

JOHN C. LINCOLN NORTH MOUNTAIN HOSPITAL

ORAL and MAXILLOFACIAL SURGERY
Delineation of Privileges

Please Print Name _____

QUALIFICATIONS: Licensed physician (DDS or DMD) who has successfully completed a residency training program necessary for or who has board certification in Oral/Maxillofacial Surgery.

REQ	COGNITIVE PRIVILEGES- Documentation of Specific Credentialing Criteria
	Admit, provide consultation, order diagnostic tests and procedures, and treat patient with problems related to oral and maxillofacial surgery.
	Perform History & Physicals

REQ	ORAL SURGERY
	To include: Removal of teeth, alveoplasty, incision & drainage of facial/neck spaces, pre-prosthetic surgery including oral and skin grafts, ridge augmentation procedures and placement of endosseous and alloplastic implants and grafts, operations on the paranasal sinuses as related to dental pathology, closure of oral antral and oral nasal fistulae.
REQ	MAXILLOFACIAL SURGERY
	To include: Vestibuloplasty, palatoplasty, skin grafts to orofacial region, alloplastic grafts to mandible, maxilla or zygoma, mandibular and maxillary osteotomy, excision of oral/facial lesions, surgical treatment of cysts or tumors of the jaws, facial tissues and adnexa, resection of mandible or maxilla as related to oral pathology, harvest of bone, skin, or cartilage for oral and maxillofacial reconstruction, management of continuity defects of the jaws with bone and/or soft tissue grafting, repair of mandibular and maxillary fractures (excluding orbital fractures), salivary gland surgery (except Parotid surgery), microsurgery for oral and maxillofacial surgery.
REQ	CLEFT LIP AND PALATE SURGERY
	To include: Bone and soft tissue grafting, management of continuity defects, palatal and facial cleft repair
REQ	TMJ SURGICAL TREATMENT
	To include: Temporomandibular joint, arthocentesis, arthroscopy, arthroplasty, miniscectomy, alloplastic/autogenous grafts, total joint reconstruction.

REQ	SPECIAL PROCEDURES- Documentation of specific training and experience is required
	CONSCIOUS SEDATION: A drug-induced minimally depressed level of consciousness (LOC) that retains a patient's ability to maintain a patent airway independently and continuously. The patient is able to respond to physical and verbal stimulation.

I have reviewed the above list and have checked the procedures to which I am limiting my practice; and having been trained accordingly, 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.

Signature of Applicant	Date
------------------------	------

APPROVAL

Department Chairman or Vice Chairman	Date
--------------------------------------	------

Date: _____
Medical Executive Committee

Date: _____
Network Board of Directors

Approved: 9/05; 8/07

Criteria for Granting Privileges

ORAL / MAXILLOFACIAL SURGERY

1. All new applicants for privileges as members in the Department of Surgery shall be reviewed with respect to the performance of their clinical abilities.
2. All new applicants for oral/maxillofacial surgery privileges shall be considered only if they are **certified or an active candidate** as recognized by the American Board of Oral / Maxillofacial Surgery.
3. Staff members within the Department of Surgery requesting an increase in, or wider scope of surgical privileges, must do so in writing to the Committee stating and including documentation of additional training or experience which shall justify such privileges as required by established criteria.

CONSCIOUS SEDATION

PURPOSE and DEFINITION

To provide guidelines to Medical Staff members who apply for privileges to administer conscious sedation.

Conscious sedation is a drug-induced minimally depressed level of consciousness (LOC) that retains a patient's ability to maintain a patent airway independently and continuously. The patient is able to respond to physical and verbal stimulation.

Members of the Medical Staff shall be privileged to administer conscious sedation.

INITIAL REQUEST – CRITERIA FOR GRANTING PRIVILEGES

Qualifications and competency requirements for privileges to administer conscious sedation by an applicant at the time of appointment to the Medical Staff include:

1. ADULT Patients
 - A. Signed acknowledgement that the applicant has reviewed and understands the John C. Lincoln Health Network Patient Services Policy, Conscious Sedation. **AND**
 - B. 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. Documentation of at least five (5) procedures performed during the past two years in which patients have received conscious sedation.
2. PEDIATRIC Patients
 - A. Signed acknowledgement that the applicant has reviewed and understands the John C. Lincoln Health Network Patient Services Policy, Conscious Sedation.; **AND**
 - B. Current Basic Life Support, or equivalent certification or training; **AND**
 - C. Training and education during residency, fellowship or continuing medical education courses that include:
 - i. Evaluation and care of pediatric patients receiving conscious sedation and a course of study that includes conscious sedation medications; **OR**
 - ii. Documentation of at least five (5) procedures performed during the past two years in which pediatric patients have received conscious sedation.

MAINTENANCE OF PROFICIENCY TO RENEW CONSCIOUS SEDATION PRIVILEGES

Practice meets acceptable standards for performance at John C. Lincoln Hospitals as determined by the applicable clinical department.

Revised 8/04