

**Delineation of Privileges  
ENDOVASCULAR PROCEDURES**

**Please Print Name**

**QUALIFICATIONS:** Licensed physician (MD or DO) as defined in the Medicine, Surgery or Radiology Department Rules and Regulations with appropriate specialty training.

**INDICATE PARTICULAR PRIVILEGES REQUESTED:** Privileges granted herein permit the physician to treat patients without limitation, for all inpatient and outpatient areas, intensive care units, and Emergency Department. Physicians with appropriate specialty training/experience are eligible to apply for the following special procedures, provided that specific criteria are met (when applicable). Applicants shall provide clinical activity summaries, to include procedural case logs with outcome data from their training program or from facility where currently performing procedures.

REQUESTED	PRIVILEGE	CRITERIA	GRANTED	NOT ELIGIBLE
<b>DIAGNOSTIC ANGIOGRAPHY</b>				
	Peripheral and visceral diagnostic angiography (excluding carotid angiography)	Qualifies through training obtained from a:  <u><b>Fellowship Pathway:</b></u> ➤ If recently completed a ACGME recognized fellowship (within past 2 years), verification of skills from program director. ➤ Documentation of 100 diagnostic peripheral angiograms (50 as primary operator) during training.  <p align="center"><b>OR</b></p> <u><b>Practice Pathway:</b></u> ➤ Unrestricted privileges at an accredited facility* ➤ Documentation that the applicant has performed 100 diagnostic angiograms (50 as primary operator) over the previous 5 years. ➤ Letter of training and experience from cath lab director or department chairman attesting to ability to perform procedures requested with satisfactory outcomes. ➤ Documentation of 50 hours CME approved training with didactic and hands-on criteria  <b><i>The first 10 cases at JCLDV will be retrospectively reviewed by the Endovascular Committee.</i></b>		
	Carotid Angiography (excludes angioplasty, stent)	Qualifies for Cardiac or Peripheral Arteriography privileges and has undergone training through a:  <u><b>Fellowship Pathway:</b></u> ➤ If recently completed a ACGME recognized fellowship (within past 2 years), verif. of skills from program director. ➤ Documentation of 25 cases during training as the primary operator.  <p align="center"><b>OR</b></p> <u><b>Practice Pathway:</b></u> ➤ Unsupervised privileges at an accredited facility* ➤ Documentation that the applicant has performed 25 diagnostic angiograms over the previous 5 years. ➤ Letter of training and experience from cath lab director or department chairman attesting to applicant's ability to perform procedures requested with satisfactory outcomes  <b><i>The first 5 cases JCLDV will be retrospectively reviewed by the Endovascular Committee (including cerebral angiography).</i></b>		

REQUESTED	PRIVILEGE	CRITERIA	GRANTED	NOT ELIGIBLE
<b>ENDOVASCULAR INTERVENTIONS</b>				
<b>Arterial</b>				
	Peripheral Interventions, including angioplasty, stenting and atherectomy, involving renal, aorta, iliac, femoral, mesenteric or infra-popliteal arteries (excluding carotid stenting and venous interventions)	<p>Qualifies for peripheral and visceral angiography privileges and has undergone training through a:</p> <p><b><u>Fellowship Pathway:</u></b></p> <ul style="list-style-type: none"> <li>➤ 50 peripheral or renal percutaneous transluminal angioplasties (25 as primary operator).</li> <li>➤ Letter verifying skills from program director or department chairman of a ACGME recognized fellowship attesting to applicant's ability to perform the procedures requested.</li> </ul> <p style="text-align: center;"><b>OR</b></p> <p><b><u>Practice Pathway</u></b></p> <ul style="list-style-type: none"> <li>➤ Doc. of 50 percutaneous transluminal angioplasties of the peripheral or visceral arteries (25 as primary operator) over the previous 5 years.</li> <li>➤ Doc. of 50 hours of category 1 CME approved training with didactic and hands-on criteria</li> <li>➤ Verif. of unsupervised interventional privileges at an accredited facility*, with doc. of 10 peripheral or visceral interventional procedures per yr w/ satisfactory outcomes.</li> </ul> <p><b><i>The first 10 cases at JCLDV will be retrospectively reviewed by the Endovascular Committee.</i></b></p>		
	Arterial thrombolysis and thrombectomy	<p>Qualifies for peripheral and visceral angiography and angioplasty privileges and has undergone training through a:</p> <p><b><u>Fellowship Pathway:</u></b></p> <ul style="list-style-type: none"> <li>➤ Doc. of 10 peripheral or visceral arterial thrombolysis and thrombectomy procedures.</li> <li>➤ Letter verifying skills from program director or department chairman of a ACGME recognized fellowship attesting to applicant's ability to perform the procedures requested.</li> </ul> <p style="text-align: center;"><b>OR</b></p> <p><b><u>Practice Pathway</u></b></p> <ul style="list-style-type: none"> <li>➤ Doc. of 10 peripheral or visceral arterial thrombolysis and thrombectomy procedures over the previous 5 years.</li> <li>➤ Doc. of 50 hours of category 1 CME approved training with didactic and hands-on criteria</li> <li>➤ Verif. of unsupervised interventional privileges at an accredited facility*, with doc. of 10 visceral or peripheral arterial thrombolysis and thrombectomy procedures per year with satisfactory outcomes.</li> </ul> <p><b><i>The first 5 cases at JCLDV will be retrospectively reviewed by the Endovascular Committee.</i></b></p>		
	Arterial embolization	<p>Qualifies for peripheral and visceral angiography and angioplasty privileges and has undergone training through a:</p> <p><b><u>Fellowship Pathway:</u></b></p> <ul style="list-style-type: none"> <li>➤ Doc. of 10 arterial embolization procedures.</li> <li>➤ Letter verifying skills from program director or department chairman of a ACGME recognized fellowship attesting to applicant's ability to perform the procedures requested.</li> </ul> <p style="text-align: center;"><b>OR</b></p> <p><b><u>Practice Pathway</u></b></p> <ul style="list-style-type: none"> <li>➤ Doc. of 10 arterial embolization procedures over the previous 5 years.</li> <li>➤ Doc. of 50 hours of category 1 CME approved training which includes arterial embolization with didactic and hands-on criteria</li> <li>➤ Verif. of unsupervised interventional privileges at an accredited facility*, with doc. of 10 arterial embolization procedures per year with satisfactory outcomes.</li> </ul> <p><b><i>The first 5 cases at JCLDV will be retrospectively reviewed by the Endovascular Committee.</i></b></p>		

REQUESTED	PRIVILEGE	CRITERIA	GRANTED	NOT ELIGIBLE
<b>Venous</b>				
	Venous Endovascular Therapy (included angioplasty, stents, mechanical thrombectomy and thrombolysis)	Qualifies for Peripheral Arterial Interventional privileges and has undergone training through a: <b><u>Fellowship Pathway:</u></b> > Documented 25 peripheral or visceral venous endovascular therapies as the primary operator. > If recently completed ACGME recognized fellowship (within past 2 years), letter from program director attesting to applicant's ability to perform procedures requested. OR <b><u>Practice Pathway:</u></b> > Unrestricted venous endovascular therapy privileges at an accredited facility*, with letter from Chairman or Director of Cath Lab documenting 25 cases per year with satisfactory outcomes. > Documentation of 25 peripheral or visceral venous endovascular therapies as the primary operator at an accredited facility*.  <b><i>The first 5 cases at JCLDV will be retrospectively reviewed by the Endovascular Committee.</i></b>		
	Vena cava filters (includes placement and retrieval)	Qualifies for Peripheral Arterial Angioplasty <u>and</u> venous endovascular therapy privileges and has undergone training through a:  <b><u>Fellowship Pathway:</u></b> > Documented 15 vena cava filter placement as the primary operator. > If recently completed ACGME recognized fellowship (within past 2 years), letter from program director attesting to applicant's ability to perform procedures requested. OR <b><u>Practice Pathway:</u></b> > Documented 15 vena cava filter placement as the primary operator at an accredited facility*. > Unrestricted privileges an accredited facility*, with letter from Chairman or Director of Cath Lab documenting 15 cases per year with satisfactory outcomes.  <b><i>The first 5 cases at JCLDV will be retrospectively reviewed by the Endovascular Committee.</i></b>		
<b>Endoluminal Grafting</b>				
	Endoluminal Repair of Abdominal Aortic Aneurysm (ELG-AAA)	<ol style="list-style-type: none"> <li>1. Procedure to be performed in the Operating Room only.</li> <li>2. Procedure is to be performed by a primary operator (defined below) with a vascular surgeon assisting (also defined below).</li> <li>3. Vascular surgeon is required in the Operating Room for the duration of the procedure.</li> <li>4. Primary operator must be a vascular surgeon, radiologist or cardiologist.</li> <li>5. If the primary operator is a vascular surgeon, a vascular surgeon assist is not necessary.</li> </ol> <p><b><u>Criteria to apply for Primary Operator Privileges</u></b>                      Primary Operator has unrestricted endovascular diagnostic and interventional privileges at JCLDV and can demonstrate:</p> <p>See Next Page for Pathways</p>		

REQUESTED	PRIVILEGE	CRITERIA	GRANTED	NOT ELIGIBLE
		<p><b><u>Fellowship Pathway:</u></b></p> <ul style="list-style-type: none"> <li>➤ Fellowship training (Vascular, Radiology or Cardiology) shall consist of not less than 6-12 months hands on experience during which time a minimum of 10 cases will be performed as the Primary Operator. Case logs shall be submitted listing the applicant's role in each case as either primary operator, assistant with hands on, or observer only. Outcome data is required from the applicant's department. A letter from the program director will be obtained.</li> </ul> <p style="text-align: center;"><b>OR</b></p> <p><b><u>Practice Pathway:</u></b></p> <ul style="list-style-type: none"> <li>➤ Documented satisfactory completion of hands-on training program in endovascular grafts that is certified by the company of the device the applicant wishes to use.</li> <li>➤ Additional documentation of a minimum of ten (10) aortic stent graft implantations where the applicant has participated as the Primary Operator (dictated operative reports and discharge summaries may be requested).</li> </ul> <p><b><u>Criteria to apply for ELG Surgical Assist:</u></b> Vascular surgeons with full (open) vascular privileges and Radiologists and Cardiologists with full invasive radiology and cardiology privileges, must show evidence of completion of brief training course in endoluminal grafting technology.</p> <p><b><u>OBSERVATION REQUIREMENT – Retrospective Review</u></b> <b>All cases are reviewed retrospectively by the Endovascular Committee</b></p>		
	Endoluminal Repair of Thoracic Aortic Aneurysm (ELG-TAA)	<p>Please refer to the criteria above. The requirements are the same except the training/experience must be specific to ELG-TAA.</p> <p><b><u>OBSERVATION REQUIREMENT - Retrospective Review</u></b> <b>All cases are reviewed retrospectively by the Endovascular Committee</b></p>		

I have reviewed the above list and have checked the procedures that I am trained to perform as part of my practice. By my signature below, I certify that my malpractice insurance will cover, to the dollar limits required by the Board of Directors, my exercise of the above requested privileges:

<b>Applicant's Signature:</b>	<b>Date:</b>
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**DEPARTMENTAL REPORT AND RECOMMENDATION:** Upon review of all the credentialing information available with particular focus on education/training, experience, current clinical competence and ability to perform the specific privileges requested, I recommend the applicant as capable of carrying out duties and is competent to perform each of the specific privileges as designated above.

<b>Signature: Department Chairman/Vice Chairman</b>	<b>Date:</b>
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Date: \_\_\_\_\_  
                    Credentials approval

Date: \_\_\_\_\_  
                    Medical Executive approval

Date: \_\_\_\_\_  
                    Board of Directors approval



## Criteria for Granting Privileges ENDOASCULAR PROCEDURES

### CRITERIA FOR ENDOASCULAR PROCEDURES

#### Training Requirements

Physicians shall have extensive clinical training in the diagnosis and treatment of patients with vascular disease. The knowledge necessary includes the anatomy, natural history and clinical manifestations of vascular disease; noninvasive assessment of vascular disease; indications and contraindications for intervention; risks and benefits of intervention; recognition of complications; alternative therapies; principles of thrombolytic techniques; and technical aspects and usage of x-ray equipment needed for diagnostic and interventional angiography and percutaneous interventions.

Basic postgraduate training must be met by each physician for endovascular procedure privileges and should include at least one of the following or by the practice pathway listed for each privilege:

- American Board of Radiology or Osteopathic Radiology certification or must have met the criteria for board certification and be in the active candidate process;
- American Board of Internal Medicine certification with additional certification in Cardiovascular medicine, with added qualifications in interventional cardiology, or must have met the criteria for board certification and be in the active candidate process;
- American Board of Surgery certification with added qualifications in general vascular surgery, or must have met the criteria for board certification and be in the active candidate process.

### CONSCIOUS SEDATION PRIVILEGES

Qualifications and competency requirements for privileges to administer conscious sedation by an applicant at the time of appointment and reappointment to the Medical Staff and as an Emergency Department Nurse Practitioner include:

#### INITIAL REQUEST - CRITERIA FOR GRANTING PRIVILEGES

##### ADULT Patients:

- A. Signed acknowledgment that the applicant has reviewed and understands the John C. Lincoln Deer Valley Patient Services Policy, Management of Conscious Sedation #14.17.0.60 and the John C. Lincoln Deer Valley Conscious Sedation Learning Packet; **AND**
- B. ACLS certification; **AND**
- C. Training and education during residency, fellowship or continuing medical education courses that include:
  - i. Evaluation and care of patients receiving conscious sedation and a course of study that includes conscious sedation medications; **OR**
  - ii. Successful completion of the attached Conscious Sedation Post Test

##### PEDIATRIC Patients

- A. Signed acknowledgment that the applicant has reviewed and understands the John C. Lincoln Deer Valley Patient Services Policy, Management of Conscious Sedation #14.17.0.60 and the John C. Lincoln Deer Valley Conscious Sedation Patient Learning Packet; **AND**
- B. PALS certification; **AND**
- C. Training and education during residency, fellowship or continuing medical education courses that include:
  - i. Evaluation and care of patients receiving conscious sedation and a course of study that includes conscious sedation medications; **OR**
  - ii. Successful completion of the attached Conscious Sedation Post Test

#### REAPPOINTMENT REQUEST - CRITERIA FOR CONTINUING PRIVILEGES

##### ADULT & PEDIATRIC Patients:

- A. Signed acknowledgment that the applicant has reviewed and understands the John C. Lincoln Deer Valley Patient Services Policy, Management of Conscious Sedation #14.17.0.60; **AND**
- B. ACLS certification. PALS certification for pediatric patients.