

**UPMC**  
**Delineation of Privileges Request**  
**Criteria Summary Sheet**

**Facility:** UPMC Shadyside

**Specialty:** THORACIC / CARDIO-THORACIC SURGERY

<b>KNOWLEDGE</b>	Successful Completion of an ACGME/AOA, accredited program
<b>TRAINING</b>	The successful completion of an approved postgraduate residency program in thoracic surgery or general surgery
<b>CERTIFICATION</b>	Satisfactory completion of Board eligibility requirements and certification by the American Board of Thoracic Surgery must be accomplished within five years of the applicant's initial appointment.
<b>OTHER</b>	<p><b>For Peripheral Vascular Interventional Privileges: Regional Credentialing:</b></p> <p>The peripheral vasculature consists of three regions (1) Aortoiliac and Brachiocephalic vessels (2) renal and abdominal visceral vessels (3) infra-inguinal vessels, as defined in Section D of the attached criteria.</p> <p>To be privileged, the physician must:</p> <ul style="list-style-type: none"> <li>• Possess appropriate cognitive skills of the region (obtained via residency training or CME courses; documentation must be provided via letter from residency program or CME certificate/letter of attestation)</li> <li>• Perform the appropriate number of procedures as indicated in the criteria column below</li> <li>• Once appropriate number of procedures has been met, present a letter of endorsement from the proctor or present a letter from the training program director attesting that number of procedures has been attained through training.</li> </ul> <p><b>Peripheral Diagnostic Angiography, Regional Credentialing:</b></p> <p>100 Peripheral Diagnostic Arteriograms with 50 as primary operator (Procedures include aorto, iliac and lower extremity.)</p> <p><b>Peripheral Interventions (coiling, balloon dilations or stenting of vessels):</b></p> <p>50 Peripheral Interventions with 25 as the primary operator</p>

**Aortoiliac & Brachiocephalic Vessels Interventions:**

20 diagnostic arteriograms with 10 interventional as primary operator

**Renal & Abdominal Visceral Vessels:**

20 diagnostic arteriograms with 10 interventional as primary operator

**Infra-inguinal Vessels Interventions**

20 diagnostic arteriograms with 10 interventional as primary operator

**Endovascular Stent Grafts (Thoracic, Abdominal Aorta)**

10 as primary operator (a vascular surgeon must be present for non-vascular specialties) 10 cases as primary operator (if privileged for abdominal aorta, then 5 cases as primary operator) (a vascular surgeon must be present for non-vascular specialties)

**Carotid Arteriography:**

May only be performed by physicians that have spent at least three (3) months in a dedicated neuro-interventional training program and approved by their respective division chief.

**Carotid Interventions:**

If criteria met for Peripheral Angiography, then 50 selective carotid arteriograms with 25 as primary operator

If physician does not meet peripheral angiography criteria listed above, 100 Diagnostic angiograms with 50 as primary operator

25 Interventions with 15 as primary operator

15 diagnostic carotid studies are required prior to being the primary operator on an interventional carotid procedure.

**FLUOROSCOPY****Initial Privileges**

1. Review the educational materials contained in a didactic manual, "Minimizing Risks from Fluoroscopic X-Rays" by Louis Wagner & Benjamin Archer.
2. Successfully complete a written test (passing grade of 80%). Up to 2.5 Category 1 CME credits will be awarded for a passing score.
3. Complete and submit a CME registration and evaluation form.

**For Re-certification** (re-certification for fluoroscopy certification is required as part of the reappointment process):

1. Access the Fluoroscopy Rapid Deployment CME module at the following website: <http://cme.health.pitt.edu>

**LASER**

**1.** For each laser type and operative category, produce a letter from your residency chair or director stating the laser safety training and use of supervision during your residency

OR

**2.** For each specific laser type and operative category provide documentation of an instructional course taken to learn about this specific laser and its operative applications. Please note that the certificate must delineate the specific laser(s) involved in the course and their operative application(s).

OR

**3.** Complete the in-house Laser Education and Proctoring Program by: Taking the University of Iowa Health Care laser safety-training test.

**a.** You must read the safety course items and then click on Basic Laser Safety Exam. You need to then type in all of your personal information and take the test. Before you click on “Submit the Test” please print the test. Then hit Submit and the test will be scored for you. You will need to print this as well. You must score 100% to pass the test.

**b.** You will need to submit these two (2) printouts to the appropriate Medical Staff Office. The fax number for the Presbyterian Campus is 412-647-6607 while the fax number for the Shadyside Campus is 412-623-3005.

**c.** Completing laser proctoring at either the Presbyterian Campus or the Shadyside Campus of UPMC Presbyterian Shadyside with a colleague in your department who is recommended by your department chair as qualified. The proctor must have the laser privileges you are requesting and deem you qualified for each laser type and operative category you are requesting. The individual must proctor two (2) individual cases for each laser type and operative application requested. The proctor’s documentation must accompany the addendum and be returned to the appropriate Medical Staff Office for processing as part of your application to the Medical Staff. The Laser Safety Officer can provide further clarification regarding these policies and give you assistance arranging for a proctor.

	<b>NOTE:</b> The request for laser privileges will not be considered unless the necessary documentation is attached
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