

# BARIATRIC SURGERY CLINICAL PRIVILEGES

St. Dominic Jackson – Memorial Hospital

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

Initial privileges (initial appointment)

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

Renewal of privileges (reappointment)

All new applicants must meet the following requirements as approved by the Board of Directors, effective: 8/27/2015

If any privileges are covered by an exclusive contract or an employment contract, practitioners who are not party to the contract are not eligible to request the privilege(s), regardless of education, training, and experience. Exclusive or employment contracts are indicated by [EC].

**Applicant:** Check the “Requested” box for each privilege requested. Applicants have the burden of producing information deemed adequate by the hospital for a proper evaluation of current competence, current clinical activity, and other qualifications, and for resolving any doubts related to qualifications for requested privileges.

**Department Chair/Service Chief:** Check the appropriate box for recommendation next to each privilege requested and complete the recommendation section located on the last page of this form. If recommend with conditions or not recommended, provide the condition or explanation on the last page of this form.

**Other requirements:** This document is focused on defining qualifications related to competency to exercise clinical privileges. The applicant must also adhere to any additional organization, regulatory, or accreditation requirements that the organization is obligated to meet.

## ACCEPTED STANDARD BARIATRIC PROCEDURES

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### Non-stapling:

Laparoscopic Adjustable Gastric Banding

### Stapling:

Laparoscopic/Open Roux en Y gastric bypass

Laparoscopic/Open Vertical Sleeve Gastrectomy

Revision/Conversion of previous Bariatric Surgery

Urgent/Emergent operations for complications of bariatric surgery

Robotic Bariatric Surgery

*Any additional weight loss procedures not on the above accepted standard bariatric procedures listing must be approved by the Credentials Committee upon recommendation from the Bariatric Surgical Director.*

## QUALIFICATIONS FOR BARIATRIC SURGERY

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**In order to qualify for Bariatric Surgery Privileges, all applicants (initial and reappointment) must meet the following criteria:**

- Successful completion of an ACGME approved General Surgery Residency Program
- Current certification, recertification, or active participation in the examination process leading to certification in General Surgery by the American Board of General Surgery or the American Board of Osteopathic Board of Surgery

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- Current state licensure in good standing
- If currently a member of the St. Dominic’s Medical Staff, must be an unrestricted member in good standing with privileges to perform both open and advanced laparoscopic procedures involving stapling and division of the gastrointestinal and biliary tracts.
- Laparoscopic procedures must be specified, as must open procedures. If laparoscopic procedures are requested, there is a requirement to also request open procedures in case a conversion procedure is occasionally necessary.
- Be a member of the American Society for Metabolic and Bariatric Surgeons (ASMBS), Society of Gastrointestinal and Endoscopic Surgeons (SAGES) or have pending application. Acceptance should occur within one year of application.
- The surgeon will actively participate in MBSAQIP and adhere to its standards by implementing changes in practice in accordance with feedback from MBSAQIP or equivalent regional/national quality improvement program.
- Must provide evidence of participation in the multidisciplinary care of the Bariatric patient in the outpatient setting. Specifically, the surgeon will only perform surgery on patients who have been through designated bariatric program affiliated with this facility and in keeping with the facility’s established bariatric clinical pathways. This is to include pre-operative work up, short term and long term follow up within the bariatric program. Other documentation to be considered includes:
  - Evidence of participation in public education sessions
  - Support group activities
  - Other integrated multidisciplinary activity
- Surgeon must complete a minimum of 8 Category 1 CME hours in bariatric surgery specific courses every year.
- Will maintain appropriate call coverage with a colleague who is responsible for the emergency care of the bariatric patient – including the full range of complications associated with metabolic and bariatric surgery.
- Applicant must provide evidence of specific malpractice liability coverage for Bariatric procedures.
- Must meet one of the training pathways for bariatric surgery outlined below.

## TRAINING PATHWAYS FOR BARIATRIC SURGERY

**In order to qualify for Bariatric Surgery Privileges, initial applicants must meet one of the following training pathways for Bariatric Surgery:**

- **Completed Residency in General Surgery with Bariatric Experience or a Bariatric Fellowship**
  - Applicant must have evidence of completion of a Residency in General Surgery, or applicant must have completed a General Surgery Residency followed by either a Fellowship in Bariatric Surgery or Minimally Invasive Surgery.

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- Must have a recommendation from Metabolic and Bariatric Director verifying the applicant’s case log and evidence of sufficient training in those bariatric procedures that are requested in the application for privileges.
  - Provide a case log of Bariatric procedures including outcomes:
    - At least 50 procedures total
    - 25 as the primary surgeon
    - 3 open procedures that involve the stapling or division of the GI Tract
    - At least 8 bariatric procedures performed during the last 24 months (proctoring may be an accepted alternative for those providers who have not performed the required 8 cases).
  - The outcomes should demonstrate that there has been no substantial deviation from national norms.
- **Established Surgeon Without Fellowship or Residency Bariatric Experience**
    - Applicant must provide evidence of attendance at an ASMBS approved structured course on Bariatric surgery. If the applicant is seeking privileges for bariatric banding, they must show evidence of a band specific structured course. The course must include both didactic presentations as well as the technical aspects of performing the procedure(s).
    - Prior to obtaining privileges for Bariatric procedures, the Applicant must demonstrate a case history of at least 50 advanced laparoscopic procedures that require intra-corporeal suturing, stapling, tissue dissection, and energy device usage, such as laparoscopic Nissen fundoplication, colon resection, etc.
    - Must demonstrate case history of at least 3 “open” surgical procedures that involve stapling and division of the gastrointestinal tract (Example: subtotal gastric resection with reconstruction). The Metabolic and Bariatric Committee will review the case history and make recommendations to the Credentials Committee. The Credentials Committee should decide if the surgeon’s case history warrants additional experience.
    - Must provide documentation in writing to the MBSC of at least three (3) proctored Bariatric procedures of each type for a total of 10 procedures if more than one Bariatric technique is requested with an MD assistant who is fully trained and credentialed Bariatric surgeon as a proctor (see Focused Professional Practice Evaluation (FPPE) and Proctoring procedure for additional information on proctoring).
    - If only one type of Bariatric procedure is requested (such as gastric banding only, bypass only, or gastric sleeve only), must provide documentation of 10 procedures of the type requested with satisfactory outcomes proctored by an approved Bariatric surgeon (see Focused Professional Practice Evaluation (FPPE) and Proctoring procedure for additional information on proctoring). The outcomes should demonstrate that there has been no substantial deviation from national norms.
    - The applicant will be assigned provisional bariatric privileges until the proctoring and focused reviews (FPPE) are completed with focused review of the first 10 bariatric procedures in each category requested. The focused review does not include the proctored procedures.

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- If the required numbers of procedures are not completed within a 6 month time frame, the MBSC will review the cases and determine if the provisional privileges should be extended or rescinded. The MBSC will make a recommendation to the Credentials Committee regarding this determination. The Credentials Committee will make the final decision regarding the extension of provisional privileges which will be recommended to MEC and to the Board of Trustees for action.
  
- **Established Bariatric Surgeon from Another Facility**
  - Applicant must provide evidence of unrestricted privileges at previous institution and a recommendation from Department of Surgery Chair at previous institution.
  - Provide a case log of Bariatric procedures including outcomes:
    - At least 50 procedures total as primary surgeon
    - 3 open procedures that involve the stapling or division of the GI Tract
    - At least 8 bariatric procedures performed during the last 24 months (proctoring may be an accepted alternative for those providers who have not performed the required 8 cases).
  - The outcomes should demonstrate that there has been no substantial deviation from national norms.

## REREDENTIALING GUIDELINES FOR BARIATRIC SURGERY

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In order to qualify for Bariatric Surgery Privileges, applicants for reappointment must meet the following criteria:

- Maintenance of certification in professional organization such as American Society for Metabolic and Bariatric Surgeons (ASMBS), Society of Gastrointestinal and Endoscopic Surgeons (SAGES).
- Evidence of complete of Continuing Medical Education (CME) as required by ASMBS, ABS, or SAGES, with at least 16 hours of Category 1 CME in bariatric surgery every 24 months.
- All other bariatric surgeons must provide evidence of at least 8 bariatric procedures during the last 24 months
- Evidence of outcomes data via established Medical Staff Focused Professional Practice Evaluation or Ongoing Professional Practice Evaluation

*NOTE: All documentation must include date of the procedure, type and facility name and satisfactory outcomes.*

## PRIVILEGE REQUESTS

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Please select all procedures for which privileges are being requested:

Bariatric Surgery Procedures	Requested	Recommendation
Laparoscopic/Open Roux en Y gastric bypass		<input type="checkbox"/> Yes <input type="checkbox"/> No
Laparoscopic/Open Vertical Sleeve Gastrectomy		<input type="checkbox"/> Yes <input type="checkbox"/> No
Revision/Conversion of previous Bariatric Surgery		<input type="checkbox"/> Yes <input type="checkbox"/> No

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Urgent/Emergent Operations for Complications of Bariatric Surgery		__ Yes __ No
Robotic Bariatric Surgery		__ Yes __ No
Laparoscopic Adjustable Gastric Banding		__ Yes __ No

## ACKNOWLEDGEMENT OF PRACTITIONER

I have requested only those privileges for which by education, training, current competence and demonstrated performance I am qualified to perform and that I wish to exercise at St. Dominic Hospital.

\_\_\_\_\_  
Physician Name (Printed)

\_\_\_\_\_  
Physician Signature

\_\_\_\_\_  
Date

## RECOMMENDATIONS

**Department Chair:** I have reviewed the requested clinical privileges and supporting documentation for the above named applicant and

- Recommend as requested
- Recommend with conditions/modifications as noted: \_\_\_\_\_
- Do not recommend for the following reason: \_\_\_\_\_

\_\_\_\_\_  
Department Chair Signature

\_\_\_\_\_  
Date

### Approval Dates

Credentials Committee	MEC	QAPI	Board
_____	_____	_____	_____