



THE SOCIETY FOR
VASCULAR TECHNOLOGY OF
GREAT BRITAIN AND IRELAND

CPD Audit: Clinical Activity Summary Sheet

Surname

DILSHAD

First Name

ASIA

SVT Number

506

Clinical Activity: 1st Sept 2016 – 31st Aug 2017

Name of Department where main clinical work was undertaken for this period:

VASCULAR LAB UNCW

Line Manager for this period

CARL TIIVAS

Number of scans in area	<50	51-99	100-149	150-200	>200
Carotid Duplex					/
Arterial Duplex					/
Venous Duplex					/

Clinical Activity: 1st Sept 2017 – 31st Aug 2018

Name of Department where main clinical work was undertaken for this period:

VASCULAR LAB UNCW

Line Manager for this period

CARL TIIVAS

Number of scans in area	<50	51-99	100-149	150-200	>200
Carotid Duplex					/
Arterial Duplex					/
Venous Duplex					/

Clinical Activity: 1st Sept 2018 – 31st Aug 2019

Name of Department where main clinical work was undertaken for this period:

VASCULAR LAB UNCW

Line Manager for this period

CARL TIIVAS

Number of scans in area	<50	51-99	100-149	150-200	>200
Carotid Duplex					/
Arterial Duplex					/
Venous Duplex					/

AVS registrant – please complete

This is a true statement of my participation in Clinical activity for the periods shown.

Signed:

Dilshad

Date:

29/7/19

AVS Member's line manager – please complete

I agree that this is a true declaration of this registrant's participation in Clinical activity for the periods shown

Name:

CARL TIIVAS

Position:

HEAD OF VASCULAR LAB.

AVS: ☒ Yes / No

SVT Number: 261

Signed:

Carl Tiivas

Date:

31/7/19

AVS Member's Vascular Consultant Surgeon – please complete

I agree that this member is clinically competent in vascular ultrasound

Name:

Saiga Syed

Position:

Consultant vascular

Hospital:

UNCW

Contact email:

Saiga.Syed

Signed:

Saiga Syed

Date:

29/7/19

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