



INDIAN ACADEMY OF PAIN MEDICINE EXAMINEE'S MANUAL

Revised and Edited by: IAPM Examination Committee

Based on the New Criteria of examination in 3 parts

(Passed In AGBM February 2025, Jabalpur)

Dean: **Dr Madhuri Lokapur.** Registrar: **Dr (major) Pankaj N Surange**
President: **Dr Krishna Poddar.** Hon Secretary: **Dr Anurag Agarwal**

OVERVIEW OF EXAMINATION

EXAMINATION PATTERN

The FIAPM Examination consist of three parts: Part A, Part B and Part C:

Passing requirements: Pass percentage is 50% and the candidates will have to secure 50% in each category i.e Theory Examination, Viva and Practical examination.

Part A –Theory Examination (100 marks)

- Theory examination is MCQ pattern with 100 MCQs.
- The syllabus is as per the IAPM curriculum.
- 100 MCQs should be answered in 120 minutes. i.e. 2 hours.
- Each question carries 1 mark.
- There is no negative marking
- 50% is the qualifying marks for pass

Part B - Practical Examination (100 marks)

Station 1 and 2 : Demonstration of 2 Fluoroscopic

Guided Interventional Pain Procedures (70 marks)

The examinee should demonstrate two interventional pain techniques on a mannequin or cadaver. The examinee will be asked to pick up two chits with the names of interventions written on it. One more chance will be given to pick up another chit in case he/ she wants to opt for a change of intervention.

- Each intervention carries 35 marks.
- Time for each intervention 10 minutes
- Total marks: 70
- Total duration: 20 minutes

Station 3: One USG Demonstration: 10 Min (30 Marks)

The examinee should demonstrate one Anatomical tissue on ultrasound on a Volunteer. No Intervention is required on this station

Fluoroscopic Procedures in syllabus

- Interlaminar Cervical Neuroplasty
- Cervical medial branch Ablation
- Stellate ganglion Neurolysis
- T2-T3 sympathetic Neurolysis
- Gasserian ganglion Neurolysis
- Intercostal nerve Diagnostic Block
- Thoracic sympathetic Neurolysis
- Thoracic medial branch Ablation
- Splanchnic Neurolysis
- Celiac plexus Neurolysis
- Lumbar transforaminal Neuroplasty
- Lumbar medial branch Ablation
- Lumbar sympathetic Neurolysis
- Lumbar Rami communicantes Diagnostic block
- Lumbar discography
- S1 Transforaminal Neuroplasty
- SI joint Intra-Articular Infiltration
- Superior hypogastric plexus Neurolysis
- Caudal Neuroplasty
- Ganglion impar Ablation

USG Demonstration in Syllabus

- Stellate Ganglion
- SI Joint
- Piriformis Muscle
- Sacral Hiatus
- Lumbar Facet Joint
- Coeliac Plexus
- Occipital Nerve
- Suprascapular Notch
- Genicular Branches Knee
- Rotator Cuff

Part C: VIVA (100 Marks)

Station 1: Station for Drugs, Equipment's & Images(CT, MRI, Xray) (40 Marks)

Examinee will be given any drug/ equipment, Images of the MRI/CT/ USG/ X Ray or it will be shown as images on the laptop and relevant questions will be asked.

Duration: 15-20 Minutes

Station 2 and 3 – Oral (Clinical) Examination (60 Marks)

The examinee will be given two case scenarios.

Case 1: 15 Min (30 Marks)

Case 2: 15 Min (30 Marks)

TOTAL MARKS: PART A+ PART B+PART C= 300

Passing requirements: Pass percentage is 50% and the candidates will have to secure 50% in each category i.e Written exam, Viva and Practical exam.

DO's and Don'ts EXAMINEE

- Greet examiner, but don't talk too much
- The exam process and questions will be uniform without any bias
- Examinee should answer each question to the point as each question will carry marks
- While performing procedures, examinee can describe the procedure but it is not mandatory.
- Do not attempt to mislead or trick the examiner to test his/her knowledge
- Do not try to correct or teach the examiner
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EXAMINATION PROCESS

- Two examiners will be present for the Fluoroscopy guided practical examination of each examinee.
- Both the examiner's are responsible for evaluating the examinee independently.

For the demonstration of procedure station:

- Examiners will ask you to pick two slips for two procedures.
- Examinee will be given one more chance to opt for another slip if he/she expresses difficulty.
- Once chosen you can perform any two procedures out of three chosen chits.
- Examiner will only observe and may not respond, react or pass remarks while the examinee is performing the procedure.
- You will have to inform examiner your final needle position in both AP and lateral Positions.
- Examiner's may take video or picture during or after the completion of the procedure.

For the drug, equipment & images stations

- Examiner will ask you to pick one needle/instrument/drug and ask the questions in the format provided to the examiners.
- Then give one X-ray plate/MRI/CT scan film/fluoroscopic image and ask questions. (For this we might use LAPTOP to display the images of needle/instrument/drug/scans)

For the oral / clinical examination station

- One printed case scenarios will be handed over to the examinee in each station.
- Examiner's will ask examinee the questions in the format mentioned in the scoring form.
- Examiner's are at liberty to ask additional relevant questions
- Sample questions those might be asked in case presentation:
 - Provisional diagnosis: points in favor of your diagnosis
 - Differential diagnosis: points in favor and against diagnosis
 - Further investigations suggested
 - Confirmation of diagnosis
 - Outline of management
 - Procedural Steps
 - Complications of treatments
 - Follow-up Protocols

SCORING SYSTEM OF EXAMINATION

Rating for oral & practical examination

1. **Unacceptable, potentially dangerous. (-5)**

Examiner's will give "-5" for this kind of response.

2. **No Attempt. (0)**

3. **Unacceptable, but not harmful. (+2)**

Examiner's will give "+2" for this kind of response.

4. **Acceptable, basic competence. (+3)**

Examiner's will give "+3" for this kind of response.

5. **Acceptable, exceeds basic competence. (+5)**

Examiner's will give "+5" for this kind of response.

NOTE: Examinees are strictly advised to thoroughly review the manual. Any discrepancies or errors must be reported to the Examination Committee through the Registrar, IAPM, prior to the examination. No concerns, clarifications, or objections will be entertained after the examination under any circumstances.

