

UNMH Vascular Surgery Clinical Privileges

Name:

Effective Dates: _____ **To:** _____

All new applicants must meet the following requirements as approved by the UNMH Board of Trustees effective: 03/25/2016

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 on the last page of this form.

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.

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Qualifications for Vascular Surgery

Initial Applicant - *To be eligible to apply for privileges in vascular surgery, the initial applicant must meet the following criteria:*

Successful completion of an Accreditation Council for Graduate Medical Education (ACGME)– or American Osteopathic Association (AOA)–accredited residency in general surgery followed by successful completion of an ACGME- or AOA-accredited fellowship in vascular surgery, or successful completion of an ACGME / AOA accredited integrated vascular residency.

AND/OR

Current subspecialty certification or active participation in the examination process leading to subspecialty certification or special/added qualifications in vascular surgery by the American Board of Surgery or the American Osteopathic Board of Surgery.

Required previous experience: Applicants for initial appointment must be able to demonstrate the performance of a minimum of an adequate number of vascular surgery procedures, reflective of the scope of privileges requested, within the past 12 months, the majority being of a reconstructive nature excluding cardiac surgery; or demonstrate successful completion of an ACGME- or AOA-accredited residency, clinical fellowship, or research in a clinical setting within the past 12 months

Reappointment (Renewal of Privileges) Requirements - *To be eligible to renew privileges in vascular surgery, the reapplicant must meet the following criteria:*

Current demonstrated competence and an adequate volume of experience in vascular surgery procedures with acceptable outcomes, reflective of the scope of privileges requested, for the past 24 months based on the results of ongoing professional practice evaluation and outcomes. Evidence of current ability to perform privileges requested is required of all applicants' renewal of privileges.

CORE PRIVILEGES: *Vascular Surgery*

Admit, evaluate, diagnose, provide consultation, and treat patients of all ages with diseases/disorders of the arterial, venous, and lymphatic circulatory systems, excluding the intracranial vessels or the heart. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

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Vascular Surgery Core Procedures List

This list is a sampling of procedures included in the 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, please strike through those procedures which you do not wish to request, then initial and date.

1. Amputations, upper extremity, lower extremity
2. Aneurysms repair, abdominal aorta, and peripheral vessels emergent and elective both open and endovascular
3. Angiography, venography, both diagnostic and intra-operative
4. Angioplasty / stents, of all peripheral vessels (excluding coronaries)
5. Bypass grafting all vessels excluding coronary and intracranial vessels
6. Carotid endarterectomy
7. Central venous access catheters and ports
8. Cervical, thoracic or lumbar Sympathectomy
9. Diagnostic biopsy or other diagnostic procedures on blood vessels
10. Embolectomy or thrombectomy for all vessels excluding coronary and intracranial vessels
11. Endarterectomy for all vessels excluding coronary
12. Extracranial carotid and vertebral artery surgery
13. Hemodialysis access procedures
14. Intraoperative angioplasty / stenting
15. Other major open peripheral vascular arterial and venous reconstructions
16. Placement and/or removal of inferior vena cava (IVC) filter
17. Reconstruction, resection, repair of major vessels with anastomosis or replacement (excluding cardiopulmonary, intracranial)
18. Sclerotherapy
19. Spine exposure
20. Performance of intra-operative duplex scanning of all arteries/veins for diagnosis/post-operative assessment
21. Temporal artery biopsy
22. Thoracic outlet decompression procedures including rib resection
23. Vein ligation and stripping, vein ablation, microphlebectomies
24. Venous reconstruction
25. Use of ultrasound for percutaneous access of veins/arteries
26. Performance of intra-operative duplex scanning of all arteries/veins for diagnosis/post-operative assessment

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Special Non-Core Privileges (See Specific Criteria)

If desired, non-core privileges are requested individually in addition to requesting the core. 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 competence.

Qualifications for Endovascular repair of thoracic aortic aneurysms (TAA) and abdominal aortic aneurysms (AAA)

Initial privileges: Successful completion of an ACGME or AOA – accredited postgraduate training program in vascular surgery and successful completion of a Society of Thoracic Surgeons (STS) – American Association for Thoracic Surgery - , or Society for Vascular Surgery – sponsored endovascular training course. Applicant agrees to limit procedure to use of endovascular graft device for which she/he has demonstrated training and experience. Physicians performing elective aneurysms agree to participate in emergency room call for patients who present with symptomatic aneurysms.

OR

Demonstrated current competence and longitudinal experience patients with aortic diseases (an adequate number of patients in the past 2 years), documentation of experience in adequate volume of endovascular repairs of TAA and/or AAA procedures with acceptable results, 10 in the last 12 months. Physicians performing elective aneurysms agree to participate in emergency room call for patients who present with symptomatic aneurysms.

Renewal of privileges: Demonstrated current competence and evidence of the performance of an adequate volume of endovascular repair of TAA and/or AAA procedures with acceptable results, reflective of the scope of privileges requested in the past 24 months based on results of ongoing professional practice evaluation and outcomes. Physicians performing elective aneurysms agree to participate in emergency room call for patients who present with symptomatic aneurysms.

NON-CORE PRIVILEGES: Endovascular Repair of Thoracic (TAA) and Abdominal Aortic Aneurysms (AAA)

Requested

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Qualifications for Transcranial Doppler Ultrasonography (TCD)

Criteria: Successful completion of one of the following training tracks:

- 1) an ACGME OR AOA accredited residency or fellowship program which included training in TCD performance/interpretation and experience in interpreting at least 100 studies while under supervision or
- 2) an accredited post graduate Category I CME program of a minimum of 40 hours within the past 3 years that included training in TCD performance /interpretation and experience in interpreting at least 100 cases while under the supervision of a physician , or
- 3) 3 years of practice experience which included the performance/interpretation of 300 TCD studies

Required Current Experience: Demonstrated current competence and evidence of the performance and/or interpretation of an adequate volume of TCD studies with acceptable results in the past 12 months or completion of training in the past 12 months.

Renewal of Privilege: Demonstrated current competence and evidence of the performance and/or interpretation of an adequate volume of TCD studies with acceptable results in the past 24 months based on results of ongoing professional practice evaluation and outcomes. In addition, a minimum of 15 hours of CME in vascular laboratory testing is required every three years, of which at least 10 hours are Category I.

NON-CORE PRIVILEGE: *Transcranial Doppler Ultrasonography (TCD)*

Requested

Qualifications for Percutaneous Thrombolysis/Thrombectomy

Criteria: Successful completion of an ACGME – or AOA – accredited vascular surgery residency or vascular surgery fellowship that included training in percutaneous thrombolysis/thrombectomy or completion of a hands-on CME training, and evidence of the performance of an adequate number of cases.

Required previous experience: Demonstrated current competence and evidence of the performance of an adequate number of percutaneous thrombolysis/thrombectomy procedures in the past 12 months

Reappointment requirements: Demonstrated current competence and evidence of the performance of an adequate number of percutaneous thrombolysis/thrombectomy procedures in the past 24 months based on the results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGE: *Percutaneous Thrombolysis/Thrombectomy*

Requested

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Qualifications for Endovenous Laser Ablation Via All Energy Sources

Criteria: Successful completion of an ACGME – OR AOA – accredited training program that included supervised training in the diagnosis and treatment of varicose veins and training in interpreting ultrasound examinations of the legs. Applicants must demonstrate completion of training in endovenous laser ablation, which included the performance/interpretation of an adequate number of endovenous laser ablation procedures. Applicant must demonstrate training and experience with specific energy source to be used.

Required previous experience: Demonstrated current competence and evidence of the performance and/or interpretation of an adequate number of endovenous laser ablation procedures in the past 12 months.

Reappointment requirements: Demonstrated current competence and evidence of the performance and/or interpretation of an adequate number of endovenous laser ablation procedures in the past 24 months based on the results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGE: *Endovenous Laser Ablation Via All Energy Sources*

Requested

Qualifications for the Interpretation of Vascular Laboratory Studies

Criteria: Applicant must demonstrate an appropriate level of training and experience by meeting one or more of the following:

Successful completion of an ACGME – or AOA – accredited vascular surgery residency or vascular surgery fellowship that included appropriate didactic and clinical vascular laboratory experience as an integral part of the program and included the minimum of an adequate number of carotid duplex ultrasound procedures while under supervision,

Reappointment requirements: Obtain RPVI or RVT certification

NON-CORE PRIVILEGE: *Interpretation of Vascular Laboratory Studies*

Requested

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Qualifications for Carotid Stenting

Criteria: Successful completion of an ACGME – or AOA – accredited residency or fellowship in vascular surgery or in neurovascular fellowship that included training in diagnostic angiography, carotid angioplasty, and stent placement procedures. If not taught in an accredited residency/fellowship program, applicants must have completed an approved hands-on training program in diagnostic angiography and carotid angioplasty under supervision of a qualified physician instructor. Applicants must also have completed a training course in the embolic protection system or device that is used in the carotid artery stenting procedure. In addition, applicants must be able to demonstrate that they have performed an acceptable volume of diagnostic cerebral angiograms if they have no prior catheter experience or an adequate number of diagnostic cerebral angiograms if they have experience sufficient to meet the AHA requirements for peripheral vascular interventions.

Required Current Experience: Demonstrated current competence and evidence of an adequate volume of carotid artery stenting procedures with acceptable results in the past 12 months with at least half as the primary operator or completion of training in the past 12 months.

Renewal of Privilege: Demonstrated current competence and evidence of an adequate volume of carotid artery stenting procedures with acceptable results in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGE: *Carotid Stenting*

Requested

Qualifications for Peripheral Vascular Interventions to Include Diagnostic and Therapeutic Angiography, Angioplasty and Stenting (Arterial, Venous, Grafts, and Fistulas) Excludes Carotid Stenting and Intracranial Interventions

Criteria: Successful completion of an ACGME-accredited fellowship in vascular surgery that included 12 months training in peripheral catheter-based interventions OR equivalent training as follows:

- Diagnostic peripheral angiograms—100 cases (50 as primary operator) reflective of all vascular areas, or 30 cases (8 as primary operator) in the subset vascular area requested
- Peripheral interventions—50 cases (25 as primary operator) reflective of all vascular areas, or 15 peripheral interventions per vascular area requested

AND

No fewer than 20 diagnostic/10 interventional cases in each area. Must include aortoiliac arteries as

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initial area of competency.

Required previous experience: Demonstrated current competence and evidence of the performance of an adequate number of peripheral vascular intervention cases, reflective of the scope of the privileges requested, in the past 12 months or completion of training in the past 12 months. Physicians performing elective vascular interventions agree to participate in emergency call for patients who present with acute limb ischemia.

Reappointment requirements: Demonstrated current competence and evidence of the performance of an adequate number of peripheral vascular intervention cases in the past 24 months based on the results of ongoing professional practice evaluation and outcomes. Physicians performing elective vascular interventions agree to participate in emergency call for patients who present with acute limb ischemia.

NON-CORE PRIVILEGES: *Peripheral vascular interventions*

Aortoiliac and brachiocephalic arteries

Requested

NON-CORE PRIVILEGES: *Peripheral vascular interventions*

Abdominal visceral and renal arteries

Requested

NON-CORE PRIVILEGES: *Peripheral vascular interventions*

Infrainguinal arteries

Requested

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Qualifications for Use of Laser

Criteria: Successful completion of an approved residency in a specialty or subspecialty which included training in laser principles or completion of an approved 8 - 10 hour minimum CME course which includes training in laser principles. In addition, an applicant for privileges should spend time after the basic training course in a clinical setting with an experienced operator who has been granted laser privileges 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 that she/he attended a wavelength and specialty-specific laser course and also present documentation as to the content of that course.

Required Current Experience: Demonstrated current competence and evidence of the performance of an adequate volume of experience with acceptable results, in the past 12 months or completion of training in the past 12 months.

Renewal of Privilege: Demonstrated current competence and evidence of the performance of an adequate volume of experience with acceptable results in the past 24 months based on results of ongoing professional practice evaluation and outcomes.

NON-CORE PRIVILEGE: *Use of Laser*

Requested

Qualifications for REBOA (Resuscitative endovascular balloon occlusion of the aorta)

Criteria: Privileged in vascular surgery core

OR

Privileged in general surgery core with relevant trauma surgical practice

AND

The following items completed within the preceding 12-month period:

1) Performance of 5 bedside sonographic imaging studies demonstrating vascular arterial anatomy: Common Femoral-Superficial femoral artery-Profunda Femoris artery bifurcation.

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- 2) Performance of 5 successful Common Femoral Artery groin arterial access procedures involving use of either micro-puncture kits or 4-Fr sheath placement (with post procedure CT or angiographic confirmation of successful access puncture and location).

- 3) Participation in 3 endovascular procedures involving initial vascular access with sheath placement (either in room F or interventional radiology embolization). Participation involves obtained initial vascular arterial access with a micro-puncture kit, advancement of initial guidewire, placement of an initial sheath, and advancement of a diagnostic catheter for initial aortography.

- 4) Attendance of a 1:1 teaching session on emergent endovascular access principles and REBOA deployment technique by a member of vascular surgery faculty.

- 5) Performance of 2 endovascular balloon inflations during elective vascular procedures (at least one of which is aortic balloon inflation). An example of this would be participating in the aortic balloon inflation portion of an EVAR procedure.

- 6) Successful completion of a post-training REBOA mini exam with 80% of questions answered correctly. This exam will be created by vascular surgery faculty and be administered after completion of steps 1-5.

- 7) Agreement to participate in quarterly REBOA Trauma Divisional reviews for performance improvement.

- 8) Agreement to participate in joint vascular-trauma/critical care review of all deployment related complications or adverse outcomes.

Required previous experience: Demonstrated current competence according to the criteria listed above.

Reappointment requirements: Demonstrated current competence, participation in Quarterly REBOA Trauma Division reviews and joint vascular surgery/trauma surgery/critical care review of all deployment related complications or adverse outcomes and evidence of the performance of an adequate number of specific procedure(s) requested, with acceptable outcomes in the past 24 months based on the results of ongoing professional practice evaluation and outcomes.

Certifying Physician Approval for initial appointment or re-appointment (must be privileged in REBOA):

The provider requesting REBOA privileges meets the criteria defined above:

Signature: _____ Date _____

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NON-CORE PRIVILEGES: *REBOA (Resuscitative endovascular balloon occlusion of the aorta)*

Requested

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Acknowledgment of practitioner

I have requested only those 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, and 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.

Signed _____ Date _____

Department recommendation(s)

I have reviewed the requested clinical privileges with the applicant and the 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 following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege Condition/Modification/Explanation

Notes:

Division Chief Signature _____ Date _____

Print Name _____ Title _____

Department Chair Signature _____ Date _____

Print Name _____

Criteria approved by UNMH Board of Trustees on 03/25/2016