



## **European Association of Cardiovascular Imaging (EACVI) & European Association of Nuclear Medicine (EANM)**

### **Certification in Nuclear Cardiology**

#### **Confirmation of Report Authenticity**

From: *(Please give full name, qualifications, work address, telephone number and email address)*

To: EACVI/EANM nuclear cardiology certification examiners

I have known *(please add candidate's full name and qualifications)*

professionally for at least 1 year within the last 5 years and I am familiar with their nuclear cardiology practice.

In this year I have been their *(please explain - trainer/ supervisor/ mentor/ manager/ colleague/ etc)*

I confirm that *(s)he* has provided clinical reports on 10 test nuclear cardiology studies by viewing downloaded and reconstructed images independently and without consultation or second opinion on the clinical interpretation. Technical support may have been provided to download and reconstruct the images, but I confirm that the candidate is familiar with the principles of image reconstruction used.

I also confirm that I am authorised independently to provide a clinical service in nuclear cardiology in the course of my primary employment and that I am willing to be contacted to confirm the authenticity of this testimonial.





**EACVI**  
European Association of  
Cardiovascular Imaging



*Please add any additional information that you feel relevant to his/her conduct in reporting the test cases.*

Yours faithfully.

Date:

Signature: *(can be either electronic or written)*

