



Application for Recertification

Adult Echocardiography (ReASCE)

Certification Requirements and Online Certification Instructions

National Board of Echocardiography, Inc.[®]
1500 Sunday Drive, Suite 102 • Raleigh, NC 27607
Phone: 919-861-5582 • Email: info@echoboard.org
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Please check our website at 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), the Recertification Examination of Special Competence in Adult Echocardiography (ReASCE), or the Examination of Special Competence in Perioperative Transesophageal Echocardiography (PTEeXAM), 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 ReASCE, or the PTEeXAM.

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 then given in 1996, again under the ASE, and in 1997 and 1998 under ASEeXAM, Inc. Since 1999 the exam has been administered annually by the NBE. For these examinations, the title of “Testamur” was designated for applicants who successfully passed the examination. This designation was chosen since applicants were not requested to supply information regarding successful completion of training dedicated to the study of 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, the NBE began offering certification in 2001.

The title of “Diplomate” was designated for physicians who were certified in echocardiography. Certification is valid for ten (10) years from the year that the Examination of Special Competence is passed.

The NBE has developed a Recertification Examination that is similar in format to the Examination of Special Competence in Adult Echocardiography (ASCeXAM) but is designed specifically for those who have previously passed the ASCeXAM. The purpose of the Recertification Examination is to promote continued excellence in the performance and interpretation of cardiac ultrasound. This examination should be considered in conjunction with ongoing continuing medical education in the field.

Eligibility

Recertification

Diplomates of the NBE who meet the criteria for recertification may apply for recertification at the time of application for the ReASCE examination.

Note: If you have previously not certified in transesophageal and/or stress echocardiography, but have performed the required number of studies per year for the two (2) years prior to this application, Transthoracic Plus Transesophageal (te), Transthoracic Plus Stress (ts), or Comprehensive (c) Certification may be requested.

The Certification Committee will 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 ReASCE examination. Applicants will receive notification of the decision of the Committee within a year.

Testamurs and Diplomates of the ASCeXAM may take the ReASCE in their 9th, 10th, and 11th years surrounding their 10-year expiration date. Recertification is effective as of the expiration date of the ASCeXAM (initial test). Applicants have 10 years to apply for recertification through the recertification requirements.

Testamur Status

Testamurs of the ASCeXAM will continue to have access to the examination. This is to encourage physicians to test and demonstrate their knowledge of echocardiography based on an objective standard. This is 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 will continue to be designated as “Testamur” by the National Board of Echocardiography, Inc. Testamurs who wish to apply for initial Certification in Echocardiography must use the Application for Board Certification, which may be found in the ASCeXAM Certification Application.

Applying for Recertification

The Purposes of Recertification

The purposes of the certification process are to:

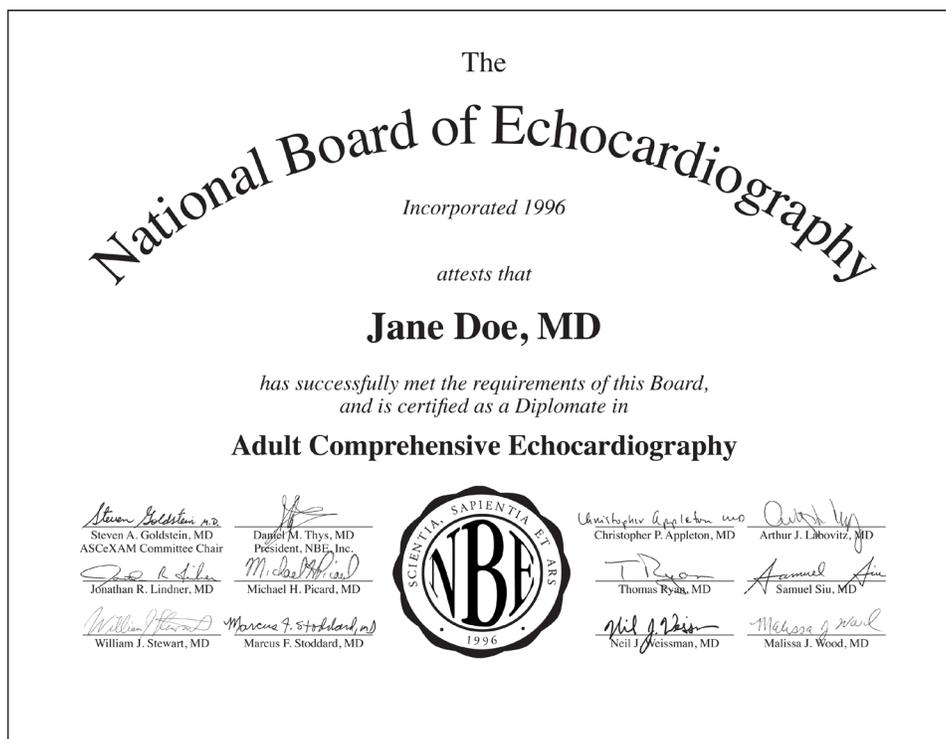
- establish the domain of the practice of echocardiography for the purpose of certification,
- assess the level of knowledge demonstrated by a licensed physician practitioner of echocardiography in a valid manner,
- enhance the quality of echocardiography and individual professional growth in echocardiography,
- 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**

Note: If you have previously not certified in transesophageal and/or stress echocardiography but have performed the required number of studies per year for the two (2) years prior to this application, Transthoracic Plus Transesophageal (te), Transthoracic Plus Stress (ts), or Comprehensive (c) Certification may be requested.

Physicians who are certified in Transthoracic Echocardiography (or higher) by the NBE may apply for additional certification once their level of service in those areas meets the minimum requirements (see page 9).



Applying for Recertification

Recertification 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 Level of Service:

All letters documenting level of service **MUST** be typed on appropriate letterhead, **MUST** be the original notarized letter (no copies), and **MUST** contain **EXACT** numbers of studies performed and interpreted. **Applications with letters not meeting these criteria will not be reviewed.**

All letters documenting level of service from Division or Department Head of Cardiovascular Disease, Director of Cardiovascular Anesthesiology, or the Medical Director* of the Echocardiography Laboratory (Level III) **MUST** be typed on appropriate letterhead and **MUST** be notarized. Sample letters are available on pages 11 and 12 and on our website: www.echoboard.org.

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 written by 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 be broken down by procedure code in the following format.

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

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 **NOT** be reviewed by the Certification Committee.

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.

Effective Date of Recertification

Diplomates of the NBE who pass the Recertification Examination and meet the requirements for recertification will be certified for an additional ten (10) years from the expiration date of their current certification. Testamurs who pass the Recertification examination will retain their status for an additional ten (10) years; e.g., if the ASCeXAM was passed in 2007, the current certification or Testamur status is valid until June 30, 2017. **The status will be extended until June 30, 2027, regardless of which year the Recertification Examination is passed.**

Review of Documentation for Recertification

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

Refund Policy

Applications for Additional Certification:
No refunds will be made.

Maintenance of Testamur or Diplomate Status:

- Testamurs and Diplomates of the NBE are required to take the ReASCE in either the 9th, 10th, or 11th year surrounding their 10-year anniversary date to maintain their status with the NBE. Individuals who allow their status to lapse will have their names removed from the NBE's online Testamur/Diplomate listing page.
- If a Diplomate does take and pass the ReASCE in the compulsory timeframe, but does not submit the required documentation for recertification, the candidate is eligible to apply for recertification at any time before the expiration of their Testamur status. Once their application for recertification is approved, their status will be changed from Testamur to Diplomate of the level in which they were approved.
- If a Testamur/Diplomate does NOT take and pass the ReASCE in the compulsory timeframe, the individual must pass the ReASCE and pay a \$200.00 reinstatement fee at the time of application. Additionally, Diplomates who do not take the ReASCE in the required 3-year period must meet the initial certification requirements and the CME requirements for recertification.
- If Testamur or Diplomate status has lapsed more than 9 years, applicants must take the ASCeXAM.

Example for 2003 Initial Examination Pass Date:

Action	Year
Initial Examination Passed	2003
Eligible for Recertification Examination	2012 to 2022
Retake Initial Examination	2023 or later

NOTE – *If lapsed applicants choose not to attempt the ReASCE until their 19th year (9 years lapsed), they will need to take and pass the ReASCE in both the 19th and 20th year to retain status for an additional 10 years.*

Action	Year
Initial Examination Passed	2003
Take Recertification Examination	2022
Retake Recertification Examination	2023

KEY POINT – *At any point after their certification has lapsed, applicants may attempt the initial ASCeXAM and receive certification for 10 years from the year the most recent exam was passed.*

Testamurs from 1996-1998 are not required to sit for ReASCE to maintain their Testamur status with the NBE; however, the NBE strongly encourages these individuals to test and demonstrate their knowledge of echocardiography based on this objective standard.

Board Recertification Requirements

BOARD CERTIFICATION REQUIREMENTS

I. Comprehensive Certification (c): (Transthoracic, Transesophageal, and Stress)

Applicants must show continued maintenance of skills in transthoracic, transesophageal, and stress echocardiography according to the requirements for each of the three levels of certification.

II. Transthoracic Certification (t):

Requirement 1. Pass the ReASCE

Applicants must pass the ReASCE.

Requirement 2. Diplomate of the NBE through the ASCeXAM

Applicants must be currently certified by the NBE in Echocardiography through the ASCeXAM.

Requirement 3. Current License to Practice Medicine

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.)

Requirement 4. Continued Maintenance of Skills in Echocardiography

The applicant must have provided echocardiography services for at least 400 2-Dimensional Echo/Doppler studies per year for two (2) of the three (3) years immediately preceding this application.

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 5. Continuing Medical Education Specific to Echocardiography

Applicants must have at least 15 hours of AMA category 1 continuing medical education devoted to echocardiography obtained during the three (3) years immediately preceding this application.

REQUIRED DOCUMENTATION

Comprehensive Certification (c): See explanation of requirements and documentation on pages 7 and 8 for transthoracic, transesophageal, and stress certification. You must meet each of these requirements to be eligible for Comprehensive Certification.

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 required must fall within the 12 months prior to receipt of the complete application.

Applicant must supply all required documentation for maintenance of skills.

Indicate current level of certification on application.

A copy of current medical license renewal certificate that shows the expiration date.

Transthoracic Certification (t): An original notarized letter typed on appropriate letterhead verifying the number of 2-D Echo/Doppler studies performed per year for each of the two (2) or three (3) years preceding this application must be provided as appropriate (see Letters Documenting Level of Service: page 6).

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.

A copy of certificate(s) or documentation from the institution providing CME credits documenting 15 hours of AMA category 1 CME devoted to echocardiography. For meetings not devoted only to echocardiography, applicants must indicate on the copy of the certificate how many hours were devoted to echocardiography.

Board Certification Requirements

BOARD CERTIFICATION REQUIREMENTS

III. Transesophageal Echocardiography Certification

Certification in transesophageal echocardiography is available in two forms.

1. Transthoracic and Transesophageal Echocardiography Certification (te) is designed for the cardiovascular clinician providing both transthoracic and transesophageal services.
2. Transesophageal Echocardiography Certification (e) is designed for the cardiovascular anesthesiologist or cardiovascular surgeon whose primary echocardiography service is transesophageal echocardiography.

1. Transthoracic and Transesophageal Echocardiography Certification (te):

In addition to the documentation for transthoracic certification, applicants must show continued maintenance of skills in transesophageal echocardiography.

Performance and interpretation of at least 50 transesophageal echocardiograms per year for two (2) of the three (3) years immediately preceding this application is required.

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.

2. Transesophageal Echocardiography Certification (e):

Applicants meeting Requirements 1, 2, 3, 5, and 6 for Transthoracic Certification may substitute transesophageal experience for transthoracic experience for the purpose of certification in transesophageal echocardiography. This certification is limited to interpretation of diagnostic transesophageal studies and does not imply certification for interpretation of diagnostic transthoracic procedures. Applicants must show continued maintenance of skills in transesophageal echocardiography:

Performance of at least 100 transesophageal echocardiograms per year for two (2) of the three (3) years immediately preceding this application.

IV. Transthoracic and Stress Echocardiography Certification (ts):

In addition to the requirements for transthoracic certification, applicants must show continued maintenance of skills in pharmacologic or exercise stress echocardiography.

Primary interpretation of at least 100 stress echocardiograms per year for two (2) of the three (3) years immediately preceding this application is required.

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.

REQUIRED DOCUMENTATION

Transthoracic and Transesophageal Echocardiography Certification (te): An original notarized letter typed 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) or three (3) years preceding this application as appropriate (see Letters Documenting Level of Service: page 6).

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.

Transesophageal Echocardiography Certification (e): An original notarized letter typed on appropriate letterhead from the Medical Director of the Echocardiography Laboratory (Level III) verifying the number of Transesophageal studies performed for each of the two (2) or three (3) years preceding this application as appropriate (see Letters Documenting Level of Service: page 6).

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.

Transthoracic and Stress (ts): An original notarized letter typed on appropriate letterhead from the Training Director or the Medical Director of the Echocardiography Laboratory (Level III) verifying the number of Stress Echoes performed per year for each of the two (2) or three (3) years preceding this application as appropriate (see Letters Documenting Level of Service: page 6).

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.

Board Certification Requirements for Change in Certification Status

This page applies in the event the applicant does not meet the recertification criteria for TEE or Stress at the time of taking ReASCE.

BOARD CERTIFICATION REQUIREMENTS

I. Additional Recertification in Transesophageal Echocardiography:

Requirement 1.

Applicants must be currently certified by the NBE in Transthoracic or Transthoracic Plus Stress Echocardiography and have previously been granted c or te certification.

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 two (2) of the three (3) years immediately preceding this application.

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 3.

Application Fee \$50.00 (US Funds)

II. Additional Recertification in Stress Echocardiography:

Requirement 1.

Applicants must be currently certified by the NBE in Transthoracic or Transthoracic Plus Transesophageal Echocardiography and have previously been granted c or ts certification.

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 two (2) of the three (3) years immediately preceding this application.

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 3.

Application Fee \$50.00 (US Funds)

REQUIRED DOCUMENTATION

An original notarized letter typed on appropriate letterhead from the Medical Director of the Echocardiography Laboratory (Level III) verifying the number of Transesophageal studies performed for each of the two (2) or three (3) years preceding this application as appropriate (see Letters Documenting Level of Service: page 6).

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.

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

An original notarized letter typed on appropriate letterhead from the Training Director or the Medical Director of the Echocardiography Laboratory (Level III) verifying the number of Stress Echoes performed per year for each of the two (2) or three (3) years preceding this application as appropriate (see Letters Documenting Level of Service: page 6).

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.

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

Online Recertification 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.

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 are in private practice

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:

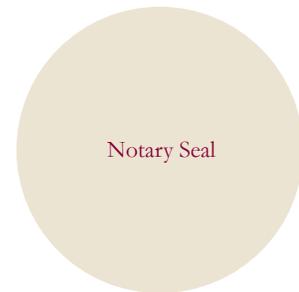
	Year 1 (2014)	Year 2 (2015)	Year 3 (2016)
Transthoracic (93303-93308) *	#####	#####	#####
Transesophageal (93312-93317)*	#####	#####	#####
Stress Echo (93350)*	#####	#####	#####

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 NOT 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. 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.

Sample Letter

For physicians who work in a hospital setting

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:

	Year 1 (2014)	Year 2 (2015)	Year 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 NOT 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. 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.

**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.