

## Oral and Maxillofacial Surgery Clinical Privilege List

### *Description of Service*

Alberta Health Services (AHS) Medical Staff who are specialists in Oral and Maxillofacial Surgery and have privileges in AHS facilities provide safe, high-quality care for patients across the Province. Oral and Maxillofacial Surgery includes the diagnosis, surgical and adjunctive treatment of disorders, diseases, injuries, and defects involving the functional and aesthetic aspects of the hard and soft tissues of the oral and maxillofacial regions and related structures.<sup>1</sup>

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

### *Zone Medical Staff Organization*

<b>Zone</b>	<b>Department(s)</b>	<b>Section(s)</b>
<b>South</b>	Surgery	Dental
<b>Calgary</b>	Surgery	Oral & Maxillofacial Surgery
<b>Central</b>	Surgery	Maxillofacial & Dentistry
<b>Edmonton</b>	Surgery	Oral Maxillofacial/Dentistry
<b>North</b>	Hospital Health	Surgery - Dentistry

### *Alberta Dental Association and College (ADA&C) Requirements*

The ADA&C 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 ADA&C 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 ADA&C approval process separate from the ADA&C licensure and AHS privileging process for specific services. These services typically fall into the non-invasive diagnostics group. Please refer to the ADA&C website for a list of practice areas requiring approval.

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<sup>1</sup> Royal College of Physicians and Surgeons of Canada – Objectives of Training in the Subspecialty of Oral and Maxillofacial Surgery (2015)

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## *Minimum Education and Training Requirements*

The “Minimum Education and Training Requirements” set out in the AHS List of Oral and Maxillofacial Surgery Clinical Privileges are as follows:

1. Appropriate licensure with the Alberta Dental Association & College,

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 an accredited Dental program by The Commission on Dental Accreditation; AND

Successful completion of accredited oral and Maxillofacial Surgery Residency training Program by the Commission on Dental Accreditation

- o Successful completion of the National Dental Specialty Examination in Oral & Maxillofacial Surgery

Successful completion of Royal College of Dental Dentists of Canada- Examination in Oral and Maxillofacial Surgery

OR

- o Equivalent combination of education, training and experience 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, 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 fellowship training and/or 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*

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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.<sup>2</sup>

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.<sup>3</sup>

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 Oral and Maxillofacial Surgery 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 Oral and Maxillofacial Surgery privileges available to members of the AHS Medical Staff with the necessary and required education, training, and experience. When granted, Oral and Maxillofacial Surgery 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.<sup>4</sup>

### *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,

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<sup>2</sup> AHS Medical Staff Bylaws 3.0.2

<sup>3</sup> AHS Medical Staff Rules 3.4.3(e)

<sup>4</sup> AHS Medical Staff Rules, 3.4.3(f)(ii).

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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.*

### Clinical Privilege Lists

## Oral and Maxillofacial Surgery Clinical Privilege List

Oral and Maxillofacial Surgery Privileges	
General Privileges	
<input type="checkbox"/>	<b>Admitting</b> (Admitting (Most Responsible Practitioner MRP), assessment, evaluating, consulting, diagnosing, treating)
<input type="checkbox"/>	<b>Consulting</b> (Non-Admitting (not MPR), assessment, evaluating, consulting, diagnosing, treating)
<input type="checkbox"/>	<b>Surgical Assist</b> (At the direction of the surgeon, provides aid in technical functions in the OR)
Airway	
<input type="checkbox"/>	Cricothyroidotomy
<input type="checkbox"/>	Endotracheal Intubation
<input type="checkbox"/>	Tracheostomy
Cleft and Craniofacial	
<input type="checkbox"/>	Correction of-cleft lip and palate – Secondary / Revision
<input type="checkbox"/>	Correction of-cleft lip and palate – Primary
<input type="checkbox"/>	Maxillary alveolar cleft repair ( primary and Secondary / residual)
<input type="checkbox"/>	Craniofacial Reconstruction
<input type="checkbox"/>	Maxillofacial skeletal deformities (primary and secondary)
<input type="checkbox"/>	Nasal reconstruction (primary and, secondary)
<input type="checkbox"/>	Palatal-Nasal fistula repair
<input type="checkbox"/>	Velopharyngeal Incompetence - pharyngoplasty / augmentation
<input type="checkbox"/>	Vestibular oro-nasal fistula repair
<input type="checkbox"/>	Revision palatoplasty
<input type="checkbox"/>	Distraction osteogenesis ( craniofacial)
<input type="checkbox"/>	Osseointegrated dental implants (Craniofacial)
Dentoalveolar	
<input type="checkbox"/>	Ankyloglossia Release/ Myotomy
<input type="checkbox"/>	Dental trauma management (avulsion, luxation or alveolar fracture)
<input type="checkbox"/>	Dental Extractions

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<input type="checkbox"/>	Frenoplasty
<input type="checkbox"/>	Incisional or excisional biopsy oral cavity
<input type="checkbox"/>	Management of defects and/or deformities of the dentoalveolar complex
<input type="checkbox"/>	Management of impacted teeth
<input type="checkbox"/>	Management of minor odontogenic infections – (alveolar)
<input type="checkbox"/>	Management of Osteomyelitis/ MRONJ/ORN of Maxilla/ mandible Alveolus)
<b>Oral and Maxillofacial Reconstructive</b>	
<input type="checkbox"/>	Blepharoplasty
<input type="checkbox"/>	Ear reconstruction
<input type="checkbox"/>	Lipectomy/liposuction
<input type="checkbox"/>	Maxillofacial Deformity correction ( Craniofacial/Maxillofacial Alloplastic implants)
<input type="checkbox"/>	Nasal Reconstruction
<input type="checkbox"/>	Otoplasty – Ear Reconstruction/Cosmetic
<input type="checkbox"/>	Rhinoplasty
<input type="checkbox"/>	Rhytidectomy
<input type="checkbox"/>	Scar revision – Head and Neck
<input type="checkbox"/>	Maxillofacial reconstruction with tissue flaps - ( regional and distant sites)
<input type="checkbox"/>	Application of reconstruction plate / External Fixator
<input type="checkbox"/>	Harvesting grafts – bone, skin, tissue– distant sites /extremities
<b>Implants, Grafts, and Pre- Prosthetic</b>	
<input type="checkbox"/>	Osseointegrated dental implants (Maxillofacial)
<input type="checkbox"/>	Insertions of Implants (Alloplast )
<input type="checkbox"/>	Nerve repositioning
<input type="checkbox"/>	Pre prosthetic surgery of the Maxilla/ mandible
<input type="checkbox"/>	Insertion of oral- maxillofacial prosthesis/ obturator
<b>Nasal / Maxillary sinus</b>	
<input type="checkbox"/>	Caldwell - Luc
<input type="checkbox"/>	Nasal Antrostomy
<input type="checkbox"/>	Repair of oro-antral fistula
<input type="checkbox"/>	Retrieval of foreign body
<input type="checkbox"/>	Turbinectomy

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<input type="checkbox"/>	Sinus lift procedure
<b>Head and Neck Oncology</b>	
<input type="checkbox"/>	Lymph node or soft tissue biopsy or excision (open or fine needle)
<input type="checkbox"/>	Neck dissection – modified and radical
<input type="checkbox"/>	Malignant tumour resection – Maxillofacial
<input type="checkbox"/>	Surgical management of Oropharyngeal Malignant tumours (includes tonsillectomy)
<b>Orthognathic</b>	
<input type="checkbox"/>	Genioplasty Osteotomy
<input type="checkbox"/>	Dentoalveolar osteotomy
<input type="checkbox"/>	LeFort I /II/ III Osteotomy
<input type="checkbox"/>	Mandible Osteotomy- other
<input type="checkbox"/>	Maxilla Osteotomy- Other
<input type="checkbox"/>	Rapid palatal expansion osteotomy
<input type="checkbox"/>	Mandible -Sagittal split osteotomy
<input type="checkbox"/>	Septoplasty
<input type="checkbox"/>	Zygomatic / Malar osteotomy
<input type="checkbox"/>	Distraction osteogenesis - Maxillofacial
<b>Pathology</b>	
<input type="checkbox"/>	Surgical management – Benign Cysts, and tumours benign - craniomaxillofacial
<input type="checkbox"/>	Surgical management of Acute and Chronic Odontogenic infections –( head and neck)
<input type="checkbox"/>	Surgical management Acute and Chronic Infections – other (head and neck )
<input type="checkbox"/>	Surgical Management of Maxillofacial Sinus pathology
<input type="checkbox"/>	Maxillofacial Recontouring
<input type="checkbox"/>	Surgical management of Mucosal diseases - benign and pre-malignant
<input type="checkbox"/>	Surgical management of Osteomyelitis / Osteoradionecrosis / Medication Related Osteonecrosis
<input type="checkbox"/>	Surgical Management Salivary gland pathology
<input type="checkbox"/>	Parotidectomy
<input type="checkbox"/>	Surgical management of Trigeminal nerve pathology
<input type="checkbox"/>	Surgical management -Vascular/lymphovascular malformations
<b>Temporomandibular Joint Surgery</b>	

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<input type="checkbox"/>	Arthrocentesis	
<input type="checkbox"/>	Arthroscopy – Diagnostic and Operative	
<input type="checkbox"/>	Condylectomy/Condyloplasty	
<input type="checkbox"/>	Meniscus Repair/ Plication /Resection	
<input type="checkbox"/>	Mandibular dislocation management	
<input type="checkbox"/>	TMJ and Glenoid Fossa Arthroplasty and – Open joint - Remodeling / Eminectomy / other	
<input type="checkbox"/>	TMJ and Glenoid Fossa Arthroplasty - Joint reconstruction alloplast fossa and condyle	
<input type="checkbox"/>	TMJ arthroplasty with Alloplastic cranial and facial bone reconstruction	
<b>Trauma (primary and secondary repair)</b>		
<input type="checkbox"/>	Lacerations Soft Tissue - Head and Neck	
<input type="checkbox"/>	Alveolar injuries, Fractured and luxated teeth ( open and closed reduction)	
<input type="checkbox"/>	Mandibular fractures ( open and closed reduction)	
<input type="checkbox"/>	Midface Fractures - Maxillary, zygomatic, orbital, and nasal bone injuries- ( open and closed reduction)	
<input type="checkbox"/>	Naso-orbital-ethmoid fractures - ( open and closed reduction)	
<input type="checkbox"/>	Frontal bone and frontal sinus fractures - ( open and closed reduction)	
<input type="checkbox"/>	Microneurosurgical/microvascular -repair/anastomoses	
<b>Other</b>		
<input type="checkbox"/>	Central venous line insertion & monitoring, percutaneous or cut down	
<input type="checkbox"/>	Insertion of Arterial Line	
<input type="checkbox"/>	Insertion of tube/ line for nutrition or chemotherapy	
<b>Extended Privileges: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.</b>		
<input type="checkbox"/>	Implantable biologics	ADA&C Biologic Use licensure required.
<input type="checkbox"/>	Procedural sedation	Compliance with the AHS Procedural Sedation Policy (PS-21) and Procedure (PS-21-01)5. Demonstrated combination of education, training and/or experience in conscious sedation to satisfy the ZCDH.
<input type="checkbox"/>	Use of Laser and Laser Surgery	ADA&C licensure and registration of lasers is required. Successful completion of additional training in Laser for and demonstrated skill and/or demonstrated combination of education, training and/or experience to satisfy the ZCDH.
<input type="checkbox"/>	Use of Neuromodulators – Upper Face and Bruxism Treatment	ADA&C Neuromodulator permit required.