

## Reference Request to Current Line manager

### Applicant's name: David Barrett

Applicants current job title

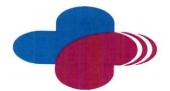
Applicants current Employer/Hospital

The above named applicant has applied to sit the SVT practical examination. This is the final assessment on the route to becoming an Accredited Vascular Scientist. Applicants must fulfil certain eligibility criteria before they are entitled to sit the examination. The applicant has proposed that as their current line manager you can help confirm their eligibility. We would be grateful if you could fill in the details below.

Trainee Clinical Vascular Scientist

Applicants must be currently employe	in the UK or Ireland to perform vascular	ultrasound diagnostic investigations
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Applicants current Employer/Hospital	Independent Vascular Services (based University Hospital of South Manchester)						
Start date of applicants current job	17/06	5/2019					
Applicants current weekly hours working in vascular ultrasound diagnostic scanning	37.5			•			
How long have you known the applicant?	3 yea	rs	A 1				
Applicants start date of UK or Ireland employment	17/06	5/2019					
Applicants must have performed a minimum numb modalities listed below has the applicant performe	per of so	cans and ABPIs.	Approximately ho	w many scans in e	each of the core		
Bilateral duplex of carotid and vertebral arteries	0□	1 – 100□	101-300	301-600 □	>600./		
Single leg duplex of arteries (aorta-TPT, inc iliacs)	0 🗆	1-100	101-300	301-600 □	>600√ >600√		
Single leg duplex of arteries (aorta-ankle)	0	1 − 100□	101-300 🗆	301-600 □	>600√		
Single leg graft duplex	0	1 − 100□	101-300 ✓	301-600	>600□		
Single leg duplex of primary varicose veins	0	1 − 100□	101-300 🗆	301-600 ✓	>600□		
Single leg duplex of recurrent varicose veins	0	1 − 100□	101-300 □	301-600 ✓	>600□		
Ankle Brachial Pressure Indices-bilat	0	1-100	101-300 🗆	301-600 □	>600√		
ABPI pre+post exercise-bilat	<b>0</b> □	1 − 100□	101-300 🗆	301-600 🗆	>600√		
Please include any other comments you may have	(please co	ontinue on the rever	se of the page if requir	ed).			
Email Address Katja No			- Onlin		K -		
Signed D	_	t wante					
Designation Defuty (	/el	ations	Directo	, Senie	~ AUS.		
Date 8/8/2022				*			
By signing this form you consent for your information in regards to this reference.	n to be	uploaded to the	SVTGBI website ar	nd for the SVTGBI	to contact you		



# Reference Request to Internal Assessor

Applicant's name: David Barrett

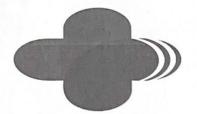
Applicants current job title

Applicants current Employer/Hospital

The above named applicant has applied to sit the SVT practical examination. This is the final assessment on the route to becoming an Accredited Vascular Scientist. Applicants must fulfil certain eligibility criteria before they are entitled to sit the examination. The Education committee has agreed that the nominated internal should confirm the applicant's eligibility. We would be grateful if you could fill in the details below.

Trainee Clinical Vascular Scientist

Applicants current Employer/Hospital		Independent Vascular Services (based University Hospital of South Manchester)				
Start date of applicants current job		17/06/2019				
Applicants current weekly hours working ir vascular ultrasound diagnostic scanning	1	37.5				
How long have you known the applicant?		3 years				
Where applicable please comment on you  Duplex of carotid and vertebral arteries						
Duplex of Carotta and Vertebral arteries  Duplex of lower limb arteries	Poor □ Poor □	Acceptable □	Good □	Excellent 🗆		
Duplex of varicose veins	Poor	Acceptable □ Acceptable □	Good □	Excellent 🖳		
Ankle Brachial Pressure Indices	Poor 🗆	Acceptable   Acceptable	Good □ Good □	Excellent T		
David Writes excellent a of red flag policies  Please include any other comments you m	and h	on to escalate tr.	ructs.	wistina B		
Email Address. hannah - 120 no	ard O	ivs-online-co-ul	<			
Signed AVS for at least 1 year  ✓ Up to date CPD or clinical compete		<b>Print Name</b>		ND		
Designation AVS						
Date 08 108/22	······					
By signing this form you consent for your in in regards to this reference.	formation	to be uploaded to the SVTGE	BI website and for the	SVTGBI to contact you		



#### THE SOCIETY FOR VASCULAR TECHNOLOGY OF GREAT BRITAIN AND IRELAND

#### **Reference Request to Vascular Consultant**

Applicant's name: David Barrett

Applicants current job title

The above named applicant has applied to sit the SVT practical examination. This is the final assessment on the route to becoming an **Accredited Vascular Scientist**. Applicants must fulfil certain eligibility criteria before they are entitled to sit the examination. The applicant has proposed that as their **Vascular Consultant** you can help confirm their eligibility. We would be grateful if you could fill in the details below.

Trainee Clinical Vascular Scientist

Applicants current Employer/Hospital  Start date of applicants current job  Applicants current weekly hours working in vascular ultrasound diagnostic scanning  How long have you known the applicant?		Independent Vascular Services (based University Hospital of South Manchester)  17/06/2019  37.5  June 2019 ~3years											
							Where applicable please comment on yo	ur percept	tion of the	applicant's profi	ciency in the f	ollowing	areas:
							Duplex of carotid and vertebral arteries	Poor 🗆		Acceptable	Good		Excellent V
							Duplex of lower limb arteries	Poor 🗆		Acceptable $\square$	Good		Excellent [
Duplex of varicose veins	Poor 🗆		Acceptable	Good		Excellent 🖳							
Ankle Brachial Pressure Indices	Poor 🗆		Acceptable	Good		Excellent 🗆							
Please include any other comments you re Consutert, sufe	Coll	eague		f the page if requ	ired).								
Email Address gharrism	,6 e	ries	ret.										
Signed	-	Print N	GAR	ETH	HA	MISW							
Designation Corbulant													
Date 18/8/22													
By signing this form you consent for your in regards to this reference.	informatio	n to be up	oloaded to the SV	TGBI website	and for the	e SVTGBI to contact							