



Application for Initial Certification in CTCA

This application is for those applying for initial certification in CTCA for the following pathways:

- Level A – Pathway 1
- Level A – Pathway 2
- Level B – Pathway 1

Section 1

Personal Details		
Full Name		
Email Address		
Phone Number		
Home Address		
Medical Board of Australia (MBA) Registration Number or Medical Council of New Zealand (MCNZ) Registration Number		
Medicare Provider Number (if registered in Australia)		
Specialty	Cardiology	
	Radiology / Nuclear Medicine	
	Nuclear Medicine	
	Radiology	

Section 2

There are 3 pathways for initial certification. Please ensure you check you meet the requirements before continuing with the application form. Please also refer to the ANZCTCA website for further information <https://www.anzctca.org.au>

Level A Pathway 1

In order to be eligible for Level A under pathway 1 you will need the following:

- Evidence of Fellowship in Cardiology, Nuclear Medicine or Radiology
 - Cardiology - evidence of RACP Fellowship and CSANZ membership or completion of Cardiology training from RACP.
 - Nuclear Medicine - Letter of credentialing for Nuclear Medicine from the Joint Nuclear Medicine Credentialing and Accreditation Committee (JNMCAC) or Medicare letter of confirmation as a consultant physician in Nuclear Medicine.
 - Radiology - evidence of RANZCR Fellowship or Educational Affiliate membership.
- Medical registration with AHPRA or the MCNZ
- Certificate from a CTCA training course (within the last 3 years)
- Logbook with 150 cases supervised by a Level B CTCA specialist:
 - Maximum of 100 library cases
 - Minimum of 50 live cases
 - 25 cases with non-coronary cardiac findings
 - 25 cases with non-cardiac findings

Level A Pathway 2

In order to be eligible for Level A under pathway 2 you will need the following:

- Evidence of Fellowship in Cardiology, Nuclear Medicine or Radiology
 - Cardiology - evidence of RACP Fellowship and CSANZ membership or completion of Cardiology training from RACP.
 - Nuclear Medicine - Letter of credentialing for Nuclear Medicine from the Joint Nuclear Medicine Credentialing and Accreditation Committee (JNMCAC) or Medicare letter of confirmation as a consultant physician in Nuclear Medicine.
 - Radiology - evidence of RANZCR Fellowship or Educational Affiliate membership.
- Medical registration with AHPRA or the MCNZ
- Documentation confirming completion of a cardiac imaging Fellowship (post FRANZCR or FRACP) at an accredited training site for a minimum of 1 year (completed within the last 3 years).

Level B Pathway 1

In order to be eligible for Level B under pathway 1 you will need the following:

- Evidence of Fellowship in Cardiology, Nuclear Medicine or Radiology
 - Cardiology - evidence of RACP Fellowship and CSANZ membership or completion of Cardiology training from RACP.
 - Nuclear Medicine - Letter of credentialing for Nuclear Medicine from the Joint Nuclear Medicine Credentialing and Accreditation Committee (JNMCAC) or Medicare letter of confirmation as a consultant physician in Nuclear Medicine.
 - Radiology - evidence of RANZCR Fellowship or Educational Affiliate membership.
- Medical registration with AHPRA or the MCNZ
- Documentation confirming completion of a cardiac imaging Fellowship (post FRANZCR or FRACP) at an accredited training site for a minimum of 1 year (completed within the last 3 years).

Initial Certification Pathway		
Which pathway are you applying for	Level A Pathway 1 – please complete section 3	
	Level A Pathway 2 – please complete section 4	
	Level B Pathway 1 – please complete section 5	

Section 3

Level A Pathway 1	
<i>Please note that the course must have been completed in the past 3 years and the course certificate provided. No live cases from the course can be included in the logbook.</i>	
<i>For those submitting a logbook, please note that should it contain identifiable patient information it will not be accepted. Where applicants submit logbooks which contain identifiable patient information these will be immediately deleted, and the applicant will be responsible for resubmitting a new version of the logbook with de-identified information.</i>	
Course Provider	
Date Attended (start date)	
Total Course Hours	
Total Interactive Training Hours	
Summary of Course Work – Level A Pathway 1	
Total Hours Course Work / Supervised Training (40 hours minimum)	
Total Hours Interactive ('hands on') workstation training (20 hours minimum included in the Total Hours Course Work 40 hours)	

Case Work – Level A Pathway 1

Please complete the CTCA initial certification logbook template available on <https://www.anzctca.org.au/> before completing this section of the form.

Minimum requirement is a logbook with 150 cases supervised by a Level B CTCA specialist (this can be checked on the [CTCA Specialist Register](#))

- Maximum of 100 library cases (from the course)
- Minimum of 50 live cases (supervised by a Level B)
- 25 cases with non-coronary cardiac findings
- 25 cases with non-cardiac findings
- 50 correlated cases

Please note that all cases must have been completed in the past 3 years and live cases from the course cannot be included in your logbook.

Total Number of CTCA Cases (Minimum 150 cases in the past 3 years)	
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Number of Correlated Cases (minimum 50 cases)	
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Number of Non-coronary Cardiac Findings (minimum 25 cases)	
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Number of Non-cardiac Findings (minimum 25 cases)	
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Total Number Live Scanning Cases (minimum 50 cases) – no live cases from the course can be included in your logbook	
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Please continue the form in section 6

Section 4**Level A Pathway 2**

Please also note that a letter confirming dates of your Fellowship (minimum 1 year) and the proportion of time spent on CTCA will also need to be emailed to ctca@ranzcr.edu.au. It is recommended this letter includes as much information as possible about the CTCA component of your Fellowship. No logbook of cases is required.

Please list the name of the facility you completed your Cardiac Imaging Fellowship at	
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Please enter the date you commenced your Cardiac Imaging Fellowship on	
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Please enter the date you completed your Cardiac Imaging Fellowship on	
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Have you completed more than 40 hours of CTCA training/didactic learning during the Fellowship?	Yes	
	No	

Have you completed more than 20 hours of 'hands on' workstation training in CTCA?	Yes	
	No	

Please continue the form in section 6

Section 5

Level B Pathway 1		
<i>Please also note that a letter confirming dates of your Fellowship (minimum 1 year) and the proportion of time spent on CTCA will also need to be emailed to ctca@ranzcr.edu.au It is recommended this letter includes as much information as possible about the CTCA component of your Fellowship. No logbook of cases is required.</i>		
Please list the name of the facility you completed your Cardiac Imaging Fellowship at		
Please enter the date you commenced your Cardiac Imaging Fellowship on		
Please enter the date you completed your Cardiac Imaging Fellowship on		
Have you completed more than 40 hours of CTCA training/didactic learning during the Fellowship?	Yes	
	No	
Have you completed more than 20 hours of 'hands on' workstation training in CTCA?	Yes	
	No	
Please continue the form in section 6		

Section 6

Declaration
<p>I do solemnly and sincerely declare that</p> <ul style="list-style-type: none"> • I am a Fellow of RANZCR and /or RACP and have attached evidence of such • I am still active in reporting CTCA and am still active in practicing CTCA • I have read and understand the ongoing requirements for me to maintain CTCA specialisation • I understand that if I fail to maintain to meet the requirements within the required timeframe, I forfeit my CTCA specialisation, as will be declared by the Conjoint Committee for the Recognition of Training in CT Coronary Angiography and my name will be removed from the Register of CTCA Specialists on the ANZCTCA website • All information provided, both written and attached, is accurate and complete • I agree to being recertified by the CTCA Conjoint Committee as either a Level A or Level B CTCA Specialist and as such I am required to continue to meet ongoing competency and Continuing Professional Development (CPD) requirements in order to retain such recognition • I have undertaken and declared below the expected CPD requirements • I understand and accept that the CTCA Conjoint Committee may contact a facility, course convener, or Level B CTCA Specialist declared in my logbook in order to confirm my declared CTCA activity. • I agree that the CTCA Conjoint Committee will provide advice of my CTCA Registration status to Medicare Australia (applies to applicants who provide a Medicare Provider number only) • I agree that should my recertification be successful, the CTCA Conjoint Committee will publish my CTCA Accreditation status on the Register of CTCA Specialists on the ANZCTCA website.
Declaration of Requirements
<p><i>Applications filled out incorrectly or inaccurately will not be accepted and will need to be resubmitted.</i></p> <p>Please note the recertification requirements including Continuing Professional Development once initial certification has been approved (a recertification cycle is 3 years). Applicants who wish to convert to a Level B can do so after they have completed their first recertification cycle.</p> <ul style="list-style-type: none"> • Retaining Level A after completing two cycles - 4 hours of cardiac imaging CPD per year in a minimum of 2 out of 3 CPD categories • Entry to Level B (conversion) - 4 hours of cardiac imaging CPD per year in a minimum of 2 out of 3 CPD categories

- Retaining Level B - 6 hours of cardiac imaging CPD per year in a minimum of 2 out of 3 CPD categories

By submitting this application I certify that the statements and information provided in this application are true in every particular.

Application Fees

On submission of this form an invoice will be raised by our finance team and an email sent to you with instructions on how to pay through the MyRANZCR Portal. Please note this may take several weeks to be processed.

Payment of the invoice must be made otherwise there will be delays in the outcome of your application being sent to you. Once payment is received then your application can be finalised.

Initial Certification Applications - \$845.00 (inc. GST)

Recertification Applications - \$460 (inc. GST)

Conversion Applications - \$460 (inc GST)

Supporting Documentation

Please submit this application form and all supporting documentation to the following link: ctca@ranzcr.edu.au

Please note that if documentation is not included or your logbook is not in the correct format, this will delay the processing and possibly the submission of your application for review by the CTCA Committee.

A list of the documentation required for each application type is as follows:

Level A Pathway 1

- Evidence of Fellowship in Cardiology, Nuclear Medicine or Radiology
- Medical registration with AHPRA or the MCNZ
- Certificate from a CTCA training course (completed within the last 3 years)
- Logbook with 150 cases supervised by a Level B CTCA specialist (completed within the last 3 years)

Level A Pathway 2

- Evidence of Fellowship in Cardiology, Nuclear Medicine or Radiology
- Medical registration with AHPRA or the MCNZ
- Documentation confirming completion of a cardiac imaging Fellowship (post FRANZCR or FRACP) at an accredited training site for a minimum of 1 year (completed within the past 3 years).

Level B Pathway 1

- Evidence of Fellowship in Cardiology, Nuclear Medicine or Radiology
- Medical registration with AHPRA or the MCNZ
- Documentation confirming completion of a cardiac imaging Fellowship (post FRANZCR or FRACP) at an accredited training site for a minimum of 1 year (completed within the past 3 years).

Section 7

Signature	
Date	