

**CARDIAC CATHETERIZATION PRIVILEGES**  
 Gulf Coast Medical Center  
 Department of Medicine

**Name:** \_\_\_\_\_

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

Please provide the below listed documentation to complete your application for Cardiac Catheterization Privileges:

Completed an approved residency in the broad specialty of Cardiology within which the procedure or case is ordinarily expected to be performed, with documentation from the Chairman of an approved training program.

Specifications:	Provided	Not Provided
A: Fellowship in Cardiology completed and experience documented	_____	_____.
B: Letter from Department Chairman stating that applicant is trained and clinically experienced to independently perform cardiac catheterizations.	_____	_____.
C: Documentation that applicant has actively performed catheterizations within the last three years	_____	_____.
D: If formal training was completed more than three years ago, applicant should have additional training in an approved setting	_____	_____.
E: A letter that documents the training and clinical experience to independently perform cardiac catheterizations by a recognized Chief of a Catheterization Lab, who had immediate supervisory responsibility, must be supplied.	_____	_____.

	Currently Approved	Requested	Approved
Cardiac Catheterization and Coronary Angiogram: Sones Technique			
Cardiac Catheterization and Coronary Angiogram: Judkins Technique			
Endomyocardial Biopsy			
Intracoronary Streptokinase			
Temporary Pacemaker			
Permanent Pacemaker			
Swan Ganz Catheterization			
Pulmonary Angiogram			
Pericardial Centesis			
Intraortic Balloon Pump			
<b>Additional Requests:</b>			
Arteriogram, Visceral and Peripheral Excluding Coronary Arteries			

**Modifications / Comments:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Physician Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_.

**Chief of Service:** \_\_\_\_\_ **Date:** \_\_\_\_\_.

**Credentials Approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_.

**Medical Executive Approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_.

**Board Approval:** \_\_\_\_\_ **Date:** \_\_\_\_\_.