

CERTIFICATION

(DEVICES)

PRACTICAL LOGBOOK 2024

Candidate Name:

Examination Registration No.:

INTRODUCTION TO LOGBOOK AND INSTRUCTIONS FOR USE

This logbook supersedes any previous versions and must be used if you have registered to sit the BHRS certification exam in 2020 or after.

The logbook forms part of the requirements for British Heart Rhythm Society certification. It is specifically aimed at practitioners with a particular interest in cardiac device implantation and management. A separate logbook exists for cardiac electrophysiology.

There is only one logbook covering devices. All sections of the logbook must be completed prospectively and submitted within 18 months of your exam date. Logbooks submitted after this date will not be marked unless prior written authorisation for an extension has been granted. Logbook submission is electronic, please review the guidance on the BHRS website.

You must obtain verification of the information and completion of the assessment sections from your supervisor, who must be experienced in device management and ideally hold BHRS certification (previously Heart Rhythm UK certificate of accreditation) or the IBHRE qualification (pacing and devices) or the EHRA CP/AP qualifications. Medical device company representatives will not be accepted as a supervisor.

How to apply for a log-book extension

Only one extension will be awarded for exceptional circumstances. No extension will be awarded retrospectively.

A request for a log book extension must be put in writing and sent to British Heart Rhythm Society, email admin@bhrs.com

SPECIFIC POINTS

The logbook is divided into 3 sections

Section 1: Implanting procedure (as physiologist)

Section 2: Follow-up (as physiologist)

Section 3: Assessments

For doctors / allied health prof completing the log you need to take on the role as a cardiac physiologist for ALL sections of the logbook.

Summary of Information Required

	Number
Section 1: Implants	
Pacemaker Implants	10
ICD / CRT Implants	10
Section 2: Follow-up	
Pacemakers	20
ICD	10
CRT ± ICD	10
Section 2: Skille Accessment	
Section 3: Skills Assessment	2
Implant assessments	3
Follow up assessments	4

BHRS CERTIFICATION: CARDIAC DEVICE LOG BOOK

Candidate Details

Name	
Address	
Contact details Telephone and/or email	
Hospitals In Which W	ork Undertaken
Time Period	Address
Supervisor Details	
Name	
Professional title/position	
Address	
Contact details Telephone and/or email	



SECTION 1: DEVICE IMPLANT PROCEDURE (AS PHYSIOLOGIST)

Section 1

10 pacemaker implants - maximum of 3 leadless pacemakers and a maximum of 3 generator replacements (box changes) may be included.

10 ICD/CRT implants are required of which 5 must include CRT-D devices, a maximum of 2 S-ICDs and a maximum of 3 generator replacements (box changes) which can be either ICD / CRTD / S-ICDs.

Note: No programming strips or ECGs are required to be submitted.

Note: If your PSA does not record slew rates then you can omit this information from your logbook.

Specify patient symptoms, ECG abnormality and aetiology in addition to their codes. Copies of 12 lead ECGs are not required for completion of section 1

Anaesthetic: Local or general. If general, give reason

Vascular access: Subclavian, cephalic, other

Sutures: Vicryl, Ethibond, etc. Specify suture material used for sleeves and wound closure

Antibiotic regimen: Pre and post procedure and peri-procedure (e.g. gentamicin to pocket)



SECTION 1: PACEMAKER IMPLANT (AS PHYSIOLOGIST)

No. 1	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
110. 1	IMPLANT DETAILS	MANUFACTURER AND MODEL PACING PARAMETERS				Complications up to Discharge:
Anaesthe	etic:	Generator:		Atrial	Ventricular	
			Pacing Threshold			
Vascular	Access:		@ 0.5ms (V)			
		Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
Antibiotic	Regimen:					
		Ventricular Lead:	Impedance (Ω)			
Sutures l	Jsed:		Slew rate (Vs ⁻¹)			Final Pacing Mode:
No. 0	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
No. 2	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING F	PARAMETE	RS	Complications up to Discharge:
Anaesthe		Generator:	<u> </u>	Atrial	Ventricular	, , ,
			Pacing Threshold			
Vascular	Access:		@ 0.5ms (V)			
Antibiotic	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
			Immedence (O)			
		Ventricular Lead:	Impedance (Ω)			
Sutures l	Jsed:		Slew rate (Vs ⁻¹)			Final Pacing Mode:
	Date:			<u> </u>	1	
No. 3	Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING F	ARAMETE		Complications up to Discharge:
Anaesthe	etic:	Generator:		Atrial	Ventricular	
Vascular	Acces:	_	Pacing Threshold @ 0.5ms (V)			
vascular	ALLESS.	Atrial Lead:	w v.silis (v)			Follow Up Arrangements:
Antibiotic Regimen:		Autor Educ.	Amplitude (mV)			Tollow op Artungements.
		Ventricular Lead:	Impedance (Ω)			
Sutures l	Jsed:		Slew rate (Vs ⁻¹)			Final Pacing Mode:



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No. 4	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:	
	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING P	ARAMETE	RS	Complications up to Discharge:	
Anaesth	etic:	Generator:		Atrial	Ventricular		
Vascular	Access:	_	Pacing Threshold @ 0.5ms (V)				
		Atrial Lead:				Follow Up Arrangements:	
Antibioti	c Regimen:		Amplitude (mV)				
		Ventricular Lead:	Impedance (Ω)				
Sutures	Used:		Slew rate (Vs ⁻¹)			Final Pacing Mode:	
No. 5	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:	
140. 3	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING PARAMETERS			Complications up to Discharge:	
Anaesth	etic:	Generator:		Atrial	Ventricular		
Vascular	Access:	_	Pacing Threshold @ 0.5ms (V)				
Antibioti	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:	
7	o 1.0 g o	Marticularity	Impedance (Ω)				
Cutumaa	Hand.	Ventricular Lead:	. , ,			Final Pasing Made	
Sutures	Usea:		Slew rate (Vs ⁻¹)			Final Pacing Mode:	
	Date:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:	
No. 6	Patient Initials:	· · · · ·	-				
A 41-	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING P	PARAMETE		Complications up to Discharge:	
Anaesth	etic:	Generator:	De alese There also let	Atrial	Ventricular		
Vascular	Access:		Pacing Threshold @ 0.5ms (V)				
Antibioti	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:	
		Ventricular Lead:	Impedance (Ω)				
Sutures	Used:		Slew rate (Vs ⁻¹)			Final Pacing Mode:	



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No. 7	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	PLANT DETAILS MANUFACTURER AND MODEL PACING PARAMETERS		RS	Complications up to Discharge:	
Anaesth	etic:	Generator:		Atrial	Ventricular	
Vascular	Access:		Pacing Threshold @ 0.5ms (V)			
		Atrial Lead:				Follow Up Arrangements:
Antibioti	c Regimen:		Amplitude (mV)			
		Ventricular Lead:	Impedance (Ω)			
Sutures	Used:		Slew rate (Vs ⁻¹)			Final Pacing Mode:
	Date:	Ta	T-001 1 10 1			
No. 8	Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING F	PARAMETE	<u>RS</u>	Complications up to Discharge:
Anaesth	etic:	Generator:		Atrial	Ventricular	
Vascular	Access:		Pacing Threshold @ 0.5ms (V)			
Antibioti	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
711111111111	g		Impedance (Ω)			
		Ventricular Lead:	1 • • • • • • • • • • • • • • • • • • •			
Sutures	Used:		Slew rate (Vs ⁻¹)			Final Pacing Mode:
	Date:		T			
No. 9	Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING F	ARAMETE		Complications up to Discharge:
Anaesth	etic:	Generator:		Atrial	Ventricular	
Vascular	Access:		Pacing Threshold @ 0.5ms (V)			
Antibioti	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
		Ventricular Lead:	Impedance (Ω)			
Sutures	Used:		Slew rate (Vs ⁻¹)			Final Pacing Mode:



No. 10	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:	
	IMPLANT DETAILS	MANUFACTURER AND MODEL	PACING P	ARAMETE	<u>₹\$</u>	Complications up to Discharge:	
Anaesthe	tic:	Generator:		Atrial	Ventricular		
Vascular	Access:		Pacing Threshold @ 0.5ms (V)				
Antibiotic	Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:	
		Ventricular Lead:	Impedance (Ω)				
Sutures U	Jsed:		Slew rate (Vs ⁻¹)			Final Pacing Mode:	



SECTION 1: ICD/CRT IMPLANT (AS PHYSIOLOGIST)

No. 1	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PAI	RAMETERS	Complications up to Discharge:
Anaesthe	tic:	Generator:		Atrial	Ventricular	
Vascular	Access:	-	Pacing Threshold @ 0.5ms (V)			
		Atrial Lead:				Follow Up Arrangements:
Antibiotic Regimen:			Amplitude (mV)			
		RV Lead & LV Lead:	Impedance (Ω)			
Sutures u	sed:		Slew rate (V/sec)			Final Pacing Mode:
	LV lead placement: heter(s) used: l:					•

Date: No. 2 Patient Initials:		Symptom Implant Code:	ECG Implant Code:		Aetiology Implant Code:	
NO. 2	IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PARA	AMETERS	Complications up to Discharge:
Anaesthe	tic:	Generator:		Atrial	Ventricular	
Vascular .	Access:		Pacing Threshold @ 0.5ms (V)			
Antibiotic	: Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
		RV Lead & LV Lead:	Impedance (Ω)			
Sutures u	ised:		Slew rate (V/sec)			Final Pacing Mode:

Details of LV lead placement: Guide catheter(s) used:

Vein used:



No. 3	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PA	RAMETERS	Complications up to Discharge:
Anaesthe	etic:	Generator:		Atrial	Ventricular	
Vascular	Access:	_	Pacing Threshold @ 0.5ms (V)			
Antibioti	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
		RV Lead & LV Lead:	Impedance (Ω)			
Sutures	used:		Slew rate (V/sec)			Final Pacing Mode:
	f LV lead placement: theter(s) used: d:	<u>'</u>	1			1

Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:		Aetiology Implant Code:	
IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PAR	RAMETERS	Complications up to Discharge:
tic:	Generator:		Atrial	Ventricular	
Access:		Pacing Threshold @ 0.5ms (V)			
Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
	RV Lead & LV Lead:	Impedance (Ω)			
sed:		Slew rate (V/sec)			Final Pacing Mode:
	Patient Initials: IMPLANT DETAILS tic: Access: Regimen:	Patient Initials:	Patient Initials:	Patient Initials:	Patient Initials:

Details of LV lead placement: Guide catheter(s) used:

Vein used:



Date: No. 5 Patient Initials:		Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:
	IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PA	RAMETERS	Complications up to Discharge:
Anaesthe	etic:	Generator:		Atrial	Ventricular	
Vascular	Access:	_	Pacing Threshold @ 0.5ms (V)			
Antibiotic	c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
		RV Lead & LV Lead:	Impedance (Ω)			
Sutures (used:		Slew rate (V/sec)			Final Pacing Mode:
	f LV lead placement: theter(s) used: d:		•			

		ECG Implant Code:			Aetiology Implant Code:
IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PA	RAMETERS	Complications up to Discharge:
tic:	Generator:		Atrial	Ventricular	
Access:	_	Pacing Threshold @ 0.5ms (V)			
c Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:
	RV Lead & LV Lead:	Impedance (Ω)			
used:		Slew rate (V/sec)			Final Pacing Mode:
	Patient Initials: IMPLANT DETAILS tic: Access: Regimen:	Patient Initials: MANUFACTURER AND MODEL	Patient Initials: IMPLANT DETAILS	Patient Initials: IMPLANT DETAILS	Patient Initials: IMPLANT DETAILS

Details of LV lead placement: Guide catheter(s) used:

Vein used:



No. 7	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:		
	IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PAR	RAMETERS	Complications up to Discharge:		
Anaesthe	tic:	Generator:		Atrial	Ventricular			
Vascular	Access:	_	Pacing Threshold @ 0.5ms (V)					
Antibiotio	: Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:		
		RV Lead & LV Lead:	Impedance (Ω)					
Sutures (ised:		Slew rate (V/sec)			Final Pacing Mode:		
	LV lead placement: theter(s) used: d:		•					

Date:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code: Complications up to Discharge:	
IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PA	RAMETERS		
tic:	Generator:		Atrial Ventricular			
Access:		Pacing Threshold @ 0.5ms (V)				
Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:	
	RV Lead & LV Lead:	Impedance (Ω)				
used:		Slew rate (V/sec)			Final Pacing Mode:	
	Patient Initials: IMPLANT DETAILS tic: Access: Regimen:	Patient Initials: MANUFACTURER AND MODEL	Patient Initials: IMPLANT DETAILS MANUFACTURER AND MODEL tic: Pacing Threshold @ 0.5ms (V) Access: Atrial Lead: Regimen: Amplitude (mV) Impedance (Ω)	Patient Initials: MANUFACTURER AND MODEL PACING PAC	Patient Initials:	

Details of LV lead placement: Guide catheter(s) used: Vein used:



No. 9	Date: Patient Initials:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:		
	IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PAR	RAMETERS	Complications up to Discharge:		
Anaesthe	tic:	Generator:		Atrial	Ventricular			
Vascular	Access:	_	Pacing Threshold @ 0.5ms (V)					
Antibiotic	: Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:		
		RV Lead & LV Lead:	Impedance (Ω)					
Sutures ι	ised:		Slew rate (V/sec)			Final Pacing Mode:		
	LV lead placement: theter(s) used: d:		•					

	Date:	Symptom Implant Code:	ECG Implant Code:			Aetiology Implant Code:	
No. 10	Patient Initials: IMPLANT DETAILS	MANUFACTURER AND MODEL		PACING PA	RAMETERS	Complications up to Discharge:	
Anaesthe	tic:	Generator:		Atrial			
Vascular	Access:		Pacing Threshold @ 0.5ms (V)				
Antibiotic	: Regimen:	Atrial Lead:	Amplitude (mV)			Follow Up Arrangements:	
		RV Lead & LV Lead:	Impedance (Ω)				
Sutures u	used:		Slew rate (V/sec)			Final Pacing Mode:	

Details of LV lead placement: Guide catheter(s) used: Vein used:



SECTION 2: PACEMAKER FOLLOW-UP (AS PHYSIOLOGIST)

No.	Implant Date	FU Date	Patie nt Initial s	Generator (Manufacturer and model)	Amp	litude	Pac Thre	cing shold	Imped	dance	Bat Measu s (if av	tery rement ailable)	Wound Site OK?	Describe any parameters reprogrammed?	Pacing Mode	Supervis or Initials
					Α	V	Α	V	Α	٧	lmp	V				
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																



No.	Implant Date	FU Date	Patie nt Initial s	Generator (Manufacturer and model)	Amp	litude	Pac Thres	cing shold	Impe	Impedance		Battery Measurement s (if available)		Describe any parameters reprogrammed?	Pacing Mode	Supervis or Initials
					A	V	Α	V	A	V	Imp	V				
12																
13																
14																
15																
16																
17																
18																
19																
20																



SECTION 2: ICD FOLLOW-UP (AS PHYSIOLOGIST)

No.	Device	Implant Date	FU Date	Patient Initials	Generator (Manufacturer	Ar	nplitu	de	F Th	Pacing) old	lm	pedar	псе	Wound Site	Describe any parameters reprogrammed?	Pacing Mode	Supervisor Initials
		Date		initials	and model)	Α	RV	LV	Α	RV	LV	Α	RV	LV	OK?	reprogrammed:	Wode	miliaio
1	ICD																	
2	ICD																	
3	ICD																	
4	ICD																	
5	ICD																	
6	ICD																	
7	ICD																	
8	ICD																	
9	ICD																	
10	ICD																	



SECTION 2: CRT(D/P) FOLLOW-UP (AS PHYSIOLOGIST)

No.	Device	e Implant Date	FU Date	Patient Initials	inter a livialiulacturei allu	Ar	nplitu	de	F Th	Pacing	g old	Impedance		Wound Site OK?	Describe any parameters reprogrammed?	Pacing Mode	Supervisor Initials	
		Date		mitiais	model)	Α	RV	LV	Α	RV	LV	Α	RV	LV	Oile Oil	reprogrammed:	Mode	milaio
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		



SECTION 3: DUAL CHAMBER PACEMAKER IMPLANT MEASUREMENTS - SKILLS ASSESSMENT

Assessor:			Date:
	Assessment:	1 - 3 Unsatisfactory 4 - 6 Satisfactory	
	(0 not applicable)	7 - 9 Above expected	
	SKILL	ASSESSMENT (AS PER KEY)	
	PSA Connections		
	A and V lead impedance		
	R Wave measurement		
	Ventricular threshold test		
	Explanation of Wedensky effect		
	P Wave measurement		
	Atrial threshold test		
	Stability		
	10V		
Assessor comments (You must ju	stify each score of 1 – 3 with at least one	e explanation / example):	



SECTION 3: ICD IMPLANT MEASUREMENTS - SKILLS ASSESSMENT

Assessor:			Date:
	Assessment:	1 - 3 Unsatisfactory 4 - 6 Satisfactory	
	(0 not applicable)	7 - 9 Above expected	
	SKILL	ASSESSMENT (AS PER KEY)	
	Kit selection		
	Device set-up pre-implant		
	Implant forms completion		
	P and R wave measurement		
	A and V lead impedance		
	A and V threshold tests		
	Device measurements		
	VF induction		
	Post-implant set-up		
Accessor comments (Vou must ince	tify each score of 1 – 3 with at least on	o evaluation / evample):	
Assessor comments (You must just	uny each score or 1 – 3 with at least off	е ехріапацоп / ехатіріе).	



SECTION 3: CRT IMPLANT MEASUREMENTS – SKILLS ASSESSMENT

Assessor:			Date:
	Assessment:	Unsatisfactory Satisfactory	
	(0 not applicable)	Above expected	
	SKILL	ASSESSMENT (AS PER KEY)	
	Kit selection		
	Coronary vein identification		
	PSA connections		
	A, RV and LV signal measurement		
	A, RV and LV lead impedance		
	Atrial threshold test		
	RV threshold test		
	LV threshold test		
	VF induction		
	Post-implant set-up		

Assessor comments (You must justify each score of 1 – 3 with at least one explanation / example):



SECTION 3: DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS)

Instructions for assessor(s)

Please mark each component of the exercise on a scale of 1 (extremely poor) to 9 (extremely good). A score of 1 - 3 is considered unsatisfactory, 4 - 6 satisfactory and 7 - 9 is considered above that expected

Please note that your scoring should reflect the performance of the trainee against that which you would reasonably expect at their stage of training and level of experience

You must justify each score of 1 - 3 with at least one explanation/example in the comments box, failure to do so will invalidate the assessment

Please feel free to add any other relevant opinions about the trainee's strengths and weaknesses in the space provided

SKILLS ASSESSMENT (FOR FOLLOW-UP PROCEDURES)

- Single chamber pacemaker
- Dual chamber pacemaker
- ICD
- CRT (P or D)



SECTION 4: SINGLE CHAMBER PACEMAKER FOLLOW UP - SKILLS ASSESSMENT

1. Inter	acts app	oropriate	ly with s	taff in pa	cing clin	ic			
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
2. Prep	oares pa	tient app	ropriatel	ly					
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
3. Obta	ains clini	cal histo	ry						
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
4. App	ropriate	R/P wav	e meası	ırement					
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
5. App	ropriate	lead imp	edance	measure	ement				
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
6. App	ropriate [·]	threshol	d test						
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
7. App	ropriate	retrograd	de condu	uction ch	eck				
N/A	1	2	3	4	5	6	7	8	9
	Unsatisfactory Satisfactory Above expected								



8. Appr	8. Appropriate diagnostics interpretation										
N/A	N/A 1 2 3 4 5 6 7 8 9										
	Unsatisfactory			S	atisfacto	ry	Above expected				

9. Rep	9. Reprogramming / recommendations										
N/A	N/A 1 2 3 4 5 6 7 8 9										
	Unsatisfactory			S	atisfacto	ry	Above expected				

10. Ov	10. Overall technical ability										
N/A	N/A 1 2 3 4 5 6 7 8 9										
	Unsatisfactory			S	atisfacto	ry	Above expected				

Assessors comments on trainee's performance	e on this occasion:	

Trainee's comments on their performance on this occasion:	

Signature of trainee:

Signature of supervisor:

Date:



SECTION 3: DUAL CHAMBER PACEMAKER FOLLOW UP - SKILLS ASSESSMENT

1. Inter	acts app	oropriate	ly with s	taff in pa	cing clin	ic			
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
2. Prep	oares pa	tient app	ropriatel	y					
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
3. Obta	ains clini	cal histo	ry						
N/A	1	2	3	4	5	6	7	8	9
	Unsatisfactory Satisfactory Above expected								
4. App	ropriate	R/P wav	e measu	ırement					
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
5. App	ropriate	lead imp	edance	measure	ment				
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
6. App	ropriate	threshol	d test						
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted
,			<u>-</u>			-	•	•	
7. App	ropriate	retrogra	de condu	iction ch	eck				
N/A	1	2	3	4	5	6	7	8	9
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted



8. Appr	8. Appropriate diagnostics interpretation										
N/A	1 2 3 4 5 6 7 8 9										
	Unsatisfactory			S	atisfacto	ry	Above expected				

9. Rep	9. Reprogramming / recommendations										
N/A	N/A 1 2 3 4 5 6 7 8 9										
	Unsatisfactory			S	atisfacto	ry	Above expected				

10. Ov	10. Overall technical ability										
N/A	N/A 1 2 3 4 5 6 7 8 9										
	Unsatisfactory			S	atisfacto	ry	Above expected				

Assessors comments on trainee's performance on this occasion:

rainee's comments on their performance on this occasion:

Signature of trainee:

Signature of supervisor:

Date:



SECTION 3: ICD FOLLOW UP - SKILLS ASSESSMENT

1 Inter	racts and	ronriate	ly with s	taff in pa	cina clini	ic				
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	
O D		4: 4		12				-		
	pares pa	tient app	ropriatei 3		5	6	7	0	0	
N/A	1 			4	Satisfactory			8	9 otod	
	Ull	satisfact	Ory	3	alisiacio	ıy	Abo	ve expe	cieu	
3. Obta	ains clini	cal histo	ry							
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	Above expected		
1 Ann	ropriato	diagnest	ice inter	orototion						
N/A	10priate	2	3	oretation 4	5	6	7	8	9	
IN/A	l In	satisfact		-	atisfacto		· -	ve expe		
	011	Satisiact	ОГУ		atioiacto	ı y	7100	ve expe	olou	
5. App	ropriate	arrhythm	nia interp	retation						
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	Satisfactory			Above expected		
6 App	ropriate	R/P wav	e measi	ırement						
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	
	. ,			•			•	•		
	ropriate	lead imp		measure		0				
N/A	1	<u>2</u>	3	4	5	6	7	8	9	
	Un	satisfact	огу	l S	atisfacto	гу	Abo	ve expe	ciea	
8. App	ropriate	shock le	ad impe	dance m	easurem	ent				
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	



9. App	ropriate	threshol	d test						
N/A	1	2	3	4	5	6	7	8	9
	Unsatisfactory			S	atisfacto	ry	Above expected		
10. Re	program	ming / re	ecomme	ndations					
N/A	1	2	3	4	5	6	7	8	9
	Unsatisfactory		Satisfactory			Above expected			

11. Ov	erall tecl	nnical ab	oility						
N/A	1	2	3	4	5	6	7	8	9
	Unsatisfactory			S	atisfacto	ry	Abo	ve expe	cted

Assessors comments on trainee's performance on this occasion:
Traince's comments on their performance on this accession.
Trainee's comments on their performance on this occasion:

Signature of trainee:

Signature of supervisor:

Date:



SECTION 3: CRT FOLLOW UP – SKILLS ASSESSMENT

1. Inter	racts app	propriate	ly with s	taff in pa	cing clin	ic				
N/A	1	2	3	4				7 8 9		
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	
				1						
		tient app				Γ	7			
N/A	1	2	3		4 5 6			8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	
3. Obta	ains clini	cal histo	rv							
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	orv	S	atisfacto	rv	Abo	ve expe	cted	
	I			l			I			
4. App	ropriate	diagnost	ics inter	pretation						
N/A	1	2	3	4	5	6	7	8	9	
	Unsatisfactory			Satisfactory			Above expected			
		arrhythm		1						
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	Satisfactory Above expected					cted	
6. App	ropriate	R/P wav	e meası	ırement						
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	
	ropriate			measure						
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Abo	ve expe	cted	
8. App	ropriate	shock le	ad impe	dance m	easurem	ent				
N/A	1	2	3	4	5	6	7	8	9	
14,71	Un	satisfact	_		Satisfactory			Above expected		
		231131301	<u> j</u>			. ,	, ,,,,,	. 5 C//PO		



9. App	ropriate t	threshol	d test							
N/A	1	2	3	4	5	6	7	8	9	
	Un	satisfact	ory	S	atisfacto	ry	Above expected			
10. Re	program	ming / re	ecomme	ndations						
N/A	1	2	3	4	5	6	7	8	9	
	Unsatisfactory		S	atisfacto	ry	Above expected				

1	1. Ov	erall tecl	nnical ab	ility							
	N/A	1	2	3	4	5	6	7	8	9	
		Unsatisfactory			S	atisfacto	ry	Above expected			

Assessors comments on trainee's performance on this occasion:
Traince's comments on their performance on this accession.
Trainee's comments on their performance on this occasion:

Signature of trainee:

Signature of supervisor:

Date: