### UPMC Delineation of Privileges Request Criteria Summary Sheet

## Facility: UPMC Presbyterian

# Specialty: THORACIC / CARDIO-THORACIC SURGERY

KNOWLEDGE	Successful Completion of an ACGME/AOA, accredited program
TRAINING	The successful completion of an approved postgraduate residency program in thoracic surgery or general surgery
CERTIFICATION	N/A
OTHER	<ul> <li>Practitioners must hold a valid fellowship certificate issued by the American Board of Thoracic Surgery (ABTS or equivalent) at the time of their application/reapplication (only valid for 10 years from issue date unless renewed by the Board).</li> <li>Prerequisites listed in the Medical Staff Bylaws relating to applicants (eg; verified education, training, PA medical license, DEA, malpractice, professional references, work history, health status) must be satisfied.</li> <li>Confirmation of Academic appointment at the University of Pittsburgh (or evidence that such a submission has been made) is to be authenticated.</li> <li>CME stipulations as established by the ABTS (ie; 35 Cat-1 credits/1-yr or 70/2-yr in educational activities relevant to the practice of thoracic surgery) must have been secured if consideration for appointment/reappointment is desired</li> <li>Surgical procedure volumes for initial consideration regarding established procedures must satisfy the following ABTS criteria:</li> <li>Privilege Procedure number for 12 months preceding application         <ul> <li>Lungs, pleura, chest</li> <li>Congenital heart and great vessels</li> <li>25</li> <li>Acquired heart - valvular</li> </ul> </li> </ul>

<ul> <li>Pacemaker implantation/closed EP 10</li> </ul>
<ul> <li>Endoscopy</li> <li>50</li> </ul>
• VATS 10
<ul> <li>Transplantation</li> <li>10</li> </ul>
Heart
Lung
Heart-Lung
Initial requests associated with new or innovative technologies and/or
procedures shall be addressed as follows:
• To be considered for such privileges, surgeons must be members in
good standing of the Department/Division from which the
privileges are to be recommended.
• An approved <b>educational program</b> (certified by the ABTS or like
entity) relating to the procedure in question, including didactic and
practical elements, must be completed as part of a residency or
post-residency course of instruction. Note, depending on the
technology, additional surgical simulator training, experience with
animal models, and hands-on observation/participation in humans
undergoing the new procedure may be required (see Attachment
A).
The surgeon must be qualified, experienced, and knowledgeable
The surgeon must be quantied, experienced, and movieugeusie
in the management of conditions for which the new technology is
to be applied (eg; laparoscopic GI privileges only for those already
granted regular GI privileges). The qualifications of the surgeon
desiring to apply the new technology must be clinically assessed
by a surgeon who is qualified and experienced in that technology.
(NB: in the event the technique, procedure, and/or technology has
not previously been utilized in humans - ie; there is no qualified
proctor available - the Department Chair/Division Chief shall make
such determinations and/or assessments as are appropriate or
required.)
• A written <b>recommendation</b> to the Department Chair or Division
Chief based on direct observation and/or supervision is to be
completed by the experienced surgeon in all such cases and placed
in the applicant's file (see prior exception).
approvant a me (are prior enception).
• Ongoing <b>maintenance of skills</b> is to be evidenced through regular
peer review and/or outcomes assessments relating to the new
procedure in association with the Department or Division's regular
privileged renewal process.
privilegeu renewar process.
1

For <b>reappointment</b> , the below referenced volume standards shall apply.
<ul> <li>New/innovative technologies/procedures</li> <li>Cox-Maze for mitral valve surgery</li> <li>Cox-Maze (for atrial fibrillation)</li> <li>Cox-Maze (for atrial fibrillation w/RF) RF (radio-frequency)</li> <li>Cox-Maze (for atrial fibrillation wo/RF) RF (radio-frequency)</li> <li>Cox-Maze (through mini-thoracotomy)</li> <li>Robotic assisted (ZEUS for CABG)</li> </ul>
Heart transplantation, special eligibility requirements include the following:
<ul> <li>Didactic course, 30 hours CME category-1</li> <li>Animal lab performance, 20 cases</li> <li>Participation in human cases, 10 cases</li> <li>Preceptored human cases, 5 cases</li> <li>Procedure volume required for reappointment consideration, 5-10 cases</li> </ul>
Lung transplantation, special eligibility requirements include the following:
<ul> <li>Didactic course, 30 hours CME category-1</li> <li>Animal lab performance, 20 cases</li> <li>Participation in human cases, 10 cases</li> <li>Preceptored human cases, 5 cases</li> <li>Procedure volume required for reappointment consideration, 5-10 cases</li> </ul>
Heart-Lung transplantation, special eligibility requirements include the following:
<ul> <li>Didactic course, 30 hours CME category-1</li> <li>Animal lab performance, 20 cases</li> <li>Participation in human cases, 10 cases</li> <li>Preceptored human cases, 2-5 cases</li> <li>Procedure volume required for reappointment consideration, 2-5 cases</li> </ul>
<b>Cox-Maze for mitral valve surgery, special eligibility requirements</b> include the following:
<ul> <li>Didactic course, 15 hours CME category-1</li> </ul>

<ul> <li>Animal lab performance, as required</li> <li>Participation in human cases, 2 cases</li> <li>Preceptored human cases, 2 cases</li> <li>Procedure volume required for reappointment consideration, 2- 5 cases</li> <li>Cox-Maze for atrial fibrillation without radiofrequency ablation,</li> </ul>
<ul> <li>special eligibility requirements include the following:</li> <li>Didactic course, 15 hours CME category-1</li> <li>Animal lab performance, as required</li> <li>Participation in human cases, 2 cases</li> <li>Preceptored human cases, 2 cases</li> <li>Procedure volume required for reappointment consideration, 2- 5 cases</li> </ul>
Cox-Maze for atrial fibrillation with radiofrequency ablation, special eligibility requirements include the following:
<ul> <li>Completion of criteria associated with 5 above as well as the following relating to radiofrequency ablation (RF)</li> <li>Didactic course-RF, 15 hours CME category-1</li> <li>Animal lab performance-RF, as required</li> <li>Participation in human cases-RF, 2 cases</li> <li>Preceptored human cases-RF, 2 cases</li> <li>Procedure volume required for RF reappointment consideration, 2-5 cases</li> </ul>
Cox-Maze for through mini-thoracotomy, special eligibility requirements include the following:
<ul> <li>Didactic course, 15 hours CME category-1</li> <li>Animal lab performance, as required</li> <li>Participation in human cases, 2 cases</li> <li>Preceptored human cases, 2 cases</li> <li>Procedure volume required for reappointment consideration, 2- 5 cases</li> </ul>
Robotic assisted CABG, special eligibility requirements include the following:
<ul> <li>Didactic course, 50 hours CME category-1</li> <li>Animal lab performance, as required</li> <li>Participation in human cases, 2 cases</li> <li>Preceptored human cases, 2 cases (unless initial case and no proctor possible)</li> </ul>

 Procedure volume required for reappointment consideration, 5-10 cases

#### **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: <u>http://cme.health.pitt.edu</u>

#### **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.
<b>c.</b> 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 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