with your application/reapplication.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec
	Special Privileges Cardiovascular Disease	

### Fluoroscopy

**Description:** All practitioners requesting fluoroscopically-guided procedures at this hospital are required to take a competency assessment examination prior to being granted these privileges. Practitioners may submit documentation of competency from another hospital for consideration by the Radiology Department Chair. Please contact the Medical Staff Office.

Request	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	Dept Chair Rec

	Fluoroscopy	

**Mild/Moderate Sedation**

**Description:** Moderate Sedation (Requires written examination - please contact Medical Staff Office) Current ACLS certification is also required.

<b>Request</b>	<b>Request all privileges listed below.</b> <i>Uncheck any privileges that you do not want to request</i>	<b>Dept Chair Rec</b>
	Mild/Moderate Sedation	

**Acknowledgment of Applicant**

I hereby request the clinical privileges as indicated. I understand that such privileges include rendering of all associated diagnostic and supportive measures necessary in performance of the privileges I have requested, and in treating associated diseases with adequate consultation when indicated.

I recognize that in emergency situations where immediate life-saving action is necessary, any member of the medical staff is authorized to perform such life-saving treatment as may be required.

I further understand that any and all privileges granted me shall be commensurate with my documented training and demonstrated competence, judgment and capabilities. The Credentials and Executive Committees of the medical staff and the Board of Trustees of the hospital reserve the right to grant or limit my privileges in accord with my continuing performance in rendering patient care.

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

\_\_\_\_\_  
Date

**Department 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

Additional Comments

\_\_\_\_\_  
Signature of Department Chair/Designee

\_\_\_\_\_  
Date