

**SRI LANKA MEDICAL COUNCIL**

**EXAMINATION FOR REGISTRATION TO PRACTISE MEDICINE (ERPM)**  
**PART A & PART D – JULY 2022**

The Sri Lanka Medical Council will receive applications for the above examination from **Thursday 02<sup>nd</sup> June 2022 to Wednesday 15<sup>th</sup> June 2022 from 9.30 a.m. to 1.00 p.m.** only on each working day. The application forms can be obtained from the SLMC website. Receipt of applications will close on **15<sup>th</sup> June 2022 at 1.00 p.m.**

**Eligibility:**

- (a) Citizens of Sri Lanka who have obtained approval of the Sri Lanka Medical Council for the MBBS or equivalent degree from a foreign medical school recognized by the Council.
- (b) Candidates who have previously sat the examination and have not completed ERPM Parts A and/or D.
- (c) Candidates who have previously passed in both Medicine & Psychiatry (former Paper 1) and Paediatrics & Psychiatry (former Paper 2) are exempted from sitting the present Psychiatry Paper 5.

**Part A:**

Paper 1 Medicine

Paper 2 Paediatrics

Paper 3 Surgery

Paper 4 Obstetrics & Gynaecology

Each paper will have 25 MCQs of True/False type and 25 Single Best Answer Questions, a total of 50 Questions in each paper.

Paper 5 Psychiatry

This paper will have 30 MCQs of the True/False type.

**Part D :**

Paper 6 Community Medicine

Paper 7 Forensic Medicine

Each paper will have 30 MCQs of the True/False type.

**Note:** Candidates should apply for all subjects of ERPM Part A and Part D which have NOT been passed in previous examinations. “refer see eligibility item (c)”

The applications are only available on the website which should be downloaded. The dates and venue of the examination will be notified later.

By Order of the Council,

Registrar,

Sri Lanka Medical Council

31, Norris Canal Road, Colombo 10.

Telephone: 5623651 / 0716355771 / 2691848

SLMC Website: [www.slmc.gov.lk](http://www.slmc.gov.lk)

# SRI LANKA MEDICAL COUNCIL

SPECIAL EXAMINATION UNDER ACT 16 OF 1965 AND SECTION 29(i)(ii)(cc) AND SECTION 29  
(2)(b)(iii)(cc) OF THE MEDICAL ORDINANCE.

## EXAMINATION FOR REGISTRATION TO PRACTISE MEDICINE (ERPM) IN SRI LANKA PART A AND PART D

### APPLICATION – JULY 2022

FILL ALL THE CAGES (USE BLOCK CAPITALS)

REG. NO

APPLICATION ACCEPTED FROM 02<sup>ND</sup> JUNE 2022,  
9.30 A.M TO 1.00 P.M. ON WEEK DAYS. LAST DATE FOR  
ACCEPTING APPLICATION IS WEDNESDAY 15<sup>TH</sup> JUNE 2022.

PASTE  
RECENT  
PHOTOGRAPH  
(GOOD QUALITY  
MATT PAPER)

### **PERSONAL DETAILS**

- (a) FULL NAME: .....  
.....  
(b) PREVIOUS NAMES IF ANY: .....
- PERMANENT ADDRESS: .....  
.....  
(All correspondence will be sent to this address)
- NIC NO:..... DATE OF BIRTH:..... GENDER: MALE / FEMALE
- MOBILE NO:..... RESIDENCE (TEL):.....
- EMAIL ADDRESS..... PASSPORT NO(S):.....
- (a) MEDICAL SCHOOL/UNIVERSITY AND COUNTRY:  
.....  
(b) DEGREE/DIPLOMA:..... YEAR OF QUALIFYING: .....
- (c) DATE OF DEGREE APPROVAL:..... DATE OF ERPM REGISTRATION: .....

### ERPM PART - A

	SUBJECT	SIGNATURE
PAPER 1	MEDICINE	
PAPER 2	PAEDIATRICS	
PAPER 3	SURGERY	
PAPER 4	OBSTETRICS & GYNAECOLOGY	
PAPER 5	PSYCHIATRY	

### ERPM PART - D

	SUBJECT	SIGNATURE
PAPER 6	COMMUNITY MEDICINE	
PAPER 7	FORENSIC MEDICINE	

.....  
SIGNATURE OF APPLICANT  
(AS PLACED IN ERPM REGISTRATION CARD)

.....  
DATE

## INSTRUCTIONS TO CANDIDATES

1. Candidates **should apply** for all subjects of ERPM Part A and Part D at the first attempt and those subjects **NOT** passed in previous examinations.
2. Candidates who have previously passed in both Medicine & Psychiatry (former Paper 1) and Paediatrics & Psychiatry (former Paper 2) are exempted from sitting the present Psychiatry Paper 5.
3. Please forward **two (2) recent unedited colour photographs (size 3 cm x 2.5 cm) of the applicant with frontal view of the face against a white background on good quality matt paper.** (Any other size or form would not be accepted). One photograph is to be pasted on the application form by the candidate and the other photograph would be included in the admission Card.  
**First time applicants, forward Three (3) recent unedited colour photographs of the applicant with frontal view of the face (size 3 cm x 2.5 cm) against a white background on good quality matt paper.** (Any other size or form would not be accepted).
4. **The ERPM Registration Card, Passport, Degree Approval Letter and National Identity Card should be submitted for perusal at the time of application.**
5. Submit **03 self-addressed envelopes (11cm x 24cm) as follows**
  - 01 – To receive the Admission Card .
  - 02 – To receive the ERPM Part A results sheet.
  - 03 – To receive the ERPM Part D results sheet.***The above documents will be sent by courier service. If you want to collect any above mentioned document by hand, indicate "By Hand" on the left hand side of the envelop.***

### **FILLING THE APPLICATION FORM**

- a) Applications should be legibly written in English by the Applicant in his/her own handwriting.
- b) You should write the surname, other names and initials as they appear in your passport and the certificate of Approval of your Degree. If you have changed your name, please produce documentary proof (e.g. Marriage Certificate).
- c) Incomplete applications will be rejected
- d) No applications will be accepted after 1.00 p.m. on the closing date
- e) Applications could be withdrawn with reasons stated in writing before the closing date and time. On withdrawal of the application, the fees would NOT be transferred for a future examination. Fees already paid shall be refunded depending on the stage of processing.
- f) Fees would not be refunded for rejected applications.
- g) **Applications must be handed over personally by the applicant only and he/she should sign the register maintained at the office for that purpose. Other persons should not accompany the applicant.**
- h) **Overseas Candidates:** If the candidate is residing outside Sri Lanka, the application should be sent before the closing date and time for receipt of applications at the SLMC with a certificate of attestation by an Authorised Officer of the Sri Lanka High Commission or Embassy/ Attorney at law/ Notary Public/ Solicitor of the country of temporary residence on the form 'Declaration by the Applicant' supplied by the Council (which can be downloaded from the website). The application form should be scanned sent by e -mail <examination@slmc.gov.lk> directly to Sri Lanka Medical Council before the closing date and time for receipt of applications. The original copy of the documents sent by courier/post should reach the SLMC within one week from the closing date and bank slip or online payment details should reach the SLMC before the closing date.

**APPLICATIONS WILL BE ACCEPTED FROM 9.30 A.M. TO 1.00 P.M ON WEEKDAYS FROM 02<sup>ND</sup> JUNE 2022 TO 15<sup>TH</sup> JUNE 2022. APPLICATIONS WILL NOT BE ACCEPTED AFTER 1.00 P.M. ON 15<sup>TH</sup> JUNE 2022.**

Registrar,  
Sri Lanka Medical Council  
31, Norris canal Road, Colombo 10.  
**Telephone Nos.: 2691848/5623651/ 0716355771 Fax: 0094112674787**

## ERPM PART A AND PART D - PAYMENTS

The fees could be paid at any branch of the Hatton National Bank. The paying – in –slip given by the bank (yellow slip) should be attached to the application after payment.

If you are paying via online it is essential to mention below details. If those information not mention in the remittance advice your payment will be rejected.

1. NIC no
2. Mention the word “ERPM Part A and Part D – July 2022”

CHEQUES WILL NOT BE ACCEPTED BY THE COUNCIL

	<b>ERPM PART A</b>	<b>FEEES</b>
<b>PAPER 1</b>	<b>MEDICINE</b>	<b>Rs. 5000/-</b>
<b>PAPER 2</b>	<b>PAEDIATRICS</b>	<b>Rs. 5000/-</b>
<b>PAPER 3</b>	<b>SURGERY</b>	<b>Rs. 5000/-</b>
<b>PAPER 4</b>	<b>OBSTETRICS &amp; GYNAECOLOGY</b>	<b>Rs. 5000/-</b>
<b>PAPER 5</b>	<b>PSYCHIATRY</b>	<b>Rs. 5000/-</b>

	<b>ERPM PART D</b>	<b>FEEES</b>
<b>PAPER 6</b>	<b>COMMUNITY MEDICINE</b>	<b>Rs. 5000/-</b>
<b>PAPER 7</b>	<b>FORENSIC MEDICINE</b>	<b>Rs. 5000/-</b>

Please Credit to A/C No: **003010153598**, Sri Lanka Medical Council, Hatton National Bank, Darley Road, Branch, Colombo 10.

# DATA SHEET

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NAME: .....

ERPM REG. NO:.....

## ***PREVIOUS EXAM PERFORMANCE***

(ON COMPLETION OF ERPM PARTS A, B, C AND D THIS INFORMATION WOULD BE USED TO DETERMINE THE ORDER OF MERIT)

### **ERPM PART A**

INDICATE THE SUBJECTS PASSED IN ERPM PART A

SUBJECTS	YEAR	MONTH	INDEX NO
MEDICINE (PAPER 1)			
PAEDIATRICS (PAPER 2)			
SURGERY (PAPER 3)			
OBSTETRICS & GYNAECOLOGY (PAPER 4)			
PSYCHIATRY (PAPER 5)			

INDICATE CLEARLY THE TOTAL NUMBER OF TIMES YOU SAT ERPM PART A

### **ERPM PART B**

INDICATE THE SECTION PASSED IN ERPM PART B (BEFORE JUNE 2014)

SECTION PASSED	YEAR	MONTH	INDEX NO
CLINICAL SECTION (MED. + PAED. + SURG. + OBST. & GYNAE.)			

INDICATE THE SUBJECTS PASSED IN ERPM PART B (FROM JUNE 2014)

	SUBJECTS	YEAR	MONTH	INDEX NO
<b>MEDICAL TRACK</b>	MEDICINE			
	PAEDIATRICS			
<b>SURGICAL TRACK</b>	SURGERY			
	OBSTETRICS & GYNAECOLOGY			

INDICATE CLEARLY THE TOTAL NUMBER OF TIMES YOU SAT ERPM PART B

**ERPM PART C**

INDICATE THE SECTION PASSED IN ERPM PART C (**BEFORE JUNE 2014**)

EMERGENCY MEDICINE (VIVA VOCE)	YEAR	MONTH	INDEX NO
EMERGENCY MEDICINE			

INDICATE THE SECTIONS PASSED IN ERPM PART C (**FROM JUNE 2014**)

EMERGENCY MEDICINE (VIVA VOCE SECTION)	YEAR	MONTH	INDEX NO
MEDICAL TRACK			
SURGICAL TRACK			

INDICATE CLEARLY THE TOTAL NUMBER OF TIMES YOU SAT ERPM PART C

**ERPM PART D**

INDICATE THE SUBJECTS PASSED IN ERPM PART D (**BEFORE MARCH 2014**)

SUBJECT	YEAR	MONTH	INDEX NO
COMBINED PAPER (COM. MED./PATH/FOR.MED)			

VIVA VOCE	YEAR	MONTH	INDEX NO
COMMUNITY MEDICINE			
FORENSIC MEDICINE			

OPTION 1 (VIVA)	YEAR	MONTH	INDEX NO
COMMUNITY MEDICINE			
FORENSIC MEDICINE			

OPTION 2 (10 MCQs)	YEAR	MONTH	INDEX NO
COMMUNITY MEDICINE			
FORENSIC MEDICINE			

INDICATE THE SUBJECTS PASSED IN ERPM PART D (**FROM MARCH 2014**)

SUBJECT	YEAR	MONTH	INDEX NO
COMMUNITY MEDICINE (PAPER 6)			
FORENSIC MEDICINE (PAPER 7)			

INDICATE CLEARLY THE TOTAL NUMBER OF TIMES YOU SAT ERPM PART D

I CONFIRM THAT THE INFORMATION PROVIDED ABOVE IS ACCURATE AND I HEREBY AGREE TO ABIDE BY THE RULES OF THE EXAMINATION.

.....  
SIGNATURE OF APPLICANT  
(AS PLACED IN ERPM REGISTRATION CARD)

.....  
DATE

**DECLARATION BY THE APPLICANT**  
**(Candidates residing outside Sri Lanka)**

I.....  
( Name & Address of the person making the declaration)

**DO SOLEMNLY AND SINCERELY DECLARE THAT**

\* I am the person applying to sit **ERPM Part A / Part B (Act -16)** Examination for Registration to Practice Medicine in Sri Lanka to be held in Colombo by the Sri Lanka Medical Council in ..... 20....  
(month)

\* I am at present residing in .....  
(City & Country )

\* I hereby state that the statement made and information given in the application form submitted herewith and the copies of the Passport and the National Identity Card/Driving License are true and complete.

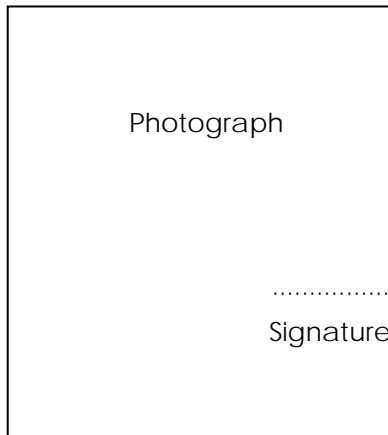
\* I am aware that I have to be present by myself at the Sri Lanka Medical Council to sign and collect the admission card and the other documents before I am permitted to sit the examination.

Signature of the person making the declaration :.....

Declared at..... on the.....day of..... 20...  
(city/ country)

Before me .....

(Name in block capitals, Address, Title and the Signature of the person before whom the declaration is made.)



.....  
Rubber Stamp/Seal

I certify that photograph shown above is a true photograph of ..... who placed her/ his signature before me. (name of the declarant )

.....  
Date

.....  
Signature of the person before whom the declaration is made.

Place .....  
City/ Country