



OBGYN KHMC & KHMB & KHTR
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 and 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: 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).

requested is required of all applicants for renewal of privileges.

Residence and On-Call Requirements

General Residence Requirement: A member of the Obstetrics-Gynecology Clinical Service should reside within thirty (30) minutes of Kettering Memorial Hospital. The thirty minutes should be based on applicable speed limits and reasonably expected traffic patterns. In cases where this requirement cannot be met, another member(s) of the Ob-Gyn section may be named. This designee will be asked to submit a letter in writing to Medical Staff Services which will remain in the original member's credentials file. That designee must meet the thirty minute requirement.

AND

Gynecology On-Call Requirement: While on call for gynecologic patients the Ob-Gyn must be physically located within thirty minutes of KMC and/or Sycamore Hospital. For life threatening emergencies this means being able to begin a procedure/evaluate a patient within thirty minutes of being called to the hospital. If this is not possible for any reason, a designee must be identified and be able to meet this requirement.

AND

Obstetric On-Call Requirement: While on call for obstetric patients or potential obstetric patients who may come to the hospital for care, the obstetrician must be able to begin a Cesarean Section or attend a delivery within thirty minutes of being called to the hospital. If less than thirty minutes, Labor and Delivery personnel should be aware of the obstetrician's expected response time for attending a delivery once he/she is called. For patients in active labor it is necessary for the obstetrician to be available to Labor and Delivery personnel for prompt phone consultation. If this is not possible for any reason, a designee must be identified and be able to meet this requirement. [NOTE: Not required at Sycamore Medical Center].

Obstetrics Core Privileges

Request			<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Admit, evaluate, diagnose, treat, and provide consultation to adolescent and adult female patients and provide medical and surgical care of the female reproductive system and associated disorders, including major medical diseases that are complicating factors in pregnancy. 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.
			Core Procedure List (This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.)
			Amnioinfusion
			Amniocentesis
			Amniotomy
			Application of internal fetal and uterine monitors
			Augmentation and induction of labor
			Cesarean hysterectomy, cesarean section
			Cerclage
			Cervical biopsy or conization of cervix in pregnancy
			Circumcision of newborn
			External version of breech
			Hypogastric artery ligation
			Interpretation of fetal monitoring
			Management of high-risk pregnancy, including of such conditions as preeclampsia, postdatism, third trimester bleeding, intrauterine growth restriction, premature rupture of membranes, premature labor and multiple gestation and placental abnormalities
			Management of patients with/without medical surgical or obstetrical complications for normal labor, including toxemia, threatened abortion, normal puerperal patient, normal antepartum and postpartum care, postpartum complications, fetal demise.
			Manual removal of placenta, uterine curettage
			Medication to induce fetal lung maturity
			Normal spontaneous vaginal delivery
			Obstetrical ultrasound, Category I = fetal position, placenta localization
			Operative vaginal delivery (including vacuum extraction, breech extraction, low or mid forceps including rotations)
			Perform history and physical exam
			Pudendal and paracervical blocks
			Repair of fourth-degree perineal lacerations or of cervical or vaginal lacerations

		Treatment of medical complications of pregnancy, including pregnancy-induced hypertension, chronic hypertension, diabetes mellitus, renal disease, coagulopathies, cardiac disease, anemias and hemoglobinopathies, thyroid disease, sexually transmitted disease, pulmonary disease, thromboembolic disorders, infectious disease, ectopic pregnancy, and other accidents of pregnancy, such as incomplete, complete, or missed abortion
		Vaginal birth after cesarean section (VBAC)

Gynecology Core Privileges

Request			<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Admit, evaluate, diagnose, treat, and provide consultation and pre-, intra-, and postoperative care necessary to correct or treat female patients of all ages presenting with injuries and disorders of the female reproductive system and the genitourinary system and non-surgically treat disorders and injuries of the mammary glands. 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.
			Core Procedure List (This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures in the core.)
			Adnexal surgery, including ovarian cystectomy, oophorectomy, salpingectomy, and conservative procedures for treatment of ectopic pregnancy
			Aspiration of breast masses
			Cervical biopsy including conization
			Collagen injection
			Colpocleisis
			Colpoplasty
			Colposcopy
			Cystoscopy as part of gynecological procedure
			Cystotomy/cystostomy
			Diagnostic and therapeutic D & C
			Diagnostic and operative laparoscopy
			Endometrial ablation
			Exploratory laparotomy, for diagnosis and treatment of pelvic pain, pelvic mass, hemoperitoneum, endometriosis, and adhesions
			Gynecologic sonography
			Hysterectomy, abdominal, vaginal, including laparoscopic
			Hysterosalpingography
			Hysteroscopy, diagnostic or ablative excluding use of resection technique
			I & D of pelvic abscess
			Incidental appendectomy
			Laser use in gynecology for cervix, vulva or vagina (CO2, KTP, NdYAG)
			Laser use with laparoscopy or with laparotomy(CO2, KTP, NdYAG)
			Metroplasty

			Multichannel urodynamic testing
			Myomectomy, abdominal
			Operation for treatment of early stage carcinoma of the vulva, vagina, endometrium, ovary or cervix
			Operation for treatment of urinary stress incontinence; vaginal approach, retropubic urethral suspension, sling procedure
			Operation for uterine bleeding (abnormal and dysfunctional)
			Operations for sterilization (tubal ligation, transcervical sterilization)
			Paravaginal repair
			Perform history and physical exam
			Pubovaginal urethral suspension/sling
			Repair of rectocele, enterocele, cystocele, or pelvic prolapse
			Sacrocolpopexy
			Scarospinous ligament suspension
			Tuboplasty and other infertility surgery (not microsurgical)
			Uterosacral culposuspension
			Uterosacral vaginal vault fixation, paravaginal repair
			Uterovaginal, vesicovaginal, rectovaginal, and other fistula repair
			Vulvar biopsy
			Vulvectomy, simple

Gynecologic Oncology Core Privileges

Qualifications

- Membership** To be eligible to apply for core privileges in gynecologic oncology, the initial applicant must meet the following criteria:
- Education/Training** Meet criteria for obstetrics and gynecology above plus completion of a fellowship approved by Accreditation Council of Graduation Medical Education (ACGME), American Board of Medical Specialties (ABMS), or American Osteopathic Association (AOA) in gynecologic oncology.
- Certification** Current subspecialty certification or active participation in the examination process with achievement of certification within 5 years leading to subspecialty certification in gynecologic oncology by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications by the American Osteopathic Board of Obstetrics and Gynecology.
- Clinical Experience (Initial)** Applicants for initial appointment must be able to demonstrate performance of at least 12 gynecologic oncology procedures, reflective of the scope of privileges requested, in the past 12 months, or demonstrate successful completion of an ACGME-, ABMS- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.
- Clinical Experience (Reappointment)** To be eligible to renew core privileges in gynecologic oncology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience (25 gynecologic oncology procedures) 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>		
	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.		

KHMC	KHMB	KHTR	
			- Currently granted privileges
			Admit, evaluate, diagnose, treat, and provide consultation and surgical and therapeutic treatment to female patients with gynecologic cancer and the resulting complications, including carcinomas of the cervix, ovary and fallopian tubes, uterus, vulva, and vagina and the performance of procedures on the bowel, urethra, and bladder as indicated. 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.
			Core Procedure List (This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.)
			Chemotherapy
			Myocutaneous flaps, skin grafting
			Para aortic and pelvic lymph node dissection
			Pelvic exenteration
			Perform history and physical exam
			Radical hysterectomy, vulvectomy, and staging by lymphadenectomy
			Radical surgery for treatment of gynecological malignancy to include procedures on bowel, ureter, bladder, liver, spleen, diaphragm, and abdominal and pelvic wall as indicated
			Treatment of invasive carcinoma of the vagina by radical vaginectomy, and other related surgery
			Treatment of invasive carcinoma of vulva by radical vulvectomy with groin dissection
			Treatment of malignant disease with chemotherapy to include gestational trophoblastic disease
			Uterine/vaginal isotope implants

Administration of Chemotherapeutic Agents and Biological Response Modifiers Through Therapeutic Routes

Request			<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	Click shaded blue check box 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.

Maternal-Fetal Medicine Core Privileges

Qualifications

Membership To be eligible to apply for core privileges in maternal-fetal medicine, the initial applicant must meet the following criteria:

Education/Training Meet criteria for obstetrics and gynecology above, plus completion of a fellowship approved by

Accreditation Council of Graduation Medical Education (ACGME), American Board of Medical Specialties (ABMS), or American Osteopathic Association (AOA) in maternal fetal medicine.

Certification

Current subspecialty certification or active participation in the examination process with achievement of certification within 5 years leading to subspecialty certification in maternal-fetal medicine by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications by the American Osteopathic Board of Obstetrics and Gynecology.

Clinical Experience (Initial)

Applicants for initial appointment must be able to demonstrate provision of care to at least 25 patients, reflective of the scope of privileges requested, in the past 12 months or demonstrate successful completion of an ACGME-, ABMS- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Clinical Experience (Reappointment)

Current demonstrated competence and an adequate volume of experience (25 patients) 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	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Admit, evaluate, diagnose, treat, and provide consultation to adolescent and adult female patients with medical and surgical complications of pregnancy, such as maternal cardiac, pulmonary, metabolic, connective tissue disorders, and fetal malformations, conditions, or disease. 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.
			Core Procedure List (This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.)
			Chorionic villi sampling
			Diagnostic laparoscopy
			Fetoscopy/embryoscopy
			Genetic amniocentesis
			In utero fetal shunt placement
			In utero fetal transfusion
			Interoperative support to obstetrician as requested including operative first assist
			Laparoscopic enterolysis
			Obstetrical ultrasound including Doppler studies
			Percutaneous umbilical blood sampling (PUBS)
			Perform history and physical exam

Reproductive Endocrinology Core Privileges

Qualifications

Membership To be eligible to apply for core privileges in reproductive endocrinology, the initial applicant must

meet the following criteria:

Education/Training Meet criteria for obstetrics and gynecology above, plus completion of a fellowship approved by Accreditation Council of Graduation Medical Education (ACGME), American Board of Medical Specialties (ABMS), or American Osteopathic Association (AOA) in reproductive endocrinology.

Certification Current subspecialty certification or active participation in the examination process with achievement of certification within 5 years leading to subspecialty certification in reproductive endocrinology by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications in reproductive endocrinology from the American Osteopathic Board of Obstetrics and Gynecology.

Clinical Experience (Initial) Applicants for initial appointment must be able to demonstrate performance of at least 25 reproductive endocrinology procedures, reflective of the scope of privileges requested, in the past 12 months, or demonstrate successful completion of an ACGME-, ABMS- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months.

Clinical Experience (Reappointment) To be eligible to renew core privileges in reproductive endocrinology, the applicant must meet the following maintenance of privilege criteria: Current demonstrated competence and an adequate volume of experience (25 reproductive endocrinology procedures) 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	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Admit, evaluate, diagnose, treat, and provide inpatient or outpatient consultation to adolescent and adult patients with problems of fertility. 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.
			Core Procedure List (This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.)
			Cannulation of fallopian tubes under fluoroscopy
			Culture and fertilization of oocytes
			Gamete intrafallopian transfer (G.I.F.T.)
			Infertility and endocrine evaluation including ovulation induction, diagnosis and treatment of hirsutism, amenorrhea, hyperprolactinemia
			Intra-abdominal transfer of gametes and zygotes
			Laparoscopic retrieval of oocytes
			Microsurgical tubal reanastomosis and tubouterine implantation
			Operative and diagnostic hysteroscopy including myomectomy, polypectomy, lysis of adhesions, septoplasty and tubal cannulation
			Perform history and physical exam
			Technique of IVF including transabdominal/transvaginal ova harvesting, embryo transfer

			Ultrasound retrieval of oocytes
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Special Noncore Privileges (See Specific Criteria)

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			<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Special Noncore Privileges

Sacral Nerve Stimulation for Urinary Control

Qualifications

Education/Training Applicants must have completed a training course in InterStim Therapy and should be proctored in their initial neurostimulator implant cases.

Clinical Experience (Initial) Demonstrated current competence and evidence of performance at least 6 InterStim Therapy stimulator test and implant procedures in the past 12 months.

Clinical Experience (Reappointment) Demonstrated current competence and evidence of the performance of at least 6 InterStim Therapy stimulator test and implant procedures 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	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Sacral Nerve Stimulation for Urinary Control

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	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.

			- Currently granted privileges
			Robotic Assisted Surgery

Administration of Sedation and Analgesia

Description: See Hospital Policy for Sedation and Analgesia by Non-Anesthesiologists

Request			<i>Request all privileges listed below.</i>
KHMC	KHMB	KHTR	Click shaded blue check box to Request all privileges. Uncheck any privileges you do not want to request.
			- Currently granted privileges
			Administration of Sedation and Analgesia

Fluoroscopy

Description: Must demonstrate competence - initial applicants must complete online quiz; reapplicants must complete annual attestations.

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

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 Main Campus, Kettering Health Miamisburg and Kettering Health Troy Hospital 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):

<input type="checkbox"/>	Recommend all requested privileges
<input type="checkbox"/>	Do not recommend any of the requested privileges
<input type="checkbox"/>	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