

# Obstetrics and Gynecology Clinical Privileges

Name: \_\_\_\_\_

Effective from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

- Initial privileges (initial appointment)       Renewal of privileges (reappointment)

All new applicants should meet the following requirements as approved by the governing body, effective: April 30, 2015

**Applicant:** Check the “Requested” box for each privilege requested. Applicants are responsible for producing required documentation for a proper evaluation of current skill, current clinical activity, and other qualifications and for resolving any doubts related to qualifications for requested privileges. Please provide this supporting information separately.

**[Department/Program Head or Leaders/ Chief]:** Check the appropriate box for recommendation on the last page of this form and include your recommendation for any required evaluation. If recommended with conditions or not recommended, provide the condition or explanation on the last page of this form.

Current experience is an estimate of the level of activity below which a collegial discussion about support should be triggered. It is not a disqualifier. This discussion should be guided not only by the expectations and standards outlined in the dictionary but also by the risks inherent in the privilege being discussed and by similar activities that contribute to the skill under consideration. This is an opportunity to reflect with a respected colleague on one’s professional practice and to deliberately plan an approach to skills maintenance.

## Other requirements

- Note that privileges granted may only be exercised at the site(s) and/or setting(s) that have sufficient space, equipment, staffing, and other resources required to support the privilege.
- This document is focused on defining qualifications related to skill to exercise clinical privileges. The applicant must also adhere to any additional organizational, regulatory, or accreditation requirements that the organization is obligated to meet.

**Note:** The dictionary will be reviewed over time to ensure it is reflective of current practices, procedures and technologies.



# Obstetrics and Gynecology Clinical Privileges

**Grandparenting:** Practitioners holding privileges prior to implementation of the dictionary will continue to hold those privileges as long as they meet current experience and quality requirements.

## Description

Obstetrics and Gynecology is that branch of medicine concerned with the study of women's health and reproduction. The specialty encompasses medical, surgical and obstetrical and gynecologic knowledge and skills for the prevention, diagnosis and management of a broad range of conditions affecting women's general and reproductive health. Specialists in Obstetrics and Gynecology provide clinical care and education in normal and complicated Obstetrics and Gynecology.

## Qualifications for Obstetrics and Gynecology

**Initial privileges:** To be eligible to apply for privileges in Obstetrics and Gynecology, the applicant should meet the following criteria:

Be recognized as a specialist in Obstetrics and Gynecology by the College of Physicians and Surgeons of British Columbia (CPSBC)

AND

**Recommended current experience:** 480 hours a year of practice, averaged over the past 24 months, reflective of the scope of privileges requested, based on successful ongoing professional practice evaluation.

**OR** successful completion of a Royal College accredited residency training program or clinical fellowship within the previous 24 months

**Renewal of privileges:** To be eligible to renew privileges in Obstetrics and Gynecology, the applicant should meet the following criteria: 480 hours a year of practice, averaged over the past 36 months, reflective of the scope of privileges requested, based on successful ongoing professional practice evaluation.

**Return to practice (for core privileges):** Individualized assessment and period of supervision to demonstrate skill.

# Obstetrics and Gynecology Clinical Privileges

## **Core privileges:**

Core privileges are offered to ALL members in the discipline as long as the facility can support those activities.

- Requested** Obstetrics
- Requested** Gynecology

Evaluate, diagnose, treat, and provide consultation to patients and/ or provide medical and surgical care of the female reproductive system, genitourinary system, alimentary system, and associated disorders. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

## **Core privileges: Admitting Privileges**

- Requested: Full Admitting – Obstetrics**
- Requested: Full Admitting – Gynecology**

## **Core procedures list: Obstetrics**

This is not intended to be an all-encompassing procedures list. It defines the types of activities/procedures/privileges that the majority of practitioners in this specialty perform in British Columbia and inherent activities/procedures/privileges requiring similar skill sets and techniques.

**To the applicant:** If there is a procedure you wish to NOT perform, then please type into the *Comments* field.

## **Obstetrics**

- Management of pregnancy, labour and delivery and any associated complications for singleton and multiple pregnancies
- External cephalic version (ECV)
- Low or outlet operative vaginal delivery using vacuum or forceps
- Repair of perineal and vaginal tears, including third and fourth degree tears and cervical lacerations
- Cesarean section

## Obstetrics and Gynecology Clinical Privileges

- Evacuation of the pregnant uterus: dilation and curettage up to 14 weeks in size
- Mid-trimester termination of pregnancy by induction of labour
- Manual removal of the placenta
- Cesarean hysterectomy
- Repair of uterine rupture
- Paracervical block and pudendal block
- Management of post-partum hemorrhage
- Vaginal cerclage
- Cystotomy repair

### Neonatal Care

- Basic neonatal resuscitation

### ***Core procedures list: Gynecology***

#### Open Gynecologic Procedures

- Total abdominal hysterectomy
- Salpingectomy
- Salpingo-oophorectomy
- Ovarian cystectomy
- Management of ectopic pregnancy
- Abdominal myomectomy
- Omentectomy
- Peritoneal biopsy

#### Vaginal Gynecologic Procedures

- Vaginal hysterectomy
- Salpingectomy
- Salpingo-oophorectomy
- Anterior colporrhaphy
- Posterior colporrhaphy and perineorrhaphy
- Drainage and marsupialization of Bartholin's gland abscess
- Dilatation and curettage

#### Minimally Invasive Procedures

- Diagnostic laparoscopy with assessment of tubal patency

## Obstetrics and Gynecology Clinical Privileges

- Laparoscopic sterilization
- Management of ectopic pregnancy
- Laparoscopic lysis of adhesions
- Laparoscopic Salpingectomy
- Laparoscopic ovarian cystectomy and salpingo-oophorectomy
- Diagnostic hysteroscopy
- Hysteroscopic endometrial sampling and polyp removal
- Ablative procedures of the endometrium
- Perioperative cystoscopy
- Cystotomy repair

### Non-core Privileges (See Specific Criteria)

Non-core privileges may be requested by individuals who have further training, experience and demonstrated skill.

Non-core privileges are requested individually in addition to requesting the core privileges in obstetrics or gynecology.

Each individual requesting non-core privileges should meet the specific threshold criteria as outlined.

### ***Non-core privileges: Obstetric Procedures***

- Requested** Maturity amniocentesis
- Requested** Genetic amniocentesis
- Requested** Evacuation of the pregnant uterus (dilation and extraction) > 14 weeks size
- Requested** Mid-cavity operative delivery
- Requested** Rotational forceps delivery (greater than 90<sup>0</sup>)
- Requested** Vaginal breech delivery
- Requested** Abdominal cerclage
- Requested** Ultrasound for extension of clinical care

[DESIGNATED A RESTRICTED SERVICE BY THE MEDICAL SERVICES COMMISSION]

- Requested** Ultrasound first trimester

[DESIGNATED A RESTRICTED SERVICE BY THE MEDICAL SERVICES COMMISSION]

# Obstetrics and Gynecology Clinical Privileges

**Initial privileges:** Successful completion of training in the requested non-core obstetric procedures

**AND**

**Recommended current experience:** Certification of skill by the department head or chief of staff of the last hospital where privileges have been held or successful completion of training in the requested non-core obstetrical procedures within the previous 24 months

**Renewal of privileges:** To be eligible to renew privileges in the requested non-core obstetric procedure, the applicant should meet the following criteria:

- Discussion of the indications, experience and training involved with the department head or chief of staff.
- For first trimester ultrasound, CME averaging 8 hours a year over three years (requires MFM comment)

**Return to practice:** Individualized assessment and period of supervision to demonstrate skill.

## ***Non-core privileges: Gynecologic Procedures***

- Requested** Laparoscopic hysterectomy
- Requested** Operative hysteroscopy: lysis of synechiae, resection of submucous leiomyomata or uterine septum
- Requested** Operative laparoscopy for stage 3 endometriosis
- Requested** Colposcopy, Loop Electrosurgical Excision Procedure (LEEP), cervical conization
- Requested** Laser treatment of lower genital tract
- Requested** Tubal reanastomosis, neosalpingostomy and tuboplasty
- Requested** Presacral neurectomy
- Requested** Retrograde insertion of ureteric stents
- Requested** Myocutaneous flaps, skin grafting
- Requested** Gynecological ultrasound & transvaginal ultrasound

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## Obstetrics and Gynecology Clinical Privileges

- Requested** Trachelectomy
- Requested** Lymphadenectomies (pelvic)
- Requested** Hysterosalpingogram
- Requested** Resection of uterine septum
- Requested** Appendectomy
- Requested** Transvaginal ultrasound for egg retrieval

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- Requested** Artificial insemination
- Requested** Management of ovarian hyperstimulation
- Requested** Reversal of tubal sterilization
- Requested** Sono-hysterosalpingogram
- Requested** Neosalpingostomy and tuboplasty
- Requested** Treatment of advanced endometriosis
- Requested** Polypectomy
- Requested** Lysis of adhesions
- Requested** Resection of uterine septum
- Requested** Sterilization

**Initial privileges:** Successful completion of training in the above requested non-core gynecologic procedures

**AND**

**Recommended current experience:** Certification of skill by the department head or chief of staff of the last hospital where privileges have been held or successful completion of training in the above requested non-core gynecologic-procedures within the previous 24 months

**Renewal of privileges:** To be eligible to renew privileges in the above requested non-core gynecologic-procedure, the applicant should meet the following criteria:

- Evidence of adequate volume of patients needing the procedure to maintain the skill of the last 36 months.
- Discussion of the indications, experience and training involved with the department head or chief of staff.



# Obstetrics and Gynecology Clinical Privileges

**Return to practice:** Individualized assessment and period of supervision to demonstrate skill in the above requested privilege(s).

## Non-core privilege: Female Pelvic Medicine and Reconstructive Surgery (Urogynecology)

### Genitourinary procedures

- Requested** Urodynamic testing
- Requested** Diagnostic cystoscopy
- Requested** Periurethral bulking injections
- Requested** Retropubic urethropexy
- Requested** Mid-urethral sling
- Requested** Fascial sling procedures (including harvest of graft)
- Requested** Management of anatomic outlet obstruction
- Requested** Revision or removal of graft material
- Requested** Neuromodulation implantation
- Requested** Intravesical botox injection
- Requested** Urinary tract fistula repair
- Requested** Urethral diverticulum repair
- Requested** Ureteric re-implantation

### Colorectal procedures

- Requested** Sphincteroplasty
- Requested** Colostomy
- Requested** Bowel resection
- Requested** Recto-vaginal fistula repair
- Requested** Proctosigmoidoscopy
- Requested** Rectal prolapse repair

### Pelvic organ prolapse procedures

- Requested** Vaginal apical prolapse repair
- Requested** Abdominal apical prolapse repair
- Requested** Laparoscopic apical prolapse repair
- Requested** Obliterative repairs: including colpocliesis, colectomy



## Obstetrics and Gynecology Clinical Privileges

- Requested** Prolapse procedure with graft
- Requested** Rectal prolapse repair

### Initial privileges:

- Be recognized as a specialist in Obstetrics and Gynecology by the College of Physicians and Surgeons of British Columbia (CPSBC)
- Have documented additional training in those aspects of Female Pelvic Medicine and Reconstructive Surgery (FPMRS) for which privileges are sought, including training during residency, a subsequent fellowship or preceptorship.

### AND

**Recommended current experience:** 480 hours of practice per year, (of which 320 hours are dedicated to the FPMRS privileges requested), averaged over the past 24 months.

**Renewal of privileges:** To be eligible to renew privileges in FPMRS, the applicant should meet the following criteria:

480 hours of practice per year, (of which 320 hours are dedicated to the FPMRS privileges requested), averaged over the past 36 months, and based on successful ongoing professional practice evaluation.

**Return to practice:** Individualized assessment and period of supervision to demonstrate skill in the requested FPMRS privilege(s).

### Non-core privilege: Prepubertal (Pediatric) and Adolescent Gynecology

- Requested** repair of straddle injury
- Requested** Diagnostic vaginotomy
- Requested** laparoscopic ovarian detorsion and/or oophoropexy in children < 12 years of age
- Requested** labial surgery on adolescents <18 years of age
- Requested** hymenectomy
- Requested** resection of transverse vaginal septum
- Requested** resection of longitudinal vaginal septum

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- Requested** medical and surgical management of neovagina
- Requested** revision genitoplasty
- Requested** clitoroplasty

### Initial privileges:

- Be recognized as a specialist in Obstetrics and Gynecology by the College of Physicians and Surgeons of British Columbia (CPSBC)
- Have documented additional training in those aspects of Prepubertal (Pediatric) and Adolescent Gynecology (PAG) for which privileges are sought, including training during residency, a subsequent fellowship or preceptorship.

### AND

**Recommended current experience:** 480 hours of practice per year, (of which 320 hours are dedicated to the PAG privileges requested), averaged over the past 24 months.

**Renewal of privileges:** To be eligible to renew privileges in PAG, the applicant should meet the following criteria:

480 hours of practice per year, (of which 320 hours are dedicated to the PAG privileges requested), averaged over the past 36 months, and based on successful ongoing professional practice evaluation.

**Return to practice:** Individualized assessment and period of supervision to demonstrate skill.

### Context Specific Privileges

Context refers to the capacity of a facility to support an activity

### *Administration of sedation and analgesia*

- Requested**

See “Hospital Policy for Sedation and Analgesia by Nonanesthesiologists”

# Obstetrics and Gynecology Clinical Privileges

## Process for requesting privileges not included in the dictionary

Where a member of the medical staff requests a privilege not included in the core, non-core or context specific privileges for a discipline, the following process will be followed.

1. The practitioner will request a **Change Request Form** from the Medical Affairs Office. This will be submitted to the head of department or chief of staff as part of the electronic application process
2. The practitioner will complete the privileges section of the **Change Request Form** and submit with the following information; the privilege requested, the location within the facility where the privilege would be exercised, and the relevant training and experience held by the practitioner in this area.
3. The department head or chief of staff, in consultation with the senior medical administrator and medical administrator responsible for the facility, will determine if the requested privilege can be supported at that site.
4. Where it is deemed appropriate, the practitioner, the department head or chief of staff and the senior medical administrator will agree on any additional training required, and a minimum level of activity required to maintain the privilege. The specific minimum number requirement indicating the level of experience needed to demonstrate skill to obtain clinical privileges for the requested procedure must be evidence-based. Where no supporting literature exists for a specific number, the criteria are established by the consensus of a multidisciplinary group of practitioners who do not have self-interest in creating an artificially high volume requirement.
5. Any additional training will be done in a facility that normally trains practitioners in this activity. Exceptions may be granted in circumstances where all that is required is training by a member of the medical staff who holds the privilege in question.
6. On satisfactory completion of training, the department head or chief of staff may recommend to the governing body through the medical advisory committee that the privilege be granted.

The privileging dictionaries on this site ([bcmqi.ca](http://bcmqi.ca)) are the official versions. They will be reviewed beginning in 2016. In the meantime if you have any questions or comments please contact your medical administration office or the BC MQI Office by completing the [Provincial Privileging Dictionary Feedback form](#).

# Obstetrics and Gynecology Clinical Privileges

## Acknowledgment of Practitioner

I have requested only those privileges for which by education, training, current experience, and demonstrated performance I am qualified to perform and for which I wish to exercise at the facility I am applying, and I understand that:

- a. In exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation.
- b. Any restriction on the clinical privileges granted to me is waived in an emergency situation, and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## Department/Program Head or Leaders/Chief's Recommendation

I have reviewed the requested clinical privileges and supporting documentation for the above-named applicant and:

- Recommend all requested privileges
- Recommend privileges with the following conditions/modifications:
- Do not recommend the following requested privileges:

Privilege Condition/modification/explanation

Notes:

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Name of Department / Division / Program: \_\_\_\_\_

Name of Medical Leader: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_