

UNIVERSITY OF MARYLAND MEDICAL CENTER
Department of Diagnostic Radiology and Nuclear Medicine

Delineation of Privileges

Name: _____ **Date:** _____

Board Certification Status: _____ **Residency Program Completion Date** _____
American Board of Radiology _____ **Yes** **Year:** _____
 _____ **Eligible until:** _____
 _____ **No** _____
Other Boards: _____ **Yes** **Year:** _____
 _____ **Eligible until:** _____
 _____ **No** _____

Privilege/Procedure	Check (√) if Requested	Chair Approval Initial if Yes Write Not Approved if No
Category 0: In the case of an emergency, any member of the Medical Staff, to the degree permitted by his/her license and regardless of Medical Staff status, service or clinical privileges, shall be permitted to do everything possible to save the life of a patient or to save a patient from serious harm. <i>*Approved per the Medical Staff Bylaws</i>	√*	Yes
Category I - to be eligible for Category I core privileges, applicants must have completed an ACGME approved Radiology residency program or equivalent.		
Core privileges are as follows: Consultation, diagnostic test planning, radiation monitoring, and examination performance and interpretation of: general diagnostic radiologic examinations, diagnostic ultrasonography, diagnostic neuroradiology, diagnostic and therapeutic image-guided minimally invasive interventional radiologic procedures, computerized tomography (CT), magnetic resonance imaging (MRI), mammography, nuclear imaging and myelography, to diagnose and treat diseases of patients of all ages except as specifically excluded from practice. The core privileges include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills. See Attachment #1. Core Privileges in Diagnostic Radiology constitutes a single entity. It is not a list from which applicants may choose the privileges they wish to request. They describe the baseline scope of practice for fully qualified Diagnostic Radiologist within the specialty of radiology.		
Category II: to be eligible for Category II privileges, applicants must have completed an ACGME approved Radiology residency program or equivalent, and have training and/or experience and competence on a level provided by one or more of the radiology subspecialties such as: cross sectional imaging, women's imaging, vascular, interventional, MRI or nuclear medicine. Category II privileges are as follows:		
Cross-sectional Image-Guided Therapy		
Interventional Breast Procedures		
Therapeutic Nuclear Medicine		
Diagnostic Angiography (excluding pulmonary & selective cerebral and spinal angiography)		
Other (please list)		

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Category III: to be eligible for Category III privileges, applicants must have completed an ACGME approved Radiology residency program or equivalent, have completed the appropriate fellowship and have training and experience on a level to qualify them to perform and/or interpret all imaging procedures. Includes Vascular and Non-Vascular Procedures.		
Category III privileges are as follows: Consultation, diagnostic test planning, radiation monitoring, and examination performance and interpretation and to diagnose and treat patients of all ages by image guided percutaneous methods except as specifically excluded from practice. These include the use of fluoroscopy, digital radiography, computed tomography, sonography and magnetic resonance imaging in the performance of invasive percutaneous diagnostic and therapeutic radiological procedures. The core privileges include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills. See Attachment #2. Other (please list)		
Category IV: Special/Cross Disciplinary Procedures:		
Moderate (Conscious) Sedation – Individuals prescribing or administering controlled substance analgesics or sedatives during procedures must request this privilege. <u>Criteria for Approval:</u> 1. Proof of Current BLS, PALS, or NRP certification (please attach) 2. Completion of Age-Appropriate Moderate Sedation Education in-service every two years. (required for appointment and reappointment) (Physicians board certified in Anesthesiology, Critical Care Medicine, Emergency Medicine, Neonatology, or Oral & Maxillofacial Surgery are not required to fulfill criteria)		
Laser Privileges (separate application required)		
Carbon Dioxide		
Argon (Not Argon Plasma Coagulation)		
Nd-Yag		
Other: _____		

Applicant's Signature

Date

Section Chief's Signature

Date

Elias Melhem, MD, Chairman

Date

Required if any privilege is not approved

Applicant's Confirming Signature

Date

Attachment #1

Core Privileges in Diagnostic Radiology

Note: This list is a sampling of procedures included in the diagnostic radiology core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

Consultation, diagnostic test planning, radiation monitoring, and examination performance and interpretation of the following diagnostic or therapeutic procedures:

- Routine radiographic studies including the head, neck, spine, chest, abdomen, pelvis, or extremities.
- Fluoroscopic procedures of the gastrointestinal tract including videofluoroscopy, barium swallow, upper gastrointestinal series, small bowel series or follow through, single or double contrast barium enema, and enteroclysis,
- Radiologic procedures of the genitourinary tract with or without the use of intravascular contrast media and including intravenous pyelography/excretory urography, voiding cystourethrogram or retrograde urethrography
- Interpretation of intraoperative or endoscopic radiographic examinations including retrograde pyelography or cystography, endoscopic retrograde cholangiopancreatography (ERCP), cholangiography, or angiography.
- Radiologic procedures of the musculoskeletal system including arthrography, intra-articular aspirations or intra-articular injections/infusions.
- Myelography of the cervical, thoracic, or lumbar spine via a lumbar puncture using fluoroscopic guidance
- Ultrasonographic examinations or ultrasonographic-guided biopsy and drainage procedures of the body including examination of the abdomen, pelvis, pregnant uterus and fetus, chest, scrotum, arterial and venous vasculature, thyroid, musculature and including intracavitary/endoluminal sonography, intraoperative sonography, or neurosonology.
- Computed tomographic (CT) examinations or CT-guided biopsy and drainage procedures of the body with or without the use of intravascular contrast media and including examination of the head, neck, spine, chest, abdomen, pelvis, axial and peripheral skeleton and joints, extremities, or arterial and venous vasculature.
- Magnetic resonance imaging (MRI) examinations or MRI-guided biopsy and drainage procedures of the body with or without the use of intravascular contrast media and including examination of the head, neck, spine, chest, breast, abdomen, pelvis, axial and peripheral skeleton and joints, extremities, or arterial and venous vasculature.
- Image-guided biopsy of superficial or readily accessed nodules, masses or organs.
- Image-guided aspiration or drainage of superficial, simple or readily accessed cysts and other fluid collections.

Attachment #2

Core Privileges in Vascular and Non-Vascular Interventional Radiology

Note: This list is a sampling of procedures included in the interventional radiology core. This is not intended to be an all-encompassing list but rather reflective of the categories/types of procedures included in the core.

Consultation, diagnostic test planning, radiation monitoring, and examination performance and interpretation of the following diagnostic or therapeutic procedures:

Vascular

- Arteriography and venography of the chest, abdomen, pelvis, and extremities
- Arteriography of the carotid, vertebral, and intracerebral vasculature
- Transluminal angioplasty or endovascular stenting of the thoracic or abdominal aorta, extracranial carotid, vertebral, iliofemoral, and peripheral arteries.
- Transluminal angioplasty and endovascular stenting of central and peripheral veins.
- Arteriography and venography of the abdominal viscera including kidneys.
- Transluminal angioplasty and stenting of the visceral and renal arteries
- Endovascular embolization including the extracranial head and neck, chest, abdomen, pelvis, and extremities
- Intravascular thrombolytic therapy
- Therapeutic infusion of vasoactive agents
- Pulmonary angiography
- Endovascular retrieval of foreign body
- Transjugular biopsy of the liver
- Percutaneous placement of vena cava filter
- Venous sampling
- Venous access procedures including peripherally inserted central catheters (PICC), tunneled catheters and Portacaths.
- Venous Ablation Utilizing Laser Intervention *separate laser application required
- Intravascular chemotherapy infusion
- Transjugular intrahepatic portosystemic shunt (TIPS)

Non-Vascular

- Image-guided biopsies of deep solid masses, organs, or musculoskeletal structures including deep lung nodules
- Puncture and drainage of complex fluid collections and abscesses
- Percutaneous placement of gastroenteric tubes
- Percutaneous endourologic and endobiliary procedures including percutaneous antegrade puncture, percutaneous catheter drainage placement, antegrade stent placement, endoluminal biopsy, and percutaneous stone extraction.
- Percutaneous discography
- Percutaneous facet joint injections