

# PRIVILEGE APPLICATION FORM - [Mercy Medical Center]

zz.Cardiovascular\_Medicine,

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## Current Privilege Status Key

Practitioner's Current Privilege status is signified in ( ) preceding each privilege.

G = Granted

W = Withdrawn

T = Temporary

P = With Proctor

A = Assist with

C = With Consult

E = Emergency Only

RQ = Requested

L = Leave of Absence

R = Resigned

S = Suspended

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## Staff Category - Associate Staff

Requested      Granted

\_\_\_\_\_ ( ) ASSOCIATE MEDICAL STAFF:

The associate Medical Staff shall consist of physicians, dentists and podiatrists who are being considered for advancement to membership as active or courtesy members of the Medical Staff. They shall be appointed to a specific department and may be appointed to serve on committees. They shall be ineligible to hold office in this Medical Staff organization. However, candidates for active staff status shall have voting privileges and shall accept emergency department coverage assignments.

All associate Medical Staff memberships shall be provisional for a period of one year. Associate membership renewal may not exceed an additional year, following which the failure to advance from associate Medical Staff membership shall be deemed a termination of Medical Staff membership. An associate Medical Staff member whose membership is so terminated shall have hearing rights accorded by the Medical Staff bylaws if the termination is an Adverse Action as defined in the Medical Staff bylaws.

Associate Medical Staff members shall be assigned to a department where their performance shall be evaluated by the chairperson of the department or the chairperson's representative in order to determine the eligibility of such associate staff members for continued Medical Staff membership and for exercising the clinical privileges provisionally granted to them.

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## Staff Category - Active Staff

Requested      Granted

\_\_\_\_\_ ( ) ACTIVE MEDICAL STAFF:

The active Medical Staff shall consist of physicians, dentists and podiatrists who regularly admit patients and/or provide services in the hospital, who are able to comply with response times set by their departments and otherwise provide continuous care to their patients, and who assume all the functions and responsibilities of membership on the active Medical Staff including emergency department coverage and consultation assignment as determined by the medical staff emergency department plan which is approved by the Medical Executive Committee. Members of the active Medical Staff shall be appointed to a specific department, shall be eligible to vote, to hold office, and to serve on Medical Staff committees.

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## Staff Category - Affiliate Staff

Requested      Granted

\_\_\_\_\_      \_\_\_\_\_      (      ) AFFILIATE MEDICAL STAFF:

The affiliate Medical Staff shall consist of physicians, podiatrists and dentists who wish to be associated with Mercy Medical Center and its Medical Staff but have little or no active practice in the hospital. Members of the affiliate Medical Staff shall be appointed to a specific department of the Medical Staff, shall be eligible to vote, and shall be eligible to serve on Medical Staff committees. They shall be ineligible to hold office in this Medical Staff organization.

Affiliate Medical Staff members shall not have clinical privileges or provide orders on inpatients. Affiliate Medical Staff members wishing to refer a patient for inpatient care shall be responsible for arranging, at the time of admission, for the overall medical responsibility for the patient's care in the hospital to be assumed by a Medical Staff member of the appropriate specialty who holds full admitting privileges.

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## Staff Category - Courtesy Staff

Requested      Granted

\_\_\_\_\_      \_\_\_\_\_      (      ) COURTESY MEDICAL STAFF:

The courtesy Medical Staff shall consist of physicians, dentists and podiatrists qualified for Medical Staff membership but who only occasionally attend patients in the hospital. Courtesy Medical Staff membership is limited to those individuals who bring a unique skill to the community, or serve only occasionally as consultants in the hospital. Telemedicine members will be members of the courtesy Medical Staff. Courtesy Medical Staff members shall be appointed to a specific department. They shall be ineligible to vote or hold office in this Medical Staff organization and shall not be required to provide emergency department coverage.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

\*\* The affiliate physician does not have privileges for inpatient care. If Affiliate checked, do not complete the rest of this form. \*\*

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## Department of Cardiovascular Medicine

INITIAL CRITERIA: To be eligible to apply for core privileges in Cardiovascular Medicine, the applicant must meet the following qualifications:

- Board certification in Cardiovascular Medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine; or active participation in the examination process leading to board certification in cardiovascular medicine within two (2) years of completion of training.
- Documentation of the management of at least 100 inpatient patients in the past two years. This will include admitting, evaluating, and providing treatment to patients with cardiovascular disease; and providing consultative services to patients with cardiovascular disease.
- Meet ICAEL Standards to comply with Echo Lab ICAEL Certification.

REAPPOINTMENT CRITERIA: To be eligible for reappointment of core privileges, the applicant must meet the following qualifications:

- Prior board certification in Cardiovascular Medicine by the American Board of Internal Medicine or the American Osteopathic Board of Internal Medicine.
- Documentation of the management of inpatients in the past two years. This will include admitting, evaluating, and providing treatment to patients with cardiovascular disease; and providing consultative services to patients with cardiovascular disease.
- Meet ICAEL Standards to comply with Echo Lab ICAEL Certification.

Date: Jun 2008, May 2011, Sep 2011, Feb 2012, Aug 2012, Apr 2013

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## Core Privileges

The core privileges in this specialty include the procedures listed and such other procedures that are extensions of the same techniques and skills.

Special procedures, which require proof of additional experience in residency, fellowship or other recognized training are not considered core cardiology privileges.

Procedures may be performed facility wide unless otherwise designated.

Requested      Granted

- \_\_\_\_\_      \_\_\_\_\_      (      ) Core Privileges
- Privileges to admit, evaluate, diagnose, and provide treatment or consultative services to patients 16 years or older - presenting with cardiovascular disease
  - Insert arterial lines
  - Perform cardioversion
  - Insert and manage central venous and pulmonary artery catheters
  - Interpret echocardiograms (meet ICAEL standards to comply with ECHO lab ICAEL certification.)
  - Interpret holter monitor and event monitor studies
  - Interpret electrocardiograms
  - Use thrombolytic agents
  - Exercise and pharmacologic stress testing

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## Invasive Privileges

INITIAL CRITERIA: To be eligible to apply for invasive privileges, the applicant must satisfy the following requirements:

- Documentation by a fellowship program director of the applicant's ability and competency to perform the below mentioned procedures; or documentation by the chief of cardiology at the applicant's previous facility that the applicant had privileges to perform these procedures at that facility and was able to perform them competently.

Requested      Granted

\_\_\_\_\_      \_\_\_\_\_      (      ) Angiographic injections including the right atrium, right ventricle, left atrium, left ventricle, aorta, pulmonary artery, bypass graft, renal artery, iliac artery, subclavian artery, brachial artery and radial artery

\_\_\_\_\_      \_\_\_\_\_      (      ) Intra-aortic balloon pump placement

\_\_\_\_\_      \_\_\_\_\_      (      ) Left heart catheterization and coronary angiography

Initial Criteria:

- Documentation of at least 300 left heart catheterization and coronary angiography procedures during fellowship, or at least 200 left heart catheterization and coronary angiography procedures in the past two years

Maintenance Criteria:

- Requires maintenance of at least 50 procedures in the past two years. If applicant has performed less than 50 procedures, department chair will review applicant's volume, complication rates and lifetime experience.

\_\_\_\_\_      \_\_\_\_\_      (      ) Pericardiocentesis

\_\_\_\_\_      \_\_\_\_\_      (      ) Right heart catheterization

\_\_\_\_\_      \_\_\_\_\_      (      ) Temporary transvenous pacemaker placement

\_\_\_\_\_      \_\_\_\_\_      (      ) Transesophageal echocardiography (requires maintenance of at least 10 TEE performed in the last two years). If applicant has performed less than 10 procedures, department chair will review applicant's volume, complication rates and lifetime experience. \* (specific privilege criteria apply)

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## Interventional Coronary Therapy Privileges

INITIAL CRITERIA: To be eligible to apply for interventional coronary therapy privileges, the applicant must satisfy the following requirements:

- Board certification in interventional cardiology, or active participation in the examination process leading to board certification in interventional cardiology within two years of completion of training.
- If training completed prior to June 30, 2002, documentation of at least 150 interventional cases in the two years prior to application will be accepted in lieu of board certification.
- Documentation by a fellowship program director of the applicant's ability to perform the below mentioned interventional procedures, or documentation of at least 150 interventional cases in the past two years.

REAPPOINTMENT CRITERIA: To be eligible for reappointment of interventional coronary therapy privileges, the applicant must satisfy the following requirements:

- Documentation of at least 50 interventional cases in the past two years with acceptable results and complication rates.
- If an applicant has performed less than 50 interventional cases in the past two years, the department chair or designee will review the applicant's volume, complication rates and lifetime experience.

Requested      Granted

- |       |       |        |  |
|-------|-------|--------|--|
| _____ | _____ | (    ) | Coronary atherectomy                           |
| _____ | _____ | (    ) | Coronary thrombectomy                          |
| _____ | _____ | (    ) | Intracoronary stents placement                 |
| _____ | _____ | (    ) | Percutaneous transluminal coronary angioplasty |
| _____ | _____ | (    ) | Fractional flow reserve evaluation             |
| _____ | _____ | (    ) | Intravascular ultrasonography                  |

## Structural and Congenital Heart Disease Privileges

INITIAL CRITERIA: To be eligible to apply for ASD and PFO closure privileges, the applicant must satisfy the following requirements:

- Documentation of formal training in percutaneous ASD and PFO closure, via either cardiology fellowship or training course.
- Documentation of successful performance of at least 10 percutaneous ASD or PFO closures in the past 12 months.
- Documentation of ability to perform percutaneous ASD and PFO closure from a fellowship program director or the cardiac catheterization laboratory director at the institution where the applicant previously practiced.

REAPPOINTMENT CRITERIA: To be eligible for reappointment of ASD and PFO closure privileges, the applicant must satisfy the following requirements:

- Performance of at least 10 percutaneous ASD or PFO closures in the past two years.
- If the applicant has performed less than 10 percutaneous ASD or PFO closures in the past two years, proctoring of 5 cases by a physician with privileges to perform these procedures may be done.

Requested      Granted

- |       |       |        |  |
|-------|-------|--------|--|
| _____ | _____ | (    ) | Percutaneous closure of atrial septal defect (ASD) |
| _____ | _____ | (    ) | Percutaneous closure of patent foramen ovale (PFO) |

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## Electrophysiology Privileges

INITIAL CRITERIA: To be eligible to apply for core privileges in Electrophysiology privileges, the applicant must satisfy the following requirements:

- Board certification in Clinical Electrophysiology, or active participation in the examination process leading to board certification in clinical electrophysiology within two (2) years of completion of training.
- Documentation by a fellowship program director of the applicant's ability to perform the below mentioned procedures, or documentation of the applicant's privileges to perform these procedures at a previous facility within the last three months prior to submitting this request.

REAPPOINTMENT CRITERIA:

- Prior board certification in both Cardiovascular Medicine and added qualifications in clinical electrophysiology.

The core privileges in this specialty include the procedures listed and such other procedures that are extensions of the same techniques and skills.

Special procedures, which require proof of additional experience in residency, fellowship or other recognized training, are not considered core electrophysiology privileges.

To be performed in the cardiac electrophysiology lab.

Requested	Granted	
_____	_____	( ) Catheter ablations (requires performance of at least 40 catheter ablation procedures in the past two years)
_____	_____	( ) Electrophysiology studies (EPS) (requires participation in at least 50 EPS and/or Catheter Ablations in the past two years)
_____	_____	( ) Implantable cardioverter and cardiac resynchronization device implant (requires maintenance of at least 10 devices in the past two years)
_____	_____	( ) Permanent pacemaker implantation (requires maintenance of 20 implants in the past two years)
_____	_____	( ) Tilt table testing
_____	_____	( ) Transeptal puncture (requires maintenance of 5 procedures in the past two years)

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## Electrophysiology for Non-Electrophysiologists

Requested      Granted

\_\_\_\_\_      \_\_\_\_\_      (    ) Biventricular pacing

Minimum formal training:

- Board certified in cardiology.
- Be privileged in permanent cardiac pacemaker placement.
- Possess a clear understanding of the indications, contraindications and potential complications associated with biventricular pacing.
- Provide documentation (certificate and course content) of successful completion of a U.S. Food & Drug Administration (FDA) approved formal training course. Such a course may be provided and/or required by the equipment supplier.

Previous Experience:

- Physicians fully trained in biventricular pacing during their residency/fellowship shall submit written verification of training, along with a record of procedures performed.
- Physicians having held biventricular pacing privileges at another institution will be considered in the usual fashion and shall submit documentation of experience and competency. This should include a U.S. Food & Drug Administration (FDA) approved formal training course.

Maintenance Criteria:

- 10 CRT devices in the past two years

\_\_\_\_\_      \_\_\_\_\_      (    ) Catheter ablation

Initial Criteria:

- Prior board certification in cardiovascular medicine
- AND
- Performed at least 40 catheter ablative procedures in the last two years

Maintenance Criteria:

- Prior board certification in cardiovascular medicine
- AND
- Maintenance of at least 40 catheter ablative procedures in the past two years

\_\_\_\_\_      \_\_\_\_\_      (    ) Electrophysiology studies (EPS)

Initial Criteria:

- Prior board certification in cardiovascular medicine.
- AND
- Participation in at least 50 diagnostic EPS in the past two years

Maintenance Criteria:

- Prior board certification in cardiovascular medicine.
- AND
- Participation in at least 50 diagnostic EPS in the past two years

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Requested      Granted

\_\_\_\_\_      \_\_\_\_\_ (    ) Implantable cardioverter & cardiac resynchronization device implant

Initial Criteria:

- Prior board certification in cardiovascular medicine.

AND

- Documentation of current experience: 100 implantations over prior 3 years.

AND

- Proctored ICD Implantation experience: 10 implantations and 5 revisions.

AND

- Proctored CRT Implantations: 5 implantations.

AND

- Successful completion of a Heart Rhythm Society sponsored or endorsed ICD/CRT didactic course and passage of the NASPExAM (<http://www.ibrhe.org>) within the last 5 years, which includes ICD knowledge testing.

AND

- Monitoring of patient outcomes and complication rates.

AND

- Established patient follow-up.

Maintenance Criteria:

- Prior board certification in cardiovascular medicine.

AND

- Active privileges in Pacemaker Implants.

AND

- 10 CRT/ICD procedures in the past two years.

AND

- 20 patients per year in follow-up

\_\_\_\_\_      \_\_\_\_\_ (    ) Pacemaker implant

Initial Criteria:

- Prior board certification in cardiovascular medicine.

AND

- In Fellowship: didactic training, 50 primary pacemaker implants, 20 pacemaker system revisions or replacements, and 100 pacemaker follow-up visits.

OR

- Documentation of current experience: 50 pacemakers over two years.

Maintenance Criteria:

- Prior board certification in cardiovascular medicine.

AND

- Documentation of current experience: 20 pacemakers in the past two years.

\_\_\_\_\_      \_\_\_\_\_ (    ) Tilt table testing

Initial Criteria:

- Prior board certification in cardiovascular medicine.

AND

- Documentation of 5 tilt table tests performed in fellowship or 5 documented cases performed in the last year.

Maintenance Criteria:

- Prior board certification in cardiovascular medicine.

AND

- Maintenance of 5 tilt table tests in the past two years.



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Requested      Granted

\_\_\_\_\_ (    ) Transeptal puncture

**Initial Criteria:**

- Prior board certification in cardiovascular medicine.

AND

- Have interventional privileges or catheter ablation privileges.

AND

- Documentation of at least 5 transeptal punctures in fellowship or 5 documented cases performed in the last year.

**Maintenance Criteria:**

- Prior board certification in cardiovascular medicine.

AND

- Active privileges in interventional cardiology or catheter ablations.

AND

- Maintenance of 5 procedures in the past two years.

### Other Procedures

Requested      Granted

\_\_\_\_\_ (    ) Peripheral angiography \* (specific privilege criteria apply)

\_\_\_\_\_ (    ) Peripheral vascular intervention \* (specific privilege criteria apply)

\_\_\_\_\_ (    ) Peripheral Venous and Arterial Vascular Ultrasonography\*

\_\_\_\_\_ (    ) Coronary CT angiography \* (specific privilege criteria apply)

\_\_\_\_\_ (    ) Nuclear cardiac imaging interpretation \* (specific privilege criteria apply)

\_\_\_\_\_ (    ) Cervicocerebral arteriography \* (specific privilege criteria apply)

\_\_\_\_\_ (    ) Carotid interventions \* (specific privilege criteria apply)

\_\_\_\_\_ (    ) Moderate (conscious) sedation \*

\_\_\_\_\_ (    ) Deep sedation \*

### Cardiovascular - Special

Requested      Granted

\_\_\_\_\_ (    ) Endovascular repair of abdominal aortic aneurysms \* (specific privilege criteria apply)

### Signature

I have requested and will exercise only those privileges for which by education, training, current experience, and demonstrated performance, I am qualified to perform.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

\* specific privilege criteria or requires evidence of education and experience