



CCPU Logbook

ASUM will randomly conduct an audit of submitted logbooks

To be Completed by Candidate

ASUM Membership Number:

Your Name:

Hospital:

Years That the Logbook Spans:

Date of Logbook Submission:

Total Number of Cases:

Number of Positive Cases:

Are 2x Formative & 1x Summative Assessment Forms Also Being Submitted?

To be Completed by ASUM Administrator

Total Number of Cases Verified:

Total number of Positive Cases Verified:

2x Formative & 1x Summative Assessment Forms Received:

Does this Candidate Meet the Requirements to be Awarded the CAHPU Certification?

To be Completed by Logbook Assessor

Assessor's Name:

Qualifications:

Email address:

Date:

To be Completed by Reviewers

Reviewer's Name:

Qualifications:

Email address:

Date:

Reviewer's Name:

Qualifications:

Email address:

Date:

Reviewer's Name:

Qualifications:

Email address:

Date:

Reviewer's Name:

Qualifications:

Email address:

Date:

SCAN TYPES

Column1
AAA
ACUTE SCROTUM
ADVANCED EARLY PREGNANCY
BASIC EARLY PREGNANCY
BASIC ECHOCARDIOGRAPHY IN LIFE SUPPORT
BASIC GYNAECOLOGY
BASIC MONITORING THE FETUS (2ND & 3RD TRIMESTER)
BASIC SOFT TISSUE
BILIARY
BREAST
E-FAST
ENDOCRINE
HEPATIC PROCEDURAL
LUNG
PLEURAL EFFUSION
PROXIMAL DVT
RAPID CARDIAC ASSESSMENT
RENAL HYDRONEPHROSIS AND CALCULI
RHEUMATOLOGY
VASCULAR ACCESS