

NAPERVILLE SURGICAL CENTRE

Neurosurgery Privileges

Name				
Privileges Requested		Procedure	Privileges Approved	
Yes	No		Yes	No
		Carpal tunnel release, open, endoscopic		
		Epidural blood patch		
		Epidural injection		
		Excision neuroma		
		Laminectomy w/excision, decompression intervertebral disk		
		Lumbar puncture		
		Muscle biopsy		
		Nerve biopsy		
		Nerve block		
		Nerve repair, upper/lower extremities		
		Nerve transposition, upper/lower extremities		
		Neuroplasty(exploration, neurolysis or decompression) upper/lower extremities		
		Therapeutic intravenous injection		
		Trigger point injection		

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