

Specialist International Medical Graduate (SIMG) assessment process:

Curriculum vitae

The SIMG assessment process for the Australian and New Zealand College of Anaesthetists (ANZCA) and the Faculty of Pain Medicine (FPM) is conducted in accordance with ANZCA Regulation 23. You should complete this curriculum vitae (CV) if you wish to be assessed under this regulation.

The SIMG assessment process is not a specialist training program, but an assessment of comparability to an ANZCAtrained specialist anaesthetist or specialist pain medicine physician, and an evaluation of the ability to practise in Australia and/or New Zealand as an unsupervised specialist at the same standard.

In New Zealand, the pathway to vocational registration is separate to the pathway to Fellowship of ANZCA. If applying in New Zealand, you will need to submit this CV form as additional information to the Medical Council of New Zealand (MCNZ), as part of your assessment for provisional vocational registration.

If you choose to also undertake the ANZCA SIMG assessment process, you will be eligible to apply for admission to Fellowship of ANZCA and/or FPM.

Before completing your CV, please read the following information:

You should familiarise yourself with and ensure you fully understand the following before completing the CV:

- The information available on the MCNZ website and college website. In particular, please ensure you have thoroughly read ANZCA regulation 23 and associated website content so as to fully understand the SIMG process.
- The recency of practice and continuing professional development (CPD) requirements of both the MCNZ and the college.
- The training, qualifications, specialist experience, CPD and professional conduct/cultural competence of a FANZCA, as the assessment is a comparison with ANZCA-trained specialists in all ANZCA roles in practice. Please take time to review these details, which are available on the college website.

Completing your CV:

- The CV must be completed electronically (not handwritten).
- Please submit additional information in a separate Word or pdf document if you require additional space to answer questions. Please ensure you include your name at the top of this document.
- Ensure that the application form and other required documents are complete and correct prior to submitting your CV.

Please note:

The sections in italics in this document are intended to assist you in completing this CV; please read the information thoroughly before completing each section.

Curriculum vitae

1. Personal details

Name

Mobile or preferred number

Email address

2. Medical qualification

Name of medical qualification

Start date

End date

Medical school/university

Country of qualification

Was "internship' completed as a medical student?

No

2a. Prevocational Medical Education & Training (PMET) Employment History

Yes

- The comparability of the health system in which you were employed will be considered during your assessment. A list of comparable health systems can be found here.
- Please list all employment/appointments in chronological order and state the month and year each started and ended.
- List any gaps if applicable. (If necessary you may mark these periods as "personal").

Terminology and definitions

Start date Month and year position started (mm/yyyy).

End date Month and year position ended (mm/yyyy).

Job title Formal job title e.g. medical officer, resident, provisional house officer, registrar, fellow, staff/hospital

doctor, specialist, consultant.

FTE Full-time equivalent is 38 hours (or more) per week. The maximum number of hours that can be

counted per week is 38 hours. Positions which are less than 38 hours per week are considered part-

time and will be considered pro rata i.e. >/= 38 hours 1.0 FTE, 19 hours 0.5 FTE

Specialty Anaesthesia, pain medicine, intensive care medicine etc.

Hospital Formal name of hospital.

Country State and/or country as applicable.

First position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

Second position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

Third position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

Fourth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

2b. Employment details - prior to specialist training

- All posts prior to start of specialist training
- Enter details of all clinical posts/experience that you completed prior to admission/starting your specialist anaesthesia training (or primary specialist training for pain medicine specialists).
- Your actual roles, responsibilities and activities including the context of these posts in relation to your training and career.

Rotations covered and duration of each.

Details of your duties, case-mix and workload during your posts.	
Details of your training during your posts.	
Details of supervision that applied to you during your clinical activities.	
Details of any assessments that applied to you during your clinical activities.	
Details of any cultural safety training during your clinical activities.	

A 1 1:1: 1	. (1:		
Additional	intormation	VALL CANSIDE	r is relevant.
/ taartional	IIIIOIIIIalioii	you conside	1 13 TOTOVALIL

3. Specialist training, examination and qualification

- A comparison of your specialist training and qualification(s) against New Zealand requirements will form part of this assessment.
- The comparability of the health system in which you undertook your specialist training, examinations and qualification(s) will be considered during your assessment. A list of comparable health systems can be found here.

3a. Anaesthesia specialist training program

- Please provide a detailed description of the postgraduate training and examinations you undertook, which must include details of the following:
 - Basic training including length, structure, aspects of specialty covered, etc.
 - Advanced training, including length, structure, aspects of specialty covered, etc.
 - Subspecialty training, including length, structure, etc.
 - In-training assessments, including provision of supervision/oversight, feedback on progress, etc.
 - In-training activities related to ANZCA roles: Medical Expert, Communicator, Collaborator, Leader and Manager, Health Advocate, Scholar, Professional.
- Please note:
 - The ANZCA training program requires in-training assessments AND two national examinations.
 - The award of FANZCA is dependent on completion of the training program, not just success in examinations.

Country/countries in which training was undertaken.

Coordinating body e.g. hospital/university name/national health scheme/Royal College of Anaesthetists.

Is the curriculum national or university-based?

National University Other (please specify)

What authority/organisation sets the curriculum? (hospital/university/college/other)

Name of authority/organisation:

Is the curriculum exactly the same for all trainees in your country of training?

Yes No

Minimum duration of training (in years) required to enable completion of specialist training.

3 4 5 Other (please specify)

Sub-specialties covered:

Burns surgery Ophthalmic procedures

Cardiac surgery and interventional cardiology Orthopaedic surgery

Dental surgery Paediatric anaesthesia

ECT Pain medicine

ENT Plastic/reconstructive surgery

General surgery Thoracic surgery

Gynaecological and endoscopic procedures Urological

Head and neck Vascular surgery and interventional radiology

Intensive care Other (please list below)

Neurosurgery and neuroradiology

Obstetric anaesthesia and analgesia

Which of the ANZCA Roles in Practice were taught in your country of training?

Medical expert Health advocate

Communicator Scholar

Collaborator Professional

Leader and Manager CT

Describe how these were taught and examined (including formal courses).

3b. Anaesthesia Vocational Training (AVT) Employment History

First position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

Second position Start date End date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Third position Start date End date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Fourth position End date Start date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Fifth position Start date End date Job title FTE Field of practice Pain medicine Other (please specify) Anaesthesia Hospital

Country

Sixth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
3c. Employment details –	during specialist traini	ing
 If you are applying for astraining here. 	sessment in anaesthesia y	and award of specialist status You should enter details of all your anaesthesia specialist e, you should enter details of all your primary specialist
Rotations/specialty/sub-spec	actly covered and duration	OT CACIT.
How many months were spen	nt in anaesthesia training?	
How many months were spen	nt in pain medicine training	?
How many months were spen	nt in intensive care training	?
How many months were spen	at in other training (non-ana	aesthesia/pain medicine/intensive care)?
Details of your duties, case-m	ix and workload during you	ur posts.

Details of your training/teaching during	ng your posts.		
List any clinical support roles that you	ı did during your training		
List any formal teaching and assessm ANZCA roles - Medical Expert, Communicator,			
ANZOA Toles - Medical Expert, Communicator,	Collaborator, Leader and Manager,	Tieattii Auvocate, 3	เสเบเสเ, FT016551011สเ
During your training were you involved Yes (please select below)	d in any teaching roles? It ye No	s, select relevar	nt options.
Medical students	Anaesthesia trainees	Nurses	Other (please specify below)
Details of supervision that applied to	you during your clinical activi	ties.	

Did you complete in	training assessments during your specialist training programme?
Yes	No
Details of any asses	ments that applied to you during your clinical activities. stion/seniority was applied to you during your training.
	n you consider is relevant.
	pecialist examination
 Details of the s 	ructure, governance etc of the examinations.
Were you required t	pass an examination overseen, assessed and accredited by an external national body?
If not, which of the f	llowing was responsible for overseeing the examination?
State	Local Other (please specify)
Do all trainees in the	country of your training sit the exact same exam at any given sitting?
Yes	No

How many examinations did you undertake during your specialist training program?

(e.g. a first examination during basic training covering the basic sciences, and a final examination within advanced training that examined the breadth of the anaesthesia training)

2 1 Other (please specify)

Date of basic sciences examination:

Date of final examination:

Which of the following components were included in the **basic sciences** examination? (tick all boxes that were included)

Written components

Oral components

Primary exam not specific to basic sciences

Not applicable (no primary examination was undertaken)

Other (please specify)

Which of the following components were included in the final examination? (tick all boxes that were included)

Written components

MCQ (multiple choice questions)

SAQ (short answer questions)

Medical clinical components

involving attendance with patient and/or substitute

Anaesthesia oral components

Other (please specify)

3e. Anaesthesia specialist qualification

(Enables independent specialist status and practice)

- Please describe the qualification you have received from the country in which you trained to gain specialist registration.
 - For example, the Certificate of Completion of Specialist Training (CCT/CCST) in the United Kingdom (not the Fellowship of the Royal College of Anaesthetists) or the Fellowship of the College of Anaesthesia in South Africa.
- Please note:
 - We are looking for the endorsement that the specialist training program has been successfully completed, and that this allows for independent work as an independent specialist – able to practise – public/private, all hospitals, no restrictions (exam success is the step prior).

Title of specialist qualification

Field of specialty

Date obtained

Date awarded

Institution awarding

Country

Minimum duration (in years) that is needed to achieve this qualification

3f. Pain medicine specialist training program (if applicable)

Details of the specialist training scheme that you completed.

Country in which specialist training was undertaken

Coordinating body

e.g. hospital/university name/national health scheme/Royal College of Anaesthetists.

Is the curriculum national or university-based?

National

University

Other (please specify)

What authority/organisation sets the curriculum? (hospital/university/college/other)

Name of authority/organisation:

Is the curriculum exactly the same for all trainees in your country of training?

Yes

Nο

Minimum duration of training (in months) required to enable completion of pain medicine training

6 months

12 months

Other (please specify)

3g. Pain medicine specialist qualification

(Enables independent specialist status and practice)

- Please describe the qualification you have received from the country in which you trained to gain specialist registration.
- Please note:
 - We are looking for the endorsement that the specialist training program has been successfully completed,
 and that this allows for independent work as an independent specialist able to practise public/private, all hospitals, no restrictions. (exam success is the step prior)

Title of specialist qualification

Field of specialty

Date obtained

Date awarded

Institution awarding

Country

Minimum duration (in years) that is needed to achieve this qualification

3h. Additional medical qualifications obtained (if applicable)

Name of medical qualification

Date awarded

Country of qualification

Field of practice

Anaesthesia

Pain medicine

Other (please specify)

Name of medical qualification Date awarded Country of qualification Field of practice Anaesthesia Pain medicine Other (please specify) Name of medical qualification Date awarded Country of qualification Field of practice Anaesthesia Pain medicine Other (please specify) 3i. Anaesthesia Specialist Practice (training & non-training) Employment History First position End date Start date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Second position Start date End date Job title FTE Field of practice Pain medicine Anaesthesia Other (please specify) Hospital Country Third position Start date End date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country

Fourth position Start date End date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Fifth position Start date End date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Sixth position End date Start date Job title FTE Field of practice Anaesthesia Pain medicine Other (please specify) Hospital Country Seventh position Start date End date Job title FTE Field of practice Pain medicine Other (please specify) Anaesthesia Hospital Country **Eighth position** Start date End date Job title FTE

Field of practice

Anaesthesia

Pain medicine

Other (please specify)

Hospital

Country

Ninth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Tenth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

3j. Employment details - post attainment of specialist status (training posts)

- All additional anaesthesia or pain medicine training posts undertaken post attainment of specialist status (if applicable)
- Please list details of all additional specialist training employment undertaken following the attainment of specialist status. If you have not been employed in an additional training post since attaining your specialist qualification, leave this section blank.

Rotations/specialty/sub-specialty covered and duration of each.
Details of your duties, case-mix and workload during your posts.
Details of your training/teaching during your posts.
List any clinical support roles that you did during your training

•	•	sments that you received abo		
		ved in any teaching roles? If	yes, select relev	ant options.
Yes (please s	elect below)	No		
Med	ical students	Anaesthesia trainees	Nurses	Other (please specify below)
		o you during your clinical act		
	aining level attaine			
Basic	Advanced	Fellowship		
Additional informa	ation you consider	is relevant.		

4. Continuing professional development (CPD)

- A comparison of your CPD against that required in New Zealand will form part of this assessment.
- The comparability of the health system in which you undertook CPD will be considered. A list of comparable health systems can be found <u>here</u>.
- Lack of recent CPD in anaesthesia or pain medicine (as applicable) may negatively impact your assessment and increase the probability of being assessed as 'not comparable'.
- Please note that the information required below relates to continuing professional development (CPD) which is more comprehensive than continuing medical education (CME).

Are you currently enrolled and actively participating in a formal CPD program?

No. Please skip to the 'continuing professional development in your specialist discipline' section below.

Yes. What is the name of the organisation administering the CPD program?

Please select all that apply:

My CPD program is planned

clinical (Medical Expert - ANZCA role in practice)

clinical support (other ANZCA roles in practice)

My CPD program is self-evaluated

My CPD program is audited by the body providing the program and/or the regulatory authority

Participation in CPD is a requirement for registration as a specialist in my country

4a. CPD in your specialist discipline

- If you are applying for either assessment in anaesthesia or pain medicine you should enter details of your specialty CPD in the relevant set of tables below.
- If you are applying for assessment in both anaesthesia and pain medicine you should complete both sets of tables.
- Consideration will be given to all CPD activities. Please complete one table for each three-year cycle of CPD, to a maximum of three cycles (most recent first).
- The ANZCA CPD Standard is available <u>here</u>.
- Evidence of participation in a CPD program:

CPD statement of participation for each three-year cycle.

Certificates of all simulation courses completed - eq: ATLS, APLS, ACLS, EMAC, CICO.

Copy of the front sheet of all audits/surveys/MSF etc that report on your personal clinical work completed in each three-year cycle.

Anaesthesia CPD (most recent cycle)

Knowledge and skills:

Please list all conferences and meetings that you have attended in the last three years.

Date Activity and clinical/ANZCA roles

Please check here if you have not completed any knowledge and skills CPD in the last three years.

Practice evaluation:

- CPD practice evaluation is mandatory in New Zealand and you should include evaluation of your practice.
- Please list any audits, morbidity and mortality meetings, and peer review of practice (with description) undertaken in the last three years.
- Please provide copies of the summary pages from any audits or multisource feedback completed, with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you have not completed any practice evaluation activities in the last three years.

Emergency response:

- Please list all emergency response simulation courses attended and other certificates gained e.g. ATLS, APLS, ACLS, EMAC, CICO etc in the last three years.
- Please provide copies of these certificates with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you have not attended any emergency response courses in the last three years.

Anaesthesia CPD (previous cycle - complete if applicable)

Knowledge and skills:

Please list all conferences and meetings that you attended in this cycle.

Date

Activity and clinical/ANZCA roles

Please check here if you have not completed any knowledge and skills CPD in this cycle.

Practice evaluation:

- CPD practice evaluation is mandatory in New Zealand and you should include evaluation of your practice.
- Please list any audits, morbidity and mortality meetings, and peer review of practice (with description) undertaken in the last three years.
- Please provide copies of the summary pages from any audits or multisource feedback completed, with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you did not complete any practice evaluation activities in this cycle.

Emergency response:

- Please list all emergency response simulation courses attended and other certificates gained e.g. ATLS, APLS, ACLS, EMAC, CICO etc in this cycle.
- Please provide copies of these certificates with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you have not attended any emergency response courses in this cycle.

Anaesthesia CPD (second previous cycle - complete if applicable)

Knowledge and skills:

Please list all conferences and meetings that you attended in this cycle.

Activity and clinical/ANZCA roles

Please check here if you have not completed any knowledge and skills CPD in this cycle.

Practice evaluation:

- CPD practice evaluation is mandatory in New Zealand and you should include evaluation of your practice.
- Please list any audits, morbidity and mortality meetings, and peer review of practice (with description) undertaken in the last three years.
- Please provide copies of the summary pages from any audits or multisource feedback completed, with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you did not complete any practice evaluation activities in this cycle.

Emergency response:

- Please list all emergency response simulation courses attended and other certificates gained e.g. ATLS, APLS, ACLS, EMAC, CICO etc in this cycle.
- Please provide copies of these certificates with your application.

Date

Activity and clinical/ANZCA roles

Pain medicine CPD (most recent cycle)

Knowledge and skills:

Please list all conferences and meetings that you have attended in the last three years.



Please check here if you have not completed any knowledge and skills CPD in the last three years.

Practice evaluation:

- CPD practice evaluation is mandatory in New Zealand and you should include evaluation of your practice.
- Please list any audits, morbidity and mortality meetings, and peer review of practice (with description) undertaken in the last three years.
- Please provide copies of the summary pages from any audits or multisource feedback completed, with your application.

Date Activity and clinical/ANZCA roles

Please check here if you have not completed any practice evaluation activities in the last three years.

Emergency response:

- Please list all emergency response simulation courses attended and other certificates gained e.g. ATLS, APLS, ACLS, EMAC, CICO etc in the last three years.
- Please provide copies of these certificates with your application.

Date Activity and clinical/ANZCA roles

Pain medicine CPD (previous cycle - complete if applicable)

Knowledge and skills:

Please list all conferences and meetings that you attended in this cycle.



Activity and clinical/ANZCA roles

Please check here if you have not completed any knowledge and skills CPD in this cycle.

Practice evaluation:

- CPD practice evaluation is mandatory in New Zealand and you should include evaluation of your practice.
- Please list any audits, morbidity and mortality meetings, and peer review of practice (with description) undertaken in the last three years.
- Please provide copies of the summary pages from any audits or multisource feedback completed, with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you did not complete any practice evaluation activities in this cycle.

Emergency response:

- Please list all emergency response simulation courses attended and other certificates gained e.g. ATLS, APLS, ACLS, EMAC, CICO etc in this cycle.
- Please provide copies of these certificates with your application.

Date

Activity and clinical/ANZCA roles

Pain medicine CPD (second previous cycle - complete if applicable)

Knowledge and skills:

Please list all conferences and meetings that you attended in this cycle.



Activity and clinical/ANZCA roles

Please check here if you have not completed any knowledge and skills CPD in this cycle.

Practice evaluation:

- CPD practice evaluation is mandatory in New Zealand and you should include evaluation of your practice.
- Please list any audits, morbidity and mortality meetings, and peer review of practice (with description) undertaken in the last three years.
- Please provide copies of the summary pages from any audits or multisource feedback completed, with your application.

Date

Activity and clinical/ANZCA roles

Please check here if you did not complete any practice evaluation activities in this cycle.

Emergency response:

- Please list all emergency response simulation courses attended and other certificates gained e.g. ATLS, APLS, ACLS, EMAC, CICO etc in this cycle.
- Please provide copies of these certificates with your application.

Date

Activity and clinical/ANZCA roles

5. Other activities/roles

5a. Teaching experience

• Please list any teaching experience you have gained (including the dates and institutions). Include formal appointments by academic institutions.

Date	Teaching details
Have you been an examiner?	
Yes No	
If yes, please provide details:	
ii yes, piease provide details.	
5b. Research and publica	tions
 Please list all research in 	which you have been involved, including any publications (articles, presentations and
abstracts).	
 Please do not provide co 	pies of these research papers/publications with your application.
Date	Research/publication details
Date Have you been an examiner?	Research/publication details
	Research/publication details
Have you been an examiner? Yes No	
Have you been an examiner? Yes No	Research/publication details essional organisation (college, society, other)?
Have you been an examiner? Yes No	
Have you been an examiner? Yes No	
Have you been an examiner? Yes No	
Have you been an examiner? Yes No Have you held office in a prof	
Have you been an examiner? Yes No Have you held office in a prof	essional organisation (college, society, other)?
Have you been an examiner? Yes No Have you held office in a prof	essional organisation (college, society, other)?
Have you been an examiner? Yes No Have you held office in a prof	essional organisation (college, society, other)?

6. Currency of CV

This CV is current as at:

7. Additional information

8. Additional employment

- The comparability of the health system in which you were employed will be considered during your assessment.
 A list of comparable health systems can be found <u>here</u>.
- Please list all employment/appointments in chronological order and state the month and year each started and ended.
- List any gaps if applicable. (If necessary you may mark these periods as "personal").

Terminology and definitions

Start date Month and year position started (mm/yyyy).

End date Month and year position ended (mm/yyyy).

Job title Formal job title e.g. medical officer, resident, provisional house officer, registrar, fellow, staff/hospital

doctor, specialist, consultant.

FTE Full-time equivalent is 38 hours (or more) per week. The maximum number of hours that can be

counted per week is 38 hours. Positions which are less than 38 hours per week are considered part-

time and will be considered pro rata i.e. >/= 38 hours 1.0 FTE, 19 hours 0.5 FTE

Specialty Anaesthesia, pain medicine, intensive care medicine etc.

Hospital Formal name of hospital.

Country State and/or country as applicable.

First position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Second position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Third position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
When was the clinical p	ost/experience completed	?
Prior to start of spe	ecialist training	
Between start of s	pecialist training and award	of specialist status
Post attainment of	specialist status	
Fourth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
When was the clinical p	ost/experience completed	?
Prior to start of spe	ecialist training	
Between start of s	pecialist training and award	of specialist status
Post attainment of	specialist status	
Fifth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
•	ost/experience completed	?

Prior to start of specialist training

Post attainment of specialist status

Between start of specialist training and award of specialist status

Sixth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Seventh position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Eighth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Ninth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Tenth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Eleventh position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Twelfth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Thirteenth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Post attainment of specialist status

Fourteenth position

Start date End date

Job title

FTE

Field of practice

Anaesthesia Pain medicine Other (please specify)

Hospital

Country

When was the clinical post/experience completed?

Prior to start of specialist training

Between start of specialist training and award of specialist status

Fifteenth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
When was the clinical p	ost/experience completed	?
Prior to start of spe	ecialist training	
Between start of s	pecialist training and award	of specialist status
Post attainment of	specialist status	
Sixteenth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
When was the clinical p	ost/experience completed	?
Prior to start of spe	ecialist training	
Between start of s	pecialist training and award	of specialist status
Post attainment of	specialist status	
Seventeenth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		

When was the clinical post/experience completed?

Between start of specialist training and award of specialist status

Prior to start of specialist training

Eighteenth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
When was the clinical post	experience completed	?
Prior to start of specia	list training	
Between start of spec	ialist training and award	d of specialist status
Post attainment of spe	ecialist status	
Nineteenth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		
Country		
When was the clinical post	/experience completed	?
Prior to start of specia	list training	
Between start of spec	ialist training and award	d of specialist status
Post attainment of spe	ecialist status	
Twentieth position		
Start date		End date
Job title		
FTE		
Field of practice		
Anaesthesia	Pain medicine	Other (please specify)
Hospital		4
Country		
When was the clinical post	/experience completed	?
Prior to start of specia		

Between start of specialist training and award of specialist status