

Physician Name _____

ANESTHESIA PRIVILEGES

| | Requested | Approved |
|--|------------------|-----------------|
| General Anesthesia | | |
| Monitored Anesthesia Care (MAC) | | |
| IV Conscious Sedation | | |
| Deep Sedation | | |
| Regional Blocks | | |
| Ultrasound- Use and Interpretation | | |
| Doppler- Use and Interpretation | | |
| Minor Conduction Blocks | | |
| Local | | |
| Laryngeal Mask/ Endotracheal Intubation | | |
| Peripheral Venous Cannulation | | |
| Supervision of CRNA | | |
| GENERAL ANESTHESIA - PEDIATRICS | | |
| MONITORED ANESTHESIA CARE (MAC) - PEDIATRICS | | |
| IV CONSCIOUS SEDATION - PEDIATRICS | | |
| | | |

I hereby request Privileges in Anesthesia as shown on this form. I understand that privileges granted are subject to a tri-annual review coinciding with re-application for Medical Staff membership. I also understand that application for additional or new procedures can be made at any time with proper documentation. The privileges requested are consistent with my abilities, training and experience.

Practitioner's Signature

Date

Medical Director

Date

Director of Anesthesia

Date

Anesthesiologist Job Description

Reports to: Medical Director

Position Summary: Administers anesthetics to render patients insensible to pain during surgical and other medical procedures. Examines patient to determine degree of surgical risk, and type of anesthetic and sedation to administer, and discusses findings with medical practitioner concerned with case. Positions patient on operating table and administers local, intravenous, spinal, caudal, or other anesthetic according to prescribed medical standards. Institutes remedial measures to counteract adverse reactions or complications. Records type and amount of anesthetic and sedation administered and condition of patient before, during, and after anesthesia.

Qualifications:

An Anesthesiologist shall be a physician who has successfully completed a residency program in Anesthesiology Accredited by the Accreditation Council for Graduate Medical Education or Approved by the American Osteopathic Association, or who is a Diplomat of either The American Board of Anesthesiology, or who was made a Fellow of the American College of Anesthesiology before 1982. 8:43A-1.12 Ambulatory Care Licensing Standards.

Responsibilities:

1. The Anesthesiologist will be responsible for administering IV, regional, spinal, epidural, and inhalant anesthesia to the patients at the Center by the appropriate means and in the best interest of the patients.
2. Except for local cases, the Anesthesiologist will be responsible for monitoring of the patient during surgery, and will always be with the patient during surgery. Vital signs including but not limited to blood pressure, pulse, respiration, EKG and oxygen saturation will be monitored and recorded during procedure.
3. The Anesthesiologist will be responsible for maintaining medications suitable for use in anesthesia practice; he/she will monitor emergency medications and medications and procedures to be certain that they are current.
4. Information regarding the patient's health status may be obtained by fax or phone when it is to be used in the management and record keeping of the patient.
5. Should an emergency occur, the Anesthesiologist will immediately begin appropriate emergency medical care to maintain the patient's vital functions. The Anesthesiologist will notify the Surgeon immediately if there is an anesthetic emergency or change in the patient's status, indicating that the surgery should stop. The Anesthesiologist will be responsible for contacting the ER Physician and providing a report. The Anesthesiologist will also ensure the patient is safely transferred to the hospital via ambulance.
6. The Anesthesiologist will evaluate the patient's available medical records prior to surgery, and will notify the surgeon if there is any reason why the surgery should be cancelled, or if additional tests or consultation is necessary.
7. The Anesthesiologist will have the final authority to cancel the surgery if deemed necessary for logical medical reasons considering the health and wellbeing of the patient.

The above statements reflect the general outline considered necessary to describe the principal functions of this job. It shall not be construed as a detailed description of all work requirements of the job.

Signature

Date

Pre-Operative Anesthesia Guidelines

Fifth Ave Surgery Center- ASC

| Criteria or Co-Morbidity | Patients Receiving Anesthesia |
|---------------------------------|--|
| WEIGHT: BMI greater than 45 | NOT appropriate for this Center |
| WEIGHT: BMI greater than 40 | Requires Anesthesia review and Requires: MD Clearance, Chem7, CBC, EKG |

Any deviations to the above criteria may result in cancellation of the procedure

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|--|---|
| History of difficult airway or difficult intubation | Requires Anesthesia review and Requires: MD Clearance, Chem7, CBC, EKG |
| History of significant CAD, eg s/p MI, stent, angioplasty, CABG, etc | Requires Anesthesia review, Cardiac clearance, (EKG within 30 days) Requires: MD Clearance, Chem7, CBC, EKG |
| Mild to Moderate Pulmonary Disease (Asthma, COPD) | Requires Anesthesia review, and requires Pulmonary clearance Requires: MD Clearance, Chem7, CBC, EKG |
| Arrhythmia or Pacemaker | Requires Anesthesia review, EKG within 30 days, and Cardiac clearance Requires: MD Clearance, Chem7, CBC, EKG |
| Mild CHF or EF 40%- 55% | Requires Anesthesia review, EKG within 30 days, and Cardiac clearance |
| Severe Cardiac Vascular disease, AICD or EF less than 40% | NOT appropriate for this Center |
| End Stage Renal Disease, CRF on Dialysis (PD or HD) | NOT appropriate for this Center |
| OSA (Obstructive Sleep Apnea) Is patient compliant w CPAP? | Note whether compliant, Anesthesia review and Medical or Pulmonary clearance required Requires: MD Clearance, Chem7, CBC, EKG |
| Blood loss/transfusion possible | NOT appropriate for this Center |
| Diabetes, Liver disease | Requires Anesthesia review and EKG within 30 days, HgbA1C less than 8, blood glucose less than 250. Requires: MD Clearance, Chem7, CBC, EKG |
| Patients older than 50 years | Requires: MD Clearance, Chem7, CBC, EKG |

1. EKG's should be within thirty (30) days of procedure
2. Any specialty clearance must be within thirty (30) days of procedure, and received by the **Center 5 days prior to the surgery date.**
3. **Patients Older than fifty (50) require an EKG (regardless of health)**
4. History and Physicals must be within (30) days of the Procedure; or a NEW one will be required the day of the Procedure, by the Attending Physician

NPO STATUS

1. **Nothing after midnight:** NO solids, liquids, including gum, mints, and candy
2. Any medications patient is instructed to take, should be done so with a **SIP** of water.

Illegal Drug Use

Any evidence of illegal drugs (ex: Heroin, crack, cocaine) within 5 days of the patient's scheduled procedure, is the responsibility of the Attending Provider to obtain and provide a negative drug screen within (24) twenty-four hours of the procedure.

An Anesthesiologist reviews all medical records to ensure that patient has met the pre-op criteria and is an appropriate candidate for Outpatient Surgery. To ensure no last-minute cancellations, we ask that the paperwork and booking forms are received at the Center (5) five days prior to the procedure.

Local Cases

All patients will receive an IV or Hep Lock for their procedure; they may however choose to sign a waiver that they chose NOT to get an IV or Hep Lock after the risk is explained to them.

Physician Job Description

Reports To: Medical Director and Board of Directors

Position Summary: The Surgeon should be a highly visible, working physician representing the Center to the medical community and the public.

The Physician should participate in and understand the centers budget. He/she should work in a collegiate way with the Administrator and the Nurse Manager to affect efficient and profitable operations.

Qualifications:

A Physician shall be a physician who has successfully completed a residency program Accredited by the Accreditation Council for Graduate Medical Education or Approved by the American Osteopathic, or successfully achieved Podiatry Licensure. Member of the Medical Staff as a licensed independent practitioner, with active clinical privileges appropriate to the Center. Keeps abreast of national and federal regulations.

Responsibilities:

1. Participates in orientation and educational activities.
2. Participates in staff orientation and staff educational activities.
3. Assures quality care is rendered in the Center.

Work Environment and Hazards:

Hazards include risk of exposure to communicable diseases and hazardous substances, and the risk of physical injury from moving/ lifting patients and equipment, as well as operation of equipment. Work may be stressful at times. Interaction with others is constant and interruptive. Contact may involve with dealing with sick/and or persons under high stress/anxiety. While occasionally exposed to fumes or airborne particles and or toxic or caustic chemicals. The noise level in the work environment is usually moderate.

Special Physical Demands: The physical demands described here are representative of those that may be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to stand, use hands, talk and hear. The employee must occasionally climb, stoop, or balance; kneel, sit, walk, use hands to finger, handle or feel objects, tool or controls; and reach with hands and arms. The employee must occasionally lift and/or move fifty (50) pounds and occasionally lift/move more than one hundred (100) pounds. Specific vision abilities required by this job include close vision, distance vision, peripheral vision, and the ability to adjust to focus

The above statements reflect the general outline considered necessary to describe the principal functions of this job. It shall not be construed as a detailed description of all work requirements of the job.

Signature _____

Date _____