

EHRA LEVEL 2 CERTIFICATION: CP LOGBOOK
Pacemakers: List of follow ups

Please fill in the required fields:	
- Candidate name & surname:	
- Supervisor:	
- Center, City, Country:	
- Director of Cardiology department:	
Instructions:	
Kindly note logbooks will be checked by ESC Certification Office and will be sent to EHRA graders only if correctly completed according to the instructions.	
<ul style="list-style-type: none"> - Please indicate 50 pacemaker follow-ups performed as first operator. - Candidates should keep a final report of each follow-up (printout or electronic format) to be submitted additionally if requested. - Follow-up date: must be filled in chronological order starting from the oldest. All submitted procedures must have been performed in a 3-year time period, starting from 3 years before to 3 years after the exam. - Patients' initials: Candidates should include only patient's initials and not his/her full name. - Patient Hosp record #: Hospital record number pertaining to the respective patient. - Device type: indicate if SC-PM (single chamber pacemaker) or DC-PM (dual-chamber pacemaker). - Comments: please report any additional information needed. 	

#	Follow-up date	Patients' initials	Patient Hosp record#	Device type	Comments
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You may add more procedures than the 50 requested, but no more than 10 extra cases.

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