



Da Vinci Surgical Platform (DVSP) Credentialing Criteria

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Department: Medical Staff Office	

**I. PURPOSE**

To establish the criteria that must be met for clinical privileges using robotic surgery technology.

**II. SCOPE**

This policy applies to all practitioners applying for privileges utilizing the robotic surgical technology at the Indiana University Health North Hospital.

**III. POLICY STATEMENTS**

Promoting safety and quality care for patients through accurate privileging is the guiding principle of this policy.

**A. Qualifications of Initial Applicant**

1. M.D. or D.O. Board Certified within their Surgical Specialty or Surgical Subspecialty or meet the eligibility requirements outlined in Article II of the IUH North Hospital Credentials Manual.
2. The Physician maintains unrestricted privileges for the surgical procedure to be performed with the DVSP.
3. The Physician must show documentation of attendance at a “hands-on” training practicum in the use of DVSP as required by the manufacturer. (See section C below).

-Or-

In addition to 1 and 2 above, the physician has current da Vinci privileges at another facility. The physician will provide a log of da Vinci cases over the last 2 years. A minimum of ten (10) cases must have been performed within the last twenty-four (24) months.

-Or-

A trained resident or fellow must provide a reference from the residency/fellowship director overseeing the DVSP training, as well as a case log of at least ten (10) cases. The case log must include all da Vinci cases in which the applicant is the console surgeon.



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## **B. Qualifications of a Surgical Assistant for DVSP**

1. The attending physician must be Board Certified or meet the eligibility requirements outlined in Article II Section 2.A.1. of the IUH North Hospital Credentials Manual within their Surgical Specialty or Subspecialty. They must have unrestricted privileges for the surgical procedure to be performed with the DVSP. A non-physician must be experienced in the procedure being performed with the DVSP.
2. The surgical assisting role only applies to the bedside assistant function. It does not allow the assistant to operate the surgical console. The only exception is if the assistant is a qualified DVSP surgeon.

## **C. Initial Granting of Privileges**

If the applicant does not have da Vinci robot privileges with another facility or a minimum of ten (10) cases logged as part of residency/fellowship training, but meets the above qualifications, the applicant may be granted privileges upon the recommendation of the Credentials Committee, Medical Executive Committee and approval by the Board of Directors or be subject to the following:

1. The Physician must perform the procedure under the supervision of a proctor for three (3) cases. If the Physician cannot find a proctor then the manufacturer will provide the proctor. The proctor will have filled out a form, which indicated a satisfactory performance by the Physician.
2. The proctor may be a current IUH medical staff member with privileges for the DVSP who has completed a minimum of ten (10) da Vinci cases in the last two (2) years. The proctor may also act as a co-surgeon.

The results of the proctoring will be reviewed by the applicable Section Chair who will make a recommendation to the Credentials Committee/Medical Executive Committee to grant or not grant da Vinci privileges.

## **D. Reappointment**

Reappointment of privileges for use of the DVSP will lie with the Section Chairs and their recommendation to the Credentials Committee. The reappointment should be based on but not limited to the following:

1. Volume of cases over two (2) years. The case volumes may come from another facility. The practitioner should be the console surgeon. There is no minimum number required, but the Section



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Chair may recommend the physician have a proctor at the next case(s) if there have been limited cases in the last 2 years.

2. If available, outcome data is satisfactory as determined by each section (e.g. length of stay, blood loss, complications, OR time, conversion to laparotomy).
3. Recommendation by the Section Chair.
4. Recommendation of the Credentials Committee, Medical Executive Committee and Board approval.

## IV. CROSS REFERENCES

IUH North Hospital Credentials Manual  
 IUH North Hospital Medical Staff Bylaws  
 IUH North Hospital Medical Rules and Regulations

## V. RESPONSIBILITY

Credentials Committee  
 Medical Staff

## VI. APPROVAL BODY

Medical Executive Committee  
 Board of Directors

## VII. APPROVAL SIGNATURES

Approved by:

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 Kevin L. Smith, M.D., Chair, Credentials Committee

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 Date

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 Jay R. Bhatt, M.D., Chair,  
 Medical Executive Committee

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 Date

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 Paul M. Calkins, M.D., Chief Medical Officer

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 Jonathan R. Goble, MHA, MBA, FACHE  
 President and Chief Executive Officer

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 Date