

Description of Service

Alberta Health Services (AHS) Medical Staff who are specialists in Otolaryngology-Head and Neck Surgery and have privileges in AHS facilities provide safe, high-quality care for patients across the Province. Otolaryngology-Head and Neck Surgery is the specialty of surgery dedicated to "the screening, diagnosis, and management of medical and surgical disorders of the ear, the upper aerodigestive tract, and related structures of the face, head, and neck, including the special senses of hearing, balance, taste and olfaction." ¹

For a full list of clinical privileges, please refer to the attached Otolaryngology-Head and Neck Surgery Clinical Privilege List on page 5.

Zone Medical Staff Organization

Zone	Department(s)	Section(s)
South	Surgery	Specialized Surgery - Otolaryngology
Calgary	Surgery	Otolaryngology
Central	Surgery	Ear, Nose and Throat
Edmonton	Surgery	Otolaryngology
North	Hospital Health - Surgery	ENT

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

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

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 AHS List of Otolaryngology-Head and Neck Surgery 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 Otolaryngology-Head and Neck Surgery and fellowship in the RCPSC (FRCSC);
 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

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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 Otolaryngology-Head and Neck Surgery 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 Otolaryngology-Head and Neck 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 Otolaryngology-Head and Neck Surgery privileges available to members of the AHS Medical Staff with the necessary and required education, training, and experience. When granted, Otolaryngology-Head and Neck 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.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.

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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)).

	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.

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Clinical Privilege Lists

Otolaryngology-Head and Neck Surgery Privileges		
General Privileges		
	Admitting (Admitting (Most Responsible Practitioner MRP), assessment, evaluating, consulting, diagnosing, treating)	
	Consulting (Non-Admitting (not MPR), assessment, evaluating, consulting, diagnosing, treating)	
	Surgical Assist (At the direction of the surgeon, provides aid in technical functions in the OR)	
Clinical F	Privileges	
Head and	d Neck	
	Bronchoscopy (Rigid and Fibreoptic)	
	Cricothyrotomy	
	Deep Abscesses Drainage	
	Excision of Congenital Lesions	
	Facial Trauma Surgery (including plating of fractures)	
	Glossectomy	
	Laryngectomy	
	Laryngoscopy	
	Lymph Nodes and other biopsies including Fine Needle Aspiration	
	Maxillectomy	
	Nasopharyngoscopy	
	Neck dissection	
	Nerve Repair	
	Oesophagoscopy	
	Orofacial Cancer Surgery	

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	Palatopharyngoplasty
	Parathyroidectomy
	Pharyngolaryngectomy
	Pituitary Surgery
	Removal of Foreign Bodies
	Salivary Gland Surgery
	Skull Base Surgery
	Subcutaneous Tumor Surgery
	Laceration Repair
	Thyroglossal or Brachial Cysts or Sinuses
	Thyroidectomy
	Tonsillectomy and Adenoidectomy
	Tracheotomy/Tracheostomy
	Voice Restoration Surgery
Nasal Su	rgery
Nasal Su	Caldwell-Luc Procedure
	Caldwell-Luc Procedure
	Caldwell-Luc Procedure Choanal Atresia
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal)
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery Image Guided Surgery
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery Image Guided Surgery Osteoplastic Flap
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery Image Guided Surgery Osteoplastic Flap Polypectomy
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery Image Guided Surgery Osteoplastic Flap Polypectomy Septal Surgery
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery Image Guided Surgery Osteoplastic Flap Polypectomy Septal Surgery
	Caldwell-Luc Procedure Choanal Atresia Epistaxis Procedures Fractures (including Facial and Nasal) Frontal Recess Surgery Image Guided Surgery Osteoplastic Flap Polypectomy Septal Surgery Sinus Surgery (Endoscopic and Non-Endoscopic)

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	Radio Frequency Surgery
Otology	
	Acoustic Neuroma Excision (Primary or Secondary Surgeon)
	Cochlea Implants
	Benign Positional Vertigo Procedures
	External Ear Canal Procedures
	Facial Nerve Surgery
	Glomus Jugular Surgery
	Meniere's Disease Procedures
	Middle Ear Implants
	Myringotomy & Tubes
	Pinna Surgery
	Stapedectomy – Fenestration Surgery
	Tympano-Mastoid Procedures
	Tympanotomy
	Tympanoplasty
	Vestibular Surgery
Reconsti	ructive Cosmetic Surgery
	Brow Lift
	Enucleation in Conjunction with Malignant Sinus Disease
	Eyelid – Blepharoplasty
	Face Lift
	Facial Osteotomies
	Free Flaps (Major or Minor)
	Lacrimal system
	Liposuction (Head and Neck)
	Otoplasty
	Pedicle Flaps
	Scar Revision

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Soft Tissue Skin Grafts
'Z' Plasty

Extended Privileges: the below listed privileges require education, training and experience in addition to the successful completion of the Fellowship/Residency program.			
Use	of Laser		
	Argon	Successful completion of a Canadian or equivalent fellowshi training in Laser for Otolaryngology-Head and Neck Surgery and demonstrated skill and/or demonstrated combination of	
	CO2		
	ND-YAG	education, training and/or experience to satisfy the ZCDH.	
	Other		
	Care of Advanced Head and Neck Cancer Patients	While an Otolaryngology - Head and neck Surgery Specialty certification allows care of all patients with head and neck diseases, additional expertise (both training and skills) maybe be required for complex head and neck cancer patient care. Successful completion of a fellowship in head and neck surgical oncology and demonstrated skill and/or demonstrated combination of education, training and/or experience will be required to satisfy the ZCDH when dealing with complex head and neck cancer patients.	
	Pediatric Otolaryngology-Head and Neck Surgery	While an Otolarygology Specialty certification allows care of all ages, additional expertise (both training and skills) maybe be required for complex paediatric patients. Successful completion of a fellowship in Paediatrics Otolaryngology-Head and Neck Surgery and demonstrated skill and/or demonstrated combination of education, training and/or experience will be required to satisfy the ZCDH dealing with complex paediatrics patients.	
	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	

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