

**Delineation of Privileges Request
Criteria Summary Sheet**

Facility: UPMC Mercy South Side Surgery Center

Specialty: FAMILY MEDICINE

KNOWLEDGE	Successful Completion of an ACGME/AOA, accredited program
TRAINING	The successful completion of an approved (ACGME/AOA) 3 year residency training program in Family Medicine
CERTIFICATION	Current certification or active participation in the examination process leading to certification in family medicine by the American Board of Family Medicine or the American Osteopathic Board of Family Physicians
OTHER	<ul style="list-style-type: none"> • Applicant must be able to demonstrate provision of inpatient services to at least 24 patients in the past two years • Documentation of competency for all privileges requested to be consistent with medical staff credentialing policies. Previous experience that compensates for lack of #2, after defined period of proctoring • New applicants must demonstrate a minimum of 40 deliveries during their residency training, and must continue to demonstrate competency with a minimum of 10 deliveries every 2 years. • Lumbar Puncture- Demonstration of 5 procedures over the last 2 years • Arterial Line Placement- Demonstration of 5 procedures over the last 2 years • Central Venous Catheter Placement- Demonstration of 10 procedures over the last 2 years with use of ultrasound or equivalent device. • Paracentesis- Demonstration of 10 procedures over the last 2 years • Thoracentesis- Demonstration of 10 procedures over the last 2 years <p><u>For the privileges listed below, the following criteria must be met:</u></p> <ul style="list-style-type: none"> • Fetal scalp PH • Fourth degree laceration repair • Pictocin induction of labor • Pitocin augmentation of labor • Prostaglandin cervical ripening • Amnioinfusion

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	<ul style="list-style-type: none"> • Use of the unit ultrasound machine for limited exams • Management of intrauterine fetal demise • Manual removal of placenta • VBAC <ol style="list-style-type: none"> 1. Proper documentation of level of experience, meeting specific number of procedures attained, followed by proctoring and approval of one procedure, if necessary, by member of Joint Training Committee or designee. 2. If proper documentation of number of procedures is not present, but level of experience clearly supports requested privileges, proctoring and approval of a defined number of procedures, by member of Joint Training Committee. 3. If one and two are not present, then achievement of a specific number of procedures proctored, followed by approval of the Joint Training Committee. 4. Letter of recommendation from the Joint Training Committee. <p><u>FOURTH DEGREE LACERATION REPAIR</u></p> <ol style="list-style-type: none"> 1. 5 prior procedures and 1 observed until approved, or 2. Extensive past experience and 1 observed until approved, or 3. 5 supervised procedures with approval, unless officially deemed qualified with fewer observations <p><u>PITOCIN INDUCTION/AUGMENTATION</u></p> <ol style="list-style-type: none"> 1. 10 prior procedures and 1 supervised until approved, or 2. Extensive past experience and 1 supervised until approved, or 3. 10 supervised procedures with approval, unless deemed qualified with less supervision <p><u>PROSTAGLANDIN CERVICAL RIPENING</u></p> <ol style="list-style-type: none"> 1. 5 prior procedures and 1 supervised until approved, or 2. Extensive past experience and 1 supervised until approved, or 3. 5 supervised procedures with approval, unless deemed qualified with less supervision. <p><u>AMNIOINFUSION</u></p> <ol style="list-style-type: none"> 1. 5 prior procedures and 1 supervised until approval, or 2. Extensive past experience and 1 supervised until approved, or 3. 5 supervised procedures with approval, unless deemed qualified with less supervision.
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LIMITED DIAGNOSTIC ULTRASOUND

1. Satisfactory completion of an obstetrical ultrasound course (specifically covering the limited exam for family physicians), including at least 5 exams on pregnant women, or
2. 10 prior exams and 1 observed until approved, or
3. Extensive past experience and 1 observed until approved, or
4. 10 observed exams with approval, unless deemed officially qualified with less supervision.
5. Letter of approval from Department of Obstetrics and Gynecology.

These guidelines serve as a useful basis, but are not an absolute requirement, to determine whether request for additional privileges is appropriate given level of experience. It is the intention to allow the Joint Training Committee the necessary latitude to decide if fewer or greater observed procedures are required before extending privileges will be granted by recommendation to the Department of Family Medicine.

It is the right of the physician seeking privileges to make a formal written complaint to the Joint Training Committee, if he or she feels an inability to coordinate the mandated observations and it is obstructing their ability to achieve their stated goal. It is the responsibility of the Committee to facilitate the necessary observations.

For the privileges listed below, the following criteria must be met:

- High Risk OB consultation
- Amniocentesis
- External cephalic version
- Cerclage
- Vaginal Delivery, breech
- Outlet and low forceps (as defined by ALSO course)
- Post partum curettage
- Cesarean section
- Cesarean hysterectomy
- Trauma Consultation
- Vacuum Extraction

1. Requires advanced formal certification or fellowship beyond general residency training and meet all criteria within the Department of Obstetrics and Gynecology for the individual listed procedures.

FORCEPS

1. 10 prior procedures and 1 observed until approved, or
2. Extensive past experience and 1 observed until approved, or
3. 10 observed with approval, unless officially deemed qualified with fewer observations by the Joint Training Committee, and must continue to demonstrate competency with a minimum of 2 procedures every two years.

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	<p><u>VACUUM EXTRACTION</u></p> <ol style="list-style-type: none">1. 5 prior procedures and 1 observed until approved, or2. Extensive past experience and 1 observed until approved, or3. 5 observed procedures with approval, unless officially deemed qualified with fewer observations, and must continue to demonstrate competency with a minimum of 2 procedures every two years. <p>These guidelines serve as a useful basis, but are not an absolute requirement, to determine whether request for additional privileges is appropriate given level of experience. It is the intention to allow the Joint Training Committee the necessary latitude to decide if fewer or greater observed procedures are required before extending privileges will be granted by recommendation to the Department of Family Medicine.</p> <p>It is the right of the physician seeking privileges to make a formal written complaint to the Joint Training Committee, if he or she feels an inability to coordinate the mandated observations and it is obstructing their ability to achieve their stated goal. It is the responsibility of the Committee to facilitate the necessary observations.</p>
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