

Required Clinical Privileging Criteria for Robotic Surgery

Initial Privileging – No Previous Experience with Robotics (e.g., existing surgeon newly trained on daVinci)	Initial Privileging – Newly Graduated from Residency/Fellowship		Initial Privileging – Experience Achieved After Completion of Formal Training (e.g., surgeon trained at another hospital)		
	If prior experience is >20 cases (verified by case log documentation) as primary surgeon	If prior experience is <20 cases as primary surgeon	If prior experience is >40 cases (verified by case log documentation) as primary surgeon	If prior experience is <40 but >20 cases (verified by case log documentation) as primary surgeon	If prior experience is <20 cases as primary surgeon
<p>Baseline Qualifications</p> <p>NOTE: All physicians, including surgeons observing & evaluating and assisting surgeons, and all APPs (e.g., PAs and APRNs) are required by CMS and Joint Commission to be credentialed using the medical staff process. The DHP process must NOT be used for these provider types, regardless of their level of involvement in the procedure.</p> <p>NOTE: For purposes of these guidelines, the surgeon who is performing the initial observation and evaluation could be a volunteer from the medical staff or another facility, or an outside paid consultant, provided each is a fully trained and experienced robotic surgeon who has been approved to perform this function.</p>					
Board certified/eligible in the specialty associated with the	Board eligible in the specialty associated with the robotic privileges requested		Board certified/eligible in the specialty associated with the robotic privileges requested		
Has privileges for equivalent procedure(s) via other means (e.g., open or laparoscopic)	Residency/fellowship included training in equivalent procedure(s) via other means (e.g., open or laparoscopic)		Has privileges for equivalent procedure(s) via other means (e.g., open or laparoscopic)		
Practitioner is credentialed in accordance with medical staff bylaws and all other medical staff criteria are met to qualify for clinical privileges (e.g., threshold eligibility criteria and other qualifications are met, as applicable.)					
<p>Training Specific to Robotics</p>					
Case observation <i>(Defined as: Observation of at least one case by potential surgeon to ascertain his/her interest in this training pathway.)</i>	N/A		N/A		

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N/A	Program director must provide an evaluation of competency specific to robotic surgery, including verification of the number of cases the resident/fellow performed as the primary surgeon, and verification that there were no concerns about clinical quality or performance		Department chairman from facility where the surgeon most recently practiced must provide an evaluation of competency specific to robotic surgery, including verification of the number of cases performed as the primary surgeon, and verification that there are/were no concerns about clinical quality or performance		
Surgeon completes all of the following within 60 days prior to initial case with the observing & evaluating surgeon:		Evidence of completion of all of the following:			Evidence of completion of all of the following:
<ul style="list-style-type: none"> Intuitive Surgical provided on-line computer modules for introduction to the daVinci components 		<ul style="list-style-type: none"> Intuitive Surgical provided on-line computer modules for introduction to the daVinci components 			<ul style="list-style-type: none"> Intuitive Surgical provided on-line computer modules for introduction to the daVinci components
<ul style="list-style-type: none"> Bedside and daVinci side-cart training (at hospital or at daVinci training facility) 		<ul style="list-style-type: none"> Bedside and daVinci side-cart training (at hospital or at daVinci training facility) 			<ul style="list-style-type: none"> Bedside and daVinci side-cart training (at hospital or at daVinci training facility)
<ul style="list-style-type: none"> Side-cart docking practice (at hospital or at daVinci training facility) 		<ul style="list-style-type: none"> Side-cart docking practice (at hospital or at daVinci training facility) 			<ul style="list-style-type: none"> Side-cart docking practice (at hospital or at daVinci training facility)

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<ul style="list-style-type: none"> Instrument insertion and exchange practice (at hospital or at daVinci training facility) 		<ul style="list-style-type: none"> Instrument insertion and exchange practice (at hospital or at daVinci training facility) 			<ul style="list-style-type: none"> Instrument insertion and exchange practice (at hospital or at daVinci training facility)
<ul style="list-style-type: none"> Live tissue practice in porcine lab 		<ul style="list-style-type: none"> Dry lab skills and simulation certificate 			<ul style="list-style-type: none"> Dry lab skills and simulation certificate
<ul style="list-style-type: none"> Four (4) basic simulation exercises with a passing score of > 85% on each, with specific exercises TBD by credentials committee 		<ul style="list-style-type: none"> Four (4) basic simulation exercises with a passing score of > 85% on each, with specific exercises TBD by credentials committee 			<ul style="list-style-type: none"> Four (4) basic simulation exercises with a passing score of > 85% on each, with specific exercises TBD by credentials committee

Privilege Delineation Notes

DaVinci privileges must be specifically delineated and are not to be assumed to be included as part of the privileges for the surgical procedure itself. The use of robotic technology requires specialized training and unique skills, therefore the privilege to perform a specific type of surgical procedure must delineate whether it includes performing the procedure as an open procedure, and/or a laparoscopic procedure, and/or a robotically-assisted procedure, as applicable and appropriate to the procedure. New uses of daVinci technology to perform surgical procedures already being performed must be approved and privileges granted for that.

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Satisfactory completion of four (4) cases with and observing & evaluating surgeon within 60 days after training	Minimally invasive fellowship trained MDs will be evaluated on a case-by-case basis with consideration of robotic experience.		N/A	Satisfactory completion of two (2) cases with an observing & evaluating surgeon within 60 days of each other after initial privileging	Satisfactory completion of four (4) cases with an observing & evaluating surgeon within 60 days of each other after initial privileging
	Satisfactory completion of two (2) cases with an observing & evaluating surgeon within 60 days of each other after initial privileging	Satisfactory completion of four (4) cases with an observing & evaluating surgeon within 60 days of each other after initial privileging			
Performance of four (4) additional cases with assistance by a robotically-trained surgeon			N/A	Performance of four (4) additional cases with assistance by a robotically-trained surgeon	
All cases should be completed within one year.					
Review by credentials committee of the observing & evaluating surgeon's reports for above cases and a recommendation to the MEC to grant full privileges, amend privileges, or discontinue privileges.					

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OPPE (metrics to be reviewed at least every 8-10 months)					
OPPE metrics: <ul style="list-style-type: none"> • daVinci procedure volume • Mortalities associated with a daVinci procedure • Complication resulting from a daVinci procedure • Any other morbidity or mortality associated with a daVinci procedure 					
Renewal of Privileges					
If greater than 40 cases within 2 years, the surgeon must have satisfactory OPPE metrics to renew privileges.					
If less than 40 cases but greater than 20 cases within 2 years, the surgeon must pass simulation requirements as outlined below <u>and</u> have satisfactory OPPE metrics to renew privileges					
If less than 20 cases/2 years are performed, the surgeon must pass simulation requirements as outline below <u>and</u> have satisfactory OPPE metrics <u>and</u> successfully complete re-evaluation with two (2) cases with an observing & evaluating surgeon to renew privileges					
Simulation exercises must be completed with validated completion (e.g., should not be simply a self-attestation of completion – a smart phone photo of the console showing score and completion would be considered validation, or simulation score can be saved in console but only if hospital sets up each surgeon as a user with a user name and pass code using the administrative function), and with a passing score of 85% or greater.					

***Da Vinci required simulations approved by SDMC Credentials Committee: Camera Targeting 1, Energy Switching 1, Suture Sponge 1, and Thread the Rings.