**ARE YOU READY TO APPLY FOR FASE? Check it out below.**

**U.S. Physician Check List**

**(Please upload this completed checklist with your FASE application)**

**Name:**

**1.** [ ]  **Member of ASE** for current year and previous year (*membership verified by ASE staff*)

**2.**  [ ]  **Proof of Primary or Specialty Board Certification** in ONE of the following areas:

 (Must check one box)

 [ ]  **Anesthesia** - American Board of Anesthesiology (ABA), American Osteopathic Board of

 Anesthesiology (AOBA)

 [ ]  **Cardiovascular Disease** - Cardiovascular Subspecialty Board of the American Board of

 Internal Medicine (ABIM) or American Osteopathic Board of Internal Medicine (AOBIM)

 [ ]  **Pediatric**\* - Pediatric Cardiology Subspecialty Board of the American Board of Pediatrics (ABP)

 [ ]  **Surgery** - American Board of Thoracic Surgery (ABTS) or American Osteopathic Board of

 Surgery in Thoracic and Cardiovascular Surgery

 [ ]  **Radiology** - American Board of Radiology (ABR) or American Osteopathic Board of

 Radiology (AOBR)

 [ ]  **General Vascular Medicine** - American Board of Vascular Medicine (ABVM) or American

 Board of Vascular Surgery (ABVS)

**3.** [ ]  **Proof of ONE of the following**: (Must check one box)

 [ ]  Current **National Board of Echocardiography** Certification in Adult or Perioperative

 Transesophageal Echocardiography (Diplomate status)

 [ ]  Credentialing as **Registered Physicians Vascular Interpretation** (RPVI) if Board certification in General Vascular Medicine (ABVM) or surgery (ABVS)

 **NOTE:** You may only use RPVI certification if certified in General Vascular Medicine or Surgery

 [ ]  **Other subspecialties** will be considered as an exception to the rule and will only be

 considered on a case-by-case basis with prior approval from the FASE Committee, however other board certifications will generally not be accepted.

 Other:

 ***\* NOTE****: Since there is no current certification exam directed towards pediatric echocardiography,*

*board certification in Pediatric Cardiology will suffice for the time being for these applicants.*

**4.** [ ]  **Verification (certificates/transcripts)** of completion of 25 CME hours specific to cardiovascular

 ultrasound in the three years preceding submission of the application (Copies of certificates/transcripts should be included with application.)

**5.** [ ]  **Three supporting letters\*** that reflect that **TWO** of the following requirements are fulfilled.

 Supporting letters and curriculum vitae will be assessed by verifiable participation in **Two** or more of the following three professional activities within the past five years. Letters of support may be uploaded with the FASE application or emailed directly to FASE@asecho.org

 **I am applying under the following criteria** (must select two or more).

 [ ]  **RESEARCH:** **Scientific publications in topics related to cardiovascular ultrasound**. *[In* *order to fulfill this category, participation in the research must have occurred within the last 5 years. For physicians at least one publication is required where you have served as a senior, first, or corresponding author on scientific publications in topics related to cardiovascular ultrasound.]*

***The following types of activities are acceptable:***  *echo related scientific publications in peer-reviewed journals; a section of a text or book in topics related to cardiovascular ultrasound; special cases where you are not listed in the author information but have been integral to the research process. Publication of abstracts or case reports alone do not fulfill this criteria. This information should also be referenced in your CV.*

 Please include citations for your publications in a peer reviewed scientific journal; book chapters related to cardiovascular ultrasound here:

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 [ ]  **EDUCATION:** **Commitment to education in cardiovascular ultrasound as demonstrated on a regular basis by teaching.** *[In order to fulfill this category, active, ongoing participation in education of students, residents, and fellows, other healthcare providers and/or sonographers is required.]*

***The following types of activities are acceptable:*** *regular training and education of students, fellows, residents, sonographers, etc.; writing curricula for a department/lab focused on cardiovascular ultrasound and instituting its use (provide examples); serving as faculty (presenting) at a cardiovascular ultrasound meeting on a CV ultrasound topic.*

 Please outline your teaching obligations and how many hours have been spent participating in teaching activities here:

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 [ ]  **LEADERSHIP/VOLUNTEERING**: **Active participation (outside of attendance) at ASE sponsored activities or other local/regional/international cardiovascular ultrasound societies.**  *[Active participation in other echo-related volunteer activities outside the applicant’s primary employment fulfills these criteria.]*

***The following types of activities are acceptable:***  *serving on ASE committee, task forces and/or Council boards or other volunteers ASE activities such as participating in surveys, serving as an ASE representative at a forum, abstract case reviewer, educational content reviewer, or writing group author; volunteering for a local/regional/national/international cardiovascular ultrasound organization; participating in cardiovascular ultrasound outreach or free screenings aimed at the public or underserved populations.*

***The following types of activities are not acceptable:*** *attending an ASE or other professional conference; volunteering for a rotary club; serving as an officer of the Make a Wish Foundation.*

 Please provide specific examples of how you meet the leadership/volunteering FASE criteria here:

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[ ]  **6**. Up-to-date curriculum vitae (reflective of activities within one year of FASE application) to be included with your application.

**\*SUPPORTING LETTERS:**

Supporting letters and curriculum vitae will be assessed by verifiable participation in TWO or more of the following three professional activities within the past five years. Supporting letters must reflect the FASE requirements and may be submitted from any of the following sources:

* Current FASE member
* ASE Board of Directors, Committee or Council Board members
* Officer of a local, regional, national, or international cardiovascular ultrasound society
* Faculty of an approved or accredited cardiovascular ultrasound program or physician training program
* Medical and/or technical director of an echocardiography lab/program

It is suggested that you provide exact information as to how you meet the FASE criteria to the individuals writing your letters of recommendation.

When you have completed your checklist, please save the document and upload to your FASE application.