



University of Michigan Hospitals and Health Centers

UNIVERSITY OF MICHIGAN HOSPITALS AND HEALTH CENTERS

**Delineation of Privileges
Department of Pediatrics/Division of Pediatric Cardiology**

Name: _____
Please Print or Type

Department: _____ Division/Section: _____

LEVEL I

Core Privileges

Scope of Practice/Privileges

The scope of practice of Pediatric Cardiology also includes the core privileges of General Pediatrics. The scope include the diagnosis, management, treatment and prevention of cardiovascular illness, congenital or acquired, simple or complex, in the fetus, infant, child, adolescent, and adults with congenital heart disease. Included are injuries, conditions or the performance of procedures that may carry a serious threat to life. Emergency privileges are extended to members of the staff under life threatening emergency situations (i.e., intubation and tracheotomy, transvenous pacemakers, balloon septostomy, etc).

Included in the core practice of Pediatric Cardiology are the following activities:

(P) Performance (I) Interpretation:

General Non-invasive Assessment:

- Resting electrocardiogram (P&I)
- Exercise electrocardiogram stress test (P&I)
- Holter electrocardiogram monitor (P&I)
- Event electrocardiogram recordings (P&I)
- M-Mode and 2-D transthoracic echocardiograms with color flow and Doppler recordings (P&I);
- Gated blood pool scans (MUGA) (I)
- Pacemaker evaluation (P&I)

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Privileges also include the following representative list, but it is not intended to be all-encompassing, but rather to reflect the categories/types of patient problems included in the description of privileges.

- Admit, diagnose, evaluate, consult, and treat children/adolescents with acquired or congenital cardiovascular disease.
- Admit, diagnose, evaluate, consult, and treat adults with congenital cardiovascular disease.
- Cardiac Pacing
- Cardiac surgery, preoperative and postoperative care
- Cardioversion
- Defibrillation
- Dysrhythmias
- Echocardiography
- Electrocardiography
- Electrophysiology
- Infective endocarditis
- Nuclear imaging of heart, interpret
- Pericardiocentesis
- Rheumatic fever
- Right heart catheter, insert/manage
- Subdural taps
- Thoracentesis

General procedures/privileges include:

- Intubation
- Peripheral arterial line percutaneous or cut down
- Peripheral venous line percutaneous or cut-down
- Thoracentesis, emergency
- Peripheral arterial puncture
- Pericardiocentesis, emergency
- Ventilatory care of neonates
- Supervision of administration and provision of anesthesia (sedation) using IV/IM/intranasal medication
- Cardioversion
- Umbilical artery catheter
- Central venous catheters
- Tilt table testing

Minimum Training and Experience

All new & current faculty must have: MD, DO or equivalent international medical degree; successful completion of an approved residency training program in Pediatrics; successful completion of any approved fellowship training program in Pediatric Cardiology; applicant must be Board eligible or certified in Pediatric Cardiology or international equivalent. Certification to be completed within five years of initial appointment or is in the process of completing certification following a protocol that has been approved by the Division Chief and Department Chair.

New Faculty: Two letters of reference from colleagues aware of applicant's performance must be included and Request for privileges immediately following fellowship must also include a letter of good standing from the Director of the Fellowship program completed.

Current Faculty: Continued experience in the area is documented by schedule assignment to the inpatient and/or outpatient consultative services. A minimum of 1 month attending on the inpatient service or attending for at least 50 outpatient consultations within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

LEVEL II

Scope of Practice/Privileges

Interpretation and performance of Transesophageal Echocardiography

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program; documentation of experience in performing and interpreting at least 50 transesophageal echocardiograms; two letters of recommendation attesting to competence in the area, and the applicant must be observed performing the procedure by a member of the medical staff who has current privileges and competence in the specific procedure.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 20 procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Exercise and Pharmacologic Stress Echocardiography

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program; documentation of experience in performing and interpreting at least 50 stress echocardiograms; two letters of recommendation attesting to competence in the area, and the applicant must be observed performing the procedure and found competent in that specific procedure by a member of the medical staff who has current privileges and competence in that specific procedure.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 10 procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Fetal Echocardiography

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program; documentation of experience in performing and interpreting at least 50 Fetal echocardiograms; two letters of recommendation attesting to competence in the area; the applicant must be observed performing the procedure and found competent in that specific procedure by a member of the medical staff who has current privileges and competence in the specific procedure.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 20 procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Transesophageal electrophysiology with and without arrhythmia conversion

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program in the past five years, or documentation of experience in performing and interpreting at least 20 Transesophageal electrophysiological procedures, or two letters of recommendation attesting to competence in the area.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 5 procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Intracardiac Electrophysiology Study and/or Ablation

Minimum Training and Experience

All Faculty: Level I Minimal Training and Experience

New Faculty: Successful completion of an approved fellowship program, or practice experience of 10 years or more consisting of at least 50% electrophysiology activity, and performance of 200 such procedures; two letters of recommendation attesting to competence in the area.

Current Faculty: Continued experience in the area as documented by schedule assignment with a minimum of 50 procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Implantation of Cardiac Rhythm Devices (Pacemaker, implanted defibrillator, cardiac resynchronization (CRT) pacemaker or defibrillator, leads, implanted loop recorder), device explantation

Minimum Training and Experience

All Faculty: Level I Minimal Training and Experience

New Faculty: Successful completion of an approved fellowship program, or practice experience of 10 years or more consisting of at least 50% electrophysiology activity, and documented performance of 100 such procedures; two letters of recommendation attesting to competence in the area.

Current Faculty: Continued experience in the area as documented by schedule assignment with a minimum of 20 procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Pacemaker and Implanted Defibrillator Lead Extraction

Minimum Training and Experience

All Faculty: Level I Minimal Training and Experience

New Faculty: Successful completion of an approved fellowship program, or practice experience of 10 years or more consisting of at least 50% electrophysiology activity, and documented performance of 10 such procedures; two letters of recommendation attesting to competence in the area.

Current Faculty: Continued experience in the area as documented by schedule assignment with a minimum of 5 such procedures performed within the previous privileging period.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Cardiac ICU

Minimum Training and Experience

All Faculty: Level I Minimal Training and Experience.

New Faculty: Successful completion of an approved fellowship program; two letters of recommendation attesting to competence in the area; procedural competency as attested by a faculty member with current privileges and competence in the specific procedure; board certification within 3 years of initial appointment.

Current Faculty: Continued experience in pediatric cardiac intensive care as documented by scheduled assignment of at least 3 weeks service time or 5 weekends on-call annually; subspecialty board certification.

Under exceptional circumstances, the Division Chief and Department Chair can recommend to the Hospital Executive Board (via the Credentials Committee and ECCA) that the Board requirement be waived.

Physicians with these privileges have the highest level of competence in Pediatric Cardiac Intensive Care Medicine on a par with that considered appropriate for a sub-specialist. They are qualified to act as consultants from within or from outside the medical center whenever needed.

Included in the practice of Pediatric Cardiac Intensive Care Medicine are the following activities:

- Central venous cannulation
- Peripheral and central arterial cannulation
- Arterial puncture for blood gases
- Lumbar puncture
- Placement of pulmonary artery catheters
- Nasogastric tube insertion
- Urethral catheterization
- Abdominal paracentesis and catheter placement
- Thoracocentesis and chest tube placement
- Pericardiocentesis and placement of a pericardial drain
- Hemodynamic and cardiovascular monitoring
- ECG interpretation and arrhythmia management
- Endotracheal intubation and management of mechanical ventilation
- Cardiopulmonary resuscitation
- High frequency ventilation
- Cardioversion (DC, atrial overdrive pacing, transesophageal overdrive pacing)
- (Rashkind) balloon atrial septostomy
- Bronchoscopy with lavage and brushing
- Basic suturing techniques
- Placement of temporary transvenous pacing catheters
- Cardiac extracorporeal membrane oxygenation and other mechanical support
- PICC placement
- Left and right heart catheterization and angiography

► **Requested (Applicant)** **Recommended approval (Service Chief/Chair)**

Scope of Practice/Privileges

General Invasive Cardiac Procedures

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program; documentation of experience in performing and interpreting at least 100 invasive catheterizations; two letters of recommendation attesting to competence in the area; the applicant must be observed performing the procedure and found competent in that specific procedure by a member of the medical staff who has current privileges and competence in the specific procedure.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 25 procedures performed within the previous privileging period.

Including: arterial and venous catheters including umbilical and central venous catheters, pulmonary artery catheters, temporary transvenous and transthoracic pacemakers, left and right heart catheterization and angiography, endomyocardial biopsy, elective pericardiocentesis, PIC line placement, and balloon atrial septostomy, coil embolization, transseptal transhepatic.

► Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Pacemaker Evaluation with Programming

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program in the past five years, or documentation of experience in performing and interpreting at least 50 pacemaker evaluations, or two letters of recommendation attesting to competence in the area.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 5 procedures performed within the previous privileging period.

► Requested (Applicant) Recommended approval (Service Chief/Chair)

LEVEL III

Scope of Practice/Privileges

Interventional Cardiac Catheterization

Including- Coil embolization in venous/arterial vessels, stent placement, balloon angioplasty/valvuloplasty, transseptal cardiac catheterization, transhepatic cardiac catheterization, percutaneous valvuloplasty (neonates), blade septostomy, catheter device implantation and foreign body retrieval.

Minimum Training and Experience

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program (it is desirable but not mandatory that the individual has completed 1 year of specialized training in interventional cardiology); documentation of experience in performing and interpreting at least 50 interventional catheterizations; three letters of recommendation attesting to competence in the area; the applicant must be observed performing the procedure and found competent in that specific procedure by a member of the medical staff who has current privileges and competence in the specific procedure.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 25 procedures performed within the previous privileging period.

► Requested (Applicant) Recommended approval (Service Chief/Chair)

Scope of Practice/Privileges

Invasive Electrophysiologic Studies and Treatment.

Including: Intravenous electrophysiological programmed stimulation, intravenous electrophysiological mapping, transvenous pacemaker implantation, transvenous defibrillator placement, and transvenous arrhythmia ablation.

Minimum Training and Experience:

All Faculty: Level I Minimal Training and experience.

New Faculty: Completion of an approved Fellowship program (it is desirable but not mandatory that the individual has completed 1 year of specialized training in pediatric electrophysiology); documentation of experience in performing and interpreting at least 50 invasive electrophysiological procedures and ablations; three letters of recommendation attesting to competence in the area; the applicant must be observed performing the procedure and found competent in that specific procedure by a member of the medical staff who has current privileges and competence in the specific procedure.

Current Faculty: Continued experience in the area is documented by schedule assignment with a minimum of at least 25 procedures performed within the previous privileging period.

► Requested (Applicant) Recommended approval (Service Chief/Chair)

SPECIAL EDUCATION AND RESEARCH POSITIONS

Scope of Practice/Privileges

The practice of Pediatric Cardiology includes providing ongoing education and research opportunities that may be offered to physicians that are beyond the level of trainees, and certified in overlapping fields of interest such as Pediatric intensive Care, Adult Cardiology, or Med/Peds. Privileges for these positions would include the core privileges of General Pediatrics and/or Internal Medicine.

All duties will be performed under the supervision of an identified Pediatric Cardiologist or group of Pediatric Cardiologists appropriately credentialed in the areas to be mentored, and with a mentoring program outlined in a separately attached document. These special education/research positions would be credentialed in Pediatric Cardiology with the determination of the competence of the applicant based on the judgment of the Division Chief, with the input of the supervising Cardiologist(s), and the use of treatment and quality measures. These positions would usually be limited to one credentialing period (two years).

Minimum Training and Experience

Basic education would include an MD, DO, or international equivalent medical degree; successful completion of an approved residency program in Pediatrics, Med/Peds, or Internal Medicine. The applicant must be Board eligible or certified in Pediatrics, Med/Peds, or Internal Medicine, or international equivalent, with active participation in the care of patients during the past 12 months. Two letters of reference are required from colleagues aware of the applicant's performance, with direct reference to clinical knowledge and skills.

▶ Requested (Applicant) Recommended approval (Service Chief/Chair)

SPECIAL PRIVILEGES

A separate application is required to APPLY or REAPPLY for the following Special Privileges:

- ▶ FLUOROSCOPY
- ▶ LASER
- ▶ ROBOTIC SURGICAL PLATFORM
- ▶ SEDATION PRIVILEGES FOR A NON-ANESTHESIOLOGIST

PLEASE go to URL: www.med.umich.edu/i/oca for instructions, or contact your Clinical Department Representative.

TO BE COMPLETED BY APPLICANT:

I meet the previously stated minimum 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 (please explain) _____

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 _____ Not Approved (please explain) _____

Credentials Committee Member: _____ Date: _____

EXECUTIVE COMMITTEE ON CLINICAL AFFAIRS ACTION:

_____ Approval as Requested _____ Not Approved (please explain) _____

Executive Committee On Clinical Affairs - Member: _____ Date: _____