

WEST JEFFERSON MEDICAL CENTER
Marrero, Louisiana
PRIVILEGES REQUEST FORM FOR GASTROENTEROLOGY

Minimum Threshold Criteria

To be eligible to use this form to request clinical privileges, the following minimum threshold criteria must be met.

1. *Basic education:* M.D. or D.O.
2. *Minimal formal training:* Successful completion of an approved residency training program in internal medicine followed by a fellowship in gastroenterology.
3. *Required previous experience:* The successful applicant must be able to demonstrate that he or she has provided inpatient or consultative services for at least 24 patients during the last 12 months and documented that in that time he or she has had the following minimal endoscopic experience:
 - * diagnostic EGD-75 procedures
 - * total colonoscopy-75 procedures
 - * snare polypectomy-20 procedures
 - * nonvariceal hemostasis (upper and lower); includes 10 active bleeders-20 procedures
 - * variceal hemostasis (includes 5 active bleeders) 10 procedures
 - * esophageal dilation with guide wire- 5 procedures
 - * flexible sigmoidoscopy-25 procedures
 - * PEG- 10 procedures
 - * ERCP (diagnostic) - 50 procedures
 - * ERCP (therapeutic) - 25 procedures
 - * tumor ablation - 10 procedures
 - * pneumatic dilation for achalasia- 5 procedures
 - * esophageal stent placement - 5 procedures

Note: References must come from the individual responsible for formal endoscopic training.

Privileges include admission, work up, and diagnosis of patients of all ages presenting with illnesses, injuries, and disorders of the stomach, intestines, and related structures such as the esophagus, liver, gallbladder, and pancreas, including the provision of consultation. These privileges include:

- * diagnostic EGD
- * total colonoscopy
- * snare polypectomy
- * nonvariceal hemostasis
- * variceal hemostasis
- * esophageal dilation with guide wire
- * flexible sigmoidoscopy
- * PEG
- * ERCP (diagnostic)
- * ERCP (therapeutic)
- * tumor ablation
- * pneumatic dilation for achalasia
- * esophageal stent placement
- * use of sengstaken-Blakemore tube

Special requests for gastroenterology include:

- use of laser
- use of laparoscope

I understand that in making this request I am bound by West Jefferson Medical Center's applicable bylaws and policies. I hereby stipulate that I meet the threshold criteria for each request.

Physician's signature

Typed or printed name

Date

Approved: 3/97

"In general, core privileges consist of those areas listed above. The medical staff may modify or limit the privileges granted."