

## LIST OF CLINICAL PRIVILEGES – GENERAL SURGERY

**AUTHORITY:** Title 10, U.S.C. Chapter 55, Sections 1094 and 1102.

**PRINCIPAL PURPOSE:** To define the scope and limits of practice for individual providers. Privileges are based on evaluation of the individual's credentials and performance.

**ROUTINE USE:** Information on this form may be released to government boards or agencies, or to professional societies or organizations, if needed to license or monitor professional standards of health care providers. It may also be released to civilian medical institutions or organizations where the provider is applying for staff privileges during or after separating from military service.

**DISCLOSURE IS VOLUNTARY:** However, failure to provide information may result in the limitation or termination of clinical privileges

### INSTRUCTIONS

**APPLICANT:** In Part I, enter Code 1, 2, or 4 in each REQUESTED block for every privilege listed. This is to reflect your current capability. Sign and date the form and forward to your Clinical Supervisor

**CLINICAL SUPERVISOR:** In Part I, using the facility master privileges list, enter Code 1, 2, 3, or 4 in each VERIFIED block in answer to each requested privilege. In Part II, check appropriate block either to recommend approval, to recommend approval with modification, or to recommend disapproval. Sign and date the form and forward the form to the Credentials Office.

**CODES:** 1. Fully competent within defined scope of practice.

2. Supervision required. (*Unlicensed/uncertified or lacks current relevant clinical experience*).

3. Not approved due to lack of facility support. (*Reference local facility privilege list. Use of this code is reserved for the Credentials Committee/Function.*)

4. Not requested/not approved due to lack of expertise or proficiency, or due to physical disability or limitation.

**CHANGES:** Any change to a verified/approved privileges list must be made in accordance with Service specific credentialing and privileging policy

**NAME OF APPLICANT:**

**NAME OF MEDICAL FACILITY:**

**ADDRESS:**

I Scope		Requested	Verified
<b>P384663</b>	The scope of privileges in General Surgery includes the evaluation, diagnosis, treatment, and consultation for patients of all ages to correct or treat various conditions, diseases, disorders, and injuries of the head and neck, chest, abdomen and its contents, extremities, breast, skin and soft tissues, and endocrine system. General surgeons provide non-surgical care for conditions that may eventually require surgical procedures as well as pre-, intra-, and post-operative surgical care. Surgeons may admit to the facility and may provide care to patients in the intensive care setting in accordance with MTF policies. General surgeons also assess, stabilize, and determine the disposition of patients with emergent conditions in accordance with medical staff policy.		
Diagnosis and Management (D&M)		Requested	Verified
<b>P389805</b>	Management of multiple trauma		
<b>P389807</b>	Resuscitation and management of burn injuries		
<b>P389809</b>	Comprehensive critical care management of patients with burns, smoke inhalation injury or related conditions		
<b>P389811</b>	Resuscitation of patients with high-voltage electric shock injury		
<b>P388337</b>	Mechanical ventilatory management (invasive and noninvasive)		
<b>P389814</b>	Arterial pressure monitoring		
<b>P388353</b>	Central venous pressure monitoring		
<b>P390328</b>	Pulmonary artery catheter insertion and interpretation		
Procedures		Requested	Verified
<b>P384675</b>	Introduction of radiologic contrast materials in conjunction with operative procedures or assessment of trauma or other anatomic problems		
<b>P384677</b>	Arterial cannulation		
<b>P384684</b>	Head and Neck: Biopsy and partial or complete resectional procedures involving the endocrine and exocrine glands (thyroid, parathyroids, salivary glands)		
<b>P384686</b>	Head and Neck: Biopsy and partial or complete resectional procedures involving the face, scalp, external ear and soft tissues of the face and neck. Includes dissection of the		
<b>P384688</b>	Breast / chest: Biopsy of breast lesions		
<b>P384692</b>	Breast / chest: Thoracoabdominal flap reconstruction after radical mastectomy		

CLINICAL PRIVILEGES – GENERAL SURGERY (CONTINUED)			
P384690	Breast / chest: Segmental, total, modified radical or radical mastectomies. Dissection of axillary lymph nodes, chest wall resection alone or in conjunction with breast procedure		
P384692	Breast / chest: Thoracoabdominal flap reconstruction after radical mastectomy		
P384695	Abdomen: Operations on the gastrointestinal tract (esophagus, stomach, small bowel, colon, rectum, and anus) or biliary tract		
P384697	Procedures involving other intra-abdominal or retroperitoneal organs (e.g., liver, spleen, adrenals, pancreas,), provision of abdominal or retroperitoneal exposures for other disciplines		
P384699	Procedures involving the genitourinary and reproductive system (e.g. kidneys, ureters, bladder, urethra, external genitalia, uterus, fallopian tubes, ovaries)		
P384701	Procedures on the anus and rectum to include resection or ablation of tumors, drainage of abscesses, treatment of fistulae, resection or obliteration of hemorrhoids, stricture repair		
P384703	Abdominal wall: Repair of hernias with or without use of prosthetic materials. Repair of wound dehiscence, resection of masses		
P384705	Musculoskeletal: Procedures on nerves, ganglia, muscles and tendons, including fasciotomy		
P384707	Musculoskeletal: Management of simple fractures, external fixator placement, and amputations		
P384709	Skin and subcutaneous tissue: Repair, excision and/or grafting of injuries or lesions involving the skin and subcutaneous tissues. Includes radical lymph node dissections, local and pedicle flaps		
P384711	General pediatric surgery: Elective surgical management of common pediatric surgical problems such as hernias, pyloric stenosis		
P384713	General pediatric surgery: Emergent management of traumatic injuries in pediatric patients		
P384715	Trauma: Initial stabilization, resuscitation, emergency operative management, staged and elective operations, and coordination of specialty care of the injured patient		
P384717	Trauma: Exposure, resection and/or repair of traumatic injuries involving the head and neck, thorax and intrathoracic components, abdominal cavity, and extremities		
P384719	Sentinel lymph node mapping and biopsy		
P384721	Diagnostic laparoscopy and laparoscopic operative approach to intra-abdominal procedures, including: anti-reflux procedures, hernia repair, appendectomy, splenectomy, adrenalectomy, bariatric procedures, and bowel resection		
P384723	Vascular access procedures including placement of indwelling devices and construction of shunts and fistulae		
P384725	Regional limb perfusion for chemotherapy		
P384727	Placement of hepatic artery catheter for perfusion		
P385527	Gracilis myocutaneous flaps for pelvic reconstruction		
P390432	Percutaneous endoscopic gastrostomy tube placement		
P385779	Focused Assessment with Sonography for Trauma (FAST) exam		
P388446	Ultrasonography exam and interpretation in the emergency setting for: Ultrasound guided vascular access		
P389228	Ultrasound-guided procedures		
P391758	Ultrasound of the breast		
P390707	Central venous catheter insertion		
Endoscopic procedures with or without biopsy		Requested	Verified
P384665	Bronchoscopy, flexible and rigid		
P384673	Choledochoscopy		

CLINICAL PRIVILEGES – GENERAL SURGERY (CONTINUED)			
P386393	Sigmoidoscopy		
P390346	Colonoscopy with / without biopsy		
P388214	Esophagogastroduodenoscopy with / without biopsy		
<b>Anesthesia privileges</b>		<b>Requested</b>	<b>Verified</b>
P387317	Topical and local infiltration anesthesia		
P387323	Peripheral nerve block anesthesia		
P388406	Moderate sedation		
P387333	Regional nerve block anesthesia		
<b>Laser type privileges</b>		<b>Requested</b>	<b>Verified</b>
P389827	Laser type: CO2		
P389829	Laser type: YAG		
P389831	Laser type: Tuneable dye		
P389833	Laser type: KTP		
P389835	Laser type: Vbeam		
P389837	Laser: Argon		
P389839	Laser: Alexlazzr		
<b>Burn-specific privileges</b>		<b>Requested</b>	<b>Verified</b>
P384731	Tangential excision and grafting of burns		
P384733	Excision to fascia and grafting of burns		
P384735	Use of biologic, synthetic, and semi-synthetic temporary skin substitutes		
P384737	Surgical care of burns of the hand, to include placement of Kirschner wires for immobilization of the metacarpophalangeal (MCP) and interphalangeal (IP) joints		
P384739	Contracture release		
P384741	Amputations for burns and related conditions		
<b>Advanced Laparoscopic Surgery</b>		<b>Requested</b>	<b>Verified</b>
P391753	Bariatric surgery		
<b>Other (Facility- or provider-specific privileges only):</b>		<b>Requested</b>	<b>Verified</b>
<b>SIGNATURE OF APPLICANT</b>		<b>DATE</b>	

**II CLINICAL SUPERVISOR'S RECOMMENDATION**

☐ **RECOMMEND APPROVAL**

☐ **RECOMMEND APPROVAL WITH MODIFICATION**  
(Specify below)

☐ **RECOMMEND DISAPPROVAL**  
(Specify below)

**STATEMENT:**

**CLINICAL SUPERVISOR SIGNATURE**

**CLINICAL SUPERVISOR PRINTED NAME OR STAMP**

**DATE**