

Description of Service

Alberta Health Services (AHS) Medical Staff who are specialists and have privileges in the department of Family Medicine – Enhanced Skills Obstetrics provide safe, high quality care for patients in AHS facilities across the province. The Department of Family Medicine – Enhanced Skills Obstetrics provides clinical services in evaluating and managing the care of pregnancy, labour, delivery, and postpartum services.

Privileges in the department of Family Medicine – Enhanced Skills Obstetrics may include, but are not limited to: providing consultative services; admitting, evaluating, and managing female patients with normal term pregnancy; managing labor and delivery; and managing and/or consulting on procedures related to medical diseases that are complicating factors in pregnancy

For a full list of clinical services, please refer to the attached Family Medicine Obstetrics Clinical Privilege List.

Zone	Department(s)	Section(s)	
South	Family Practice	Family Practice	
Calgary	CalgaryFamily MedicineCommunity PrimaryRural MedicineMaternal NewbornMedical Inpatient Calgorithm		
Central Family Medicine		Family Medicine	
Edmonton	Family Medicine	Family Medicine	
North	Iorth Family Health Family Health Remote Rural Urban Commu Urban Hospita		

Zone Medical Staff Organization



Privilege List

College of Physicians and Surgeons of Alberta (CPSA) Requirements

The CPSA grants practice permits but 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:

- 1. Current certification in Family Medicine by the College of Family Physicians of Canada which included obstetrics
- OR
- 2. Credentials satisfactory to the Zone Clinical Department Head (ZCDH), Zone Application Review Committee (ZARC) and the Chief Medical Officer (CMO), including:
 - o Successful completion of Family Medicine residency program which included obstetrics; OR
 - o Equivalent combination of 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.

Privileges Requiring Additional Education, Training and Experience

The list identifies certain 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



Privilege List

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."¹

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 person².

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 the department of Diagnostic Imaging Clinical Privileges.

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

Interpretation of the Clinical Privilege List

The following list describes and reflects the categories/types of patient services included in the scope of Diagnostic Imaging privileges available to members of the AHS Medical Staff with the necessary and required education, training and experience. When granted, Diagnostic Imaging privileges include the capacity 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 list³.

¹ AHS Medical Staff Bylaws 3.0.2

² AHS Medical Staff Rules 3.4.3(e)

³ AHS Medical Staff Rules, 3.4.3(f)(ii)).



Privilege List

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 may only be granted 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:

"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).



	Family Medicine – Obstetrics				
	Admitting Includes; assessment, evaluating, consulting, diagnosing, treating (medical/surgical options) and surgical assistant privileges.				
	Consultation Includes; conduct history and assessment for the purpose of making recommendations related to care and treatment.				
	Surgical Assistant At the direction of the surgeon, provides aid in technical functions in the OR.				
Clir	nical Privilege				
	Amnio-Infusion				
	Artificial Rupture Of Membranes				
	Breech delivery				
	Cervical Polyp Removal				
	Cervical- punch biopsy or cautery				
	Cesarean hysterectomy				
	Cesarean section (primary and repeat) including low transverse, low vertical or classical cesarean section				
	Dilation And Curettage (D&C)				
	Episiotomy and repair				
	Evacuation of the pregnant uterus by Dilatation and evacuation, greater than 14 weeks (TA)				
	Evacuation of the pregnant uterus by suction or Dilatation and curettage, less than 14 weeks (TA)				
	Evacuation of the pregnant uterus, curettage following vaginal delivery for retained products				
	External cephalic version				
	Fetal Scalp Electrode Placement				
	Fetal Scalp Sampling				
	Frenotomy				
	Induction Of Labour - Cervical Ripening Baloon				
	Induction Of Labour - Prostaglandin Including Cervidil				
	Induction Of Labour - Syntocinon				
	Insertion Of Intrauterine Pressure Catheter				
	Interpretation Of Electronic Fetal Heart Rate				
	Interpretation Of Electronic Fetal Heart Rate Monitor - Continuous				
	IUD Insertions / Removals				
	Low And Outlet Forceps: O.A. +2 Station, Or Greater				
	Management of shoulder dystocia				
	Manual removal of the placenta				



Privilege List

Manual Rotation Of Fetal Presentation	
Monitor - Non Stress Test	
Newborn Resuscitation	
Non-surgical and surgical management of moderate and severe post-partum hemorrhage, including the use of uterine compression sutures	
Relief of cord prolapse	
Repair of cervical lacerations	
Repair Of Cervical Tear	
Repair of uterine rupture	
Spontaneous Vaginal Delivery - Vertex Pres.	
Trial Of Labour After Cesarean section	
Umbilical Artery / Vein Catheterization	
Urinary Catheterization	
Vacuum extraction (low/outlet)	
Vacuum extraction (mid)	
Vaginal delivery	
Vaginal delivery of multiple gestation	

Privileges requiring additional education, training and experience				
Cli	nical Privilege	Required additional education, training and experience		
	Low/Outlet Forceps of a fetus in vertex presentation	Successful completion of a Family Medicine Residency program that included training in low/outlet forceps delivery or equivalent and/or demonstrated training and experience to satisfy the ZCDH		
	Pudendal anesthesia	Successful completion of Family Medicine residency program that included training in pudendal anesthesia or equivalent and/or demonstrated training and experience to satisfy the ZCDH		
	Repair Of External Anal Sphincter – 3rd Degree	Successful completion of Family Medicine residency program that included training in 3 rd degree repair or equivalent and/or demonstrated training and experience to satisfy the ZCDH		
	Repair Of External Anal Sphincter - 4th Degree	Successful completion of Family Medicine residency program that included training in 4 th degree tear or equivalent and/or demonstrated training and experience to satisfy the ZCDH		
	Repair of perineal and vaginal tears, including forth degree tears	Successful completion of Family Medicine residency program that included training in 3 rd degree repair or equivalent and/or demonstrated training and experience to satisfy the ZCDH		
	Repair of perineal and vaginal tears, including third degree tears	Successful completion of Family Medicine residency program that included training in 4 th degree tear or equivalent and/or demonstrated training and experience to satisfy the ZCDH		