



## Privileges in Obstetrics & Gynecology Service

Physician name: .....

**Education/Training**

Successful completion of an accredited Residency/Fellowship  
In **Obstetrics & Gynecology** or equivalent Training.

AND

Current certification or active participation in the examination

Process leading to certification in **Obstetrics & Gynecology** from any Equivalent training/board.

**Provide care for patients in specific areas of Al Kindi hospital**

<b>Core Privileges</b>		
<b>Request</b> <input type="checkbox"/>	<b>Request all privileges listed below.</b> Uncheck any privileges that you do not want to request	<b>Service Chief Rec</b> <input type="checkbox"/>
<b>Gynecology</b>		
<input checked="" type="checkbox"/>	Privileges to admit, evaluate, diagnose, consult, perform history and physical exam, and provide pre-operative, intraoperative, and post-operative care necessary in the hospital for management of female patients presenting with illness, injuries, and disorders of the gynecologic or genitourinary system, and nonsurgical treatment of illnesses and injuries of the mammary glands. Cystoscopy, diagnostic and operative hysteroscopy and laparoscopy.	<input checked="" type="checkbox"/>
<b>Obstetrics</b>		
<input checked="" type="checkbox"/>	Admit, treat, perform history and physical exam, or provide follow-up care to female patients presenting in any condition or stage of pregnancy, including injuries and disorders of the reproductive system.	<input checked="" type="checkbox"/>
<b>Pediatric/Adolescent Obstetrics and Gynecology</b>		
<input checked="" type="checkbox"/>	Privileges to admit, treat, perform history and physical exam, perform surgical procedures, perform history and physical exam or provide follow-up care for inpatients ages 14 years or younger	<input checked="" type="checkbox"/>
<b>Gynecologic Oncology</b>		
<input checked="" type="checkbox"/>	Privileges to admit, evaluate, diagnose, consult, perform history and physical exam, and perform history and physical exam provide surgical care, and medically manage the care of women with malignant diseases of the reproductive tract and peritoneum, including the ovaries, fallopian tubes, uterus, uterine cervix, vulva and vagina; and trophoblastic diseases. Cystoscopy and biopsy, intraperitoneal catheter placement, chest tube placement laparoscopic lymphadenectomy and cancer staging operations, including pelvic, para-aortic and scalene lymphadenectomy. Use of lasers. Radical and microsurgical operations in the abdomen and pelvis required to treat these conditions, including radical debulking operations, radical hysterectomy, vulvectomy, splenectomy, pelvic exenteration, including construction of a neovagina, harvesting of skin and myocutaneous grafts, and performance of procedures on the bowel and urinary tract as indicated, including ureters, bladder, urethra, e.g., urinary diversion, neocystostomy, intestinal resection and reanastomosis.	<input checked="" type="checkbox"/>
<b>Reproductive Endocrinology and Infertility</b>		
<input checked="" type="checkbox"/>	Special procedures required for in vitro fertilization, and microsurgery related to infertility.	<input checked="" type="checkbox"/>
<b>Urogynecology and Pelvic Reconstructive Surgery</b>		
<input checked="" type="checkbox"/>	Privileges to admit, evaluate, diagnose, consult, perform history and physical exam and provide surgical and medical management for the care of women with pelvic floor disorders. Specialized procedures and reconstructive operations of the female pelvis for the treatment of urinary or fecal dysfunction. Diagnostic and treatment modalities include multi-channel urodynamic testing, endoanal ultrasound, bladder instillation therapies, diagnostic and operative cystoscopy, ureteral stent placement, transurethral injection of bulk-enhancing agents, use of grafts for reconstructive procedures, endoscopic operations for treatment of urinary problems and pelvic floor defects, placement of sacral neuromodulators under fluoroscopic guidance, neovaginal reconstruction.	<input checked="" type="checkbox"/>

**Special Privileges**

<b>Special Privileges</b>		
<b>Request</b>	<b>Request all privileges listed below.</b>	<b>Service Chief Rec</b>
<input type="checkbox"/>	Uncheck any privileges that you do not want to request	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Administration of Sedation	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Use of fluoroscopy equipment (or supervision of other staff using the equipment)	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Advanced Family Planning Dilation and evacuation of the pregnant uterus beyond 14 weeks intrauterine pregnancy	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Robotics Specialized endoscopic operations utilizing robotic instrumentation	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	Central Venous Catheter Insertion	<input checked="" type="checkbox"/>
<b>Additional Privileges:</b>		
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>

Physician signature :-.....

Approved By:-.....

Medical director signature: - .....

Date:.....