

UNMH Obstetrics and Gynecology Clinical Privileges

Name: _____ Effective Dates: From _____ To _____

All new applicants must meet the following requirements as approved by the UNMH Board of Trustees, effective April 28, 2017:

- Initial Privileges (initial appointment)
- Renewal of Privileges (reappointment)
- Expansion of Privileges (modification)

INSTRUCTIONS:

Applicant: Check off the “requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the Hospital for a proper evaluation of current competence, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges.

Department Chair: Check the appropriate box for recommendation on the last page of this form. If recommended with conditions or not recommended, provide condition or explanation.

OTHER REQUIREMENTS:

1. Note that privileges granted may only be exercised at UNM Hospitals and clinics that have the appropriate equipment, license, beds, staff, and other support required to provide the services defined in this document. Site-specific services may be defined in hospital or department policy.
2. This document defines qualifications to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

QUALIFICATIONS FOR OBSTETRICS AND GYNECOLOGY:

Initial Privileges: To be eligible to apply for privileges in obstetrics and gynecology, the applicant must meet the following criteria:

1. Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited residency in obstetrics and gynecology; **AND/OR**
2. Current certification in, or active participation in the examination process leading to certification in, obstetrics and gynecology by the American Board of Obstetrics and Gynecology or American Osteopathic Board of Obstetrics and Gynecology; **AND**
3. Required current experience: Provision of care, reflective of the scope of privileges requested, to an adequate number of obstetrical deliveries and gynecological surgical procedures during the past twelve (12) months, or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past twelve (12) months.

Renewal of Privileges: Demonstrated current competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (24) months

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based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: Obstetrics

Admit, evaluate, diagnose, treat, and provide consultation to adolescent and adult female patients and/or provide medical and surgical care of the female reproductive system and associated disorders, including major medical diseases that are complicating factors in pregnancy. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Core privileges in this specialty include the procedures in the below procedure list and other procedures that are extensions of same techniques and skills

Requested

Obstetrics Core Procedures List

This list is a sampling of procedures included in the obstetrics core. This is not intended to be an all-encompassing list, but rather reflective of the categories/ types of procedures included in the core.

To the applicant: If you wish to exclude any procedures listed in obstetrics core, strike through then initial and date those procedures you do not wish to request.

1. Perform history and physical examination.
2. Amnioinfusion
3. Amniocentesis
4. Amniotomy
5. Application of internal fetal and uterine monitors.
6. Augmentation and induction of labor.
7. Cesarean hysterectomy, cesarean section.
8. Cerclage.
9. Cervical biopsy or conization of cervix in pregnancy.
10. Circumcision of newborn.
11. External version of breech.
12. Hypogastric artery ligation.
13. Immediate care of the newborn, including resuscitation and intubation.
14. Interpretation of fetal monitoring.
15. Management of high risk pregnancy inclusive of such conditions as pre-eclampsia, post-datism, third trimester bleeding, intrauterine growth restriction, premature rupture of membranes, premature labor, and placental abnormalities.
16. Management of patients with/without medical, surgical, or obstetrical complications for normal labor, including toxemia, threatened abortion, normal puerperal patient, normal antepartum and postpartum care, postpartum complications, fetal demise.
17. Manual removal of placenta, uterine curettage.
18. Medication to induce fetal lung maturity.

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19. Normal spontaneous vaginal delivery.
20. Obstetrical diagnostic procedures, including ultrasonography and other relevant imaging techniques.
21. Operative vaginal delivery, including the use of obstetric forceps, and/or the vacuum extractor.
22. Perform breech and multifetal deliveries.
23. Pudendal and paracervical blocks.
24. Repair of 4th degree perineal lacerations or of cervical or vaginal lacerations.
25. Treatment of medical and surgical complications of pregnancy.
26. Vaginal birth after previous Cesarean section (VBAC).

CORE PRIVILEGES: Gynecology

Admit, evaluate, diagnose, treat, and provide consultation pre-, intra-, and post-operative care necessary to correct or treat female patients of all ages presenting with injuries and disorders of the female reproductive system and genitourinary system, and non-surgical treatment of disorders and injuries of the mammary glands. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Core privileges in this specialty include the procedures in the below procedure list and other procedures that are extensions of same techniques and skills

Requested

Gynecology Core Procedures List

This list is a sampling of procedures included in the gynecology core. This is not intended to be an all-encompassing list, but rather reflective of the categories/ types of procedures included in the core.

To the applicant: If you wish to exclude any procedures listed in gynecology core, strike through then initial and date those procedures you do not wish to request.

1. Perform history and physical examination.
2. Adnexal surgery, including ovarian cystectomy, oophorectomy, salpingectomy, and conservative procedures for treatment of ectopic pregnancy.
3. Aspiration of breast masses.
4. Cervical biopsy, including conization.
5. Colpocleisis.
6. Colpoplasty.
7. Colposcopy including vaginoscopy, vulvoscopy with or without biopsy.
8. Contraceptive device insertion and removal, including IUD and implant, when required device-specific training has been obtained.
9. Cystoscopy as part of gynecological procedures.
10. Diagnosis and management of pelvic floor dysfunction, including operations for its correction (e.g., repair of rectocele, enterocele, cystocele, or pelvic prolapse).
11. Diagnostic and therapeutic D&C.

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12. Diagnostic and operative laparoscopy (other than tubal sterilization).
 13. Endometrial ablation.
 14. Endometrial biopsy.
 15. Gynecologic diagnostic procedures, including ultrasonography and other relevant imaging techniques.
 16. Hysterectomy (abdominal, vaginal), including laparoscopically assisted.
 17. Hysterosalpingography.
 18. Hysteroscopy, diagnostic or ablative, excluding use of resection technique.
 19. Incision and drainage of pelvic abscess.
 20. Incision and drainage of vulvar, buttock, breast, or other skin abscess.
 21. Incidental appendectomy.
 22. Laparotomy (other than tubal sterilization).
 23. Metroplasty.
 24. Myomectomy, abdominal.
 25. Operation for treatment of early stage carcinoma of the vulva, vagina, endometrium, or cervix.
 26. Operation for treatment of urinary stress incontinence, vaginal approach, retropubic urethral suspension, sling procedures.
 27. Operation for uterine bleeding (abnormal and dysfunctional).
 28. Operations for sterilization (tubal ligation), including salpingectomy.
 29. Operative management of pelvic pain.
 30. Tuboplasty and other infertility surgery (not microsurgical).
 31. Uterosacral vaginal vault fixation, paravaginal repair.
 32. Uterovaginal, vesicovaginal, rectovaginal, and other fistula repair.
 33. Vulvar biopsy.
 34. Vulvectomy, simple.
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QUALIFICATIONS FOR GYNECOLOGIC ONCOLOGY:

Initial Privileges: To be eligible to apply for privileges in gynecologic oncology, the applicant must meet the following criteria:

1. Meet criteria for obstetrics and gynecology as set forth above; **AND**
2. Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited fellowship in gynecologic oncology; **AND/OR**
3. Current subspecialty certification in, or active participation in the examination process leading to certification in, gynecologic oncology by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications by the American Osteopathic Board of Obstetrics and Gynecology; **AND**
4. Required current experience: Provision of care, reflective of the scope of privileges requested, to an adequate number of gynecologic oncology procedures during the past twelve (12) months, or

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demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past twelve (12) months.

Renewal of Privileges: Demonstrated current competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: Gynecologic Oncology

Admit, evaluate, diagnose, treat, and provide consultation and surgical and therapeutic treatment to female patients with gynecologic cancer and complications resulting from, including carcinomas of the cervix, ovary and fallopian tubes, uterus, vulva and vagina, and the performance of procedures on the bowel, urethra, and bladder as indicated. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Core privileges in this specialty include the procedures in the below procedure list and other procedures that are extensions of same techniques and skills

Requested

Gynecologic Oncology Core Procedures List

This list is a sampling of procedures included in the gynecologic oncology core. This is not intended to be an all-encompassing list, but rather reflective of the categories/ types of procedures included in the core.

To the applicant: If you wish to exclude any procedures listed in gynecologic oncology core, strike through then initial and date those procedures you do not wish to request.

1. Perform history and physical examination.
2. Treatment of malignant disease with chemotherapy, biologic therapy and immunotherapy.
3. Lymphadenectomies (inguinal, femoral, pelvic, para-aortic).
4. Microsurgery.
5. Myocutaneous flaps, skin grafting.
6. Para-aortic and pelvic lymph node dissection.
7. Pelvic exenteration (anterior, posterior, total).
8. Hysterectomy (vaginal, abdominal, radical, minimally invasive)
9. Vaginectomy (simple, radical).
10. Vulvectomy (skinning, simple, partial, radical)
11. Insertion of intra-cavity radiation devices for radiation application.
12. Salpingo-oophorectomies, salpingectomies.
13. Omenectomy.

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14. Surgery of the gastrointestinal tract and upper abdomen, to include: placement of feeding jejunostomy/gastrostomy, resections and reanastomosis of the small bowel, bypass procedures of the small bowel, mucous fistula formations of the small bowel, ileostomies, repair of fistulas, resection and reanastomosis of the large bowel (including low anterior resection and reanastomosis), bypass procedures of the large bowel, mucous fistula formations of the large bowel, colostomies, splenectomies, liver biopsies.
15. Surgery of the urinary tract: (Bladder) cystectomy (partial, total); repairs of vesicovaginal fistulas (primary, secondary); cystostomy; (ureter): ureteroneocystostomies with and without bladder flaps or psoas fixation; end to end ureteral re-anastomoses; transuretero-ureterostomies; small bowel interpositions; cutaneous ureterostomies; repairs of intraoperative injuries to the ureter; and conduits developed from the ileum, colon, cystoscopy and ureteral stent placements.
16. I&D of abdominal or perineal abscess.
17. Reconstruction procedures: development of neovagina (split thickness skin grafts, pedicle grafts, myocutaneous grafts); development of new pelvic floor (omental pedicle grafts, transposition of muscle grafts).
18. Evaluation procedures (cystoscopies, laparoscopies, colposcopies, vaginoscopies, vulvoscopies, and cervical conization procedures including loop excisions, cold knife conizations, sigmoidoscopies, breast mass – fine needle aspirations, needle biopsies).
19. Manage operative and post-operative complications.
20. Management of excisional skin lesions or scars revisions.
21. Sentinel lymph node procedures for uterine, cervical and vulvovaginal cancers.
22. Minimally invasive surgical procedural approaches including vaginal, total laparoscopic, laparoscopic assisted.
23. Placement and removal of intravenous and intraperitoneal port-a-caths.
24. Placement and management of surgical drains.

QUALIFICATIONS FOR MATERNAL/FETAL MEDICINE:

Initial Privileges: To be eligible to apply for privileges in maternal/fetal medicine, the applicant must meet the following criteria:

1. Meet criteria for obstetrics and gynecology as set forth above; **AND**
2. Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited fellowship in maternal/fetal medicine; **AND/OR**
3. Current subspecialty certification in, or active participation in the examination process leading to certification in, maternal/fetal medicine by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications by the American Osteopathic Board of Obstetrics and Gynecology; **AND**
4. Required current experience: Provision of care, reflective of the scope of privileges requested, to an adequate number of maternal/fetal medicine patients during the past twelve (12) months, or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past twelve (12) months.

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Renewal of Privileges: Demonstrated current competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: Maternal/Fetal Medicine

Admit, evaluate, diagnose, treat, and provide consultation to adolescent and adult female patients with medical and surgical complications of pregnancy, such as maternal cardiac, pulmonary, metabolic, connective tissue disorders, and fetal malformations, conditions, or disease. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Core privileges in this specialty include the procedures in the below procedure list and other procedures that are extensions of same techniques and skills.

Requested

Maternal/Fetal Medicine Core Procedures List

This list is a sampling of procedures included in the maternal/fetal medicine core. This is not intended to be an all-encompassing list, but rather reflective of the categories/ types of procedures included in the core.

To the applicant: If you wish to exclude any procedures listed in maternal/fetal medicine core, strike through then initial and date those procedures you do not wish to request.

1. Perform history and physical examination.
2. Amnioreduction.
3. Chorionic villi sampling.
4. Diagnostic laparoscopy.
5. External cephalic version of abnormal lie.
6. Fetal assessment: (antepartum) non-stress test, contraction stress test, biophysical profile, vibroacoustic stimulation test, Doppler velocimetry; (intrapartum) fetal heart rate monitoring, scalp stimulation.
7. Genetic amniocentesis.
8. Intrauterine fetal therapy (thoracentesis, paracentesis, administration of medications, placement of thoracic shunt, placement of urinary catheter).
9. In utero fetal transfusion.
10. Intraoperative support to obstetrician as requested, including operative first assist.
11. Laparoscopic enterolysis.
12. Ultrasound examination, to include: 1st, 2nd, 3rd trimester targeted anatomic fetal evaluation, cardiac evaluation including color Doppler, Doppler velocimetry (fetal umbilical artery, fetal middle cerebral artery, maternal uterine artery), cervical and placental evaluation, 3D and 4D ultrasound.

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13. Percutaneous umbilical blood sampling (PUBS).
14. Transvaginal cervical cerclage.
15. Cephalocentesis.
16. Complicated cesarean delivery.
17. Cesarean hysterectomy.
18. Medical and surgical control of hemorrhage.
19. Episiotomy and vaginal laceration repair.
20. Induction of labor.
21. Manual removal of placenta.
22. Neonatal resuscitation.
23. Operative vaginal deliveries.
24. Sterilization procedures.
25. Breech delivery (spontaneous, assisted, application of forceps to after coming head).
26. Delivery of multiple gestations.
27. Version of second twin.

QUALIFICATIONS FOR FEMALE PELVIC MEDICINE AND RECONSTRUCTIVE SURGERY (UROGYNECOLOGY):

Initial Privileges: To be eligible to apply for privileges in female pelvic medicine and reconstructive surgery (urogynecology), the applicant must meet the following criteria:

1. Meet criteria for obstetrics and gynecology as set forth above; **AND**
2. Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited fellowship in female pelvic medicine and reconstructive surgery (urogynecology); **AND/OR**
3. Current subspecialty certification in, or active participation in the examination process leading to certification in, female pelvic medicine and reconstructive surgery (urogynecology) by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications by the American Osteopathic Board of Obstetrics and Gynecology; **AND**
4. Required current experience: Provision of care, reflective of the scope of privileges requested, to an adequate number of female pelvic medicine and reconstructive surgery patients during the past twelve (12) months, or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past twelve (12) months.

Renewal of Privileges: Demonstrated current competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: Female Pelvic Medicine and Reconstructive Surgery (Urogynecology)

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Admit, evaluate, diagnose, treat, and provide consultation and pre-, intra-, and post-operative care necessary to correct or treat female patients of all ages presenting with injuries and disorders of the genitourinary system. Includes diagnosis and management of genito-urinary and rectovaginal fistulae, urethral diverticula, injuries to the genitourinary tract, congenital anomalies, infectious and non-infectious irritative conditions of the lower urinary tract and pelvic floor, and the management of genitourinary complications of spinal cord injuries. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Core privileges in this specialty include the procedures in the below procedure list and other procedures that are extensions of same techniques and skills.

Requested

Female Pelvic Medicine and Reconstructive Surgery (Urogynecology) Core Procedures List

This list is a sampling of procedures included in the female pelvic medicine and reconstructive surgery (urogynecology) core. This is not intended to be an all-encompassing list, but rather reflective of the categories/ types of procedures included in the core.

To the applicant: If you wish to exclude any procedures listed in female pelvic medicine and reconstructive surgery (urogynecology) core, strike through then initial and date those procedures you do not wish to request.

1. Perform history and physical examination.
2. Perform and interpret diagnostic tests for urinary incontinence and lower urinary tract dysfunction, fecal incontinence, pelvic organ prolapse.
3. Continence procedures for genuine stress incontinence: periurethral bulk injections (polytef, collagen, fat); long needle procedures (Pereyra, Raz, Stamey, Gittes, Muzsnai); vaginal urethropexy (bladder neck placation, vaginal paravaginal defect repair); retropubic urethropex (Marshall-Marchetti-Krantz, Burch, and paravaginal defect repair); sling procedure (fascia lata, rectus fascia, heterologous materials, vaginal wall).
4. Continence procedures for overflow incontinence due to anatomic obstruction following continence surgery: cutting of one or more suspending sutures; retropubic urethrolysis with or without repeat bladder neck suspension; revision, removal, or release of a suburethral sling.
5. Other surgical procedures for treating urinary incontinence: placement of an artificial urinary sphincter; continent vesicotomy or supravescical diversion; augmentation cystoplasty, supravescical diversion, sacral nerve stimulator implantation, and bladder denervation; urethral closure and suprapubic cystotomy.
6. Anal incontinence procedures: spincteroplasty; colostomy; bowel resection; muscle transposition; retrorectal repair; dynamic (stimulated muscle transposition).
7. Pelvic floor dysfunction and genital prolapse procedures: abdominal (closure or repair of enterocele, transabdominal sacrocolpopexy, paravaginal repair); vaginal (transvaginal hysterectomy with or without colporrhaphy; anterior and posterior colporrhaphy and perineorrhaphy, paravaginal repair, Manchester operation, enterocele repair, vaginal vault suspension, colpocleisis, retro-rectal levator plasty and post anal repair).

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QUALIFICATIONS FOR REPRODUCTIVE ENDOCRINOLOGY:

Initial Privileges: To be eligible to apply for privileges in reproductive endocrinology, the applicant must meet the following criteria:

1. Meet criteria for obstetrics and gynecology as set forth above; **AND**
2. Successful completion of an Accreditation Council for Graduate Medical Education (ACGME) or American Osteopathic Association (AOA) accredited fellowship in reproductive endocrinology; **AND/OR**
3. Current subspecialty certification in, or active participation in the examination process leading to certification in, reproductive endocrinology by the American Board of Obstetrics and Gynecology or a Certificate of Special Qualifications by the American Osteopathic Board of Obstetrics and Gynecology; **AND**
4. Required current experience: Provision of care, reflective of the scope of privileges requested, to an adequate number of reproductive endocrinology patients during the past twelve (12) months, or demonstrate successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past twelve (12) months.

Renewal of Privileges: Demonstrated current competence and an adequate volume of experience with acceptable results, reflective of the scope of privileges requested, for the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants for renewal of privileges.

CORE PRIVILEGES: Reproductive Endocrinology

Admit, evaluate, diagnose, treat, and provide consultation to adolescent and adult female patients with problems of infertility. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with Medical Staff policy regarding emergency and consultative call services. Core privileges in this specialty include the procedures in the below procedure list and other procedures that are extensions of same techniques and skills.

Requested

Reproductive Endocrinology Core Procedures List

This list is a sampling of procedures included in the reproductive endocrinology core. This is not intended to be an all-encompassing list, but rather reflective of the categories/ types of procedures included in the core.

To the applicant: If you wish to exclude any procedures listed in reproductive endocrinology core, strike through then initial and date those procedures you do not wish to request.

1. Perform history and physical examination.

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2. Fertility restoration including laparoscopy and laparotomy techniques used to reverse sterilization.
3. Diagnostic and therapeutic techniques, including hysterosalpingography, sonohysterography, tubal canalization, and endoscopy (laparoscopy and hysteroscopy).
4. Infertility surgery, including all techniques used for reconstruction of uterine anomalies, myomectomies, resection of uterine synechiae, cervical cerclage, tuboplasty, resection of pelvic adhesions, ovarian cystectomies, staging and treating endometriosis including pre and post-operative medical adjunctive therapy.
5. Surgical treatment of developmental disorders, including all techniques used for neovaginal construction (dilation and surgical methods), correction of imperforate hymen, removal of vaginal and uterine septae, correction of mullerian abnormalities.
6. Surgical treatment of ambiguous genitalia, including construction of unambiguous function female external genitalia and vagina (vaginoplasty, clitoral reduction, exteriorization of the vagina and feminizing genitoplasty); techniques for prophylactic gonadectomy.

SPECIAL NON-CORE PRIVILEGES

If desired, non-core privileges are requested individually in addition to requesting the core privileges. Each individual requesting non-core privileges must meet the specific threshold criteria governing the exercise of the privilege requested, including training, required, experience, and maintenance of clinical competency.

QUALIFICATIONS FOR USE OF LASER:

Criteria: To be eligible to apply for use of laser, the applicant must meet the following criteria:

1. Successful completion of an approved residency program in a specialty or subspecialty which included training in laser principles, or completion of an approved eight (8) to ten (10) hour minimum CME course which included training in laser principles; **AND**
2. Applicant should spend time after the basic training course in a clinical setting with an experienced operator who has been granted laser privileges and is acting as a preceptor; practitioner agrees to limit practice to only the specific laser types for which they have provided documentation of training and experience; the applicant must supply a certificate documenting they have attended a wavelength and specialty-specific laser course and also present documentation as to the content of that course; **AND**
3. Required current experience: Demonstrated current competence and evidence of the performance of an acceptable volume of the requested procedure in the past twelve (12) months or completion of training in the past twelve (12) months.

Reappointment Requirements: Demonstrated current competence and evidence of the performance of an adequate number of requested procedures with acceptable outcomes in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.

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NON-CORE PRIVILEGES: USE OF LASER

Requested

QUALIFICATIONS FOR USE OF A ROBOTIC-ASSISTED SYSTEM FOR SURGICAL PROCEDURES:

Criteria: To be eligible to apply for use of a robotic-assisted system for surgical procedures, the applicant must meet the following criteria:

1. Successful completion of an ACGME or AOA postgraduate training program that included training in minimal access (laparoscopic) procedures and therapeutic robotic devices and their use; **OR**
2. Completion of approved structured training program that included didactic education on the specific technology, animal laboratory training, and the specialty-specific approach to organ systems; **AND**
3. Must hold open/laparoscopic privileges to perform the procedures being requested for use with the robotic system; **AND**
4. Required current experience: Demonstrated current competence and evidence of the performance of an adequate volume of experience with acceptable results, or completion of training program within the last twelve (12) months; first three (3) cases must be proctored in the operating room by a physician holding robotic privileges at UNMH for applicants meeting criteria #1 (above) or applicants with verified current competency after #2; first ten (10) cases must be proctored in the operating room by a physician holding robotic privileges at UNMH for applicants meeting criteria #2 and without verified current competency; additional proctoring may be required as deemed appropriate by the proctor.

Reappointment Requirements: Demonstrated current competence and evidence of the performance of an adequate number of requested procedures with acceptable outcomes in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGES: USE OF A ROBOTIC-ASSISTED SYSTEM FOR GYNECOLOGIC SURGICAL PROCEDURES

1. Myomectomy
2. Hysterectomy
3. Radical hysterectomy
4. Salpingo-oophorectomy

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- 5. Microsurgical fallopian tube re-anastomosis
- 6. Pelvic and para-aortic lymph node dissection

Requested

QUALIFICATIONS FOR TRANSCERVICAL STERILIZATION:

Criteria: To be eligible to apply for transcervical sterilization, the applicant must meet the following criteria:

- 1. Successful completion of an ACGME or AOA accredited postgraduate training program in obstetrics and gynecology; **AND**
- 5. Successful completion of a training course in the transcervical sterilization system for which the applicant is seeking privileges; **AND**
- 6. Required current experience: Demonstrated current competence and evidence of the performance of an adequate volume of transcervical sterilization procedures within the last twelve (12) months or completion of training within the past twelve (12) months.

Reappointment Requirements: Demonstrated current competence and evidence of the performance of an adequate number of requested procedures with acceptable outcomes in the past twenty-four (24) months based on results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGES: TRANSCERVICAL STERILIZATION

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Acknowledgement of Practitioner

I have requested only those clinical privileges for which, by education, training, current experience, and demonstrated performance, I am qualified to perform and for which I wish to exercise at UNM Hospitals and clinics. I understand that: a) in exercising any clinical privileges granted I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation; b) any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Signature

Date Signed

Clinical Director/Division Chief Recommendation(s)

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and recommend action and presently requested above.

Name: _____ Signature _____ Date _____

Name: _____ Signature _____ Date _____

Department Chair Recommendation

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- Recommend all requested privileges with the standard professional practice plan
- Recommend privileges with the standard professional practice plan and the conditions/modifications noted below
- Do not recommend the clinical privileges noted below

Explanation: _____

Department Chair Signature

Date Signed

Criteria Approved by UNMH Board of Trustees on April 28, 2017