

Description of Service

Alberta Health Services (AHS) Medical Staff who are specialists in Neurosurgery and have privileges in AHS facilities provide safe, high-quality care for patients across the Province. Neurosurgery is the specialty of surgery dedicated to the diagnosis, surgical and non-surgical management of congenital abnormalities, trauma and diseases affecting the nervous system, its blood supply, and supporting structures.¹

For a full list of clinical privileges, please refer to the attached Neurosurgery Clinical Privilege List on page 5.

Zone Medical Staff Organization

Zone	Department(s)	Section(s)
South	N/A	N/A
Calgary	Clinical Neurosciences	Neurosurgery
Central	N/A	N/A
Edmonton	Neurosciences	Neurosurgery
North	N/A	N/A

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 those stated on the practice permit.

A practice permit from the CPSA does not guarantee that an individual will be granted for 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

¹ Royal College of Physicians and Surgeons of Canada – Objectives of Training in the Specialty of Neurosurgery (2010)

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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 AHS List of Neurosurgery 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:
 - o Successful completion of a Royal College of Physicians and Surgeons of Canada (RCPSC) accredited residency program in Neurosurgery and fellowship in the RCPSC (FRCS);
 - OR
 - o Equivalent combination of (international) education, training and experience satisfactory to the ZCDH, ZARC and CMO.

These are minimum requirements. The ZCDH, ZARC and the CMO may determine that additional education, training or experience is required. The ZCDH, ZARC and 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, experience and certification may be required to be granted certain clinical privileges. These specifics are identified in the attached clinical privileges list.

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

² AHS Medical Staff Bylaws 3.0.2

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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 Neurosurgery 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 Neurosurgery 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 Neurosurgery privileges available to members of the AHS Medical Staff with the necessary and required education, training, and experience. When granted, Neurosurgery 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

Sites of Clinical 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.

³ AHS Medical Staff Rules 3.4.3(e)

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

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	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.*

Neurosurgery Clinical Privilege List

Clinical Privilege Lists

Neurosurgery Privileges	
General Privileges	
<input type="checkbox"/>	Admitting (Admitting (Most Responsible Practitioner MRP), assessment, evaluating, consulting, diagnosing, treating)
<input type="checkbox"/>	Consulting (Non-Admitting (not MRP), assessment, evaluating, consulting, diagnosing, treating)
<input type="checkbox"/>	Surgical Assist (At the direction of the surgeon, provides aid in technical functions in the OR)
<input type="checkbox"/>	Clinical Associate (Assessment, evaluating, diagnosing, treating in collaboration with the neurosurgeon)
Clinical Privileges	
<input type="checkbox"/>	Ablation surgery for cerebral lesions or tissues
<input type="checkbox"/>	Arthrodesis - spine including instrumentation
<input type="checkbox"/>	Brain biopsy
<input type="checkbox"/>	Carotid endarterectomy
<input type="checkbox"/>	Cerebrovascular procedures
<input type="checkbox"/>	Chemonucleolysis
<input type="checkbox"/>	Craniotomy/craniectomy
<input type="checkbox"/>	Deep brain stimulation
<input type="checkbox"/>	Implantation of drug infusion systems (into cerebro-spinal fluid or tissue)
<input type="checkbox"/>	Endoscopic minimally invasive neurosurgery
<input type="checkbox"/>	Interventional neuroradiology (angiography, angioplasty, stent insertion and retrieval, myelography, coil occlusion of aneurysms)
<input type="checkbox"/>	Neuromodulation procedure (implantation of electrodes/percutaneous and subcutaneous)
<input type="checkbox"/>	Osteotomy - spine
<input type="checkbox"/>	Percutaneous rhizotomy
<input type="checkbox"/>	Peripheral nerve surgery

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<input type="checkbox"/>	Shunts	
<input type="checkbox"/>	Skull-base surgery	
<input type="checkbox"/>	Spinal decompression procedures (including laminectomy, discectomy)	
<input type="checkbox"/>	Spinal instrumentation	
<input type="checkbox"/>	Stereotactic cerebral procedure	
<input type="checkbox"/>	Sympathectomy	
<input type="checkbox"/>	Transphenoidal exposure parasellar region	
<input type="checkbox"/>	Transcranial doppler ultrasonography	
<input type="checkbox"/>	Vertebral augmentation procedures to include percutaneous techniques used to achieve internal vertebral body stabilization	
Extended Privileges: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.		
<input type="checkbox"/>	Endovascular surgical neuroradiology	Successful completion of a Canadian or equivalent Neurosurgery fellowship training and additional training in endovascular surgical neuroradiology and demonstrated skill and adequate experience.
<input type="checkbox"/>	Fluoroscopy (including regular and mini c arm)	Fellowship training or equivalent in advanced techniques and/or demonstrated training and experience to satisfy the ZCDH such as completion of radiology certification course endorsed by the Department of Diagnostic Imaging.
<input type="checkbox"/>	Procedural sedation	Compliance with the AHS Procedural Sedation Policy (PS-21) and Procedure (PS-21-01). Demonstrated combination of education, training AND/OR experience in conscious sedation to satisfy the ZCDH.
<input type="checkbox"/>	Stereotactic radiosurgery (gamma knife, cyber, linat)	Successful completion of a Canadian or equivalent Neurosurgery fellowship training and additional training in Stereotactic Radiosurgery for Neurosurgery and demonstrated skill and/or demonstrated combination of education, training and/or experience to satisfy the ZCDH.
<input type="checkbox"/>	Use of laser,	Successful completion of a Canadian or equivalent Neurosurgery fellowship training and additional training in Laser Neurosurgery and demonstrated skill and/or demonstrated combination of education, training and/or experience to satisfy the ZCDH.
	<input type="checkbox"/> Co2 laser	Additional training in the use of CO2 laser and/or demonstrated combination of education, training and/or experience to satisfy the ZCDH.
	<input type="checkbox"/> Yag laser	Additional training in the use of YAG laser and/or demonstrated combination of education, training and/or experience to satisfy the ZCDH.
	<input type="checkbox"/> Interstitial thermal litt laser	Additional training in the use of Interstitial thermal LITT and/or demonstrated combination of education, training and/or experience to satisfy the ZCDH.