



CorHealth Ontario Echocardiography Quality Improvement Program Physician Confirmation and Attestation

PHYSICIAN'S CONFIRMATION OF COMPLIANCE WITH STANDARDS AND ATTESTATION
AND VERIFICATION OF PROFESSIONAL CORE LEVEL TRAINING IN ECHOCARDIOGRAPHY

Instructions: It is the undersigned physician's responsibility to fully complete this Confirmation and Attestation by responding to each question below and providing the information requested. Failure to legibly and fully complete, date and sign this Confirmation and Attestation will render this Confirmation and Attestation null and void. Any changes to the information provided below must be immediately reported in writing to CorHealth Ontario. You may keep a copy of this Confirmation and Attestation for your files and future reference, with the original to be provided to CorHealth.

I, the undersigned, hereby agree to adhere to and comply with the *Standards for Provision of Echocardiography in Ontario*, dated April 2015 as published by CorHealth (the "**Standards**") and which have been provided to me, and hereby certify and attest that I am a member in good standing of The College of Physicians and Surgeons of Ontario and that I have completed all the necessary levels of competency outlined in the Standards, and:

Part I (to be completed by Medical Director of Echocardiographic Laboratory):

1. With reference to Section 4.1 of the Standards, *Standards Regarding the Medical Director*, Standard P1, I am a licensed physician and hold one of the following qualifications (indicate below the applicable level(s)):
 - Level 3 training in echocardiography; or
 - Level 2 training in echocardiography and continuing echocardiography practice including interpretation of at least 1800 Echo/Doppler examinations over the previous 3 years.

2. With reference to Section 4.1 of the Standards, *Standards Regarding the Medical Director*, Standard P1.1:
 - I will not interpret Stress Echocardiographic Examinations; or
 - I will interpret Stress Echocardiographic Examinations and I hold one of the following qualifications (indicate below the applicable level(s)):
 - Level 3 training in echocardiography; or
 - Level 2 training in echocardiography with an additional 3 months of full time training dedicated to Stress echocardiography, during which supervision and interpretation of at least 100 stress examinations occurred.

3. With reference to Section 4.1 of the Standards, *Standards Regarding the Medical Director*, Standard P1.2:
 - I will not interpret Transesophageal Echocardiographic Examinations; or

- I will interpret Transesophageal Echocardiographic Examinations and I hold one of the following qualifications (indicate below the applicable level(s)):
 - Level 3 training in echocardiography; or
 - Level 2 training in echocardiography with an additional 3 months of full time training dedicated to Transesophageal echocardiography, during which performance and interpretation of at least 50 Transesophageal examinations occurred.

Part II (to be completed by Medical Staff of Echocardiographic Laboratory):

1. With reference to Section 4.3 of the Standards, *Standards Regarding Medical Staff*, Standard P7, I am a licensed physician and hold one of the following qualifications (indicate below the applicable qualification(s)):
 - Level 2 or 3 training in echocardiography; or
 - Documented performance in an established laboratory, with interpretation of at least 400 Echo/Doppler studies per year, and maintenance of competence applicable to a Medical Director as set out in Standard P3 for the preceding 3 years.

2. With reference to Section 4.3 of the Standards, *Standards Regarding the Medical Staff*, Standard P7.1:
 - I will not interpret Stress Echocardiographic Examinations; or
 - I will interpret Stress Echocardiographic Examinations and I hold one of the following qualifications (indicate below the applicable level(s)):
 - Level 3 training in echocardiography; or
 - Level 2 training in echocardiography with an additional 3 months of full time training dedicated to Stress echocardiography, during which supervision and interpretation of at least 100 stress examinations occurred.
 - Documented performance in an established laboratory, with interpretation of at least 75 Echo/Doppler studies per year, and maintenance of competence applicable to a Medical Director as set out in Standard P3 for the preceding 3 years.

3. With reference to Section 4.3 of the Standards, *Standards Regarding the Medical Staff*, Standard P7.2:
 - I will not interpret Transesophageal Echocardiographic Examinations; or
 - I will interpret Transesophageal Echocardiographic Examinations and I hold one of the following qualifications (indicate below the applicable level(s)):
 - Level 3 training in echocardiography; or



- Level 2 training in echocardiography with an additional 3 months of full time training dedicated to Transesophageal echocardiography, during which performance and interpretation of at least 50 Transesophageal examinations occurred.

I agree to allow the EQI Program to verify my level of training and experience:

**Name & Contact Information
of Supervising Physician** _____

Agreed, certified and attested to this _____ day of _____, 20_____.

Signature of Physician: _____
Printed Name of Physician: _____
Physician's CPSO Number: _____
Group Number (if applicable): _____
Physician Specialty: _____

**Name & Address
of Physician's Laboratory:** _____

