

Contra Costa Regional Medical Center Privileges Request Form

Practitioner Name: _____

Departments (s)	Number	Privilege Descriptions D= With Direct Supervision C= With Consultation U= Unrestricted	D/C/U	Training/ Education	Experience	Current Competence	Requested	Granted	D= Denied P= Pending CNM=Criteria Not Met
		Dental							
		Basic Dental Procedures							
ANE CC DEN DIA EME FAM GER HOSP MED OBG PED SGN	ANE 3	Moderate (Conscious) Sedation* Does NOT include use of ketamine or propofol.	D	CA Lic.	N/A	N/A			
			C	CA Lic. and Airway Management skills (ANE11 or inservice)	10	1 case in last 2 years			
			U		15	5 cases in last 2 years			
ANE DEN OBG SGN	ANE 5	Nitrous Oxide.	D	CA Lic or DDS or DMD	N/A	N/A			
			C	CA Lic or DDS or DMD	5	N/A			
			U	CA Lic or DDS or DMD	10	2 cases or orientation in last 2 years			
DEN	DEN 1	Scaling, Root Planning/Curettage, Prophylaxis and Fluoride, Sealants, Restorations & Replacement of Teeth, Operative Restorations (amalgams, composites, inlays), Crown and Bridge Procedures (crowns, bridges, veneers), Removable Prosthetics (full and partial dentures, overdentures).	U	DDS or DMD	N/A	N/A			
		Oral Surgery							
DEN	DEN 2	Simple Extractions and Surgical Extractions.	U	DDS or DMD	5	1 case in last 4 years			
DEN	DEN 3	Extraction of Soft Tissue Impaction, Extraction of Partial Bony Impactions, Extraction of Complete Bony Impaction, and Root Resections.	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	5	1 case in last 4 years			

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DEN	DEN 4	Alveolectomy and Alveoplasty.	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	3	1 case in last 4 years			
DEN	DEN 5	Torus Palatinus and Torus Mandibularis.	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	5	1 case in last 4 years			
DEN	DEN 6	Benign Tumors.	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	3	1 case in last 4 years			
DEN	DEN 7	Intra-Oral and/or Extra-Oral incision and drainage.	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	4	1 case in last 4 years			
				OrS	N/A	N/A			
DEN ENT	DEN 8	<u>Salivary Gland Surgery and Salivary Duct Surgery*</u>	D	OrS	N/A	N/A			
			U	OrS or Plast	4	3 cases in last 2 years			
DEN	DEN 17	Minimally Invasive Diagnosis and Management of Complex Perioral Surgical Problems: suturing and treatments of soft tissue injuries, I&D of abscess and infected cysts, simple excision squamous cysts <3 cm. Excision skin lesion <1 cm, removal of superficial foreign body.	D	DDS or OrS	N/A	N/A			
			C	DDS or OrS	5	N/A			
			U	OrS	10	N/A			

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DEN	DEN 18	<u>Basic Perioral Plastic Surgical Procedures*</u> Removal of deep SQFB and simple face lacerations.	D	DDS or OrS	N/A	N/A			
			C	DDS or OrS	5	2 cases in last 2 years			
			U	OrS	5	2 cases in last 2 years			
DEN	DEN 19	<u>Intermediate Perioral Plastic Surgical Procedures*</u> Complex Repair of Facial Lacerations.	D	DDS or OrS	N/A	N/A			
			U	OrS	20	4 cases in last 2 years			
DEN	DEN 20	<u>Complex Perioral Plastic Surgical Procedures*</u> Deep facial Abscesses, Drainage.	D	DDS or OrS	N/A	N/A			
			U	OrS	30	6 cases in last 2 years			
DEN	DEN 21	Basic Inpatient Care of Healthy Adults (ASAI): 14-65 years - undergoing surgery including history and physicals.	C	MD & CA Lic.	N/A	N/A			
			U	MD & CA Lic.	N/A	6 mos. in last 4 years			
DEN SPH	SEN 1	<u>Major Intra-oral Lacerations*</u>	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	N/A	N/A			
				Plast or ENT	N/A	N/A			
DEN SPH	SEN 2	<u>Major Extensive Oral Cysts*</u>	C	DDS or DMD	N/A	N/A			
			U	DDS, DMD or ENT	5	1 case in last 2 years			
DEN ENT	SEN 3	<u>Tongue Surgery*</u>	D	DDS or DMD	N/A	N/A			
			U	OrS, ENT or Plast	8	1 case in last 2 years			

* Separate proctoring required
DEN Updated July 2015

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DEN ENT	SEN 4	<u>Caldwell-Luc Procedure for Root Tip Removal from Antrum*</u>	U	Ors, ENT or Plast	4	1 case in last 2 years			
DEN	SEN 11	Frenulectomy/Frenotomy.	D	DDS or DMD	N/A	N/A			
			U	DDS or DMD	2	2 cases in last year			
			U	Ors	N/A	N/A			
		Fractures of Jaw and Associated Structures							
DEN SPH	SEN 5	<u>Maxilla Closed Reduction,</u> <u>Maxilla Open Reduction,</u> <u>Mandible Closed Reduction,</u> <u>Mandible Open Reduction,</u> <u>Zygoma Closed Reduction,</u> <u>Zygoma Open Reduction*</u>	C	OrS	N/A	N/A			
			U	OrS, ENT or Plast	10	5 cases in last 2 years			
		Endodontics							
DEN	DEN 9	Simple Endodontics (wide open chamber, patent canals).	C	DDS	OrS	10			
			U	DDS or DMD	3	1 case in last 4 years			
				Endo	N/A	N/A			
DEN	DEN 10	Complicated Endodontics (calcified chamber, obliterated canals, extreme root curvature).	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	6	1 case in last 4 years			
				Endo	N/A	N/A			
DEN	DEN 11	Surgical Endodontics.	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	3	1 case in last 2 years			
				Endo or OrS	N/A	N/A			

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DEN	DEN 12	Minor Periodontal Surgery (minor bone recontouring, gingivectomy).	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	5	1 case in last 4 years			
				Perio	N/A	N/A			
DEN	DEN 13	<u>Complex Periodontal Surgery (major osseous surgery, bone and/or soft tissue grafts)*</u>	D	DDS or DMD	N/A	N/A			
			U	DDS or DMD	5	1 case in last 2 years			
				Perio	N/A	N/A			
		Orthodontics							
DEN	DEN 14	Minor Orthodontics (space maintenance, minor tooth movement).	C	DDS or DMD	N/A	N/A			
			U	DDS or DMD	3	1 case in last 4 years			
				OrD	N/A	N/A			
DEN	DEN 15	Pedodontics.	U	DDS, DMD or Pedo	N/A	N/A			
DEN	DEN 16	Difficult Pedodontics (very young, unmanageable, and/or sedation cases).	C	DDS or DMD	N/A	N/A			
			U	DDs or DMD	3	1 case in last 2 years			
				Pedo	N/A	N/A			

I certify that I have reviewed the Contra Costa Regional Medical Center Privilege Criteria, and that I meet the specified criteria for education/training, experience, and current competence for the privileges that I have indicated above.

Signature of Requesting Practitioner

Date

Signature of Department Chairperson

Date