

PAIN MEDICINE EXAMINATION BLUEPRINT

Purpose of the Pain Medicine Examination

Pain medicine is the medical discipline concerned with the diagnosis and treatment of the entire range of painful disorders. Because of the vast scope of the field, pain medicine is a multidisciplinary subspecialty. The expertise of several disciplines is brought together in an effort to provide the maximum benefit to each patient. Although the care of patients is heavily influenced by the primary specialty of physicians who subspecialize in pain medicine, each member of the pain treatment team understands the anatomical and physiological basis of pain perception, the psychological factors that modify the pain experience, and the basic principles of pain medicine.

The ABA's Pain Medicine Examination (PM) is a summative examination designed to assess the knowledge, skills and abilities that are considered essential for the ABA diplomate to function as a practitioner of the subspecialty of pain medicine. The examination assesses cognitive and deductive skills as well as the clinical judgment of the candidates.

Exam Content

The PM Exam covers topics in the following five content categories:

- General
- Assessment & Psychology of Pain
- Treatment of Pain: Pharmacologic Methods
- Treatment of Pain: Other Methods
- Clinical States

Each PM Exam form is built to the same content specifications, known as an exam blueprint. The examination blueprint is used to ensure that every form of the PM Exam measures the same depth and breadth of content knowledge. Table 1 below shows the number and relative percentage of questions from each of the five content categories shown above that will appear on each form of the PM Exam.

TABLE 1.
Pain Medicine Examination (PM) Blueprint

Content Category (Relative Percentage)	Number of Questions
General (7.5%)	14 – 16
Assessment & Psychology of Pain (7.5%)	14 – 16
Treatment of Pain: Pharmacologic Methods (15%)	28 – 32
Treatment of Pain: Other Methods (25%)	48 – 52
Clinical States (45%)	88 – 92

To view the full PM Content Outline, please [click here](#).

Exam Specifications

The PM Exam consists of 200 questions and candidates have up to 4 hours to complete the examination.

The PM Exam includes only A-type questions. A-type questions are single-best-answer multiple-choice questions that require the application of knowledge rather than simple recall of factual information. These questions often include a brief clinical vignette followed by a lead-in question and four response options.

The PM Exam includes questions that reference static images.

Exam Administration

The PM Exam is administered annually to physicians that have successfully completed an ACGME-accredited anesthesiology pain medicine subspecialty fellowship training program. The PM Exam is a computer-based examination that is administered annually through Pearson VUE centers nationwide. The PM Exam is administered on a single day. Please check the ABA's website (www.theABA.org) for the specific PM Exam administration date each year.

Content Category (Relative Percentage)	Number of Questions
GENERAL (7.5%)	14 – 16
Anatomy and Physiology: Mechanisms of Nociceptive Transmission	1 – 4
Pharmacology of Pain Transmission and Modulation	1 – 4
Development of Pain Systems	1 – 4
Designing, Reporting, and Interpreting Clinical Research Studies About Treatments for Pain: Evidence-Based Medicine	1 – 4
Animal Models of Pain and Ethics of Animal Experimentation	1 – 4
Ethical Standards in Pain Management and Research	1 – 4
ASSESSMENT & PSYCHOLOGY OF PAIN (7.5%)	14 – 16
Experience and Measurement of Pain	1 – 4
Placebo and Pain	1 – 4
Clinical Nerve Function Studies and Imaging	1 – 4
Epidemiology	1 – 4
Psychosocial and Cultural Aspects of Pain	1 – 4
Sex and Gender Issues in Pain	1 – 4
TREATMENT OF PAIN: PHARMACOLOGIC METHODS (15%)	28 – 32
Opioids	6 – 8
Antipyretic Analgesics: Nonsteroidals, Acetaminophen, and Phenazone Derivatives	6 – 8
Antidepressants and Anticonvulsants	6 – 8
Miscellaneous Agents	6 – 8
TREATMENT OF PAIN: OTHER METHODS (25%)	48 – 52
Psychological Treatments	5 – 8

Psychiatric Treatment	5 – 8
Stimulation-Produced Analgesia	5 – 8
Interventional Pain Management Including Nerve Blocks and Lesioning	5 – 8
Surgical Pain Management	5 – 8
Physical Medicine and Rehabilitation	5 – 8
Work Rehabilitation	5 – 8
Complimentary Therapies (CAM)	5 – 8
CLINICAL STATES (45%)	88 – 92
Taxonomy	1 – 3
Tissue Pain	38 - 42
Visceral Pain	9 - 11
Headache and Facial Pain	5 – 7
Nerve Damage	15 -17
Special Cases	15 -17