

## DELINEATION OF PRIVILEGES

## Anesthesia - Page 1

Physician Name:

Date:

Some privileges may be granted with consultation or limitations posed for cause by the Board of Directors, subject to the authority of the Medical Advisory Committee to grant delineated privileges. Privileges may be increased only with documentation or justification for change. **You must be able to document that you have the same privileges in another hospital** before being granted privileges at the Center. Please place a check mark in front of each procedure which you are requesting privileges to perform, then sign, date and fax this form to 630.505.0656.

### CATEGORIES:

- Dental
- General Surgery
- Gynecology
- Ophthalmology
- Orthopedics
- Otolaryngology (ENT)
- Pediatric
- Plastic/Reconstructive Surgery
- Podiatry
- Thoracic and Vascular Surgery
- Urology

### PROCEDURES:

- Electroconvulsive therapy
- Selected pain therapy
- Cervical epidural steroid injection
- Stellate ganglion block
- Celiac plexus block
- Lumbar epidural steroid injection
- Lumbar paravertebral block

### APPLICATION OF TECHNIQUES:

- Acupuncture
- Endotracheal intubation
- Hypnosis
- Invasive monitoring
- Ventilator management

## DELINEATION OF PRIVILEGES

## Anesthesia - Page 2

Physician Name: \_\_\_\_\_

Date: \_\_\_\_\_

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### REGIONAL ANESTHESIA:

- Spinal
- Epidural
- Caudal
- Axillary block
- Interscalene block
- Supraclavicular block
- Intercostal block
- Femoral block
- Sciatic block
- Ankle block
- Spinal blood patch
- Local
- Xray Interpretation
- All levels of sedation including those drugs that do not have an antagonist medication.
  
- Other: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Physician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chairman, Medical Advisory Committee,  
The Center For Surgery

\_\_\_\_\_  
Date