



EACVI/EACTAIC TOE RECERTIFICATION

Supervisor Letter Template

Candidate first name:

Candidate last Name:

Candidate ESC ID number:

The candidate's immediate supervisor is to attest that the candidate has performed herself/himself the echocardiographic studies presented to claim for recertification.

To: The EACVI TOE Certification Committee,

I, Dr/Prof. _____ certify that Dr _____

holding an EACVI TOE Certification since _____ and requesting for recertification

in this field, has performed and reported 50 TOE studies on average per year and acquired

at least a total of 50 CME points during the 5 years of his/her EACVI TOE certification,

including 25 CME points specifically in echocardiography.

Date:

Signature (manual or electronic):
(typed or copied-pasted signature will be rejected)

