CLEVELAND AMBULATORY SURGERY CENTER **DELINEATION OF CLINICAL PRIVILEGES Dermatology**

Applicant's Signature	Date

The granting, reviewing and changing of clinical privileges will be in accordance with the Medical Staff Bylaws. Assignment of such clinical privileges must be based upon education, clinical training, demonstrated skills and capacity to manage procedurally related complications.

Indicate procedures for which you do and do not wish to be credentialed. Return this form with your Application.

Procedures	Credentiali	Credentialing Request		Recommendation by QM Committee	
	Yes	No	Yes	No	
Cyst excision					
Dermabrasion					
Intravenous Conscious Sedation					
Basal cell excision					
Tattoo excision					
Scar revision					
Nevus excision					
Lesion excision					
Mass excision					
Incision and drainage					
Skin graft					

For Administrative Purposes Only			
Clinical privileges recommendations approved by Governing Body.			
	Governing Body Chairperson	Date	