

Heart Hospital of New Mexico  
Medicine Department  
**Gastroenterology and Gastrointestinal Endoscopy**

Core Privilege Request Form

Having reviewed the requirements for each set of privileges in the following pages, I would request the following privileges.

*Place a check mark in the appropriate box for each set of privileges. Cross out any procedures not currently performed in your clinical practice.*

Privilege	Procedures	Requested	Not Requested
<b>CORE PRIVILEGES</b>			
	-Diagnostic EGD -Total Colonoscopy -Snare Polypectomy -Non-Variceal Hemostasis (upper and lower) -Variceal Hemostatis -Esophageal Dilation (all methods) -Flexible Sigmoidoscopy -Percutaneous Liver Biopsy -Peroral Small Bowel Biopsy -Abdominal Paracentesis		
<b>NON-CORE PRIVILEGES</b> <i>(Request each separately)</i>			
	-ERCP (Diagnostic)		
	-ERCP (Therapeutic)		
	-PEG/PEJ		
	-Esophageal stent		
<b>MODERATE SEDATION</b> <i>(complete attached form)</i>			
<b>RESTRAINT PRIVILEGES</b>			

**I attest by signature that I have met the minimum criteria of procedures/diagnoses management within my clinical practice for the procedures requested above, and I agree to provide documentation of said procedures/diagnoses management if requested.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**The Department Chairperson accepts this applicant's attestation that he/she meets the minimum criteria for privileges requested.**

\_\_\_ Yes \_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Department Chair Signature

\_\_\_\_\_  
Date

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Delineation of Core Privileges

**ELIGIBILITY CRITERIA:** To be able to request these clinical privileges, the applicant must meet the criteria below:

1. **MD, DO**
2. **Completed additional education/training as follows:**
  - Must be certified by the American Board of Internal Medicine; **AND**
  - Completed a formal accredited fellowship in Gastroenterology (GI); **OR**
  - Must be certified by the American Board of Surgery with formal documentation of specific training in each area of endoscopy

**NEW APPLICANTS MUST** complete Board Certification within 5 years of application/approved Medical Staff membership.

3. **Have the following past experience:**
  - Initial Application:** EACH MAJOR CATEGORY OF ENDOSCOPY PRIVILEGES ARE GRANTED SEPARATELY. Minimum standards of numbers are required for each procedure in the CORE for which privileges are requested.
  - Reappointment Application:** One hundred (combined) procedures within the CORE privileges as the primary GI physician in the past two years. *Note:* This requirement can be fulfilled from other hospital affiliations.
4. **Be able to secure clinical references as outlined in the Policy On Appointment, Reappointment and Clinical Privileges of the Medical Staff of the Heart Hospital of New Mexico.**

**Heart Hospital of New Mexico**  
**Gastroenterology And Gastrointestinal**  
**Core Privileges**

Performance of procedures (including related admission, consultation, work-up, pre-and postoperative care) to correct or treat various conditions, illnesses and injuries of the Gastrointestinal System.

A representative, but of necessity not complete list of CORE procedures is stated below. It is assumed that other procedures and problems of similar complexity will fall within the identified CORE privileges.

Core Procedures	Minimum # Required For Initial Applicants	Reappointment Applications
Diagnostic EGD	50	Minimum of 100 core procedures within (2)years.
Total Colonoscopy	50	
Snare Polypectomy	15	
Non-Variceal Hemostasis (upper and lower; includes 10 active bleeders)	20	
Variceal Hemostatis	15	
Esophageal Dilation (all methods)	30	
Flexible Sigmoidoscopy	25	
Percutaneous Liver Biopsy	10	
Peroral Small Bowel Biopsy	5	
Abdominal Paracentesis	5	

To apply for any of the following **NON-CORE** privileges the applicant must already hold (or be approved for) some or all of **GI CORE** privileges to ascertain that the applicant has basic skills and knowledge within this discipline.

### Privilege Delineation For Gastroenterology Non-Core Privileges

Privileges Requested	Initial Application (Minimum # Procedures)	Proctored Exams (Initial Application)	(Active & Courtesy)	(Active & Courtesy)
			Reappointment App (Minimum # Procedures)	Regain Privileges (Minimum # Procedures Proctored)
ERCP (Diagnostic)	50	4-6	12	2
ERCP (Therapeutic)	25	4-6	24 (May apply toward ERCP Diagnostic)	2
PEG/PEJ	10	4-6	4	1
Esophageal Stent	5	2	1	1

#### CREDENTIALING NEW PROCEDURES:

As endoscopy evolves, new procedures will be developed for which privileges may be requested. The process of credentialing will depend on the background skills and privileges of the applicant and whether the new procedure is a minor or major variant in established techniques.

For minor extensions of demonstrated skills reading or viewing video tapes may be sufficient training. Some new procedures may require formal training or "hands on" equivalent supervised experience with adequate written documentation and/or proctoring.

Requests for "new Procedures" privileges will be decided upon by the Medical Executive Committee with input from the appropriate Medical Staff Department Leadership