

Title: Total Ankle Replacement

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Approver(s): Karyn Delgado, Teresa Onken	Date Approved with no Changes: 12/19/2018	Date Approved: 12/19/2018 06/15/2015
Location: Saint Joseph Regional Medical Center (SJRMC)		Department: Medical Staff Office

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POLICY:

1. Education: MD, DO or DPM
2. Training:
 - A. Successful completion of an accredited residency program in:
 - 1) ACGME, American Osteopathic Association (AOA) orthopedic surgery or
 - 2) Council on Podiatric Medical Education (CPME) two years or greater post-graduate podiatric residency and
 - a) American Board of Foot and Ankle Surgery
 - B. Residency must include training in Total Ankle Replacement, or
 - C. Fellowship in Foot and Ankle Surgery that includes training in Total Ankle Replacement, or
 - D. Successful completion of a manufacturer training course that includes didactic and skills lab

and

 - E. Documented performance of twelve (12) cases ever
 - F. Ankle Fracture is a complication of Total Ankle Arthroplasty so in order to qualify for Total Ankle Replacement privileges the physician must also have Ankle Fracture Open Repair privileges.
3. Current Competency:
 - A. Focused Professional Practice Evaluation and Ongoing Professional Practice Evaluation for Total Ankle Replacement will include a Total Ankle Replacement Review Committee, comprised of two members appointed by department vote plus the department chair, which will perform concurrent review.
 - B. The committee will prospectively and retrospectively review all cases performed at SJHS - Mishawaka to analyze indications, technique, and outcomes. The Committee will:
 - 1) Review appropriate indications
 - 2) Review surgical technique and outcomes
 - C. Committee may recommend based on technique, outcomes, or surgical indications possible denial or suspension of privileges in total ankle replacement to the Credentials Committee, in accordance with Medical Staff Peer Review Policy.
 - D. Committee will routinely review operative performance at reappointment or at any time if notified of possible concerns, according to standard medical staff policy.
 - E. Committee will recommend standards for indications, technique and equipment usage to the orthopedic department for approval.
 - F. Five (5) cases every two years at reappointment

References/Standards:

- Policy Origin Date: March 2015
- Expiration Date: 12/31/2021

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- Review Date: December 2015, December 2018
- Revised Date: March 2016, September 2016
- Effective Date: June 2015
- Reviewed/Recommended By: Medical Executive Committee
- Policy 207