

Anesthesiology Clinical Privilege List

Description of Service

Alberta Health Services (AHS) Medical Staff who are specialists in Anesthesiology (or its associated subspecialties) and have privileges in AHS facilities provide safe, high-quality care for patients across the Province. Anesthesiology is a medical specialty responsible for the care of patients before, during and after surgical operations, labour and delivery, and certain interventional procedures.¹

Administration of anesthesia includes general, regional, and local, and administration of all levels of sedation in the provision of perioperative, peripartum and periprocedural anesthetic care across all age groups and all patient disease states. Care includes pain relief and maintenance, or restoration, of a stable condition during and immediately following surgical, obstetrical, and diagnostic procedures. Specialist anesthetists may assess, stabilize, and determine the disposition of patients with emergent conditions.

Zone Medical Staff Organization

Zone	Department(s)	Section(s)	
South	Anesthesia	Anesthesia	
Calgary	Anesthesia	Anesthesia Section Pain Medicine	
Central	Anesthesia	Anesthesia	
Edmonton	Anesthesiology	Anesthesiology	
North	Hospital Health	Anesthesiology	

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¹ Royal College of Physicians and Surgeons of Canada – Objectives of Training in the Specialty of Anesthesiology (2013)

College of Physicians and Surgeons of Alberta (CPSA) Requirements

The CPSA grants practice permits but does not grant any additional practice approvals for specific procedures or specialties beyond the practice permit.

A practice permit from the CPSA does not guarantee that an individual will be granted an AHS Medical Staff appointment or privileges. It is AHS's role and responsibility to screen and evaluate the qualifications of Practitioners in relation to the specific procedures and patient care services they will be providing at specific sites before granting an appointment and clinical privileges.

Physicians with expertise in a particular area of practice may require a CPSA approval process separate from the CPSA licensure and AHS privileging process for specific services. These services typically fall into the non-invasive diagnostics group. Please refer to the CPSA website for a list of practice areas requiring approval http://www.cpsa.ca/accreditation/physician-approvals/.

Minimum Education and Training Requirements

The "Minimum Education and Training Requirements" set out in the Anesthesiology Clinical Privileges are as follows:

- 1. Appropriate licensure with the College of Physicians and Surgeons of Alberta, AND
- 2. Credentials satisfactory to the Zone Clinical Department Head (ZCDH), Zone Application Review Committee (ZARC) and/or the Chief Medical Officer (CMO), including:
 - Successful completion of a Royal College of Physicians and Surgeons of Canada (RCPSC) accredited residency program and fellowship in the RCPSC (FRCSC); OR
 - Equivalent international training and certification satisfactory to the ZCDH, ZARC and/or CMO.

These are minimum requirements. The ZCDH, ZARC and/or the CMO may determine that additional education, training or experience is required. The ZCDH, ZARC and/or CMO may also determine that an individual has developed competency in a particular area, without having completed a fellowship in that area, through an equivalent combination of education, training and experience. In addition to the minimum requirements listed above, additional education, training and experience may be required at the discretion of the ZCDH, ZARC and/or the CMO, to grant certain clinical privileges. These specifics are reflected in the following list and whether a particular combination of education, training and experience meets the requirements will be determined by the ZCDH.

Privileges Requiring Additional Education, Training and Experience

The list identifies privileges that require additional specialty training and documentation of evidence that the practitioner has received recognized postgraduate education, training or

an appropriate level of experience to safely provide the service.

Clinical Privilege List and Medical Staff Bylaws

The AHS Medical Staff Bylaws state that the clinical privileges granted to a Practitioner define the diagnostic or therapeutic Procedures or other Patient care services a Practitioner is deemed competent to perform, the Facility(ies) and Zone(s) within which the Practitioner is eligible to provide care and services to Patients; and the specified AHS Programs and Professional services...that the Practitioner is eligible to access.²

No recommendation on Clinical Privileges is meant to prevent any licensed Practitioner from performing any medical procedure on any person in an emergency situation where failure to perform that procedure may result in death or serious injury or harm to the person.³

Nothing in this document or the attached List of Clinical Privileges replaces the processes or requirements set out in the AHS Medical Staff Bylaws and Rules. This document and its attachments are intended to supplement and more fully describe the application of the AHS Bylaws and Rules in the context of Anesthesiology Clinical Privileges.

The AHS Medical Staff Bylaws and Rules can be found on the AHS website at http://www.albertahealthservices.ca/7086.asp.

Interpretation of the Clinical Privilege List

The following list describes and reflects the categories/types of patient services included in the scope of Anesthesiology, privileges are available to members of the AHS Medical Staff with the necessary and required education training and experience. When granted Anesthesiology privileges include the capability to perform the noted procedure using various techniques and approaches as appropriate for the patient, unless a specific technique or approach is specified. The Zone Clinical Department Head's recommendation regarding specifics of an individual's privileges and any associated techniques will be provided to ZARC and the CMO for their consideration.

The Medical Staff Rules define the minimum review period for the privilege list.⁴

² AHS Medical Staff Bylaws 3.0.2

³ AHS Medical Staff Rules 3.4.3(e)

⁴ AHS Medical Staff Rules, 3.4.3(f)(ii)).

Sites of Privileges

A delineation of the sites of clinical activity is a required component of clinical privileges (AHS Medical Staff Bylaws, 3.2.1(c) and 3.2.7).

Clinical privileges will reflect the site (or sites) where the Physician physically provides the clinical services. A Physician privileged in the specialty may have clinical privileges at multiple sites if they travel to multiple sites to provide clinical services as approved by the ZCDH, ZARC and/or the CMO. 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.

	Site A	Site B	Site C	Site D	Site E
Privilege 1					
Privilege 2					
Privilege 3					
Privilege 4					

The table above indicates what privileges are available at which sites:

- Privilege 1 is available at all sites
- Privilege 2 is available at sites A, C,D and E
- Privilege 3 is available at sites A and C
- Privilege 4 is available at sites B, D and E

Proctoring Requirements

The Zone Clinical Department Head may determine that a period of proctoring is required in certain situations. Proctoring can be defined as follows:

"The term *proctor* is often used to mean observe, supervise, mentor, monitor, or directly assess...*proctoring* reflects a process by which an individual is reviewed and evaluated over time to ensure competence, and proctor identifies the person performing the assessment." *The Medical Staff Handbook, A Guide to Joint Commission Standards, Second Edition.*

"Proctoring is a process of direct observation that allows for the focused evaluation of current physician competency in carrying out actual clinical care and takes both cognitive and procedural abilities into account. If the proctor observes potential or imminent patient harm during the proctoring process, it may be ethically appropriate for him or her to intervene." *Proctoring and FPPE: Strategies for Verifying Physician Competence, Second Edition. Robert J.*

Marder, MD, CMSL, and Mark A. Smith, MD, MBA, CMSL.

Anesthesiology Clinical Privilege List

General Anesthesiology Privileges: pediatric, adolescent, and adult patients (ages should be consistent for the setting).

Anesthesiologists may perform a number of procedures and manage patient problems that are associated with anesthesiology care. This involves perioperative management of patients in all age groups to be rendered unconscious or insensitive to pain and emotional stress during surgical, obstetrical and other diagnostic and/or therapeutic medical procedures. Such management includes preoperative, intraoperative, and postoperative examination, consultation, management, monitoring, evaluation, and treatment.

Specialty/Subspecialty Anesthesiology Privileges: Areas in anesthesiology practice where the scope and complexity of care provided by physicians require specialized competence and may only be exercised at site(s) that have sufficient resources required to support the privilege. Privileges granted in specialty/subspecialty anesthesia are appropriate for Physicians who have general privileges in anesthesiology and possess additional skills for highly specialized care by virtue of training and experience or demonstrated competence.

Specialized Privilege/Technique: Physicians performing techniques or interpreting results that may affect patient safety may have specific privileges granted on the basis of training and experience or demonstrated competence.

	General Privileges in Anesthesiology
	Management of patients of all ages; except as specifically excluded from practice. This includes pediatric patients with ASA1 or ASA2 scores subject to surgical and/or anesthetic complexity, the infrastructure, equipment and staff support available at the site where the service is provided.
	Provide treatment or consultative service for patients rendered unconscious or insensible to pain and emotional stress during surgical, obstetrical and certain other medical procedures; using all levels of sedation/analgesia, general anesthesia, neuraxial anesthesia, regional anesthesia, or local anesthesia. This includes preoperative, intra-operative and postoperative evaluation, management and appropriate measures to protect life functions and vital organs.
Red	quired education, training and experience: Refer to Minimum Education and Training Requirements.
Cli	nical Privilege
Clin	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.)
	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and
	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.)
	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.) Obstetric Anesthesiology

	Adult Cardiac Anesthesiology					
	Administration of anesthesia, including general, regional, and local, and administration of all levels of sedation to adult patients. Includes preoperative, intraoperative, and postoperative care of adult patients undergoing cardiac surgery and related invasive procedures who have complex cardiac disease or other related conditions.					
traiı	quired education, training and experience: Minimum Education and Training Requirements and fellowship ning or equivalent that includes training in Cardiac Anesthesiology and/or demonstrated training and experience to sfy the ZCDH					
Spe	ecialized Privilege/ Technique					
	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.)					
	Anesthetic management of patients requiring full Cardio Pulmonary Bypass, left heart bypass and/or deep circulatory arrest					
	Chronic and Cancer Pain Medicine Evaluate, diagnose, treat and provide consultation to patients, with chronic pain that requires invasive pain medicine procedures beyond basic pain medicine.					
traiı	quired education, training and experience: Minimum Education and Training Requirements and fellowship ning or equivalent that includes training in Pain Medicine and/or demonstrated training and experience to satisfy ZCDH					
Spe	ecialized Privilege/ Technique					
	Admitting (includes; assessment, evaluating, consulting, diagnosing, and treating)					
	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.)					
	Trigger point injections					
	Caudal and lumbar epidural steroid injection without fluoroscopy					
	Fluoroscopy for image guided procedures					
	Infusion therapies such as and lidocaine and ketamine					
	Intra-articular injections					
	Intrathecal catheter insertion					
	Sacroiliac joint blocks					
	Peripheral nerve block procedures					
	Stellate ganglion block					
	Celiac plexus block					
	Ganglion impar block					
	Lumbar sympathetic nerve block					
	Paravertebral block of the lumbosacral plexus					

	Chronic and Cancer Pain Medicine Evaluate, diagnose, treat and provide consultation to patients, with chronic pain that requires invasive pain medicine procedures beyond basic pain medicine.				
	Radiofrequency ablation				
	Regional IV block using symp	oatholytic ag	ents of both the upper and lower		
	Neurolysis – epidural, periph	eral or subar	achnoid		
	Epidural catheter tunneling for	or cancer or p	palliative care		
	Dadiatuia Augathaniala				
	Pediatric Anesthesiology (Includes neonates, infants, children, and adolescents in the context of a facility or program with the ability and understanding to safely support child health and specifically safe anesthesia for children who require it).				
	Administration of anesthesia, including, regional, and local, and administration of all levels of sedation to pediatric patients. Includes evaluation of complex medical problems in infants and children when surgery is needed, planning and care before and after surgery, pain control, if needed after surgery, and anesthesia and sedation for procedures out of the operating room, such as an MRI, CT scan, and radiation therapy.				
Required education, training and experience: Minimum Education and Training Requirements and fellowship training or equivalent that includes training in Pediatric Anesthesiology and/or demonstrated training and experience to satisfy the ZCDH					
Spe	cialized Privilege/ Techniqu	е			
	Consultation (Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.)				
	Pediatric Cardiac Surgery Ar	esthesia			
Privileges requiring additional education, training and experience: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.					
Clinical Privilege		CPSA Approval Required	Required additional education, training and experience		
	Anesthesia for Liver Transplant		Fellowship training or equivalent that includes Hepatobiliary and Transplantation Anesthesiology and/or demonstrated training and experience to satisfy the ZCDH or delegate.		
	Pericardial Echocardiography		Fellowship training or equivalent that includes training in Cardiac Anesthesiology and/or demonstrated training and experience in Cardiovascular Intensive Care to satisfy the ZCDH or delegate.		
	Transesophageal Echocardiography (TEE)	√	Fellowship training or equivalent that includes training in Cardiac Anesthesiology and/or demonstrated training and experience in Cardiovascular Intensive Care to satisfy the ZCDH or delegate.		
	Management of cardiac and lung assist devices		Fellowship training or equivalent that includes training in Cardiac Anesthesiology and/or demonstrated training and experience in to satisfy the ZCDH or delegate.		