



<b>Policy Name:</b> Core and advanced privileges for different physician`s specialties
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## 1. Introduction

The Qatar Council for Healthcare Practitioners strives to provide high standards to maintain the healthcare quality and patient safety in the State of Qatar. In the Registration Department's pursuit to unify and sustain a standardized practice in the healthcare sector of the State of Qatar, this policy has been prepared to guide all physicians in the State of Qatar regarding the General core competencies , core competencies , core privileges and advanced privileges for each speciality.

## 2. Definitions :

**2.1. Scope of Practice:** The procedures, actions, and processes that a healthcare practitioner is permitted to undertake in keeping with the terms of their professional license. The scope of practice is limited to that which the law allows for specific education and experience, and specific demonstrated competency.

### 2.2. Core Competencies

The basic knowledge and the fundamental set of attitudes and skills that are needed to perform in physician's role as a health care professional.

### 2.3. Core (Basic) privileges:

The clinical activities or procedures within a specialty that any appropriately trained, actively practicing physician with good references would be competent to perform. Which are permitted by virtue of possessing a defined set of credentials.

### 2.4. Advanced privileges:

The procedures that need special skills, experiences or courses in addition to log book to be fulfilled before permitting the specialist/Consultant physician to perform subject for QCHP approval.

### 2.5. Associate Specialist:

A physician who has a post-graduate degree which is not from the QCHP approved specialty qualifications list and he/ she is only practicing in the same specialty of his/ her post-graduate degree.

(Or)

A physician who has a post-graduate degree which is included in the QCHP approved specialty qualifications list; however he/ she did not complete the required years of work experience as per the category of his/her post-graduate certificate.

(Or)

A physician who completed structured supervised training programs of minimum three years and is eligible to sit for the certifying exam.

### 2.6. Specialist/Consultant:

A physician who has a post-graduate degree which is included in the QCHP approved specialty qualifications list and he/ she completed the required years of work experience as per the category of his/her post-graduate certificate. (Refer to circular number (6/2017))

## 3. Policy Statement

**3.1.** All clinical privileging is undertaken from the point of view of patient safety and ensuring that Practitioners have the necessary qualifications to allow them to safely provide the services and procedures for which they will be privileged.



- 3.2. Any physician once he/she gets his/her Temporary or permanent license, he/she can practice as per the scope within the General core competencies.
- 3.3. Associate specialist once he/she gets his/her Temporary or permanent license; he/she can practice as per the scope within the core competencies specific to this scope (either medical or surgical as categorized below) and can apply for the core privileges.
- 3.4. Core privileges requests for Associate specialists will be assessed through specialized expert panel.
- 3.5. Specialist/consultant physician in different specialties once he/she gets his/her Temporary or permanent license, he/she can practice as per the scope within the core competencies and core privileges specific to this scope. (without expert panel)
- 3.6. Specialist/consultant physicians who request to expand their privileges beyond the allowed core privileges can apply for the advanced privileges.
- 3.7. All advanced privileges requests will be assessed through a specialized expert panel.
- 3.8. Lists of Privileges are attached to this policy

#### 4. Procedures/Guidelines

- 4.1. Associate specialist once he/she gets his/her Temporary or permanent license will be allowed to perform the general core competencies in addition to the core competencies specific to his/her scope.
- 4.2. Associate specialist can apply for independent core privileges request after fulfilling all the requirements as per the QCHP guidelines.
- 4.3. Associate specialist can work as assistant to a surgeon who is licensed and have surgical privileges as per the QCHP policies.
- 4.4. Specialist/consultant physician once he/she gets the Temporary or permanent license, he/she can practice as per the scope within the core competencies and core privileges specific to this scope.
- 4.5. Specialist/consultant physician can apply for advanced privileges request after fulfilling all the requirements as per the QCHP guidelines.
- 4.6. Submit a manual/ online Surgical/ Medical Privileges requests along with all the required documents. (The required documents are available on the surgical privileges guidelines through the QCHP official website)
- 4.7. The applications will be referred to specialized expert panel for assessment. A letter will be issued to the practitioner numerating all the privileges granted by the panel.



- 4.8.** All documents presented in languages other than Arabic or English must be translated and attached to a copy of the original document.
- 4.9.** Any incomplete request will not be processed, and will be sent back with a note for all the missing documents.
- 4.10.** Applying for additional Surgical/ Medical Privileges will only be considered after a **period of 12 month** and only if the applicant submits new documents as new log book or courses or training that had not been submitted or evaluated through the committee before.
- 4.11.** The PLC has the right to cancel any of the competencies, core or advanced privileges if it has been confirmed the unsafe practice of the physician for any of the granted procedures.
- 4.12.** If the healthcare practitioner is not satisfied with the result of the requested privileges, **he/ she can apply for appeal** within one month, with all the required documents for Surgical/ Medical Privileges Applications, in addition to, a justification letter and Copy of the result issued by the registration department /QCHP for the pervious privilege/s request.
- 4.13.** The original attested or verified -by dataflow company- surgical log book must be submitted to the registration department prior to the issuance of the final letter numerating all the privileges approved by the expert panel.
- 4.14.** All core and advanced privileges requirements are applicable on visiting physicians.
- 4.15.** Core/ Advanced Privileges applications can be submitted after completion of the evaluation requests during the licensing stage, however, the final letter numerating all the privileges approved by the panel will be only issued after getting the permanent license.
- 4.16.** It is prohibited to communicate directly with the expert panel for follow up purposes of advanced/ core privileges requests.



**4.17.** Anyone who violates the above mentioned, will be held accountable and be subject to disciplinary actions, such as rejection of the respective request with an official warning sent to the concerned facility "refer to circular 2/2014".

**4.18.** Follow-up on the request through the focal point (After a minimum period of 30 working days).

## 5. Notes

**5.1.** All the online privileges forms will be modified as per the new Core/Advanced policy.

**5.2.** Consultant/ specialist (Diagnostic Radiology) - once he/she gets his/her permanent/provisional licenses – can perform all the procedures related to diagnostic radiology as X-ray, ultrasound, MRI, CT, Etc. In case he/she is willing to perform interventional radiology procedures, he/she can submit manual/online surgical privileges application along with all the required documents. (Available on the surgical privileges guidelines through the QCHP official website)

**5.3.** Consultant/ specialist (Anesthesiology) - once he/she gets his/her permanent/provisional licenses – can perform all types of anesthesia (local, regional, spinal, epidural and general anesthesia). In case he/she is willing to perform pain management procedures, he/she can submit manual/online surgical/ medical privileges application along with all the required documents. (Available on the surgical privileges guidelines through the QCHP official website).

**5.4.** Regarding the validity of the Surgical Privileges, the FTP department is currently developing the revalidation policy for healthcare practitioners that will ensure that any healthcare practitioner holding surgical privileges is competent and safe to practice.

## 6. Charts

N/A

## 7. References

<https://stanfordhealthcare.org/health-care-professionals/medical-staff/credentialing-and->



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<https://www.ecfm.org/echo/acgme-core-competencies.html>

#### 8. Related Policies

Expert Panel Guidelines

#### 9. Attachments

N/A



## List of privileges as per Category:

General core competencies for all physicians are as follows:-

- ✓ Admitting privileges.
- ✓ Admission history & physical examination.
- ✓ Ordering & Interpretation of laboratory tests and ECG.
- ✓ Ordering medications and discharge prescription.
- ✓ Ordering Radiological and Imaging Investigations.
- ✓ Interpretation of X rays
- ✓ Cannulation of Peripheral vein for blood sampling & IV medication.
- ✓ Nasogastric tube insertion.
- ✓ Prescribing oxygen therapy.
- ✓ Insertion of urinary catheter.

Core competencies will be categorized to surgical or medical as per the scope of practice; as follows:-

a) For **Medical** scopes of practice:-

- ✓ Abdominal tapping.
- ✓ Arterial puncture for blood sampling.
- ✓ Central venous line placement
- ✓ Arterial line placement
- ✓ Providing Medical acute care management
- ✓ Basic and advanced life support.
- ✓ Needle Thoracocentesis.
- ✓ Management of non-traumatic pneumothorax (closed).
- ✓ Anterior nasal packing.
- ✓ Oropharyngeal airway insertion.

b) For **Surgical** scopes of practice:-

- ✓ Abdominal tapping.
- ✓ Arterial puncture for blood sampling.
- ✓ Central venous line placement
- ✓ Arterial line placement
- ✓ Providing Surgical acute care management
- ✓ Basic and advanced life support.
- ✓ Local anesthetic techniques.
- ✓ Repairing simple lacerations.
- ✓ Simple incision and drainage.
- ✓ Orthopedic and fracture splintage.
- ✓ Spinal Protection.



- ✓ Needle Thoracocentesis.
- ✓ Management of non-traumatic pneumothorax (closed).
- ✓ Anterior nasal packing.
- ✓ Remove non-penetrating foreign body from the eye, nose, or ear.
- ✓ Manage uncomplicated minor closed fractures and uncomplicated dislocations.
- ✓ Wound dressing.
- ✓ Ear Washout.

Core Privileges in “Cardiology” will be as following:-

Core privileges in Cardiology	
1. In-house consultation	5. Treadmill Exercise stress testing
2. Interpretation and reporting of EKG/Holter to include rhythm disorders	6. Perform/Interpret transthoracic echocardiogram with Doppler
3. Interpretation of X-rays	7. Elective cardioversion
4. Emergency needle Tracheostomy	8. Exercise stress echocardiography

Core Privileges in “Vascular Surgery” will be as following:-

Core privileges in Vascular Surgery	
1. Amputations, upper extremity	11. Vein ligation and stripping
2. Amputations, lower extremity	12. Imaging:
3. Brachial, femoral embolectomy or thrombectomy	a. Duplex ultrasonography
4. Central venous access catheters and ports	b. Contrast angiography
5. Endarterectomy other than carotid	13. Thrombolysis
6. Hemodialysis access procedures	a. Percutaneous catheter thrombolysis
7. Intraoperative angiography	b. Intraoperative thrombolysis
8. Resection or repair of peripheral artery or vein with anastomosis or replacement	14. Endoscopic vascular surgery
9. Revascularization of amputated parts	a. Saphenous vein harvesting
10. Sclerotherapy	15. Skin grafting at the site of fasciotomy and amputation stump





Core Privileges in “Dermatology” will be as following:-

Core privileges in Dermatology	
1. History taking, local skin examination and description of skin lesions with subsequent topical applications description.	13. Laser therapy
2. Dermojet	14. Chemical peeling
3. Punch Biopsy	15. DTM culture (fungus)
4. Intralesional	16. KOH scrapings
5. Curettage	17. Methylin blue
6. Comedone extraction	18. Botux injection
7. Liquid nitrogen application (cryocautery)	19. Patch test
8. Skin Paring (warts/superficial keratosis/callosity)	20. Wood's light
9. Electrocautery	21. Crystal peel( Microdermabrasion)
10. Local Chemical cautery	22. Dermal fillers
11. Removal of sutures	23. PRP
12. Minor skin surgery (with local anesthesia)	

Core Privileges in “Gastroenterology” will be as following:-

Core privileges in Gastroenterology	
1. Diagnostic Oesophago–Gastro–Duodenoscopy and Biopsies (ODG)	2. Diagnostic Ileo colonscopy and Biopsies

Core Privileges in “General Surgery” will be as following:-

Core Privileges in General Surgery	
<b>Skin &amp; subcutaneous Surgery</b>	<b>Small Bowel</b>
1. Excision of Sebaceous cyst	1.Open & Laparoscopic Appendectomy
2. Excision of Lipoma	2.Laparoscopic Mickle`s Diverticulectomy
3. Excision of Ingrown nail	3. Small Bowel Resection & Anastomosis
4. Excision of skin nodule / wart	4. Laparotomy and Exploration
5. Incision and drainage of abscess	5.Laparoscopic Exploration
6. Aspiration of skin swelling ( FNA )	<b>Colorectal Surgery</b>
7. Excision of Pilonidal Sinus	6. Right hemicolectomy
8. Ray`s mid- metatarsal Amputation of toe	7. Hartmann`s Procedure
9. Debridement of Diabetic Foot	8. Haemorrhoidectomy
10. Cut wound Suturing	9. Fistulectomy / Fistulotomy
11. Foreign body removal	10. Fissurectomy / Sphincterotomy
<b>Neck Surgery</b>	<b>Breast</b>
1.Excision of Lymph node	1. FNA / Core Biopsy
2.Thyroid FNA	2. Lumpectomy for benign conditions



<b>Gastroesophageal Surgery</b>	<b>Hernia</b>
1. Partial Gastrectomy for Benign lesions	1. Open repair of inguinal Hernia
2. Gastrojejunostomy	2. Open repair of femoral Hernia
3. Laparoscopic closure of Perforated duodenal Ulcer	3. Open repair of Epigastric Hernia
4. Feeding Jujenostomy	4. Open repair of Paraumbilical Hernia
<b>Spleen &amp; Lymph Nodes</b>	5. Open repair of Lumbar Hernia
1. Splenectomy for trauma	6. Open repair of Incisional Hernia
2. Laparoscopic Peritoneal biopsy	<b>Additional</b>
<b>Hepatobiliary</b>	Stripping of Varicose Veins and perforators ligation
Laparoscopic Cholecystectomy	

Core Privileges in “**Neurosurgery**” will be as following:-

<b>Core Privileges in Neurosurgery</b>	
<b>Cranial Procedures</b>	<b>Other Procedures</b>
1. Surgery for cranial trauma	1. Intra Cranial Pressure insertion
2. Surgery for convexity/superficial brain tumors	2. Lumbar Drain
3. Surgery for posterior fossa brain tumors	3. External Ventricular Drain
4. Steriotactic guided surgery for brain lesions including biopsy and microcraniotomy	4. Lumbar puncture, cisternal puncture, ventricular tap, subdural tap
<b>Spinal Procedures / Surgeries</b>	5. Shunts: ventriculoperitoneal, ventriculoatrial, ventriculopleural, subdural peritoneal, lumbar subarachnoid/peritoneal (or other cavity)
1. Epidural steroid injections for pain	<b>Surgery for Congenital Anomalies</b>
2. Insertion of subarachnoid or epidural catheter with reservoir or pump for drug infusion	1. Surgery for Chairi malformation
3. Lumbar subarachnoid-peritoneal shunt	2. Management of congenital anomalies, such as encephalocele, meningocele, myelomeningocele
4. Radiofrequency ablation	<b>Endovascular Procedures</b>
5. Spinal cord surgery for decompression of spinal cord or spinal canal, for intramedullary lesion, intradural extramedullary lesion, rhizotomy, cordotomy, dorsal root entry zone lesion, tethered spinal cord or other congenital anomalies (diastematomyelia)	1. Performing and interpreting diagnostic imaging studies related to the vasculature of the Central Nervous System, head, neck, and spine.
6. Laminectomies, laminotomies and fixation	2. Participating in short-term and long-term



and reconstructive procedures of spine and its contents including instrumentation	post procedure follow-up care, including neuro-intensive care
7. Surgery for intervertebral disc disease	<b>Additional Privileges:</b>
8. Percutaneous vertebroplasty Balloon kyphoplasty	1. craniostomy for chronic subdural heamatoma
<b>Peripheral Nerve Procedures</b>	2. craniotomy for spontaneous intracranial hemorrhage
1. Peripheral nerve procedures, including decompressive procedures and reconstructive procedures on the peripheral nerves	3. Wound debridment, surgical treatment of post rupture CSF leak (Pseudomeningocele)
2. Nerve blocks	4. Surgery for skull lesions ( dermoid, osteoma, eosinophilic, granuloma)
3. Nerve biopsy	5. Trans-sphenoidal surgery for pituitary adenoma
4. Muscle biopsy	6. Injection for carpal tunnel syndrome
	7. All types of pain Management by injection ( cervical, dorsal, lumbar)

Core Privileges in “Obstetrics & Gynecology” will be as following:-

Core Privileges in Obstetrics & Gynecology	
1. Abdominal obstetric ultrasound examination (Level 1)	7. Gynaecological Pelvic examination
2. Neonatal resuscitation	8. Taking of cervical smear and vaginal/cervical/urethral swabs
3. Admitting patients under the consultant/ attending's name	9. Cryocautery
4. Endometrial sampling	10. Insertion and removal of vaginal pessaries
5. Removal of Cervical polyp	11. Hysterosalpinogram
6. Insertion/removal of IUCD	12. Interpretation of CTG's
	13. Obstetric abdominal & Pelvic Examination



Core Privileges in “Ophthalmology” will be as following:-

Core Privileges in Ophthalmology	
1. Slit lamp eye examination	5. Removal of conjunctival FB
2. IOP measurement	6. Removal of corneal FB
3. Fundus dilatation and examination	7. Epilation of maldirected eyelashes
4. Refraction	

Core Privileges in “Otolaryngology” will be as following:-

Core Privileges in Otolaryngology	
Otology procedures	Larynx, Head and neck Surgeries
1. Examination of Ear	1. Examination of the larynx
a. LA	a) LA
b. GA	b) GA
2. Myringotomy with or without tubes	2. I&D Quinsy
3. Removal of foreign body (aural)	3. Tonsillectomy
4. Aural packing	4. Adenoidectomy
5. Ear syringing	5. Tongue tie release
6. Myringo/Tympanoplasty (Type I)	6. PNS Examination/Biopsy
Rhinology Procedures	7. Oropharynx examination/biopsy
1. Examination of the nose	8. Fibro optic endoscopy
a. LA	9. Rigid endoscopy (all)
b. GA	10. Tracheostomy
2. Nasal cautery	Audiology Procedures
3. Submucous diathermy (SMD) of turbinate	1. Full audiological diagnostic procedure including: PT audiometric test battery, Tympanometry test battery, Otoacoustic emission testing, speech audiometry, and Behavioral hearing testing including VRA.
4. Nasal endoscopy	2. Particle reposition maneuver for BPPV
5. Antrostomy inferior (non-endoscopic)	3. Vestibular rehabilitation exercise
6. Turbinectomy	4. Pure tone audiogram
7. Antral wash	5. Speech audiometry



8. Nasal fracture reduction (anterior and posterior)	6. Tympanometry
9. Removal of foreign body	7. Acoustic reflex
10. Nasal packing	8. Otoacoustic emission
11. Septoplasty (No revision septoplasty)	9. Behavioural test
12. Evacuation of septal hematoma	
13. Sinus endoscopy (Rigid + fibro optic)	

Core Privileges in “**Orthopedic Surgery**” will be as following:-

<b>Core Privileges in Orthopedic Surgery</b>	
<b>Emergency Surgery</b>	<b>Shoulder surgery</b>
1. Application of Traction Pins	1. Manipulation of frozen shoulders
2. Closed manipulation of fractures / dislocations/ splints / casts	2. Subacromial and Intraarticular injections
3. Closed manipulation and Percutaneous wire /screw fixation	3. Scapular bursa injection: excision – open
4. Open reduction and tension wiring	4. Subacromial decompression: open
5. Open reduction with intramedullary device	5. A/C joint resection: acromioplasty open
6. Closed reduction with intramedullary device	6. ORIF of fractures of humeral head/humeral shaft
7. Open reduction and application of external fixation	<b>Wrist and neck surgery</b>
8. Closed reduction and Application of external fixation	1. Tendon Repair Basic Techniques
9. Operative treatment of intra articular fractures	2. Nerve Entrapment surgery (Medial Nerve, Ulnar nerve)
10. Operative treatment of Soft Tissue Injuries	3. Surgical treatment of Tenosynovitis
11. Tendon / ligament repair	4. Surgical treatment of special hand infections (Palmer spaces, web spaces ... etc)
12. Fasciotomy	5. Surgical treatment of tendon sheath infection
13. Wound debridement	6. Trigger finger, Mallet Finger, Dequarvian (stenosing tenosynovitis)
14. Operative treatment of Acute bone, joint & Soft tissue infection	<b>Pelvis and Hip Surgery</b>
16. Bone grafting	Closed reduction with clamp / Fix Pelvic Ring disruptions
17. Hemi / Bipolar Arthroplasty of Hip Fractures	<b>Knee Surgery</b>
18. Operative fixation using DHS / DCS / Cannulated screws	Aspiration of Knee
<b>Pediatric Surgery Procedures</b>	<b>Foot and Ankle Surgery</b>



<b>Bone tumors</b>	1. Removal, excision of soft tissue swelling and Mortin's neuroma
1. Excision of osteochondroma	2. Hallux Valgues surgery (soft tissue procedures, Fusion, Excision Arthroplasty, osteomies proximal and distal)
2. Excision of Osteoma	3. Ingrown toenail operation
<b>Amputations</b>	<b>Lower</b>
<b>Upper Extremity</b>	1. Above Knee Amputation
1. Transarticular Amputation of Elbow	2. Below Knee Amputation
2. Amputation of Elbow	3. Amputations around Ankle
3. Amputation of Wrist	4. Amputations through Tarsus
4. Amputation of Hand	5. Amputations through Metacarpals / Metatarsals
5. Amputation of Digits	6. Ray Amputations
	7. Amputations/ Terminalisations through Phalanges

### Core privileges in Pulmonology

1. Diagnostic thoracentesis (diagnostic pleural tapping)	3. Application and management of non-invasive ventilation (e.g., CPAP and Bi-PAP)
2. Pleural catheter insertion	

:-

Core Privileges in “**Pediatric Surgery**” will be as following:-

Core Privileges in Pediatric Surgery	
<b>General Procedures</b>	4. Inguinal hernia repair for a child under 2 years
1. I & D of body abscesses excluding perianal	5. Surgery for congenital hydrocele
2. Lymph node biopsy excluding neck region	6. Surgery for undescended testis (palpable)
3. Lymph nodes biopsy neck region	7. Pyloromyotomy
4. Excision biopsy of subcutaneous lumps	8. Appendectomy
5. Circumcision	9. Surgery for intestinal obstruction past the neonatal period
6. Meatotomy	10. <b>Umbilical hernia repair</b>
<b>Abdominal Surgery</b>	11. Rectal suction biopsy
1. Umbilical hernia repair	12. Proctoscopy & Sigmoidoscopy



2. Surgery for omphalomesentric remnants	13. Rectal polypectomy
3. Inguinal hernia repair for a child over 2 years	

Core Privileges in “Plastic Surgery” will be as following:-

Core Privileges in plastic surgery	
1- Liposuction-Abdomen	6- Facial Trauma: Repair of facial lacerations
2- Liposuction -Arms	7- Facial Trauma: Repair of ear lacerations
3- Dermabrasion	8- Botox and filler (after providing training courses).
4- Skin tumors excision and reconstruction – Benign.	9- Thread lift.
5- Skin tumors excision and reconstruction – Malignant only simple	10- Hair transplant (after providing training courses).

Core Privileges in “Urology” will be as following:-

Core Privileges in Urology	
<b>Kidney</b>	3- Orchidopexy
1- Simple nephrectomy	4- Radical orchidectomy
2- Surgery for renal cysts and abscesses	5- Orchidectomy
3- Pyeloplasty	6- Epididymectomy
4- Management of renal injuries	7- Excision of spermatocele
5- Nephrostomy & renal biopsy (Open)	8- Excision of epididymal cyst
6- Nephropexy	9- Vasectomy
<b>Ureter</b>	10- Surgery for scrotal skin infection
1- Ureterolithotomy	<b>Endoscopic Procedures</b>
2- Excision of ureteric segment and end to end anastomosis	1- Urethroscopy
3- Ureteric reimplantation	2- Urethral dilatation
4- Ureterocalycostomy	3- Optical urethrotomy



5- Extended psoas hitch	4- Cystoscopy
<b>Bladder</b>	5- Bladder biopsy
1- Repair of traumatic bladder injuries	6- TUR-BT
2- Diverticulectomy	7- TUR-P
<b>Prostate</b>	8- Ureterorenoscopy
1- Simple retropubic prostatectomy	9- Ureterotomy
2- Transvesical prostatectomy	10- Endopyelotomy
<b>Penis</b>	11- Percutaneous nephrolithotomy
1- Circumcision	12- Use of laser in endoscopic procedures
2- Meatotomy	<b>Special Urologic Procedures</b>
3- Meatoplasty	1- Percutaneous suprapubic catheter insertion
<b>Testicle and scrotum</b>	2- ESWL
1- Testicular biopsy	3- Insertion of nephrostomy tubes
2- Operations for hydrocele	4- Ultrasound of the urinary tract