

Course Schedule	IDCCN
Course Duration	Post BSC/GNM : 1yr
Registration Process and Tenure Starts (For New Candidates)	1 st Jan 2017 1 st July 2017
Last Date Of Registration (For New Candidates)	28 th Feb 2017 31 st Aug 2017
Last Date Of Exam Registration for all exam going candidates	10 th Jan 2017 30 th May 2017
Assignment of Theory Center & Hall ticket	15 th Jan 2017 15 th June 2017
Theory Exam	25 th Feb 2017 29 th July 2017
Declaration of Theory result, Assignment of Practical Center & Hall ticket	March 2017 August 2017
Practical Exam	26 th Feb, 2017 30 th July, 2017
Results	March 2017 August 2017

Appendix 11 : Exam Form

Appendix 11 (a) IDCCM Exam Form-Theory & Practical



Indian Society of Critical Care Medicine

Indian College of Critical Care Medicine

Exam Form

Indian Diploma of Critical Care Medicine

Date of Examination: **Theory: March 12th, 2017 Practical: April, 15th or 16th, 2017 (any one day)**

Fresher/Repeater: _____

Candidate Name: _____

Name of the Institute: _____

Name of the teacher: _____

Kindly submit the scanned copy of this exam form, by 10th February 2017, at the following email ids: education@isccm.org & executive_college@isccm.org

If this form is not submitted by the last date mentioned above, you will not able to appear for the exam. Examination center shall be allotted by the college only after the receipt of this form

Kindly chose Theory center from the list provided, Practical Center will be allotted by College only. Request for change of venue or date of exams shall not be accepted in any circumstances.

Choice of Theory Exam Center (From the list provided) _____

Address of candidate: _____

_____ City _____

State: _____ Pincode: _____

Email: _____ Mobile: _____

Date of Joining the Course: _____

Date of Completion of Course: _____

Fee Details if repeater: Cheque/DD no. _____ Date _____

(Signature of candidate)

Please note that if you are appearing for the first time in the exam, you should complete the form your teacher should complete the **SECTION I** and the hospital administrator should complete **SECTION II**. Repeat takers are not required to complete SECTIONS I & II, but should make a self-declaration on the courses attended.

SECTION I

Completion Certificate

I confirm that Dr.

has completed/likely to complete the requisite training at

From / / to / /

and also attended the following Workshops during his / her training.

Sr. No.	Workshop	Date	Venue	Attended YES/NO
1	Advanced Cardiac Life Support (ACLS)			
2	Mechanical Ventilation			
3	4C Course			
4	Refresher Course			
5	Haemodynamic Monitoring			
6	Others			

(Note: Kindly attach the photocopy of workshop certificate attended)

Name & Signature of Teacher

Date

SECTION II

I certify that Dr has completed/likely to complete one / two year training in our Institution, namely

.....

From /...../..... to /...../..... , in Department of Critical Care Medicine

Signature of MS/MS/CEO of the Institution with Seal

Theory Exam Centers

- 1) Kolkata Millennium City, IT Park
DN-62
Sector- V, Salt Lake
Kolkata - 700091

- 2) Ahmedabad 5th Floor, Unit 501, Parshwanath Esquare
Praladnagar Crop. Road
Praladnagar, Satellite
Ahmedabad - 380051

- 3) Chennai Unit#8, 3rd Floor, Contennial Square
No. 6A, Dr Ambedkar Road
Kodabakkam, Chennai - 600024

- 4) Bangalore 3rd Floor, Tower B Prestige Shanti Niketan
Bangalore South Taluk
Bangalore - 560066

- 5) Mumbai Unit #1,2,3 6th Floor, Techniplex-I
Techniplex Complex, VeerSavarkar Flyover
Goregaon (W), Mumbai - 400062

- 6) Hyderabad 9th Floor, Unit 2, Kapil Towers IT Block,
Survey No. 115/1, Nanakramguda, Serilingampaly Mandal,
Gachibowli, Hyderabad - 500032

- 7) Gurgaon Megacentre Gurgaon, Prometric
2nd Floor, Iris Tech park
Sector - 48, Sohna Road
Gurgaon (Haryana) - 122001

- 8) Trivandrum 7th Floor, KEK Towers
Opposite TRIDA, Vazhuthacaud,
Trivandrum, Kerela - 695010

Appendix 11 (b) IDCCM Exam Form- Practical