

East Jefferson General Hospital
Metairie, LA 70006

Medical Staff Policy and Procedure
Policy No.: MSC – 7
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Effective Date: July 28, 2010
Approved by:

Title: Robotic Privilege Policy

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Chief of Staff

Revised: 07/13/10; 08/14/12; 02/19/13; 05/10/16; 08/30/17; 05/08/18; 10/13/20

I. POLICY

The Robotic's Steering Committee will review and recommend the criteria for privileging and proctoring of robotic privileges. Committee will annually assess the list of approved physicians.

II. DEPARTMENTS AFFECTED: Medical Staff, Surgery Department

III. PROCEDURE

A. Initial Privileging request

1. Physician must attend and successfully complete the Robotics Off-Site Training Program and provide the Certificate of Completion to the Medical Staff Office. If the Physician completed Robotic's Training during Residency or Fellowship, then a letter from the Chairman of the training program must be obtained stating the competency of the Physician.
2. Request Form for additional privileges for robotic surgery is completed. Form includes information on date/type of procedure and Proctor information.
3. Temporary Privilege reviewed/approved by Medical Director of East Jefferson General Hospital (EJGH)/Designee or Medical Director of Robotics Surgery, Chief of Staff or Designated Division Chief and Hospital President/CEO (or designee) for a time period of no more than 60 days.
4. The Medical Staff Office notifies the Surgery Scheduling Office that physician has been granted temporary privileges for robotic surgery with Proctoring.
5. In order to request full privileges, Physician must be proctored on at least two procedures at EJGH. Proctor provides written report/documentation whether physician satisfactorily performed procedures and demonstrated a level of competence that supports independent practice and forwards documentation to the Medical Staff Office.

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6. Medical Staff Office completes a Request for Additional Privileges form for permanent privileges for robotics surgery for Physician.
7. Requests for Additional Privileges and proctoring reports are reviewed by the Medical Director of EJGH/Designee or Medical Director of Robotics Surgery, and Designated Division Chief/Designee. Request and supporting documentation presented to the next Credentials Committee, Medical Executive Committee, and Governing Board.
8. Upon final Board approval, Physician and Surgery Scheduling are notified of the full robotic surgery privileges.

B. MAINTAINING PRIVILEGES:

Physician must submit documentation in a calendar year (January through December 31) of no less than 6 cases per year performed at EJGH or, if at another facility, the number, type of cases, and any adverse outcomes/ complications must be reported to EJGH's Robotic's Steering Committee. Cases include only those for which physician is the primary surgeon. If Physician fails to provide such documentation, this will be taken as a voluntary relinquishment of full privileges that will be communicated to the Physician and Surgery Scheduling by the Medical Staff Office.

A report will be generated quarterly on case volumes. At mid-year, a letter will be sent from the Medical Staff Office to those Physicians who may be in jeopardy of not performing 6 cases before the end of the year. Prorate for a year for those Physicians who are credentialed for less than a year.

C. REGAINING FULL PRIVILEGES:

To regain full robotic privileges, the physician must provide the case volume required in section C or, when such volume cannot be documented, satisfy Section A.5 in which cases shall be reviewed by the Medical Director of EJGH or Medical Director of Robotics Surgery and Designated Division Chief/ Designee and upon approval of all, full privileges may be reinstated.

D. APPROVED PROCTOR:

Those Physicians identified/approved as Proctors from EJGH must have successfully performed no less than 40 cases at East Jefferson General Hospital and maintain robotic

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privileges. Proctors need to be of the same specialty. A proctor from outside the EJGH Medical Staff needs to be approved by the Chairman of the Robotic Committee. The Robotic Team Lead will maintain the approved proctor list and send it to Medical Staff to compile.

V. RESPONSIBILITY:

Questions concerning this policy and recommended revisions shall be directed to the Medical Staff Credentialing Supervisor, Robotics Medical Director, or designee.

VI. APPROVAL:

Reviewed and approved by the Medical Executive Committee.