

**ST. DAVID'S MEDICAL CENTER**  
**CARDIOLOGY -**  
**Special, Invasive, Diagnostic, or High-Risk Procedure Requirements**

**Cardiac Catheterization & Peripheral Angiography**

**Initial Appointment Requirements:**

- Completion of a fellowship in Cardiovascular Disease within the prior 1 year that included the performance of 300 procedures with 200 as primary operator; OR
- If fellowship program completed more than 1 year prior, a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of 100 procedures during the prior 2 years.

**Reappointment Requirements:**

- Documentation of the successful performance of 50 procedures in prior 2 years.
  - If 50 procedures in prior 2 years are not achieved, approval may be considered if:
    - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
      - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,
- AND
- (b) 100% record review of first five (5) cases.

**Percutaneous Closure Devices:**

**Initial Appointment Requirements:**

- Completion of a Cardiovascular Disease fellowship within the prior 1 year; OR
- If training completed more than 1 year prior, then evidence of completion of a vendor course; OR
- If training completed more than 1 year prior, then a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) attesting to experience and ability to perform the procedure at that hospital

**Reappointment Requirements:**

- Evidence of current clinical competence:
    - (1) If a SDMC Campus is the primary practicing facility, the Department Chair at that campus may attest to abilities and performance and approve,
- OR
- (2) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Campus Department Chair for review.

**Coronary Intervention Privileges – PTCA, Coronary Stent Placement & Coronary Atherectomy**

**Initial Appointment Requirements:**

- Documentation, in the form of a program director letter, from ACGME-approved interventional cardiology fellowship program (completed within the immediate past year) of the performance of 150 coronary interventions during fellowship as primary operator; OR
- If interventional cardiology fellowship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 25 successful coronary interventions performed within the last 1 year; OR
- In lieu of formal fellowship training:
  - a) At least 3 years' experience in performing cardiac catheterization with documentation of 300 diagnostic cardiac catheterizations and coronary angiographies (100 per year in prior 3 years); AND
  - b) At least 30 hours of CME Category I instruction over 24 months to include special instruction on coronary interventions; AND
  - c) Performance of at least 50 coronary interventions as primary operator over the prior 2 year period with a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.
- All Initial Appointments:** Evaluation and assessment of the first 5 coronary intervention procedures.

**Reappointment Requirements:**

- Documentation of the successful performance of 50 coronary interventions in prior 2 years.
- If 50 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC

- CMOs for review,
- AND
- (b) 100% record review of first five (5) cases.

### **Peripheral Intervention Privileges – Peripheral Angioplasty, Peripheral Stent and Peripheral Stent Graft Placement & Peripheral Atherectomy**

#### Initial Appointment Requirements:

- Documentation, in the form of a program director letter, from ACGME-approved interventional cardiology fellowship program (completed within the immediate past year) of the performance of 100 diagnostic peripheral angiograms and 50 peripheral percutaneous interventions with at least 25 as primary operator; OR
- If interventional cardiology fellowship completed more than 1 year prior, a letter from the Section/ Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 50 diagnostic angiograms and 25 successful peripheral percutaneous interventions performed within the last 1 year; OR
- In lieu of formal fellowship training:
  - a) Training under proctorship of formally trained and competent coronary and vascular interventionalist; AND
  - b) Completion of training within 24 month period with formal curriculum with goals and objectives; AND
  - c) Documentation of the number of procedures, outcomes and complications; AND
  - d) Experience in various non-invasive peripheral vascular testing procedures (duplex ultrasound, segmental blood pressure measurement, ABI with or without exercise testing, CTA and MRA); AND
  - e) Perform 100 diagnostic peripheral procedures (50 as primary operator); AND
  - f) Perform a minimum of 50 peripheral interventional procedures (25 as primary operator) with a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.
- All Initial Appointments:** Evaluation and assessment of the first 5 peripheral intervention procedures.

#### Reappointment Requirements:

- If requesting all three categories of Peripheral Intervention, documentation of the successful performance of 25 peripheral interventions per year.
  - Physicians maintaining competence in one or two peripheral vascular intervention categories must provide documentation of the successful performance of a minimum of 10 peripheral interventions per year as primary operator in that (those) pre-defined vascular category/categories:
    - o Aortoiliac / Renal / Mesenteric arterial disease
    - o Subclavian / vertebral PAD
    - o Infrainguinal PAD
  - If 25 (or 10, if applicable to single category) procedures per year are not achieved, approval may be considered if:
    - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
      - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,
- AND
- (b) 100% record review of first five (5) cases.

### **IVUS**

#### Initial Appointment & Reappointment Requirements:

- Maintenance of privileges to perform intervention procedures at St. David's Medical Center.

### **TEEs**

#### Initial Appointment Requirements:

- Documentation, in the form of a program director letter, from ACGME-approved cardiology fellowship program (completed within the immediate past year) of the performance of 20 TEE procedures; OR
- If cardiology fellowship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 25 successful TEE procedures in prior 2 years; OR
- In lieu of formal fellowship training, documentation of completion of an approved course and a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 25 successful TEE procedures in prior 2 years

#### Reappointment Requirements:

- Documentation of the successful performance of 10 TEE procedures in prior 2 years.
- If 10 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary

affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Single and Dual Chamber Permanent Pacemaker Implantation (General Cardiology)**

Initial Appointment Requirements:

- Documentation, in the form of a program director letter, from ACGME-approved cardiology fellowship program (completed within the immediate past year) of the performance of 25 permanent pacemaker implants as primary operator; OR
- If cardiology fellowship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 25 successful permanent pacemaker implants in prior 2 years; OR
- In lieu of formal fellowship training:
  - a) Applicant must attend an approved course where 25 cases are performed as the primary operator; AND
  - b) Provide a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital; AND
  - c) Receive proctoring of the first 5 permanent pacemaker implants by credentialed member of the St. David's Medical Center Medical Staff.

Reappointment Requirements:

- Documentation of the successful performance of 10 permanent pacemaker implants in prior 2 years.
- If 10 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Lead Extraction/Repositioning less than 1 year – General Cardiology**

Initial Appointment & Reappointment Requirements:

- A general cardiologist who has approved privileges for single and dual chamber permanent pacemaker implantation may reposition leads in place less than 1 year. If the lead was placed greater than 1 year ago, EP oversight is required.

### **Vena Cava Filter Placement**

Initial Appointment Requirements:

- Documentation, in the form of a program director letter, from ACGME-approved cardiology fellowship program (completed within the immediate past year) of training and performance of procedure; OR
- If cardiology fellowship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) attesting to current clinical competence in performing the procedure; OR
- In lieu of formal fellowship training, documentation of completion of an approved vendor-sponsored training core, a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital, and evaluation and assessment of first two (2) cases by a credentialed member of the St. David's Medical Center Medical Staff.

### **Endomyocardial Biopsy**

Initial Appointment Requirements:

- Maintenance of privileges to perform cardiac catheterization procedures at St. David's Medical Center; AND
- Documentation of having performed 5 endomyocardial biopsy procedures in prior 2 years with a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.

Reappointment Requirements:

- Documentation of the successful performance of 5 endomyocardial biopsy procedures in prior 2 years.
- If 5 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

## **Aortic, Mitral, and Pulmonic Valvuloplasty**

### Initial Appointment Requirements:

- Completion of an ACGME-approved interventional cardiology fellowship within the immediate past year, documenting hands-on training in trans-septal approaches and mitral, aortic, and pulmonic valvuloplasty procedures with the performance of a minimum of 5 cases; OR
- If interventional cardiology fellowship completed more than 1 year prior, a letter from the Section/ Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 5 successful valvuloplasty procedures performed within the last 1 year;

### Reappointment Requirements:

- Documentation of the successful performance of 4 Valvuloplasty procedures in prior 2 years.
- If 4 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

- (b) 100% record review of first five (5) cases.

## **Atrial Septal Defect (ASD) and Patent Foramen Ovale (PFO) Closures**

### Initial Appointment Requirements:

- Documentation, in the form of a program director letter, from ACGME-approved cardiology fellowship program (completed within the immediate past year) of the performance of 4 PFO/ASD closure procedures; OR
- If cardiology fellowship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 4 successful PFO/ASD closure procedures.

### Reappointment Requirements:

- Documentation of the successful performance of a sufficient number of cases to substantiate competence as reviewed by the Department of Cardiology Chair.

## **Transcatheter Aortic Valve Replacement**

### Initial Appointment Requirements:

- Privileged as a joint procedure between cardiology and cardiac surgery, with both operators requiring approved privileges.
- Must currently maintain unrestricted privileges in Balloon Aortic Valvuloplasty.
- Training (must meet one of the pathways below):**
  - a) Pathway One:
    - Successful completion of a dedicated training program by the device manufacturer; AND
    - Proctoring of first four (4) procedures by a member of the initial operator team at Heart Hospital of Austin or other qualified proctor (a proctor is defined as another physician privileged in the procedure that he /she is proctoring); AND
    - Documentation that applicant meets the CMS interventional cardiology criteria.
  - b) Pathway Two:
    - Documentation of TAVR training through a dedicated interventional cardiology fellowship program; AND
    - Documentation of performing a total of at least twenty (20) TAVR cases as a primary operator with acceptable review of the cases; AND
    - Proctoring of the first two (2) procedures as primary operator under the supervision of a qualified staff member physician at Heart Hospital of Austin or other qualified proctor (a proctor is defined as another physician privileged in the procedure that he /she is proctoring); AND
    - Documentation that applicant meets the CMS interventional cardiology criteria.
  - c) Pathway Three:
    - Documentation of performing a total of at least twenty (20) TAVR cases as a primary operator with acceptable review of the cases and a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital; AND
    - Proctoring of the first two (2) procedures as primary operator under the supervision of a qualified staff member physician at Heart Hospital of Austin or other qualified proctor (a proctor is defined as another physician privileged in the procedure that he /she is proctoring); AND
    - Documentation that applicant meets the CMS interventional cardiology criteria.

### Reappointment Requirements:

- Performance of four (4) TAVR procedures as primary operator annually.
- If 4 procedures per year over prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.

(1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Transcatheter Mitral Valve Repair/Replacement (TMVR/R)**

#### **Initial Appointment Requirements:**

- Privileged as a joint procedure between cardiology and cardiac surgery, with both operators requiring approved privileges.
- Must currently maintain unrestricted privileges in Transcatheter Valvuloplasty.
- Training (must meet one of the pathways below):**
  - d) Pathway One:
    - Successful completion of a dedicated training program by the device manufacturer (if both repair and replacement privileges are requested, must submit documentation from each device manufacturer); AND
    - Proctoring of first four (4) procedures by a member of the initial operator team at Heart Hospital of Austin or other qualified proctor (a proctor is defined as another physician privileged in the procedure that he /she is proctoring); AND
    - Documentation that applicant meets the CMS interventional cardiology criteria.
  - e) Pathway Two:
    - Documentation of TMVR/R training through a dedicated interventional cardiology fellowship program; AND
    - Documentation of performing a total of at least ten (10) TMVR/R cases as a primary operator with acceptable review of the cases; AND
    - Proctoring of the first two (2) procedures as primary operator under the supervision of a qualified staff member physician at Heart Hospital of Austin or other qualified proctor (a proctor is defined as another physician privileged in the procedure that he /she is proctoring); AND
    - Documentation that applicant meets the CMS interventional cardiology criteria.
  - f) Pathway Three:
    - Documentation of performing a total of at least ten (10) TMVR/R cases as a primary operator with acceptable review of the cases and a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital; AND
    - Proctoring of the first two (2) procedures as primary operator under the supervision of a qualified staff member physician at Heart Hospital of Austin or other qualified proctor (a proctor is defined as another physician privileged in the procedure that he /she is proctoring); AND
    - Documentation that applicant meets the CMS interventional cardiology criteria.

#### **Reappointment Requirements:**

- Performance of four (4) TMVR/R procedures annually.
- If 4 procedures per year over prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Temporary Mechanical Circulatory Support (MCS) /Extracorporeal Life Support (ECLS) Patient Management**

**Minimum Training:** Successful completion of ACGME-approved fellowship in Cardiothoracic Surgery, Cardiology, or Pulmonary Critical Care and meet the threshold criteria for privileges. Board certified in Cardiothoracic Surgery, Cardiology, Heart Failure Cardiology or Critical Care.

#### **Initial Appointment Requirements**

- a) Pathway One
  - Completed fellowship training within previous twelve (12) months.
  - Evidence that fellowship program specifically included temporary MCS/ECLS Patient Management training with a letter from the Program Director and evidence of management of at least ten (10) temporary MCS/ECLS patients in the previous twenty-four (24) months.
- b) Pathway Two
  - Privileged to perform temporary MCS/ECLS Patient Management at another TJC accredited facility.
  - Documentation of performance as primary provider of at least ten (10) temporary MCS/ECLS patients within the previous twenty-four (24) months.
- c) Pathway Three
  - Provide a certification of completion of a temporary MCS/ECLS course approved by the MCS Medical Director.

- Documentation of observation of the management of three (3) adult temporary MCS/ECLS patients in the previous twelve (12) months.
- First three (3) patient management cases proctored.

Reappointment Requirements

- Must provide primary, independent care of at minimum of ten (10) temporary MCS/ECLS patients AND at least thirty (30) days of temporary MCS/ECLS patient care within the past twenty-four (24) months.
- Documentation from the facility program director to be provided with each reappointment; OR
- Documentation of successful completion of a temporary MCS/ELCS patient management course in the past 24 months.

**Durable Mechanical Circulatory Support (Heart Hospital only)**

Minimum training: Completed Fellowship training, including Durable Mechanical Circulatory Support training and experience.

Certification: Board certified in Cardiology and be Board Certified or Board Eligible in Advanced Heart Failure/ Transplant Cardiology

**Initial Appointment Requirements**

- a) Pathway One
  - Completed fellowship training within previous twelve (12) months,
  - Documentation from your fellowship training program director documenting experience to include the management of at least 10 patients with Durable Mechanical Circulatory Support devices including major involvement in the selection process, pre and post-operative, inpatient and outpatient management OR
- b) Pathway Two
  - Completed fellowship greater than one (1) year ago; Documentation from your fellowship training program director documenting experience to include the management of at least 10 patients with Durable Mechanical Circulatory Support devices including major involvement in the selection process, pre and post-operative, inpatient and outpatient management.
  - First 5 cases to be proctored at Heart Hospital OR
- c) Pathway Three
  - Applicants without fellowship training (or fellowship training not including Durable Mechanical Circulatory Support training and experience) are required to provide documentation of management of at least 50 patients with Durable Mechanical Circulatory Support devices within the immediate past 60 months including major involvement in the selection process, pre and post-operative, inpatient and outpatient management.

**Reappointment Requirements**

- Participate in manufacturer sponsored device specific training for any device new to the physician.
- Attend at least one Advanced Heart Failure/Transplant Cardiology meeting every 24 months with a program that is at least 50% Mechanical Circulatory Support related.
- Participate in education, outreach, marketing and research activities

**Nuclear Cardiology**

Initial Appointment Requirements:

- General Requirements:
  - a) Must be approved by the Hospital Radiation Safety Officer for addition to the institutional Radioactive Material license issued by the Texas Department of Health (TDH) Bureau of Radiation Control. Applicant must meet all eligibility requirements determined by TDH for licensure.
  - b) Must be listed as an authorized user on the Hospital Radioactive Materials license.
- \*Privileges to perform nuclear medicine at this facility are contingent upon receipt of official notification documenting your addition to the institution's license.
- Appointment Requirements
  - a) Documentation of the satisfactory completion of a clinical preceptorship in nuclear cardiology as defined by the US Nuclear Regulatory Commission within the immediate past year to include: experience with direct patient training experience with 50 patients; and training in computer methods for analysis of perfusion imaging studies, including SPECT and ejection fraction and regional wall motion measurements from Radionuclide angiographic studies; OR
  - b) If Nuclear Cardiology preceptorship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 30 patient encounters in prior 2 years; OR
  - c) Documentation in the form of a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 30 patient encounters in prior 2 years;

Reappointment Requirements:

- Documentation of the performance of 30 radionuclide cardiac imaging studies in prior 2 years; AND
- Must continue to be listed as an authorized user on the Hospital Radioactive Materials License.
- If 30 studies in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary

affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Non-Invasive Vascular Reading (Doppler)**

Initial Appointment Requirements (must meet one of the following requirements):

Formal Training Program:

- a) Completion of residency or fellowship which includes a didactic and clinical vascular laboratory experience as an integral part of the program; AND
- b) Have the following minimum number of studies completed while under supervision:
  - o 100 cases – Carotid duplex ultrasound
  - o 100 cases – Peripheral arterial physiologic Tests (e.g. extremity pressures, Doppler waveforms, Exercise Testing, reactive hyperemia)
  - o 100 cases – Peripheral arterial duplex ultrasound
  - o 100 cases – Venous duplex ultrasound
  - o 75 cases – Visceral vascular duplex ultrasound

OR

Informal or Self-Study Training Program:

- a) Experience may be achieved through formal accredited post-graduate education. The experience must be inclusive of 40 hours minimum of Category I CME credit acquired within a three (3) year period. 50% of these hours (20 hours) must be met with courses specifically designed to provide knowledge of techniques, limitations, accuracies and methods of interpretation of noninvasive vascular lab testing. The remaining 20 hours may be dedicated to appropriate clinical topics relevant to vascular laboratory testing, and CME courses must be documented verifying the course content. AND
- b) Provide a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital. AND
- c) Supervision by a physician credentialed at St. David's Medical Center in the specific skill set for 5 studies each:
  - o Carotid duplex ultrasound
  - o Peripheral arterial physiologic tests
  - o Peripheral arterial duplex ultrasound
  - o Venous duplex ultrasound
  - o Visceral vascular duplex ultrasound

OR

Established Practice:

- a) Must have worked in a vascular laboratory for at least 3 years and interpreted the following minimum number of vascular laboratory tests in prior 3 years:
  - o 75 cases – Carotid duplex ultrasound
  - o 75 cases – Peripheral arterial physiologic tests & peripheral arterial duplex ultrasound
  - o 75 cases – Venous duplex ultrasound
  - o 75 cases – Visceral vascular duplex ultrasound

AND

- b) A letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.

**Note: If only interested in interpreting Doppler Ultrasound in a specific area, then must show minimum number of vascular laboratory test interpretations in that specific area only.**

Reappointment Requirements:

Documentation of the interpretation of a minimum number of studies in the following requested areas in prior 2 years:

- a) 20 cases – Carotid
- b) 20 cases – Peripheral Arterial
- c) 20 cases – Venous
- d) 20 cases – Visceral

**Note: If only interested in interpreting Doppler Ultrasound in a specific area, then must show minimum number of vascular laboratory test interpretations in that specific area only.**

If 20 cases per area in prior 2 years are not achieved, approval may be considered if:

- (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.

(1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Non-Contrast CCT (Calcium or “Heart Score”)**

Initial Appointment Requirements (must meet one of the following requirements):

- Formal Training Program:
  - a) Board certified or board eligible in Cardiology; AND
  - b) Completion of 20 hours of courses/lectures related to CT in general and/or specific to CCT; AND
  - c) Documentation of interpretation of 100 non-contrast CCT examinations (25 of these cases in which the physician must be physically present and involved in interpretation of case; and, an additional 25 of these cases in which the physician must be actively involved in data set manipulation); AND
  - d) Provide a letter from the Section/Department Chair at applicant’s primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.
- OR
- In Lieu of Formal Training:
  - a) Board certified or board eligible in Cardiology; AND
  - b) Provide a letter from the Section/Department Chair at applicant’s primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital; AND
  - c) Must have first 10 cases over-read by a physician credentialed at St. David’s Medical Center in non-contrast CCT.
- OR
- Board Certification
  - a) Confirmation of Board certification in CCT by the Certification Board of Cardiovascular CT; AND
  - b) Provide a letter from the Section/Department Chair at applicant’s primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.

Reappointment Requirements:

- Documentation of the interpretation of 25 non-contrast CCT studies in prior 2 years
  - If 25 procedures in prior 2 years are not achieved, approval may be considered if:
    - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
      - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant’s primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,
- AND
- (b) 100% record review of first five (5) cases.

### **Contrast-Enhanced CCT (Coronary Artery CTA)**

Initial Appointment Requirements (must meet one of the following requirements):

- Formal Training Program:
  - a) Board certified or board eligible in Cardiology; AND
  - b) Completion of 20 hours of courses/lectures related to CT in general and/or specific to CCT; AND
  - c) Documentation of interpretation of 100 contrast-enhanced CCT examinations (25 of these cases in which the physician must be physically present and involved in interpretation of case; and an additional 25 of these cases in which the physician must be actively involved in data set manipulation); AND
  - d) Provide a letter from the Section/Department Chair at applicant’s primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.
- OR
- In Lieu of Formal Training:
  - a) Board certified or board eligible in Cardiology; AND
  - b) Completion of 20 hours of CME related to CT in general and/or specific to CCT; AND
  - c) Documentation of interpreting 100 contrast-enhanced CCT exams in prior 2 years with a letter from the Section/Department Chair at applicant’s primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital; AND
  - d) Must have 3 cases over-read in each vascular field (coronary and peripheral) by a physician credentialed at St. David’s Medical Center in contrast-enhanced CCT.
- OR
- Board Certification
  - a) Confirmation of Board certification in CCT by the Certification Board of Cardiovascular CT; AND
  - b) Documentation of interpreting 50 contrast-enhanced CCT exams in prior 2 years with a letter from the Section/Department Chair at applicant’s primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital.

Reappointment Requirements:

- Documentation of the interpretation of 30 contrast-enhanced CCT studies in prior 2 years
- If 30 studies in prior 2 years are not achieved, approval may be considered if:



(a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.

(1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review,

AND

(b) 100% record review of first five (5) cases.

### **Endovascular Abdominal Aortic Aneurysm (AAA) Repair**

Initial Appointment Requirements:

- Must have core privileges in interventional cardiology with peripheral intervention privileges; AND
- Training in the performance of endovascular grafting procedures as part of a residency/fellowship training program, OR completion of a dedicated endovascular AAA repair training beyond residency/fellowship training; AND
- Demonstration of current clinical competence by performance of a minimum of 10 endovascular AAA repairs with 5 as primary operator; AND
- An evaluation from the director of the applicant's residency/fellowship training program that included endovascular grafting procedures OR from the director of another training program in endovascular grafting procedures OR from the department chair at another hospital where the applicant is/was granted privileges to perform endovascular grafting procedures; AND
- Proctoring of the first 2 procedures as primary operator under the supervision of a staff member physician credentialed in endovascular AAA repair OR a vendor sponsored physician with expertise in endovascular AAA repair.

Reappointment Requirements:

- Demonstration of successful performance of 8 procedures in prior two years

### **Insertion of Impella Catheters**

Initial Appointment Requirements:

- Participate in one (1) of the following Abiomed didactic training programs;
  - Attend on-site didactic training with course slides; OR
  - Complete relevant online Impella Training Program at [www.abiomedtraining.com](http://www.abiomedtraining.com); AND
- Perform at least two (2) successful Impella implants and explants in the presence of an Abiomed representative; AND
- Sign Physician Certification Request and Sign-Off form (provided by the Abiomed representative) after completing Impella cases
- Must request and meet criteria for Coronary Intervention privileges.

### **Alcohol Septal Ablations**

Initial Appointment Requirements:

- Documentation of training in fellowship program, as evidenced by program director's attestation; OR
- If not received during training program, or training was greater than 2 years prior to the request, then documentation of the successful performance of a sufficient number of cases to substantiate competence, as evidenced by a letter from the Chair of Cardiology at previous affiliation.

Reappointment Requirements:

- Documentation of the successful performance of a sufficient number of cases to substantiate competence as reviewed by the Department of Cardiology Chair.

### **Cardiopulmonary Exercise Testing (CPET):**

Initial Appointment Requirements:

- Formal training during fellowship with case log documentation; OR
- Attendance at a course or completion of preceptorship at a high volume center; OR
- Proctoring by a credentialed member of the medical staff to include interpretation of 20 studies, followed by over reading of the physician's first 10 studies.

### **Cardiac Electrophysiology**

#### **EP Studies (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment Requirements:

- Completion of an ACGME-approved Cardiac Electrophysiology fellowship within the prior 2 years, documenting the performance of a minimum of 50 EP Studies; OR
- If training completed more than 2 years prior, then a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) documenting proficiency in EP Studies with a minimum of 50 studies in prior 2 years; OR
- If training completed prior to the offering of a Cardiac Electrophysiology fellowship, provide documentation of extensive experience in the performance of EP Studies, to include the performance of 50 studies in prior 2 years.

- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Evidence of current clinical competence:
    - (1) If a SDMC Campus is the primary practicing facility, the Department Chair at that campus may attest to abilities and performance and approve; OR
    - (2) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Campus Department Chair for review.
- Case logs must be submitted documenting number of procedures performed in the prior 2 years.

**Single and Dual Chamber Permanent Pacemaker Implantation (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment Requirements:

- Documentation, in the form of a program director letter, from ACGME-approved cardiology fellowship program (completed within the immediate past year) of the performance of 25 permanent pacemaker implants as primary operator; OR
- If cardiology fellowship completed more than 1 year prior, a letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) which documents a minimum of 25 successful permanent pacemaker implants in prior 2 years; OR
- In lieu of formal fellowship training:
  - d) Applicant must attend an approved course where 25 cases are performed as the primary operator; AND
  - e) Provide a letter from the Section/Department Chair at applicant's primary affiliation (or immediate past hospital affiliation) which documents a successful performance of procedure at that hospital; AND
  - f) Receive proctoring of the first 5 permanent pacemaker implants by credentialed member of the St. David's Medical Center Medical Staff.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Documentation of the successful performance of 10 permanent pacemaker implants in prior 2 years.
- If 10 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) 100% record review of first five (5) cases.

**Biventricular Pacemaker (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment Requirements:

- Successful completion of an ACGME-approved fellowship in Cardiac Electrophysiology; OR
- Successful completion of an ACGME-approved fellowship in cardiovascular diseases within the prior 2 years AND documentation showing that the applicant has performed 15 supervised implants;
- If training was completed more than 2 years prior, applicant must qualify for permanent cardiac pacemaker insertion privileges, as well as provide documentation, with successful outcomes of the performance of 5 Biventricular Pacemaker Insertions, with the initial two performed post-privilege approval observed by an appropriately credentialed cardiologist.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Documentation of successful performance of 20 biventricular pacemaker implants in prior 2 years.
- If 20 procedures in prior 2 years are not achieved, approval may be considered if:

- (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
  - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
- (b) 100% record review of first five (5) cases.

**Lead Extraction/Repositioning less than 1 year (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment & Reappointment Requirements:

- Maintenance of electrophysiology privileges at St. David's Medical Center.

**ICD Implants (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment Requirements:

- Completion of an ACGME-approved Cardiac Electrophysiology fellowship within the last 2 years, documenting the performance of a minimum of 25 ICD implants; OR
- If training completed more than 2 years prior, provide a letter from the Section/Department Chair at the applicant's primary affiliation (or immediate past hospital affiliation) documenting proficiency in ICD Implants with a minimum of 50 cases in the prior 2 years.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Documentation of the successful performance of 50 ICD implants for the prior 2 years.
- If 50 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) 100% record review of first five (5) cases.

**Ablation (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment Requirements:

- Completion of an ACGME-approved Cardiac Electrophysiology fellowship within the last 2 years, documenting the performance of a minimum of 75 ablations; OR
- If training completed more than 2 years prior, provide a letter from the Section/Department Chair at the applicant's primary affiliation (or immediate past hospital affiliation) documenting proficiency in ablations with a minimum of 100 procedures within the prior 2 years.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Documentation of the successful performance of 100 ablations for the prior 2 years.
- If 100 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) 100% record review of first five (5) cases.

**Cardiac Resynchronization Device Implant with Coronary Sinus Lead (CORE FOR FELLOWSHIP TRAINED EP DOCTORS)**

Initial Appointment Requirements:

- Completion of an ACGME-approved Cardiac Electrophysiology fellowship within the last 2 years, documenting the performance of a minimum of 25 Cardiac Resynchronization Device Implants; OR

- If training completed more than 2 years ago, provide a letter from the Section/Department Chair at the applicant's primary affiliation (or immediate past hospital affiliation) documenting proficiency in Cardiac Resynchronization Device Implants with a minimum of 50 cases in the prior 2 years; OR
- If training completed prior to the offering of an Electrophysiology fellowship, provide documentation of extensive experience in the performance of Cardiac Resynchronization Device Implants, to include the performance of 50 cases in the prior 2 years.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Documentation of the successful performance of 25 Cardiac Resynchronization Device Implants for the prior 2 years.
- If 25 procedures in prior 2 years are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) 100% record review of first five (5) cases.

**Non-Device Assisted Lead Extractions greater than 1 year**

Initial Appointment Requirements:

- Completion of an ACGME-approved Cardiac Electrophysiology fellowship within the prior 2 years, documenting the performance of a minimum of 5 non-device assisted lead extractions; OR
- If training completed more than 2 years prior, provide a letter from the Section/Department Chair at the applicant's primary affiliation (or immediate past hospital affiliation) documenting proficiency in non-device assisted lead extractions with a minimum of 10 non-device assisted lead extractions within the prior 2 years, OR
- If training completed prior to the offering of a Cardiac Electrophysiology fellowship, provide documentation of extensive experience in the performance of lead extractions, to include the performance of 10 non-device assisted lead extractions within the prior 2 years.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Evidence of current clinical competence:
  - (1) If a SDMC Campus is the primary practicing facility, the Department Chair at that campus may attest to abilities and performance and approve; OR
  - (2) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Campus Department Chair for review.
 Case logs must be submitted documenting number of procedures performed in the prior 2 years.

**Device Assisted Lead Extractions (Includes Laser Lead Extractions)**

Initial Appointment Requirements:

- Documentation of the successful performance of 20 device assisted lead extractions during a Cardiac Electrophysiology fellowship training program; OR
- In the absence of adequate device assisted lead extraction volume or training during a fellowship program, must show evidence of completion of a vendor-sponsored didactic course AND have the first 20 cases proctored by a qualified member of the St. David's Medical Center Medical Staff.
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

- Documentation of the successful performance of 30 device assisted lead extractions for the prior 2 years.
- If 30 extractions in prior 2 years are not achieved, approval may be considered if:

(a) Approved by the SDMC Cardiology Department Chairs and SDMC CMOs.

(1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND

(b) 100% record review of first five (5) cases.

### **Epicardial Access**

Initial Appointment Requirements (must meet one of the pathways below):

**Pathway One:**

(1) Completion of an ACGME-approved Cardiac Electrophysiology fellowship within the prior 2 years and documentation, in the form of a program director letter, attesting to the performance of a minimum of 10 cases; AND

(2) Proctoring of the first 2 procedures as primary operator under the supervision of a staff member physician credentialed in epicardial access.

**Pathway Two:**

(1) A letter from the Section/Department Chair of the applicant's primary affiliation (or immediate past hospital affiliation) documenting performance of a minimum of 20 cases within the prior 2 years at that hospital; AND

(2) Proctoring of the first 2 procedures as primary operator under the supervision of a staff member physician credentialed in epicardial access.

**Pathway Three:**

(1) If no prior training obtained, then the applicant will be required to be proctored for the first 10 procedures as primary operator under the supervision of a staff member physician credentialed in epicardial access.

If initial appointment requirements are not achieved, approval may be considered if:

(a) Approved by the SDMC Cardiology Department Chairs, in consultation with the EP Section, and SDMC CMOs.

(1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND

(b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

Documentation of the successful performance of 20 epicardial access procedures in prior 2 years.

If 20 procedures not achieved in the prior 2 years, proctoring will be required and the number of proctored cases will be determined by the number of cases needed to meet the 20 case requirement in the prior two years.

### **Transseptal Access**

Initial Appointment Requirements:

Completion of an ACGME-approved Cardiac Electrophysiology or Interventional Cardiology fellowship within the last 2 years, documenting the performance of a minimum of 20 cases as the primary operator; OR

If training completed more than 2 years prior, provide a letter from the Section/Department Chair at the applicant's primary affiliation (or immediate past hospital affiliation) documenting a minimum of 20 successful transseptal access procedures in the prior 2 years.

If initial appointment requirements are not achieved, approval may be considered if:

(a) Approved by the SDMC Cardiology Department Chairs in consultation with the EP Section and SDMC CMOs.

(1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND

(b) Additional overview as recommended by the Department Chair.

Reappointment Requirements:

Documentation of the successful performance of 20 transseptal access procedures for the prior 2 years.

If 20 procedures not achieved in the prior 2 years, proctoring will be required and the number of proctored cases will be determined by the number of cases needed to meet the 20 case requirement in the prior two years.

### **Stereotaxis**

Initial Appointment Requirements:

Completion of an ACGME-approved Cardiac Electrophysiology fellowship and privileged in the procedure planned; AND

(1) Completion of a vendor-sponsored course; OR

(2) Proctoring of first 5 procedures using Stereotaxis by a credentialed member of the St. David's Medical Center Medical Staff.

### **Hansen Robotic Platform**

Initial Appointment Requirements:

Completion of an ACGME-approved Cardiac Electrophysiology fellowship and privileged in the procedure planned; AND

- (1) Completion of a vendor-sponsored course; OR
- (2) Proctoring of first 5 procedures using the Hansen Robotic Platform by a credentialed member of the St. David's Medical Center Medical Staff.

### **Left Atrial Appendage (LAA) Closure Devices – Lariat and Watchman**

#### Initial Appointment Requirements:

- Completion of an ACGME-approved Cardiac Electrophysiology fellowship or Interventional Cardiology fellowship; AND
- Completion of a vendor-sponsored course; AND
- Proctoring of the first 5 LAA Closure Device cases
- If initial appointment requirements are not achieved, approval may be considered if:
  - (a) Approved by the SDMC Cardiology Department Chairs, in consultation with the EP Section, and SDMC CMOs.
    - (1) If a non-SDMC facility is the primary campus, a letter from the Section/Department Chair at applicant's primary affiliation attesting to abilities and performance may be submitted to the SDMC Cardiology Department Chairs and SDMC CMOs for review; AND
  - (b) Additional overview as recommended by the Department Chair.

#### Reappointment Requirements:

- Documentation of the successful performance of 10 procedures for the prior 2 years.
- If 10 procedures not achieved in the prior 2 years, proctoring will be required and the number of proctored cases will be determined by the number of cases needed to meet the 10 case requirement in the prior two years.