

Department of Radiology & Biomedical Imaging

CAT 1 Basic Privileges

Basic Education/Certificates: M.D. or D.O.; Current California Radiologic Health Board Certificate

Minimum Formal Training: For Basic Privileges: Successful completion of an ACGME or American Board of Osteopathy (ABO) approved residency training program in Radiology or verifiable comparable non-US training, or, for those indicated special procedures, the successful completion of training in the fellowship or training outlined.

1.A Diagnostic Radiology: Patient management, including H&Ps and diagnostic and therapeutic treatments, procedures and interventions encompassing the areas described below and similar activities. The use of radiant energy for the image portrayal of human morphology and physiologic processes in medical diagnosis. This includes diagnostic imaging techniques using radiations emitted by x-ray tubes, infrared sources, ultrasonographic devices, radio-labeled substances, and the radio frequency electromagnetic radiation emitted by atomic nuclei.

Initial Criteria:

Board Eligible or Board Certified by the American Board of Radiology in Diagnostic Radiology

AND

Demonstration of Sufficient participation in active practice to enable evaluation of competency. Must have performed a sufficient number (no less than 250) of procedures of varied complexity within the past 12 months of privileges requested.

Maintenance/Renewal Criteria:

Documented maintenance of certification by the American Board of Radiology (NOT REQUIRED IF: Board examination successfully completed prior to 2001).

AND

Active practice involving at least 500 cases over preceeding 2 years and active participation in departmental quality improvement program.

1.B Nuclear Medicine: A physician who is involved in the administration, analysis, and imaging of radionuclides and radio-labeled sustances in vitro and in vivo for diagnosis and treatment of disease.

*Note: certification by ABNM may occur by:

1.) ABR in diagnostic radiology AND one year ACGME residency in Nuclear Medicine

OR

2.) Boared eligible in non-radiology specialty AND 2 year residency in ACGME approved Nuclear Medicine

OR

3.) Successful completetion of PGY 1 AND a 3 year ACGME approved residency in Nuclear Medicine.**

Initial Criteria:

Board Eligible or Board Certified in Nuclear Medicine by the American Board of

Nuclear Medicine(ABNM)*

AND

Demonstration of sufficient participation in active practice to enable evaluation of competency. Must have performed a sufficient number (no less than 250) procedures of varied complexity within the past 12 months that reflects the scope of privileges requested

Maintenance/Renewal Criteria:

Documented maintenance of certification by the American Boards of Nuclear Medicine (NOT REQUIRED IF: Board Examination successfully completed prior to 1992).

AND

Active practice of nuclear medicine involving at least 500 cases over preceding 2 years and active participation in departmental quality assurance program.

CAT 2 Specialty Privileges

2.A Vascular and Interventional Radiology with Admitting Services: A radiologist who diagnoses and treats diseases by various radiologic imaging modalities. These included fluoroscopy, digital radiography, computed tomography, sonography, and magnetic resonance imaging and angiography.

Initial Criteria:

Basic Privileges in diagnostic radiology

AND one of the following:

- 1.) Successful completion of an ACGME accredited Fellowship in Vascular and Interventional Radiology and Certificate of Added Qualifications (CAQ) in Vascular and Interventional Radiology awarded by the American Board of Radiology
 - OR
 - 2.) Performed at least 200 procedures of varied complexity within the past 12 months that reflect the scope of privileges requested with accepted published rates of morbidity and mortality as documented through the peer review process.
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Maintenance/Renewal Criteria:

Documented maintenance of CAQ in Vascular and Interventional Radiology

AND

Performed at least 200 procedures in 24 months that reflect the scope of privileges requested with accepted published rates of morbidity and mortality as documented through the peer review process.

1 Vascular**1.1 Arteriography****1.2 Venography****1.3 Pulmonary angiography****1.4 Intravascular ultrasound****1.5 Dialysis access interventions**

- 1.6 Transhepatic portography**
- 1.7 Lymphography**
- 1.8 Angioplasty**
- 1.9 Vascular Stenting**
(Sedation Module Required prior to granting of privilege)
- 1.10 Atherectomy**
- 1.11 Percutaneous revascularization procedures**
- 1.12 Transcatheter embolectomy**
- 1.13 Embolotherapy**
- 1.14 Transcatheter infusion therapy**
- 1.15 Intervascular Foreign Body Removal including IVC filters**
- 1.16 Percutaneous Placement of Endovascular Prosthesis (stent grafts and inferior vena cava filter)**
- 1.17 Insertion of vascular access and dialysis catheters (non-tunneled and tunneled).**
- 1.18 Vascular Ultrasound Studies**
- 1.19 Magnetic Resonance Angiograms**
- 1.20 CT Angiograms**
- 2 Non-Vascular**
- 2.1 Percutaneous imaging-guided biopsy**
- 2.2 Percutaneous gastrostomy and transgastric jejunal feeding tube placement**
- 2.3 Percutaneous nephrostomy**
- 2.4 Ureteral stenting and other transcatheter genitourinary procedures for treatment of lithiasis, obstruction, or fistulas**
- 2.5 Recanalization of fallopian tubes**

- 2.6 Dilation and stenting of the tracheobronchial system**
- 2.7 Percutaneous transhepatic and transcholecystic biliary procedures**
- 2.8 Percutaneous drainage and diagnosis and treatment of other abnormal fluid collections (seroma, lymphocele, biloams, ascites, and effusions)**
- 2.B Vascular and Interventional Radiology Special Privileges: A radiologist meeting the above qualifications for vascular and interventional radiology will be qualified to independently perform the following procedures if they demonstrate competency.**

Initial Criteria:

Board Eligible or Board Certified by the American Board of Radiology in Diagnostic Radiology

AND

Basic privileges in Diagnostic Radiology and Vascular and Interventional Radiology Core Privileges

Competency will be demonstrated by performing as primary operator 3 each of the requested privileges.

Maintenance/Renewal Criteria:

Documented maintenance CAQ in Vascular and Interventional Radiology

AND

Performed at least two(2) of each requested procedure in 24 months and a demonstrated complication rate over 5 years that does not exceed accepted published rates of morbidity and mortality as documented through the peer review process.

- 1 Transjugular Intrahepatic Portosystemic Shunts (TIPS)**
 - 2 Selective Arterial Embolization (CPT)**
 - 3 Image-guided Percutaneous Thermal or Chemical Tumor Ablation**
 - 4 Percutaneous Transhepatic Portal Venography**
- 2.C Neuroradiology**
- Diagnostic Radiology: A radiologist who diagnoses and treats diseases utilizing imaging procedures as they related to the brain, spine, and spinal cord, head, neck, and organs of special senses in adults and children. These include CT, MRI, CTA, MRA, myelography, spine interventional diagnostic and pain-relieving procedures, angiography, and plain radiography.**
- Initial Criteria: Basic Privileges in Diagnostic Radiology AND Successful completion of an ACGME approved fellowship in Diagnostic Neuroradiology (after 1996) or, if prior to 1996, documentation of successful completion of fellowship training in neuroradiology

AND

one of the following:

1.) Successful completion of the Certificate of Added Qualification (CAQ) in Neuroradiology

OR

2.) Must have performed at least 1000 procedures of varied complexity within the past 12 months that reflects the scope of privileges requested.

Maintenance/Renewal Criteria:

Documented maintenance of CAQ in Neuroradiology

AND

Active practice of neuroradiology involving at least 500 cases over preceding 2 years

2.D Neurointerventional Radiology (NIR) with Admitting Privileges Include:

Initial Criteria:

Basic privileges in diagnostic radiology and successful completion of a two-year fellowship in Interventional Neuroradiology (during the first year of fellowship the candidate must have performed at least 100 diagnostic cerebral angiograms, with an acceptable documented major and minor complication rate of <2%).

AND

Performed at least 100 documented interventional/therapeutic procedures of varied complexity (not including spine intervention procedures such as vertebroplasty or nerve blocks) within the past 12 months that includes extracranial and intracranial embolization procedures withing a consecutive 12 month fellowship training period, with acceptable complication rate as published in the AJNR guidelines. The fellowship training should meet the guidelines as per the national recommendations of the SNIS, CNS, and AANS.

Maintenance/Renewal Criteria:

Documented maintenance of privileges in Diagnostic Radiology

AND

Annual performance of at least 60 documented INR/endovascular procedures as the primary treating physician over the preceding 24 months (for a total of 120 procedures), of which at last 40 cases are for intracranial interventional neuroradiological procedures, performed with accepted published rates of morbidity and mortality as documented through the peer review process.

- 1 Endovascular/Interventional therapy for intracranial aneurysms**
- 2 Acute stroke therapy intervention**
- 3 Endovascular treatment of cerebral arteriovenous malformations**
- 4 Endovascular therapy for intracranial arteriovenous fistulars**

- 5 Endovascular management of head, neck, and spinal cord vascular lesions and trauma**
- 6 Endovascular therapy for extracranial and intracranial vascular occlusive disease, including subclavian, vertebral, carotid, and intracranial angioplasty and/or stenting**
- 7 Treatment of cerebral arterial vasospasm**
- 8 Pre-surgical devascularization of head, neck, brain, and spinal cord tumors and vascular lesions**
- 9 Percutaneous vertebroplasty; endovascular or direct puncture treatment of cutaneous vascular anomalies**
- 10 Diagnostic extracranial (subclavian, carotid, and vertebral) and intracranial cerebral angiography**
- 11 Other endovascular and/or complex cerebrovascular diseases requiring either diagnosis or therapy**
- 12 Peripheral Angiography**
- 13 Peripheral Embolization**
- 14 Peripheral Sclerotherapy**

2.E Carotid Artery Stenting

Initial Criteria:

Specialty privileges in Interventional Neuroradiology or Vascular Interventional Radiology (IR)

AND

25 carotid stents as principal operator under supervision

Maintenance/Renewal Criteria:

Documented maintenance of privileges in INR or Vascular IR

AND

Perform at least five (5) procedures in 24 months meeting published guidelines for complication rates.

- ## **2.F Pediatric Radiology: A radiologist who is proficient in all forms of diagnostic imaging as it pertains to the treatment of diseases in the newborn, infant, child, and adolescent. This specialist has knowledge of both imaging and interventional procedures related to the care and management of diseases of children. A pediatric radiologist must be highly knowledgeable of all organ systems as they relate to growth and development, congenital malformations,**

diseases peculiar to infants and children, and diseases that begin in childhood but cause substantial residual impairment in adulthood.

Initial Criteria:

Basic privileges in Diagnostic Radiology and successful completion of Fellowship in Pediatric Radiology

AND

One of the following:

1.) CAQ in Pediatric Radiology

OR

2.) Must have performed at least 250 procedures of varied complexity within the past 12 months that reflects the scope of privileges requested.

Maintenance/Renewal Criteria:

Documented maintenance of CAQ in Pediatric Radiology

AND

Perform at least 500 procedures in preceding 24 months meeting published guidelines for complication rates.

2.G Coronary CT Angiography

Initial Criteria:

Basic privileges in Diagnostic Radiology

AND

Primary interpreter of cardiovascular CT studies for 3 years in a center actively performing cardiac CT or successful completion of a fellowship in cardiovascular imaging in 2005 or later

OR

Basic privileges in Diagnostic Radiology

AND

Successful completion of an ACGME radiology residency at any time

AND

Completion of at least 40 hours of category I CME in cardiac imaging or documented equivalent supervised experience in a center actively performing cardiac CT

OR

Currently board eligible, certified, or re-certified by American Board of Internal Medicine in Cardiovascular Disease

AND

1.) At least 6 months training in Coronary CT under the supervision of a level 3 qualified mentor, to be completed within preceding 2 years

2.) Supervises interpretation of at least 150 contrast Coronary CT studies. For at least 50, the trainees must be present during the scan, ideally as the primary operator, and should perform the analysis and make the initial interpretation.

3.) Supervised interpretation of at least 50 non-contrast Coronary CT studies

4.) Completion of 20 hours of courses/lectures related to CT in general and/or Coronary CT in particular

Maintenance/Renewal Criteria:

1.) Documented maintenance of privileges in Diagnostic Radiology or

maintenance of certification by American Board of Internal Medicine in
Cardiovascular Disease

AND

2.) Supervision and interpretation of 50 cardiac CT examinations per year

AND

3.) Documentation of 150 hours of category I radiology CME which includes
cardiac CT of 40 hours of category 1 CME related to cardiac CT every 3 years.

2.H Interpretation of Cardiac MR: The use of radiant energy for the image portrayal of human morphology and physiologic processes in medical diagnosis of cardiac disease. This includes diagnostic imaging techniques using radio frequency electromagnetic radiation emitted by atomic nuclei, excluding those techniques enumerated in Special Privileges above.

Initial Criteria:

Basic privileges in Diagnostic Radiology

AND

Primary interpreter of cardiovascular MR studies in a center actively performing cardiac MR for 3 years or successful completion of a fellowship in cardiovascular imaging in 2005 or later.

OR

Basic privileges in Diagnostic Radiology

AND

Successful completion of an ACGME radiology residency at any time

AND

Completion of at least 40 hours of category I CME in cardiac imaging or documented equivalent supervised experience in a center actively performing cardiac MR

OR

Currently board eligible, certified, or re-certified by American Board of Internal Medicine in Cardiovascular Disease

AND

1.) At least 12 months training in CMR under the supervision of a level 3 qualified mentor to be completed within 2 years

2.) Supervised interpretation of at least 150 CMR studies of which at least 50 each in cardiac and vascular studies. For at least 50, the trainees must be present during the scan, ideally as the primary operator and should perform the analysis and make the initial interpretation

3.) Completion of 30 hours of courses related to MR in general and/or CMR in particular

Maintenance/Renewal Criteria:

1.) Documented maintenance of privileges in Diagnostic Radiology or maintenance of certification by American Board of Internal Medicine in Cardiovascular Disease

AND

2.) Perform primary interpretation of at least 50 cardiac MRI per year

AND

3.) Documentation of 100 hours of category I radiology CME that includes cardiac MRI or 20 hours of category 1 CME related to Cardiac MR every 2 years.

2.I Ultrasonography

Privileges include:

Initial Criteria:

Basic privileges in Diagnostic Radiology

AND

At least 4 months specialty training in dedicated Diagnostic Sonography after Residency

AND

Demonstration of sufficient participation in active practice to enable evaluation of competency. Must have performed at least 250 procedures of varied complexity within the past 12 months that reflects the scope of privileges requested.

Maintenance/Renewal Criteria:

Documented maintenance of privileges in Diagnostic Radiology

AND

Active practice of ultrasound involving a minimum of 100 procedures (sonograms or guided procedures) of varied complexity within the past 12 months or 200 procedures in the last 24 months that reflect the scope of privileges requested.

- 1 **"Level 2" or targeted OB sonograms**
 - 2 **Guided renal transplant, pancreas transplant, thyroid, liver biopsies (required supervision during training)**
 - 3 **Guided in operating room fetal cases (Intra-uterine transfusion, thoracentesis, fetal myelomeningocele repair, twin laser/ablation, injections of ectopic pregnancies)**
 - 4 **Guidance for Radiofrequency Ablation in operating room (liver)**
 - 5 **Guidance for liver resection in OR**
 - 6 **Guidance for D&C in OR**
- 2.J **Diagnostic Cerebral Angiography and Endovascular/Interventional Therapy for Intracranial Aneurysms for Non-Radiologists**

Initial Criteria:

1. Documentation of at least 100 supervised diagnostic cerebral angiograms, with acceptable complication rates of less than 2% major/minor complications.

2. Documentation of at least 30 supervised endovascular/interventional treatments of brain aneurysms, both ruptured and unruptured, with acceptable complication rates of less than 6% for major and minor complications.

Maintenance Criteria:

1. At least 10 endovascular/interventional treatments of brain aneurysms, both ruptured and unruptured in the past two years, with acceptable complication rates of less than 10% directly related to the procedure.

2.K Moderate Sedation

Initial Criteria:

Specialty privileges in the Department of Radiology and Completed Sedation Module

 Maintenance/Renewal Criteria:

Documented maintenance of specialty privileges in department of Radiology and actively participate in Sedation quality improvement activities

CAT 3 Limited Privileges

3.A Oversight of Contrast Injections: Supervision of contrast agent injections for MRI and CT scans at any UCSF Medical Center facility in which patients undergo clinical or clinical research studies requiring injection of contrast media.

Initial Criteria:

M.D. with California license and BLS certification and successful passing of online Allergic response module administered by Department of Radiology

Maintenance/Renewal Criteria:

Current California M.D. license in good standing, BLS certification and successful passing of allergic response module every 2 years.

ADMSE Admitting Services

IR Interventional Radiology (IR)

IN Interventional Neuroradiology (IN)

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