



**Orthopedic Surgery Non-Operative Privileges  
Department of Orthopedics**

**Name:** \_\_\_\_\_

*(Please print)*

- \_\_\_\_\_ Initial privileges (initial appointment)
- \_\_\_\_\_ Renewal of privileges (*reappointment, on 2 year specialty cycles*)
- \_\_\_\_\_ Modification of privileges (*request for any additional privileges beyond those previously granted*)

**Basic Education: MD or DO**

**Minimal formal training:**

Education and training as for Orthopedic Surgery Operative Core OR education and training per primary specialty core with additional training in non-operative orthopedics.

**Required Previous Experience:** Unless applicants can verify successful recent completion of an ACGME or AOA accredited residency or clinical fellowship within the past 12 months, they must be able to demonstrate the performance of a sufficient volume of orthopedic procedures, reflective of the scope of privileges requested, during the last 24 months.

Successful completion of an ACGME or AOA accredited residency in related specialty, and/or current certification or active participation in the examination process (with achievement of certification within 5 years of training completion) leading to ABMS board certification. Maintenance of BLS certification recommended.

**Required current experience:** At least 50 general orthopedic clinical encounters, reflective of the scope of privileges requested, during the past 12 months, or the demonstrated successful completion of an ACGME or AOA accredited residency or clinical fellowship within the past 12 months.

<b>Facility (Check ALL that are applicable to your request)</b>				
Baroness*	Children's**	North	East	Bledsoe/Sequatchie

\* Includes BEH Main Hospital, Miller Eye Center, Plaza Surgery and all Erlanger Ambulatory Clinics

\*\*Includes Children's Hospital Inpatient, Children's Ambulatory clinics, Children's OR and Kennedy Children's Outpatient Center

## **Core Orthopedic Surgery Privileges:**

Performance of a History and Physical

### **Clinical**

Application of orthotic materials

Injury prevention and wellness

Order and interpret laboratory, imaging and neurologic studies

Order bone healing stimulation devices

Order rehab services

Perform Evaluations (disability, ergonomic, fitness for duty, independent medical, etc.)

Perform History and Physical

Prescription of orthotics, prosthetics, wheelchairs, and adaptive equipment

Prescription of medications pertinent to musculoskeletal care

Performance and interpretation of gait and ergonomic studies

### **Procedural**

Administration of local anesthesia

Application of splints or casts

Application of skeletal traction

Arthrocentesis and joint or soft tissue injections

Arthrography

Closed reduction and immobilization of fractures and dislocations

Percutaneous office procedures (Achilles tenotomy, bursal lancing, etc.)

Removal of external fixation devices

Use of fluoroscopy or ultrasonography for musculoskeletal imaging

## **Special Privileges in Non-Operative Orthopedic Surgery: None.**

If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the criteria governing the exercise of the privilege requested, including training, required previous experience, and maintenance of clinical competence. Non-core privileges include:

***Request for Privilege Not Listed in Core or Special Non-Core*** *(please list the privilege and provide justification as well as any accompanying certifications or case logs)*

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### ***Special Procedures Privileges Criteria***

#### ***Moderate Sedation***

CRITERIA – To administer Moderate Sedation

1. Basic education: MD, DO, DDS, or DMD
2. Successful completion of a post-graduate residency training program of at least three years' duration.
3. Trained in the professional standards and techniques to administer pharmacologic agents to predictably achieve either minimal or moderate sedation and monitor patients carefully in order to maintain them at either of these levels of sedation-either intentionally or unintentionally. Acceptable training may be the completion of a course offered by any local hospital or the local Medical Society. Documentation of completion is required.
4. Must be able to evaluate and document evaluation of the patient prior to performing minimal or moderate sedation.
5. Must be qualified to rescue patients from *deep* sedation and trained to manage a compromised airway and to provide adequate oxygenation and ventilation.
6. Current proof of ACLS, PALS, or ATLS

7. Able to demonstrate that he/she has administered minimal or moderate sedation or analgesia to at a minimum of five (5) patients during the past 12 months.

*NOTE: Deep Sedation is limited to Anesthesia/CRNAs, Critical Care, and Emergency Medicine and full Anesthesia is limited to Anesthesiologists and CRNAs and is outlined in their delineation of privileges.*

**Department Chief Recommendation:**

I have reviewed the requested clinical privileges and supportive documentation for the above named applicant.

\_\_\_\_ Recommended as Requested

\_\_\_\_ Recommended with Modifications (See comments below)

\_\_\_\_ Not Recommended (See comments below)

Chief Comments: \_\_\_\_\_

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\_\_\_\_\_

Provider Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Chief Signature

\_\_\_\_\_

Date