# **REPUBLIC OF RWANDA**



# **MINISTRY OF HEALTH**

GUIDELINES ON CRITERIA FOR CREDENTIALING AND PRIVILEGING OF HEALTH PROFESSIONALS

#### Foreword

Over the last decade, Rwandan Health Sector has achieved several milestones. These include a decline in maternal and infant mortality rates, an increase in prenatal care visits and utilization of delivery services, a steady decline in total fertility rate, relative stability in malaria and HIV prevalence, an increase in the utilization of modern contraceptives and higher immunization rates among children aged 12-23 months, to mention a few.

It is well known that weaknesses in the quality of care in hospitals lead to patient safety problems and cause unnecessary harm. Improving quality should be accompanied by qualified, competent, motivated and equitably distributed health workforce capable of delivering quality health services. Health workforce development remains a top national priority. Both Vision 2050 and the National Strategy for Transformation 1 (NST-1) emphasize increasing the number, capacity, and quality of specialized health personnel and improving the quality of health care as a focus of health policy.

Quality of the health care cannot be solely assigned to health systems as a whole. In addition, each constituent provider is required to be demonstratively competent to practice as privileged, and to keep pace with advances in diagnosis and treatment. Patients are entitled to expect and require that the competences of all staff members of each health facility have been proven—across their respective scopes of practice.

Credentialing and privileging are designed to keep patients safe, and avert preventable adverse treatment outcomes and require thorough reviews and investigations of health professionals' background that both ensure patient safety and prevent failures of care and associated potential liability. Health professionals are trusted to make life-altering decisions. Patients give this trust based upon the assumption that professionals have the knowledge, skills and competence necessary— in turn gained through comprehensive training and extensive experience.

The Ministry is issuing the Credentialing and privileging to ensure that patients are receiving high quality care whilst mitigating the number of potential professional malpractice cases for health facilities.



# CONTENTS

Foreword	1
Acronyms	3
Definitions of terms	4
Purpose and Scope	4
Application Process	5
Assessment of applications for credentialing and privileging	5
Application Processing	5
Credentialing and privileging criteria	6
Circumstances for close scrutiny	6
Professional Practice Evaluation Monitoring	7
Focused Professional Practice Evaluation	7
Ongoing Practice Performance Evaluation	7
External review	8
ANNEXES	9
Annex I: Application form for Credentialing and Privileging	9
Annex II: Criteria for Credentialing and privileging	18
A. General surgery privileges for medical doctors (general practitioners)	18
B. Orthopedic surgery privileges for medical doctors (general practitioners)	19
C. Emergency medicine privileges for medical doctors (general practitioners)	20
D. Obstetrics and Gynecology privileges for medical doctors (general practitioners).	23
E. Ophthalmology privileges for medical doctors (general practitioners)	24
F. Dental privileges for medical doctors (general practitioners)	25
G. Dermatology privileges for medical doctors (general practitioners)	26
H. Internal medicine privileges for medical doctors (general practitioners)	28
I. Pediatric privileges for medical doctors (general practitioners)	29
J. Psychiatry privileges for medical doctors (general practitioners)	31
K. Oncology privileges for medical doctors (general practitioners)	32
L. Hematology privileges for medical doctors (general practitioners)	33
M. Ear Nose and Throat (ENT) privileges for medical doctors (general practitioners)	34
N. Radiology privileges for medical doctors (general practitioners)	36

# Acronyms

ACRONYM	EXPANSION	
CSF	Cerebrospinal Fluid	
СТ	Computed Tomography	
ECG	Electrocardio gram	
ENT	Ear Nose and Throat	
FAST	Focused Assessment with Sonography in Trauma	
HSSP IV	Health Sector Strategic Plan IV 2018-2024	
HRH	Human Resource for Health	
ie	id est, that is	
I&D	Incision and Drainage	
IV	Intravenous	
MRA	Magnetic resonance angiography	
MRI	Magnetic resonance imaging	
MBBS	Bachelor of medicine and surgery	
PEG	Percutaneous Endoscopic Gastrostomy	
PET	Positron emission tomography	
UHC	Universal Health Coverage	
VBAC	Vaginal birth after cesarean section	

#### **Definitions of terms**

Under these guidelines, the following terms have the following definitions:

- 1. Credentials: documented evidence of licensure, education, training, experience, or other qualifications of health professionals to provide care or services in a health facility;
- **2. Credentialing:** process of obtaining, verifying, and assessing the credentials of a health professional;
- **3. Privilege:** It is a special right authorising a health professional to provide a specific healthcare service beyond his/her respective professional scope of practice based on his/her credentials;
- **4. Privileging**: is the process whereby a health professional is granted a privilege;
- **5. Health professional:** any person registered and licensed with a health professional Council recognized in Rwanda. The categories of health professionals are medical doctors and dentists; nurses and midwives; pharmacists; and allied health professionals.

#### **Purpose and Scope**

These guidelines are designed to clarify criteria for credentialing and privileging of health professionals in Rwanda. Credentialing and privileging health professionals will support the Ministry of Health to achieve the Universal Health Coverage (UHC) for safe surgery and anesthesia by increasing surgical volume, improving timely access to surgery, increasing Surgical, anesthesia and Obstetrics-Gynecology providers per population ratio and skills mix categories as reflected in the national strategic documents including but not limited to Health Sector Strategic Plan IV 2018-2024 (HSSP IV), National Surgical, Obstetrics, And Anesthesia Plan 2018-2024, the National Ear And Hearing Care Plan 2018-2024 and the National Strategy For Health Professions Development 2020–2030.

It is believed that credentialing and privileging of health professionals will also advance the recommendations of the Human Resource for Health (HRH) labor market analysis report. Benefits will include increasing the supply of HRH and mitigating the cost of training highly qualified personnel, thereby optimizing the use of available resources.

The present guidelines establish mechanisms for gathering relevant data that will serve as the basis for decisions regarding credentialing and privileging of health professionals in Rwanda, The guidelines come as an implementation tool for the Ministerial instructions no 20/7018 of 31/08/2021 on credentialing and privileging of health professionals.

#### **Application Process**

A health professional who applies for credentialing and privileging submits his or her written application to the head of his or her respective health facility. However, the health professional who works at a health centre submits his or her written application to the head of the District hospital of the catchment area.

All applications for credentialing and privileging shall be submitted to the head of the health facilities and shall contain a filled application form (Annex I), a license to practice and a good standing certificate issued by respective professional Council; credentials; three (3) recommendation letters. The recommendation letter should include the recommenders' knowledge on applicant's individual character, competence, training, experience, and judgment.

All reapplications for credentialing and privileging shall also include the above-mentioned documents plus a report detailing sufficient volume of procedures performed and their outcomes.

#### Assessment of applications for credentialing and privileging

All applications for credentialing and privileging are assessed by the committee in charge of examining applications for credentialing and privileging of the health facility.

#### **Application Processing**

In order to assess the applications, health facilities shall collect information from primary sources (ie: application documents) to verify health professional's current licensure status, training, experience, competency, and ability to perform the requested privileges.

Secondary sources of information may be used if primary source are not enough to make informed decision on the application. Verification from secondary sources of information include also verification from another health facility, copies of a credential verification, or confirmation from a source that verified credentials. Additionally, health facilities might want to consider conducting a deep investigation, for any additional information about the applicant.

For Privileges specific to a single specialty, the committee in charge of examining applications for credentialing and privileging of the health facility may designate an appropriate expert to provide an opinion on the application whereas for privileges that cross specialties, the committee may seek an opinion from a team of experts knowledgeable about the domain whom the privilege has been requested for.

All credentialing and privileging recommendations and decisions should be documented and approved officially by the management of the health facility.

#### Credentialing and privileging criteria

In order to be granted specific privileges, applicants must provide evidence of completion of training programs certified by respective professional councils and be able to demonstrate performance of a sufficient volume of procedures and or services, reflective of the scope of privileges requested, during the training program. The committee in charge of credentialing and privileging use the criteria for credentialing and privileging as detailed in annex II.

For the renewal of privileges, applicants must demonstrate competence and a sufficient volume of procedures performed with acceptable results, reflective of the scope of privileges requested based on results of professional practice evaluation monitoring and favorable performance report of outcomes.

#### **Circumstances for close scrutiny**

The following circumstances may serve as warning signs when evaluating initial applications for credentialing and privileging and may require close scrutiny:

- Reluctance by the applicant to give permission to contact previous employers or health facilities,
- o Reluctance by the applicant or the applicant's references to provide specific information,
- o No response to a reference inquiry,
- o Previous license to practice revocation,
- o Previous limitation, reduction, or loss of clinical privileges,
- o Unexplained or unaccounted gaps in service provision,
- Frequent changes in employment locations or resignations from the applicant,
- o Reports of previous professional malpractice investigations,
- Any past, present or pending claims or investigations of fraud, abuse, and misconduct from relevant institutions, and Incomplete or erroneous application information.

The following circumstances may serve as warning signs when evaluating applications for recredentialing and reprivileging:

- o Minimum procedure/service volume thresh-holds not met,
- o Clinical outcome data show a negative / adverse pattern,
- O Documentation of behavioral issues / disruptive behavior (incident reports, warning letters, etc.),
- o Documented patients complaints (Patient voice, suggestion boxes).

#### **Professional Practice Evaluation Monitoring**

All health professionals who have newly granted privileges shall undergo a performance evaluation. The committee in charge of examining applications for credentialing and privileging of the health facility shall lead the performance evaluation and consider the following methods:

#### **Focused Professional Practice Evaluation**

The focused professional practice evaluation is a process used to confirm a practitioner's current competence at the time new privileges are granted. The reviewers of competences shall be identified by the committee in charge of examining applications for credentialing and privileging of the health facility based on their level of qualifications and competences.

#### **Ongoing Practice Performance Evaluation**

Once privileges are granted, facilities have a mandate to monitor practice performance of those whom privileges are granted to. The process shall include the ongoing assessment of performance based on effective use of data in the decision-making.

The following methods shall be taken into consideration to monitor a health professional's performance:

- o **Volume of procedures performed:** This involve comparing required volume/services of procedure versus number of procedures performed by the health professional.
- o **Prospective proctoring:** the health professional presents potential cases and proposed treatment plans to the supervisor referred to proctor (either verbally or in writing) and/or completes a written or oral examination or case simulation.
- o **Concurrent proctoring:** the proctor observes the health professional performing a procedure or reviews the healthcare provider's medical management during a patient's hospital stay.
- o **Retrospective evaluation:** involves the proctor performing a postcare review of a patient's health record.

For both concurrent proctoring and retrospective proctoring the table below can be utilized to evaluate the provider

Table 1: Ongoing Practice Performance Evaluation criteria

Case audit report (5 random cases)				
practice is acceptable.	An event from a clinical situation, in which management, when ideal, night have	event involving minor	Major deficiency in care: An unexpected event involving major error in diagnosis, management, judgment, or technique	
4	3	2	1	

# External review

The external review involves seeking a second opinion or outside perspective. The method shall be considered when there is a perceived conflict of interest or a need for objectivity.

# **ANNEXES**

# Annex I: Application form for Credentialing and Privileging

A. Personal Information		
Name(s):	Date of Birth:	
Phone: Email:		Female Male
Address: Province:Di	strict:Sector:	Cell:
B. Professional Information		
Primary Profession		
Medical Doctor/ Dental Surgeon	Nurse/Midwife	
Pharmacist	Allied Health Professiona	Specify
Registered: Yes No Profession	al Council:	
Registration Number:	Registration: Last ye	ear of License: Expiry date:
Secondary Practice Specialty		
Name of Specialty: Professional Council:	_	No
Registration Number:Year of	f Registration: Last y	vear of License: Expiry date:

Practice Sub-Specialty Name of Sub-Specialty: Registered: Yes No
Professional Council:
Registration Number:

# D. Professional History

Provide your professional history starting from the latest employer

Name of Employer	Address	Position	Full time (Yes/No)	Starting date	Ending Date

# E. Specialty for privileges

#### ANAESTHESIA

- Adult
- o Obstetric
- Paediatric (≥ 10 years as per Burnside Hospital admission exclusion criteria)

#### **DENTAL**

- General Dentistry
- Special Needs Dentistry

#### **DERMATOLOGY**

#### **ENT SURGERY**

- o Adult
- o Paediatric (≥ 10 years)
- Adenoidectomy
- o Bronchial Procedures
- Ear Procedures
- o Facial Nerve
- o Laryngeal Procedures
- Nasal Procedures
- o Otolaryngology Head & Neck
- o Pharyngeal Procedures
- o Tonsillectomy
- Tracheal Procedures
- Other, please specify:

#### GENERAL SURGERY

- o Bariatric
- Breast Surgery
- o Colorectal Surgery
- o Endocrine Surgery
- Adrenalectomy
- Thyroidectomy
- o Gastrointenstinal Surgery
- Hepatobiliary & Pancreatic Surgery
- o Laparoscopic Surgery
- o Sentinel Node Biopsy
- o Upper GI Surgery

# **GYNAECOLOGY**

- Advanced Laparoscopic Surgery
- o Gynaecology General
- Ultrasound
- Gynaecological Oncology
- o Uro-Gynaecology

# INTENSIVE CARE MEDICINE

- o Adult
- o Paediatric (≥ 10 years)

#### INTERNAL MEDICINE

#### **NEPHROLOGY**

#### **NEUROLOGY**

#### RESPIRATORY MEDICINE

- o Bronchoscopy-Diagnostic
- o Bronchoscopy- Therapeutic
- o Sleep Medicine
- o Other please specify:

#### RHEUMATOLOGY

#### **OBSTETRICS**

- Maternal Fetal Medicine
- Obstetrics
- Ultrasound

# OCCUPATIONAL AND ENVIRONMENTAL MEDICINE

#### **OPHTHAMOLOGY**

- o Adult
- o Paediatric (≥ 10 years)
- Cataract Surgery
- o Corneal Transplantation
- o Eyelid Surgery
- o Glaucoma Surgery
- o Lacrimal Surgery
- Oculoplastic

#### GASTROENTEROLOGY

- o Upper Gastrointestinal Endoscopy
- o Colonoscopy
- Percutaneous EndoscopicGastrostomy (PEG)
- Other, please specify:

#### **GENERAL PRACTICE**

Non-procedural

#### ORTHOPAEDIC SURGERY

- o Adult
- o Paediatric ( $\geq 10$  years)
- Arthroscopy
- o Fracture Management
- o Major Joint Replacement
- o Reconstructive Surgery
- Spinal Surgery

#### PAEDIATRIC MEDICINE

- General Medicine
- Neonatology

#### PAEDIATRIC SURGERY

PAIN MEDICINE

#### PALLIATIVE MEDICINE

## **PATHOLOGY**

Anatomical/Cytopathology

- Clinical Genetics
- o Clinical Pharmacology
- o Endocrinology
- o Geriatric Medicine
- Haematology
- Hepatology
- o Immunology and Allergy
- o Infectious Diseases
- o Medical Oncology

# PLASTIC AND RECONSTRUCTIVE SURGERY

- Adult
- o Paediatric (≥ 10 years)
- o Bat Ears
- o Repair of Lacerations
- Revision of Scars
- Abdominal Reductions
- o Breast Augmentation
- o Breast Reduction
- o Cosmetic Rhinoplasty
- Brow Surgery
- Facial Surgery
- Gender Reassignment
- Laser Ablation
- Liposuction
- Neurovascular Flaps
- Other, please specify:

# **PSYCHIATRY**

- Orbital Surgery
- o Pterygium Surgery
- o Refractive Surgery
- o Squint Surgery
- Vitreoretinal Surgery

#### ORAL MAXILLOFACIAL SURGERY

- Adult
- o Paediatric ( $\geq 10$  years)
- o Facio Maxillary Surgery
- o Mandibular Osteotomy
- Other, please specify:

<ul> <li>Biochemistry</li> </ul>	o General
o Chemical Patholog	RADIOLOGY
<ul> <li>General Pathology</li> </ul>	RADIOLOGI
<ul> <li>Haematology</li> </ul>	o Diagnostic Radiology
<ul> <li>Immunology</li> </ul>	o Diagnostic Ultrasound
<ul> <li>Microbiology</li> </ul>	

# F. Disciplinary information

Question	Yes/No
Has your license to practice ever been revoked, restricted, or suspended?	
Have your clinical privileges ever been revoked, restricted, or suspended?	
Have you ever been requested to appear before an ethical committee of your professional council for any	
reason	
Have you ever been sanctioned by your professional council	
Have you ever discontinued your practice (other than for vacation, education/training, maternity leave, or leave	
due to illness) for three months or more?	

# G. Education

Training institution	Address	Subject	Years attended	Graduation date	Award

# H. Training and Fellowships

Tuoining inglitudion	Address	Subject (Major	Period of Training	Award
Training institution		or minor)		

# I. Teaching/Research History

Institution	Address	Position	Appointment Period

# J. Referees

Provide three professional references who can attest your qualifications, clinical and professional competences

Referee no.1		
	Position:	Institution:
Email:	P	hone number:
Referee no.2		
		Institution:
Email:		hone number:
Referee no.3		
Name:	Position:	Institution:
Relationship:		
Email:	P	hone number:

# Annex II: Criteria for Credentialing and privileging

# A. General surgery privileges for medical doctors (general practitioners)

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Admit, evaluate, diagnose, consult, and provide pre-, intra-, and postoperative care and perform surgical procedures to patients of all ages to correct or treat various conditions, diseases, disorders, and injuries of the GI tract, abdomen, and its contents, extremities, breast, skin and soft tissue, head and neck, and endocrine systems; assess, stabilize, and determine disposition of patients with emergency conditions consistent with medical staff policy regarding emergency and consultative call services; provide care to patients in the intensive care setting; performance of history and physical exam.

patients in the intensive care setting; performance of history and physical exam.
Core skills
□ Abdominoperineal resection
☐Amputations, above the knee, below knee; toe, trans metatarsal, digits
□Appendectomy
□Breast: complete mastectomy with or without axillary lymph node dissection; excision of breast lesion, breast biopsy, incision, and drainage of abscess, modified radical mastectomy, partial mastectomy with or without lymph node dissection, radical mastectomy, subcutaneous mastectomy
□Correction of intestinal obstruction
□Drainage of intra-abdominal, deep ischiorectal abscess
□Emergency thoracostomy
□Enteric fistulae, management
□Excision of fistula in ano/fistulotomy, rectal lesion
□Gynecological procedure incidental to abdominal exploration
□Hemodialysis access procedures
□Hemorrhoidectomy, including stapled hemorrhoidectomy
□Incision, excision, resection and enterostomy of small intestine
□Incision/drainage and debridement, perirectal abscess
□Laparotomy for diagnostic or exploratory purposes or for management of intra- abdominal sepsis or
trauma
□Liver biopsy (intraoperative), liver resection
☐Management of intra-abdominal trauma, including injury, observation, paracentesis, lavage
□Peritoneovenous drainage procedures for relief or ascites
□Repair of perforated viscus (gastric, small intestine, large intestine)
□Sigmoidoscopy, fiberoptic with or without biopsy, with polypectomy
□Skin grafts (partial thickness, simple)

□Small bowel surgery for benign or malignant disease
□Surgery of the abdominal wall, including management of all forms of hernias, including
diaphragmatic hernias, inguinal hernias, and orchiectomy in association with hernia repair
□Thoracentesis
☐Thyroidectomy and neck dissection
□Tracheostomy
□Tube thoracostomy
□Vein ligation and stripping
Basic education and minimal formal training
Bachelor of medicine and surgery (MBBS)
2. Current registration to Rwanda Medical and Dental Council
3. At least 2 years' experience working in Surgery with adequate mentorship and training in the subject matter being applied for
Privileges
Admit, evaluate, diagnose, treat, and provide consultation to patients of all ages to correct or treat various conditions, illnesses and injuries of the extremities, spine, and associated structures by medical, surgical, and physical means including but not limited to congenital deformities, trauma, infections, tumors, metabolic disturbances of the musculoskeletal system, deformities, injuries, and degenerative diseases of the spine, hands, feet, knee, hip, shoulder, and elbow, including primary and secondary muscular problems and the effects of central or peripheral nervous system lesions of the musculoskeletal system. Perform history and physical exam. Provide care to patients in the intensive care setting. Assess, stabilize, and determine disposition of patients with emergent conditions consistent with medical staff
policy regarding emergency call services
Core skills:
□Amputation surgery including immediate prosthetic fitting
□Arthrocentes is, diagnostic
□Biopsy and excision of tumors involving bone and adjacent soft tissues
□Closed reduction of fractures and dislocations
□Debridement of soft tissue
□Excision of soft tissue/bony masses

□Open and closed reduction of fractures	
□Open reduction and internal/external t	fixation of fractures and dislocations of the skeleton
[in/excluding spine]	
Basic education and minimal formal train	ning
1. Bachelor of medicine and surgery (MB	BBS)
2. Current registration to Rwanda Medica	al and Dental Council
At least 2 years' experience working in C	Orthopedic surgery with adequate
mentorship and training in the subject matter	r being applied for
Required documentation and experience	
New applicants	
o Required trainings:	
o Provide contact information for 2 p	practitioners whom the committee may contact to provide
an evaluation of your clinical comp	petency.
Name:	Name:
Email: :	Email:
Phone :	Phone:
Reappointment applicants	
o Documentation for 5 randomly aud	lited procedures performed independently by the applicant,
o Provide contact information for 1 p	practitioner whom the committee may contact to provide
an evaluation of your clinical comp	petency.
Name:	Name:
Email: :	Email:

# C. Emergency medicine privileges for medical doctors (general practitioners)

# Privileges

Phone :.....

- The performance of history and physical examinations, the ordering and interpretation of diagnostic studies including laboratory, diagnostic imaging and electrocardiographic examinations normally considered part of the practice of emergency medicine.
- The administration of medications and the performance of other emergency treatments normally considered part of the practice of emergency medicine.
- The requesting of consultations and technical procedures to be performed by other physicians and qualified consultants/technicians

Core skills:		
□Airways Te	<del>-</del>	
0	Nasal endotracheal intubation	
0	Oral endotracheal intubation	
0	Mechanical ventilation	
□Cardiac Pro	ocedures	
0	Closed cardiac massage	
0	Cardioversion/defibrillation	
0	Cardiopulmonary resuscitation	
□Diagnostic l	Procedures	
0	Arthrocentesis	
0	Culdocentesis	
0	Pericardiocentesis	
0	Peritoneal lavage	
0	Thoracentesis	
□Genitourina	ry Techniques	
	Suprapubic catheterization	
□Hemodynan	nic Techniques - Central Venous Access	
0	Jugular	
0	Subclavian	
0	Femoral	
0	Intraosseus infusion	
0	Peripheral arterial cannulation	
0	Venous cutdown	
□Orthopedic	Procedures	
0	Cervical immobilization	
0	Cervical traction technique	

☐ Thoracic Procedures	
o Emergency the	pracotomy
Needle thorace	ostomy
o Tube thoracos	tomy
□Ultrasound	
o Trauma (FAS'	Γ) evaluation
o Ultrasound gu	ided procedures
Basic education and minima	l formal training
1. Bachelor of medicine an	d surgery (MBBS)
2. Current registration to R	wanda Medical and Dental Council
3. At least 2 years' experie training in the subject m	ence working in Emergency department with adequate mentorship and atter being applied for
Required documentation ar	nd experience
New applicants	
o Required trainings:	
<ul> <li>Provide contact infor evaluation of your cl</li> </ul>	mation for 2 practitioners whom the committee may contact to provide an linical competency.
Name:	Name :
Email: :	Email :
Phone :	Phone:
Reappointment applicants	
o Documentation for 5	randomly audited procedures performed independently by the applicant,
<ul> <li>Provide contact infor evaluation of your cl</li> </ul>	mation for 1 practitioner whom the committee may contact to provide an inical competency.
Name:	_ Name :
Email: :	Email:
Phone:	Phone:

#### D. Obstetrics and Gynecology privileges for medical doctors (general practitioners)

# Privileges

Admit, evaluate, diagnose, treat and provide consultation to adolescent and adult female patients and/or provide medical and surgical care of the female reproductive system and associated disorders, including major medical conditions complicating pregnancy.

#### Core skills

#### □ Obstetrics

- Amniotomy
- O Application of internal fetal and uterine monitors, Interpretation of fetal monitoring (Ex: ECG)
- o Cesarean hysterectomy, cesarean section, Hysterectomy (Total and partial)
- Cerclage
- o Cervical biopsy or conization of cervix in pregnancy
- External version of breech
- o Manual removal of placenta, uterine curettage
- Operative vaginal delivery (including vacuum extraction, breech extraction, low or mid forceps including rotations)
- o Repair of all vaginal, cervical, perineal laceration
- Vaginal birth after cesarean section (VBAC)
- o Surgical management of ectopic pregnancy

#### ☐ Gynecology

- Gynecologic sonography
- o Hysterectomy, abdominal, vaginal, including laparoscopic
- Hysterosalpingography
- Myomectomy

#### Basic education and minimal formal training

1. Bachelor of medicine and surgery (MBBS)

- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in Obstetrics and gynecology department with adequate mentorship and training in the subject matter being applied for

#### Required documentation and experience

# New applicants

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

Name <u>:.</u>	<u></u>	Name:
Email:	·	Email:
Phone	·	Phone:
Reap	pointment applicants	
0	Documentation for 5 randomly	audited procedures performed independently by the applicant,
0	Provide contact information for evaluation of your clinical comp	1 practitioner whom the committee may contact to provide an eetency.
Name <u>:.</u>		Name :
Email:	·	Email:
Phone	·	Phone:

#### E. Ophthalmology privileges for medical doctors (general practitioners)

#### Privileges

Admission, work-up and performance of medical and surgical procedures on patients of all ages presenting with illnesses, injuries, and disorders of the eye, including its related structures and visual pathways. These privileges include the provision of consultation as well as the ordering of diagnostic studies and procedures related to the ophthalmologic problem. The core privileges in this specialty include the procedures on the core procedures list and such other procedures that are extensions of the same techniques and skills.

#### Core skills:

- Systemic, ocular and visual systems evaluation
- Ophthalmic clinical diagnosis
- Identification of general and ophthalmic emergencies

- Preparation of patients for clinically and psychologically for specific procedures
- Perform surgical procedures for general or common eye conditions
- Vision rehabilitation

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in Ophthalmology department with adequate mentorship and training in the subject matter being applied for

Rea	nired	documentation	and	experience
1100	uncu	uocunchanon	ana	CAPCITCHE

# New applicants

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

Name:	Name :
Email: :	Email:
Phone :	Phone:
Reappointment applicants	
<ul> <li>Documentation for 5 randomly audite</li> </ul>	ed procedures performed independently by the applicant,
<ul> <li>Provide contact information for 1 pra evaluation of your clinical competence</li> </ul>	extitioner whom the committee may contact to provide an ey.
Name:	Name :
Email: :	Email:
Phone :	Phone:

#### F. Dental privileges for medical doctors (general practitioners)

# Privileges

Admission, work-up, diagnosis, and provision of nonsurgical and surgical care to patients of all ages presenting with illnesses, injuries and disorders of the dental anatomy.

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- Provide dental care in compliance with the principles of ethics and jurisprudence.
- Perform oral and maxillofacial surgery and provide anesthesia, pain and anxiety control,
- Manage dental emergencies.

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in stomatology department with adequate mentorship and training in the subject matter being applied for

#### Required documentation and experience

# New applicants

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

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vame <u></u>		Name:
Email:		Email:
Phone	······	Phone:
Reap	pointment applicants	
0	Documentation for 5 randomly audite	d procedures performed independently by the applicant,
0	Provide contact information for 1 praevaluation of your clinical competence	ctitioner whom the committee may contact to provide an y.
Name <u>:.</u>		Name :
Email:		Email:
Phone	<b>:</b>	Phone:

# G. Dermatology privileges for medical doctors (general practitioners)

#### Privilege

Admit, evaluate, diagnose, treat and provide consultation to patients of all ages, with benign and malignant disorders of the skin, mouth, external genitalia, hair, and nails, as well as sexually transmitted diseases.

#### Core skills

- o Performance of history and physical exam
- o Botulinum toxin injection

- o Chemical face peels
- o Collagen injections
- Cryosurgery
- o Destruction of benign and malignant tumors
- Electrosurgery
- o Excision of benign and malignant tumors with simple, intermediate repair techniques
- o Intralesional injections
- o Interpretation of specially prepared tissue sections, cellular scrapings, and smears of skin lesions by means of routine and special (electron and fluorescent) microscopes
- o Potassium hydroxide examination
- Tzanck smears
- o Patch test
- o Photomedicine, phototherapy, and topical/systemic pharmacotherapy
- Sclerotherapy
- Skin and nail biopsy
- o Soft tissue augmentation
- o complex repair techniques including flaps and grafts

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in dermatology department with adequate mentorship and training in the subject matter being applied for

#### Required documentation and experience

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

Vame <u>:.</u>		Name:
Email:	:	Email:
Phone	<b></b>	Phone:
Reap	ppointment applicants	
0	Documentation for 5 randomly audite	d procedures performed independently by the applicant,
0	Provide contact information for 1 praevaluation of your clinical competence	ctitioner whom the committee may contact to provide an y.
Vame <u>:.</u>		Name :

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Phone	<b>:</b>	Phone:

### H. Internal medicine privileges for medical doctors (general practitioners)

# Privilege

Admit, evaluate, diagnose, treat, and provide consultation to patients 16 years of age and older with common and complex illnesses, diseases, and functional disorders of the circulatory, respiratory, endocrine, metabolic, musculoskeletal, hematopoietic, gastrointestinal, and genitourinary systems. The core privileges include the procedures below and such other procedures that are extensions of the same techniques and skill

#### Core skills

- o Arthrocentesis and injection of joints and bursa (excluding hip joints)
- o Burns, superficial and partial thickness
- o Cardioversion emergent
- o Ventilator management Acute & Chronic (Regions NA)
- Ventilator management Chronic (Regions only)
- o Excision of skin and subcutaneous tumors, nodules, and lesions
- o ECG interpretation
- o Hyper alimentation and total parenteral nutrition
- o I&D Abscess
- o Insertion and management of central venous catheters and arterial lines
- Local anesthetic techniques
- o Lumbar puncture
- Paracentesis
- o Perform simple skin biopsy or excision
- o Placement of anterior nasal hemorrhage packing
- o Remove non-penetrating corneal foreign body, nasal foreign body
- Thoracentesis
- Endoscopy
- Colonoscopy
- Bronchoscopy

#### Basic education and minimal formal training

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in internal medicine department with adequate mentorship

	and training in the subject matter being applied for
4.	Bachelor of medicine and surgery (MBBS)
5.	Current registration to Rwanda Medical and Dental Council
6.	At least 2 years' experience working in internal medicine department with adequate mentorship and training in the subject matter being applied for
Requi	red documentation and experience
New	applicants
0	Required trainings:
0	Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.
Name <u>:</u>	
Email:	: Email :
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0	Documentation for 5 randomly audited procedures performed independently by the applicant,
0	Provide contact information for 1 practitioner whom the committee may contact to provide an evaluation of your clinical competency.
Name <u>:</u>	
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# I. Pediatric privileges for medical doctors (general practitioners)

#### Privilege

Admit, evaluate, diagnose, treat, and provide consultation to patients from birth to young adulthood concerning their physical, emotional, and social health as well as treating acute and chronic disease, including major complicated illnesses. May provide care to patients in the intensive care setting in conformance with unit policies. Assess, stabilize, and determine the disposition of patients with emergent conditions consistent with medical staff policy regarding emergency and consultative call services.

#### Core skills:

o Arterial puncture

Phone :.....

- o Arthrocentesis and joint injection
- o Bladder catheterization
- o Frenectomy

- o Management of burns, superficial and partial thickness
- o Incision and drainage of abscesses
- o Lumbar puncture
- Reduction and splinting of uncomplicated, minor closed fractures and uncomplicated dislocations
- o Performance of simple skin biopsy or excision
- o Place anterior/ posterior nasal hemostatic packing
- Placement of IV lines
- o Placement of intraosseous lines
- o Remove nonpenetrating foreign bodies from eye, nose, ear
- Skin biopsy
- o Subcutaneous, intradermal, and intramuscular injections
- Thoracentes is
- o Wound care and suture of uncomplicated lacerations

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in internal pediatrics department with adequate mentorship and training in the subject matter being applied for

# Required documentation and experience

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

Name <u>:</u>	<u></u>	Name:
Email: :		Email:
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## J. Psychiatry privileges for medical doctors (general practitioners)

## Privilege

Admit, perform work-up, diagnosis and provide treatment to patients above the age of 15 who suffer from mental, behavioral, or emotional disorders. Privileges include being able to provide consultation with physicians in other fields regarding mental, behavioral, or emotional disorders and their interaction with physical disorders

#### Core skills

- Assess and treat individual patients with disease states and non-disease-based etiologies, using advanced theoretical and empirical knowledge of physiology, pathophysiology, and pharmacology.
- Clinically manage psychiatric disorders including, but not limited to, severe and persistent neurobiological disorders.
- Complete comprehensive assessments, develop the differential diagnosis, and formulate and implement a treatment plan.
- o Conduct behavioral healthcare maintenance of the population served.
- o Conduct individual, group, and family psychotherapy.
- o Evaluate and manage psychobiological interventions. Initiate appropriate referrals.
- o Make daily rounds on hospitalized patients.
- Order and initial interpretation of diagnostic testing and therapeutic modalities, such as laboratory tests, medications, hemodynamic monitoring, treatments, x-ray, ECG, IV fluids and electrolytes, etc.
- O Utilize advanced practice skills to independently provide: (1) case management, including psychiatric rehabilitation and home care; and (2) teaching, promotion, and prevention.

# Basic education and minimal formal training

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in internal Psychiatry department with adequate mentorship and training in the subject matter being applied for

#### Required documentation and experience

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

Name:	Name:
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0	Documentation for 5 randomly audited	procedures performed independently by the applicant,	
0	Provide contact information for 1 prac	titioner whom the committee may contact to provide an	
	evaluation of your clinical competency	<b>7.</b>	
Name <u>:.</u>		Name:	
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Phone	<b></b>	Phone:	

# K. Oncology privileges for medical doctors (general practitioners)

#### Privilege

Admit, evaluate, diagnose, treat, and provide consultation to patients, of all ages, with all types of cancer and other benign and malignant tumors.

#### Core skills

- Administration of chemotherapeutic agents and biological response modifiers through all therapeutic routes
- Assessment of tumor imaging by computed tomography, magnetic resonance, PET scanning, and nuclear imaging techniques
- Complete blood count, including platelets and white cell differential, by means of automated or manual techniques
- o Diagnostic lumbar puncture and intrathecal chemotherapy administration
- o Management and maintenance of indwelling venous access catheters
- o Perform history and physical exam
- Preparation, staining, and interpretation of blood smears, performing bone marrow aspirates and biopsies, and touch preparations as well as interpretation of bone marrow biopsies
- o Serial measurement of tumor masses
- Therapeutic thoracentesis and paracentesis

#### Basic education and minimal formal training

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in oncology department with adequate mentorship and training in the subject matter being applied for

# Required documentation and experience

0	Required trainings:	
0	Provide contact information for 2 practit	ioners whom the committee may contact to provide an
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#### L. Hematology privileges for medical doctors (general practitioners)

#### Privilege

Admit, evaluate, diagnose, treat, and provide consultation to patients, of all ages, with diseases and disorders of the blood, spleen, lymph glands, and immunologic system, such as anemia, clotting disorders, sickle cell disease, hemophilia, leukemia, and lymphoma

#### Core skills

- Administration of chemotherapeutic agents and biological response modifiers through all therapeutic routes
- o Aphaeresis procedures
- Complete blood count, including platelets and white cell differential, by means of automated or manual techniques
- o Diagnostic lumbar puncture and intrathecal chemotherapy administration
- o Indications and application of imaging techniques in patients with blood disorders
- o Management and care of indwelling venous access catheters
- o Perform history and physical exam
- o Preparation, staining, and interpretation of blood smears, performing bone marrow aspirates and biopsies, and touch preparations as well as interpretation of bone marrow biopsies
- o Therapeutic thoracentesis and paracentesis

#### Basic education and minimal formal training

- o Bachelor of medicine and surgery (MBBS)
- o Current registration to Rwanda Medical and Dental Council

o At least 2 years' experience working in Haematology department with adequate mentorship and training in the subject matter being applied for

# Required documentation and experience

### New applicants

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

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#### M. Ear Nose and Throat (ENT) privileges for medical doctors (general practitioners)

#### Privilege

Admit, evaluate, diagnose, and provide consultation and comprehensive medical and surgical care to patients of all ages presenting with diseases, deformities, or disorders of the head and neck that affect the ears, nose, throat, respiratory and upper alimentary systems, and related structures of the head and neck. Head and neck oncology and facial plastic reconstructive surgery and the treatment of disorders of hearing and voice are also included.

#### Core skills

- o Bronchoscopy (rigid or flexible) with biopsy, foreign body removal or stricture dilatation
- o Caldwell Luc procedure
- o Cervical esophagectomy
- Cryosurgery
- o Endoscopic sinus surgery and open sinus surgery
- Endoscopy of the larynx, tracheobronchial tree, and esophagus to include biopsy, excision, and foreign body removal
- o Esophageal surgery including diverticulectomy, cervical esophagectomy
- o Esophagoscopy (rigid or flexible) with biopsy, foreign body removal or stricture dilatation

- Excision of skull base tumor
- Excision of tumor ethmoid/cribiform
- Facial plastic surgery, including cosmetic surgery, chemical peel, rhytidectomy, mentoplasty and correction of aural atresia, liposuction, and implantation of autogenously, homologous, and allograft, and repair of lacerations
- Lip surgery including lip shave, partial/ total resection with primary repair or by local or distant flaps
- o Myocutaneous flap (pectorals, trapezius, sternocleidomastoid)
- Otoplasty
- o Parathyroidectomy
- o Perform history and physical exam
- o Radical surgery of the head and neck, including radical neck dissection, and radical excision of the maxillary antrum for tumor
- o Ranula excision
- o Reconstructive procedure of the upper airway
- Reduction of facial fractures
- o Repair of CSF leaks with sinus or mastoid surgery
- Repair of fistulas oral-antral, oral-nasal, oral-, maxillary, oral-cutaneous, pharyngocutaneous, tracheo-cutaneous, esophagocutaneous
- o Rhinoplasty, mentoplasty, turbinate surgery
- o Salivary gland and duct surgery, including plastic repair of salivary complex
- O Skin grafting procedures, full thickness or split thickness

- o Bachelor of medicine and surgery (MBBS)
- o Current registration to Rwanda Medical and Dental Council
- At least 2 years' experience working in ENT department with adequate mentorship and training in the subject matter being applied for

#### Required documentation and experience

# **New applicants**

- o Required trainings:
- o Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.

Name:	Name:
Email: :	Email:
Phone :	Phone:

#### Reappointment applicants

o Documentation for 5 randomly audited procedures performed independently by the applicant,

0	Provide contact information for 1 prac	titioner whom the committee may contact to provide an
	evaluation of your clinical competency	
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### N. Radiology privileges for medical doctors (general practitioners)

## Privilege

Perform general radiology to diagnose and treat diseases of patients of all ages. The core privileges in this specialty include the procedures on the attached procedure list and such other procedures that are extensions of the same techniques and skills.

#### Core skills

- o Bone densitometry
- Computed tomography of the head, neck, chest, abdomen, pelvis and extremities including CT angiography of the head, neck, spine, abdomen, pelvis and extremities
- Diagnostic nuclear medicine of the head, neck, spine, chest including the heart, abdomen, and pelvis, extremity and their associated vasculatures, and associated procedures.
- Image guided procedures with guidance by but not limited to MRI, Ultrasound, CT or fluoroscopy.
   Imaging guided procedures include but are not limited to lumbar puncture, myelogram. epidural spinal injection, joint injection,
- o arthrography, soft tissue biopsy, chest tube placement, drain placement, fine needle aspiration, hysterosonography, hysterosalpingography.
- o Magnetic resonance imaging (MRI) and MR angiography (MRA) of the head, neck, spine, chest, abdomen, pelvis, extremities, and major joints-shoulder, knee, ankle, etc.
- Interpretation of plain films, intravenous or retrograde pyelography, fluoroscopic procedures including barium, chest/abdomen, pelvis/gastrointestinal and genitourinary diagnostic, and therapeutic procedures
- o Ultrasound of the head, neck, chest,

#### Basic education and minimal formal training

- 1. Bachelor of medicine and surgery (MBBS)
- 2. Current registration to Rwanda Medical and Dental Council
- 3. At least 2 years' experience working in Radiology department with adequate mentorship and training in the subject matter being applied for

#### Required documentation and experience

New applicants		
0	Required trainings:	
0	Provide contact information for 2 practitioners whom the committee may contact to provide an evaluation of your clinical competency.	
Name <u>:.</u>		
Email:	: Email :	
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0	Provide contact information for 1 practitioner whom the committee may contact to provide an evaluation of your clinical competency.	
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