

<p>Name of Policy: <u>Privileges for new procedures</u></p> <p>Policy Number: 3364-87-05</p> <p>Approving Officer: Chief of Staff Chief Executive Officer - UTMC</p> <p>Responsible Agent: Chief Medical Officer</p> <p>Scope: All University of Toledo Campuses</p>	 <p>Effective Date: 09/01/2023</p> <p>Initial Effective Date: 5/9/2007</p>
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Purpose of policy

To establish policies for granting privileges to perform new medical procedures. Definition: A new procedure may be an invasive or interventional procedure or the use of a diagnostic or therapeutic modality not currently being performed at the University of Toledo Medical Center. In general, this policy will not apply to the introduction of new pharmaceutical agents, which will be addressed through the policies and procedures of the pharmacy.

(B) Procedure

- (1) Determination that a new procedure requires a new or additional privilege and the development of privileging criteria:

Any member of the medical staff who wishes to perform a new procedure, should submit this request to the Clinical Service Chief and the Chair of the Credentials Committee. The following process will be used by the Clinical Service Chief, the involved physicians, and the Credentials Committee as a guideline as to whether or not new criteria should be developed.

- (a) The first step of the process requires that the procedure will be permitted by the organization. The requirements for this step are:
- (i) The equipment is available, will be purchased, or another acceptable arrangement to obtain the equipment has been agreed to by the UT Medical Center.
 - (ii) Appropriate nursing and other support staff are available and have the necessary competencies, or that appropriate training or in-servicing has been arranged.
 - (iii) Sufficient space is available or will be made available within a specified time frame.
 - (iv) Sufficient financial resources are available or will be made available within a specified time frame.

- (b) If the requirements of this first step have not been met, the process of developing criteria may proceed, but will not be given a positive recommendation by the Credentials Committee until this requirement has been satisfied.
- (2) Developing new privileging criteria:
- (a) The Credentials Committee will determine which specialties will be involved with the performance of the new procedure. The requesting physicians along with representatives from any other involved specialties will be requested to develop proposed credentialing criteria.
 - (b) The criteria shall consider and/or include:
 - (i) Basic education and training required.
 - (ii) What specific residency, fellowship or subsequent course training may be required.
 - (iii) Whether two or more “tracks” for privileging are appropriate. (Recent residency training may be sufficient if the procedure is now routinely taught during residency, but for those not trained recently, a special course may be required).
 - (iv) What prior experience is required.
 - (v) Proctoring requirements and how they may be implemented.
 - (vi) Whether training requirements will differ for different specialties.
 - (vii) Any relevant literature or professional society consensus statements regarding the procedure. These may be used as a resource for developing credentialing criteria.
 - (c) The proposed criteria will be submitted to the Credentials Committee for review and recommendation. The recommendation of the Credentials Committee will be transmitted to the MEC. The Credentials Committee may also request more information, the input of additional departments, or additional information from Nursing or other Hospital departments. The Medical Executive Committee will then recommend approval, further refinement, or disapproval. If approval is recommended, the criteria shall be forwarded to the Board of Trustees for final action. If disapproval or further refinement is recommended the proposed criteria will be sent back to the Credentials Committee.
 - (d) A medical staff member may submit his or her request for privileges at the same time as the criteria are being considered, but such request can only be acted upon following the positive recommendation and approval of the criteria. In such a case, it would of course be expected that the applicant(s) meet the requirements of the criteria that are eventually approved.

<p>Approved by:</p> <p><u>/s/</u> <u>09/06/2023</u> Puneet Sindhvani, M.D. <u>Date</u> Chief of Staff</p> <p><u>/s/</u> <u>09/11/2023</u> Richard Swaine <u>Date</u> Chief Executive Officer - UTMC</p> <p><i>Review/Revision Completed by:</i> <i>Credentials Committee</i> <i>Medical Executive Committee</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none"> • <i>MS-005 Privileges for New Procedures</i> <p>Review/Revision Date:</p> <p>05/09/07 09/12/07 02/23/11 03/01/2017 03/01/2020 08/23/2023</p> <p>Next review date: 09/01/2026</p>