



Dentistry Privileges
Department of Surgery

Name: \_\_\_\_\_
(Please print)

- Initial privileges (initial appointment)
Renewal of privileges (reappointment, on 2-year specialty cycles)
Modification of privileges (request for any additional privileges beyond those previously granted)

Basic Education: DDS or DMD

Minimal formal training: Successful completion of a CODA accredited program of dentistry and a hospital-based residency in general dentistry or a dental specialty residency training program, or equivalent experience.

Required current experience: At least 10 dental inpatient, outpatient, emergency, or consultative procedures, reflective of the scope of privileges requested, in the past 12 months or successful completion of a CODA accredited training program in the past 12 months.

Table with 6 columns: Baroness\*, Children's\*\*, North, East, Bledsoe/Sequatchie, Community Health Centers\*\*\*

\* Includes BEH Main Hospital, Miller Eye Center, Plaza Surgery and all Erlanger Ambulatory Clinics
\*\*Includes Children's Hospital Inpatient, Children's Ambulatory clinics, Children's OR and Kennedy Children's Outpatient Center
\*\*\*Includes Dodson Avenue Community Health Center, Premier Community Health Center, and Southside Community Health Center

Core Dentistry Privileges:

Core privileges for dentists include the ability to consult, evaluate total oral health needs and diagnose and provide general dental diagnostic, preventive, and therapeutic oral healthcare to patients of all ages to correct or treat various routine conditions of the oral cavity and dentition. Dentists may provide dental care for:

Pre-cardiac surgery patients, oncology patients, and emergency patients with trauma to the head and neck regions.

Children 5 years of age and younger who, due to the extensive nature of dental problems or severe anxiety, cannot be treated safely in the dental clinic setting.

Children of any age who, because of mental disability such as autism, Down’s syndrome, etc., or physical disability, such as severe cerebral palsy, cannot be safely treated in the dental clinic setting.

Adults who, because of mental or physical disability, cannot cooperate with dental treatment in the dental clinic setting.

Children and adults with high-risk medical conditions that necessitate having their dental treatment under anesthesia in the operating room.

Dentists should also be able to assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services. The core privileges in this specialty include the procedures on the attached procedures list and such other procedures that are extensions of the same techniques and skills.

**Special Non-Core Privileges in Dentistry:**

If desired, noncore privileges are requested individually in addition to requesting the core. Each individual requesting noncore privileges must meet the criteria governing the exercise of the privilege requested, including training, required previous experience, and maintenance of clinical competence. Non-core privileges include:

<b>Procedure</b>	<b>Baroness</b>	<b>Children’s</b>	<b>North</b>	<b>East</b>	<b>Bledsoe/Sequatchie</b>
Use of laser					
Administration of Moderate sedation and analgesia (see below for criteria) including nitrox					

***Request for Privilege Not Listed in Core or Special Non-Core*** *(please list the privilege and provide justification as well as any accompanying certifications or case logs)*

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**Special Procedures Privileges Criteria**  
**Moderate Sedation**

CRITERIA – To administer Moderate Sedation

1. Basic education: MD, DO, DDS, or DMD
2. Successful completion of a post-graduate residency training program that includes formal training in moderate sedation.
3. Trained in the professional standards and techniques to administer pharmacologic agents to predictably achieve either minimal or moderate sedation and monitor patients carefully in order to maintain them at either of these levels of sedation-either intentionally or unintentionally. Acceptable training may be the completion of a course offered by any local hospital or the local Medical Society. Documentation of completion is required.
4. Must be able to evaluate and document evaluation of the patient prior to performing minimal or moderate sedation.
5. Must be qualified to rescue patients from *deep* sedation and trained to manage a compromised airway and to provide adequate oxygenation and ventilation.
6. Current proof of ACLS, PALS, or ATLS

7. Able to demonstrate that he/she has administered minimal or moderate sedation or analgesia to at a minimum of five (5) patients during the past 12 months.

*NOTE: Deep Sedation is limited to Anesthesia/CRNAs, Critical Care, and Emergency Medicine and General Anesthesia is limited to Anesthesiologists and CRNAs and is outlined in their delineation of privileges.*

**Department Chief Recommendation:**

I have reviewed the requested clinical privileges and supportive documentation for the above named applicant.

\_\_\_\_\_ Recommended as Requested

\_\_\_\_\_ Recommended with Modifications (See comments below)

\_\_\_\_\_ Not Recommended (See comments below)

Chief Comments: \_\_\_\_\_

\_\_\_\_\_  
Provider Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief Signature

\_\_\_\_\_  
Date