

Delineation of Privileges - Department of Neurology

Name: _____

Please print or type

CORE PRIVILEGES - GENERAL NEUROLOGY

Minimum Training and Experience A practicing specialist in the field of neurology at the University of Michigan must have either an M.D. or a D.O. degree. All neurologists are expected to have completed three years of residency training in a neurology program approved by the Accrediting Council for Graduate Medical Education. Neurology staff at the University of Michigan are Board-certified by the American Board of Psychiatry and Neurology, or are within five years of completion of their residency training program. Under exceptional circumstances, the Department Chair can recommend to the Hospital Executive Board (via the Credentials Committee and ECCA) that the Board requirement be waived.

Scope of Services/Privileges Privileges include admission, work up, diagnosis, and provision of non-surgical treatment including consultation for patients who are admitted or in need of care to treat general medical problems.

A neurologist must be skilled in the evaluation and treatment of diseases of the nervous system. The neurologic evaluation includes detailed performance of the neurologic examination and a pertinent general examination. The neurologist must be able to: (1) localize a neurologic lesion on the basis of the examination; (2) develop a provisional diagnosis and differential diagnosis; (3) decide on utilization of tests for further evaluation of the illness; (4) communicate a plan with the patient and/or responsible caregiver and the referring physician; (5) review and interpret any additional tests ordered; (6) render a final therapeutic plan. All neurologists must be skilled in the performance and interpretation of lumbar punctures and can interpret and incorporate into the evaluation the results of the following studies: EMG, EEG, evoked potentials, sleep, urodynamics, routine x-rays, CT, MRI, arteriography, and myelography. Adult neurologists must be able to care for any patient aged 18 years or older. Individual neurologists may be appropriately credentialed to perform a number of subspecialty areas. These Level II areas and credentialing procedures are described as follows.

Privileges also include the following representative list not intended to be all-encompassing but rather to reflect the categories/types of patient problems included in the description of privileges. Individuals will only perform those privileges that they are qualified to perform.

- Accelerated hypertension with encephalopathy
- Alzheimer's disease
- Ataxia, diagnosis/treatment
- Autism, screen/diagnose
- Autonomic testing
- Bell's palsy
- Brain injury and brain death
- Brainstem disease involving cranial nerves (not requiring ventilatory or circulatory support or parenteral alimentation)
- Central or peripheral nervous system, myoneural junction, or somatic musculature disease, needing ventilatory or vascular life support systems, including: -patients requiring parenteral alimentation - patients requiring hyperalimentation -traumatic injuries (not requiring surgical repair)
- Coma from all causes, including: -degenerative disease -due to coma, with or without increased intracranial pressure -infectious -inflammatory -metabolic -toxic
- Dementia, diagnose/manage
- Diseases of the brachial and lumbar plexuses/traumatic
- Epilepsy, including cases difficult to control
- Headache
- Infarction, with altered level of consciousness, including -brainstem -cerebral -embolus -hemorrhage

- Infectious disease in patients with neurological impairment
- Migraine/Status migrainosus
- Movement disorders
- Multiple sclerosis and autoimmune disorders of nervous system
- Muscle disease, including: -dystrophies -inflammatory -metabolic myopathies (not requiring ventilator support)
- Neurological rehabilitation
- Neuro-oncologic disorders
- Parkinson's disease
- Provide non-surgical treatment and/or consultation to patients of all ages with illnesses or injuries of the neurologic system. This treatment includes: -conducting complete general/neurological examination - correlating results from neurodiagnostic tests with patient -determining indications for and limitations of clinical neurodiagnostic tests - history/examination to develop a differential diagnosis/management plan - interpreting clinical neurodiagnostic tests
- Psychiatric disease, including: -character disorders -neurosis -psychosis and those considered life- threatening, including, but not limited to: -depressive neurosis with suicidal ideation -paranoid schizophrenia with homicidal tendencies
- Renal, pulmonary, and cardiac insufficiency and decompensation in patients with neurological disease
- Sleep disorders
- Status epilepticus
- Stroke
- Systemic/focal vasculitides with involvement of the central nervous system or the somatic musculature
- Vegetative state (persistent), assess/manage

Requested (Applicant)

Recommended approval (Service Chief/Chair)

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: 24 patients in 12 months on an inpatient service or 50 outpatients in an outpatient clinic.

CORE PRIVILEGES - SLEEP MEDICINE (Practicing Specialist in Sleep Medicine)

Minimum Training and Experience: A practicing specialist in sleep medicine must have completed an M.D. or D.O degree; an accredited residency in neurology, psychiatry, internal medicine, pediatrics, otolaryngology, family practice, or anesthesiology; and a one-year fellowship (or equivalent training) in sleep disorders medicine. The physician must be board certified in sleep medicine by a member board of the American Board of Medical Specialties; board certified by the American Board of Sleep Medicine; or within 5 years of completion of an accredited fellowship in this sleep medicine.

Scope of Services/Privileges: A physician must be skilled in the evaluation and treatment of sleep disorders. This sleep evaluation requires elicitation of a pertinent sleep and wakefulness history. The physician must perform a physical examination pertinent to potential sleep disorders, general health status, and when necessary neurological, pulmonary and psychiatric health. The physician must be able to: 1) develop a provisional diagnosis and differential diagnosis; 2) decide on utilization of tests for further evaluation of the illness; 3) communicate a plan with the patient and/or care giver and the referring physician; 4) review and interpret any additional tests ordered; 5) render a final therapeutic plan. The physician is expected to read nocturnal polysomnograms, daytime multiple sleep latency tests or variants thereof, and ambulatory cardiorespiratory sleep studies.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

CORE PRIVILEGES - SPORTS NEUROLOGY (Practicing Specialist in Sports Neurology)

Minimum Training and Experience A practicing specialist in sports neurology must have completed an MD or DO degree; an accredited residency and be board eligible or certified in neurology, pediatric neurology, neurosurgery or physical medicine and rehabilitation. Must be Board-certified by their respective specialty boards, or are within five years of completion of their residency training program.

Scope of Practice/Privileges A physician must be skilled in the evaluation and treatment of medical disorders. The physician will perform evaluations of athlete patients with neurological injuries or disease. The sports neurology evaluation includes detailed performance of the general medical examination, neurologic history and examination, and interpretations of reports of radiologic and laboratory data. The physician must be able to: (1) develop provisional diagnoses and differential diagnoses, (2) decide on utilization of tests for further evaluation of the illness, (3) communicate a plan with the patient and/or caregiver and (4) perform these tasks in a variety of athletic environments.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

LEVEL II PRIVILEGES

Physicians requesting Level II privileges must first meet Core privilege requirements.

EEG

Scope of Practice/Privileges: The above named neurologist is expected to read EEG, evoked potentials, sleep, or epilepsy studies.

Minimum Training and Experience The physician must be board certified by the American Clinical Neurophysiology Society, or have certification in neurology with added qualifications in clinical neurophysiology or epilepsy through the American Board of Psychiatry and Neurology, or be within five years of completion of a fellowship in this area. A minimum one-year fellowship is required.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant recordings in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

PET STUDIES

Scope of Practice/Privileges: Reading and interpretation of PET studies.

Minimum Training and Experience A neurologist interpreting PET studies will be Board Certified in Nuclear Medicine. This skill may be acquired clinically, through training by another faculty member or in a specialized training program.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 2 interpretations per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

ICTAL SPECTS

Scope of Practice/Privileges: Interpretation of Ictal Spects

Minimum Training and Experience A neurologist interpreting Ictal Spects will be Board Certified in Nuclear Medicine. This skill may be acquired clinically, through training by another faculty member or in a specialized training program.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 2 interpretations per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum five relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

VAGUS NERVE PROGRAMMING AND STIMULATION

Scope of Practice/Privileges: The above named is expected to program the implant and interpret the results.

Minimum Training and Experience These skills are acquired clinically through special experience or physician-to-physician training with 5 proctored cases and the physician is trained by sole vendor on programming technique.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 1 case per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum two relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

RESPONSIVE NEUROSTIMULATION

Scope of Practice/Privileges: The above named is expected to program the implant and interpret the results.

Minimum Training and Experience These skills are acquired clinically through special experience or physician-to-physician training and the physician is trained by sole vendor on programming technique.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 2 case per year by site medical director for a period one year.

Renewal Criteria: Continued experience documented by performance of a minimum 2 relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

BOTULINUM TOXIN (Movement Disorders)

Scope of Practice/Privileges: Performing botulinum toxin injections for the treatment of a variety of movement disorders.

Minimum Training and Experience This skill is generally acquired through direct training by other neurologists or Psychiatrists who are skilled in this technique. Expertise in this area is generally transmitted from physician to physician, and would be certified through training and observation by a competent physician already on the faculty. This will require at least a one-year movement disorders fellowship including 100 proctored cases.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 2 cases per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

BOTULINUM TOXIN (Headache Medicine)

Scope of Practice/Privileges: Performing botulinum toxin injections for the management of migraines, and chronic neck and back pain.

Minimum Training and Experience: This skill is generally acquired through direct training by other neurologists/pain specialists who are skilled in this technique. Expertise in this area is generally transmitted from physician to physician, and would be certified through training and observation by a competent physician already on the faculty.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Observe 5 botulinum toxin injections by an attending already competent in the procedure. Then physician must then perform 5 injections under direct supervision of attending. Minimum review of 2 cases per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

TRIGGER POINT INJECTION (Headache Medicine)

Scope of Practice/Privileges: Performing trigger point injections for the management of myofascial pain, cervicalgia, and spasm.

Minimum Training and Experience: This skill is generally acquired through direct training by other neurologists/pain specialists who are skilled in this technique. Expertise in this area is generally transmitted from physician to physician, and would be certified through training and observation by a competent physician already on the faculty.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Observe 5 trigger point injections by an attending already competent in the procedure. Then physician must then perform 5 injections under direct supervision of attending. Minimum review of 1 case per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

PERIPHERAL NERVE BLOCK (Headache Medicine)

Scope of Practice/Privileges: Performing peripheral nerve block injections for the management of migraine, cluster headache, occipital neuralgia, secondary headache, other headache syndromes, trigeminal pain and chronic neck pain.

Peripheral nerve block subgroups:

Supra orbital nerve block

Supra trochlear nerve block

Auriculotemple nerve block

Other cranial / neck nerve block

Minimum Training and Experience: This skill is generally acquired through direct training by other neurologists/pain specialists who are skilled in this technique. Expertise in this area is generally transmitted from physician to physician, and would be certified through training and observation by a competent physician already on the faculty.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Observe 5 peripheral nerve block injections by an attending already competent in the procedure. Then physician must then perform 5 injections under direct supervision of attending. Minimum review of 1 case per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

SPHENOPALATINE GANGLION BLOCK (Headache Medicine)

Scope of Practice/Privileges: Performing sphenopalatine ganglion block injections for the management of migraine, cluster headache, secondary headache, other headache syndromes, trigeminal pain, facial pain.

Minimum Training and Experience: This skill is generally acquired through direct training by other neurologists/pain specialists who are skilled in this technique. Expertise in this area is generally transmitted from physician to physician, and would be certified through training and observation by a competent physician already on the faculty.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Observe 5 sphenopalatine ganglion block injections by an attending already competent in the procedure. Then physician must then perform 5 injections under direct supervision of attending. Minimum review of 1 case per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

GREATER OCCIPITAL NERVE BLOCK

Minimum Training and Experience This skill is acquired by reading the reference *Greater occipital nerve block. Semin Neurol. 2003 Mar;23(1):59-62* to obtain further knowledge about the procedure.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Observe 2 blocks under direct supervision of attending. Physician must then perform two blocks under direct supervision of attending. Minimum review of 1 case per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum one relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

ELECTROMYOGRAPHY

Scope of Practice/Privileges: The above named is expected to do and interpret nerve conduction EMG studies.

Minimum Training and Experience The neurologist will be specifically qualified to perform this test after Board certification by the American Board of Electrodiagnostic Medicine or the American Board of Psychiatry and Neurology's added qualifications in either Neuromuscular Disease or Clinical Neurophysiology. In some special instances individuals may be deemed qualified to perform electromyography studies in the absence of a fellowship when ongoing clinical training is directed toward board certification.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

NERVE OR MUSCLE BIOPSIES

Scope of Practice/Privileges: Performing nerve or muscle biopsies.

Minimum Training and Experience: These skills are acquired clinically through special experience or physician-to-physician training and 25 proctored cases.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 1 or more cases per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum five relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

SUPERFICIAL SKIN BIOPSY

Scope of Practice/Privileges: Perform superficial skin biopsy (up to 4 mm) under local anesthesia (1% Lidocaine).

Minimum Training and Experience: These skills are acquired clinically through special experience or physician-to-physician training and 3 proctored cases.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 1 or more cases per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum five relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

INTERPRETATION OF NON-INVASIVE INTRACRANIAL/EXTRACRANIAL VASCULAR STUDIES

Scope of Practice/Privileges: Interpretation of non-invasive intracranial and extracranial vascular studies, including transcranial Doppler.

Minimum Training and Experience: These skills are acquired clinically through special experience or physician-to-physician training and 100 TCD and 100 carotid proctored cases.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 2 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

INTRATHECAL CHEMOTHERAPY/IV CHEMOTHERAPY and SHUNT PROGRAMMING

Scope of Practice/Privileges: Some neurologists will have a particular skill and training in the area of intrathecal chemotherapy, shunt programming and reprogramming and intravenous chemotherapy for oncologic conditions affecting the nervous system.

Minimum Training and Experience: These skills are acquired clinically through special experience or physician-to-physician training and 5 proctored cases during fellowship or other training for the intrathecal work. To master shut programming, mentorship from a qualified clinician including a training session, 2 observed procedures and 2 proctored procedures will be required.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

VESTIBULAR AND OCULAR MOTOR TESTING

Scope of Practice/Privileges Vestibular and ocular motor testing: Reading and interpreting vestibular and ocular motor tests. Includes recording eye movements (typically using electrooculography or video-oculography) at rest, with volitional movements, or triggered by either caloric stimulation, rotational chair, or passive head movements. Posturography a test for quantifying sway while standing on a dynamic platform, is also a component of vestibular testing.

Minimum Training and Experience: Physicians reading and interpreting these tests should have specialized training that includes instruction in the techniques and clinical interpretation of these tests. Training can take place in the form of a fellowship in Neuro-otology or other similar specialized training program. The physician should have at least 30 proctored cases.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Renewal Criteria: Continued experience documented by performance of a minimum ten relevant cases in the previous privileging period.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

Education Privilege - STROKE MEDICINE (Practicing Specialist gaining additional training)

Minimum Training and Experience A practicing specialist gaining additional training in the field of stroke medicine must have either an MD or DO degree. All physicians are expected to have completed an accredited residency and be board eligible or certified in neurology, emergency medicine or neurosurgery.

Scope of Practice/Privileges A physician must be skilled in the evaluation and treatment of medical disorders. Under the guidance of a Neurology or Emergency Medicine attending with expertise in stroke medicine, the physician will perform evaluations of patients with cerebrovascular disease. The stroke evaluation includes detailed performance of the general medical examination, neurologic history and examination, and interpretations of reports of radiologic and laboratory data. The physician must be able to: 1. develop provisional diagnoses and differential diagnoses, 2. decide on utilization of tests for further evaluation of the illness, 3. communicate a plan with the patient and/or caregiver and the referring physician, 4. review and interpret any additional ordered tests, 5. render a therapeutic plan.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

Education Privilege - SPORTS NEUROLOGY (Practicing Specialist gaining additional training)

Minimum Training and Experience A practicing specialist in sports neurology must have completed an MD or DO degree; an accredited residency and be board eligible or certified in neurology, pediatric neurology, neurosurgery or physical medicine and rehabilitation.

Scope of Practice/Privileges A physician must be skilled in the evaluation and treatment of medical disorders. Under the guidance of an attending physician skilled in Sports Neurology, the physician will perform evaluations of athlete patients with neurological injuries or disease. The sports neurology evaluation includes detailed performance of the general medical examination, neurologic history and examination, and interpretations of reports of radiologic and laboratory data. The physician must be able to: (1) develop provisional diagnoses and differential diagnoses, (2) decide on utilization of tests for further evaluation of the illness, (3) communicate a plan with the patient and/or caregiver and (4) perform these tasks in a variety of athletic environments.

FPPE Monitoring Requirements for New Hire or Adding Privilege: Minimum review of 5 charts per month by site medical director for a period of six months.

Requested (Applicant)

Recommended approval (Service Chief/Chair)

SPECIAL PRIVILEGES

A separate application is required to apply or reapply for the following Special Privileges:

- Chemotherapy for Non-Oncologists (MC-IP1027E Chemotherapy Authorizing Provider)
- Fluoroscopy (RADI-10100 Fluoroscopy Privileging)
- Hyperbaric Oxygen Therapy (<http://www.med.umich.edu/i/oca/mss/hbot.htm>)
- Laser (OPER-1011 Laser Privileging)
- Robotics (RADI-10102 Privileges for Use of the Robotic Surgical Platform)
- Sedation Analgesia (ANES-28048 Moderate Sedation, ANES-20023 Deep Sedation)

Applications can be found in [MLearning](#) for all these privileges with the exception of Hyperbaric Oxygen Therapy. Please go to [MLearning](#) to access and complete the associated learning module and privileging form. Please contact Medical Staff Services at (734) 647-6865 with any questions.

TO BE COMPLETED BY APPLICANT:

I meet the previously stated criteria and request that my application be considered for the privileges as outlined above. I authorize and release from liability, any hospital, licensing board, certification board, individual or institution who in good faith and without malice, provides necessary information for the verification of my professional credentials for membership to the Medical Staff of the University of Michigan Health System.

Applicant Signature: _____ Date: _____

DEPARTMENT ACTION

Approval: _____ As Requested _____ As Modified

Explain any modifications:

I have reviewed and/or discussed the privileges requested and find them to be commensurate with his/her training and experience, and recommend that his/her application proceed.

Justification for approval is based on careful review of the applicant's education, postgraduate clinical training, demonstrated clinical proficiency and Board Certification or qualifications to sit for the Boards.

Department Chair: _____ Date: _____

Service Chief: _____ Date: _____

CREDENTIALS COMMITTEE ACTION

Approval: _____ As Requested _____ As Modified _____ Disapproved

Explanation for any modification/disapproval:

Credentials Committee Member: _____ Date: _____

EXECUTIVE COMMITTEE ON CLINICAL AFFAIRS ACTION

Approval: _____ As Requested _____ As Modified _____ Disapproved

Explanation for any modification/disapproval:

Executive Committee on Clinical Affairs Member: _____ Date: _____