

University of Maryland Medical Center  
**Adult Endoscopy Credentialing**

**Prerequisites**

Education and Training

1. The applicant for privileges in Endoscopy shall be on the active staff of the Department of Medicine or Surgery and on the active staff of the University of Maryland Medical Center.
2. The applicant must have completed a program of specialized training in Gastroenterology or Surgery which encompasses patient care, teaching, research and the appropriate endoscopic skills for which the applicant is requesting privileges. This training should take place within the context of a formal residency program certified by the Accreditation Council for Graduate Medical Education (ACGME) or its equivalent (for non-US trained physicians). Informal training outside an ACGME certified or equivalent program is not sufficient to grant privileges.
3. Applicants must be board certified or board eligible in their respective field (Gastroenterology, Surgery or Pediatrics) at the time of application. Failure to obtain or maintain board certification will be grounds for loss of endoscopic privileges.
4. The applicant's endoscopic director should confirm in writing the training, experience (including the number of cases for each procedure for which privileges are requested), and actual observed level of competency. It is recognized that by virtue of completing a residency program, the endoscopist will have acquired sufficient cognitive experience in anatomy, physiology, and psychomotor skills and experience necessary for the performance of diagnostic and therapeutic procedures in the gastrointestinal tract. Such experience includes indication, complications and their management, and alternative approaches. The training director's opinion and recommendation should be considered prima facie evidence for the trainee's acceptance as an individual qualified in gastrointestinal endoscopy. Documentation and demonstration of competence is necessary
5. Recognizing the limitations of written reports, proctoring of applicant for privileges in gastrointestinal endoscopy by a qualified, unbiased staff endoscopist may be desirable when competency for a given procedure cannot be adequately verified by submitted written material. The proctor should be responsible to the credentials committee and not to the patient or the individual being proctored. Documentation of the proctor's evaluation should be submitted in writing to the credentials committee. Applicants with insufficient procedure experience may acquire additional qualifications through a proctoring process under the supervision and guidance of a trained and qualified Endoscopist.

**Physician Applicants less than 3 years beyond completion of training must submit the following:**

1. A letter of confirmation of training and recommendation for credentials should be provided by the applicant's training program director. The letter should include a

- detailed description of the applicant's experience and a narrative of the observed level of competency for each procedure. In certain cases where the documentation of procedure cases cannot be fully ascertained, the credentialing committee may require proctoring of the applicant by an appropriately credentialed physician until competency can be proven.
2. Documentation of the number of cases performed which must meet the minimum standards as described for the indicated procedure(s) (see form).

It is presumed that the supervision of the above procedures during training has been provided by an expert clinician teacher.

Whenever possible, the following documentation should be possible for review upon request:

1. Procedure date
2. Patient Identification number
3. Age
4. Indication for procedure
5. Procedure type
6. Complications
7. Signature of supervising physician

A detailed letter certifying procedural competence in accordance with the above minimum standards, by the applicants training director, may be considered in lieu of the patient record documentation.

In all instances, the training director shall provide a special statement that the applicant is qualified by training and or experience to offer competent consultative services in the area of gastrointestinal diseases.

**Applicants more than 3 years beyond completion of training must submit the following:**

1. Two letters of reference from trained skilled endoscopists familiar with their endoscopic competence over the prior three years attesting to competence and skills in each of the procedures for which privileges are being requested. These letters should reference individual procedural competence as well as overall competence in the consultation of digestive disorders.
2. If feasible, a letter from the endoscopic program director attesting to the level of training and experience during their training program.
3. Any documentation supporting additional training, experience or proctoring received since the completion of a formal training program.
4. It is expected that the applicant has met the same educational training requirements and procedural volumes as those who have completed their training within the past three years.

## **Probationary Period**

All new applicants for privileges in the endoscopy lab who meet the above criteria for privileges and who are conditionally approved by the Endoscopy Lab Director will be granted probationary status. The probationary period will not exceed 6 months in duration. During this probationary period, it is the responsibility of the Endoscopy lab Director or his designee to directly observe and review the skill and techniques of the applicant, and will review the records and any complications to ensure procedural competency and appropriateness of care. At any time during the probationary period, the Endoscopy lab Director may determine the applicant can

1. practice and perform approved procedures without restriction
2. recommend remedial proctoring for a specific amount of time after which time competency will again be reviewed
3. withdraw Endoscopy privileges

## **Biannual Recertification**

Recertification of endoscopy privileges requires regular procedural activity. Written documentation of a minimum number of procedures successfully performed during the two preceding years is required. These may be performed in a facility other than UMMC as long as documentation is available for review. Please see the criteria listed on the renewal application. Any physician not meeting the listed criteria that desire renewal in that specific procedure will have the next 3 procedures that are deficient in number monitored by the Endocopy Director or designee. The physician will then have an additional 12 months to reach the goal number.

In addition, recertification will require attendance to the majority of Endoscopy quality assurance and morbidity and mortality meetings as well as up to date certification for moderate (conscious) sedation.