

Medical Liability Mutual Insurance Company

SUPPLEMENTAL APPLICATION FOR BARIATRIC SURGERY

Applicant's Name: _____

1. Please list the type and number of Weight Loss Surgery (WLS) procedures you have performed in past 2 years

| Procedure | Yes | No | Number |
|---|-----|----|--------|
| Open Gastric Bypass Roux-en-y (RYGB) | | | |
| Open Gastric Bypass Long Limb Roux-en-y (>150 cm) | | | |
| Lap Gastric Bypass Roux-en-y (RYGB) | | | |
| Lap Gastric Bypass Long Limb Roux-en-y (>150 cm) | | | |
| Biliopancreatic Bypass | | | |
| Biliopancreatic Bypass with Duodenal Switch | | | |
| Laparoscopic Adjustable Gastric Banding (LAGB) | | | |
| Vertical Banded Gastroplasty | | | |
| Others not listed above: | | | |
| | | | |
| | | | |

2. Please list the hospitals at which you have WLS privileges or where you intend to request privileges and perform WLS:

3. Please state the names of the bariatric surgeons who cover for you and their qualifications:

Your experience, qualifications and privileges:

| | Yes | No | Number (if applicable) |
|--|-----|----|------------------------|
| I am Board certified by the American Board of Surgery or Board eligible (provide appropriate letter) | | | |
| I have full credentials to perform GI and biliary surgery | | | |
| I am working within an integrated program for morbidly obese patients that includes ancillary staff, as well as prevention, monitoring and management of complications | | | |
| A follow-up 5-year patient care program is in place for all of my patients | | | |
| My current WLS privileges include: | | | |
| ▪ Provisional open privileges | | | |
| ▪ Provisional laparoscopic privileges | | | |
| ▪ Full open privileges | | | |

Medical Liability Mutual Insurance Company

| | Yes | No | Number (if applicable) |
|---|-----|----|------------------------|
| <ul style="list-style-type: none"> ▪ Full laparoscopic privileges | | | |
| <ul style="list-style-type: none"> ▪ No WLS privileges at this time | | | |
| I have successfully completed a fellowship or preceptorship in an established Weight Loss Surgery program | | | |
| During my fellowship or preceptorship, I performed at least 24 procedures | | | |
| I have completed at least 10 open WLS procedures while proctored by a surgeon with full privileges for open WLS | | | |
| I have completed at least 25 laparoscopic procedures while proctored by a surgeon with full privileges for laparoscopic WLS | | | |
| A committee consisting of Chief of Surgery, an experienced (>100) WLS, members of QA & credentialing committees has reviewed 15 of my independently performed WLS procedures, and found (please answer as to each): | | | |
| <ul style="list-style-type: none"> ▪ Substantial deviations with actual or potential threats to patient safety | | | |
| <ul style="list-style-type: none"> ▪ Substantial variations with no threats to patient safety | | | |
| <ul style="list-style-type: none"> ▪ No substantial deviations | | | |
| Number of primary or revisional procedures I performed in the past 2 years | | | |
| Number of CME in WLS earned in past 2 years | | | |

4. Questions about the hospitals in which you perform or intend to perform WLS:

| | Yes | No |
|---|-----|----|
| The hospital maintains full JCAHO accreditation. | | |
| The hospital employs a Bariatric Surgery Program Coordinator. | | |
| The hospital provides or sponsors educational programs for surgical candidates. | | |
| The hospital has availability 24/7/365 of: | | |
| 1. Anesthesiologist with experience with morbidly obese patients | | |
| 2. Critical care specialist | | |
| 3. Bariatric surgeon (primary and backup) | | |
| 4. Interventional radiologist | | |
| 5. Appropriate consultants in | | |
| o Cardiology | | |
| o Infectious disease | | |
| o General surgery | | |
| o Pulmonology | | |
| o Psychiatry | | |
| o Gastroenterology | | |
| The hospital has specialized equipment designed to manage the morbidly obese patient. | | |
| The hospital maintains a clinical outcomes registry that tracks procedures, complications, morbidity and mortality. | | |
| The hospital is equipped to manage WLS patients who return to the Emergency Room following surgery with a complication. | | |