

Regulations

Certificate in Clinician Performed Ultrasound (CCPU)

Approved by ASUM Board of Directors 02 February 2026

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1.0 INTRODUCTION

The Australasian Society for Ultrasound in Medicine (ASUM) is the premier multidisciplinary not for profit society advancing the clinical practice of diagnostic medical ultrasound for the highest standards of patient care. The Certificate in Clinician Performed Ultrasound (CCPU) is offered by the ASUM as a credential for medical practitioners who are not imaging specialists but who use ultrasound as a diagnostic tool at the point of care. The ASUM Board of Directors will award a CCPU to those candidates who have met the passing standard of all components of the program and have been endorsed by the ASUM CCPU/CAHPU Committee. Except for the neonatal units, all other units are general in nature.

2.0 SCOPE

These regulations pertain to all candidates enrolled in the CCPU as well as all associated supervisors and assessors. It is the responsibility of each candidate and supervisor to ensure they read and understand the CCPU regulations and all other associated ASUM policies. E.g. [The ASUM Code of Conduct and Consent](#) and the [Academic Misconduct / Plagiarism Policy](#). Any requests outside of these regulations will require CCPU/CAHPU Committee approval.

3.0 PURPOSE

The regulations provide all candidates with the framework of training and assessment for medical practitioners using point of care ultrasound, to ensure that the minimum ASUM standard is achieved by all candidates, to improve patient outcomes.

4.0 ELIGIBILITY

Applicants for enrolment into the CCPU must:

- 4.2 Hold a primary medical degree approved by the Board of Directors and the Medical Board of Australia (MBA) or Medical Council of New Zealand (MCNZ)
- 4.3 Be registered with the Australian Health Practitioner Regulation Agency (AHPRA) or with the Medical Council of New Zealand
- 4.4 Be practicing ultrasound in the relevant field of study.

Please note: Some units require additional specific prerequisites as described in the unit.

5.0 ADMISSION

To apply for enrolment into the CCPU, candidates must complete the on-line application and pay the prescribed fee on the ASUM Learn Education Portal.

Additional documentation is required to be included with your application:

5.1 Proof of identity (certified copy) e.g. passport, drivers' licence or photo ID

5.2 Proof of registration in Australia and New Zealand i.e. AHPRA Certificate of Registration or MCNZ Practising Certificate

5.3 Primary Supervisor Declaration form

All applications should be submitted on the ASUM Learn education portal.

Only completed applications will be considered and ASUM reserves the right to refuse or return incomplete applications.

Prospective candidates must identify any already completed components, specifically the accredited course, logbooks, or assessments, at the time of admission, through the Recognition of Prior Learning (RPL) policy (Section 13.0).

CCPU enrolment is valid for three (3) years from the date of enrolment.

6.0 SUPERVISION

A primary clinical supervisor for training, is mandatory for completion of the CCPU. Every scan must be performed under the supervision of the candidates nominated primary supervisor. It is expected that all candidates will have direct supervision in the first instance until the candidate reaches a safe proficiency level to perform and interpret the scan by means of indirect supervision.

A primary supervisor can be nominated if they fulfill one of the following criteria:

6.1. A current CCPU holder in the unit of study held for at least 12 months. Current trainees' must have passed their written exam or be in the Advanced training of their speciality program.

6.2. A current CCPU RCE holder can supervise the FELS unit of study.

6.3. A current DDU holder in the relevant field of study

6.4 A Fellow of the Royal Australian and New Zealand College of Radiologists (FRANZCR)

6.5 A Fellow of the Royal Australasian College of Physicians (Cardiology) (FRACP)**

6.6 A Fellow of the Australasian College for Emergency Medicine (FACEM)***

6.7 A Fellow of the College of Intensive Care Medicine (FCICM)***

6.8 A Fellow of the Australian and New Zealand College of Anaesthetists (FANZCA)***

6.9 A Fellow of the Australasian College of Phlebology (FACP) with 2 years post fellowship ultrasound experience. ****

*All nominees for primary clinical supervisor must hold current registration with AHPRA or MCNZ

**A primary supervisor that meets criteria 6.5 is only eligible to supervise the cardiology units, FELS and RCE.

***A primary supervisor that meets criteria 6.6 to 6.7 is only eligible to supervise the Vascular Access unit.

*** A primary supervisor that meets criteria 6.8 is only eligible to supervise the Nerve Block units.

**** A primary supervisor that meets criteria 6.9 is only eligible to supervise the Lower Extremity Venous Ultrasound unit.

A sonographer registered with the Australian Sonographers Accreditation Registry (ASAR), or the New Zealand Medical Radiation Technologist Board (MRTB) can assist in appropriate supervision and teaching within their scope of practice. Overall supervision must remain with the primary supervisor for the purposes of diagnosis, report writing, clinical reasoning and patient management. The primary supervisor must sign off the logbook and formative and summative assessments.

A nominated primary clinical supervisor must complete the clinical supervisor form for the candidate to submit with the enrolment application. ASUM must be notified of any changes to the nominated primary clinical supervisor due to workplace changes or unit selection.

Please note: Supervisors are reminded to consider patient safety as a primary principle when determining the appropriate level of direct/indirect supervision. Supervisors are reminded of their responsibilities under the Australian Health Practitioner Regulation National Law (National Law) that requires practitioners, employers and education providers to report 'notifiable conduct', as defined in section 140 of the National Law, to the Australian Health Practitioner Regulation Agency (AHPRA), in order to prevent the public being placed at risk of harm.

7.0 ASSESSMENTS

The intention of the CCPU is to ensure a minimum standard is achieved by each candidate to safely undertake the practice and diagnostic application of point of care ultrasound for improved patient outcomes. ASUM has incorporated a variety of assessment tools in the CCPU to validate this standard.

7.1 Unit Quiz

Some units require meeting the passing standard of the unit quiz. This assessment measures theoretical knowledge to the minimum standard expected.

The Applied Physics in Ultrasound unit online course and associated quiz is a prerequisite for all other units and no RPL will be granted for this unit.

7.2 Two (2) Formative Assessments

The workplace-based assessments are to be completed in the clinical setting and not as part of an accredited course. They must be completed by an ASUM approved primary supervisor with the intention to provide feedback and guidance to drive self-directed learning. These tools support self-reflection and in conjunction with the supervisor, monitor performance. The intent of the formative assessment is that one would be completed at the start of your clinical practice, one later in your clinical practice and with adequate time to prepare to sit the summative assessment. Formative assessments must not be counted towards your logbook numbers.

Please note: Formative assessments will not be accepted if they are completed within one week of each other or on the same day as the summative assessment. Formative assessment must be submitted in a PDF file.

7.3 Summative Assessment

This workplace-based assessment is to be completed in the clinical setting and not as part of an accredited course. It must be completed by an ASUM approved primary supervisor. The intent of this assessment is to measure the level of competency of the candidate against the ASUM minimum standard and should be completed after you have achieved your logbook numbers. It does not count towards your logbook.

Please note: Summative assessment will not be accepted if dated the same day as the formative assessments. Summative assessment must be submitted in a PDF file.

In case of not fulfilling the requirements for the Summative assessment, candidates have the following options:

1. The candidate can re-do the summative assessment with their supervisor when both feel appropriate.

2. The candidate can complete an additional summative assessment with a different CCPU supervisor with prior approval by the CCPU CAHPU Committee
3. Appeal the outcome of the summative assessment with the CCPU CAHPU Committee by emailing education@asum.com.au

7.4 Logbook

The logbook is a record of practice and an instrument to demonstrate progression of applied learning, encompassing practical skill and diagnostic capability. Each logged scan must include the following information:

- Date of scan, indication, positive, candidate's interpretation, comparison with further imaging or clinical outcome (with at least 50% of scans being compared to further imaging), if the patient is under 14 years of age (refer to syllabus), supervisors name, comments and decision on whether the scan is adequate and correctly interpreted.
- Logbooks must be completed within two (2) years of attending an ASUM accredited training provider course. Note, each scan must also have been performed within this time frame (i.e. scans older than this will not be accepted).
- After being enrolled in the CCPU program, Logbooks can be completed before or after attending an accredited course. It is the Supervisor's responsibility to determine when the candidate is ready to commence the logbook.

Please note: Logbooks containing scanned identification documents will not be accepted. It is the candidate's responsibility to verify and remove any such documents before uploading them to the platform.

ASUM reserves the right to audit logbook, formative and summative assessments to ensure the intent of the CCPU is upheld. Additional assessments may be applied under the direction of the CCPU/CAHPU Committee should there be concerns regarding a candidate's competency.

8.0 ASSESSORS

- 8.1 Logbook assessors and assessors of summative and formative assessments should possess a current CCPU (Held for at least 12 months) in the relevant unit or a current DDU or a FRANZCR.
- 8.2 Note 1: current CCPU RCE unit holders may assess FELS logbooks, formative and summative assessments.

8.3 Note 2: current FACEM, FCICM and FANZCA may supervise the CCPU Vascular Access unit.

8.4 Note 3: current FANZCA may supervise the CCPU Nerve Blocks units.

8.5 Note 4: current FRACP may supervise the CCPU FELS and CCPU RCE units only.

8.6 Assessors must be practicing in the relevant area and hold current registration with AHPRA or MCNZ.

9.0 CCPU COMPLETION

The CCPU certificate will be awarded to a clinician who has completed and provided evidence of the following requirements:

9.1 Completion of the Applied Physics in Ultrasound unit and evidence of competency by meeting the passing standard in the online multiple-choice question (MCQ) assessment.

9.2 Completion of an ASUM Accredited training course approved for the CCPU unit of study. Only ASUM accredited courses are accepted, and a list can be found on the ASUM CCPU website. Accredited training course can be completed at any time during the 3 years of enrolment.

9.3 Completion of two (2) formative assessments as per the unit of study syllabus.

9.4 Show competency by meeting the passing standard in the one summative assessment as per the unit syllabus.

9.5 Completion of the ASUM approved logbook as outlined in the unit syllabus within two (2) years post attendance of the ASUM accredited training course relevant to the unit of study.

9.6 Logbook scans recorded outside the two-year time limit will not be accepted. Only the ASUM approved logbook format (available on the website) will be accepted and up to 50% of the cases can be non-clinically indicated.

9.7 All completed components should be submitted on the ASUM Learn education portal.

9.8 The CCPU Certificate will list the specialist units completed and date of expiry.

10.0 WITHDRAWAL

10.1 Candidates may withdraw from the CCPU by writing to education@asum.com.au. The date of withdrawal is the date on which the written notice is received at the ASUM office.

10.2 When a candidate withdraws from the CCPU within the first 6 months, ASUM will refund 50% of the enrolment fee. When a candidate withdraws from the CCPU after six (6) months, no refund will be provided.

10.3 No refunds will be given if units have been completed.

10.4 ASUM may withdraw candidates who have not maintained their financial membership with ASUM whilst enrolled in the CCPU.

11.0 TERMINATION OF CANDIDACY

The CCPU/CAHPU Committee may terminate the candidacy of any candidate who:

11.1 Ceases to meet any of the requirements of admission to the CCPU.

11.2 Failure to submit required documents, fees, or assessments within the given timeframe.

11.3 If a candidate chooses to withdraw from the process.

12.0 APPLICATION FOR RECOGNITION OF PRIOR LEARNING (RPL)

The CCPU/CAHPU Committee may determine recognition for prior learning following an evaluation of evidence submitted by the applicant. Please see the [RPL policy](#) for further details.

13.0 RECERTIFICATION

In order to support ongoing education to improve patient care, CCPU holders are required to recertify at Three-yearly intervals after the initial certification date recorded on the issued CCPU certificate. Recertification will require presentation of the requisite evidence demonstrating that the candidate has met practice requirements and Continuing Professional Development (CPD) requirements.

To achieve recertification the candidate must:

13.1 Continue to fulfil the conditions for Eligibility and Admission to the CCPU.

13.2 Record at least five (5) points of relevant CPD per year for each specialist unit. The maximum number of CPD points required per year for each candidate is a total of fifteen (15) points.

13.3 The recertification logbook must include the minimum number of required studies, to be completed in the 24 months prior to your recertification deadline, as listed in Appendix 2.

13.3.1 All scans must be clinically indicated, and the logbook must be submitted to ASUM with your recertification application.

13.3.2 Supervised scans can be included in your recertification logbook if the following criteria are met:

13.3.3 You directly supervised the scan, this is clearly indicated in the logbook along with the name of the trainee and both your name and the trainee's name are logged on the ultrasound machine/report.

13.4 Recertification will only be given for those specialised units where recertification requirements have been met.

13.5 A CCPU holder who fails to meet the recertification requirements will be removed from the ASUM CCPU certified list and will be required to forgo the use of the post nominals.

13.6 The recertification grace period is 1 year after the original recertification due date.

14.0 RETURN TO CCPU PRACTICE

A CCPU holder will cease to be current if they:

14.1 Fail to meet the requirements for recertification.

In the case of an expired CCPU (1 years after the original recertification due date), the applicant will need to complete the return to practice form and provide evidence of current practice as outlined in the section 13.0 Recertification above. The CCPU/CAHPU Committee will review all applications at their next meeting and will determine an outcome.

APPENDIX 1 – DEFINITIONS

Accredited course - theoretical knowledge and practical skills delivery that has been awarded accreditation by ASUM.

Accredited training provider - agency, ranging from single entity to corporate organisation who has met the accreditation criteria set down by ASUM and been awarded approval to deliver the course per specified unit.

ASUM Board of Directors - Board of Directors of ASUM, a publicly listed company by guarantee.

ASUM CCPU/CAHPU Committee - ASUM Board of Directors subcommittee awarded delegation to oversee development, implementation and decisions pertaining to the CCPU and CAHPU programs.

Clinically indicated - the symptoms or condition that substantiates the necessity for further investigation by an ultrasound scan.

Current CCPU holder – a person who has completed all the CCPU requirements in the first instance and complies with recertification as outlined in section 13.

Current DDU holder – a person who has completed all the DDU requirements in the first instance and complies with the relevant recertification process.

DDU - Diploma of Diagnostic Ultrasound.

FACEM – Fellow of the Emergency Medicine College

FACP - Fellow of the Australasian College of Phlebology

FANZCA - Fellow of the Australian and New Zealand College of Anaesthetists

FCICM - Fellow of the College of Intensive Care Medicine

FRACP - Fellow of the Royal Australasian College of Physicians (Cardiology)

FRANZCR - Fellow of the Australian and New Zealand College of Radiology.

Significant - substantial in terms of documented work or clinical experience to be of note.

Assessor - a medical practitioner who holds a current CCPU in the relevant unit or DDU holder registered with AHPRA or MCNZ in the relevant field of study or a FRANZCR, who determines competency of the candidate in the formative, summative and logbook assessments.

Unit - module of study as outlined in the CCPU program.

Workplace based instruments – a tool that assesses the skills and practice of a candidate on the job to determine clinical competency.

APPENDIX 2 – RECERTIFICATION LOGBOOK REQUIREMENTS

Specialty	CCPU Recertification Logbook Requirements <i>Total scans to be completed in the 24 months prior to the recertification deadline.</i>																										
Breast	<ul style="list-style-type: none"> Forty (40) ultrasound scans Including Ten (10) needle interventions over a 12-month period in the 24 months prior to the recertification deadline. Attendance or participation in at least one ultrasound teaching course over the five (5) years recertification period. 																										
Breast and Endocrine Combined Unit <i>(No longer open for enrolment)</i>	Endocrine: candidates to choose from if wish to recertify in Interventional Endocrine, Non-interventional Endocrine or both following the recertification requirements for each of the units.																										
Emergency/Critical Care Units: AAA, Acute Scrotum, FELS, Basic soft tissue, Biliary E-FAST, Lung, Proximal DVT, Renal hydronephrosis and Calculi, Pleural Effusion, Vascular Access and RCE	<p>Individual unit requirements</p> <table border="1"> <thead> <tr> <th data-bbox="795 1028 1140 1062">Unit</th> <th data-bbox="1140 1028 1481 1062">Scan requirements</th> </tr> </thead> <tbody> <tr> <td data-bbox="795 1073 1140 1107">AAA</td> <td data-bbox="1140 1073 1481 1107">7</td> </tr> <tr> <td data-bbox="795 1125 1140 1158">Acute Scrotum</td> <td data-bbox="1140 1125 1481 1158">7</td> </tr> <tr> <td data-bbox="795 1176 1140 1210">Basic Soft Tissue</td> <td data-bbox="1140 1176 1481 1210">13</td> </tr> <tr> <td data-bbox="795 1228 1140 1262">Biliary</td> <td data-bbox="1140 1228 1481 1262">13</td> </tr> <tr> <td data-bbox="795 1280 1140 1313">E-FAST</td> <td data-bbox="1140 1280 1481 1313">13</td> </tr> <tr> <td data-bbox="795 1331 1140 1365">FELS</td> <td data-bbox="1140 1331 1481 1365">13</td> </tr> <tr> <td data-bbox="795 1383 1140 1417">Lung</td> <td data-bbox="1140 1383 1481 1417">13</td> </tr> <tr> <td data-bbox="795 1435 1140 1468">Pleural Effusion</td> <td data-bbox="1140 1435 1481 1468">13</td> </tr> <tr> <td data-bbox="795 1486 1140 1520">Proximal DVT</td> <td data-bbox="1140 1486 1481 1520">7</td> </tr> <tr> <td data-bbox="795 1538 1140 1569">RCE</td> <td data-bbox="1140 1538 1481 1569">15</td> </tr> <tr> <td data-bbox="795 1587 1140 1621">Renal Hydronephrosis</td> <td data-bbox="1140 1587 1481 1621">13</td> </tr> <tr> <td data-bbox="795 1639 1140 1673">Vascular Access</td> <td data-bbox="1140 1639 1481 1673">13</td> </tr> </tbody> </table> <p>3-8 Units</p> <p>For graduates with four or more units, or where the combined scan requirement totals more than 40 scans, scans are to be split equally across units up to</p>	Unit	Scan requirements	AAA	7	Acute Scrotum	7	Basic Soft Tissue	13	Biliary	13	E-FAST	13	FELS	13	Lung	13	Pleural Effusion	13	Proximal DVT	7	RCE	15	Renal Hydronephrosis	13	Vascular Access	13
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	<p>40 scans. For example, for 8 units applicants must supply 5 scans per unit.</p> <p>More than 8 units</p> <p>If more than 8 units held, 5 scans for every additional unit.</p>
Interventional Endocrine	<ul style="list-style-type: none"> Forty (40) ultrasound scans including Ten (10) needle interventions over a 12-month period in the 24 months prior to the recertification deadline. Attendance or participation in at least one ultrasound teaching course over the five (5) years recertification period.
Neonatal	<p>Neonatal Cardiac: 25 scans</p> <p>Neonatal Head: 10 scans</p>
Neonatal Lung	20 scans
Non-Interventional Endocrine	<ul style="list-style-type: none"> 40 scans Attendance or participation in at least one ultrasound teaching course over the five (5) years recertification period.
Obstetrics and Gynaecology Units: Basic Early Pregnancy, Advanced Early Pregnancy, Basic Gynaecology and Basic Monitoring the Fetus	<p>Basic Early Pregnancy: 25 scans*</p> <p>Advanced Early Pregnancy: 25 scans*</p> <p><i>*For those recertifying in both the early and advanced early pregnancy units, a total of 50 scans with a minimum of 20 early pregnancy scans and 20 advanced scans with the remain 10 to be from either unit may be submitted.</i></p> <p>Basic Gynaecology: 36 scans</p> <p>Basic Monitoring the Fetus: 13 scans</p>
Phlebology Lower Extremity Venous Ultrasound (LEVU)	25 scans

Rheumatology	50 scans including:														
	<table border="1"> <tr> <td>Shoulder</td><td>2 scans</td></tr> <tr> <td>Hand/wrist</td><td>20 scans</td></tr> <tr> <td>Hip</td><td>2 scans</td></tr> <tr> <td>Knee</td><td>2 scans</td></tr> <tr> <td>Elbow</td><td>2 scans</td></tr> <tr> <td>Foot/ankle</td><td>20 scans</td></tr> <tr> <td>Guided injection</td><td>2 scans</td></tr> </table>	Shoulder	2 scans	Hand/wrist	20 scans	Hip	2 scans	Knee	2 scans	Elbow	2 scans	Foot/ankle	20 scans	Guided injection	2 scans
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Elbow	2 scans														
Foot/ankle	20 scans														
Guided injection	2 scans														
Nerve Block	3 scans per unit of recertification. Logbooks must be individual for each unit. Combine logbooks will not be accepted														
Paediatric Hip Effusion	10 Scans														