

**NAPERVILLE SURGICAL CENTRE**

**General Surgery Privileges**

Name				
Privileges Requested		Procedure	Privileges Approved	
Yes	No		Yes	No
		A-V Fistula Creation		
		Anal fissurectomy		
		Anal fistulectomy		
		Anal fistulotomy		
		Anal sphincterotomy		
		Anal tag, polyp excision		
		Anoplasty		
		Appendectomy		
		Aspiration breast cyst		
		Axillary lymph node dissection		
		Breast mass, excision, biopsy		
		Carpal Tunnel Release		
		Cholecystectomy, Open		
		Circumcision		
		Decubitus ulcer, debridement, excision		
		Excision, biopsy soft tissue mass		
		Excision, biopsy, destruction lesions of oral cavity		
		Excision, biopsy, destruction genital lesions		
		Excision, biopsy, destruction skin lesions		
		Foreign body removal		
		Frenulectomy/frenulotomy		
		Ganglionectomy		
		Groin Exploraton		
		Hemorrhoidectomy		
		Hernia repair, open: epigastric, femoral, incisional, inguinal, umbilical, ventral		
		Hidradentitis, excision		
		Hydrocelectomy		
		Incision & drainage abscess, Hematoma		
		Laceration repair		
		Laparoscopic Cholecystectomy		
		Laparoscopic gastric banding		
		Laparoscopic Herniorraphy		
		Laser Procedures		
		Lip, wedge resection		
		Lymph node biopsy, excision		
		Mastectomy, for gynecomastia, modified radical, partial, simple, subcutaneous		
		Muscle biopsy		
		Nail Excision		
		Needle liver biopsy		
		Neuroma excision		
		Orchiectomy in conjunction with hernia repair		

Name				
Privileges Requested		Procedure	Privileges Approved	
Yes	No		Yes	No
		Orchiopexy in conjunction with hernia repair		
		Paracentesis		
		Pilonidal cystectomy		
		Rectal biopsy		
		Rectal dilation		
		Rectal polypectomy		
		Salivary Gland Biopsy, Excision		
		Salivary Gland Stone Excision		
		Scar Revision		
		Skin grafts: adjacent tissue transfer, full thickness, split thickness		
		Temporal artery biopsy		
		Tendon release/repair		
		Tendon transfer		
		Thyroglossal duct cyst excision		
		Vasectomy		
		Venous catheter insertion, removal: femoral, internal jugular, subclavian		
		Varicose vein ligation and stripping		
		Vermillionectomy		
		Wound debridement, repair		
		Wound dehiscence closure		

I attest that I am competent to perform the above requested procedures and can provide documentation that I possess these privileges at an Illinois licensed hospital.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Medical Director

\_\_\_\_\_  
Date

**NAPERVILLE SURGICAL CENTRE**

**GI Endoscopy Privileges**

Name		Date		
Privileges Requested		Procedure	Privileges Approved	
Yes	No		Yes	No
		Anoscopy: diagnostic, with biopsy, foreign body removal, polypectomy		
		Colonoscopy: diagnostic, with biopsy, polypectomy		
		Enteroscopy: diagnostic, with biopsy, foreign body removal, polypectomy		
		Esophagastroduodenoscopy: diagnostic, with biopsy, removal lesions, brushings		
		Esophagoscopy: diagnostic, with biopsy, foreign body removal, polypectomy		
		Ileoscopy: diagnostic, with biopsy		
		Liver biopsy		
		Proctoscopy: diagnostic, with biopsy, polypectomy		
		Proctosigmoidoscopy: diagnostic, with biopsy, foreign body removal, polypectomy		
		Sigmoidoscopy: rigid/flexible; diagnostic, with biopsy, polypectomy		

I attest that I am competent to perform the above requested procedures and can provide documentation that I possess these privileges at an Illinois licensed hospital.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Medical Director

\_\_\_\_\_  
Date