

Application Submission Checklist

This document is for first-time Applicants only. Please make sure each Document under the prerequisite or requirement selected is included with your application. Incomplete applications will be returned less the processing fee per examination.

SPI EXAMINATION REQUIREMENT:

	A transcript (see transcript requirements below) reflecting successful completion of a graded general, medical or sonographic college, post-secondary or higher education physics class (with a grade of C or above); OR
	A CME certificate denoting successful completion of a general, medical or sonographic physics seminar, physics review course, or physics correspondence course, denoting a minimum award of 12 ARDMS-accepted CME credits. The certificate must meet ARDMS CME documentation requirements (visit ARDMS.org/CME to view ARDMS-accepted CMEs). The CME credits must be earned within two (2) years prior to application submission. Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID
	must exactly match the first and last names in your ARDMS/APCA record.
Transo	cript Requirements
•	Name of Applicant and school must be printed on the transcript; handwritten information will not be accepted.
•	The class or course name must specifically indicate Physics, Physical Principles and/or Instrumentation in the title and be printed o the transcript. Supplementary information will not be accepted.
•	Transcript can be unofficial or official.
•	If submitting a foreign transcript or degree, a formal course by course foreign transcript evaluation report must accompany the application summary and indicate the aforementioned requirements
•	Transcripts indicating only a number grade must include a grade key printed on the transcript showing the equivalent letter grade. Supplementary information will not be accepted.
•	A grade report will not be accepted in lieu of the transcript (unofficial or official).
PRERI	EQUISITE 1:
	Copy of an official ⁷ transcript from a two-year allied health education program as noted in the Education requirement of this prerequisite. Must state specific number of credits and indicate quarter or semester-based system. Must include graduation information.
	Copy of education program certificate, certification or license.
	Letter from a supervising physician, ARDMS-Registered sonographer/technologist or the educational program director
	indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound
	experience/successful completion of sonography program. For required letter content, please visit <u>ARDMS.org/SampleLetters</u> .
	Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at
	ARDMS.org/CV.
	Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID must exactly match the first and last names in your ARDMS/APCA record.
PRERI	EQUISITE 2:

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Copy of a diploma from an ultrasound/vascular program or copy of an official transcript indicating the date the degree was conferred.
Letter signed by your program director and/or medical director indicating your date of graduation or successful completion of the program ⁴ . Program directors must use the mandatory formatted sample letter, available at ARDMS.org/SampleLetters .
The CV form is not required if the application is submitted and received within one year after successful completion of the program. Otherwise a signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/CV.
Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID

PRERE	EQUISITE 3A:
	Copy of a bachelor's degree or copy of an official ⁷ transcript earned in the U.S. or Canada, or a copy of a formal foreign transcript evaluation report indicating that the degree is equivalent to a bachelor's degree in the U.S. or Canada. Letter from a supervising physician, ARDMS-Registered sonographer/technologist or an educational program director indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound experience/ successful completion of the sonography program. For required letter content, please visit ARDMS.org/SampleLetters .
	Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/CV.
	Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID must exactly match the first and last names in your ARDMS/APCA record.
PRERE	EQUISITE 3B:
	Copy of a bachelor's degree or copy of an official ⁷ transcript earned in the U.S. or Canada or a copy of a formal foreign transcript evaluation report indicating that the degree is equivalent to a bachelor's degree in the U.S. or Canada Letter signed by an education program director verifying length of ultrasound or vascular experience. If program is not completed at the time of application, a letter signed by the program director indicating the graduation date and completion of appropriate clinical ultrasound experience ³ is needed ⁵ . Program directors must use the mandatory formatted student or graduate sample letters, available at ARDMS.org/SampleLetters. The clinical verification (CV) form is not required if the application is submitted and received within one year prior to successful completion of the program, provided that the Applicant has completed 12 months of full-time clinical experience within the program at the time that the application is submitted. Otherwise, a signed and completed clinical
	verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/CV . Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID must exactly match the first and last names in your ARDMS/APCA record.
PRERE	EQUISITE 4A1:
	Copy of medical school diploma or copy of an official transcript indicating the date the degree was conferred. Letter from residency/fellowship program director verifying dates of attendance and completion of a minimum of 800 studies in the area in which you are applying. For required letter content, please visit ARDMS.org/SampleLetters . Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/CV .
	Applicants should maintain a patient log or other record of the 800 studies. This log does not need to be submitted with the application but may be requested as part of a random audit. This documentation should be maintained by the Applicant for at least three (3) years following the date of application submission. Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID must exactly match the first and last names in your ARDMS/APCA record.
PRERE	EQUISITE 4A2:
	Copy of medical school diploma or copy of an official transcript indicating the date the degree was conferred. Letter from supervising physician, ARDMS-Registered sonographer/technologist or educational program director indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound experience/successful completion of sonography program. If you are the supervising physician, you may write your own letter. For required letter content, please visit ARDMS.org/SampleLetters .
	Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at ARDMS.org/CV .
	Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID must exactly match the first and last names in your ARDMS/APCA record.
PRERE	EQUISITE 4B1:
	Copy of formal foreign transcript evaluation report converting the foreign medical degree must indicate that this medical degree is equivalent to a Doctor of Medicine degree in the U.S. or Canada. A listing of organizations that produce individualized, written reports describing each certificate, diploma or degree earned, and specifying its U.S. or Canadian equivalent can be found at ARDMS.org/ForeignTranscripts . If the Applicant has passed all three parts and earned the

	be submitted with a copy of a current, valid MD or DO license from the U.S. or Canada in lieu of the evaluation.
	Letter from residency/fellowship program director verifying dates of attendance and completion of a minimum of 800
	studies in the area in which you are applying. For required letter content, please visit ARDMS.org/SampleLetters .
	Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at
	ARDMS.org/CV.
	Applicants should maintain a patient log or other record of the 800 studies. This log does not need to be submitted with
	the application but may be requested as part of a random audit. This documentation should be maintained by the
	Applicant for at least three (3) years following the date of application submission.
	Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID
	must exactly match the first and last names in your ARDMS/APCA record.
PRERE	EQUISITE 4B2:
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	Copy of formal foreign transcript evaluation report converting the foreign medical degree must indicate that this
	medical degree is equivalent to a Doctor of Medicine degree in the U.S. or Canada. A listing of organizations that
	produce individualized, written reports describing each certificate, diploma or degree earned, and specifying its U.S. or
	Canadian equivalent can be found at ARDMS.org/ForeignTranscripts . If the Applicant has passed all three parts and
	earned the Educational Commission for Foreign Medical Graduates (ECFMG®) certification, a copy of the ECFMG®
	certificate may be submitted with a copy of a current, valid MD or DO license from the U.S. or Canada in lieu of the
	evaluation.
	Letter from supervising physician, ARDMS-Registered sonographer/technologist or educational program director
	indicating a minimum of 12 months of full-time clinical/vascular experience including exact dates of ultrasound
	experience/successful completion of sonography program. If you are the supervising physician, you may write your own
	letter. For required letter content, please visit <u>ARDMS.org/SampleLetters</u> .
	Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at
	ARDMS.org/CV.
	Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID
	must exactly match the first and last names in your ARDMS/APCA record.
PRERE	EQUISITE 5:
	Copy of Active credential identification card or copy of license.
	NLY RCS, RCCS or RVS through Cardiovascular Credentialing International (CCI), or ONLY Sonography, Vascular Sonography or Breast Sonography
thro	ugh American Registry of Radiologic Technologists (ARRT), or DMU through Australasian Society of Ultrasound in Medicine (ASUM).
	Signed and completed clinical verification (CV) form for each appropriate specialty area(s). CV forms are available at
_	ARDMS.org/CV.
	Copy of a non-expired government-issued photo identification (ID) with signature; the first and last names on the ID
_	must exactly match the first and last names in your ARDMS/APCA record.
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Educational Commission for Foreign Medical Graduates (ECFMG®) certification, a copy of the ECFMG® certificate may

NOTES ABOUT THE PREREQUISITES:

³ Clinical ultrasound/vascular experience may be obtained one of two ways: (1) being employed as an ultrasound/ vascular sonographer in a clinical setting for a minimum of 12 months and a minimum of 1,680 hours, or (2) successfully completing a formal, full-time ultrasound/vascular program that is a minimum of 12 months in length, a minimum of 1,680 total program hours, including appropriate clinical and didactic hours, and requires a clinical internship/externship to complete the program. If the total length of the program exceeds 12 months, the Applicant must successfully complete the program in its entirety prior to using the program as documentation of the required clinical ultrasound/vascular experience. Note: the above two options are not applicable to Prerequisite 3B. To apply as a student under Prerequisite 3B, the Applicant must have completed a minimum of 1,680 hours of clinical scanning experience over a minimum of 12 months within the program. It is recommended that an Applicant be directly involved in a minimum of 800 diagnostic cases during his/her clinical experience in each specialty area for which he/she is applying. Clinical diagnostic settings include hospitals, clinics and private practices. ARDMS does not accept volunteer, instructorship, unpaid, barter or veterinarian experience. The time frames in which the education and clinical requirements are met cannot overlap. Additionally, if the Applicant is using an ultrasound program to meet the clinical ultrasound/vascular experience then credits from the program used to meet the educational requirement cannot be transferred into the ultrasound program. This would be considered an overlap and therefore unacceptable. Clinical experience earned to document the education requirement cannot also be used to support the clinical requirement.

- ⁴ The mandatory Prerequisite 2 Application letter (found on <u>ARDMS.org/SampleLetters</u>) is valid for one year from the date of graduation. If the application and appropriate supporting documentation are not received within one year from the date of graduation, after one year of successful completion of the program, the Applicant will need new documentation verifying successful program completion, and a current, completed, signed CV form for each applied-for specialty area will be required. A letter per student is required. First-time Applicants applying under Prerequisite 2 must apply for either the Sonography Principles & Instrumentation (SPI) examination or a specialty area that is included within the programmatically accredited curriculum.
- ⁵ The mandatory Student Prerequisite 3B Application Letter (found on <u>ARDMS.org/SampleLetters</u>), is valid through the expected graduation date. If the student chooses to apply after graduation, then the Graduate Prerequisite 3B Application letter (found on <u>ARDMS.org/SampleLetters</u>) and a current, completed, signed CV form for each applied-for specialty area will be required. A letter per student is required.
- ⁷ Official transcripts may be opened so they can be uploaded into MARDMS or MY APCA account for submission.

Note: ARDMS, in its discretion, may request from you or others information concerning matters that may be relevant to your eligibility for certification and certification status

Documentation (MD licenses, CMEs, etc.) received in a language other than English must include a notarized translation in English and all submitted foreign degrees must be accompanied by a course by course evaluation done by a Foreign Education Transcript Evaluation Organization.

All documents, communications, and other information received by ARDMS become the property of ARDMS and will not be returne