



Credentialing Requirements for Performing Gynaecological Endoscopic Procedures Procedure

1. Purpose

The purpose of this procedure is to assist WA Country Health Service (WACHS) in ensuring that gynaecologists who provide gynaecological endoscopic, including laparoscopy procedures have the appropriate credentialing requirements.

2. Procedure

2.1 Obstetrics and Gynaecology Qualifications

In accordance with the [Guidelines for performing gynaecological endoscopic procedures](#) set out by the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG), Obstetric and Gynaecology (O&G) specialists wishing to perform endoscopic procedures are subject to specific training and practice standards to ensure competency in gynaecological skillset.

Credentialing of such endoscopic procedures should be undertaken by the appropriate credentialing committee with consideration of the RANZCOG Guidelines before performing gynaecological scope of clinical practice.

It is important to note, some endoscopic surgical competencies do not fall within the framework described in this document and credentialing in endoscopic surgery must proceed on an individual basis. Where applicable, O&G specialists can continue performing standard O&G procedures, according to appropriate qualifications and skillset.

O&G specialists requesting specific credentialing for gynaecological endoscopic procedures for scope of practice levels 4-6 (refer to [section 2.2](#)) must complete a [Gynaecological Endoscopic Procedures Credentialing Summary form](#) (GEPC Summary form) at the time of submitting a credentialing/re-credentialing application. It is at the discretion of the WACHS Clinical Director; Obstetrics and Gynaecology, in conjunction with the Credentialing and Scope of Practice (CASOP) Committee to assess each gynaecological summary form in conjunction with the appropriate qualifications in order to approve the relevant scope of practice.

2.2 Levels of Endoscopic Scope of Clinical Practice

Procedures for endoscopic scope of practice have been classified by RANZCOG and the Australasian Endoscopy & Surgery Society (AGES) and are listed in levels, as follows:

Level 1 – 3 Scope of Practice

O&G specialists who've been awarded their Fellow of Royal Australian and New Zealand College of Obstetricians and Gynaecologists (FRANZCOG) qualification have sufficient appropriate training to perform scope of practice levels one (1), two (2) and three (3) as the minimum requirement. This is automatically included under the 'Standard' scope of practice for O&G specialists and does not require specific credentialing.

Endoscopic clinical procedures automatically included (but not limited to) under the 'Standard' scope of practice and are not required to complete the GEPC Summary form are:

- Level 1 – diagnostic endoscopic procedures
 - Level 1-A: diagnostic hysteroscopy and laparoscopy, including alternative entry techniques and port site placements
- Level 2 – simple operative endoscopic procedures
 - Level 2-A: hysteroscopic retrieval of an intrauterine device, laparoscopic tubal ligation, simple cyst aspiration, simple adhesiolysis and ablation of ASRM stage 1 endometriosis
 - Level 2-B: salpingotomy/salpingectomy for treatment of ectopic pregnancy
- Level 3 – operative endoscopic procedures
 - Level 3-A: hysteroscopic polyp resection including the base, laparoscopic ovarian cystectomy without complexity, excision of ASRM stage 2 endometriosis and oophorectomy (without complexity)
 - Level 3-B: laparoscopically-assisted vaginal hysterectomy (LAVH).

Level 4 Scope of Practice – Advanced Operative Endoscopic Procedures

Can be performed by O&G specialists who have completed the RANZCOG Hysteroscopic and Laparoscopic Surgery Advanced Training Module (ATM). Requires specific credentialing with completion of the GEPC Summary form. Level 4 procedures included, but not limited to are:

- salpingo-oophorectomy with complexity
- complicated adhesiolysis
- hysteroscopic submucosal fibroid (type 0-1)
- hysteroscopic manual endometrial ablation
- excision of ASRM stage 3 endometriosis
- laparoscopically assisted vaginal hysterectomy with complexity
- laparoscopic hysterectomy without complexity.

Level 5 Scope of Practice – Endoscopic Procedures of Advanced Complexity

Can be performed by O&G specialists who have completed an accredited advanced training program, such as the Australian Gynaecological Endoscopy & Surgery Society (AGES) Accredited Training Program or a similar formalised training program of no less than 24 months' duration. Requires specific credentialing with completion of the GEPC Summary form. Level 5 procedures included, but not limited to are:

- laparoscopic hysterectomy with complexity (such as endometriosis and fibroids)
- burch colposuspension
- laparoscopic myomectomy
- management of ASRM stage 4 endometriosis
- hysteroscopic myomectomy (type 2)
- hysteroscopic septoplasty.

Level 6 Scope of Practice – highest complexity and domain specific

Can be performed by O&G specialists who have completed a RANZCOG Subspecialist Training Program or another accredited advanced training program, such as the AGES Accredited Training Program. Requires specific credentialing in one or more domain with completion of the GEPC Summary form. Level 6 procedures included, but not limited to are:

- Level 6-B (benign gynaecological surgery)
 - Laparoscopic excisional surgery for ASRM stage 4 endometriosis necessitating bowel or urological resection, ureterolysis, removal of residual cervix, removal of residual ovaries with significant distortion of the anatomy and extensive adhesiolysis.
- Level 6-U (urogynaecological surgery)
 - Urogynaecological procedures (laparoscopic pelvic floor repair and sacrocolpopexy).
- Level 6-R (reproductive gynaecological surgery)
 - Laparoscopic tubal reanastomosis and management of congenital disorders.
- Level 6-O (gynaecological oncology surgery)
 - Laparoscopic oncological procedures such as laparoscopic pelvic/para-aortic lymph node dissection and radical hysterectomy.

2.3 Maintenance of Credentialing and Clinical Practice

This process is not designed to restrict scope of practice of any Fellow who is able to demonstrate training in a specific area of practice or procedure. O&G specialists are to be credentialed on an individual basis, in conjunction with their qualifications as well as demonstrated evidence of training in specific areas of practice, procedural skills and currency of practice.

The GEPC Summary form is to be reviewed by the Clinical Director; Obstetrics and Gynaecology (or delegated authority) within a one to five year credentialing cycle. An O&G specialist may not always require credentialing for all procedures and therefore may only require to be credentialed for specific procedures within one or more level/s.

Competency in the performance of endoscopic procedures requires not only an understanding of the surgical pathology, surgical technique and complications that may arise from such interventions but also specific analysis skills. As such, no minimum performance or training numbers can be specified. As for any surgical procedure, gynaecologists should not perform unsupervised endoscopic procedures until they have reached the appropriate scope of clinical practice.

2.4 Continuous Professional Development (CPD) and Upskilling

RANZCOG requires all medical practitioners enrolled into the college to meet annual CPD requirements per cycle; however, there are no minimum performance or training numbers required for endoscopic procedures. To meet annual requirements, CPD must be based on scope of practice which can be met through operating with peers, surgical performance software and other upskilling options.

O&G specialists who've yet to attend an AGES or ATM course and hold the required years of experience to perform endoscopic procedures can be grandfathered into a Scope of Practice level (refer to [section 2.2](#)), where appropriate. The GEPC Summary form should include years of experience and upskilling obtained to capture this cohort of medical practitioners.

2.5 Working Beyond Designated Scope of Practice

If a medical practitioner acquires skills beyond their current credentialing, they may seek to increase their scope of practice through the CASOP Committee. See section 4.6, Variations to Scope of Practice of the WACHS [Medical Credentialing and Compliance Requirements Guideline](#).

In an emergency situation where no other appropriately credentialed medical practitioner is available, a medical practitioner may be required to work beyond their credentialed scope of practice in order to preserve the health and life of a patient. Wherever possible, such actions should only proceed with consultative advice and with access to ongoing telephone or video-link support. Such actions and advice should be carefully documented, and the event reported to the Regional Director of Medical Services in a timely manner. See 9.4 Disaster and Emergency Scope of Clinical Practice of the WA Health [Credentialing and Defining Scope of Clinical Practice for Medical Practitioners Standard](#).

2.6 Compliance

This procedure is aligned with the requirements set out in the RANZCOG guidelines whilst supporting the [Credentialing and Defining Scope of Clinical Practice for Medical Practitioners Standard](#).

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

3. Roles and Responsibilities

The **Credentialing and Scope of Practice (CASOP) Committee** is responsible for the review and verification of qualifications and training to ensure the medical practitioner's experience and skills support the scope of practice required to provide Obstetrics and Gynaecology services.

The **Regional Director of Medical Services (RDMS)** is responsible for supervision of the administration of the credentialing process at regional level, including temporary and interim regional credentialing prior to endorsement by CASOP along with performance reviews.

The **Clinical Director of Obstetrics and Gynaecology (or delegated authority)** is responsible for assessing all credentialing applications based on level of experience and qualification of the medical practitioner and the appropriateness of the procedure being performed at the location requested and providing a recommendation to the CASOP Committee based on this assessment.

All staff are required to comply with the directions in WACHS policies and procedures as per their roles and responsibilities. Guidelines are the recommended course of action for WACHS and staff are expected to use this information to guide practice. If staff are unsure which policies procedures and guidelines apply to their role or scope of practice, and/or

are unsure of the application of directions they should consult their manager in the first instance.

4. Monitoring and Evaluation

The monitoring of this procedure is performed through auditing medical practitioners providing clinical services as O&G specialists upon credentialing and/or re-credentialing of medical practitioners between one to five years.

The evaluation of this procedure is performed through the cohort of medical practitioners providing clinical services as O&G specialists, together with the percentage compliance rates which are reviewed and reported on in conjunction with the outcomes set out in the GEPC Summary form.

5. References

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG). 2024. <https://ranzcof.edu.au/>

The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG). 2019. Guidelines for performing gynaecological endoscopic procedures. <https://ranzcof.edu.au/wp-content/uploads/2022/05/Guidelines-for-performing-gynaecological-endoscopic-procedures.pdf>

6. Definitions

Term	Definition
Australasian Gynaecological Endoscopy and Surgery Society (AGES)	AGES provides education, surgical training and clinical research
Advanced Training Modules (ATMs)	ATMs enhance the knowledge, clinical skills and professional abilities required to provide high level services
Credentialing and Scope of Practice (CASOP)	CASOP committee (WACHS) review and verify the practitioner's credentialing documentation, ensuring a rigorous peer review process is undertaken
Credentialing	Is the formal process used to verify the qualifications, experience and professional standing of medical practitioners for the purpose of forming a view about their competence, performance and professional suitability to provide safe, high quality health care services within specific organisation environments
FRANZCOG	Fellow of the Royal Australian and New Zealand College of Obstetricians and Gynaecologists
Scope of Practice	Refers to the type of medical services that an individual medical practitioner is approved to provide at a health care facility

7. Document Summary

Coverage	WACHS Wide
Audience	All clinical staff who provide gynaecological endoscopic procedures to WACHS
Records Management	Non Clinical: Corporate Recordkeeping Compliance Policy Clinical: Health Record Management Policy
Related Legislation	Health Services Act 2016 (WA)
Related Mandatory Policies / Frameworks	MP 0084/18 - Credentialing and Defining the Scope of Clinical Practice Policy Clinical Governance, Safety and Quality Framework
Related WACHS Policy Documents	Medical Credentialing and Compliance Requirements Guideline
Other Related Documents	DoH Credentialing and Defining Scope of Clinical Practice for Medical Practitioners Standard RANZCOG Guidelines for performing gynaecological endoscopic procedures
Related Forms	Gynaecological Endoscopic Procedures Credentialing Summary form
Related Training	Nil
Aboriginal Health Impact Statement Declaration (ISD)	ISD Record ID: 2688
National Safety and Quality Health Service (NSQHS) Standards	1.22, 1.23, 1.24
Aged Care Quality Standards	Nil
Chief Psychiatrist's Standards for Clinical Care	Nil
Other Standards (please specify and include link)	

8. Document Control

Version	Published date	Current from	Summary of changes
1.00	13 November 2025	13 November 2025	New procedure

9. Approval

Policy Owner	Executive Director Medical Services
Co-approver	Executive Director Clinical Excellence
Contact	WACHS Clinical Director of Obstetrics and Gynaecology, WACHS Medical Credentialing Team Leader
Business Unit	Medical Services
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