

**Delineation of Privileges Request
Criteria Summary Sheet**

Facility: UPMC Altoona

Specialty: Anesthesiology

KNOWLEDGE	Successful Completion of an ACGME/AOA, accredited program.
TRAINING	The successful completion of an approved (ACGME/AOA) post graduate Anesthesiology residency program.
CERTIFICATION	Board Certification/Board Eligibility in accordance with the UPMC Altoona Medical Staff Bylaws, Rules & Regulations
OTHER	<p><u>Certifications required for all Anesthesia providers, except Chronic Pain Management:</u> ACLS, PALS, Neonatal Resuscitation</p> <p><u>Intraoperative TEE:</u></p> <ol style="list-style-type: none"> 1. Documented evidence of TEE training during recent Residency to include competency and performance of at least 25 cases independently; or 2. Completion of a 30-hour video and audio tape course sponsored by the American College of Echocardiography and the Society of Cardiovascular Anesthesiologists entitled, "The Comprehensive Review of Intraoperative Echocardiography." This 30-hour course is to be completed twice. In addition, documentation of competency to include performance of 25 independent cases under the supervision of a physician with intraoperative TEE privileges. 3. Final approval by the Department of Anesthesiology Chair. <p><u>LASE Endoscopic Discectomy:</u></p> <ol style="list-style-type: none"> 1. Credentialed to care for disc disease, or the physician's specialty field (Anesthesiology, Orthopedics, Neurosurgery) would have provided training to include care of patients with disc disease. 2. If not credentialed to care for patients with disc disease as noted in #1 above, submit evidence of the performance and supporting documentation/statement of a minimum of 10 discograms. Performance of discograms would provide the needed experience in accessing discs to perform the LASE endoscopic discectomy procedure. 3. Certificate of attendance at a manufacturer's provided course. <p><u>Radiofrequency Lesioning:</u></p> <ol style="list-style-type: none"> 1. Board Certification in Pain Management. 2. Documented evidence of training and competence by one of the following: <ol style="list-style-type: none"> a. Mentor; b. Approved workshop; c. Residency training.

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4. Performance of 15 independent cases under supervision.
5. Approval by Director of Pain Management.
6. Approval by Department of Anesthesiology Chair.

Vertebroplasty:

1. Credentialed to care for vertebral fractures or has documented experience in the Pain Management care of vertebral fractures.
2. Documented experience with the use of bone cement; otherwise privileges will be contingent upon being supervised when using bone cement, by a credentialed physician, for a minimum of five (5) procedures.
3. Documentation of completion of an accredited course on the use of the delivery system.

Mild Procedure:

1. Completion of an American College of Graduate Medical Education (ACGME) Anesthesiology residency.
2. Completion of a fellowship in pain management or have substantial practice experience in the field of pain management (*at least 50% of your clinical time in the past three (3) years must be involved in the practice of Pain Management; evidence of patient logs must be submitted.*)
3. Board eligible or Board certified in Pain Management by the American Board of Medical Specialties (ABMS).
4. Must provide evidence of proficient performance of 400 fluoroscopic spinal injection procedures (epidural, peripheral, spinal, sympathetic and neurolytic nerve blocks) within the previous two years.
5. Must show evidence that at least 25 of the 400 cases were neuromodulation – spinal cord stimulator trials or implants.
6. Must complete Vertos Medical's *mild* didactic and cadaveric hands-on training lab and evidence of a minimum of 1 proctored case.
7. A focused review of the first 10 cases performed at Altoona Regional Health System will be reviewed by the Chair, or his designee, of the Department of Anesthesiology, and completion of same documented.

Maintenance Criteria for Mild Procedure:

1. Evidence of completion of ten (10) *Mild* procedures per year.

Implantation of Drug Pumps and Spinal Cord Stimulators for Chronic Pain (via

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	<p><u>an Epidural Insertion):</u></p> <ol style="list-style-type: none"> 1. Documented evidence of training to perform these procedures in an Anesthesia Residency with demonstration of adequate competency in performing the procedure as to the technique for insertion of these devices, the pharmacology of the drugs administered during these procedures, and the management of the patient post-procedure, to include 25 cases, or If training was received after Residency, documentation of completion of an approved training program to include the above-noted requirements. 2. Demonstrate competency in performing the procedure, to include at least 25 cases. If the applicant has never performed these procedures before other than in training context, the applicant must receive direct supervision of a physician from the Department of Anesthesiology who already has these privileges. If the applicant is a current staff member, review for complications is to be made of his/her records from the hospital in which they were performed, documenting at least 25 cases. <p><u>MODERATE SEDATION:</u></p> <ol style="list-style-type: none"> A. Only a qualified Physician who meets the following requirements set by the MEC may administer Moderate Sedation in approved locations. <ol style="list-style-type: none"> 1. 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. 2. 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.
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