

Heart Hospital of New Mexico
Surgery Department
Orthopedic

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
CORE I PRIVILEGES			
	Non-Invasive procedures, medical management and/or consultation privileges to correct or treat various medical conditions, illnesses and injuries for ER and inpatients		
CORE II PRIVILEGES			
	<ul style="list-style-type: none"> -Fracture closed-reduction with Fixation -Fracture open-reduction with Fixation -Infection -Intra articular fracture-closed Reduction with fixation -Intra articular fracture-opened Reduction with fixation -Clean (debridement) -Suture lacerations -Repair bones-acute -Stabilize/Loosen joints -Removal of foreign body-device <ul style="list-style-type: none"> -Spontaneously required -Surgically acquired -Removal of part <ul style="list-style-type: none"> -Specific tissue -Mixed tissue -Amputation- various level -Nerve Decompression-peripheral 		
CORE III PRIVILEGES			
	Spine - Cervical, Dorsal, Lumbosacral - Bone: <ul style="list-style-type: none"> -Fracture - reduction with fixation -Spine Infection 		
MODERATE SEDATION <i>(Complete attached form)</i>			
RESTRAINT PRIVILEGES			

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:**
 - Completion of a recognized Orthopedic Residency Training Program; and
 - Board Certified by the American Board of Orthopedic Surgery.

NEW APPLICANTS MUST BE Board Certified within 5 years of application/approved Medical Staff membership.

3. **Have the following past experience:**
 - Refer to each CORE for specific criteria
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.**

DESCRIPTION OF CLINICAL PRIVILEGES:

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

ORTHOPEDIC CORE I PRIVILEGES

Medical management and/or consultation privileges to correct or treat various medical conditions, illnesses and injuries for emergency and inpatients

ORTHOPEDIC CORE II PRIVILEGES

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

- Fracture closed-reduction with fixation
- Fracture open-reduction with fixation
- Infection
- Intra articular fracture-closed reduction with fixation
- Intra articular fracture-opened reduction with fixation
- Clean (debridement)
- Suture lacerations
- Repair bones-acute
- Stabilize/Loosen joints
- Removal of foreign body-device
 - Spontaneously required
 - Surgically acquired
- Removal of part
 - Specific tissue
 - Mixed tissue
 - Amputation-various level
- Nerve Decompression-Peripheral

ORTHOPEDIC CORE III PRIVILEGES

Applicants requesting Orthopedic CORE III Privileges must have the following past experience:

-Completion of an accredited residency and or fellowship training program, which included training in CORE III procedures - **SUPPLY DOCUMENTATION FOR INITIAL APPLICATION.**

-Performed the minimum of 25 (Combined) CORE III-A Spine procedures, and (if applicable) met the minimum criteria of 25 (Combined) Spinal Instrumentation cases in the past two years.

CORE III

Spine - Cervical, Dorsal, Lumbosacral - Bone:

- Fracture - reduction with fixation
- Spine Infection