

Department of Orthopedic Surgery

CAT 1 Basic Privileges: Patient management, including H & Ps and diagnostic and therapeutic treatments, procedures and interventions encompassing the areas described under the heading checked below.

Requiring a level of training generally associated with persons who have completed the residency program prescribed by the certifying board or boards checked below, and a level of skill and ability generally associated with persons who are diplomates of that board.

A American Board of Orthopaedic Surgery:

- 1 Trauma, including multi-system trauma
- 2 Hand and foot surgery (routine)
- 3 Athletic injuries, including arthroscopy
- 4 Orthopaedic rehabilitation, including amputations and post-amputation care
- 5 Musculoskeletal imaging
- 6 Rehabilitation of neurological injury and disease
- 7 Spinal cord injury rehabilitation
- 8 Orthotics and prosthetics care
- 9 Cast application, reinforcement, and removal procedures
- 10 Joint aspiration: Joint injection
- 11 Suture and packing of wounds
- 12 Primary joint replacement (routine)
- 13 Shoulder/elbow surgery (routine)

B American Board of Physical Medicine and Rehabilitation: Elimination, reduction or alleviation of physical disability, and training of the patient to live and work within the limits of any residual disability.

1 Electromyography Studies (EMG)

Initial Criteria:

- Board Eligible or Board Certified in Physical Medicine and Rehabilitation or Neurology.
- Performance of at least 150 studies in residency or completion of an Electrophysiology fellowship.
- Evidence of ongoing performance of electrodiagnostics in current practice over the last year.
- Evidence of continuing education in electrodiagnostic, neurologic, and/or neuromuscular disease related subjects over the last year.

Reappointment Criteria:

- Board Eligible or Board Certified in Physical Medicine and Rehabilitation or Neurology.
- Performance of at least 20 studies in the last two years.

-Evidence of ongoing performance of electrodiagnostics in current practice over the last year.

-Evidence of continuing education in electrodiagnostics, neurologic, and/or neuromuscular disease related subjects over the last year.

CAT 3 Special Privileges: Patient management at this level encompasses Category 1A patient management, the items specifically marked below and similar activities.

Requiring a level of training, skill and ability generally associated with persons who are Diplomates of the American Board of Orthopaedic Surgery and who have had additional training and/or experience in specific patient management problems.

A Microsurgical repair of nerves and blood vessels

B Major hand reconstruction

C Limb replantation

D Ilizarov techniques

E Spine instrumentation

1 Cyberknife

Requires Certificate of Completion of Cyberknife training; Proctoring Volume: Minimum of 5 cases

Maintenance of privileges: 5 cases every 12 months; If less than 5 cases, proctoring of at least 3 cases

F Laser:

1 Argon

(LASER) (LASER)

2 Neodymium

(LASER) (LASER)

3 CO2

(LASER) (LASER)

4 YAG

(LASER) (LASER)

G Acupuncture

H Moderate Sedation

(Sedation Module Required prior to granting of privilege)

I Fluoroscopy

(formal fluoroscopy supervisor certification required)

J Ultrasound (guided joint and soft tissue injections; assess severity of muscle/tendon injuries for prognosis reasons)

Criteria: 40 hours didactic training; completion of hands-on coursework in Ultrasound; and proctoring of 30 diagnostic scans

CAT 4 Limited Privileges

A Clinic Privileges: Patient management, including H & Ps and diagnostic and non-surgical therapeutic treatments

Requiring a level of training generally associated with persons who have completed the residency program prescribed by the certifying board or boards

checked in number one above and a level of skill and ability generally associated with persons who are diplomates of that board. Patient management will generally be carried out in the Ambulatory Care Clinics, which may include minor surgical procedures done in the clinics but does not include procedures in the main operating room or outpatient surgery.

B Physician's Assistant: Patient management is limited to the areas specified below. The physician assistant shall also enter the name of his/her supervising physician who is responsible for the patient.

- 1 Perform and dictate preoperative or admitting histories and physicals**
- 2 Act as first assistant to the surgeon in the operating room for specified procedures**
- 3 Enter notes in chart, which will be countersigned by the physician**
- 4 Write admitting, pre-, post-operative, and discharge orders. These may include orders for diagnostic tests, immediate postoperative rehabilitation, activity level, diet, wound care, incentive spirometry, and catheterization.**
A physician will co-sign all orders within 24 hours.
- 5 Transcribe patient-specific verbal orders for medications as transmitted by the supervising physician**
- 6 Remove sutures, staples and drains; change dressings and do appropriate wound care**
- 7 Start IV's or draw blood, including arterial blood gasses**
- 8 Place or remove Foleys or NG tubes**
- 9 Perform basic CPR and airway management (not including intubation)**
- 10 Dictate discharge summaries**
- 11 Place and remove casts**
- 12 Each time a physician assistant provides care for a patient and enters his/her name, signature or initials on a patient's record,**

C Podiatric Privileges

GROUP I

- 1 Excision, Cutaneous Lesions**
 - 2 Excision, Nail Matrix**
 - 3 Excision, Foreign Body (Digit)**
 - 4 Exostectomy of Phalanx**
 - 5 Hammertoe**
- GROUP II**
- 10 Excision, Tendon Lesion (Ganglion)**
 - 11 Excision, Inter-Met Neuroma**
 - 12 Arthroplasty 1st MPJ without Wedging of Bone**
 - 13 Remodeling of Lesser Mets**
 - 14 Plantar Condylectomy**

- 15 Tailor's Bunyon**
- 16 Solitary Met-Head Resection**
- 17 Sesamoidectomy**
- 18 Tendon Transfer or Redirection in Digit**
GROUP III
- 25 Prosthesis, Silastic, MPJ**
- 26 Osteotomy of Metatarsal or Phalanx (with or without fixation)**
- 27 Fusion of Metatarsals or Phalanx**
- 28 Tendon Transfer or Redirection in Metatarsal Area**
- 29 Open Repair of Fracture, Forefoot**
- 30 Partial Osteotomy, Tarsals**
- 31 Pan Met Head Resection**
GROUP IV
- 40 Skin Transfers/Rotation Flaps**
- 41 Deep Soft Tissue Release or Repair, Rear Foot**
- 42 Osteotomies of Tarsal Bones**
- 43 Mid Tarsal Fusion**
- 44 Sub Talar Fusion**
- 45 Excision, Tarsal Coalition**
- 46 Capsulotomy of Mid or Rear Foot**
- 47 Tendon Transfer or Redirection Mid Tarsal, Rear Foot**
- 48 Open Repair of Fractures, Rear Foot**
- 49 Tarsal Tunnel Release**
- 50 Open reduction and internal fixation of the ankle**
- 51 Arthroscopic ankle procedures and ankle fusions**

D Assisting Surgeon Privileges

Initial Qualifications: Requires a level of training, skill and ability generally associated with persons who are Diplomates of the American Board of Orthopedic Surgery and who had additional training and/or experience in the area of the limited privileges being requested. The Attending Surgeon must certify that Assisting Surgeon is qualified to assist with the privilege being requested.

E Amputation of the Forefoot

ADMSE Admitting Services

I expect to admit and care for patients under my own name on the following inpatient services:

OR Orthopedics Service

PRINT NAME - APPLICANT

SIGNATURE

DATE

PRINT NAME - PROCTOR / SUPERVISING PHYSICIAN SIGNATURE - SUPERVISING PHYSICIAN DATE

PRINT NAME - DEPARTMENT CHIEF SIGNATURE - DEPARTMENT CHIEF DATE

PRINT NAME - DEPARTMENT CHAIR SIGNATURE - DEPARTMENT CHAIR DATE