

## PAIN MANAGEMENT CORE PRIVILEGES

Basic Education: MD or DO

#### Qualifications as per GRMC Bylaws:

Medical Staff membership is a privilege extended by the Hospital, and not a right of any physician, practitioner, or other person. Membership and/or the permission to exercise clinical privileges shall be extended only to individuals who continuously meet the qualifications, standards and requirements set forth in these Bylaws.

The applicant for membership on the Medical Staff shall be a graduate of an approved or recognized school conferring M.D or D. O. degrees, legally licensed to practice in the State of Texas and qualified for membership in the local Medical or Dental Society. In addition, licensed dentists and podiatrists are eligible for Medical Staff membership. Sex, race, creed and/or national origin are not used in making decisions regarding the granting or denying of Medical Staff membership or clinical privileges.

As of September 2007, all new physician and podiatric applicants to the GRMC staff must have completed a residency program and obtained Board certification within the timeframe specified by their specialty board. The residency program must be recognized by the Accreditation Council for Graduate Medical Education, the American Osteopathic Association, or the Council on Podiatric Medical Education, as appropriate. Board certification must be recognized by the American Board of Medical Specialties, the American Osteopathic Association, or the American Board of Podiatric Specialties, as appropriate. As of May 1, 2011, all staff members who were not previously grandfathered prior to September 2007 must maintain board certification status to maintain medical staff privileges.

Printed Name of the Applicant

#### PLEASE CHECK APPROPRIATE BOXES FOR PRIVILEGES BEING REQUESTED AND MARK THROUGH ANY PRIVILEGES OFFERED UNDER "CORE" WHICH YOU DO NOT INTEND TO PERFORM

**Core privileges in Pain Management**: The core privileges in this specialty include the procedures on the following list and such other procedures that are extensions of the same techniques and skills.

# Outpatient procedures to be performed at GRMC and/or GRMC Outpatient Center.

Arthrogram	Intercostal Block
Bier Block	Local and Topical Anesthesia
Bursa Injection	Lumbar Sympathetic block; Neurolytic
Differential Epidural	Sacroiliac Joint Injection with Arthrography
Epidural Blood Patch <ul> <li>Caudal</li> <li>Cervical</li> <li>Thoracic</li> <li>Lumbar</li> </ul>	Facet Injection <ul> <li>Cervical</li> <li>Thoracic</li> <li>Lumbar</li> </ul>
Epidural with lyses of adhesions and Epiduragram <ul> <li>Caudal</li> <li>Cervical</li> <li>Lumbar</li> <li>Thoracic</li> </ul>	Epidural Steroid Injection <ul> <li>Cervical</li> <li>Thoracic</li> <li>Lumbar</li> <li>Caudal</li> </ul>
Fluoroscopic Interpretation of Dye placement	Intraprocedure X-ray Operation and Interpretation
Lysis of Adhesions Medial Branch Block • Cervical • Lumbar • Thoracic • Neurolytic	IV Sedation (administration and supervision) Paravertebral Nerve Block  Cervical  Thoracic Lumbar
Nerve Block <ul> <li>Axillary</li> <li>Brachial Plexus</li> <li>Celiac Plexus; Neurolytic</li> <li>Femoral</li> <li>Hypogastric</li> <li>Illioninguinal</li> <li>Lateral Femoral Cutaneous</li> <li>Peroneal</li> <li>Posterior Tibial</li> <li>Sciatic</li> <li>Splanchnic</li> <li>Suprascapular</li> <li>Trigeminal; Neurolytic</li> </ul>	Trigger Point Injection

### □ Additional procedures to be performed at GRMC hospital <u>only</u>.

**Special requests for Pain Management:** The following are examples of procedures that require special training and are not considered part of core privileges. The decision to grant any special privileges will be based on case by case review by the Credentials Committee based on reasonable standard of care. Parameters that may be used to determine appropriateness of privilege includes the requesting physician's previous experience, volume and outcomes as well as regional standards established by applicable specialty boards.

Privilege	
Sedation: Successful completion and passing score of the GRMC physician sedation quiz.	<ul> <li>Intraspinal Infusion Pump Placement</li> <li>Trial</li> <li>Permanent</li> </ul>
Discography	□ IDET/ Nucleoplasty/RFA
Greater Occipital Block	□ Myelography
Radio Frequency Ablation Lumbar	Spinal Accessory Block
Sphenopalatine Ganglion Block	□ Stellate Block; Neurolytic
<ul> <li>Spinal Cord Stimulator Lead Placement w Pulse Generator         <ul> <li>Cervical</li> <li>Thoracic</li> <li>Lumbar</li> <li>Temporary for same locations</li> </ul> </li> </ul>	□ Other:

# Acknowledgement of Practitioner

I have requested only those privileges for which by education, training, current experience and demonstrated performance I am qualified to perform and for which I wish to exercise at Guadalupe Regional Medical Center, and I understand that

a) in exercising any clinical privileges granted, I am constrained by hospital and medical staff policies and rules applicable generally and any applicable to the particular situation

b) any restriction on the clinical privileges granted to me is waived in an emergency situation and in such situation my actions are governed by the applicable section of the medical staff bylaws or related documents.

Printed Name of the Applicant

Signature of the Applicant

Date

Signature of Department Chair

Date