UPMC Delineation of Privileges Request Criteria Summary Sheet

Facility: UPMC Bedford

Specialty: GENERAL SURGERY

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KNOWLEDGE	Successful Completion of an ACGME/AOA, accredited program
TRAINING	The successful completion of an approved (ACGME/AOA) post graduate
	residency program in General Surgery
CERTIFICATION	Board Admissibility or Board Certification
OTHER	 The granting of privileges in General Surgery shall be based upon verified information using, but not limited to, the following criteria: Current medical license in the Commonwealth of PA Federal and where applicable, state registration to dispense narcotics Relevant training and experience and the ability to recognize surgical complications Demonstrated clinical competence Review of quality assurance and risk management findings References and recommendations from credible findings No adverse findings report from the NPDB and the OIG for Medicare/Medicaid sanctions Proof of current professional malpractice coverage Eligibility to perform hospital surgical procedures as a responsible surgeon is based upon an individual's education, training, experience and demonstrated proficiency, therefore past experience shall be deemed acceptable for present Department of Surgery members. Must provide documentation of certification in Fluoroscopy in the Operating room. CONSCIOUS SEDATION The credentialing is such that all physicians desiring privileges to administer conscious sedation must show evidence of training/previous experience. Physicians currently administering conscious sedation must show evidence of training/previous experience. Physicians any place throughout the hospital (ED, OPU, ICU, etc.) may continue to do so unless monitoring reveals a problem. In the event of a problem, the Chief of Anesthesiology will provide a mandatory in service for that

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Criteria for Initial Conscious Sedation Privileges:
a) Documentation of training in the administration of conscious sedation.
 b) Documented knowledge of the drugs planned for use including their therapeutic effects, their interaction with other agents and the treatment of adverse effects. Records will be maintained for individual drug agents.
c) Documented knowledge in airway management, including but not limited to, nasal canula, simple mask, nasal airway, oral airway, jaw lift, bag-valve mask, venti- mask, non-rebreathing mask or ACLS training.
Criteria for Reappointment conscious sedation privileges:
a) Satisfactory performance as measured by performance improvement monitors.
 b) If a physician does not currently maintain verification of basic airway skill competency (BLS, PALS, ATLS, ACLS) they may be given a 3 month provisional grant of privilege with the understanding they will refresh these skills with the Chief of Anesthesiology.
Monitoring of conscious sedation privileges:
 a) The Chief of Anesthesiology, with the assistance of the RM/QC, will maintain ongoing monitoring of the quality of conscious sedation practices of physicians so privileged. Any quality problems will be presented during the peer review portion of the Department of Anesthesia meeting.