

EVIDENCE TO BE CONSIDERED PRIOR TO ISSUE OF CERTIFICATION PART 3 ONLY TO BE SUBMITTED FOLLOWING COMPLETION AND PROCESS OF PART 1.

PA	PART 3						
1.	1 Dlagge complete the forms in black ink in DLOCK CADITALS or by electronic manner						
1.	Please complete the form in black ink in BLOCK CAPITALS or by electronic means.						
2.	Name: MARGARET BARLOW						
_	-						
3.						from mentor/peer and submission of	
	clinical log ev	idencing 10	0 scans (PART 3	<u>SUMML</u>	ATIVE ASSESS	SMENT))	
4.	Completed form	e chould be r	eturned to: Dorothy	Davidso	n School of Hea	Ith and Life Sciences, Glasgow Caledonian	
٦.			Glasgow G4 0BA. Te			ini and the belenous, diasgow caledonium	
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5.						cation will be entered onto the University's	
	Act 1998.	s. At all times u	se of this data will be	strictly i	n accordance with i	he principles laid down by the Data Protection	
	1100 1990.						
NA	ME AND ADDR	ESS					
SU	RNAME/FAMILY	NAME	BARLOW		PERSONAL DETAILS		
FOl	RENAMES		MARGARET	ARGARET			
TIT	LE(Mr/Mrs/Miss/	Ms)	MRS				
CO	RRESPONDENCI	E ADDRESS			Date of Birth (Day	y/Month/Year) 12/05/64	
29 7	THE PADDOCK	eses si e e e e			Years	54	
PEI	RCETON				Country of Birth	Scotland	
Irvi	ne a salas a s				Nationality	British	
Pos	tcode	KA112AZ			How long have you been a resident in the UK		
Telephone Number 07790072447		7		(insert life if appropriate) life			
	-			<u> </u>			
PE	RMANENT HON	1E ADDRESS					
Asa	above						
25.0	tcode	<u>a el kelali elik alet.</u> Tata basa di Basa	<u>Najate kanaliki ilijalika</u> Terresia		Telephone No. 00	790072447	
	ail Address	Margaret Rark	ow@aapct.scot.nhs.u	lr	101001101101101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
17111	an radioss	Wingar Ct. Duri	o " (Gaapet. Scot. mis. a	<u> </u>			
			ontones Establishmen en e	esilak kries			
Title of Programme AAA Screening Programme (EXPERIENCED SCREENERS)							
		*. 1	g Flogramme (EXFE	ENTENCE	D SCREENERS)		
Application for entry in							
TON OFFICE A VICE ONLY							
	FOR OFFICIAL USE ONLY						
ISSUE AAA CERTIFICATE:							
VI 21	DOWN-DOWN	<u>1</u>		ing production and other transfer	¥		
YES							
					and the set worked		

PART 3 SUMMATIVE ASSESSMENT.

MUST be completed by trainee and mentor/peer assessor and returned to GCU prior to issue of certification.

Date	Log Ref No	Normal	ABNORMAL AAA MEASUREMENT	Comments		
26/7/17	1	./	ividition in the second	PASS		
minowi	2	/		FAIL -> Incomplete APL image Misplaced postener APL col		
))	3	./		PASS		
3)	4			FAIL > APT collibres need to be more		
1)	5			F-> APL collibre misplaced.		
1)	6			PASS		
1)	7			PASS		
))	8			PASS		
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33	10	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		PASS		
	11			PASS		
j)	12			PASS		
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11	44		:	PASS .		
13	45	/		PASS		
))	46		1444	PASS .		
		*				

Date	Log Ref No	Normal	ABNORMAL AAA MEASUREMENT	Comments
Unknow	T		WILASOREMENT	PASS
UNICHOUS	48			PASS
))	49			PASS
311	50			
))	51	V	3.4cm	PASS
	52		3.4.6141	PASS
1)	53	V		PASS
D D	54		3.5cm	PASS
			3.8cm	PASS
-1)	55	- V		PASS
11	56			PASS
W.	57			PASS
)	58			PASS
2/11/17	59		5.0cm	PASS
Unknown	60	<i>V</i>		PASS
41	61			PASS
13	62	•		PASS
H	63	/		PASS
1)	64			PASS
31	65	/		PASS
7.]	66	V	5.0cm	PASS
11	67			PASS
17	68			PASS
71	69			PASS *
11	70	V /		
	71	V		PASS
13	72			PASS
)1	:			PASS
))	73		4-lcm	PASS
))	74			PASS
Jì .	75			PASS
)) ·	76			PASS
1,5	77		4.6cm	PASS
1)	78			PASS
3.)	79	V	•	PASS
12	80	V		PASS
) 1	81			PASS
11	82	/		PASS
))	83	/		PASS
))	84	i/		PASS
))	- 85	1		PASS
))	86	/		PASS
))	87		4-1cm	PASS
})	88		-v 1 1 1 3	PASS
),	89			PASS
·//	90	- 		
))	91	- V	· · · · · · · · · · · · · · · · · · ·	PASS
	92	- V		PASS
))))	93		4.7cm	PASS
	94			Pass
31	95		5.1cm	PASS
))			3.2cm	PASS
))	96	/		PASS
11	97			PASS
11	98			PASS
)1	99	- V		PASS
1)	100			PASS

Date	Log Ref No	Normal	ABNORMAL AAA MEASUREMENT	Comments
wilnown	101		3.8cm	PKSS
))	102_		4.3cm	PASS
ì>	103		3-0cm	PASS
))	104		4.9cm	PASS
11	105		3.5cm	PASS
3.)	106		5.6cm	PASS
, 1	107			PASS
33	108		4 7cm	PASS
6.6	109		4.4cm	PASS
Total	109			

I certify that I have completed the 100 inner to inner aortic diameter measurements which have been reviewed by my mentor / peer assessor in line with QA audit tool. A record of the 100 scans is provided above. These have been stored for easy access should further evidence be required.									
Trainee Signature	Margaret Barlow	Date:	24/05/2018						
					,				
Mentor / Peer	Heather Griffiths								
assessor Signature	101111	Date:	4/6/18.						