



# **Application for Certification**

## **Adult Echocardiography (ASCeXAM)**

### **Certification Requirements and Online Certification Instructions**

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Please check our website at [www.echoboards.org](http://www.echoboards.org) for future application deadlines.

# Introduction

## National Board of Echocardiography, Inc.

The National Board of Echocardiography, Inc. (NBE) was formed in December 1998. The NBE is a not-for-profit corporation established to:

- Develop and administer examinations in the field of Clinical Echocardiography,
- Recognize those physicians who successfully complete either the examination of Special Competence in Adult Echocardiography (ASCeXAM) or the Perioperative Transesophageal Echocardiography examination (PTE), and
- Develop a certification process that will publicly recognize those physicians who have completed an approved training program in echocardiography as specified in this application and have additionally passed the ASCeXAM.

The examination and certification of Special Competence in Echocardiography are not intended to restrict the practice of echocardiography. The process is undertaken, rather, in the belief that the public desires an indication from the profession regarding those who have made the effort to optimize their skill in the performance and interpretation of cardiac ultrasound.

The first examination in clinical echocardiography was given under the auspices of the American Society of Echocardiography (ASE) as a field test in 1995. An examination of special competence was given in 1996, again under the ASE, and in 1997 and 1998 under ASCeXAM, Inc. Since 1999, the exam has been administered annually by the NBE. For these examinations, the title of “Testamur” was designated for successfully passing the examination. This designation was chosen since applicants were not requested to supply information regarding successful completion of training dedicated to the study of Adult Cardiovascular Disease nor completion of special training in echocardiography. With a mature and well-tested examination, a well-defined body of knowledge, published training guidelines, and published continuing quality improvement guidelines, the NBE began offering certification in 2001.

## Eligibility

### Certification

The Certification Committee will meet to review applications for certification. Applicants will be notified in writing of the decision of the Committee. Review of application for certification will be contingent on successful completion of the ASCeXAM. Applicants will receive notification of the decision of the Committee within the year.

Individuals who pass the ASCeXAM and who have completed Adult Cardiovascular Disease and echocardiography training requirements by June 30, 2009 may apply for certification at any point in which they meet the clinical experience requirements, as long as their Testamur status remains valid.

Individuals who completed training after June 30, 2009, and failed to meet the requirements for certification during fellowship training, can only qualify for certification by obtaining additional training in an ACGME accredited or other nationally accredited training program.

Please refer to page 10 for additional information.

### Testamur Status

For licensed physicians not meeting the criteria for certification, the NBE will continue to allow access to the examination. This is to encourage physicians to test and demonstrate their knowledge of echocardiography based on an objective standard and to allow the medical community the opportunity to recognize individuals who elect to participate in and successfully complete a comprehensive examination in echocardiography. Those who successfully pass the examination but do not fulfill the necessary criteria for certification will continue to be designated as “Testamur” by the National Board of Echocardiography.

### Policy Notice

Definition of Interpretation:

*Interpretation by a Trainee is defined to be independent reading and reporting of an echocardiographic study followed by review with, or under the direct supervision of, an attending physician. Studies read by an attending with the trainee as an observer are not to be counted.*

While this has always been the intention of the NBE, this strict definition will be applied to fellows who began their training on or after July 1, 2010.

# Applying for Certification

## Who May Apply?

Licensed physicians who meet the criteria may apply for certification at the time of application for the ASCeXAM. The Certification Committee will meet to review applications, and applicants will be notified in writing of the decision of the Committee. Review of application for certification will be contingent on successful completion of the ASCeXAM. Applicants will receive notification of the decision of the Committee within 12 months.

## The Purposes of the Certification Process:

- establish the domain of the practice of echocardiography for the purpose of certification,
- assess the level of knowledge demonstrated by a licensed physician practitioner of echocardiography in a valid manner,
- enhance the quality of echocardiography and individual professional growth in echocardiography,
- formally recognize individuals who satisfy the requirements set by the NBE, and
- serve the public by encouraging quality patient care in the practice of echocardiography.

## Levels of Certification Offered:

- **Transthoracic 2-D and Doppler Echocardiography interpretation alone (t)**
- **Transesophageal Echocardiography (e)**
- **Transthoracic plus Transesophageal Echocardiography (te)**
- **Transthoracic plus Stress Echocardiography (ts)**
- **Comprehensive (c) which includes all three procedures**

Physicians who have been certified in Transthoracic Echocardiography (or higher) by the NBE and completed adult cardiovascular disease training prior to July 1, 2009 may apply for additional certification once their level of service in those areas meets the minimum requirements (see page 11)

Physicians who have been certified in Transthoracic Echocardiography (or higher) by the NBE and completed adult cardiovascular disease training between July 1, 2008, and June 30, 2009, must wait three years from the end of their fellowship program to apply for an additional certification level (e.g., adding stress and/or transesophageal echocardiography certification) under the practice experience pathway, or they must obtain additional training in an ACGME accredited or other nationally accredited fellowship program.

Physicians who have been certified in Transthoracic Echocardiography (or higher) and completed adult cardiovascular disease training after June 30, 2009, are only eligible to apply for additional certification (e.g., adding stress and/or transesophageal echocardiography certification) by obtaining additional training in an ACGME accredited or other nationally accredited fellowship program.

Please refer to page 10 for additional information.

# Applying for Certification

## Certification Documentation and Instructions

The National Board of Echocardiography, Inc. reserves the right to audit stated clinical experience and continued provision of services in echocardiography for the sake of eligibility for certification.

### Letters Documenting Training and/or Level of Service:

**All letters documenting training and/or level of service MUST be on appropriate letterhead, MUST be notarized, MUST contain EXACT numbers of studies performed and interpreted, and MUST be the original letter (no copies accepted). Applications with letters not meeting these criteria will not be reviewed. Sample letters are available on pages 14-16 and on our website: [www.echoboards.org](http://www.echoboards.org).**

Letters documenting training and/or level of service from Division or Department Head of Cardiovascular Disease, the Fellowship Training Director, Director of Cardiovascular Anesthesiology, the Training Director, or the Medical Director\* of the Echocardiography Laboratory (Level III) MUST be on appropriate letterhead and MUST be notarized.

For applicants who completed their fellowship after July 1, 2009, a statement from the Training Director must be included that indicates that the applicant has the clinical competence and professional qualities necessary to perform as an independent echocardiographer. In the absence of a formal director of the echocardiography laboratory, the letter should be written by an appropriate supervising physician.

\*Note: If applicant is the Medical Director of the Echocardiography Laboratory, the letter should be from the Chief of Cardiology or the Chief of Staff of the Hospital.

If applicants are in private practice and services are provided in the office, the letter documenting level of service must be on appropriate letterhead and should be written by the CEO or President of the practice. If the applicant is the CEO or President of the practice, the letter should be written by the business manager.

**For the purpose of certification, a study performed and/or interpreted may be counted only once and must be counted under the code that it was billed. Example: Even though a full TTE is performed as part of a Stress Echo with only a single bill being submitted (93350), the study must be counted as a Stress Echo and cannot be counted as both a TTE and a Stress.**

We request that the notarized letters verifying the number of studies per year for the appropriate time, 2 or 3 years broken down by procedure code in the following format.

	Yr. 1 (2014)	Yr. 2 (2015)	Yr. 3 (2016)
Transthoracic (93303-93308)	####	####	####
Transesophageal (93312-93317)	####	####	####
Stress Echo (93350)	####	####	####

**NOTE: The numbers provided must be in parallel, consecutive years but need not be calendar years. If using a fiscal year, exact dates are required. For example: MM/DD/YY - MM/DD/YY. The end of the most recent year for which credit is requested must fall within the 12 months prior to receipt of the complete application.**

The EXACT number of studies performed and interpreted per year MUST be provided. **Committee decisions will be determined using the numbers provided in this letter.** Applications containing approximated and/or rounded numbers will no longer be reviewed by the Certification Committee.

## Review of Documentation for Certification

Since certification is dependent on passing the ASCeXAM, applications for certification are reviewed after the examination has been satisfactorily completed.

## Effective Date of Certification

Certification will be retroactive to the date that the Special Competency Exam (ASEeXAM or ASCeXAM) was passed and will be valid for ten (10) years from that date; e.g., if the exam was passed in 1999, certification will be valid until June 30, 2009. If the exam is passed in 2017, certification will be valid until June 30, 2027.

## Change in Certification Policy

This change in Certification Policy affects all fellows who will complete their training after June 30, 2009 (i.e., those who began their training on or after July 1, 2006). Specifically, fellows completing their fellowship after June 30, 2009, can ONLY qualify for certification by completing level II training in echocardiography (6 months of formal training in echocardiography) during their fellowship, including the satisfactory performance of at least 150 transthoracic echocardiograms and the interpreting of at least 300 transthoracic studies. Additional certification in stress echocardiography requires the performance and interpretation of at least 100 stress echocardiograms, while additional certification in transesophageal echocardiography requires the performance of at least 50 transesophageal echocardiograms. **Individuals who fail to satisfy these requirements during their fellowship can only qualify for certification by obtaining additional training in an ACGME accredited or other nationally accredited fellowship program. For this group, practice experience will no longer be accepted as an alternative to formal training.**

Please refer to page 10 for additional information.

## Policy Notice

Definition of Interpretation:

*Interpretation by a Trainee is defined to be independent reading and reporting of an echocardiographic study followed by review with, or under the direct supervision of, an attending physician. Studies read by an attending with the trainee as an observer are not to be counted.*

While this has always been the intention of the NBE, this strict definition will be applied to fellows who began their training on or after July 1, 2010.

# Board Certification Requirements

## Certification Levels

- Comprehensive Certification (c) – Includes all Three - Transthoracic, Transesophageal, and Stress Echocardiography
- Transthoracic Certification (t) – Transthoracic (Cardiovascular Clinician)
- Transesophageal Echocardiography (te) – Transthoracic Plus Transesophageal Echocardiography (Cardiovascular Clinician)  
(e) – Transesophageal Echocardiography Alone (Cardiovascular Anesthesiologist, Cardiovascular Surgeon)
- Transthoracic Plus Stress Echocardiography Certification (ts)

## What Are the Six Requirements?

Requirements 1-4 and Supporting Documentation, which are the same for all levels of certification, are listed below.

Requirement 5, see the Adult Cardiovascular Disease Training Time Table specific to your clinical training.

Requirement 6, the Application Fee.

BOARD CERTIFICATION REQUIREMENTS 1-4	REQUIRED DOCUMENTATION
<b>Requirement 1. Testamur of the ASCeXAM.</b>	<b>Requirement 1.</b> Provide year ASCeXAM passed If applying for certification and exam, provide year you're taking the exam.
<b>Requirement 2. Certification Eligibility License Requirements.</b> Applicants who wish to apply for certification must hold a valid, unrestricted license to practice medicine at the time of application. (Geographical restrictions may be accepted and are subject to approval.) Medical restrictions or restrictions to scope of practice will not be accepted for purposes of eligibility for certification.	<b>Requirement 2.</b> (One of the following): <ul style="list-style-type: none"><li>• Copy of current medical license renewal certificate that shows an expiration date.</li><li>• Copy of equivalent documentation of permission to practice medicine in the country of principal residence.</li></ul>
<b>Requirement 3. Current Medical Board Certification.</b> Applicants must be board certified by a board that holds membership in the American Board of Internal Medicine, the Advisory Board for Osteopathic Specialties, the American Association of Physician Specialists, or Royal College of Physicians and Surgeons of Canada.	<b>Requirement 3.</b> Copy of certificate of highest Board Certification attained, e.g., Internal Medicine, Cardiovascular Disease, Anesthesiology, etc. (A copy of ABIM Certification in Cardiovascular Disease is preferred.)
<b>Requirement 4. Specific Training in Adult Cardiovascular Disease.</b> Applicants must have a minimum of 24 months of specialized clinical training dedicated to the study of adult cardiovascular disease. This training is to be at the fellowship level. Fellowship training in adult cardiovascular disease must be obtained at an ACGME accredited training program or other nationally accredited adult cardiovascular training program. That is, cardiovascular rotations during general internal medicine, surgery, radiology, anesthesiology, or other general residencies cannot be counted towards this requirement. Months spent in cardiovascular research may not be counted toward this requirement.	<b>Requirement 4.</b> (One of the following): <ul style="list-style-type: none"><li>• Copy of a certificate of successful completion of an accredited fellowship in adult cardiovascular disease.</li><li>• An original notarized letter on appropriate letterhead from the Division or the Department Head of Cardiovascular Disease or Fellowship Training Director stating the applicant has successfully completed an approved Adult Cardiovascular Disease Fellowship and the date of completion.</li><li>• An original notarized letter on appropriate letterhead from the hospital or appropriate departmental Training Director stating the applicant has completed a full 24 months of clinical training dedicated specifically to adult cardiovascular disease. The letter must document the inclusive dates of the training and the number of echoes performed and interpreted during training. A summary of the training program activities is recommended (see Letters Documenting Training and/or Level of Service: page 6).</li></ul>

# Board Certification Requirements

BOARD CERTIFICATION REQUIREMENT 5 – ADULT CARDIOVASCULAR DISEASE TRAINING TIME TABLE

Level of Certification Applied For:	Section 1 Less Than 3 years out of Training	Section 2 Training Completed between July 1, 1990 & July 1, 2009	Section 3 Training Completed Prior to July 1, 1990
<p><b>Comprehensive (c)</b></p> <p><b>IMPORTANT: If you completed training after June 30, 2009, and you failed to meet the requirements for certification during training, please refer to page 5 and page 10 for additional information.</b></p>	<p><b>Requirement 5.</b> The applicant must have completed Level II Training (6 months training with performance of 150 and interpretation of 300 transthoracic echocardiograms must have performed and interpreted at least 50 transesophageal, and must have participated in and interpreted 100 stress echocardiograms during training).</p> <p><b>Supporting Documentation:</b> An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of the Echocardiography Lab (Level III) verifying completion of Level II Training, the dates of training, and the number of transthoracic, transesophageal, and stress echos performed during training. The letter must include a statement from the Training Director indicating that the applicant has the clinical competence and professional qualities necessary to perform as an independent echocardiographer.</p>	<p><b>Requirement 5.</b> The applicant must have completed Level I Training (3 months training with performance and interpretation of 150 transthoracic echocardiograms) and have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies, 50 transesophageal, and 100 stress echocardiograms per year for each of two (2) years immediately preceding this application.</p> <p><b>Supporting Documentation:</b> An original notarized letter on appropriate letterhead verifying the number of 2-D Echo/Doppler studies, transesophageal, and stress echocardiograms performed.</p>	<p><b>Requirement 5.</b> The applicant must have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies per year for each of three (3) years immediately preceding this application, and have performed and interpreted at least 50 transesophageal and 100 stress echocardiograms per year for each of two (2) years immediately preceding this application.</p> <p><b>Supporting Documentation:</b> An original notarized letter on appropriate letterhead verifying the number of 2-D Echo/Doppler studies, transesophageal, and stress echocardiograms performed.</p>
<p><b>Transthoracic Certification (t)</b></p> <p><b>IMPORTANT: If you completed training after June 30, 2009, and you failed to meet the requirements for certification during training, please refer to page 5 and page 10 for additional information.</b></p>	<p><b>Requirement 5.</b> The applicant must have Level II Training (6 months training with performance of 150 and interpretation of 300 transthoracic echocardiograms).</p> <p><b>Supporting Documentation:</b> An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of the Echocardiography Lab (Level III) verifying completion of Level II Training and the number of transthoracic studies performed during training. The letter must include a statement from the Training Director indicating that the applicant has the clinical and professional qualities necessary to perform as an independent echocardiographer.</p>	<p><b>Requirement 5.</b> The applicant must have completed Level I Training (3 months training with performance and interpretation of 150 transthoracic echocardiograms) and have provided echocardiography service of at least 400 2-Dimensional Echo/Doppler studies per year for each of the two (2) years immediately preceding this application.</p> <p><b>Supporting Documentation:</b> An original notarized letter on appropriate letterhead verifying the number of 2-Dimensional Echo/Doppler studies performed per year for each of three (3) years preceding the application.</p>	<p><b>Requirement 5.</b> The applicant must have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies per year for each of three years preceding the application.</p> <p><b>Supporting Documentation:</b> An original notarized letter on appropriate letterhead verifying the number of Transthoracic studies performed per year for each of three (3) years preceding the application.</p>
<p><b>Transesophageal Echocardiography (Includes the Following Two):</b></p>			

# Board Certification Requirements

## Trans thoracic and Transesophageal Echocardiography Certification (te)

**IMPORTANT:** If you completed training after June 30, 2009, and you failed to meet the requirements for certification during training, please refer to page 5 and page 10 for additional information.

**Requirement 5.** The applicant must have completed Level II Training (6 months with the performance of 150 and interpretations of 300 trans thoracic echocardiograms) and performances and interpretations of at least 50 transesophageal echocardiograms during training.

**Supporting Documentation:** An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of the echocardiography lab (Level III) verifying the completion of Level II Training, the date of training, and the number of trans thoracic and transesophageal studies performed during training. This letter must include a statement from the Training Director indicating that the applicant has the clinical competence and professional qualities necessary to perform as an independent echocardiographer.

## Transesophageal Echocardiography Certification (e)

**IMPORTANT:** If you completed training after June 30, 2009, and you failed to meet the requirements for certification during training, please refer to page 5 and page 10 for additional information.

**Requirement 5.** The applicant must have performed and interpreted at least 300 transesophageal echocardiograms within a training program.

**Supporting Documentation:** An original notarized letter on appropriate letterhead from the hospital or appropriate departmental Training Director, e.g., Director of Cardiovascular Anesthesiology, stating the applicant has completed a full 24-months of clinical training dedicated specifically to adult cardiovascular disease. This letter must document the inclusive dates of the training and the number of transesophageal echoes performed during training. A summary of the training program activities is recommended.

**Requirement 5.** The applicant must have completed Level I Training (3 months training with performance and interpretation of 150 trans thoracic echocardiograms) and have provided echocardiography studies of at least 400 2-Dimensional Echo/Doppler studies and 50 transesophageal echocardiograms per year for each of two (2) years immediately preceding this application.

**Supporting Documentation:** An original notarized letter on appropriate letterhead verifying the number of 2-Dimensional Echo/Doppler studies and transesophageal echocardiograms performed.

**Requirement 5.** The applicant must have performed and interpreted at least 150 transesophageal echocardiograms during the training program and performed at least 100 transesophageal echocardiograms per year for each of two (2) years immediately preceding application.

**Supporting Documentation:** An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of Transesophageal studies performed for each of the two (2) years preceding this application.

**Requirement 5.** The applicant must have performed at least 100 transesophageal echocardiograms per year for each of two (2) years immediately preceding application.

**Supporting Documentation:** An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of Transesophageal studies performed for each of the two (2) years preceding this application.

**Requirement 5.** The applicant must have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies per year for each of the three (3) years immediately preceding this application and have performed and interpreted at least 50 transesophageal echocardiograms per year for each of two (2) years immediately preceding this application.

**Supporting Documentation:** An original notarized letter on appropriate letterhead verifying the number of 2-Dimensional Echo/Doppler studies and the transesophageal echocardiograms performed.

**Requirement 5.** The applicant must have performed at least 100 transesophageal echocardiograms per year for each of the three (3) years immediately preceding application.

**Supporting Documentation:** An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of the Echocardiography Lab (Level III) verifying the number of transesophageal studies performed for each of the three (3) years preceding this application.

**Requirement 5.** The applicant must have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies per year for each of three (3) years immediately preceding this application, and have performed and interpreted at least 100 stress echocardiograms per year for each of two (2) years immediately preceding this application.

**Required Documentation:** An original notarized letter on appropriate letterhead verifying the number of 2 Dimensional Echo/Doppler studies and stress echocardiograms performed.

**NOTE:** The numbers provided must be in parallel, consecutive years and are not limited to calendar years. If using a fiscal year, must document MM/DD/YY - MM/DD/YY.

## Trans thoracic Plus Stress Echocardiography Certification (ts)

**IMPORTANT:** If you completed training after June 30, 2009, and you failed to meet the requirements for certification during training, please refer to page 5 and page 10 for additional information.

**Requirement 5.** The applicant must have completed Level II Training (6 months training with performance of 150 and interpretation of 300 trans thoracic echocardiograms) and participated in and interpreted at least 100 stress echocardiograms during training.

**Required Documentation:** An original notarized letter on appropriate letterhead from the Training Director or the Medical Director of the Echocardiography Lab (Level III) verifying completion of Level II Training, the dates of training, and the number of trans thoracic and stress echoes performed during training. The letter must include a statement from the Training Director indicating that the applicant has the clinical competence and professional qualities necessary to perform as an independent echocardiographer.

**Requirement 5.** The applicant must have completed Level I Training (3 months training with performance and interpretation of 150 trans thoracic echocardiograms) and have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies and 100 stress echocardiograms per year for each of two (2) years immediately preceding this application.

**Required Documentation:** An original notarized letter on appropriate letterhead verifying the number of 2-Dimensional Echo/Doppler studies and stress echocardiograms performed.

**NOTE:** The numbers provided must be in parallel, consecutive years and are not limited to calendar years. If using a fiscal year, must document MM/DD/YY - MM/DD/YY.

**Requirement 5.** The applicant must have provided echocardiography services of at least 400 2-Dimensional Echo/Doppler studies per year for each of three (3) years immediately preceding this application, and have performed and interpreted at least 100 stress echocardiograms per year for each of two (2) years immediately preceding this application.

**Required Documentation:** An original notarized letter on appropriate letterhead verifying the number of 2 Dimensional Echo/Doppler studies and stress echocardiograms performed.

**NOTE:** The numbers provided must be in parallel, consecutive years and are not limited to calendar years. If using a fiscal year, must document MM/DD/YY - MM/DD/YY.

# Physician Requirements

**Physicians who complete training after June 30, 2009, and did meet Level II training requirements but wait more than 3 years to take the exam and apply for certification, must also meet one of the additional supplemental practice requirements:**

**Pathway #1:** a) meet the minimum practice numbers the 2 years **prior** to application, b) provide a minimum of 15 hours of AMA category 1 echo-specific CME, which must be acquired during the same years in which the numbers are provided.

**Pathway #2:** a) meet the minimum practice numbers the 2 years **after** initial application, b) provide a minimum of 15 hours of AMA category 1 echo-specific CME, which must be acquired during the same years in which the numbers are provided.

## Requirements for Physicians that did not meet the required number of procedures during fellowship after June 30, 2009:

**\*For physicians less than 3 years out of training:**

**Must make-up the difference to meet Level II training requirements**

- Must have a minimum of 6-months in the echo lab
- Meet minimum numbers for TTE (150, 300) along with TEE (50) and Stress (100), if desired for certification

Individuals who fail to satisfy these requirements during their fellowship can only qualify for certification by obtaining additional training in an ACGME accredited or other nationally accredited fellowship program.

**\*For physicians more than 3 years out of training there are two pathways to certification:**

**Pathway #1:** a) Meet the numbers needed for Level II (i.e. complete what you were deficient in) at a facility with an ACGME accredited adult cardiology fellowship training program or other nationally accredited adult cardiovascular training program, b) meet the minimum practice numbers the 2 years **prior** to completing the deficient training numbers, c) provide a minimum of 15-hours AMA category-1 echo-specific CME. The CME must be acquired during the same years in which the numbers are provided.

**Pathway #2:** a) Meet the numbers needed for Level II (i.e. complete what you were deficient in) at a facility with an ACGME accredited adult cardiology fellowship training program or other nationally accredited adult cardiovascular training program, b) meet the minimum practice numbers the 2 years **after** completing the deficient training numbers, c) provide a minimum of 15-hours AMA category-1 echo-specific CME. The CME must be acquired during the same years in which the numbers are provided.

# Board Certification Requirements

## BOARD CERTIFICATION REQUIREMENTS

## REQUIRED DOCUMENTATION

### I. Additional Certification in Transesophageal Echocardiography

For the purpose of certification, a study performed and/or interpreted may be counted only once and must be counted under the code that it was billed. Example: Even though a full TTE is performed as part of a Stress Echo with only a single bill being submitted (93350), the study must be counted as a Stress Echo and cannot be counted as both a TTE and a Stress.

#### Requirement 1.

Applicants must be currently certified by the NBE in Transthoracic or Transthoracic Plus Stress Echocardiography, and adult cardiovascular disease training must be completed prior to July 1, 2009.

#### Requirement 2.

Applicants must show continued maintenance of skills in transesophageal echocardiography according to the following:

Performance and interpretation of at least 50 transesophageal echocardiograms per year for each of the two (2) years immediately preceding this application.

#### Requirement 3.

Application Fee \$50.00 (US Funds)

**Important: Please refer to the Policy Notice on page 5 for adding Additional Certification.**

An original notarized letter on appropriate letterhead from the Medical Director of the Echocardiography Laboratory (Level III) verifying the number of transesophageal echocardiograms performed and interpreted per year for each of the two (2) years preceding this application (see Letters Documenting Training and/or Level of Service: page 6).

Application fee may be paid by VISA or MasterCard in US Funds. The NBE does not accept American Express or Discover.

### II. Additional Certification in Stress Echocardiography

For the purpose of certification, a study performed and/or interpreted may be counted only once and must be counted under the code that it was billed. Example: Even though a full TTE is performed as part of a Stress Echo with only a single bill being submitted (93350), the study must be counted as a Stress Echo and cannot be counted as both a TTE and a Stress.

#### Requirement 1.

Applicants must be currently certified by the NBE in Transthoracic or Transthoracic Plus Transesophageal Echocardiography, and adult cardiovascular disease training must be completed prior to July 1, 2009.

#### Requirement 2.

Applicants must show continued maintenance of skills in pharmacologic or exercise stress echocardiography according to the following:

Primary interpretation of at least 100 stress echocardiograms per year for each of the two (2) years preceding this application.

#### Requirement 3.

Application Fee \$50.00 (US Funds)

**Important: Please refer to the Policy Notice on page 5 for adding Additional Certification.**

An original notarized letter on appropriate letterhead from the Medical Director of the Echocardiography Laboratory (Level III) verifying the number of Stress Echoes performed per year for each of the two (2) years preceding this application (See Letters Documenting Training and/or Level of Service: page 6).

Application fee may be paid by VISA or MasterCard in US Funds. The NBE does not accept American Express or Discover.

# Special Circumstances

## Special Circumstances

### Other Than 24 Months of Training in Adult Cardiovascular Disease

The NBE recognizes that other scenarios for obtaining 24 months of clinical training focused on cardiovascular disease are possible, albeit rare. Applicants who do not meet Requirement 4 for transthoracic certification (t) may apply for certification by requesting that clinical experience with evidence of strong involvement in adult cardiovascular disease/echocardiography be accepted for up to 12 months of the requirement for formal training.

These applications will be evaluated on a case-by-case basis for eligibility.

(Please note that adult cardiovascular disease training during residency cannot be included as part of this 24-month requirement. See Requirement 4, page 7.)

### Requirements for Consideration for Certification with Less Than 24 Months of Adult Cardiovascular Disease Training

#### Requirements 1, 2, 3, and 6 of Transthoracic (t) Certification and each of the following:

- A letter requesting that clinical experience with evidence of strong involvement in adult cardiovascular disease/echocardiography be accepted for up to 12 months of the requirement for formal training must be submitted.
- A notarized letter on appropriate letterhead from the person responsible for the training, with detailed documentation of the training activities, statement of successful completion, and the inclusive dates must be supplied.
- A notarized letter detailing national/regional meetings attended, papers presented, lectures given, and peer-reviewed publications in the realm of adult cardiovascular disease and/or echocardiography must be submitted.
- A notarized letter on appropriate letterhead documenting the number of transthoracic echocardiograms performed per year in each of the preceding three (3) years, and the number of transesophageal echocardiograms and stress echocardiograms performed per year in each of the preceding two (2) years (see Letters Documenting Training and/or Level of Service: page 6).

#### Requirement 1 for Transthoracic (t) Certification:

Testamur of the ASEeXAM or ReASCE.

#### Requirement 2 for Transthoracic (t) Certification:

A current license or equivalent documentation of permission to practice medicine in the country of principal residence.

#### Requirement 3 Transthoracic (t) Certification:

Documentation of specialty board certification or its equivalent.

#### Requirement 4 for Transthoracic (t) Certification:

Documentation of 24 months of training dedicated to adult cardiovascular disease.

#### Requirement 5 for Transthoracic (t) Certification:

Documentation of training equivalent to Level II (see above) in the three (3) years prior to this application (if training was completed subsequent to July 1, 1999),

OR

Documentation of training equivalent to Level I (see above) and provision of the number of 2D Echo/Doppler services per year for each of the two (2) years prior to this application if training was completed between July 1, 1990, and July 1, 1999,

OR

Documentation of provision of the number of 2D Echo/Doppler services per year for each of the three (3) years prior to this application if the training in adult cardiovascular disease was completed prior to July 1, 1990.

OR

Documentation of Accreditation by the British Society of Echocardiography.

#### Requirement 6 for Transthoracic (t) Certification:

Application fee.

## Non-North American Trained Physicians

Non-North American trained physicians must have had the equivalent\* of each of the applicable training and/or clinical experience requirements to be eligible for certification.

Applications will be reviewed on a case-by-case basis to determine the eligibility of the applicant for certification. Documentation must include the inclusive dates of training.

“Equivalent” is defined as six (6) months of formal training in echocardiography with performance and interpretation of at least 300 2-D Echo/Doppler studies.

**All documentation must be supplied in English. If original documentation is not in English, a certified translation must be attached to each document.**

## Change in Certification Policy

This change in Certification Policy affects all fellows who will complete their training after June 30, 2009 (i.e., those who began their training on or after July 1, 2006). Specifically, fellows completing their fellowship after June 30, 2009, can ONLY qualify for certification by completing level II training in echocardiography (6 months of formal training in echocardiography) during their fellowship including the satisfactory performance of at least 150 transthoracic echocardiograms and the interpreting of at least 300 transthoracic studies. Additional certification in stress echocardiography requires the performance and interpretation of at least 100 stress echocardiograms, while additional certification in transesophageal echocardiography requires the performance of at least 50 transesophageal echocardiograms. **Individuals who fail to satisfy these requirements during their fellowship can only qualify for certification by obtaining additional training in an ACGME accredited or other nationally accredited fellowship program. For this group, practice experience will no longer be accepted as an alternative to formal training.**

Please refer to page 10 for additional information.

# Online Certification Instructions

## Please read the following instructions carefully:

Please take a moment to review the appropriate handbook for detail instructions, pathways, and requirements before submitting documentation for certification.

**Step 1)** Sign in to your existing NBE account on [www.echoboard.org](http://www.echoboard.org).

**Step 2) CERTIFICATION:** On the top of the Browser, you will find a tab for [Certification](#). In the drop down menu you may choose the option to [Enroll for Certification](#).

**Step 3) CHOOSE PROGRAM:** Choose the program in which you would like to enroll to submit your Application for Certification.

**Step 4) ENROLL:** Enroll in the program. A confirmation will appear that will approve your enrollment.

**Step 5) UPLOAD DOCUMENTS:** On the right side of the browser, you will find the Documents Uploader. Please upload all required documentation to complete your application for certification.

## Instructions to Upload Required Documents:

- For required documents which an applicant can supply themselves, the documents must be scanned into a **PDF file**. Click on “My Documents Uploader” on the right side of the screen. The applicant will choose the Program the documents pertain to and the Requirement they fulfill from the drop-down lists.

**Although an applicant may upload a copy of the notarized letter, the [original notarized document](#) is required to be mailed to the National Board of Echocardiography to complete the requirement.** The original notarized letter must be mailed to the address below:

National Board of Echocardiography  
1500 Sunday Dr., Suite 102  
Raleigh, NC 27607

This letter must be signed, dated, notarized, and typed on official letterhead. The notarized letter will not be accepted as only a scanned upload, and must be post mailed to complete this requirement. A scanned copy may be uploaded for this requirement to begin review; however, the application will not be complete until the original notarized letter is received by the National Board of Echocardiography. The Applicant may mail this OR the Program Director may mail this letter directly.

- The documents do not have to be uploaded in order. Please carefully review the appropriate handbooks to ensure completion of appropriate requirements.

## How to Track Progress:

An applicant may track the progress of any submitted documentation by finding the [Certifications](#) tab, and clicking [Continue in your Program](#) out of the drop down menu.

The applicant may click the hyperlink ‘View Progress’ for the appropriate application.

Requirements will be listed as *Required*, *in Progress*, or *Complete*.

Once the documents have been reviewed, the status will change to ‘In Progress’ per each requirement. If requirements are missing, or further verification is required, notifications will be emailed to the email address on file.

Once an application is complete and the original notarized letter is received and reviewed by NBE staff, the status will be noted as ‘Complete’. This indicates the application is complete for Committee review at the next Certification Committee meeting. Please note that Certification Committee meetings are held twice a year. Applicants will receive notification of the decision of the committee within 12 months.

## How to View Current Submitted Documentation:

**An applicant may view previously submitted documents in the “My Documents Uploader”.**

# Sample Letter

For physicians who completed fellowship less than 3 years out of Training

## ABC Hospital

123 Main Street • New York, NY 54321 • (212) 123-5432

Date

National Board of Echocardiography, Inc.  
1500 Sunday Drive, Suite 102  
Raleigh, NC 27607

RE: *Physician's Full Name*  
*Physician's Date of Birth*  
*Physician's Social Security Number*  
*ACGME Program Number*

To Whom It May Concern:

### Requirement 4:

This letter serves to confirm that Dr. \_\_\_\_\_ (*name*) successfully completed a minimum of 24 months of clinical adult cardiology training at our institution between \_\_\_\_\_ (*date*) and \_\_\_\_\_ (*date*) including completion of Level II echocardiography training and at least 6 months of specific training in the echocardiography laboratory. This letter further confirms that this program is an accredited ACGME training program or other nationally accredited adult cardiovascular disease training program.

### Requirement 5:

Our laboratory records indicate that \_\_\_\_\_ (*he/she*) performed and interpreted echoes during training as follows:

Transthoracic Echoes (2-D and Doppler) Performed	_____ ( <i>#</i> )
Transthoracic Echoes (2-D and Doppler) Interpreted	_____ ( <i>#</i> )
Transesophageal Echoes Performed and Interpreted	_____ ( <i>#</i> )
Stress Echoes Participated In and Interpreted	_____ ( <i>#</i> )

In my opinion, Dr. \_\_\_\_\_ (*name*) has the clinical competence and professional qualities necessary to perform as an independent echocardiographer.

I certify that the number of studies provided above are exact numbers and are not rounded and/or estimates.  
(Please check box.)

Sincerely,

*John Doe*

Name

Title (Division or Department Head or Fellowship Training Director)

Sworn and subscribed to before me on (*date*): \_\_\_\_\_

\_\_\_\_\_  
*Signature of Notary Public*

Notary Seal

\* NOTE: For the purpose of certification, a study performed and/or interpreted may be counted only once and must be counted under the code that it was billed. Example: Even though a full TTE is performed as part of a Stress Echo with only a single bill being submitted (93350), the study must be counted as a Stress Echo and cannot be counted as both a TTE and a Stress.

The EXACT number of studies performed and interpreted MUST be provided. Committee decisions will be determined using the numbers provided in this letter. Applications containing approximated and/or rounded numbers will no longer be reviewed by the Certification Committee. Letters documenting training MUST be on appropriate letterhead, MUST BE NOTARIZED, and MUST be the original letter.

# Sample Letter

For physicians who completed fellowship PRIOR to July 1, 2009, and are in private practice or who completed training after June 30, 2009, and waited more than 3 years to take the examination

## ABC Practice

123 Main Street • New York, NY 54321 • (212) 123-5432

Date

National Board of Echocardiography, Inc.  
1500 Sunday Drive, Suite 102  
Raleigh, NC 27607

RE: *Physician's Full Name*  
*Physician's Date of Birth*  
*Physician's Social Security Number*

To Whom It May Concern:

This letter serves to confirm that Dr. \_\_\_\_\_ (*name*) is a practicing cardiologist in private practice. Our records indicate that \_\_\_\_\_ (*he/she*) has performed and interpreted echoes as follows:

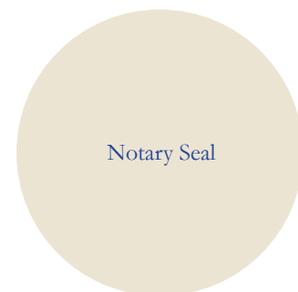
	Yr. 1 (2014)	Yr. 2 (2015)	Yr. 3 (2016)
Transthoracic (93303-93308) *	####	####	####
Transesophageal (93312-93317)*		####	####
Stress Echo (93350)*		####	####

I certify that the number of studies provided above are exact numbers and are not rounded and/or estimates.  
(Please check box.)

Sincerely,

*Jane Smith*

Name  
Title (President, CEO, or Business Manager)



Sworn and subscribed to before me on (date): \_\_\_\_\_

\_\_\_\_\_  
*Signature of Notary Public*

\* NOTE: For the purpose of certification, a study performed and/or interpreted may be counted only once and must be counted under the code that it was billed. Example: Even though a full TTE is performed as part of a Stress Echo with only a single bill being submitted (93350), the study must be counted as a Stress Echo and cannot be counted as both a TTE and a Stress.

The EXACT number of studies performed and interpreted MUST be provided. Committee decisions will be determined using the numbers provided in this letter. Applications containing approximated and/or rounded numbers will no longer be reviewed by the Certification Committee. Letters documenting level of service MUST be on appropriate letterhead, MUST BE NOTARIZED, and MUST be the original letter.

NOTE: The numbers provided must be in parallel, consecutive years but need not be calendar years. The end of the most recent year for which credit is requested must fall within the 12 months prior to receipt of the complete application. If using a fiscal year, exact dates are required. For example: MM/DD/YY - MM/DD/YY.

# Sample Letter

For physicians who completed fellowship PRIOR to July 1, 2009, and who work in a hospital setting or who completed training after June 30, 2009, and waited more than 3 years to take the examination

## XYZ Hospital

123 Main Street • New York, NY 54321 • (212) 123-5432

Date

National Board of Echocardiography, Inc.  
1500 Sunday Drive, Suite 102  
Raleigh, NC 27607

RE: Physician's Full Name  
Physician's Date of Birth  
Physician's Social Security Number

To Whom It May Concern:

This letter serves to confirm that Dr. \_\_\_\_\_ (*name*) is a practicing cardiologist working in our echocardiography lab. Our records indicate that \_\_\_\_\_ (*he/she*) has performed and interpreted echoes as follows:

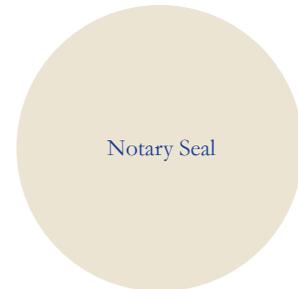
	Yr. 1 (2014)	Yr. 2 (2015)	Yr. 3 (2016)
Transthoracic (93303-93308)*	####	####	####
Transesophageal (93312-93317)*		####	####
Stress Echo (93350)*		####	####

I certify that the number of studies provided above are exact numbers and are not rounded and/or estimates.  
(Please check box.)

Sincerely,

*Joe Jones*

Name  
Title (Medical Director)\*\*



Sworn and subscribed to before me on (*date*): \_\_\_\_\_

\_\_\_\_\_  
*Signature of Notary Public*

\* NOTE: For the purpose of certification, a study performed and/or interpreted may be counted only once and must be counted under the code that it was billed. Example: Even though a full TTE is performed as part of a Stress Echo with only a single bill being submitted (93350), the study must be counted as a Stress Echo and cannot be counted as both a TTE and a Stress.

The EXACT number of studies performed and interpreted MUST be provided. Committee decisions will be determined using the numbers provided in this letter. Applications containing approximated and/or rounded numbers will no longer be reviewed by the Certification Committee. Letters documenting training MUST be on appropriate letterhead, MUST BE NOTARIZED, and MUST be the original letter.

NOTE: The numbers provided must be in parallel, consecutive years but need not be calendar years. The end of the most recent year for which credit is requested must fall within the 12 months prior to receipt of the complete application. If using a fiscal year, exact dates are required. For example: MM/DD/YY - MM/DD/YY.

\*\* In the absence of a formal director of the echocardiography laboratory, the letter should be written by an appropriate supervising physician. If applicant is the Medical Director of the Echocardiography Laboratory, the letter should be from the Chief of Cardiology or the Chief of Staff of the Hospital.