

Applicant's Name

Position

Home Site

CREDENTIALING AND DEFINING SCOPE OF CLINICAL PRACTICE

MONASH HEART (Cardiology & Cardiovascular Medicine) – Adult & Paediatrics

PLEASE Monash Health acknowledges that occasions may arise where the emergency needs of a patient require a procedure to be undertaken which falls outside the **NOTE:** scope of clinical practice authorised for the practitioner concerned. Monash Health will support members of the Senior Medical Staff who are required to so act

Core Services:

Please indicate (with a ✓) those services you wish to undertake on a site by site basis	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Inpatient Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervision of trainees and/or students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Core Procedures (Adult)

Please indicate (with a ✓) those procedures you wish to undertake on a site by site basis	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Aortic balloon valvuloplasty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Arrhythmia device implantation	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Arterial line placement	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Cardiac catheterisation	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Cardioversion, electrical, elective	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Catheter electrode ablation of arrhythmias	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Non-invasive haemodynamic monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Central line placement	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Coronary angiography	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Coronary flow velocimetry	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Coronary rotablation	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
ECG interpretation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>

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<i>Core Procedures (Adult)</i>	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Endomyocardial biopsy	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Exercise right heart catheterisation	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Holter monitor interpretation	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
ICD implantation, bi-ventricular	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Infusion and management of Gb lib/IIIa agents	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Insertion and management of pulmonary artery catheters	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Intra-aortic balloon pump insertion and management	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Intravenous thrombolytic therapy	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Intubation and ACLS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Insertion of cardioverter defibrillators (AICD)	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Intravascular/ intra-coronary ultrasound imaging	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Percutaneous coronary intervention (Angioplasty)	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Percutaneous mitral valvuloplasty	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Percutaneous pulmonary valvuloplasty	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Percutaneous aortic valvuloplasty	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Percutaneous transluminal septal myocardial ablation	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Pericardiocentesis	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Peripheral angiography, including visceral, renal, dialysis grafts and venous angiography	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Permanent pacemaker insertion, single / dual chamber	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permanent pacemaker insertion - biventricular	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress echocardiography (exercise & pharmacological stress)	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stress testing (exercise & pharmacologic)	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Swan Ganz catheter insertion	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Temporary pacemaker insertion	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Tilt table	NA	NA	<input type="checkbox"/>	NA	NA	NA	NA
Tranoesophageal echocardiography	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>
Transthoracic echocardiography	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>

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Core Procedures (Adult)	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Transcatheter closure of atrial septal defects	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transcatheter closure of patent ductus arteriosus	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transcatheter closure of ventricular septal defect	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transcatheter closure of patent foramen ovale	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>

Additional Procedures (Adult):							
Please indicate any additional or specific sub-specialty procedures (i.e. not included in the 'core') you wish to undertake on a site by site basis.	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Core Procedures (Paediatric):							
Please indicate (with a ✓) those procedures you wish to undertake on a site by site basis	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Arrhythmia device implantation	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Cardiac catheterisation	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Catheter electrode ablation of arrhythmias	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
ECG interpretation	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
Holter monitor interpretation	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
ICD implantation, bi-ventricular	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Insertion and management of pulmonary artery catheters	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Insertion of cardioverter defibrillators (AICD)	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Intubation and ACLS	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Permanent pacemaker insertion, single / dual chamber	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Permanent pacemaker insertion - biventricular	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Stress testing (exercise & pharmacologic)	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Temporary pacemaker insertion	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>

Applicant's Name	Position			Home Site			
<i>Core Procedures (Paediatric)</i>	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Transcatheter closure of atrial septal defects	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transcatheter closure of patent ductus arteriosus	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transcatheter closure of patent foramen ovale	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transcatheter closure of ventricular septal defect	<input type="checkbox"/>	NA	NA	NA	NA	NA	<input type="checkbox"/>
Transthoracic echocardiography	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	<input type="checkbox"/>

<i>Additional Procedures (Paediatric)</i>							
Please indicate any additional or specific sub-specialty procedures (i.e. not included in the 'core') you wish to undertake on a site by site basis.	MMC Clayton	MMC Moorabbin	Dandenong Hospital	Casey Hospital	Cranbourne Integrated Care Centre	Kingston Centre	Jessie McPherson Private
Arterial line placement	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	NA
Cardioversion, electrical, elective	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Non-invasive haemodynamic monitoring	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Central line placement	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	NA
Coronary angiography	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Endomyocardial biopsy	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Exercise right heart catheterisation	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Intravenous thrombolytic therapy	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Percutaneous mitral, pulmonary and aortic valvuloplasty	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Pericardiocentesis	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Stress echocardiography (exercise & pharmacological stress)	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Transoesophageal echocardiography	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Balloon atrial septotomy	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Transcatheter occlusion of collateral vessels	<input type="checkbox"/>	NA	<input type="checkbox"/>	NA	NA	NA	NA
Angioplasty and stenting of great vessels	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Fetal echocardiography	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA
Transthoracic echocardiography for adult congenital heart	<input type="checkbox"/>	NA	NA	NA	NA	NA	NA

Applicant's Name	Position				Home Site		
disease							
ECG of Adult congenital heart disease	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>
	<input type="checkbox"/>	NA	<input type="checkbox"/>	<input type="checkbox"/>	NA	NA	<input type="checkbox"/>

Sign-off

Clinician's Name:		Signature:		Date:	
Reviewed & Approved by Dept. Head:		Signature:		Date:	
Reviewed & Approved by PMD:		Signature:		Date:	
Reviewed & Approved by CMO:		Signature:		Date:	