

**Delineation of Privileges Request  
Criteria Summary Sheet**

**Facility:** UPMC Altoona

**Specialty:** Radiology

|                      |   |
|----------------------|---|
| <b>KNOWLEDGE</b>     | Successful Completion of an ACGME/AOA, accredited program.  |
| <b>TRAINING</b>      | The successful completion of an approved (ACGME/AOA) post graduate residency program in Diagnostic Radiology.   |
| <b>CERTIFICATION</b> | Board Certification/Board Eligibility in accordance with the UPMC Altoona Medical Staff Bylaws, Rules & Regulations   |
| <b>OTHER</b>         | <ul style="list-style-type: none"> <li>• <b><u>Mammography:</u></b><br/>Must submit copies of CME certificates and provide documentation of the number of mammograms done within the past two (2) years. Requirements are as follows: <ol style="list-style-type: none"> <li>1. 15 CME credits every three years;</li> <li>2. 960 Reads every two years.</li> <li>3. Letter of attestation confirming mammography training.</li> </ol> </li> <li>• <b><u>Stereotactic Breast Biopsy:</u></b><br/><b>Requirements for a <u>radiologist</u> practicing independently:</b><br/><br/><b>Initial Training &amp; Qualifications:</b> <ol style="list-style-type: none"> <li>1. Be fully qualified as an interpreting physician under Mammography Quality Standards Act (MQSA).</li> <li>2. Initially, have at least three (3) hours of Category I CME in stereotactic breast biopsy.</li> <li>3. Initially, obtain at least 15 hours of documented CME in breast imaging including pathophysiology of benign and malignant breast disease as well as clinical breast examinations.</li> <li>4. Have performed at least 12 stereotactic breast biopsies OR at least three (3) hands-on stereotactic breast biopsy procedures under a physician who is qualified to interpret mammography under MQSA and has performed at least 24 stereotactic breast biopsies.</li> </ol> <br/><b>Maintenance of Proficiency &amp; CME Requirements:</b> <ol style="list-style-type: none"> <li>1. Perform at least 12 stereotactic breast biopsies per year or requalify as outlined above.</li> </ol> </li> </ul> |

**Delineation of Privileges Request  
Criteria Summary Sheet**

|  |   |
|--|---|
|  | <p>2. Obtain at least three (3) hours of Category I CME in stereotactic breast biopsy every three (3) years which should include post-biopsy management of the patient.</p> <p>3. Obtain at least 15 hours of Category I CME in breast imaging including pathophysiology of benign and malignant diseases of the breast every three (3) years as required for interpretation of mammography by MQSA.</p> <p><b>Requirements for a surgeon (or other physician) practicing independently:</b></p> <p><b>Initial Training &amp; Qualifications:</b></p> <p>1. Have evaluated* at least 480 mammograms every two (2) years in consultation with a physician who is qualified to interpret mammograms under MQSA.</p> <p>2. Initially, have at least 15 hours of Category I CME in stereotactic breast imaging and biopsy OR three (3) years experience having performed at least 36 stereotactic breast biopsies.</p> <p>3. Have four (4) hours of Category 1 CME in medical radiation physics.</p> <p>4. Have performed at least 12 stereotactic breast biopsies OR at least three (3) hands-on stereotactic breast biopsy procedures under a physician who is qualified to interpret mammography under MQSA<sup>1</sup> and has performed at least 24 stereotactic breast biopsies.</p> <p>* Evaluation means review of the mammographic films in direct consultation with an MQSA qualified physician and/or independent review of mammograms with authenticated mammographic report.</p> <p><b>Maintenance of Proficiency &amp; CME Requirements:</b></p> <p>1. Continue to evaluate at least 480 mammograms every two (2) years in consultation with a physician who is qualified to interpret mammograms under MQSA.</p> <p>2. Perform at least 12 stereotactic breast biopsies per year or requalify as specified above.</p> <p>3. Obtain at least three (3) hours of Category I CME in stereotactic breast biopsy every three (3) years.</p> <p><sup>1</sup> A surgeon (physician) who is not qualified to interpret mammograms under MQSA may be qualified as instructor/trainer for stereotactic needle biopsy if he/she meets the following criteria:</p> |
|--|---|

**Delineation of Privileges Request  
Criteria Summary Sheet**

|  |   |
|--|---|
|  | <ol style="list-style-type: none"> <li>1. At least 50% of his or her professional time is devoted to breast practice; consulting/advising patients with breast disease and to perform diagnostic and therapeutic procedures, including review of 480 mammograms a year either independently or in consultation with an MQSA qualified radiologist.</li> <li>2. Should have taken formal stereotactic training course(s) for at least 24 hours in Category 1 CME including four (4) hours of Category I instruction in radiation physics.</li> <li>3. Should have two (2) years experience in stereotactic biopsy having performed an average of 50 procedures per annum.</li> <li>4. To maintain records of stereotactic needle biopsy procedures including complications, pathologic results and follow-up of patients with either mammography or open biopsy to establish false negative and positive predictive value in his or her practice.</li> <li>5. To publish and make related presentations at scientific meetings and to be recognized by his or her peers as a teacher.</li> </ol> <p><b><u>Ultrasound-Guided Breast Biopsy:</u></b></p> <p><b>Initial Training &amp; Qualifications:</b></p> <ol style="list-style-type: none"> <li>1. Completion of an approved residency which includes three (3) or more months of dedicated formal diagnostic ultrasound training, including breast ultrasound, under the supervision of qualified individuals as defined by ACR and with formal interpretations of those studies performed. In addition, the physician should have successfully passed written and oral board certification examinations including sections pertaining to diagnostic ultrasound. This training should include sufficient experience in image-guided interventional procedures including indications for these procedures, knowledge of complications that might be incurred, and techniques for successful completion of these procedures.</li> </ol> <p style="text-align: center;"><b>OR</b></p> <p>If residency training did not include ultrasound, appropriate fellowship or postgraduate training during which the physician should have been involved with the performance and interpretation of at least 500 ultrasound examinations which should include a broad spectrum of ultrasound uses, including breast ultrasound. This should be under the direct supervision of a qualified physician. A qualified physician is one who meets the criteria defined by ACR. This training should include sufficient experience in image-guided interventional procedures including indications for these procedures, knowledge of complications that might be incurred and techniques for successful</p> |
|--|---|

**Delineation of Privileges Request  
Criteria Summary Sheet**

|  |   |
|--|---|
|  | <p>completion of these procedures.</p> <p style="text-align: center;"><b>OR</b></p> <p>In the absence of residency training, formal fellowship or post-graduate education, documentation of clinical experience could be acceptable providing it can be established that the physician has had at least two (2) years of ultrasound experience during which a minimum of 500 general or 100 breast ultrasound examinations were performed and formally interpreted. This training should include sufficient experience in image-guided interventional procedures including indications for these procedures, knowledge of complications that might be incurred, and techniques for successful completion of these procedures.</p> <p><b>Certification in Radiology or Diagnostic Radiology by the American Board of Radiology, the American Osteopathic Board of Radiology, the Royal College of Physicians and Surgeons of Canada, or an equivalent body that certifies in this discipline and is recognized by the American Board of Medical Specialties may be considered proof of adequate physician qualification. However, the physician’s residency and/or fellowship training must include specific criteria for training as outlined above.</b></p> <p>2. The physician must have performed at least three (3) hands-on ultrasound-guided breast biopsy procedures under the guidance of a physician qualified to perform ultrasound-guided breast biopsy procedures.</p> <p>3. Three (3) hours of Category I CME in ultrasound-guided breast biopsy.</p> <p><b>Maintenance of Proficiency &amp; CME Requirements:</b></p> <p>1. Documentation of an average of at least 12 ultrasound-guided breast biopsies.</p> <p>2. The physician must have three (3) hours of Category I CME in ultrasound-guided breast biopsy procedures every three (3) years after initial qualifications are met.</p> <ul style="list-style-type: none"> <li>• <b><u>Insertion of Ancure Endograft for Repair of Abdominal Aortic Aneurysm:</u></b> <ol style="list-style-type: none"> <li>1. Interventional Radiologist, Cardiothoracic Surgeon, and/or Peripheral Vascular Surgeon.</li> <li>2. Satisfactory completion of an acceptable training course.</li> </ol> </li> <li>• <b><u>Interventional Vascular Procedures:</u></b> <ol style="list-style-type: none"> <li>1. See specifications on Part B of the DOP Request Form.</li> <li>2. Submit verification from Department Chair or Medical Staff President where procedures were performed:</li> </ol> </li> </ul> |
|--|---|

**Delineation of Privileges Request  
Criteria Summary Sheet**

|  |  |
|--|--|
|  | <ul style="list-style-type: none"> <li>a. residency</li> <li>b. fellowship</li> <li>c. place of previous employment</li> </ul> <p>3. Provide a log of peripheral endovascular procedures performed over the past 24 months.</p> <ul style="list-style-type: none"> <li>• <b><u>IVC Filter Credentialing Criteria</u></b><br/>For those individuals who do not have Peripheral Endovascular Interventional privileges but wish to insert IVC Filters, the following criteria must be met: <ul style="list-style-type: none"> <li>1. Documentation of 10 IVC Filter placements with 5 as the primary operator.</li> <li>2. Individuals wishing to insert IVC Filters that have never performed the procedure or who do not have documented evidence of at least 10 IVC filter placements must arrange for a proctor to oversee the intended procedure.</li> </ul> </li> <li>• <b><u>MODERATE SEDATION:</u></b> <ul style="list-style-type: none"> <li>• Only a qualified Physician who meets the following requirements set by the MEC may administer Moderate Sedation in approved locations.</li> <li>• The physician must possess a current ACLS provider card. In areas where moderate sedation is administered to pediatric patients, the physician must possess a current PALS provider card.</li> </ul> </li> </ul> <p>The physician must complete the moderate sedation program provided by the Department of Anesthesiology. Verification of the completion of the required training is maintained in the Medical Staff Office. Renewal of moderate sedation credentials is required every 2 years.</p> |
|--|--|