

**UPMC
Delineation of Privileges Request
Criteria Summary Sheet**

Facility: Childrens Hospital of Pittsburgh of UPMC, North

Specialty: OTOLARYNGOLOGY

KNOWLEDGE	Successful Completion of an ACGME/AOA, accredited program or equivalent foreign degree
TRAINING	The successful completion of an approved (ACGME/AOA) post graduate residency program in Otolaryngology or equivalent foreign training
CERTIFICATION	Candidates must be American Board certified (ABMS accredited Board) in Otolaryngology within five (5) years of becoming eligible to sit for the exam. Exceptions may be considered in the case of an internationally trained applicant or in unusual circumstances with approval of the Pediatric Otolaryngology Division Chief, CHP Surgeon-in-Chief and CHP Credentials and Medical Executive committees.
OTHER	<p>For Procedural Sedation privileges: Must show PALS, ATLS, or ACLS Certification</p> <p>For Laser Surgery privileges: Must show copy of training certificate</p> <p><u>INITIAL APPOINTMENT</u></p> <p>For General Otolaryngology Core: Candidates must be American Board certified (ABMS accredited Board) in Otolaryngology within five (5) years of becoming eligible to sit for the exam. Exceptions may be considered in the case of an internationally trained applicant or in unusual circumstances with approval of the Pediatric Otolaryngology Division Chief, CHP Surgeon-in-Chief and CHP Credentials and Medical Executive committees. May not perform surgery on any child less than two years of age (the only exception being myringotomy, with or without tympanostomy tube placement) without specific approval from the Chief, Pediatric Otolaryngology, CHP Surgeon-in-Chief and CHP Credentials and Medical Executive committees. Also, may not perform complicated pediatric otolaryngology surgical procedures, in any age, such as congenital ear disorders (e.g., atresia, microtia), cochlear implants, tympanomastoidectomy, laryngotracheoplasty, laser surgery, complicated foreign bodies of the air and food passages, or complicated head and neck diseases and disorders, again without specific approval of the Chief, Pediatric Otolaryngology, CHP Surgeon-in-Chief and CHP Credentials and Medical Executive</p>

committees.

For Pediatric Otolaryngology Core:

In addition to meeting criteria for privileges for the General Otolaryngology Core, the applicant must also have completed a clinical fellowship of one year or greater in length in a Pediatric Otolaryngology program accredited by the ACGME or one that is recognized by the American Society of Pediatric Otolaryngology.

An exception to the fellowship requirement may be considered with approval of the Chief, Pediatric Otolaryngology, CHP Surgeon-in-Chief and CHP Credentials and Medical Executive committees for an applicant certified in Otolaryngology who has not completed a one-year clinical fellowship but who has had a minimum of 5 years experience, preceding appointment, in a setting whereby a minimum of 80% of their surgical cases consisted of pediatric age patients. This must be documented by surgical logs that substantiate a variety of cases (e.g., laryngo-bronchoesophagoscopy, head and neck procedures, endoscopic sinus surgery, tympanomastoidectomy) other than routine otolaryngology surgical procedures, such as tonsillectomy, adenoidectomy, and tympanostomy tube placement).

Those applicants who qualify for the Pediatric Otolaryngology Core may perform surgery on children less than two years of age. They may perform complicated pediatric otolaryngology surgical procedures, such as congenital ear disorders (e.g., atresia, microtia), cochlear implants, tympanomastoidectomy, laryngotracheoplasty, laser surgery, complicated foreign bodies of the air and food passages, or complicated head and neck diseases and disorders, in any age.

For Specific/Special Otolaryngology Privileges:

The applicant must qualify for the General Otolaryngology Core privileges and, in addition, must have a specific area of expertise not currently in the scope of the Pediatric Otolaryngology Core, such as skull-base surgery or middle-cranial fossa procedures. Specific privileges must be requested; does not include admitting privileges.

References:

Reference letters from **two** Otolaryngology Surgeons familiar with the applicant's Pediatric Experience or Specific/Special Expertise experience and **one** Pediatric Otolaryngologist that the applicant has worked with during the preceding two years is required.

Reappointment to Active or Affiliate Staff:

- Applicants for the Pediatric Otolaryngology Core must

demonstrate that they have maintained competence by verifying to the satisfaction of the division chief that they have managed at least **50** pediatric otolaryngology cases during the past 24 months. There must be evidence of a variety of cases other than routine procedures, such as tonsillectomy, adenoidectomy, and tympanostomy tube placement.

▪ **CME Requirements**

- There must be documented (listing of course, date, CMEs awarded) evidence of a minimum of 30 Category I continuing medical education hours related to pediatric otolaryngology in the preceding 24-month period for applicants applying for reappointment under the Pediatric Otolaryngology Core. **Note: Five (5) of these credits must be patient safety/risk management credits and should be clearly marked**

Applicants for the Specific Expertise category must demonstrate that they have maintained competence by verifying to the satisfaction of the division chief that they have fulfilled the criteria for current maintenance of privileges at their primary admitting hospital.