

**Privileges Request Form**

I am requesting the specific privileges marked below. I understand that I may request additional privileges, or privileges in another Clinical Department, at any time. I also understand that the granting of these privileges is subject to verification of proficiency by the chair of the Department, the Credentials Committee of the Medical Staff, and/or any other person or body appropriately designated under the Bylaws, Rules and Regulations of the Medical Staff.

I understand that, in an emergency (any situation in which any delay in administering treatment would result in serious harm to the patient or an immediate threat to the life of the patient), I am authorized to treat any medical disease and/or perform any medical or surgical procedure indicated that is within the scope of my license.

Basic Education/Certificates: M.D. or D.O.

Minimum Formal Training Otolaryngology: Successful completion of an ACGME- or AOA-accredited residency in otolaryngology. - AND/OR - Current certification or active participation in the examination process (with achievement of certification in accordance with UCSF Medical Staff bylaws) leading to certification in otolaryngology by the American Board of Otolaryngology-Head and Neck Surgery or the AOBOO-HNS or foreign training and board equivalency.

Required current experience: At least 50 otolaryngologic surgery procedures, reflective of the scope of privileges requested, during the past 12 months; or successful completion of an ACGME- or AOA-accredited residency or clinical fellowship within the past 12 months.

Minimum Formal Training Pediatric Otolaryngology: Complex Pediatric Otolaryngology Board Certification and/or subspecialty training.

Renewal Criteria: Practitioners who do not meet the activity levels for maintenance/renewal criteria (such as Courtesy appointee) for particular privileges may submit – from their primary practice location—either;

- A.) A peer reference from the service Chief or Chair attesting to clinical competence in the requested privileges, or
- B.) Case-logs of clinical activity from their primary practice location.

**CATEGORY 1  
Basic Privileges**

| Requested | Privilege Description   | Initial Criteria                          | Renewal Criteria  | Proctoring   |
|-----------|---|---|---|--|
|           | <p>1 - Adult and Pediatric Core privileges for Otolaryngology</p> <p>Core privileges for otolaryngology include the ability to admit, evaluate, diagnose, and provide consultation and comprehensive medical and surgical care to patients of all ages presenting with diseases, deformities, or disorders of the head and neck that affect the ears, nose, throat, respiratory and upper alimentary systems, and related structures of the head and neck. Head and neck oncology and facial plastic reconstructive surgery and the treatment of disorders of hearing and voice are included. May provide care to patients in the intensive care setting in conformance with unit policies. Otolaryngologists also assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the following list and other procedures that are extensions of the same techniques and skills.</p> <p>Head and Neck: Salivary Glands<br/>Parapharyngeal space tumor, Parotidectomy with nerve graft, Submandibular gland resection. Sialendoscopy and related procedures.</p> <p>Nose and Maxilla<br/>Rhinectomy, Lateral rhinectomy, Maxillectomy, Maxillectomy and orbital exenteration, Excision angiofibroma, Excision other nasopharyngeal tumor, Excision tumor ethmoid cribriform plate, Nasal</p> | <p>See Minimum formal training above.</p> | <p>A Minimum of five (5) cases per year reflecting the spectrum of the core procedure unless prior arrangements for performance of other surgical procedures have been made with the Chair.</p> | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |

polypectomy, Lip shave, Wedge resection, Excision and flap reconstruction

#### Oral Cavity

Local resection cancer mouth, Hemiglossectomy, Composite resection of mouth, Mandibular resection

#### Ear

Excision pinna, Temporal bone resection

#### Otologic

Myringotomy, Tympanoplasty I, Repair fistula (OW, RW), Labyrinthectomy, Tympanoplasty II-IV w/o mastoidectomy, Simple mastoidectomy, Modified radical mastoidectomy, Ossiculoplasty, Stapedectomy, Facial nerve decompression. Facial nerve graft, repair or substitution, Decompression membranous labyrinth Cochleosacculotomy, Neurorrhaphy, Reconstruction aural atresia, Repair of CSF leak

#### Plastic and Reconstructive

Reconstruction external ear, Otoplasty, Rhinoplasty, Mentoplasty, Rhytidectomy, Blepharoplasty, Repair of facial lacerations, Reduction, Reconstruction, and Fixation of Facial Fractures-laryngoplasty, Tracheoplasty, Pedicle flap procedures, Skin resurfacing, Cosmetic Injection, Nerve graft, Gender affirming surgery of the face, head, and neck, Nerve repair.

#### Grafts

Split thickness skin, Full thickness skin, Fascial sling procedures, Oroantral fistula repair, Choanal atresia repair, Cleft lip repair. Cleft palate repair, Pharyngeal flap, TMJ surgery, Excision skin lesions, Scar revisions

#### Larynx

Thyrotomy, Vertical hemilaryngectomy, Supraglottic laryngectomy, Total Laryngectomy, Laryngopharyngectomy, Surgical speech fistula, Repair laryngeal fracture, Section recurrent laryngeal nerve, Arytenoidectomy, Arytenoidopexy, Thyroid lobectomy, Subtotal thyroidectomy, Total thyroidectomy, Pharyngoesophagectomy, Cervical esophagostomy for feeding, Pharyngeal diverticulectomy, Tracheotomy, Tracheal resection and repair, Major vessel ligation, Major vessel repair, Congenital cysts, Brachia cleft, Thyroglossal duct cyst, Dermoid, Lymphangioma, cystic hygroma

#### General

Adenoidectomy, Tonsillectomy, Tonsillectomy and Adenoidectomy, Uvulopalatopharyngoplasty, hypoglossal nerve stimulator implantation, Submucous resection of septum, Nasal septoplasty, Turbinectomy, Dacryocystorhinostomy – open, Caldwell Luc, Transantral ligation of vessels, Vidian neurectomy, Mid-face degloving, Osteoplastic frontal sinusotomy, External ethmoidectomy, Frontoethmoidectomy, Frontal sinus trephine, Endonasal sinus surgery  
Intra nasal ethmoidectomy. Sphenoidotomy, Radical pan-sinusotomy, Intranasal pan-sinusotomy, Intranasal dacryocystorhinostomy, Intranasal antrostomy, Hypophysectomy, transnasal approach, Intranasal frontal sinusotomy, CSF leak repair procedures, Orbital decompression

#### Endoscopy

Direct laryngoscopy, Laryngoscopy & excision, Microdirect laryngoscopy with microflap dissection, Microdirect laryngoscopy with resection of tumor, Vocal cord injection, Esophagoscopy, Bronchoscopy, Pan-endoscopy, Mediastinoscopy

#### Neck

Carotid body tumor resection, I & D neck abscess, Complete neck dissection, Modified neck

dissection, Cervical node biopsy, Scalene node biopsy, Thyroidectomy, Parathyroidectomy

Laser Surgery  
Laser Surgery using a variety of lasers

**CATEGORY 2  
Subspecialty Privileges**

| Requested | Privilege Description  | Initial Criteria  | Renewal Criteria   | Proctoring   |
|-----------|--|---|--|--|
|           | <p>1 - Complex Pediatric Otolaryngology Privileges<br/>Complex Pediatric Otolaryngology (CPO) is the compendium of medical knowledge and care for: a) children with complex otolaryngologic disorders, and/or b) common otolaryngologic disorders in children with complex comorbidities. A key tenet of CPO is that these children are, on many occasions, better suited for medical or surgical care in tertiary pediatric facilities within inter-disciplinary teams.</p> <p>Sub-certification in CPO recognizes diplomates that complete additional training, successfully demonstrate advanced knowledge and skills beyond primary certification, and validate an ongoing clinical practice within the subspecialty. The criteria that define CPO clinical practice include practice setting, case types, and participation in multidisciplinary activities.</p> <p>Sub-certification in CPO is not necessary for the evaluation and management of all children with otolaryngologic disease since the majority of pediatric patients can be treated by ABOHNS diplomates with primary certification in Otolaryngology-Head and Neck Surgery. Development of CPO sub-certification by the ABOHNS has been a collaborative process with input from the ABOHNS and ASPO over several years, from which this statement is drawn.</p> | <p>Demonstrable subspecialty training or equivalent practice experience in multidisciplinary care.</p>  | <p>Perform ten (10) cases over the two-year period.</p>                                    | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |
|           | <p>2 - Orthognathic Surgery<br/>Orthognathic surgery privileges include: midface and mandibular sliding osteotomies for the treatment of sleep apnea.</p>  | <p>Board-Certified or eligible for Board Certification;<br/>And<br/>Completion of additional training no less than six (6) months in duration with an experience in maxillomandibular advancement to treat obstructive sleep apnea (OSA) that includes direct involvement with a minimum of twenty (20) surgical cases.<br/>AND<br/>Sufficient background and training demonstrated by surgical experience of at least ten (10)</p> | <p>Perform at least two (2) orthognathic cases per year or four cases within two years</p> | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |

|  |   | cases  |   |  |
|--|---|--|---|--|
|  | <p>3 - Microvascular Surgery<br/> Microvascular surgery privileges include: free flap reconstruction/ transfers, and replantation.</p>  | <p>Board Certified or eligible for Board certification.<br/> AND<br/> Must have met the criteria for Core Privileges in the Department of OHNS;<br/> AND<br/> Must additionally have completed a fellowship in head and neck OR plastic surgery that includes exposure to microvascular surgery OR have documentation of successful training of the procedure during residency training;<br/> OR have been previously certified to perform microvascular</p> | <p>Perform at least two microvascular cases per year or four cases within two years.<br/> AND<br/> Significant failure rates will require focus review by the Department of HNS Chair or designee privileged to perform microvascular anastomoses</p> | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |
|  | <p>4 - Skull Base Surgery<br/> Skull base tumors and lesions in all locations of the skull base (e.g. foramen magnum, jugular foramen, cerebellopontine angle, petrous apex, petroclival junction, sphenoid, anterior cranial fossa, etc.) that are considered part of the privileges include acoustic neuromas/ vestibular schwannomas, schwannomas of other cranial nerves (including nerves V-XII), facial nerve neuromas, vascular tumors (hemangiomas), lipomas, metastatic lesions found within the cerebellopontine angle, meningiomas, and glomus tumors. A variety of surgical approaches can be used to remove these tumors, often, though not always in conjunction with neurosurgery or related skull base specialties (ophthalmology, plastic surgery, etc...)</p> | <p>Board Certified or eligible for Board Certification;<br/> AND<br/> Met the criteria for Core Privileges in Head and Neck Surgery within the Department of OHNS;<br/> AND<br/> One of the following:<br/> A. Completed an Otolaryngology or Neurotology fellowship beyond the required otolaryngology residency or</p>   | <p>Perform at least two (2) skull base tumor resection cases, or two (2) skull base approaches per year, or a combination of the two</p>  | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |

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|  |                              | <p>demonstrated experience of at least 10 cases. An Otology fellowship provides the surgeon with additional experience and expertise in neurotology and skull base surgery, including such procedures as craniotomies for cerebellopontine angle tumors (e.g. translabyrinthine, middle fossa, retrosigmoid) and major skull base surgery (tumors of the petrous bone, clivus, foramen magnum, jugular foramen, cavernous sinus, etc.).OR<br/> B. Sinus Fellowship;<br/> OR<br/> C. Head oncology;<br/> OR<br/> D. Sufficient background and training demonstrated by surgical experience of at least 10 cases.</p> |  |  |
|  | <p>5 - Cochlear Implants</p> | <p>Board Certified or eligible for Board Certification;<br/> AND<br/> Met the criteria core privileges in the Department of OHNS;<br/> AND<br/> Complete an Otology or Pediatric OHNS fellowship beyond the required otolaryngology residency. The</p>  | <p>Perform at least two (2) cochlear implant cases per year.</p> | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |

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|--|------------------------------|---|--|--|
|  |                              | <p>Otology Fellowship must have included additional training in the diagnosis, management, prevention, cure, and care of patients with diseases of the ear and temporal bone, including disorders of hearing and balance, and cochlear implantation through a comprehensive program.</p>  |  |  |
|  | <p>6 - Ultrasound - Neck</p> | <p>Completion of 25 hours of didactic training in ultrasonography and successful completion of 20 neck ultrasound examinations, in which the candidate performs, evaluates and interprets sonograms under the supervision of a physician who is:</p> <ul style="list-style-type: none"> <li>• Credentialed in neck ultrasonography; OR</li> <li>• Board Certified in Radiology; OR</li> <li>• Previously certified in neck ultrasound at another U.S. hospital according to standards consistent with the guidelines of the American College of Surgeons or the American Academy of Otolaryngology/Head and Neck Surgery</li> </ul> <p>OR<br/>Completion of</p> | <p>Ten (10) neck ultrasound procedures over the two-year period.</p> | <p>(5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring</p> |

training program after 2010 with demonstrable training in ultrasound.

**CATEGORY 3  
Special Privileges**

| Requested | Privilege Description                  | Initial Criteria                     | Renewal Criteria                     | Proctoring  |
|-----------|--|--------------------------------------|--------------------------------------|---|
|           | 1 - Sedation                           |                                      |                                      | (5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring |
|           | 2 - Fluoroscopy                        | Fluoroscopy supervisor certification | Fluoroscopy supervisor certification | (5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring |
|           | 3 - Percutaneous Gastrostomy Placement |                                      |                                      | (5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring |
|           | 4 - Robotic Surgery                    |                                      |                                      |   |

|  |   |  |  |   |
|--|---|--|--|---|
|  | B - Robotic Surgery: SP   |  |  | (5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring |
|  | 5 - Educational Core Privilege  |  |  | (5) encounters with satisfactory outcomes for each requested procedure must be submitted to complete proctoring |
|  | <p>6 - Ambulatory Surgery Center - Peninsula Outpatient Center Privileges (POPC)</p> <p>Adult and Pediatric Core privileges for Otolaryngology: These include the procedures on the following list and other procedures that are extensions of the same techniques and skills.</p> <p>-General<br/>Adenoidectomy, Tonsillectomy, Tonsillectomy and Adenoidectomy, Uvulopalatopharyngoplasty, hypoglossal nerve stimulator implantation, Submucous resection of septum, Nasal septoplasty, Turbinectomy, Dacryocystorhinostomy – open, Caldwell Luc, Transantral ligation of vessels, Vidian neurectomy, Mid-face degloving, Osteoplastic frontal sinusotomy, External ethmoidectomy, Frontoethmoidectomy, Frontal sinus trephine, Endonasal sinus surgery, Intra nasal ethmoidectomy. Sphenoidotomy, Radical pan-sinusotomy, Intranasal pan-sinusotomy, Intranasal dacryocystorhinostomy, Intranasal antrostomy, Hypophysectomy, transnasal approach, Intranasal frontal sinusotomy, CSF leak repair procedures, Orbital decompression</p> <p>-Head and Neck<br/>Salivary Glands, Parapharyngeal space tumor, Parotidectomy with nerve graft, Submandibular gland resection, Sialendoscopy and related procedures.</p> <p>-Nose and Maxilla<br/>Rhinectomy, Lateral rhinectomy, Maxillectomy, Maxillectomy and orbital exenteration, Excision angiofibroma, Excision other nasopharyngeal tumor, Excision tumor ethmoid cribriform plate, Nasal polypectomy, Lip shave, Wedge resection, Excision and flap reconstruction</p> <p>-Oral Cavity<br/>Local resection cancer mouth, Hemiglossectomy, Composite resection of mouth, Mandibular resection</p> <p>-Ear</p> |  |  |   |

Excision pinna, Temporal bone resection

**-Otologic**

Myringotomy, Tympanoplasty I, Repair fistula (OW, RW), Labyrinthectomy, Tympanoplasty II-IV w/o mastoidectomy, Simple mastoidectomy, Modified radical mastoidectomy, Ossiculoplasty, Stapedectomy, Facial nerve decompression. Facial nerve graft, repair or substitution, Decompression membranous labyrinth Cochleosacculotomy, Neuroorrhaphy, Reconstruction aural atresia, Repair of CSF leak

**-Plastic and Reconstructive**

Reconstruction external ear, Otoplasty, Rhinoplasty, Mentoplasty, Rhytidectomy, Blepharoplasty, Repair of facial lacerations, Reduction, Reconstruction, and Fixation of Facial Fractureslaryngoplasty, Tracheoplasty, Pedicle flap procedures, Skin resurfacing, Cosmetic Injection, Nerve graft, Gender affirming surgery of the face, head, and neck, Nerve repair.

**-Grafts**

Split thickness skin, Full thickness skin, Fascial sling procedures, Oroantral fistula repair, Choanal atresia repair, Cleft lip repair. Cleft palate repair, Pharyngeal flap, TMJ surgery, Excision skin lesions, Scar revisions

**-Larynx**

Thyroglossal duct cyst, Dermoid, Laryngoscopy, Congenital cysts, Branchial clefts

**-Endoscopy**

Direct laryngoscopy, Laryngoscopy & excision, Microdirect laryngoscopy with microflap dissection, Microdirect laryngoscopy with resection of tumor, Vocal cord injection, Esophagoscopy, Bronchoscopy, Pan-endoscopy, Mediastinoscopy

**-Neck**

Carotid body tumor resection, I & D neck abscess, Complete neck dissection, Modified neck dissection, Cervical node biopsy, Scalene node biopsy, Thyroidectomy, Parathyroidectomy

**-Laser Surgery**

Laser Surgery using a variety of lasers

**Admitting Services I expect to admit and care for patients under my own name on OHNS Service**

| Requested | Privilege Description  | Initial Criteria | Renewal Criteria | Proctoring |
|-----------|------------------------|------------------|------------------|------------|
|           | Otolaryngology Service | N/A              |                  | N/A        |

**APPLICANT'S SIGNATURE:** \_\_\_\_\_

Date: \_\_\_\_\_

**DEPARTMENTAL REVIEW AND RECOMMENDATION**

I am not aware of any physical or mental health status issue that could in any way impair this individual's abilities to practice within the privileges requested.

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UCSF Division Chief Signature

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Date

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UCSF Department Chair Signature

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Date