

Pre Examiner's Assessment Form

UBT448 – Enhance Appearance Using High Intensity Focused Ultrasound (HIFU)														
Centre Name: Centre ID Number: Date of Assessment: Signature of Lecturer/Assessor: Signature of Internal Quality Assurer:		Minimum 7		Sub –Total	Hygiene and sterilisation	Consultation	Advanced Skin Assessment	HIFU treatment	HIFU treatment technique	Post care/home care	Oral questions	FINAL MARK	Case studies	Learners must achieve a minimum of 7 marks for the first 2 sections in order to pass.
		Client care	Preparation of area											
Learner name	Learner No.	5	5		5	6	9	15	40	10	5		P/F	Comment
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